



When One Partner Isn't Sure: Assessing and Navigating Mixed-Agenda Couples

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Michal Goldman, LCSW, is a licensed clinical social worker specializing in relational therapy and therapist development. She is passionate about helping clinicians cultivate secure, ethical boundaries and deepen their self-of-therapist awareness to enhance their work with couples. Michal holds extensive training in emotionally focused therapy (EFT) and discernment counseling, and she enjoys supporting couples through relational challenges. In addition to her clinical work, she writes a biweekly mental health column for a local newspaper, where she shares insights on relational health and ethical practice. Her teaching emphasizes compassionate care, cultural humility, and clinically sound decision-making in therapeutic settings.

Purpose Statement

1

Increase therapist awareness of mixed-agenda dynamics in couples therapy.

2

Support ethical and clinically sound decision-making in early assessment.

3

Help therapists identify when traditional couples therapy may not be appropriate.

4

Provide strategies for exploring commitment and ambivalence with couples.

5

Introduce alternative pathways, including individual work and discernment counseling.

What Are Mixed-Agenda Couples?

- The partners are coming into therapy looking for different things
 - One wants to work on the relationship
 - One is looking to leave
- Do both partners know each other's agenda?
- Does the therapist know?

Why Does It Matter?



Alliance



Do no harm



Therapeutic outcomes, leaving therapy early

Challenges with Mixed-Agenda Couples

- Are both partners committed to doing the work?
- Couples therapy requires vulnerability
- Prerequisite for best outcomes in vulnerability: mutual commitment
- Can be a set-up for major ruptures if unclear about agendas
- Important to assess before doing deeper work

Self-Assessment Question

When a couple arrives for therapy and one partner appears disengaged or reluctant, a first step is to:

- A. Redirect the couple to focus on shared goals**
- B. Assume the partner is resistant and explore why**
- C. Pause and assess whether both partners are aligned in their desire to work on the relationship**
- D. Proceed with gentle emotion-focused interventions to build trust**

Self-Assessment Question

When a couple arrives for therapy and one partner appears disengaged or reluctant, a first step is to:

- C. Pause and assess whether both partners are aligned in their desire to work on the relationship**

Assessment



Pay attention to direct versus indirect signs.



If partners share agenda directly, discuss risks and benefits of different options moving forward.



Clients may be indirect for fear of hurting partner or fear of retribution.

Assessment: Possible Indirect Signs of Mixed-Agenda

- Stating they felt forced to come
- Not engaging much in treatment
- Willingness to acknowledge own contributions
- Active affair
- Addiction
- Continue assessment in individual sessions (ask directly with compassion)

Next Steps: Couples Counseling



Couples counseling may work at times



Stages of change

Next Steps: Individual Therapy

- May be more appropriate for clients unwilling to invest in relationship yet
- Can help partners better understand their needs and work through blocks
- Important for therapist to be relational and view client through relational system

Next Steps: Discernment Counseling

- Created for mixed-agenda couples
- Goals: clarity, confidence, closure
- Session combines individual and couple time
 - Vulnerable sharing only during individual time
- Three paths
 - Work on relationship for 6 months
 - Divorce
 - Continue as things are
- discernmentcounseling.com

Ethical Considerations

- Assess for coercion and abuse; in those cases, refer to individual therapy only.
- Misaligned referrals can cause harm.
- Meet individually before making definite recommendation.
- Think through risks and benefits.
- Have a secrets policy.

Case Study

- Jake and Marissa, both in their early 40s, attend an initial couples therapy session after 15 years of marriage. They have two children, ages 9 and 12. Marissa opens the session by saying she feels like she's "running on empty" and "doing all the emotional labor." She's frustrated that Jake avoids hard conversations and doesn't initiate connection.
- Jake sits quietly through most of the session. When asked what brought him in, he replies, "She asked me to come." He shrugs when asked what he hopes to get out of therapy and says, "I don't know ... I guess I want things to be less tense at home."

Case Study

- As Marissa expresses pain and disappointment, Jake listens but offers little response. When asked how he sees the relationship, he simply says, “It’s been tough,” and adds, “We’ve been in a rough patch for a while now.”
- There are no disclosures of affairs or substance use. No one mentions separation or divorce outright.

Case Study Clinical Question

What signs suggest this may be a mixed-agenda couple?

Case Study Clinical Question Discussion

What signs suggest this may be a mixed-agenda couple?

- Jake's passivity, vague responses, and lack of ownership may suggest ambivalence.
- Marissa is emotionally expressive and seeking change; Jake seems disengaged.
- "She asked me to come" often signals reluctance or leaning out.

Case Study Clinical Question

What concerns might arise if therapy proceeds as if both partners are equally invested?

Case Study Clinical Question Discussion

What concerns might arise if therapy proceeds as if both partners are equally invested?

- Vulnerable sharing from Marissa could backfire if Jake is checked out or planning to leave.
- It may create false hope or emotional injury if the couple isn't aligned on intentions.

Case Study Clinical Question

Would you recommend meeting individually with each partner?

Case Study Clinical Question Discussion

Would you recommend meeting individually with each partner?

- Can clarify each partner's level of investment and goals.
- Allows private space to assess for affairs, coercion, addiction, or thoughts of leaving.
- Helps you ethically determine whether couples therapy or another path is appropriate.

References

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- Lebow, J., Chambers, A. L., Christensen, A., & Johnson, S. M. (2012). Research on the treatment of couple distress. *Journal of Marital and Family Therapy*, 38(1), 145-168. <https://doi.org/10.1111/j.1752-0606.2011.00249.x>

Thoughts or Questions?



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Thank you!