

Pearson New International Edition

Family Therapy: Concepts and Methods

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Tenth Edition



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father are united in implicit criticism of the husband. This can occur even, or especially, if the wife's father is dead. It's hard to live up to a myth.

In such cases, as with all triangles, the focus should not be on the content of the quarrels but on the triangular process underlying them. The goal is to foster an increasing primacy of the marital bond without doing damage to the relationships the partners have with their parents.

The second major technique in Bowenian therapy, after the process question, is the *relationship experiment*. Process questions are designed to help family members realize that it isn't what other people do but how they respond that perpetuates their problems. Relationship experiments are designed to help clients try something different from their usual emotionally driven responses. Some of these experiments may help resolve problems, but their primary purpose is to help clients develop the ability to resist being driven by their emotions.

CASE STUDY

The Kennedys came to therapy because sixteen-year-old David was doing badly in school. David was on the verge of flunking out of an exclusive private school partly because he was a poor student and partly because his evenings with friends included heavy drinking and marijuana smoking. His father had gotten after him to study harder and had suspended his driving privileges after he came home one school night quite drunk. Unfortunately, these efforts hadn't been very effective because David didn't respect his father, who was an alcoholic and frequently falling down drunk around the house. David's stepmother, who'd been living with them for only two years, had little ability to control him, and she knew enough not to try.

I told the parents that I wouldn't see them in family therapy because David didn't respect the father who was drunk every night and who, I added, didn't show any signs of being ready to do anything about his drinking. I did agree, however, to see David to try to help him finish the school year with passing grades.

David was able to pass the eleventh grade, and I continued to see him into the following year, not entirely comfortable in my role as substitute father figure. Although I maintained my resolve not to do therapy with a

family that included a member who was actively abusing alcohol, I did meet with the family during three or four crises. The first three crises occurred when Mr. Kennedy's drinking (and, it turned out, cocaine abuse) got way out of control and his father and wife insisted that he reenter treatment.

The most prominent triangle in this case was that Mr. Kennedy's wife and father got together to pressure him to quit drinking. He had gone to rehab several times, but even the few times he'd actually finished a program, he soon returned to drinking. The only reason he ever sought help was as a result of ultimatums from his wife and father. His wife threatened to leave him, and his father threatened to cut him off from the family estate. This case would go nowhere until this triangle could be modified.

I encouraged Mr. Kennedy's wife and father to work on being less reactive while separating from each other around the issue of Mr. Kennedy's drinking. Mr. Kennedy needed to take a stand for himself, rather than comply with his wife's and his father's wishes. In fact, I wondered aloud with him if taking an honest stance with his family wouldn't mean telling them that he didn't intend to quit drinking. What he decided to tell them was that while he was willing to work on controlling his drinking and use of cocaine, he didn't intend to quit.

I encouraged Mr. Kennedy's father to back off and let the other two battle it out. Reluctantly, he agreed to do so. I then got Mrs. Kennedy to make a clear statement about how she felt about her husband's drinking but to discontinue her fruitless efforts to make him stop. I encouraged her to maintain her connection with her father-in-law but without talking about her husband all the time. Two months later, Mr. Kennedy decided to stop drinking and using cocaine.

This time he successfully completed a twenty-eight-day rehab program and entered AA and NA. Six weeks later he once again relapsed. Over the following eight months, Mr. Kennedy's drinking and cocaine abuse got much worse. Finally, after a serious altercation with a Jamaican drug dealer, Mr. Kennedy made a serious decision to get sober. This time, instead of going to the respected local rehabilitation center that his father had recommended, he did some research on his own and decided to enter a famous drug treatment center in California. As of this writing, Mr. Kennedy has been sober for six years.



Bowenian couples therapy is designed to reduce anxiety and foster self-focus.

Bowenian Therapy with Couples

The secret of couples therapy is to stay connected with both partners without letting them triangle you. Bowen would speak with each person one at a time, often beginning with the more motivated partner. He would ask questions, verify facts, and listen to people's stories. But he would frame each question to stimulate thinking rather than encourage expression of feelings. His objective was to explore the perceptions and opinions of each partner without siding emotionally with either one. It's taking sides that keeps people from learning to deal with each other.

When things are calm, feelings can be dealt with more objectively and partners can talk rationally with each other. But when feeling outruns thinking, it's best to ask questions that get couples to think more and feel less—and to talk to the therapist rather than to each other.

Couples who've argued for years about the same old issues are often amazed to discover that the first time they really hear each other is when they listen to their partners talking to a therapist. It's easier to hear when you aren't busy preparing to respond. If all else fails to cool things down, Fogarty (1976b) recommends seeing spouses in separate sessions.

Guerin (1971) recommends *displacement stories* to help family members achieve sufficient distance to see

their own roles in the family system. A displacement story is about someone else with a similar problem. For example, a couple too busy attacking each other to listen might be told, "It must be frustrating not getting through to each other. Last year I saw a couple who just couldn't stop arguing long enough to listen to each other. Only after I split them up and they blew off steam for a few sessions individually did they seem to have any capacity to listen to what each other was saying."

Displacement can also be used to frame process questions to avoid provoking defensive responses. Instead of asking someone in the throes of anger when he or she might get past those feelings and start working to change things—which might make them to think that their feelings are being denied—a therapist might ask, "Do you think anyone ever gets over that much anger?" Or if asking why someone hasn't been able to accomplish something might make him or her defensive, a therapist might ask, "What do you think makes that step so hard for people?"

Armed with a knowledge of triangles, the therapist strives to remain neutral and objective. This requires an optimal level of emotional distance, which Bowen (1975) said is the point where a therapist can see both the tragic and comic aspects of a couple's interactions. Although people's problems are nothing to laugh at, a

sense of irony may be preferable to the unctuous earnestness so popular in some quarters.³

As partners talk, the therapist concentrates on the *process* of their interaction, not on the details under discussion. Focusing on *content* is a sign that the therapist is emotionally entangled. It may be hard to avoid being drawn in by hot topics like money, sex, and discipline of children. But a therapist's job isn't to settle disputes—it's to help couples do so. The aim is to get clients to express thoughts and opinions to the therapist in the presence of their partners. Should one break down in tears, the therapist remains calm and inquires about the thoughts that touched off the tears. If a couple begins arguing, the therapist becomes more active, calmly questioning one, then the other, focusing on their respective thoughts. Asking for detailed descriptions of events is one of the best ways to cool overheated emotion and make room for reason.

Metaphors of complementarity are helpful to highlight the process of interactions. Fogarty (1976b), for example, described the *pursuer-distancer* dynamic. The more one presses for communication and togetherness, the more the other distances—watches television, works late, or goes off with the children. Frequently, partners pursue and distance in different areas. Men commonly distance themselves emotionally but pursue sexually. The trick, according to Fogarty, is "Never pursue a distancer." Instead, help the pursuer explore his or her own inner emptiness. "What's in your life besides the other person?"

To underscore the need for objectivity, Bowen spoke of the therapist as a "coach" or "consultant." He didn't mean to imply indifference but rather to emphasize the neutrality required to avoid triangulation. In traditional terms this is known as *managing countertransference*. Just as analysts are analyzed themselves so they can recognize countertransference, Bowen considered differentiating a self in one's own family the best way to avoid being emotionally triangled by couples.

To help partners define positions as differentiated selves, it's useful for a therapist to take "I-positions"

(Guerin, 1971)—that is, to make nonreactive observations and statements of opinion. The more a therapist takes an autonomous position in relation to a family, the easier it is for family members to define themselves to each other. Gradually, family members learn to calmly state their own beliefs and to act on them without attacking others or becoming overly upset by their responses.

After sufficient harmony had been won with progress toward self-differentiation, Bowen taught couples how emotional systems operate and encouraged them to explore those webs of relationship in their own families (Bowen, 1971).

For example, a woman locked into the role of emotional pursuer might be asked to describe her relationship with her father and then compare it with her current relationships. If lessening her preoccupation with her husband and children seems advisable, the therapist might encourage her to connect with the most emotionally distant member of her family, often her father. The idea wouldn't be to shift her attachment from one set of relationships to another but to help her understand that the intensity of her need is due in part to unfinished business.

Kerr (1971) suggests that when relationship problems in the nuclear family are being discussed, therapists should occasionally ask questions about similar patterns in the family of origin. If family members see that they are repeating earlier patterns, they are more likely to recognize their own emotional reactivity. Recently, this author saw a couple unable to decide what to do with their mentally ill teenage daughter. Although the daughter was virtually uncontrollable, her mother found it difficult to consider hospitalization. When asked what her own mother would have done, without hesitating she replied that her long-suffering mother would have been too guilt-ridden even to consider placement—"no matter how much she and the rest of the family might suffer." Little more needed to be said.

Knowledge of family systems theory helps people trace the patterns that have a hold on them. Such information is useful when tensions have cooled, but trying to impart it can be risky in the heat of conflict. At such times, battling couples are liable to distort statements about how families function as support for one of their opposing positions. So primed are warring mates to make each other wrong in order for

³It's easier for therapists to remain calm and objective when they concentrate on doing their job in the session without feeling responsible for what the clients do outside.

them to be right, that they hear much of what a therapist says as either for or against them. As they learn about systems theory, both partners are sent home for visits to continue the process of differentiation in their extended families.

Bowenian Therapy with Individuals

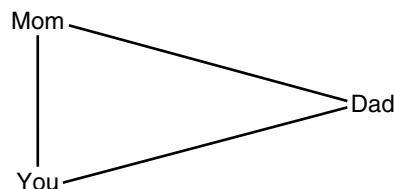
Bowen's success at differentiating from his own family convinced him that a single highly motivated individual can be the fulcrum for changing an entire family system (Anonymous, 1972). The goal of working with individuals is the same as with larger units: developing person-to-person relationships, seeing family members as people rather than emotionally charged images, learning to recognize triangles, and, finally, detriangling oneself (Bowen, 1974).

The process of change is begun by learning more about the larger family—who made up the family, where they lived, what they did, and what they were like. Sometimes a “good relationship” turns out to be one in which tension is managed by distancing: infrequent contact, superficial conversation, and gossiping about other family members. Therefore, it's useful to ask for descriptions rather than conclusions—not, “Do you have a good relationship with your parents?” but, “Where do your parents live? How often do you see them? What do you and your mother talk about when you're alone together? Do you ever go out to lunch, just you and your dad?”

Gathering information about the family is an excellent vehicle for the second step toward differentiation, establishing person-to-person relationships with as many family members as possible. This means getting in touch and speaking personally with them, not about other people or impersonal topics. If this sounds easy, try it. Few of us can spend more than a few minutes talking personally with certain family members without getting anxious. When this happens, we're tempted to withdraw, or triangle in another person. Gradually extending the time of personal conversation improves the relationship and helps differentiate a self.

Ultimately, differentiating yourself requires ceasing to participate in interpersonal triangles. The goal is to relate to people without gossiping or taking sides and without counterattacking or defending yourself.

FIGURE 5 Cross-Generational Triangle



Triangles can be identified by asking who or what people go to when they distance from someone with whom they have been close. One sign of a triangle is its repetitive pattern. The dynamic of a triangle is predictable because it's reactive and automatic. The symptomatic expression of a triangle usually takes the form of relationship conflict (or cutoff) or dysfunction in one of the individuals, such as anxiety, depression, or physical illness. Typically, a third person moves into the role of peacemaker or supporter for the one perceived as the victim.

Suppose, for example, that every time you talk to your mother she starts complaining about your father. Maybe it feels good to be confided in. Maybe you have fantasies about rescuing your parents—or at least your mother. In fact, the triangling is destructive to all three relationships: you and Dad, Dad and Mom, and, yes, you and Mom. In triangles, one pair is close and two are distant (Figure 5). Sympathizing with Mom alienates Dad. It also makes it less likely that she'll work out her complaints with him.

Once you recognize a triangle for what it is, you can stop participating in it. The idea is to do something to get the other two people to work out their own relationship. The most direct approach is simply to suggest that they do so. In the example just given, you might suggest that your mother discuss her concerns with your father, *and* you can refuse to listen to more complaints. Less direct but more powerful is to tell Dad that his wife has been complaining about him, and you don't know why she doesn't tell him about it. She'll be annoyed but not forever. A more devious ploy is to overagree with Mom's complaints. When she says he's messy, you say he's a complete slob; when she says he's not very thoughtful, you say he's an ogre. Pretty soon she'll

begin to defend him. Maybe she'll decide to work out her complaints with him, or maybe she won't. Either way you'll have removed yourself from the triangle.

Once you look for them, you'll find triangles everywhere. Common examples include griping with colleagues about the boss, telling someone that your partner doesn't understand you, undercutting your spouse with the kids, and watching television to avoid talking to your family. Breaking free of triangles may not be easy, but the rewards are great. The payoff comes not only from enriching those relationships but also from enhancing your ability to relate to anyone—friends, colleagues, clients, and your spouse and children. Furthermore, if you can remain in emotional contact but change the part you play in your family—and maintain the change despite pressures to change back—the family will have to accommodate to your change.

Useful guidelines to help families avoid falling back into unproductive but familiar patterns have been enumerated by Carter and Orfanidis (1976), Guerin and Fogarty (1972), and Herz (1991). You can also read about how to work on family tensions by resolving your own emotional sensitivities in two marvelous books by Harriet Lerner: *The Dance of Anger* (Lerner, 1985) and *The Dance of Intimacy* (Lerner, 1989).

Reentry into the family of origin is necessary to open a closed system. Sometimes all that's required is visiting. Other times, buried issues must be raised. Returning to the previous example, if you can't move directly toward your father without his withdrawing, move toward people he's close to.

In reentry, it's advisable to begin by opening closed relationships before trying to change conflictual ones. Don't start by trying to resolve the tension between yourself and your mother. Deal with personal issues, but avoid stalemated conflicts. If your contacts with some sections of the family are routine and predictable, make them more spontaneous—just do something different. Those who continue working on their family relationships beyond the resolution of a crisis, or beyond the first flush of enthusiasm for a new academic interest, can achieve profound changes in themselves, in their families, and in their own clinical work.

Evaluating Therapy Theory and Results

What makes Bowen's theory so useful is that it explains the emotional forces that regulate how we relate to other people. The single greatest impediment to understanding one another is our tendency to become emotionally reactive. Like all things about relationships, emotionality is a two-way street: Some people express themselves with such emotionalism that others react to that pressure rather than hearing what the person is trying to say. Bowenian theory locates the origin of this reactivity in the lack of differentiation of self and explains how to reduce emotionalism and move toward self-control—by cultivating relationships widely in the family and learning to listen without becoming defensive or untrue to one's own beliefs.

In Bowenian theory, *anxiety* is the underlying explanation (for why people are dependent or avoidant and why they become emotionally reactive), reminiscent of Freudian conflict theory (which explains all symptoms as the result of conflicts about sex and aggression). The second pivotal concept in the Bowenian system is *differentiation*. Since differentiation is roughly synonymous with *maturity*, students might ask, To what extent is the proposition that more differentiated people function better a circular argument? In respect to the Bowenian tradition of asking questions rather than imposing opinions, we'll let this stand as an open question for your consideration.

A possible shortcoming of the Bowenian approach is that in concentrating on individuals and their extended family relationships, it may neglect the power of working directly with the nuclear family. In many cases the most expedient way to resolve family problems is to bring everyone in the household together and encourage them to face each other and address their conflicts. These discussions become heated and contentious, but a skilled therapist can help family members realize what they're doing and guide them toward understanding.

There are times when families are so belligerent that their dialogues must be interrupted to help individuals get beyond defensiveness to the hurt feelings underneath. At such times, it's useful, perhaps imperative, to block family members from arguing with

each other. But an approach, such as Bowen's, that encourages therapists to always speak to individual family members one at a time underutilizes the power of working with families in action.

Phil Guerin and Tom Fogarty have made notable contributions, not only in promulgating Bowenian theory but also in refining techniques of therapy. Both are master therapists. Betty Carter and Monica McGoldrick have made more of a contribution in studying how families work: the family life cycle, ethnic diversity, and the pervasive role of gender inequality. Because they are students of the family as well as therapists, some of their interventions have a decidedly educational flavor. In working with stepfamilies, for example, Betty Carter takes the stance of an expert and teaches the stepparent not to try to assume an equal position with the biological parent. Stepparents have to earn moral authority; meanwhile, what works best is supporting the role of the biological parent. Just as Bowen's approach is influenced by his personal experience, it seems that both Carter and McGoldrick infuse their work as family therapists with their experience as career women and their convictions about the price of inequality.

Recent reviews of the clinical outcome literature have failed to find any controlled outcome studies testing the effectiveness of Bowenian therapy (Johnson & Lebow, 2000; Miller, Johnson, Sandberg, Stringer-Seibold, & Gfeller-Strouts, 2000). This, of course, is not surprising, considering that research is usually conducted by academics, most of whom are more interested in behavioral models than in traditional approaches like psychoanalysis and Bowen systems theory.

There have, however, been attempts to empirically test some of the propositions of Bowen's theory. Three psychometrically sound measures of differentiation of self have been developed. Haber's (1993) Level of Differentiation of Self Scale contains twenty-four items that focus on emotional maturity, such as "I make decisions based on my own set of values and beliefs" and "When I have a problem that upsets me, I am still able to consider different options for solving the problem." This scale significantly correlates (negatively) with chronic anxiety and psychological distress, which is consistent with Bowen theory. Skowron's Differentiation of Self Inventory (DSI) (Skowron &

Friedlander, 1998) contains four subscales: Emotional Cutoff ("I need to distance myself when people get too close to me," "I would never consider turning to any of my family members for emotional support."); "I"-Position ("I do not change my behavior simply to please another person"); Emotional Reactivity ("at times my feelings get the best of me and I have trouble thinking clearly"); and Fusion with Others ("it has been said of me that I am still very attached to my parents"). As Bowen theory predicts, the DSI correlates significantly with chronic anxiety, psychological distress, and marital satisfaction. Chabot Emotional Differentiation Scale (CED) was designed to measure the intrapsychic aspect of differentiation—the ability to think rationally in emotionally charged situations (Licht & Chabot, 2006). The CED asks subjects to respond to seventeen questions that assess integration of thinking and feeling in nonstressful periods and periods of prolonged stress, as well as when relationships are going well and when there are difficulties in relationships.

Research has supported Bowen's notion that differentiation is related to trait anxiety (negatively) (Griffin & Apostol, 1993; Haber, 1993; Peleg-Popko, 2002; Skowron & Friedlander, 1998), psychological and physical health problems (negatively) (Bartle-Haring & Probst, 2004; Bohlander, 1995; Davis & Jones, 1992; Elieson & Rubin, 2001; Haber, 1993; Skowron & Friedlander, 1998), and marital satisfaction (positively) (Haber, 1984; Richards, 1989; Skowron & Friedlander, 1998; Skowron, 2000). Several studies have shown a significant relationship between triangulation and marital distress (Gehring & Marti, 1993; Peleg, 2008; Vuchinich, Emery, & Cassidy, 1988; Wood, Watkins, Boyle, Nogueira, Zimand, & Carroll, 1989) as well as problems in intimate relationships (Protinsky & Gilkey, 1996; West, Zarski, & Harvill, 1986). Finally, consistent with Bowen's belief in the multigenerational transmission of emotional process, researchers have found that parents' and children's beliefs are highly correlated (e.g., Troll & Bengston, 1979) and that violence (e.g., Alexander, Moore, & Alexander, 1991), divorce (e.g., Amato, 1996), marital quality (e.g., Feng, Giarrusso, Bengston, & Frye, 1999), eating disorders (e.g., Whitehouse & Harris, 1998), depression (Whitbeck et al., 1992), and alcoholism (e.g., Sher, Gershuny, Peterson, & Raskin, 1997) are transmitted from one generation to the next.