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#### Prologue

- Approximately 19% of the U.S. population is seen by marriage and family therapists each year at a cost of more than \$300 million
- Despite these statistics, marriage and family therapy is relatively new with its theoretical and clinical beginnings starting in the 1940s and its real growth occurring from the 1970s until today
- Family therapy differs from individual and group counseling in its emphasis and clientele
  - Individual counseling is more intrapersonal
  - Group counseling is more interpersonal
  - \* Family therapy for the most part focuses on making changes in the family system
- Family therapy is connected to the influence of creative, innovative, and assertive mental health practitioners who devised and advocated new ways of providing services to clients

#### The Rationale for Family Therapy

- Family therapists believe that most life difficulties stem from and can best be addressed within the family system
- Family therapy is an effective treatment approach, particularly in cases of:
  - adolescent anorexia nervosa
  - adolescent drug abuse
  - adult alcoholism and drug abuse
  - adult hypertension
  - adult obesity
  - adult schizophrenia
  - ❖ aggression and noncompliance in children with ADD and ADHD
  - childhood and adolescent anxiety disorders
  - childhood autism
  - childhood conduct disorders
  - chronic physical illness in adults and children
  - couple distress and conflict
  - dementia
  - depression in women in distressed marriages
- Client satisfaction is high, with 97% satisfaction rates and high percentages of clients stating they received the help they wanted from marriage and family therapists

#### Reasons for Working with Families as Opposed to Working with Individuals

- Provides flexibility in conceptualizing cases from both linear and circular causality perspectives
- Provides for increased complexity and treatment options for clients
- Involves other real, significant people in the treatment process and brings the action into the room
- All family members receive treatment interventions simultaneously
- Family therapy tends to be briefer than individual counseling
- Family therapy focuses on the interpersonal rather than the intrapersonal which creates new and unique ways of resolving problems

# Chapter 1 The History of Family Therapy: Evolution and Revolution

#### Chapter Overview

Family Therapy Through the Decades

- Prior to the development of marriage and family therapy as a profession, older family members assisted
  younger members and adult family members cared for the very young and the very old
- Before 1940
  - focus in the United States was on the individual
  - society utilized clergy, lawyers, and doctors for advice and counsel
  - prevailing individual theories were psychoanalysis and behaviorism
- Catalysts for the growth of family therapy
  - courses in family life education became popular
  - establishment of marriage and family training programs (e.g., Marriage Council of Philadelphia in 1932)
  - founding of the National Council on Family Relations in 1938 and the journal Marriage and Family Living in 1939
  - county home extension agents educated and promoted understanding family dynamics
- Family therapy: 1940 to 1949
  - establishment of the American Association of Marriage Counselors in 1942
  - ❖ first account of concurrent marital counseling published in 1948 by Bela Mittleman
  - \* research on families with a schizophrenic member by Theodore Litz
  - National Mental Health Act of 1946 funded research on prevention, diagnosis, and treatment of mental health disorders
- Family therapy: 1950 to 1959
  - individual leaders dominated the profession
  - Nathan Ackerman used a psychoanalytical approach to understand and treat families
  - Gregory Bateson studied communication patterns in families with a schizophrenic member and developed the double bind theory
    - double bind theory two seemingly contradictory messages may exist simultaneously and lead to confusion
  - ❖ Mental Research Institute was created by Don Jackson in Palo Alto, CA
    - changed problem conceptualization from a pathology oriented individual perspective to a more relationship based orientation
    - brief therapy developed at MRI as one of the first new approaches to family therapy
  - Carl Whitaker pushed the conventional envelope by seeing spouses and children in therapy
    - set up the first family therapy conference at Sea Island, GA
  - Murray Bowen studied families with schizophrenic members
    - held therapy sessions with all family members present
    - pioneered theoretical thinking on the influence of previous generations on the mental health of families
  - Ivan Boszormenyi-Nagy developed contextual therapy focusing on the healing of human relationships through trust and commitment
- Family therapy: 1960 to 1969
  - ❖ An era of rapid growth in family therapy
  - ❖ Increase in training centers and academic programs in family therapy
  - Jay Haley, expanding on the work of Milton Erikson, developed strategic family therapy
    - emphasis on the therapist gaining and maintaining power during treatment
    - strategic therapy uses directives to assist clients to go beyond gaining insight
    - edited Family Process from 1961 to 1969, providing a means for to keep professions linked and informed
    - Haley joined with Salvador Minuchin at the Philadelphia Child Guidance Clinic in the late 1960's

- Salvador Minuchin developed structural family therapy, based on his work with the Wiltwyck School for Bovs
  - utilized minority community members as paraprofessionals to better relate to urban blacks and Hispanics
- Virginia Satir was the only woman among the family therapy pioneers
  - started seeing family members as a group in the 1950's
  - utilized touch and nurtured her clients, emphasizing self-esteem, compassion, and affective congruence
  - published *Conjoint Family Therapy* in 1964 which stressed the importance of seeing distressed couples together at the same time
  - Virginia Satir was an influential, charismatic leader
- Carl Whitaker pioneered unconventional, spontaneous, sometimes outrageous appearing approaches, designed to help families achieve freedom and growth
- Family Process co-founded in 1961 by Don Jackson and Nathan Ackerman
- Nathan Ackerman published *Treating the Troubled Family* in 1966, advocating closer therapist involvement with families during treatment, being confrontive, and making covert issues overt
- ❖ John Bell developed a family group therapy model, advocated that children 9 years and older should participate in family therapy, and offered one of the first graduate family therapy courses in the United States
- ❖ Murray Bowen discovered that emotional reactivity in many families created undifferentiated family ego mass (i.e., family members have difficulty maintaining their individual identities and actions)
- Systems theory developed by Ludwig Von Bertalanffy in 1968
  - ❖ a way of looking at all parts of an organism simultaneously
  - a set of elements standing in interaction with one another
  - each element of a system is affected by what happens to any other element
  - the whole is greater than the sum of its parts
  - became the basis for most family therapy
  - less reliance on linear causality (direct cause and effect)
  - increased emphasis on circular causality (events are related through a series of repeating cycles or loops)
  - family therapists seen as a specialists within the field
  - first license regulating family therapists granted in California in 1963
- Institutes and training centers
  - ❖ Mental Research Institute continues its work in training and research
  - ❖ Family Therapy Institute of New York established with Nathan Ackerman as director
  - Philadelphia Child Guidance Clinic developed innovative supervision techniques such as the 'bug in the ear"
  - ❖ Family Therapy Institute of Philadelphia founded in 1964, merging the Eastern Pennsylvania Psychiatric Institute and the Family Institute of Philadelphia
  - ❖ Boston Family Institute founded by Fred Duhl and David Kantor, focusing on expressive and dramatic interventions and originating the family sculpting technique
  - Institute for Family Studies in Milan, Italy formed in 1967
  - an MRI based model that developed many innovative short term approaches
- Family therapy: 1970 to 1979
  - rapid growth in AAMFT based partly on recognition as an accrediting body for marriage and family training programs
  - ❖ The American Association of Marriage and Family Counselors (AAMFC) changed its name to the American Association for Marriage and Family Therapy (AAMFT) in 1977
  - Journal of Marital and Family Therapy founded by AAMFT in 1974
  - ❖ American Family Therapy Academy (AFTA) founded in 1977 to address clinical, research, and teaching issues
  - ❖ AAMFT and AFTA agreed on distinct roles within the profession
  - ❖ AFTA concentrated on the exchange of ideas among advanced professionals
  - ❖ AAMFT focused on accreditation of training programs
  - family therapy continued to growth and become more refined outside of psychoanalytical traditions

- Nathan Ackerman died in 1971
- the approaches of Carl Whitaker (experiential family therapy), Salvador Minuchin (structural family therapy), and Jay Haley (strategic family therapy) gained in popularity and influence
- Families and Family Therapy published in 1974 by Minuchin, serving as a practical training guide for structural family therapy
- ❖ Psychosomatic Families: Anorexia Nervosa in Context published by Minuchin and associates in 1978, highlighting the power of the structural family therapy approach in working with this disorder
- Influence of foreign therapies and therapists
  - family therapy grew rapidly in Europe, particularly in Milan, Italy
  - Milan associates
    - developed circular questioning (asking questions that highlight differences among family members)
    - developed triadic questioning (asking a third member how two other members of the family relate)
    - emphasis on developing hypotheses about the family before treatment begins
    - utilized outside of session homework assignments that were often difficult and ritualistic
  - \* R.D. Laing, a British professional, created the term *mystification* to describe how some families mask interactions between family members by giving contradictory or confusing explanations
  - \* Robin Skynner, from Great Britain, developed a brief psychoanalytic family therapy which complemented the earlier work of Nathan Ackerman and Ivan Boszormenyi-Nagy
- Feminist theory and family therapy
  - feminists began to question whether or not some concepts of family therapy were oppressive to women
  - A Feminist Approach to Family Therapy was published in Family Process by Rachel Hare-Mustin in 1978
  - belief that sexism limits the psychological well-being of women and men and must not be tolerated
- Family therapy: 1980 to 1989
  - marked by the retirement or death of many family therapy founders and leaders and the emergence of new leaders
  - increase numbers of women leaders who created new theories which challenged older ones
  - Women's Project in Family Therapy in 1988 focused on gender free approaches to family therapy
  - ❖ increased numbers of individuals and associations devoted to family therapy, including the International Association for Marriage and Family Counseling (IAMFC) of the American Counseling Association and Division 43 (Family Psychology) of the American Psychological Association
  - increased levels of research in family therapy to provide evidence of the effectiveness of family therapy
  - increased numbers of publication in the family therapy field, including the Family Therapy Networker
  - Creation of multisystemic therapy, an intensive family- and community-based approach for working with juvenile offenders
  - recognition of family therapy as one of four core mental health providers eligible for federal training grants
- Family therapy: 1990 to 1999
  - family therapy became a more worldwide phenomenon, with associations, research, and training institutes established across the globe
  - new theories were developed or refined
  - feminist family therapy examined gender sensitive issues in therapy rather than masculine or feminine issues, per se
  - the reflecting team approach of Tom Anderson used clinical observers to discuss their impressions with the therapist and the family, thus becoming a part of the therapeutic team
  - the therapeutic conversations model of Harlene Anderson and Harry Goolishian used a postmodern approach in which the therapist relates to the family in a more collaborative, egalitarian partnership
  - the psychoeducational model of Carol Anderson emphasized teaching family members about multiple aspects of mental illness, focusing on boundaries, hierarchy, and the integrity of subsystems
  - the internal family systems model of Richard Schwartz looks at both individual intrapsychic dynamics and family systems

- social constructionism based models were radically different than systems based models in that they are based on the belief that our experiences are a function of how we think about them rather than objective truths
- ❖ Basic Family Therapy Skills Project was established in 1987 to determine the essential skills needed for mastery of structural, strategic, brief, and transgenerational family therapy approaches
- increased awareness and focus on the influence of the therapist on the therapy (second-order cybernetics)
- increased importance of the family ontology or 'world view' stressing circularity and autonomy of systems
- change in training emphasis from producing narrowly focused, theory bound clinicians to a focus on how to work with specific populations or types of families
- Family therapy: 2000 to 2009
  - family therapy has spread to Europe, Asia, Africa, Australia and South America
  - International Family Therapy Association founded in 1987
  - professional associations continue to grow, providing services, educational opportunities, and publications
  - licensure has grown to all 50 states
  - \* marriage and family therapists recognized as one of five core mental health providers (along with psychiatrists, psychologists, social workers, and psychiatric nurses)
- Accreditation of family therapists
  - two associations accredit marriage and family training programs
  - \* Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE)
  - ❖ Council for Accreditation of Counseling and Related Educational Programs (CACREP)
- Developing culturally effective family-based research
  - 1. increased research on the effectiveness of family therapy with different cultural groups
  - 2. continued development of marriage and family therapy in regard to new narratives and approaches to working with couples and families
  - 3. health care reform
- Family therapy: 2010 to the present
  - Social conditions continue to change, requiring marriage and family therapists to formulate new and more socially relevant ways to work with couples and families
  - Professional associations such as the AAMFT and the IAMFC rely heavily on technology to disseminate information
  - Online therapy is becoming more popular and prominent
  - The AAMFT and IAMFC updated their respective codes of ethics in 2012 to keep pace with the times
  - ❖ The fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders* was published in 2013 and continues to pose challenges for family therapists' treatment of couples and families and reimbursement for their work
  - The Supreme Court of the United States rendered two important decisions in 2013 with ramifications for marriage and family therapists, one related to the legal definition of "spouse," and, a second lifted the ban on same-sex marriage in California

#### Kev Terms

**Basic Family Therapy Skills Project** a project that began in 1987 which focuses on determining, defining, and testing the skills essential for beginning family therapists to master for effective therapy practice.

**brief therapy** an approach to working with families that has to do more with the clarity about what needs to be changed rather than time. A central principle of brief therapy is that one evaluates which solutions have so far been attempted and then tries new and different solutions to the family's problem, often the opposite of what has already been attempted.

**circular questioning** a Milan technique of asking questions that focus attention on family connections and highlight differences among family members. Every question is framed so that it addresses differences in perception about events or relationships by various family members.

**dual therapy** the name for conjoint couple therapy devised by Carl Whitaker.

family life education the study of family life including developmental and situational factors that affect or change the life of families.

**internal family systems** model of Richard Schwartz which considers both individual intrapsychic dynamics and family systems.

**interpersonal** pertaining to matters or relationships between two or more persons.

intrapersonal thoughts, feelings, and processes within a person.

**mystification** the actions taken by some families to mask what is going on between family members, usually in the form of giving conflicting and contradictory explanations of events.

**National Mental Health Act of 1946** legislation that authorized funds for research, demonstration, training, and assistance to states in order to find the most effective methods of prevention, diagnosis, and treatment of mental health disorders.

**new epistemology** the idea that the general systems approach of Bateson, sometimes referred to as cybernetics, must be incorporated in its truest sense into family therapy with an emphasis on "second-order cybernetics" (i.e., the cybernetics of cybernetics). Basically, such a view stresses the impact of the family therapist's inclusion and participation in family systems.

**ontology** a view or perception of the world.

**psychoeducation** a strategy that involves educational methods such as reading books, attending workshops, listening to audiovisual material and interactive discussions.

**reflecting team approach** an approach where clinical observers of a therapeutic session come out from behind a one-way mirror observing room to discuss with the therapist and client couple/family their impressions.

schism the division of the family into two antagonistic and competing groups.

**second-order cybernetics** the cybernetics of cybernetics, which stresses the impact of the family therapist's inclusion and participation in family systems.

**skew** (marital skew) a dysfunctional marriage in which one partner dominates the other.

**social constructionism** a philosophy that states experiences are a function of how one thinks about them and the language one uses within a specific culture. From this perspecitve all knowledge is time- and culture-bound. It challenges the idea that there is objective knowledge and absolute truth. Narrative and solution-focused therapy are based on social constructionism. system a set of elements standing in interaction. Each element in the system is affected by whatever happens to any other element. Thus, the system is only as strong as its weakest part. Likewise, the system is greater than the sum of its parts.

**systems theory** a theory, sometimes known as general systems theory, that focuses on the interconnectedness of elements within all living organisms, including the family. It is based on the work of Ludwig von Bertalanffy.

**therapeutic conversations model** a postmodern approach where the family therapist relates to the couple or family in a more egaliarian partnership

**undifferentiated family ego mass** according to Bowen, an emotional "stuck togetherness," or fusion, within a family.

#### Classroom Discussion

- 1. Freud and others believed that the family is often the source of difficulties and, as a result, the patient should be treated separately from the family to avoid contamination. Family therapy, on the other hand involves family members in the treatment process and brings the action into the room rather than just talking about problems. If you were a member of a professional panel discussion of individual and family therapies, what rationale would you give for the value of family therapy?
- 2. Client satisfaction rates are claimed to be as high as 97% for marriage and family therapy clients. What do you think accounts for this high rate of satisfaction?
- 3. Like families themselves, the field of family therapy has changed markedly over the past few decades. Early approaches emphasized giving directives and therapists being "in charge" during treatment. In the 1990's, social constructivist models emphasized individual rather than absolute truths, and a more egalitarian therapist-client relationship. Discuss the merits of the 'therapist as leader' versus the 'therapist as collaborator' and explain how these two very different approaches might peacefully co-exist.

#### Multiple Choice Questions

- 1. Which of the following contributed to the development and growth of family therapy?
  - A. The launching of Sputnik by the Russians.
  - B. The establishment of career guidance programs.
  - C. The initial establishment of marriage counseling
  - D. The establishment in the 1930s of all male boarding schools
- 2. Which of the following groups, in the 1920s and 1930s, worked with families from an educational perspective to help them to better understand the dynamics of their family situation?
  - A. Family Life Specialists
  - B. Family Counselors
  - C. Marriage Counselors
  - D. County Home Extension Agents
- 3. Which one of these individuals is responsible for forming the American Association of Marriage Counselors (AAMC)?
  - A. Ernest Groves
  - B. Ludwig Von Bertanlanffy
  - C. Paul Popenoe
  - D. Abraham Stone
- 4. The systems theory developed by Bertanlanffy (1968) had less reliance on \_\_\_\_\_ and more emphasis on \_\_\_\_\_.
  - A. family therapists; paraprofessionals
  - B. circular causality; linear causality
  - C. individual parts; societal influence
  - D. linear causality; circular causality
- 5. Jack, a family therapist in the 1960's, emphasizes the importance of self-esteem, compassion, and congruent expression of feelings. Whose model of family therapy is Jack likely following?
  - A. Virginia Satir

	B. C. D.	Evelyn Duvall Salvador Minuchin Jay Haley
6.		be of questioning developed by the Milan Associates, emphasized asking questions that highlighted rences among family members. This type of questioning is called:  linear questioning triadic questioning open ended questioning circular questioning
7.		rson who receives a message to "act boldly and be careful" is receiving which type of communication, ding to Bateson et al., 1956)?  Paradoxical intention  Double-bind  Circular communication  Cognitive dissonance
8.		h one of the following therapists wrote on conjoint couple therapy and broke with traditional notherapy of the time by including spouses and children in therapy?  Virginia Satir  Jay Haley  Carl Whitaker  Murray Bowen
9.	Family problem. A. B. C. D.	ly therapy focuses on the rather than the, which creates new and unique ways of resolving ems.  intrapersonal; interpersonal physical; emotional individual; system system; individual
10.		nich theory of family therapy is it proposed that human suffering is embedded within a biopsychosocial- ral framework?  Contextual Therapy  Strategic Therapy  Biopsychosocial Family Therapy  Structural Family Therapy
11.	Which A. B. C. D.	h of the following refers to asking a third family member how two other members of a family relate?  Paradoxical intentions  Circular questioning  Triadic questioning  Bracketing
12.		s gives conflicting explanations of events to mask what is really going on between family members. rding to Laing (1965), James behavior can be described as  Paradoxical intention Scapegoating Enabling Mystification
13.	Whic theraj	h of the following is a body of ideas about gender hierarchy and its impact rather than a specific model opy?

of

- A. Filial therapy
- B. Strategic Family Therapy
- C. Feminist Family Therapy
- D. Relational Cultural Family Therapy
- 14. Which of the following was a major goal of the Women's Project in Family Therapy?
  - A. To bring awareness to the absence of gender in the formation of systems theory
  - B. To advocate that AAMFT affiliated therapists use feminist family therapy as their main theoretical lens
  - C. To advocate for greater female representation in leadership roles in AAMFT
  - D. All of the following were major goals of the Women's Project.
- 15. Which of the following organizations is a division of the American Counseling Association?
  - A. Division 43
  - B. AAMFT
  - C. Association for Marriage and Family Counselors
  - D. International Association of Marriage and Family Counselors
- 16. Which of the following therapies focuses on intensive family therapy along with community-based support for working with juvenile offenders with serious antisocial behaviors?
  - A. Adlerian Family Therapy
  - B. Structural Family Therapy
  - C. Multisystemic Therapy
  - D. Feminist Family Therapy
- 17. Which of the following is a democratic and collaborative model of working with couples and families, in which clinical observers of a therapeutic session come out from behind a one-way-mirror observing room to interact with the therapist and couple/family?
  - A. Technology-Assisted Family Therapy
  - B. The Reflecting Team Approach
  - C. Ecological Family Counseling
  - D. Multisystemic Therapy
- 18. This approach, developed by Carol Anderson (1988), is used with families that have a member with schizophrenia. Attention is given to teaching family members about multiple aspects of mental illness in a daylong survival skills workshop.
  - A. Therapeutic conversations model
  - B. Reflecting Team Approach
  - C. Psycheducational Model
  - D. Internal Family Systems Model
- 19. Which of the following is a philosophy that states that our experiences are a function of how we think about them instead of objective entities?
  - A. Applied Berkelian Theory
  - B. Social Constructivism
  - C. Biocentrism
  - D. Systems Theory
- 20. In which court ruling did the Supreme court rule that section 3 of the Defense of Marriage Act (DOMA) was unconstitutional under the Due Process Clause of the Fifth Amendment?
  - A. United States v. Windsor
  - B. Hollingsworth v. Perry
  - C. Tarasoff v. University of California Berkeley
  - D. Sutherland v. Madison Memorial

#### Essay Questions

- What trends in society do you think will influence the future development of family therapy?
   What historical event or development, in your opinion, most impacted family therapy?

# Chapter 2 The Theoretical Context of Family Therapy

#### Chapter Overview

#### Historical Perspective

- Families have played an important part throughout history in the lives of peoples and nations
- Families provide deep emotional experiences such as love, devotion, attachment, belonging, fun, and joy
- A family also can be a therapeutic environment for its members by listening, sympathizing, assisting, and reassuring each other
- Over time, families have been shaped by social, cultural, economic, and governmental changes

#### Family Definitions

- Families are systems in which the members interact with one another
- Family members influence each other and, in turn, are influenced by each other
- Because of this mutual interaction, a family is greater than the sum of its parts
- The interrelatedness of the family is known as cybernetics
- Definitions of what a family is and how it is structured vary across cultures and are constantly changing and evolving
- Families are both universal and unique, each family having its own set of rules, sequences, subsystems, feedback loops, hierarchy, and organization
- Common family types in American society include nuclear, single parent, and blended, with variations of these three family forms described as dual career, child free, special needs children, gay/lesbian, aging, multigenerational, grandparent headed, and military
- The family one grew up in is known as one's family-of-origin

#### Individual and Family Development

- It is useful to study families from a developmental perspective, (i.e., the predictable changes that occur in individuals and families over time)
- The 'life course' refers to different time dimensions such as individual time (the time from birth to death), social time (important social events such as marriage, parenthood, and retirement), and historical time (the era and culture in which one lives)
- The term 'life cycle' is used to describe the continuous development of people over time
- Individuals and families experience predictable events and developmental crises (changes) which are often sequential
- Life cycle stages require some level of success at each stage before proceeding to the next stage. There are times of predictable developmental crises (times of turmoil and opportunity) in each stage.
- Erik Erikson, a pioneer in the area of human growth and development, described human life in terms of stages
  or sequential developmental occurrences. He developed an influential eight stage model of individual
  development. The first five stages focus on individual skill and identity development, the last three are more
  interpersonally based
- Evelyn Duvall first proposed a family life cycle model based on the intact, middle class nuclear family in 1956.
   This model has lost influence due to the decrease in number and percentage of nuclear families in the United States
- In 1999, Carter and McGoldrick proposed a six-stage family life cycle model of the intact middle class nuclear family that begins with the unattached adult and continues through retirement
- Each stage in this model requires key adjustments, tasks, and changes for the individuals to survive and thrive. There is often intergenerational ambivalence in families as children, especially young adults, move to more independence and yet need assistance

#### Stage 1 Single Young Adults: Leaving Home

- the numbers of single young adults is increasing
- \* traditional family oriented activities are being reshaped to accommodate singles
- ❖ a major task of single young adults is to disconnect and reconnect with one's family on a different level and to develop a strong identity a "solid self"
- cohabitation (living together without being married) is increasing with positive, negative and neutral aspects to it
- singlehood is a viable alternative to marriage; more accepted now than in the past
- singles are the second happiest group (married couples being the happiest)
- society continues to promote marriage, creating internal and external pressures on singles to marry
- singles must establish social networks, find meaning in work or avocations, and live a balanced life to be physically and psychologically healthy
- singles typically seek family therapy due to a weak sense of self, inability to separate from their family of origin, and a lack of social skills to establish significant relationships with others

#### Stage 2 The New Couple: Joining of Families Through Marriage

- new couple relationships begin with courtship, in which individuals test their compatibility and tend to idealize the relationship
- individuals tend to be most comfortable with others at the same or similar developmental level (e.g., secure men tend to be involved with secure women; anxious women may be attracted to less committed and more disengaged men)
- the new couple stage is a period of adjustment and accommodation and requires time, energy, good will, and the ability to compromise
- this stage can be quite satisfying for those who are able to resolve differences successfully they maintain a high level of idealistic distortion about their marriage and spouse,
- this stage can result in divorce for those unable to make the necessary adjustments
- \* new couples typically seek family therapy due to the inability to adjust to living as a couple instead of individually, difficulty with relatives (in laws and/or family of origin), inability to develop effective communication and problem solving skills, and differences over whether and when to have children

#### Stage 3 Families with Young Children

- this stage is characterized by dramatic changes in lifestyle which stress a couple's lifestyle and marital relationship,
- this stage create new parenting/maternal demands and unbalances the patterns and interactions previously developed at least temporarily
- although marital satisfaction tends to decrease in this stage, strong marital bonds can mediate the stresses associated with children and work issues
- families with young children typically seek family therapy due to inability to reorganize and restructure following the arrival of children as well as differences over how to raise and discipline children

#### Stage 4 Families with Adolescents

- this stage is one of the most active and exciting yet it can be very stressful and demanding for many families
- couples may be caring for aging parents in addition to adolescent family members they are often squeezed psychologically and physically -- sometimes referred to as the 'sandwich generation'
- stressors may include difficulty in setting limits, redefining relationships, and caring and supporting one another; decreasing parental influence and increasing peer influence; generational and gender differences; and maintaining open communication

- when adolescents develop 'planful competence' they come to have a realistic understanding of their intellectual, social, and personal responses in their relationships with others
- ❖ families with adolescents typically seek family therapy due to parent-adolescent conflict, developmental and psychological stress of marital partners who see their dreams 'slipping away,' and the stresses involved with caring for multiple generations of family members as well as for themselves

#### Stage 5 Launching Children and Moving On

- the 'empty nest' describes parents whose children have left home for college, marriage, careers, etc.
- this can be a positive time for couples, (e.g., some rediscovering the couple relationship and enjoying new freedoms from responsibility)
- this can be a negative time for couples, especially those who have defined themselves primarily as parents and have been heavily focused on their children.
- \* children who leave and then return ('boomerang children') can create tension among family members
- families in the launching and moving on stage typically seek family therapy due to a sense of loss of self, the marriage or the child who has left; conflict with the child who is not independent enough; or frustration/anger over the marriage and/or career ambitions

#### Stage 6 Families in Later Life

- within this stage are three groups: the young old (65-74), the old (75-84), and the oldest old (85 and after)
- characterized by decline in finances, health, loss of spouse, chronic illness, depression, and helplessness
- positive aspects of this stage include interacting with grandchildren, doing what one wants and setting one's own pace, and reflecting on important life activities
- families in later life typically seek family therapy due to a lack of meaning or enjoyment in life, concern over the aging process, the lack of quality relationships with family members (for example, children, in-laws, grandchildren)

#### *Unifying Individual and Family Life Cycles*

- Although outwardly the individual life cycle stages do not appear to have much in common with family life cycle stage, they do share some commonalities
- Both share an emphasis on growth and development
- Growth is seen as a conscious process that involves a fair amount of risk and courage
- Both can be viewed from a systemic theory perspective, which emphasizes the interrelatedness of the entire
  unit, that a family is greater than just the sum of its parts, and that families have organization, rules, and
  repetitive patterns
- The concept of 'circular causality' is based on the idea that family member's actions influence others and are in turn influenced by others. This differs from 'linear causality' in which actions move in one direction only, with each action causing another
  - in linear causality, a mother may be seen as the cause of a child's problem
  - in circular causality, the parent and child interact in a way that results in the problem repeating and intensifying (e.g., the more a parent protects a shy child, the more shy the child becomes, which results in more protection and more shyness, etc.)
- Life cycle models are complementary in the development and 'readiness' of persons; they tend to strengthen and prepare people for challenges and work
- Life cycle models are competitive in that the needs of individuals often are in competition with the needs of the family and can create tension

#### *Implications of Life Cycles and Family Therapy*

- The 'fit' between the therapist and the family can influence the outcome of therapy
  - therapists bringing unresolved issues into their clinical work can create problems
  - therapists may not have experienced the family's developmental stage, may be currently experiencing the same stage as the family, or may already have been through the family's stage all of these situations can cause problems
  - \* race, gender, ethnicity, class, sibling position, and sexual orientation of the therapist can positively or negatively influence the 'fit' and outcome of therapy.
  - therapists can improve the 'fit' or match with families by increasing their sensitivity to particular families, obtaining peer or clinical supervision to overcome deficiencies, or receiving continuing education to increase knowledge and skills
- Therapists must be sensitive to cultural differences which require adjustments to life cycle models
- Illness in a family member, either temporary or permanent, disrupts life cycles and can wear down a family's ability to handle the situation or can provide opportunities for growth and cohesion
- Therapists can assess the family's present and prior functioning and assist them to better understand the illness, resolve developmental disruptions, and develop more effective coping methods
- Special-needs children, i.e., those with disabilities, may affect parents/family positively or negatively; regardless expected life cycle of family is affected and therapist must take this matter into consideration
- Poverty and professionalism are economic and social factors that influence families in different ways, with poor families having fewer resources and struggling more with unexpected life events as compared with more affluent professional families

#### Key Terms

**boomerang children** adult children who, after being out on their own for awhile, return to live with their parents because of financial problems, unemployment, or an inability or reluctance to grow up

**circular causality** the idea that actions are part of a causal chain, each influencing and being influenced by the other.

**cohabitation effect** the phenomenon of lower marital quality, more negative communication, less dedication, and higher rates of divorce for couples who cohabitated before marriage

courage the ability to take calculated risks without knowing the exact consequences

**cybernetics** a type of systemic interrelatedness governed by rules, sequences, and feedback. The term was introduced as a concept to family therapy by Gregory Bateson. See also new epistemology.

**development** predictable physical, mental, and social changes over life that occur in relationship to the environment.

**empty nest** a term that describes couples who have launched their children and are without childrearing responsibilities.

family of origin the family a person was born or adopted into.

homeostasis the tendency to resist change and keep things as they are, in a state of equilibrium.

idealistic distortion viewing one's marriage and spouse to be better than they actually are

**linear causality** the concept of cause and effect—that is, forces being seen as moving in one direction, with each action causing another. Linear causality can be seen in, for example, the firing of a gun.

- **negative feedback loops** behaviors that reduce deviation within a system and bring the system back to its former, homeostatic state.
- **organism** a form of life composed of mutually dependent parts and processes standing in mutual interaction.
- **planful competence** when adolescents have a reasonably realistic understanding of their intellectual abilities, social skills, and personal emotional responses in interrelationship with others.
- **positive feedback loops** behaviors that amplify deviation within a system and take the system further away from homeostasis.
- **sandwich generation** couples who have adolescents and their aging parents to take care of and are squeezed psychologically and physically.
- **senescence** a gradual physical decline of individuals related to age. This decline begins after overall growth stops and varies greatly from individual to individual.
- singlehood being single
- **solid self** a Bowenian term for developing a sense of one's own identity where beliefs and convictions are not simply adaptive to others.
- **subsystems** smaller units of the system as a whole, usually composed of members in a family who because of age or function are logically grouped together, such as parents. They exist to carry out various family tasks.
- **systems theory** a theory, sometimes known as general systems theory, that focuses on the interconnectedness of elements within all living organisms, including the family. It is based on the work of Ludwig von Bertalanffy.

#### Classroom Discussion

- 1. Discuss the pros and cons of the life cycle perspective in assessing and treating couples and families.
- 2. Pick a particular life cycle stage. Discuss what tasks and challenges you may have encountered and what you and your family may have done to work through them.
- 3. It is believed that the 'fit' between the therapist and the family can influence the outcome of therapy. What are some of the issues that may cause difficulty in this area? What factors may be assets in this area?

#### Multiple Choice Questions

- 1. Families may respond to change by using negative feedback loops, which are loops that:
  - A. promote a return to the status quo
  - B. promote change
  - C. promote appreciation for each other
  - D. accommodate to new situations and challenges
- 2. Families may respond to change by using positive feedback loops, which are loops that:
  - A. promote a return to the status quo
  - B. promote change
  - C. promote appreciation for each other
  - D. accommodate to new situations and challenges
- 3. The family life cycle is useful in studying families from a(n) perspective.

	<ul> <li>A. psychopathological</li> <li>B. hierarchical</li> <li>C. developmental</li> <li>D. empathic</li> </ul>
4.	The three time dimensions referred to as the 'life course' are:  A. historical, evolutionary, predictable B. developmental, historical, cultural C. individual, social, historical D. horizontal, vertical, transitional
5.	Erik Erikson, a pioneer in the area of human growth and development, developed an eight stage model of individual development. The first five stages focus on individual skill and identity development. The last three stages focus on:  A. interpersonal development  B. cybernetics  C. idealistic distortion  D. hierarchical structure
6.	Family subsystems include all of the following EXCEPT:  A. parents B. siblings C. boys/men D. spouses
7.	<ul> <li>A key task of Stage 1, Leaving Home, of Carter and McGoldrick's life cycle model is:</li> <li>A. separation from the family of origin</li> <li>B. developing effective communication skills</li> <li>C. developing skills in limit setting</li> <li>D. developing the ability to compromise</li> </ul>
8.	<ul> <li>In Stage 5, Launching Children and Moving On, families typically seek family therapy due to:</li> <li>A. the stresses involved with caring for multiple generations</li> <li>B. a lack of social skills to establish significant relationships with others</li> <li>C. frustration/anger over the marriage and/or career ambitions</li> <li>D. lack of meaning or enjoyment in life</li> </ul>
9.	During the New Couple stage, a major task for the couple is:  A. developing effective communication and problem solving skills  B. developing independence  C. developing effective social skills  D. all of the above
10.	Circular causality differs from linear causality. In linear causality,  A. each family member's actions influence others  B. family member's actions move in one direction only  C. family member's actions are complementary  D. family member's actions are interrelated
11.	A relatively recent development is couples who have adolescents and aging parents to take care of, and who feel they are squeezed psychologically and physically. This development is called:  A. planful competence  B. empty nest  C. circular causality  D. sandwich generation

- 12. Although at first they seem very different, the individual and family life cycle models share an emphasis on:
  - A. interpersonal development
  - B. intrapsychic development
  - C. pathological development
  - D. growth and development
- 13. Mike, an emerging adult, has developed what Bowen (1978) calls a solid self. Which of the following, therefore, would accurately describe Mike?
  - A. His beliefs and convictions are deeply rooted in the beliefs and convictions of others.
  - B. His beliefs and convictions are not adaptive to others, often resulting in emotional dysregulation.
  - C. He is emotionally mature, which allows him to be aware of and develop his own beliefs and convictions that are not simply adaptations of others' beliefs and convictions.
  - D. He is changing in his lifestyle and attitudes, wherein a greater emphasis on individual events is manifest.
- 14. Which of the following statements is true regarding family?
  - A. Family has remained pretty much the same over generations and across cultures.
  - B. Family is comprised exclusively of individuals who are biologically related.
  - C. In the United States, families are increasingly being formed through biological means.
  - D. Definitions of families have changed over generations and across cultures.
- 15. Based on your knowledge of the family life cycle, what unique challenges might Bob and Marie face as a new couple with a baby?
  - A. Adjusting, adapting, and making decisions together, particularly around where to live, how many children to have, parenting styles, and how they will spend their money.
  - B. Reestablishing the primacy of marriage.
  - C. Maintaining dignity despite decline.
  - D. Experiencing the disequilibrium of the boomerang phenomenon
- 16. Which of the following is accurate regarding individual and family life cycle stages?
  - A. Family and individual lifestyles are independent of each other.
  - B. Family and individual life cycle stages are constantly intertwining.
  - C. There is some overlap between family and individual life cycles, but they are largely independent of each other.
  - D. When conflicts or differences between family and individual life cycles arise with clients, therapists should place more emphasis on the family life cycle.
- 17. Which of the following describes the term, cybernetics?
  - A. A theoretical technology that family therapists will use in the future that uses artificial intelligence to map out feedback loops.
  - B. State of equilibrium in a system.
  - C. Systems that regulate themselves through means of feedback loops.
  - D. Communication processes within a system.
- 18. Which of the following groups is considered the second happiest group?
  - A. Singles
  - B. Newly weds
  - C. Couples with adolescents
  - D. Couples who recently launched their children
- 19. Which of the following is a practical challenge of a family in the launching children and moving on stage of the family life cycle?
  - A. Less predictable routines and schedules
  - B. Financial burdens and a refocus on work
  - C. Compatibility of interests
  - D. Balancing needs and expectations of self and partner

- 20. In which phase of chronic illness would someone be classified if one were working toward developing a new sense of self and purpose?
  - A. Crisis
  - B. Stabilization
  - C. Resolution
  - D. Integration

### Essay Questions

- 1. Discuss the advantages and potential challenges of using the family life cycle to conceptualize family situations.
- 2. Describe what systems theory is and why it is important to family therapy.