

# FAMILY COUNSELLING

The Classic Schools

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T O

MY FAMILY AND

THE FAMILIES OF MY NEIGHBOURHOOD

IN WHICH I GREW UP

TO UNDERSTAND

THE DYNAMICS OF THE FAMILY

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# 1

## INTRODUCTION

Whenever I use the term 'family counselling,' I mean 'couple counselling' as well, since the concept of family counselling contains within it the nucleus of couple counselling also. I use the terms 'counselling' and 'therapy' interchangeably.

In this book I shall be dealing with the classic schools of family counselling. Among the classic schools, I deal with the theory and practice of the family systems counselling of Murray Bowen. In his theory is embedded the systems concept. Some of the salient concepts are 'triangulation,' 'multigenerational transmission process,' 'emotional fusion,' and 'emotional cut-off.'

Then I take up Virginia Satir's and Carl Whitaker's experiential family counselling, which has as its background the thinking of the existential philosophers with its emphasis on freedom and the necessity to discover the essence of one's individuality in the immediacy of experience. Both the therapists give importance to the knowledge of functional and dysfunctional communications in families. The concept of 'double bind' is special to experiential family counselling.

Next comes the famous psychoanalytic family counselling. Psychoanalysis has played a major role in psychology until very recently. Still some of the psychological schools have their strong roots in psychoanalysis. Having the Freudian drive psychology as the basis, we have its overgrowth as 'object relations theory' and 'self-psychology.' Self-psychology, for example, has a tremendous influence on counselling, especially with its colossal emphasis on empathy. Gone are the days when counsellors used to confront clients to such an extent that the clients would hesitate to go to the same counsellor for subsequent counselling. With the arrival of self-psychology, the client feels understood, upheld, validated and supported. The counsellor gets into the client's shoes to see the

client's world from the client's perspective. This is the special merit of self-psychology. For all these developments, psychoanalysis forms the basis, though at present the developments seem much different from their source.

Then comes the structural family counselling of Salvador Minuchin for whom the social context is of paramount importance. Its main belief is that the whole and the parts can be properly explained only in terms of the relations that exist between the parts. His theory advocates that our psychic life is not merely internal, but interactional with the environment. His valuable concepts for the understanding of family counselling are 'subsystems,' and 'boundaries.' Then follows cognitive-behavioural family counselling. Its main thrust is that our thinking influences our emotions and behaviours. Therefore instead of changing the behaviour one would do well to change his/her thinking. Finally I end up with speaking about strategic family counselling of Jay Haley and Cloé Madanes. They basically believe that clients are not pathological and they can change themselves rapidly. They have developed a set of creative ways to generate change in the clients' lives. At the end I also strongly advocate to develop one's own method in family counselling, and for that matter counselling itself. We can never be the duplicate of another individual. Our individuality has to be expressed in every sphere of our activity, especially in counselling. Though we may follow certain schools of psychology in our counselling approach, it is worth being original in our approach.

With this brief introduction I invite you to enter into the different classic schools of family counselling and develop your own way of doing family counselling.

## 2

## THE CONCEPTUAL FOUNDATIONS

Like any other social science, family counselling had to grow from its infancy to a mature stature. It definitely needed concepts to express its experiences and propose guidelines in conceptual framework. It was prudent enough to borrow the concepts from other fields that are akin to its attitudes and value system. A perceptive learner of family counselling can easily sense in his/her study the conceptual influences from other fields.

### 1. Background<sup>1</sup>

#### 1) Systems Thinking

Computers were introduced in the 1950s. The speed with which they perform functions has been ever increasing. The increasing quantities of information have reached new thresholds of complexity, so that even the old ways of making sense out of information have become inadequate. Systems thinking began as a response to the dimension of the information problem. It focuses on the processes that govern the data rather than on the content. It concentrates on the principles of organization that give meaning to the data than on the cause-effect connections that link bits of information. One of the characteristics of systems thinking is its departure from traditional notions of linear cause and effect. In linear causation, A causes B, B causes C, C causes D, and D causes E. In multiple causation, A+B+C+D cause E. Here A, B, C and D together cause E. Systems thinking may resemble multiple causation but it is different. Though A, B, C and D come together to cause E, they are not independent forces themselves but rather they are interdependent with one another. Every part of the system including the effect E is connected to, or can have its own effect upon every other part. Thus each component, instead of having its own discrete identity or input, operates as part of a larger

whole. Here what we observe is that the components do not function according to their nature, but according to their position in the network. Now what has become the unit of study is the structure ABCDEF. If one were to study a part outside the system, one will find that the part in question will function differently outside the system. Again the part will function differently even inside the system depending upon where it is placed.

#### 2) Systems Thinking in the Family Process

When we apply nonlinear thinking to family process, we understand emotional phenomena in terms of interdependent variables. Thus we conclude 1. The atmosphere necessary for physical symptoms to erupt in a family may occur only when more than one condition, some physical and some emotional, are both present simultaneously. 2. Mother-child relationships must be understood not only in terms of their mutual influence upon one another, but also in terms of the emotional field in which they are both situated. 3. The same mother-child relationships will have a different character depending on how the father is functioning, not just on how he relates to the child, or to the mother, but by the extent to which his presence throughout that nuclear system tends to be reactive, distant, or nonanxious. 4. If we take trauma, it is the emotional system of the family that either sets up the precondition for the quantity of damage a shock can promote, or extends the effects of that shock by its continued reaction to the event. Thus a shocking event will leave traumatic residue to the extent some other variable such as guilt is present. It is not just shock or guilt that alone can cause trauma. Therefore now the focus is on the systemic forces of emotional process rather than on the content of specific symptoms.

#### 3) Systems Theory

One of the conceptual influences is from 'the systems theory' with the attitude that the whole is greater than the sum of its parts. But we should remember that systems theory itself was not well defined and so it had many variations. We can notice this lack of coherence on the part of the systems theory. The concepts that are now used in family counselling can be directly linked to other fields such as biology from which we have the concept 'systems;'

physiology from which we have the concept 'homeostasis;' cybernetics from which we have the concept 'feedback;' psychosomatic medicine from which we have the concept of 'the social context of illness;' community mental health from which we have 'the therapeutic community;' anthropology from which we have the concepts of 'structuralism, functionalism, the participant observer;' and social work from which we have the concept 'the social context of problems.' Let us consider in this chapter some of the most salient concepts that have made a deep impact on family counselling.

## 2. Salient Concepts

### 1) Functionalism

The idea is not definitely foreign to imagine the influence of anthropology on family counselling since the person who most influenced family counselling with systems ideas was Gregory Bateson, an anthropologist. For a protracted time, anthropology was bound by Darwin with his theory of cultural evolution, which speaks of the various stages through which humans evolved from primitive societies to our modern civilization. Their studies were done outside of their original contexts. Against this evolutionist tendency, functionalism arose between 1900 and 1930. The British anthropologists Bronislaw Malinowski and A. Radcliffe-Brown were opposed to the historical studies without the context. These two persons wanted to study cultures as social systems in the present. Thus they studied cultures ethnographically, as 'participant observers.' They understood cultural ceremonies and customs in context, looking for the function that the cultural practices served for the larger social network. They argued that the function of any kind of social behaviour served the larger group. What we saw in the field of anthropology can be seen in counselling also. Psychoanalysis was trying to study the personal history of individual. The family counsellors' reaction against historical and decontextualized theorizing of psychoanalysis was similar to the reaction of anthropological functionalists against the same historical and decontextualized qualities of evolutionism. Perhaps one of the drawbacks of the family therapy's functionalist is his/her inclination to view any behaviour as potentially adaptive.

The functionalist tendency entered sociology through the work of Emile Durkheim. His proposal was that the kinds of behaviour society considers deviant or pathological may play a socially useful role in bringing the larger group together. Some sociologists went still further and suggested that social groups may need deviants for their stability. This became the function-of-the-symptom thinking of family therapists.<sup>2</sup>

### 2) Functionalism in Family Counselling

The functionalist notion that deviant behaviour may serve a protective function for a social group was adopted by family counsellors and they applied it to the symptoms of family members. Their idea of 'identified patient' was a scapegoat, a victim on whom other family members focused and with whom they fought to avoid having to deal with each other. Later it dawned on them that the scapegoats were active volunteers. These symptom-bearers willingly sacrificed their own welfare for the greater good of the group. The idea that families profit from the victim's troubles at times is far-fetched.<sup>3</sup>

### 3) General Systems Theory (GST)<sup>4</sup>

The laws that apply to biological organisms might also apply to other domains; from the human mind to the global ecosphere was the proposal of Ludwig von Bertalanffy, a prominent biologist. His work had some influence on all the social sciences. He described the system as any entity maintained by the mutual interaction of its parts, from atom to cosmos. He said that a system can be composed of smaller systems and can also be part of a larger system. Therefore the same organized entity can be regarded as either a system or a subsystem, depending upon our focus of interest. His idea that a system was more than the sum of its parts was well accepted. When things are organized into a system, something else emerges. That which emerges is the relationship of the component parts. Thus he focused on the pattern of relationships within a system rather than on the substance of its parts. Family counsellors regarded the family as a system but ignored the larger systems of community, culture, and politics in which families are embedded. Family counsellors did well to take his ideas and apply to counselling the ideas that a family system should be seen as

more than just a collection of people and that counsellors should focus on the interaction among family members rather than on individual personalities. These ideas have become the central tenets of family counselling now.

### **(1) Homeostasis**

Family systems thinking locates a family's problem in the nature of the system rather than in the nature of its parts. This relocation of the problem is linked to the concept of homeostasis. Homeostasis is the tendency of any set of relationships to strive perpetually, in self-corrective ways, to preserve the organizing principles of its existence. Accordingly the family model understands a system's problems in terms of an imbalance that must have occurred in the network of its various relationships, irrespective of the nature of the individual personalities. For example, it does not matter what the problem is with the child, but it matters very much in what context the child is placed. Poor school performance or strained peer relationships are in themselves symptoms of some underlying problem with the system in which the child finds itself.

Though Bertalanffy used the metaphor of organism for social groups, the organism he spoke of was an open system continuously interacting with its environment. Living organisms are creatively and spontaneously active and use many ways of maintaining their organization. It is not that they are solely motivated to maintain the status quo. But family counsellors took the concept of homeostasis, a tendency of the systems to regulate themselves to maintain cohesion in response to changes in the environment. The word 'homeostasis' was coined by the French physiologist Claude Bernard in the 19<sup>th</sup> century to describe the regulation of such conditions as body temperature or blood sugar level. It may fit some of the behaviour of the organism. But if we overemphasise this idea we will land up considering the organism as a machine. Bertalanffy was against considering the organism in terms of homeostasis, which reduced the organism to the level of a machine. Though the term homeostasis is an important concept in family counselling, its limitations are widely accepted. If this mechanistic view is taken strictly, then counsellors simply study

how the family machine works and how to repair it. In this approach we may be ignoring the value of the family's functional state and, the culture in which it exists. It is a value-free mechanistic view of the family.

### **(2) Constructivism**

Bertalanffy gave importance to the human belief systems. In this way he was reacting to the logical positivism, which holds that the only valid data are those derived from observations that can be empirically verified. Against this logical positivism, Bertalanffy proposed the term 'perspectivism' which denotes that while reality exists, one can never be fully objective about it, since one's view is filtered through one's particular perspective. Bertalanffy's perspectivism is something similar to the philosophy of Kant, known as constructivism. Constructivism had a major impact on family counselling in the 1980s and early 1990s. Counsellors began to recognize that the way clients interpret events largely determines the way they interact with each other. Counselling became an exercise of changing meanings, and constructivism gave counsellors a philosophy that justified that meaning-focused practice. Constructivists believe that our cognition is not a mirroring of ultimate reality but rather is an active process, in which we create models of the world. These models direct what we actually see, what we consider as fact. Constructivism should not be taken to mean that since no one can be certain about absolute reality, any interpretation is as valid as any other, and so counsellors are free to reframe reality in any way they want – as long as the family is ready to accept it. Bertalanffy says that our inability to know absolute reality implies that we should be more concerned with our basic values and assumptions because some perspectives are ecologically destructive.

By recapitulating what Bertalanffy said we arrive at: 1. A system is more than the sum of its parts (like a clock is more than the collection of wheels and springs). 2. The emphasis on interaction within and among systems versus reductionism (reductionism is a tendency to analyse phenomena by dissecting whole systems and studying their parts in isolation). 3. Human systems

as ecological organism versus mechanism. 4. Concept of equifinality (Equifinality is the ability to reach a given final goal in a variety of ways). In nonliving systems, the final state and the means to that state are fixed. This term in biology identifies the organism's inner-directed ability to protect or restore its wholeness, as in the human body's mobilization of antibodies and its ability to repair skin and bone. 5. Homeostatic reactivity versus spontaneous activity. 6. Importance of ecologically sound beliefs and values versus valuelessness and 7. Perspectivism (constructivism) versus logical positivism. These themes are still in use in family counselling.

#### 4) Cybernetics of Families<sup>5</sup>

Cybernetics was developed and named from the Greek word for helmsman by Norbert Wiener. Norbert Wiener was a mathematician who was asked during World War II, to work on the problem of how to make guns to hit moving targets. From that he expanded his ideas about cybernetic systems. It simply signifies systems that are self-correcting –as humans and animals operate. Gradually this idea spread to other disciplines that refined or expanded the concept of cybernetics. The central theme of cybernetics is the feedback loop, which is a process by which a system gets the information necessary to self-correct in its effort to maintain a steady state or move toward a preprogrammed goal. Naturally this feedback should include information about the system's performance relative to its external environment as well as the relationship among the system's parts. These feedback loops can be positive or negative. Consideration of its positive and negative quality refers to the effect they have on deviations from a steady, homeostatic state within the system, and not to whether they are beneficial or not. Whereas negative feedback reduces deviation or change, positive feedback amplifies it.

Application of cybernetics to family counselling touches several phenomena. They are: 1. Family rules, which govern the range of behaviour a family system can tolerate (it is the family's homeostatic range) 2. Negative feedback mechanisms that families use to enforce those rules –such as guilt, double messages, symptoms 3. Sequences of family interaction around a problem

that characterize a system's reaction to it like the feedback loops around a deviation and 4. What happens when a system's accustomed negative feedback is ineffective, triggering positive feedback loops.

#### (1) Circular Causality

It was Gregory Bateson who introduced the concept of cybernetics to family counselling after meeting Wiener. As a result of the introduction of cybernetics and expansion of its theme in family counselling, we have the concept of circular causality making a shift from the linear causality. According to this concept, pathology is not something caused by events in the past but something that is part of ongoing, circular feedback loops. Linear concept is a medical, psychodynamic, and behavioural model. Bateson opined that the concept of linear causality was useful for describing the nonliving world of forces and objects and it was not adequate for the world of living things. In living things, there are communication, relationships and force, which are not accounted for by linear causality. You will know the difference between linear and circular causality if you throw a stone at a wall and at a human person. In the first, you can predict the result, but not in the second.

#### 5) From Cybernetics to Structure<sup>6</sup>

Jay Haley believed that communication was motivated by the desire of persons to control each other. His interest in power led him to consider the hierarchy, or generational power structure, of families. He viewed child problems as being the result of coalitions that cross the boundary between children and parents. He spoke of hierarchy and boundary. His interest moved toward the structure of families rather than just their communication circuits. In 1967 he joined Salvador Minuchin.

Unlike cybernetics, structural family theory draws on organismic (Bertalanffy and cellular biology) and structural-functional (Malinowski, Radcliffe-Brown, Levi-Strauss, Parsons) trends in the social sciences. Accordingly, the family is considered as an organism, an open system made up of subsystems, each of which is surrounded by a semipermeable boundary, which is really a set

of rules governing who is included within that subsystem and how they interact with those outside it. We are aware that the nuclear family is itself a subsystem of a larger system. We can again break the family down into subsystems such as mother-child subsystem, husband-wife subsystem, siblings subsystem, males in the family subsystem, the females in the family subsystem. Thus any combination of two or more members as differentiated from one or more other members may be treated as a social system, which is a subsystem of the family as a whole.

By 1955, families were seen in this structural way, as having subsystems with boundaries separating them. A healthy structure requires clear boundaries, particularly generational boundaries. What create a dysfunctional family structure are unclear boundaries (overly rigid or overly diffuse). A symptomatic family member is one of the manifestations of the dysfunctional family structure. Therefore attempts were made to correct the structural flaw so that the family organism will return to health. Whereas the cyberneticians saw circular interactions maintaining the problems, structural therapists saw boundary violations resulting in inappropriate alliances and coalitions. To change individuals, it was enough to change their structural context, which is the network of relationships in which they are. It is also believed that even an incompetent family member will attain a more competent self if an improvement in the family structure is effected.

Salvador Minuchin took the Bertalanffian view of systems as open and flexible, and the Parsonian concepts of structure and emphasis on generational boundaries, for his action-oriented techniques. Thus he provided the first clear map to understanding and reorganizing families. In the 1970s structural family therapy became the most popular and influential brand of family therapy.

#### 6) Virginia Satir's Humanizing Effect

On the one hand, family therapy was associated with the concept of hierarchy with its emphasis on encouraging parents to become effective disciplinarians. This attempt was augmented by the work of Minuchin and Haley. On the other hand, Virginia Satir advocated that parents should be more affectionate and loving to each other and to their children, besides being firmer. Satir

argued that the children's symptoms can serve the function of distracting from an unhappy marriage and that communication is the key in the family process. She was interested in the theories of Abraham Maslow and Carl Rogers. Thus her involvement in humanistic orientation led her to try to change families into a place for the positive, loving qualities. She encouraged family members to drop the protective masks they show each other and to discover and express their real feelings. She deviated from the mechanistic aspects. Rejecting the concept of control, she focused on nurture, being concerned with the experience of individual family members. Definitely she worked to improve communication and self-esteem.<sup>7</sup>

#### 7) Bowen and Differentiation of Self<sup>8</sup>

Haley, Minuchin, and Satir all had indirect contact with Bateson and his cybernetic perspective. In spite of their differences, they all shared an interest in changing the current interactional patterns of the nuclear family system rather than the family of origin. Murray Bowen did not follow the cybernetic perspective but evolved his own line influenced by the biological sciences. He used the term 'differentiation' because of its specific meaning in the biological sciences. 'Differentiation of self' will mean a process similar to the differentiation of cells from each other. The same applies to the term 'fusion.' He coined the phrase 'undifferentiated family ego mass' to suggest that, because of their emotional reactivity, the whole family is like one chaotic conglomerate. Likewise he spoke of the absence of differentiation of self to indicate that emotions overwhelmed intellect to the point that everyone reacted automatically and impulsively. For Bowen the goal of counselling is the differentiation of self of key family members so that they could help the entire family differentiate. Bowen was in a way echoing the theory of Freud, especially when he spoke of differentiation meaning control of reason over emotion. The way one arrives at differentiation implies the evolutionary theory. He called this process 'the multigenerational transmission process.' He argued that most children emerge from their families with the same level of differentiation as their parents, and only a few emerge with lower or higher levels. The transmission of differentiation is seen as a 'genetic-like pattern' across generations.

Bowen too believed that the child problems were related to the parents' marriage. The concept of 'triangles' is central to the theory of Bowen. Faced with anxiety, it is a natural human tendency to form triangles. When two individuals, especially those who are not highly differentiated, experience stress, a third person is ragged in. In this situation, emotion will flow to the third person. Now with the involvement of the third party, the level of anxiety will decrease. Bowen believed that if people in their nuclear and extended families learned to avoid being pulled into a triangle, they would gradually differentiate. He contended that to understand and improve an individual's family life, it was essential to examine the multigenerational patterns in which the individual was embedded.

#### 8) Family Life Cycle of Evelyn Duvall

The concept of the 'family life cycle' comes from sociology to form the background to the structural and strategic approaches. It was sociologists Evelyn Duvall and Reuben Hill who began to apply a developmental framework to families in the 1940s. They divided family development into discrete stages with different tasks to be performed at each stage. These stages were later shortened or increased by later writers. The stages proposed by Duvall are: 1. Married couples without children, 2. Childbearing families (oldest child: birth-30 months), 3. Families with preschool children (oldest child: 2½-6 years), 4. Families with children (oldest child: 6-13 years), 5. Families with teenagers (oldest child: 13-20 years), 6. Families launching young adults (first child gone to last child's leaving home), 7. Middle-aged parents (empty nest to retirement), 8. Aging family members (retirement to death of both spouses).<sup>9</sup>

I have only dealt with a few prominent figures that contributed to family counselling. There are definitely many others who in their own way shared their mite. Therefore one need not think that the above-mentioned alone are those who have laid the foundation of family counselling.

## 3

# FAMILY SYSTEMS COUNSELLING OF MURRAY BOWEN

The pioneers of family counselling undoubtedly recognized that we are the products of social context. Yet they limited their attention to the nuclear family alone. However, Murray Bowen family systems counselling is a comprehensive view of human behaviour. Bowen argued that wherever we go, we carry our unresolved emotional reactivity to our parents, in the form of vulnerability to repeat the same old patterns in every new relationship we enter into. The Unresolved issues with our original families are the most important 'unfinished businesses' of our lives.

### 1. Theoretical Formulations

For Bowen, his theory centred around two counterbalancing life forces. He called one of them 'togetherness' and the other 'individuality.' In an ideal situation, these two forces are supposed to be in balance. But if there is an unbalance in the direction of togetherness, it is called differently as 'fusion,' 'stuck-togetherness,' and 'undifferentiation.' In his theory 'differentiation' is considered the capacity for autonomous functioning, which helps people avoid getting caught up in reactive polarities. If there is no differentiation, emotional reactivity results in polarized positions like pursuer-distancer, and overfunctioning-underfunctioning. The tension we experience in our life situation is the condition that evolved from mother-child symbiosis, to undifferentiated family ego mass, to fusion/differentiation. Before we could differentiate a mature, healthy personality, the unresolved emotional attachment to one's family must be resolved rather than passively accepted or reactively rejected. Now let us see some of the core concepts of his theory.<sup>1</sup>

## 2. Differentiation of the Self<sup>2</sup>

Differentiation of the self is an intrapsychic and interpersonal concept. As intrapsychic differentiation, it is the ability to separate feeling from thinking. If one is not differentiated, one can hardly distinguish thoughts from feelings. Since one's intellect is so flooded with feelings, one is almost incapable of objective thinking. On the contrary, the differentiated person is able to balance thinking and feeling, being capable of the restraint and objectivity that comes with the ability to resist the pull of emotional impulses. Interpersonally, the ones who are undifferentiated tend to fuse with others. Lack of differentiation between thinking and feeling goes hand in hand with lack of differentiation between oneself and others. Because of the inability to think clearly, they tend to react emotionally – that is, positively or negatively to the dictates of the family members or authority figures. Needless to say that they have little autonomous identity.

People who are well-differentiated consider carefully the pros and cons of various choices. They are capable of making rational decisions because they distinguish between their thoughts and feelings. They may not impose their beliefs on others and are not defensive or aggressive with people who have beliefs different from theirs. One need not take well-differentiated persons as non-feeling persons. In fact they are capable of strong emotions and express them when necessary. They clearly recognize that feelings are sources of information about what is going on in their lives. When they choose, they can be very passionate. They are able to lose themselves in emotions, especially in love-making, which involves immersing oneself in a world of sensation and feeling and letting go of boundaries. They are known for their choices in the sense that they can decide whether to act or not on feelings.

Differentiated persons think through their position and so they are able to take a stand and set their limits – meanwhile listening to the views of others. They keep themselves open to new information and are not swayed by threats or emotional blackmail. They tend to respect others and learn from them. They seem to delight in differences and are not threatened by them. These things they can do with people in close relationship like spouse, parents and children.

On the contrary, people who cannot distinguish between thinking and feeling, and thus less well-differentiated, are good at thing-oriented tasks as opposed to people-oriented tasks. But they are totally lost in dealing with intimate relationships. They tend to be extremely sensitive and easily hurt.

Because of their difficulty in distinguishing between thoughts and feelings, the less well-differentiated people often assume that their subjective feelings are an accurate reflection of the actual state of things.

In Bowen's theory we find two main variables in human functioning: anxiety and differentiation. Anxiety could be acute or chronic anxiety. Acute anxiety can occur in response to real threats and is time-limited. But chronic anxiety generally occurs in response to imagined threats and is not experienced as time-limited. We can say that acute anxiety is fed by the fear of what is, whereas chronic anxiety is fed by the fear of what might be.

Differentiation, for Bowen, is a natural, automatic process through which humans develop from being symbiotically attached to the mother, in the context of the parental unit, to being an emotionally separate self in relation to family and others. It can also mean a process whereby an individual intentionally seeks to define a self, to become more of a separate self in relation to his/her family. More specifically, differentiation of self can be described as the way an individual manages the interplay of the 'individuality-and-togetherness-forces' within a relationship system. It is also described as the ability to act for oneself without being selfish and the ability to act for others without being selfless. In sum, it is the ability to be an individual while simultaneously functioning as part of a team.

Differentiation can be defined according to the degree of separation between the emotionally reactive and the thoughtful, goal-directed functioning. This description is at the level of the individual. At the level of marriage in a nuclear family, it means a continuum consisting of the ways the marital partners maintain the self. It refers to the degree to which the couple are emotionally separate from each other. At the level of the family of origin, it is the degree to which family members have open, one-to-one

relationships with one another. In this context, undifferentiation will mean the degree of unresolved attachment between an individual and his/her parents through either overcloseness or cutoff.

### 3. Triangles/Triangulation<sup>3</sup>

In popular parlance, a triangle is any three-way relationship. We can imagine three corners of a triangle, and an individual or a group of people can be in each corner. If you take the family, the basic family triangle is father, mother, and child. Eric Berne spoke of a triangle of roles as persecutor, victim, and rescuer. One of the corners can also be a thing or an activity, or an issue. Triangles have both positive and negative functions. Anxiety might arise when there is either too much closeness or too much distance. In an extended family, the anxious person reaches out to someone very easily and becomes calm. But in a nuclear family, anxiety becomes acute. In a one-to-one relationship, the tension usually grows. When there is the escalation of tension, people handle it by triangling in a third person or issue and talk about that. The triangling individuals can talk about the third party like kids, friends or work. They have difficulty only in focusing on themselves in the relationship.

If you take a group of three persons, there will tend to be two who are close (inside) and one who is distant (outside). It is rather difficult to maintain equal closeness between all three at the same time. There are times when this pattern is changed periodically by rotating two another people being close and the third one being left out. It is also possible that two individuals who are close permanently keep the third party outside. In our relationships, we find that very little time is devoted to talking together about one's self and the other and the relationship. Most of the time we spend talking about other people and things.

Being close with another works well as long as we get on well with each other but when differences emerge, one of the two will be tempted to triangle in someone or something else. In triangles we find two different states. One is a calm state and the other is a tense state. In a calm triangle, two close individuals get on well while the third one is longing to be closer. But in a tense triangle, the two close people may become anxious over the closeness and

potential loss of the self and begin to fight. When this happens the outside person usually wants to stay distant and avoid the other two but one of the two close members will try to establish a coalition with the outside person.

Whenever we experience difficult relationship in our families, usually there are two individuals along with one or more third parties. Any two individuals in a family may experience cycles of closeness and distance. Triangles are likely to develop when they are distant. Let us see how triangles develop. In a strained relationship, one of the two connects with someone else as a way of gaining an ally. The third person is sensitised either to one party's anxiety or to the conflict between them, moves in to offer reassurance or calm things down. Certainly triangulation lessens tension but it freezes the conflict in place. Triangles usually become chronic diversions that corrupt and undermine family relationships. Since most family problems are triangular, working with only one or two individuals may not solve the problem.

An emotional triangle is formed by any three persons or issues. Its basic law is that when any two parts of a system become uncomfortable with one another, they will triangle in or focus upon a third person, or issue, as a way of stabilizing their own relationship with one another. Therefore, a person may be said to be triangled if he/she gets caught in the middle as the focus of such an unresolved issue. In the same way, when an individual tries to change the relationship of two others, he/she triangles himself/herself into that relationship and often stabilizes the very relationship he/she was trying to change. In families we find typical triangles such as mother-father-child; a parent and any two children; a parent, his/her child, and his/her own parents; a parent, a child, and a symptom in the child (like doing badly in school, drugs, stealing, sexual acting out, allergies); one spouse, the other, and the other's dysfunction (like drinking, gambling, an affair, depression).

Emotional triangles are known to have some very specific rules that they invariably obey. These are applicable to any family or any group of people.

1. The relationship of any two members of an emotional triangle is kept in balance by the way a third party relates to each of them or to their relationship. Therefore when a given relationship is stuck, there is probably a third person or issue that is part of the homeostasis.
2. If one is the third party, it is generally not possible to bring change (for more than a week) to the relationship of the other two parts by trying to change their relationship directly. For example, this happens if you are directly trying to change the behaviour of another person.
3. Attempts to change the relationship of the other two sides of an emotional triangle is not only generally ineffective, but also homeostatic forces often convert these efforts to their opposite intent. For example, trying harder to bring two people together will generally maintain or increase the distance between them. In the same way, trying to separate two parties or anyone and his/her cherished beliefs of habits will increase the possibility of the two parts getting tighter together.
4. To the extent a third party to an emotional triangle tries unsuccessfully to change the relationship of the other two, the more likely it is that the third party will wind up with the stress for the other two. That is why the dysfunctional member in families often takes up responsibility for the entire system.
5. The various triangles in an emotional system interlock so that efforts to bring change to any one of them are often resisted by homeostatic forces in the others or in the system itself.
6. One side of an emotional triangle tends to be more conflictual than the other. In healthier families, conflict will tend to show up in different persons or different relationships at different times. But in unhealthy families, the conflict tends to be located on one particular side of a triangle (the identified patient or relationship).
7. We can only change a relationship to which we belong. Therefore, the way to bring change to the relationship of two others is to try to maintain a well-defined relationship with each, and to avoid the responsibility for their relationship with one another.

#### 4. The Nuclear Family Emotional Process

The emotional forces in families that operate over the years in recurrent patterns are known as the nuclear family emotional process. This was originally called by Bowen as ‘undifferentiated family ego mass.’ If there is a lack of differentiation in the family of origin, it will lead to an emotional cutoff from parents. This in turn will lead to fusion in marriage. If the individuals experience less differentiation of self prior to marriage, they will experience greater fusion with their spouses. But since this new fusion is unstable it may produce any one or more of the following. They are: 1. reactive emotional distance between the spouses, 2. physical or emotional dysfunction in one spouse, and 3. overt marital conflict or projection of the problem onto one or more children. The intensity of these problems depends upon the degree of undifferentiation, extent of emotional cutoff from families of origin, and the level of stress in the system.<sup>4</sup>

#### 5. Family Projection Process

The process by which parents transmit their immaturity and lack of differentiation to their children is called ‘family projection process.’ What we notice in families is that the emotion-fusion between spouses creates tension that leads to marital conflict, emotional distance, or reciprocal over- and under-functioning. If you are cut off from your family of origin, you may act distant to your spouse. This will make your spouse focus on the kids. It is not a caring concern for the child but it is an anxious and enmeshed concern. If a kid is the object of the projection process, it will be the one most attached to the parents (positively or negatively). Needless to say that this child is the one with the least differentiation of self. The husband may support his wife in this since he himself is not involved with the kid. The emotional fusion experienced between her and the child may take the form of a warm, dependent bond or an angry, conflictual struggle. Her overconcern for the child will make the child stunted in its growth. This stunted growth will make her overcontrol the child distracting her from her own anxieties but at the same time crippling the child emotionally. This process will infantilise the child –eventually creating psychological impairment, necessitating further her concern, which only solidifies the family pattern.<sup>5</sup>

## 6. Multigenerational Transmission Process

The transmission of the family emotional process through multiple generations is called multigenerational transmission process. At a time in every generation, a child that is most fused will be the one least differentiated in self while the least involved child moves toward a higher level of differentiation. Usually emotional illness will be transmitted not only beyond the individual to the family, but also beyond the nuclear family to several generations. Thus an identified patient's problem is the product of his/her parents' problem, which in turn was the product of the problem of their parents, and so on, for several generations. The actual problem rests with the multigenerational sequence in which all family members are actors and reactors.<sup>6</sup>

## 7. The Basic Types of Sibling Position

Children seem to develop certain fixed personality characteristics based on the sibling position in their families. In sibling rivalry we recognize the triangular complications of the siblings' relationship with their parents.

The position we occupy within the sibling constellation of our nuclear family of origin is an indication of our expectations of the opposite as well as the same sex, our degree of comfort with our own various offspring, and our style of leadership in succeeding nuclear groupings.

Our birth order and sex contribute to the formation of our personality. The way our family members treat us, the way we think about ourselves and how we react to and treat others outside the family are all linked together as males or females and as first, last, or middle born. It was Sigmund Freud who noted that a child's position in the sequence of brothers and sisters is of very great significance for the course of his/her later life. It is mere common sense for many cultures to regard the first born as a person achievement-oriented and having leadership qualities. The result of the research done on birth order and gender does not indicate what anyone should be like. It only reports what most people are usually like. Therefore it is not prescriptive but descriptive. There are also individual differences to the general description.<sup>7</sup>

### 1) The Oldest Child<sup>8</sup>

If the oldest child has a sibling within five years, it is a shock since it is displaced by the new baby. After the age five, the child finds a place in a society and so the arrival of a new baby does not affect it very much. If the second child is the same sex, the threat to the first seems much greater. Therefore the oldest child tries hard to be good so that its parents will continue to love it. It is also common that parents expect the oldest child to be a model for the younger ones. The oldest children usually have many parental qualities because of the expectation and because they want to please the parents. Since they tend to be achievement-oriented, they are tense, more serious, more reserved, and less playful than others. Oldest children are a fresh and new experience for the parents and so they receive all the attention possible. Since they identify with the parents they end up as guardians of the status quo, preserving the family tradition and morality. They have difficulty in making friends and have one or two close friends. Of course, the sex, and number of younger siblings play a crucial role in the final personality development of the oldest children.

#### (1) The Oldest Sister of Sisters

She is usually bright, strong, and independent, able to take care of herself and others. She is well-organized and domineering. She may find it difficult to accept advice or help from others. She is outgoing and self-confident and has a strong opinion about everything. By being good, she tries to please her parents. If she has more sisters, she is less likely to marry happily or marry at all. For her, the best match will be the youngest brother of sisters who is used to having a stronger woman in his life. A younger brother of brothers also will make a good match. The only male child too may fit in, since he will accept her role as a mother. The worst match for her will be the oldest brother of brothers. When she has children, she loses interest in her husband and is overinvolved with children. Her close female friends are youngest or middle sisters as in her own family of origin.

#### (2) The Oldest Sister of Brothers

She is a strong, independent, sensible and at times self-effacing woman. Men are important to her. She would sacrifice her

own work to take care of her spouse, set his goals for him, run his household and take care of his children. If she was used to many brothers at home she would not be content with just one man. She may like many men around and act as a patroness to them. The best match for her would be the youngest brother of sisters. A youngest brother of brothers too may accept her leadership. The oldest brother of brothers is a poor match for her. Her female friends will be usually the youngest sisters of sisters or a middle sister. She may like a only female child too. She is always congenial, and will act as a mediator in conflicts. If in leadership position, she will handle things with care and will be tactful. She will delegate her work because she thinks that it is not worth her time.

### **(3) The Oldest Brother of Brothers**

He is usually the boss. He has a lot of leadership qualities, is meticulous, perfectionist and wants to win every game. He is successful, gets along well with other men but is not on intimate terms with anyone. He likes his wife to 'mother' him. Though he expects a lot from his wife, he gives little. He will find the youngest sister of brothers a good match. Perhaps the worst match for him is the oldest sister of sisters. He likes jobs like lawyer, minister, economist, politician, astronaut, president of a company or of a country.

### **(4) The Oldest Brother of sisters**

He is an easy going, fun-loving, hedonistic, considerate and unselfish guy. As he is often fond of women, he is considerate to them. He can get along well with practically all women. His good match would be the youngest sister of brothers. The youngest sister of sisters may accept his leadership but the oldest sister of sisters is the most difficult match for him. He is more concerned about his wife than his children. As a father he is not very strict. He is a good worker if there are women around him –like in theatre, the ballet, or the church. He is best at advertising, public relations and as a paediatrician or an obstetrician/gynaecologist.

#### 2) The Youngest Child<sup>9</sup>

The youngest and the only child are never replaced by a newborn. They are always the baby of the family. They are 'babied'

much beyond their babyhood. They get an awful lot of attention from all the members of the family. Since they learn to expect good things from life, they are usually great optimists. May be due to tiredness in rearing children the parents do not put much pressure on the youngest one. They may lack self-discipline and may have difficulty in making decisions since in their life there was always someone who did the decision-making. In marriage they either expect the spouse to take decisions or resent and refuse to help. They do not follow family tradition and left to themselves they like creative arts. They may be adventurous and are open to try new things. In spite of their rebellion at times, they are followers and not leaders. Basically they remain dependent on others. They tend to be sociable, easygoing, and popular if treated well in their childhood.

### **(1) The Youngest Sister of Sisters**

She is spontaneous, cheerful, adventurous, messy, capricious and at times bratty. She tends to act the youngest all her life. She could be competitive especially with men and flirtatious. Her good match is the oldest brother of sisters. The oldest brother of brothers also would do for her. Her worst match is the youngest brother of brothers. Her best friends are oldest sisters of sisters. She is likely to resent strong leadership though she herself is not a leader and has trouble making decisions.

### **(2) The Youngest Sister of Brothers**

She is a congenial, optimistic, attractive, fun-loving woman. She is the one most favoured in her family and continues to be so throughout her life. She is fond of men being around her and has difficulty in settling for just one man in her life. She prizes her husband but may want several male friends or mentors besides her husband. An oldest brother of sisters is her good match. The youngest brother of brothers is the worst match for her. She is usually a good mother. She is not a serious career woman. She would prefer an older male superior.

### **(3) The Youngest Brother of Brothers**

He is daring, headstrong, capricious and rebellious. In history many assassins are youngest sons. His characteristic trait is

unpredictability. At one time he is in a high mood and at the next moment he is depressed. He may not plan ahead. He just lives for the moment. When things go well, he can be carefree and good-natured. When things do not work, he just leaves. He is usually gregarious but shy with women. At times he is too polite which makes him appear awkward. The best match for him is the oldest sister of brothers. A middle sister with younger brothers too is a good match. Having children is a strain for him. For him male friends are more important than his wife and children. At work he is a follower. He often turns to physical activities, such as sports, and creative activities.

#### **(4) The Youngest Brother of Sisters**

He is the one taken care of by women all his life. He usually likes women and is comfortable with them. Being the youngest and the only male child he might have been doted upon by everyone in the family. There is no need for him to distinguish himself because of his unique position. He likes a partner who will take care of him. He works well with jobs that have rigid job descriptions and does not require self-motivation. In spite of his geniality, he has mood swings. The more sisters he has the more difficult for him to settle down with just one woman. He needs women around him at all time. His best match is the oldest sister of brothers. He considers his children as intruders. Even his sons may be considered as his rivals. He gets on well with his daughters. The whole work of parenting is left to his wife.

#### 3) The Middle Child<sup>10</sup>

The middle children are the older siblings to the children who have followed them, and the younger siblings to those who came before them. That is why they are confused as to their identity and therefore they do not develop any distinctive traits. They are not particularly special in families. They do not have the experience of having their parents to themselves. They are in a way forced to compete with older siblings who are smarter, stronger and with the younger siblings who are cuter, more dependent. Therefore when they grow older they are not likely to take initiatives or think independently. They seem to be the lowest achievers academically.

Since they neither have the rights of the oldest nor the privilege of the youngest, they often feel life is unfair to them. There is a sense of being cheated in life. To get attention from others and to feel important, they may do crazy things and become self-destructive by eating or drinking too much. They may even become socially destructive – but not like big criminals. They often exhibit annoying attention-getting habits. They neither have the authority of the eldest or the spontaneity of the youngest. But they know how to deal with any type of persons. They are good negotiators, diplomats, secretaries, barbers, athletes, and waiters. Because they crave for attention and affection, they may turn to the field of entertainment.

The position of the middle child can take a huge variety of combinations with regard to the ages, sexes and numbers of other siblings and so it is difficult to deal with every variety. When there is greater variety in the siblings, it is more difficult to find the appropriate description for the middle child. Nevertheless, one can safely say that a middle child will tend to have more of the characteristics of the birth position that he/she is closest to. For example, if the middle child is at the higher end of the birth order scale he/she will resemble the oldest child, or if he/she is at the lower end of the birth order scale, his/her characteristics will be more like the youngest child. The way the sexes and ages of siblings are distributed is more important to the development of the personality of the middle child.

If all the children are the same sex, the middle child gets the least attention and has to compete. He/she will be confused and will have nearly equal mixture of characteristics of the youngest and the oldest and will be the most anxious and self-critical. On the contrary if all the other children are of the opposite sex, then the middle one gets the most attention and is pampered. Since such a home situation cannot be duplicated, marriage is rather difficult for such persons.

#### 4) The Only Child<sup>11</sup>

The only children have the best and the worst worlds. They deem themselves as perpetually the oldest and the youngest child in the family. Even though they have the characteristics of an old-

est child, yet may remain childish in many respects. It is known that the only child picks up the characteristics of the same-sex parent's sibling position. Since they are never replaced, they tend to be more at ease with themselves and have a higher self-esteem than oldest children, with less need to control others. They are less resentful of authority. They generally demand a lot from life. Their parents tend to have high expectations of them in academic life and in later endeavours. They are the highest scorers of all birth positions.

Since they have lived alone most of the time without any siblings, they do not know how to cope with intimate peer relationships. They have difficulty in accepting or understanding normal mood changes in other people. There are cultural differences between male only children and female only children.

### **(1) The Male Only Child**

In most cultures, the male only child is usually more favoured than the female only child. These children think that just as their parents approve and love them, the rest of the world should do the same thing to them. He usually does not go out of his way for anybody. He does not often pursue friendships and usually prefers his own company. Just like his parents did, his spouse has to do everything for him –receiving not much from him. He may match well with a younger or middle sister or brothers. The oldest sister of brothers also is a good match since she will mother him. In any case, another only child is usually the most difficult mate for an only child. Often he is a high achiever and expects his work situation to be set up so that it shows off his achievements.

### **(2) The Female Only Child**

She is known as the 'special' person and is hurt if others do not treat her that way. She forever craves for approval from men. She will appear mature for her age and yet perpetually childish. Since she was overprotected by her parents, she will expect her husband to do the same for her. She chooses a husband who is flexible, easygoing, good-natured, and able to cope with her wilfulness. She prefers an older man who is rather amused rather than threatened by her capriciousness. Like her counterpart, she

is not suited to any particular birth-order spouse. Her choices in order will be an oldest brother of sisters, or youngest brother of sisters, or a middle brother of sisters. For her another only child is the most difficult match. Her husband has to do most of the parenting. Her female friends are likely to be oldest sisters of sisters or sometimes youngest sisters of sisters. She is quite intelligent and competent and likes a congenial environment to work.

### **5) Twins**

In case there is no other child in the family, twins will act like two siblings of whatever gender they are, without the age conflict. They both will have some characteristics of the youngest and the oldest of their sex. If the parents and other caretakers insist on treating one as senior and the other as junior, then the older one may take the role of the oldest and treat the younger like a younger sibling. All twins are generally known to be close to each other and if they happen to be the same sex, they often act as one person.

If there are other children in the family, the twins will take up the characteristics of the birth position they share. If they happen to be the oldest, or the youngest, or the middle, they will have corresponding characteristics. In intelligence tests, they are the lowest of all birth positions since their greatest influence is on each other. They tend to pay less attention to, and learn, from elders, whether siblings, parents, or teachers. Usually other siblings and class mates may have little to do with them. At times they have difficulty in getting separated and marry. Even male/female twins have problem of separation but they have the advantage of being used to the opposite sex. Identical twins are the most difficult persons to be separated. It is not uncommon that they marry twins. Surprisingly, they even share one lover or friend without conflict since they think of themselves as one person.<sup>12</sup>

## **8. Emotional Fusion**

To understand what emotional cutoff is, it is good to look at the concept of emotional fusion. Fusion is the emotional oneness or emotional stuck-togetherness between family members. In any family stuck-together fusion means a continuum of closeness or

bond between a child and its parents. It has an extended meaning of bond that exists between an individual and his/her siblings, members of the extended family, and significant nonfamily others. Its main function is to keep individuals attached to the nucleus of the family, specially the parents. For the sake of survival it keeps all members of the family from falling away from the emotional nucleus. Some behavioural patterns are identified which function automatically to control the intensity of the emotional fusion and anxiety within the nuclear family. They are: over-underfunctioning reciprocity between spouses, projection process, triangling, and conflict or distancing between spouses. There are several specific expressions of fusion. Some of them are 1. acting as if one can read the other's mind; 2. speaking or acting for the other; 3. automatically expressing emotional, social, or physical responses that are reactions to expressed or unexpressed behaviour or feelings of another family member; and 4. adopting or living out, automatically, a family belief, tradition, or lifestyle choice.<sup>13</sup>

### 9. Emotional cutoff<sup>14</sup>

Emotional cutoff is the way people manage undifferentiation and the emotional intensity associated with it between generations. It is believed that the greater the emotional fusion between generations, the greater the likelihood of cutoff. It may happen that some people seek distance by moving far away from their parents. Others might do so emotionally. One need not mistake emotional cutoff for emotional maturity.

There are people for whom the only way to deal with demands of any kind is to withdraw. They simply leave or cutoff. They could withdraw either physically or emotionally when things are too tense for them. It could be observed in one's changing the conversation, or starting to engage oneself in some activity, or one could just leave the house, the city, or even the country. Often we encounter people in counselling who are in the same house but far removed from each other emotionally. One of the manifestations of cutoff is witnessed in a family where the husband is a compliant person but emotionally he is not there. Another version can be seen in young people who move away from their

parental home and spend their lives elsewhere but will make only duty visits when it is absolutely essential and unavoidable.

The reason for cutoff is that the person who moves away feels powerless with the other person who is all powerful. The person does not see any way of being himself/herself in a close relationship with that powerful person. Just because they are unsure of themselves, they deny their need of the other by isolating themselves. Their appearance to be independent is only a façade. At the cost of emotional distance they maintain independence. If they happen to be close, they experience a great deal of anxiety. They are seen to be normal and relate well socially and occupationally. Everything is all right with them if they do not get involved emotionally with others. The more the degree of unresolved emotional attachment in the family of origin, the greater will be the depth of the emotional cutoff. Surprisingly even the person who is cutoff also feels powerless and thinks that the person withdrawing has all the power. In short they do not see any way of being themselves in a close relationship.

For Bowen, emotional stuck-together fusion and emotional cutoff are interrelated expressions of undifferentiation. The greater degree of stuck-together fusion in a family, the greater the degree of cutoff that will necessarily follow. We can observe these patterns in multiple generations. According to systems thinking, which says that change in one part of a system elicits compensatory change in another part of the multigenerational family system, a pattern of fusion in the family of origin will trigger off an equivalent degree of cutoff in the same or another segment of the family as a multigenerational system.

Emotional cutoff is understood as the emotional process between the generations through which individuals separate themselves from the past in order to start their lives in the present generation. It is the same as emotional distance that regulates the discomfort of emotionally stuck-together fusion between generations. When the emotional fusion between parents and children is too intense, chronic anxiety can arise. To ward off this feeling of anxiety, individuals break away from the family of origin and remain emotionally cutoff and even physically cutoff. It can be

expressed through a range of behaviours from little to extreme emotional distance, manifested internally or geographically. So cutoff is an automatic, emotional, behavioural reaction. It can also include an intentional effort at times to distance from situations involving extreme conflict, fear, and anxiety. When the level of differentiation is low and the level of anxiety is high and chronic, the degree of cutoff will be intense. Emotional cutoff or otherwise called emotional process between generations, indicates primarily an individual's relationship with his/her parents after leaving home. In effect, it takes place when one starts a new nuclear family or sets up an independent living situation.

Cutoff does not take place just by one single individual. It requires at least two or more persons to create and sustain it. In most cases it takes one parent and a child. Cutoff is integrally related to the process of the parent-child triangle, as well as the emotional immaturity that resides in the parents and their relationships to their own parents. Therefore emotional cutoff is rooted in the emotional process of the family as a multigenerational unit. When there is a parent-child triangle with emotional divorce between the parents, undergirded by lower levels of differentiation and higher levels of anxiety in the family, then we can expect the outcome to be the separation between the generations, which leads to emotional cutoff.

Cutoff can refer to many variations of emotional distancing which occur among people both within and outside their family systems. Thus cutoff describes the immature separation of people from each other. It simply means a process between an individual and others besides his/her parents. The degree of cutoff one experiences in relation to parents is positively correlated to the degree of cutoff one experiences from others in the present and in the future generations.

One of the aims of cutoff is the unfolding process of emotional separation between the adolescent or young adult and his/her parents. We can imagine this process along a hypothetical continuum. At the highest level it can be conceived of an individual growing away from his/her family of origin, leading to the development of an autonomous self. In the middle, we have the indi-

vidual tearing away from his/her family of origin to become a pseudo self. At the lowest level of functioning we have the intense degree of cutting off or distancing. This is followed generally by collapsing, in which, the individual emotionally collapses in the first effort to function independently, returns home, and then retreats into an internal cutoff as a way of denying the emotional attachment between self and parents.

There are a variety of forms of cutoff that can occur along a continuum. Some of them are:

1. A young adult (or any family member) not communicating with other family members when geographically distant, particularly avoiding communicating bad news,
2. Being conflictual with a family member prior to embarking on a separation from that person,
3. An individual's polarizing his/her position with a parent in order to gain emotional distance,
4. 'Forgetting' or choosing not to acknowledge important family events or milestones such as birthdays, anniversaries, graduations or achievements,
5. The absence of or refusal to make eye contact with the other,
6. The absence or avoidance of verbal communication with the other,
7. Not referring to the other by name,
8. Not initiating contact but responding to it and
9. Not initiating and not responding to contact from the other.

## 10. Societal Emotional Process

Bowen wanted to extend his understanding of the family as an emotional system to an understanding of the society as an emotional system. According to him, the triangle exists in all living systems, not just the human family. Society could be in the grip of increasing chronic anxiety. Society responds to this with emotionally determined decisions to allay the anxiety of the moment – which results in symptoms of dysfunction. The efforts to relieve the symptoms result in more emotional 'band-aids' like legisla-

tion, which increase the problem. This cycle keeps repeating, just as the family goes through similar cycles. The emotional process in society influencing the emotional process in families is called 'societal emotional process.' When there is a high level of social anxiety, it can result in a gradual lowering of the functional level of differentiation in families. I have noticed that in certain societies, there is a high level of mistrust and correspondingly a high level of anxiety too. This somehow is reflected in individual families.<sup>15</sup>

### 11. Normal Family Development

For Bowen, there is no discontinuity between normal and abnormal family development. There are no discrete categories of families (schizophrenic, neurotic, or normal), but all families vary along a continuum from emotional fusion to differentiation. Optimal family development takes place when the family members are relatively differentiated, anxiety is low, and parents are in good emotional contact with their own families of origin. Emotional attachment between spouses resembles that which each had in the family of origin. If you were relatively undifferentiated in your family of origin, you will continue to be undifferentiated when you form a new family. Fogarty (1976) elaborates the characteristics of well-adjusted families. They are:

1. Families are balanced and can adapt to change.
2. Emotional problems are seen as existing in the whole group, with components in each person.
3. They are connected across generations to all family members.
4. They use a minimum of fusion and a minimum of distance to solve problems.
5. Each dyad can deal with problems between them.
6. Differences are tolerated, even encouraged.
7. Each person can deal on thinking and emotional levels with the others.
8. They are aware of what each person gets from within and from others.
9. Each person is allowed his or her own emptiness.

10. Preservation of a positive emotional climate takes precedence over doing what is right or what are popular.
11. Each member thinks it is a pretty good family to live in.
12. Members of the family use each other as sources of feedback and learning, not as emotional crutches.

For Bowen, the hallmark of the well-adjusted person is rational objectivity and individuality. If you are a differentiated person, you will be able to separate thinking from feeling, and remain independent of, though not out of contact with, the nuclear and extended family.<sup>16</sup>

### 12. Treatment Techniques

In Bowenian family systems therapy there are seven most prominent known techniques:

#### 1) Genogram

Genogram is a family diagram to collect and organize important data concerning the multigenerational family system. Its main function is to organize data during the evaluation phase and to track relationship processes and key triangles over the course of therapy.

Genograms have been adapted in various ways for clinical use. Dynamic markings have been developed to point out couples' relationships, repeated patterns, or complementary relationships. Genograms guide the counsellor to address problem-maintaining issues in either or both families of origin, and to plan realistically regarding long-term family change. They may facilitate treatment for specific types of couple problems, such as sexual dysfunction, family illness patterns, spiritual and religious issues, or medical and genetic disorders that could affect planning of children. Genogram can be used to look mainly at family structure. Patterns of relationship repeat themselves over generations without varying, and the same symptoms are repeated over generations. They include spousal abuse, poor health, depression, educational failure, multiple divorces or desertions, and drug addiction. These may lead to marriage problems in the here-and-now like distancing, fusion, chronic mistrust, contempt, or triangling in the third parties. Multigenerational patterns may involve patterns of work, religion, or political affiliation.<sup>17</sup>

## 2) The Therapy Triangle

Conflictual relationship processes within the family have activated key symptom-related triangles in an attempt to re-establish stability. Any family will automatically attempt to include the counsellor in the triangling process. If the counsellor stays detached, its members will calm down to the point where they can work out solutions to their dilemmas.

## 3) Relationships Experiments

Usually relationships experiments are done around structural alterations in key triangles. Its main purpose is to help family members become aware of the systems process and to recognize their own role in them. Fogarty uses this with regard to emotional pursuers and distancers. Pursuers are encouraged to restrain their pursuit, stop making demands, and decrease pressure for emotional connection, while distancers are encouraged to move toward the other person and communicate personal thoughts and feelings.

## 4) Coaching

Coaching is a technique to counsel the clients directly to work on their family problems. It involves asking process questions designed to help the clients figure out family emotional processes and their role in them. It does not imply telling family members what to do. Here the counsellor shall avoid becoming embroiled in family triangles.

## 5) The "I-Position"

To break cycles of emotional reactivity, it is good to say what one feels instead of saying what others are doing. Instead of telling 'You avoid my presence' one could say 'I desire your being present to me when you are at home.' One of the assumptions of Bowen is that confrontation usually increases anxiety and decreases the ability to think clearly and see options. When we displace the focus, making it less personal and less threatening, it will increase objectivity.

## 6) Multiple Family Therapy

In this technique, the counsellor works with a few couples at a time, taking turns focusing on first one, then another, and minimizing interactions. The purpose of this technique is that one couple may learn more about emotional process by observing

others. In other couples they are not so invested so as to have their vision clouded by feelings. It is learning from other couples, being observers.

The techniques of family therapy with a single family (both spouses) were adapted for use with a number of families in the mid-1960s. Early experiences with multiple-family group therapy and later experiences with single families were incorporated into the method. The aim was to keep each family unit a contained triangle along with the counsellor, to work on the emotional process between the spouses, and to avoid emotional communication between families. From experiences of the past, counsellors believed that the emotional exchange between families encouraged a fusion of all the families into a large undifferentiated ego mass. They argued that it made it difficult to focus on details within a single family and made the differentiation process difficult in any family. Nevertheless, they believed that each family could learn much from the close observation of other families.

The participant families were not known to each other. They were asked not to have any social contact with each other outside the sessions. The counsellor, who is one side of a potential triangle with each family, approached each family in the same way as he would do if working with only that family while the other families observed. This process was repeated with each of the other families. However any family could talk to the counsellor about another family but not directly to the other family. The optimal number of families is three to five for each multiple-family group. Families learn from observational exposure to other families. Each family experiences progress about one and a half times faster than similar families do in single-family therapy. Perhaps it is easier to see one's own problem when it is present in another family than when the problem involves oneself.<sup>18</sup>

## 7) Displacement Stories

Displacement stories are a technique meant to minimize defensiveness of the family members. This technique was developed by Guerin. Showing films and videotapes and telling stories were employed to teach family members about systems functioning.<sup>19</sup>

# 4

## EXPERIENTIAL FAMILY COUNSELLING OF VIRGINIA SATIR AND CARL WHITAKER

It was from the humanistic psychology of the 1960s that an experiential branch of family counselling emerged. Experiential counselling emphasized immediate, here-and-now experience. It is believed that the quality of ongoing experience is both the measure of psychological health and the focus of therapeutic interventions. Feeling-expression is viewed as the medium of shared experience and the means to personal and family fulfilment. When family counselling was in its infancy, experiential counselling was most popular. It borrowed its techniques from individual and group counselling. It drew heavily from Gestalt therapy and encounter groups. There were other means, which were expressive techniques such as sculpting, and family drawing, which bore the influence of the arts and of psychodrama. We should keep in mind that experiential treatment emphasized sensitivity and feeling-expression. Therefore it was not well suited to family counselling. In recent times, experiential counselling is not used as much as it was used earlier. Nonetheless, its emphasis on unblocking honest emotional expression in families is a valuable counterweight to the reductionistic cognitive emphasis of solution-focused and narrative approaches. Now of course, Susan Johnson's emotionally focused couple therapy is revitalizing the experiential approach of counselling.<sup>1</sup>

### 1. Theoretical Formulations

For experiential family counsellors, theory is useful only in the beginning. Later the counsellor should be just himself/herself. What are required are openness and spontaneity not theory and technique. When one tries to copy the methods of the mentor, one loses spontaneity and creativity. Perhaps we create dis-

tance in the name of objectivity when we stick to a certain theory instead of just being with the families and help them grapple with their problems. Counsellors may need supportive co-counsellors and helpful supervisors. When the counsellor involves himself/herself, that enables him/her to do his/her best. By avoiding theory, families are left to form their own theory of dealing with their problems. Of course, by saying there need not be any theory, they are advocating a theory of non-theory. In other words, they are advocating sharing feelings, fantasies, and personal stories with clients. Thus experiential family counselling is a child of the existential, humanistic, and phenomenological tradition.

Edmund Husserl, Martin Heidegger, Ludwig Binswanger, Medard Boss all reacted against the deterministic psychoanalysis and formulated existential thought. Existentialists emphasized freedom and the necessity to discover the essence of one's individuality in the immediacy of experience. They argued that instead of being pushed by the past, people are pulled toward the future, impelled by their values and personal goals. Existentialists substituted a positive model of humanity for an unduly pessimistic psychoanalytic model. These ideas were translated into practice by Victor Frankl, Charlotte Buhler, Fritz Perls, Rollo May, Carl Rogers, Eugene Gendlin, Sidney Jourard, R.D. Laing, and Carl Whitaker.<sup>2</sup>

### 2. Family Life

When a child is born in a family, it enters into a preexisting system, especially the family system. The preexisting family system has already got its own rules. These rules govern communications, especially who says what to whom and in what conditions. There are parents who are worried about their children and they set more rules. It can happen that the rules are absolute and impossible to follow, in which case children find it difficult to comply with the rules. In such circumstances, rules become ineffective and dysfunctional. In a healthy family we find there are a few rules and they are consistently applied. Too many rules and absolute demands may stifle growth, but all of us need rules, which need to be rather limited in number instead of being infinite, and they need to be observed as consistently as possible.<sup>3</sup>

### 3. Functional vs. Dysfunctional Communication in Families

Family counsellors usually speak of functional and dysfunctional families, and in the same way, in experiential family counselling they speak of functional and dysfunctional communications. In families we establish a communication pattern. In each family this can very well be noticed. In a family where there is a functional communication, the members have their own lives without any invasion from others and also a shared life. It is a kind of identity and separation. There is a balance between being an individual and being a part of the family. Members of the family welcome change and view it as an opportunity for growth. There is thrill and excitement about newness and growth. They keep themselves flexible and maintain open communication. On the contrary in dysfunctional communication patterns, there is a lot of rigidity with no room for flexibility. Stability is valued more than flexibility and hence any sign of change and growth is looked down upon. Of course, there is hardly any open communication. Individuals are not allowed to pursue their own interest and enjoy their own designs of life but rather they need to conform to the inflexible rules of the family. Needless to say that they do not receive any support from the family members, especially the caregivers. Since there is no genuine autonomy, there is no intimacy either. The family system is purely bound together by rules, and rules in themselves will not hold for too long any system, and so the family becomes dysfunctional due to its dysfunctional communication pattern.

Clear communication refers to successful exchange of information between individuals, and in the context of the family among the members. It allows checking out communication in order to clarify meaning, and intention. On the contrary, lack of clear communication will mean vague or confusing exchanges of information, and paradoxical communication. Besides there is no room for checking out meaning.

There are two concepts that describe communications processing theme. They are double bind and paradox. Paradox is either benevolent or neutral for the person who receives the paradoxical communication. A paradox is a type of interaction between

two or more people that makes use of the contrast between contradictory messages at two levels of abstraction in order to alter a person's behaviour. Double bind is harmful especially in the case of children. Therefore let us consider in detail what double bind is.<sup>4</sup>

#### 1) Double Bind

A double bind is understood as an outcome from an interaction that is generated through a structured sequence of events and uses multilevel, conflicting injunctions. It results in a behavioural change in the recipient, the person to whom the double bind is directed. It necessarily carries a negative connotation since it disallows alternate responses on the part of the recipient, that are based on internal perceptions. We effect a double bind through communication process.

At times we receive a double-level message from another person who has not made himself/herself clear to us. When an individual's words and expressions are disparate, if that person says one thing and seems to mean another by his/her voice or gestures, that individual is presenting an incongruent manifestation, and the person to whom he/she is talking receives a double-level message. This double-level communication need not lead to symptomatic behaviour. Nevertheless under certain conditions, especially where children are involved, it is known to produce a vice-like situation effect which has been termed the 'double bind.' When you warmly invite a person for an embrace and keep that person at a safe distance while embracing, you are giving a double-level message. On the one hand you ask the person to come closer by your welcoming and on the other hand by your nonverbal behaviour you give the message not to come closer.

Now let us see what conditions need to be present for a child to experience the pressure associated with a double bind. First, the child must be exposed to double-level messages repeatedly and over a long period of time. Second, these must come from persons who have survival significance for the child. Parents are survival figures for the children since they depend upon them for physical life, for love and approval. The child learns the techniques for mastering the environment through the way parents structure their message

to the child. Third, the child must be conditioned from an early age not to ask for clarification regarding what the parent meant. Thus the child is left to accept the parent's conflicting messages in all their impossibility. The child must be faced with the hopeless task of translating them into a single way of behaving. The third condition is the most important one.

In double bind, the child is threatened in his/her present dependency because he/she cannot obey on one level of meaning without disobeying on another, and thus continually invites parental rejection. The conflict within the messages is hidden and the child has been trained not to see it as the source of his/her disturbance; he/she turns the blame on himself/herself saying to himself/herself perhaps he/she can never do the right thing and so feels that he/she is bad. On a covert level, the child is quite aware of the impossible situation in which he/she is placed. Maybe as a last resort, the child covertly answers the message by the language of disguised protest, which is crazy or sick behaviour.<sup>5</sup>

#### 4. Defensive stances in coping with stress

Communication is a big deal in experiential counselling especially for Virginia Satir. According to her when the family system is crumbling due to escalating stress, the members tend to resort to defensive stances. She identifies four universal communication patterns that serve as defensive postures or stress positions. They are: placating, blaming, being super-reasonable, and being irrelevant.

Virginia Satir identified certain seemingly universal patterns in the way people communicate. There are four ways of handling the negative results of stress. These four patterns occurred when one was reacting to stress and at the same time felt one's self-esteem was diminished. Discrepancies between verbal and nonverbal communication produce double messages. One's words are saying one thing, and the rest of the person is saying something else. Troubled families generally handle their communication through double messages. Double messages stem from the following views:

1. I have low self-esteem and believe I am bad because I feel that way,
2. I am fearful about hurting the other person's feelings,
3. I worry about retaliation from the other,
4. I fear rupture of our relationship,
5. I do not want to impose, and
6. I am unconscious of anything but myself and do not attach any significance to the other person or the interaction itself.

The individual is unaware that he/she is giving double messages in nearly all of these instances. Therefore the listener will be confronted by two messages and the outcome of the communication will be greatly influenced by his/her response. The possible responses are that one picks up the words and ignores the rest, or picks up the nonverbal part and ignores the words, or ignore the whole message by changing the subject, leaving, or going to sleep, or comments on the double nature of the message. Unless family communication leads to realness or a straight, single meaning, it cannot possibly lead to the truth and love necessary to nourish family members.

It is good to take a closer look at the four universal patterns people use to get around the threat of rejection. When we feel and react to threat, we do not want to reveal our weakness and so we attempt to conceal it in the following ways: placate, so the other person does not get mad; blame, so the other person will regard one as strong (if the person goes away, it will be his/her fault, not one's own); compute, so that one deals with the threat as though it were harmless, and one's self-worth hides behind big words and intellectual concepts; distract, so one ignores the threat, behaving as though it were not there (maybe if one does this long enough, it really will go away).

Our bodies portray our feelings of self-worth. When our self-worth is in question, our bodies show it through some form of physical manifestation. Thus there are four physical stances corresponding to the universal patterns:<sup>6</sup>

### 1) Placating / Placater

The placater is known to talk in an ingratiating way, trying to please, apologizing, and never disagreeing, no matter what. This person is a 'yes man' who talks as though he/she could do nothing for himself/herself. This person must always get someone's approval. In this position one thinks of oneself as really worth nothing. One feels really responsible for everything that goes wrong.

Eric Berne in his theory of transactional analysis speaks of five drivers: be perfect, be strong, hurry up, try hard, and please me. The placating people constantly seek to please others at all costs. They are driven by the 'please me' driver. Since they do not have a strong sense of inner worth and value, they depend upon others for their validation and thus do what will please others. Placating people usually end up pleasing nobody. Those who are able to take up a stand and assert are able to please at least one person. But the person who wants to please everybody will please none in the ultimate analysis.<sup>7</sup>

### 2) Blaming / Blamer

The blamer is a fault-finder, a dictator, a boss who acts superior. One does not really feel one is worth anything. So if one can get someone to obey him/her, then one feels one counts for something. When someone obeys, one feels effective.

There are people who keep blaming others for anything. It is their need to find fault with others at any cost. They play the role of persecutor and are constantly after victims whom they can persecute. In the language of Eric Berne, they play the game of 'blemish' by which they find small items of faults in others that usually go unnoticed and blame the victims. They put down others in a bid not to be put down by others.

The blamers are attackers. Attackers are known to deal with their anxiety about differences by blaming others for their anxiety as well as for everything else. They have knowledge of what they are in need of and are very upset when they do not get it. Somehow they think that the other is the cause of their frustration and so they blame the other. Since the attacker thinks that the other is the problem, he/she openly tries to change the other by using

whatever means are possible. If in a relationship both partners are attackers, they will attempt to demonstrate each one's superiority or at least equality with the other in all things.<sup>8</sup>

### 3) Super-Reasonable/Computer

The computer is known to be correct, very reasonable and shows no semblance of feeling. The individual seems calm, cool, and collected. The individual can be compared to an actual computer or a dictionary. When one is a computer, one uses the longest words possible, even if one is not sure of their meaning, in order to sound intelligent.

Super-reasonable individuals are those who would like to exercise absolute control over themselves, others and the environment. They are purely governed by principles without any consideration for feelings. They ultimately land up being isolated and are often seen as loners.<sup>9</sup>

### 4) Irrelevant Behaviour/Distracter

Whatever the distracter does or says is irrelevant to what anyone else is saying or doing. This particular individual does not respond to the point. The person is a kind of lopsided top, constantly spinning but never knowing where one is going, and not realizing it when one gets there. At first this role may appear to be a relief, but later terrible loneliness and purposelessness will arise.

All of us experience hurt, pain, and stress. Some of us take to irrelevant behaviour to distract themselves from their hurt, pain and stress. In some sense, their pain diminishes by their distracting behaviour patterns. In an extreme form, their lives are pulled in different directions at the same time. They seem to be frightened of stress and so avoid taking a clear position lest they should offend others.<sup>10</sup>

## 5. Treatment Techniques

In experiential family counselling, there are no techniques but only people. It relies on the curative power of the counsellor's personality. What the counsellors are is more important than what they do. A counsellor who is alive, aware, and fully feeling person will awaken potentials in families. Open and genuine counsellors would foster openness and authenticity in their clients too.

According to Carl Whitaker, there are three phases of the counselling process. First is the engagement, second comes involvement, and the third is disentanglement. Corresponding to the three phases of counselling, we also notice three roles of the counsellor. First of all, at the beginning, the counsellor assumes an all-powerful position thereby increasing the anxiety of the family. This only makes them realize their interactional patterns. When this happens, the family members may come up with alternative ways of operating. At this point the counsellor changes his/her role from being a dominant and parental figure to being an adviser and a resource person. Gradually the family members assume responsibility for their own living and changing. As it happens, the counsellor becomes more personal and less involved in the family system. The principle involved here is that change is to be experienced rather than designed.<sup>11</sup>

#### 1) Family Sculpting

The counsellor could ask any one member or all the members of the family to arrange the entire members of the family in a meaningful tableau. It can be done in various ways such as toys, drawings, or making use of the real members of the family or members of a group. This is a graphic means of portraying each individual's perceptions of the family, in terms of space, posture, and attitude. It increases awareness in the members of the family as to how they function and how others view them in the family system. It is worthwhile that the identified patient does this family sculpting.<sup>12</sup>

#### 2) Family Reconstruction

Family reconstruction is a type of psychodrama of reenactment through which clients explore significant events in three generations of family life. This helps members identify the roots of their old learning, formulate a more realistic picture of their parents, and discover their unique personality. Clients could make use of group members for this purpose. Family maps, family life-fact chronology or wheel of influence (a spatial diagram of all the significant people in one's life) or some combination of these three could be used.<sup>13</sup>

Besides these two, experiential family counsellors could use drama, reframing, humour, touch, Gestalt therapy and person-centred therapy depending upon the situation.

## 5 PSYCHOANALYTIC FAMILY COUNSELLING

Psychoanalysis had a tremendous influence on every field of psychotherapy for a long time. Many of the pioneers of family counselling were trained in psychoanalysis, including Nathan Ackerman, Ian Alger, Murray Bowen, Lyman Wynne, Theodore Lidz, Israel Zwerling, Ivan Boszormenyi-Nagy, Carl Whitaker, Don Jackson, and Salvador Minuchin. But all of them turned towards systems dynamics. While Jackson and Minuchin moved far away from psychoanalysis, Bowen, Lidz, and Wynne retained a distinctly analytic influence in their work.

In the 1980s, family counsellors took a renewed interest in the psychology of the individual. Gradually there was a revival of interest in psychoanalytic thinking. It definitely reflected changes in psychoanalysis moving from the individualism of Freudian theory to the more relationship-oriented object relations theories and self psychology.<sup>1</sup>

### 1. Sketches of Leading Figures

Freud was interested in the family but he thought that the family is the context where people learned neurotic fears, rather than the contemporary context where such fears are maintained. Later, major advances were achieved in the psychoanalytic understanding of family dynamics by child psychiatrists. They began to analyse mothers and children concurrently. The result of the concurrent analysis of married couples revealed the family as a group of interlocking, intrapsychic systems. Erik Erikson explained the sociological dimensions of ego psychology. In the 1950s and 1960s one notices that the American Psychoanalysis was dominated by ego psychology, which focuses on intrapsychic structures. At the same time, object relations theory, which lends itself to interper-

sonal analysis flourished in Britain. It was Edith Jacobson and Harry Stack Sullivan who were the most influential thinkers who helped bring American psychiatry to an interpersonal point of view. The work carried out at the National Institute of Mental Health (NIMH) in the USA was important to the development of family counselling.<sup>2</sup>

## 2. Theoretical Formulations

### 1) The Freudian Drive Psychology

For Freud, at the heart of our nature are the drives, which are sexual and aggressive. When children think that these basic impulses will lead to punishment, mental conflict arises. Conflict is usually signalled by unpleasant affect: anxiety or depression. Anxiety is unpleasure associated with the idea, which is often unconscious that one will be punished for acting on a particular wish. Depression is unpleasure plus the idea, which is often unconscious, that the feared calamity has already occurred. The balance of conflict can be shifted in any one of the two ways. It could be by strengthening defences against a conflicted wish or by relaxing defences sufficiently to permit some gratification.<sup>3</sup>

### 2) Self Psychology

Heinz Kohut, the father of self psychology says that all humans long to be appreciated. When our parents appreciate us, as we are young, we internalise this in the form of strong and self-confident personalities. But by chance as it is likely to happen most of the times, if our parents insufficiently demonstrate admiring acceptance, then our craving for it is retained in an archaic manner.<sup>4</sup>

### 3) Object Relations Theory

From what we have considered above, we can clearly see that drive psychology and the psychology of the self describe the basic motives and fears of human nature and the resultant conflict. Psychoanalysis is the study of individuals and their elemental motives (drives and the need for attachment). Family counselling is the study of social relationships. The bridge between the two is object relations theory. Object relations theory holds that one relates to others in the present partly on the basis of expectations formed by

early experience. Now the residue of these early relationships leaves internal objects, which are mental images of, self and other, and self in relation to others, built from experience and expectation. It is claimed that the unconscious remnants of those internalised objects form the core of the person as an open system developing and maintaining its identity through social relatedness, present and past.<sup>5</sup>

## 3. Normal Family Development

Consideration of the psychoanalytic model of normal development depends upon concepts from object relations theory, attachment theory, and theories of the self. For Freud psychological well-being depends on gratification of instinct, realistic control of primitive drives and coordination of independent psychic structures. For object relations theory, psychological well-being depends on achieving and preserving psychic wholeness through good object relations.<sup>6</sup>

## 4. Development of Behaviour Disorders

While psychoanalytic counsellors identify problems within the interacting people, nonpsychoanalytic family counsellors locate problems in the interactions between people. For psychoanalysis, symptoms are the attempts to cope with unconscious conflicts and the anxiety that signals the emergence of repressed impulses. But when psychoanalytic thinkers shifted their emphasis from instinct to object relations, infantile dependence and incomplete ego development became the core problems in development. Now fear-dictated flight from object relations, which begins in early childhood, is considered the root of psychological problems. One of the reasons for relationship problem is that the child develops distorted perceptions by attributing qualities belonging to one person to someone else. It was called 'transference' by Freud. This phenomenon is being called by others as 'scapegoating,' 'merging,' 'irrational role assignments,' 'delineations,' 'symbiosis,' and 'family projective process.' Melanie Klein called this 'projective identification.' It is a process by which the subject perceives an object as if it contained elements of the subject's personality and evokes behaviour and feelings from the object that conform to these projected perceptions. Projective identification is an interactional process.

For object relations theorists, inadequate separation and individuation as well as introjection of pathological objects are the critical determinants for poor adult adjustment. Difficulty in separating seems to create lasting problems.<sup>7</sup>

## 5. Goals of Therapy

Psychoanalytic family counselling aims to free the family members of unconscious restrictions so that they will be able to interact with one another as whole, healthy persons on the basis of current realities rather than unconscious images of the past.<sup>8</sup>

## 6. Treatment Techniques<sup>9</sup>

### 1) Triangles

There are four psychodynamic techniques, which are, listening, empathy, interpretation, and maintaining analytic neutrality. Listening is a strenuous but silent activity. In order to establish an analytic atmosphere it is important to aim at listening and understanding without worrying about making changes or solving problems. Change may come about as a byproduct of understanding. That is the presupposition of psychodynamic family counselling. The counsellor suspends all anxious involvement with the outcome. This frame of mind is of great importance in establishing a climate of analytic exploration. The counsellor resists the temptation to be drawn in to reassure, advise, or confront families in favour of a sustained but silent immersion in their experience. Whenever an intervention is made by the counsellor, it is to express empathic understanding to help family members open up. The counsellor interprets to clarify the hidden and confusing aspects of the experience.

### 2) Starting Point

Conflict between partners is taken as the starting point for exploring intrapsychic and interpersonal psychodynamics. Supposing an argument has taken place between two partners, a systemic counsellor might ask them to talk with each other about what happened, hoping to observe in their interaction what they were doing to keep the argument from getting settled. Here we notice the focus is on behaviour and interaction. A psychoanalytic coun-

sellor would be more interested in helping the partners explore their individual emotional reactions.

For example, the psychoanalytic counsellor might ask questions such as 'Why did they get so angry?' 'What do they want from each other?' 'What did they expect?' 'Where do these feelings and expectations come from?' The psychoanalytic counsellor would not attempt to resolve the argument, but would interrupt to ask a series of questions about the fears and longings that lay underneath it. Affect is the signal of intrapsychic conflict. The counsellor instead of asking, who did what to whom, will key in on strong feelings and use it as a starting point for detailed inquiry into its roots. The counsellor would ask questions such as 'What were you feeling?' 'When have you felt that way before?' 'And before that?' 'What do you remember?' The counsellor does not stay on the horizontal plane of the partners' current behaviour; he/she looks for openings into the vertical dimension of their internal experience and its history.

There is a third line of inquiry, which includes the counsellor, transference, and countertransference reactions.

### 3) Participant Observer

Psychoanalytic counsellors function less as detached observers and more as participants in the interpersonal patterns of treatment. Their function is described as 'participant observation.' Thus psychoanalytic family counsellors organize their explorations along four channels, namely 1. internal experience, 2. the history of that experience, 3. how the partner triggers that experience, and 4. how the context of the session and the counsellor's input might contribute to what is going on between the family members.

### 4) Focus

If one is a nonanalytic counsellor he/she will tend to focus his/her evaluations on overt communications and interactions, as well as on conscious hopes and expectations. But, for a psychoanalytic counsellor, such descriptions only scratch the surface. For him/her the unconscious forces constitute the core of family life. This in no way limits the scope of psychodynamic counsellors. They do not deal only with the psychology of individual person-

ality defects. For them family dynamics is more than the additive sum of individual dynamics. They believe that individuals may bring impaired object relations to family life, but it is the unconscious fit between family members that determines adjustment.

#### 5) Assessment

Dicks (1967) applied object relations theory to family evaluation and proposed three levels on which to assess the marital relationships: 1. cultural values and norms –race, religion, education, and values, 2. central egos –personal norms, conscious judgements and expectations, habits, and tastes, and 3. unconscious forces that are repressed or split off, including drives and object-relations needs. Dicks says that if a couple is in harmony on any two of these three levels, then they will stay together, but if they are incompatible on two or more levels, they will probably end in divorce.

#### 6) Focal Hypothesis

Arnon Bentovim and Warren Kinston offer a five-step strategy for formulating a focal hypothesis:

1. How does the family interact around the symptom, and how does the family interaction affect the symptom?
2. What is the function of the current symptom?
3. What disaster is feared in the family that keeps them from facing their conflicts more squarely?
4. How is the current situation linked to past trauma?
5. How would the counsellor summarize the focal conflict in a short memorable statement?

It is only after the preliminary psychodynamic assessment that the counsellor will decide whom to include in treatment. These counsellors today work with every possible combination of family members. Of course they often work with married couples.

#### 7) Internalised Objects

Object relations theory understands marriage as a transaction between hidden, internalised objects. Their marital and parenting relationships are reflected by these internal objects. Now

the counsellors bring these into awareness by interpreting the unconscious bases for the couple's interactions. Dicks says that couples are found to have dominant shared internal objects, based on unconscious assimilation of parent figures. It is true that some aspects of internalised objects are conscious, readily expressed, and easily examined. One can say that these are based on direct identification with consciously perceived parental models, or overcompensation against negative images. Psychoanalytic counsellors rely on a nondirective exploratory style in order to get unconscious images to emerge. Analytic counselling differs from other types of counselling in the process of discovery. Its process of discovery is protracted and directed not only at the clients' conscious thoughts and feelings, but also at their fantasies and dreams.

#### 8) Active

When we consider the nature of psychoanalytic family counselling, it is more active than classical psychoanalysis. All the same, it remains a nondirective, uncovering technique. The counsellor interferes minimally and scrutinizes one's responses to eliminate unessential or leading interventions. This is done with individuals and with families. For them interpretations are not meant to reassure nor to direct the clients. Interpretations should facilitate the emergence of new material, forgotten or repressed, and mobilize the feelings previously avoided. The counsellors even limit the number of interpretations per session.

Usually sessions are started with the invitation of the counsellor to discuss current experiences, thoughts, and feelings. In the sessions that follow, the counsellor might begin either by saying nothing or perhaps saying, 'Where would you like to begin today?' The counsellor after asking such a question sits back and lets the family talk, with minimal direction or interference with the spontaneous flow of their communication. If at all questions are asked by the counsellor, they are limited to requests for amplification and clarification like 'Could you tell me more about that?' 'Have the two of you discussed how you feel about this?' This process will naturally dry up. At that time the counsellor probes gently, eliciting history, people's thoughts and feelings, and their ideas about family members' perspectives like 'What does your

mother think about your problems? How would she explain them? This is done to understand assumptions and projections.

It is true that psychoanalytic family counselling is nondirective in nature, but it need not be taken to mean being passive. When family members speak about what is on their minds, the counsellor is actively analysing what is being said for deriving their drives, defences, ego states, and manifestations of transference. The bare facts from the clients are always ambiguous, but the counsellor organizes them and makes them meaningful. Besides this, the counsellor pursues the past. The childhood memories and associations to the interactions with parents are probed.

#### 9) Interpretations

Once the historical roots of the current family conflicts have been uncovered, it is time for interpretations to be made about how family members continue to reenact the past, and the often distorted images from childhood. The counsellor gets the data for such interpretations from transference reactions to the counsellor or to other family members, as well as from actual childhood memories. Counsellors deal less with recollections of the past than with reenactments of its influence, manifested as transference. That is why it is deemed very important to establish a milieu in which the patients feel safe enough to relive the unresolved conflicts and reactivate the early relationships images.

#### 10) Aim

In psychoanalytic counselling the aim is to analyse resistance and to work through the past in the transference of the present. In psychoanalytic family counselling, the counsellors claim that the resistance is collusive and more often manifests in overt behaviour than it is in private therapy. Since the discussions of problems are painful, most people go to great lengths to avoid them. There are some common forms of resistance, which are: seeking individual counselling or separate sessions to avoid facing family problems, persistently talking to the counsellor instead of to other family members, avoiding conflictual topics, scapegoating, becoming depressed to avoid the danger of angry confrontations, and steadfastly refusing to consider one's own role in problematic interactions.

There is a difference in interpreting resistance between individual psychoanalytic counselling and psychoanalytic family counselling. In the former the counsellor will wait until three or four occurrences take place in order to make an interpretation. For example, a client is late for the session a few times. At the first instance the counsellor will not attempt to interpret it. But in family counselling it is done at the earliest.

Finally counselling not only fosters insight and understanding but also stimulates the family members to consider what they are going to do about the problems they discuss. Family members must first of all be aware of their motivations, and also hold themselves accountable for their behaviour. Counsellors must help clients face the intrinsically destructive expectations involved in invisible loyalties, and then help them develop a balance of fairness among various family members.

# 6

## STRUCTURAL FAMILY COUNSELLING OF SALVADOR MINUCHIN

Structural family counselling became the most influential model in the 1970s. Families are collections of individuals who affect each other in powerful but unpredictable ways. Structural family counselling attempts to offer a clear framework that brings order and meaning to the transactions of the members. Since there are consistent, repetitive, organized, and predictable patterns of family behaviour, we are inclined to think of a structure, though it is only in a functional sense. There are concepts like 'boundaries' and 'coalitions', which are in themselves abstractions, but they are helpful for counsellors to intervene in a systematic and organized way in family counselling.

Structural family counselling approaches the human person in his/her social context. It is one of the many responses to the concept of human person as part of his/her environment. The mind is viewed as extracerebral as well as intracerebral. Therefore pathology may be inside the client, in his/her social context, or in the feedbacks between them. Counselling designed from this perspective rests on three axioms:

1. An individual's psychic life is not entirely an internal process. One influences his/her context and is influenced by it in constantly recurring sequences of interaction. The individual living within a family is a member of a social system to which he/she must adapt.
2. Changes in a family structure contribute to changes in the behaviour and the inner psychic processes of the members of that system.

3. When a counsellor works with a client or a family, his/her behaviour becomes part of the context. Now the counsellor and the family join to form a new, therapeutic system, and that system then governs the behaviour of its members.<sup>1</sup>

### 1. Theoretical formulations

The theoretical foundation of structural family counselling rests on the belief that the whole and the parts can be properly explained only in terms of the relations that exist between the parts. It focuses on the link that connects one part to another. Human social phenomena are considered expressions of these linkages. Therefore all human products, whether they are behavioural, linguistic, institutional or material, essentially communicate a social relation.

Structuralism attempts to identify the codes that regulate the human relationship. It also presupposes that there is in man an innate, genetically transmitted and determined mechanism that acts as a structuring force. Structures are inseparable from performance. The structures we see in society emanate from human reason and reflect the structure of the human mind.

There are dominant structures and subordinate structures. The dominant structures are those upon which most of our family operations are based. The subordinate structures are those which are less frequently called upon. The structural dimensions of transactions often identified in structural family counselling are boundary, alignment, and power (or force). Each and every unit of transaction contains all three of these structural dimensions.

Boundaries of a subsystem are the rules defining who participates, and how. These rules dictate who is in and who is out of an operation, and define the roles those who are in will have vis-à-vis each other and the world outside in carrying out that activity. Alignment is the joining or opposition of one member of a system to another in carrying out an operation. This dimension includes the concepts of coalition and alliance. Coalition is a process of joint action against a third person in contrast to an alliance where two people might share a common interest not shared by the third person. Power is the relative influence of each family member on the outcome of an activity. In a unit of operation,

boundary and alignment define the members of a family system as in or out (boundary), and for or against (alignment). But these structural dimensions depend on power for action and outcome. For example, in a family in terms of boundary, the parents are the disciplinarians; alignment indicates what disciplinary issues they agree upon and disagree with one another and with the children; power informs about which of the parents will prevail if they disagree.<sup>2</sup>

The primary exponent of structural family counselling is Salvador Minuchin. Structural family counselling is a blueprint for analysing the process of family interactions. It provides a basis for consistent strategies of treatment, which obviates the need to have a specific technique. Three constructs are the essential components of structural family theory. They are structure, subsystems, and boundaries.

### 1) Family Structure

Family structure is a set of covert rules that govern transactions in the family. It is shaped partly by universal and partly by idiosyncratic constraints. It is the organized pattern in which family members interact. It is a deterministic concept, but it prescribes or legislates behaviour. It describes predictable sequences. When family transactions are repeated, they foster expectations that establish enduring patterns. It is seen that once the patterns are established, members use only a small fraction of the full range of behaviour that is available to them. It is like something as follows, regarding who has to do what: It starts questioning who is going to do. Then it is followed by the answer 'so and so will probably do.' Later 'so and so will always do' becomes a structure.

Family structure is known as the invisible set of functional demands that organizes the ways in which family members interact. A family is viewed as a system that operates through transactional patterns. So repeated transactions establish the patterns of how, when, and to whom to relate, and these patterns underpin the system. It is the transactional patterns that regulate the behaviour of the family members. They are maintained by two systems of constraint: 1. generic, and 2. idiosyncratic. The generic system of constraint involves the universal rules governing family

organization. For example, parents and children have different levels of authority and power in the family. The idiosyncratic system of constraint involves the mutual expectations of particular family members. It originates from the explicit and implicit negotiations among family members, often around small daily events, like who does what. The system maintains itself and resists any change beyond a certain range. Any deviation experienced going beyond the system's threshold of tolerance induces mechanisms, which re-establish the accustomed range. The family is bound to respond to internal and external changes. For that it must be able to transform itself in ways that meet new circumstances without losing the continuity that provides the frame of reference for its members.<sup>3</sup>

### 2) Subsystems

For performing various functions, families are differentiated into subsystems of members. Every individual is considered a subsystem. Dyads or larger groups make up other subsystems, determined by generation, gender, or common interests. We can also group people as parents or adolescents. In a family any two members may form a tight bond as a subsystem excluding the other members. Sometimes families can be split into two camps. We notice certain common patterns. In a way, the possibilities for subgrouping are endless. As a member of our family, each one of us plays many roles in several subgroups. You may be a husband, a father, a son and the like. In each of these roles you are required to behave differently and exercise a variety of interpersonal options.

We have got different subsystems. The spouse subsystem is one of them. It is formed when two adults of opposite sex join with the express purpose of forming a family. It has its own specific tasks vital to the functioning of the family. We have another subsystem called the parental subsystem. With the birth of the first child, a new level of family formation is reached. Now a boundary must be drawn which allows the child access to both parents while excluding it from the spouse subsystem. Then we have the sibling subsystem when a second child is born. Here again a boundary must be drawn that separates two subsystems namely the spouse subsystem and the sibling subsystem.<sup>4</sup>

3) Boundaries

Boundaries are barriers that regulate the amount of contact with others. Individuals, subsystems, and whole families are demarcated by interpersonal boundaries. By managing proximity and hierarchy, the boundaries serve to protect the autonomy of the family and its subsystems. Subsystems need to be protected by boundaries. Otherwise it will limit the development of interpersonal skills achievable in these subsystems. For example, a dispute between parents need not be intervened by the children, nor every quarrel between siblings be settled by the parents. Every subsystem should be allowed to fight its own battles. Otherwise they will be handicapped in their dealings with others.

The boundaries of a subsystem are the rules defining who participates, and how. For a family to function properly, the boundaries of subsystems must be clear. They must be defined in such a way that the members of the subsystems carry out their functions without undue interference, but allow contact between the members of the subsystem and others. The clarity of boundaries is important. The clarity of boundaries within a family is a useful parameter for a counsellor to evaluate family functioning.<sup>5</sup>

Interpersonal boundaries can vary from rigid on one side and diffuse on the other with a clear boundary in the middle. Rigid boundary involves disengagement, diffuse boundary involves enmeshment and clear boundary involves normal range. They can be represented as follows:

Boundaries		
Type of Boundary	Associated with	Representation
Rigid Boundary	Disengagement	_____
Clear Boundary	Normal Range	.....
Diffuse Boundary	Enmeshment	.....

(1) Rigid Boundaries

Rigid boundaries are overly restrictive and permit hardly any contact with outside subsystems. This results in disengagement. Of course, disengaged individuals or subsystems are independent, nevertheless isolated. Its positive effect is that it fosters autonomy, growth, and mastery. But it can terribly limit warmth, affection and nurture. Perhaps only when the disengaged families come under extreme stress, mutual support is forthcoming.

Disengagement is a state that exists when persons, groups, nations, or machine parts are not connected to one another for the purpose of dynamic interaction. People experiencing disengagement also experience apathy, or lack of emotional response and delayed or absent response to persons around them. With regard to the family, disengagement results in a rigid boundary that prevents the various family members from being aware of and responding to normal stimuli of family life. Disengagement is viewed as negative or pathological because it leads to inadequate communication and to blighted patterns of primary socialization.

The manifestation of disengagement will be seen in the following ways:

1. A child has a need for bonding with parents.
2. Parents provide the infant with visual, touch and vocal stimulation as well as disciplinary direction.
3. The child responds with emotions of pleasure to the various attentions of parents. By disciplinary direction the child maximizes this pleasure and minimizes discomfort.
4. As the child is cycled through steps one, two, and three repeatedly, social habit develops within the context of primary socialization.
5. The child comes to expect steps one, two and three to happen as a matter of course.
6. On occasion, parents separate themselves from the process of giving the child stimulation and direction.
7. This separation breaks a pattern of expectation for the child.

8. Separated by the child's usual pattern, the child responds with emotions of displeasure or rage, independent actions of its own apathy and/or nonresponsiveness,
9. Emotions of displeasure and independent action result in the child receiving parental punishment.
10. The child learns to minimize the pain of parental punishment by becoming apathetic and nonresponsive.
11. In some families the parental separation involving the mother, father, or siblings becomes habitual.
12. When habitual filial and/or sibling separation occurs, the child will develop a habitual response pattern of apathy, atomism, and absence of (or delayed) responsiveness in its primary field of contact.<sup>6</sup>

## (2) Diffuse Boundaries

Diffuse boundaries result in enmeshed subsystems. It offers a heightened sense of mutual support, but there may not be independence and autonomy. If the parents are enmeshed, they spend a lot of time with the children. If children are enmeshed, they become dependent on their parents and less comfortable by being themselves. They will have problem relating to people outside their families.

The opposite of differentiation is known as fusion. To be fused will mean being stuck in a symbiotic or parasitic relationship. Love is an example of fusion. The relationship between mother and infant begins as a fused one. We are always driven by this need for fusion. But growing up will mean becoming a separate, distinct, self-supporting person responsible for meeting one's own needs. Indeed fusion is a powerful element in intimate relationship. In fusion we come to know the other almost as well as they know themselves. We can know the wants and wishes, thoughts and feelings of the other without the other even telling us. Problems arise only when the fusion is so intense to the extent that differences between family members are denied.

Enmeshment is essentially the failure of a family to draw clear boundaries between individuals or subsystems within the

family. Manifestation of enmeshment will be seen in the following ways:

1. When individuals marry, they develop certain roles and responsibilities that become routine and comfortable for them.
2. If they do not keep a sense of individual autonomy, however, one partner or both may attempt to live through the other one, or to control the other one.
3. A sense of belonging evolves but it requires a loss of autonomy from at least one partner.
4. When children are born, they become a part of the emotional fusion of the family and are controlled inappropriately by their parents or are looked to for the nurturance of the parents.
5. Cognitive and problem-solving skills may fail to develop among the children.
6. The parental subsystem and the sibling subsystem fail to differentiate, and some children in the family may assume functions that are actually parental functions, just as one parent may function in a childlike manner.
7. One parent may be excluded from a parent-child subsystem.
8. Any stress in the system or stress experienced by one individual tends to be magnified and may precipitate a crisis.<sup>7</sup>

## (3) Clear Boundaries

Clear boundaries strike a balance between the rigid and the diffuse, and are considered normal. There is enough of dependence and independence. There is enough of identity and separation. There is enough of embeddedness and separation. In a way they experience interdependence. These people are flexible not being overly rigid, or overly diffuse. First of all, when two people decide to join together to form a spouse subsystem, they must learn to accommodate to each other's needs and preferred styles of interaction. There should be a give-and-take attitude between them. The spouse subsystem should be demarcated by the boundary that separates it from parents, from children and from the outside world. Only a clear boundary will enable the children to interact with their parents but exclude them from the spouse subsystem. A clear boundary ensures some privacy for the couple. At the same time it establishes a hierarchical structure in which parents exercise a

position of leadership. If parents give their children their choice of food, that is respectful of them and they are flexible; whereas if they ask a toddler to decide if he needs to go to school, it is not a sign of clear boundaries. Complementary patterns, like pursuer-distancer, active-passive, dominant-submissive, are found in most couples. But exaggerated complementary roles can detract from individual growth. Moderate complementarity enables spouses to divide functions, to support and enrich each other. Exaggerated complementary roles will become pathological and create a dysfunctional subsystem. Counsellors need to recognize the workable patterns of structures and challenge only those that do not work.<sup>8</sup>

## 2. Normal Family Development

Families usually struggle with the problems of living. The absence of problems does not distinguish a normal family from its opposite. Only a functional family structure is a distinguishing mark of a normal family. First, couples have to adjust to each other; they need to rear their children; they have to deal with their parents; they have to cope with the demands of their jobs; and they must fit into their communities. These struggles are likely to change with developmental stages and situational crises.

The structural requirements for any new union are accommodation and boundary-making. In everyday living there are several items that need adjustment. Therefore the first priority is mutual accommodation. One of the spouses organizes the relationship along familiar lines and pressures the other partner to accommodate to them. Hence each has to adjust to the other person's expectations and wants. They have to come to an understanding regarding the major issues affecting their family lives. They need to coordinate daily rituals as well.

The second priority is boundary-making. These boundaries are first of all between them, as well as between them and the outside world. Each one's expectation of the boundary experience in marriage depends upon the boundary experiences they had had in their family of origin. Whether you had an enmeshed or disengaged boundary experience in your family of origin will determine your expectation in your marriage. Spouses need to define

their boundary separating them from their original families. It is a difficult task both for the spouses and their parents. In extended families the spousal subsystem is subjected to the larger extended family framework. It should be the other way about. The spousal subsystem should take precedence over the interest of the extended family system. Spouses need to separate themselves from the sibling subsystem once they have children. Now they will have a parental subsystem and a sibling subsystem. The boundary between these two needs to be defined. As children grow up in the family, parents need to constantly adjust to the growing demands of their children. This growing pain is not pathological. Nobody can clearly demarcate the line between the normal and abnormal families. All that one can say is that the normal families modify their structures to accommodate to changed circumstances whereas the pathological families increase the rigidity of structures that are no longer functional.<sup>9</sup>

## 3. Behavioural Disorders

Family dysfunction is the result of a combination of stress and failure to realign themselves to cope with stress. One of the most common expressions of fear of change is conflict-avoidance, when family members shy away from addressing the pain of facing each other with hard truths. Conflict can be avoided by disengaged families by avoiding contact, while enmeshed families do by denying differences or by constant bickering, which allows them to vent out feelings without pressing each other for change or resolution of the conflict. A method usually resorted to for conflict-avoidance between partners is diverting the conflict to the children. Instead of worrying about each other, the partners worry about the child. This strategy might reduce the strain on the partners but victimizes the child and so it is dysfunctional. Another version of this can happen in a way that one of the partners is overinvolved with the child while the other one is withdrawn. Each of the partners may be critical of each other's activity. The result is a cross-generational coalition between the overinvolved parent and the child, which excludes the other parent. Family members may be called upon to make structural adjustment when divorced, or when widowed spouses remarry. When it happens, such 'blended families' either readjust their boundaries or soon experience transitional conflicts.<sup>10</sup>

#### 4. Treatment Techniques

Structural family counselling is a counselling of action. It aims to modify the present, not to explore and interpret the past. Here the assumption is that since the past was instrumental in the creation of the family's present organization and functioning, it is manifest in the present too and will be available to change by interventions that change the present. Therefore the target of intervention in the present is the family system. The counsellor joins that system and uses himself/herself to transform it. The counsellor changes the position of the members of the system and thus change is brought about in the subjective experiences of the members. To do this, the counsellor relies on some of the properties of the family system. They are:

1. A transformation in its structure will produce at least one possibility for further change.
2. The family system is organized around the support, regulation, nurturance, and socialization of its members. Therefore, the counsellor joins the family not to educate or socialize it, but to repair or modify the family's own functioning so that it can better perform these tasks.
3. The family system has self-perpetuating properties. So, the processes that the counsellor initiates within the family system will be maintained in his/her absence by the family's self-regulating mechanisms.<sup>11</sup>

Structural family counsellors make use of the seven following steps to deal with couples and families:

##### 1) Joining and Accommodating

The terms 'joining' and 'accommodating' mean one and the same process. We use the word joining to emphasize the actions of the counsellor aimed directly at relating to family members or the family system. The word accommodation is used to emphasize the counsellor's adjustments of himself/herself in order to achieve joining. In order to join a family system, the counsellor must accept the family's organization and style and blend with them. By accommodating, the counsellor oscillates thus engaging and disengaging with the family; engaging in order to be immersed, and disengaging in order to evaluate.

Every family that comes for counselling has its own established homeostatic patterns. Nobody likes to be disturbed in the established homeostasis. A counsellor is an outsider who introduces himself/herself into the family system and disturbs the homeostasis. Because family members may consider the entry of the counsellor as an intrusion, they might resist the presence and intervention of the counsellor. The family members outnumber the counsellor. In such a situation, the counsellor needs to disarm their defences and ease their anxiety by conveying understanding and acceptance to every single member. Greeting each person by name and making some friendly contact is good initially. It is good to accept the hierarchical structure and organization of the family. This will mean allowing the parents to present the problem and then of course not ignoring the children; ask them to tell their version of the problem. The counsellor need not force a silent member to speak up. He/she could wait until the silent member feels comfortable to speak up. However, acknowledging and inviting the silent member to become involved and speak up when opportune should be extended. As a practical step, the counsellor could greet the family in a friendly way and ask for each person's view of the problem. This should be followed by careful listening and reflecting the content and feeling (what the counsellor hears and experiences).

For the sake of transforming the family system, the counsellor has to intervene so as to unbalance the system. Whenever it is done, it should indicate that you the counsellor have no preference and act in a way that is consonant with truth and justice. When unbalancing occurs by the coalition of the counsellor with any one member of the family, the other members experience stress and so they may insist on system maintenance. But the counsellor should make the members move towards the therapeutic goal while enduring the uncertainties of the transitional period. The counsellor can facilitate this process by his/her understanding, support, and confirmation of the family members' experiences and felt needs.<sup>12</sup>

##### 2) Working with Interaction

Family dynamics can be seen while the members are 'in action,' not in what they say happens or what the counsellor thinks

must happen. It is good to allow the family dynamics unfold by getting the family members to talk among themselves. Who speaks what, to whom and in what manner will indicate what the counsellor needs to know about the dynamics of the family. Who speaks, who keeps silent, who intervenes, how the children involve, and such things keep the counsellor informed of the working of the family firsthand.<sup>13</sup>

### 3) Diagnosing

It would not be surprising to note that family members conceive of problems as located in the identified patient and as determined by events from the past. This is done so that the counsellor may not disturb the family homeostasis. But family counsellors need to regard the identified patient's symptoms as an expression of dysfunctional transactional patterns affecting the whole family. First of all, a structural diagnosis broadens the problem beyond the individual(s) to family system. Secondly, it moves the focus from discrete events in the past to ongoing transactions in the present. The goal is to transform the family in a way that it benefits all of its members. Humans can get used to any situation. What we initially saw as pathological may become a normal course of action in our own eyes as the days pass by. This happens because in family counselling the counsellor is slowly inducted into the family dynamics. Therefore he/she is not able to perceive the problem areas as clearly as he/she saw them at the beginning. Therefore it is good to take note of the first impressions and assessments made by the counsellor, which can later be edited. Otherwise the counsellor may become blind to the obvious facts of the dynamics of the family. It is good to take into account both the problem the family presents and the structural dynamics they display.

What is meant by diagnosing is the working hypothesis that the counsellor evolves from his/her experiences and observations upon joining the family. It involves the counsellor's accommodation to the family to form a therapeutic system, followed by his/her assessment of his/her experiences of the family's interaction in the present.

The counsellor focuses on six major areas in assessing the family's interactions.

1. The counsellor considers the family structure, its preferred transactional patterns and the alternatives available.
2. The counsellor evaluates the system's flexibility and its capacity for elaboration and restructuring, as revealed by the reshuffling of the system's alliances, coalitions, and subsystems in response to the changing circumstances.
3. The counsellor examines the family system's 'resonance,' its sensitivity to the individual members' actions.
4. The counsellor reviews the family life-context, analysing the sources of support and stress in the family's ecology.
5. The counsellor examines the family's developmental stage and its performance of the tasks appropriate to that stage.
6. The counsellor explores ways in which the identified patient's symptoms are used for the maintenance of the family's preferred transactional patterns.<sup>14</sup>

### 4) Highlighting and Modifying Interactions

Naturally when families begin to interact, problematic transactions emerge. It is good to focus on process, not on content. Therefore let the counsellor look for who says what to whom and in what way. For example, when one of the members complains about another member, the counsellor could ask the other member to respond to the statement. Families do respond to intense messages. Intensity comes from being clear about the goal. Intensity can be achieved by selective regulation of affect, repetition, and duration. To raise the affective intensity of statements, tone, volume, pacing, and choice of words can be used. Intensity can also be achieved by extending the duration of a sequence beyond the point where the dysfunctional homeostasis is reinstated. For example, a teenager wanting to go out at night after 10 p.m. may create a scene so that his/her parents may allow him/her. If only the parents were to maintain their position without yielding, the teenager may not in future resort to the tactics he/she customarily uses. At times, intensity may require repetition of one theme in a variety of contexts. For example, infantilising parents (who do things for their children the things which they themselves can do) could be told not to do so.

By shaping competence, the counsellor can modify interactions. Intensity is used to block the stream of interactions, but shaping competence is like altering the direction of the flow by highlighting and shaping the positive. Instead of dwelling on the mistakes, the counsellor could concentrate on the right things that the members do. The counsellor needs to keep in mind that he/she need not do things that the clients can do for themselves.<sup>15</sup>

#### 5) Boundary Making/Marking Boundaries

One of the functions of the structural counsellor is to realign boundaries, increasing either proximity or distance between family subsystems. In an enmeshed family, members could be urged to speak for themselves; interruptions are blocked, and dyads are helped to finish conversation without intrusion from others. In a disengaged family the counsellor could intervene to challenge conflict avoidance, and to block 'detouring' in order to help disengaged members increase contact with each other. Structural counsellors attempt to move the family discussions from linear to circular causality by stressing the complementarity of family relations.

For the healthy functioning of the family, the family must protect the integrity of the total system and the functional autonomy of its parts. The counsellor's task is to facilitate the family to create the flexible interchange between autonomy and interdependency that will best promote the psychosocial growth of its members. First, the counsellor must delineate individual boundaries. The counsellor could give some ground rules to protect and promote individual autonomy. For example, all the members will stop talking and listen when one of them chooses to talk. Children should be differentiated, receiving individual rights and privileges according to their age and position in the family. Secondly, there should be clear demarcation of subsystem boundaries. For example, spouse subsystem boundaries should be protected from intrusion by the children or by adult members of the extended family.<sup>16</sup>

#### 6) Unbalancing

The aim of unbalancing is to change the relationship of members within a subsystem. It happens when families are stuck in a stalemate in conflicts. The members check and balance each other and as a result remain frozen in inaction. Evidently in unbalanc-

ing, the counsellor joins and supports any one individual or subsystem at the expense of others. Unbalancing is not done in a bid to prove who is right or wrong, but to unfreeze and realign the system. Ultimately balance and fairness are achieved since the counsellor takes sides in turn with various members of the family.

Escalating stress is one of the most radical strategies in the restructuring repertoire. Stress need not be taken as dysfunctional in the family system. On the contrary it can be used to demonstrate differences or to challenge a family system that is not functioning properly. To do this, the counsellor allies himself/herself with one member of the family to precipitate a crisis during the family session.<sup>17</sup>

#### 7) Challenging the Family's Assumptions

Structural family counsellors sometimes challenge the way family members perceive reality. Structural family counselling does not primarily take to cognitive treatment and yet it has found it useful to challenge the beliefs of the family members. Whatever we say from our memory is a 'narrative truth,' which has more influence than historical truth. What the family members present to the counsellors is partly historical truth and partly a construction. The constructions are the shared reality of a family. They represent mutual understandings and shared prejudices. Some of them are hopeful and helpful and some are not. There are times when the structural family counsellors act as teachers, offering information and advice based on their training and experience. This is done to reassure the anxious family members, to help them behave more competently, or to restructure their interactions. Counsellors also can use constructions that are pragmatic fictions to provide family members with a different frame of experience. For example, telling a child that he/she behaves younger than his/her age will effect a change in the child. At times, the counsellor may use paradoxes. Paradoxes are cognitive constructions that frustrate or confuse the family members into a search for alternatives. It is usually expressed as scepticism about the family member(s) changing. The members are impelled to prove by their behaviour that what the counsellor said was not true.<sup>18</sup>

# 7

## COGNITIVE-BEHAVIOURAL FAMILY COUNSELLING

Behavioural family counsellors started out using the learning theory techniques. These techniques were used to treat individuals and applied to the problems encountered by families. This has grown to such a state that it has developed a variety of powerful, pragmatic techniques that it administers to a variety of family problems. Its main emphasis is on parent training, behavioural couples therapy, and treatment of sexual dysfunctions.

The origin of behaviour family counselling is from the classical and operant conditioning. At the outset, the target behaviour is precisely specified in operational terms. Then operant conditioning, classical conditioning, social learning theory, and cognitive strategies are used to produce change in the target behaviour. Gradually behavioural counsellors began to address such traditionally nonbehavioural concerns as the therapeutic alliance, the need for empathy, the problem of resistance, communication, and problem-solving skills. At all times they are distinguished by their directive approach. They are known for their assessment and evaluation. In behavioural counselling, analysis of behavioural sequences prior to treatment, assessment of counselling in progress, and evaluation of final results are made. Since behavioural counselling believes that behaviour is determined more by its consequences than its antecedents, counsellors are explicit and direct.<sup>1</sup>

### 1. Sketches of Leading Figures

Behaviour counselling originates from the laboratory investigations of Ivan Pavlov, the Russian physiologist whose work on conditioned reflexes led to the development of classical conditioning. When we analyse classical conditioning, we find that an unconditioned stimulus (UCS), such as food, which leads to a re-

flex unconditioned response (UCR), like salivation, is paired with a conditioned stimulus (CS), such as the ringing of a bell. Now the conditioned stimulus begins to evoke the same response. The experiment done in animals was applied to abnormal behaviour in humans.

Later John B. Watson applied the classical conditioning principles to experimentally induce phobias. Classical conditioning was thought to have limited practical utility. In 1948, Joseph Wolpe introduced systematic desensitisation, which was used to treat phobias. Wolpe proved that anxiety is a persistent response of the autonomic nervous system acquired through classical conditioning. He argued that systematic desensitisation deconditions the anxiety through reciprocal inhibition, by pairing responses that are incompatible with anxiety to the previously anxiety-arousing stimuli.

Classical conditioning was used in family counselling especially for the treatment of anxiety-based disorders, including agoraphobia, sexual dysfunctions, and enuresis.

B.F. Skinner's operant conditioning had greater influence on behavioural family counselling. The term 'operant' refers to voluntary behavioural responses, as opposed to involuntary or reflex behaviour. The frequency of operant responses is determined by their consequences. Skinner proved that responses that are positively reinforced would occur more frequently while those that are punished or ignored will be extinguished. In operant conditioning, after identifying target behaviour, the counsellor quantifies its frequency and rate. Then, to complete a functional analysis of the behaviour, the counsellor notes the consequences of the behaviour to determine the contingencies of reinforcement. Skinner argued that behaviour problems could be dealt with directly, not merely as symptoms of underlying psychic conflict. Skinner's technique is particularly effective with children since parents have considerable control over reinforcers and punishments.

Behavioural family counselling was not developed by any single individual but we can identify three leaders who played a major role. They are a psychologist, Gerald Patterson; a psychiatrist, Robert Liberman; and a social worker, Richard Stuart.

Patterson developed methods for sampling periods of family interaction in the home. Liberman used the operant learning framework to family problems. Stuart transferred the operant principles used to modify children's behaviour to the couples in distress. He applied a reciprocal reinforcement paradigm in which couples learned to

1. List the behaviour they desired from each other,
2. Record the frequency with which the spouse displayed the desired behaviour, and
3. Specify exchanges for the desired behaviour.

Tokens were used for reinforcers. Mutual exchanges were based on written contracts. The early stage of behavioural family counselling depended almost entirely on operant conditioning, especially with behavioural problems that were relatively straightforward stimulus-response exchanges.

In the 1970s behavioural family counselling was developed into three major packages, such as parent training, behavioural couples therapy, and sexual therapy. There had been some new development, namely, that many nonbehavioural family counselors selectively include behavioural interventions in their work. For example, Minuchin used operant conditioning in his work with anorexia nervosa. There has been a rapprochement between stimulus-response conditioning models and cognitive theories. Presently the leading figures in behavioural couples counselling are Robert Weiss, Neil Jacobson, Richard Stuart, Michael Crowe, Ian Falloon, Norman Epstein, and Gayola Margolin.<sup>2</sup>

## 2. Theoretical Formulations

In behavioural family counselling, one comes across a number of terms with their special meaning even though they are used interchangeably. They are, for example: learning theory, behaviour modification, behaviour therapy, and social learning theory.

Learning theory refers to the general body of principles discovered in laboratory experiments on learning and conditioning.

Behaviour modification and behaviour therapy have been used interchangeably. Yet behaviour modification adheres to strict

operant procedures, while behaviour therapy is associated with counterconditioning methods for treating anxiety. But now, behaviour therapy is commonly used to refer to all operant and nonoperant behavioural treatments.

Social learning theory is a broad approach to human behaviour, integrating principles from social, developmental, and cognitive psychology along with those principles of learning derived from experimental psychology. In it, the environmental influences are the primary concern.

For behaviour counselling, the central premise is that behaviour is maintained by its consequences. Therefore it follows that a behaviour resists change unless more rewarding consequences result from the new behaviour. Elaborating the consequences of behaviour, as well as the cues that elicit it, requires an understanding of stimuli and reinforcements. Learning theorists speak of four different stimulus functions: eliciting stimuli, discriminative stimuli, neutral stimuli, and reinforcing stimuli.

Eliciting stimuli are aspects of a situation that reliably produce a response. This is precisely the case of classical conditioning, where certain eliciting stimuli are known to produce reflexlike responses. We have discriminative stimuli when a particular response will be followed by a certain consequence. Because of the past association of those stimuli with those consequences, discriminative stimuli have acquired a cueing function making particular responses more probable. This is because of the earlier association. When we, for example, receive many commands from our superiors, we make out from our past experiences which commands are really meant.

We have neutral stimuli that have no direct relationship to behaviour, but conditioning can establish a link between a previously neutral stimulus and a response. Classical conditioning of Ivan Pavlov is a case in point.

The last one is reinforcing stimuli that are the consequences of behaviour that affect the probability of future responses. They are so to say cues that the reinforcement will follow.<sup>3</sup>

1) Responses

Responses are understood as respondent or operant. Respondents are those that are under the control of eliciting stimuli, and their consequences do not usually affect their frequency of occurrence. Operants are those behaviours that are not automatically elicited by some stimulus, but whose occurrence is affected by their consequences. From what we have said, it is clear that operants are causes while respondents are effects. It is a linear viewpoint but when we think in terms of circular causal chains of systems, the distinction between these two responses is not useful. There are some responses, which may not be recognized as operants (something done to get something) just because we are not aware of the reinforcing payoffs. For example, temper tantrum is usually reinforced by attention. Even though the attention may be unpleasant (like yelling), it may be the most social interaction that the child receives. Therefore, responses are often maintained under conditions that are counterintuitive.<sup>4</sup>

Responses	Respondent (those that are under the control of eliciting stimuli, and their consequences do not usually affect their frequency of occurrence)
	Operant (Behaviours that are not automatically elicited by some stimuli, but whose occurrence is affected by their consequences)

2) Reinforcements

Reinforcements are those consequences that affect the rate of behaviour, either accelerating or decelerating it. So if consequences accelerate behaviour, then they are called reinforcers, while those that decelerate behaviours are known as punishers. Reinforcers can be either positive reinforcers, positive or rewarding consequences or negative reinforcers, aversive consequences terminated by a response. Thus one can make a postpsychiatric patient to wash his/her clothes by rewarding him/her after he/she does it, or negatively reinforce him/her by nagging until he/she does it.

Punishment can be either aversive control, such as yelling or spanking, or withdrawal of positive consequences, such as having

to sit in the corner or being asked not to go out for a week. Negative reinforcement and punishment are often confused but they have distinctly different meanings. Reinforcement and punishment can be either primary or secondary. Primary reinforcers are natural or biological outcomes, including sex and food. Primary punishments are physical pain or loud noises. Secondary reinforcers are those that have acquired a positive meaning through social learning, like praise or eye contact. Secondary punishments are criticism or withdrawal of attention. Attention as such has a very powerful influence on behaviour. Therefore focusing attention on undesirable behaviour often provides unintended social reinforcement.

Reinforcements (Consequences that affect the rate of behaviour)	1. Reinforcers (Consequences accelerate behaviour)	<ol style="list-style-type: none"> <li>1. Positive (Positive or rewarding consequences)</li> <li>2. Negative (aversive consequences terminated by a response)</li> </ol>
	2. Punishers (Consequences that decelerate behaviour)	<ol style="list-style-type: none"> <li>1. Primary (Natural biological outcomes, including sex and food)</li> <li>2. Secondary (The ones that have acquired a positive meaning through social learning, like praise or eye contact)</li> </ol>

Extinction will occur when no reinforcement follows a response. Inattention is the best response one can think of to meet a behaviour we do not like. The relationship between a response and its consequences defines the contingencies governing that response. Reinforcement schedules describe the relationship be-

tween responding and the occurrence of consequences. When reinforcement occurs at irregular intervals, the response becomes more resistant to extinction. We can easily reinforce simple responses but it is difficult to learn a response that is not yet in one's repertoire. For this we have the technique called successive approximation, or shaping. We can shape someone's behaviour by paying attention to and praising the person's gradual development of the component skills of the behaviour being learned. Modelling is another technique to learn complex or new behaviour. Modelling is a short-cut technique in the place of trial-and-error learning.

In all the techniques we spoke of, counsellors seem to ignore thoughts and feelings. But now behaviour counsellors are increasingly aware that people not only act but also think and feel. Nowadays inner events such as cognitions, verbalizations, and feelings are recognized as events that function as stimuli in controlling the behaviour. Behaviour counsellors shifted their attention from individuals in isolation to family relationships. For this to happen, they rely on Thibaut and Kelley's theory of social exchange, according to which people strive to maximize rewards and minimize costs in their relationships. In the marital context, this behavioural economics provides a basis for understanding the reciprocity that develops between spouses. What we can observe in a successful marriage is that both partners work to maximize the mutual rewards, and minimize the costs. Behaviour exchanges follow a norm of reciprocity over time, so that aversive or positive stimulation from one person tends to produce reciprocal behaviour from another. Thus your pleasantness will beget pleasantness and likewise your nastiness begets nastiness.<sup>5</sup>

### 3. Development of Behaviour Disorders

The view of the behaviourists is that symptoms are learned responses, involuntarily acquired and reinforced. According to them there is no underlying meaning in symptoms, and they do not posit conflict in or between spouses as leading to problems in children. They concentrate on the symptoms themselves and look for environmental responses that reinforce the problem behaviour. One wonders why people should reinforce undesirable behaviour that

causes them so much pain. The reason does not reside in a motive for suffering, but in the simple fact that people often inadvertently reinforce precisely those responses that cause them the most distress.

It is likely that punishment will produce the opposite effect from what is intended. For misbehaviour if you use punishment even by shouting, that is an attention, which reinforces the behaviour. To get that attention one may misbehave. Attention is an extremely powerful social reinforcer. Parents, who respond to problem behaviour in their children by scolding and lecturing, though looking like punishment, may in fact be reinforcing because of the attention the child gets. Ignoring is one of the best ways in such situations. When we ignore some misbehaviour, we need to do it consistently; otherwise things will become worse since intermittent reinforcement is the most resistant to extinction. Punishment should be effective. If you make threats, you should follow through. Punishment should neither be that mild that it is not effective, and nor so severe to cause fear and anxiety, instead of discriminative learning.

Behavioural family counsellors have identified a number of defective patterns of reinforcement in cases of marital discord. Azin, Naster, and Jones give us eight causes of marital discord:

1. Receiving too little reinforcement from the marriage.
2. Too few needs given marital reinforcement.
3. Marital reinforcement no longer provides satisfaction.
4. New behaviours are not reinforced.
5. One spouse gives more reinforcement than he or she receives.
6. Marriage interferes with the extramarital sources of satisfaction.
7. The communication about potential source of satisfaction is not adequate.
8. Aversive control predominates over positive reinforcement.

The major determinant of marital unhappiness is the use of aversive control. Usually we notice in dysfunctional marriages, spouses reacting to problems with attempts at aversive control like

nagging, crying, withdrawing, or threatening. These things usually alienate each other. But on the contrary, if they learn to shape positive alternatives, it will enhance their marriage. One notices in distressed marriages, there are less of rewarding exchanges and more of punishing exchanges – verbal and instrumental. What happens in such situations is that spouses typically reciprocate their partners' use of punishment, and this creates a vicious circle. Whenever there is a failure to exchange benefits, the reward system shifts from positive to aversive control. Couples in distressed families may have poor problem-solving skills – like changing the subject while discussing important issues, phrasing wishes and compliments in vague and critical ways, and responding to complaints with countercompliments.<sup>6</sup>

#### 4. Treatment Techniques

Behavioural family counselling is used mainly for parent training, couples counselling, family counselling, and treatment of sexual dysfunction. We shall deal with these three separately.

##### 1) Behavioural Parent Training

For most family counsellors, the family (not the individual) is the problem. But on the contrary, behavioural counsellors accept the parents' view that the child is the problem and so they meet with only the child with one parent and in some cases they meet with both the child with the parents and older siblings. Their approach is straightforward with simple strategies. They apply experimental principles to clinical problems and carefully verify the results of their procedures. The techniques used are operant conditioning, respondent conditioning, and cognitive/affective techniques. What is used most often is operant conditioning, where the reinforcers employed may be tangible or social. Counsellors found that smiling, praise, and attention are as effective as money or candy. Operant techniques include: shaping, token economies, contingency contracting, contingency management, and time out.

Shaping refers to reinforcing change in small steps that gradually approximate the desired goals. Token economies use a system of points or stars to reward children for successful behaviour. Once the children accumulated a sufficient number of tokens, they collect a reward. Contingency contracting involves agreements by the

parents themselves to make certain changes following the changes made by their children. For example, if the child passes the exam in first class, he/she will be given a bicycle. Contingency management is giving and taking away rewards and punishments based upon the child's behaviour. Time out is a punishment where the child is made to sit in the corner or sent to its room.

Respondent conditioning techniques are modification of physiological responses. Among them the most common are: systematic desensitisation, assertiveness training, aversion therapies, and sex therapies. The most commonly used cognitive/affective techniques include thought-stopping, rational emotive behaviour therapy, modelling, reattribution, and self-monitoring. Parents usually complain of personality traits rather than problem behaviour. For example, they may say that their son is hyperactive. Counsellors need to know what the boy is doing when he is hyperactive. Also the counsellor needs to enquire what the parents do when their son is hyperactive. Thus asking for detailed descriptions elicits information about the frequency, intensity, duration, and social consequences of the problem behaviour. Then comes the measurement and functional analysis stage, which consists of observing and recording the target behaviour, as well as its antecedents and consequences. The stage that follows is the one in which the counsellor designs a specific treatment package to match the particular needs of the family.

Once the assessment is complete, the counsellor decides on which behaviour should be increased and which one is to be decreased. In order to accelerate a behaviour, the Premack principle is used. This principle says that a high probability behaviour (particularly pleasant activities) is chosen to serve as a reinforcer for behaviour with a low probability of occurrence. For a child that does not take a shower every day, its TV watching can be made contingent on taking a shower. For decreasing a behaviour, deceleration techniques apply contingent punishment and extinction. The most common technique for decelerating behaviour is time-out from positive reinforcement. This means ignoring or isolating the child after it misbehaves. Research has confirmed that a duration of about five minutes is most effective. Usually children are to be warned beforehand in order to give them a chance to control

their own behaviour before they are put into time-out. Parents could also use verbal reprimand, ignoring, and isolation. But simply repeating commands to the child is the most ineffective way to change its behaviour.

Counsellors could observe parent and child interaction behind a one-way glass screen in the clinic. In this method, parents can be taught how to play and discipline their children. This is useful in dealing with small children and preadolescents. But with teenagers it is better to use contingency contracting. In this technique, everybody in the family gets something by making compromises. Both parents and teenager are asked to specify what behaviour they would like the other to change. In this there should be a clear communication of content and feelings and clear presentation of demands –leading to negotiation with each person receiving something in exchange for some concession. It is always good to start with easy issues.<sup>7</sup>

## 2) Behavioural Couples Counselling

Couples counselling begins with an elaborate, structured assessment process. This may include clinical interviews, ratings of specific target behaviours, and standard marital assessment questionnaires. Assessment is meant to reveal the strengths and weaknesses of the couple's relationship and the manner in which rewards and punishments are exchanged. Relationship skills too are evaluated –like the ability to discuss problems, current reinforcement value for one another, skill in pinpointing relevant reinforcers, competencies in sex, childrearing, financial management, distribution of roles, and decision-making. After the assessment comes the analysis of the couple relationship in social learning terms. It has been noted that couples express what is to be decelerated rather than accelerated. Couples can be coached to give positive feedbacks. Dysfunction of couple relation is the result of low rates of positive reinforcement. A major treatment strategy is to increase positive control while decreasing the rate of aversive control. Another major strategy is to improve communication, which is hoped to facilitate the couples' ability to solve problems. It was Stuart who proposed five intervention strategies that summarize the behavioural approach to treating troubled marriages. They are: 1. Couples are taught to express themselves in clear,

behavioural descriptions, rather than in vague and critical complaints. 2. They are taught new behaviour exchange procedures emphasizing positive, in place of aversive, control. 3. They are helped to improve their communication. 4. They are encouraged to establish clear and effective means of sharing power and making decisions, and 5. They are taught strategies for solving future problems, as a means of maintaining and extending gains initiated in therapy.

Stuart used the operant method of exchanging token as rewards for targeted desired behaviours. Later refinements of this approach dispensed with tokens, but mutual exchanges were based on written contracts. His contingency contracting and principles of enhancing the mutual positive reinforcement potential of family members have been used widely by behavioural family counsellors. Couples were asked to express their wishes and annoyances specifically and behaviourally. One way of doing this is to ask each spouse to list three things that he/she would like the other to do often. A variant of this method is that each partner thinks of things the other might want and do to see the results. Yet another method is to celebrate 'love days' during which each one doubles his/her pleasing behaviours towards the other. This could be also called 'caring days.' It will become evident to notice that these procedures are meant to help couples establish reinforcement reciprocity, based on rewarding behaviour, in place of coercion. Of course we may agree that positive control is more pleasant and effective than aversive control. Partners need to say what they want than expect the other to intuit it. Research has proved that disagreement and angry exchanges may not be harmful in the long run. May be it means dissatisfaction at the present but later they may get on well with each other. On the contrary defensiveness, stubbornness, and withdrawal from conflict leads to long-term deterioration in marriages.

Group format is the ideal setting for training in communications skills. It may involve instruction, modelling, role-playing, structured exercises, behavioural rehearsal, and feedback. Couples can be specific, express requests in positive terms, respond directly to criticism instead of cross-complain, talk about the present and future rather than the past, listen without interruption, minimize punitive statements, and eliminate questions that sound like declarations.<sup>8</sup>

### 3) A Cognitive-Behavioural Approach to Family Counselling

It was from the behavioural approach that the cognitive couples therapy developed. First it came as a supplemental component to the behavioural approach and gradually became a more comprehensive system of intervention. The same pattern of progression took place for the cognitive family therapy too. There are eighteen different types of cognitive therapy used by counsellors. Let us consider some of the most prominent ones.

Albert Ellis is the founder of the Rational Emotive Behaviour Therapy (REBT). He concentrated on individuals' perceptions and interpretations of events that occur in the family. What is presumed here is that family members create their own world by the phenomenological view they take of what happens to them. The counsellor concentrates on how the particular problems of the family members affect their well-being as a unit. In this method, family members are treated as individuals, each of whom subscribes to a particular set of beliefs and expectations. The family members realize that their illogical beliefs and distortions serve as the foundation for their emotional distress. This method illustrates that it is not the events that cause emotional distress but the beliefs about the events. Therefore they are assisted to dispute their irrational beliefs. By this method they are put on a more rational basis. The counsellor teaches the family actively and directly that emotional problems are caused by irrational beliefs and that by changing these self-defeating ideas, they can improve the overall quality of the family relationship. Perhaps here there is no uncovering of the core schemata, which are deeper assumptions; there is not much awareness of the family systems dynamics.

The cognitive-behavioural approach takes a more expansive and inclusive approach by focusing in greater depth on patterns of family interaction and by remaining consistent with the elements derived from a systems perspective. Family relationships, cognitions, emotions, and behaviour are viewed as exerting a mutual influence on one another, so that a cognitive inference can evoke emotion and behaviour, and emotion and behaviour can likewise influence cognition. Cognitions, feelings, behaviour, and environ-

mental feedback are in constant reciprocal interaction among themselves and sometimes serve to maintain the dysfunction of the family unit. The fact that members of a family simultaneously influence and are influenced by each other is shared by the cognitive-behavioural approach and the systems theory. Thus, the behaviour, cognitions, and emotions in the other members elicit reactive cognitions, behaviour, and emotions in the original member. In this process, the family dynamics escalates, rendering the family vulnerable to negative spirals of conflict. There are four means identified by which family members' cognitions, behaviour, and emotions may interact and build to a volatile climax. They are: 1. The individual's own cognitions, behaviour, and emotion regarding the family interaction, 2. The actions of individual family members toward him or her, 3. The combined (and not always consistent) reactions several family members have toward him or her, and 4. The characteristics of the relationships among other family members. These serve as stimuli during the family interactions and often become ingrained in family patterns and permanent styles of interaction.

Aaron Beck's method is called cognitive therapy (CT), which places a heavy emphasis on schema or core beliefs. Just like individuals have their own schemata, family members too have their own joint beliefs about their family, which is called 'family schemata.' These family schemata are the jointly held beliefs about the family –formed as a result of years of integrated interaction among the members of the family unit. We are supposed to have two separate sets of schemata about families: one is related to our parents' family of origin, and the other is related to families in general. In any case both types have a major impact on how we think, feel and behave within the family setting. The family of origin of each partner in a relationship plays a crucial role in the shaping of the immediate family schema. It is hoped that the beliefs, whether conscious or unconscious, passed down from the family of origin contribute to a joint or blended schema that leads to the development of the current family schema.<sup>9</sup>

Cognitive-behaviour family counselling is in its infancy and needs a lot more research. All the same it is recognized as a major theoretical approach.

#### 4) The Treatment of Sexual Dysfunction<sup>10</sup>

At times counsellors may find it difficult to decide whether to focus directly on sexual problems or to treat them as a symptom of underlying problems in the relationship. Sometimes working on the interpersonal relationship, sexual problems could be resolved indirectly. There are times when intractable interpersonal problems can be resolved only with the improvement in a couple's sexual relationship. One needs to have informed clinical judgement in order to treat the sexual dysfunction directly. Wolpe (1958) introduced systematic desensitisation that was a major advancement in treating sexual dysfunction. Wolpe considered most sexual problems as the result of conditioned anxiety. He advocated a therapy in which couples were instructed to engage in a graded series of progressively more intimate encounters, avoiding thoughts about erection or orgasm. As a complement to desensitisation came assertive training. This helps persons who are socially and sexually inhibited to accept and express their needs and feelings.

##### (1) Assessment

A breakthrough came with the publication of the Masters and Johnson's (1970) approach. It was presumed that anxiety interfered with couples' ability to relax into arousal and orgasm. Most sex therapists follow a general approach to treatment. The first step is a careful and thorough assessment. It automatically includes a complete medical examination to rule out organic problems. Then the nature of dysfunction is understood and goals are set. In nonorganic problems, lack of information, poor technique, and poor communication in the sexual area are the most amenable to sexual therapy. Brief treatments are usually helpful to people who are suffering from premature ejaculation, vaginismus, or orgasmic dysfunction. Ejaculatory incompetence, erectile failure, and longstanding lack of sexual desire are generally known to be more difficult to resolve. Kaplan (1979) is of the opinion that there are three types of problems corresponding to the three stages of sexual response. They are: disorders of desire; arousal disorders; and orgasm disorders. Disorders of desire can be from low sex drive to sexual aversion. With the highly motivated clients, success is possible. Usually counselling consists of deconditioning anxiety,

and helping clients identify and stop the negative thoughts that interfere with sexual desire. In arousal disorders, there are decreased emotional arousal and difficulty achieving and maintaining an erection, or dilating and lubricating. Clients with such problems are helped with a combination of relaxation techniques, and teaching couples to focus on physical sensations involved in touching and caressing, instead of worrying about what comes next. In orgasm disorders, what is involved is the timing of orgasm (e.g., premature or delayed), the quality of the orgasm, or the requirements for orgasm (e.g., some people only have orgasm during masturbation). Premature ejaculation and lack of orgasm may respond to sex therapy. In the latter case, the woman can be taught to practice on her own and learn to fantasize.

##### (2) Insight and Attitude Change

Once the assessment is over, the couples are presented with an explanation of the role of conditioned anxiety in problems with sex, and how anxiety is developed and is being maintained in their sexual relationship. Behaviour counselling believes in insight and attitude change as fundamental to the treatment. Changing attitude is of great value in treatment. Once I was counselling a couple on sexual issues. The husband wanted frequent sexual intimacy whereas the wife was not interested so frequently. As they both were working full time, they could engage in a relaxed mood only during the weekends. But the wife would undertake all kinds of works in order to avoid sexual intimacy. While in the session I asked her what makes her too busy during the weekend, she replied that life is not meant only for sex. Here her attitude towards sex indicated that it is good enough to have sex once in a way but not more often. I have also met couples who consider sexual intimacy as a necessary sin and so after the act they feel guilty. To repeat, attitude is an important determinant of sexual problems.

##### (3) Sensate Focus

Most treatments start with sensate focus. It involves teaching the couple how to relax and enjoy touching and being touched. They take turns to gently caress each other. The one being touched will relax and concentrate on the feeling of being touched and

later let the partner know which touch is most pleasing and which is less so. At the beginning they are to avoid touching the sensitive parts like breasts or genital areas in order to avoid undue anxiety. After this, the couple is asked to become more intimate gradually but should slow down if any one of them becomes anxious. When anxiety drops, desire may mount and this is the time when the couple needs to engage in progressively more intimate exchanges. During this time the couple is asked to communicate what they like and what not. Besides, it is good to say what type of stroke or touch each one likes. Instead of enduring an unpleasant touch until one explodes with anger, it is good to communicate to the partner at the very beginning in a very gentle manner. The couple is taught not only to communicate when they want sex but also when they do not want sex.

#### **(4) Tailored Techniques**

After the sensate focus exercise, the couple is introduced to specific techniques tailored to their problems. For women, the most common problem is orgasm. This problem seems to be rooted in lack of information. One may expect the woman to have orgasm during intercourse without additional clitoral stimulation. For men, the most common problem seems to be premature ejaculation for which the squeeze technique is used. In the squeeze technique, the woman stimulates the penis of the man until he feels the urge to ejaculate. At that time, the woman squeezes the fraenum (at the base of the head) firmly between her thumb and first two fingers until the urge to ejaculate subsides. After a while stimulation can be resumed and then followed by another squeeze. For erectile failure, the counsellor counsels the man how to reduce the performance anxiety and increase sexual arousal. Usually desensitisation of the man's anxiety is undertaken. There could be discussions in which the partners describe their expectations. They could increase the variety and duration of foreplay. There is also the 'teasing technique,' in which the woman alternately starts and stops stimulating the man. The couple could also start intercourse with the woman guiding the man's flaccid penis into her vagina.

## 8

# STRATEGIC FAMILY COUNSELLING OF JAY HALEY AND CLOÉ MADANES

### **1. Sketches of Leading Figures**

The prominent proponents in the strategic family counselling model are Jay Haley and Cloé Madanes. Theirs is called 'communication' therapies. In strategic counselling, the counsellor initiates what happens during treatment and designs a particular approach for each problem. In this model the counsellor takes the initiative and responsibility for directly influencing family members. The counsellor's intention is to have some influence, however temporary it could be, in order to bring about beneficial change. The main concern of the counsellor is about the theory and means for inducing change. The prominent figures besides Jay Haley and Cloé Madanes are Milton Erickson, the Mental Research Institute (MRI) group (including John Weakland, Paul Watzlawick, Richard Fisch, Arthur Bodin, and Carlos Sluzki), Gerald Zuk, Lynn Hoffman, Mara Palazzoli-Selvini and associates in Milan, Italy, and Richard Rabkin. Let us now consider the commonalities among the major strategic approaches represented by the above groups. We specially give attention to the general principles that apply to most of them.<sup>1</sup>

### **2. The Basic Beliefs**

Strategic family counselling operates with the beliefs that 1. counselling should be brief, 2. people are not pathological, and 3. clients can change rapidly. The strategic school applied Gregory Bateson's ideas directly to family treatment, resulting in a set of creative ways to generate change, and outwit the resistance, in families seen as cybernetic systems. In the 1970s and early 1980s, strategic methods were amply used but later in the 1990s the strategic

family counselling method seen as ‘therapist-as-expert-manipulator’ was rejected in favour of ‘therapist-as-collaborator.’ All the same this approach contains the elements of sophisticated understanding of family complexities and powerful techniques. They are useful in family counselling.<sup>2</sup>

### 3. The Interest in Changing Behaviour

The strategic counsellors were more interested in changing behaviour than in understanding them. Therefore one will find more literature on techniques than on theories. They are ever active in designing novel strategies for solving problems. In a way they are pragmatic. The one who influenced the thinking of strategic counsellors is Milton Erickson. Milton Erickson was not in agreement with what was the psychiatric tradition of his time. Psychoanalysts were not concerned about the symptoms since they believed that symptoms only represented the tip of the intrapsychic iceberg. But Erickson was symptom- or problem-focused. Unlike psychoanalysis, Erickson found the unconscious mind a source of wisdom and creativity. Therefore, if unfettered by conscious inhibition, it could solve problems and heal symptoms. So he did not advocate the traditional attempts to foster insight through interpretation. He was of the opinion that deep down the clients knew what to do. Perhaps, he thought, the clients did not have access to that wisdom. Therefore he proposed that one way to get access was to break out of habitual patterns of behaviour and thinking. For that he developed a number of clever ways of getting people to simply do something different in the context of the old behaviour, or to do the old behaviour in a new context.

Erickson, because of his association with hypnosis, was convinced that clients could change quickly and so he made therapies as brief as possible. If there were any failure, he would not attribute it to resistance but would find ways to bypass or use resistance. By using hypnotic techniques, he applied paradoxical techniques. For example, to induce trance, he would ask the client to keep the eyes open until they become unbearably heavy instead of telling them straight away to close the eyes. Thus rapid change and utilization of resistance became the cornerstones of strategic family counselling. Added to that, the cybernetic concepts of Bateson

were introduced into counselling. Strategic counsellors borrowed the concept of the positive feedback loop from cybernetics.<sup>3</sup>

### 4. The Healthy Families

Though the strategic therapists were keenly aware of normal family developmental patterns, they were more concerned about dysfunctional than healthy families. Strategic counsellors argue that healthy families are less preoccupied with themselves and their own motivations or problems, showing less interest in any kind of search for insight. Bateson is of the opinion that a great deal of growing up, of maturation in the normal environment, does not depend on insight at all. In conformity with what Bateson said, Erickson commented that if you look over the lives of happy, well-adjusted people, they have never bothered to analyse their childhood or their parental relationships. Among the writings of strategic counsellors, one area that stands out obviously is the normal vs. dysfunctional family differences in the family developmental life cycle. Every family undergoes normal transitional steps or stages over time. These can be potential crises points. Most families usually ‘weather’ these crises points without much difficulty. But dysfunctional families are unable to make such transitions smoothly. Haley finds that in normal families the hierarchies and structures are usually in line with the cultural practices. He observed that in most societies, parents are expected to be in charge of their children. Cross-generational coalitions, such as one parent-child dyad siding against another parent-child dyad, are not known to be common. There is hardly any confusion in healthy families regarding the hierarchical organization and there is a general adherence to the socially sanctioned hierarchical structure. In dysfunctional families, there is confusion in hierarchy with cross-generational coalition being common.<sup>4</sup>

### 5. Dysfunctional Families

#### 1) Symptoms

Symptoms are viewed by strategic family counsellors as the resultants or concomitants of misguided attempts at changing an existing difficulty. These symptoms make things worse. For example, asking a depressed person to cheer up may worsen the con-

dition. Individual problems are manifestations of disturbances in the family. A symptom is a communicative act, with message qualities, which serves as a sort of contract between two or more members and has a function with the interpersonal network. It is viewed as a label for a sequence of behaviour within a social organization. What we observe is that a symptom usually appears when a person is in an impossible situation and is trying to break out of it. Thus the person is locked into a sequence or patterns with the rest of the family or significant others and cannot see a way to alter it through nonsymptomatic means. In this perspective, the family is an interpersonal system, which is in many ways analogous to other cybernetic systems. It is considered to be of the nonlinear type with complex interlocking feedback mechanisms and patterns of behaviour, which repeat themselves in sequence.<sup>5</sup>

## 2) Life cycle

Strategic counsellors make use of the family developmental process as a framework for explaining symptomatology. The problems of the dysfunctional families are the results of not being able to adjust to transitions, which occur within the family life cycle. The members become stuck at a particular point.

Though family members tend to endure problems in their lives, there are special developmental challenges that members must meet as the family evolves in order to remain stable and gratified. Challenges are usually met well by the competent families and poorly by the inept ones. Boss provides a chart of normative transitions for couples, which she terms as 'life span boundary changes.' She tries to see family life cycle changes from the vantage point of boundaries between family members and those outside the family. Generally the changes include formation of the dyad, birth of the first child, children first going to school, job-related parent/spouse absence or presence, adolescent children leaving home, taking in children not your own or blending children from different dyads, loss of a spouse, loss of parents, remarriage or remaining single.

The first one, formation of the dyad, requires leaving home which is one's family of origin and becoming an adult in a new household. Now a new family is formed. Family loyalties may

become confusing, especially when loyalty to one's parents seems to require remaining a child. Here there is the possibility of triangulation when one of the partners joins the family of origin. This weakens the husband-wife bond. The birth of the first child is a second dramatic challenge to the couple with the threat of triangulation. The mother-child relationship may alienate the husband/father. This is particularly stressful for the new father. When children start going to school, parents experience loss resulting from the growth and development of their children. Of course job-related absences are increasingly common for both sexes. This stresses the couple dyad and requires a wider range of adaptiveness. When adolescent children leave home, the parents feel depressed. With the increasing divorce and remarriage rate, taking in children not one's own is challenging. Disciplining nonbiological offspring is very difficult. There are many subtleties of relationships with stepchildren, half-siblings, or foster children. There will be boundary problems when a child lives part of the time in one home and part of the time in another with a different set of family rules and limits. Then may come the loss of spouse: beyond the couple dyad, outside networks are necessary for a sense of well-being. The death of parents can also trigger regression and system conflict. There may be also issues after the death of a spouse if one should remarry or remain single. New marriages of older couples present tremendous challenges in negotiating new family rules and new ways of doing the simple everyday things.<sup>6</sup>

## 3) The Triads and Hierarchies

Family counsellors have identified the triangles as the basic building blocks of any emotional (interpersonal) system. It happens in the following way: When tension between members of a two-person system becomes high, usually a third person is brought into the picture. Now a family, which is an emotional system, is composed of a series of interlocking triangles. Most children problems include a triangle consisting of an overinvolved parent-child dyad (a cross-generational coalition) and a peripheral parent. Therefore it is commonsense to realize, that when a child displays symptoms, at least two adults are involved in the problem and the child is both a participant and a communication vehicle between them. Conflicts can cut across several levels in familial hierarchy. One is

disturbed in direct proportion to the number of malfunctioning hierarchies in which one is embedded. From the strategic counselling point of view dysfunction can be summarized as: 1. Symptoms can be viewed simply as particular types of behaviour functioning as homeostatic mechanisms, which regulate the family transactions. 2. Problems in an identified patient cannot be considered apart from the context in which they occur and the functions which they serve. 3. An individual cannot be expected to change unless his/her family system changes. 4. Insight per se is not a necessary prerequisite for change.

Coalitions between two points of a triangle serve two functions. They are firstly to reduce anxiety and secondly to control the third point of the triangle. It is normal in every family to experience coalition. Coalition usually helps those who are weak. It provides both additional support and additional strength to a person who is feeling anxious and weak. It might help us deal with our poor self-esteem and increase our influence. In coalitions, the inside person appears good and attractive, and the outside person appears bad and unattractive. In coalition we tend to distort reality. At the end, one feels disillusioned and ends up feeling weaker or taken advantage of. There could be secret coalition(s) in families. They are difficult to deal with since they are not openly acknowledged.

A common phenomenon of coalition is between parents and 'the good child' against 'the bad child.' The bad child is scapegoated. Scapegoating is common in all groups. It is known to be the normal way to handle anxiety. When scapegoating is done, family members covertly agree that only one has the problem and the rest are fine. Scapegoating is a means of dealing with the anxiety one feels about one's own sense of self and about being in close relationships. When scapegoating happens, attention is focused on the problem child, which means that there are deeper, more basic issues being ignored in the family. Those issues are between the mother and the father and their anxiety about their relationship with each other. Their anxieties stem from their experience in their families of origin, which they have never looked at or dealt with. Scapegoating can take place in such a way that even the scapegoat may not realize what is happening. Surprisingly the scape-

goat is rarely an innocent victim. It looks as though the scapegoat, quite unconsciously, volunteers for the role and almost on purpose does things that the family will find upsetting. Ordinarily the scapegoat is a very sensitive person, who feels for the parents and fears their potential separation. Because the scapegoat is afraid that it will lose its self-security if the parents separate, he/she offers voluntarily to help the father and the mother stay together by providing a focus for them outside of their relationship. When mom and dad ignore their differences and focus instead on the scapegoat's differences, the scapegoat keeps them together. Triangles or scapegoating or coalition can take various forms. Grandparents may form triangles with parents or grandchildren.<sup>7</sup>

## 6. Treatment Techniques

The strategic family counsellors take an attitude of pragmatism. They are concerned about techniques that work, however illogical they may appear to be. Their aim is to eliminate or substantially reduce the symptom or presenting problem. Therefore they are symptom-focused and behaviour-oriented. Their therapeutic tools are tasks and directives. They may also attempt to unbalance a system by joining with one or more members on a conflictual point. They tend to fortify the generational boundaries and tactically support the various members at certain times.<sup>8</sup>

### 1) Paradoxical Intervention or Prescribing the Symptom<sup>9</sup>

Using paradoxical intervention existed even from the 18<sup>th</sup> century onwards and so it is not a novel idea. Paradoxical interventions are those which appear absurd because they exhibit an apparently contradictory nature, such as requiring clients to do what in fact they have been doing, rather than requiring that they change, which is what everyone else is demanding. Paradoxical intervention is also called 'prescribing the symptom.' Let us consider how paradoxical intervention is useful in therapeutic situations. There is a great amount of resistance to change within the family. Added to this, the entry of the counsellor into the family is not that welcome. The family members tend to resist the efforts of the counsellor to change. Therefore if the counsellor tells them to do what they are already doing, they are in a therapeutic bind. When they follow the instructions of the counsellor to continue to do the

things they have been doing, they are just obeying the counsellor, which means that the members give undue power to the counsellor. Thus the counsellor can make the symptom occur at his/her bidding. If the members resist the paradoxical instructions, they are moving towards improvement, which in the long run amounts to doing the bidding of the counsellor. Certainly there is going to be confusion as to how to resist? which leads to new patterns and perceptions, and thus to change. This leads to a certain amount of detachment from the disturbing behaviour. Thus, a directive, which appears on the surface to be in opposition to the goals being sought, serves to move toward them. Here one can see the principle clearly that if you can turn the symptom on when you try, you will be able to control it, instead of it controlling you.

Strategic family counsellors divide the strategies of paradoxical intervention into three types: prescribing, restraining and positioning.

### **(1) Prescribing Strategies**

Here the counsellor takes the initiative to encourage and instruct the client to engage in the specific behaviour that is to be eliminated. For example, asking a person with obsessive thoughts and compulsive behaviour to overdo the same thoughts and behaviours will eventually make them disappear.

### **(2) Restraining Strategies**

In these strategies, the counsellor discourages or even denies the possibility of change. For example, the counsellor can ask the client to go slow or warn of the dangers of change. Once, a family came to me for counselling. It became evident to me that the husband was more at fault and needed a lot of counselling and change. Asking them come for counselling met with less interest on their part. Then I proposed that they may not need counselling quite often and if ever they feel the need they could phone me. Now the man kept phoning every now and then to fix an appointment with me. Besides, after every session he used to ask me when they could meet me next. This is precisely what I wanted. My enthusiasm that they get counselling did not work when I positively proposed it. But when I became indifferent to their getting counselling and

actively said that they may not need frequent counselling, that impelled the couple seek counselling quite frequently.

### **(3) Positioning**

In this strategy, the counsellor attempts to shift a problematic position by accepting and exaggerating that position. This intervention is used when the patient's position is (assessed to be) maintained by a complementary or opposite response by others. For example, when a client's helplessness is reinforced or maintained by an encouraging response from the significant others, the counsellor may outdo the client's helplessness by defining the situation as even more dismal than the client had originally held it to be.

The counsellor, by advocating a more homeostatic behaviour than the family, secures a position of greater power and control as the family moves toward transformation in its efforts to unseat him. The members have to change in order to resist the counsellor.

#### 2) Positive Interpretation

By positive interpretation, the counsellor ascribes positive motives to the clients. Blame, criticism, negative remarks all tend to mobilize resistance, as the family members muster their energies to disown the pejorative label. When they do it, the counsellor may feel impotent. Therefore there is a need for positive interpretation. Some strategic counsellors hold the view that all symptoms are highly adaptive for the family, in a sense holding that everything that everybody does is for good reason and is understandable. By strengthening the homeostatic tendency, the counsellor gains influence over the ability to change that is inherent in every living system. Positive interpretation addresses in a respectful way the resistance and ambivalence, which induces the family to move towards change.<sup>10</sup>

#### 3) The Pretend Techniques

In pretend technique, the counsellor can make use of humour, fantasy, and playfulness. It could be done even as a psychodrama. A member may be asked to pretend to have a symptom and other members of the family will be asked to pretend to help the mem-

ber. This technique brings to the awareness of the members in a very forceful manner the dynamics of the symptom and the ways it could be dealt with, which were not recognized by the family before the pretending exercise.<sup>11</sup>

#### 4) Reframing

Interpreting the problem and reframing are one and the same. When the counsellor gives a new meaning to a behaviour pattern, the client may evolve a new behaviour pattern in order to fit the counsellor's new interpretation. Thus, reframing has helped the client to change his/her behaviour. For example, when the overinvolvement of the mother is interpreted by the counsellor as 'concern' for the child, the mother might change her behaviour into one of concern rather than maintain it as overinvolvement.<sup>12</sup>

#### 5) The Ordeal Therapy

The ordeal therapy is meant to facilitate bonding among family members by rituals of penance and absolution. Any misbehaviour on the part of any individual in the family that has seriously affected other members of the family needs to be dealt with. The concerned person is asked to apologize to, or ask pardon of, the other members of the family. This helps restore dignity and love among the members.<sup>13</sup>

## 9

# CURRENT STATUS OF FAMILY COUNSELLING

Unlike other branches of psychology, family counselling had a wide variety of leaders and theorists and drew followers from many backgrounds. The systems-oriented family therapy models had differentiated from each other. Boundaries around each model tended to be rigid. But the family that each of these models was trying to understand was not well differentiated. Most of them were addressing two-parent nuclear family systems. No consideration was given to ethnicity, class, race, or sexual orientation, or to family variation such as single-parent families, foster families, or stepfamilies. Family counsellors were experts who would overcome families' homeostatic tendencies and reorganize their structure or convert them to a better way to view their problems. Since they were focusing their attention on systemic issues, they lost sight of the personal experience of individual family members and viewed their expression of feelings as distraction from the main issue, which is systemic. This period could be placed between 1960 and 1970.<sup>1</sup>

### 1. Erosion of Boundaries

Rigidity to hold on to a model or approach, gradually, gave in and the boundaries between the discrete schools within the field have largely melted. Now counsellors borrow liberally from a variety of approaches, even models which cannot be classified as family counselling. Gone are the days when counsellors thought themselves to be experts, confident of 'fixing' families. Now they are inclined to consider themselves more as facilitators or partners hoping to awaken the inherent resources in the members of the family. The resources are found both within the family structures and social forces in which they are embedded.<sup>2</sup>

## 2. Postmodernism

It was in the 1980s that an era of scepticism and reexamination had started. Established truths were challenged. It was a reaction to modernism, which began around the turn of the century as an optimistic, pragmatic replacement for romanticism, which held that there were unseen, unknowable forces at work in the world. According to modernism the truth of things could be uncovered through objective scientific observation and measurement. Besides, it considered that the universe was conceived of as a machine whose laws of operation were waiting to be discovered. Thus modernism was interested in large-scale theories (grand narratives) that could explain human behaviour. If universal laws were discovered, we could control its environment, and the problems could be solved. This thinking influenced family counselling too. Family counsellors were considered technical experts who could diagram and diagnose the functional from the dysfunctional family systems. But postmodernism was a reaction to this modernist thinking. One quickly realized that there is no absolute truth and one's truth may be as good as someone else's truth. Authority was questioned; faith was lost in the absolute validity of the scientific, political, and religious truths. One began to doubt whether absolute truth could be known at all. Scepticism has been gradually building up. Einstein's theory of relativity challenged the solid certainties of Newtonian physics. Marx challenged the right of any one class over another. The feminists challenged patriarchal dominance.<sup>3</sup>

## 3. Constructivism

According to postmodernism there are no realities, only points of view. From this view emerged an interest in how the narratives that organize people's lives are generated. Postmodernism concerns itself with how people make meaning in their lives and how they construct reality. Thus we have constructivism, which took hold of family counselling in the early 1980s. For constructivism, reality does not exist as a world out there but instead is a mental construction of the observer. When this view is applied to family counselling, it will mean that counsellors should not consider what they are seeing in families as existing in the

families. What they see is the product of their own particular set of assumptions about people, families, and problems, and their interactions with the family. The implications of constructivism are a note of humility on the part of the counsellor. The theory with which the counsellor approaches is not the most accurate reflection of reality, but only one of the many potentially useful stories about people. Counsellors bring their stories in the form of theories, and clients bring their own stories, which may be more or less useful than the counsellors' but no more or no less true.<sup>4</sup>

## 4. Collaborative, Conversational Approaches

Constructivist philosophy was translated into a collaborative approach in the 1980s and 1990s. It was a process of democratisation of the traditional counsellor-client hierarchy by persons like Harlene Anderson, Harry Goolishian, Lynn Hoffman, and Tom Andersen. They were united in their opposition to the cybernetic model and its mechanistic implications. They are the postmodernists who focused more on caring than curing. They advocated that instead of trying to manipulate language, one should hold empathic conversations from which emerge new meanings. In this model, the counsellor moves out of the expert-in-charge position to form a more egalitarian partnership with the clients. There is more of an attitude or philosophy than a particular method. They have the conviction that too often the clients are not heard because the counsellors are doing counselling to them rather than with them. For the collaborative family counsellors, questions are important. Conversational questions come from a position of not knowing and are the counsellor's primary tool. In counselling, conversational questions are not generated by technique, method or a preset template of question. We can say that each question comes from an honest, continuous therapeutic posture of not understanding too quickly, of not knowing. Since there is no formula about the language-based, collaborative approach, it is difficult to describe it. The counsellor reflects, empathizes, and offers a positive reframe here and there. In other words, the counsellor gives clients the feeling that their story has been heard and helps them hear each other's stories.

The collaborative approaches did not constitute a new school of family counselling, since they were a manifestation of a new

way of thinking about how to understand people. This new collaborative perspective was heavily influenced by an approach to knowledge that emerged from the Biblical studies called hermeneutics, which comes from the Greek word for 'interpretation.'<sup>5</sup>

## 5. The Hermeneutic Tradition

According to hermeneutics, understanding experience, including one's own, is never simply a process of seeing it, grasping it, or decoding it. Our experience is fundamentally ambiguous. Fragments of experience without determinate meaning are understood only through a process that organizes them, selects what is salient, and assigns meaning and significance. Though there is nothing democratic about hermeneutic exegesis, it challenged the therapeutic authoritarianism. The hermeneutic tradition seemed a perfect partner to efforts to make counselling a more collaborative enterprise. When two people converse on their own beliefs, they may both walk away feeling understood and with some new perspectives on one's own and the other's beliefs. When this is translated into clinical practice, the collaborative counsellor is forever setting aside presumptions and assessments in order to sincerely understand the client's world.<sup>6</sup>

## 6. Social Constructionism

We have already seen how constructivism focuses on how individuals create their own realities. We also know that family counselling has always emphasized the power of interaction. Combining these aspects, another postmodern psychology called social constructionism arose. Its main proponent is a social psychologist Kenneth Gergen who emphasized the power of social interaction in generating meaning for people. From the point of view of social constructionism, not only are we unable to perceive an objective reality, but the realities we do construct are anchored in the language systems in which we exist. Gergen did not accept the notion that we are autonomous individuals, holding independent beliefs, and implies instead that our beliefs are highly plastic, changing radically with changes in our social context. He argues that the sense of what is real and what is good emerges from relationships. For him, people do not have innate resources that the counsellors can draw out. He says that people are like sponges,

internalising the conversations around them. People are not affected by early childhood experiences. Their personalities can be reconstituted rapidly once situated in a new conversational environment. Since we have a sponge-like self, we can become easily overwhelmed by the many messages with which we are bombarded on a daily basis. We lack a sense of coherence and feel torn in many directions, a condition that produces incoherent and disconnected relationships.

Its clinical implication is in line with postmodern scepticism. It suggests that since everyone's thinking is governed by his or her social environment, no one has the monopoly of the truth. All truths are merely social constructions. First of all, this idea invites counsellors to help clients understand the cultural roots of their beliefs. Secondly, it suggests that if counsellors can lead clients to new constructions about their problem, the problems open up. One is viewed as a participant in multiple relationships. A problem is a problem because of the way it is constructed in certain of these relations. Thirdly, it suggests that counselling has to be collaborative. Neither the counsellor nor the client brings the truth to the table. New realities emerge through conversations where both sides share opinions and respect the other person's perspective. Fourthly, since clients are so thoroughly influenced by their current relationships that, once the counsellor succeeds in becoming significant to the client and in co-creating new, more useful constructions about the problem, the counselling is basically complete. Therefore the counselling can be quite brief.<sup>7</sup>

## 7. Narrative Revolution

There were some family counsellors who were trying to shift the field's focus from changing the action to changing the meaning. They warmly welcomed social constructionism. They believed that the counsellor's job was to co-create new realities with families, and not to direct or advise them. Thus came into existence 'narrative counselling.' Narrative counsellors follow Gergen in considering the self a socially constructed phenomenon. Our sense of self is thought to emerge when interpersonal conversations are internalised as inner conversations. These conversations are then organized into stories by which one understands one's experience.

All of us have points of view and their effects. It is not the question of truth but of which points of view are useful and which lead to preferred effects for clients. For narrative counsellors, the problems are not in persons as psychoanalysis holds it, or in relationships as family systems theory holds it, but rather the problems are embedded in the points of view about individuals and their situations. Therefore narrative counselling is a process of helping the clients reexamine the stories they live by. The self-hate, pessimisms, and passivity that disempower many clients would be related to having internalised toxic cultural narratives regarding their worth. Narrative counselling highlights the impact of patriarchy, heterosexism, racism, social class, and materialism on the family members' self-concepts. Therefore the goal of narrative counselling is to expose these internalised narratives so they can be replaced with more empowering life stories.<sup>8</sup>

## 8. Solution-Focused Therapy

Steve de Shazer and his colleagues took up the concepts of constructivism and social constructionism to more pragmatic direction. Thus we have the emergence of solution-focused counselling. They argued that if a client's reality is merely a social construct that is a product of language, then the goal of counselling is simply to change the way the client 'languages' the problem. They believed that once the problem is described differently, it disappears, since it only existed in the way the client talked about it. Here it is easy to note that 'language is reality.' Solution-focused counsellors are not interested in identifying and debunking the internalised cultural narratives. What they aim at is to get the clients to shift from dwelling on their problems to identifying solutions. Perhaps they already have solutions but they are not using them. Whatever solution the families come up with are fine as long as the solutions are satisfying to the family members.

Solution-focused counsellors were assisting clients to shift from 'problem talk' (trying to understand or analyse their problems) to 'solution talk' (focusing on what is working or could work in the future) as quickly as possible. The fact that one focuses one's attention on solution, it eliminates problems. In this direction, solution-focused counsellors have designed a number of clear-

cut techniques for getting clients into this future-oriented, productive mindset. As solution-focused counsellors lead clients toward solution-talk, they remain collaborative in the sense of not imposing particular kinds of solutions but trusting the clients to find their own way. Their attitude seems to be one of strengths-oriented, concentrating on client resources and successes. They believe that exploring the problems encourages the paralysing problem-talk. Solution-focused model became popular in the 1980s when mental health agency budgets were slashed, and managed care began to erode the number of sessions for which private practitioners could be reimbursed. This demanded a brief, formulaic, commonsensical approach. We can say that solution-focused counselling is one of those.<sup>9</sup>

## 9. Feminists Family Counselling

Feminism brought to light the pernicious effects of cultural attitudes on families. It accuses of the gender bias inherent in the existing models. The Batesonian version of cybernetics was strongly opposed to the use of power metaphors. He said that unilateral control in systems was impossible because all elements are continually and circularly influencing one another in repetitious feedback loops. Therefore, if all parts of a system are equally involved in its problems, no one is to blame. This idea somehow was appealing to family counsellors since family members often enter therapy pointing fingers at each other and failing to see their own steps in their circular dances. But feminists had difficulty with the idea of equal responsibility for problems. In this case, we blame the victim and rationalize the status quo. Take for example the cases of battering, incest, and rape, for which psychological theories have long been used to imply that the women either provoked or consented to the crime. In our patriarchal society, marriage and family life inherently subjugate women, and to suggest that husbands and wives have contributed equally to and have equal responsibility for changing their problems is to collude with the rules of these patriarchal microcosms of society.<sup>10</sup>

### 1) Mother Blaming

Family counsellors spoke a lot about the dysfunctional family constellation in which contributing to the problems is the pe-

ripheral (but dominant) father, the mother who is overinvolved with her children, and the symptomatic child who is caught up in the parents' relationship. Psychodynamic counsellors have, for years, been blaming the mother's attachment to the child for the symptoms. Though women are overinvolved, insecure, controlling, ineffectual, and overemotional, it is not because of psychopathology on their part, but because they are put in, and encouraged by society to desire, emotionally isolated, economically dependent, overresponsible positions in families, positions that are crazy-making. The feminists argue that instead of further diminishing an insecure mother's self-esteem by replacing her with a peripheral father, it is good to help the family examine and change the rules and roles that keep the mother down and the father out. They advocate that the father may be encouraged to become more involved in parenting, not because mothers are incompetent, but because it is a father's responsibility as a parent and because it will allow the mother to begin to move out of that crazy-making position.<sup>11</sup>

## 2) Looking through the Lens of Gender

The feminists complain that issues of gender or, more specifically, patriarchy, permeate the counsellor's work, even though they have been conditioned not to notice them. Counsellors need to avoid and counter the unconscious biases toward seeing women as primarily responsible for childrearing or housekeeping; as needing to support their husbands' careers by neglecting their own; as needing to be married or at least to have a man in their lives. They need to stop relying on traditional male traits such as rationality, independence, competitiveness, as their standards of health and stop denigrating or ignoring traits traditionally encouraged in women –like emotionality, nurturance, and relationship focus.

## 10. New Emergence

There are issues like family violence, multiculturalism, and gay and lesbian families. These have emerged so strongly these years. Family counsellors need to take into account these new realities.

It was in the early 1990s that the family counsellors first started to look at family violence. According to the traditional

view of the family counsellors, family violence involves the interacting influences of all the members of the family. Family violence was viewed as the outcome of cycles of mutual provocation, and escalation.

When in a country there are culturally different ethnic groups, the stereotyped family therapies will not be adequate to address the cultural differences of the people. What in one culture one considers as evidence of enmeshment or overprotectiveness is considered as virtue in another culture. Therefore family counsellors need to be wary of transferring concepts, which are culturally bound to some other cultures that have a different meaning altogether. Family counsellors have to look again at many of the things they previously considered pathological.

There are issues like gay and lesbian families. Many straight family counsellors may not understand what such clients face in a homophobic world. One should keep in mind that harmonious relationships are more difficult to achieve for gay and lesbian couples, not because they are inherently more pathological than straight couples, but because our society presents them with far more obstacles.<sup>12</sup>

# 10 ONE'S OWN WAY

Here let me introduce my own way of doing couple/family counselling. After all where we are most competent is when we are able to counsel people in the way we feel strong and competent. By approach I am eclectic and so I have no interest in delineating differences between approaches. Approaches are points of view and they are all valuable. All of them speak of truth in their own way and each has its own contribution to make. To limit oneself to one approach is a danger, we lose the viewpoints of others. I have no great concern to have an elaborate narrative or grand theories of personality and healing. They may be elegant but may not have practical utility. Whenever I underwent training for counselling, I did not like the limitation each model had in insisting on holding on to a certain pattern of the model only. Though I have always been trying to make use of the model they present for the most part, I accessed other methods as well, that were appealing to me in dealing with clients. In fact I do encourage counsellor trainees to go ahead and find their own method of doing counselling. What is taught as a method or skills are only guidelines, and they are not absolutes. This has been proved through the centuries by the shifts we have been having –starting from psychoanalysis to the latest models in postmodernism.

Here I intend to narrate the way I approach couple/family counselling that works out for me, and may not be for you. Take it for what it is worth. The basic aim of writing this chapter and sharing my method is that you will do your own type of counselling and enrich the life of the clients. Counsellors who were themselves and had their own stamp of counselling without condemning other methods have always attracted me.

## 1. Therapeutic spontaneity

Being spontaneous is of paramount importance in counselling. Genuineness is one of the most important attitudes a counsellor can adopt. Genuine people are spontaneous without put-

ting on an air of wisdom and power. One can bring out one's best as a counsellor only when one is spontaneous. When we are inhibited or try to hide and put on a front, the clients can very easily notice the discrepancies. Besides, the inhibition a counsellor feels may hinder his/her effectiveness. Therefore, being spontaneously genuine is a welcome attitude on the part of the counsellor.

## 2. Let them unpack in your presence

There are counsellors who are afraid of clients unpacking their stories in front of them. May be the dynamics is too overwhelming for the counsellor to handle and so they make the ground rule not to exhibit the family working dynamics in the consulting room. I would seriously question this attitude. We learn a lot when naturally the family unfolds itself in the way they do at home. It is safer to go by what we see than what we hear. Perhaps what we see is the truest aspect of the family dynamics. Therefore I just observe and listen as the family comes for the first time, may be asking a few questions to clarify the issues or what they are trying to tell. This I found very useful in understanding couples and families. I notice who says what to whom and in what manner. This indeed gives a clue to where the problem lies, especially the power struggle the family is trying to adjust and the roles of persecutors, victims and rescuers.

## 3. The First Conjoint Interview

The first interview is with all the members who happen to come to meet me or when I approach the family all those who happen to be there interested in presenting the problem. As I said this interview gives me basic information about the problem areas though at times I may have to revise my opinion after interviewing individuals. But in most cases the conjoint interview has been highly beneficial. It is good to notice who talks, who does not talk; who sits where and close to whom and distant from whom; who dominates the session and who feels cowed down. When I visited a family the father was almost silent nodding his head to what his wife was telling. There were seven children in the family. The only person who spoke most was the wife. That gave me the understanding that most of the responsibility of the problem was with the wife who was dominating. She would just silence any of

her children talking. Even when I was giving a chance to the children to talk, she would intervene and answer for them. Later it helped me to focus my attention on the wife who happened to be the primary problem maker.

#### 4. Individual interview

Just operating on what one gets impressed by the conjoint interview may land up with difficulties. Because, in the conjoint session some significant persons would not have spoken at all. Without knowing what everyone has to say and without everyone's cooperation counselling will not be effective. Almost always I have experienced the benefits of interviewing family members in counselling. Once I was counselling a couple. The man had invited me to conduct some counselling sessions to his department where he was working. In the evening he invited me to his house, telling that his wife wanted counselling. When I went home, he asked his wife to talk to me. But he maintained his presence with us. I told him that his wife might like to talk to me privately. He flatly said that she would not want it and so he continued to be with us. Of course she touched upon some peripheral issues and the real issue seemed to be that the man had developed some relationship with the widow sister of his wife. The wife was trying to hint at this issue, but for fear of her husband she could not fully open up. Had I the chance to interview her I would have got the real problem between the couple and facilitated them to solve it. There are times when wives would tell things to me in individual interview rather than in the conjoint interview. Therefore valuable information can be got in individual interviews.

#### 5. Periodical Individual and Conjoint Interviews

Once a pattern of interviewing the whole unit and the individuals is established, the counsellor can switch from one to another according to necessity. Now at this level first I may give a chance to each one to speak individually and then get them together to sort out things for discussion, or I might have already got an agenda to propose to the conjoint meeting, mostly drawn from individual interviews. Thus initially I interview the whole unit to get the first impression and then go in for individual interviews followed by conjoint interviews. Later whenever they come, I may start with individual interviews and land up with conjoint interviews. It is good to find out what method works for one and do the needful.

# 11

## CONCLUSION

With humans we find that after differentiation comes integration. In the same way, in the field of family counselling we find the first stage was marked by the proliferation of schools of thoughts. Now it is time for an integration to take place.

Humans are quite complicated as they are thinking, feeling, and acting creatures, who exist in a complex system of biological, psychological, and social influences. On the one hand, any counselling should address all these dimensions. On the other hand eclecticism may rob counselling of the intensity made possible by strategic concentration on certain elements of experience. Effective integration should involve more than mere borrowing from different types of counselling. Therefore integration worth the name should draw on existing models in such a way that they can be synthesized with a clear and consistent direction. There may be many ways of producing integration. For example, one may apply principles or techniques from one field to the phenomena of another, as in the case of using psychodynamic concepts to understand family processes. One might also blend concepts and methods from separate schools, like creating a synthesis of cognitive therapy and behavioural therapy. One may create something new by selecting valuable ideas and techniques from a variety of sources and connecting them with common presuppositions as in the case of selecting samples from various schools of family counselling. One may also juxtapose different models sequentially using one for one stage and second for another stage, as in the case of starting with one kind of counselling and ending with another. One may try methods one after another checking which really fits in for the particular client. Thus there could be various approaches to integration.<sup>1</sup>

Here I would like to present the essentials of the five love languages of Gary Chapman.<sup>2</sup> According to him there are five

love languages one needs to use in love relationship. Loving is an art, he says. If it is an art, it has to be learned. The capacity to love is inherent but the skills of expressing and receiving love should be learned. Let us consider the five love languages:

1. The first love language is 'words of affirmation.' We express our words of affirmation to another by giving verbal compliments. There is yet another way, which is, giving encouraging words. This is to inspire in someone courage. All of us lack courage in many ways. If only there is someone who encourages, we will surely accomplish things we never dreamt of. Spouses need to be sensitive enough to look for occasions to encourage each other. Encouragement requires empathy and seeing the world from your spouse's perspective. We must first learn what is important to our spouse. By encouraging we do not mean pressuring the partner. On the contrary, encouragement refers to finding out the hidden talents and facilitating them to come up. First of all, to encourage our partner we need to know what is important for him/her. Empathy also requires using kind words. If we are to develop an intimate relationship, we need to know each other's desires. We need to know what the other person wants.
2. The second language is 'quality time.' If you give quality time, you will give someone your undivided attention. Spending quality time will mean many things like taking a walk, going out to eat, looking at each other and talking. A central aspect of quality time is togetherness. It does not mean mere physical proximity but focused attention. It need not be taken to mean gazing into each other's eyes and sitting. It is doing something together and giving our full attention to the other. What we two do together is not that important as the focused time that we spend with each other emotionally is. The activity we engage in is only a vehicle. One of the many ways of expressing quality time is having a quality conversation whereby we share our experiences, thoughts, feelings, and desires in a friendly, uninterrupted context. Quality conversation is different from words of affirmation. In words of affirmation we concentrate on what we say, whereas in quality conversation we focus on what we are hearing. Perhaps we are trained to analyse problems and create solutions. We seem to forget that marriage is a relationship, not a project to be completed or a problem to be solved. Quality time may require maintaining

eye contact when our spouse is talking; listening for feelings; observing body language; refusing to interrupt; and not listening to our spouse and doing something else at the same time. One way of doing this is to establish a daily sharing time in which each of you will talk about three things that happened to you that day and how you feel about them.

3. The third language is 'receiving gifts.' To put it differently, it is giving gifts. Gift giving is a fundamental expression of love that transcends cultural barriers. Giving is one of the easiest love languages to learn. It is very fundamental. It is giving oneself. The gift of self or the gift of presence is the most sought-after gift in the world. For example, physical presence in the time of crisis is the most powerful gift we can give if our partner's primary love language is receiving gifts.
4. The fourth language of love is 'acts of service.' This will mean doing things our spouse would like us to do. These will mean hundred and one things: daily routine works, which you care to do in order to show your love to your spouse. It is not doing something extraordinary that matters but little things that make a world of difference in your life. One needs to remember that in acts of service, requests give direction to love, but demands stop the flow of love. Nowadays in advanced countries the boundary line between what a male and a female have to do is becoming thinner. Therefore one could do any service irrespective of whether it is male-appropriate or female-appropriate. In some cultures certain services are forbidden for a male person. It does not matter even if you go by cultural bounds or otherwise, you can always find ways of doing needed service to your partner.
5. The fifth language of love is 'physical touch.' When a baby is not touched sufficiently, we are killing it psychologically. The need for human touch can never be outdone even in our adult life. Whether children or adults, all of us need to touch and to be touched. In some cultures, touching is quite normal even among adults as is conversing. In some other cultures, touching is a taboo. People seem to associate any touch with sexual connotation. There is a difference between sexual touch and ordinary touch but some cultures seem to interpret any touch as sexual. Just like our stomach feels hunger for food and water, our skin hungers for human touch. We also notice that in those cultures

where touching is forbidden, people tend to make use of pet animals to satisfy that need. In societies where normal touch is a taboo, child abuses abound. This is precisely what happens when the normal is denied by cultural biases and so humans satisfy their need to touch through deviant ways. Humans find ingenious ways of satisfying the need for human touch through disguised means. Physical touch can make or break a relationship. It can communicate hate or love. I have observed something interesting among monkeys. The phenomenon I describe was observed in solitary monkeys that roam about. When two of them happen to meet, the need for touch is very strong which goes by violent touch of pulling the hair in a mock anger. This process of touching by pulling the hair violently goes on for quite sometime after which the two monkeys settle down fondling each other and sitting quietly enjoying the presence of each other with physical touch. In moments of crisis we need someone to hold our hand and touch. There are some people who are more prone to wanting touch than others. It is good to know the dominant love language of our partner and give a physical touch.

John M. Gottman speaks of seven principles for making marriage work.<sup>3</sup>

1. The first principle is 'enhancing one's love map.' It will mean paying attention to the details of one's spouse's life. If you have only a sketchy sense of the other's joys, likes, dislikes, fears, stresses, then you may not be good at enhancing your love map. Emotionally intelligent couples are intimately familiar with each other's world of likes and dislikes, dreams and aspirations, joys and sorrows. They are good at remembering the major events in each other's history, and they update their information as the world of the spouse changes. It is not only love that comes from knowledge but also the fortitude to withstand the threats of marriage.
2. The second principle is to nurture one's fondness and admiration. We like to stick to things that we like. If I do not cherish any fondness or admiration for my spouse, it is unlikely that I will stick to my spouse. It is good to remember the good qualities of our spouse. There should be a fundamental belief that one's spouse is worthy of honour and respect. It is worthwhile to dig out your positive feelings towards your spouse and remember what makes

you cherish your partner. Thinking positively about one's partner is a good way.

3. The third principle is 'turning toward each other instead of away.' It will mean that the couple keep themselves connected with exchanges even trivial. When one is calling for attention to something, the other should at least show interest even if one does not like it very much. Do small things together like folding laundry, or watching TV. We often ignore other's emotional needs out of mindlessness, not malice. It is all about saying how we stay connected with our spouse emotionally in little ways. Couples could ask each other at the end of the day when each comes back from work (or when one of them stayed back home), how the day had been. This step will initiate an animated conversation or at least one will unburden one's worries. Or it could just let the other one unwind after a day's work. Such conversation in fact reduces stress. During such moments of conversation, one must not give unsolicited advice. When couples share, it is not for advice, but for the relief of sharing something burdensome. As we listen it is good to show genuine interest, communicate our understanding, being supportive even if we believe that the perspective of our spouse is unreasonable. Couples may feel lonely and alone in certain stand they take; at that moment it is good to express a 'we against other' attitude. One could also include expression of affection and validation of emotion. For example: saying 'yes; that is really annoying.' In this context one needs to avoid criticizing the spouse and siding with the enemy when the spouse shares some hurt feelings that he/she experienced at the hands of others. Sentences like 'I am sorry your boss made you feel very hurt,' 'That is really unfair to treat you that way,' and 'I understand how you should be feeling now' will go a long way in making the spouse feel understood by you. In this way, you turn towards your spouse and not away from him/her.
4. The fourth principle is 'let your partner influence you.' Couples should treat each other with respect and honour, each will allow the other to influence. Any decision making should be equally shared not imposed. There could be power imbalance in couple relationships. Therefore the one who is understood as strong should be sensitive enough to listen to the opinion and contribution of the weaker one in decision making. In patriarchal societ-

ies, men are considered to be stronger and so they might just want to assert their position, in which case the wife feels neglected and slighted. The stronger one does not share power with the weaker one.

5. The fifth principle is 'solve your solvable problems.' There are problems that can be solved and there are some problems that may require help from others. Couples need to learn to solve problems that are solvable. Usually in a conflict resolution situation, they need to exercise certain skills. Those skills are 1. soften your startup, 2. learn to make and receive repair attempts, 3. soothe yourself and each other, 4. compromise, and 5. be tolerant of each other's faults
6. The sixth principle is 'overcome gridlock.' You want to send your child to a religious school whereas your spouse wants to send the child to a secular school. You want to live in the country side but your spouse wants to live in an urban area. Thus you find you are gridlocked. Instead of trying to solve the problem, move to a dialogue. Perhaps your gridlocked conflict will be a perpetual issue in your marriage, but one day you will be able to talk about it without hurting each other. May be both of you will learn to live with the problem. Gridlocks may be signs that you have dreams for your life that are not being addressed or respected by the other. Acknowledging and respecting each other's deepest, most personal hopes and dreams is the key to saving and enriching one's marriage. When gridlocks occur, one could follow these steps: 1. Become a dream detective. Very often deeply personal dreams go unspoken or underground after marriage. When we adjust to marriage by burying a dream, it just resurfaces in disguised form as a gridlocked conflict. 2. Work on a gridlocked marital issue. Choose a particular gridlocked conflict to work on. 3. Soothe each other. It helps to take time to quieten and have a break for some soothing before attempting to slog through the gridlock. 4. End the gridlock. It is good to make peace with the issue by accepting the differences between both, and establishing some kind of initial compromise that will facilitate the couple to continue to discuss the problem amicably. 5. Say thank you. Now it is time to thank yourself for your contribution and thank the partner for his/her contribution. At least now you are in a position to look at your gridlock in a detached way to search for a compromise or if possible solution.

7. The seventh principle is 'create shared meaning.' A crucial goal of any marriage is to create an atmosphere that encourages each person to talk honestly about his/her convictions. The more one speaks candidly and respectfully with each other, the more likely will there be a blending of one's sense of meaning. Creating informal rituals when we can connect emotionally is critical in a marriage and in families –rituals like birthday celebrations, family reunions, and religious ceremonies. By making them part of our married life, they become our rituals as well and further our identity as a family. It is not necessary that we derive rituals from our respective childhoods and family histories. We can create our own. New rituals could make up for what our families are lacking. For example, if you feel that your family needs to be out together for a picnic, you can include that in your family ritual, every two months. Let your rituals be scripted as to who is expected to do what, and when. Let the rituals be something you do regularly and can look forward to. Couples and families should have shared symbols. Another sign of shared meaning in a marriage is that our lives are surrounded by things that represent the values and beliefs we share. Mostly these are literally objects like any religious icons. There are also family stories that are told and retold that bind the family.

Dr. James C. Dobson in his book 'Love must be Tough' gives us practical lessons to safeguard marriage. He summarized three important conclusions: 1. Marital and premarital conflict typically involves one partner who cares a great deal about the relationship and the other who is much more independent and secure. 2. As love begins to deteriorate, the vulnerable partner is inclined to panic. Characteristic responses include grieving, lashing out, begging, pleading, grabbing, and holding; or the reaction may be just the opposite, involving appeasement and passivity. 3. While these reactions are natural and understandable, they are rarely successful in repairing the damage that has occurred. In fact, such reactions are usually counter-productive, destroying the relationship the threatened person is trying so desperately to preserve.

As time passes by, one partner begins to feel trapped. Then there is an intense desire for the trapped individual to escape from the marriage. For someone in the trapped syndrome, love then

becomes an obligation. Let us explain it more clearly. When one of the partners feels trapped in the relationship, the trapped partner, in order to deal with this sense of containment which is restriction of freedom, gradually moves away from the partner. But the other partner alarmed by the movement of the partner reacts with alarm. The impulse is to pursue the moving partner closing the gap even tighter than before. When the trapped partner all the more runs away, the panicky party in despair jumps on the partner and clutches him/her with all the strength. This impels the trapped partner to get away somehow and escape. At that time the panicky partner droops in loneliness wondering how something so beautiful became so sour. On the contrary, if the panicky partner instead of holding a suffocating lover, pulls slightly backward, conveying freedom for the trapped partner and respect for oneself in the process, then the trapped partner will move towards the panicky partner. Let us remember that all of us need space to breathe.<sup>4</sup>

## ENDNOTES

### 1

#### Introduction

### 2

#### Conceptual Foundations

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## 3

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## 10

## One's Own Method

## 11

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