

WHO IS IN YOUR FAMILY?

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Initially, this seems like a simple and straightforward question, but as one begins to ask the question one becomes aware of the amount of variation in people's perceptions and behavior. One becomes aware of how emotional processes drive the answers. It is not determined by percentage of shared genes. Extremes give a clearer reflection of the emotional process. Some people say they don't have a family anymore and behave congruently with this conclusion. Some acknowledge that they have a family, but their connections reflect something different. Some exclude family members they don't know; for example, a parent who died when the child was too young to remember. There are examples of people who lost a father in a war, who grew up having no knowledge or awareness of the father and his side of the family. Some use geography to minimize a family member (and the accompanying emotions) being in one's life and in one's awareness. Another variation is to acknowledge/claim some family members and disclaim others. "We are so different." Another variation is to be emotionally closer to one side of the extended family and cut off from the other side of the extended family.*

The above question (and how one thinks about these questions) defines the nature of the therapy process. Indeed, theory drives the therapy. In looking at various family therapy models, one begins to see the wide variations in assumptions, beliefs, and therapy. Again, extremes are useful in examining the question. Some therapists do family therapy without any other family members involved—role playing, "psychodrama," family reconstruction, sculpting. The other extreme of therapy model requires "all" the family members to be present—parents, grandparents, siblings. There are many practical questions to be asked and answered. Suppose an extended family member lives too far away to attend sessions. What if one spouse refuses to come? Should children be involved?

*An obituary appeared in the local paper reporting the tragic death of a 14 year old girl. In describing time and place of visitation: "Family will receive local friends and relatives Tuesday night from 6-8 p.m. Out of town relatives are not welcome."

Another family variation is the Stanley Kunitz poem which deals with his father's suicide when Kunitz's mother was pregnant with Kunitz. The poem is titled 'The Portrait' and can be found in *The Collected Poems* by Stanley Kunitz.

In a related issue, might there be theoretical principles to guide one through the emotional land mines of biological/adoptive policy decisions, sealed birth records, termination of parental rights, foster home families/ biological parents policies?

Should a child be excluded or included if he or she is the focus of the family emotional process? Can theory help guide the therapist through these questions?

In November of 1968, Dr. Bowen responded to the editor of a planned book on family therapy and family therapists. A chapter on Dr. Bowen was planned to be included. The editors wanted him to review their draft. In his response to the proposed draft, he clarified his beliefs about “who is in the family,” how he orchestrates the above questions, and describes in some detail his process. Also within the letter are theoretical assumptions about how emotional processes operate in family systems. I have not included parts of the letter that addressed the proposed chapter, only the paragraphs that reflect his thinking on who is in the family and how that impacts on the therapy process.

This is on page 25, lines about 20-23. It has to do with seeing one family member alone and imagining other family members present as phantoms. It sounds a bit kooky and spooky and it is inaccurate even as an abstract abstraction. That confounded phrase got into a paper as a descriptive abstraction when I was trying to describe my inability to do individual therapy after I had started seeing families. After starting family, I still continued to do some individual therapy for two or three years. It was impossible for me to ever do individual therapy as before. I was "thinking" family even while doing individual therapy (and then I added the misinterpreted phrase) "as if the rest of his family was present as phantoms".

Most of my work with a single family member is in disruptive families in which the family would give up the effort but for one motivated family member willing to keep up the effort. If this works, I usually end up with a motivated twosome (with me as the potential triangle person) for the productive part of the therapy. Beginning in about 1961 I started a special project of doing "family therapy" with unmarried young adults living in Washington, whose families live far away. I have now done perhaps a dozen of these in which the entire course of family therapy has been with this one family member. In all but one of these I have seen a parent, or both parents, or a sibling when they happen to be in Washington for a visit. I guess there has been one which I never saw another except the single family member. (One time her mother sat outside in the car and refused to come in. I went out and shook hands with her while she stayed in the car). So I do get an hour or so with another family member present during the course of the family therapy.

My usual approach with these unmarried single family members (and also seeing any single family member from other families) is to spend a block of time in didactic teaching about the operation of family systems. Then time is devoted to the part this one plays in the family system and some fundamentals of "differentiating an "I" out of the "we-ness" of the family system, and to changing the part that "self" plays in the system. It is necessary that they arrange fairly regular visits home with their families. One time a few years ago I was asked if the cost of these plane tickets could be deducted as medical expenses for income tax purposes. The "hours" are usually devoted to a review of contacts with family, postulations about what went on, and guesses about the outcome if certain changes were possible. These "hours" are similar to supervisory hours with young family therapists. There are also assignments having to do with "person to person" relationships with a whole spectrum of extended family members and doing a multi-generational family history in depth. When this "differentiating one" begins to change, the family will get negative or reject, at which time it is absolutely necessary that they keep in contact with the family in spite of the rejection. I worked with one young fellow who went to NYC every weekend for over a year (I now rarely see these oftener than twice a month.) He had quite a problem when his parents would leave home and check into some hotel hideaway to avoid the ruckus that would come with his visit. I have had

some perfect results seeing only this one family member, which means fundamental change within the entire family system and my criteria of "change" is more strict than anyone I know in the business. I even had one father from Central America who came one time when he happened to be in Washington for a visit. During the visit he said "thanks for the miracle in Guatemala".

Its is longer and harder to work it all the way through with only one family member but the point is that it can be done. The disadvantage is that the emotional fireworks take place in the visits with the family and the situation does not have the advantage of my help in the emotional situation.

I have now had perhaps half a dozen families in which parents discontinued after symptomatic relief some 6 or 8 or 10 years ago, in which an eldest child would come after reaching adulthood. An "oldest" has tremendous power to change the entire family system if they are motivated to work on it. I have one now in which I saw the parents 5 times in 1959, 13 times in 1961 when the father became anxious while getting a late Ph.D., and 9 times in 1963 after the oldest daughter had a pseudo suicidal attempt. These parents never had the motivation to go beyond symptom relief which came fairly promptly each time. In the Summer of 1968, after the daughter finished college and had her own job and her own apt in town, she came on her own, financed by herself. This is one that will "go all the way." I have never had an oldest child "pull one out" before they were self supporting and financially independent of the family system which resisted change.

No need for more detail. I'd like you to somehow change the lines about "phantoms". To summarize this, most of my family therapy with a single family member is with disruptive families in which only one family member is motivated for a family effort. This is usually preliminary to seeing both spouses or both parents together for the more productive phases of the therapy. It has been possible to do an entire course of productive family therapy with a single family member, with significant change throughout the entire family system. This is longer and more difficult than working with a larger family unit. The goal is to teach the single family member about the functioning of family systems, to accurately define the part that "self" plays in the family system, to modify the part that "self" plays through a clearer "differentiation of self", and to withstand the family anxiety and attack when self does achieve change.

Since you probably have plenty of copies of your paper, and since I would like to keep this for my files, I will not return it unless you need it.

Sincerely,

Murray Bowen, M.D.