

## LEARNING IN CONNECTIONS

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What is the process of learning in a clinical relationship? What does one expect to obtain from the clinical “expert?” Certainly, one assumption expressed is that the therapist is more knowledgeable and the patient “needs” this knowledge to do “better.” Early psychodynamic relationship focused theories postulated an internalization of the therapist’s “healthier” functioning capacities and knowledge, in order to cure the patient’s mental and emotional state. What role does the mental health professional play in setting up such a model?

Learning styles seem to exist on a continuum, from extreme dependence on the other on one end and to extreme self-dependence on the other end. Of course, there are many interactional patterns on this continuum. Some people thrive on interaction, dialogue, and the stimulation of the exchange of ideas. Conferences with discussion periods following expert presentations use this model. Other more experimental models focus entirely on the interactions of the participants with the only expert being a facilitator or consultant to the experimental process (e.g., Tavistock model). Others spend solitary hours in libraries following their own questions\*.

Training programs have been created all over the country, some promoting their version of the Georgetown Family Center Training Program. How do trainers “teach” family systems theory? What do trainees think they are learning?

A non-mental health professional trainee in such a program wrote Dr. Bowen after he had presented at a training program. In his response of August 27, 1986, he spoke directly about assumptions about his own knowledge and “expertise” and also the lurking dangers of assuming the experts have the answers. He challenged her to think more clearly about her own learning process.

\* “...There are many different forms of learning produced by different patterns and combinations of stimuli and these give rise to two very different forms of memory storage.” This quote is referring to neural activity and strength of synaptic connections, and synaptic plasticity. From: Eric Kandell’s *In Search of Memory* Norton, 2006 — pg. 159.

August 27, 1986

Dear

I hope the name is correct. That's the best I can decipher from your writing. Thanks for your letter. It conveys a pretty good idea about where you stand.

From your letter, I think I did pretty well. The smartest I ever was, was the day I graduated from med school--almost fifty years ago. Since then I have become more stupid every year. I learn a few things but have an awful time trying to put it all together. The best I can do at a session like this is to raise questions that may help the other put it together for themselves. If the other is confronted with the issues, they seem to do a pretty good job for themselves. It involves a lot of reading and summarizing.

I thought your notion about a semipermeable membrane was pretty much on the point. If you are the cell, and you are in a certain state, you automatically absorb the environment to a certain point, but the process stops somewhere. What is the part of the cell, or the nucleus that remains stable, that does not change? I have never tried to run through the analogy of a cell but I think it could be done.

There are people out there whose "selves" cannot be distinguished from important others in the family. They are the "no selves" that I put low on the scale of differentiation. There are those who maintain a fairly good level of "self", fairly well demarcated through all kinds of conditions. Most of us fall somewhere in between the extremes. How does one account for the phenomenon? Is it possible for a lower level "self" to become better demarcated? I have postulated that it is possible to change this a tiny bit at a time, and to keep on working for life. Most are content to live and die the way they were created. That is their option, if they so choose. I believe it is possible to raise the level of demarcation a little, if people choose that direction.

I think you have one monumental distortion, which is the assumption that Mental Health people know more than you? Where did you get that idea? Another distortion you have would say that your instructors at know all the answers. Maybe they pretend to know the answers? They are struggling like all the rest of us.

Maybe you would be more comfortable amongst people who successfully pretend they know everything? If you successfully become like a pretender, what does that make you? We will see what we will see come September. If            knows all the answers I will learn something. If he is as inept as I, it will be two blind men, each trying to relate his version of something or another.

Keep on traveling, if you choose to spend your life at such trivial things. Thanks for the letter. Sometimes I have time to respond to letters.

Sincerely,

Murray Bowen, M.D.