

Michael Kerr

December 5, 2011

Interviewed by Frank Gregorsky

Frank Gregorsky: On Monday December 5th 2011. Yours truly Frank Gregorsky interviewed Dr. Mike Kerr at the Bowen Center on MacArthur Boulevard near Georgetown University. This CD and the other one that goes along with it contain about two hours, the full extent of our discussion. You will hear some clackety clack along the way. That's because in addition to this digital recording we were making a tape recording just to be safe. We also added tracking, so that every time the topic changes for the most part. Sometimes there are two or three topics on a track. But generally this and the other CD change track every time the topic changes. Also, and that's to make navigation easier and so is this. I was carrying on an assignment from the oral history subcommittee of the Murray Bowen Archives Project. The committee came up with a series of questions 10 or 11. I was encouraged to add some questions by Joanne Bowen, and I did so. What I want to do on this track, (and if you don't want to hear it all you need to do to jump to the actual interview is go to track two where it starts) but for the sake of completion I want to read into the record the organized questions that the committee came up with. I think we covered, Dr. Kerr and I covered, almost everything here, but we did it in a more conversational way. There are only three or four of the 14 questions that were asked as questions. But the material for the most part with one or two exceptions was covered in a more conversational way.

Here are the questions that were on that list. And Dr. Kerr had these ahead of time as well.

Number one. What were you like in high school? In what town/region were you growing up and what aspirations did you have as a young man?

Number two. What did you learn about siblings from being one?

Number three. What attracted you to Bowen Theory?

Number four. Whose ideas and intellectual frameworks did you find compelling prior to your meeting up with Bowen, and what do you remember about your first meeting with him? Or if that wasn't an interactive type of situation what was your first extended exchange like?

Number five. Dr. Bowen was the first family research professional to be on the faculty of a medical school. He had a principle of developing the family idea within a medical school in intimate contact with all the disciplines and medicine. Very early on he established a family systems training program for residents within Georgetown University. Are you aware of any other medical schools offering such training during that timeframe?

Number 6. In 1990 the Georgetown Family Center became a freestanding institution. How did that come to be? Please relay any theoretical thinking that went with that decision. Were you both in agreement on this or were there differences? What were the administrative areas where differences did emerge?

Number seven. Dr. Bowen had a number of revolutionary ideas among them: hospitalizing whole families, not allowing labeling or projection onto the family members by the staff, allowing family members great leeway in finding ways to deal with issues, teaching by staff modeling in ward meetings, having visitors attend therapy sessions with those families, and the understanding that change from within the family would last longer than change between an individual and therapist, and then later having clinical families in the audience for clinical conferences open to the public. What ties all or most of these bold concepts and activities together?

Number eight. Dr. Kerr you were at the Georgetown Family Center soon after Dr. Bowen introduced the concept of societal emotional process. You were also present when the emotional cutoff concept was presented. You have spent years on developing the unidisease concept as the next thing to become part of the theory perhaps. What is your understanding of the steps now needed or are partly underway? His answer to this is outstanding and it's on the other desk - second to last track.

Number nine is a question that I botched. And so you're not going to hear that actual question on the

tape. I, on the disk, got confused between Dr. Bowen's book in 1978 and the jointly authored book by Dr. Kerr and Bowen in 1988. I got the two of them mixed up. So we're just going to leave out the question number nine and the discussion will be about mainly the book that Kerr and Bowen did in '88.

Number 10. How did you come to be the successor to Bowen as director of the Georgetown Family Center?

Number 11. Is there a way to know and then to convey how much theory you learned academically versus how much in the relationship with Dr. Bowen? Gregorsky intersects. This question was not answered.

So much of the theory was learned as you'll see from the first couple of tracks by the application that Mike was able to make retroactively by seeing things that had occurred in his own family for years before he actually encountered Murray Bowen.

Anyway continuing with number 11. For example, how did Dr. Bowen use triangles as a leader and teacher of Bowen theory? How is differentiation a guiding principle at the Center under Dr. Bowen and then under your own guidance of the Center. What were the freedoms and dilemmas that went along with this?

Question number 12. From the original Oral History Committee what challenges and opportunities did you face after Dr. Bowen died and how did you handle them? What is the decision you'd most like the chance to be able to make again?

Number 13. What advice do you have for future generations who are interested in Bowen theory?

And finally, number 14. Should the Archives Project have, as one of its priorities, assuming the existing ones can be funded and executed by 2013, the commissioning of a full-scale biography of Murray Bowen. Thanks for listening to the setup track. We move on to track two Mike Kerr and Frank Gregorsky on Monday December 5th.

Gregorsky: Growing up, what kind of a kid were you; what kind of aspirations did you have as a young man?

Kerr: I'm embarrassed to say, that when I was a, I think, a first-year medical student, or maybe this was in college, I can't remember. Some people were interviewing volunteers about "what are your goals in life?" and I said I want to be happy because at that point I didn't really know what I wanted to be. Anyway, I grew up in a small town Swarthmore, Pennsylvania outside of Philadelphia. Great place to grow up.

Gregorsky: Born in the late '40s.

Kerr: 1940. By the '60s I finished college and medical school. (I was in medical school.)

Gregorsky: So you wanted to be a doctor.

Kerr: Yes, for the all bad reasons. I applied to Notre Dame in business largely, because my father thought that would be a good thing to do. Then I read a book *Not as a Stranger*, and a book *The Citadel* that summer about physicians. And saw some very romanticized movies about physicians, and I thought maybe I want to be a doctor. And to my knowledge I never thought of it that way - of being a physician before. This is like senior year in high school. Went to college and then just loved everything that happened from then on in premed, loved the sciences. Became a far better student than I'd ever been, and I was really interested in, truly fascinated by the world of ideas and then on

to med school.

Gregorsky: So you like the liberal arts stuff as well as the medical trend.

Kerr: Yes but the sciences, I just didn't know. I was just clueless. I would have never predicted that I would wind up so involved in the sciences like I have been since I've been in psychiatry, which is a social science in essence. But as you know by now the whole idea of this theory is to anchor it in the accepted sciences. So that all came later. I just was lucky in some ways that things lined up. I was able to switch major and all that.

Gregorsky: Were you an introvert, were you a sports fiend. I mean what were you like as a kid?

Kerr: Oh I would say I wasn't an introvert. I wouldn't call myself an extrovert either. I played sports. Average. I mean I fit in with the groups, the various groups, never felt outside. Biggest influence in that was, I had a brother who was diagnosed as having schizophrenia. This actually came later. So during the time that I was a teenager, it's just four boys. My mother was married twice then. Had one son from the first marriage, then married my father and they moved down to Swarthmore. And she had three more boys, the first one in the second marriage, I was four, he'd have been number two, is the one who eventually had lots and lots of problems that really surfaced in my teenage years. And then so I mean it was a lot of people in the family. A lot of drinking by my parents, suicide gestures, overdose, manipulative sort of things by my mother, pretty wild acting out stuff with my brother.

Gregorsky: Where did you go to hide?

Kerr: Well I didn't exactly hide. I had number three brother, Terry. He left home to go to college. He said "I don't know how you can stand it here. I'm getting out" basically. And he found girls when he was about 15 and literally began cutting off from the family. And then eventually did for a long period of time. And once I got involved in Bowen theory he came back in the loop, I won't go into all that now, but for some reason I paid attention to it. I wasn't in the direct line of fire. My greatest vulnerability, I would say, was to upset in my mother, that kind of thing. Long story short I wanted to finish college. Just at that point, the long lead up to that, my father died. So I headed off to medical school, and that was my brother's first hospitalization. He was in his late 20s.

Gregorsky: How could you afford medical school?

Kerr: Well my father had a good job, and he left some money and my mother was good enough to... It was a lot cheaper then to support me through it. Plus, I worked some and had scholarships. So, when I headed for med school I had this recent hospitalization of my brother, and began getting lectures in psychiatry, and various faculty members talking about schizophrenia and the mothers and fathers of schizophrenics. And it wasn't until my junior year of medical school that I heard Murray Bowen give a talk. It was a class called Mechanisms of Disease, and various people from different specialties came in, and this would have been 19-

Gregorsky: '63 '64.

Kerr: (Or '60.) My junior year. In the spring of junior year would have been '65.

Gregorsky: That early, okay.

Kerr: (No, no, no, no, I'm five years behind. '65.) So, he had been done with N.I.M.H. about five or six years by then. He had published that paper that was his first real theory paper until the next year,

but he gave this talk about the families of schizophrenia. Two things stood out. One was how incredibly involved and protective the mothers were of the kids, and how much energy and focus went to the kid, and particularly the one who's most involved. And then the second point he made is that to understand the intensity of that involvement you have to think of in multigenerational terms. And I just thought he was incredibly nonjudgmental about the process I grew up in. So, I was instantly attracted to this man's thinking based largely on, I'd say, a family experience. My best friend in high school, his dad was a psychiatrist when my brother started to get into a real acting-out difficulty after my father died, and the family went into a meltdown. My oldest brother and I wound up getting him hospitalized. Committed. Awful experience.

Gregorsky: And far more routine back then than now.

Kerr: Yes, but then I went to my best friend's father whom I knew because I used to spend summers, the end of summers, in Maine with them. So, he said "it sounds like your brother's mentally ill." There's so many stories I could tell, but I remember my oldest brother Bob, my mother, and I, the three of us sat there with the psychiatrist. And my brother Bob was just boiling, and said "you seem very angry at your brother." And this, I remember the look on my brother's face to this day. The psychiatrist said, "I think your brother's mentally ill; he should be hospitalized." It went very well except for the commitment part because Billy was shocked. "Why would you do this?" But everything quieted down when he got in the hospital. Years later, when I got to understand family, I began to realize my brother Bob was incredibly uptight, because he felt so responsible for my mother and her state. She was a wreck, and he just he couldn't stand dealing with that, wanted to get it fixed. Somehow, I think I was a little more, I was very responsive to her but a little more out of the loop. But at any rate. And then that led to that-

Gregorsky: Out of the loop meaning, you didn't have that sense of 'I have to fix this'.

Kerr: Yea, not quite with that intensity. Although, I was very attentive to my mother and very tuned in to, that you know, her needs her expectations.

Gregorsky: So, you tried to help but that's different from being a savior.

Kerr: In a way, right. Bob was just, he was just ... his wife was in the loop too; they lived close by. She would get uptight because of all the demands my mother made. Anyway.

Gregorsky: Billy was the one that had the problem.

Kerr: That's the way the family saw it, Billy was the one with the problem.

Gregorsky: How long was he committed?

Kerr: Well he was in the hospital that first time about 10 or 11 days, and as they say it all calmed down. He was happy, we're happy. It was a different family. For sure, he didn't need to be hospitalized. All somebody would have had to say is "the family's uptight here. You guys need to look at getting yourselves settled down." But of course, that wasn't even known at that point. But then that was what really tuned me into Bowen when I heard him, because I thought "this guy, he really does understand something".

Gregorsky: How close in time were the 11-day commitment of Billy and your first listening to Murray?

Kerr: Well that was a couple of years, because once he was in the hospital and out again, then my

first year and a half of medical school, I was totally oriented to being there for my mother. She was paying for it, but that's not why I was there for her. But it became a fairly stable situation. She now leaned on me, and I like to say her dream was that when I finished medical school, I'd come home, move in with them, and practice out of the home. And I think, probably, Billy might never been hospitalized again if I was willing to give up my life, because it all fell apart when I met my future wife. And then you can bet that my mother was negative about her. It wasn't just my mother but the chemistry wasn't quite for her.

Gregorsky: Her dream was implicit. You sort of deduced that she never said "Mike, I really want you to do this."

Kerr: No, she did say. She really, she really thought. I mean she was childlike in a lot of ways, and she really thought I would come back and just be there, and he later committed suicide. I'll say to people had I gone home after med school and done that he might still be alive today. And I could say that without feeling guilty about it once I understood what happened. Because the whole thing was this incredible interdependency that Bowen wrote about. So that's when things began to deteriorate. And I had not heard Bowen talk. That was spring of '64 and I didn't hear him till the following year. So, (it was) the first hospitalization was August '62. And I heard Bowen in '65. But at that point I was headed for cardiology probably. I thought psychiatry was interesting largely because of that experience, I think. And it wasn't until I finished my medical internship that I committed to the psych residency, and then I began to run into Bowen again. Even when I was an intern, and I was an intern at Georgetown and I would see Bowen coming down the hallways through the medical wards because they were doing construction. He had to get from psychiatry to the parking lot by going through the medical wards, and he didn't know me and I didn't know him. But I had said to myself "this guy is very serious" and he's in a hurry all the time. But I remembered him and I thought I'd like to get to know that guy. And then when I took the residency, I was sort of tuned in to keeping an eye out for him and eventually had contact.

Gregorsky: What year was that?

Kerr: Well we were married at the end of medical school so that was '66 that I got married. And before that, there was just a series of hospitalizations about every six months that followed from the time I met my wife (to about every six months.) (Until... because I met her,) and it was clear we were serious by late spring '64. (and) Billy's suicide was November '69. So, over the next five years, but particularly after I get married. The thing between Billy and my mother just got more and more unstable.

Gregorsky: And Bob was off with his own family and...

Kerr: Well he's in the local area. But you know just...and when things would get rough he would call me, and we'd sort of agree "I guess it's time to put him back in the hospital." And there's so many stories; there are so many different paths. But then I began to realize that there was this family process going on. It would break down between mother and Billy. Bob and I would step in. And we'd put him in the hospital. He'd quiet down and mother quiet down. He'd come out of the hospital, be on medication for a while. Stop taking it. Not that that made much difference. And then mother and Billy were fine for six months or so and then it would begin to deteriorate again. So, it's just very unstable and I think we were all pulling away from it, and mother was feeling pretty much unsupported. And Billy was, had been so much a focus in her life.

Gregorsky: There was no way she could replace the role that she thought you were going to fill and had to some extent fulfilled.

Kerr: I think that's exactly right. She... I could have definitely stabilized that triangle.

Gregorsky: She would really have had to be entrepreneurial to go out and find a whole new support situation. I mean... women of her generation really did not know how to do that, I guess.

Kerr: Oh sure. Her life was her kids for sure. She had friends.

Gregorsky: How long did she live?

Kerr: Well mother... long story there. But, once I got into Bowen theory, after that suicide I think I was enormously helpful to mother and the larger family. Because she still had a pretty big family, particularly a sister and her husband living in western Pennsylvania. We were Swarthmore. (And her husband.) (But mother had him initially.) And you know, how much, much information to put in? When I heard about the suicide, and I have some ideas about how that happened, I've been working with Bowen for five or six months at that point. And so, I called him in Philadelphia, because he was up in Philadelphia for a meeting.

Gregorsky: 1969.

Kerr: November 1969. And so I got him. I got LeRoy at home and then she said he's in the City Line Hotel.

Gregorsky: So this is when you're practicing?

Kerr: No, I'm still training.

Gregorsky: OK.

Kerr: And you know I was a first-year child fellow. I'm still in the middle of training. So, I go up there to see him, because I'm going to Philadelphia for the funeral, and I drove up Friday night with my wife Kathy and the kids. And then arrange to go and see him the next morning. He even offered to come out to the house if it would be helpful. But again, this was one of these sort of critical junctures in the whole thing. I won't go into all the details about how this happened but his deal was. He said, "your mother pulled up and Billy killed himself" and **that had** never occurred to me that **it** could have happened that way.

Gregorsky: I think I know what you mean by pulled up but explain it.

Kerr: Well the basics of it were, because as I got into Bowen theory one of the mistakes I made was that, I think, kind of pushing to make things happen. I saw this connection between mother and Billy and saw its destructiveness. Got overly focused on that and failed to respect the intensity of this interdependence. She was his lifeline, totally and completely, she would have easily killed herself to save his life, for sure. And so I didn't, I didn't appreciate that. So I knew that it was two-sided now. It wasn't just that Billy did things that made the family anxious, but the family did things that made Billy anxious, and I could see that. But I wasn't free of thinking it shouldn't be this way. That was the year I made-.

Gregorsky: When you had, when you made that leap, (was it,) is it fair to say that you no longer saw your mother in the victim role? She was like a coconspirator of sorts. Maybe that's a negative word.

Kerr: The theory uses the term reciprocity, but I wasn't judging it anymore. I just thought: this

happens. Long story to how I got there. But anyway, before I got to that point I was kind of encouraging her to be more independent and not be so focused on Billy, and son of a gun. Her sister had wanted her to take trips and do things with her and her husband. They were retired. Mother finally said OK. And so from late August of '69 she was gone for about five weeks with her sister, my aunt and her husband and that's when Billy began to come apart. And for the first time in, some period of time. I forget now. '69 was it. So anyway. So she comes back and Billy's a wreck. And then (the,) mother goes into a panic mode. Wound up putting Billy in the hospital. The hospital released him on medication after a week, but Billy was no better. I failed to appreciate how precarious the situation was. I was in phone contact. Anyway.

Gregorsky: Unlike the previous hospital stays that had made a marginal difference. This one didn't help at all.

Kerr: The level of panic that I didn't see in him through that. Nowadays I'd have picked up and gone. Now that I know what I do now. Just I would have understood what's going on here and found some way to get in the middle it and at least try to settle it down. But I thought it would settle down. But the level of panic and appreciating his level of utter dependence on her. (So.) So that's what he meant by she pulled up. She really wouldn't have done that without-.

Gregorsky: Pulled up stakes and traveled a little bit.

Kerr: Yes, to make independent decisions and do something for herself. Because when people get into these type of things and they get isolated from the larger family, particularly, as she was becoming, it just drags both people down. It's extremely vulnerable. But then I was key I think in the aftermath of that and being able to relate to the whole family. Particularly once I realized how this thing kind of happened. It didn't mean I still didn't have strong emotional reactions. And I was very, very helpful to my mother through that period by being in very close contact with her. She had the guts to go back to the apartment. Her sister wanted her to come back with her to Johnstown, Pennsylvania. Mother said, "no I must go back to the apartment."

Gregorsky: Is that where he killed himself?

Kerr: Yes.

Gregorsky: How did he do it?

Kerr: Got in the tub and slit his wrists and bled out.

Gregorsky: Did she find him?

Kerr: Yep.

Gregorsky: OK. Yes that was brave going back.

Kerr: Very, very brave. And so I would call her pretty much nightly. I was up there a lot. And she was doing alright until about Valentine's Day. Got through several months, Christmas. And then my aunt came to see her. And then my aunt-.

Gregorsky: Not the one she had traveled with?

Kerr: Yes, my aunt, who was kind of a second mother to mother even though my mother was the oldest. And very anxious about her. Talked her into coming back to live with them for a while.

"You just can't do this; you can't stay here." Wasn't mother's idea. Anyway, mother goes back there. Then the local MD back there puts her on a lot of medication. Everybody's treating her as fragile, that she can't make it, and...

Gregorsky: Rather than respecting her bravery.

Kerr: Right. And then my oldest brother, because mother would call and she'd say, "I want to come home. I want to come home." My oldest brother's panicked that she would come home. And he's got to be in it. He's got a mole on his arm. Sounds like I'm making this story up. But it's all true. That starts to grow. He's got a malignant melanoma that I believe firmly is related to what was going on in the family at that point in time. My father's death, I could point to that too. All these things I learned from the theory and applying it.

Gregorsky: And Bowen is making himself physically available for free consultation.

Kerr: Well as a resident, he, I would meet with him. But more and more I was getting my own understanding and a better understanding of what I needed to do in the family. And anyway, it worked.

Gregorsky: You learned the theory as practice. You didn't learn it as theory.

Kerr: No. Right exactly. That's right. I have on the job training (on the phone if you want).

Gregorsky: You have your own lab right there.

Kerr: Right.

Gregorsky: Like it or not.

Kerr: I'm not unusual except that my particular situation was a little unusual. So, but, at any rate, by June my brother Bob had his surgery. He handled himself well, I thought. My mother, through the midst of this, finally made a decision: "I'm coming back home to Philadelphia to live." And it wasn't that helpless posture. It was like she regained control of her life. And it was 1970. June. She lived for another 15 years. And many years later she said to me, "You know, I had four kids. Three of the four boys turned out pretty good. One not so good." She said, "That's not too bad, is it?" Because what helped her too, was that as I worked to understand her family better, be better connected to her family, and get to know her better, I was able to come into better contact emotionally with her. She thrived on that. And so, I think it did make a difference in her surviving what could have- She could have gone under in the situation she was in with her sister with all this anxious focus on her.

Gregorsky: And your father died before your brother committed suicide.

Kerr: Yes, dad died when I was a senior in college several years before. I'll tell you one other quick story, because I could go on for hours on this. I do a lot of presentations about my family. Now I'm going to do another book and actually going to write this up.

Gregorsky: Excellent.

Kerr: So, by the time I head for college, things have been a mess for a number of years. Six, seven years. Since the time Billy graduated high school. He was six years older than me. Until the time I went to college. Lots of upheaval. My Dad, there were symptoms in my parents. He would like to

move to the Eastern Shore of Maryland, which for the kind of work he could do he could do that. He was a traveling salesman, but it would have meant two things. One he's going to be traveling every week instead of every other week and mother's going to be isolated from all her friends in Swarthmore. Because this is something he wanted more than she wanted to do. And I'll be heading off to college. So they moved down there. When she signed the papers to sell the house in Swarthmore, she was in tears. Why my father couldn't see that, I don't know. But this was not a good plan. So they get down there and shortly after Christmas of '59. '58. Into early '59. She just starts going into the tank. Depressed, not eating, physical symptoms, you name it.

Gregorsky: Which one of the parents drank too much?

Kerr: Both. But dad was drinking and he'd come home on the weekends, he'd been drinking. I'd be away at college. Who rises up to take care of the family? Billy. The only one to move there for three, almost three years. He functioned beautifully. Held a job. When I come home for holidays, he would take me around town, introduce me to people. I said, "My God. My parents are in the tank." But when my mother, my mother got bad enough, we'd ship her up to her family and they would R&R her and then we'd bring her back down. She'd go back under again. This went on for three years and I was right in the middle of that. But Billy was remarkable. And then, by I guess, it was the summer of '61, they decided they had had it and (they) dad agreed that they would move back to Swarthmore. Billy didn't want to leave. He wanted to stay there and continue with his job and he looked to be doing well. So, they moved up there and then it was probably the best four or five months of my parents' life. I swear it was another lesson I learned, in retrospect, that the parents of the Billy's of the world, their anguish is enormous. This helped me enormously in dealing with families. I understand what it's like for them and it's not as if they want to keep this person in the infantile position. At that point everybody's being dragged down by it. It may start out having a function. Distance with the parents, over focus on the kids, but they never want the kid to become dysfunctional. When he becomes dysfunctional, panic sets in. Things start going downhill. So, I think they were relieved, enormously relieved, because they thought he was alright. That he was back there in Maryland and alright. Whatever phone calls they had, they didn't pick anything up.

Gregorsky: He's what 25, 26 by this point?

Kerr: So that brings us to 19 now. Well let's see. January '62. February '62 he would have been 30. No, no, no. He was born in 1934. So, 28. Yes. I think 28. That's right.

Gregorsky: And any objective person would have looked at Billy at age 27, 28 and think "you got it all together. You're helping your parents. Now you're ready to sort of be on your own."

Kerr: If they didn't know the history. Right. You know he was a sensitive guy. Couldn't hang onto a girlfriend. Too insecure. Just not very much of a self. But likable. And in that situation did his job. Delivered medications on his motorcycle. His picture was in a newspaper in eastern Maryland and he was kind of a well-known guy around town. But anyway then Dr. Hill who ran the pharmacy. Very nice guy really took Billy under his wing that helped a lot too.

Gregorsky: That's where he worked.

Kerr: Yes. He used to. And he called my parents in about November, early December. He said Billy is not coming to work. He's holed up in his apartment. I don't think things are going well. So, my parents went down and got him, brought him home. I think, I think that was right after Christmas because I don't think when I was home at Christmas he was home yet but then that next month was awful. Talk about probably the worst level of anxiety. It matched my brother's suicide period. My dad had always had an ulcer problem. (By the end of the...) They were all living

together through this winter and the rest that winter and the spring. Also, it got very serious in late April, May. Dad's ulcer perforated in late May—he died from (that and) it. It was like that triangle between my parents and Billy was totally inflamed. I was at college. I would call home and, you know, would get kind of a read on things. Well there wasn't much I was able to do and my brother wasn't nearby. So, his death, I think, was a complication of that too. So, it's a part of these experiences. It taught me how disturbances in relationship systems generate, can generate phenomenal levels of anxiety.

Gregorsky: So, by the late '60s you have two little kids. You and Kathleen.

Kerr: Yes, we got married '66. Melissa came in '68 and Rachel in '71.

Gregorsky: And what year was it when you hang out- either joined a partnership or hung out your own shingle?

Kerr: Oh practice. After I finished at Georgetown, which was '71. All my training was done. I had two years in the Navy, and then I came back to Washington specifically to work with Bowen in '73. Opened a practice out in Bethesda. And then once we opened the Center in late '75, early '76, I agreed to move my practice into the Center and have been at the Center ever since basically.

Gregorsky: And was the military service a draft situation, or were-

Kerr: Well basically it was Vietnam, and it was, you could get what was called a Berry Plan and they would allow you to defer going in to get specialty training if the Navy needed a psychiatrist. In this case they did. So, I was allowed to finish my training before I went in the Navy. And so, I had two full years with Bowen before I left Washington. And that was the period of such turmoil but also lifesaving for my mother I think particularly. So, then I came back to Washington in the summer of '73.

Gregorsky: Not knowing what it would become, or maybe you did have a sense of what it would become. But did you have the sense that this is a great, a long-term commitment and a great adventure or was it just...

Kerr: Absolutely. One time I was driving home at night. I was thinking I was driving up past Sibley Hospital and I was just deciding whether I was going to move into the new Center Bowen was founding. Because all of us had that, we had what was called the briefcase faculty before the Center: people would converge in Georgetown for meetings (and then meetings within the university), to find different places to have... It was a little helter-skelter and Bowen kept trying to get a space on campus and the department didn't go for it. Then he got a nice anonymous gift. The Department of Psychiatry did put up \$20,000 and so we moved into the Center. And so **did I**. But (while) I was debating, "am I going to move in there full-time or"... It was a shift really from a certain amount of focus on making money, and just go on pretty much academic without any guarantees. And I was driving up past Sibley and I said, "Well if you thought you were working for Charles Darwin wouldn't you just go move in and work with him?" Really that's because I really put Bowen in that class of an unusual, creative innovator. He really had something new and valuable. So, a lot of excitement. I think we both would go back and forth but I think we all thought then, by now maybe, things would be much more integrated into the mainstream than they are. On the one hand Bowen would talk that way. On the other hand, he would say 75 to 100 years for a new paradigm to take hold which I think is more realistic. We're 50 years now.

Gregorsky: Were the walls that y'all were running into, were they walls of obtuseness or were the walls of active skepticism, resistance, hostility.

Kerr: I'm not sure how to explain it, other than definitely in the department Bowen was, on the one hand very respected, and he was good for the Department of Psychiatry. And they had some very good people connected with the Department over at Georgetown. Well-known people who were sort of part-time or adjunct. But Bowen was one of them. Bowen was half-time. So, he was valued, but at the same time I think people for sure are threatened by Bowen. They thought he had too much influence on the residents. They thought he had too much influence on me. Long story there.

Gregorsky: He was half-time because the other half-time he had his own practice.

Kerr: Like he used to say, I'm full-time in private practice and full-time at Georgetown. I mean really, that man worked. And so, I think he was a threat, because it was, he was colliding for sure with the existing psychoanalytic paradigm. He really took on psychoanalysis and said basically it's nothing more than a description of intrapsychic process. It really doesn't explain very much. You have to have a much bigger picture, et cetera. At that point the department was pretty much Analytic. It never did change that much like some other places went completely biological. I would say he was he (was) perceived as a threat and the residents need to be protected from him. Originally psychiatric residents could study with him in their first year and the department pushed him to the third year. That kind of thing. And just out of step (and just not, he let go). It's not as if he added to psychoanalysis. He really let it go. Except for a few things that he retained, he moved to a completely different theory. I think he managed himself well. Like when we had an Annual Symposium which had begun in the mid '60s he'd say, "For God's sakes if we have a successful meeting and people at the department ask you how it went, tell them, oh, not so hot." Really because he knew the department would sort of be reading this. If we're doing well, it would be a threat; if we weren't doing so well, we're kind of in the background. You know it wasn't-.

Gregorsky: You think they'd be reassured by the fact that you were struggling or the idea that you were struggling.

Kerr: Right. But there were individual faculty members, not many but a few, who really respected Bowen. And so, but others were really working absolutely against him trying to undercut him. And that ultimately, I think played a part in our leaving the university when we did.

Gregorsky: Did you ever all- Do you ever find out who that pivotal early anonymous donation came from?

Kerr: I don't know. There's one person that does. At least I think she does. That's Ruth Sagar. But I've never asked her to tell me and she's never offered it. That was something I think Murray Bowen decided. So, I have no idea who did that. But that was key in getting us started. And (that) we were in the old place next door. But I don't know if you knew about that or not. We started on top of the building next door.

Gregorsky: I didn't know any of this or any of these people until 2003. You didn't really have question number three. We didn't really... We've gotten very nicely through the first part. You really didn't have kind of a framework except maybe as a default setting the analytic stuff that you were picking up in and around medical school.

Kerr: What I... I was really interested, for me the idea, what I liked about psychiatry was the whole-person idea. I pretty much, as much as I love cardiology and the systems field of cardiology which is probably the direction I would have gone in, and that's a good department, was a good department over at Georgetown. You know there was this element of losing track of the whole person. And I think I tried to, have my resolve, I'll try a year of psychiatry, because I like this mind-

body relationship thing because psycho, bio(-)psycho(-)social was the term that...

Gregorsky: So, people were trying to be holistic but they were still centered on the person.

Kerr: Yes, and really more... psychological thinking was dominating thinking, but then came biological thinking more and more; it started and dominated. So, psychiatry really changed in the '70s. So, but I remember somebody asking me early in my training, before I caught onto Bowen, and I said, "Well I think maybe what I'll do by the time I finish this, I'll become an eclectic. I'll take some of this, some of this, some of this. But even with the group therapist, I like the way they were trying to look at the interactions between people. I think because of my family experience, I had some kind of interest in the family therapy. People used to say who gets interested in family therapy? I don't know if this was Bowen's idea or several people, but he said, "You grow up in a family when one kid is in the direct line of fire. But it's not you. But you also, you pay attention so that when you hear somebody talk about this later you say "My God, I know what you're talking about." And I think I was definitely in that position. But I took an interest in relationships and then... Like if somebody came into the walk-in clinic with a problem, I always included the person with him in my assessment interviews, the ones who brought them, to talk to them both. Because I did that before I even knew much about family. But then when I got involved with Bowen and that came over a couple of exposures, a number of exposures. And me making sure I could hear him give talks, and he gave a few conferences to the group and I got more and more intrigued by this idea of systems. Really, really obvious to me.

Gregorsky: I know that you couldn't have been at the conference in '67 where he did the anonymous paper.

Kerr: No.

Gregorsky: But did he ever... Years, years later maybe when you were kind of in an informal setting, say here's what was going through my mind that week. Here's the risk I was running. Here is how people reacted that day. Did you ever try to reconstruct that pivotal episode for you?

Kerr: Yes, he talked about it often, but also a number of years ago I think, Judy Bowen, his niece came up with a copy of the audiotape of the actual presentation and discussion. Now it's all in the book Jim Framo published. The collection of the papers from that meeting. But listening to the audio you might enjoy hearing that... something came across. That Bowen was, this was not about judging anybody. This was not trying to fix his family. There was a looseness and respectfulness that came across in contrast to the confusion of the family therapists at the meeting who responded. To this day the idea of differentiation...people really, really struggle with that, because it went so counter. People heard it as being distant and not involved. One prominent family therapist described Bowen's effort as , poor Murray Bowen. He differentiated from his family. Now he has no family. I mean it was that kooky.

Gregorsky: They were reacting to that paper, or to his later work?

Kerr: Well it started with that paper, as he said, when he talked about it. I forget if he- I don't think that's in the paper itself, but when he talked about it later, he really was trying to differentiate a self within the family movement. Wasn't just the content of the paper. Because he was the first who really went off and said that if a family orientation is useful, it should be useful to you and to your own family. All other family therapists, if there was a family problem you referred them to somebody else to deal with it, and Bowen was the first that said, you know if this theory is worth something; it should be worth something for those important to you.

Gregorsky: And the fact that he could discuss his own family unemotionally. People took that as detachment. And they leapt to the wrong conclusion.

Kerr: You know if they can make sense out of it. How is this possible? Because if you listen to it, it's obviously constructive. I mean, his attitude, his tone, the way he describes it. It was a good thing for his family. And.

Gregorsky: But in our own lives and personal experiences, all they could think of was the traps that they have gotten out of.

Kerr: That's probably a good point. I mean the psychoanalytic idea really did foster the idea that if your family made you sick, the key is to get away from your family work and it out in individual psychotherapy. You don't have to deal with those people, or deal with them cordially or whatever. And he was saying oh no, because I'll tell you one quickie, was when I was going through this thing with my brother's suicide. And I was a first-year child psychiatrist fellow, at that point. The department knew about the suicide. And I had supervisors in the department and supervisors out in the community, and they would meet periodically. But the point was the department was seeing me as somehow not performing well. I wasn't getting into child psychiatry in a way they thought I should. And I'm not sure what they were responding to. And the supervisor outside the department said I'm going to a departmental meeting next week, and I know I'll just hear good things about you; you're doing great work. So, he goes to this meeting, and at the meeting the discussion is, Mike is either depressed because of his brother's suicide or he's being too influenced by Murray Bowen. So, they went with the idea that I needed therapy. And so, my community-based supervisor, when he comes back from the departmental meeting, he said we think you need therapy. And I said, "Well Murray Bowen is helping me with my family." And he stood up from his desk and he said, "You can't do that. Your family is too difficult." And he was serious. But I really, it reminded me what a pioneering direction Bowen had taken. To say you could actually deal with your family if you have a theory. The point is while the rest of the people in the family movement, they didn't really have a theory. They had good ideas but none of it was a coherent theory that could possibly help you navigate through your family. That was unique to Georgetown. We were super excited about it; to get your, to start this Center and to really keep things moving forward.

Gregorsky: You were away for two or three minutes here. Who. I mean, I know who he was, but I'm trying to ask a neutral question. Who was Edwin Friedman? How did he come into the orbit of Murray and the Center? And why did he sort of go off on his own.

Kerr: I don't know if I have all the answers for that, by any means. He was a trained rabbi, who then I guess he had his problems running congregations. I don't know all the details, but he got very much into counselling and made a name for himself with-

Gregorsky: Back in '85.

Kerr: Well even before that. Jewish-Gentile marriage counseling. And then he heard about Bowen.

Gregorsky: Friedman heard about Bowen.

Kerr: Yes, I forget how he heard about him, but at any rate, he came looking for Murray Bowen. Never took any training from this place. But Ed was a very gifted, extremely bright guy, and very innovative and charismatic and the Department of Psychiatry didn't trust him. They found him controversial. "Don't you ever put him on your faculty the department told Murray." Friedman was just a guy that people responded to either positively or negatively.

Gregorsky: Bowen - the place where he was flourishing was the Protestant religion. Well eventually. Yes, I don't know what to say about how much-.

Kerr: Friedman's first book is astounding. He takes all of Bowen's ideas and runs off to this totally different world, which doesn't think of itself as scientific or clinical at all and describes, "here's what I did. Here's the mistakes I made. I applied the theory, things are going great now."

Kerr: Yes, *Generation to Generation*. Yes, Yes, Yes. That was in probably early '80s.

Gregorsky: Yes, '84, '85. Here's somebody on his own that sort of took the ideas. He doesn't acknowledge them that much in the book.

Kerr: No that's right. That's right. In fact, it was one of the things Dr. Bowen would... I mean he'd give a lot of reasons. One of the things he would complain about privately is that he doesn't give credit to other people. And honestly, he said, "I think Ed loses sight of where he heard the idea in the first place and thinks it really is his idea." And Bowen was good at it. I think trying to focus on what's positive about a person and you know be aware of the other side. But for about 10 years, Ed, I think, contributed a lot to the Center even though he was not a faculty member.

Gregorsky: What was the mechanism via that he contributed?

Kerr: He'd come in and he'd give talks in the training program. He would give talks in our monthly professional meeting from time to time, gave papers at the symposium. He's a well-known figure. Around *Generation to Generation*, I think he began to get a much bigger following on his own. And build his own training center, and he was real sensitive to wanting Murray's approval and support. And there was a point in which things changed, and I'm not sure I understand it. Bowen went in for surgery for his aneurisms in the spring of '80. And while he was there I had sort of taken over here, and on Ruth Sagars' desk was a file appointing Ed to the faculty that had to go through the department. I didn't take any action on it while Murray was away because I didn't think it was my place to do that. I don't even know if Ed knew about it. But then Murray never acted on it, and in the '80s the relationship went south. And I don't really know exactly what happened but...

Gregorsky: So, you're saying a divergence opened up before *Generation to Generation* came out.

Kerr: Yes, yes. I know when my book came out, *Family Evaluation*, Ed called me up and said, "It's a good book, but you don't explain anything in there about how you do it." And that was an interesting comment. But that was... They had a memorial meeting for Ed years after his death. I agreed to go and give a talk there and try to defuse the little things, because his whole group was just the-.

Gregorsky: The Sojourners.

Kerr: Yes, well, they're the Voyagers. Ed's original group, I forget what the name of it was, but his daughter... Was this the first... No Lee Kelley found a letter that Ed had written to Murray Bowen in about 1988 or '89. (Which) Ed said, "Your theory will never be based in science." You're all hooked on science. You need to get away from that and all you have is a method of therapy and you need to spend more time helping people learn how to do this." I was shocked when I read the letter. Because Ed was more into the kind of philosophy of things. But it does show there was a great divergence.

Gregorsky: Didn't Murray call Ed the "metaphor man"?

Kerr: The metaphor man. And he was good at it. I mean, he could have an audience in his hand. I have always had a hard time understanding Ed, who is brighter than I am, but I just couldn't always follow him. Murray enjoyed him until a certain point but then it all changed. And then at the memorial service his daughter said, "And going through his papers I found a letter", because he kept the carbon copy that he'd written to me. This was about, oh I forget because she... Some people thought maybe Ed thought he should've been the new director of the Center and not me. But it was just Ed criticizing the hell out of me for the way I was doing things, and she said, "I've found your response which was sort of nice. You didn't take him up on it." But it's, the whole thing became very complicated with Ed, and I can't say I know all that went into it other than they were very different in a lot of ways. That Ed had a huge following. The problem I think with his following to this day, he still, he was the charismatic person. Bowen worked very hard to get beyond the person. It's the theory. Ed's very much the person, because I meet with their groups from time to time, at their request, and that's what they're struggling with. They like hearing about theory but ultimately, I think Ed was a charismatic movement. But had, for sure... I think a lot of positive effects but...

Gregorsky: I'm going to read this exactly how they crafted it. We've sort of eased in to it a little bit. In 1990 the Georgetown Family Center became a freestanding center. How did that come to be? Please relay any theoretical thinking that went with that decision. Were you both, you and Murray, both in agreement or were there are differences? And what about some of the administrative areas where differences emerged?

Kerr: Sort of one little story that I tell from time to time is, when Dick Steinbach was the chair and he died in '82, I believe. Dick, even though he didn't have any real understanding of theory, thought Bowen was good for his department. And then there was an interim chair from '72 to '76 who always had a lot of admiration and respect for Bowen. But in that period after Steinbach died a number of people in the department started getting more and more outspokenly negative about Murray Bowen having too much influence in the family program which was still, in those days, the family was still supposed to be part of psychiatric teaching that eventually got dropped off along with a lot of other psychotherapy approaches that programs were supposed to teach. But definitely in the late, late '70s- early, first part of the '80s, I remember hearing more and more sort of discontent with Bowen being too influential.

Gregorsky: Was he trying to influence them or just doing his own thing, and the influence was sort of by osmosis.

Kerr: Osmosis for sure. No, I think definitely he was good at not trying to sell this to anybody. He was outspoken, but he wasn't trying to sell- he didn't want disciples. So, I think that was, I think when they replaced with a former psychiatric resident, who I had known when he was a resident, who I would say really disliked, if he didn't hate Murray. He regarded Bowen as arrogant, almost dangerous. And I think he was key in convincing his department, although he had a lot of support from certain discontented people, that their, then 15-year relationship, between the Family Center and the department should come to an end. Because the way it worked, we paid our own way and we also paid the university 10 percent, I think it was. Or even 20 percent of everything we earned. So, it didn't cost the department or university anything.

Gregorsky: That covered rent, electricity. I mean was it that kind of a thing? It wasn't a royalty or such.

Kerr: No, it was just overhead. But we did pay our own rent, utilities, all that. So. So then it came. We had leases we signed in '80 and '85 and it was coming up in '90. Before Dr. Bowen would have died. Also Dr. Bowen was getting more symptomatic with his pulmonary problems particularly. I think, although I never heard this voiced, that the department thought if Bowen died we couldn't

make it without him. That he was too central to the success of this operation.

Gregorsky: The marquee name.

Kerr: Yes, Yes. So, I think that it made them nervous, because even though we were paying them, they were still signing the lease. So, they were liable not us. Although we never failed to meet payments. So, but, I think the combination of this new chair, I think wanted him out. And the fact that Murray was physically not as capable made people nervous. And it also was a kind of long standing thing that people felt he had too much influence.

Gregorsky: Who was, the guy, before you said, was fine with having Murray around because that kind of, good PR and stuff, who's that guy.

Kerr: Richard Steinbach.

Gregorsky: Richard Steinbach. He was able to not be threatened by the ideas even though he personally probably didn't agree with them.

Kerr: And I think Murray always had a good way of dealing with him. He would always, he was straightforward. He'd go to Dick and tell him, "This is what I have planned," and Dick would approve everything, nothing going on behind his back. But yes, he was not a threat. And Dick was strictly analytic because George Raines was the one who first, who was chair at Georgetown when Murray was finishing at NIH. He said maybe think about coming to Georgetown when your time is up here. Raines died either just before, or soon after Murray left NIH. Steinbach became chair, and he was chair from '59 until he died, I think it was '81, '82. So, there were problems but it worked. And it helped in the first five years at the Center, Dick would come to introduce meetings and then we were seen clearly as part of the department.

Gregorsky: From '73 on, were you getting all of your income from Georgetown?

Kerr: I never get an income from Georgetown none of us did. Murray had a half-time salary, which was not very big. And he'd hoped when we became part of the University, we would maybe all get salaries too. But it never materialized. So, what it meant, and it turned out in a way that I was glad it happened, but in retrospect. I had to continue to support myself with a private practice. And so, I saw a lot more people than I would have ordinarily seen if I was given a salary. Which gave me a lot of clinical experience I wouldn't have gotten.

Gregorsky: What was your balance? He had half and half. What was yours?

Kerr: I didn't get paid.

Gregorsky: Well that's right. OK in terms of time, in terms of time and energy.

Kerr: Oh, I don't, I see... I moved my office into the Center. So, I was at the Center. And five or six of us did that. At least six of us, I think, were in the Center full time, but we practiced out of the Center, in those days we had a free office. We eventually had to start paying rent to keep our balance, budget balanced. So, then I just contributed time. It worked out. I enjoyed it. I think we've all enjoyed it. As you said earlier I think we were part of something we thought was going to grow.

Gregorsky: And it was sort of like your think tank and you were funding it with time and energy and any surplus that you could get from your profession.

Kerr: Exactly. And the training programs are now housed in one place. Meetings were expanding, the number of meetings. It was very, very active.

Gregorsky: And the name Georgetown made it easier to get donations, I would assume.

Kerr: Maybe. People like to call it Georgetown and think of it in a university setting. It was a good thing. I don't think we would have left on our own volition. Basically, I'd say we got kicked out. The story I was going to tell, of a long negotiation about getting the money. We thought we were owed some money that Georgetown claimed was theirs. It was a significant amount, twenty-five thousand dollars, maybe more. So, Ruth Sagar and I, because Murray was not at his best then were negotiating that and actually worked it out. They did give us the money. It was one of the best negotiations that I was ever involved in. But then we met on the top of Kober-Cogan dormitory over here on the medical campus. Top floor overlooking the campus, where the finance officer, the department chair who wanted us out, Murray, and myself. It was a December...no, I think it was a late, early spring day. Kind of cold, and Murray was in his overcoat. Not at his best, again this was to be 19- This must have been '90. He stopped coming in to the Center in late '89. Anyway, we worked it all out. Murray kept talking about theory and the future theory and everything else, and the finance officer and I were trying to hash out the finances. We got it all signed and sealed, and they left. And then there were cans of soda on the counter there and then Murray walks over with his overcoat on and picks up a can and says, "Mike, you think Georgetown would mind if I took a couple of these?" It was such a poignant moment. Here's a guy who's going to be a national, international resource someday.

Gregorsky: And he's being nicked and dined by these people.

Kerr: He walks out with a couple of cans of soda in his pocket. The department's attitude was not good by that point. They were getting, like all departments, a lot of pressure to go more biological, get money from drug companies. The atmosphere when I came along in training was ideal, because there was still a lot of NIH money, NIMH money. And so you're still, your focus was on academics and training and not having so much to provide an income for the department, because it was coming from the government. Then the government money dried up and it put a lot more pressure on training. Situations that... this changed everything.

Gregorsky: All right well speaking of that late '80's period. The question from that committee: what took Dr. Brown so long to write his book?

Kerr: I would say he didn't have time to write a book in the '70s. People were pressuring him to write a book, and he just said I'm developing ideas too fast. Things are constantly changing. He might have been ready at some point. But anyway, I think Jason Aronson who ran this book company that the Bowens may have talked about. It was a nasty connection, but I think approached Bowen about "Why not publish your collected papers." In 1978 that came out. So, Bowen agreed to do that. So really that's-

Gregorsky: OK that's his book. I'm mixing up two books. The one you all wrote ten years later. I'm sorry.

Kerr: The one 10 years later was, well actually I started writing in '85. I was approached by Norton Books. I had written a little piece about cancer in the family or something in an American Family Therapy newspaper. They printed it and Norton's professional books person, saw it and said, "Call me. Would you want to write a book about this or something else?" And by then we were working on, had been working on for a couple of years this idea of Family Evaluation in a system. It was basically Murray's idea, but we worked on it as a think tank, a small group of us to

develop it. So, I suggested to Murray, that might be a good subject for a book, Family Evaluation. And build it around this system of assessing a family. And I said that since this is based, the basic ideas are yours, would you consider coauthoring a book. I would write it, and maybe you would write an introduction to it or something like that.

Gregorsky: Okay.

Kerr: So that's how it came to be. That was in '85. And then, but, I didn't know at the time, I would write chapters and present the gist of the ideas at the training program. In those days (in the mid-'80's,) Bowen was still coming on Tuesday nights for the training program and every once in a while, I would present on what I had written. He would comment on it. He had suggestions. So, in the early part of the book we did exchange a lot. And it helped me, because I changed some things. He said, "If you put chapter one as individuality-togetherness," which was what I had, "people are going to think that it's a philosophy. You've got to establish that base in science first." So, I changed the first two chapters to be totally devoted to establishing a base in science.

Gregorsky: But he was reviewing your drafts. It wasn't just commenting at presentations.

Kerr: No, he wasn't reviewing my drafts. And then, one time, the one story I know, he didn't put it in the epilogue he wrote for the book, but he came in one afternoon and there was a copy of a chapter on Ruth Sagar's desk that I had asked her to edit for me. She's good at that, and I needed help. And he picked it up started reading it he said, "I wouldn't write it this way." Then he put it down. he said, "I got to let Mike write his book." And so, it was deliberate that he would trust me to do my thing. But also, when he wrote his piece for the book, which turned out to be almost...much longer than he anticipated, it was so delayed, what was intended to be an introduction had to be at the end of the book. He pointed out that he specifically had not wanted to read what I had written ahead of time, and he wrote what he was going to write, and this long epilogue and some other things. And so it sort of demarcated, people still fuse it together and quote parts from my book that I wrote as if he wrote them with me. But it's not true I wrote them. But he trusted me to do that.

Gregorsky: Were you able to see what he was going to have in the book?

Kerr: Well I didn't. He told me, but you know I didn't ask. I wasn't ever going to mess with what he was going to be doing. I didn't care. Because I knew he wanted to write about sort of the... his idea was, "I'll write about the past and then you will write about the present." So it worked fine and then when "The Atlantic" excerpted it that was really an exciting time because he was... And the Chicago Tribune wrote a very nice review of "The Atlantic" piece and he was really excited. "My God, maybe people are going to hear." And that really got to him a lot. I mean all of this hard, hard work and people still not hearing. Unlike, say Darwin, who was famous in his own time. And Bowen's famous, but nowhere near...

Gregorsky: And you couldn't ask for a better platform than "The Atlantic." A respected magazine.

Kerr: Yes we were very fortunate with that. So that second book came because of my initiative, and his agreement because of the way the ideas were structured. We could do it together. So, it was one of the most important things I did because it made me say, "Now where do I stand on this theory." And I think it affected my relationship with him somewhat not because we disagree. We were sort of more two individuals in the same place. Oh, the one question I didn't answer. It was different in favor of the formation of the Family Center.

Gregorsky: Somebody at the Tennessee funeral service on October 15th 1990, because Judy just gave me the video. But somebody gets up early on, it wasn't you, it wasn't her dad, Murray's

brother, but says, "You know people say that, people think, everybody believes that damn cigarettes killed Murray. I don't think it was. I think it was the Tennessee work ethic." What do you think it was?

Kerr: Well I say the same. I mean, the whole notion about disease is that it's never any one thing. For sure, cigarette smoking is an irritant to the bronchial tubes. And if somebody had the work ethic... I remember when, oh what's his name. The great conductor, Bernstein, died... wasn't too long after Murray died. The comment was this man lived seven lives in one.

Gregorsky: Albert Schweitzer was another guy like that.

Kerr: Murray just pushed and pushed and pushed. And he said, "If it could shorten my life so be it; I want to do as much as I can." Not that he wanted to die, but that he just had a lot of energy and just worked and pushed himself and took on huge responsibilities. And as LeRoy likes to say, put a real dent in psychoanalysis. And I think the way he lived his life generally was probably a bigger factor. And I would see smoking as maybe more a factor in shortening it a bit. And also the type of problems that eventually got him. But I don't think, because everyone too was really on him about smoking cigarettes. And that was the cause. He used to say, "If I stop smoking, I can't think. I started in college. It's always been associated with my best thinking and I'm going to keep doing it." I think we kind of wanted him to stop, but he didn't see it as something that would work for him.

Gregorsky: Was he able to stop for a while? Three months, six months?

Kerr: There are times when he did, as I recall. He was smoking right to the end.

Gregorsky: He would probably think this is a terrible idea. But if there were five or six or eight years from now a full-scale biography, including not just the theoretical stuff but all of the experiments, the pioneering, the trial and error, what he learned in World War II. If there were a biography like that, how important would that be to get somebody to write something like that and have it be published as a real full-scale biography?

Kerr: Yes. Well I fundamentally think it's a great idea, for sure. How good would it be? Depends on who's doing it of course.

Gregorsky: The material for a wonderful saga of a visionary pioneer is there.

Kerr: Absolutely. And the interplay of... Yes. There are people out there who call Bowen theory, "Oh that's for males. Males, are the ones who think, females feel." Crazy stuff like that. Or "Oh it's just middle Tennessee male talking or whatever." Absurd. Yes, a good biography, good documentary. That would be a great thing. I think that without a question it's merited.

Gregorsky: The thing that would appeal to me is seeing the process of developing the theory, not the theory and explaining processes. But his trial and error over the years. I find that absolutely fascinating.

Kerr: And I think that's where Catherine Rakow's such a resource, because she's really, I think, deeply knowledgeable about a lot of that period. I watched it more from the time I was with him, from then on. And not that early period, and just heard about it.

Gregorsky: All right we have another vote for the biography. How did you come to be the successor to Bowen as director of the Georgetown Family Center? You didn't get Ed Friedman's vote. We know that.

Kerr: I'm not sure what to say about that. I think when I came along in 19- basically 1969 on, I don't know, there was always a sense of a very solid connection between Murray and me. And some sense that I would be part of the future. I don't know that people spelled it out but I think a lot of people saw me as a great addition to the group. Bud Andres was his sort of number two at that point and doing a very fine job. But he split with Bowen later in the '76 period roughly. Otherwise, I would have stayed where I was. And I wouldn't have wanted to jeopardize Bud. He was doing a great job.

Gregorsky: What was their divergence?

Kerr: Depends who you talk to. One time his wife later, at a cocktail party, said "I'll tell you what. Bud loved Georgetown and I yanked him out of there. It was taking too much out of him." I know for sure his back gave out. There was a lot of pressure on Bud, and I don't know exactly how to itemize all the factors, but I know it was creating strain in his marriage from what his wife said.

Gregorsky: So it wasn't theoretical in any sense.

Kerr: Bud questioned some theoretical points, but none of them were particularly substantive as far as I'm concerned. I don't think Bud had any fundamental disagreements.

Gregorsky: I mean his wife may have wanted a bigger house... that maybe...

Kerr: Could be. I know that Bud helped get this grant for a family fellowship from the NMIH. And in order to get it started we had to get some fellows, and we took some real borderline people. Bud was pretty upset about that. And Murray said we have got to get this thing going. Bud had a point I think, because one or two turned out fine. Then we got some other better fellows later. So there were some administrative things they differed on. Bud you know, to this day I think he's just a missed character around here.

Gregorsky: He left in the late '70s or later?

Kerr: Yes, well '76 '77. He, and then he really exited. But he was central for about 12 years.

Gregorsky: So, and you said earlier, Murray didn't want disciples, not that you would have wanted to be a disciple, but if you had, that would have been the kiss of death.

Kerr: I mean, I think he, yes. I mean I think he respected me as I respected him and didn't see me as a disciple. Yes, he didn't. If you look at all the people who've ever been involved, there's huge variation in how much it really becomes a part of somebody.

Gregorsky: How much that theory becomes a part-

Kerr: Yes. That they can really live it and teach it out of that and write about it out of that. For whatever reason. I mean I think I was overly dedicated to the task. Overly. To the neglect of my family to some degree and promoted a certain amount of child focus in my family by the way I dealt with that. But I was just. This to me was everything. This was big. And I really have devoted myself to that. So that was in it too. He knew I wanted the job. And then when he almost died '81, because he could easily have died. And I think people were beginning to think me. Then, basically, I was a number two. Director of Training and serving that function, being perceived that way, not only locally but in the network. I said "Oh my God." And I said "Do I really want to be director of the Bowen Center if something happens to Murray Bowen."

Gregorsky: You were only 41 at the time. Yes.

Kerr: Yes. And fortunately he survived, and I had another 10 years to think that through. So by the time he did die, I knew that's what I wanted to do. And then when I got the job then I really ratcheted up even further if that was possible. Because the responsibility is so big to represent the ideas to best of your ability.

Gregorsky: And you still, because of the way the institution was set up, you couldn't take a salary from it. You kept yourself and the family alive by your practice?

Kerr: By then too, I was doing more meetings. So, I get honoraria for conferences, but that's the way I did it. My practice and honoraria worked. I never would have imagined that I would have worked this kind of schedule. And one of the reasons I like Maine is that I don't have that same pressure on me but I'm still as interested as I ever was. For me and it was a good decision. Less financial pressure, less time pressure, less sense of responsibility about what happens here, but continuing to want to be part of it.

Gregorsky: And did you formally take over after he died or before he died?

Kerr: Well the year before he died he... During '89, it was clear that we began sort of planning, well we had to plan the transition to not-for-profit, because we knew then we were going to be leaving Georgetown. And so I was became gradually more central to leading that thing, although we met at his house a lot. I was doing more and more and more. And so by the time he died in October, he hadn't been at the Center for I think about all year, we would go again to his house and meet there.

Gregorsky: Because he wanted to root these ideas in scientific, confirmation practices, et cetera. But also he was raised in a very conservative traditional part of the country. Can you tell me, and maybe it's not my business, but what was his attitude or feeling for whether there's a supreme being, whether there was a God. Whether there is another dimension that we can't even fathom.

Kerr: I don't know what to say on that because it depends who you ask. I think Mrs. Bowen, she's not here to speak for herself now, but she would call him spiritual. I believe she used that term. And I understood that. I can just tell you that he told me one time he saw God as a creation of man. But at the same time, I think he respected religion and he wanted to incorporate in his concept of the, systems concept of supernatural phenomena.

Gregorsky: That was really ambitious that would have been fascinating if he could have-.

Kerr: Yes. Because beliefs, whether fact-based or not, we all know are hugely influential in human behavior and he knew that. People I think got confused by that. I think really he was just trying to, how do you make it... what is factual about that that can be incorporated into a natural systems theory.

Gregorsky: Atheists go out and try to prove there is no God. He never would have taken it to that extreme.

Kerr: Absolutely not. He was never against it and I think knowing all the problems that come from organized religion, he also believed the positives far outweighed the negatives in his view.

Gregorsky: Is there a decision that you made, got to be one, in running the Center after he was

gone that you would like the chance to be able to unmake or make again?

Kerr: Oh, I made a number of mistakes early on. I'd say it took me at least ten years to get... [to] educate myself, close to where I wanted to be, and it really, in the last five [years] I think [I got to where I wanted to be]. Probably one thing, that I didn't realize at the time, is that I would personalize too many things. And then in dealings with people, personalize it too much. It might have been obvious to them but it was obvious to me that I was overly invested in how this thing was going to work and how things ought to be done. Not huge. But I knew it. And gradually I got past that, and I think I learned a lot more about, you know, as the director here you do have the final decision. There are no votes. So that, but I'd had learned better how to draw out everybody's ideas. Have a pretty open exchange and whatever decision I was going to make, and it wasn't often that I had sharp disagreement. Handful of times. People understood it and respected it. I just got a lot better at that.

Gregorsky: Did you have what could be called a peer group or a support group? People who weren't in the Center that you could go out and hash things out with?

Kerr: I didn't do that. I know Dr. Bowen did that in his earlier years. I don't think he did it in his later years. But, you know, I had a group here that I really trusted who, when they were upset about something or disagreed with something, they'd come right into my office and tell me what they thought. I knew that was essential.

Gregorsky: They shared their anxiety.

Kerr: And opinions.

Gregorsky: They didn't button it all up.

Kerr: Ruth was great at it. Bobby Holt, my wife actually. That was a big deal working with... She worked in the Center. Lots of work on that. And I would say it took us a dozen years to get it to the point that it was creating far less problem than it was... that the benefits were far greater than the point people got triangled like anything into that. I played my part. But eventually I think we started doing better. That's huge. Now I think Murray worried about that once, because when he was alive people felt they had a buffer between my wife and I. Because she was very responsible, very productive, still is. Did a lot. So that was a big deal. But that got a lot better. It got a lot better.

Gregorsky: Let me ask this. Do you have another appointment right now?

Kerr: No, no.

Gregorsky: Can I get another 10 minutes?

Kerr: Oh, for sure I set aside time until 3. Maybe you said, yes, I'm good. I thought maybe.

Gregorsky: Because in politics, which is where I come from, some journalism and politics. Triangles are absolutely necessary. My favorite one is Nixon dealing with Russia and China in the early '70s trying to change that relationship. Prevent the Russians from taking out the Chinese nuclear facilities, which were very young at that point, and trying to get China to help with North Vietnam so that we could get out of Vietnam without losing our ally. I mean, it's just you couldn't conduct politics without triangles and interlocking triangles. Does the theory see them as something that obviously are natural and occur all the time but are they seen as a negative? Something you should really watch out for and try to avoid?

Kerr: Well, here's my thought there. I went to Notre Dame and then when Ted Hesburgh's book came out I read it. And Hesburgh, I thought was a pretty phenomenal leader. But he has a chapter about how he dealt with the '60s campus riots, and he made clear "I might even support some of the principles they're rioting on, but I don't support the process of interfering in the lives of..."

Gregorsky: Shutting down schools.

Kerr: Shutting down schools. So before, he knew what he decided that he was going to take a stand with the students. He knew that if he did that many of the faculty, if taken by surprise, might wind up siding with the students. So what he did is go to all his key faculty. Tell him what he was going to do, why he was going to do it. This is the principle it was based on, and he wanted them to know that ahead of time and hoped that he would have their support. I don't think of that as a triangle. He took his action. They stood by and they didn't take a side.

Gregorsky: Tell me again what his action was.

Kerr: Well he said to the students "cease and desist or every other student is going to be kicked out of school."

Gregorsky: Hesburgh said that? Wow.

Kerr: And he wound up kicking out a few. They all came back within a year. But things were getting... there were threats to burn down the ROTC building. It wasn't as wild as some other campuses.

Gregorsky: Two people died at the University of Wisconsin when the bomb exploded.

Kerr: Yes. So that's... and he did, he did that. I think they were occupying the main building. I forget this was after... of course I was there... but so.. To me what a triangle is has to do with the lack of differentiation in the system, it's driven by anxiety. And where two people are siding, that's an emotional process. Forming an alliance with another nation to deal with a third nation...

Gregorsky: Is a conscious strategic process.

Kerr: Yes and principles can be involved and planning and deliberation. People do extend that idea. I think there is an emotional process of triangles and society, but the kind of examples you give, myself, I wouldn't necessarily...

Gregorsky: Even though there was plenty of anxiety when the Chinese came to Nixon and said "the Russians are threatening to take out our nuclear weapons." But is that anxiety, or is that a concrete fear? Like we have a problem. We want you to help us with it.

Kerr: And this is a good question you're asking, but I think of it as different. The concrete fear. And although I do think the other side is interesting somebody was telling me they gave a series of talks in Korea and brought up triangles and several people in the audience said "My God, if you took triangles away, what else would we have?" That's the way you get through your day. And not to be against it, no I don't think there is-.

Gregorsky: So is the advantage of it is that it sort of offloads or redirects energy that could cause a conflagration?

Kerr: Yes, I think so. I mean, Kathy and I who've been involved in this thing, here, that was one of the problems I think we had early on that we could sort of vent our anxieties about what's going on here to each other. To me, that's a triangle. Honestly, I don't think that happens anymore. We can talk about what goes on here without it becoming an anxiety-driven triangle.

Gregorsky: So, at that point you were the close sides and the Center would-

Kerr: In the beginning.

Gregorsky: Okay.

Kerr: We can, we can be guilty of that. I remember one time driving home with Murray in the car and he said "Mike I think it's possible for two people to talk about a third and not be a triangle." But I think it was a good question and he asked me questions like that. I think that's true. Two people can talk about, people are interesting and people want to keep informed. I think it's a good thing to pass information around. But he was also, he became aware of how deadly it can be and how toxic it could become.

Gregorsky: And that's the fusion aspect.

Kerr: Yes having anxiety building. And people becoming the outsider. Two people. Two living at the expense of one.

Gregorsky: And does an interlocking triangle, or two triangles that interlock does that become like one molecular structure, and they all just sort of go around?

Kerr: I would say like in my family, it would be the triangle between my father and my mother and Billy. And I could get in that as part of an interlocking triangle, siding with my parents against my brother. And my older brother would get into that big time, because my parents would complain to him about Billy. And this would create a big negative between my brother and Billy.

Gregorsky: OK in that case there are five individuals involved. Or is it 4?

Kerr: 5.

Gregorsky: 5, okay.

Kerr: 2 parents 3 boys. So that would be to me that's interlocking triangles.

Gregorsky: And rather that it's a fixed structure the elongation and distance is moving back and forth.

Kerr: Yes. Like a flow. I think, I like, the best phrase to me is "the flow of emotion", and it can move into another triangle.

Gregorsky: So the goal throughout. Again, you're talking to somebody who has only fumblingly picked up these things from friends and clients since 2003. If you are aware, if you can reduce the emotional reactivity, if you can step back and at least think part of the time at least to what's going on. I mean that's what you should aim for as behavior.

Kerr: Yes what I say to people... I mean the key thing is you're shifting from cause and effect to systems thinking.

Gregorsky: I see. No linear thinking.

Kerr: Right and so that then becomes a lens for looking at a relationship instead of blaming yourself for what's going wrong, or blaming the other for what's going wrong. You're looking at the interaction. And the key, I think, is that you begin to think about this in a new way. You're not into blame and self-blame. You're seeing reciprocity and that's a way of thinking. A way of looking it. My own view is there's a kind of neutrality in that, I think. Because you're beyond blame and self-blame. And you're seeing the whole, particularly when you see it as part of a triangle and all that. And then if a person can then take action on that, that's sort of defining a self. I think this is a Murray Bowen quote. I think he called differentiation as a way of thinking that translates into a way of being. Because people are all the time trying to control their reactivity but not necessarily thinking differently about what's going on.

I know if I don't let this guy get to me and react, it will be better.

Gregorsky: But that's just a tactical thing.

Kerr: Tactical. Tactical, tactical right. It's not taught as a technique. It's really the way of thinking that makes a difference. So I try not to... I give examples of what people can do or could do, but I don't try to instruct anybody on what to do really. But I do constantly tune in on: how are you thinking about the nature of this problem? Like when I started practice. There'd be delinquent kids and one set of parents were all over the kid trying to control them. Another set of parents, they were stepping way back, deciding that didn't help. So then I... the ones that roll over to the kids, I said that, "You've got to step back." The ones that were stepped back, I said "you got to get more involved." And then I realized that both points of view that I said, was useless. It was "How are you as parents thinking about this problem?" And basically, they're blaming what's happening on the kid. And as long as they're blaming the kids they're stuck. Once they stop blaming the kid, then some parents can maybe assert a little more control, some a little less. But it comes out of... not out of anger or blame but out of a recognition they're part of the problem too, and they got to do something about themselves.

Gregorsky: That's great. OK let me ask you about... I took it out of order. You were at the Georgetown Family Center soon after Dr. Bowen introduced the concept of societal emotional process. You were also present with the emotional cutoff concept was presented. You've spent years on developing the unidisease concept as the next concept to become part of the theory. What is your understanding of the steps now needed or maybe that are partly under way?

Kerr: Well partly underway in the sense that I organized a conference last year in April. I think when people came to the conference and sat in there, the idea it just made sense to them. Because they had all these other people from different, from neuroscience from stress research, you name it. And we're all pretty much on the same page. And we had the Bowen thing, which looks at the relationship system and how that can generate turmoil. And then we had all these other people, and I think everybody sort of addressing all the common denominators here. So my attitude is that my next step is that I have to write a paper about this.

Gregorsky: Hold on. Go back to the conference. How much advance preparation and assignment giving had to go into it to make that conference effective?

Kerr: It's the most effective one I ever ran. I had run two really good ones. One on schizophrenia that went very well. I don't know, I think I have a knack for getting people who I know will make this conference effective.

Gregorsky: What do you say? Here's six questions that one way or another we're going to address. Come prepared.

Kerr: Not exactly. I just picked them because I thought for sure their research was relevant to what Bowen theory and what I was doing, and what others were doing with it. So I never really... I told them, you know, what my ideas were so that when I titled the conference I said "is this okay with you", because that wasn't necessarily their idea. They said we're fine with that. Like the guy with the brain and the neuroscience. He's got a whole systems idea of the brain. I think he had very little clue what we were talking about or interested. But I didn't care. "You just kind of like present your stuff. Let us integrate it." And he did a fabulous job, Doug Fields. But I read his book and I thought, "man this guy; we need this guy here. This is knowledge that's systems-based that will fit with others. And we're not going to get them all together this year. Yes. So I remember the first panel discussion, I did it differently. But I had all the speakers on the panel for the discussion and I had an hour for the discussion. And I sat there and looked down at this table and what they were saying. I thought, "This is great. How'd I do this?"

Gregorsky: Why did you confine it to one hour?

Kerr: Well they all had time and we had four panels and then, each guy had, I think, we gave each guy 40 minutes to talk and 20 minutes of discussion. It's just a format that worked. But I got to get it written. And then, my view is that, if people sort of accept it as a new concept, I don't think I have the authority to impose it on the theory. But if people began to incorporate it and treat it as part the theory, I think that's legitimate.

Gregorsky: It being the unidisease concept. Could you give the struggling amateurs a flavor of it?

Kerr: I would say too that, yes. Dr. Bowen really liked it. I mean he, because I first started talking about that in the '70s. He encouraged me get it written up. He was real excited about it.

Gregorsky: What was as it called that far back?

Kerr: I didn't propose it as a concept; I called it a unidisease model. And basically what it is, is that... I mean, it came out of my cancer study originally. But we have what's going on in the family. And then you have what's going on physiologically, biologically, and what's called stress research. So that stress research is showing that when people feel threatened, or the opposite you know, that there is a whole physiology that unfolds, mediated by the endocrine system, what's going on in the brain, and the immune system, that ultimately it can lead to disease states. And there's more and more understanding that fundamental processes are part of every disease state, like the endocrine system and the immune system, have a lot to do with driving the process. And they' are all interconnected with the brain. So that traditionally, we've seen the pathology say in the organ or tissue. And now I think there's been a lot more understanding of what is creating that pathology. Originally it was "There must be something wrong with this tissue that's killing it or making it malfunction". Now we're seeing, there's an awful lot of things going around this tissue and this interaction and whether it's cancer, or whether it's diabetes, whether it's heart disease, whether it's depression, these same fundamental processes appeared to be at work. There's not enough knowledge to say that with absolute certainty. But I got interested in that a long time ago. What are the common denominators? Because there has always long been a question. How do you take two people with the same diagnosis and one has a much more benign course with the diagnosis than the other? How do you explain this variation? So, then you bring in Bowen theory. And what I saw in cancer would say, is that the emotional processes that Bowen defined for understanding schizophrenia are there in cancer as well. But not saying that cancer equals schizophrenia. Because

with schizophrenia you have people who are extremely impaired and people who have one psychotic break and live a functional life. Same with cancer. Most cancers are never diagnosed. Many are, that are successfully treated. But you also get down in to the aggressive, more extremes. And that the emotional processes, by that I mean, attachment, reactions to disturbances in attachment, chronic anxiety, isolation, overwhelmed, seem to be common denominators in all diseased states. So, is this important? I think it is because, you know, if people, well it's going to change I think. Medicine you know is like we'll treat arthritis now with anti-cancer drugs. Try to kill the immune system cells. And there was, once the mechanisms are better understood, what's underneath and driving the process, I think it opens up new avenues for trying to treat it. But on the other hand, with family stuff, the idea is that if a person can use the presence of a symptom, particularly if not life threatening or not immediately, to take a look at what's going on in their life and think about, "Are there things I need to be doing differently?" I'm not saying we're changing things in dramatic way, but I think for some people it gives them a little more of an edge in dealing with the problem.

Gregorsky: So, your next task is to take the proceedings and the discussions from that conference and produce what? The magazine article? A scholarly paper? More than just the proceeding right after the proceedings.

Kerr: No, it will be a journal article that I'd like to get in to one that's more widely distributed than our own journal. There are many online journals that do theoretical papers. It's going to be a theoretical paper, but I've been interested in this for 30 years and, things are coming, definitely, coming together. This whole world of stress research I think has done so much as a bridge between what's going on and... Because the stress researchers know what's going on in a person's life has a lot to do with what's happening to their body. But I think what Bowen theory has is a much more systematic way of understanding what people are up against and how they're contributing to it. What is the threat? What is the stress? And in Bowen theory, a lot of it has to do with relationship process, particularly, those relationships with people that are most important to you. But it's not just that. I did a presentation in the Symposium on a book, based on a book, called *Stoner* by John Williams. It's one of the best presentations I ever did, because I think it showed the complexity of it and that over time how this guy was investing more and more and more in his teaching to keep him going. The marriage was in the tank, his kid was in the tank, his parents were gone. Then he faces retirement and he wants to extend. They turned him down. He dies. It's just that kind of complexity. I really appreciated. It went over well. So it's no one thing.

Gregorsky: His name's Stoner. That was his name? He was not a drug user?

Kerr: No, no. But then to think about it after I presented a clinical case that summarized the book and then showed people slides of what's going on at the tissue level. And for sure at the tissue level, too, it's all about disturbances and relationships. There's still a big jump because up to now we thought about cancer as a disease of cells run awry. The idea that actually may be, the cells may be responding to something, just like the schizophrenic is responding to something. Anyway that's the sort of idea. Now, I got to write it. I'm writing a book now.

Gregorsky: There's another, last question and I apologize to the committee this is not on the agenda either. But Judy Bowen and I had a talk about the upsurge of autism among kids.

And we went a little deeper and if you look back to when e-mail on the Internet came on stream '95, '96, '97. I would argue that it helped individualism. People were able to turn off the TV to focus, to go to websites, do their own writing, do their own research, learn more about medical issues and other things. Also, grandparents and kids were starting to change to e-mail, exchange emails. So you had some cross-generational stuff. Today, on the other hand, I mean I walk by a subway, and

I'll see two 20-somethings, a guy and a girl, sitting there, not eating their sandwich, doing this praying mantis thing with the two thumbs. And everybody is sending around little bits of information to anywhere on the planet. Friends, family, some of its practical stuff like you got to pick up the kids at 5:15. Don't forget. But we are, again this is what I was talking to Judy about, she says, "we are basically training kids to only respond to short-term stimuli." So, like the pill-poppers back in the '60s, the Rolling Stones. Here's my nineteenth nervous breakdown. What a drag it is getting old. Now, the pill is this little two-inch screen that everybody has in their hand. What do you see going on? And does the theory offer an antidote to some extent to this tendency? Because it's not all positive.

Kerr: Yes, I don't think I can improve on your description. I mean you just described what you're seeing, and I have to believe, as well, that this is having an impact. That the whole culture is changing and that the autism thing is messed up in that, makes sense to me. And I don't know specifically how it's happening but societal emotional process is such a hard thing to get a handle on it. I don't know if you've heard this book by Sylvia Nasar, *Grand Pursuit*. She wrote the book about John Nash *A Beautiful Mind*. I loved what she wrote. And this book, which I'm not quite finished with, it's about economics. And what's been hard to factor in-

Gregorsky: Sylvia Nash, the *Grand Pursuit*.

Kerr: Nasar. N-A-S-A-R. I like it. I don't know much about economics so I wanted to read this, because I thought maybe I could learn something. But my background idea is how can Bowen theory perhaps inform economic theory?

Gregorsky: Wow.

Kerr: You know that underneath this, there seems to be this emotional process. I think it's one of the frustrations with, like autism and other things. How do you really see that emotional process? It's not so simple to bring that into focus. I quoted a psalm one time, passage out of a book by a guy who was, who spoke about Admiral Beaufort who developed the Beaufort wind scale. And the book was called *Defining the Wind*. And he has this beautiful passage, basically it says, "you can't see the wind but you can see the motions of the leaves, and the bending of the limbs, and the rustling of the grass, but you can't see the wind." And I was thinking that's a beautiful analogy, metaphor, or what have you, for Bowen theory and the emotional system. When you're asking people, you see all these things happening to people and then you're asking people to see something that's in a way invisible.

Gregorsky: That's why his term emotional field was a big help to me, because you think of an electrical field and you can't see the electricity, you can only see the, the results of it.

Kerr: Yes, Yes. I agree that's a nice term. Emotional field that's one of the best.

Gregorsky: But are we, do we have like 150 million Americans walking around reacting to bits of information and also provoking other people with bits of information, apart from the practical utility of it. I mean it does make the day go smoother, I would think, in terms of picking up the kids, remembering to buy milk. And stuff like that. But what else are we doing with this technology?

Kerr: No, I. It's a good point and I think there's still a percentage of pretty thoughtful people in society, but this frenzy is overriding it in a way. And decisions are generally, seem to be made more reactive way.

Gregorsky: Have you ever seen a Facebook page?

Kerr: Yes, Yes. But I haven't been much into Facebook-.

Gregorsky: I tried it for six months and I did, to preserve my peace of mind, I had to leave it. I'm on LinkedIn which is a lot more stable and professional, but it's just people throwing **dobs** and links at each other. It's totally random based on whatever 50 people you've decided to be quote 'friends' with them.

Kerr: Right, no, it does seem antithetical to thinking. Even though it may have started out as a real plus because I, and anyway, Yes. I can't detail it, but I think you got a point.

Gregorsky: Do you like your office up there. You can write and sort of be into the mood, into the groove for hours at a time.

Kerr: Well actually, I'm not in it yet, because I'm working, and we built a shell of a house, in order to do this, we have to finish the inside insulation. Wallboard, painting, floors. Because, as a summer cottage. But now we've added this garage with a big bonus room over it and my office is going to be there looking out on the water. It will be nice. I mean, I am a person, I mean, one time I'm in Starbucks doing this with my computer. The place was jammed with people. It was noisy. A woman walked by, she says, "I'll bet you can concentrate, can't you?" Yes.

Gregorsky: I could until three seconds ago.

Kerr: Yes, she says, "You're just like my husband" that's how she went. But I am decent at that, but I'm very much looking forward to moving. This office will be ready probably in a month or so. I just got the contract accepted by Norton, and I'll be ready to work on it.

Gregorsky: That's great.

Kerr: Yes, I'm looking forward to it. My only fear is, can I write something that's new enough, different enough, because I know I've learned a lot in 25 years. But whether I can reflect that in the writing and to make this a better book that's more useful to people. I hope so.

Gregorsky: Well I don't know how it works in terms of self-put and independence, but in a year or two from now if you have some chapters that you would like an informed, but still ignorant, semi-half-assed practitioner to respond to, also a professional editor I might add, and I'd love to see some of the stuff as you develop it.

Kerr: I will take you up on that. No I appreciate that very much, because I do need a lot of help and also the kind of feedback that you're just describing. Yes, okay, I'll do that. Thanks.

Gregorsky: Thank you. Thanks for this interview it's wonderful.

Kerr: Well good. I'm glad you did. I looked forward to it.

Gregorsky: You have to in the future, I mean this would go on and worked out with, I said to Catherine, I said, "What do you want me to do with this?" And she said, "Well as long as we do something with it by 2013 I'm fine." But I'm not going to be the one that negotiates in terms of how you use this. Or how we use it. I mean that's Joanne, that's Catherine, our Oral History person. I assume at a minimum, you would like a copy of it.

Kerr: Oh sure absolutely. Yes I, and I knew in doing it, I mean...

Gregorsky: You didn't saying anything you're really sensitive about? I mean-.

Kerr: No, no. I mean, as I say about Murray Bowen, he is one of the first psychiatrists ever met who talked openly about his own family. Right and-.

Gregorsky: Yes, and I appreciate you doing that.

Kerr: Yes but also. Yes I mean, this is a system; this is an emotional system, the Center too but. Everybody knows that. Everybody has whatever take on it. So I don't go jumping into all that too much but the parts I talked about, like the situation with my wife and I in the Center, people, everybody here is aware that we've talked about it, what have you. Certainly not in complete agreement, but I'm not worried about putting that out there. No.

Gregorsky: No, no, on these matters you're your own authority. You don't have to persuade the committee to do this or not to do that. And it's probably good that we did this now as opposed to six months from now, six months ago.

Kerr: You mean by virtue of being away?

Gregorsky: Yes, just thought out a little bit.

Kerr: Yes. No it's been good being up there. I came back for the Symposium and then... Anyway it's good. I like the position I'm in now.

Gregorsky: All right folks we are done.