

SOME RULES OF THUMB FOR THE HELPING PERSON DEALING WITH A FAMILY SYSTEM

1. Keep the level of anxiety cooled down.

Don't contribute to it by generating conflict in the sessions.

2. Maintain your emotional distance.

Know your emotional "triggers" and don't allow them to be activated. If you do you'll be pulled into the system and become part of the problem process, not an agent of change.

3. Don't get triangled.

If you find yourself feeling sorry for a member of the family, angry at someone, wanting to rescue, or really liking someone in the system more than others, you're probably triangled. This is not to be confused with planned strategic engagement in triangles for therapeutic purpose. Rather, it refers to being sucked into an existing triangle of the family and becoming a part of an existing status quo.

4. Know your own family system.

This knowledge will help you to identify the ways in which you may be susceptible to being drawn into the the client family system's pattern of dysfunction. It will help you to answer questions such as; how am I most likely to be triangled?, what kinds of emotional cutoffs am I likely to miss because they are like my own?, and what are my emotional triggers? Knowing your own family has the additional benefit of helping you to resolve issues in your own system.

5. Get coaching.

This process is two fold. First, it consists of traditional clinical supervision from a family systems therapy orientation. Second, it entails examining ones own family with the help, support and guidance of a coach. Family therapists who have been in the field for years continue to engage in the coaching process as a way of keeping skills sharp and minimizing the effect of the therapist's own family on treatment efforts.

THE PREFERRED DEFENSE STRATEGY OF THE ALCOHOLIC FAMILY

The alcoholic family engages in a set of defense mechanisms which serve to maintain the status quo. The primary task in responding to this strategy is to promote the discontinuation of its use to support continued drinking related behaviors and support its use in development of self differentiation by family members. The key elements of this strategy are:

Denial

The family uses this defense mechanism to reduce extrafamilial pressure, and allow avoidance of direct confrontation which might disrupt the family's tenuous homeostasis. This results in continued drinking related behaviors under cover. Promote use of this defense to help family members deal with guilt and anxiety related to previous toxic behaviors until they are better prepared to do so.

Projection

While drinking was active, this defense was used by the family to conveniently deal with "hot emotional issues". Targets for these projections included the alcoholic member who was unable or willing to reject them. The projections may have become the price for continued drinking behavior that was relatively "hassle free". Toxic or hot issues may also have been projected outside the system onto "villains" or other "causes for the family's woes". Helping individual members to take responsibility for their own emotional and behavioral fields will help to reduce the damaging effects of this defense. Strategic use of Wallace's Preferred Defense Strategy will also allow for the use of the family's tendency to use this defense to do so more productively.

Rationalization

This is the defense mechanism sometimes called "unreasonable reasons". This defense mechanism is responsible for reasons for continuing dysfunctional behaviors on the part of family members. Examples include: "If you had to live with you, you'd need to drink too", or "I wouldn't scream and yell at you if only..." or "If it weren't for this terrible neighborhood (economy, war, in-law, etc.) we'd be able to ... Well you get the picture. Reality checks help here as does reinfusion of outside influence into the system.

FAMILY SYSTEMS

Some Selected Definitions

SYSTEM

A collection of interrelated and interdependent structures and processes. It strives to maintain homeostasis. Change in one structure or process of the system results in complementary change in the system's other structures and processes. Systems, by nature are resistant to change. Change when it occurs tends to be gradual and step wise.

SUBSYSTEM

This is a system which is one of the components of a larger system. For example, the ignition system of an automobile is a subsystem of the engine system. Every system is a subsystem of a larger system. It influences the larger system of which it is a part and is influenced by it.

SUPRASYSTEM

This is the label given to the larger system of which a target system is a part. Changes in it influence its subsystems and is in turn influenced by them.

BOUNDARY

This is the structure that surrounds the system. It holds the system together in much the same way a cell wall contains and defines what is and what is not cell. In an open, functional, healthy and dynamic system this barrier is flexible but tough. It is also clearly defined and semipermeable.

BORDER

This is another name given to a system boundary. Conventionally it is used to designate the boundary of the system that we are interested in, are investigating, or in which we intend to intervene. It helps to differentiate our targeted system from related sub- and suprasystems as well as those which are merely connected to it.

HOMEOSTASIS

Webster defines this as, "A state of equilibrium that occurs between different but related functions or elements". It is a kind of balance between forces and structures in a family system. All systems tend toward homeostasis and are opposed to and resistant to change. Please note, this term implies neither a good, desirable nor bad, undesirable state of affairs. A dysfunctional family may have the same degree of homeostasis as a more functional one.

TRIANGLING

An avoidance process that people use to avoid dealing on a one-to-one basis by drawing in a third person or object. This activity leads to the formation of a triangle. The triangle is an attempt at adaptation rather than change and is therefore an instrument of the status quo. See the Triangle Handout for more about this important family systems dynamic.

INTIMACY

The ability to remain connected with another while being able to keep expectations and assumptions of self and the other at or near zero. It is not a synonym for closeness, sex, "open and honest communication, rapport, etc. It refers to emotional connectedness. It is marked by clarity and comfort with intra- and inter personal boundaries.

DIFFERENTIATION

This is also known as differentiation of self. It is a state of being emotionally proactive with clear boundaries and borders. It is the condition of understanding what is self and what is not self and living life accordingly. It is the exercise of keeping self separate but connected. The term came to its most productive use through the work of Murray Bowen.

DISTANCER and PURSUER

These are the names given to the preferred styles we have for emotional distance regulation. All healthy individuals have the ability to be distancer or pursuer as the need arises. However, each of us will tend to one or the other as stress and anxiety rise. Neither preference is good or bad. Neither is more desirable or functional than the other. Either can be a source of dysfunction when it becomes the "modus operandi" of the individual.

OVER- AND UNDERFUNCTIONING

In family system's terms this is the relative degree to which individuals in a relationship take responsibility for some aspect of the relationship. All relationships divide tasks and responsibilities for relationship maintenance in their own unique way. No division of responsibility is necessarily more desirable than others. Delineating this dynamic in a target system provides us with data necessary to understand the workings of the system and to prepare for planning interventions. Finally, this perspective can be applied to all levels of operation of the system including: financial management, emotional exchange, discipline of children, recreation, etc.

ICON

This is a belief in a system that is deserving of unquestioned awe. It is passed on from one generation to the next. It is more than tradition, it is unthinkable that it might change. No "why" questions may be asked about it.

TRIANGLES

TRIANGLING:

An avoidance process that people use to avoid dealing on a one-to-one basis by drawing in a third person or object. This activity leads to the formation of a triangle which represents an attempt at adaptation rather than change. Triangles are not fixed in time and space but are in constant motion with frequent reconfiguration.

TRIANGLE:

- A three sided, three angled geometric figure. Engineers know it as the most stable form and use it to brace structures to make them more rigid.

-In human systems, it is formed by three persons or two persons and an object.

-A triangle differs from a triad which is an emotional configuration of three people in which each person has an independent one-to-one relationship with each of the other two.

-It is an emotional and communications mechanism.

-The sum total of the triangle's legs remain the same. Reconfiguration results in relative distances changing between the three people or things.

-The triangle is durable and resistant to change. It is the chief instrument of the system for maintenance of the status quo. It is used for adaptation rather than change.

-It is an instrument of emotional distance regulation.

-Per Minuchian, it can be seen as a structure in time and space. On the other hand, Bowen saw it as more a potential for energy flow within a system.

-As an attempt at adaptation, it results in lessening or loss of the ability to change in both the individual and the system.

YOU ARE TRIANGLED IF:

YOU TAKE SIDES

YOU RESCUE

YOU ARE ANGRY WITH SOMEONE IN THE SYSTEM

YOU FEEL CONFUSED, UNHAPPY, OR EVEN SAD ABOUT YOUR INVOLVEMENT WITH THE FAMILY

YOU TELL SOMEONE HOW TO ACT

YOU TELL SOMEONE HOW TO FEEL

YOU FEEL EXCLUDED

YOU FEEL TOO EXCITED AND/OR PROUD ABOUT A MEMBER'S ACCOMPLISHMENTS

PLANNING FOR ONGOING TREATMENT

There are four (4) phases that successful family systems therapy goes through. Careful attention to which phase the family is in and provision of the mechanisms that will facilitate its moving through one phase into the next are essential for positive outcomes.

The phases are:

1. At this phase there is reduction of the family's intense anxiety. This does not mean relieving the family of all anxiety. Rather it means helping the family to get anxiety levels down enough so that they are no longer debilitating but not so low that they won't be motivated to change.
2. Objective awareness of the problems in the family by the members of the family develops here. There is reduction of blaming, cause/effect, and victim/villain operations.
3. At this point there is initiation of coaching as a consequence of the family's reduced use of the defense strategies that support the status-quo. Coaching often begins with examples of how other families have dealt with other, similar problems.
4. This final phase is marked by the development of an objective view of self-functioning by family members and acknowledgement of areas of personal responsibility. It is at this point that most families are ready and able to work on extended family issues.

TWO CATEGORIES OF FAMILY SYSTEMS WITH ALCOHOL PROBLEMS

Berenson, 1976

Family Perception of:

Category 1

Category 2

Alcohol as a problem

Family agrees it is not a problem or minor intense conflict about it.

Agreement it is a problem, or

Duration of the problem	Acute to subacute.	Chronic
Family history of alcoholism	Occasionally	Usually
Relationship to other family problems	Secondary - alcohol recedes if other problems are resolved & unresolvable	Primary - makes other problems worse
Behavior change when drinking	Slight, or infrequent	Intense, very common
Relationship between spouses	Symmetrical on the surface "we-ness" conflict	Fluctuating, complementary, overt
Amount, frequency and pattern of drinking	Variable	Variable

PHASES OF TREATMENT OF THE FAMILY SYSTEM WHERE CHEMICAL DEPENDENCY IS THE PRIMARY SYMPTOM

The phases listed below are those which families who successfully deal with the problem of chemical dependency typically go through. As such, they can serve as a general guide for our efforts to effect change. They can be seen as sequential goals for our work with client families.

1. Cool the anxiety level of the family. High levels of anxiety are part of the family's dysfunctional attempts at controlling the chemically dependent and other disruptive behaviors.
2. Stop the using/drinking related behaviors. While it is not always possible to stop the chemical dependency behaviors at this stage, every attempt must be made to interrupt the use of drugs. Inability to curtail the drinking behaviors should not be used by the rest of the family or the therapist to terminate treatment. Movement on to the next phase with the family members capable of change is desirable and will often result in this phase occurring.
3. Help the non-chemically dependent spouse and other family members to become responsible for self. Al-anon, ala-teen and other such groups are a powerful help at this phase, but should not be used as a substitute for your efforts at helping the family members in their struggle for differentiation of self. When this attempt at self differentiation is successful and the chemically dependent individual has stopped using, the result is often emotional distancing. This is the "walking on eggshells" state where all members fear a return to using if any of them expresses a strong positive or negative emotion.
4. Help the family to express behaviors and feelings that previously only came out while drug using behavior occurred or which were not expressed because of the drug use or fear of its resumption. This phase is not found too early in treatment. Consensus of opinion is that too early initiation of this phase results in further distancing or other types of reactivity. Following phase 3, the family can be seen less often and their involvement with self help groups and others be continued. If the walking on eggshells behaviors do not subside in 3 to 6 months through occasional visits to you and their self help group involvement, more intensive interventions may be called for. These could include; multiple family groups, couples groups, sex therapy, and relationship therapies.

THEME SONG

Statement of Affirmation

I love you.

Statement of Perception

I believe that you have an illness called alcoholism.

Statement of Personal Perception

I have been crazy in response to the alcoholism and have enabled it.

Statement of Purpose

I'm no longer going to enable or be crazy.

Statement of Hope

I will help you whenever you decide to do something for yourself.

ALCOHOLISM, CHEMICAL DEPENDENCY AND THE FAMILY SYSTEM

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