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Family Systems Therapy
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INTRODUCTION

The explanatory concepts of general systems theory have not been fully organized into predictive relationships. As such, they do not collectively qualify as a predictive theory. Yet, systems concepts combined with communication theory can be used to explain the inner workings of organizations like families and provide a basis for a plan of therapeutic intervention. Because the concepts show relationship among elements or parts, and between sub-systems and the whole system, they describe human interaction at a fairly general level. Other more specific theories of human behavior can, as a consequence, be used quite appropriately in connection with general systems theory. Someone attempting to use systems concepts need not neglect the use of any other theoretical approach in doing so. The purpose of this paper is to outline some explanatory concepts derived from general systems as applied to the family, then to describe a possible therapeutic approach based on the concepts.

EXPLANATORY CONCEPTS

There are many concepts that are specific to general systems. Those included in this paper are those most appropriate to understanding the nature of family and intervening in family problems. This is not an attempt to be exhaustive or exclusive but to highlight those that shed some additional light on the complex inner-workings of family life.

RELATIVISTIC VS. SUBSTANTIVE MEANING

The meaning of behavioral events are determined by the relativity of one event to another or others. This is contrasted to traditional or substantive theories of behavior that nominalize (label) responses as they fit or do not fit into some conceptual framework. Traditional personality and counseling theories suggest that descriptions of human personality can be organized into several frameworks. When attempting to understand the actions of a human being or a group of human beings, the actions are compared to one's knowledge of these theories. From this approach is derived a diagnostic or what is referred to as the medical model of understanding of human behavior. This implies that it is first important to assess an individual's behavior and then compare it to the therapist's knowledge of personality theory. In contrast, general systems suggests that human behavior be understood in terms of its relationship to other bits of human behavior. Some of these may be: (a) the sequence or chaining of behavioral events, (b) the frequency of communicational events relative to other possible or probable events, (c) the ratio of one's responses to that of another or others in the same social situation, (d) the duration of responses as compared to others, (e) the calibration or timing of behavior relative to other behavior.

Now this difference in what behavior means, suggests that one seeking to apply general systems to the family will use a different conceptual method of organizing data than traditional forms. One would collect varieties of information and make comparisons of one individual's behavior with that of another or others. For example, consider the family of father, mother and son. The presenting problem was the low esteem of a male child in late adolescence. This low esteem was manifest by chronic failure at tasks attempted and self-depreciating remarks. When gathering information about the family, the father, mother and son were interviewed separately. The father appeared to have a good grasp of language and communication except it was noted during his interview that he frequently qualified many of his comments. For example, if asked, "Are you a success in business?" his response was, "I guess so, but I'm sure there's more I could do." The mother was a fairly quiet woman, quite reserved, exceptionally optimistic and positive. The male child had several accomplishments to his credit including many that would have given him social recognition and a sense of accomplishment. Instead of using these as a source of es-
team, he referred to himself in a very depreciating manner. When the family was brought together into a family conference, it was possible to see that whenever the son spoke in a depreciating way, the mother would interrupt him and inject a positive or optimistic note and the father would qualify his negative statements in a positive direction. It could be observed that the son could achieve the praise or positive attention from his parents by making self-deprecating remarks. This illustration shows that the son's behavior would be understandable relative to the communication behavior of his father and mother in this sequence.

VARIATION AND RELATIONSHIPS

Organizations differ in terms of the amount or variation of communicational events within the system. The quantity of communicational events tends to produce three types of relationships. These were first written about by Gregory Bateson in *Steps To An Ecology of Mind* (1972). He wrote that interactional behavior develops into classes because there is an exchange of signals that identify certain behavior. He suggested these signals are of a higher logical type than the messages they classify. While pointing out that the framing and labeling of messages is quite complex, he nevertheless identified three classes or categories of interaction based on the quantity of exchanges between people. He suggested that complementary interaction exists in the case where opposite behavior is exchanged in low quantities. Conversely, symmetrical interaction exists when exchanged in low quantities of behavior. Symmetrical interaction is defined as the exchange of identical behavior. A third type of interaction is labeled parallel. This occurs when people exchange greater variations of different - not positive - behavior than is the case for either symmetrical or complementary. The three types of interaction have been further elaborated (Watzlawick et al 1967) and used as the framework for viewing diadic relationships. From their writings, the following characteristics have emerged:

1. Symmetrical and complementary interactional classes are dimensional suggesting that lower quantities are more healthy and greater proportions may be more pathological.

2. Symmetrical and complementary interaction escalate: symmetrical to increased instability and complementary to increased rigidity.

3. The three categories are non-overlapping, indicating that while the same behavior of an individual may fit into any one of three, the response and the initial behavior become an interactional exchange that is either symmetrical, complementary, or parallel. An interaction cannot fit into two categories simultaneously. These three classes or categories of communicative events are measurable and can be used to identify differences between families prone to conflict and stress and those families that are more effective at coping and integrating positive family functions. Furthermore, most conflictual communicational patterns in marriage and family will be marked by a high frequency of symmetrical and/or complementary behavior. Consequently, a therapist will likely be engaged in developing interventions that are designed to modify complementary and symmetrical interaction toward an increased variation resulting in parallel communication.

The concept of modifying the variation of communicational events within families, relates to the system concept of open and closeness. While true that some families may have so much variation that poor integration and unity result, it is also often the case that some families have such a restricted flow of communicational events that positive improvement will result only when family members are taught to increase their variety of communicational exchanges among family members.

HIERARCHY AND LOGICAL TYPE

A concept taken more from communication theory than from general systems theory relates to the hierarchical nature of human communication. Simply stated, this means that any communicational event simultaneously occurs on several levels. These levels are of ascending logical order (e.g. the second level subsumes the first, and the third subsumes the first and second and is therefore of a hierarchical type). The higher levels communicate about the lower but the lower do not communicate about the higher. This concept may be applied in several ways:

(a) Any verbal communicational exchange has a topic, analogue (non-verbal) and context. The topic or linguistic meaning is the lowest of the logical orders. The analogue or non-verbal behavior is the next higher level because it subsumes the topic (e.g. many different topics can have the same analogue but a change of the analogue changes the linguistic meaning). The context of the communication is of the highest logical order because it defines the meaning of both topic and analogue. For example, suppose a father says to his son in the kitchen, "The garbage is piling up." The meaning is quite clear to the son that the father intends to have him remove the garbage from the kitchen. If, however, the same statement in the same relationship is made at the garbage dump, the son will interpret a very different meaning from the communicational event in the kitchen.

(b) Hierarchy also applies to the psychological family experience relative to each individual. The individual is the lowest level of hierarchy followed by diad or triad relationships. It is possible to conceptualize an individual alone, or understand one person relative to a diad or triad relationship, or understand an individual as compared or contrasted to the entire family unit.
Some families who discuss problems have found an

example of this concept is written by Haley's defini-

tion of schizophrenic behavior suggesting that more

pathological communication focuses on the analo

gue, the intentions and non-verbal behavior

rather than the meaning resulting from the linguistic

combination of words. So that a person or people

who respond more frequently to how a person talks

rather than what is said tends to produce more un

healthy interpersonal relationships. (Haley, 1963.)

REDUNDANCY

Family behavior forms itself into patterns or sequences

that are highly redundant and subsequently quite resistant to

change. This is similar to the concept of interactional chains,

where one person produces certain behavior which is bonded

to the response of another followed by the response of

another and so forth until an entire sequence is illustrated by

all the participants. These interactional redundancies may

include speaking order, escalations of conflict, positive

problem-solving and a variety of other redundant patterns

learned by the family. It is possible using the concept of

redundancy, to see that many cases of psychosomatic illness,

alcoholism, marital conflict and delinquency are all relation

ship events but are escalated redundancies that have existed

in the family for many years prior to their manifestation.

CONCEPTUAL FRAMES

Individuals are said in systems theory to conceptualize

information in pairs of opposites. Several pairs are

categorized and become conceptual frames. These are trans

mitted and maintained as beliefs by the family members. An

example of this would be the pair of good-bad. This concept

may be placed in categories of moral behavior and used to

define that behavior which is good or that behavior which is bad.

In family systems, the most obvious method of categoriz

ing the meaning of events is that of things that are or exist,

and the category of things that are not and do not exist. For

example, families who discuss problems have found an is or

present frame of reference that contains problems and the dis

cussion of problems. They are much more articulate about

the nature of the problems, why the problems occur, and the

result of problems on their families. This communication

becomes redundant and families live out their lives harangu

ing, discussing or analyzing the nature of family problems.

To be helpful, systems theory suggests that the family be

helped to identify things that are not (that is, solutions are

positive events that do not presently exist in the family but

should in order for them to function more happily) and then

change things that are not to become the present is. This

means that one difference between healthy and unhealthy

families is that the things that are present in the unhealthy

family consist mostly of problems and things related to the

problems; and in the healthy family, the conceptual frame of

things consist of happy or positive rewarding events.

Therapeutic improvement requires that family members

begin to more readily identify the things that are positive and

useful and discuss those more freely and openly than the

nature of problems and why they occur.

PARADOXICAL CONFLICT AND SOLUTIONS

Interpersonal conflict in families is said to be paradoxical

because the attempted solution of person (A) prevents person

(B) from responding in a fashion desired by (A). (B's) be

havior in turn prevents (A) from responding in the desired

aim of (B). Thus each person contributes to an apparently

unresolvable and therefore paradoxical dilemma. This im

plies that in order to understand the nature of families and

family problems plus their solutions, one important ingre

dient is to find and learn what people have done as attempts to

solve family problems. In some cases, the problem is not

what people think it is; it's that they think they have a

problem and attempt solutions that compound the problem

and therefore do not work. In this case, it is the attempted

solutions that constitute the problem and not the problem itself.

NODAL FAMILY EVENTS

Nodal family events are those that stimulate the creation

and adjustment of the family system in response to them.

Death, illness, divorce, deviance, traditions, birth of a child,
or repeated conflict are some of these. Family life and the

nature of the family system can more easily be understood by

obtaining a perspective of the nodal events of family life. For

example, it would not appear a mystery to some people why

many physicians who have problems with their children have

problems with their oldest and/or next to the oldest. One can

understand this situation in light of the fact that when the

father, who is the physician, was in medical school or was

completing his medical education, the first and second chil

dren are born. The lack of time and proximity because of the

educational requirements tends to become redundant and a

distant father-child relationship is created that often per

petuates throughout the life of the child. This distance makes

their relationship vulnerable to external conditions which

may or may not produce a deviant or conflict situation in the

family and the behavior of the child. This example seems to

imply the need to identify nodal family events and inquire as

to the adjustment and the conditions in other family members

at the time these events occurred or where experienced by the

family.

SYSTEMS INTERVENTIONS

The explanatory concepts outlined in the previous sec

tions suggest some methods of intervention. These included

here are those that are derived primarily from the concepts

and are more germane to general systems theory than to

other theories or concepts relating to human behavior.
At the beginning of a therapeutic encounter, the family can be mapped or understood from a variety of perspectives. These may include taking the family history to ascertain the nodal family events. In addition, a family can be viewed in terms of its stage of development, that is, the range in ages of children and its relationship among its kinship network. Furthermore, relationships within the family can be mapped to determine the style of relationship between the child or person who is the presenting problem and other family members. Then the family can be mapped in terms of its relationship to other elements of its environment including religion, social circumstances, school or education, and work. When the family is mapped in these variety of perspectives, it is possible to see the individual relative to other diadic or triadic relationships, all the other family members, and compared to larger elements of society. Once sufficient data is accumulated, a therapist can begin a procedure to bring about modification of the family system.

By the time a family has sought therapeutic help, they have generally made a number of attempts to solve their own problems. These attempts have compounded layer upon layer of interaction related to the problem so that one observer may not be able to tell the difference between the nature of the problem and family attempts to solve it. Furthermore, the behavior of family members toward each other is likely so redundant that attempts to modify the behavior by an hour of conversation each week is somewhat difficult and may even appear impossible. In light of the foregoing, it seems useful for the therapist to assume that some control must be exerted on the family system by the therapist or in collaboration with other family members to bring about the possibility of therapeutic change. In order that this may be accomplished, a therapist typically has to interject his or her own behavior into the family interactional patterns creating sufficient ambiguity that some ground rules or control by the therapist can be exerted on family members. Failure to do this often results in the family system or patterns of interactions actually using the therapist as a means to perpetuate the conflict. The most common example of this is the husband who talks to the therapist about his wife attempting to get him to focus on her, to whom the wife responds to the therapist, communicating to him about the husband attempting in her efforts to get him to modify the husband’s behavior. Consequently, the therapist and his attempts to modify the marriage, are used by either husband, wife, or both, as bludgeons to perpetuate the conflict. This implies that the therapist needs to be fairly alert to attempts by the family system to incorporate his/her interventions into already existing family behavior.

Once the therapist has assumed some control over the nature of therapeutic rules and family behavior, intervention can begin in the sequence and pattern of family behavior. This can be accomplished by asking family members to report the nature of episodes that reflect the specific patterns of communication associated with the problem. A therapist can be helpful in this by asking for specific accounts of each person’s behavior. This takes the form of “who did what,” and “then what happened,” and “then what followed,” and “then what happened,” and “then who responded,” so all members can see that everyone’s behavior is connected in some way to a family problem. Once a sequence or pattern of the family is identified and recognizable to the family, there are a number of therapeutic strategies available. Sending the family into a repeat of an existing pattern by plan. Behavior can often be modified in a family, not by asking for it to change, but asking them to exhibit the same behavior for a different purpose or reason. This creates a paradoxical situation that prevents the family from maintaining its old style of sequence and pattern. Other interventions include distractions, escalating the sequence of behavior so that the chain of events related to the problem is broken by either failure to act, failure of one or more persons to act at the expected time, or by escalating events so that more events happen than can be handled in redundant ways by any of the participants.

Another general form of therapeutic intervention consists of changing what people believe to be true about the nature of their relationships with other people. One of the most common conditions in therapy is that people in conflict tend to attribute cause of the conflict to others. Each accumulates evidence to support his/her own innocence; and which supports the view that the other person is the guilty one. Two common interpersonal realities to be changed are: (a) that there are no innocent victims and all conflict has multiple causes; and (b) that each person must learn to focus on the consequences of his/her own behavior as much as they focus attention on how they are acted toward by the other. This reality is similar to helping each person assume the responsibility for his/her actions instead of attributing it to another person or other people. There are many other parts of interpersonal reality that may require change. A skillful therapist will accumulate information about the perceptions people have about their problems and about themselves, and will organize events so that each person can be permitted to make a reassessment of what they believe about each other and about themselves.

One of the most recent and intriguing attempts to explain the nature of change in family organizations is that of paradoxical solutions. The most specific of these have been described by Watzlowick Fische and Weakland, titled Change, Change: Principles of Problem Formation and Resolution, (1974). Their conclusion is that therapeutic interventions work when a therapist asks people to engage in events that will throw them out of their symmetrical or complementary exchanges. For example, where people are engaging in escalating symmetrical conflict, a therapist can assign one to drop a bean in a can each time the other partner criticizes. Furthermore, the person who drops the bean in the can cannot speak but can only record his displeasure by dropping the bean. The therapeutic benefit of the bean and
can is seen in that it is a response of a nonspecific nature that prevents the other person from responding in a symmetrical way. Thus the symmetrical exchanges that are related to the conflict are broken and the couple can change the nature of their interactional spiral. The authors of this book record several such strategies designed to modify the nature of conflict and other problems that may result in families.

CONCLUSION

The explanatory concepts and suggestions for therapeutic intervention are made with the hope that counselors working with families may understand them with an additional perspective and also may find some opportunity to provide therapeutic help. This author has observed some of the complexities of family life and the profound influence exerted by family members on each other. For those of us who believe in the eternal nature of the family, it may easily be observed that family relationships are the most profound for a human being to experience. The levels of influence are so many and so varied that it is easy for one to understand how styles of discipline, values, and beliefs are transmitted from one generation to the next. I have learned a new respect for the family. Successful family life, among all other possible successes in life, must still be rated as the finest.

REFERENCES


