

Postmodern Approaches

Complete

PRECHAPTER SELF-INVENTORY

Directions: Refer to page 43 for general directions. Use the following code:

- 5 = I *strongly agree* with this statement.
- 4 = I *agree*, in most respects, with this statement.
- 3 = I am *undecided* in my opinion about this statement.
- 2 = I *disagree*, in most respects, with this statement.
- 1 = I *strongly disagree* with this statement.

- _____ 1. Assessments and provisional diagnoses are best arrived at in a collaborative conversation with clients.
- _____ 2. Changing the direction in therapy from a problem-focus to a solution-focus can dramatically change clients' beliefs about their life situation.
- _____ 3. An appropriate aim of therapy is to create conversations with clients that allow for developing new meanings for problematic thoughts, feelings, and behaviors.
- _____ 4. A *not-knowing position* allows therapists to follow, affirm, and be guided by the stories of their clients.
- _____ 5. People live their lives according to the stories people tell about them and the stories they tell themselves.
- _____ 6. The client can be considered as the expert on his or her own life.
- _____ 7. Clients are often stuck in a pattern of living a problem-saturated story that is not working for them.
- _____ 8. Clients are able to build more satisfying lives in a relatively short period of time in the context of an effective therapeutic relationship.
- _____ 9. It is important that clients tell their stories and give voice to their experiencing.
- _____ 10. A problem-focused approach to therapy is likely to cement unhelpful modes of behavior.
- _____ 11. Including the client in the therapeutic process increases the chances that interventions will be culturally appropriate.
- _____ 12. Rather than dwelling on what is wrong with people, it is more useful to view the client as resourceful and competent.
- _____ 13. The therapist should be viewed as one source of information rather than as the best or "expert" source.
- _____ 14. Collaboration, compassion, respect, reflection, and discovery are characteristic of effective therapeutic relationships.

- _____ 15. The therapist's role of being respectfully curious encourages clients to explore the impact of the problem on them.
- _____ 16. As clients become free of problem-saturated stories, they become more able to envision and plan for a less problematic future.
- _____ 17. An appropriate aim of therapy is to assist clients in creating a more satisfying alternative story.
- _____ 18. A useful strategy is to attempt to separate a problem from a person's identity.
- _____ 19. For therapy techniques to effectively be implemented, it is essential that a quality relationship exists between client and therapist.
- _____ 20. Empathy and the collaborative partnership in the therapeutic process are more important than assessment or technique.

OVERVIEW OF POSTMODERN APPROACHES

Key Figures and Major Focus

Founders and Key Figures: Two cofounders of solution-focused brief therapy are Insoo Kim Berg and Steve de Shazer. Two cofounders of narrative therapy are Michael White and David Epston. Many of the postmodern approaches do not have a single founder, and instead, they represent a collective effort by many. Some of the major postmodern approaches include social constructionism, solution-focused brief therapy, and narrative therapy. In these approaches the therapist disavows the role of expert, preferring a more collaborative and consultative stance. Solution-focused brief therapy (SFBT) is a future-focused, goal-oriented therapeutic approach to brief therapy that shifts the focus from problem solving to an emphasis on solutions. SFBT emphasizes people's strengths and resiliencies by focusing on exceptions to their problems and their conceptualized solutions. In narrative therapy, the focus is on searching for times when clients were strong or resourceful and on helping clients separate from the dominant cultural narratives they have internalized and open space for the creation of alternative life stories.

Philosophy and Basic Assumptions

From the viewpoint of social constructionism, the stories that people tell are about the creation of meaning. There may be as many stories of meaning as there are people who tell stories, and each of these stories is true for the individual who is telling the story. Postmodernists assume that realities are socially constructed. There is no absolute reality, and therapists should not impose their vision of reality or their values on an individual. Both solution-focused brief therapy and narrative therapy are based on the optimistic assumption that people are healthy, competent, resourceful, and possess the ability to construct solutions and alternative stories that can enhance their lives. Complex problems do not necessarily require complex solutions. The expertise of the therapist involves helping clients recognize the competencies they possess. The core task for SFBT practitioners is to rapidly and systematically identify problems, create a collaborative relationship with clients, and intervene with a range of specific methods. Attention is given to what clients are doing that is working and helping them to build on their potential, strengths, and resources. Narrative therapists strive to avoid making assumptions about people out of respect for each client's unique story and cultural heritage. Change begins by deconstructing the power of cultural narratives and then proceeds to the co-construction of a new life of meaning.

Key Concepts

Key concepts of *solution-focused brief therapy* include a movement from problem-talk to solution-talk and a focus on keeping therapy simple and brief. There are exceptions to every

Family Systems Therapy

Complete

PRECHAPTER SELF-INVENTORY

Directions: Refer to page 43 for general directions. Use the following code:

- 5 = I *strongly agree* with this statement.
- 4 = I *agree*, in most respects, with this statement.
- 3 = I am *undecided* in my opinion about this statement.
- 2 = I *disagree*, in most respects, with this statement.
- 1 = I *strongly disagree* with this statement.

- _____ 1. Individuals are best understood through assessing the interactions between and among family members.
- _____ 2. Symptoms of an individual's problems are best understood within the context of a dysfunctional system.
- _____ 3. Because an individual is connected to a living system, change in one part of that system will result in change in other parts.
- _____ 4. To focus primarily on studying the internal dynamics of an individual without adequately considering family dynamics yields an incomplete picture of the person.
- _____ 5. Significant changes within an individual are not likely to be made or maintained unless the client's network of intimate relationships is taken into account.
- _____ 6. Family therapy needs to include an examination of how one's culture has influenced each member.
- _____ 7. Actions by any individual family member will influence all the others in the family, and their reactions will have a reciprocal effect on the individual.
- _____ 8. It is not possible to accurately assess an individual's concerns without observing the interaction of the other family members.
- _____ 9. Differentiating oneself from one's family of origin is best viewed as a lifelong developmental process.
- _____ 10. Rather than losing sight of the individual, family therapists understand the person as specifically embedded in larger systems.
- _____ 11. Family therapy serves a valuable function in challenging patriarchy and other forms of dominant culture privilege, bias, or discrimination.
- _____ 12. Family therapists can no longer ignore their personal influence as part of their therapy.

- _____ 13. Because the larger social structure affects the organization of a family, it is essential that the influence of the community on the family be considered.
- _____ 14. Effective family therapy tends to be brief, focuses on solutions, and deals with the here-and-now interactions within a family.
- _____ 15. It is the family therapist's responsibility to plan a strategy for resolving clients' problems.
- _____ 16. A family therapist needs to be active and sometimes directive in working with a family.
- _____ 17. Families are multilayer systems that both affect and are affected by the larger systems in which they are embedded.
- _____ 18. Families can be described in terms of their individual members and the various roles they play, the relationships between the members, and the sequential patterns of the interactions and the purposes these sequences serve.
- _____ 19. An appropriate goal of family therapy is the growth of individuals and the family rather than merely stabilizing the family.
- _____ 20. Family therapists begin to form a relationship with clients from the moment of first contact.

OVERVIEW OF FAMILY SYSTEMS THERAPY

Key Figures and Major Focus

The key figure of the multigenerational approach to family therapy is Murray Bowen. He stresses exploring patterns from one's family of origin.

The key figure of the human validation process model is Virginia Satir. This form of therapy focuses on the interpersonal relationship between the therapist and the family members.

The key figures associated with structural-strategic family therapy are Salvador Minuchin, whose structural model focuses on the family as a system and its subsystems, boundaries, and hierarchies; and Cloe Madanes and Jay Haley, whose strategic model stresses parental hierarchies and cross-generational coalitions.

Philosophy and Basic Assumptions

If we hope to work therapeutically with people, family therapists believe it is critical to consider clients within their family system. An individual's dysfunctional behavior grows out of the interactional unit of the family as well as the larger community and societal systems. Almost all of these theories view the family from an interactive and systemic perspective, which sees an individual's dysfunctional behavior as a manifestation of dysfunctional behavior within the system or as affecting the system negatively.

Family therapy is a diverse field, comprising various theories of how change occurs within the family and an equally diverse set of intervention strategies. The theories of family therapy share a common philosophy of the importance of dealing with all parts of a system if change is to take place and be maintained. The family systems therapy models are grounded on the assumptions that a client's problematic behavior may (1) serve a function or purpose for the family; (2) be a function of the family's inability to operate productively, especially during developmental transitions; or (3) be a symptom of dysfunctional patterns handed down across generations. All these assumptions challenge the more traditional intrapsychic frameworks for conceptualizing human problems and their formation.

7. How useful do you find the multilayered process of family therapy?
8. To practice with families in an ethical and effective manner, what kind of education, training, and supervision would you need? Do you have any ideas about how you might seek competence in working with families?

SUGGESTED ACTIVITIES AND EXERCISES FOR PERSONAL APPLICATION

How Your Past Influences Your Present

When you counsel an individual, a couple, or a family, you are not always perceiving them with a fresh and unbiased perspective. When a new person whom you encounter represents some unresolved relationship with someone from your past, you can unconsciously attempt to deal with old relationships through your current relationships. The more you are aware of your patterns with your own family members, the greater is the benefit to your clients. It is crucial that you know to whom you are responding: to the individual in front of you or to a person from your past.

- * Try this exercise Satir used to demonstrate that we are constantly revisiting significant people and family members in our lives:

Stand in front of someone (Person A) in your current life who interests you or with whom you are having some difficulty. This individual might be a client, an associate, a family member, or a friend. If the person is not present, you can imagine him or her. Take a good look at this person, and form a picture on the screen of your mind. Now, let a picture of someone in your past come forward (Person B). Who comes to mind? How old are you and how old is Person B? What relationship do you, or did you, have with this individual you are remembering? What feelings are linked with this relationship? What did you think about Person B?

Now, examine again your current emotional reactions to Person A. Do you see any connection between what Person A is evoking in you and the past feelings that Person B has evoked?

You can apply this exercise by yourself through the use of imagery when you have intense emotional reactions to other people, especially if you do not know them well. This exercise can help you begin to recognize how your past relationships may sometimes affect the here-and-now reactions you are having toward people that you initially encounter. Perhaps what is most important is simply to be aware of ways in which you are carrying your past into present interactions.

Understanding Your Family Structure

Family structure also includes factors such as birth order and the individual's perception of self in the family context. A facet of family structure is a particular pattern such as nuclear, extended, single-parent, divorced, or blended. As you reflect on these questions, identify what is unique in the structure of your family.

- * ■ In what type of family structure did you grow up? It might be that the structure of your family changed over time. If so, what were these changes? What do you most remember about growing up in your family? What were some of the most important values? What most stands out for you about your family life? In what ways do you think these experiences have a continuing influence on the person you are today?
- * ■ What is your current family structure? Are you still primarily involved in your family of origin? If your current family is different, what roles do you play that you also enacted in your original family? Have you carried certain patterns from your original family to your current family? How do you see yourself as being different in the two families?

*Review each section & make some notes on the areas that are **

- Draw a genogram of your family of origin. Include all the members of your family, and identify significant alliances among the various members. Identify the relationship you had as a child with each person and your relationship with each member now.
- Make a list of the siblings from oldest to youngest. Give a brief description of each (including yourself). What most stands out for each sibling? Which sibling(s) is (are) most different from you, and how? Which is most like you, and how?
- * ■ Review some key dimensions of your experiences as a child growing up in your family. How would you describe yourself as a child? What were some of your major fears? Hopes? Ambitions? What was school like for you? What was your role in your peer group? Were there any significant events in your physical, sexual, and social development during childhood?
- * ■ Identify one of your personal problems. How do you think your relationship with your family has contributed to the development and perpetuation of this problem? Besides blaming your family for this problem, what options are open to you for making substantial changes in yourself? What are a few ways you can be different in your family?

A Balance of Being Separate and of Belonging to a Family

- * ■ In some cultures autonomy is not a cherished value. Instead, children are viewed as having an obligation not to emerge too distinctly from the rest of the family. A collective sense is given more value than individual independence. What cultural values influenced the degree to which you have striven toward autonomy? Are there any values that stem from your culture that you want to retain? Any that you want to challenge or to modify?
- * ■ The concept of *boundaries* as used in family therapy refers to emotional barriers that protect and enhance the integrity of members of a system. It also refers to a delineation between members that is governed by implicit or explicit rules pertaining to who can participate and in what manner. Apply the notion of boundaries to your development. In growing up in your family, what boundaries existed between you and your parents? Between your parents and the siblings? Among the siblings? Between your parents? What did you learn about boundaries? Do you have any problems with boundaries today?

Understanding the Rules of Your Family

- * Rules or messages that were delivered by our parents and parent substitutes are often couched in terms of "Do this or that." Consider the following "do" messages: "Be obedient." "Be practical at all times." "Be the very best you can be." "Be appropriate." "Be perfect." "Be a credit to your family." At this point, reflect on the rules that seemed apparent in your family. What were some of the major rules that governed your family? What were some unspoken rules between the adults? What rules did you learn about appropriate gender-role behavior? What did you learn about femininity? About masculinity? To what degree did you abide by all these rules? Were there any that you challenged? How did unspoken rules affect you? Were there rules surrounding what could not be mentioned? If there were secrets in your family, how did this affect the family atmosphere?

Consider some of the major "do's" and "don'ts" that you heard growing up in your family, and your reactions to them:

- What are a few messages or rules that you did accept?
- What were some rules that you fought against?
- Which of your early decisions do you deem to be most significant in your life today? What was the family context in which you made these decisions? If you grew up in your family thinking "I am never enough," how has this conclusion about yourself played out in your current relationships in various aspects of your life?
- Do you ever hear yourself giving the same messages to others that you heard from your parents?

- Consider for a moment the overall impact of the messages that you have been exposed to, both from your parents and from society. How have these messages influenced your self-worth? Your view of yourself as a woman or as a man? Your trust in yourself? Your ability to be creative and spontaneous? Your ability to receive love and give love? Your willingness to make yourself vulnerable? Your sense of security? Your potential to succeed?

Significant Developments in Your Family



You might find it useful to describe your family of origin's life cycle. Chart significant turning points that characterize its development. One way is to look at family albums and see what the photos are revealing. Let these pictures stimulate your memories, and see what you can learn. As you view photos of your parents, grandparents, siblings, and other relatives, look for patterns that can offer clues to family dynamics. In charting transitions in the development of your family, reflect on these questions:

- What were the crisis points for your family?
- Can you recall any unexpected events that affected your family?
- Were there any periods of separation due to employment, military service, or imprisonment?
- Who tended to have problems within the family? How were these problems manifested? How did others in the family react to the person with problems?
- In what ways did births affect the family?
- Were there any serious illnesses, accidents, divorces, or deaths in your family of origin? If so, how did they affect individual members in the family and the family as a whole?