

PY 555 Reaction Papers

This handout will serve as the set of instructions for the nine reaction papers you must complete for this class.

Purpose

The reaction papers should demonstrate the student's ability to process his/her internal responses personally and professionally. The ability to reflect upon and process feelings and thoughts – supported by informed information - is an important skill. Any sources used in the paper should be properly documented using the format provided by the Publication Manual of the American Psychological Association. Graduate level spelling, grammar and style are expected, and grades will be greatly reduced if written expression is poorly presented.

Objectives

1. The assimilate the information from the weekly topic into a broader understanding of Systems Theory
2. Demonstrate the ability to present research from multiple sources into a single, coherent research document.

Preparation Instructions

1. Compose your *Reaction Paper* in Microsoft Word or a compatible word processing application.
2. The paper should be formatted and typed using Times New Roman, 12-point font, single-spaced, and one-inch margins (no exceptions).
3. The length of the paper should be one page in length (page number does not include the title page or references pages).
4. Use APA 6th edition formatting and use a minimum of 2 references.

Content Instructions

1. Write a one-page reaction paper reflecting upon your understanding of the weekly chapters.
2. Please keep in mind that a reaction paper is not a summary of what the author wrote but rather your analysis and critique of the presented topic.

Submission Instructions

- Save this assignment as “fname_lname_reaction_paper_chp#.doc.” (i.e., john_smith_reaction_paper_chp2.doc). Replace the # symbol with the chapter number.
- Access the *Assignments* link located on the Course Menu to upload the final document as an attachment to the *Reaction Paper Chapter #* drop box by the due date listed on the Course Schedule. Replace the # symbol with the chapter number.

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CHAPTER 7

History and Development

TWO NIGHTS BEFORE I began writing this chapter, I had an especially vivid dream. I was my same, middle-aged self, but I was in my high school boyfriend's kitchen, talking with his mother. We were discussing the difficulties she would face in getting her three children to school in the fall, particularly now that her son, my boyfriend, would be attending college. As often happens in dreams, there was no real logic to the fact that I was still dating my high school boyfriend and that in the dream we were getting ready to break up because of this college transition. I was initiating the breakup, and it seemed that his mother also approved of our ending the relationship. My high school best friend came by to tell me that I shouldn't worry about my boyfriend; he would be attending an excellent local art program, and he would be fine. Although I felt some sadness at the breakup, I was reassured by my friend's words, and I wondered if I would need to see my boyfriend to say good-bye, or if he was already finished with me. I woke up before he appeared in the dream.

It is a risky business to ask a reader who is probably a mental health professional to read about a dream, and I am guessing that you have probably already started to interpret the dream. Before you do, however, I should let you know that I had the dream just a few days before my daughter's boyfriend was leaving for college. How much does this information change your interpretation of my dream? What does the dream have to do with the system, and what does the system have to do with the dream?

PREDICTABLE DEVELOPMENTAL CHANGE

The timing of my dream illustrates one of the key concepts shared by systems theory and by psychodynamic theories, the centrality of

developmental level on human experience. Many traditional dynamic theories look at the primacy of early development, with an emphasis on the stages that are shaped by our biological development. Before having children, I wondered about Freud's early preoccupation with different erogenous zones, which seemed overly narrow and deterministic. Further, the idea that the key foundation of our personality could be set by the age of 5, hopefully with the resolution of the Oedipal complex (Freud, 1909; Freud and Strachey, 1962), seemed to minimize the human capacity for change. Yet a closer study of the psychodynamic view of change is consistent with the systems view that we have discussed already, highlighting the tension between stability and transformation. Developmental theories show us that each stage is built on the stage before it, that what happens in the past influences but does not determine our struggles in the present. Further, developmental theories tend to combine both continuous and discontinuous change. We see that periods of incremental change, when a developmental stage is mastered, are often interspersed with periods of more abrupt change, when we take on a new level or stage.

A developmental perspective tends to have a great deal of descriptive value. If you could know only one thing about a person and wanted to guess at her experience, knowing her developmental level would almost certainly give you important information, regardless of other contextual variables. Knowing that I am a middle-aged woman will probably bring certain assumptions to mind about the themes and issues that I am addressing in life. A systems view of human development adds the context of the broader system and tends to focus on key elements of the family life cycle. This approach tends to make the couple the central unit and to follow the developmental trajectory through joining two families by marriage, having children, raising children, facing the empty nest, having grandchildren, and then addressing the end of life (Carter & McGoldrick, 1988). Coming from this perspective, the tasks are less about biological, cognitive, or social development and more about adding and subtracting members from a system.

Many of our friendships are organized around developmental stages, as passing through developmental stages tends to be a particularly bonding experience. You can probably identify relationships in your own life that were created as you embarked on a new developmental stage. Further, much of our contemporary life is organized around developmental challenges. When I tell someone that my

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daughter is applying to college, it triggers a set of memories and beliefs
about this stage of life. These memories and beliefs generally relate to
both the physical tasks of the stage and the psychological tasks of the
stage. If I am seeing friends whose children are also applying to college,
it is almost impossible for us not to talk about all of the intricacies of
the application process and then to circle back to the emotional
anticipation of the upcoming transition. People generally use their
own developmental experience as a reference point ("back in my day,
we didn't do things this way"), so looking at developmental issues
also triggers generational issues. It can be incredibly comforting to see
that other people are struggling with the same challenges that one is
currently facing, and it can be instructive to compare these struggles
with those of previous generations. At the same time, an overemphasis
on development can be alienating. Because I have an unusual medical
condition, I can find it perplexing to hear my middle-aged friends talk
about their aches and pains, knowing that my physical experience is
out of sync developmentally.

THE PROBLEM WITH NORMALIZING

A true systems perspective will note the circular interplay between
individual and systemic stages. Looking at individual and systemic
development together allows us to understand and potentially nor-
malize many of our clients' life tasks and challenges, without dis-
counting the uniqueness of the individual situation. One classic
example is looking at a couple with a new baby, and there is a fairly
large body of research on the typical developmental challenges faced
by a family at this stage (Gottman & Gottman, 2007). I remember
getting a new case several years ago, as I was becoming acquainted
with the family life cycle literature. The couple had a 15-month-old
son, Aiden, and both partners were worried about the way they had
grown apart since he was born. I felt that I did a fabulous job in asking
questions about how their relationship changed when the baby was
born. I looked at common themes of new parents being chronically
tired and having little time for themselves or for each other. The wife,
Jessica, talked about her physical exhaustion and the guilt she felt
about no longer welcoming her husband's physical affection. The
husband, Jack, discussed his increased anxiety about finances and his
discomfort over feeling jealous of the attention Jessica gave to Aiden. I
facilitated a discussion of these typical issues and normalized their
stress and struggle.

At the end of the hour, they agreed to come back to therapy to work on increasing their connection during this stressful time. After they left, as I was walking down the hall, I was lucky enough to hear them in front of the elevator, around the corner. Jessica said, "That was okay, but I don't think she really understands us, and I'm not sure this is going to help." Jack responded, "Let's give her one more chance; maybe it will get better." I don't generally advocate eavesdropping, but in this instance I felt I had received a gift. I knew in the next session that I would need to pair my understanding of their life cycle issues with greater curiosity about their unique experiences as a couple.

USING DEVELOPMENTAL TRANSITIONS

So if simply describing and normalizing developmental issues may not be enough to help our clients, how is this knowledge of the life cycle helpful? In this example, I learned to go beyond a description of typical developmental challenges to look at the specific tasks of the cycle, the routines that need to be established to address these tasks, and the rituals that allow the system to come together and acknowledge the task. In this case, the tasks revolved around bonding with, caring for, and providing for the baby in a way that could enhance rather than undermine the connection between the couple. Typically, a new developmental stage will require new routines to meet the tasks of the stage, and in this case the couple described routines that weren't working for them. Jessica was surprised by how tired she was from caring for Aiden all day, and she was resentful of the long hours that Jack spent at his investment firm. Jack was stunned that Jessica would want him to take over the care of Aiden when he returned home in the evening, assuming that she would understand how tired he was at the end of the day. He would grudgingly give Aiden his bath, then Jessica would put Aiden to bed, and she would fall into bed shortly after. Jack would stay up and watch movies or surf the Internet.

Jack and Jessica brought me a similar fight about their Thanksgiving celebration, which took place at Jessica's parents' home. Jack had continued the tradition of organizing a football game with Jessica's brothers and father in the front yard of their home, while Jessica and her mother took charge of preparing the meal. Aiden became increasingly difficult to manage in the kitchen, and once Jessica reached the point of exploding, she went to ask Jack for help. Jack came in at the end of the game and took Aiden out of the kitchen, but by that point Jessica was furious with him. Jack felt betrayed by her anger, as he felt

to come back to therapy to work on this stressful time. After they were there, I was lucky enough to hear them in the corner. Jessica said, "That was a gift. I understand us, and I'm not sure this is the best thing. Let's give her one more chance; I'll not really advocate eavesdropping, but I'll give it a try. I knew in the next session that I would be talking about their life cycle issues with their experiences as a couple."

DEVELOPMENTAL TRANSITIONS

Examining developmental issues may help us understand how this knowledge of the life cycle can be used to go beyond a description of the tasks and to look at the specific tasks of the life cycle, the obstacles to address these tasks, and the resources available. We come together and acknowledge the challenges and work around bonding with, caring for, and supporting each other in ways that could enhance rather than hinder the relationship of the couple. Typically, a new developmental task is to meet the tasks of the stage, such as establishing routines that weren't working for the couple. For example, if a parent tired she was from caring for Aiden for the long hours that Jack spent at his house, that Jessica would want him to take care of Aiden in the evening, assuming that he was at the end of the day. He would then, then Jessica would put Aiden to bed and Jack would stay up and

have a similar fight about their Thanksgiving dinner at Jessica's parents' home. Jack had to go to work for a football game with Jessica's father, and he had to cook the meal. Aiden became increasingly demanding, and once Jessica reached the kitchen, Jack came in at the end of the day, but by that point he had already been betrayed by her anger, as he felt

he was making a contribution to the family through the football game and by coming in to get Aiden, while Jessica felt abandoned and dismissed by Jack.

In both of these instances, I could have looked at the lack of communication between them and noted that the developmental task of caring for their toddler was going to require more negotiation. Using a life cycle lens to examine these routines and rituals added a depth to my understanding of the couple that set the stage for the communications work. Together, we explored the routines and rituals in Jack and Jessica's families of origin, and it became clear that their multigenerational models were contributing to their helplessness and frustration. Jack's father left the family when Jack was 4, and although the father provided for the family financially, he lived in another state and had only minimal contact with his children. Jack described his mother as mildly depressed, chronically overworked, but very dedicated to the family. Jessica reported that her father was passive, lacking ambition, but quite devoted to his family, and she experienced her mother as driven and ultimately frustrated. When we looked at expectations for daily routines, Jessica was proud of Jack's ambition but had a hard time understanding why he wasn't more eager to see Aiden at the end of the day. Jack's involvement with Aiden was so much greater than what he experienced in his own home that he could not relate to Jessica's disappointment. In contrast to his own mother, he had experienced Jessica as energetic and resourceful, and her exhaustion was perplexing to him. He would try to be helpful and a good sport, expecting appreciation from her, but instead she experienced him as distant and emotionally uninvolved, which increased her frustration.

We can see that when Jack and Jessica became parents, they each implicitly drew on models from their families of origin, unwittingly creating a distant, frustrated partnership that was deeply familiar but unsatisfying for both. As we looked at these family patterns, not only were we able to identify the disappointment that they each felt but also we began to craft a vision for a different kind of partnership. Jessica wanted Jack to be an ambitious provider and an involved father; Jack also wanted these things, but he didn't know how to do both. Similarly, Jack wanted Jessica to be a devoted mother and a romantic partner, and Jessica did not know how to do both. Jessica and Jack saw that Aiden's birth started them on the path of repeating family patterns but gave them the chance to create a relationship that was different from their parents' relationships.

Using the developmental tasks and context as a foundation, we were then able to explore new routines and rituals that would be more satisfying for both. For example, Jack was able to come home for dinner two nights a week so that the whole family could be together. On the nights that Jack worked late, he would bathe Aiden and put him to bed while Jessica went to the gym. Jessica found that she had more energy in the evening when she had spent time with Jack or had gone to the gym, so she stopped going to bed by herself, and the couple began spending time together most nights after Aiden went to bed. These changes show both a more successful adaptation to the developmental stage (meeting the physical needs of the baby and allowing both parents to bond with the baby and also maintaining their bond) and a reworking of family of origin themes for the next generation.

The life cycle perspective implies the existence of unconscious beliefs and expectations that are learned through our experiences with our families and other systems applications focus even more explicitly on unconscious determinants of our experience and behavior. You might not associate the study of unconscious forces with systems theory, and yet we have already seen that many of the pioneers of systems work in psychology, such as Bowen, Ackerman, and even Minuchin, had extensive psychoanalytic training (Nichols, 2010). Further, we have already noted that contemporary psychodynamic approaches borrow heavily from systems theory, to the point that intersubjective theory is described as a dyadic systems theory (Buirski, 2005).

EARLY TEMPLATES

It might be difficult to argue with the existence of unconscious processes because much of the information that we use day to day is processed outside our conscious awareness. A psychodynamic view of the unconscious moves beyond the idea that the unconscious is simply the culmination of perceptions that is not in our immediate awareness. Instead, the unconscious is the part of the mind that provides an unstated, deeply embedded view of self and others. The unconscious provides a template for making sense of relationships and is shaped by both innate and environmental factors. We might say that the unconscious is the repository for our felt experiences, the place where memories are organized into themes and issues. We can use the analogy of the computer operating system to understand the workings of the unconscious. I find this analogy helpful in that operating systems are comprised of instructions that

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are unseen to the computer user but are integral to the functioning of the program. As human beings, I believe that we all have unconscious operating instructions that help determine the way that we function with ourselves and function in the world.

REPARATION AND REPAIR

If we consider that the unconscious mind holds an organized schema that helps us filter and process experiences, it follows that the unconscious is a powerful force that is both mutable and resistant to change. Most psychodynamic theories agree that the unconscious is built through relational experience, but they differ in the extent to which they see developmental stage as crucial to the quality and type of intrapsychic structure that is built through interactions. Regardless of the emphasis on development, however, a view of unconscious templates for relationships helps us understand the idea of psychological repetition. In a very circular manner, our unconscious beliefs and expectations establish how we behave in the world, including influencing the type of relationships we seek. A more pessimistic view of this phenomenon, the repetition compulsion, highlights the Sisyphean aspects of human nature: We are often programmed to repeat rather than repair problems we have experienced in earlier relationships. This is especially true when conflicts remain unconscious and unexamined. A more optimistic view of this phenomenon highlights the ways that our unconscious templates challenge us to master previous conflicts and outgrow earlier relational problems. The traditional psychodynamic view takes the approach that by gaining insight, or making the unconscious conscious, we no longer need to act out the underlying conflicts. A systems view of these themes underscores the importance of insight but says that the work of the unconscious does not stop there. In addition, the resolution of unconscious conflicts allows us to then experience our relationships in new ways, which in turn allows us to behave differently in relationships.

If we look back at my dream, we can see the unconscious dilemma that is being triggered by watching my daughter's high school relationship. I believe that these challenges exist within me and within my daughter but are also passed down and across our family. In the second part of the chapter, we will talk more about the complementary patterns of intrapsychic defense, which is one fascinating application of a psychodynamic view to systems theory. But staying with a more individual approach, my dream suggests that her

relationship has triggered some of my own ambivalence about individuality, growth, and loss. I am feeling guilty about leaving for college and having my own life, and I can feel good about this change only when I know that my boyfriend is settled in a new path. I awoke from the dream with a feeling of nostalgia and a bittersweet type of sadness, but it was not a particularly painful or confusing dream. Because I have explored these themes in depth, I not only have insight into these conflicts but also have applied the insights to alter the way I approach relationships. I am able to be more at peace with the breakup with my boyfriend in the dream, even though I was not able to be at peace with this decision when we were leaving for college. As I developed a deeper understanding of my conflicts about being autonomous and outgrowing the relationship, I could behave differently in the relationship, the relationship subsequently changed, and my view of myself was transformed. There was a circular process of intrapsychic and interpersonal work that facilitated greater mastery of these conflicts.

This view of the circular nature of internal and interpersonal themes is consistent with the work of object relations theorists, and many of these ideas have particular clinical utility (Scharff & Scharff, 1987). I especially appreciate the way that looking at deeper, unconscious determinants to behavior can add to our understanding of obstacles to change and opportunities for change. I can remember, early in my career, being amazed when couples stayed together in misery for decades, which doesn't appear to make sense from a strictly behavioral perspective. When a relationship makes us miserable, why wouldn't we try to get away from the misery, which is the very definition of negative reinforcement (the removal of a negative or punishing consequence)? Yet whether you label the phenomenon codependence or hostile dependence or give it some other label, both literature and popular culture are replete with examples of couples who seem to stay together to make each other miserable.

COMPLEMENTARY PATTERNS

One concept that has been especially helpful in understanding the maintenance and repetition of destructive patterns in relationships is projective identification. Melanie Klein (1946) does a brilliant job in describing this phenomenon, and I find Hannah Segal's (1973) explanation of Klein's work to be very illuminating. Students are often put off by the more traditional psychoanalytic emphasis on the physical

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manifestations of early developmental phases, particularly more dramatic concepts like the good and bad breast. Yet the vivid and colorful theory adds to our understanding of human nature in at least two fundamental ways. First, anyone who has spent time with infants knows that the process of helping them learn to regulate their eating, sleeping, digesting, and alertness is a huge job that is often fraught with frustration. As we see throughout the chapter, the need for ritual, repetition, patience, and perseverance in meeting both individual and collective developmental stages is a huge contribution of dynamic theories.

The second major contribution of Klein's work lies in her thorough explication of projective identification. To understand the notion of projective identification, we need to quickly revisit Freud's definitions of defense mechanisms. According to Freud and other early psychoanalytic theorists, human beings develop defense mechanisms to cope with painful and difficult affective states, particularly those that relate to an overwhelming experience of anxiety. Even without a more thorough background in psychoanalytic thinking, most of you have probably heard of projection and its use as a defense. When we experience a particularly painful or negative thought or feeling, we can project it onto something in our environment, in essence, to get rid of it. Projective identification also starts with a negative internal experience, but one that is ambivalently held and integral to the definition of self. So instead of simply being able to get rid of the negative experience by projecting it onto someone else, the experience that is being projected involves a disavowed part of the self. Therefore, the ambivalence requires that the painful affect is both projected out and kept near. As we have already discussed with psychodynamic theories, the process of projecting something difficult and then identifying with the projection means that themes will be repeated, providing the opportunity of ultimately being mastered. In the case of projective identification, the mastery involves seeing someone else accept the projection and rework it in a way that it can finally be reclaimed and reintegrated into the self.

All of these psychodynamic descriptions may seem abstract and difficult to follow, but seeing this concept through a systemic lens also reminds us that projective identification takes place in real relationships, not in the netherworld of unconscious structures. Most psychodynamic systems theorists note that projective identification tends to involve a complementary process in which both members of a couple are projecting unwanted aspects of self onto the other (Catherall, 1992).

This interlocking pattern of dynamics can make miserable relationships hard to change, and it simultaneously makes systems work a powerful venue for change. It is certainly possible to experience projective identification in individual therapy, and much that is written about the constructive use of countertransference involves first accepting and then reworking projective identification from our patients. For example, Tansey and Burke (1995) do a brilliant job in describing the way that difficult countertransference reactions can be processed within the therapy in a manner that helps the client understand himself better and that allows for growth and repair of the therapy relationship.

REWORKING EARLY EXPERIENCE

Systems theory tells us that this countertransference experience is not only not limited to the therapy room but also can be foundational in creating and maintaining all kinds of intimate relationships. The case of Paul and Linda comes immediately to mind. They had been unhappily married for 22 years when they came to see me. They had been in couples therapy on two other occasions and almost proudly stated, "Communication skills don't work for us." They were currently embroiled in an enormous conflict around their 17-year-old daughter Caitlyn, who was trying to decide whether to go to college. Linda felt strongly that Caitlyn should take a year off before going to college or to some kind of nontraditional program; Caitlyn's grades were poor, and she was not invested in searching for colleges herself. Linda believed that Paul had chronically favored and spoiled Caitlyn and that Paul would be willing to throw away the family's money on Caitlyn's college tuition, as he had always enjoyed throwing money away on Caitlyn. Paul believed that Caitlyn's problems stemmed from the high level of conflict between Linda and Caitlyn and that she would be fine once she left home. He believed Linda favored their son, Connor, who was a sophomore at an expensive college. He felt that it would be unconscionable to pay for Connor's education without doing exactly the same for Caitlyn, and he accused Linda of being unfair and punitive.

Although conflicts about paying for college are quite common in my experience, the feeling of being in the room with this couple indicated that there was more going on between them. Each partner had a high level of contempt for the other's position and seemed convinced of the other's negative motivation. In addition, their negative characterizations of the other were stable, comprehensive, well elaborated, and decades old. Linda described Paul as indulgent, selfish, and ea

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manipulated; Paul described Linda as ruthless, mean-spirited, and competitive. They could each find examples of seeing these characteristics in the other since early in their courtship. When asked the obvious question, "What keeps the two of you together?" each commented about asking themselves the same question, each agreed that it was important to provide stability to their children, and each quickly moved on to building a case against the other. Linda actively attacked Paul by pointing out all of his poor parenting decisions with Caitlyn; Paul's style was to let Linda's rage build and then comment on her toxic anger.

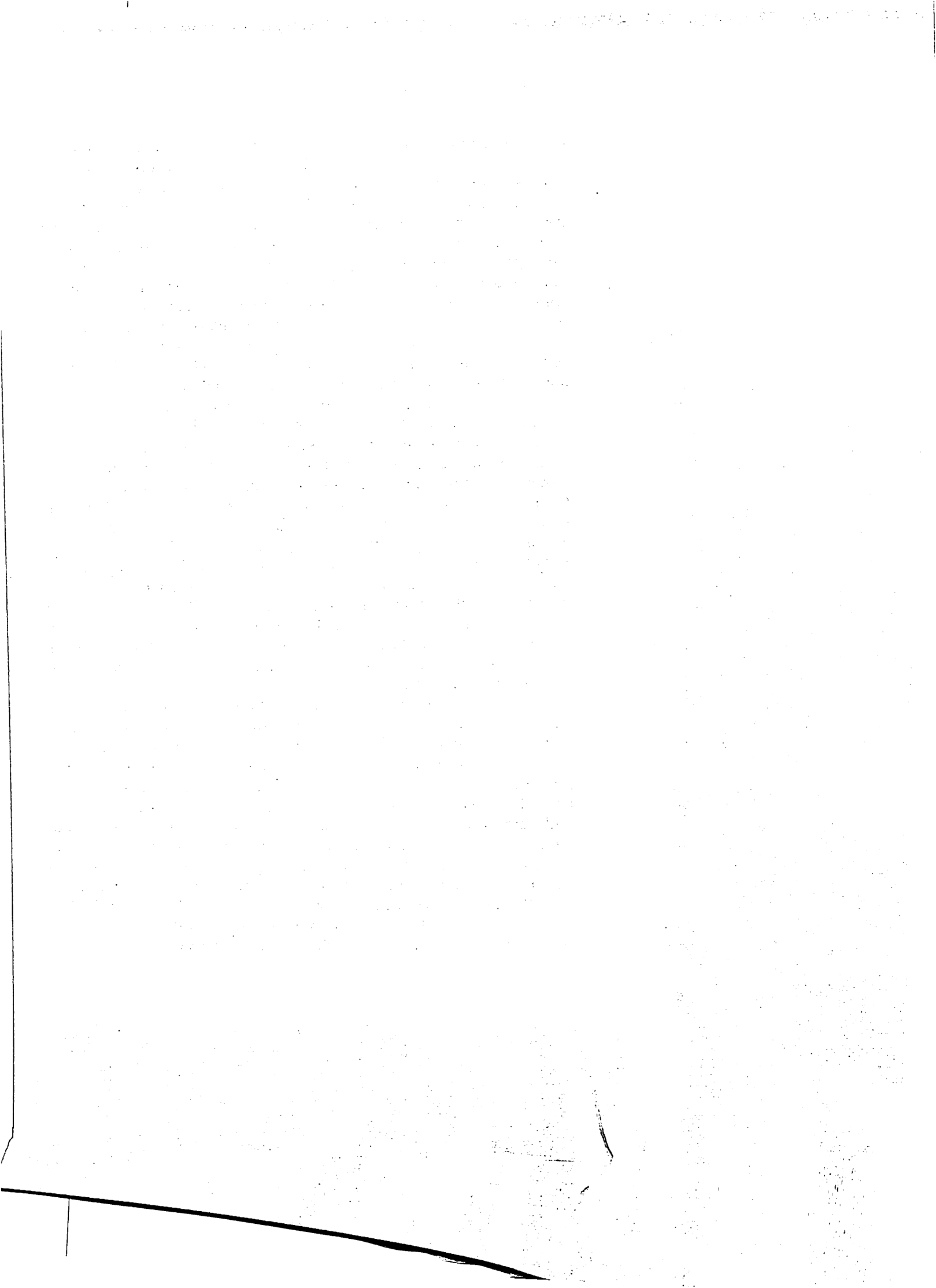
As their therapist, I knew that I needed to stop the destructive interaction between Paul and Linda, but I could understand why they said that in their previous therapy experiences, communication skills didn't work. Paul and Linda not only lacked the skills to employ a collaborative decision-making approach but also seemed unconsciously invested in resisting such an approach. As I got to know Linda better, I began to understand how betrayed and unimportant she felt in most of her relationships, including her early relationships with her parents. On the surface, she was a strong, bright, attractive, and accomplished woman who could hold her own in any situation. She expressed a great deal of contempt for Paul's passivity and struggled to feel any compassion for the way she hurt him when she attacked his character. I began to understand that she was projecting her experience of being small, vulnerable, and helpless on Paul in these moments. In their conflict, she behaved in ways that elicited feelings of inadequacy and incompetence, just as she had felt with her controlling, rejecting mother. At the same time, Paul's background set the stage for him to accept this projection and reciprocate. On the surface, he appeared friendly, easygoing, flexible, reasonable, and generous. In their interaction, it appeared that he was projecting his experience of being angry, frustrated, and indignant onto Linda. When we see each of these experiences as disavowed aspects of the self, we can have both the empathy necessary to connect with the emotionally charged experience and the commitment to reworking the projections so the pattern will change.

So how did Linda and Paul rework these projections? I do want to be clear that this type of intrapsychic work is notoriously slow and difficult, and most therapists would agree that a long-term history of chronically low satisfaction is not a good prognostic sign. But to reiterate the value of adding the intrapsychic approach, I have found that these theories help me form an empathic connection in challenging

clinical situations, and coming from that position of realistic empathy, change is sometimes possible. In the case of Paul and Linda, the very slow and deliberate emphasis on turning their contempt into compassion gradually made the relationship more manageable. Further, because the issues they were trying to rework were so intertwined, the reclaiming of projections by one partner almost always resulted in the other partner's progress. When we worked on the legitimacy of Linda's anger and disappointment and helped her express these emotions more constructively, Paul gradually began to recognize and own his feelings of frustration and anger toward Caitlyn. Similarly, as Linda listened to Paul's struggle in supporting Caitlyn without being indulgent or becoming a martyr, she began to discuss her feelings of helplessness and vulnerability in wanting to be closer to Caitlyn.

This couple's work certainly included an emphasis on affect that is common in emotionally focused work but added a concentration on early experience. Paul recounted several memories of listening to his mother berate his father: He welled up with rage as he waited for his father to stand up for himself. His father quietly drank his way through these episodes, and the only time he did assert himself was when Paul tried to argue with his mother. His father then angrily insisted that arguing was disrespectful, and he punished Paul for speaking up. Initially, Linda saw Paul's discussion of his family of origin as an opportunity to gain ammunition against him; she stated that he had never looked at all of the pathology in his family. But as we connected the work on anger and vulnerability to current themes in their family and looked at how these themes related to both of them, Linda's growing compassion for her own internal experience allowed her to be more empathic towards Paul.

As you might imagine, the exploration of Linda's childhood memories mirrored what we worked on with Paul. Linda expressed a painful memory of having a high fever with the flu and needing to care for her younger sister, who was also sick, because her mother was too depressed to care for them, and her father was away. She was unsure about how to address her sister's misery, as she was only 7 years old and quite sick herself. Paul initially minimized Linda's description of her fear, joking that "since then Linda has been too tough to get sick." But concentrating on her feelings of being overwhelmed helped Paul accept his own fear, which in turn allowed him to be more affirming of her. When Linda was critical of Caitlyn for being immature, and when she tended to want to push Caitlyn out of the nest rather than nurture her, Linda began to understand that her extreme reactions made sense



at position of realistic empathy, the case of Paul and Linda, the very turning their contempt into companionship more manageable. Further, the rework were so intertwined, the result almost always resulted in the focused on the legitimacy of Linda's need to express these emotions more fully to recognize and own his feelings with Paul. Similarly, as Linda listened to Caitlyn without being indulgent or dismissing her feelings of helplessness, the result was to Caitlyn.

emphasized an emphasis on affect that is not just but added a concentration on the shared memories of listening to his Paul with rage as he waited for his Paul to quietly drink his way through his need to assert himself was when Paul rather than angrily insisted that he punished Paul for speaking up. Linda's notion of his family of origin as an obstacle to him; she stated that he had not been in his family. But as we connected the dots to current themes in their family history related to both of them, Linda's shared personal experience allowed her to

recollection of Linda's childhood memories with Paul. Linda expressed a painful memory of the flu and needing to care for Paul, because her mother was too ill rather than away. She was unsure of the memory, as she was only 7 years old and minimized Linda's description of Paul's illness as "has been too tough to get sick." Linda's being overwhelmed helped Paul to be more affirming of himself when he was immature, and when he was not in the nest rather than nurture. Linda's extreme reactions made sense

in the context of her family history. She became more open about her fear of Caitlyn's ability to care for herself, which Paul expressed openly, and as she owned this for herself, Paul held it less rigidly. They had started a circular dance in which each person's self-acceptance allowed for greater acceptance of the other. Although progress was slow and certainly not linear, the work that Paul and Linda did on their relationship had enormous benefits for them as individuals and for their family. As they were more at peace with themselves, their communication improved, and they could actually employ some of the communication skills they had learned in their previous therapy. The task of the relationship became working together and enjoying each other, rather than their original unconscious contract of accepting the projections of the other.

The case of Paul and Linda shows a rather dramatic application of psychodynamic principles, yet this implies that psychodynamic theory is useful only when we need to understand psychopathology. In addition to understanding the importance of the unconscious, systemic psychodynamic theories highlight the relevance of individual and family development. In human systems, it is impossible to separate biological and social influences on development. Of course, a systemic view provides more than one way to look at phenomena, and the next chapter will challenge some of the universality ascribed to both family and individual developmental patterns.

Systems theory has utilized a multigenerational approach to development in two ways, incorporating both family life cycle perspectives and psychodynamic perspectives. The life cycle perspective highlights the importance of physical and psychological developmental tasks and looks at the routines and rituals that systems employ to navigate developmental transitions. A psychodynamic perspective emphasizes the unconscious relational template that is developed and then modified through intimate emotional interactions. Unresolved conflicts and needs are likely to be repeated in a complementary manner in subsequent relationships. This ongoing repetition both explains the prevalence of the multigenerational transmission of problems and illuminates the systemic opportunities to address problems intrapsychically and interpersonally.