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[**Bowen Family Systems Therapy**](https://jigsaw.vitalsource.com/books/9780197521786/epub/OEBPS/html/04_Contents.xhtml#id_21)

*James and Valerie Mathews have been married for 12 years and have three children, a daughter, Sarah (11), and two sons, Mark (7) and Bill (5). James is an engineer with a local firm, and Valerie is a teacher. James views himself as independent and separated from his parents and his siblings. He is very reluctant to spend holidays with his family, although the children are unhappy that they see their grandparents so infrequently. The grandfather was very successful financially and loves to treat his grandchildren. Valerie is very close to her parents, who live in the same community. Valerie and the children visit her parents frequently, although James often gives work as his excuse not to be part of the visit. James’s mother has recently become quite ill with a chronic illness, and his father and sisters have been pressuring him to visit more often. He always finds some reason why he is needed at work and declares these requests to be unreasonable. Valerie notices that these requests leave James anxious and irritated in ways that create tension within the family. Even the children are starting to dread the days in which their grand father or an aunt calls the house to speak to their father. The children have learned to tell the grandfather and aunt that their father is not at home, although they feel like traitors to their grandparents in doing so. Both James and Valerie have been telling their 11-year-old daughter their frustration with each other. She listens to both but feels torn because she cannot take either side without alienating one of her parents*.

*Valerie turns to her usual resource, her parents, and begins seeking advice from them on how to deal with this situation. When James learns what Valerie has been doing, he becomes extremely angry with her and calls her a traitor to her marriage. Not knowing what else to do, Valerie secretly contacts her parents again for advice. The children are also becoming tense as they see this scenario playing out in the family. The 7- and 5-year-olds begin to escalate their teasing and physical tussles until Valerie becomes worried about the impact of the tension on the children. When the behavior problems of the 7-year-old spill over into the school setting, Valerie becomes concerned and tries to enlist James to seek help for the family. As a teacher, she is especially attuned to the needs of this child and begins spending additional time with her son. James in turn has been spending less time at home and more time at the office and has been uninvolved in this family drama*.

This family has several important protective factors in terms of adequate financial resources, parents’ ability to carry out their challenging professional roles, and the presence of caring grandparents. The couple has been married for over 12 years, and until recently, the family had settled roles that met most of the family needs. Valerie is generally attentive to the needs of the children. At the same time, there are risk factors in terms of the marital relationship that is characterized by tension arising most recently from the inability of James to respond to the requests by his parents and sister to attend to his mother’s needs. This tension has rippled throughout the family system, as evidenced by the behavior of the younger children. The 11-year-old daughter has been triangulated into this arrangement by both her parents and feels helpless to escape this no-win situation. While James views himself as independent of his family, his behavior reflects a pattern of being strongly influenced by his parents. The more they seek to draw him closer to them, the more he withdraws. In stark contrast to James, Valerie is very close to her family. In fact, she views them as her most reliable source of support and turns to them despite the wishes of her husband and the likely tension that it creates. There are serious communication problems in terms of Valerie and James, especially as it relates to their respective relationships with their parents.

Bowen systemic family therapy addresses the interpersonal world of family members, especially in terms of the shadows created by relationships between generations. These families have their basic needs met, but relationships are troubled by family patterns.

While James views himself as independent from his parents and sister, in reality he is very emotionally reactive to his family. As they make requests (pursue), he retreats and pulls away further (distances himself). In fact, his behavior might also be characterized as a pattern of whatever they ask of him, he does the opposite. He has mistaken independence for an emotional cutoff. In reality, a person who is truly differentiated can choose to be close to his or her parents, can choose to agree, can choose to be part of the family. For John, these are not options that he views for himself. Valerie, on the other hand, manifests lack of differentiation in the opposite manner, being very involved with her family, even at the price of creating tension within the family. While their behaviors are very different, in reality both of them have had difficulty truly differentiating from their families of origin. From a systems perspective, James and Valerie have married individuals at similar levels of differentiation. Both James and Valerie have also pulled their daughter into a situation of triangulation whereby she feels that she must listen to both of them and yet cannot take either side (despite implicit demands by both parents that she agree with them).

**Goals of Treatment**

The primary goal is to help family members differentiate so that their behavior in the family is not based on emotional reactivity regarding current and family-of-origin issues. This process enables family members to relate in a manner that provides for one’s individuality as well as connections. A related goal is to reduce family anxiety that fuels problems with differentiation and the existence of triangles within the family system.

**Basic Tenets**

•Triangles are formed in families to cope with anxiety.

•The ideal state is one of differentiation: the ability to function autonomously, to balance thinking and feeling, to be intimate with others without sacrificing one’s own individuality.

•Cutoffs and fusion are two ways in which failure to differentiate manifests itself.

•Parents can project their own struggles in an unconscious manner onto one of their children through parental projection.

•The process of differentiation is transmitted from generation to generation.

•Birth order plays an important role in families.

**Theoretical Background**

Murray Bowen was one of the leading pioneers in family systems theory. His own professional background was psychoanalysis, and this approach helped inform his understanding of families. Daniel Papero (2000) and Nichols and Schwartz (2001) provided excellent descriptions of Murray Bowen’s professional journey and its impact on his theory and practice.

Bowen viewed the family as a system occurring over time. He was concerned about how people exist both as individuals and in relationships, as well as the role of anxiety within the family system. As a result, he developed the theoretical concepts that are the cornerstones of his theory; these are discussed next. These concepts and the related technique of the genogram have been influential in other theoretical approaches that address family organizational issues. The concepts that follow are included in publications regarding Bowen’s family systems theory (e.g., M. Bowen, 1978; J. Walsh & Harrigan, 2003; and the current web pages of the Bowen Center for the Study of the Family at <https://thebowencenter.org/theory/eight-concepts>/(2018) *Triangles*. Triangles are formed when two members of the family enlist a third member in such a way that the third person really cannot escape and does not feel that he or she can comment. Such a triangulation process is a response to anxiety of two individuals who, through the process of triangulation, create anxiety within a third party. James and Valerie have triangulated their daughter. She wants to please both parents and does not feel as a child that she can refuse to play the role in the family that they have assigned her.

*Differentiation* . Bowen’s concern was the ability of family members to both be together in relationships and be individuals. The ideal state is one of differentiation: the ability to function autonomously, to balance thinking and feeling, to be intimate with others without sacrificing one’s own individuality. In terms of behavior, failure to differentiate can be manifested either in people who conform at great costs or in those who act reactively in an opposite manner. For example, James is so caught up in his need to distance himself from his parents that he cannot respond to the illness of his mother and reflect on the cost of his actions on his family. Valerie is so close to her parents that she cannot find other sources of support that will not create tension within her family.

*Emotional cutoffs*. Family members can deal with their lack of differentiation by being emotionally distant from family members. The quality of this distance is emotionally reactive in nature. As indicated previously, James has dealt with the emotions created by his family of origin by cutting himself off from this family and instead burying himself at work.

*Emotional fusion* represents the other side of emotional cutoffs. Here, individuals are so connected with others that they in effect lose their own individuality. Their feelings and thoughts are in essence those of others.

Individuals who are undifferentiated are also less able to handle anxiety and stress. This tension can result in (a) “marital conflict,” (b) “reactive emotional distance,” (c) “physical or emotional dysfunction in one of more of the spouses,” and (d) “projection of problems onto the children” (Nichols & Schwartz, 2001, p. 142).

*Nuclear family emotional process*. Symptoms typically occur during times of heightened or prolonged family tension. The level of tensions depends on the family’s adaption to stress. The four basic relationship patterns that can reflect these tensions are

*Marital conflict—each family members externalizes his/her anxiety onto the marital relationship*.

*Dysfunction of one spouse. One spouse pressures the other to think and act in ways and the other succumbs to this pressure. While this arrangement can be comfortable for both it can also reach a point where the subordinate one yields so much of oneself that anxiety increases substantially and symptoms can develop*.

*Impairment of one or more children. Spouses focus their anxiety on one or more of their children making it difficult for this child to differentiate himself effectively from the family and problems develop*.

*Emotional distance. Family members distance themselves from other family members to reduce tension but risk becoming isolated*.

(The Bowen Center for the Study of the Family, Theory, 2018)

*Family/parental projection*. Parents can project their own struggles in an unconscious manner onto one of their children through parental projection. As parents are unable to address their own relationship, children are pulled into the situation. The child’s behavior in turn enables the parents to focus their anxiety on this child (e.g., James and Valerie’s 7-year-old son, who “needs” his mother’s expertise as a teacher).

*Multigenerational transmission process*. The process of differentiation is transmitted from generation to generation. Anxiety within the family situation reduces the level of differentiation. The situation is compounded because people are likely to marry individuals at similar levels of differentiation. Valerie and James, for example, are both emotionally reactive to their families, although the manifestation of this is at opposite poles.

*Family birth order and sibling position*. These play important roles in the development of a child, especially as the children fit into the broader family system. Each of the children of James and Valerie is influenced in different ways by the family situation. James’s role within the family birth order had a powerful effect on this family role.

*Society emotional process*. People in a society tend to become more anxious under conditions of environmental stress that impact their ability to cope and survive.

**Promotes Resiliency**

Resiliency is promoted by

•Addressing risk factors associated with rigid family organizational patterns (cutoffs and fusion) and evidence of reactivation of past events.

•Strengthening protective factors by enabling family members to create positive interactions based on differentiation and possibilities within the current family reality, which in turn can create a genuine sense of affection within the family.

**Role of the Counselor**

Bowen described the role of the family therapist as a “coach” (J. Walsh, 2003, p. 158). The therapist serves “as a model for rational interaction” (J. Walsh & Harrigan, 2003, p. 387). Bowen viewed the role of the counselor as remaining neutral and objective. To reduce the excessive anxiety and reactive emotion with the family members, his approach was based on facts and thoughts rather than feelings. The attention is on process rather than the content to avoid getting caught up in the hot bed of emotionally laden content. The therapist engages in dialogue with individual family members in the presence of the other family members. The coach helps family members identify triangles within their current family as well as family of origin.

The neutral approach of Bowen was altered by followers who were concerned about gender issues within the family and thus addressed issues related to power differentials or gender scripts that influenced power within the family system (Nichols & Schwartz, 2001, p. 158).

**Assessment Process: The Genogram**

The genogram plays a critical role in the assessment process within family systems therapy. As described and illustrated in [chapter 3](https://jigsaw.vitalsource.com/books/9780197521786/epub/OEBPS/html/12_3__Assessment_of_Families.xhtml#page_64) on assessment, the genogram is a diagram of the current family as well as the family of origin. While ideally it should include three generations, this is not always possible. The genogram not only includes the names and birth and death dates of family members but also concise descriptions (type of work, personal style) and alliances within the family tree. This assessment tool is designed to help family members recognize patterns and messages that are transmitted from generation to generation. As described in [chapter 3](https://jigsaw.vitalsource.com/books/9780197521786/epub/OEBPS/html/12_3__Assessment_of_Families.xhtml#page_64), the Jacob family members recognized messages that were transmitted regarding illness and health that were controlling current reactions to the health situation of their son.

A genogram of Valerie and James also reveals messages. The genogram information presented next is organized in greater detail in terms of James, but in therapy, this genogram would also trace the family line for both parents. The following represents the genogram in words:

James’s paternal grandfather had been a tool and die maker who had provided a good living for the family. His grandmother had been a homemaker who cared for the family until she became quite ill and was no longer able to do so. The two daughters were then enlisted into this role. The grandfather became very anxious and both found it difficult to concentrate on his work (essential for his very precise work) and retreated to the shop to deal with the pressures at home.

James’s father’s anxiety created by this family scenario translated into a determination to protect himself and his family by becoming a successful businessperson. He viewed this as a way of controlling life circumstances. He made good on this determination, obtained a graduate education in business, and did very well in the field of business. James’s father and mother had two daughters before a boy was born. This child was born with congenital abnormalities and died as a toddler. James was born 2 years later. His mother hovered over James, afraid that something might also take him away from the family. The message was one of danger. The father placed on James the expectation that he would follow in the father’s footsteps and carry on in the family business. He was critical of the mother’s hovering approach, urged James to become more physically adventuresome with him, but never directly challenged the mother’s overprotective behavior with her. As a result, James felt contradictory messages directed to him. James’s sisters were close together but older than James, so he did not feel a close sibling type of relationship with them; instead, they were more like junior parents.

James disappointed his father by not wanting to follow in the family business. Instead, he became very interested in how “things worked” and began to think about engineering. From the perspective of his father, this was following in the footsteps of the grandfather and not a safe journey. Father and son had many heated arguments. The mother stayed out of these arguments but was anxious about James leaving the family to go away to school and expressed her worries to him. James did not feel that he could share his wishes and concerns with his sisters because he viewed them as allied with his parents.

James responded to these messages of “you are weak,” “you are not living up to family expectations” by cutting himself off from the family. His badge of honor of independence from his family is a cover-up for his inability to differentiate from family messages. Family visits serve to reactivate anxious feelings, so the safe path is to avoid family contact. The illness of his mother and pressure from his father and siblings to become engaged again in the family, especially in response to family need and illness, have set in motion increased anxiety, which he is dealing with by distancing himself further.

Valerie grew up as an only child in her family. Her mother had two miscarries prior to her birth and one following her birth. Valerie was born prematurely and struggled as a baby with a heart problem that was addressed through several surgeries. Her mother was very protective of Valerie and attentive to any potential signs of heart issues. Valerie’s father was also very close to her. Both parents tended to shield Valerie from stressful situations. She could count on them as a safe haven during potentially stressful times. She grew up feeling very vulnerable and close to both of her parents, whom she tended to rely on for strength when she felt overwhelmed.

While James’s and Valerie’s behaviors in terms of their families of origin are very different—Valerie very attached and James in a cut off stance—both share problems in becoming comfortably differentiated from their parents. Illness is also a very potent source of anxiety within these families and carries messages of threat, loss, and vulnerability.

The information provided by the genogram thus provides a means by which family members can identify messages from family of origin that are influencing current family tension. The therapist can ask questions that help family members identify current patterns as they relate to these earlier messages.

**Treatment Process**

*Providing a setting that is safe to explore family patterns without emotional reactivity*. This context is important because family members are likely to replicate in the session the emotional reactivity and related behavior patterns that have maintained the problem. Bowen frequently worked with only one of the family members, typically the family member who was the most differentiated and thus willing to consider change.

*Genogram*. The genogram serves as both an assessment and a treatment tool. Constructing the genogram provides the family an opportunity to understand its family messages that are continuing to play a role and creating problems. As described for Jacob’s family and Valerie and James, the genogram provides a visual tool for recognizing how these patterns have developed and are continuing.

The genogram is also an important tool for other elements of family treatment: helping family members gain insight, educating members about family issues in general, reducing triangulation within the family scene, creating new attachments with others, and changing old relationships with family members.

*Insight*. Insight is important for understanding and change. Insight can be directed toward the current nature of interpersonal relationships (family triangles, family themes) and the developmental nature of family relationships over time (J. Walsh & Harrigan, 2003).

In terms of James and Valerie, the genogram and associated conversation helped family members develop insight into their family and to use this to begin to make changes within the immediate and extended family system. This insight is part of a step to enable people to begin the differentiation process. The first step is further understanding and insight into the family system. The second is to use this understanding to reduce the emotional reactivity involved. The third (and potential) step is to try to make changes in relationships with others within the family system. The word *try* is used here because individuals must realize that they ultimately cannot control the reactions of other people. The discussion that follows illustrates these steps.

*Valerie has gained a better understanding of the anxiety created by the current situation in James’s family. This has helped her not to take his response so personally. Valerie began to understand how her own dependence on her family, as evidenced by her sharing with her parents these issues, is increasing tension within the family. She also began to explore other possibilities for support than her parents. James and Valerie can problem-solve ways that they can address this situation without pulling their daughter into it. James has gained insight into the pulls that he is experiencing in terms of his mother’s illness, especially given the context of worries of illness over the years. He has begun to recognize ways in which his father’s expressed disappointment regarding his career choice was partly a way to protect his family rather than a mark of failure on James’s part. James identifies his relationship with his younger sister as less emotionally toxic as the one he has with his parents. Recognizing that his sister might respond as he hopes that she will, he reaches out to his sister to learn more about what is happening in the family. He is fortunate that she is receptive. His conversation with his sister gives him further understanding of the family story. He explores with his sister ways that he can reconnect with his parents without being pulled into the earlier roles and emotional reactions*.

*Evaluation and reinforcement of progress*. J. Walsh and Harrigan (2003) described several clinical approaches that the family therapist can use to evaluate the progress of family members and to help reinforce progress. These techniques can aid family members in examining how behavior has changed because of therapy and ways to help sustain it.

•*The use of dual genograms*: one regarding how they seem themselves and the others as they wish to be. Family members can be asked to create genograms periodically during therapy to examine how the current situation is approaching what people would like it to be. These can also be used by the therapist to summarize the nature of progress.

•*Observations and experience of anxiety in the session*. The therapist can observe behavior patterns of interaction that reflect on more positive interactions as well as the client’s own experience of anxiety with the family. During the process of termination, this information can be shared with the family. Family members can be asked what they think contributes to the therapist’s decreased sense of anxiety as a way to test changes in interaction patterns.

•*Changes in relationship patterns*. The therapist can ask family members to share their plans for maintaining these changes.

•*Evidence of insight*. The therapist can ask the family members to review what they have learned about themselves and their family.

•*Rituals*. Rituals can be used to affirm the progress the family has made and to integrate this new understanding and behavior into their daily life. Family members help develop rituals that are appropriate for their family’s life experience.

**Evaluation**

Bowen and his colleagues were typically more concerned with theory and related practice than in conducting evaluations of therapy. One study did indicate that the treatment was associated with statements that reflected greater degrees of differentiation (Winter, 1971, as cited by Nichols & Schwartz, 2001, p. 171). The treatment as designed and implemented by Bowen appeared most appropriate for families that were relatively enmeshed and not troubled by financial difficulties (Nichols & Schwartz, 2001). In terms of families from various cultures, a small recent study set in Iran with couples experiencing conflict indicated the effectiveness of the intervention based on this model compared with no treatment (Yektatalap, Seddigh Oskouee, & Sodani, 2016). At the same time, the concepts of “family system” and “triangulation” have proven very valuable, and the genogram is a useful tool for family therapists using a variety of approaches.

**Summary**

Family systems theory was one of the early attempts to bridge individual and family concepts and to understand ways in which early family relationships affected the current family systems. It developed important concepts such as the genogram, triangles, differentiation, and fusion/emotional cutoffs. Therapy was organized around helping a person individuate from his or her family of origin so that they could develop authentic relationships with family members while retaining their own sense of individuality. The focus in the sessions is on intellectual understanding rather than emotions. Families typically have their basic needs met and do not need additional services.

**Discussion Questions**

*Discuss how problems in differentiation can manifest themselves in completely opposite behaviors*.

*How does the genogram facilitate both the assessment and the treatment processes?*

*How does triangulation help mitigate the anxiety for some members and increase it for others?*

*Why is it important for the family therapist to assume an emotionally unreactive manner in the therapy process in this model?*