



Coming to grips with family systems theory in a collaborative, learning environment.

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Is Bowen Theory still relevant in the Family Therapy field?



A discussion of common challenges and confusion about the usefulness of Murray Bowen's Family Systems Approach.

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When recently presenting a seminar to a group of couple and family therapy masters students, I was asked the question "Is Murray Bowen's model of systems theory still relevant or is it just useful to know about as a piece of family therapy history?" Certainly the family therapy models of the 1960s and 70s, elucidated by the likes of Satir, Minuchin and Haley, are often seen as influential yet superseded by approaches that were informed by postmodernism such as Narrative, Solution Focused and Post-Milan. Family Therapy itself as a mode of treating symptoms in children or relationships has faded in popularity since the 1980s with individual work seen as logistically more manageable. (Crago, 2008)

This paper will consider the common questions asked about the relevance and effectiveness of Bowen's model and allow readers the opportunity to think for themselves about whether or not it has something to offer.

Bowen's Family Systems Theory was formally presented to the professional community in the late 1960s when Murray Bowen spoke of his own efforts to define himself in his family of origin. Since 1957 he had been writing about his emerging system's theory in the treatment of families with a schizophrenic member. (Bowen, 1978) I came across this model in the early 1990s while being supervised by Betty Carter at the Family Institute of Westchester in New York. Phillip Guerin who was trained by Murray Bowen as a young psychiatrist in the 1970s had trained Carter. While I had studied and practiced in a number of other family therapy models I was drawn to the way Bowen Theory spoke to my own experience of family and helped me to see the clear connection between what I did in therapy and what I did in my family roles. Sixteen years later I am still captured by the usefulness of Bowen's eight interlocking theoretical concepts in understanding my own functioning in the relationships in my personal and professional life. My view is that such a personal awareness of self in the relationship systems of which I am a part provides a useful basis for lending a hand to clients, with all ranges of life difficulties, as they work out how to be a little more authentically themselves while also being authentically connected to significant others.

Is a family systems framework mostly applicable to seeing whole families? Don't other frameworks apply better to individuals?

Bowen Family Systems Theory sees the individual as inseparable from his/her relationship networks. The generations of the family are considered as always being part of each person's life experience, hence in this approach there is no such thing as doing individual therapy. In Family Systems an individual's particular sensitivities to closeness, distance and conflict are said to develop in their experience of their first caretaking triangle (and the interlocking triangles extending from it) which in turn impacts what they bring to all their

relationships. The family system is seen as residing in the self as much as the self resides in the system. With such a perspective Bowen called all his clinical work "Family Therapy" whether it was a couple, individual or family in the room.

The key distinction between a Family Systems approach and a more traditional individual therapy is that the focus for change is in the natural system of the client's own family rather than in the therapeutic relationship. Instead of the therapist seeking to facilitate a corrective relationship within the transference of the therapist-client system, they encourage the client to take action in their family system. Reflections are not on the individual's intra-psychic processes but on their own family's current and intergenerational patterns of relationships. The family systems therapist emphasizes each person's participation in the system, not what motivates individual behaviour. (Brown, 2007)

There are a host of approaches to working with individuals which may all be helpful in different ways. A family systems approach, as developed by Bowen, is applicable whatever the presentation or however many people from a family are sitting in the therapy room.

Bowen emphasized that his theory was about a way of thinking about relationships rather than a way of doing therapy. Does this mean that the model is devoid of techniques?

The therapist's ability to see the broader system as opposed to linear "cause and effect" thinking is foundational to the Family Systems Model. Bowen was known to regularly say that there is nothing more practical than good theory; however he also proposed a number of techniques that are derived from theory.

The central intervention in Bowen's model is the therapist staying free from entering the pattern of anxious reactions within the family. This means that the therapist stays out of family triangles whether they are seeing an individual, couple or family (**de-triangling**). (Brown, 2008) This is informed by the view that tension which surrounds a symptom can be resolved if family members can be in contact with a third party who remains engaged with the client while remaining emotionally objective about any conflict or assertion of blame. Bowen terms this therapist stance "**Emotional nonparticipation**" which he makes clear "does not mean the therapist is cold or distant, or aloof. Instead it requires the therapist to recognize his own emotional involvement when it does occur, to gain sufficient control over his emotional system, to avoid emotional side taking with any family member, to observe the family as a phenomenon, and to be able to relate freely to any family member at any time." (Bowen, 1978: p192)

A well known tool to emerge from Bowen therapy is the **intergenerational family diagram or genogram**. Bowen constructed a map of at least three generations of a client's family during the course of asking questions about the problem and who is involved. The link to previous generations is made by asking who in the extended family is aware of the problem and how were similar issues handled in previous generations. This enlists the client's curiosity about the much broader context of their difficulties and helps them move beyond blaming individuals to seeing the patterns that have repeated across generations.

Given that most clients of psychotherapy are motivated to address a problem in the here and now, a family systems therapist will begin with an emphasis on the problem bearer and gaining symptom relief (working in the foreground). However as family members start to understand their part in the interactions that maintain the symptom as well as how patterns of managing relationship anxiety are passed down the generations, they may choose to continue working with the therapist to look at the broader generational context. (Brown, 2007)

Asking **process questions** as opposed to content questions is an important systems theory technique. It assists the therapist in refraining from expressing their opinion about the content of client's disagreements. The therapist asks how each person expresses their view point as opposed to asking about their viewpoint. "When, who and what next" questions draw out each person's role in the relationship patterns. This is designed to reveal to both therapist and client what each person is inadvertently doing to maintain the problem. For example a father may say that his wife is too lenient with their child. The therapist does not ask him to outline his opinion about parenting style (which invites the therapist to agree or disagree with him) but asks whether he expresses this view? When does he express it and how? What is his wife's response? What goes on for him when his wife responds that way? How does the child respond to any conflict about parenting style? If other family members

are present they are each encouraged to describe what they see of family member's emotional reactions and behaviours.

If family members start to directly express their disagreements to each other the therapist brings back the responses to her/himself. This is done by either directly asking the clients to return to addressing the therapist so that they can have a different experience of hearing each other, or more subtly by asking each questions such as: "What was it that got you so hot under the collar with your spouse? Is that what usually happens when your differences emerge?" Bowen called this **externalizing the thinking of each in the presence of the other**. The goal is to describe family members' behavioural and emotional chain reactions as opposed to them expressing these reactions. Talking about each person's reactions rather than venting anxious responses is designed to reduce the degree of tension in the therapy room. With a calmer research type of conversation, family members are better able to differentiate their feelings and thinking.

Another technique designed to increase client's ability to gain objectivity about relationship patterns is the use of **displacement stories**. The therapist tells stories or parables about families with similar problems as a way to both normalize the family's struggle and to draw out some clues that may help family members to think about what they might do differently the next time tension mounts.

As the client talks about how they react to the person they have been trying to change, blame or avoid, the therapist encourages them to speak for themselves as opposed to anxiously responding to the trigger from the other. This is called drawing out **the "I" position** where the client begins to say what they think and believe and what they will do and will not do.

As each session proceeds the therapist seeks to create collaboration with the client by exploring together the patterns that occur around the problem and by thinking through what clues this gives to what each person might do differently. The focus is on what has happened in between therapy sessions rather than what goes on in the therapeutic relationship. Sessions are spaced to enable sufficient relational experience to take place that can be jointly researched in the therapy hour. (Papero, 1990, 2000)

These examples of the techniques of Bowen therapy are helpful in shedding light on what it means to think systems. It should be noted however that techniques that are used without the therapist living out the principles behind them are unlikely to make much sense for the client. In this model the self of the therapist, who takes on the challenge of differentiating in their relationship systems, is far more important to the process of therapy than specific interventions. The therapist's efforts to define themselves in connection with significant people in their life is expressed in the therapy room by being able to be engaged with the conversation about a difficult, emotionally charged problem and not feel compelled to rush in and fix things. Family Systems techniques are all geared to lifting the client's assumptions about the problem into the open so that they can be thoughtfully examined. Techniques geared to fixing the problem can lead to the therapist falling into the trap of being viewed as the expert who is "forever prescribing techniques for change." (Kerr & Bowen, 1988: p291)

Doesn't Bowen theory, with its goal of differentiating the self, favour thinking over feeling?

Bowen's concept of Differentiation of Self is often charged with honouring the intellect over the emotions. "Differentiation' is described as the capacity of the individual to function autonomously by making self directed choices, while remaining emotionally connected to the intensity of a significant relationship system." (Brown, 1999: p95)

While the path to increasing differentiation requires a person to draw on their intellectual system in order to hold awareness of their guiding principles, this is done in integration with all the feelings attached to staying connected to important others. Bowen's concept of fusion occurs when the emotions generated in relationships overwhelm an individual's ability to think for themselves. On the other hand, Bowen's concept of cut-off is at the other end of the spectrum whereby the emotional arousal is dealt with by distancing from authentic contact with others. The concept of differentiation is often critiqued as being biased to Patriarchal assumptions about male / female roles leaving women vulnerable to having their socially prescribed relational roles pathologised as 'over concerned', 'fused' and 'undifferentiated'. However, in this model the male, who may isolate, is viewed as equally "feeling driven" as his partner who may emotionally pursue for closeness. Bowen's view is that "the person who runs

away from his/her family of origin is as emotionally dependent as the one who never leaves home. They both need emotional closeness, but they are allergic to it." (Bowen, 1978: p383)

It can be useful to think of the distinction between low levels of differentiation of self wherein people become "prisoners of their feelings" compared to higher levels of differentiation wherein people have the "freedom to feel". The goal for each person in this framework (therapist and client alike) is to achieve a connection between thinking and feeling and to achieve the balance between having meaningful connection to the broader family system whilst simultaneously maintaining the uniqueness of self.

Those who work in Bowen's model would hold the view that there is no emancipation through unrestrained expression of emotion. Rather it is feelings expressed under the restraint of thoughtful goals and principles that give any member of a family an increased sense of being solid in their relationships. (McGoldrick & Carter, 2001)

In the therapy room the awareness of emotions is given prominence over direct expression of feelings. This is based on Bowen's assertion that when people are encouraged to vent their emotions, their anxious or angry focus on others is likely to intensify. In this scenario the therapist easily gets drawn into reliving client distress through validating their pain. The client then believes that their therapist sees the problem as they do and is on their side against the people with whom they are having difficulty relating. This triangling of the supportive therapist against the difficult members of the client's natural system can result in the kinds of dependencies in therapy that lead to burnout for the worker and stalemates in resolving problems for the client.

Family Systems therapy seeks to go in the opposite direction of emotional venting and seeking therapist validation. It aims to assist clients to consider how they are unintentional participants in the patterns in which the problem is stuck. The therapist's stance helps to lessen the clients focus from blaming or changing others and increase their focus on self in relation to others. The client is asked to talk about their feelings rather than express them. Feelings are used as clues to understanding their relationships. For example, the therapist asks the clients what they *think* their tears tell them about the important issues to be addressed in the relationship as opposed to focusing on the pain they *feel* about the relationship. My own experience of this model, with its invitation to explore the 'tapestry' of one's family across the generations, is that the emotions need little encouragement to come to the fore. Clients are often caught off guard by the charge of feeling that surfaces when talking about what they know of their families of origin.

Isn't such a complex model that requires clients to develop systems awareness only useful for motivated and well educated families and individuals?

Bowen's model engages a client at whatever capacity they have to think for themselves in the flood of feelings generated by important relationships. While the goal of all Bowen therapy is to increase differentiation of self and reduce over sensitivity to threats in relationships (**chronic anxiety**), it recognizes that such goals will be worked at the varying level of emotional maturity which each person brings from the generational transmission in their family. The practice of therapy is to invite each family member to describe their problem and how they see their concerns. The therapist does not instruct the client with an alternate interpretation of the problem but rather asks questions to allow the client to reflect on the way they feel and behave in their relationships with a bit more awareness than they have previously been able to achieve. Clients are asked questions that are jargon free and simply invite the client to describe what they see happen at home in their relationships. Bowen left "the impression that if these questions are to be answered someone in the family will have to become a better observer." (Bowen, 1979: p225) The complexity of the interlocking theoretical concepts is for the therapist awareness so that he/she is able stay objective in seeing the predictable patterns of fusion, distancing and triangling that happens at times of relationship stress. This awareness guides the therapist's questions and keeps her from taking sides with anyone in the system or taking on a role within the family which may prevent the family finding their own coping resources. Clients are encouraged to do their own problem solving and this ensures that they progress at their own pace. The therapist works hard at formulating systems oriented questions but does not tell the client what they should do. This is to avoid the common problem in therapy when the therapist allows him/herself to become a "healer or repairman" and the family sits back to wait for the therapist to fix things. (Bowen, 1978: p157)

Recently I was working with a client who had been in and out of psychiatric hospitals from her teenage years. She said in session: "I am learning to use my head. I don't need anyone else's lines to repeat to myself when I

am struggling." There is no intellectualizing in this statement just an expression of someone working on being more of a self rather than borrowing self from anyone who is too quick to want to rescue them.

From a post modern perspective of constructed realities, can any model that seeks to describe "facts" of relationships be applicable?

Murray Bowen did assert that his concepts could be verified by any observer of relationships. This flies in the face of the post modern view that each of us constructs our own realities with no objective truths.

Murray Bowen was first and foremost a researcher. His passion was to turn Psychiatry into an acceptable science in which the understanding of human behaviour was informed by observable facts rather than subjective conjecture. His research of patterns within families began in the late 1950s with inpatient families with a schizophrenic member. This progressed to him researching patterns in his own family of origin for a period of 12 years before he felt ready to present his theoretical framework. From research came a view that all of us have the same patterned responses when dealing with perceived threats in relationships (**Chronic Anxiety**), the variations being in the degree of reactive response rather than the nature of the response. Bowen proposed that instinctive knee jerk type responses to either the anxiety of being rejected (**separation anxiety**) or smothered (**incorporation anxiety**), are seen in either a detour to a third party focus (**triangles**), merging with the others way of thinking (**fusion**) or distancing from the intensity of the relationship (**emotional cut-off**). Within each of these patterns are many variations of circular process such as pursuing and distancing patterns and over and under-functioning positions. (Bowen 1978, Kerr & Bowen 1988, Papero 1990, Titleman 1998)

While Bowen sought to describe in modernist terms objective truths about human behaviour, in many other ways his theory complies with many of the premises of post modernism. Bowen was not proposing a normative model of family and he discarded the language of diagnosis and pathology. This model fits post modern psychotherapies that have critiqued the medical model's descriptors of what is functional and dysfunctional, normal and abnormal. With post modern alternatives have come an emphasis on collaborative therapy language that seeks to elevate or clients' own stories above dominant treatment and societal discourses. (White & Epston, 1990) Many fail to recognize that Bowen was already challenging diagnostic frameworks in the 1960s through his belief that "there is a little bit of schizophrenia in all of us" and that every therapist has the very same challenges in their own families as those of their clients. This view challenged the paradigm of the healthy expert who treats and instructs the damaged client. Bowen saw that the goal of all therapy was to invite each person to be clearer about themselves in the turmoil of their relationships (**differentiation of self**). In doing this he developed therapy processes such as curiosity, circularity and client reflexivity, which have since been reinvented by other models. Using multi family group theory in the 1970s Bowen invited his clients to reflect on tapes of their session well before the idea of reflecting teams was introduced by Andersen and Goolishian. (1992).

Hence, Bowen theory can be said to occupy unique territory combining modernism and post modernism. His model describes "facts" of human behaviour but does so in a way that does not divide people into categories of sick and well. While he believed his systems ideas could lend a hand to people struggling with life challenges, he also believed that all humans had the capacity to find the answers to their own problems.

Aren't Bowen, Freud and Bowlby talking about the same things but using different jargon?

While Bowen first trained in psychoanalysis and was in analysis for many years, he (and Bowlby) became disillusioned with what they saw as too much subjective interpretation in this approach. His vision was for the study and treatment processes in mental health to become more objective and scientific. Some insight into Bowen's shift away from Freud's approach can be gained from his statement that "During my psychoanalysis there was enough emotional pressure to engage my parents in an angry confrontation about childhood grievances that had come to light in the snug harbour of transference. At the time I considered these confrontations to be emotional emancipation.....The net result was my conviction that my parents had their problems and I had mine, that they would never change, and nothing more could be done." (Bowen, 1978, p484) Bowen was not satisfied with this outcome as he began to see from his research that each family member participated in a reciprocal (circular) process of making compensations for others. This meant that with careful research of family patterns it was possible for an individual to begin to relate more from self and less in reaction to others. Hence, over time the efforts of one person may shift the functioning of the whole system.

While Freud, Bowlby and Bowen (Freud, 1940; Bowlby, 1988; Bowen, 1978, Kerr & Bowne, 1988) were all interested in changing the individual's quality of life and each saw relationships with others as significant, Bowen had a different and broader perspective on relationship influences. In psychoanalysis and attachment theory the primary focus of change is the inner world of the individual as it evolves in the transference relationship or transitional restorative attachment with the therapist. The individual experience is addressed in order to impact the client's relationships. Attachment theory may start from the relationship context of the caregiver and child but its focus for change is on the internal working models that an individual carries into adulthood. Bowen theory comes at this from the opposite direction where the system comes first. The individual's psychological structures are not seen as residing in the individual but reflect the positions one occupies in the interlocking relationship triangles of the broader family. In brief, Freud's focus was on drive reduction through relationships, Bowlby's was on security seeking in relationships and Bowen focused on relationship behaviour that fills system gaps.

While on the surface there appear to be many similarities in Bowen's and Bowlby's approaches there are certainly important distinctions. Both speak of symptoms as functional or adaptive, with Bowen theory speaking about adaptations for managing perceived threats in the entire family system, and Bowlby concerned with adaptations, made in response to attachment threat, within the individual. Attachment theory's emphasis is on developing and expanding the *typologies* of these internalized adjustments; while Bowen theory speaks of a *continuum*, in which every human being responds to varying degrees to intergenerational relationship sensitivities. In Attachment theory, there are *some* who have secure or balanced attachment representations, and *some* who have internalized relationship distortions that lead to pathology. In Bowen Theory every person sits somewhere on the continuum of differentiation of self, with no one having fully integrated their feelings and intellect while in the thicket of family relationship pressures. This means that the therapist, as well as the client, is seen to have ongoing work to do in their relationships.

Each of us will decide which model fits the evidence that is presented by our clients and in our own lives. I think it is wise not to blur distinctions between models which can result in a mish mash of divergent understandings about the process of change which may be confusing for clients.

(* The author notes that all three models have had significant developments, and research input, since their beginnings. However, the foundational premises are still the primary influences)

In the current climate of positive psychology and short term approaches, is Bowen's belief about the slow pace of progress in differentiating a self too pessimistic?

Perhaps the greatest hurdle to Murray Bowen's theory securing a place in the psychotherapy mainstream is the appeal of quick fix approaches and a return to medicalized individual treatment modes.

Bowen believed that progress in lifting one's differentiation of self beyond the level of the previous generation of parents is both slow and unsubstantial. At the same time he believed that small shifts in a person's ability to manage themselves in their relationships without giving in to relationship pressure or running away from it would bring much greater adaptive resources to an entire family system.

The paradox of Bowen Family Systems Theory is that at one level it is humbling and possibly discouraging to be confronted with our deficits in relationship maturity, while at the same time it instills much hope with the notion that it only requires one motivated member of a family to change how they have been relating and the triangles and functioning in the entire family will predictably change over time. It is the ongoing experience of seeing this in my own system of relationships that leaves me with the conviction that Bowen's Family Systems model continues to be relevant and has yet to tap the full extent of its potential to assist humans in managing all levels of relationships.

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Bowen Family Systems

Bowen started his research by looking at natural systems seeing that everything is related and interconnected. Bowen's research later evolved into seeing families as a natural system and as such Bowen Theory has been called family systems. Bowen family systems theory is a theory of human behavior that views the family as an emotional unit and uses systems thinking to describe the complex interactions in the unit. It is the nature of a family that its members are intensely connected emotionally. Often people feel distant or disconnected from their families, but this is more feeling than fact. Family members so profoundly affect each other's thoughts, feelings, and actions that it often seems as if people are living under the same "emotional skin." People solicit each other's attention, approval, and support and react to each other's needs, expectations, and distress. The connectedness and reactivity-separate and togetherness pull--make the functioning of family members interdependent. A change in one person's functioning is predictably followed by reciprocal changes in the functioning of others. Families differ somewhat in the degree of interdependence, but it is always present to some degree.

The emotional interdependence presumably evolved to promote the cohesiveness and cooperation families require to protect, shelter, and feed their members. Heightened tension, however, can intensify these processes that promote unity and teamwork, and this can lead to problems. When family members get anxious, the anxiety can escalate by spreading infectiously among them. As anxiety goes up, the emotional connectedness of family members becomes more stressful than comforting. Eventually, one or more members feel overwhelmed, isolated, or out of control.

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These are the people who accommodate the most to reduce tension in others. It is a reciprocal interaction. For example, a person takes too much responsibility for the distress of others in relationship to their unrealistic expectations of him. The one accommodating the most literally "absorbs" anxiety and thus is the family member most vulnerable to problems such as depression, alcoholism, affairs, or physical illness.

So, we look at natural systems in families, congregations, the people in this room. As when two or three are gathered together, systems are in the midst of them—they become a system with its own emotional field. Gatherings such as this one are much more complicated than a family unit, but the same natural systems apply. Systems is not about fixing or looking for pathology—even though uncovering the shadow side; secrets; etc. is important—looking for strengths in system

It is about opening up the system to a place where creativity and play and functioning relationships can occur—it is about relationships. Self is important—self in community.

A quick overview of the eight concepts of Bowen theory might be helpful

Nuclear Family Emotional System

The concept of the nuclear family emotional system describes four basic relationship patterns that govern where problems develop in a family. People's attitudes and beliefs about relationships play a role in the patterns, but the forces primarily driving them are part of the emotional system. The patterns operate in intact, single parent, stepparent, and other nuclear family configurations.

Clinical problems or symptoms usually develop during periods of heightened and prolonged family tension. The level of tension depends on the stress a family encounters, how a family

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adapts to the stress, and on a family's connection with extended family and social networks.

Acute and Chronic Anxiety

Tension increases the activity of one or more of the four relationship patterns. Where symptoms develop depends on which patterns are most active. The higher the tension, the more chance that symptoms will be severe and that several people will be symptomatic.

The four basic relationship patterns are:

Conflict- As family tension increases and the spouses get more anxious; each spouse externalizes his or her anxiety into the marital relationship. Each focuses on what is wrong with the other, each tries to control the other, and each resists the other's efforts at control.

Dysfunction in one spouse- One spouse pressures the other to think and act in certain ways and the other yields to the pressure. Both spouses accommodate to preserve harmony, but one does more of it. The interaction is comfortable for both people up to a point, but if family tension rises further, the subordinate spouse may yield so much self-control that his or her anxiety increases significantly. The anxiety fuels, if other necessary factors are present, the development of a psychiatric, medical, or social dysfunction.

Triangling or Impairment of one or more children- The spouses focus their anxieties on one or more of their children. They worry excessively and usually have an idealized or negative view of the child. The more the parents focus on the child the more the child focuses on them. He is more reactive than his siblings to the attitudes, needs, and expectations of the parents. The process undercuts the child's differentiation from the family and makes him vulnerable to act out or internalize family tensions. The child's anxiety can impair his school performance, social relationships, and even his health.

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Emotional distance- This pattern is consistently associated with the others. People distance from each other to reduce the intensity of the relationship, but risk becoming too isolated.

The basic relationship patterns result in family tensions coming to rest in certain parts of the family. The more anxiety one person or one relationship absorbs, the less other people must absorb. This means that some family members maintain their functioning at the expense of others. People do not want to hurt each other, but when anxiety chronically dictates behavior, someone usually suffers for it.

Differentiation of Self

Families and other social groups tremendously affect how people think, feel, and act, but individuals vary in their susceptibility to a "group think" and groups vary in the amount of pressure they exert for conformity. These differences between individuals and between groups reflect differences in people's levels of differentiation of self. The less developed a person's "self," the more impact others have on his functioning and the more he tries to control, actively or passively, the functioning of others. The basic building blocks of a "self" are inborn, but an individual's family relationships during childhood and adolescence primarily determine how much "self" he develops. Once established, the level of "self" rarely changes unless a person makes a structured and long-term effort to change it.

People with a poorly differentiated "self" depend so heavily on the acceptance and approval of others that either they quickly adjust what they think, say, and do to please others or they dogmatically proclaim what others should be like and pressure them to conform. Bullies depend on approval and acceptance as much as chameleons, but bullies push others to agree with them rather than their agreeing with others. Disagreement threatens a bully as much as it threatens a chameleon. An extreme rebel is a poorly differentiated person too, but he pretends to be a "self" by routinely opposing the positions of others.

A person with a well-differentiated "self" recognizes his realistic dependence on others, but he can stay calm and clear headed enough in the face of conflict, criticism, and rejection to distinguish thinking rooted in a careful assessment of the facts from thinking clouded by emotionality. Thoughtfully acquired principles help guide decision-making about important

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family and social issues, making him less at the mercy of the feelings of the moment. What he decides and what he says matches what he does. He can act selflessly, but his acting in the best interests of the group is a thoughtful choice, not a response to relationship pressures.

Confident in his thinking, he can either support another's view without being a disciple or reject another view without polarizing the differences. He defines himself without being pushy and deals with pressure to yield without being wishy-washy.

Every human society has its well-differentiated people, poorly differentiated people, and people at many gradations between these extremes. Consequently, the families and other groups that make up a society differ in the intensity of their emotional interdependence depending on the differentiation levels of their members. The more intense the interdependence, the less the group's capacity to adapt to potentially stressful events without a marked escalation of chronic anxiety. Everyone is subject to problems in his work and personal life, but less differentiated people and families are vulnerable to periods of heightened chronic anxiety which contributes to their having a disproportionate share of society's most serious problems.

Bowen Family Systems

Triangles

A triangle is a three-person relationship system. It is considered the building block or "molecule" of larger emotional systems because a triangle is the smallest stable relationship system. A two-person system is unstable because it tolerates little tension before involving a third person. A triangle can contain much more tension without involving another person because the tension can shift around three relationships. If the tension is too high for one triangle to contain, it spreads to a series of "interlocking" triangles.

Spreading the tension can stabilize a system, but nothing gets resolved. People's actions in a triangle reflect their efforts to ensure their emotional attachments to important others, their reactions to too much intensity in the attachments, and their taking sides in the conflicts of others.

Paradoxically, a triangle is more stable than a dyad, but a triangle creates an "odd man out," which is a very difficult position for individuals to tolerate. Anxiety generated by anticipating or being the odd one out is a potent force in triangles. The patterns in a triangle change with increasing tension. In calm periods, two people are comfortably close "insiders" and the third person is an uncomfortable "outsider." The insiders actively exclude the outsider and the outsider works to get closer to one of them.

Someone is always uncomfortable in a triangle and pushing for change. The insiders solidify their bond by choosing each other in preference to the less desirable outsider. Someone choosing another person over oneself arouses particularly intense feelings of rejection. If mild to moderate tension develops between the insiders, the most uncomfortable one will move closer to the outsider. One of the original insiders now becomes the new outsider and the

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original outsider is now an insider. The new outsider will make predictable moves to restore closeness with one of the insiders.

At moderate levels of tension, triangles usually have one side in conflict and two sides in harmony. The conflict is not inherent in the relationship in which it exists but reflects the overall functioning of the triangle. At a high level of tension, the outside position becomes the most desirable. If severe conflict erupts between the insiders, one insider opts for the outside position by getting the current outsider fighting with the other insider. If the maneuvering insider is successful, he gains the more comfortable position of watching the other two people fight. When the tension and conflict subside, the outsider will try to regain an inside position.

Triangles contribute significantly to the development of clinical problems. Getting pushed from an inside to an outside position can trigger a depression or perhaps even a physical illness. Two parents intensely focusing on what is wrong with a child can trigger serious rebellion in the child.

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Emotional Cutoff

The concept of emotional cutoff describes people managing their unresolved emotional issues with parents, siblings, and other family members by reducing or totally cutting off emotional contact with them. Emotional contact can be reduced by people moving away from their families and rarely going home, or it can be reduced by people staying in physical contact with their families but avoiding sensitive issues. Relationships may look "better" if people cutoff to manage them, but the problems are dormant and not resolved.

People reduce the tensions of family interactions by cutting off, but risk making their new relationships too important. For example, the more a man cuts off from his family of origin, the more he looks to his spouse, children, and friends to meet his needs. This makes him vulnerable to pressuring them to be certain ways for him or accommodating too much to their expectations of him out of fear of jeopardizing the relationship. New relationships are typically smooth in the beginning, but the patterns people are trying to escape eventually emerge and generate tensions. People who are cut off may try to stabilize their intimate relationships by creating substitute "families" with social and work relationships.

Everyone has some degree of unresolved attachment to his or her original family, but well-differentiated people have much more resolution than less differentiated people. An unresolved attachment can take many forms. For example, (1) a person feels more like a child when he is home and looks to his parents to make decisions for him that he can make for himself, or (2) a person feels guilty when he is in more contact with his parents and that he must solve their conflicts or distresses, or (3) a person feels enraged that his parents do not seem to understand or approve of him. An unresolved attachment relates to the immaturity of

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both the parents and the adult child, but people typically blame themselves or others for the problems.

People often look forward to going home, hoping things will be different this time, but the old interactions usually surface within hours. It may take the form of surface harmony with powerful emotional undercurrents or it may deteriorate into shouting matches and hysterics.

Both the person and his family may feel exhausted even after a brief visit. It may be easier for the parents if an adult child keeps his distance. The family gets so anxious and reactive when he is home that they are relieved when he leaves. The siblings of a highly cutoff member often get furious at him when he is home and blame him for upsetting the parents. People do not want it to be this way, but the sensitivities of all parties preclude comfortable contact.

Family Projection Process

The family projection process describes the primary way parents transmit their emotional problems to a child. The projection process can impair the functioning of one or more children and increase their vulnerability to clinical symptoms. Children inherit many types of problems (as well as strengths) through the relationships with their parents, but the problems they inherit that most affect their lives are relationship sensitivities such as heightened needs for attention and approval, difficulty dealing with expectations, the tendency to blame oneself or others, feeling responsible for the happiness of others or that others are responsible for one's own happiness, and acting impulsively to relieve the anxiety of the moment rather than tolerating anxiety and acting thoughtfully. If the projection process is fairly intense, the child develops stronger relationship sensitivities than his parents. The sensitivities increase a person's vulnerability to symptoms by fostering behaviors that escalate chronic anxiety in a relationship system.

The projection process follows three steps:

- (1) the parent focuses on a child out of fear that something is wrong with the child;
- (2) the parent interprets the child's behavior as confirming the fear; and
- (3) the parent treats the child as if something is really wrong with the child.

These steps of scanning, diagnosing, and treating begin early in the child's life and continue.

The parents' fears and perceptions so shape the child's development and behavior that he grows to embody their fears and perceptions. One reason the projection process is a self-fulfilling prophecy is that parents try to "fix" the problem they have diagnosed in the child; for

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example, parents perceive their child to have low self-esteem, they repeatedly try to affirm the child, and the child's self-esteem grows dependent on their affirmation.

Parents often feel they have not given enough love, attention, or support to a child manifesting problems, but they have invested more time, energy, and worry in this child than in his siblings.

The siblings less involved in the family projection process have a more mature and reality-based relationship with their parents that fosters the siblings developing into less needy, less reactive, and more goal-directed people. Both parents participate equally in the family projection process, but in different ways. The mother is usually the primary caretaker and more prone than the father to excessive emotional involvement with one or more of the children. The father typically occupies the outside position in the parental triangle, except during periods of heightened tension in the mother-child relationship. Both parents are unsure of themselves in relationship to the child, but commonly one parent acts sure of himself or herself and the other parent goes along. The intensity of the projection process is unrelated to the amount of time parents spend with a child.

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Sibling Position

Bowen theory incorporates the research of psychologist Walter Toman as a foundation for its concept of sibling position. Bowen observed the impact of sibling position on development and behavior in his family research. However, he found Toman's work so thorough and consistent with his ideas that he incorporated it into his theory. The basic idea is that people who grow up in the same sibling position predictably have important common characteristics. For example, oldest children tend to gravitate to leadership positions and youngest children often prefer to be followers. The characteristics of one position are not "better" than those of another position, but are complementary. For example, a boss who is an oldest child may work unusually well with a first assistant who is a youngest child. Youngest children may like to be in charge, but their leadership style typically differs from an oldest's style.

Toman's research showed that spouses' sibling positions affect the chance of their divorcing. For example, if an older brother of a younger sister marries a younger sister of an older brother, less chance of a divorce exists than if an older brother of a brother marries an older sister of a sister. The sibling or rank positions are complementary in the first case and each spouse is familiar with living with someone of the opposite sex. In the second case, however, the rank positions are not complementary and neither spouse grew up with a member of the opposite sex. An older brother of a brother and an older sister of a sister are prone to battle over who is in charge; two youngest children are prone to struggle over who gets to lean on whom.

People in the same sibling position, of course, exhibit marked differences in functioning. The concept of differentiation can explain some of the differences. For example, rather than being comfortable with responsibility and leadership, an oldest child who is anxiously focused on may

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grow up to be markedly indecisive and highly reactive to expectations. Consequently, his younger brother may become a "functional oldest," filling a void in the family system. He is the chronologically younger child, but develops more characteristics of an oldest child than his older brother. A youngest child who is anxiously focused on may become an unusually helpless and demanding person. In contrast, two mature youngest children may cooperate extremely effectively in a marriage and be at very low risk for a divorce.

Middle children exhibit the functional characteristics of two sibling positions. For example, if a girl has an older brother and a younger sister, she usually has some of the characteristics of both a younger sister of a brother and an older sister of a sister. The sibling positions of a person's parents are also important to consider. An oldest child whose parents are both youngests encounters a different set of parental expectations than an oldest child whose parents are both oldests.

Multigenerational Transmission Process

The concept of the multigenerational transmission process describes how small differences in the levels of differentiation between parents and their offspring lead over many generations to marked differences in differentiation among the members of a multigenerational family. The information creating these differences is transmitted across generations through relationships. The transmission occurs on several interconnected levels ranging from the conscious teaching and learning of information to the automatic and unconscious programming of emotional reactions and behaviors. Relationally and genetically transmitted information interact to shape an individual's "self."

The combination of parents actively shaping the development of their offspring, offspring innately responding to their parents' moods, attitudes, and actions, and the long dependency period of human offspring results in people developing levels of differentiation of self similar to their parents' levels. However, the relationship patterns of nuclear family emotional systems often result in at least one member of a sibling group developing a little more "self" and another member developing a little less "self" than the parents.

The next step in the multigenerational transmission process is people predictably selecting mates with levels of differentiation of self that match their own. Therefore, if one sibling's level of "self" is higher and another sibling's level of "self" is lower than the parents, one sibling's marriage is more differentiated and the other sibling's marriage is less differentiated than the parents' marriage. If each sibling then has a child who is more differentiated and a child who is less differentiated than himself, one three generational line becomes progressively more differentiated (the most differentiated child of the most differentiated sibling) and one line

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becomes progressively less differentiated (the least differentiated child of the least differentiated sibling). As these processes repeat over multiple generations, the differences between family lines grow increasingly marked.

Level of differentiation of self can affect longevity, marital stability, reproduction, health, educational accomplishments, and occupational success. This impact of differentiation on overall life functioning explains the marked variation that typically exists in the lives of the members of a multigenerational family. The highly differentiated people have unusually stable nuclear families and contribute much to society; the poorly differentiated people have chaotic personal lives and depend heavily on others to sustain them. A key implication of the multigenerational concept is that the roots of the most severe human problems as well as of the highest levels of human adaptation are generations deep. The multigenerational transmission process not only programs the levels of "self" people develop, but it also programs how people interact with others. Both types of programming affect the selection of a spouse. For example, if a family programs someone to attach intensely to others and to function in a helpless and indecisive way, he will likely select a mate who not only attaches to him with equal intensity, but one who directs others and make decisions for them.

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Societal Emotional Process

Each concept in Bowen theory applies to nonfamily groups, such as work and social organizations. The concept of societal emotional process describes how the emotional system governs behavior on a societal level, promoting both progressive and regressive periods in a society. Cultural forces are important in how a society functions but are insufficient for explaining the ebb and flow in how well societies adapt to the challenges that face them.

Bowen's first clue about parallels between familial and societal emotional functioning came from treating families with juvenile delinquents. The parents in such families give the message, "We love you no matter what you do." Despite impassioned lectures about responsibility and sometimes harsh punishments, the parents give in to the child more than they hold the line.

The child rebels against the parents and is adept at sensing the uncertainty of their positions. The child feels controlled and lies to get around the parents. He is indifferent to their punishments. The parents try to control the child but are largely ineffectual.

Bowen discovered that during the 1960s the courts became more like the parents of delinquents. Many in the juvenile court system considered the delinquent as a victim of bad parents. They tried to understand him and often reduced the consequences of his actions in the hope of effecting a change in his behavior. If the delinquent became a frequent offender, the legal system, much like the parents, expressed its disappointment and imposed harsh penalties.

This recognition of a change in one societal institution led Bowen to notice that similar changes were occurring in other institutions, such as in schools and governments. The downward spiral in families dealing with delinquency is an anxiety-driven regression in functioning. In a regression, people act to relieve the anxiety of the moment rather than act on principle and a

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long-term view. A regressive pattern began unfolding in society after World War II. It worsened some during the 1950s and rapidly intensified during the 1960s. The "symptoms" of societal regression include a growth of crime and violence, an increasing divorce rate, a more litigious attitude, a greater polarization between racial groups, less principled decision-making by leaders, the drug abuse epidemic, an increase in bankruptcy, and a focus on rights over responsibilities.

Human societies undergo periods of regression and progression in their history. The current regression seems related to factors such as the population explosion, a sense of diminishing frontiers, and the depletion of natural resources. Bowen predicted that the current regression would, like a family in a regression, continue until the repercussions stemming from taking the easy way out on tough issues exceeded the pain associated with acting on a long-term view. He predicted that will occur before the middle of the twenty-first century and should result in human beings living in more harmony with nature.



Alastair's Adversaria

flotsam, jetsam, messages in bottles

Summary of Edwin Friedman's 'A Failure of Nerve': Part 2

Posted on [January 10, 2012](#)

Other Posts in Series: [Part 1](#), [Part 3](#), [Part 4](#), [Part 5](#), [Part 6](#)

Friedman advances the thesis that contemporary America has a climate of chronic anxiety, leading to 'an emotional regression that is toxic to well-defined leadership' (53). He points out that 'one does not need dictators in order to create a totalitarian (that is, totalistic) society.'

An emotionally regressed society or institution will put its technology at the service of its regression. It can become obsessed with data and technique in a manner that leaves its leaders incapable of recognizing the priority of the leader's own self and the emotional processes of the group. While we tend to focus on the symptoms of regression (abuse, conflict, etc.), Friedman seeks to draw attention to the emotional processes that underlie them.

Chronic Anxiety

To understand these emotional processes, Friedman employs the family therapy theories of Dr Murray Bowen. Rather than trying to understand families in terms of their cultural, ethnic, or socio-economic distinctions, Bowen focused instead on the underlying processes that families share in common with all other groups or societies. From this perspective the most critical thing for any society or family is how well they are able 'to handle the natural tension between individuality and togetherness, their ability to maintain their identity during crisis, and their capacity to produce well-differentiated leadership' (56).

In larger societies, as in families, the ability to cope can be lost as 'anxiety escalates as society is overwhelmed by the quantity and speed of change' and as 'the institutions or individuals (whether scapegoat or symptomatic) traditionally used to absorb or bind off society's anxiety are no longer available to absorb it' (57). In a family, physical and mental symptoms can begin to surface a few months after a destabilizing event. In a nation, the loss of a scapegoat community can lead to a crisis of anxiety, as the society loses its means of dealing with it. In such an anxiety-driven context, family life shrivels into an emotional regression. Society becomes increasingly undifferentiated, unimaginative, unwilling to undertake risk and hyper-reactive.

This chronic anxiety is to be distinguished from communal nervousness, existential angst, or the 'anxiety' occasioned by the economy or the threat of war. 'Chronic anxiety might be compared to the volatile atmosphere of a room filled with gas fumes, where any sparking incident could set off a conflagration, and where people would then blame the person who struck the match rather than trying to disperse the fumes' (58). The focus of chronic anxiety thus should not be confused with its cause.

This is one reason why those offering technical solutions to problems that families come to them with often fail to make lasting difference: address the manifestation of anxiety surrounding money, for instance, and it will merely relocate around sex, or children. The failure of quick-fix attitudes is that of neglecting to modify the emotional processes that underlie everything else. If technique is all that is required, the being of the consultant and their

principles apply in business and society more generally: mere technical responses to a business' problems will generally fail to address any deeper malaise in its corporate culture.

This chronic anxiety is self-reinforcing: the greater the chronic anxiety in any community, the more oriented it will become to its symptoms, and the more likely it is to export its troubles into the wider society through violence, litigiousness, or other means. The only way out of this chronic anxiety is through a stage of acutely painful withdrawal, which is why many perpetuate the withering symptoms, rather than addressing them directly.

The Five Characteristics of Chronically Anxious Societies

Chronically anxious families and societies have five key characteristics, which lead to a 'regression' that runs counter to the evolutionary principles that should guide society.

Reactivity

Instead of self-regulation, the regressed society is characterized by *reactivity*, caught in a 'vicious cycle of intense reactions of each member to events and to one another' (53). Such societies are bound together in a sort of 'feeling plasma', and each person finds their nervous system 'constantly bombarded by the emissions of everyone else's' (62). In a reactive family, communication is more characterized 'you' statements ('you are so pig-headed!', 'you are just like her!' etc., etc. – just think of the last time you caught a family argument on a tabloid talk show while flipping channels), than by self-defining 'I' statements ('this is what I believe', 'this is what I will do', etc.). In the reactive family, 'the more aggressive members are in a perpetually argumentative stance, and the more passive are in a constant state of flinch' (63). Anxiety and emotional processes spread between parties like wildfire, as there is no differentiation: 'highly reactive families are a panic in search of a trigger' (the trigger frequently being provided by the children that they become fixated upon – chronically anxious families are often child-focused families).

Such a family is almost invariably characterized by the family's inability to produce or support a leader, and by a complete loss of playfulness, as all becomes deadly earnest. Friedman sees this same reactivity within American society, where people constantly interfere with others' self-expression, react to them on a hair-trigger, take disagreement far too seriously, and 'brand the opposition with *ad hominem* personal epithets (chauvinist, ethnocentric, homophobic, and so on)' (64). Their members lack the ability to create the distance and objectivity necessary in order to be proactive.

Herding

Closely related to the reactive tendency, the regressive society exhibits a *herding* tendency. It will tend to 'reverse the direction of adaption toward strength, and it winds up organizing its existence around the least mature, the most dependent, or the most dysfunctional members of the "colony"' (67). In such a society people are emotionally fused in an 'undifferentiated togetherness'. In such a society, there will be a constant pressure, through threats or inducements, upon people to adapt. The alternative to this approach is *not* compromise and consensus, but the sort of healthy self-differentiation that will promote a greater degree of toleration for the differentiation of other persons. In the 'homogenized togetherness' of the regressive society, one must surrender one's self to the family's self to survive. The goal of much family counselling should be 'to help people separate so that they do not have to "separate"' (68).

be 'inclusive', while sabotaging those who would stand up to them. It will bend over backwards to accommodate people who are focused on their rights, rather than responsibilities, and attack the person who seeks to take an unaccommodating and self-defined position, presenting them as cruel, selfish, or insensitive. This is so predictable that being called such names is usually a sign that you are moving in the right direction.

This herding tendency cripples the leader who seeks to be decisive, which involves being willing to give things up. The rightness or wrongness of our decisions largely depends on what we do after them. However, in the emotionally regressive society the potential leader is unlikely to be able stand firm when they make a decision, so they don't tend to make them.

The adaptation of groups to their most demanding and dysfunctional members is visible in numerous areas of American society, and the preparedness to engage in appeasement and compromise with those to whom no ground should be given. This can particularly be seen in the activities of those who 'tyrannize others, especially leaders, with their "sensitivity"' (71), acting as if they were 'helplessly violated by another person's opinion'. Friedman remarks:

It has been my impression that at any gathering, whether it be public or private, those who are quickest to inject words like *sensitivity*, *empathy*, *consensus*, *trust*, *confidentiality*, and *togetherness* into their arguments have perverted these humanitarian words into power tools to get others to adapt to them.

Friedman draws attention to the manner in which this allows the chronically offended reactive members of a population to hijack the agenda of the whole society, as people rally to soothe them, rather than keeping them in line and stopping their invasiveness, a problem that is especially powerful in the context of identity politics.

Blame Displacement

The chronically anxious family seems to lack an immune response, and so becomes wholly focused on the outside agent, as it lacks the ability to limit its invasiveness. One aspect of this is the encouragement of blaming, rather than 'owning it'. This is seen in the focus on 'you' statements mentioned earlier: such statements displace the problem by blaming the other party and generally illustrate the anxiety, helplessness, and perhaps even 'emptiness' of the person expressing them (76). Such families will constantly blame some internal or external party or issue rather than 'own' themselves and their relationships.

This blame displacement leads to a constant focus 'on pathology rather than strength', and an inability to harness inner strengths to address weakness. Such families fail to recognize that trauma often has less to do with the crisis or 'impacting agent' than it does with the emotional processes that organize the family's life and shape its response. The mature family can grow through trauma, and broaden their repertoire of responses.

Blame displacement can be seen in such things as the anti-incumbency attitude that exists in America – the tendency to resist whoever holds office. It is 'a reactive response to the voter's own inner emptiness, personal frustration, general unhappiness, loss of hope, and feelings of helplessness' (79-80). It is also seen in the revisionist histories that rejoice to tear down the heroes of yesteryear.

Friedman questions the idea that it requires two persons working on a marriage to change it. In a marriage, a shift can occur and divorce can be avoided as one partner recognizes how their reactivity has compounded problems,

counselling from ‘who has/is the problem?’ to ‘who has the motivation to focus on strength, not weakness, and on leadership, not pathology?’ (81).

The Quick-Fix Mentality

The chronically anxious family is impatient and puts its trust in technique over maturity, believing that its problems can be solved in a linear fashion. They have a low threshold for pain, arising from their lack of motivation to get on with life, a low threshold that drives them into the arms of people offering quick fixes. To the extent that we are motivated, our threshold for pain increases. This is important for dealing with others: ‘raising our own threshold for the pain another is experiencing can often motivate the other to take more responsibility for his or her life’ (85). Increased sensitivity to the feelings of others is not the solution that it is commonly presented to be. If our threshold for other people’s pain is too low, we can cause their threshold for it to lower as well (counsellors’ low threshold for the pain of couples can increase the possibility of their marriages failing).

Chronically anxious families almost invariably lack a leader who won’t give into their demands. When such a leader arises, they will be unstinting in undercutting the leader’s resolve. People can seldom become more mature than their leaders or mentors.

The obsession with technique and method is an aspect of our addiction to the quick-fix. This obsession has the tendency to transform professionals into hacks.

Poorly Defined Leadership

All of the characteristics of the chronically anxious family already mentioned lead to create the poorly defined leader. The poorly defined leader is led around by crisis, lacks the distance to gain clear vision, and is reluctant to take a clear stand. In the chronically anxious society, the leaders chosen will tend to be immature, without the capacity to resist sabotage, reactivity, and dysfunction.

Friedman remarks that, the ‘single most important factor’ that he has noticed in his extensive experience distinguishing families that recover from crisis from those that don’t was the presence of a well-defined leader. By ‘leader’ he doesn’t refer to someone who dictates to others, but to ‘someone who can maintain the kind of non-anxious, well-principled presence’ that he has described (89).

What is always absent from chronically anxious, regressed families is a member who can get himself or herself outside of its reactive, herding, blaming, quick-fix processes sufficiently to take stands. It has to be someone who is not so much in need of approval that being called “cruel,” “cold,” “unfeeling,” “uncooperative,” “insensitive,” “selfish,” “strong-willed,” or “hard-headed” immediately subverts their individuality.

Comments

There are many things that I would love to explore in more depth here. The relationship between the regressive society and the operation of [Girardian mimetic desire and the scapegoat mechanism](#) is definitely worth some closer attention. The same themes crop up: the scapegoat, a lack of differentiation, hyperconductivity of tension/anxiety, etc. Friedman is showing just how tightly these Girardian themes are bound into the lives of



clearest picture).

His points about the chronically anxious and emotionally regressive character of discourse in society, and the manner in which society adapts to the most dysfunctional, pathological, and disruptive members of society raise troubling questions for liberals, given the degree to which liberal and identity politics so often exhibits or encourages the herding and blame displacement characteristics, shutting down challenge, engaging in *ad hominem*, and tyrannizing with sensitivities. Conversely, I believe that liberals have important questions to ask of Friedman. For instance, isn't Friedman's approach at risk of being blind to real questions of social justice and lack of empowerment? Also the degree to which we have the capacity to be responsible and self-defined owes a lot to forces outside of ourselves. We are not born as self-defined individuals, but become them as an achievement (and in many respects as a *social* more than as a personal achievement), one which can owe much to social factors such as education, personal space, home environment, economic independence, etc.

Finally, I think that several of the observations about regressive societies could be applied to various Christian contexts and churches, for instance. Many churches exhibit an undifferentiated togetherness, which provides a hyperconductive context for anxiety and a hyperreactive posture. The emotional process of anxiety can be traced in the evangelical obsession with the spiritual quick fix, the obsession with theological certitude, etc.

I would be interested to hear any further thoughts that people might have in the comments.

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**About Alastair Roberts**

Alastair Roberts (PhD, Durham University) writes in the areas of biblical theology and ethics, but frequently trespasses beyond these bounds. He participates in the weekly Mere Fidelity podcast, blogs at Alastair's Adversaria, and tweets at @zugzwanged.

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21 Responses to *Summary of Edwin Friedman's 'A Failure of Nerve': Part 2*

Pingback: [Summary of Edwin Friedman's 'A Failure of Nerve': Part 1 | Alastair's Adversaria](#)



Luke says:



edit: Chronically anxious families need by almost invariably lack a leader who won't give into their demands. (?)

[Reply](#)



[alastairroberts](#) says:

January 12, 2012 at 9:06 am

Thanks for alerting me to the error!

[Reply](#)



Luke says:

January 12, 2012 at 3:15 pm

You're welcome! I realize that it'd be really nice if I could give feedback on what you write, but I don't have a way with words (yet?). I do read it all, and like to think on the ideas you bring out.

This particular series is interesting. My impression from the Part 1 wasn't to agree with many of his statements about leadership. While decisiveness is a very desirable trait in a leader, I feel like acknowledging emotions, attitudes, etc.. while not letting them rule decision making, is a means of garnering respect as a leader. My University degree is actually in Organizational Leadership, so my interests and thoughts on the matter aren't completely unbased (though I think they're somewhat basic).

This second part has more on psychology of home leadership, and relates to a lot of counseling advice. There's a lot of good insight here and, with some reservation, agree with the author's points. Food for thought



[alastairroberts](#) says:

January 12, 2012 at 3:40 pm

Thanks for the comment, Luke. I would be interested in any further thoughts that you might have at a later point. Especially given the background of your studies, your insight would be valuable. The value that I find in Friedman's thought is that it so radically challenges much conventional wisdom on the subject, forcing us to reassess a number of our positions.

I think that Friedman is correct to focus primarily on the dynamics of relational systems, rather than individual psychology. The positions outlined at the end of the first post will be elaborated upon in later posts. I think that, in the final analysis, he isn't denying the value of acknowledging emotions, etc., but rethinking the place that they ought to have in our systems of and approaches to leadership, which often seem to allow people's emotions, feelings, and sensitivities to hold groups hostage. Friedman's alternative is not ignoring or cutting oneself off from other people's feelings (which he argues can cause leadership to fail as people will completely oppose such a leader), but maintaining a strongly self-differentiated *presence*.

I hope that much of this should become clearer later on.

Pingback: [Summary of Edwin Friedman's 'A Failure of Nerve': Part 3 | Alastair's Adversaria](#)

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Dan says:



“Chronically anxious families almost invariably lack a leader who won’t give into their demands.”

Or possess a sociopathic leader whose demands are random, contradictory and bizarre?

[Reply](#)



[alastairroberts](#) says:

January 15, 2012 at 9:27 am

Under Friedman’s understanding, such a person isn’t truly a ‘leader’, but just another reactive member who can’t self-differentiate.

[Reply](#)



Dan says:

January 16, 2012 at 4:20 am

I was wondering if that might be his position. But people like that actually do the leading in many situations even if they aren’t a real ‘leader’ – it sounds a little like the “no true Scotsman” fallacy.

Pingback: [Summary of Edwin Friedman’s ‘A Failure of Nerve’: Part 5 | Alastair’s Adversaria](#)

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Travis Beck says:

June 13, 2012 at 6:19 am

I enjoy your comments on Friedman’s ideas—great food for thought as I read the book.

A couple thoughts: I disagree that Friedman’s ideas risk being blind to social justice and empowerment. If I’m understanding your objection correctly (and if I understand Friedman correctly), I’d say that Friedman’s idea of the “regressive society” isn’t that society adapts to the oppressed and marginalized but that it adapts to the “squeaky wheel,” those people who complain the loudest out of their hyper-sensitivity to a given issue. Friedman’s solution is, in fact, empowering, because leaders who stay connected but refuse to give in to immature demands force those people (if they choose to do so) to grow and mature through their short-term pain. The leader listens and engages them with compassion but doesn’t get sucked into the drama or allow the whole group to be hijacked by an immature few.

Second, I disagree with your position that self-definition depends much on external forces. Certainly our capacity to mature is limited by the leaders whose company we keep—we can only mature to the extent that those around us can function maturely. However, self-differentiation is never something one “achieves,” as if one simply arrived at the destination and could stop working on it. It is a life-long process that is not a function of one’s education or environment per se but rather a function of one’s own emotional being and integrity: the ability to define oneself, especially in the face of opposition, and to regulate oneself, especially in the face of other anxious people. The only barriers to one’s self-differentiation are self-imposed.

Just my interpretation; perhaps I misunderstood what you were getting at in your comments.

[Reply](#)



[alastairroberts](#) says:



While I agree that Friedman's approach can be very helpful for dealing with and changing many 'squeaky wheels', he does not provide us with any clear distinction between such 'squeaky wheels' and the expression of need from the poor, oppressed, disenfranchised, and marginalized. Nor does he seem to have much to say about how such 'squeaky wheels' may be produced by those same negative social forces. Without such discernment, implementing such an approach could be profoundly dangerous. Some people, while not being dysfunctional elements of a society, are simply unable to fall in line and 'adapt to strength', so as Christians we are called to adapt to them (Romans 15:1; 1 Corinthians 9:22).

In response to your second point, I do not believe that self-differentiation is ever a completed process, but it is an (ongoing) achievement. I disagree that self-differentiation is something that we can truly achieve by ourselves. The capacity to self-differentiate is not something innately present in every human being, but is an latent aptitude that must be developed and fed through training, example, education, influence, etc. The processes of self-differentiation are learned through good education, as we gain the ability to differentiate ourselves from subject matter in a manner that allows us to think clearly and non-reactively. It is developed through participation in institutions, through healthy forms of leadership, etc. Many people have lacked such privileges in their upbringing, and are placed in systems that encourage and foster reactive and dependent mindsets and attitudes. It is very hard to break out of such a thing on your own. Many people cannot be held wholly responsible for their lack of self-differentiation, as they haven't really been granted the means with which to develop one. Rather, we must provide them with support, and the training and example necessary to grow into it.

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Marti says:

June 14, 2014 at 6:28 am

What's upp mates, its wondewrful article concerning teachingand fully explained, keep it uup all the time.

[Reply](#)



April Fiet says:

February 1, 2015 at 2:15 am

A perfect illustration of Friedman's anxious society is Twitter. And, I'm heartened that I have started to hear many writers talking about withdrawing from the anxious and reactionary. The hope is to ruminate more personally, emotionally, imaginatively, and deeply, rather than responding to the constantly-ebbing tides of controversies and spectacles. I hope to see that happen. it's precisely what we need.

[Reply](#)



Alastair Roberts says:

February 1, 2015 at 2:35 am

It really can be. One of the things that Friedman has opened my eyes to is the manner in which our online social media are not merely neutral tools, but can facilitate more or less 'differentiated' and successful interactions. This is a theme to which I have returned on several occasions (see [here](#), [here](#), [here](#), and [here](#), for instance). Unless we



them.

Conversely, mindfulness to the *structural* characteristics of productive and successful discourse and societies will enable us to form interactions and communities that achieve results that benefit everyone. Proactively working to establish such conversations is a growing concern of mine.

[Reply](#).

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