

Remarried Families

"Under the Big Top"

by

© Gina Wonfor

A practicum
presented to the University of Manitoba
in partial fulfillment of the
Master of Social Work
in
Department of Social Work
University of Manitoba

Winnipeg, Manitoba
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GINA WONFOR

A practicum submitted to the Faculty of Graduate Studies
of the University of Manitoba in partial fulfillment of the
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MASTER OF SOCIAL WORK

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FOREWORD

Welcome Ladies and Gentlemen, boys and girls! May I take the honor to proudly present the one and only exciting three ring circus from which you will be able to carry away with you memories of a real experience. Now settle in, take your seat and enjoy the show!

There appears to be some truth in the saying that people find it entertaining to watch true life emotions and experiences acted out symbolically before them. In a serious vain, while attempting to watch all circus acts at once many parents may comment that watching the circus is like viewing their own families.

While this may be true for some intact families it would seem to be more true a picture for the blended or remarried families. Margrit Eichler is one of the rare researchers who has examined the phenomenon of remarriage in Canada. In Eichler's text, (1983), Families in Canada Today she reports that the single most responsible determinant for the increased rate of remarriage during the last decade is the increased divorced rate throughout the seventies.

In 1980 in Canada, 191,069 couples married. Of these marriages 73.5 percent occurred between a bride and groom of whom neither had been married previously. The remaining 26.5 percent of the marriages were remarriages for one or

both partners through divorce or death. Within this percent of remarriages 7.3 percent occurred between partners who were both previously divorced. This percentage is translated into 13,873 remarriages where both partners were previously divorced in 1980 while in 1967 this statistic was 2,497 remarriages, 1.5 percent of the marriages within that year. (Eichler, 1983) While the number of marriages has slightly decreased there appears to be a significant increase in remarrying couples. This marital structure of divorced bride and groom is generally considered the most complex organization for blended families.

In presenting this practicum the objective is to improve my skills and develop my method for providing therapy to the blended family form. This objective also reflects the interest to encourage and further develop a conceptual framework in which the blended family is viewed as a normative structure rather than a pathological family form. This will be achieved through the integration of the family life cycle framework and interventive techniques including those of Structural Family Therapy.

As my theoretical framework and past practical experience have their foundation in Structural Family Therapy, therapeutic intervention with blended families will include those structural family therapy dynamics which present as fitting with the blended family structure. Structural therapy is an approach conceived through working with family

systems. Family problems are reviewed as being maintained through dysfunctional family structures, hence the goal for therapy is to modify the family structure in order for the family to resolve their own difficulties. It is not to create a new family structure, but to activate the functional structure already within the family system. One of the structural techniques--focusing is very useful for therapists as they organize the family difficulties in an agenda for therapy and change. It appeared to this therapist that blended families were more complex and therefore this technique would be valuable in therapy with blended family forms.

Within his discussion of Structural Family Therapy, Minuchin emphasizes the incorporation of the family developmental stages. (Minuchin and Fishman, 1982, pp. 22-27). It appears that the integration of developmental theory has been less recognized in therapy with alternate family forms; therefore, throughout the clinical segment the practicum work will be directed toward exploring what aspects of theories are useful for therapeutic intervention with blended families. In addition, Ohlson, Portner and Lavee (1985) provide an evaluative instrument which is beneficial for intervention. The Faces III is a self-report instrument designed to measure family members' perception of the family cohesion and adaptability. This instrument will be used specifically to measure change within each family

from the time therapy begins and ends. Ohlson has given permission for the Faces III to be used in this practicum and the usefulness of this measurement will be discussed at length in later sections.

This discussion of Therapy with blended families is divided into chapters which examine the following areas: The basic concepts of the Family Developmental life cycle and the initial six stage model; the alternate stages and stressors which apply for families experiencing separation, divorce and post divorce; a presentation of the additional family life cycle stages for the blended family and the unique stressors for this particular phase. Interventive techniques for working with blended families which will include the desirable features of the Structural approach will be discussed.. With these areas of theory adequately presented, an examination of the case studies during this practicum will follow. To conclude the discussion, a series of recommendations will be made highlighting those ideas which were found ineffective and those that proved to be most effective for working with blended families.

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Chapter I

THE FAMILY DEVELOPMENTAL PROCESS

1.1 THE FAMILY LIFE CYCLE MODEL

A developmental approach to viewing families was first conceived through the process of theorists exploring and describing the lifecycle of the adult (Erik Erikson, Roger Gould (1972), Daniel Levinson (1978) sociologists Hill and Duvall (1948) as well as the recent convictions of family therapists like Jay Haley (1973) and Carter and McGoldrick (1980)(Carter and McGoldrick, 1980). The developmental approach is relatively young with its beginnings in the 1930's and major unfoldings occurring since the 1950's.

Hill and Duvall (1948) were first noted for conceptualizing the family developmental process in 1948 and Duvall's book Family Development (1957) was the first major publication addressing the family life cycle outlining an eight stage developmental framework with tasks for both the individual and family unit at each stage. The formulation of family life cycle is founded on the concurrent patterns of experience which are common to middle class families living in America (Duvall, 1971). Theorists Hill and Rodgers elaborated on Duvall's theory by defining basic

concepts involved in the family life cycle model. Very basically, these concepts refer to the family as being a system. It is not independent -- separate in and of itself. Rather, it is vulnerable to influences and transactions of the world around it and those parts which comprise the family unit (Hill and Rodger, 1964).

In this framework, each member in the family unit has a position which is related reciprocally to at least one other role in each of the positions in the family unit. When there is a change in the role of one position this will cause a change in the positions which have reciprocal roles. Change in the family is accounted for by focusing on the changing role content of the positions. Historical and cultural events may also be variables for altering role patterns and expectations.

Therapists have advanced their understanding and the usefulness of this framework. Carter and McGoldrick have clearly been the forerunners on expanding and updating an understanding of the developmental life cycle for application in family therapy today. Much of the literature regarding family development makes reference to Carter and McGoldrick's stages of family development over time as a most useful and practical schema for organizing family functioning.

In their text, Carter and McGoldrick have expanded on Bernice Neugartens' studies of patterns in adult development. Neugarten emphasized the interweaving of historical biological and social time in which new roles develop for adaptation to social changes. (Neugarten, 1979 in Carter and McGoldrick, 1980) Carter and McGoldrick have integrated these dimensions of social time and intergenerational connections when specifying and formulating the development of family (1980, p. 5).

They concentrated on three generations in which the nuclear family was one emotional subsystem reacting to past and present relationships. The past being conceptualized by Carter and McGoldrick as a "vertical" flow of anxiety, and present involvements being the "horizontal" flow of anxiety. The vertical flow transmits stressors including family attitudes, taboos and "loaded issues" from one generation to the next (Carter and McGoldrick, 1980 p. 9).

The horizontal flow of anxiety refers to stress encountered by families adapting and changing through the stages of the family life cycle. As well, the stresses of the horizontal axis include the unpredictable "slings and arrows of the outrageous fortune". (Carter and McGoldrick, 1980, pp. 10) These stressors, some of which are untimely death, chronic illness, war and developmentally delayed children, encroach disruption on the family life cycle process. The life cycle stressors may include those predictable strains specific to each transitory phase.

The very nature of a transitional period instigates a "natural" stress because its resolution is a long gradual process over time. This stress becomes intensified as families face a new stage or task; there is a resurfacing of old issues as new issues arise. This stress has been described as a developmental or maturational crisis (Scherz, 1971). Haley, (1973) suggests in his book Uncommon Therapy, that greater stress and symptomatic behaviour occurs within the family when the normal sequence of development is disrupted or upset. When one stage is not resolved adequately the beginning of the next stage may be delayed or problematic; the successful completion of tasks in one stage is dependant upon completion of tasks from the previous stage. As in the stage of "family with adolescents", there is a predictable strain on family relationships in allowing the adolescent more movement in and out of the system (Carter and McGoldrick, 1980, pp.17). In accordance with these horizontal and vertical axes there exists the interplay of society's significant events ie: the sexual revolution and the advancements of women's liberation.

Carter and McGoldrick (1980) suggest that a great amount of stress on the horizontal axis (developmental and maturational crisis) is enough strain to cause any family to appear dysfunctional and yet if there was minimal stress horizontally, the family system may be disrupted from overloaded stress on the vertical line. Thus, both the

vertical and horizontal lines possess degrees of anxiety but most importantly it is the point at which the horizontal and vertical lines of stress intersect that produces disruption in the family system. These two lines are constantly playing upon the family concurrently.

This discussion has provided a historical review of the theoretical framework for the developmental approach; while it could be more detailed, emphasis has been given to Carter and McGoldrick's developmental framework. Their theory redefines dysfunction as a normative reaction to developmental transitions. This conceptual view of family dysfunction will be expanded further in the following introduction to basic stages of Carter and McGoldrick's family lifecycle and their additional stages of divorce and post divorce.

With each phase in the life cycle there are emotional tasks to be achieved before the developmental stage is fulfilled and the next stage initiated. Scherz (1971) defined psychological tasks which appeared to be universal in some manner for individual family members. These tasks emphasize the satisfying of divergent needs i.e. establishing separation versus maintaining interdependence; establishing intimacy versus acquiring emotional distance, and obtaining self autonomy versus assuming responsibility for others. These are themes for the family as a unit. Individually, members experience the conflicts of separating

and working out dependency needs; establishing closeness and sexual identity; and gaining autonomy through the development of self control and a sense of self worth (Scherz, 1971 pp. 363). These themes appear throughout the tasks outlined in the developmental stages of the family.

The first stages presented are those which may be applicable with some adaptation to all family forms. Carter and McGoldrick extend their family life cycle schema beyond the first married family phase to acknowledge and accommodate the changes in today's society. They include the alternate family forms with stages of separation, divorce or remarriage, however, these forms also experience the fundamental six stages of family development which will now be presented with a brief expansion of each.

1.2 STAGES OF THE FAMILY LIFE CYCLE

Carter and McGoldrick's concise six stage model includes the following stages: The Unattached Young Adult; the Newly Married Couple; the Family with Young Children; the Family with Adolescents; Launching Children; and the Family in Later Life. The first stage of "Unattached Young Adult" is considered the cornerstone in which the task involves the individual separating from the family of origin "without cutting off or fleeing reactively ..." (Carter and McGoldrick, 1980, p 13). The individual's success in autonomy, positively influences the negotiation of tasks in

the following stages. During this process of separation the young adult defines what emotional information from the family of origin will be discarded and what will be valuable to integrate as part of 'self'. The difficult process in this stage occurs in the parent-child separation. The shift in relationship is toward "adult-to-adult" status in which both parents and young adults can begin to appreciate each other as adults. There are many situations which threaten the adequate achievement of this stage such as the degree to which the parents were successful in achieving this stage themselves. There is an intergenerational influence in which the childhood experiences of the parents relates to the developmental process of their children (Meyer, 1980).

In the second phase, titled "The Joining of Families Through Marriage" the newly-married couple has the difficult, yet joyous, task of becoming a couple. Both adults need to negotiate personal issues and every day routines to establish themselves as a marital couple. As well they must re-negotiate and re-define relationships with in-laws, extended family parents and friends. There is a change to include the new member and the new separate family unit in the extended family boundaries. Carter and McGoldrick list several factors which contribute to the difficulty of this transition: the couple may have inadequately disengaged themselves from the families of origins, they may have known each other for no more than six

months; or there may be a pregnancy before the marriage. These are only a few of the situations which may hinder this transition phase of coupling and establishing a new family (1980).

The third phase, "The Family With Young Children" is viewed with subphases within it as the children grow from toddler to 'school-age'. The presence of children suggests the need for several developmental tasks. Primarily, the task remains that the couple as adults ascribe their status as caretakers of the younger generation. As well, new roles must be negotiated with the extended family incorporating the new parents and the additional roles of grandparents (Carter and McGoldrick, 1980). Burr (1970) posits that satisfaction of marital couples noticeably decreases when families have preschool and school-age children. Consequently, a significant task of this stage is then to promote a sense of intimacy in the marital relationship. This may be rather difficult because many couple's relationships are founded on self-interest rather than real intimacy (Bradt, 1980). This transition may be delayed by the adults' inability to set limits for their children or exert authority. Often, the adults have difficulty accepting the generational boundary between themselves and their children. The parents need to accept the power, unequalness, and responsibility to protect and guide their children.

"THE FAMILY WITH ADOLESCENTS" constitutes the next transitional phase in which the children gain new definition and parents can no longer maintain complete control. The adolescent will, at times, need to be very dependent on his parents and at other times desire independence. Parents need to adjust their rules and allow flexible boundaries in regard to their child's development. Families may become 'stuck' in moving through this stage because the parents still relate to their adolescent as a younger child. The family in this situation has established rigid boundaries suitable for families with young children. Consequently, the family is stubborn in adjusting to more flexible boundaries. In addition they may have difficulty controlling their adolescent, and therefore, the child may become overly independent (Walsh, 1982, pp 183).

During this family stage as well there are tasks for the parents. These include refocusing on the midlife issues of marriage and careers and becoming concerned and involved with the older generation (Carter and McGoldrick 1980). This phase introduces threats to the balance and security the family has obtained, and increases the emphasis toward the marital relationship. Parents may fear the stage in which they return to being a couple and consequently they may attempt to increase the adolescent's dependence on them (Solomon, 1973).

The next stage of "LAUNCHING CHILDREN AND MOVING ON" has been recognized as being the newest and longest of the phases. Families of today have fewer children and a longer life expectancy. Hence, this phase is considered the most problematic due to the lack of guidelines from the previous generations. During this phase there is quite a change in membership as children depart, in-laws and grandchildren enter, and parents pass on. The couple must re-negotiate their own relationships without children and evaluate their involvement with the greater social environment (Carter and McGoldrick, 1980, pp 14,15). This phase requires that the marital pair focus on their couple relationship and having adult relationships with the individuals they reared. Giving up the caretaking position may be very complex as adult offspring may still regress to parental dependance in raising their own families. As well, a new position for caretaking members of the extended family of origin is taken on. ie: A mother now has caretaking responsibilities toward her mother. In addition, in this phase couples need to expand their social involvements and supports allowing for the inclusion of new interests to continue the productivity of this period.

The final phases, "THE FAMILY IN LATER LIFE" requires family members to come to terms with the issues of retirement, financial insecurity and dependence. This constitutes an extremely difficult transition in that the

couple must relinquish much of their power and status for which they have struggled most of their lives to achieve. There may be changes in residence and living accommodations, but of greatest difficulty is the loss of a spouse. The remaining spouse must face all these difficulties alone and re-organize much of his/her lifestyle.

Berman and Lief (1975) working with marital couples found that crisis points in the marital relationship were clearly parallel and related to the critical stages in the individual life cycle. Hence, each person experiences double tracks or lifecycles simultaneously each intimately affecting the other as the person and family strive to achieve a balance (Sager et. al, 1980 pp 41). This is illustrated throughout Carter and McGoldrick's family development stages. Carter and McGoldrick state clearly that variations in family life cycle commonly exist due to culture and class or family members who do not marry, or have children. Yet, Carter and McGoldrick also state that most of the phases of this life cycle hold for the majority of family members(1980,p 16).

Carter and McGoldrick's schema has been expanded to reflect changes in society. With divorce now being a common occurrence, an increase of single-parent families has resulted Statistics Canada reports an increase in divorce at an alarming speed for the country. In 1970 there were 29,775 divorces, a rate of 139.8 per 100,000. In 1980,

however, the number of divorces totaled 62,019, a rate of 259.1 per 100,000, an increase of 119.3 in 100,000 (Eichler, 1983, pp 44). It is also suspected that with the recent changes in the divorce laws there will be a further jump in the occurrence of divorce.

Most literature on separation and divorce refers to studies by Paul Glick who has found that approximately 40 percent of people now marrying in the United States will end their marriage in divorce (1977), and an estimated 30 percent of Americans who are in the process of divorce will remarry (1975). Carter and McGoldrick (1980) interpret divorce as a dislocation of the traditional family life cycle creating chaos which ripples throughout the family's developmental process with structural shifts, gains and losses. These families need to experience additional phases and tasks in order to restabilize and progress developmentally at a more complex level.

1.3 THE TRANSITION OF THE SINGLE PARENT FAMILY

The developmental issues during the single-parent transition involve rebuilding one's social network and arranging with the ex-spouse and family for flexible visitation. In order for the family to stabilize and proceed developmentally it must fulfill the tasks of maintaining involvement with the ex-spouse. This involvement is in regard only to their parenting

responsibilities and nurturing contact with children and extended family (Carter and McGoldrick, 1980, pp 18). For families that later remarry this phase is crucial since unresolved tasks in these stages will ultimately result in disruptions in the remarried family stages. It is for this reason specifically, that this report will now review the tasks and stressors of separation, divorce and post divorce.

For the purposes of this discussion "Single Parent Family" refers to the custodial parent-child household resulting from the divorce in which one parent has the child-rearing responsibilities. The term "one parent family" is somewhat misleading as it implies only one parent in the picture. The other parent may have either relinquished responsibilities entirely or defined limited visiting rights. The Single Parent Family is actually a subsystem of the larger divorced family. The family develops some of its unique characteristics because of the deep pain and grief at the time of its conceptions. The lack of two parents makes it much easier for the custodial parent and child to become stuck in dysfunctional intimacy (Keshet and Mirkin in Koman, 1985).

To move from a nuclear family system to a new structural relationship shakes an individual's internal experience of self and can destroy the organization which makes the world feel orderly and natural. "Instead of being embedded in a context one is drifting self consciously in an ambiguous,

poorly articulated field" (Goldner, 1982, pp 193). As we discuss the stages and tasks it is apparent that the differences in single parent families refer to the differences in quality of relationships maintained between spouses and between the parent and children.

1.3.1 The Family Divorce Phase

Within the Divorce Phase Carter and McGoldrick (1980) define the first stage as The Decision to Divorce. The resolution of the tasks of this stage requires that both spouses jointly accept responsibility for the failure of the marriage. In order to achieve this task the authors suggest that the spouses need to accept that they will be unable to resolve their difficulties as a marital couple and accept the discontinuity of their relationship.

In the next stage, Planning the Breakup of the System the developmental issue to master is that the spouses will be able to work cooperatively on outlining a satisfactory agreement for custody, visitation, finances and dealing with the extended family, regarding the divorce (Carter and McGoldrick, 1980). Often, informing parents and relatives of the decision to divorce is viewed as the most difficult task for the couple. Carter and McGoldrick (1980) suggest that in order for this stage to be achieved satisfactorily, both spouses require an attitude which is supportive and compromising in the best interests for all family members regarding custody, visitation and financial affairs.

If these tasks are adequately resolved the next stage of the divorce phase is Separation in which Carter and McGoldrick (1980) show that there exists still other developmental crises to overcome. The separating partners need to be willing "to continue a cooperative parental relationship" as they simultaneously work on resolving their attachment to each other (Carter and McGoldrick, 1980, p 18). With these attitudes, the spouses are more able to carry out the following tasks: mourn the loss of the intact family; restructure parent/child relationships due to the structural changes of the family unit; and realign their relations with the spouse's extended family to maintain the children's connectedness with grandparents, aunts and uncles of the non-custodial parent's family. Family members have the task of defining the family as extending beyond the residency of each household. Weiss (1975) describes the process of separation as covering 2-4 years. The adults in particular, are placed in the complicated and contradictory situation of needing emotional distance for an effective marital separation while also needing to maintain enough positive feeling to continue a cooperative co-parenting relationship (Whiteside, 1982, p 62).

At this stage of the divorce phase "Separation" many families become 'stuck'. The legal divorce often does not occur due to the financial expense and for some it is due to the extended emotional experience. The previous stages may

never be solved adequately because many spouses find that their ability to function autonomously cannot be achieved if frequent contact is continued with the spouse. Consequently, spouses cut themselves off emotionally from each other and sometimes from the children as well in order to ignore the pain and establish their autonomy. This may then become the predominant pattern (Carter and McGoldrick 1980, p 245).

At this point in the discussion, it is appropriate to acknowledge the additional stressors that separated families experience. McCubbin and Figley list the characteristic stressors for the spouses and children of separation.

1.3.2 Characteristic Stressors of Single Parent Families

1. A sense of loss and grief
2. Learning how to 'fit' into the redefined family
3. Redefinition of relationships with ex-spouse and parental legal custody
4. Legal matters to be settled in regard to division of property
5. Negotiating rules of parent/child behaviour
6. Parent takes new roles--nurturing and earning responsibilities (usually handled by two parents)
7. Children, depending on age (development stage) may acquire new responsibility
8. The larger the family, the more complex the transition--different developmental stages (1983, pp 119)

Often, the central stressor of the separation/divorce process is the "sense of loss and grief." The mourning is different than that with death for both the child and spouses because it is usually mourning the loss of one relationship; it is the loss of hopes and dreams of what might have been while forming a new type of relationship with the same person (Kleinman et al 1979). In some cases the adult experiences this sense of loss with his personal decision to separate while the marriage is ongoing. This suggests that often parent and child are at a different step in mourning. For children, the sense of loss is psychologically parallel to the event of death as it evokes disbelief, shock and denial (Hetherington 1977). The child frequently experiences the parent's departure as a departure from him personally. In the parent/child relationship there is the hard task of relinquishing the intimate relationship -- the daily involvement while adjusting to a less frequent relationship yet still an ongoing one (Kleinman, Rosenberg and Whiteside, 1979).

Many of these stressors are self-explanatory and expand upon each other. Most Task overload (particularly in families with young children), emotional cut off from extended family and social isolation are deemed the most evident problem areas. If parents are experiencing high levels of social isolation this affects the functioning of young children more so than the functioning of adolescents

(Carter and McGoldrick, 1980, p 257). Dysfunctional patterns may begin here with these added complexities and the continuity of the family life cycle. It becomes rather difficult to take things "one step at a time" as added stressors of individual, biological family, and additional lifecycle tasks impact simultaneously.

Morawetz and Walker (1984) through their studies of Single Parent families have defined a framework which is useful in understanding this family form and its unique makeup. These authors organize the stressors into four distinct phases. Briefly described they are as follows:

1. Aftermath -- a period of emotion, confusion and ambivalence
 - a) a sense of being unable to cope
 - b) a search for the replacement of the lost parent
 - c) grieving the loss
2. Realignment -- a regrouping which occurs as the family adjusts to the new reality, which includes:
 - a) alterations of standards of living - economic changes
 - b) reduced access to children for the parent who has left the home (visitation) or the single parent that may now have to work full time
 - c) change in social life which may include a new social network as a single person and loss of old supports
3. Re-establishment of social life
 - a) marked by the family's readiness to establish a new social life in the context of the changed reality

- b) achieved a delicate balance in new context, yet fear of losing this

4. Separation

- a) the successful separation of parent from child and vice versa
- b) both parent and child have their own life and child knows the parent cannot manage
- c) normal for parent/child attachments to be more intense than the normal intact family (Morawetz and Walker, 1984 p 22-28).

Carter and McGoldrick (1982) titled the last stage as The Divorce. The authors suggest that to resolve this entire phase couples need to accept the necessity for more emotional work to occur in regard to emotions produced from divorce. Spouses must resolve issues of divorce such as anger and guilt. In this stage they must re-address issues of the previous stages to confirm their resolution. These issues include mourning the loss of the intact family by relinquishing fantasies of reunion; retrieving hopes, dreams and expectations of the marriage, and maintaining connections with extended family. Consequently, it appears that divorce cannot be reviewed as an event occurring at a single point in time rather; it is a transition extending throughout the lives of parents and children (Hetherington in Lamb, 1982, p 234).

1.3.3 Reactions to the Divorce Phase

Carter and McGoldrick suggest that the highest incidence of divorce occurs at the stage of families with Young Children (1980, p 251). How divorce affects the children is related to several variables. It is important to note that generally, literature is not always definite about whether reactions are specific to divorce in its legal sense or the actual separation of family members and the noticable change in family structure. In acknowledging this ambiguity, this author is not suggesting that the answer is one or the other but rather poses the question: which effects are specifically related to the actual legal divorce?

Luepnitz (1979) in her study of children found that the majority of the subjects reported that it was the household conflict prior to the separation and divorce that provided them with the most difficulty. Luepnitz suggests that possibly much of the literature on children of divorce ought to be retitled, "Children of Marital Conflict". Therefore, what the literature reports as reactions to divorce may in fact be a response to parental fighting years before the actual separation (Luepnitz, 1979).

As suggested earlier, however, there are variables which affect the reactions that occur regardless of the instigating situation. Carter and McGoldrick (1980) suggest that variables in the life style of divorcing

families include age at time of marriage, and age of spouses at time of divorce. As well, Wallerstein and Kelly (1980) have found that the manner in which divorce affects children depends in part on the child's specific developmental stage; the extent of her involvement and sensitivity to the family emotional process, and the child's unique individual perception and reaction to the separation and divorce. Jacobson (1978) notes that a significant variable in the child's adjustment to the life event of separation is the amount of interparental hostility to which the children have been exposed (1978, p 17). In the long term it will be the manner in which the family deals with the process that reflects on the child's ability to resolve his feelings successfully.

In Wallerstein and Kelly's study (1976) it was reported that preschool children responded to separation with a pervasive sadness and use of fantasy as a method of denial. With school-age and early latency children the initial response was sadness and grieving, as these children were less able to use denial. Many presented with depressive reactions in which their world view symbolized death, damage, loss and emptiness. Other responses have included crying and sobbing, avoidance and silence, fears of starvation and insecure futures, fears of deprivation; the need for material objects; guilt over causing the divorce, and strong feelings of loss. All children wished for more

frequent visits with their non-custodial parent and none of the children in the study were pleased with the parents decision to divorce.

Over the course of the first year these responses had diminished in intensity. In conjunction with the emotional work once again time is noted as a crucial factor in the movement toward resolution. Hetherington (1977) found that an average time of two years was necessary for the stabilization of the new family structure after divorce. Carter and McGoldrick suggest that the Divorce and Post Divorce family's emotional process is like a roller coaster graph with peaks of tension at each transition point. After the actual legal divorce occurs the family embarks on the transition to The Post Divorce Phase.

1.3.4 The Post Divorce Phase

In this post-divorce family the developmental task is to provide for viable visitation arrangements with the ex-spouse and his family. The custodial parent needs to be willing to maintain parental contact with the ex-spouse and his extended family by supporting the ex-spouses involvement with the children. For the custodial parent in this phase, the task requires the expansion of a social network. Conversely, as a non-custodial single parent the developmental issues outlined are to find alternate ways to continue an effective parental relationship with the

children and develop a willingness to maintain the parental relationship with the ex-spouse. As well, the non-custodial parent needs also to establish a social network (Carter and McGoldrick 1980, p 18). The outcomes of the divorce experience differ with different members of the family. Coping strategies vary among husbands and wives, parents and children. Thus, the pathway to well-being for one family member may lead to a disastrous outcome for another (Hetherington in Lamb, 1982).

The alteration in family structure causes the children's attention to be directed primarily at one parent and with the additional stressors affecting these family units they are more vulnerable to the stress created from the developmental transition points of their fundamental stages. Consequently, the family emotional processes may be intensified, which could detrimentally affect the family's functioning and task performance (Beal, 1980). The examination of Carter and McGoldrick's family developmental life cycle thus far, sets the stage for beginning to understand the complex emotional nature of where the blended family originates. The next chapter will focus on the developmental process of the blended family as it intertwines with the additional pressures it experiences.

Chapter II

THE REMARRIED FAMILY DEVELOPMENTAL PROCESS

2.1 INTRODUCTION

Ladies and Gents, boys and girls may I now draw your attention to the center ring where you'll witness the stupendous show of the eighties. Let me present the spine tingling amazing acts of the blended family. This is the spot where the spotlight is hot. They'll work up so many surprises you'd never see half if you'd had forty eyes!

As the previous chapter highlighted the traditional family development and that of the single parent family structure, the focus of chapter two is directed to the blended family. This discussion will now emphasize the complexity of its developmental supercycle and examine the influence society has in making the blending experience more difficult. Following, an explanation of Carter and McGoldrick's remarried family life cycle will be provided with discussion regarding the unique stressors experienced by this alternate family form. In conjunction with these stressors there are predictable problems which may arise as the merging families integrate. These areas will be outlined and an examination will be made of variables affecting children's and adolescent's adaptation to the reconstituted family.

With the increase in alterations to the family structure over the years it has become more and more difficult to determine which family life cycle patterns are 'normal'. What is normal and what is not is determined to a great extent by social and cultural values. For the most part, members of the blended family experience heightened stress as a result of the confusion regarding the ambiguous roles in the family system. These individuals have few models to guide them as a family and to show them how they may achieve acceptable roles in their community (Carter and McGoldrick, 1980). When considering the cultural labels defining bionuclear family roles it appears these do not adequately 'fit' the roles of the blending family; consequently, members surrender to possessing ambiguous social status (Goldner in Hansen, 1982). As well, these cultural limitations are apparent in our limited vocabulary. The term "stepparent" originated as a label for the new partner of a widow or widower who had children in the home (Eichler, 1983). The stepparent, therefore, was a surrogate. Today, in describing new family members children may struggle for the proper phrasing and words: "This is my stepmother"; "she's not really my mother. She's my father's new wife" (Wood and Poole, 1983, pp 741). For the purpose of this discussion, the blended family may be defined as:

a family that is created by the marriage (or living together in one domicile) of two partners, one or both of whom had been previously married and then divorced ... (Sager et al 1981 p3).

A broader definition might also include widowed persons who have been previously married. from the previous relationship may visit and or reside with the married couple (Sager et. al, 1983).

Due to the lack of guidelines for the blended family structure there is a societal expectation for the remarried couple to act as a first married couple, regardless of the additional relations which may include two former spouses, two sets of children, four sets of grandparents and numerous other relatives and friends from the previous marriage. The household is further complicated by unresolved feelings from the previous family unit (Goetting 1982, pp 217). The family therapist is vulnerable to social and cultural values as well; s/he must be sensitive to how these may influence work with blended families (Nichols, 1984).

As stated in the previous chapter, the traditional family form responds to multiple cycles in the developmental process it would appear then that the remarried family experiences a supercycle of developmental processes. A precursor to remarriage is the disruption for all family members in their developmental cycles--individual, marital and family (nuclear). Hence, the blended family has an elaborate developmental history which may include two separate sequences of marriage, parenthood, separation, divorce, and single parenthood followed by a second courtship (Goldner in Hansen and Messinger, 1982). With

this disruption many of the systems and individual's needs may be inadequately met if at all. Thus, with the family developmental cycle being complex in regard to the basic biological family form, the confusion and complexity increases for the blended family with these multiple tracks. "Previous and new marital and family cycles are current and overlapping while additional lifecycle tracks are added rather than old ones merely being replaced (Sager et. al, 1983 p 50). Lifecycles of the remarried partners may not be congruent when considering responsibilities required by the marital or family systems life cycles. Even if chronologically partners may be the same age, the emotional cycles of the partners may differ greatly (Sager et. al, 1983 pp 50). It is characteristic of blended family's functioning that it will experience developmental issues of the divorce remarriage sequence along with the "normal" developmental shifts for individual family members (Whiteside, 1982 pp 60).

Visher and Visher (1979) state that it is impossible for blended families to avoid a time of disequilibrium. Given the extent of the developmental process at hand, and the disturbing feeling associated with the many tasks, it seems that the question to ask is not why some families falter, but rather how and why some families succeed. In transition periods when families are dysfunctional and role complementarity is lost it is natural for family members to

feel heightened anxiety tension and confusion. Families experience the challenges of the present transition as well as unresolved issues that resurface (Whiteside, 1980 pp 60). Visher and Visher (1979) are in agreement with Hetherington and Weiss as they suggest that research on the development of blended families shows that approximately two years are required for the blended family to stabilize and develop a sense of itself including rules for relations with non-custodial parents and siblings living with ex-spouses.

"Like an individual a family must grow with time, becoming more complex internally as life's demands accelerate" (Goldner, 1982 p 196). For the remarried family, however, there seems to be a unique aging process. "It is as if the developmental clock had frozen after a few months leaving them inadequately equipped to handle tasks of later life" (Goldner, 1982, pp 196). Carter and McGoldrick's (1980) schema reflects the changes in society by including the developmental process of divorce which was previously discussed and the formation of the remarried family. Carter and McGoldrick (1980) based their developmental process for blended families on the stages described by Ransom, Shlesinger and Derdeyn (1979) and add to this framework extended family relationships. Ransom et. al,'s stages were titled, Recovery from Loss, Entering the New Relationship; Conceptualizing and Planning the New Relationship and Reconstitution of the Family (Carter and McGoldrick, 1980).

2.2 STAGES OF THE BLENDED FAMILY PROCESS

The stages and tasks of remarriage need not occur with the same intensity or in the sequence suggested for all blended families (Goetting, 1982). As with the initial stages of the family life cycle, the remarried developmental process also poses tasks associated with each stage. Generally, these tasks address the mourning of losses, negotiation and development of new tradition; formation of new alliances and preservation of old alliances that are still important; and stepfamily integration (Visher and Visher, 1979). The remarried developmental stages appear to be arranged around predictable peaks of emotional tension. These include: serious commitment to the new relationship; plan to remarry is announced; actual remarriage and formation of the blended family and the practicing of logistics in the blended family (Carter and McGoldrick, 1980). Carter and McGoldrick (1980) conceptualized their stages as: Entering the New Relationship, Conceptualizing and Planning New Marriage and Family, and Remarriage and Reconstitution of Family.

Within the first phases of Entering the New Relationship many unresolved issues can resurface for the new family to address. This is one of the most difficult transitions because it may involve working out the emotional complexities of the previous relationship and the divorce which have not been adequately dealt with and are now

reactivated. The rearousal of the emotional attachments for the ex-spouse is usually not understood as a predictable feeling and consequently leads to denial, misinterpretation and cut-off from the biological family unit . This is difficult for families since the ambiguity and pain instigate the desire for premature closure of the old issues and relations (Carter and McGoldrick 1980, p 191). The developmental issues during this phase involve being prepared for complexity and ambiguity with forming commitment to the new relationship and the unification of family. At this stage it appears that the new couple need to review their tasks of the previous stages resolving any issues that continue to be unresolved. The discussion in the previous chapter has already addressed the tasks and stages of divorce and post divorce these issues may need reviewing in this first stage before successfully progressing.

In the second step, "Conceptualizing and Planning New Marriage and Family" Carter and McGoldrick have expanded on Ransom et. al's work (1979). With the presence of children from the commencement of the relationship an exclusive couple relationship is prevented from occurring before parenthood. This is a distinguishing factor of the remarried family and a key to the sense of 'overload' newly blended families experience. The move from the post divorce period to intimacy and the commitment to marriage signals a

new phase of disruption and restructuring of family relationships (Whiteside, 1982, pp 65).

In addressing the tasks of Carter and McGoldrick's second stage there is one prerequisite attitude out-lined; an individual is required to accept his/her fears as well as those of the spouse and those of the children in regard to the remarriage and forming of the blended family. This stage requires acceptance of several areas: time and patience to adjust to complexity and ambiguity; new roles, new structure, boundaries and issues of guilt, loyalty conflicts, unresolvable past hurts, and desire for mutuality. unresolvable past hurts. The developmental issues of the second stage involve achieving an openness in new relationships to avoid pseudomutuality and planning for continuation of a co-parenting relationship with ex-spouses. With the acceptance of the children's fears and affective issues, one needs to plan to assist the children be re-enforcing relationships between the children, the ex-spouse and extended family.

2.2.1 Unique Stressors of the Blended Family

With the onset of blending families there are special conditions and challenges that arise for stepfamilies which set them apart from traditional family forms. These stressors may encroach upon the blended family at any stage in the developmental process, however, it is at this second

stage that members begin to feel the reality of merging families. With this come certain discomforts which may trigger these added stressors. An overview will be made of these specific tensions and stressors unique to the dynamics of the blended family structure. Some of these distinguishing stressors include the following:

1. Adults and children have experienced important losses;
2. Adults and children all come with past histories;
3. Parent-child bonds predate the new couple's relationship;
4. There is a biological parent elsewhere;
5. Children are often members of two households; and
6. Family members are at different points in their individual cycles (Developed from Visser and Visser, 1979).

These areas will be presented to introduce their impact on the blended family.

2.2.1.1 Experiencing Loss:

The formation of a remarried family also constitutes the last stage for the single-parent family. This phase occurs as loss in various forms for the child and the adult. These losses include divorce, which results in the loss of a family relationship, and experiencing a loss of daily

routines, symbols, traditions and continuity. A resolution of such losses may take many years as the individual may have to overcome the sense of rejection, "unlovability", powerlessness and even humiliation.

These stressors are primarily experienced by alternate family forms in Carter and McGoldrick's phases of divorce, post-divorce, and the first stage of the remarried process (Carter and McGoldrick, 1980). If the child or adult continues to experience rejection it will block the individual's ability to master and resolve such feelings of loss. The child and adult may experience resolution of loss at a different pace; thus, when a parent remarries, the child may not be prepared emotionally for the new transition. The child may have engaged in magical thinking and fantasies for his/her biological parents to reunite. This concept was portrayed in the 1960s movie, "The Parent Trap", in which the children manipulated their parents to reacquaint and ultimately reunite. Much closer to reality, however, is the situation in which the child must learn to deny his/her fantasies for the family's reunion. This realization typically begins with the remarriage of the parent.

2.2.1.2 The Influence of the Past:

With the constitution of the blended family there exists different memories and past histories for each family member. New members come together carrying excess 'baggage' of their former families. As Visher and Visher (1979) point out, "the baggage is heavy and anything but a matched set of luggage" (p.136). Parents and children must find a place in the new family for themselves and their baggage which often means members plunge without first negotiating roles, rules and traditions. Often the child feels displaced and devalued when duties, that had been his/hers in the single-parent family, have been taken over by other family members. Families may have a tendency to cover over conflicts in fear that their communication will create further pain and separation (Carter and McGoldrick, 1980, pp 265). Initially the household of the blended family does not feel like a home -- nothing is considered real and consequently there is little support toward establishing bonds between household members. There is a lack of common history and therefore a lack of common culture (Goldner 1982, pp 195).

2.2.1.3 Parent-Child Bonds Predate the New Couple's Relationship:

One of the greatest stress-inducing elements to the merging family is that parent-child relationships predate

the new couple's relationship. As the new couple attempts to form a solid bond and forge a new identity, the children, uncertain of their own position, may feel jealousy for the time the parent now spends with the new spouse. Visher and Visher (1979) posit that what was once time spent in a strong parent-child relationship is now time shared in developing the spousal subsystem. Children may begin to cling to their custodial parent for security in their adjustment process and may demand more attention than previously.

2.2.1.4 There is a Biological Parent Elsewhere:

As biological parents, the new couple may feel guilt as biological children may be living with the ex-spouse, while the stepchildren reside with them. Parents may feel pressure, from their family and from the biological children, to spread their full attentions across the board resulting in their feeling drained, with no attention available for their partner or themselves (Goldner, 1982).

Part of the stressful emotions occurring in the parent-child relationship is created from the probability that one of the child's biological parents is elsewhere. Even if the parent has died, the influence of and loyalty toward that parent remains. This element affects the present behaviours of the new family members. When both parents are still alive and available to the child, there

may be a great strain in sharing parenting and it may be difficult for the children to share parents. All members must learn to juggle their attention between different family members and households. As the situation in general produces much pain and insecurity, it becomes very difficult to find balance in the new family. Each biological parent may experience a sense of helplessness and lack of control with regard to the ex-spouse and the involvement with the children. As stated previously, children may attempt, consciously or unconsciously to reunite their parents, even after the formation of the stepfamily (Visher and Visher 1979).

2.2.1.5 Two Homes For One Child:

With parenting often being shared, the children become members of two households. If the parents are able to work as a team of jugglers settings some understanding for the child's movement between homes, the change could occur rather easily. If this is not the case, difficulties between the biological parent will increase stress in the formation of the new merging family. As well, there exists a sense of competition between the households. In the parents' war, the child may be triangulated and experience the sense of torn loyalties (Sager et. al, 1983). While this is a stress for children in single parent homes, it remains as a weighted issue, and a factor in the triangulation that often occurs in blending families.

Each home has different schedules, physical space and rules for the members. This creates an inevitable adjustment period for the child moving back and forth. Some children suffer a temporary culture shock with each visit. The child's reaction to the home will affect the moods and behaviours of all family members as they will influence his comfort level.

2.2.1.6 Different Family Developmental Cycles:

In bringing two families together as one, there does not appear to be an orderly progression from the marriage and honeymoon phase to the rearing of children, to their departure and so on, as there is with biological families. Each single-parent family may have been experiencing different stages in their pre-remarriage which must be integrated within the process of forming a new family. The marital couple stage is compressed significantly since the children are there from the beginning. The individual member's personal stages may be non-complementary with the spouse's and family integration stage. This results in clashes between differing stages all competing with one another.

The aforementioned stressors have been reviewed following the discussion of Carter and McGoldrick's second stage for blending families. The author has chosen to illustrate them at this point in the discussion because they are predominant

features affecting blended family's adjustment and integration. These stressors may be experienced by families in varying degrees and at different times throughout the stages; their presence is entwined with the family's transition. Having presented these stressors, the discussion will return to the final stage of Carter and McGoldrick's blended family process.

Within the last stage, Remarriage and Reconstitution of the Family, the remarried couple achieve an attitude in which they relinquish the attachment to the previous spouse and the ideal of the traditional family form. They must achieve acceptance of a family model with permeable boundaries. Thus, the issues of this final stage involve extending the family boundaries to include the new spouse and step-parent and facilitating realignment throughout the subsystems to permit the involvement of a greater network. These systems include relationships between children and all biological parents, grandparents, and other extended family members. To enhance the integration of the remarried family, sharing of memories and histories should occur within family relationships. Once the new family has been together for an initial period Kleinman et. al. (1981) state that all members desire the establishment of firm and supportive relationships within the framework of evolving generational boundaries and incest taboos. Areas of ambiguity are issues of membership, space, authority, and

time in which change is always occurring. The blended family must develop great flexibility to allow the expanding and contracting of its boundaries.

Papernow (1983) suggests that McGoldrick and Carter's developmental schema brings us firmly to the middle stages yet they do not soundly describe the 'Resolution Stage'. In this phase, Papernow suggests that the blended family after experiencing a life together, develops patterns of nourishment in the step-relationships and the stepparent role becomes firmly established (1983).

2.3 SPECIFIC ISSUES FOR CHILDREN OF REMARRIED FAMILIES

While the event of remarriage for the adults is considered to be an important gain of a relationship, for the child the remarriage may represent a loss of that intimate parent-child bond of the single-parent structure. The child must now share the parent with another individual which constitutes a loss of some of that parent-child closeness. During this experience, then, the reactions and issues for children are quite different from the adult. Some of these were described previously as stressors of the remarried family system. However, they must also be recognized primarily as the major issues for the children. The basic experience of the child in the newly remarried family includes the following difficulties:

1. dealing with loss
2. divided loyalties
3. where do I belong?
4. membership in two households
5. unreasonable expectations
6. fantasies of natural parents reuniting
7. guilt over causing the divorce
8. adolescent stepchildren (problems with identity and sexuality) (Visher and Visher, 1979, Ch. 10)

As the first five areas were previously expanded upon, a brief explanation of these latter areas will be made.

Consciously or unconsciously, children often maintain the fantasy that their natural parents will reunite even after the remarriage of both. The children will have many questions about the confused experience of remarriage. The parents need to provide information repeatedly that the old family structure is finished and a new family pattern is being established. This may be very difficult for the parents as the children may interpret even the simplest civil gesture between natural parents as a sign of their desire to reunite.

As children often feel responsible for the divorce of their natural parents due to their misbehaving, children in the remarried family place a great deal of pressure on themselves--worrying that they will be responsible for the breakup of their parent's second marriage. These feelings

of guilt may engender feelings of resentment, sadness and anger, which parents and stepparents find hard to grasp. This is a difficulty particularly found with latency age children.

2.4 VARIABLES IN CHILDREN'S ADAPTATION TO REMARRIED FAMILIES

With the event of remarriage, children are confronted with changes in their lives which are difficult for them to comprehend. They learn to react and handle the experience in different ways. Some may be able to verbally express their feelings, while others act them out in behaviours which are problematic to the family. Still, others may not overly show their emotions but carry them within which may also impact on their views and lifestyle. As well, a child may attempt to find security and love in the new remarried family and may often show this through behaviours such as manipulating parents and stepparents against each other when given the opportunity (Stollman 1983, pp 41-42).

The success with which a child may adapt to the new remarried family is dependent upon many factors. Some of these factors include: intrapsychic variables, developmental stage, interactional and environmental factors (Sager et al., 1983, p. 232). In the following discussion each of these areas will be reviewed briefly.

2.4.1 Intrapsychic:

A child's unique personality strengths and weaknesses have a profound effect on his perception of the remarriage and his position and impact on this situation. His own intrapsychic dynamics define and limit his alternate methods of coping with this new family system and the changes in his own life.

2.4.2 Mourning the Loss of the Original Family:

If a mourning period is completed for both the parents and children of the original family, this will facilitate the child's ability to adapt to the blended family and gain from its membership. If during the single-parent family period, the child and custodial parent developed an intense bonding, it may be very difficult for the child to loosen up and create room for a stepparent and step-family (McCubbin and Figley, 1983).

Based on clinical practice, Sager et al. suggest that single-parenthood after divorce should last at least one year, but no more than three years. This time frame is given in order for the mourning process to occur and passage to the remarried family be clear (Sager et. al., 1983, p 233). It should be noted as well, that the process of mourning for children may take a greater length of time than for the adults who were more aware that separation would

occur. Taking this into account it is difficult to pinpoint where specifically this issue fits in Carter and McGoldricks developmental schema. Rather, it appears to be a predominant stressor at the entrance of the Divorce, Post-Divorce, and Remarried phases. It may also resurface at the final stage of remarriage and reconstitution.

2.4.3 Developmental Stage:

A child's ability to adapt and integrate into a second family has been related to the child's age (or developmental stage) at the time of the remarriage (Wallerstein and Kelly, 1976). While adolescents are considered to be at a particularly difficult stage, integrating younger children into a remarried family is considered to be relatively easy. The child's adaptation to a new family form is related to the child's ability to cope with divorce. For this reason, reactions to divorce and remarriage will be examined as one.

(i) Preschool Children's Reactions to Divorce and Remarriage.

For the infant, if close contact with a careparent is maintained, the infant will experience very little disruption. With the preschool child, there is the occurrence of "magical thinking"; the child wishes something to happen and when it does occur, they feel responsible, i.e. an upset child may wish that the parent would disappear or go away.

For the child of this developmental stage, divorce and remarriage are often confused and both are associated with loss. Mourning of loss often takes much more time for the preschool child than it does for the adult, thus, it is important that the parent and stepparent maintain a supportive relationship allowing for the child to express her feelings (Visher and Visher, 1979, p 183-184).

(ii) Schoolage Children's Reaction to Divorce and Remarriage:

For children six to twelve years of age, fantasy is common. Children may believe that the divorce and remarriage occurred because they were bad and unloveable. It is important that parents and stepparents reassure children that they should not feel any guilt because the divorce and remarriage did not occur because of them. This is one way of including the children in the planning of the blended family. As peers are very important during this particular stage, children often feel uncomfortable and ashamed to be a stepchild. Consequently, these children need to be informed and reminded more than once of the many stepchildren in the world, to re-establish and build their sense of self esteem. Again, it should be reiterated that these issues may resurface with new developmental transitions so parental support will also have to continue (Visher and Visher, 1979).

(iii) The Adolescent's Reaction to Divorce and Remarriage:

While it was stated previously that younger children adapt relatively easily to the remarried family, this integration becomes much more complex with adolescents. It is complex because an adolescent "is expected to be giving up the role of the child but is not yet expected to have integrated the tasks required to assume the role of the adult" (Sager et. al., 1983, p 248). It is particularly difficult to establish the new family relationships with teenagers. Wallerstein and Kelly's work (1980) stated that adolescents recover from the experience of separation and divorce much better than younger children; yet they often have the most difficulties being accepted into the remarried family household because they require freedom to move in and out as they individuate. Developing a sense of identity is one developmental challenge during adolescence. This discussion will now focus on some of the developmental tasks of teens in remarried families. As Sager et al. (1983, p 249) have described, "the experience of being an adolescent in a remarried family is different from the experience of being an adolescent in a nuclear family". The following is an overview of Sager et al.'s work in this area (1983, p 249-253).

If the adolescent has had a stable home environment, it is likely that she has accomplished her previous developmental stages. If there was discord and disruption in the nuclear family (i.e. separation, divorce and remarriage), the preadolescent tasks would have been more

difficult to master since in latency-age the child may have had inappropriate roles. The parents can help the child by encouraging expressions of feelings and fears of abandonment.

The adolescent now begins to take on an adult role in the family. This becomes a double beginning role (defined by Joseph G. Moore), as there is the beginning of the adult role; there is also the beginning as a new member of a remarried family (Sager et. al., 1983, p 251). This is difficult for the parents and stepparents as one beginning requires the child to move away from family somewhat and the other requires her to become more involved with family. Parents need to integrate the adolescent into the remarried family as an adolescent and not as a child. The remarried suprasystem has a responsibility to assist adolescents who are having difficulty adjusting to the blended family.

At this next stage, a teenager begins to integrate traits of her natural parents that she sees as being good or useful. However, in a remarried family, traits of the non-custodial parent often have negative connotations which places the teen in a loyalty conflict of wanting to please both bioparents. In this situation the adolescent also has step-parents to identify with, providing greater options, but also confusing her further. During this stage parents need to gain realistic images of the other parents involved with the teen -- knowing that the adolescent will need to

identify with significant adults. Positive identification with significant adults should be encouraged, rather than negative identification (Sager et. al, 1983)(Stollman, 1983).

Another task of adolescence involves beginning to establish adult negotiating skills, further developing the ability to empathize, and gaining mastery over intense feelings and impulses. Most adolescents have mood swings, however, for the adolescent in the blended family, these become complicated with loyalty conflicts and engrained abandonment fears (Visher and Visher, 1979). As well, parents and stepparents may find it more difficult to accept the angry emotions and criticisms of the teenager because of their own unresolved guilt. Parents need to clearly define the expectations, rules and roles for their family and help each other resolve their feelings of guilt.

The final adolescent task to be discussed is the psychosexual growth of the adolescent from oedipal feelings toward psychosexual relationships with peers. In the single-parent system the adolescent may have had a sexualized bond with the parent of the opposite sex making this adolescent task more difficult. In the remarried family, the adolescent may experience a sexual attraction to the stepparent which can inhibit the achievement of the psychosexual growth of the adolescent. If stepsiblings of the opposite sex reside in the same home, this could confuse

a teen about incest boundaries and promote sexual activity within the home. The remarried family needs to set limits and boundaries around acceptable and unacceptable sexual behaviour; and understand that sexual fantasies about other family members are natural and not the same as action (Sager et. al, 1983).

Further discussion of adolescents in remarried families will be addressed in "Intervening With Blended Families". For now, the focus will return to other variables in children's adaptations to remarried families.

2.4.3.1 Which Parent in Which Household Remarries

Adaptation of the child is also affected by which one of the natural parents remarries. The most complex situation exists when both parents are custodial. It has been suggested that it is a greater adjustment when the custodial parent remarries, thus, with both parents remarrying the child could lose all sense of stability in life. Yet, regardless of which parent remarries there may also be an impact on the single-parent subsystem, therefore, the young person's relationship with both parents may be temporarily altered (Visser and Visser, 1979)(Stollman, 1979)(Sager et. al, 1983).

2.4.3.2 The Relationship of the Bioparents

Children's adjustment to remarriage is facilitated when bioparents are civil and cooperative between themselves and with stepparents. The child needs to gain permission to become an active member of the remarried family from both natural parents, otherwise the child may experience guilt and loyalty conflicts. The child may feel disloyal to her single bioparent when she enjoys and spends time with her stepparent (Kleinman et. al, 1979).

2.4.3.3 Stepsibling Subsystem

Those children related biologically may, after separation and divorce, become very loyal to one another and become much more emotionally dependent on their relationship with each other. With remarriage this subsystem can facilitate or inhibit adaptation to the new family. For the stepsiblings who may have known each other previously there may be a change in their roles, and friendship, particularly in competition for adult attention and love (Kleinman et al. 1979).

2.4.3.4 Life-Cycle Conflict

The potential for life-cycle conflicts in the remarried family exist at several levels. There exists the individual developmental stages of the adults, the children and the family lifecycle of the remarried system. With the new couple having just been married, they can easily be preoccupied with their own relationship and overlook the needs of their children at specific stages. Children may look elsewhere to meet their needs, i.e. their peer cultures, or make themselves more noticeable to their parents through acceptable or unacceptable behaviour. The child may then become the scapegoat in a remarried family system where the adults experience couple problems (Sager et. al, 1983).

2.4.3.5 Other Variables

There are many environmental factors that impact on the children's adaptation to the remarried family. These may include cultural values, religious beliefs, financial factors, geographic location, extended family, or peer groups. In remarried families there may be differences in culture, religion and socioeconomic status. These must be respected and accepted for the home environment to be favourable. In some situations this will be difficult for parents as they may have to alter their expectations of how their children will be raised. When remarried couples

disagree on child management, the biological parent may choose to cover over the conflict by keeping to herself so as not to threaten the marital unit. This however, may lead to a continuance of the child's behaviour and the child may not listen to the stepparent because he or she "knows" the natural parent does not agree (Mills 1984 p 366).

If the parents were not in an equivalent financial position, children may experience inequality. This inequality could enhance competition, defensiveness and negative feelings toward themselves, their stepsiblings and parents. As well, if the extended family is not in support of the remarriage, the children may suffer through the loss of these important intimate relationships. If the child maintains involvement with unsupportive extended family their approval may be required before a comfortable integrating into the remarried family is made. If children are forced to disengage from other supports such as school and friends, because of geographic relocation, they may be very resistant to accepting the changes in their lives.

With this enlightened perspective of the variables colouring children's adjustment to remarried families, the therapist working with these children may be able to focus in on each client's problematic area more clearly. Consequently, the therapist may then gear specific treatment modalities and interventions accordingly.

At this stage of the discussion possible problems for the blended family have been suggested. To elaborate further, other stressful areas may include a sense of "outsiders versus insiders" where the spouses' biological families side with each other against the "other" spouses family. Such a dynamic may be an instigator for further issues of boundary and power disputes, and rigid unproductive triangles. There may be the sense of conflicting loyalties for spouses with their children and their spouses children; or, the children may experience loyalty binds between their stepparent and their non-custodial biological parent.

In reviewing the developmental process of merging families it becomes apparent that they face the almost impossible task of forming a family. The blended family must function as though it were a family that had been together as long as the age of the oldest child; in reality, the blended family has the dynamics and structure, similar to that of a family just starting out (Goldner, 1982).

From this discussion it should be clear that the merging of two families is an inherently disorganizing experience even for the most adaptive individuals. Although it is a disorganizing experience, The blended family process has advantages of providing additional family relationships and developing in an idiosyncratic manner that best suits the needs of its members specifically (Mills, 1984 p. 369).

As blended families struggle through the phases of remarriage they may encounter problems such as those which have been previously mentioned. The next chapter expands on these problematic areas by elaborating on the stress experienced by the blended couple and addressing therapeutic interventions that incorporate the unique nature of the blended family.

Chapter III

INTERVENING WITH BLENDED FAMILIES

3.1 THE COUPLE

In the blended family, the adult subsystem must work together not unlike experienced acrobats in the circus. The stronger acrobats (parents of a family unit) form the base from which the trainees (children) balance and risk marvelous feats. If the base is strong and can withstand the strain of the young dare devils the act will be successful as they are able to launch their talents.

3.2 STRESSORS AFFECTING THE REMARRIED COUPLE

In blended families, the base, the strength of the couple relationship is most important (Visher and Visher 1979) (Sager et al., 1983) (Wald, 1981) (Carter and McGoldrick, 1980). While the previous chapter discussed the variables for children's adaptation, the couple subsystem experiences variables as well that affect their bonding process. pressure form extrafamilial sources or parent/child relationships may be influential in establishing or deterring a strong cohesion within the couple subsystem Visher and Visher (1979) list several external and internal

pressures playing upon the remarried couple which will now be presented.

3.2.1 External Pressures:

In evaluating external pressures it is important to return to the couples first marriages. The custody and parenting arrangements may prove to be a source of additional stress if satisfactory settlements have not been reached. Alternately, when considering the parenting responsibilities maintained by stepparents, another factor heightening anxiety is the lack of legal rights extended to the stepparent in regard to her spouse's children. Stepparents are not considered legal guardians which often results in stepparents feeling entirely unrecognized (Visher and Visher, 1979, p. 128). Many social and community institutions have yet to adjust their structure to include the stepfamily. Churches, schools and children's organizations fail to recognize the stepparent's role and this adds strain to the remarried couple's alliance.

In the immediate family environment anxiety is manifested by moving into the partner's home and neighborhood. The new partner is typically viewed as an outsider and compared unfavorably to the former spouse. The partner in his home and neighborhood may feel torn between his friends, comfortable surroundings, and his new spouse.

Reactions from the in-laws and extended family may provide the most difficulty for the new couple in bonding as these relationships. Visher and Visher (1979) quote couples who state that their mothers have disowned them or in-laws have ignored them even after several years (Visher and Visher 1979, p. 125). These external pressures compound and intensify the common internal pressures partners may experience in recoupling.

3.2.2 Internal Pressures

An examination of the internal pressures reveal that Due to their past relationships both men and women enter the second relationship with excess baggage. A woman's expectations of herself may be heightened in reaction to her fear of failure for the second time. Her security has been shaken in the past and once again is threatened as she encounters an unfamiliar role. These internal pressures may increase her competitiveness with the previous spouse and may distance her from her partner over time. In addition, males also feel the pressures of inadequacy and competitiveness in the new role. A new male partner may possess unresolved guilt over ending a former marriage and connections with the first family. Consequently, the second marriage or common law relationship has a turbulent beginning.

Internal pressures may also surface through practical differences in lifestyles. In the previous chapter, as a stressor for blended families, it was mentioned that members must reach a manner for daily routines in which one member's way does not interfere or directly go against another's routines. The author is reiterating this concern again because it is most crucial in the adult subsystem as their development of unity is dependant on a "goodness of fit" in their daily practical matters. It should now be apparent that in attempting to develop a couple unity the remarried couple experience obstacles they must overcome from within themselves and limitations from the outside.

3.2.3 Intra-Couple Pressures

Apart from the aforementioned issues; remarried couples also experience unique decisions that create added strain to their bonding. Sager et.al. (1983) suggest that these areas of conflict may arise for the new couple once the couple relationship shifts toward the second stage of the remarried family process. Often, when a previously married partner has not completed his emotional divorce competitiveness and possibly jealousy are common reactions from the new spouse. In very implicit ways some previously married partners organize social events (apart from the "milestone" events) that include both spouses to ignite insecurity and jealousy in the present spouse (Sager et.al. 1983, p. 202).

Alternately, the former partners may experience irrational emotions due to a lack of emotional resolution. Consequently, the former partners may 'play havoc' on the new relationship to keep the new couple from enjoying life after creating so much pain for the spouses left behind. These triangles with former spouses may also be the result of a new spouse's insecurity in one's 'sense of self' and the new role in the blended family.

Regardless of their initiators, these triangles have a detrimental affect on the manner in which new spouses relate to each other. With such dynamics in action the goal for a strong trusting alliance between the remarried couple may never be adequately achieved. The lifecycle stage at which the transition to the blended family occurs also has a profound effect on the strains the new couple may experience. Carter and McGoldrick (1980) suggest that the wider discrepancy between the developmental level of the spouses, the greater the difficulty of transition to remarriage. This may be exemplified with a blended family where the husband with children marries a young woman who has never had children. His new wife may be expected to undertake a major role in the children's successful upbringing while the formation of the couple relationship is continuously given second priority. However, on the other extreme, if the young wife insists that her focus on the couple relationship is given top priority continuously, there will be difficulties as well.

It may appear then that the best union would be one which occurs between spouses in the same phase of the developmental lifecycle. In such a blended family, partners would have similar tasks, responsibilities and experiences. However, even this pairing of has its drawbacks. The emotions of this phase may be intensified and parents may become "swamped in a competitive struggle that stems from the overload of tasks and concerns" (Carter and McGoldrick, 1980, p. 274).

Sager et. al. (1983) also suggest that another issue for conflict may be the decision to have a child together when one partner has already had children and the other has not. These partners are at different stages developmentally and if it is the woman who has gone without children, often she experiences pressure to have children before her biological clock expires. Alternately, if the woman has experienced a "baby stage" she may feel that another child would be a great obstacle in allowing her to meet her goals of a romantic intimate spousal relationship and desired career. couples often explain that although they had made a decision previously, they find that their decisions alter with the evolvment of the relationship. A decision to have a mutual child has the power to further develop or destroy any intimate bond the new spouses have developed (Sager et. al. 1983, p. 199). In one aspect, the new child may present as a joiner between the two families, however, at another level this child may become an instigator for loyalty conflicts

and an object for rivalry with the other children (Kleinman et. al. 1979, p. 85).

In blended families, quite often there also exists financial conflicts. Problems with money may vary and may present as an obvious strain when there is not enough income to comfortably accommodate all blended family members, non-custodial children and exspouses. Women in blended families may resent the fact that they have relinquished their careers to organize and maintain the larger home to aid the children's adjustment.

When both partners have children it becomes a struggle treating all the children financially equal. It may be that the spouse who is making the most money spends a significant amount more on the biologically related children than on the stepchildren. For the spouse whose biological children live elsewhere, a sense of guilt may pervade his establishment of a nice home for his new blended family when he cannot provide this luxury for his natural children. Another variation to this conflict of finances is the elderly remarried couple who are deciding on the distribution of assets for their will. Discontent between the spouses may arise when assets are unequally distributed between the two sets of children.

Another special issue which was illustrated earlier refers to the fear of failure experienced by blended couples. With this being the couple's second attempt at a

"successful" relationship, anxiety is heightened through worry over failing the second time as well (Kleinman et.al. 1979). There are two disruptive routes often taken by couples in reaction to their fear of failure. One approach is to "manufacture a sense of togetherness". The couple needs to be a "happy family" right from the start; however, this pseudomutuality may actually facilitate alienation and a sense of falseness which already exists in the situation (Goldner, 1982; Goldstein, 1974; Carter and McGoldrick, 1980). The second approach of many blended families is to actively resist the process of blending which results in two separate families sharing the same household but never building a home (Goldner, 1982 p. 199).

This discussion of issues for remarried couples is not exhaustive. Purposefully, The author has delayed discussion of one of the most common complaints of blended couples, that of differences in parenting and stepparenting. AS Previously mentioned, the parent-child relationship predates the couple relationship; hence, the couple's bonding may hinge on the relations between the stepparent and child. This problematic issue will be addressed as consideration is given to working with the entire blended family. However, other blended couple concerns, previously mentioned ought to be dealt with by the couple subsystem alone and will be discussed at this point.

3.3 WORKING WITH THE BLENDED COUPLE

Therapy may be conducted with joint sessions of both spouses and may include individual sessions for one or both partners. One or two individual sessions would provide the couple with the opportunity to elicit negative feelings about the other or discuss situations which may be embarrassing to share. The individual interviews may sift out any hidden agendas of each partner and allow for the sharing of secrets which have been kept from the spouse, i.e. present extramarital affairs (Sager et. al., 1983).

When couples in blended families are displaying discomfort with the issues previously discussed therapists need to address their concerns and set the stage for an open discussion to occur for partners to share their fears, guilt, anger and reasoning. Working toward some resolution, even agreeing to accept the disagreement, assists the couple in moving emotionally closer and establishing some unity.

3.3.1 Assessment of the Blended Couple

It may be very difficult for remarried couples to express their concerns about their relationship; however, a detailed assessment of the blended family couple is crucial. Sager et.al. (1983) suggest the following as areas for exploration:

- expectations of new partner as spouse i.e. responsibilities, roles
- relationship between exspouse and current spouse

- expectations regarding money and responsibility for financial support
- expectations regarding closeness/distance, autonomy/dependence
- differences in where each spouse is in his or her individual lifecycle and their willingness and ability to fulfill an appropriate role in the marital and family life cycles.
- anxieties about another marital failure and how these are handled or denied. How the partner reacts to these fears.
- exploration of the couple's satisfaction with their sexual relationship
- fears of loneliness or abandonment.
- how the former relationship impedes on the present transferential-like reactions from the former spouse to the present one.
- differences and similarities in the individual contracts and interactional contract in the present and past relationship (Sager et.al. 1983 p 207).
- length of marriage
- time separated from ex-spouse

Attaining information about the partner's previous marriages is a great asset for the therapist in understanding the dynamics of the remarried couple. Assessment should ascertain how couples view their new spouse as compared to the former spouse. The therapist must be aware of the great intrusion psychologically, that the former spouse has on the new couple's bonding. "What the new spouse does vis-a-vis the former spouse affects the current pairing" (Sager et.al. p. 216).

3.3.2 Intervention with Blended Couples

The inability of remarried couples to tolerate and reach a satisfying resolution in the above mentioned areas spirals the pain and friction they will face as time passes. Many will find it to be too great a feat to untangle the difficult situation. For the couples who seek assistance, clinicians must organize these struggles and clarify the expectations each partner has for the other -- those they are aware of and those that are unconscious. The remarried couples have become lost by using past patterns of functioning in the complex and unknown frontier of this confusing family structure.

After assessment of the developmental tasks therapists may need to assist spouses in achieving a true emotional divorce from the previous relationship complete as possible for their unique situation. Therapeutic efforts may then properly address the present relationship with an overall goal of arriving at and maintaining a strong couple alliance in the newly married couple.

The therapist working toward this overall goal may choose a particular intervention that incorporates many of several techniques. Some of these techniques are briefly outlined as follows: contracting with the remarried couples in order to orient the therapeutic work to their problem areas; drawing the couple's attention to how their past

relationship constitutes, an integral role in the problem areas; and educating the client of the problematic issues common in remarriage (Sager et.al. 1983) (Visher and Visher, 1979)(Wald, 1980).

In intervention, the couple should begin to recognize that the strains are not unusual for their situation; the therapist can begin to stress these as non-pathological experiences and normalize the couple's encounters as part of the blended family process. Acknowledging the different stages of the blended family lifecycle assists couples in being tolerant of their partners desires and tasks. The educating component of therapy allows the therapist to demyth beliefs of the nuclear family ideals, instant love, and the wicked stepmother (Wald, 1981). the therapist focuses on helping the couple build tolerance and acceptance for the complexity of their new family situation by devising tasks to alter behaviours and aid in establishing the rules for their functioning as a unique blended family.

To complement family therapy or by itself, group therapy is recommended for many couples (Sager et.al. 1983)(Visher and Visher, 1979). some therapists prefer that a couple have a few sessions in conjoint therapy first, however, it is not a prerequisite. (Sager et.al. 1983) suggest that group work may be a useful approach for releasing couple's in dead locks which couple therapy could not resolve. "The group process can take some of the heat out of issues as

well as lead to productive problem-solving and the modeling of solutions" (p. 209).

The previous discussion has outlined common problems, areas for assessment and strategies for intervention with blended couples. The complexity for the author heightens as the discussion moves to address the interface where the difficulties of the couple subsystem converge with issues of the entire family system. This may be visualized as the clown riding his unicycle on the highwire from pole to pole a very complex task similar to that of the therapist working with subsystems of the blended family.

The bionuclear family literature suggests that quite often when the couple experience discord it will give rise to discontent in the entire family unit. Children are often referred to social service centres for problems with acting out behaviour which may be a reaction to problems in the marital subsystem (Minuchin and Fishman 1981)(Nichols, 1980).

Richard Fisch (1977) suggests, "Stepfamily difficulties spill over into the couple relationship rather than the reverse" (Fisch in McGoldrick and Carter, 1980 p. 144). At the onset of a remarriage or common law relationship there is a family with children -- possibly two sets of children. couples may have extreme differences in parenting styles and join in conflict to criticize one another as parents.

Commonly, the situation exists where one spouse with children is looking toward the new spouse for a partner to relinquish half of the parenting tasks. The stepparent is pulled into disciplining the spouse's children at the early stages of the blending process which results in conflict for the spousal relationship. Typically, the natural parent feels the stepparent is too hard on the children while conversely the stepparent feels that the children are spoiled by their natural parent.

Conflictual issues regarding children, stepchildren, parenting and stepparenting are systemically related to the couple's expectations of each other, the step relations and the children's adaptation to the blended family. If the control and hierarchy in families is based on the seniority system, Fisch's statement may in essence be true. In bionuclear families the adult subsystem has the greatest history and consequently, authority. In the blended family, the parent-child subsystem has been together longest thus having great impact on the couple subsystem and the new family form. Systemically both subsystems would have profound affects on the entire family unity and in the blended family the couple subsystem does not ascribe the authority position in the new family but must achieve this right. Consequently, the work is slow and hard for the newly remarried couple.

One of the greatest pulls of the blended family integration is the issue of unity versus fragmentation of the new couple relationship (Visher and Visher, 1979)(Sager et.al. 1983)(Mills, 1984). Couples may feel that each partner must love the other's children as much as his/her own. Anything less would be considered heartless. A new stepparent may try to become "Super Stepparent". This action may create exhaustion and a sense of not being appreciated in the new spouse. As well, this new parent's "overtrying" may be quite obvious with over disciplining or being overly nice (Visher and Visher 1979). Being overly nice to the stepchildren may place them in the power position over the new stepparent. One of the greatest strains on the parents and new couple system is to allow the children full expression of positive and negative feelings regarding the parents' and stepparents (Stollman, 1983). The sense of guilt parents may have, appears to be a driving force in many of the couple and blended family issues. Parents may feel the strain from unresolved or unresolvable aspects of the system.

The author has chosen to discuss this issue at this time because the next subject addresses intervention with children of blended families. It is more difficult due to the dynamics of remarriage to segregate couple's work from that of work with the entire blended family and which should then come first. This will be considered as the discussion

progresses to examine intervention with parents and children of blended families.

3.4 WORKING WITH PARENTS AND CHILDREN OF BLENDED FAMILIES

Most frequent problem areas in stepfamilies are the stepparent/child relationship which is commonly related to the precipitous assumption of a parental role for the stepparent (Mills, 1984). While certain specific situations such as domestic sexual assault may require individual counselling for the child subsystem, difficulties of parent/child relations should be dealt with by conducting therapy with the entire family. At times, the therapist may prefer to spend a few sessions with the child subsystem alone to facilitate joining and provide the children the opportunity to share thoughts they may feel uncomfortable saying initially. these sessions with the subsystems alone; however, have the overall goal of enhancing the family sessions and improving the family's functioning.

3.4.1 Assessment

When children are presented as the client; the following areas may be explored in conjunction with areas of the couple's assessment. Depending on the family and couple situation these assessment areas will be given different emphasis and some may be assessed by therapists simply through observation of the system during therapy. These additional areas for exploration include:

- Expectations regarding the spouses relationship with the step children; are these realistic
- children at home, and the inclusion or exclusion of non-custodial children
- how did line of hierarchy change with integration of families
- custody violation agreements
- differences in parenting styles and how these differences are being handled
- the expectations of the role of step-parent. Are these realistic?
- do parents empathize with children or are they received as intrusions?
- family members expectations of remarried families
- involvement with a stepfamily network
- feelings about the period as single parent families
- how has all this affected the individual?
- fighting styles
- living space for children
- differences in parenting styles and how these are handled
- whose house do they all reside in
- identified clients relevant developmental, school and medical history (Sager et.al.) (Axelrod and Mosovich, 1984).

Whatever the presenting problem, it is important to look laterally, as well as backward, and to evaluate current and past relationships to determine the family's need for working out patterns in the new family structure. Families who are also open to include the family of origin in therapy have a better opportunity for achieving the blended family integration (Carter and McGoldrick, 1979, p. 279). The use of a genogram as part of the assessment process is helpful in obtaining information and understanding the legal status of children, parents and partners (Carter and McGoldrick, 1980).

3.4.2 Intervening with the Blended Family

In the jugglers routine, difficulty and complexity are heightened as the juggler manipulates more batons including the two that he began with. This complexity, like that of the juggler's task, exists from the onset of the blended couples relationship and the formation of the blended family. Somewhat unlike intact families, children of blended families may not be simply viewed as innocent bystanders in the formation of the family unit. From the onset of the relationship they have influence on the new couple and the entire family system. Thus, when confronting couple issues, the children's influence must be considered. Alternately, when intervening with children of blended families parents influence should be examined and utilized.

The issues troubling each subsystem are products of the blending process and as a result many can be dealt with in the family context as well. The discussion will now focus on intervention with children and the family unit.

It is apparent that the broader scope for intervention the entire family system as the circumstances and changes in the child's life revolve around the new family structure, relationships, roles and rules. Because the blending process is a great adjustment, intervention often will include family members of both the new system and the original structure. Model type goals for the majority of blended families in therapy include the following: relinquishing the old ideal of the nuclear family and accepting the complexity of the new family structure; establishing flexible boundaries to allow movement of family members in and out of the blended family structure; and maintaining open lines of communication for all family members (Mills 1984). Biological parents need to establish a co-parental relationship and allow children expression of their positive and negative feelings (Carter and McGoldrick 1980).

The therapist's intervention with the blended family actually begins with their assessment session. At this time, the members begin to understand their expectations of each other and they begin to recognize their patterns of fighting and finding alternate approaches to their present

functioning. The therapist may begin to educate the family on the developmental process of the blended family and their own beliefs about stepfamilies. The therapist may then assist the members to recognize each member's necessary developmental tasks and assist them in progressing toward the resolution of their developmental stages (Carter and McGoldrick, 1980)(Axelrod and Moscovich, 1984).

With the added complexity of the stepfamily there is a basic need for support and validation of their experience. It is important to demyth the ideal of the nuclear family so there is not an attempt to invalidate the stepfamily structure (Visher and Visher, 1979). Therapists can draw on their professional knowledge base regarding blended families as well as provide bibliotherapy which includes educational material on blended family issues. The therapist can assist the system in their accepting a new definition and perception of themselves rather than remaining 'a square peg in a round hole' (Carter and McGoldrick 1980). Kleinman (1979) suggests that the child should be encouraged and supported in his relationship with the natural parent outside the household. Parents may need allot of assistance with this task as they may protect themselves from the loss of the first relationship by reinforcing a negative view of the ex-spouse; that he/she is cruel and worth being rid of. Parents may complain of the other's parenting in a competitive manner. In these situations, parents are

instigating and maintaining a loyalty conflict for the child (Kleinman et. al., 1979).

Therapists may assist in resolving children's loyalty conflicts helping the parents to accept that it is okay for children to have two sets of rules and two households. Acceptance of the two homes can be facilitated in therapy with the blended family; members of each original family unit can share memories from their past to consolidate the blended family. In this manner, the pasts of these members become part of the blended family system (Kleinman et. al., 1979). With the decision to remarry Stollman (1983) suggests that parents should gradually involve their children with the new partner. As the new partner and stepparent, it is important to accept personality differences between oneself and the stepchildren. Together, the stepparent, parent and child can decide how the child should address the stepparent.

When families seek assistance it is usually after they have been together and already set themselves in a problematic pattern of stepparent limit-setting. The therapist will need to persuade the couple, that the stepparent needs to take a holiday from the odious task of enforcing the discipline. The therapist should convince the family to establish new rules and routines for the family members. The couple may be resistant but the therapist could suggest they try it for a week to help them towards

feeling like a family (Mills, 1984). Theorists on the subject of family therapy with blended families provide suggestions for therapists working with parents and children in blended families. In general, the literature has suggested the following:

- Assist the remarried family in achieving a balance of loyalties toward the old family and the remarried family. It is important to the child to maintain some of the previous activities shared with the natural parents.
- Allow the child to express negative feelings and encourage loyalty and relationships with the non-custodial parent. Explain that the stepparent will not replace the natural parent
- In the formation of the new family, encourage the natural parent to handle all matters of discipline. Assist the child in understanding the role of the parent and stepparent.
- Examine your expectations and values as a therapist in regard to the stepfamily structure. Do you view the structure as dysfunctional? Help parents and children in the remarried structure recognize their unrealistic expectations, i.e. expecting the child to love her stepparent instantly.
- For the visiting or residing child emphasis should be placed on making the child feel the new house is their home by making a place for their belongings albeit the child's custodial home or visiting residence. He may feel insecure until he has found a new place in the home.
- Do not expect instant love between stepparent and child. this relationship needs to grow slowly and the adult needs to be positive toward the child (Stollman 1983 p. 48).

Many theorists suggest guidelines for blended family relations (Visher and Visher 1979) (Sager et.al., 1983)(Stern, 1978)(Mills, 1984)(Papernow 1983). These guidelines are organized in the following order: parental limit setting, stepparental bonding, befriending of stepparent and child, negotiation between new partners of the rules for the blended household, and co-management organization of parent and stepparent.

Mills (1984) has provided a concrete model for stepfamily formation that incorporates the natural and gradual development of a stepparent/ child relationship. The model suggests the establishment of strong couple unity to develop executive generational boundaries between the subsystems. Together the new partners consider possible roles for the stepparent. This may require a costume rehearsal in which the stepparent tries on several of the roles until one fits well and the act feels comfortably rehearsed. The roles may be different with each child and may include coach, counsellor, teacher, respected elder, or biological parent.

Through their studies, Walker and Messinger (1979) concluded that the non-parental roles are preferred for the stepparents. Chosen roles are not described and should not be prescribed but developed specifically for each family system. The role and structure agreed upon must be that which best satisfies the individual needs of all of the family members. These roles may change as the blended

family matures. Children should have some input in creating roles however the adult subsystem would make the final decision. If the blended couple chooses the role of biological parent for the stepparent there is a great deal of time and effort required particularly for developing a bond in the step relationship. Electing, the biological parent role may be appropriate for young children but is considered a bad choice for adolescents or when custody of the children is in another household (Mills, 1984).

From the beginning of this family merger the biological parent should be solely responsible for limit-setting in the household. Schlesinger and Derdyn (1979) suggest that the stepparent needs to establish his right to function as a disciplinarian in the blended family household. The stepparent could address child management by saying, "Would you ask the (your) children to ...", or the stepparent acts as a babysitter with explicit rules set by the parent and of which the children are informed. Bonding between stepparent and child needs to be nurtured in developmentally appropriate manners without the limit-setting. The natural parent needs to make room for this bond without relinquishing his/her own bond with the child.

It is suggested that the blending of families will take a minimum of eighteen to twenty-four months for the process of integration. A useful technique in assisting families with their step relations is to use the approach that a

stepparent cannot achieve a role approximating parent until the step relationship has approached the length of years that the child is at the time of integration of families. Consequently, a three year old child would require approximately three years to develop a parent/child like bond with the bio parent's new spouse (Mills 1984). For this reason, in blended families with adolescence the new spouse will never achieve the role of parent.

3.4.2.1 Working with Adolescents in Blended Families:

A trapeze artist learns to swing to and fro between landings risking a fall without a net. Learning this skill is one all adolescents must accomplish. For adolescents in blended families this task becomes more complex. This is due to the polarity of the developmental tasks of the individual adolescent and the blended family developmental process. The latter requires that the members of the household build cohesion with each other while the adolescent's task require his striving toward disengaging from the family as a child and establishing new membership as an adult. Working with adolescents and blended families constitutes a somewhat diverse outlook from that of the blended family with children. The work need not vary greatly from the basic interventions outlined for children

and blended families. The relationship of the adolescent and the stepparent is a sensitive relationship that will be examined including basic interventive techniques for the blended family with adolescents.

When determining the role for the stepparent of an adolescent it is not recommended for the new spouse to wear the role of the biological parent. It would not be fitting with the adolescents developmental tasks to gain another parent at this time and if this should happen integration of the blended family would be delayed (Mills, 1984). A relationship bond will develop comfortably at a moderate pace if the adult is able to gradually develop a "not so overanxious" friendship. This type of relationship could be exemplified with the adult helping the teenager out by driving him somewhere without lecturing him on his behaviour or dating (Mills, 1984).

In having to integrate into a new family structure, teenagers experience the stress of loyalty conflicts and membership in two households just as younger children. Consequently, adolescents need the same kind of help as the younger children (Sager et.al. 1983). This may not be clear to the parents since many parents get confused as to whether the remarriage and integration is an issue for which the teen may be addressed as an adult. Adolescents need to understand the changes as an adult, however, they also need to feel assured that they have a place in the new family.

When the decision to remarry becomes final, the adolescents need to be a part of the integration planning process. The couple should include the adolescent in the decision making process, however, the final decision should remain with the executive subsystem; the couple. The adolescent may need to understand that the new spouse experiences insecurity and a desire for acceptance. As well, in explaining the teen's participation in the new family system he/she must also recognize his/her influence on the new family. Parents may need to show the teen that the new family will require work from each member in the manner of sharing feelings using a positive approach. In this manner, the adolescent begins to acknowledge the aspects and benefits of having two families (Stollman, 1983, p. 53-54).

Part of an adolescent's developmental task includes forming a sexual identity; there is an upsurge of sexual feelings and confrontations of the parent's sexuality (Kleinman et.al. 1981). Incest taboos that may have been clear in the nuclear family now require further definition. Blended family situations may include dynamics of a son's sexual attraction to his new stepmother or to his new stepsister. The therapist needs to explore this issue and provide clarification. The therapist could make comments of how hard it must be for boys and girls who could be dating each other to be living together in the same house (Kleinman

et. al. 1979). The therapist may want to address issues of sexuality alone with the stepsibling subsystem and the new couple subsystem initially, and later address sexuality with the larger blended family system.

Clinicians need to be sensitive to the weakening of the incest taboo in blended families. There is a weakening of sexual boundaries and, "from the most benign to pernicious situations, the issue needs to be explored to that all family members can feel safe (Kleinman, 1983). While family members need to be reassured that thinking sexually about a step relative is normal, it is very different than actively following through with the sexual fantasy. These sexual and generational boundaries need to be redefined and built up (Kleinman et. al. 1979).

The bases of the blended family's difficulties lie with its difficult adjustment to the structure and the establishment of new boundaries. This structure is expected to change over time and will introduce new transactional patterns which may underpin the family system. to intervene at this structural level, it is appropriate to employ the philosophy and techniques of Minuchin's Structural Family Therapy. The basic tenants and techniques of this theory will be the subject for the following discussion.

In Chapter One the author discusses Carter McGoldrick's vertical and horizontal life cycle approach. It is

suggested that the vertical stress (that which is carried on from the past) may be enough to upset the family's homeostasis and present them as dysfunctional. The blended family experiences this vertical stress, it is complicated with the additional horizontal stressors of changes in structure, membership and roles. While the previous discussion has focused on intervention at both the horizontal and vertical axis emphasis will now be given to the use of structural family therapy as it addresses the line of horizontal stress in particular.

3.5 INTERVENING WITH STRUCTURAL FAMILY THERAPY

Salvador Minuchin, a structural therapist, explains that normal families are constantly struggling with problems in living; many seek help while modifying their family structure to adjust to the new situations. Minuchin refers to family structure as being "the invisible set of demands that organize the way in which family members interact" (1974, p. 51). The structure is established and maintained through the family's transactional patterns of hierarchy and complementarity of functions. This focus on structure addresses the horizontal stress in Carter and McGoldrick's Family Life Cycle Model.

Structural therapists view problems as being maintained through dysfunctional family structures, hence the goal for therapy is to modify the family structure in order for the

family to resolve their own difficulties. It is not to create a new family structure, but to activate the functional structure already within the family system. General goals of therapy involve re-establishing effective hierarchical structure where the parent is in charge of the child, and assisting the parents to function as a cohesive executive subsystem (Nichols, 1984, ch. 11).

Structural therapy brings about a change through the essential components of structure, subsystems, and boundaries and adaptation to stress. While structure has already been explained, family boundaries refer to who participates and how, with a function of maintaining and protecting the differentiation of the system (Minuchin, 1974, p. 54). Families are made up of 'subsystems' of members who are joined together to perform various functions.

Adaptation to stress refers to the stressors the family may experience. These may include extrafamilial stress on the family unit, stress directed at one family member from extrafamilial sources, stress from the transitional points in the family developmental process the stress of idiosyncratic problems. Families may experience stress from only one area or stress that has accumulated from all these areas. The blended family's stressors discussed previously relate to each of these areas.

The therapist's assessment of the subsystems, the boundary function, and the adaptation to stress orient his interventions; therapy is directed at modifying the boundaries and re-aligning the subsystems (Minuchin, 1974, p. 56). The actual therapy process is directed at the family's active here-and-now interactions, therefore making it imperative that the whole family be in attendance for assessment. Structural therapy clearly outlines specific skills and techniques for the therapist. Therapists use of these skills and techniques assist families in understanding their functioning and challenge them to create change. The basic techniques fall under the categories of joining, and restructuring.

Joining skills are used by the therapist to develop a therapeutic relationship with the family. The concept of proximity is used when applying the techniques of joining. Choosing a "close" position the therapist forms alliances with family members, identifying areas of pain, and supporting individual members. The family views the therapist "as a source of family and personal self-esteem", confirming behaviours wherever possible and withdrawing approval when the situation warrants (Friesen, 1985, p. 98). From the "medium" distance the therapist joins the family through active listening and tracking (Nichols, 1984). Tracking occurs when the therapist encourages the family to describe their experiences in which the interaction process

is followed interpreted and clarified. From the greatest distance, "disengaged" the therapist views the family's "big picture". From this distance the therapist clarifies their communication patterns noting phrases that are commonly used. The therapist mines the family's style, joining them in their review of reality to later expand it so the family will grow and change (Friesen, 1985 p. 98).

Assessment is part of the joining process at which time the therapist investigates the family's flexibility for change; the structure and types of boundaries. The clinician needs to explore the stressors encroaching upon the family particularly their stage and adaptation in the family developmental process. As well, the therapist should accept the family's view of the problem temporarily and assess the identified patient's problem behaviour and how it is maintained in this family system.

In the efforts to produce change in the organization and function of the family system the therapist applies restructuring techniques (Minuchin and Fishman, 1981). These techniques include Enactment, Reframing, Focusing, Marking boundaries, use of intensity, unbalancing, assigning tasks, complementarity, and adding cognitive constructions (Nichols, 1984) (Minuchin and Fishman, 1981) (Friesen, 1985). Enactment occurs when the therapist elicits transactions between family members or observes their spontaneous interactions to pursue dysfunctional communications and behaviours.

Family systems have labels rules, perceptions and patterns of behaviour that serve as a framework from which they understand and accept significant life experiences. Therapists may apply the reframing techniques to alter a family's perception of an issue, or presenting a problem. Reframing may be conducted by, "verbally altering patterns, myths labels and experiences to present a more positive view" (Friesen, 1985, p. 100). The therapist may also take behaviour that the family has labelled negatively and provide a positive connotation of this same behaviour.

Marking the boundaries is an additional restructuring technique which is useful for regulating the permeability of boundaries between the family subsystems and the larger family unit with the external environment. The boundaries delineate power and authority within the family so that all members have an integral function within the system and the executive subsystem possessing the greatest degree of control. Types of boundaries range from disengaged in which the boundary lines are very rigid and not adequately permeable to unmeshed boundaries in which the lines are not clearly defined and it is difficult to differentiate between the subsystems because the boundary between them is too permeable. A clear boundary describes that which is in the normal range for permeability (Okun and Rappaport, 1980).

Minuchin and Fishman (1981) describe two approaches for reconstructing boundaries. The therapist may verbally

acknowledge the boundary that he observed and indirectly suggest approaches for them to develop new boundaries. Actually maneuvering the space in the therapy sessions manipulates the distance of family members and the subsystems. Moving the seating arrangement in the therapy sessions and physically blocking interactions between family members are other manoevers to restructure family boundaries. Another technique for developing boundaries is the assignment of tasks. Therapists may give the family homework to build closeness between members thus realigning the distance between subsystems (Friesen, 1985, p. 102).

The skill of focusing may be teamed up with other techniques to change the family's view of the problem for work. As in photography the therapist needs to focus in on a particular subject and concentrate all energies on this specific area so that notable change will result in the entire picture. One technique which complements focusing is using intensity. There are different forms of this technique such as Inducing crisis or Escalating stress. In general intensity refers to the degree of impact the therapist's message has in reaching the family's understanding and instigating change. There are different approaches to raising the level of intensity.

During this authors training in Structural Therapy the concept of intensity was described in one form as "Punctuation is the sole of brevity". The trainers felt that is the message was short and easy to understand the

therapist could be more profound in relaying it and clients could therefore have a simpler time understanding it; however, this approach must also fit the style of the therapist. Other methods of using intensity include repeating a question or message, thus pushing the client to respond with deeper issues. The therapist may also repeat a message by having a theme run through all of the discussion in order for the family to acknowledge the scope of the problem.

Often a family's problems may be so consuming that the family attempts to draw the therapist in as well. If the therapist is able to resist this pull the family is forced to reorganize its pattern (Friesen, 1985, p. 101-102). Unbalancing is a technique useful for reorganizing the power hierarchy of the family system (Minuchin and Fishman, 1981). The therapist unbalances the system by employing one or all three of the following methods: aligning with family members, ignoring family members, and forming a coalition with one member or subsystem. Unbalancing the system increases the family's stress level in order that they establish a new hierarchical structure to reduce the discomfort (Friesen 1985).

The technique of complementarity incorporates using the symptom to show how it is interrelated with the patterns of the entire system rather than the individual alone. The therapist may inquire of the identified patient how it is

that other family members maintain the patients' symptom. the structural therapist may convince the family that there is another more emergent symptom that requires attention (Minuchin, 1974). Nichols (1984) defines another structural technique of "Adding Cognitive Constructions" which appears to underpin all of the techniques described thus far. This technique involves using words to perceive the family's view of reality. The therapist may become an instructor using his expertise to advise the family how to function differently. The aim is not to educate but to advance an alternate view of their experiences. Nichols (1984) provides the following example telling children that they are acting younger than their age is effective in instigating alternate behaviour; "How old are you?" "Seven." "oh, I thought you were younger, because when you really get to be seven, you won't need mommy to take you to school anymore."

These techniques for therapeutic change are only examples of the possibilities. Structural therapy emphasizes that therapists develop their own techniques that will fit the therapist's personality and the idiosyncrasies of each family.

Chapter IV

THE PRACTICUM

4.1 SETTING:

This practicum was conducted at The Family Services of Winnipeg Inc. This is a voluntary non-profit organization with its objectives being to facilitate the development of families and individual life in the community and to provide support for families under stress. Their programs included Special

- Needs Family Day Care
- Homemaker Department
- Counselling and Community Service Programs

The practicum work was completed through the Counselling and Community Services Program. In this department service programs varied including:

- family counselling
- couple counselling
- individual counselling
- group counselling
- providing consultation, workshops
information and referrals for specific
needs.

The goal of this department is to assist families, couples, and individuals to enhance their abilities to solve problems. A wide range of issues are addressed some of which are, parenting, marital difficulties, separation and divorce, incest, sexual dissatisfaction being an abused woman or an abusive man and remarriage and blended family life. The staff in this department are experienced professionals with degrees in either Social Work or Psychology. As planned, the practicum began on a part time basis in January, 1986 under the agency supervision of Sara Axelrod M.S.W. supervisor for Groups and Community Services and a primary advisor, Professor Ruth Rachlis M.S.W. School of Social Work. Professor Joe Kuypers D.S.W. was also a member of the advisory committee from the School of Social Work.

4.2 CLIENTELE:

While contact was made with thirteen cases, eight were seen in therapy. This population consisted of three Single Parent Families and five blended families who were either self-referred or came on the suggestion of a physician. Five of these cases had received counselling at some point previously, and for the others, therapy was a new experience. Couples and families were not discriminated in regard to their presenting problem however, four of the five step-families seen reported at intake a need for service due

to stepparent/child relations. The other blended family that followed through with therapy presented with an interest in understanding the complexities of blending families as they had just recently joined their families. Three Single Parent families were seen with presenting problems regarding their children's reactions to the separation and divorce and their relationships with the children now living in the sole parent household. These clients provided the therapist with the opportunity to observe the families experiencing the tasks of Carter and McGoldrick's divorce and post divorce phases.

4.3 EVALUATION OF PRACTICUM FAMILIES:

The FACES III is an evaluation measurement designed to obtain both perceived and ideal family functioning. To conceptualize a family's functioning, Ohlson, Russell and Sprenkle (1979,1980,1982 and 1983) incorporated numerous theories to develop the concepts of family cohesion and adaptability, and integrated these into what they call, The Circumplex Model. Family cohesion refers to the emotional bonding that family members have toward one another. This is measured by the dimensions of emotional bonding, boundaries, coalition, time, space, and decision-making. Family adaptability refers to the ability of a marital family system to change its power structure, roles and rules in response to situational and developmental stress.

Adaptability is measured by concepts of family power and control, roles, rules and negotiation styles.

In this model, cohesion is rated on four levels from low to high: disengaged, separated, connected and enmeshed. Adaptability is also defined by four levels ranging from extreme low to extreme high: rigid, structured, flexible and chaotic. It is assumed that families at the extremes of both dimensions will tend to have more difficulties coping with situational and developmental stress. Balanced levels of cohesion are "separated" and "connected"; balanced levels of adaptability are "structured" and "flexible" (Ohlson et. al, 1985). These researchers suggest that families at the extreme levels will function if all members like it that way; however, their basic hypothesis suggests that extreme levels of either cohesion or adaptability is dysfunctional. This author questions which family form is Ohlson et. al, referring to in defining the term dysfunctional? The discrepancy between the perceived and ideal functioning represents family member's satisfaction. The closer together the scores are, the more satisfied the family should be. As well, the ideal provides direction for areas of change. Ohlson, Portner and Lavee report very good face, content and construct validity. As well, reliability, internal consistency and test retest reliability scales are generally good (Ohlson, Portner Lavee, 1985). The primary objective for using this measure with these practicum

families is twofold: The therapist is looking to find positive change from the pre and post tests for each family unit seen in therapy; the therapist would like to determine the usefulness of the Faces III as a evaluative tool with blended families.

4.4 THE CASE STUDIES:

During the clinical aspect of the practicum, the therapist had the experience of integrating the newly acquired knowledge base of the blended family with the practice of working with blended families experiencing difficulties. Of the eight families seen in practice three cases will be presented all of which are blended family forms.

While three single parent families were seen in therapy none were presented as a case study. The therapist found that the blended family forms often possessed unresolved tasks and issues dating back to the single parent family phase. This information was included as their problems for work. Consequently, the single parent family forms were not reported in the case studies.

While the studies are not exhaustive, relevant material has been extracted to illustrate the blended families' experience and the possible interventive techniques which may be employed.

Chapter V

THE BROWN FAMILY

This common law couple consists of Steve, a previously married mature man of forty five years who has two adolescent children (Sandra fifteen years old and Pete eleven years old), and Kitty, a previously married woman of thirty one who is presently childless. Both partners are very career oriented and successful at their professions.

5.1 REASON FOR REFERRAL

Kitty sought assistance from our agency initially because she was having difficulty "fitting in with" Steve and his children and was becoming rather jealous of their time together. Steve's teenagers resided with their mother in the city but stayed with their father and Kitty every second weekend.

5.2 HISTORY OF PRESENT DIFFICULTY

Steve and Kitty moved in together nine months ago and Kitty reports feeling neglected and isolated from Steve due to his intimate bond with his children and her discomfort in relating to them. Because of their demanding careers as business professionals the only time this couple has to

spend alone is their weekends. Kitty feels that since they have began living together she has had to give up her time with Steve so that he can have time with his children.

5.3 HISTORY OF PAST SIGNIFICANT RELATIONSHIPS

Kitty described how she had married her best friend Pat, a Mennonite farmer in an effort to please her mother who was dying of cancer. They were married approximately two years before her mother passed away and Kitty divorced Pat. Kitty felt that their marital difficulties were a result of her not having the proper feelings toward him. Kitty met Steve while taking a summer course just after her mother had passed away. Their relationship grew out of their great respect for eachother's talent.

Steve, a native of Australia, was previously married to a woman from China. Steve reported that his ex-wife had a very difficult past which made her insecure; this, compounded with their cultural differences caused their marital difficulties. Steve and his wife posessed very different parenting styles which resulted in their marital discord. During their last five years together Steve would not have sexual relations with his wife and made plans to move out. It was while he was still living with his family that Steve began his relationship with Kitty. Now Steve is in the process of divorce and he speaks to his wife only when she calls for assistance or for legal concerns.

5.4 HISTORY OF PRESENT RELATIONSHIP

Steve and Kitty saw one another secretly for approximately a year, into 1984 while Steve remained at home and his wife completed her teaching degree. Steve and Kitty saw each other on weekends once Steve moved to his own apartment yet they were still separated by distance. In September of 1985 they bought a house together in Winnipeg, a perfect size for the two of them. While they had not actually met, Kitty had a negative impression of Steve's ex-wife. Steve's children expressed some discomfort in staying with their father and Kitty because their mother had communicated negative impressions regarding Kitty and Steve.

This couple state's that they are happy with their sexual relationship, however, they feel that they need to improve their communication with one another. They are both involved in extra curricular activities related to their profession and come home feeling exhausted. Kitty finds that she needs Steve to pamper her at this time but he needs to re-energize himself by going off on his own. Steve feels that Kitty can be very demanding. Both have the desire to work on their relationship, however, they have different approaches for doing so. While Steve feels they can work on it gradually as they settle in and whenever they get a chance, Kitty would like to make it top priority and schedule time into their busy schedule. Kitty was also very interested in having a child with Steve and, while Steve

does not disagree, he would like there to be more cohesion between the two of them first.

5.5 ASSESSMENT OF THE DEVELOPMENTAL PROCESS

While Steve and Kitty have been together for a period of nine months as a couple and part-time blended family they are experiencing different stages of the family developmental cycles. Because Kitty's first union did not bear children and she has adequately resolved tasks of emotional divorce, the developmental stages of the first marriage has been relinquished and has not carried into the new family. For Kitty then, this second commitment to a relationship is viewed as a first marriage because she did not feel that her first marriage was in response to love for her partner. Kitty still maintains the desire for a honeymoon phase and the bonding of a new couple relationship before having children. Consequently, Kitty is still searching to achieve the tasks and issues of early marriage and the honeymoon phase.

Alternately, Steve still carries the developmental tasks of the first family due to the children, now adolescents. Consequently, Steve has tasks of two family processes concurrently. As a father of adolescents, Steve's developmental tasks include helping his teen adjust to expectations of others, gradually becoming independent and conforming to the moral demands of the culture. Steve's

role of father becomes predominant as he prepares his children for the adult world.

Steve also has to juggle the developmental issues of the blended family process. As a blended family Steve, Kitty, Pete and Sandra appear to be in the remarried family stage of Conceptualizing and Planning the New Marriage and Family. The tasks of this stage include working on openness in new relationships, realigning relationships with extended family to include new members and planning for maintenance of cooperative co-parental relationships with ex-spouses (Carter and McGoldrick, 1980).

Structurally it appears that Steve and Kitty's couple bond is weakened in the presence of Steve's relationship which is overinvolved during the weekends together. During this time Kitty becomes peripheral in the system, disengaging her from her partner and focuses her activities outside the home. Disengagement in the new couple relationship also occurs at those times when Steve's former spouse requires his time. Boundaries around the couple subsystem are diffuse while there is a rigid boundary around the parent/child subsystem.

5.6 TREATMENT PLAN

The goals for therapy with the Brown family included:

- establishing a clear boundary around the blended couple subsystem
- loosening the boundary around the parent/children subsystem
- increasing the family's tolerance and acceptance of the complex blended family process.

Initially, Steve and Kitty were seen together for the first four sessions. After this time, the children were seen with their father, and next, the blended family were seen together. In the sessions with the couple alone, couple unity was strengthened by drawing upon the positives in their communication and relations, clarifying their expectations as partners, and Kitty's position with Steve's children. Issues common to blended couples were addressed and efforts were made to have the couple problemsolve as a team. Particular emphasis in the couple sessions was directed to an examination of their different developmental stages as individuals and as a couple in the blended family system.

Sessions with Steve and his children focused on their resolution of the break up of the first family and their adjustment to the blended family situation. The therapist

assisted Steve as he included his children in plans for the blended family, acknowledging their loyalty bonds and also assuring them of their place in their father's new home and lifestyle.

As the blended family was seen together the therapist's focus was to join with them as a blended family and begin discussion of the issues between the couple and the child subsystem. The therapist educated the family of the common strains families such as theirs experience. In this manner, the therapist began to normalize their experiences as common to blended families. The therapist educated the family on the developmental process for remarrried families, addressed their problem areas and helped the family establish clear rules for their family system for when they are living together. It was important for the blended family to understand that the developmental process of the family with adolescents was also interacting with their functioning as a blended family. Through these interventions the therapist began to build the family's tolerance to their complex family system.

5.7 EVALUATION OF THE PROCESS

There were eight sessions in total with the Brown family before they left the country for a two month summer vacation. Kitty requested the first session alone, at which time the therapist reframed Kitty's view of the problem

from being her problem only, to a problem experienced for the family.

The following four sessions were with the couple. During this time Kitty's agenda was to share time alone with her partner and convince him of their need for more time alone as a couple. Alternately, Steve saw the therapy sessions as a good opportunity to assist his children with the strain of adjusting to the divorce and his common law relationship. This differentiation was drawn upon by the therapist to emphasize their different desires and tasks due to their different stages in the developmental lifecycle. Efforts were made to show Steve and Kitty how concentration on one partner's agenda was related to the desires of the other partner as well. Concurrently, the therapist would integrate both partner's interests in the therapy sessions. The decision for a mutual child was addressed in the therapy sessions and while both partners desired an "ours child" they were not able to agree on the timing of this event. Again the therapist used a developmental reframe to acknowledge their conflict as common for their different lifecycles.

During the period in which the couple subsystem was being seen, Steve received a legal letter from his ex-spouse stating that she wanted their son Pete to live with his father. In the process of deciding on this issue Steve personally consulted his ex-wife and son. While Pete did

not truly want to move, changing schools and having to make new friends, Steve decided he would build an additional bedroom in the basement. Kitty was not consulted and this created a great conflict for the couple. Steve had been adamant that he was a 'package deal' and if Kitty did not like this he was sorry but she would have to leave him. While Kitty felt that she could gradually accept Pete as part of their home she was upset that her husband isolated her from participating in the parent/child relationship. Because Steve was away, Kitty requested a session alone in which she shared her frustration and ambivalence about the strength of the couple subsystem.

As requested by the couple Steve was seen alone with Pete to openly discuss the concerns Pete had about moving and to determine what Pete preferred. Steve also discussed the divorce with Pete and allowed Pete to express his sad feeling and confusion. Efforts were made to include Sandra in these parent/child meetings but this was difficult for Sandra to schedule and her father, who is able to talk openly with his daughter did not feel it was necessary. Due to the time constraints the therapist decided to carry on with seeing the total blended family together. The couple were seen one more time alone to strengthen the boundary around this subsystem and the plan for the family session was discussed. The therapist received a call from the children's natural mother who was ambivalent about her children meeting with their father and his "girlfriend".

The natural mother would not approve of therapy for her children with the goal being to become closer to her ex-husband's new partner. It was decided that the session would be spent discussing possible problems that could arise with Steve, Kitty, Pete and Sandra while on their two month trip overseas.

During this session the family decided how Sandra and Pete would address Kitty particularly when relatives asked about her relationship with their father. In discussing their vacation, other possible problems included the situation for all of them being together all the time and how would they cope with this. The therapist acknowledged that Kitty is an outsider because she does not share the relatives the family would be visiting. Steve suggested that he plan private time for the couple throughout the holiday. At the first and last sessions both Steve and Kitty completed the Faces III couple version evaluation.

In examining Steve and Kitty's pre and post tests both 'perceived' and 'ideal' family functioning scores had moved closer to the functional range on the circumplex profiles. Kitty's ideal noticeably improved from being in the enmeshed chaotic level of family functioning on her pretest to an ideal of flexible and connected on her post test. By further examining their profiles their results on the tests were as follows:

TABLE 1

ONE

	Actual Cohesion	Ideal Cohesion	Actual Adaptability	Ideal Adaptability
Kitty	39	46	34	36
Steve	35	36	34	33

TABLE 2

TWO

	Actual Cohesion	Ideal Cohesion	Actual Adaptability	Ideal Adaptability
Kitty	37	42	28	27
Steve	32	33	29	28

It appears that their ideals for adaptability and cohesion greatly decreased as did the actual sense of cohesion and adaptability. What may be most significant however is that there is a decrease in the proximity of actual to ideal scores with the post test. This decrease represents greater satisfaction with the present family functioning. This may be interpreted as a general understanding and lowering of expectations in the family system and a movement toward achieving this more realistic ideal.

Steve and Kitty found it difficult to fill out the questionnaire when considering their family system; they did not know if "we" on the questionnaire should include Steve's

children on weekends. In closing, the therapist suggested a referral to the group for couples of blended families to follow up on when they return.

Throughout the therapy sessions conducted with the Brown Family, intervention directive and techniques of structural family therapy were integrated to facilitate the blended family in their process of integration. Structural techniques of focusing and developmental reframing were combined with educating and normalizing in regard to the family's difficulties based on their conflictual developmental stages and the process necessary for family integration focusing was a valuable skill for altering Kitty's view of stepfamilies and "demything" the ideal for the bionuclear family. Using "complementarity" enabled the therapist to show the relatedness of the previous intact family and children's adjustment to separation, divorce and the additional family structure. In this way, the therapist helped the family to see how Kitty's concerns related to their issues as well.

The marking of boundaries was a crucial maneuver which began by dividing therapy by the family's subsystems, attending first to emphasize their functioning as a team and defining generational boundaries. Discussions regarding the couples expectations of each other in regard to their relationship to the children helped to clarify roles and rules and to strengthen the couple's boundary. During

therapy with the family together, discussion of rules further established the marking boundaries. Kitty had mentioned during a couple session that she and Steve did not ever have their bedroom as a sanctuary since now the children often came in to ask or discuss something with their father. Steve viewed this activity of the children's as symbolic of how they accepted their father's relationship with Kitty and that the children were comfortable in the home. Nevertheless, Kitty asked that they make rules around this behaviour in order that she and Steve could share some uninterrupted private time. When the issue of rules came up in the family session Steve suggested the children always knock before entering the bedroom and make sure they had addressed their father with their concerns before he retires to his bedroom unless it was an emergency. They described what would be termed an emergency and asked that they state their concerns prior to bedtime so as not to miss having a few moments to talk. This was agreed to, and instigated the development of firmer boundaries between the subsystems. Family integration was facilitated by determining Kitty's role in the family system and by deciding how the children could describe to their relatives Kitty's membership in the family system.

This blended family system was only beginning its work when therapy with this therapist ended for the summer holiday. They were given the name of another therapist and

encouraged to contact the agency when they returned. The therapist did feel that there was more work to do before fully achieving the goals for therapy, however, the family did feel they had accomplished important movement in the proper direction.



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July 21, 1987

Gina Wonfor
Knoles Center
2065 Henderson Hwy.
Winnepeg R2G 1P7
Canada

Dear Ms. Wonfor,

I am writing this letter to confirm that you have my permission to reprint the **FACES** III measure in the appendix of your practicum report. I understand that this report was part of the curriculum for the Masters Degree in your Social Work Dept.

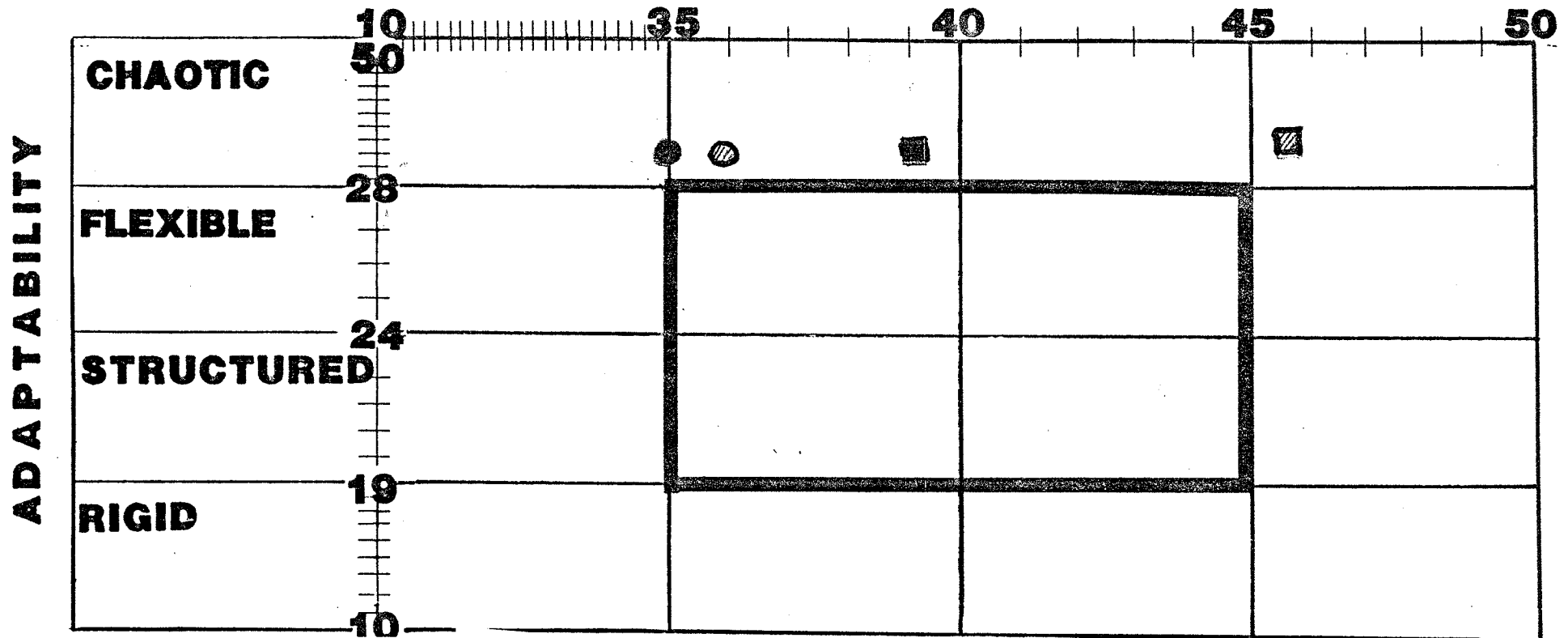
I look forward to hearing about the results of your report.

PRETEST

CIRCUMPLEX PROFILE

C O H E S I O N

DISENGAGED SEPARATED CONNECTED ENMESHED



- = Kitty Pretest Perceived
- = Kitty Pretest Ideal
- = Steve Pretest Perceived
- = Steve Pretest Ideal

in plotting the couple or family's cohesion and adaptability scores into the Circumplex Model, try to mark the specific location within the particular type that most accurately reflects the actual scores.



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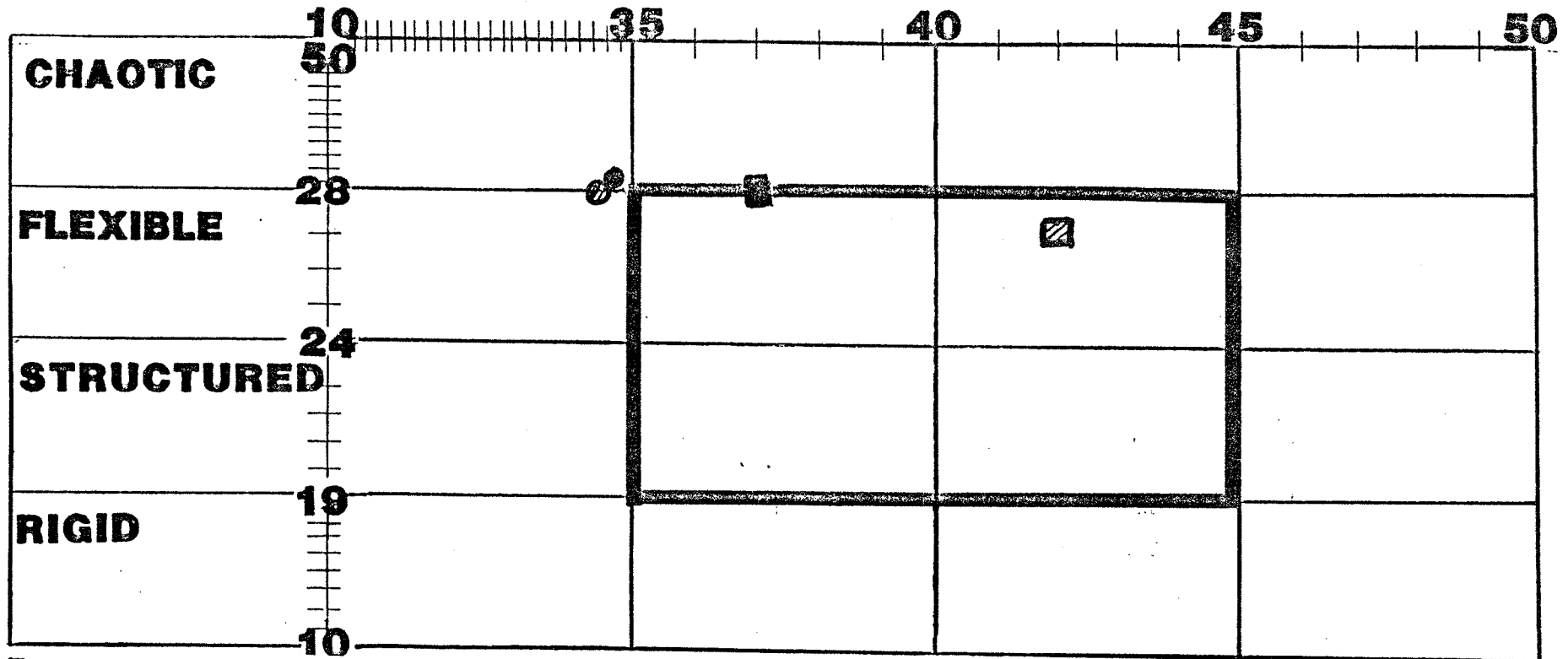
POST TEST

CIRCUMPLEX PROFILE

C O H E S I O N

DISENGAGED SEPARATED CONNECTED ENMESHED

ADAPTABILITY



- = Kitty Pretest Perceived
- ▨ = Kitty Pretest Ideal
- = Steve Pretest Perceived
- = Steve Pretest Ideal

In plotting the couple or family's cohesion and adaptability scores into the Circumplex Model, try to mark the specific location within the particular type that most accurately reflects the actual scores.



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Chapter VI

THE MORRISH FAMILY

This family consisted of a common law couple: Guy, a thirty-three year old doctor and Tracy Gunderson a twenty-eight year old office worker at the hospital. Tracy's three and a half year old daughter Toby lived with Tracy and Guy. Both partners were previously married. Tracy is legally divorced and Guy is legally separated and geographically separated from his three daughters Monica age twelve, Janet age eight and Heather age four.

6.1 REASON FOR REFERRAL

Tracy contacted the agency for service because Toby's behaviour was puzzling her. After Toby's visits to her natural father she avoids and puts down Guy. This also bothers Guy who misses his own three daughters. Tracy wanted help in understanding Toby's behaviour in order to help Toby and Guy.

6.2 HISTORY OF PRESENT DIFFICULTY

Tracy and Guy have been living in Tracy's apartment with Toby for seven months. During the initial interview it was confided that Guy is experiencing a very difficult time because he would not be able to see his daughters in British Columbia as often as he had in the past. Guy often went to BC for the police department but his colleagues began complaining because he was always chosen. Now Guy is feeling isolated from his children and shut-out by his colleagues. This was presented as Tracy's greatest concern. As well, Tracy expressed her concern that, "Toby is having difficulty accepting Guy's loving". Tracy reported that after Toby visits her father she often repeats her father's statement, "Guy is a bad boy" Toby tests Guy when Tracy is not around by kicking him or saying, "I'll tell my dad on you". Tracy is concerned about Toby's adjustment to the divorce and new family structure. She feels her ex-husband is making the situation much more difficult for Toby.

6.3 HISTORY OF PAST SIGNIFICANT RELATIONSHIPS

Guy was previously married to Jane who became pregnant and had their first daughter one year before they were married. Guy stated that their marital problems stemmed from this difficult beginning and the many transfers they made for his job. Their other children were unplanned and this made it difficult for Jane who desired a career. Guy

also believed he and his first wife had poor communication. They separated eighteen months ago and Jane and the children moved to BC.

Tracy was separated in March 1985. She was married to her husband Glen for eight years. Tracy feels their marital difficulties were a result of their marrying too young, and their poor communication. Tracy did not feel Glen treated her properly. They saw a marriage counsellor but realized their marriage was over. Both Tracy and Guy only speak to their partners in regard to the children.

6.4 HISTORY OF PRESENT RELATIONSHIP

Both Tracy and Guy are employed at the hospital which led to their meeting in April 1985. They decided to live together after being involved for six months. Guy contacted his ex-wife to let her know and discuss his new living arrangements in regard to his children's visits. Tracy on the other hand did not inform Toby or Glen prior to Guy's coming to live with her.

As a couple, Tracy and Guy feel that their communication is very good and they have no complaints regarding their sexual relations. They have not clearly stated their expectations of each other as a couple but do feel that their communication is really important. In regard to Guy's relationship with Toby, Tracy would like for Guy to feel

comfortable disciplining Toby. Tracy appears impatient for Toby, Guy and herself to feel like a family unit. While this is Guy's desire as well, presently he does not feel comfortable disciplining Toby particularly when her natural father is available to her.

Financial issues appear to be a concern due to the expense of Guy's visits to see his daughters and their desire to purchase a home. Because Guy has had a vasectomy the couple will not be having a mutual child.

6.5 ASSESSMENT OF THE DEVELOPMENTAL PROCESS

Because Tracy and Guy both have children from a previous marriage, tasks from these previous family structures remain. While Guy's first family is in the developmental stage of Family with latency-age children, Guy's tasks involve building and maintaining affectional bonds with his growing children and assisting them in becoming independent by guiding them through appropriate tasks. Tracy's first family is at the stage of Family with Young Children. Her tasks suggest the same theme as Guy however with only one child of three years Tracy's tasks would directly involve assisting Toby in learning to share affection and adjust to family's expectations as a member (Carter and McGoldrick, 1980). As both these families are experiencing Divorce, both need to resolve the tasks of the divorce phase and assist their children with their adjustment to the divorce.

Their time as single parent families was too brief to complete these stages before integrating as a blended family.

As a blended family, the Morrish family is making the transition from Entering the New Relationship to Conceptualizing and Planning New Marriage and Family. Neither family has completed emotional divorce and this is delaying their progress through the blended family integration. Both partners are still working out adequate parenting plans that are acceptable with the ex-spouses tasks which are part of the single parent family process. As well, Guy appears to have had a delayed grief reaction to the separation from his children. Both Tracy and Guy need to help their children adapt to having membership in two households.

6.6 TREATMENT PLAN

Therapeutic goals for this family unit were as follows:

- Assist both Tracy and Guy in resolving their emotional divorces.
- Assist the family in accepting and tolerating the complex process of blended family integration.
- Assist Tracy and Guy in providing assistance in their children's adjustment to the alternate family form.

The initial focus for therapy was be on assisting Guy in grieving over the separation from his children and assisting him in maintaining his parenting role to the extent possible. These sessions will be conducted primarily with the couple subsystem. During these couple sessions, time was also spent processing their previous emotional divorces by discussing these previous relationships and formulating means for each partner to solve unresolved issues with their former spouses. While these issues appear to be resolved in partiality over time, they are considered part of the tasks for separation and divorce and should be addressed predominantly at this time of the single parent family lifestyles.

Once these areas were adequately addressed emphasis was given to the new blended family unit as the adults had freed up energy which was required for their integration. The blended family was then seen together in sessions to observe their interaction. The therapist assisted the couple in clarifying their expectations for Guy as a stepparent. Efforts were made to educate the family to common blended family issues and the process of integration. During the blended family sessions, the therapist would engage Toby in play and conversation with the therapist and the adults regarding the changes for her and assist her in her adaptation to the new family units. adaptation.

Structurally, a hypothesis suggests that Guy is peripheral as a stepparent because Glen is keeping Toby emotionally overinvolved. Both Tracy and Guy are peripheral to the blended family unit due to their unresolved emotional involvement with their first family forms. A dysfunctional pattern was detected in the blended family's functioning in which Tracy in her urgency for integration, continuously prompted Toby to interact with Guy. Tracy would often have Toby making adult decisions: "Toby, can Guy come too honey?" Such a question placed Toby in control with Guy having to plead with Toby only for Toby to reject him. This only motivated Tracy further to prompt Toby, leading to Guy's feeling rejected, triggering his concern for his relationship with his own daughters.

6.7 EVALUATION OF THE PROCESS

Eight sessions were held with the Morrish family over a period of nine weeks during which two appointments were rescheduled and one cancelled. During their first session the couple were both emotional and tearful.

By the second session Tracy reported that Glen had a new girlfriend and was now being very cooperative in discussions about Toby. This relieved much of Tracy's anxiety since Glen had previously been verbally abusive regarding Tracy and Guy. Therapy addressed Tracy's desire to alter Glen's visits with Toby to full weekends every second weekend and

to form strategies to enable Tracy to discuss these plans with Glen. Tracy's efforts were successful.

In the next session with Tracy and Guy, they described the stressors that were affecting them. They referred to external pressures from colleagues at work, problems with legal institutions, ex-partners and social institutions including children's schools. Tracy and Guy described that they felt they were "playing the waiting game". These external pressures were drawing on their internal feeling of insecurity and competitiveness. At this time the therapist educated the couple on the different stages of separation and divorce and the couple discussed how each of them and their ex-partners were at different point. Guy suggested that he was accepting the separation from his children but was still concerned with maintaining contact with them. With the therapist's aid, the couple considered new viable alternatives for maintaining contact. The therapist continued to repeat the message of cooperative parenting by returning to this theme throughout therapy. At this point the theme was related to the adults different stages of separation and their individual resolutions of the previous marital relationship. The therapist provided bibliotherapy for both Tracy and Guy by supplying them with a booklist for families experiencing separation, divorce and remarriage.

In the next session, Tracy and Guy informed the therapist of their plan to travel to British Columbia to see Guy's

children and visit Expo. The trip would be made without Toby and she would stay with her father. Tracy expressed her desire to have Glen and his new girlfriend attend the next and last session with them in order to help Toby understand that they were all cooperative. This was agreed and the therapist then reviewed the progress the family had made toward their goals, how they had begun to cope with the complexity of their situation and what stressors they may face in the near future.

Tracy took responsibility for inviting Glen and his new partner to the session. When contacted Glen agreed to come but his partner did not feel she should be involved since Toby only visited every second weekend. In the last session Toby came with her father and they were seen alone for the first fifteen minutes during which time the therapist observed their interaction and discussed with Glen what his expectations were for this meeting. Tracy appeared very nervous when she and Guy joined the session. The therapist reminded the members that this meeting was to reconfirm parental plans with Toby and to help her to see that the adults were cooperative. As well this activity would begin to de-fantasize Toby's dream for her parent's to reunite. Glen appeared as a loving, disciplining and cooperative parent which bothered Tracy because she was still angry at him for the way he treated her. Glen was to leave fifteen minutes before Tracy, Guy and Toby, however,

he found it difficult to leave Toby in the playroom as she began to cry. Glen called Tracy from the session to calm Toby down but with both her natural parents holding her hand, she would not let go of either and cried out painfully. The therapist's supervisor intervened and guided Tracy and Toby back to the therapy room with the therapist and Guy. At this point it was acknowledged how difficult and painful the adaptation process is for children and how difficult it is for parents to see their children go through such pain particularly when the parents still experience their own emotional pain. Tracy, Guy and Toby remained until Tracy and Toby had calmed. Plans were made for another contact with the therapist after their vacation.

When they returned, the couple expressed a desire to join the stepparenting group in the fall. The therapist gave them a number and a name for the group and reminded them of the progress they had made and encouraged them to keep working at their family.

On their pre and post tests on the Couple Versions of the Faces III there was little change. On her pretest Tracy's scores showed a maximum score of fifty for cohesion on perceived family functioning and an almost maximum score of forty six on adaptability. These scores matched her ideal of family functioning which leads the therapist to believe that either Tracy truly had no concerns about the family's functioning or the measurement did not address her concerns.

Her post test was very similar. Guy's pretest revealed scores with no discrepancy between perceived and ideal cohesion and a discrepancy of twelve points for adaptability between perceived and ideal. This signifies that Guy is less satisfied with the family's adaptability. His post test showed a decrease of two points in this discrepancy.

Tracy and Guy's results showed the couple as having extreme levels of adaptability and cohesion in regard to family functioning. They both appear to be in the chaotic enmeshed location on the profile which Ohlson et. al, suggest as being dysfunctional. However, it is also stated that if both partners are comfortable with this arrangement, it may be considered functional (Ohlson et.al, 1985). These results of enmeshment appear to be representative of the family's pattern and Tracy's push toward integration. Their ideal scores for enmeshed and chaotic levels reveal that their goals as a family are dysfunctional.

In reviewing the intervention by the therapist, it appears that boundaries were more clearly defined by assisting the partners toward resolution of their emotional divorces. Educating the blended family on the process of divorce and integration of the family structure facilitated a developmental reframe of the couples struggles and Toby's behaviour. This also enabled the therapist to demyth their view that the second family should be just like the bionuclear family. By instigating discussion of previous

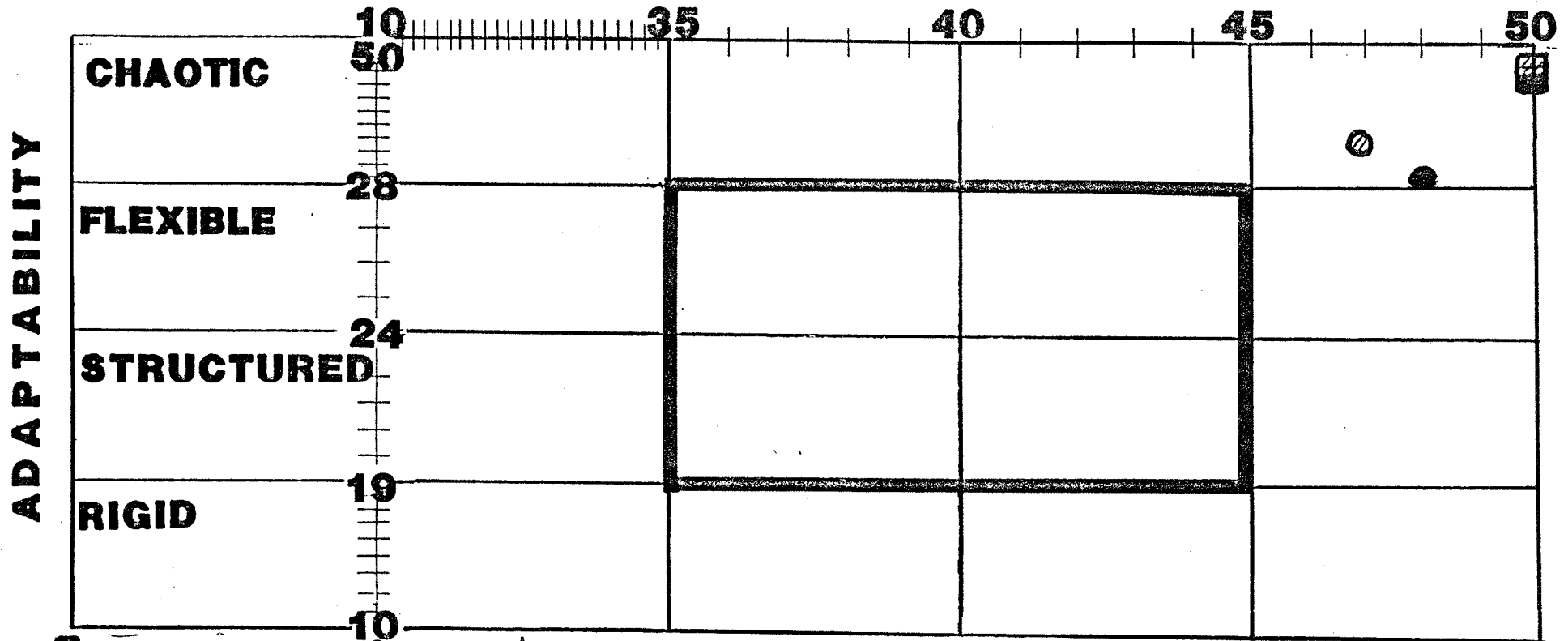
experiences and issues of the previous relationships the therapist strengthened the blended couple as they increased their support with each other. Both partners could share their difficulties with ex-partners to normalize their experiences as part of the adaptation to the new family structures. As therapy ended the therapist assisted the couple in integrating and practicing their new understanding in the next month, and bringing their concerns after this time to the group. This would provide the couple with a support group which they felt they desperately needed.

PRETEST

CIRCUMPLEX PROFILE

C O H E S I O N

DISENGAGED SEPARATED CONNECTED ENMESHED



- = Tracy Pretest Perceived
- = Tracy Pretest Ideal
- = Guy Pretest Perceived
- = Guy Pretest Ideal

In plotting the couple or family's cohesion and adaptability scores into the Circumplex Model, try to mark the specific location within the particular type that most accurately reflects the actual scores.



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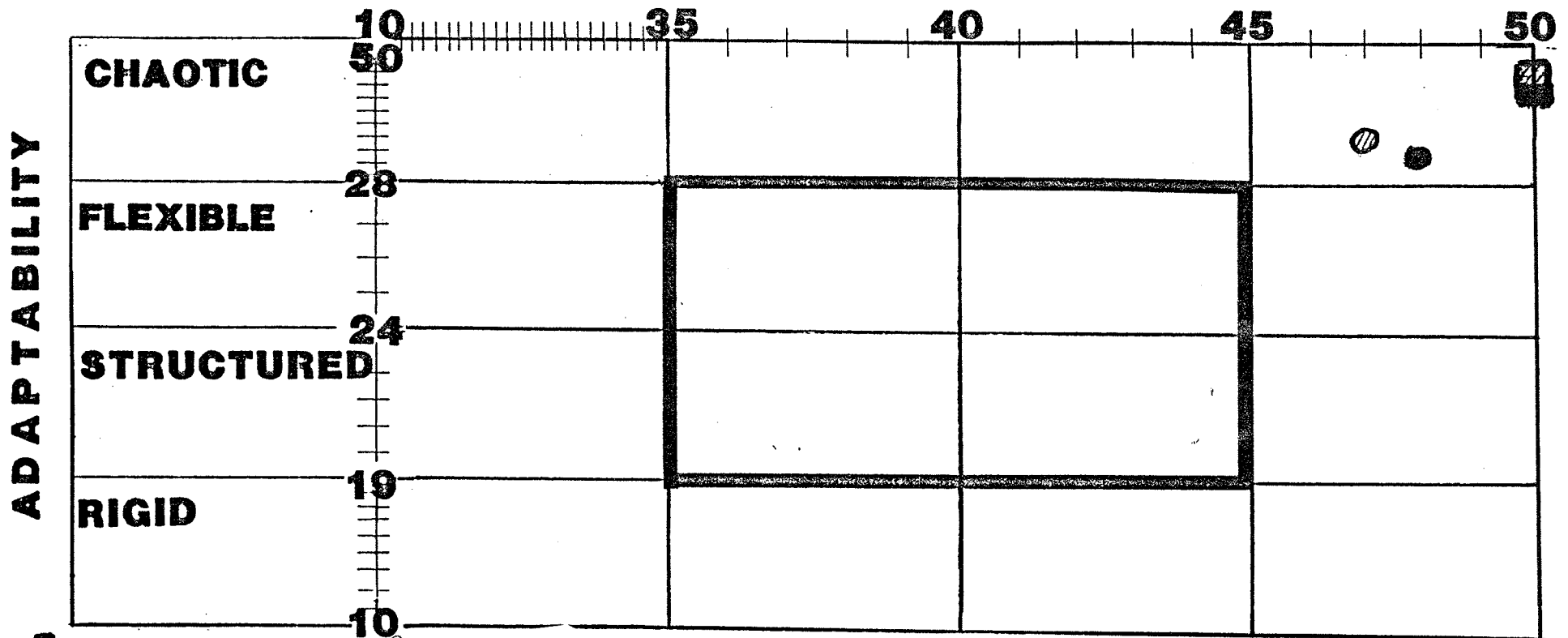
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POST TEST

CIRCUMPLEX PROFILE

C O H E S I O N

DISENGAGED SEPARATED CONNECTED ENMESHED



- = Tracy Pretest Perceived
- = Tracy Pretest Ideal
- = Guy Pretest Perceived
- = Guy Pretest Ideal

In plotting the couple or family's cohesion and adaptability scores into the Circumplex Model, try to mark the specific location within the particular type that most accurately reflects the actual scores.



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Chapter VII

THE FONTANA FAMILY

This blended family consists of Lawrence Fontana thirty six years old, Betty Fontana, age thirty eight, Jim Kearns, seventeen; Chris Kearns fourteen, Mark Fontana thirteen, and David Fontana ten years old. Mr. Fontana is employed as an accountant with a large company while Mrs. Fontana is employed as a word processor, in the city twenty miles from their country home. Lawrence and Betty have been together with all the children for six years and married for two and a half years.

7.1 REASON FOR REFERRAL

Mr. Fontana contacted the agency because of problems which developed between Betty and Mark during the last eight or nine months. Mr. Fontana explained that the previous trouble with the oldest son, Jim, had improved significantly in the past year since their last contact with the agency.

7.2 HISTORY OF PRESENT DIFFICULTY

At approximately the same time Mr. Fontana contacted the agency, a crisis situation erupted in the home with Mark and Betty. A physical fight occurred between Betty and her stepson Mark with Chris joining in to protect his mother. Mark's school noticed slight bruises on his body and Mark was allowed to contact his natural mother Jenny after talking with the school social worker. Jenny contacted the police and the child abuse centre to have Betty's name listed on the Child Abuse Register. Mark has been staying with his natural mother since the event and Mark's preference is to move from his father's and reside with his mother. Jenny will not allow Mark to return to Larry and Betty's home until she is sure her son will not be in physical danger. After a discussion between Larry and Jenny, Larry relinquished custody of his son to Jenny. Lawrence feels he has lost his son to his ex-wife and to a great extent blames his present wife for this loss. Jenny would now like full custody of Mark. Mark phones his father regularly and they have been meeting a great deal, however, Lawrence and Betty miss Mark very much.

7.3 HISTORY OF PREVIOUS RELATIONSHIP

Betty's first husband left the family approximately nine years ago and has not maintained contact with their two sons. Betty does not know where he lives now and would not discuss this relationship further because she felt it had no relevance even though she still felt anger for him.

Mr. Fontana also separated from his first wife approximately nine years ago and was given custody of his two sons. Mr. Fontana clearly states he would have nothing to do with his ex-wife if it was possible. He does not initiate contact with her even in regard to the children, however, Jenny does contact him to discuss the children. Lawrence also transports the children back and forth from their visits with their mom in the city since Jenny does not have a car.

7.4 HISTORY OF PRESENT RELATIONSHIP

Betty and Larry Fontana met through a single parents group and lived common law for approximately four years before they married. From their beginning, Mr. and Mrs. Fontana have cared for all four children. During this time they shared parenting and planned to treat all the children equally.

Betty and Larry appear to have had previous strain on their relationship due to Betty's son Jim. Not to long

after the couple's marriage Jim was found stealing money from Larry's company and starting fires in the community. The family came for one counselling session to deal with this experience. The family then moved out of the city to a small community.

Since Mark began misbehaving in September, Mark and Betty have had great difficulty getting along. This was a great strain on the couple relationship because Larry and Mark have been very close. Betty has been unable to confide in her husband because she was fearful of losing their relationship. Larry had suggested splitting up due to this conflict. Later, Larry stated that he was simply feeling confused.

As stepparents, both Betty and Larry feel fully responsible and deeply care for all of the children. While both adults agree that Larry is the primary disciplinarian his involvement occurs during the few hours when he is home. Larry's evenings are often taken up by working over time or attending club meetings, therefore, Mary is more often responsible for managing the children.

When Mark was extremely acting out with Betty, more so than normal Larry would stay home in the evenings. While Betty felt she explained to Larry that she was experiencing difficulty having Mark listen to her, nothing was resolved. Betty is now afraid to discipline Mark because this creates a strain on the couple relationship.

7.5 ASSESSMENT OF FAMILY DEVELOPMENTAL PROCESS

At this time it appears that both parents are experiencing the stage of family with adolescence from the first family forms. Larry's family is just entering adolescence and Betty's family is making the transition to the next stage. This family has been together for several years, which suggests that they share their family developmental tasks. This would not be too difficult because both their stages are very close. Betty and Larry must begin to view their adolescents as young adults and begin to focus somewhat more on the couple relationship.

Because of the resentment and anger both partners express toward their ex-partners, it appears neither partner has achieved emotional divorce. Larry is having to renegotiate custody, and visitation with Mark and finances with Jenny. Larry needs to mourn the separation from his son and restructure his relationship with Mark. Unfortunately both Betty and Larry are unwilling to maintain relations with their ex-spouses even as parents. As parents of adolescents who have had to adapt to the transition of divorce and the blended family structure, Betty and Larry have a responsibility to assist the teenagers to understand these changes with their maturing attitudes, to enhance the previous understanding they held as school age children.

This blended family appears to be in the final stage of "Remarriage and Reconstitution of Family" (Carter and McGoldrick, 1980). It appears that the blended family has achieved some resolution of the tasks i.e. restructuring family boundaries to allow for inclusion of the new partner and stepparent. However, because they have unresolved tasks from the previous stage their progress toward blended family integration is delayed. Because Larry did not wish to have a cooperative co-parental relationship with Jenny, the blended family is now having to address this task again. Structurally, the hypothesis for the Fontana family suggests that Mr. Fontana is peripheral in the family system with many outlets in the community. Mrs. Fontana is overinvolved with the children as she has no outside interests and few friends. She has become overinvolved with Lawrence's children as her natural children move toward the transition of leaving home. Betty has the majority of the management responsibilities with the children and Mark did not accept this. Betty experienced stress with Mark's natural rebellion as an adolescent and his frustration in being parented primarily by a stepparent. She felt his desire for distance from her as rejection and could not understand Mark's desire for more time with his father as a young adult.

After the conflict between Betty and Mark, the couple subsystem became further disengaged as Mr. Fontana

experienced conflicting loyalties between his wife and his son and became overinvolved with his son immediately after his son went to live with Jenny.

7.6 TREATMENT PLAN

When Betty and Larry first came to therapy their goal was to have Mark return to live with them. Promptly after their first visit Jenny contacted a conciliator and Larry went with Jenny and Mark for a meeting. During this meeting it was decided Mark's custody would go to his mother and Mark would reside with her because this was his choice. Consequently the goals for therapy had been revised to the following:

- To assist the Fontana Family in their functioning and integration as a blended family.
- To assist Mr. and Mrs. Fontana in their efforts to strengthen their couple relationship improving their communication and enjoying the positive aspect of their marriage
- To assist Mr. Fontana in his mourning the separation from his son and restructuring of their relationship.

Mr. and Mrs. Fontana came alone to the first session although the therapist had requested all family members. This session was useful for assessment. The second session

was again with Mr. and Mrs. Fontana to address couple issues regarding Larry's blaming of Betty for the crisis with Mark. This gave the couple the opportunity to openly discuss their feelings of this situation. Efforts were made by the therapist to address each partner's pain and help Larry to realize Betty was mourning the loss of her relationship with her stepson as well. The therapist will worked toward joining the couple in their suffering and helped them to be supportive of eachother.

With the change in custody being the strongest dynamic at the time, the next session was limited Mark and Larry with an emphasis on allowing Mark to share his feeling about the change of custody and consolidate their relationship in its new form. Promptly after the father and son meeting, the therapist saw Betty and Larry together. This session provided the opportunity for Larry to share with his wife, feelings and concerns regarding his relationship with Mark and also built and maintained the couple's cohesion as Betty is involved in the change process.

The next few sessions included Betty, Larry, David and Mark to allow feelings to be expressed in the step relations and redefine boundaries, expectations and rules for this subsystem. The last session included the entire blended family to evaluate how the family functioning is different and re-establish this system as a blended family unit

7.7 EVALUATION OF THE PROCESS

The Fontana family were involved in therapy for a total of eight sessions. The first two sessions were used primarily for assessing the family's situation and beginning work with the couple subsystem. During these first sessions Mrs. Fontana spoke very little while Mr. Fontana was very emotional. The therapist sensed the family's urgency and pull to have immediate change occur. Betty appeared to take a back seat during these sessions as if she had relinquished her authority and power to Larry. In the second session however Betty did begin to display her anger toward Larry's ex-wife as Larry had expressed his frustration with Jenny. Larry brought a new perspective of the problem to the second session after meeting with his ex-wife and Mark. At this time he stated that Mark had precipitated his own acting-out and the crisis situation to facilitate his plan to live with his mother. Mark would then have visitation which would mean quality time with his father, brother and stepfamily. He now was open to viewing Betty as a victim and could team up with her in their pain. The therapist joined with them in acknowledging the stress and pain that was produced from the previous marriages impacting on their process of becoming a solid blended family unit. The couple had not discussed or planned with the children when they decided to live together or remarry. The therapist educated the couple on the blending process, and began to break down their

fantasy of the second family being just like a biological family. The therapist began to reframe the couple's perspective of the family as a stepfamily and normalized their experiences. Mark's behaviour was presented as common for the adolescent in blending families.

In the next session Larry and Mark came alone. Larry expressed to Mark his understanding of why the crisis situation had occurred. He also expressed his regret that his son did not want to live with him. Mark listened and nodded as his father spoke and while Mark apologized he still felt Betty owed him an apology too. Mark asked his father for more visiting time but Larry resisted this, reiterating his love for Mark but reminding Mark of his other commitments. Larry also reminded Mark of other limitations due to the geographical distance between Jenny's home in the city and Larry's work and residence in the country. For the summer months, the father and son settled on two visits during the week and every second weekend Mark would visit Larry and Betty's house. A session was planned for Betty and Larry directly after this meeting of father and son. While Betty came, Larry drove Mark to his mothers and did not return to the agency. He said that he was thinking of the previous session and forgot to return.

Betty and the therapist did have a half and hour together while Betty asked about Mark's welfare. Betty expressed conflict about her feelings as a mother to Mark and David

and the fact that she did not have the legal right or the acknowledgement for raising Larry's children.

A brief session for the couple was arranged for the next day. At this time Betty mentioned these feelings that she had discussed with the therapist previously and Larry relayed to Betty his discussion and feelings from the meeting with Mark. He stated that although it was difficult to limit the time they would share, he felt that they had re-established their close bonds. Larry wanted to confirm this and asked the therapist to see Mark alone to assure that Mark was indeed content with his new living arrangements. Mark was seen and did in fact confirm this, however, he talked about his trouble with bullies at the new school and how he still missed his old school. Mark had not done well academically in the past year and strict limitations had been put on him while living with his father to insure that he would pass his year. He informed the therapist that his mother was following through with these strict rules as well and although his mother had become more of a disciplinarian, his relationship with her was still good. Mark also showed interest in re-establishing his relationship with Betty.

The next session was set with the couple to assure that they were still supporting each other and continuing to share their thoughts and feelings. The following session included Larry, Betty, David and Mark. After the therapist

joined with them as a family unit the family took the opportunity to say that they had missed each other. The therapist assisted the family in discussing the changes in their home and other differences since Mark has been living with his mother. David reported that he missed Mark but now he could get away with almost anything. From there, the family was prompted to consider how things would be different when Mark came for weekends.

In regard to the stepparent/child relationship the therapist suggested that Mrs. Fontana needed a holiday from disciplining all of these children. Mr. Fontana would now be responsible for managing Mark when he visited and Mrs. Fontana was very agreeable to this. She said that she could no longer feel comfortable disciplining Mark and if Mark started to misbehave she would leave the house until her husband came home. The couple then considered how situations would be handled when Larry was not available. The therapist suggested that Mr. Fontana instruct Betty just as he would a babysitter, if Mark misbehaves. Mr. Fontana would inform Mark that Betty had instructions from Larry and that if Mark misbehaved his father would serve the consequences when he returned. The therapist invited each member's input and all found that this plan was agreeable.

Mark's efforts to leave were reframed by the therapist as his attempt to rescue his mother from her loneliness. The therapist informed Mark that she understood that he feels it

is okay to leave his father because he has Betty and the other boys. The therapist explained that she understood that as his mother's oldest son he felt that he should help her. While Mark agreed, with this reframe this appeared to be a new perspective for Larry. The therapist addressed the loyalty conflict Mark was experiencing between both parents and this helped to reframe Mark's behaviour as more positive. Three weeks later the next appointment was scheduled.

In this session Betty pointed out how helpless she and Larry felt. Betty stated, "he's really not a part of the family now". The family was telling the therapist their influence was very limited and the therapist tried to show them where they did have influence. Rather, the therapist should not have moved so quickly but joined the couple in accepting the loss of parenting control with Mark. They felt that Mark's "cocky attitude" had worsened since he has been living with his mother. Both Mr. and Mrs. Fontana said that the strategy from the previous session had worked well on the two weekends Mark has come out to the country but they felt that therapy would not be very useful until the family had more time to integrate and practice this approach with Mark. The therapist did not push the family to continue but invited Mr. Fontana to contact the therapist in two weeks to let them think it over.

After reviewing the video tape of this family session the therapist felt that she should apologize to the family for not addressing their agenda. In the previous session the therapist had emphasized the importance of cooperative parenting between ex-spouses and did not focus enough on their feeling of helplessness as parents of Mark. Apologizing would bring further joining. The therapist in this way takes a positive non-expert position. Both Betty and Larry had felt that they had lost their role as parents.

The therapist contacted Mr. Fontana at work and explained this. Mr. Fontana stated that he and his wife did not feel this was a "bad session". He felt that in this session he had faced the fact that he was unwilling to initiate or maintain communication with Jenny even for Mark's sake. Mr. Fontana said he appreciated my openness but felt that they were a strong family and were still adjusting to this new structure. He said that he had recognized some positive change in their family attitude and therapy had helped them through the worst time of this family crisis. Mr. Fontana felt that the family required time on their own to draw upon their own strengths now. The therapist agreed that his family had a lot of strengths and invited them to contact the agency again if they desired. Mr. Fontana stated that he felt comfortable in contacting the service if ever he felt it necessary again.

This family did not complete the post-test of their evaluative measurement after the therapist had sent the forms to the family and had recontacted them by telephone. In their completion of the pretest the family had left many questions unanswered and had commented that the questionnaire did not seem to address their concerns. Mrs. Fontana said the questions did not "get at our difficulties". This may have been the reason for family's resistance in completing the post-tests.

The therapist found that intervening with this family was difficult. It appeared that once Mr. Fontana relinquished his custody of Mark to his ex-wife he and Betty lost a great deal of their motivation for therapy. The turning point in therapy occurred with the therapist's intervention regarding the disciplining. By making Mr. Fontana responsible for disciplining Mark, he became less peripheral in the family system and Betty became less involved in the children subsystem. The therapist was able to reframe blame for their crisis situation from being Mark's to being the result of the blended family process. Mark's motivation was reframed as a desire to help his mother.

With this family, the therapist had a very difficult time maintaining a tolerance for their complexity. The therapist saw many issues that she felt needed addressing that were not part of the family's agenda to the same degree. The father appeared to be blaming his son in an effort to

support his wife after he had blamed her. It seemed that Mr. Fontana did not want to perceive the family as a step or blended family, and would not have contact with his ex-wife because she interfered in his attempt to perceive the family as a bionuclear family. The therapist felt some limited progress was made in altering the family's perception.

Perhaps greater change was not achieved because the therapist had not adequately joined with the family before intervening. This was partly due to the perception of their difficulties as being a crisis situation which the therapist perceived as requiring immediate action. Nevertheless, the therapist became pulled in by this family and was unable to maintain control in the sessions. This inability to remain in control fostered this family's resistance to continue therapy beyond their actual crisis point.

As Bardeme and Serritella (1981) suggest, stepfamilies will probably terminate after experiencing some relief from the problem they presented. While, quite often the therapist perceives much more work for the family, the family's goals must also be recognized. Therapists are often surprised to receive positive feedback from the family regarding the therapeutic process even though the therapist perceives these changes as minimal (Gurman, 1981).

Chapter VIII

CONCLUSION

In the course of completing this practicum the therapist developed an indispensable knowledge base from the literature on blended families and gained invaluable practical experience. The experience of working with blended families is a unique learning process. During the integration of theory and practice, I found that I was returning to specific theoretical points that became vital for me. The actual therapeutic experience served as a testing ground to explore the use of the literature on blended families. From this literature, I have selected points that seemed most fitting to my work. These recommendations have been organized into two areas, those regarding the application of the theory and those specific to my development as a therapist. A discussion of these elements will now be presented following this format.

8.1 APPLICATION OF THEORY

Carter and McGoldrick's family life cycle (1980) was an integral part of the theoretical framework for use with the practicum families. This approach illustrated how past experiences and developmental issues are intertwined with

the patterns of interaction between old and new family members. Thus, the family life cycle places the blended family's history in relation to the present situation and the larger context of the family's history and environment. Carter and McGoldrick drew from Hill and Rodgers theory of family development. This theory allowed therapists to reframe the family's perspective of the problem as being a difficulty in shifting roles and functioning from one developmental stage to another as family members mature. The life cycle model provides a set of general predictive norms against which the family's functioning may be viewed (Hill and Rodgers, 1964). Carter and McGoldrick also expanded Ransom et. al's (1979) developmental stages for remarried families in association with Hill and Rodger's theory to formulate prerequisite attitudes and tasks for the alternate family forms-the single parent family and the remarried family.

Many blended families experience problems which are interpreted as the difficulty in shifting from one developmental stage to another. At times it may appear that the presenting problem is not directly related to the developmental tasks; however, there will usually be issues which are considered part of the problem that are also associated with the family stages or tasks.

In using Carter and McGoldrick's family life cycle model (1980) the blended family is not forced into the mold of the bionuclear family, it is recognized as an alternate family

structure with unique dynamics. Carter and McGoldrick's model is useful in illustrating how unresolved issues of the single parent family-the divorce and post divorce phase have a direct impact on the blended family's inability to function toward integration.

While Carter and McGoldrick's lifecycle model does not clearly define how to complete the tasks of each stage, it is invaluable as a conceptual tool and didactic technique for assessing a family's patterns of interaction and devising appropriate intervention. Carter and McGoldrick's blended family developmental process approach is very general and thus presents as a framework that may be adapted to the idiosyncracies of each blended family's experience. In view of this adaptability, the developmental approach is a framework that may be well integrated with various theoretical approaches for understanding and intervening with blended families.

Structural family therapy is one theoretical approach that may be combined with the family life cycle theory. The basic concepts of structure, boundary, subsystems and adaptability to stress, organize the specific information pertinent to the blended family. This information concerns the unique strains produced from the alternate structure, information on the developmental adjustments these families experience and the family members' idiosyncratic patterns of relating.

In utilizing the structural approach, I was then able to formulate a plan for intervention. In doing so I applied the theory's founding belief which states that family system's problems are maintained through dysfunctional family structures. The goal for therapy is to modify the structure by utilizing structural techniques so family members may then draw upon their own resources to resolve the family's difficulties (Minuchin, 1974). The question that I found myself asking, however, was, "what is dysfunctional family structure?"

In Minuchin's research with families, Minuchin illustrates and defines a functional family structure, which families also desired for their ideal organization (Minuchin, 1968). These families' ideals were that of the biologically intact family structure regardless of their own family structure. These families may have integrated this belief from the universally accepted guidelines and norms of how families should function.

Theorists now understand that what families desire is not always functional for them. Hence, the blended family whose desire is to become like the bionuclear family is striving toward a goal which inhibits their functioning rather than being instrumental to optimal functioning. For this reason, it is my belief that theorists working with blended families, utilizing structural therapy, must understand the origin of the blended family's beliefs and incorporate this

into the base of the structural theory. At this base level, the therapist should also include her knowledge of the stepfamily's unique developmental process.

While I believe that structural family therapy may be a useful interventive approach it is not as accomodating for the blended family structure as it is for biological family forms. The therapist should begin with an understanding of the stepfamily experience including their developmental process and then integrate this information throughout the basic concepts of the structural approach. The therapist may then devise the structural goals and utilize the techniques without superimposing the bionuclear family ideal on the blended family in therapy. Dysfunctional structure will then be defined through the incorporation of the remarried family process and structural family theory.

In the process of using structural theory for intervening with blended families, I found that the structural terms used to describe structure and boundaries must be redefined to suit an appropriate range for the blended family structure. These terms include enmeshment, disengagement and diffuse or rigid boundaries. Nichols (1984) states that boundaries surrounding the blended family unit need to be permeable and flexible for subsystems to have membership in other family units. This permeability is not required in biologically intact families. What may be labelled loose boundaries in the bionuclear family may be regarded as clear boundaries for the blended family system.

The above discussion of redefining structural terms for step families, leads to a consideration of the faces III evaluation measurement and its inappropriate application of these terms for blended families. In the manual, researchers Ohlson et. al. (1985) do not delineate the structural forms of the families used in their population studied. Consequently, this author wonders whether these families were of bionuclear family forms and what affect this had in determining the scores compromising the extreme and balanced levels. Esses (1984) suggests that researchers working with stepfamilies have a necessary task of recognizing this bias toward the nuclear family ideal in their own work and that they should begin to develop questions which do not reflect this bias.

In returning to the case study of the Brown family previously discussed, their faces III profile illustrated that the couple's score for perceived and ideal family functioning were in the enmeshed and chaotic state. This conclusion may represent the family inaccurately due to their blended status. The normal ranges of family functioning may be much broader for blended families than described by Ohlson et. al, (1985). Consequently, enmeshment and chaotic levels of functioning according to Ohlson et.al, (1985) may also be different for the blended family structure. While this element of the evaluative measurement appears as a limitation for use with remarried

families, it should not discredit the overall value of the faces III. This measurement was found useful in some instances to reinforce the therapist's assessment and hypothesis. As was stated in the case study, the Brown's desire for enmeshment was part of their dysfunctional circular pattern.

An additional limitation of this measurement rests in the terminology of the questions posed. Some family members were confused in deciding who should be included as family when responding to the questions on the general evaluation measurement. Clients questioned whether family included those children that come to live for two weekends each month. In commenting on the couple's version of the faces III, clients have asked why all the questions refer to "we" rather than "I", because they felt that more differences between the couple would surface if some questions would address the individual as in "I". By maintaining a blended family perspective, therapists can integrate and maximize the use of Carter and McGoldrick's family life cycle model, Minuchin's structural family therapy and the faces III measurement to assist remarried families toward optimal family functioning.

To further assist families in their change process therapists try to incorporate their "use of self" as an interventive tool (Compton & Galoway, 1979). The discussion will not focus on my self development as a therapist of blended families.

8.2 THERAPIST'S DEVELOPMENT

As the practicum progressed my "self awareness" as a therapist developed at a gradual pace. I found that certain aspects of the literature and practical experience were most "fitting" for my style and level of experience. In order to discuss my development with some clarity the subject has been divided into those issues which I struggle to resolve. These will include only those points which I found were the most important.

Earlier in chapter three, the author introduced the dilemma of knowing who to begin with when conducting therapy with the blended family system. One approach may be to assess the transactions and intervene in the dysfunctional circular pattern by beginning with the couple and parent subsystem. I was cautious not to take this approach for granted when working with blended families; yet, in speaking with other therapists they suggested beginning with the couple as a rule to assess whether this bond was strong. Some therapists suggest that if this bond requires strengthening it should be addressed first before the other goals can be accomplished (Mills, 1984) (Visher and Visher, 1979). I am still uncertain as to whom therapy should address first in the blended family; however, unless the presenting problem directly suggests a couple issue, I would begin with the blended family together and progress to subsystem sessions if I found it beneficial toward improving

the blended family's functioning. Often, when the entire family unit is seen, specific assessment questions reveal the couple subsystem as being disengaged. Therapeutically, this approach is not helpful because it displays the weak bonding to the entire family system when the therapist's overall goal is to enhance the cohesion of the family. It seems that knowing which subsystem to address initially and when to see other subsystems requires an understanding of the blended families unique situation which is gained as the therapist's experience with blended family's grows.

Throughout assessment and intervention I also found it very easy to become bogged down in first order details such as money and time. While these areas do require some attention in therapy with some families, it is important to help the family through the second order change in moving toward a new definition of themselves (Carter and McGoldrick, 1980 p.180). Another point useful for intervening with blended families is that the therapist must be assured that the family has developed the prerequisite attitude before they struggle with achieving the developmental tasks. The therapist should repeat the message that the forming of a blended family is a gradual process and assist them in ways to help the blended family in building their tolerance and patience for the process rather than joining with the family in their efforts to rush their process by overtrying or ignoring developmental tasks (Kleinman et. al, 1979).

As a final directive for therapists, I found it most useful when trying to intervene with blended families, to organize the family's information in regard to common blended family issues and how then this information could then be applied to the structural therapy concepts. From this position, I found that i could achieve some organization for intervention which would still address the complexity of the blended family experience. During the practicum experience the therapist continued to integrate blended family literature with actual practice to maintain an awareness of their common problematic issues and developmental process of the remarried family.

8.2.1 Therapist's Knowledge of Self

In working with remarried families it is important to acknowledge one's own personal history and beliefs. I may believe that blended families are not dysfunctional, however, I may still perceive them as less functional than the biologically intact family. By expanding my knowledge on stepfamily integration, I have taken the beginning step in placing the blended family on "equal ground" with the bionuclear family-dissolving my own beliefs in the bionuclear family ideal. Professionals ought to examine the theory and framework that guides his/her practice to check

for assumptions and beliefs regarding the bionuclear family ideal.

As a therapist, I still find that my previous values and beliefs in this ideal interfere with my work with blended families even though I have extensively reviewed recent stepfamily literature and have experienced blended families in therapy. I find that my inability to breakdown the myths parallels the struggle that blended family members may experience in relinquishing the bionuclear ideal, and how very important this task is.

Working with blended families has forced me to expand my own "picture screen". This work has stretched my capacity to view all the complexities transacting simultaneously. It has required a broader mind's eyeview. Initially, I did not understand that I would need to view all the dynamics of the family system and its immediate environment in one large picture. I believed that I could snap a quick picture of the entire scene, narrow in to the specific problem area and help produce change which would ripple across the scene. Now, however, working with blended families has taught me to never lose the picture of the larger scene. I find it much more valuable to broadly focus my efforts across the entire scene to facilitate change at several areas and throughout the entire picture.

In working with blended families I also realized that I had to spend more time investigating, first by expanding the length of time for assessment and later by reviewing what the family had already tried to alter their problem issues. I found that it was very helpful to validate family members' feelings by stating that their experiences really have been difficult. I had to learn to withhold the giving of directives or advice too quickly.

To conclude, I believe that the most difficult change in myself as a therapist was in developing my own patience and tolerance for the ambiguity and complexity of the blended family. It is important to assist the family with their struggles rather than exacerbate and rush their integration process. Due to the time constraints of my clinical practicum, I may have pushed some families too quickly to achieve integration simply to meet my own practicum needs. However, this practicum experience allowed me to recognize my weaknesses as a therapist and now I am much more sensitive to their occurrence. With this awareness I can work further to resolve my own dilemmas in working with the remarried family. Therapists themselves are not immune to the "battle fatigue" which naturally leads many blended families to a facade of pseudomutuality. It may often infect therapists and result in a false attainment of the family's therapeutic goals. These recommendations outlined have been functional in heightening my development as a therapist practicing with blended families.

In the social work profession, therapists must accept that no single family form produces an optimal milieu for a growing child. Children's emotional and physical needs can be met by a wide variety of social arrangements. Statistics on family relations in the United States demonstrate that alternate kinship and household arrangements will have eclipsed the bionuclear family by 1990 (Masnick and Bane, 1980 in Goldner, 1983). The blended family is one alternate family form in which children are being raised. The blended family's functioning is idiosyncratic to the needs of its members; at one level this may appear as a sign of abnormality, however, this is not the case.

Unlike the bionuclear family, the blended family experiences the overwhelming pressure of parent/child bonds predating the couple's relationship. This dynamic often produces an overloaded sensation for the blended couple. Carter and McGoldrick's remarried family life cycle addresses this and assists family members to join as a mature stable system ready to meet the emotional needs of its members (Kleinman et.al. 1979). Often blended families have difficulty in making their transitions and require assistance toward becoming a mature family system. Due to their unique origin blended families are not all playing the same music; their melody line has been fractured (Goldner, 1984). The blended family system may be straddling several developmental phases simultaneously. Therapist's in

their work with blended families, must assist the family through their developmental transition points and help the family accept the complexity and confusion of their family situation.

In coming for assistance, blended families expect the therapist to be a conductor, choreographer, or a magician. The family desires the conductor to organize and create harmony from their complexity. As a choreographer, the therapist is expected to create new steps and teach the family the dance. For other blended families they expect the magician to perform a vanishing act in which their complexity disappears.

With the finale of the circus, the three rings collapse to form one grand center ring. Here all the entertainers join together and perform a shortened version of their individual acts. In the same way, the therapist must bring the blended family together to view their complexity. Each member performs his own act among the confusion while observing the marvellous feats of the other members---

under the Big Top!

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FACES III

David H. Olson, Joyce Portner, and Yoav Lavee

1	2	3	4	5
ALMOST NEVER	ONCE IN AWHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

DESCRIBE YOUR FAMILY NOW:

- _____ 1. Family members ask each other for help.
- _____ 2. In solving problems, the children's suggestions are followed.
- _____ 3. We approve of each other's friends.
- _____ 4. Children have a say in their discipline.
- _____ 5. We like to do things with just our immediate family.
- _____ 6. Different persons act as leaders in our family.
- _____ 7. Family members feel closer to other family members than to people outside the family.
- _____ 8. Our family changes its way of handling tasks.
- _____ 9. Family members like to spend free time with each other.
- _____ 10. Parent(s) and children discuss punishment together.
- _____ 11. Family members feel very close to each other.
- _____ 12. The children make the decisions in our family.
- _____ 13. When our family gets together for activities, everybody is present.
- _____ 14. Rules change in our family.
- _____ 15. We can easily think of things to do together as a family.
- _____ 16. We shift household responsibilities from person to person.
- _____ 17. Family members consult other family members on their decisions.
- _____ 18. It is hard to identify the leader(s) in our family.
- _____ 19. Family togetherness is very important.
- _____ 20. It is hard to tell who does which household chores.



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FACES III: Ideal Version
David H. Olson, Joyce Portner, and Yoav Lavee

1	2	3	4	5
ALMOST NEVER	ONCE IN AWHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

IDEALLY, how would you like YOUR FAMILY TO BE:

- _____ 21. Family members would ask each other for help.
- _____ 22. In solving problems, the children's suggestions would be followed.
- _____ 23. We would approve of each other's friends.
- _____ 24. The children would have a say in their discipline.
- _____ 25. We would like to do things with just our immediate family.
- _____ 26. Different persons would act as leaders in our family.
- _____ 27. Family members would feel closer to each other than to people outside the family.
- _____ 28. Our family would change its way of handling tasks.
- _____ 29. Family members would like to spend free time with each other.
- _____ 30. Parent(s) and children would discuss punishment together.
- _____ 31. Family members would feel very close to each other.
- _____ 32. Children would make the decisions in our family.
- _____ 33. When our family got together, everybody would be present.
- _____ 34. Rules would change in our family.
- _____ 35. We could easily think of things to do together as a family.
- _____ 36. We would shift household responsibilities from person to person.
- _____ 37. Family members would consult each other on their decisions.
- _____ 38. We would know who the leader(s) was in our family.
- _____ 39. Family togetherness would be very important.
- _____ 40. We could tell who does which household chores.

APPENDIX B

FACES III: Couple Version

David H. Olson, Joyce Portner, and Yoav Lavee

1	2	3	4	5
ALMOST NEVER	ONCE IN AWHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

DESCRIBE YOUR FAMILY NOW:

- _____ 1. We ask each other for help.
- _____ 2. When problems arise, we compromise.
- _____ 3. We approve of each other's friends.
- _____ 4. We are flexible in how we handle our differences.
- _____ 5. We like to do things with each other.
- _____ 6. Different persons act as leaders in our marriage.
- _____ 7. We feel closer to each other than to people outside our family.
- _____ 8. We change our way of handling tasks.
- _____ 9. We like to spend free time with each other.
- _____ 10. We try new ways of dealing with problems.
- _____ 11. We feel very close to each other.
- _____ 12. We jointly make the decisions in our marriage.
- _____ 13. We share hobbies and interests together.
- _____ 14. Rules change in our marriage.
- _____ 15. We can easily think of things to do together as a couple.
- _____ 16. We shift household responsibilities from person to person.
- _____ 17. We consult each other on our decisions.
- _____ 18. It is hard to identify who the leader is in our marriage.
- _____ 19. Togetherness is a top priority.
- _____ 20. It is hard to tell who does which household chores.

FACES III: Couple Ideal Version
David H. Olson, Joyce Portner, and Yoav Lavee

1	2	3	4	5
ALMOST NEVER	ONCE IN AWHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

IDEALLY, how would you like YOUR FAMILY TO BE:

- _____ 21. We would ask each other for help.
- _____ 22. When problems arise, I wish we would compromise.
- _____ 23. We would approve of each other's friends.
- _____ 24. We would be flexible in how we handle our differences.
- _____ 25. We would like to do things with each other.
- _____ 26. Different persons would act as leaders in our marriage.
- _____ 27. We would feel closer to each other than to people outside our family.
- _____ 28. We would change our way of handling tasks.
- _____ 29. We would like to spend free time with each other.
- _____ 30. We would try new ways of dealing with problems.
- _____ 31. We would feel very close to each other.
- _____ 32. We would jointly make the decisions in our marriage.
- _____ 33. We would share hobbies and interests together.
- _____ 34. Rules would change in our marriage.
- _____ 35. We could easily think of things to do together as a couple.
- _____ 36. We would shift household responsibilities from person to person.
- _____ 37. We would consult each other on our decisions.
- _____ 38. We would know who the leader is in our marriage.
- _____ 39. Togetherness would be top priority.
- _____ 40. We could tell who does which household chores.



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