

AN ECOSYSTEMIC APPROACH TO
SINGLE-MOTHER FAMILIES WITH ADOLESCENT CHILDREN

BY

LINDA GIBSON

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SUBMITTED TO THE FACULTY OF GRADUATE STUDIES
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE OF

MASTER OF SOCIAL WORK

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LINDA GIBSON

A practicum submitted to the Faculty of Graduate Studies
of the University of Manitoba in partial fulfillment of the
requirements of the degree of

MASTER OF SOCIAL WORK

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Dedication:

To my children, Lee-Anne and Paul Milburn, who taught me so much about the reality of single-mother families and their children and who willingly sacrificed the time, energy and finances I needed to complete this project.

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AN ECOSYSTEMIC APPROACH TO
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I. Introduction

Nearly forty percent of Canadian marriages now end in divorce creating a phenomenon known as the single-parent, or more specifically, the single-mother family (Foote, 1986). That many of these families have difficulty coping with the stress of the divorce crisis and the strain of the transition to the new family form is shown in the numbers who request and require social work intervention. They may come to the attention of Child and Family Services agencies, school social workers or agencies that offer family therapy as a method of treatment.

Adolescence appears to be a particularly difficult developmental stage for the single-mother family unit. The child's increasing maturity and awareness makes him or her particularly sensitive and responsive to parental distress. The adolescent is then in danger of being coopted into the role of substitute spouse or into taking a side in parental conflict around the divorce. In addition, the vulnerability of a reconstituting family unit cannot provide the structure, control and discipline required for the adolescent to feel secure. Thus the normal separation process is disrupted.

The internal conflicts engendered by the inability of the family system to provide for the adolescent's needs may result in the exaggeration of the normal adolescent pattern of seeking approval and nurturance from peers. He or she may then accept peer activities and

standards as desirable and escape from family conflicts and weakness into drug and alcohol abuse, promiscuous sexual behaviour, school truancy and delinquency. These activities often include premature departure from the family setting to foster or group homes or living a precarious existence on the streets. These undereducated adolescents may also try to support themselves with poorly-paid jobs that offer little or nothing in terms of an economically-viable future.

My interest in this subject originates in the integration of my seven years of professional experience as a Child and Family Services social worker, observing the pain and confusion of these families, and my twelve years personal experience as the single-mother of what are now two older-adolescent children. In the process of searching for a therapeutic procedure that might arrest these difficult dynamics, I made referrals to agencies offering systemic family therapy as a preferred form of treatment. The ecosystemic approach has been used as a practical method for helping single-mother families negotiate the transition from the crisis of divorce to the stabilization of the post-divorce family unit (Morawetz & Walker, 1984; Isaacs, Montalvo & Abelsohn, 1986).

My personal learning objectives in this practicum are:

1. To expand my knowledge of the dynamics of divorce and the issues of the single-mother family form.
2. To increase my knowledge of the ecosystemic approach to the assessment and treatment of single-mother families.

3. To develop the skills of systemic family therapy in a supervised setting.

4. To practice structural and strategic methods of intervention and to assess their effectiveness.

II. Literature Review

Statistical Information

In its 1985 document, Women in Canada - A Statistical Report, Statistics Canada states that "Almost one out of every ten families in Canada is a lone-parent family headed by a woman." Catherine E. Foote (1986) says that if one counts as a family unit only those containing parents and children, the figure rises to sixteen percent. Single-parent families are growing at more than twice the rate of two-parent families since almost forty percent of all Canadian marriages end in divorce. Custody awards go to mothers in five out of six cases with the result that over eighty percent of all single-parent families are headed by women (Foote, 1986).

Life in a single-parent family unit usually means poverty for women and their children since the financial impact of separation and divorce is not borne equally by men and women (Esses & Rachlis, 1981; Foote, 1986). As the woman's standard of living drops, sometimes precipitously, the man's often rises since they have higher incomes while their ex-wives have the expense and responsibility of the dependent children. Women who manage to find and keep jobs find that their incomes, benefits, hours of work, employment status, opportunities and security are inferior to those of men. In addition, child care resources are scarce and often inadequate. Therefore, the mother-headed single-parent family unit is an entity least able to produce sufficient financial resources to meet its needs (Foote, 1986).

Theoretically, when a marriage ends, both parents continue to have contact with and bear financial responsibility for the children of that marriage. In practice, however, most women and many children do not receive maintenance from the noncustodial fathers and those awards that are obtained are often defaulted upon or are for amounts that are inadequate to provide the basic necessities of life. Enforcing the awards is generally time-consuming, expensive and frequently unsuccessful with the result that two-thirds of all single-parent families receive less than the ordered amount and half of those get no maintenance at all (Foote, 1986).

Since over ten percent of all children in Canada live in single-parent family units headed by women, a substantial number of children are suffering economic hardship. This situation improves only if the custodial parent remarries. Four out of five divorced parents remarry with an average time of about three years between marriages. However, half of these second marriages end in divorce as well (Esses & Rachlis, 1981). These facts have frightening implications for the welfare of children because single parents are more vulnerable to psychological difficulties. Their lack of social and personal resources leaves them more susceptible to the negative effects of stressful life events (McLanahan, Wedemeyer & Adelberg, 1981). Since they are their children's only support, protection and security, single-mothers head an extremely fragile family system which often requires social service input and sustenance to survive.

The Process and Effects of Divorce

The decision to resolve marital difficulties by seeking a divorce initiates a crisis of major proportions whose effects are wide-ranging and long-lasting. The period of disequilibrium and disorganization which follows challenges both adults and children in the psychological, interpersonal and socioeconomic spheres (Wodarski, 1982; Wallerstein, 1983). Relationships must be terminated or redefined, assets redistributed, dependency renounced and complex emotional and intimate issues confronted, often by the legal system (Francke, 1983). The process of working through these issues reveals all the negative and destructive tendencies in the participants. Most experts believe that at least three and up to five years are required to work through the stages of divorce and to adjust to post-divorce life (Wallerstein & Kelly, 1980; Francke, 1983; Brown, 1988).

The first year after divorce, called the aftermath by both Morawetz and Walker (1984) and Brown (1988), is a period of intense, acute emotions and high stress. The family system is in crisis and household routines are disrupted as everyone tries to cope with the overwhelming changes being experienced. Children will often become withdrawn or exhibit difficult, antisocial behaviour. Most families have to move to another location to obtain more affordable housing so all family members lose neighbours, friends and social supports associated with the marriage (Morawetz & Walker, 1984). In addition, relationships with the ex-spouse's extended family must be redefined (Brown, 1988).

Most of the burden of restructuring and reorganizing the family unit to allow for the change from a two-person to a one-person parental subsystem falls on the custodial parent. The abrupt decrease in income means that she must consider employment options, career goals and, frequently, further education and re-training. Her preoccupation with these other issues and responsibilities means that she is less available to her children at a time when their need for her reassuring presence is increased (Brown, 1988). They react by becoming more difficult to control and the communication in the family becomes increasingly problematic as the discipline style veers from over-permissive to restrictive and overprotective (Francke, 1983). In her perceived state of powerlessness, the single-mother will pull in a child, parent, or the ex-spouse to help her parent her children. This solution is self-defeating and she may require assistance to help her to manage her children on her own (Morawetz & Walker, 1984; Brown, 1988).

Following divorce social relationships become severely limited due to residential mobility and the loss of friends and contacts connected with the marriage. The single-parent's sense of having failed at a major life task, combined with the pressures of her role as the sole support of the family may lead her to choose social isolation (Brown, 1988). Social support networks function to alleviate stress through the provision of concrete goods and services, emotional support, and more objective observations of the dynamics of family life. The overburdened single-parent has the greatest need for social supports at a time when

she is least able to mobilize and maintain them without assistance (Longfellow, 1979; Brown, 1988).

The second stage of divorce, labelled the realignment by Morawetz and Walker (1984) and Brown (1988), is a period of transition as the post-divorce family integrates the changes initiated during the crisis of the first stage (Brown, 1988). The financial and economic ramifications of the divorce are recognized as a long-term deprivation to which readjustments must be made. Acceptance of the emotional and material losses is an important task to be accomplished at this time. The family must adjust to a reduced standard of living and the loss of the marital home and its attendant relationships and supports. The contraction or elimination of the social circle associated with the marriage and the considerable erosion in the time available for each other are also major privations (Morawetz & Walker, 1984; Brown, 1988). All members of the family must assume new responsibilities within the household as tasks and chores are redistributed and shared (Brown, 1988).

The activity level in the family increases as everyone tries to escape from the sadness, loneliness, and the pain of loss essential to the process of achieving the emotional divorce (Brown, 1988). Some single parents go through a period of considerable, and sometimes indiscriminate, sexual activity, to reassure themselves of their sexual attractiveness (Francke, 1983). However, they are soon disappointed in the superficiality of the singles' social scene and return to seeking a monogamous relationship (Wallerstein & Kelly, 1980). It is a

considerable challenge to balance life as a single with life as a parent. There exists social and sexual discrimination against single mothers on the basis of their age and the presence of their dependent children. In addition, the children often react negatively to the reality of their mother dating men other than their fathers since that activity emphasizes the irreversibility of the divorce (Brown, 1988).

Generally, the functioning of the family system and individual family members shows improvement during the realignment stage. While there are still feelings of regret, ambivalence, depression and loneliness, adaptation to the changes has occurred and some consolidation is taking place. Acute reactions have subsided and some personal growth has been experienced in the process of understanding the failure of the marital relationship and one's personal contribution to it. Some sense of self-worth has been obtained from the successful separation from a negative marital situation. Parenting has improved with the integration of the changes and issues associated with the divorce and the acceptance of the realities of post-divorce life (Wallerstein & Kelly, 1980).

Requests for therapeutic intervention at this stage are usually centred around anger and upset at the changes wrought by the divorce (Morawetz & Walker, 1984). The single-mother may need help to handle the parental role and to handle financial and economic issues independently. She may also require encouragement and assistance to reestablish social relationships (Brown, 1988). Morawetz and Walker (1984) and Minuchin (1984) believe that the challenge for therapists

confronted with a family having difficulty negotiating this stage of transition is to take a positive view of the behaviour presented and to see the strengths of the family and its members.

The third stage of divorce is thought to occur three years after the final separation by Francke (1983) but not until five years after separation by Wallerstein and Kelly. Other authors, Morawetz and Walker (1984) and Brown (1988), combine the views, believing that stabilization after divorce takes from three to five years, depending upon family strengths and the issues involved. This stage is generally seen as one of consolidation of the restructured family with household routines reestablished, new friendships formed and a new equilibrium sensed by all members. The divorce experience has been worked through, understood, and brought to resolution and closure with the participants ready to proceed with their lives. Feelings of self-esteem and competence have been reestablished and the parent-child relationship has become nurturing and consistent (Francke, 1983). A close, dependable sustentative relationship with the single-mother is essential to good outcome for the children of divorce (Wallerstein & Kelly, 1980). The children are then able to attend to their own normal developmental issues.

Even though stable, the single-parent family system operates quite differently from the two-parent family. The single-parent family unit, lacking the expected adult complement, is understaffed and unable to provide for every contingency. Thus illness or injury are perceived as threatening anxiety-provoking events. There are much stronger bonds

between parent and children than in the intact family (Francke, 1983) and financial and economic concerns are discussed frequently by all members of the family. In a single-parent family, the feeling of security and stability is inextricably linked with the economic welfare of the custodial mother (Wallerstein & Kelly, 1980).

Problems at this stage of the divorce process may reflect lack of completion of the required task of becoming independent in the financial parental and social spheres (Brown, 1988). They may also point to fear of perceived threats to the new equilibrium of the single-parent family in the form of serious dating and possible remarriage. A child may try to protect a parent from the possible emotional pain of a new relationship or may try to act in the interests of the ex-spouse to prevent the custodial parent from replacing him (Morawetz & Walker, 1984). Both Brown (1988) and Morawetz and Walker (1984) note that the launching phase may be more problematic for single-parents than for an intact family unit because of the intensity of the parent-child bond. The family may also re-experience the sense of loss connected with the divorce and fear the pain and stress associated with the restructuring of the family after the loss of a member (Brown, 1988).

Thus, divorce is a major life task which is initiated by a crisis. The family must then move through a state of transition until a new family form known as a single-parent family is stabilized. This process requires a systemic restructuring and the reorganizing and redefining of roles, relationships and tasks within the family. It also requires the emotional integration of major losses in material goods, friendships and

social and relational contacts. The effects of these changes on the members of the family will be examined in the following sections.

Effects of Divorce on Custodial Mothers

Although divorce is a multi-faceted experience, affecting each person differently according to their circumstances and personal strengths, the issue of the drastically-reduced financial resources of the single-mother family unit appears repeatedly in the literature (Weiss, 1979; Wallerstein & Kelly, 1980; Esses & Rachlis, 1981; Francke, 1983; Bilge & Kaufman, 1983; Morawetz & Walker, 1988). The custodial mother faces a sudden drop in her and her children's standard of living as soon as the separation goes into effect and she and her ex-spouse are faced with the expenses of maintaining two households. The period immediately after the separation is characterized by turmoil and financial and emotional instability. It is at this point that she must make major life decisions that will have long-term ramifications on herself and her children.

Most single-mothers must obtain a source of income, other than child support or alimony, by working outside the home, or by applying for welfare benefits. Often the family must move from the marital home or relocate in an area more appropriate to available financial resources but disconcertingly alien to the children. The mother must deal with her children's grief and resentment at losing, not only their father, but also their friends, schools, neighbours, familiar child-care resources, and possibly nearby extended family members (Weiss, 1979;

Wallerstein & Kelly, 1980; Wodarski, 1982; Francke, 1983; Pittman, 1987). At this time, she is usually also trying to resolve the legal issues around custody and child support, absorbing the realities of her changed economic circumstances as well as dealing with the emotional impact of the termination of the marriage (Carter & McGoldrick, 1988).

Many women are also faced at this time with the adjustment to full-time employment from being a homemaker and/or part-time wage earner. They also may realize that they require educational upgrading or training for a profession or career but they have insufficient financial resources to allow for this need. They must either accept welfare payments to provide support for the family while they complete the required education or combine full or part-time work with the demands of schooling. Adding the responsibility of balancing the needs of her children to this load can produce a person in a chronic state of exhaustion from trying to fulfill all the tasks heaped upon her (Wallerstein & Kelly, 1980).

Most custodial mothers are happy to work and find their jobs a source of self-esteem and competence which contributes to their sense of independence. A few regard having to work with resentment or resignation but generally, those mothers who stay at home are incapacitated in some way by depression, alcoholism and physical or psychological illnesses that often existed prior to the divorce (Wallerstein & Kelly, 1980).

Most child support awards are inadequate to the family's need and the custodial mothers and their children live on considerably less

income than the noncustodial fathers. The question of returning to court to petition for an increase in support must be considered in all its ramifications by the mother. Going back to court has a high cost both emotionally and financially for the woman. Unless she is very low income or on welfare, she faces the daunting prospect of astronomical legal bills with no guarantee that she will even receive an increase in child support. If she does receive an increase, it may not be an amount sufficient to offset her costs. The emotional cost is that in the process of preparing for, observing, and engaging in the court hearing, she must exhume and re-experience the hurt and the anger that was inevitably part of the original divorce. Even with the income from employment and child support payments, most custodial mothers and their children have incomes that barely provide for the basic necessities of life. The single-mother lives in a chronic state of low-level anxiety that some sudden unexpected expenses will loom for which she has no accumulated financial savings or investments (Weiss, 1979; Wallerstein & Kelly, 1980).

The emotional effects of divorce on custodial mothers largely reflect the circumstances around the separation in the first year. Those women to whom the marital breakdown was a surprise, that is, those whose husbands left to form a relationship with another partner (with whom they had been carrying on an adulterous affair) experienced initial shock and denial. This reaction was followed by a state of despondency, characterized by feelings of abandonment and intense longing for the departed spouse (L'Hommedieu, 1984; Jacobson & Jacobson, 1987; Pittman,

1987). However, women who had themselves made the decision to terminate an unsatisfying and often destructive marital relationship often felt initial relief and euphoria.

Both groups soon move to feelings of anger and sometimes rage that, while perhaps caused primarily by the difficulties of the situation, becomes directed at the real and imagined sins, character flaws, acts of omission and commission of the ex-husband. Jacobson and Jacobson (1987) compare these responses to divorce to the stages of mourning in bereavement. Along with anger at one's ex-spouse, most custodial parents experience depression, feelings of being overwhelmed and overburdened with responsibility, and loneliness. If they plunge into a frantic social life after the separation, they usually discover the emptiness and superficiality of the casual sex scene and return to preferring monogamy and stability (Weiss, 1979; Wallerstein & Kelly, 1980; Morawetz & Walker, 1984).

Although the immediate post-divorce period is full of stress and turmoil for the participants, life does eventually stabilize and most women express some degree of satisfaction with their new lives and the personal growth they have experienced. They have adapted to a difficult situation and are surviving. They express relief at having left behind a difficult and ungratifying marital relationship and are deriving pleasure from their relationship with their children. Many have learned to be better parents and have reaped the benefits of closeness, mutual respect, and affection from the single-parent situation. Many women also find that in trying to resolve the emotional divorce issues, they

have the opportunity to examine and reevaluate themselves and their personal history. Restructuring the total experience of the marriage and the divorce helps them to understand themselves and their relationship history and raises the possibility of making better, more informed choices in their lives in the future (Wallerstein & Kelly, 1980; L'Hommedieu, 1984).

Effects of Divorce on Parenting

Divorce inevitably affects the parenting of children because it creates a wall of guilt and blame between parent and child. When a child sustains an injury, emotional or physical, from the world at large, his or her natural response is to turn to a parent for comfort and protection from further hurt. But divorce is a within-family trauma; the child's pain is being caused by the very persons to whom he or she would otherwise turn for succor. The child's sense of trust and security is lost as the family becomes perceived as treacherous and impermanent. While the parent may perceive the divorce as an opportunity to be free of the painful burden of an unsatisfactory marital relationship, the child almost always sees the divorce as an unmitigated disaster. The custodial parent is blinded to the child's pain because of her own misery plus her guilt at being the cause rather than the reliever of the child's distress. Thus the mother-child relationship deteriorates with the reduction in the trust level resulting in reduced cooperation and understanding (Wallerstein & Kelly, 1980; Francke, 1983; Pittman, 1987; Peck & Manocherian, 1988).

Another result of divorce is the reduction of the time available for parent-child interaction. The child's time with the father is limited to awkward, stilted, unnatural and often inadequate visitation periods. Instead of being a parental figure, he may become a type of perennial "Santa Claus" showering his children with gifts and good times (Wallerstein & Kelly, 1980; Francke, 1983). The child also loses in terms of the time available from the custodial mother who is trying to juggle the demands of a full-time job, her new social life and possibly further education as well. She is distracted from the needs of her child to the double burden of tasks and responsibilities she has assumed and her desire to reaffirm her social and sexual desirability. The child reacts to the situation by becoming difficult to manage when mother is least able to cope with the instrumental and emotional load she is already carrying (Wallerstein & Kelly, 1980; Morawetz & Walker, 1984; Pittman, 1987).

For reasons that are not yet clear, divorce and life in a single-mother family appears to affect boys more negatively than girls (Wodarski, 1982; Francke, 1983; Bilge & Kaufman, 1983; Peck & Manocherian, 1988). It is thought that there forms a bond of mutual support between a daughter and her same-sex parent that is not possible for sons in single-mother households (Wodarski, 1982). Boys may feel the lack of the "male role model" or especially if older, may simply, like much of the rest of society, refuse to recognize and cooperate with a woman in a position of authority over them (Esses & Rachlis, 1981; Goodrich, Rampage, Ellman & Halstead, 1988).

Mothers often have difficulty assuming the role of the authority and disciplinarian in the family. As noted above, women are generally not sanctioned by the rest of society to hold positions of power and control. This external prohibition is reflected internally especially for women whose experience of family life has been of the traditional, patriarchal model. Many have divorced physically and sexually abusive spouses and are then faced with having to assume a role for which they have had no preparation or training, that of being the focus of authority and control in their family (Wallerstein & Kelly, 1980).

Gaining and maintaining the position of head of the household is a difficult but crucial process in the formation of a viable single-parent unit. If mother refuses or hesitates to impose and enforce unwelcome rules, out of fear that the children will prefer the other parent or guilt at what her children have suffered because of the divorce, disorder results. Her attempts to placate or please her children to avoid being rejected by them backfire as they become increasingly frightened and angered by her helplessness. Halting the spiral of dysfunctional parenting with mother's confident assumption of control over the children's behaviour is a fundamental task in the establishment of workable parenting arrangements after divorce (Wallerstein & Kelly, 1980; Wodarski, 1982; Francke, 1983; Morawetz & Walker, 1984; Peck & Manocherian, 1988; Brown, 1988).

Mother and children are very aware of the fragility of the family unit. With only one adult available to perform tasks, set appropriate rules and regulations, supervise the functioning of the household, deal

with external forces, and acquire the necessary financial resources, there is no room for weakness, ineptitude, long-term illness, or sudden disaster. Children are unable to take the one remaining parent for granted. They are conscious that she is their sole source of support and bulwark between themselves and alienation from known family life. They become preoccupied with mother's welfare and worried if she becomes ill or incapacitated. Their awareness of their dependence upon her makes them more attuned to her moods and needs and facilitates the development of a close, tight family unit with relatively rigid boundaries (Weiss, 1979; Wallerstein & Kelly, 1980; Francke, 1983; Morawetz & Walker, 1984).

Wallerstein and Kelly (1980) and Wodarski (1982) describe the first year after divorce as a stress-filled transition period during which the quality of parent-child relationships deteriorates and inconsistency and demand-based parenting are the rule. However, as the single-parent unit establishes itself, new and unique patterns of mother-child functioning appear. Although mother must be seen to be ultimately in charge of the family unit, it is recognized by all members that she cannot fulfill all the demands made upon her by her position as head of the household. Therefore, the only alternative available to keep the family functioning is for the children to perform the tasks appropriate to their level of maturity and ability. This increased responsibility must then be balanced by the recognition by the parent of the child's contribution in the form of input into the process of family decision-making. Thus the single-parent family takes on a much more democratic, less hierarchical

structure than the traditional two-parent family form (Weiss, 1979; Wallerstein & Kelly, 1980; Esses & Rachlis, 1981; Morawetz & Walker, 1984; Brown, 1988).

Goodrich, Rampage, Ellman and Halstead (1988), taking a feminist point of view, see the cooperative democracy of the single-parent family, not only as functional for this family form, but also as functional for all family forms. They reject the idea that hierarchy is necessary to family organization and see it as patriarchal and regressive in nature.

Although there are many factors that make parenting children of divorce difficult, the general consensus is that the most harm is done to the child when the spouses are unable to resolve their separation and continue to fight and refight the divorce over a period of years (Weiss, 1979; Wallerstein & Kelly, 1980; Wodarski, 1982; Francke, 1983; Morawetz & Walker, 1984; Jacobson & Jacobson, 1987; Pittman, 1987; Peck & Manocherian, 1988; Brown, 1988). The parents' preoccupation with the old marital battles can result in psychological harm to the child. The child's needs are neglected or misinterpreted and he or she is prey to the tearing force of conflicted loyalties. Some children resolve the conflict by allying with one parent against the other. This process results in physical and emotional cut-off from one parent, and again the child suffers (Weiss, 1979, Wallerstein & Kelly, 1980; Francke, 1983). If a child happens to resemble, or remind the angry custodial parent of the hated ex-spouse, the child can become the recipient of irrational

projected anger, regardless of the behaviour he or she exhibits (Morawetz & Walker, 1984).

Thus, it can be seen that divorce has a considerable effect on parenting. The parent-child relationship suffers because of the reduction in time available for contact and the inability to understand and respond to each other's pain. The parental hierarchy becomes much less distinct with children having more input into task accomplishment and decision-making. The most negative impact on parenting occurs when the parents are unable to resolve the emotional issues around the divorce.

Effects of Divorce on Children

Although children experience the divorce of their parents differently depending upon their age, sex, developmental stage, family circumstances, history and personal strengths, there are some denominators common to all. Divorce is a pivotal event of a child's growing up years and while the parent may perceive benefits from the experience, the child is able to see only his or her losses for some considerable time. The central loss is that of the noncustodial parent, usually the father. The child perceives that he or she has been abandoned and experiences feelings of overwhelming sadness and yearning for the missing parent. The child also loses time with the custodial mother who is overburdened with responsibility and feelings of guilt, and trying to stretch herself between her job, her friends, her children and her new social life. The fact that mother is no longer as available as she once was to attend to the child's physical and emotional needs is

perceived by the child as rejection (Weiss, 1979; Wallerstein & Kelly, 1980; Wodarski, 1982; Francke, 1983; Wallerstein, 1983; Morawetz & Walker, 1984; Jacobson & Jacobson, 1987; Pittman, 1987; Peck & Manocherian, 1988; Brown, 1988).

The fact that single-parent families usually have to move from the marital home for financial reasons means that the children not only are deprived of their home, but also of their neighbourhood, friends, peers, social supports, and often of their extended family, especially those on the noncustodial parent's side. The child's respect for his or her parents is considerably diminished because divorce is seen by the child as an act of selfishness. He or she is thus confronted by a parental failure, an inability or unwillingness to put the child's needs before the parents' own (Weiss, 1979; Wallerstein & Kelly, 1980; Francke, 1983; Wallerstein, 1983).

The child also loses the feeling of stability and security in his or her life, especially concerning economic and financial issues. Even young children can sense the precariousness and vulnerability of the single parent family unit. Children of divorce lose the ability to concentrate on their own needs, to be naturally self-centred and selfish, focused on their own developmental tasks. Instead, they shoulder responsibilities and perform functions that would normally not be asked of them in an intact family. They also worry about the custodial parent's capacity and ability to provide for them. They feel nostalgia for the predivorce family, are concerned for the welfare of both parents, and experience the emotions of fear, anxiety,

helplessness, powerlessness, and sadness, particularly in the aftermath of the divorce (Weiss, 1979; Wallerstein & Kelly, 1980; Wodarski, 1982; Francke, 1983; Wallerstein, 1983; Morawetz & Walker, 1984; Pittman, 1987; Peck & Manocherian, 1988; Brown, 1988).

The child's new status as a member of a single-parent family, a product of a so-called "broken home" means that he or she must confront all the negative stereotypes and discrimination against this family form in society at large. The child is considered to have a future as a school failure, juvenile delinquent, social assistance recipient, alcoholic, drug addict, criminal, homosexual, and/or mentally unstable person (Ahrns, 1980; Wallerstein & Kelly, 1980; Bilge & Kaufman, 1983; Pittman, 1987). This prejudice can have a crippling effect on a child already struggling with intense intrafamily and personal issues.

If the parents have been unable to resolve their divorce issues, the child often becomes torn between them, part of their conflicts and the object of their competition with each other. If the child aligns with one parent, he or she often forfeits the other. If the child manages with a supreme effort of will, to remain neutral, he or she will often be resented by both parents (Weiss, 1979; Wallerstein & Kelly, 1980; Wodarski, 1982; Wallerstein, 1983; Morawetz & Walker, 1984; Jacobson & Jacobson, 1987; Peck & Manocherian, 1988; Brown, 1988).

The child of divorce is called upon to resolve the divorce experience in addition to accomplishing the normal developmental tasks necessary in moving through childhood and adolescence to adulthood. Wallerstein (1983) identified sex separate tasks or challenges that the

child of divorce must complete in order to be able to achieve resolution of the divorce experience, and move into relationships freed of the undermining effect of parental actions and failures. The child must first accept the reality of the divorce and then turn from preoccupation with it to his or her personal tasks and activities. The child must mourn the loss of the intact family and accept the reality of the post-divorce situation. The parents and the self must be forgiven for the failure to preserve the marriage. The child must accept the permanence of the divorce while realizing that his or her parents' failure at a marital relationship does not necessarily predict his or her own ability to maintain an intimate relationship, to love and be loved in return (Wallerstein, 1983).

Thus the child of divorce must accomplish the formidable task of resolving the divorce experience in order to be free to meet the challenges of normal growth. Grieving the losses of the noncustodial parent, accustomed time with the custodial parent, economic and emotional security, and the neighbours and friends associated with the intact family is an essential part of that process. If the parents are unable to resolve their conflicts and the child becomes involved in parental battles, his or her development may be stalled. This situation may require therapeutic intervention to enable all members of the family to bring the divorce experience to closure.

Effects of Divorce on Adolescents

The adolescent life stage is a period of stress for all families. It is a time of accelerated physical and sexual growth and of

establishing an individual identity and independence from the family unit. Emotions are intense and confusion reigns as the adolescent attempts to deal with the changing and conflicting expectations of society, peers and family regarding sexuality and behaviour (Preto, 1988). Change is the order of the day as the adolescent fluctuates between childhood and adulthood in all of their manifestations. The child veers from wanting complete responsibility for personal decision-making to desiring parental guidance and approval. Parental opinions and standards of behaviour may be accepted one minute and those of peers valued more highly the next. He or she will vacillate from seeing the parents as superior, near-perfect figures worthy of admiration to perceiving them as weak, incompetent, antiquated creatures worthy only of contempt. Adolescents shift from one end of a continuum to the other with little warning or awareness. But, while the process appears random and unpredictable, the child is generally making slow and erratic but steady progress toward a mature identity and a set of acceptable personal standards (Minuchin, 1974; Weiss, 1979; Wallerstein & Kelly, 1980; Beal, 1980; Francke, 1983; Preto, 1988).

For the child in the adolescent developmental stage, the family is a crucial support, a base from which to stage longer and more frequent excursions into the adult world as the years pass. Home is a haven to which one can retreat when hurt, confused and overwhelmed by the outside world. It is a place to recover and prepare for another foray into the world of adulthood. The parents provide boundaries, guidelines and protection from the adolescent's own immature excesses and risky actions

and decisions. In the process of growth, the child questions and tests parental standards, values, beliefs and attitudes. The conflict that results is part of the normal adolescent developmental task of separating and individuating from one's family of origin. The parent's role is to be flexible but consistent in exerting authority, allowing for growing independence but protecting the child from his or her own dangerous or ill-advised behaviour and choices, especially those with long-term implications (Minuchin, 1974; Weiss, 1979; Wallerstein & Kelly, 1980; Minuchin, 1981; Francke, 1983; Preto, 1988).

Divorce adds turbulence and complexity to an already confusing developmental process. It often turns normal parent-child relationships upside-down with the adults confronting adolescent issues and the adolescents accelerating their progress to adulthood. In the turmoil resulting from divorce what is needed in the family system is fewer dependent children and more adults who can care for themselves. The parents are preoccupied with their own issues and concerns and thus are not available as a support to the adolescent. External controls on adolescent behaviour are weakened as inconsistency becomes the only constant. The parents vacillate from trying to impose rigid, controlling rules, inappropriate to the child's developmental stage, to neglecting to make or enforce any boundaries at all. Because the parents are unable to react realistically and rationally in the midst of the turmoil, the process of testing parental limits is disrupted. The adolescent is often called upon to be sensitive to and supportive of one or both parents in their distress. Or, because of the parents'

insensitivity to the child's needs, the adolescent is neglected or abandoned to his or her own devices (Weiss, 1979; Wallerstein & Kelly, 1980; Beal, 1980; Francke, 1983; Pittman, 1987).

Sex becomes a central issue in families where divorce has occurred and one or both parents is attempting to establish a social life as a single person. Parental sex life becomes more visible to the adolescent and is a forceful reminder of the reality of the separation and that, largely unacknowledged, wishes to restore the marriage will not be fulfilled. The parents are also confronting the same issues as the adolescents regarding dating and sexuality, thus reducing or eliminating the distance between the generations on this issue. It is not unknown for both parent and child to be dating people in the same age group, causing the adolescent to feel discomfort, embarrassment, and in social and sexual competition with a parent (Weiss, 1979; Wallerstein & Kelly, 1980; Beal, 1980; Francke, 1983; Morawetz & Walker, 1984; Jacobson & Jacobson, 1987; Peck & Manocherian, 1988; Brown, 1988).

The most obvious and pervasive emotion exhibited by adolescent children of divorce is anger. They are critical of their parents and assign relative responsibility for the divorce which they regard as a failure on the part of one or both parents. They assess their parents pre- and post-divorce behaviour (especially sexual), often finding it lacking in maturity and appropriateness. They regard the divorce as evidence of parental incompetence in maintaining relationships and of parental selfishness in putting adult wants and needs ahead of those of their children. Divorce forces the adolescent to perceive and relate to

his or her parents as individuals before he or she is developmentally ready to do so. It is difficult for the adolescent to accept that a parent has left the home when, in the normal scheme of things, it is the adolescent's role to leave the parents (Longfellow, 1979; Wallerstein & Kelly, 1980; Francke, 1983; Jacobson & Jacobson, 1987; Peck & Manocherian, 1988).

One of the most emotionally precarious inclinations of the adolescent family, truncated as a result of divorce, is the use of an adolescent child as a substitute spouse. Adolescents are particularly vulnerable to being pulled in as a support to a single-parent because of their age and level of competence and understanding. They are very aware of parental distress and worry about the welfare of both parents. But when they become a source of nurture and a confidant to one parent, their ability to continue or resume the normal developmental task of separation from parents is curtailed or halted altogether (Weiss, 1979; Wallerstein & Kelly, 1980; Beal, 1980; Francke, 1983; Morawetz & Walker, 1984; Peck & Manocherian, 1988; Brown, 1988).

Another problematic situation occurs when both parents continue to fight and refight the divorce by each demanding the adolescent's support and endorsement for his or her criticisms, condemnations and demands of the other. The child, who loves both parents, is thus placed in an intolerable loyalty bind and will often react by prematurely disengaging from both parents and seeking validation outside the home. Reaction to overwhelming parental needs, lack of consistent boundaries and awareness of parental conflicts leaves the adolescent vulnerable to wholesale

acceptance of peer standards and approval. he or she will begin to truuant from school, become involved in delinquencies, engage in alcohol and drug abuse, and become sexually indiscriminate. These excesses are not only dangerous in and of themselves, but also because decisions made at this point will have ramifications on the adolescent's future (Weiss, 1979; Wallerstein & Kelly, 1980; Beal, 1980; Francke, 1983; Morawetz & Walker, 1984; Jacobson & Jacobson, 1987; Pittman, 1987; Peck & Manocherian, 1988; Brown, 1988).

Experiencing divorce and life in a single-parent family has some positive aspects for adolescents. The assumption of more responsibility within the home in the form of household tasks and care of younger siblings can engender a sense of one's competence and maturity. Adolescent children of single-mothers are more aware of the value of money and the various financial issues faced by the family. Many become less demanding and more inclined to accept fewer material goods as well as to contribute to the family income by working part-time and saving for major expenditures such as post-secondary education. Because of their ability to reflect upon relationships and to understand the complexity of interpersonal issues, adolescents become aware of the possibility of making mistakes or failing in this area. They also have the capacity to determine strategies for avoiding the emotional pitfalls that preceded and predetermined their parents' divorce (Weiss, 1979; Longfellow, 1979; Wallerstein & Kelly, 1980; Goodrich, Rampage, Ellman & Halstead, 1988; Peck & Manocherian, 1988).

Of all dependent children, adolescents are the best able to manage the impact of their parents' divorce on their lives because of their increasing autonomy from the family. They are the least likely of all age groups to blame themselves for the divorce. They have the ability to distance themselves emotionally from parental conflicts and escape the turmoil in the family by gravitating to external interests and activities with peers (Beal, 1980; Wodarski, 1982; Francke, 1983; Jacobson & Jacobson, 1987).

However, they are also the age group most able to express their anger, embarrassment and hostility at their parents and the choices the parents have made. They can verbalize their negative opinions and present symptomatic behaviour seen as problematic by parents, community, schools, etc. They are old enough to feel threatened by perceived parental failures and to worry that they might predetermine their own failures in intimate relationships. Adolescents are thus much more openly upset by divorce than are younger children and their distress is much more difficult for the preoccupied parents to ignore. The severity of adolescent reactions to divorce (delinquencies, violence, substance abuse, overt sexual activity) will usually force the family to seek help to resolve outstanding issues regarding the divorce or the functioning of the single-parent family (Longfellow, 1979; Wallerstein & Kelly, 1980; Beal, 1980; Wodarski, 1982; Francke, 1983; Jacobson & Jacobson, 1987).

Factors in Successful Resolution of Divorce

While divorce is a traumatic experience for every family, there are central factors which, when present, help to ameliorate the pain and assist the healing process for all concerned. Generally accepted as the most important of these factors is the parental resolution of the conflicts that led to and were part of the divorce experience. If both parents have a positive and conciliatory attitude to the divorce and each other and are able to function in a co-parental relationship without undue strain or hostility, the children's ability to accept the divorce and resolve their own feelings is enhanced. The reality is that while the spousal relationship has been terminated, the former marital partners will forever be linked by the fact that they are both parents to the same children. They must accept that reality in order for their children to move past the divorce and on to confront their own personal and developmental issues (Weiss, 1979; Wallerstein & Kelly, 1980; Ahrons, 1980; Wodarski, 1982; Francke, 1983; Wallerstein, 1983; Morawetz & Walker, 1984; Jacobson & Jacobson, 1987; Peck & Manocherian, 1988).

Another important factor in the successful resolution of divorce is the positive attitude and workable situation of the single-parent mother. If she has adequate job skills enabling her to earn a reasonable salary, good educational level and satisfactory child care arrangements, the single-parent family then has the resources needed to survive. In order for the family to have financial resources sufficient to sustain a standard of living acceptable to its members, not only does the custodial mother need a good income, but there must also be reasonable, regular, and dependable child support payments from the

noncustodial father. If possible, a move from the marital home should be avoided (Weiss, 1979; Wallerstein & Kelly, 1980; Wodarski, 1982; Francke, 1983; Morawetz & Walker, 1984).

An optimistic outlook on the part of the single-mother is a key component in the adjustment of the entire family to post-divorce life. She must have a good self-image and feel able to cope with the myriad challenges she has to confront in her role. Her children need to have a good, nurturing relationship with her and feel confident in her ability to provide them with realistic and consistent boundaries, caring and support, as well as the necessities of life. They also need regular and liberal access to their father and the knowledge that both parents will cooperate to determine and ensure their best interests (Weiss, 1979; Wallerstein & Kelly, 1980; Wodarski, 1982; Wallerstein, 1983; Francke, 1983; Morawetz & Walker, 1984). When these conditions exist, the post-divorce family has a reasonable chance to resolve the divorce experience in a way that their lives can be continued without reacting to situations as if the divorce were continuously happening in the present. They will thus have reached closure.

Factors Preventing Divorce Resolution

Although divorce is a difficult experience for all families, certain conditions intensify the trauma and predetermine that all members of the family will be impaired for some time to come. Continuing conflict between the parents, as if they are stuck in the immediate post-divorce crisis stage, is most harmful for all involved. Dissatisfaction with post-divorce life is blamed on the ex-spouse and

standards of living are monitored for relative advantages and disadvantages with the children often being used as sources of information. The children are solicited for their support against the other parent and may be coopted into a coalition with one parent against the other. This process interferes with the accomplishment of normal developmental tasks and hinders the children in their attempts to proceed with their own lives (Weiss, 1979; Longfellow, 1979; Wallerstein & Kelly, 1980; Ahrons, 1980; Goldsmith, 1982; Wodarski, 1982; Francke, 1983; Morawetz & Walker, 1984; Jacobson & Jacobson, 1987; Peck & Manocherian, 1988).

If the single-parent mother has difficulty handling the role and its demands, her children will feel frustrated and frightened. Many women become overburdened by the social and economic tasks they must perform and stressed by financial pressures and the demands of their children. They feel incapable of managing their children by themselves and will often draw in another person to enforce their authority or to take over their role. That person may be a parental child, the father of the children or a grandparent. No matter what the identity of the third person in the family triangle, this method of filling the power vacuum confuses the family hierarchy and allows the single-parent mother to avoid becoming competent in her new role. This dynamic will often result in one of the children becoming symptomatic and the family requiring assistance in redrawing boundaries (Weiss, 1979; Wallerstein & Kelly, 1980; Goldsmith, 1982; Morawetz & Walker, 1984; Brown, 1988).

Some divorces occur in families where the mother's mental health is already precarious and the negative effects of the divorce intensify dysfunction already present or precipitate a significant decline in parental functioning. In these families, the single-parent mother's need overwhelm those of her children and they become included in the parental unhappiness and depression. The generational boundaries become blurred and post-divorce role reversal is sustained with the children assuming excessive premature responsibility. The mother leans on the children for care and nurturance and becomes unable to tolerate the children's dependence upon her (Longfellow, 1979; Wallerstein & Kelly, 1980; Beal, 1980; Goldsmith, 1982; Morawetz & Walker, 1984; Jacobson & Jacobson, 1987).

Divorce can also occur in families with a history of poor parenting, neglect and abuse, and it can create the situation where a mother becomes preoccupied with her own social and sexual activities on a continuing basis. She becomes insensitive to and largely unaware of her children's needs and their distress regarding her inconsistent interest in their care and welfare (Wallerstein & Kelly, 1980).

Thus it can be seen that divorce can initiate situations where family members fail to achieve resolution of the experience or it can complicate and exacerbate an already dysfunctional parenting pattern. In either situation, the children are intimately involved and sustain psychological wounds which may never be healed.

Ecosystemic Implications of the Problem Divorce and the Single-Mother
Family Unit

A. The Ecosystemic Approach

An ecological approach to families in difficulty assumes that people are continually impacting upon their environments and that, in turn, their environments affect their outlook and behaviour. It postulates that for people to grow and develop their potential, there must be reasonable compatibility between individuals, their families and the environments of which they are a part. Thus the aim of treatment is to facilitate the alteration of relationships within families and between families and their contexts (communities, institutions, government policies, etc.) so that deficits may be overcome and opportunities for growth and development fully realized (Germain, 1979; Hartman & Laird, 1983; Aponte, 1986; Pardeck, 1988).

The ecosystemic perspective views family problems as having no single cause but a complex and circular pattern in which change in one part of a system will reverberate through it causing changes in other parts. Thus symptomatic behaviour must be considered in its context and assessed in terms of its function in the family system as well as its impact upon external factors. By definition, the reverse is also true since environmental influences can be a very powerful agent influencing the family and the perceptions of its members. Dysfunctional behaviour, seen as part of its social environment, may be perceived as a normal response to a maladaptive system (Germain, 1979; Hartman & Laird, 1983; Morawetz & Walker, 1984; Pardeck, 1988).

The process of change using an ecosystemic approach must include the assessment of relationships and the identification of behaviour patterns and recurring interactional responses. Along with the problems, individual and systemic strengths must be evaluated as sources of improved functioning. Decisions must be made as to what issues should be selected for change and in what sequence. Once change has been effected in one area the systemic connections will spread the change effort and alter relationships and transactions elsewhere in the system (Germain, 1979; Hartman & Laird, 1983; Morawetz & Walker, 1984; Aponte, 1986; Pardeck, 1988).

B. The Problem Divorce

As outlined previously, divorce is a crisis causing severe dislocation of family relationships and creating the necessity for role redistribution and realignment for every family. In order for the family system to stabilize, the children of the marriage must be permitted to sustain their love for and respect of both parents through the divorce experience. They need to feel confident that parental involvement and protection will continue and that the responsibility for the termination or continuance of the parental relationship remains with the parents (Isaacs, Montalvo & Abelsohn, 1986).

Some families require clinical interventions to assist the stabilizing process after divorce. Beal (1980) believes that change efforts should target the emotional fusion with the family of origin that is at the heart of the characteristic multigenerational marital

instability. The object is to resolve parental and spousal attachments and assume responsibility for one's own part in the marital problems.

Ahrons (1980) believes that the challenge after divorce is to redefine the family relationships. She highlights the importance of clear rules to outline the boundary between the parental roles, which must be altered but continued, and the spousal roles, which must be concluded. For the sake of the child, it is most important that the parents be able to cooperate in their child-rearing function.

Goldsmith (1982) agrees that the clarity and consistency of the boundaries between the parental and spousal roles is fundamental in the process of divorce resolution. She believes that a child's symptomatic behaviour can function to keep the parents connected in their spousal roles. A child may also take on a parental or spousal role with the custodial mother, thus retarding the development of peer relationships for both parent and child. The therapeutic process should then be aimed at restoring or creating a more appropriate generational hierarchy.

Isaacs, Montalvo & Abelson (1986) focus on the resolution of parental abdication dynamics which can develop when a divorcing family is in the adolescent life stage. In the parent's preoccupation with their own issues, they may fail to provide structure and nurturance for the child. Abdication can perpetuate a cross-generational alliance with one parent that weakens the child's relationship with or repudiates the other parent. There may be an unacknowledged agreement between the parents to relieve each other of responsibility for the child. They may

each refuse to assume responsibility, either until the other does or in order to force it on the other.

The adolescent reacts to these dynamics by disengaging from the family in order to escape parental anger or dependency and to find required nurturance elsewhere. If he or she is emotionally aligned with the noncustodial parent, distance may serve as partial protection from the vindictiveness of the custodial parent. In their anger at their parents' decision to divorce and deprive them of their families and security, adolescents will frequently attempt to outmaneuver and defeat legitimate parental attempts to control unacceptable behaviour. Abdication is thus a feature of unresolved parental conflict which has a detrimental effect upon the adolescent's ability to complete developmental tasks (Isaacs, Montalvo & Abelson, 1986).

In conclusion, ecosystemic intervention with families of divorce should focus on terminating the spousal relationship, redefining the parental roles, establishing appropriate hierarchy in the single-parent family, resolving emotional fusion with the family of origin and reducing parental conflict to the point where they can focus on the best interest of their children.

C. The Single-Mother Family

While the single-mother family is often created by divorce and many of the issues pertain to resolution of that experience, the family form itself deserves consideration as a separate entity when clinical intervention is initiated. The transition from a two-parent family, through the disequilibrium of divorce, to a stable single-parent family

system is a process that takes several years. During that time family members must grieve the loss of the intact family, redefine the relationships in the new family form, assume additional task assignments, and establish and maintain peer relationships (Beal, 1980; Goldsmith, 1982).

When a single-mother family presents itself for treatment, an evaluation of the family system must be made. The key factor is the involvement of the noncustodial father in child-rearing. If he has opted out, treatment is designed for a single-parent family unit. If he is part of a parental subsystem, then he must be considered as part of the plan and, if appropriate, involved in the therapy process (Goldsmith, 1982).

In the evaluation process, the therapist should consider a number of possible functions for the presenting problem or symptomatic member. If the parents have failed to resolve their divorce, the child may be scapegoated as a reminder of the hated ex-spouse. If the child has assumed a spouse-like role and has a peer relationship with the single-mother, the family hierarchical boundaries will be indistinct or nonexistent. The single-mother may be simply overwhelmed by her reaction to the divorce or by the task overload which is an integral part of the role. She may also be burdened with guilt for having chosen divorce, thus putting her own needs ahead of those of her children (Morawetz & Walker, 1984).

In the period following divorce, the single-mother may have turned to her family of origin for support and thus reawakened the

intergenerational conflicts around dependency issues. She may have abdicated her parental role as generational boundaries became blurred. In this situation, intervention should include or, at least take into account, the third generation (Goldsmith, 1982; Morawetz & Walker, 1984; Brown, 1988).

Single-mother families with adolescent children often come into conflict when the parent re-enters the social scene and both mother and child are confronting the same issues. The parent-child hierarchy destabilizes as the child becomes protective of the parent (Morawetz & Walker, 1984) or angry, resentful and critical of parental activities and moral standards (Brown, 1988). Because of the more intense emotional attachments, single-parent families often have more difficulty than intact families dealing with a child leaving home and may present for treatment around this issue (Morawetz & Walker, 1984; Brown, 1988).

The single-parent family is particularly vulnerable to hierarchical inversion and confusion. The loss or lack of a spouse means that the remaining parent and children move closer together. The resulting emotional closeness may be adaptive and functional if the parent has the ability and willingness to take absolute authority in the family when necessary. Morawetz and Walker (1984) observe that the well-functioning single-parent home requires a parent who is able to move from a cooperative, consensus style of management to taking total executive control with relative ease and credibility.

Minuchin, Montalvo, Guerney, Rosman, and Schumer (1967) note that single-parent mothers are more at ease fulfilling the nurturing needs of

their children but their anxiety increases notably when they are asked to perform executive or control functions. The closeness between parent and child confuses the hierarchical boundaries and behaviour management becomes an issue. For the single-parent, taking a firm, uncompromising stand may mean that she is then acting like her former partner. If he was abusive, she may equate taking control with being aggressive and abusive, and recoil in revulsion.

The single-parent may feel guilty that her child(ren) have been deprived or damaged by the divorce and then wish to compensate them for their losses by being kind, magnanimous, and overlooking their behavioural violations. Her difficulty imposing appropriate rules and boundaries may be due to the lack of energy, sheer exhaustion or illness that may result from having too much to do and too little time in which to get it done. The boundary confusion might be exacerbated by the parent and child confronting similar social issues on the dating scene or by the single-parent and children sharing living accommodations with grandparents.

Glenwick and Mowrey (1986) describe the "Parent Becomes Peer" family in which a late latency age child becomes a peer-partner with his or her mother. In this kind of single-parent family, the mother feels inadequate and depends upon her child for emotional support. The child may even have the role of the absent parent, recreating the marital conflict. The mother may project her own feelings and attitudes on to the child who may show psychosomatic symptoms or behaviour problems.

Clinical intervention is focused on redefining and emphasizing the boundary between parent and child by reminding mother of her maternal role and what can reasonably be expected from the child according to the child's age. Mother also must be assisted to recognize her child's "otherness"; that the child may not and probably does not have the same feelings about the divorce and the ex-spouse as she does. Mother may need to be encouraged to develop outside sources of support while the child may need help to express feelings about the divorce and to mourn the loss of a parent. The child will need reassurance of her lovability and lack of responsibility for the divorce.

Fulmer (1983) believes that hierarchical disturbances are maintained by mother's depression which takes the form of apathy and being overwhelmed and overburdened by responsibilities. In systemic fashion, the children misbehave in order to relieve their anxiety about mother's welfare and to provoke her into becoming angry and active (which is normal and reassuring) rather than depressed and sad (which is frightening). He believes that all members of the family operate by the rule that sadness and grieving are not allowed. Therefore the children distract mother from mourning and mother restrains the children from expressing their grief. The process of mourning is never completed, reattachment to peers is not possible, and the over-involvement of parent and children continues.

Fulmer (1983) emphasizes the importance of grieving the loss of the marital relationship and the hopes that were part of it. The characteristic lack of human and financial resources in the single-

parent family means that mother often cannot allow herself to mourn and be sad about the loss because she must cope and be strong to provide and care for the children. If she allows herself to feel her sadness, she might not be able to work or parent adequately so she represses her own grief and discourages the children from talking about their father. She may also have failed to mourn other losses in her life. Thus the mourning of both parent and children is inhibited by the inability and unwillingness to accept and express sadness as a normal part of life.

Clinical intervention is focused on changing the rules of the family so that the mourning process can occur and be completed. The joining process is crucial. The children need to perceive that mother trusts and accepts the counsellor so that they can relinquish responsibility for her. Feelings of hopelessness and depression must be reframed as incomplete mourning and the children's behaviour as sympathy, loyalty and sacrifice. The counsellor must break the rules of the system by initiating and encouraging the discussion of the loss and its meaning for each and all of the family members. Personal boundaries must be enforced, recognizing and encouraging individual differences in the mourning process. The family members can then be encouraged to become more involved with peers and to recognize that sadness is a part of life from which one can recover. Once the process of protesting the loss, remembering the loss, accepting the loss and renouncing the former attachment to the lost person is completed, it becomes possible to reattach to and invest in other people.

If the executive authority functions in the family are delegated to a teenager, the balance of power in the family shifts. The teen, having accepted adult responsibilities for care of the household and younger siblings may expand the role to include his or her own behaviour. Any attempt to withdraw the power will be resisted by the teen who will become defiant and resentful (Stewart and Zaenglein-Senger, 1982).

Hierarchical inversion appears particularly severe when the child involved is an adolescent who can increase anxiety and endanger his or her future by acting aggressive, self-destructive, extremely apathetic and depressed, and/or by abusing drugs and alcohol. Jay Haley (1980) and Chloe Madanes (1981) have outlined and recommend a rigid approach to therapy with what Haley calls "disturbed young people". Madanes points out that there are actually two incompatible hierarchies operating at the same time in these families. In the one hierarchy, the parent is in charge by providing for the care and needs of the child: food, clothing and shelter. In the other, the parent is controlled by the youth's threatening behaviour or apathy. The positive function of the child's symptom(s) is that the youth's problems become the focus of parental attention, distracting her from her own problems, and forcing her to function in order to deal with her child's symptom(s) (Madanes, 1981).

The youth is in a position of power over the parent and may be protecting the parent, expressing a parental issue, or trying to reconcile the parents. Whatever the function, the appropriate hierarchy must be restored. The parent must demand and get appropriate behaviour from the youth. If the youth behaves appropriately, he loses the power

over the parent. Therefore, his behaviour is aimed at maintaining that power.

Clinical intervention with these families is both simple and difficult. The therapist must put the parent in a superior position over the youth. Therapy must be focused on very concrete, basic issues. The parent must be defined as competent, responsible and able to be in authority over the younger, less-experienced child. Neither parent nor child can be allowed to define the parent as weak, helpless or incompetent. These messages must be blocked. The therapist must be prepared to be persistent and to focus repeatedly on the same issues with the same theme. The parent must specify expectations and rules for the youth and consequences if those rules are abrogated. The basic task of therapy is to set rules and consequences, review progress, and set new rules and consequences, etc.. The therapist's job is to transfer power to the parent and to define the youth as bad (rebellious, childish, confused, discourteous, lazy, disrespectful, etc.) rather than mad (depressed, psychotic, schizophrenic, etc.) (Madanes, 1981).

Both parent and youth may resist the transfer of power to the parent. The child may become more dangerous or self-destructive and the parent may attempt to disqualify herself or the therapist as authority figures. The therapist may have to be tenacious in emphasizing the child's need for parental guidance and control in order to have predictability and stability in his world. Any attempt to have a relative or other outside person brought in to support the youth's power must be blocked and shifted to support the parent. A single-parent

needs the support of "the most significant parental surrogate" (Madanes, 1981: p. 144), which may be the ex-spouse/father of the child or the most influential relative or friend. That person should be invited by the therapist to join the sessions in order to help the child to behave appropriately and responsibly as quickly as possible (Haley, 1980).

The desired result of the therapy is to have the parent setting the rules for the youth and imposing the consequences when the rules are not followed. When the youth loses power over the parent he will behave normally and be able to become appropriately independent (Haley, 1980; Madanes, 1981).

Summary

This literature review outlines the process and effects of divorce for the members of the single-mother family with adolescent children. Although many families manage the crisis and its aftermath successfully, there are many more who find the stress overwhelming and must turn to professionals for help with completing the tasks associated with the resolution process. The ramifications of unresolved divorce dynamics are costly, emotionally and financially, to family members, the community, and the government service and legal system. These families should be assisted to address and bring outstanding issues to closure. They also need to be accepted as a viable family form with creative ways of dealing with problems and defining roles and responsibilities. Their strengths should be appreciated and their needs seen as legitimate by society at large.

III. Intervention

Clients

The student worked with a total of eighteen single-parent families during the practicum period which ran from January, 1989 to June, 1990. All but one were headed by mothers and all had at least one child twelve years of age or older. Eight families had had or were currently involved with Child and Family Services and four were receiving input from Child Guidance Clinic and Educational Support Services. One family reconciled and the father moved back into the home during therapy. This student continued family and marital therapy with them at their request. In three of the families the identified problem child was in care and residing in a foster home or other agency facility. These families proved to be very protective of established family process and roles and thus proved to be very resistant to change. One family made themselves available for two sessions, the two others for one each. All three families were dealing with physical abuse issues. Six of the families presented school issues for one of the adolescent children as one of the difficulties the family was facing. Although only two families requested counselling specifically around the separation/divorce (and those two were the most recently separated), virtually all families who had experienced marital separation attempted to connect the difficulties bringing them to therapy with the marital disruption and/or the lack of contact with the absent parent.

The families varied widely in the depth of dysfunction perceived by the student. Therapy was least successful with the seven families presenting histories of ongoing physical and sexual abuse. One of these

Family Number	Time Since Marital Separation	Status	Primary Presenting Problem	Hierarchical Inversion or Confusion	Primary Collateral Services	Child in Care	No. of Sessions	Outcome
One	8 months	Separated	Communication	No	Child Guidance Clinic	No	7+	Positive
Two	4 years	Divorced	Developmental	No	School Teacher	No	8	Some Positive Results
Three	10 months	Separated	Physical Abuse	Yes	Child & Family Services	Briefly before Therapy	11+	Positive
Four	6 years	Separated	School Issue	Yes	Educational Support Services	No	9	Some Positive Results
Five	9 years	Divorced	Developmental	Yes	Child & Family Services	No	8	Assessed Positive
Six	12 years	Divorced	Developmental	No	None	No	4	Positive
Seven	10 years	Divorced	Divorce Resolution	Yes	None	No	4+	Assessed Positive
Eight	11 years	Divorced	Developmental	No	None	No	4	Ongoing
Nine	4 months	Separated	Physical Abuse	Yes	Child & Family Services	Yes	2	Unknown
Ten	9 years	Divorced	Developmental	No	None	No	2	Assessed Positive
Eleven	2 years	Divorced	School Issues/ Sexual Abuse	Yes	Child Guidance Clinic	No	2	Unknown
Twelve	18 months	Separated	Communication	Yes	None	No	3+	Ongoing
Thirteen	7 years	Divorced	Developmental/ Physical Abuse	No	Child Guidance Clinic	No	1	Unknown
Fourteen	12 years	Divorced	Physical Abuse	Yes	Child & Family Services	Yes	1	Unknown
Fifteen	5 years	Divorced	Physical Abuse	Yes	Child & Family Services	Briefly Before Therapy	1	Unknown
Sixteen	9 months	Separated	Physical and Sexual Abuse	Yes	Child & Family Services	No	1	Unknown
Seventeen	None	Never Married	Communication/ Physical Abuse	Yes	Child & Family Services	Yes	1	Unknown
Eighteen	8 years	Divorced	Developmental	No	Child & Family Services	Briefly Before Therapy	1	Assessed Positive

families did, however, provide a notable exception to this pattern by openly admitting to the family history of spousal and child physical abuse and being willing to try other ways of relating within the family. The five families which presented largely developmental issues were generally the most amenable to therapeutic input and change was fairly rapid as they tried new ways of relating with positive results. As predicted in the literature review, hierarchical inversion and confusion was very common with most single-parent mothers having difficulty assuming executive control and asserting their legitimate authority. Most were more comfortable being friendly than parental with the inevitable distressing results. Reversing that dynamic was both difficult and slow with most families.

Setting

The setting for the practicum experience was the Interfaith Pastoral Institute at the University of Winnipeg. It is a private agency funded by the United Way of Winnipeg, various faith groups, churches, donations from friends of the Institute and fees generated from work with clients. Its primary function is the education and training of pastoral counsellors and marriage and family therapists. To that end, it provides individual, marriage and family counselling to clients, who are agency, church, or self-referred, at a fee based upon the client's after-tax income. Fees generally range from five to sixty-five dollars per sixty minute hour. Every effort is made to make the fee charged reasonable and bearable for the client and no client is refused for financial reasons.

During the first eight months of the practicum period, all sessions took place in the Institute's training center in Sparling Hall at the University of Winnipeg. Most sessions were video-taped and when the room was unavailable, the session was audio-taped on equipment provided by the student. During the last ten months of the practicum period, after the student had been hired as an employee of the Institute, some sessions were video-taped, but the majority were audio-taped in the student's office in Bryce Hall.

Personnel

The student was extensively and intensively supervised during the entire eighteen months of the practicum period. During the first eight months, the student was one of four members of a Supervised Marriage and Family Therapy, Level II, course led by David Olson, S.T.M.. During each four week cycle, the student would present her work with two families for supervision: one would be presented live in front of the one-way mirror and the other would be seen in a session previously recorded on videotape. During the other two weeks the student would be a member of the team supervising her colleagues. Every other week she and one of her colleagues would meet with Mr. Olson for dyadic supervision, each presenting a case for supervision during alternate sessions.

During the next ten months of the practicum experience, the student was one of four members of a Supervised Marriage and Family Therapy, Level II, course led by Mary Warmbrod, Ph.D.. This course consisted of twenty-six classes with the student presenting a family for live

supervision six times and receiving individual supervision eight times for one hour each time. In addition, the student presented outlines of cases (occasionally with taped sessions) for supervision during all classes. The student was also a member of the team offering supervision and consultation to colleagues in her class.

In addition, during the last ten months of the practicum experience once the student had become a member of the staff of the Interfaith Pastoral Institute, the student was a member of the Supervision group that met on alternate Friday afternoons. The student presented cases for live supervision to that group on five occasions and was a member of the supervising team during all other sessions.

Each case presented for live supervision had to be prepared for by researching and writing a short paper on the family's presenting issue, by preparing a Case Summary form (Appendix 5) which outlined the case assessment and hypothesis information and by setting out the Live Session Presentation and Review form (Appendix 1) which proposed the presenter's interview plan and goals. All cases had to have a Case Summary prepared and outlines of all sessions held had to be submitted to the supervisor for supervision, review, and feedback.

The entire practicum experience was overseen by advisor, Ruth Rachlis of the Faculty of Social Work and the other members of the Practicum Committee, Don Fuchs and David Olson.

Methods of Intervention

The first contact made with the family was by telephone to set the initial appointment. That call was organized around requests for

information as to who was in the family, a brief description of the presenting problem, as well as basic factual information. The person contacted, usually the mother, was to be asked to keep a log of the problematic behaviour shown by the symptomatic member but this procedure proved to be too much to ask since the student was often requesting completion of the evaluation instruments before the first session.

The initial sessions were organized around a number of tasks. The discussion of the presenting problem include negotiations around defining it in behavioural terms. This process facilitated contracting for the length of the therapy. Attempts were made to define desired changes so that successful outcome could be recognized (Haley, 1976). Each family member was validated by the therapist as part of the joining process (Minuchin & Fishman, 1981; Freeman, 1981).

Although the student chose not to complete an eco-map for her families, the relationships between the family and the people, events and systems that were a part of the family's life were assessed as to their present and potential sources of strength and difficulty (Hartman & Laird, 1983; Pardeck, 1988). An important part of this process was the determination of the role played by the noncustodial father in the life of the family. If he was geographically unavailable or had opted out of parental responsibility for his children, he was considered in his role as the family "ghost" and feelings around his absence explored. If he was involved with this children as a parental figure or was at least available, if uninvolved, the possibility of including him as part of the therapeutic process was raised and considered. If he played a

major role in the presenting problem, he was included (Morawetz & Walker, 1984).

During or before the first interview, the chosen evaluation instruments, the Family Assessment Measure and the Family Problem Checklist were completed to assist in the assessment process and help determine the focus for therapy. These tools were administered, when possible, before and after intervention to indicate the changes in how the family functioned in the areas of task accomplishment, role performance, communication, affective expression, involvement, control, values and norms. The instruments chosen are discussed in the next section.

The final assessment tool used when appropriate was the genogram. It provided a three-generational picture of the family and was helpful in determining recurring family patterns and relationship difficulties. The construction of the genogram also served to engage the family in the therapeutic process and to help the family to perceive the presenting problem or symptomatic member in a less negative light. It also revealed key family experiences that were the source of unresolved grief and anger (McGoldrick & Gerson, 1985; McGoldrick & Gerson, 1988).

The therapeutic techniques used depended upon the family profile and the function served by the presenting problem. Simple structural interventions were the rule until otherwise indicated. These direct interventions were aimed at changing the family's operating rules and the roles played by the members. They were meant to be taken at face value and consisted of information sharing, advice, explanations, and

task prescriptions aimed at facilitating family communication and cooperation (Papp, 1983). Salvador Minuchin (1974) believes that it is the therapist's role to unbalance the family system by aligning him or herself with one or another member of the family system. The other members of the family then experience stress and require a sense of "the therapist's understanding, support, and confirmation of the family members' experiences and felt needs" (p. 113) in order to move toward change.

The technique of circular questioning was used to gather systemic information for the formation of therapeutic hypotheses and to assist the family to perceive itself systemically. The process of circular questioning obtained information about the presenting problem, tracked the changes in the relationships and identified the behavioural patterns and sequence of interaction. The therapist was then able to formulate new questions to challenge and disrupt the existing dysfunctional relationship processes and/or contexts. Awareness of its own patterns stimulated the family to alter its interactional system (Tomm, 1980; Morawetz & Walker, 1984; Nelson, Fleuridas & Rosenthal, 1986).

The technique of reframing was an integral part of the therapeutic effort. The family's description of the presenting problem was uniformly and consistently negative. It was the therapist's responsibility to "reframe" or "redefine" or "relabel" it in positive terms and to point out its beneficial effect for the entire family system. This method reduced resistance, revealed hidden functions and

stimulated new behaviour (Minuchin, 1974; Minuchin & Fishman, 1981; Papp, 1983; Morawetz & Walker, 1984).

If the symptomatic behaviour was well-established and failed to respond to logical structural intervention then paradoxical interventions were used. By indicating doubt and pessimism about the likelihood and advisability of change persisting, the therapist used the inevitable family resistance as a force to encourage and maintain behavioural changes in the family system (Papp, 1983; Madanes, 1984; Morawetz & Walker, 1984).

The process of evaluating the effectiveness of the therapy process included a discussion of the original goal or goals of therapy and a mutual decision between family and therapist that those goals had been achieved. The evaluation instruments, the Family Assessment Measure and the Family Problem Checklist were completed by the family to determine what changes had occurred, if any, in the functioning of the family over the course of the therapy. The results were shared with the family if available, and the therapy terminated with the stipulation that the client could contact the therapist if further difficulties developed.

Evaluation Instruments

Three possible evaluation instruments were considered and assessed for their possible advantages and disadvantages in measuring the functioning of single-mother families with adolescent children.

The Family Crisis-Oriented Personal Evaluation Scales (F-COPES) is a twenty-nine item, five point self-report inventory which measures the ways that families cope with stress. Its five subscales operationalize

intrapersonal and interpersonal factors within the family and the ability to identify and mobilize support and resources from external sources. The reliability of the total scale is moderate at .86 with the subscales ranging from .63 to .83. Some items appear contradictory but are added together to produce a total score (Fredman & Sherman, 1987). Although the F-COPES is concise and simple enough for preadolescents, it appeared to measure only one of many general areas that are problematic for single-mother families -- the ability to cope with the stress of a crisis.

The Family Adaptability and Cohesion Evaluation Scales III (FACES III) is a twenty item scale that measures the family's ability to adjust to environmental and developmental changes (adaptability) and its ability to unite and bond together emotionally (cohesion). Although the scale contains only twenty items, it must be administered twice. The first form asks the family member to describe the family as it exists in the present. The second form asks how he or she would describe the ideal family. The difference between the two scores indicates the level of satisfaction with the family as it is. The assumption is that a balance between enmeshed and disengaged on the cohesion scale and between chaotic and rigid on the adaptability scale is desirable (Fredman & Sherman, 1987).

The reliability scores are a respectable .77 on the cohesion scale, a low .62 on the adaptability scale and .68 for the total FACES III. Fredman and Sherman (1987) recommend that the adaptability scale be interpreted with caution. They also note that the two subscales measure

such different dimensions of family structure that the total FACES III score may have no meaning. Its value in work with single-mother families in particular may be somewhat doubtful because in one project cited by Fredman and Sherman (1987) fully one-third of normal single-mother families reported extreme levels of cohesion and adaptability.

Neither the Family Crisis-Oriented Personal Evaluation Scales (F-COPES) nor the Family Adaptability and Cohesion Evaluation Scales III were considered to have the advantages of the Family Assessment Measure III (FAM III) for systemic evaluation of single-mother families with adolescent children.

The Family Assessment Measure (FAM III) was developed in Canada and is presently being used in conjunction with the Family Problem Checklist to assist in the evaluation process in the Family Therapy Department of Children's Home of Winnipeg. Linda Campbell (personal communication) reports that it is providing reliable evaluations there of interventions with single-parent families with adolescent children.

The FAM III has three components: the General Scale which examines the family as a system; the Dyadic Relationship Scale, which focuses on relationships between specific pairs; and the Self-Rating Scale which looks at the individual's perception of his/her functioning in the family. The General Scale was the primary instrument used.

The General Scale is composed of fifty items which can be divided into seven subscales and two response-style subscales. The seven subscales measure the following crucial variables:

1. Task Accomplishment: the ability of the family to organize itself to achieve basic, developmental, and crisis tasks by problem-solving, protecting its members and maintaining unit cohesion.

2. Role Performance: the ability of the family to assign roles and activities to each family member with the reasonable expectation that the individuals will agree to the assignment and assume the role or perform the task.

3. Communication: the ability of the family to exchange information essential to task accomplishment and role performance in a way that it can be accepted and understood by the receiver as sent.

4. Affective Expression: the ability of the family to express feelings fully, accurately and at appropriate times.

5. Affective involvement: the ability of the family to meet the emotional and security needs of its members and to validate independent thought and action.

6. Control: the ability of family members to influence and manage each other to maintain family functioning and adapt to changing circumstances and needs.

7. Values and Norms: the influence upon the family of the broader cultural and ethnic context (Skinner, Steinhauer & Santa-Barbara, 1983). The two response-style subscales measure Social Desirability and Defensiveness or Denial and are included to indicate bias or distortion of the FAM profile (Skinner, Steinhauer & Santa-Barbara, 1984; Skinner, 1987).

As outlined in "The Family Assessment Measure: Administration and Interpretation Guide" (page 1) the instrument was used to confirm the clinical assessment of the family and to help prioritize issues to be addressed. It was also used to evaluate the effect of therapy on the functioning of the single-parent families counselled during this practicum experience.

The Family Assessment Measure is based on the McMaster Model of Family Functioning, "a general systems theory approach" which describes "the structure, organization and transactional patterns of the family unit" (Epstein, Bishop, and Levin, 1978: page 19). Although the instrument can be seen to have a broadly systemic base, it is not specifically applicable to the various forms, schools or models of systemic family therapy such as the structural model, the strategic approach or the Milan model. It does, however assess specific problem areas which can then be the area of focus for questioning and intervention according to the preferred therapy model.

The Family Assessment Measure is very useful for the validation of the clinical assessment of single-parent families in the specific areas measured. The areas of Task Accomplishment and Role Performance are primary areas of stress for single-parent families, especially in the two years following the marital separation. The loss of a major adult figure from the home means that tasks must be redistributed, prioritized or ignored (Literature Review p. 8, 10, 17) and remaining family members are called upon to adapt to new roles (Literature Review p. 19, 22, 29). Problems in these areas are common in this family form because of the

characteristic lack of sufficient resources, both human and financial (Literature Review p. 10, 17, 18, 19).

Communication is often a problem in single-parent families. Because there are too many tasks and responsibilities to be distributed among too few people, communication becomes sparse, hurried and often inadequate. Messages can also become confused and inconsistent as the inevitable result of parental overload and fatigue (Literature Review p. 7, 17, 26). The considerable pain and hurt experienced by all family members as a result of separation and divorce may lead to discouragement of the expression of feelings and/or the reluctance to express these feelings to other family members (Literature Review p. 26, 42-43). Thus affective expression is often a problem for single-parent families.

The inconsistency noted in these families is often shown in the area of affective involvement. Some families are over-involved, indeed enmeshed, with each other in an attempt to find security in emotional relationships within the family (Literature Review p. 11, 15, 19). Others are under-involved, or disengaged, with each family member so busy and immersed in his or her individual affairs and concerns that there is little investment in the family unit. Some families veer from one end of the continuum to the other with confusion being the inevitable result (Literature Review p. 26). Single-parent families can also have difficulty finding a balance of appropriate and predictable behavioural control (Literature Review p. 7, 17, 26). The confusion may extend to values and norms which may be very different

post-divorce from what they were in the intact family unit (Literature Review p. 19, 27).

All the specified areas may have been a problem for the family before separation as well. But the very nature of the truncated, abbreviated family form makes it intrinsically vulnerable to difficulties in the areas tested by the Family Assessment Measure. The instrument does not address directly areas such as developmental crises, inverted hierarchy and unresolved mourning. However, these problem dynamics would be reflected in the areas tapped by the FAM. For instance, inverted hierarchy would be a possibility if there were high scores on all scales, reflecting the disorganization in a family where the one remaining adult was no longer able to exert appropriate executive control. The inability to adjust to the changing needs of growing children and adults would probably be reflected by high scores in the Control and Role Performance categories although other areas such as Communication, etc. might show the difficulty as well. The instrument itself will measure the dysfunction in the specified areas but it is up to the therapist to make the appropriate clinical interpretation with information gathered in the actual work with the family.

The Family Assessment Measure is the best tool available for use with the systemic model of family therapy because it emphasizes family health as well as dysfunction and attempts to define how the family operates to achieve its goals. It discriminates between clinical and nonclinical families and, in tests of the scale, mothers provided the most important and decisive information (Skinner, Steinhauser & Santa-

Barbara, 1983). This fact would appear to predict positive results in its use with single-mother families. The FAM's General Scale has a reliability coefficient of .93 for adults and .94 for children. The reliability scores of the subscales range from .65 to .87 for adults and from .60 to .87 for children. The Dyadic Relationship Scale shows a reliability of .95 for adults and .94 for children and for the Self-Rating Scale, the reliability is .89 for adults and .86 for children. All scales are considered to be appropriate for people from ages ten to twelve years and beyond. Thus the Family Assessment Measure's strengths would suggest that it will provide "an important complement to a clinical assessment by giving a comprehensive overview of family functioning, by providing an objective and independent verification of the clinical assessment, by identifying areas of potential difficulty that warrant further assessment, and by providing quantitative indices of family health/pathology that may be used as a baseline for evaluating the course of therapy" (Skinner, Steinhauser & Santa-Barbara, 1983; pp.103-4).

The Family Problem Checklist (Miller, 1977; Miller, Rollins & Thomas, 1982) is a generalized measurement designed by the Morrison Center for Youth and Family Service (Portland, Oregon) and modified by the Child and Family Services Research Group for the Children's Home of Winnipeg Family Therapy Department. It addresses the most prevalent themes presented by client families. These family issues, which include sex, physical violence and substance abuse, may not be directly identified by the family because of shame or embarrassment. However, they are important, and sometimes crucial, in the determination of the

dynamics around the presenting problem and thus they require immediate clinical attention. The use of the checklist allows these issues to be brought forward in a non-threatening, non-blaming manner.

The families were asked to complete the Family Assessment Measure (Appendix 2) and the Family Problem Checklist (Appendix 3) before or during the first interview and again as part of the evaluation for termination process. The combination of measurement instruments was intended to supplement the clinical assessment process and to provide an objective evaluation of the impact of the intervention on the family.

The instruments proved to be very effective at evaluating change. In every case, the results obtained confirmed the clinical assessment made by the student and illustrated the changes brought about by the therapy process. The student did however become more aware of the potential of using the instruments as agents for change in the therapeutic process. As the practicum experience proceeded to completion, the student became more courageous in experimenting with the instruments in this way with gratifying results. The student believes that the potential for using these instruments in clinical work has barely been tapped and that it is an area that more students and clinicians should consider investigating in their quest for techniques with maximum therapeutic impact.

Families

The student worked with eighteen families during the practicum period. Each family presented unique dynamics and issues for treatment. Because of this factor it was impossible to select one family as being

representative of several others. In addition, the student's abilities and repertoire of techniques increased markedly over the eighteen months so that what was learned with one family was applied to others. The student deemed this process to be important to record. Therefore, the process of therapy with all eighteen families has been outlined in this report.

The families are divided into two sections. The first contains the families with whom the student worked for four or more sessions. Most of these completed both pre- and post-test applications of the evaluation instruments and the results are included. Most are in chronological order with the exception of Family Seven which was seen after Family Two but, because treatment was primarily focused on the noncustodial father, was placed after most of the work with the custodial parents. The second section contains those families seen for three or less sessions and are placed in descending order as to the number of sessions held. Family Twelve is the exception to this rule since the sessions varied from individual to family to dyadic according to the need presented.

Family One

This single-parent family, headed by father (37 years) was referred to the Institute for therapy by the minister of their church. Mother had left the home seven months previously and was living with another man. The family consisted of father and daughter P (16 years), son R (14 years), daughter M (10 years) and son M (9 years). Father was

requesting help in dealing with the results of the separation and in communicating with the children on an emotional level.

The first session was focused on completing the evaluation instruments (the youngest child, son M, was unable to do so since he was only in grade 3), discussing the "bomb" that had exploded in their house when their mother left, the visitation arrangements in place, their mother's likely reaction to the family's being in therapy, and what issues each wanted addressed in therapy. It was very quickly apparent that this was a family that was still in crisis over the marital separation and was trying with great difficulty to adjust itself to and rearrange itself around the loss of the mother from the household. Daughter P (16 years) was the parental child who had moved into her mother's position and taken responsibility for the running of the household and the parenting of her younger siblings, especially when father was absent. She enjoyed the authority but resented the responsibility especially since she no longer had time for the normal developmental tasks of adolescence.

The remainder of the sibling unit was dazed, puzzled and confused. Unlike their eldest sister, they were very unhappy with the visitation arrangements whereby every other week they spent a weekend with their mother in same-sex pairs. The result was that each child saw their mother only once per month and never had individual time with either parent. The children were unanimous in their opinion that their mother would react negatively to the idea that the family was in therapy and would refuse to have anything to do with the process. Since the family

was concerned about the possible cost of the therapy, the effort of coordinating the arrangements required to come for the sessions, and the time taken from school and peer activities, we contracted for six sessions with the agreement that a new contract could be negotiated if necessary when the original contract was over.

The results of the Family Assessment Measure pretest confirmed the assessment that this was a family in crisis for whom all areas of functioning were a problem. The younger members had the more elevated scores and family anxiety was high. The results of the Family Problem Checklist showed that the females were more dissatisfied with family process than were the males, probably reflecting the gender tilt that occurred with the departure of the mother. Generally, the measures confirmed the observed impressions that emotional expression, communication, and task assignment and completion were primary concerns for this family at this time.

Between the first and the second sessions a series of hypotheses were formed upon which to base interventions which could generate new hypotheses. This set theorized that the communication problem in the family was a longstanding one which characterized the marriage as well as the separation. Father held the authority in the family but took little responsibility and remained emotionally detached from his wife and children. Daughter P (16 years) was mother's assistant in the family but she resented her role because she felt neither recognized nor loved for her considerable contribution, while resisting any attempts to relieve her of responsibilities. Mother expressed the emotion in the

family but it was explosive emotion, as effective at preventing emotional intimacy as her husband's uncommunicative distance. Daughter P and son M (9 years) appeared allied with father. Son R (14 years) was likely allied with mother as perhaps was daughter M (10 years). Mother may have found the only way in which to get her husband emotionally involved in the family-separation. The plan for the second session was to have father give the children permission to talk openly about their feelings and concerns and to concentrate on a concrete non-threatening issue like task assignment to help engage the family in the therapy process.

The second session was conducted according to plan. Father gave permission to talk but also made his authority clear. Daughter P raised the issue of her responsibility for chores and the younger children. Father's solution was that son R (14 years) should do more. Son R was reluctant because he did not feel that his father would support him. Daughter M (10 years) expressed a desire to help P but P was reluctant to take the time and effort to teach her. It was decided to have a family meeting to distribute chores other than by the executive decision of father. This session clarified a number of hypotheses: that father and son R (14 years) had a conflicted relationship, that daughter M (10 years) wanted to get closer to daughter P (16 years), and that father was having difficulty recognizing and understanding the emotional and developmental needs of his children. The loyalty bind that the children were feeling in regard to their mother was evident in their reluctance to talk about her. Father was powerful and in control; son R (14 years)

was in the same position as mother had been in the intact family-responsible but not supported.

During the third session, it was confirmed that the children had difficulty being angry at father and the student predicted that father would leave therapy if the demands for communication became too tough. The children discussed the changes in the family that had happened since and as a result of their mother's leaving. As expected some were good (less anger, rigid demands) and some were bad (daughter P was overloaded, no more lemon meringue pies). They focused on their dissatisfaction with the access arrangements, assuming (their mother had told them) that father was making all the decisions. Daughter M (10 years) expressed the desire to live with her mother. Son M (9 years) initially said that he wanted to as well but then retreated quickly from that position when he observed the general consternation shown by the others. Son R (14 years) expressed much anger and outrage at this betrayal of father. Daughter M (10 years) was able to persist in the face of considerable upset at her announcement and tearfully expressed her longing for her mother and her feeling that her needs were never addressed in the family. The males had their interests and P (16 years) was too busy with her own concerns to be aware of her sister's. Father was able, with the student's encouragement, to express admiration for her courage in speaking out but he was unable to thank her and he physically leaned away from her. Daughter M was encouraged to express her desire to her mother but the general opinion was that nothing would happen to change the situation.

At the beginning of the fourth session, daughter M said that she had asked her mother if she could live with her but her mother had said that it was not possible because she had lost her job. The family's morning routine was discussed because P blamed her school lates and absences on having to get the children off to school. They disagreed, saying that P did things after they had left. Father L expressed awareness of the burden on his elder daughter but made it clear that he did not consider that an excuse for truancy. He grounded her until the end of the school year.

It was in this fourth session that family of origin and genogram information was discussed. Father was the youngest of eight children and both he and his wife (who was the eldest of five children) were raised in a small town in southern Manitoba. Both came from strong conservative Christian backgrounds with mother's family being founding members of an extreme offshoot of an already fundamentalist sect. Thus the fact that mother was pregnant and unmarried at seventeen years of age was both devastating and infuriating to the family and they withheld permission for the expectant parents to marry. Thus they were not able to marry until mother's eighteenth birthday. Daughter P (16 years) was born premature two days after the marriage took place. Daughter P was informed of her role in her parent's marriage at the age of thirteen in front of a group of her friends. She expressed a great deal of anger, pain and sorrow at her mother's poor judgement in the timing of the announcement. Father said that he was going to phone mother and request that she come in for a session with the children. He expressed the

opinion that she had a lot of pain and anger from her experiences in her family of origin.

During the fifth session, the impending session with mother was discussed and prepared. Son R was the most reluctant, daughter M the most eager for the session. Son R felt that mother was hardest on him and on elder sister P and that she took her anger out on them. Daughter M observed that many of her parents' fights were over R. Son R said that mother was really hardest on P, lecturing her not to do what she had done in her life (getting pregnant and having to drop out of high school). The student coached the children, especially the older two, on how to express feelings to minimize their mother's defensiveness - using "I" messages, etc. This process increased R's anxiety and fear that mother would become angry but would be unable to express it in the session so she would "take it out on them" on the way home.

The expression of that emotion appeared to encourage all the children to speak of their anger at their mother for leaving them. Son R said through his tears that his mother had not told him she was going nor had she said good-bye to him. Daughter P expressed the opinion that she had been glad to leave. Both daughter M and son M observed her sadness and tears at her departure. The student pointed out that each child had a separate experience and point of view and that thus each saw her leaving differently. Each child expressed certainty that they were not responsible for the breakup of the marriage. Son R expressed his sorrow and anger by tearfully observing that death is easier than divorce because when someone dies you deal with the feelings and it is

finished. With divorce, you have to keep on experiencing the loss by seeing the lost person occasionally. The student ended the session by observing and encouraging the uniqueness of each child and his or her role in the family. Son R expressed the emotion in the family and rebelled against both mother and father's authority. Daughter M was the defender of the family, defending both her parents from R's criticism. Son M was the diplomat, the one who tried to be neutral and to smooth over ruffled feelings. Daughter P was the detached observer, the caretaker who addressed the physical needs but avoided the emotional ones.

The student prepared for the session with the children and mother by phoning her. She reported that she was willing but not anxious to come to a session. She felt that this was her husband's plan, not hers, but she was willing to go along with it. She attempted to disqualify the therapy (and the therapist) by reporting that the children had reported that they had not felt much progress and that this was the latest (of several) counselling attempts. The student interpreted this to mean that she was feeling that her husband was still controlling her life but that she could not fight this latest attempt directly since she would then appear to be uncaring of the children. It seemed likely that although she had agreed to come, she would be uncooperative during the session.

The sixth session began with mother's refusal to allow the session to be taped. Both boys stationed themselves on either side of her. She spoke about the difficulty she had making the decision to leave the

children and her grief at actually doing so. She recognized her children's distress verbally but the force of emotional conviction was somewhat lacking. She felt that her husband had not been supportive of her during the marriage, especially in her conflict with her parents and the church. She expressed amazement that he was coping reasonably well with the demands caused by the separation and her absence. She blamed him for the marriage breakdown and expressed anger and resentment that everyone had rallied around and supported him since she left. The children, especially P, tried to express their pain and longing for her. She was able to respond to the boys by taking them on her lap to comfort them (R was 14 years old!) but she was unable to respond to her daughters in any meaningful way. She told the children that she was unable to have them live with her because of lack of finances but she announced that she and their father had agreed that she could see the children every weekend. All four children would visit every other weekend and the two same-sex pairs on the alternate weekends. The children (with the exception of P) were visibly pleased with the arrangement. Unfortunately, the student should have but neglected to predict that as the children get older, arranged visitation will become less and less workable with their growing independence and peer orientation.

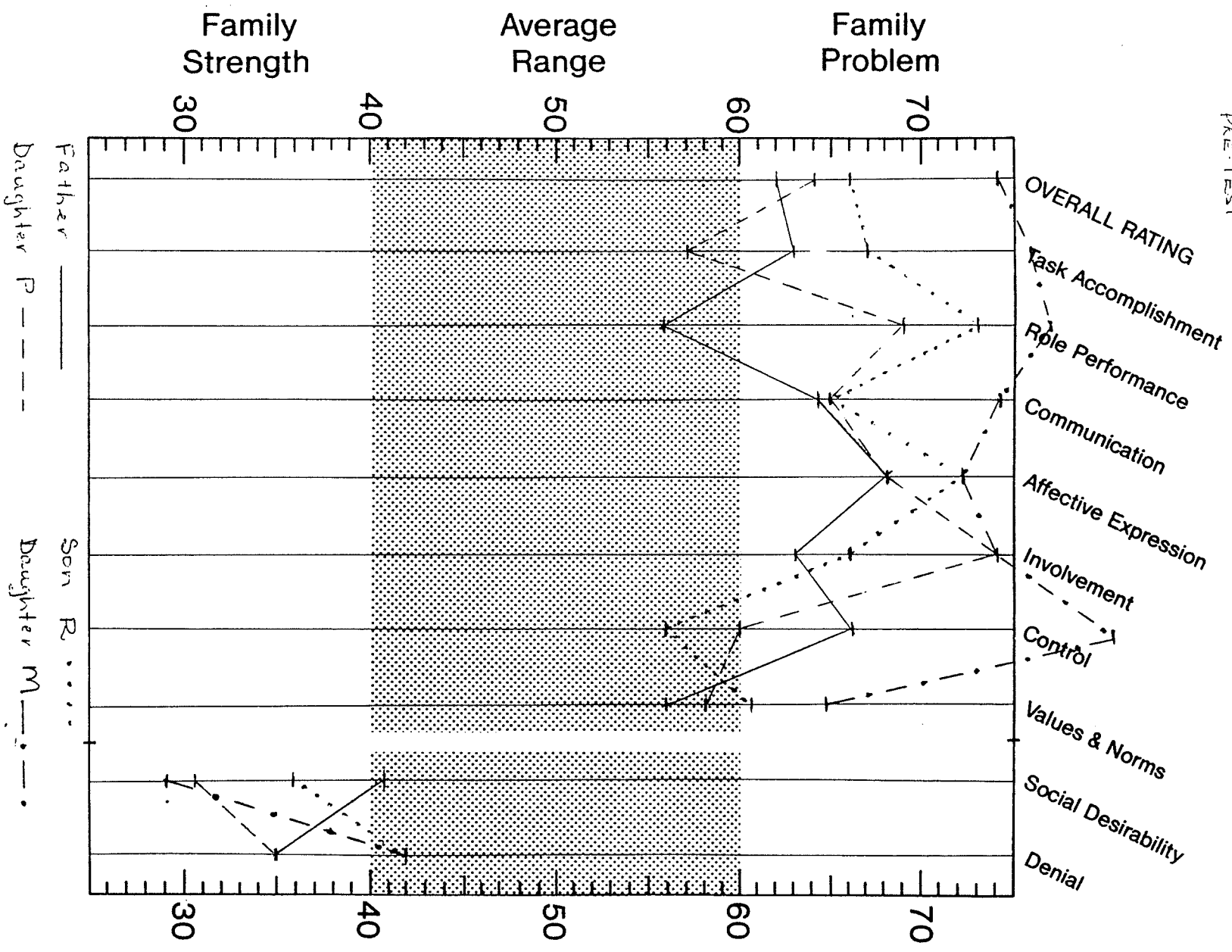
The seventh and final session involving the children focused on the story of the marriage and the separation. It was during this session that it became obvious, with the spotlight on him, how difficult it was for father to express himself, especially emotionally. The children

were totally bored by what their father was saying. The marriage was characterized by lack of intimacy in the extreme. Each was supposed to guess what the other was thinking and feeling and respond appropriately. Mother had total responsibility for the emotional issues in the family. In the end, she was staying away from home for days at a time. Son R was especially aware of parental distress but daughter P tried to ignore what was happening. Son M would be the first to ask his mother where she had been, then R, then daughter M. Father had a great deal of difficulty when talking about his own distress and feelings. He would talk about himself as the generic "you". He described what he had done to recognize the end of the marriage: taking down the family pictures, packing her clothes, joining Parents Without Partners. He described what steps he still had to take. The student agreed with the termination of family sessions but contracted for further individual sessions with father to work on his personal issues. During the first of those sessions, the student recommended that L try to find his daughter M (10 years) a source of female support since she was feeling the lack of her mother so intensely and it was inappropriate to expect a sixteen year old sister to fill the gap. He did so.

The Family Assessment Measure and the Family Problem Checklist were completed one final time. The results showed that therapy had been very effective in bringing most of the scores down from the "Family Problem" category into the "Average Range". The following charts record the scores of both pretest and posttest measures.

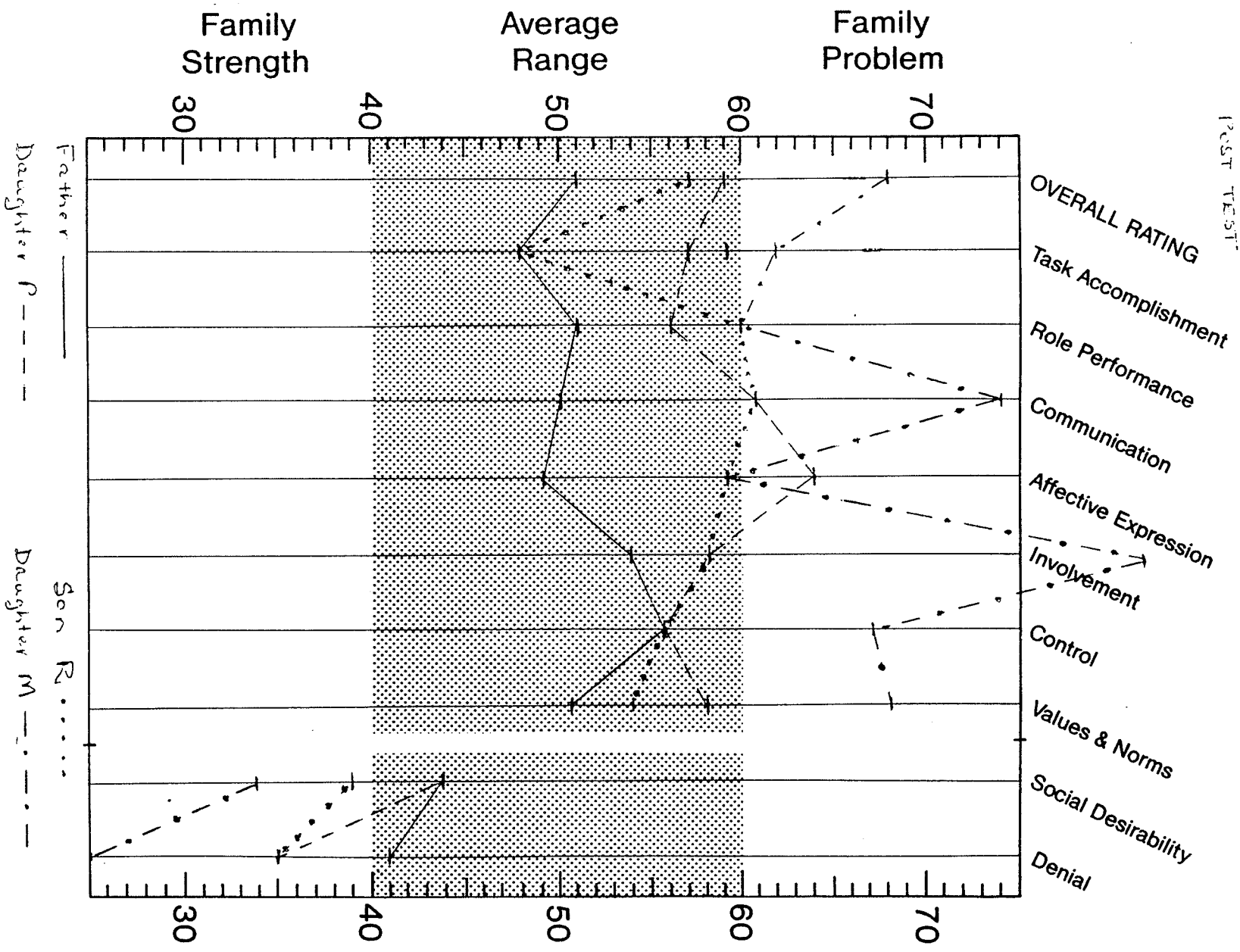
FAMILY ONE
PRE-TEST

FAM GENERAL SCALE



FAM GENERAL SCALE

FAMILY ONE
POST TEST



Family Problem Checklist

Father: Improvement on 12 dimensions, no change on 8

P: Improvement on 15 dimensions, deterioration on 1, no change on 4

R: Improvement on 9 dimensions, deterioration on 1, no change on 10

M: Improvement on 17 dimensions, deterioration on 1, no change on 2

The work with this family in the aftermath stage of divorce (Literature Review p. 6) focused on a number of issues discussed in the literature review. The reallocation of household tasks, which had been solved immediately after mother left the home by the eldest daughter taking on her areas of responsibility, was accomplished so that tasks were more evenly shared among all family members (Literature Review p. 19). In this move, the eldest daughter was removed from her position as the substitute spouse (Literature Review p. 26, 28) and the other children were provided with the opportunity to assume more responsibility and develop the competence and maturity that comes along with meeting and overcoming challenges (Literature Review p. 22, 29).

The therapy also facilitated the completion of some of Wallerstein's (1983) tasks to achieve resolution of the divorce experience. By exploring the changes that had happened to the family and encouraging the expression of feelings, the student helped the family members, especially the children to accept the reality of the divorce and mourn the loss of the intact family (Literature Review p. 24, 43). The father's issues around having been left for another man (Literature Review p. 14) were explored in individual sessions to prevent burdening the children and exacerbating their loyalty bind. The student was also able to increase awareness in both parents that the children required more liberal access to their mother and this was arranged. The experience with this family was a valuable one for the student because it was so clearly focused on assisting the family to

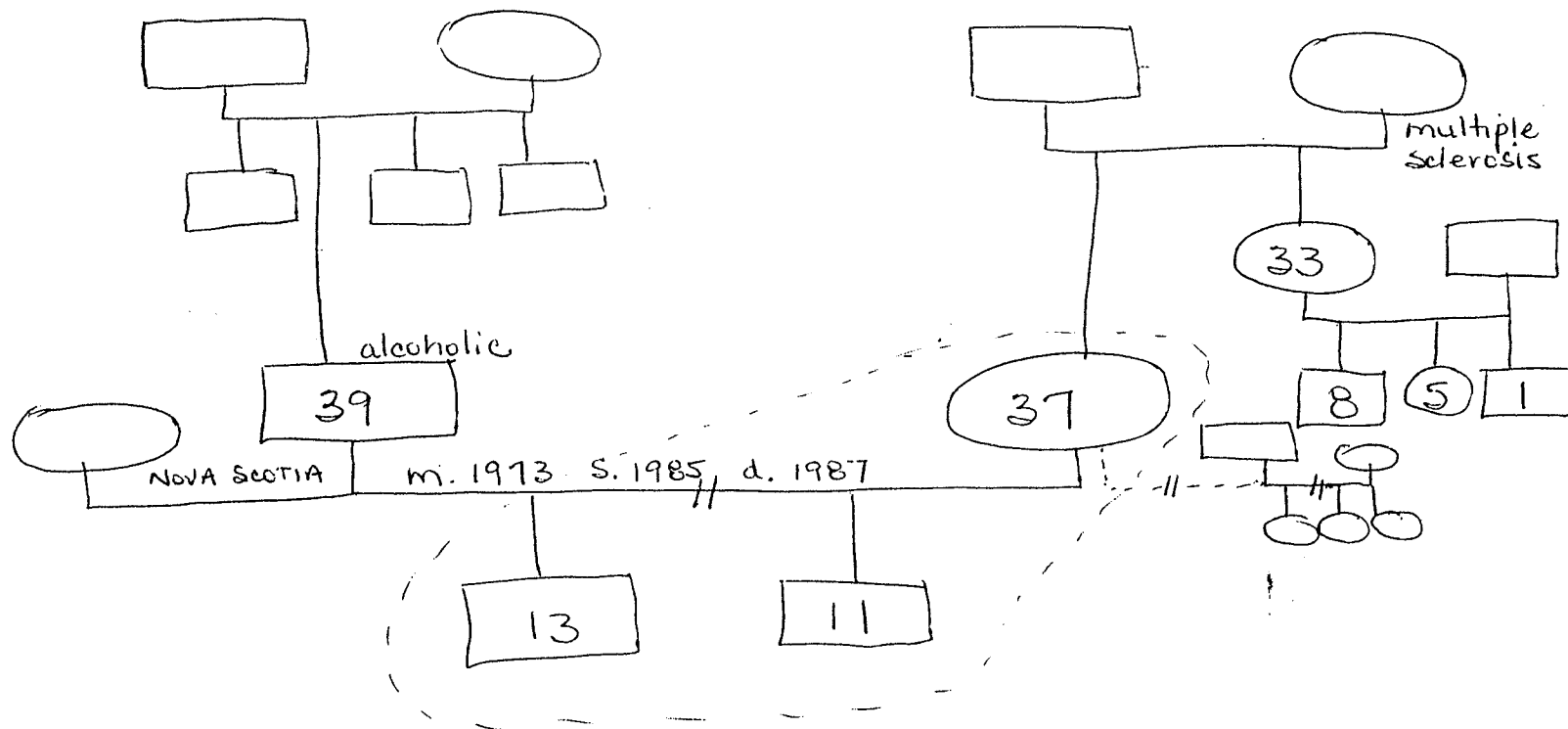
resolve the crisis caused by the separation and to help them move on with their lives.

Family Two

This single-parent family, headed by mother (37 years) was referred to the Institute for therapy by the teacher of the elder son T (13 years). The family consisted of mother, son T and son R (11 years). Mother had been married to father for twelve years and they had been separated and divorced for four years. Father had left mother for another woman whom he had married after the divorce was final. The remarried couple was living in a Maritime province and the boys had not seen their father for two years. Mother and sons had lived with another man (and his daughter) for about a year but that relationship had not worked out so the single-parent unit was alone again.

Mother had requested counselling because son T (13 years) was being seen as an angry, lonely child at school. She felt that he had had a hard time with the separation and the fact that his father had moved away. The initial call revealed that, although the school teacher was identifying a problem with T in his peer relationships, mother was not so sure that it was a problem. If it was, she felt that he brought it on himself. It was also apparent that the boys were quite strongly allied with their mother because they had refused to travel East to visit their father. Mother was quite open about the fact that her ex-husband was an alcoholic.

The first session was focused on the completion of the Family Assessment Measure and the Family Problem Checklist, collecting



GENOGRAM: FAMILY TWO

information for the genogram and a discussion of the presenting problem. One of the issues that surfaced was that, although father's extended family lived in the same district as the family, the boys seldom saw or heard from them. There was some pain, sadness and longing connected with a sense of rejection. Mother's family, on the other hand appeared to be quite involved and supportive of the family unit. Son R (11 years) described the problem as the fact that his brother was a wimp who was a walking target for one particular boy at school. Son T (13 years) handled the situation by "tattling" to the teacher or principal. The student attempted to normalize the situation by noting the "no-win" situation in which one finds oneself when being victimized in school. If one fights back, you are a bully and get in trouble with the teachers. If you try to enlist the teachers' help, you are a wimp and a tale bearer. The student asked who was most likely to sabotage therapy and all agreed that it would be T.

The second session began with sharing the results of the evaluation instruments that showed that neither T nor R were generally unhappy with the family situation. Son T thought that involvement was somewhat of a problem in that the family was over-involved in his life. Son R thought that affective expression was a problem in that there was some lack of trust around honest expression of feelings. Mother, however, scored very high (in the problem area) on all dimensions. She was also showing much more anxiety about the situation than either of her sons. She began to reflect that the problem may have been hers rather than her son's and that perhaps she needed some support at this time.

Son T shared that in the time between sessions, he had fought back against the bully in school. The student noted that T had listened to his younger brother's rather harsh criticism and had decided to do something about it. T reported that he felt that his friends at school were the most unhappy with him and then his brother. The student commented that that must be a lonely place to be. The family reported that R had initially refused to come to the session. The student asked mother how she felt when her younger son made the rules for her? Son T observed that mother got angry and ranted and raved and then R would do what mother wanted. Mother reported that her sons get into frightening, violent fights into which she would get "hooked" in an attempt to stop the violence and to find out who was to blame. The student asked who was most likely to get hurt, especially as the boys get older and bigger and congratulated the boys on finding a way to keep mother involved in their business. The student also pointed out that the boys had found a way to get her to take sides so that they could keep on fighting to see whose side she would take next.

Both boys reported that the other tried to tell him what to do. The student noted that they appeared to be equally bossy and competing to be in charge. They both also monitored their mother's activities, tracking her down when she was out for a social evening. The student asked which son tried to parent his mother more? The answer was T, but she felt that she had taken a stand and he had not been so bad lately. Son R brought the subject back to brother T being the problem and how much he did not want to be in therapy because he was embarrassed with

his friends. He pointed out that since T could not keep friends, he ended up with T's friends. The student tried to shift the I.P. label by noting that T was discriminating in his choice of friends but that it sounded like R was starting to hang around with older boys. The student also noted that mother was agreeing with son R's definition of the problem and wondered how R got to be so powerful and how often mother accepted the advice/opinion of an eleven year old as her own. The student pointed out that she could not see what the problem was since T's problem with peers would be his problem to work on himself. Who would take the consequences of having no friends? Son T volunteered that he thought that his suspension for a day from school was fair because he had broken the rules by fighting. The student congratulated him for his maturity in taking responsibility for his behaviour. The student also noted that home issues could be dealt with at home, school issues at school so perhaps it would be appropriate for T to deal with the consequences of his school behaviour at school. Mother acknowledged that that arrangement would certainly make things easier for her.

The third session was videotaped and presented to the supervision team. In it, the boys talked about their father coming to town and what was planned for them regarding the time with their father. That subject led naturally into the story of the marriage and the divorce. Father was an alcoholic and the description of their life together was grim. Mother described some incidents that, while typical in an alcoholic family, were humiliating at best. She also described how she found out about his affair and his ineptness in dealing with the children

regarding telling them that he was leaving. Her anger and resentment at what he had done and at her having to pick up the pieces after he left were obvious. The student noted the horror of living with a severe alcoholic and asked her why she had stayed with him. She replied that she kept hoping that he would change. The student turned to the boys and asked them if they had heard anything new. They both said no.

Part of the supervision team was very angry at the way the student had handled the session, i.e. that she had not intervened to stop the mother from negative statements about the father. They believed that the boys had been in an intolerably awkward spot in listening to their mother talk negatively about their father. The student and the other part of the team believed that in the reality of single-parent family life, children are exposed to negative information about their parents, especially in the story of the marriage and separation. They believed that it was present character assassination and ongoing conflict that was most harmful. The critical part of the team saw mother as an angry, controlling woman who needed individual work so she could vent that anger where it would not hurt her children. The decision was made to deliver a split opinion to mother in order to safeguard the student's joining with her.

Mother arrived for the fourth session with son R who was left in the waiting area for the first part of the session. Mother and the student discussed the team's reaction to the last session. She felt that only a single parent could understand another single parent and implied that males will support other males. She did admit that she was

still angry about what her husband had done in the marriage and how it affected her. The student asked her how she could give her children the message that it was okay to love their father, to miss him and to need him. She said that she had no trouble speaking to her ex-husband and making arrangements for the benefit of the children. One of her primary struggles with her ex-husband after the separation had concerned child care. She would occasionally leave the boys alone for short periods of time (to run to the store, etc.) and father found out about it once. He threatened her with Children's Aid, suing for custody, etc.. She felt hurt and angry at the implication that she was a bad mother. The student noted that mother had done a good job encouraging individualism in T to the point where even at the age of thirteen he could withstand the pressure to engage in "boy's boy" activities. When R requested entrance to the session, the discussion was turned to memories of past activities with father. He was not comfortable with the subject and the student wondered if he was protecting his mother or his father so she told him that he should be very cautious about trusting people with his true feelings.

Mother arrived for the fifth session without either of the boys. During this session the theme of power and control came up through the story of her year long live-in relationship with a man and his daughter. She said that she believed that she entered the relationship to find some way, any way of feeling better about herself after her emotionally destructive marriage. The relationship with the new partner had turned out to be a battle for control from beginning to end and she finally

made the decision to leave him because her children were as unhappy as she was.

The student noted that mother had moved from the marriage where she had had control to the relationship where her partner had had control and she resented it. The student then explained the dynamics in an alcoholic marriage (the subject of a short research paper for this case) where the alcoholic spouse underfunctions and the nonalcoholic spouse overfunctions. The more responsibility and control the nonalcoholic spouse takes the more the alcoholic spouse drinks and the less responsibility he takes in the marriage and the family, and vice versa. The student also pointed out that the cycle can perpetuate itself into the next generation as the more responsibility and control the nonalcoholic spouse takes over the children, the less responsible and self-controlled they have to be and the more likely they are to overdrink to deny their dependence and dull their feelings of low self-worth. The student predicted that unless mother could allow her boys to take responsibility and control of their own lives, at least one of her sons would be alcoholic. She admitted that that was one of the biggest fears and that she might try to control her sons more to deal with her fear.

Mother described the struggle she had had in the marriage to deal with her husband's irresponsibility. He would drink and drive if his wife did not pick him up from his drinking haunts. She described her bind of being totally financially dependent on this man who would lose his job if he were picked up driving impaired. When she left him with

the children, he was negligent, she felt, in his supervision and monitoring of their behaviour. She started to realize how responsible she really had been in the marriage and what a burden it had been. However, she also spoke of how father had come through with extra child support when she had had several financial reverses in a row. She recognized and was grateful for this tangible evidence of his caring and support for his children.

The sixth session began with a narrative of how mother had defended T against the threats from three of his classmates. The student questioned her as to whether T had requested her assistance or had she taken responsibility for himself from him. She seemed to think that he had requested her involvement. The student reminded her that taking responsibility from him would allow him to underfunction, which was harmful for him and one of the predictors for alcoholism. The importance of waiting for and allowing adolescents to request assistance if they feel they need it was emphasized.

A remark that the boys had made about T had started mother thinking about T's sexual identity. He had asked her about how to determine if one is gay. He was obviously worried about the subject. Mother expressed the opinion that she hoped that he was heterosexual but that if he was not, she would love him anyways. The student pointed out that she should tell T that and suggest that no matter what the other boys say, he is the only one who will know if he is gay or not. The student discussed with her the difference between interests and sexual orientation and suggested that she have a similar conversation with T to

help take the anxiety out of the subject for him. The student pointed out that it was not unusual for boys of his age to be confused and anxious over the issue of sexual identity. In fact it is probably a developmental milestone. The student suggested several books that she might get on alcoholism and its effect on the family.

The seventh session focused on events following the return of the boys from their time with their father. They had apparently requested to come home early because they were bored (had lost touch with father?) but mother had refused. When they did come home, she was involved in a romantic relationship with a man she had met while they were away. Son T began hovering around and monitoring her involvement in the relationship even though she said she had made it clear it was not his business. The student confronted her that there might be some part of her that enjoys his attention and interference and as long as he sensed that, he would continue. She would only be forceful in setting the boundary if she truly wanted it there. The student pointed out that T needed to be freed from the responsibility for looking after her so that he can look after himself.

The student asked mother where T would have received the idea that he had to look after his mother. She thought that he may have received that message from her father who took T aside after the separation and told him that he was now the man of the house, responsible for looking after his mother and brother. The student noted that that was quite a burden for a nine year old boy and said that he needed to be relieved of it. The student asked about her relationship with her parents and she

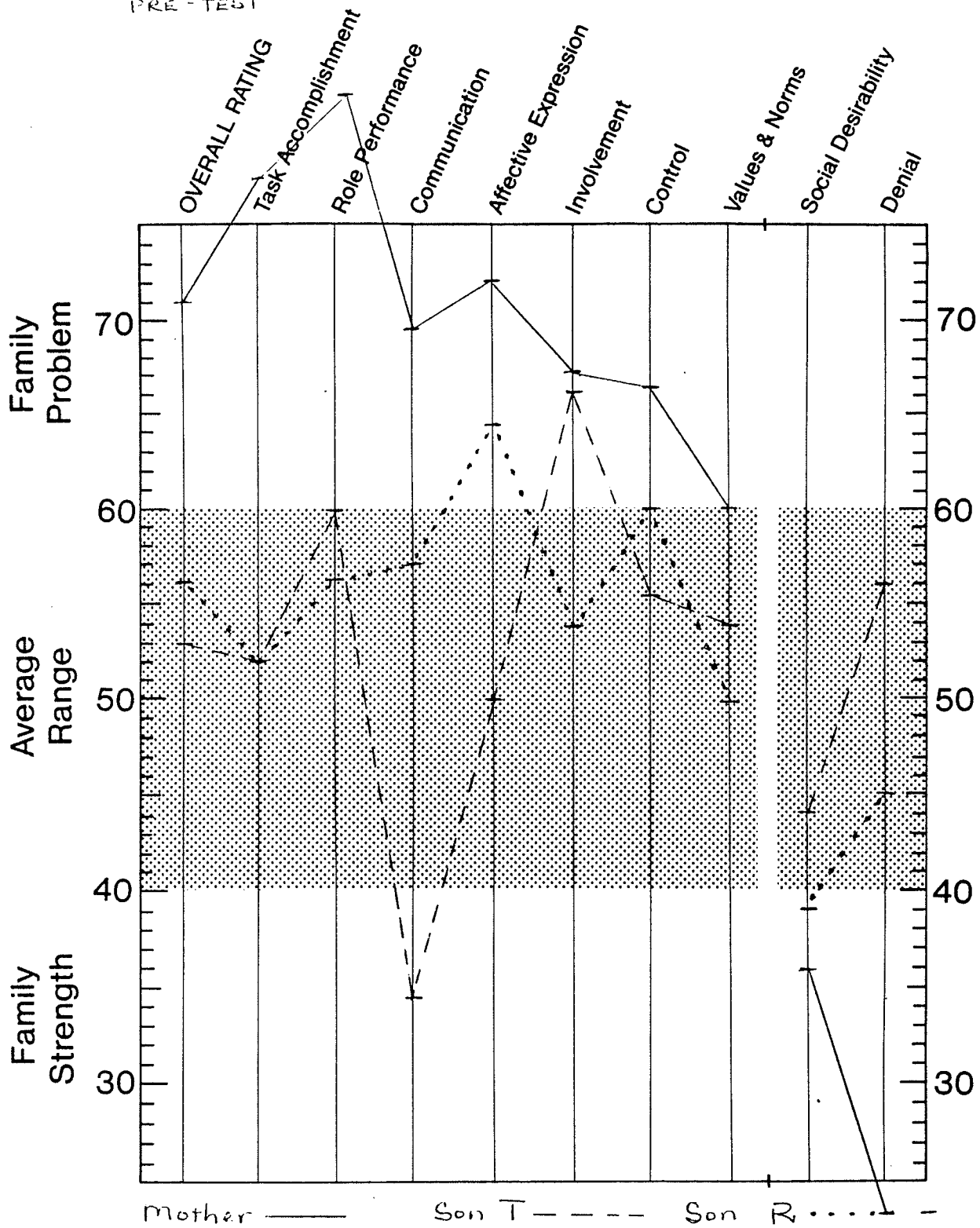
described an enmeshed mother and daughters relationship with a distant father. Her parents had assisted her financially once and she was still in their debt. The student noted that it is difficult to be truly independent of one's parents when one owes them money.

The next two scheduled sessions were cancelled and the eighth session turned out to be the last. Mother recognized that she was not ready to deal with her family of origin issues because her parents had been good to her and her mother was sick with multiple sclerosis. She had come to the session with R, worried about his behaviour in school. The discussion focused on whether she could control his behaviour in school while she was at work. She was also worried about T wanting to change a subject for which he had registered. The student pointed out that if she made the decision for him, she was again taking responsibility for one of his issues and she would likely find that he would vent his anger and frustration on her in some way. The student acceded to her request to terminate but requested that she complete a posttest of the Family Assessment Measure and Family Problem Checklist at home and mail them back. She agreed.

The posttest application of the evaluation instruments was not completed until ten months after the therapy ended because the first set were apparently lost in the mail and the family seemed very reluctant to complete the second set. The student had to make at least three reminder telephone calls before they were finally returned. The results obtained, because they were obtained so long after the termination of therapy, showed an interesting situation. Mother was much happier with

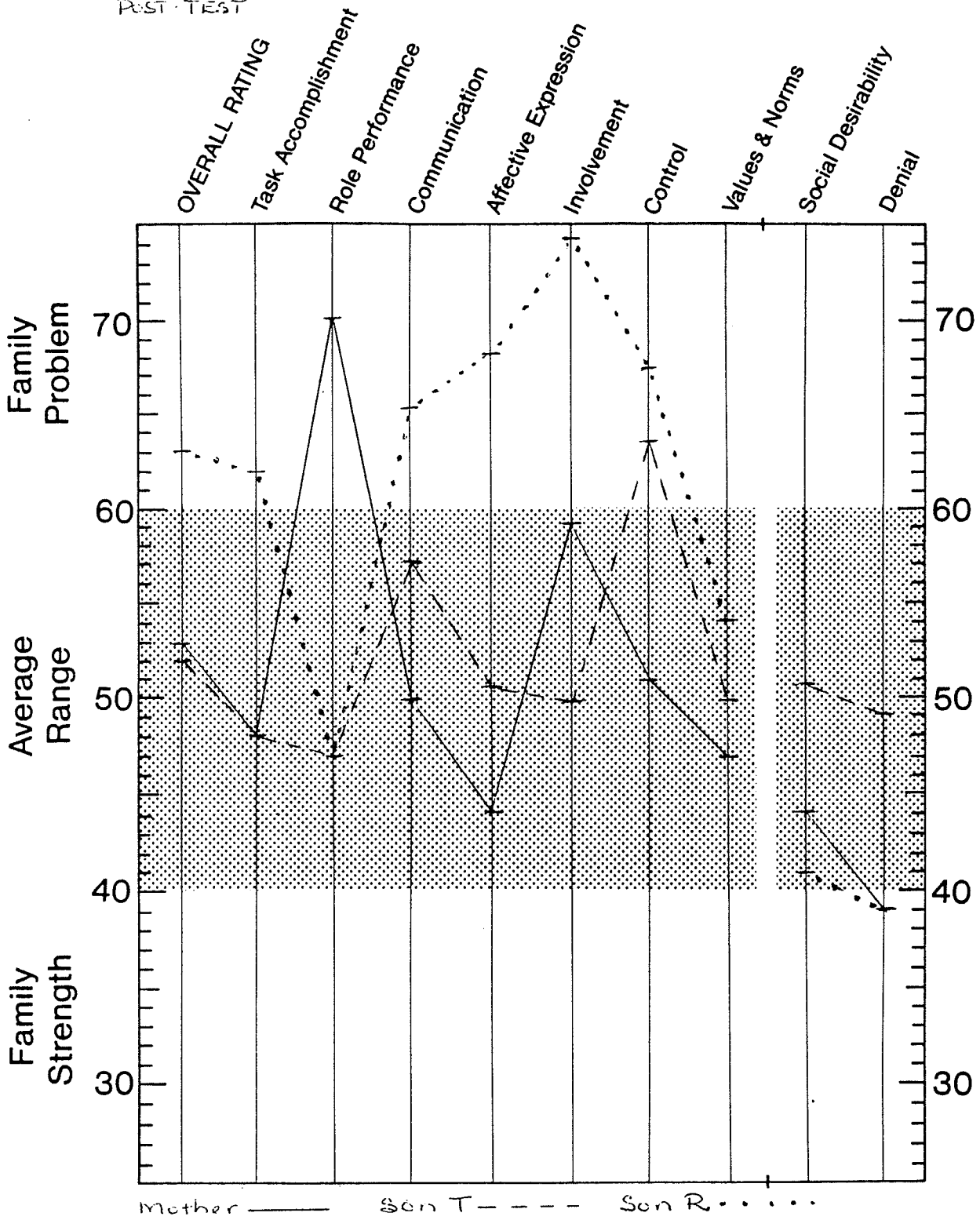
FAM GENERAL SCALE

FAMILY TWO
PRE-TEST



FAMILY TWO
POST-TEST

FAM GENERAL SCALE



Family Problem Checklist

Mother: Improvement on 11 dimensions, no change on 9 dimensions

T: Improvement on 11 dimensions, deterioration on 2, no change on 7

R: Improvement on 4 dimensions, deterioration on 6, no change on 10

the family situation. Her scores had all improved to a considerable degree with all but role performance falling within the normal category. It could probably be expected that in a single-parent family with two male children (in our imperfect and frequently traditional world), the mother would not be happy with the way tasks are distributed.

Son T, fourteen years of age by the time of the posttest, had scores which had improved in all areas except communication and control. He was more unhappy with the use of physical force. It would seem reasonable to suggest that it would most likely be the brothers that were engaged in physical struggles. Son R's scores were the most interesting. His showed almost universal deterioration both instruments, particularly in the areas of making sensible rules, handling anger and frustration, amount of independence, relationship between parents and children and feeling good about himself. Since in the intervening year, son R had moved closer to adolescence, son T had consolidated his claims to adolescent independence, and mother had refused to proceed to examine the origins of her need for control (with the object of resolution), it seems reasonable to suggest that mother's need for control was now locked firmly on her younger son who, because of his developmental needs, was struggling with her for more appropriate levels of responsibility and independence. The student predicts that this family will return to therapy sometime in the future with the younger son as the identified problem.

Working with this family provided a valuable learning experience for the student because, as predicted in the literature review, the bond

between mother and children was so strong (Literature Review, pp.10-11). The over-involvement was beginning to cause difficulties as the children moved into adolescence, the life stage where separating from parents and forming one's own identity is the normal developmental task to be accomplished (Literature Review, pp. 25-26). The enmeshed mother-son relationships were intensified by both the single-parent situation and the family history of alcoholism and its accompanying family dynamics. The student was able to help mother to recognize the elder son's need to differentiate but because the underlying issues were not resolved, the intensity of her control was transferred to the younger son. The student was also able to help mother resolve some of her issues around the divorce (Literature Review, pp. 14-15) by validating her feelings and examining her part in the dynamics of the marriage.

Family Three

This single-parent family, headed by mother was referred to the Institute for therapy by Child and Family Services. Mother identified the presenting problems as sibling rivalry, which included physical fighting and threats of violence, between the two daughters C (16 years) and C (13 years). Physical abuse between all family members had been a prominent dynamic in the family with the result that the eldest daughter had been placed briefly in foster care and the family had tried two previous separations to resolve the problem. At the time of referral, both parents had been through the Evolve program. The initial phone call made to set up the first appointment, provided the information that the younger daughter was a severe epileptic whose

seizures were controlled by extensive medication. Mother had been sexually abused as a child by her father. The family had recently experienced two major losses through death: the maternal grandmother had died two months previously and a maternal uncle two weeks previously.

The first session was focused on completion of the evaluation instruments and gathering initial information about the family. Although the family had been involved in liberal mainstream Christianity, the single-parent unit had gravitated toward and become members of a faith group often perceived as a large cult. This church was being very supportive of the family and had encouraged them to seek ongoing help at the Institute. The children volunteered the information that their father was not happy with their involvement in this particular church. Mother outlined what she had learned through her contact with Evolve in a way that was very blaming of her estranged spouse. The children showed obvious but nonverbal discomfort. The student decided against confrontation at this early stage and ended the interview.

During the second interview, the student outlined the results of the pretest application of the Family Assessment Measure and the Family Problem Checklist. The instruments showed a family highly stressed and distressed with almost all areas seen as a "family problem" by at least one person. The younger daughter, thirteen year old C, was the most anxious member with her scores so high that most were off the top of the graph. Task Accomplishment, communication and control appeared to be the most problematic areas for all members. Both children were very

much more anxious (as shown by their low scores on the denial and social desirability scales) about the family situation than was their mother. The information was not a surprise to the family, especially the problematic areas highlighted by the results. All agreed that the results were an accurate picture of their family's difficulties.

The second interview also focused on gathering some family of origin information for the genogram. Mother talked about the sexual abuse she had suffered and the deaths of her mother and uncle. Since the emotional affect was missing, her verbal assurances that she had resolved these issues lacked conviction. When the family described an incident where mother had chased her elder daughter down the street to the Child and Family Services office during a family altercation, the student confirmed her impression that emotional outbursts and dramatic confrontations were part of this family's style. The student also observed that the elder daughter parented the younger daughter and that the younger daughter tried to protect mother by distracting her with demonstrations of affection during the provision of tense, emotion-filled verbal information. When the children expressed the family resistance by asking for the reason for therapy, the student pointed out these patterns to them.

The third session was an unscheduled response to a crisis. Mother had imposed a realistic consequence (grounding) to a rule violation by her elder daughter but then she had started to change the rules of the consequence to make it progressively more strict. Her daughter's response was to make a dramatic gesture (clinging to the roof of the

house and threatening to jump off) which led her mother to call both the police and C's father. The result of this incident was that the Child and Family Services worker was considering placing C at the Manitoba Adolescent Treatment Centre. The student expressed the opinion that placement would not help and that C had simply chosen a dramatic way of communicating the message that she needed some space. C agreed to this interpretation of her actions and stated that she had had no intention of killing herself. Mother asked the student to phone the CFS worker to state the opinion directly to her. The student refused, urging mother to take charge and defend her right to parent her daughter herself. This position was taken to underscore her tenuous hold on the position of authority in her home. The student then had mother decide on the consequences she wished to impose on C and urged her to carry through on those and only those consequences unless there were further rule violations on her daughter's part. She agreed and C agreed to abide by the stated consequence. The student then pointed out that the family's dramatic way of expressing emotion was counter-productive because it halted reasonable communication. All agreed to speak emotions rather than act them out so the student predicted a relapse and sent them home.

The fourth session started with a discussion of the systemic process around the incident from the previous week. When the student observed that C's actions had brought father back into the family, C stated that phoning her father had been her mother's decision. The younger daughter objected to her mother's frequent negative comments about their father. When the elder daughter agreed with her sister and

joined the attack on their mother, mother stormed out of the room. The elder daughter commented that mother "always" did that. She would not sit and discuss an emotionally-charged issue. The daughter also commented that it frightened them when mother brought father back into the home to deal with an issue because the CFS worker had said that either father or the children had to remain out of the home.

When mother returned the student asked the children to leave. Mother was able to express her anger and hurt at what she saw as her children's betrayal of her. The student supported her feelings but pointed out that the negative comments about father only served to make the children more determined to defend and protect him. She was asked to save her anger at her estranged husband for the therapist alone.

A telephone call between the fourth and fifth sessions during which mother asked for advice on how to handle her daughters competing demands crystallized four issues that needed to be addressed. It was obvious that the whole family was ambivalent about the separation and that father was still very much a part of the family. Since the separation had been demanded by outside forces, the ambivalence was natural. It was also obvious that mother had difficulty being consistent regarding rules and consequences. Being in charge was not her strength and the student was wondering if she really desired to be. She had difficulty discussing emotional issues and would distance to deal with her fear and anger. The student was also observing isomorphic loyalty binds: mother's bind between the two siblings was identical to the children's bind between the parents.

The fifth session centred around a letter received from the CFS worker outlining her concerns regarding the elder daughter's suicidal behaviour. C insisted that she had not really wanted to kill herself. The student emphasized that if she saw any signs that it might be serious, i.e. if there were more threats, then a suicide watch would have to be organized. The children began to threaten each other so the student reframed the behaviour as their having fun trying to provoke a reaction from the adults. The discussion was then focused on how each daughter showed love to mother and vice versa. The children were then excused while mother and the student discussed the burden of being solely responsible for the children, especially the younger daughter's precarious medical condition which meant that mother often missed shifts at work. After this session, the student reflected that what had been accomplished to this point had likely been pre-therapy. Perhaps the family was now ready for real therapy.

The sixth session began with a major family argument over task assignment. It was so loud and unreasonable that the student finally made the simple observation that if the family wished to pay her for listening to them argue, then she would let them do so. The argument gradually decreased in intensity to the point where some progress could be made regarding consistency in the rules and the rewards. Then the family informed the student that the elder daughter had violated a major family rule over the weekend and mother had handled the situation calmly and with consistency of response. The daughter had accepted her consequence calmly as well. The student gave mother positive feedback.

The elder daughter then attempted to disqualify the student by saying that she was getting nothing from the sessions. The student modelled the kind of calm, nonthreatened response she hoped that mother would use when attacked by her children. She asked her to specify what help she felt she needed and when the reply was "I don't know", observed gently that it was difficult to help when one cannot specify what help is wanted. The elder daughter left angrily so the student sent the younger daughter out to join her and gave mother more positive feedback for staying calm and being consistent. Mother admitted that she still loved her husband but she did not think that they could live together.

Mother came early to the seventh session since she had organized the girls to come on the bus. She described a series of incidents on the weekend when she had handled her daughters' issues without getting into an argument but by setting boundaries and enforcing them. The student congratulated her on the progress she was making. The children arrived complaining about having to take the bus but mother did not react. When they argued and tried some minor blows on each other, mother observed that they must be enjoying themselves. The daughters then talked about the parental fights and the violence they had witnessed over the years. The student observed the incongruent affect as they described painful and frightening events with smiles or impassivity. Their mother cried, feeling guilty that her children had experienced all that pain. The younger daughter asked how long they would have to come for therapy. The student raised the issue of her

lack of self-care and said that it would probably take at least another four or five sessions before she could wash her hair, brush her teeth, bathe and take her medication regularly and independently.

The student congratulated the younger daughter for looking cleaner at the beginning of the eighth session. She noted that she still had not brushed her teeth and the daughter had the excuse that her toothbrush had been used to clean the dog. The elder daughter started to cry, saying that her parents had said that they had never wanted her in a couple of their more violent fights. She believed that she was responsible for her parents' marriage since she was born eight months after the wedding. Mother tried to convince her daughter that she had been very much a wanted child and that her parents would have married with or without a pregnancy. When she could not convince her daughter, mother asked to use the phone, called father, and asked him to come to the session. When mother left to find her husband and guide him in, the elder daughter was contemptuous of her mother because she phoned father every time she could not handle an issue. The student defended mother by saying that father was very much involved in this issue and that it was appropriate that he be present to express his opinion.

Father arrived and took charge of the issue by telling his daughter that both he and his wife had been very stupid and had said stupid things. Mother apologized for hurting her daughter but father could not. He did emphasize his love for her and reminded both his daughters of the times he had cared for them. He explained that the younger daughter's medical needs must have made it seem to the elder daughter

that she was the favoured one. The student observed that he must really miss his family, and thanked him for coming to the session on such short notice. The student reflected after that the mother and father seemed really connected and wondered if there was hope for the marriage. It was also questionable whether the mother could really be in charge of her family when there was a good possibility that she really wanted to reconcile with her husband.

Father came to the ninth session and the family discussed the effect of the younger daughter's epilepsy on the family. All agreed that since the parents were overinvolved with and concerned about the younger daughter, the elder daughter had to act out in order to get attention. Father felt powerless in the situation because he could neither prevent nor cure the condition. They described some of the dynamics in the intact home life: mother would neglect chores, father would criticize, argument would lead to violence with the children trying to distract their parents and then finally distancing from them in fear.

The children acted out the family pattern in the session. Every time their parents started to discuss an issue directly with each other, at least one of the children would distract and change the subject. The student pointed out the pattern and the family agreed, with mother noting that the children had had a lot of practice at distracting. It was observed that the elder daughter's acting out was violent, much like her father's. The student pointed out that father gave his elder daughter two contradictory messages: you should not be like me but I am

pleased that you are like me. The student pointed out that as long as he gave some approval for that behaviour, his daughter would continue with it. The student suggested that he try to teach his daughter about the down side of her feisty nature, how it had made life difficult for him and the efforts he was making to change it. The elder daughter made the comment that adults did not deserve respect. The student replied that they did because they have access to more information and experience than the younger generation. On reflection, the student now believes that, instead of defending the parents' inherent right to respect, it would have been more effective at this point to have recognized the elder daughter's underlying feelings: her anger that her parents had been incompetent in the past and her fear that they might be unable or unwilling to become more competent in the future.

The tenth session was a live presentation in front of the one-way mirror. The preparation for the session helped to crystallize observed dynamics in the family. Both parents came from chronically dysfunctional families with boundary problems. Mother's family was alcoholic and sexually abusive while father's family was alcoholic, chronically deprived and physically abusive. The violence in the intact family had resulted in the elder daughter's taking charge of the younger daughter from an early age. This arrangement was alternately enjoyed and resented by both daughters resulting in severe sibling rivalry and hierarchical confusion. The sibling conflict served to distract mother from her grief over the loss of her husband, and the death of her mother and uncle. It also served to bring father back into the family when

mother was no longer able to cope. The inverted hierarchy left a vacuum at the top of the family ready to be filled by father. This was the likely result of the ambivalence around the permanence of the separation.

The session started with a description of how the separation had happened, the violent argument involving father, mother and eldest daughter that culminated in injury to the daughter. Father described himself as frightened of his own anger, especially at his wife when she constantly monitored his relationships with his daughters. He then felt like an outsider in his own home. The daughters backed their father on this issue, expressing the opinion that his actions had usually been warranted and appropriate. Mother realized that her anxiety over her daughters' safety originated in her experience with her father's sexual abuse of her. She started to cry, describing her father's and brother's actions in her family as a cancer that affected everyone.

At one point in the session, mother became very angry with father but would not speak about it until the student had excused the children. She then raised the issue of the inconsistency of his child support payments. The student congratulated her on her ability to refuse to discuss an issue regarding their father in front of the children. The team observed that in this family anger was experienced as much less painful and threatening than sadness so they sent in the message that the family protected each other from their sadness by being angry. They prescribed that the family continue to be angry until they could face their sadness. The family agreed, saying that at least when you are

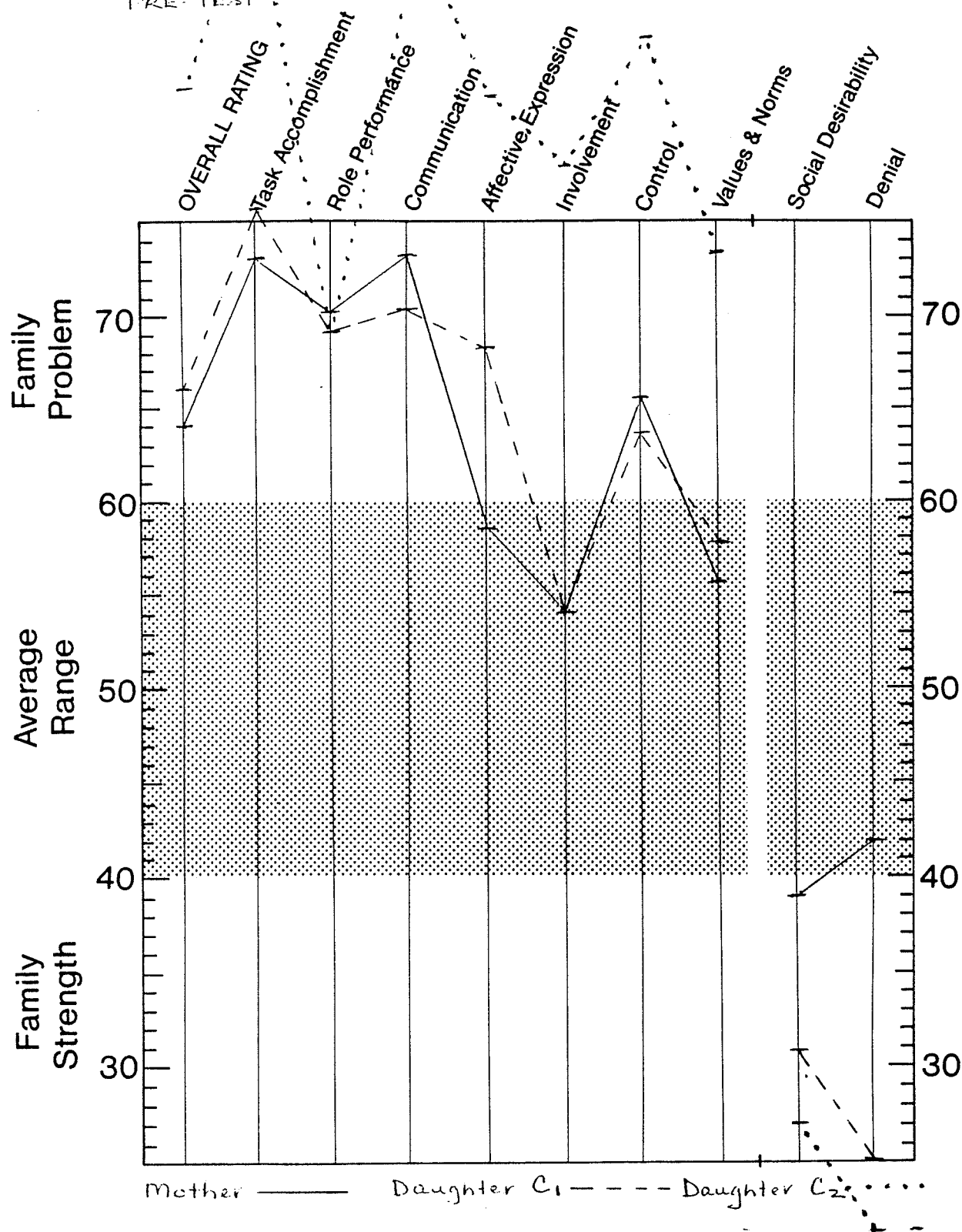
angry, you are active, doing something. They decided that they wanted to try to work on reconciliation and the student agreed to the change in contract.

Between the tenth and eleventh sessions, mother phoned to report that she was feeling sad and teary. The student encouraged her to express her sadness by crying and thus gave her permission to do so. The team had suggested that the student carry through on mother's metaphor of the sexual abuse as a cancer infecting the family. So in the eleventh session, the student distributed gobs of green "slime" to each of the family members to represent the effect that the sexual abuse had had on the family. The student added more slime to each person's original amount to show that when they became angry instead of sad, they increased and intensified the effect of the sexual abuse on the family. When they talked about the sadness and expressed it, the "slime" decreased. The student also encouraged the children to express to their mother their ability to care for themselves regarding sexual victimization so that mother would no longer have to be vigilant in their relationship with their father. The therapy continued with the intact family group and the extensive individual and couple issues present in the family.

The Family Assessment Measure and the Family Problem Checklist were completed a second time as a posttest measure. Both showed considerable changes in the family's perception of its difficulties. Although all scores did not drop into the average range, some did and most showed considerable improvement. The greatest general improvement was in the

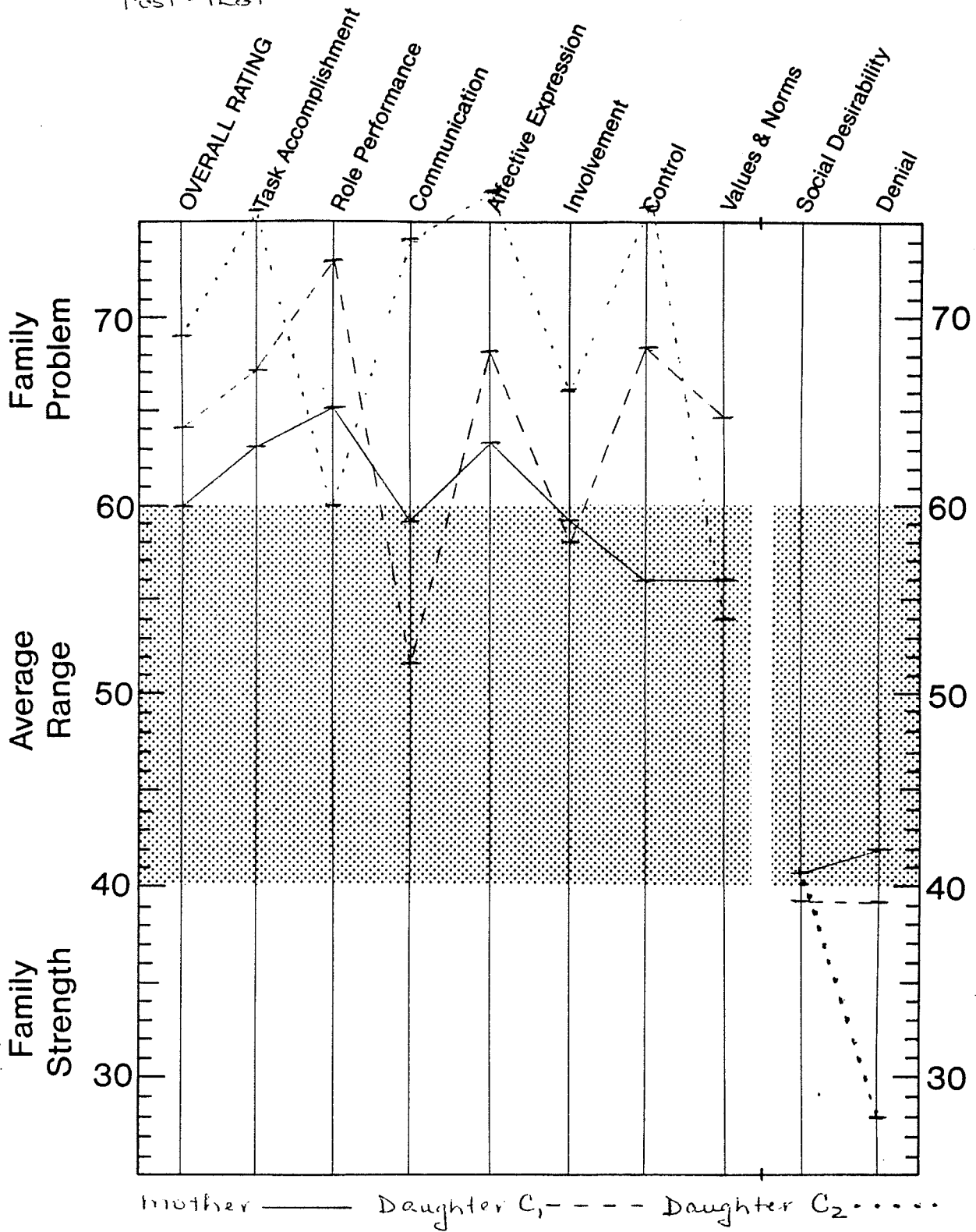
FAMILY THREE
PRE-TEST

FAM GENERAL SCALE



FAMILY THREE
POST-TEST

FAM GENERAL SCALE



Family Problem Checklist

Mother: Improvement on 9 dimensions, deterioration on 4, no change on 7

C₁: Improvement on 9 dimensions, deterioration on 4, no change on 7

C₂: Improvement on 13 dimensions, deterioration on 2, no change on 5

area of task accomplishment, role performance and communication which were areas directly addressed by the therapy. The younger daughter's scores improved uniformly and considerably. The scores also showed considerable decrease in both children's degree of anxiety about what was happening in their family. Mother and the elder daughter were still experiencing and observing struggles around expressing feelings, adjusting to ongoing life and family demands and working through disagreements in values. It is hoped that the continuing family and marital therapy with the intact family unit will address these issues effectively.

This family provided the student's first experience with hierarchical inversion (pp. 15-16, 30). As outlined in the literature review, single-parent mothers who experienced physical abuse in the marriage often had difficulty claiming their authority and controlling their children's behaviour (Literature Review, p. 18, 41). The children in the family were angry at their parents for their incompetence both before and after the separation (Literature Review, p. 27). The student supported the mother in her efforts to be in charge of her family and expressed that support to her and to the children. The student downplayed the significance of the sibling conflict and it decreased markedly when mother took that attitude as well, letting her daughters work out their own relationship. The unexpected learning experience came from assessing the family's ambivalence around a separation order by a mandated service and providing hope that, with work, the family might be able to live together without violence. The student was thus

able to experience not only working with a single-parent family but also with a reconciling family. The hierarchical inversion thus proved to be an invitation for father to return to the family.

Family Four

This single-parent family was headed by mother (39 years) and consisted of three adolescent boys: J (18 years), G (17 years) and R (14 years). The parents had been separated for six years but were not divorced. Father (40 years) was living with another woman and her eight year old daughter. Although mother had custody of the three sons, they had a flexible access arrangement whereby the boys could and did go to stay with their father for as long as they wished. The identified problem was R (14 years), the youngest child who, although attending school, was refusing to do any work while there. The school was very angry and frustrated with the situation and was demanding that the family seek help for the problem.

Mother sounded frustrated and helpless during the initial call. She described R's school difficulties as starting around the time of the marital separation. She said that his school work would improve when he was forced to do some work but that as soon as the pressure was reduced, he would return to his old ways. The student asked if mother would be willing to fill out some evaluation forms at home and bring them to the first session. She agreed and the forms were dispatched by mail.

When the family arrived for the first session, the overwhelming impression was of a small, timid mother, who dealt with her anxiety by talking more or less continuously, and three big, tall untidy fellows

who found various ways of resisting everything. Mother, J and G had completed the questionnaires but R had refused. Mother stated that the whole family was depressed and lazy. She described J's depression at his graduation. She interpreted it to have been caused by his lack of a tuxedo and friends but then went on to describe her argument at the event with her estranged spouse's live-in partner over what to do with R and his problems. Son G (17 years) described the family's difficulties around task accomplishment. All family members procrastinated and very little was ever done and what was done was never done on time. Mother and G then took turns describing the family difficulties: mother had just been fired from a job that she had held for twenty years, J should be working but was doing nothing, R was doing nothing in school. G was the only family member that appeared to be functioning normally. They reported that they had moved three times since the separation.

The results of the pretest application of the evaluation instruments were assessed for the second session. The scores showed that the family perceived itself as having problems primarily in the area of task accomplishment. Role performance and affective expression were also perceived as problems by mother and son G (17 years). Son J did not agree. The anxiety level in the family was high to normal with mother being the most anxious of the three. It was apparent that, although everyone was unhappy with the inability to do and complete chores, only mother and G (the ones who did all the work) were unhappy with who had to do them.

When mother talked negatively about father in the session, both J and G defended him. The student pointed out that the more mother criticized their father, the more they would protect and defend him. Son G raised the subject of the inability of both parents to assume their authority to make rules and impose consequences in the intact family. The student reflected that the boys had therefore missed the opportunity to learn about responsibility and justice in the world. The student then congratulated the boys for parenting themselves so well. Mother's reaction was to underplay and devalue the seriousness of the boys' offences. Son G then related a similar story that had happened recently when father had failed to be firm and consistent with him. The student asked mother what she was doing about R's behaviour in school. She said that she had removed his posters from his room and his television privileges until he decided to work in school. The student encouraged her efforts. It should be noted that although R was present in both first and second sessions, he took little or no part in the process. The student decided to invite father to the next session.

By the end of the second session, it was clear that this family had an inverted hierarchy with son G in charge, son R the most powerful member and the estranged spouses still angry and blaming each other for incompetence. All three sons had tried to mobilize mother and father to take charge but only R, by refusing to work in school had found a way to make the parents confront this issue. It was obvious that son G was aligned with mother and the student predicted that son R was aligned with father. Son J appeared to be silently contemptuous of and

distanced from both parents. It also seemed likely that J and G provided a considerable amount of the parenting that R had received. Son G was the critical parent of both his parents. Mother became a good mother by doing things for her sons. Thus she took responsibility for but no authority over the family. Mother and son G overfunctioned, while J and R underfunctioned.

The symptom, R's refusal to work in school, performed a number of positive functions unrecognized by the family, e.g. it energized mother and brought her out of her depression, it gave R a sense of power over school and family, it showed loyalty to father by highlighting mother's incompetence and bringing him back into the family, it gained him considerable attention and distinction from all sources, and it brought the family in for help. Although the family, led by G, refused to come in for a live session, the student researched the issue of hierarchy inversion and decided to try the approach used by Madanes (1981) of firm and consistent insistence on the parent's assumption of authority in the family through the making of rules and imposing of consequences.

Father arrived early for the third session. His appearance was very different from the rest of the family. While mother presented as very casual and the three boys as untidy and unkept, father was very professional in a three piece suit and carrying a briefcase. He said that he had managed to get R to go to school and work when he was with him by paying him to do so. He criticized and blamed his estranged wife for her inability to hold her job and handle her children. The student emphasized that this session had been scheduled to decide how all

concerned could help R to do what was in his best interest. Therefore, the focus would be on the future not the past.

Mother arrived with J and G but without son R who had been expelled from school until he decided to work when he was there. Mother started to cry and said he had been hanging around the house ever since, reading and watching television. The student asked what had happened to her former strategy of the removal of the posters and television privileges. Mother said that since it had not worked she had given them back because he was so unhappy without them. The student observed that she had really not given the arrangement the chance to work. Mother lamented that she did not know why R was so unhappy. The student asked why it should matter if the boy was unhappy as long as he did what he should do in school. The student asked her if she loved R enough to make him do what he needed to do in his own best interest. She said she did but how? The student pointed out that she had the power of food, clothing, shelter, television, money, etc.. Mother's reaction was to cry and talk about her grief at the deaths of her estranged husband's mother and grandmother. The student observed but did not comment that when the discussion turned to the theme of her taking control of her son, she started to cry and became helpless. The student did point out that R was obviously not going to let her "help" him, he was going to make her "make" him.

The student turned to father and asked him what he would do if mother put the pressure on son R and he decided to escape by running to father. Father said that son R could stay with him as long as it was

permanent move and he went to school. The student asked the brothers J and G if they would sabotage their mother's efforts and they said no. The student asked mother where she could get support. When she said that her support would come from J and G, the student pointed out that that was inappropriate. They could be observers but she should get support from adult family and friends. The student recognized how difficult this was going to be for her but said that she was sure that she could do it because of her obvious love for her son.

Mother and the three sons arrived for the fourth session. As mother talked about the consideration of various strategies for making R take the consequences of his actions, R became much more alert and vigilant in the session. Mother was starting to realize that she was tired of doing all the work for her children and she spoke of putting together a job list. This development seemed to raise G's anxiety and he started to disqualify and devalue his mother's efforts by telling her that she should send R to his father's house since she was never going to be able to get R to school. The student noticed that G talked to his mother like a spouse. G then attacked R for his stupidity in risking his future. The student asked G what he was going to do to prevent that from happening but he had no answer.

Mother then announced that she was tired of her eldest son, J, doing nothing to find a job. She then disqualified herself by observing that she had only been trying to work on herself for ten years. The discussion then focused around mother's efforts to overcome procrastination and motivate herself. The general theme was that mother

and sons were helpless when it came to changing themselves and each other. The student's tactic was to refuse to take responsibility for their irresponsibility and to keep pressing them to consider alternatives, make decisions and set deadlines. In retrospect, it may have been more effective to make some observations on the process of the family interactions. The student could have pointed out the family pattern of disqualifying themselves and others and the damage it was doing to each person's sense of competence and self-esteem. Making this dynamic overt might have empowered the family to take more control over themselves and to be more supportive of each other's efforts.

Mother cancelled the fifth session because son R had been at his father's house for a week and had had all privileges there. Mother added that she had not done any of the things that she had said she was planning to do so the session would be a waste of time for all. She said that son G had wanted to keep the appointment but she had decided against it. The student was encouraged by this development because mother was taking responsibility for what she had not done and had taken authority over G, the spousal child. The student consulted with her supervisor regarding this case and it was decided to raise the issue of R perhaps needing more fathering now, since he was so young when his parents separated.

Son R refused to attend the sixth session. Father had decided to take his authority over J and R, by demanding that J have a job in one week and refusing R all privileges until he went back to school. Mother was becoming gradually a little stronger in dealing with her children.

She still had many more ideas than she was prepared to implement but she was making some progress. Son G was still playing the spousal role and disqualifying his mother. She pointed out that father did not know how to communicate with the boys.

Since the student had observed that both estranged spouses seemed to have the same issues, she suggested that mother communicate her wishes regarding J to him in the session. The two had great difficulty talking to each other. J would not make eye contact with his mother and G kept interrupting to comment or to answer questions addressed to one of the other two. The student commented on G's need to protect and assist his mother and his brother and asked him if he could try to let them work on their relationship themselves. He was not happy at this request but he cooperated. The option of having son R go to live with father to get more fathering was discussed but disqualified almost immediately by mother. She pointed out that if they could only deal with their laziness, everything would work well.

The next two sessions were cancelled but mother kept the student informed by telephone of developments. The school had finally taken a firm position, mother had had long talk with R and he was to return to school. She reflected on how difficult it had been to talk to J in the session so the student asked her how often she sat down to talk with one of her sons. She thought that happened probably about once or twice per year. The student observed that her sons probably needed more from her. She reported that chores were still a problem and made an appointment for her and J to come in to learn to communicate with each other.

Mother arrived alone for the seventh session because J had had to work and R had not returned home after being expelled from class that morning. R was still seen as a problem at school. The student pointed out that R did seem to behave more in his best interest when his mother was communicating with and showing an interest in him. It was interesting how his inability to do much for himself reflected her inability to do much for herself. Perhaps his loyalty to her could be a positive force when she decided to look after herself instead of others.

Mother came in with R for the eighth session. He was not happy to be missing time with his friends. The student asked her to communicate her expectations to her son and commented on her discomfort and reluctance to be firm. The discussion then moved to the school's inability to be firm with him. The student sympathized with R since neither his mother nor the school seemed to be able to make their expectations clear to him. The student admired his sacrifice of his future for the sake of his family: the more he misbehaves the more therapy the family receives. It was clear that, in that way, the therapy sessions were his consequence for not performing in school.

Mother attended the ninth session alone. She and father had met with school officials and she had been very assertive in pointing out the school's inconsistencies when dealing with their son R. Father then pointed out her inconsistencies. The school was requesting psychiatric treatment for R and mother demanded a meeting with the psychiatrist first. In that session she and her estranged husband fully exposed their still-conflicted relationship. The student commented that if the

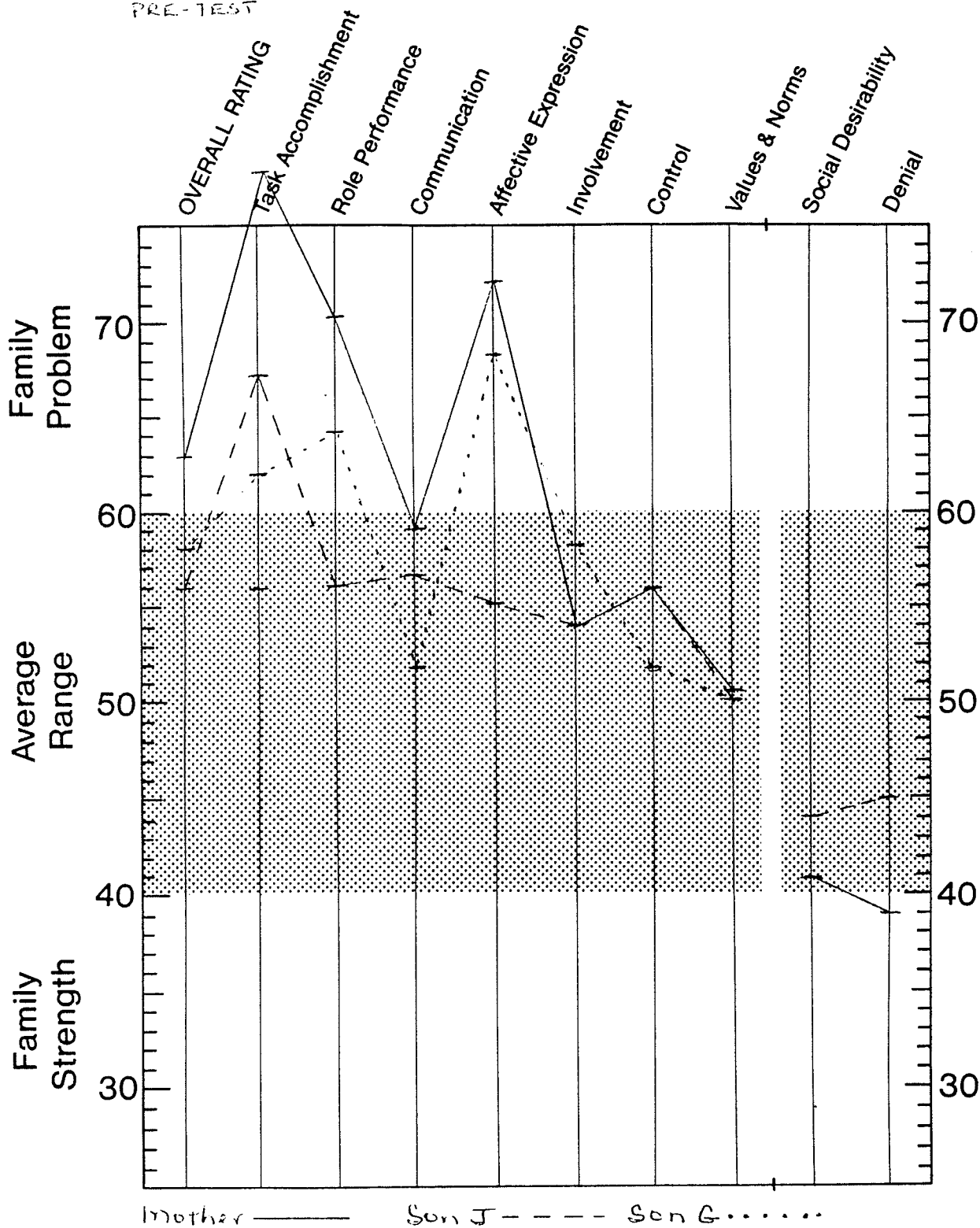
parents could resolve their differences enough to cooperate regarding their son, his problems would disappear. The student did, however, congratulate mother on her progress in asserting herself and this time she accepted the praise without disqualifying it.

That session was the last. Two subsequent appointments were cancelled. When the student made a follow-up call, mother reported that R was attending school and doing enough work so that he might pass. He had had two sessions with the school psychiatrist and then had refused to return. The student asked her if the family would complete a posttest application of the evaluation instruments and she agreed. The results showed a great deal of improvement in mother's scores. G's scores were roughly the same but J's scores were elevated. It is possible that the changes that C had made in her functioning within the family may have been more welcomed by her than by her children. Certainly J was much less happy with who had to do the chores in the household at the time of the posttest. The literature indicates that mothers usually have the most accurate picture of what is happening for good or ill in the family. If that is so then the functioning of this family did improve over the course of therapy.

Working with this family provided the student with the opportunity to observe and treat several of the problematic dynamics outlined in the literature review. Although it was not the specific presenting problems, it was obvious that the mother-child bonds were very strong in this family and that the launching phase was going to be difficult (Literature Review, p. 10) since the eldest son had graduated from high

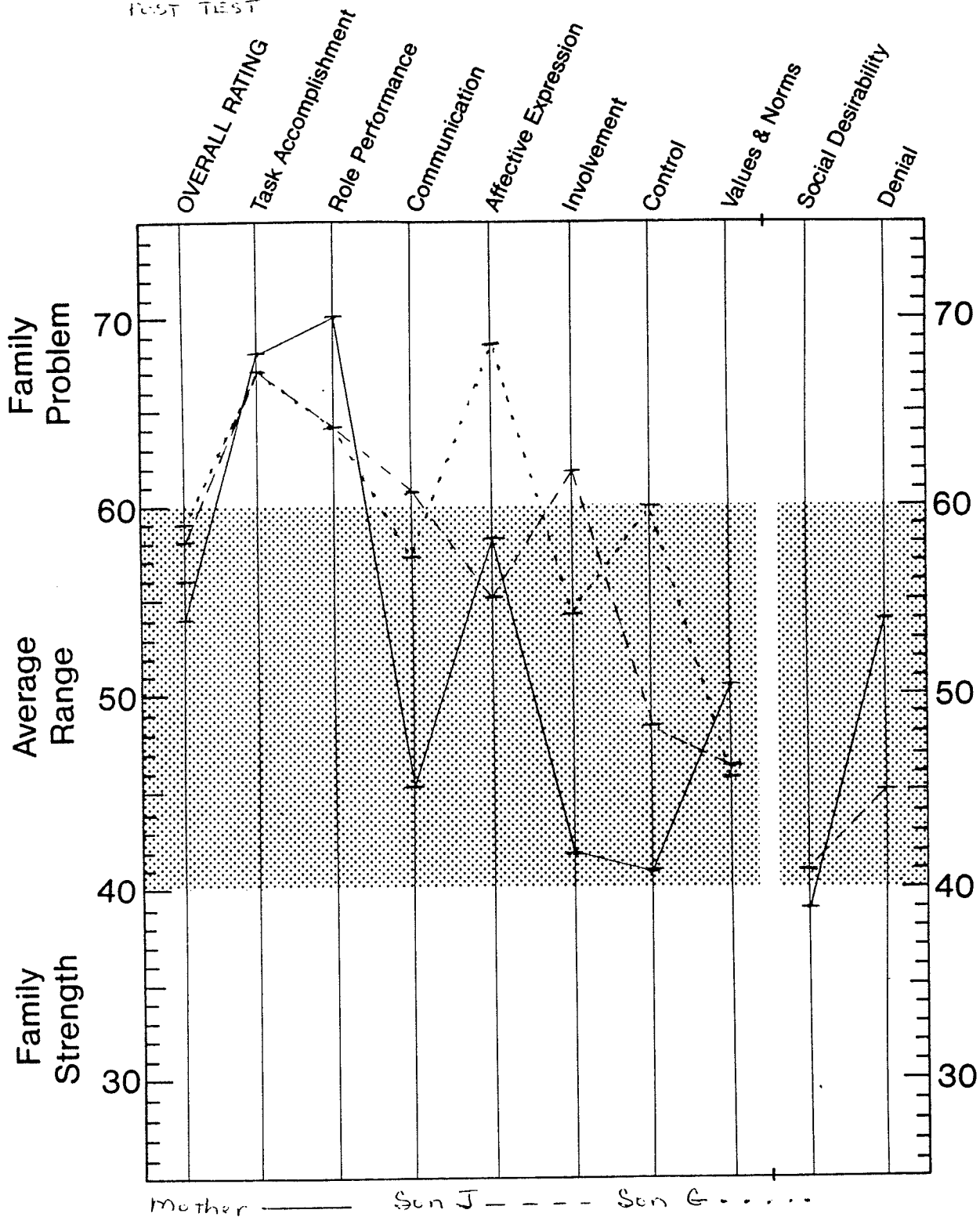
FAM GENERAL SCALE

FAMILY FOUR
PRE-TEST



FAM GENERAL SCALE

FAMILY FOUR
POST TEST



Family Problem Checklist

Mother: Improvement on 10 dimensions, deterioration on 3, no change on 7

J: Improvement on 5 dimensions, deterioration on 6, no change on 9

G: Improvement on 5 dimensions, deterioration on 2, no change on 13

school and was neither working nor attending an education institution. All the children were male and had difficulty recognizing and cooperating with a woman in a position of authority (Literature Review, p. 17). On her part, mother had difficulty claiming her authority and thus an inverted hierarchy was in evidence (Literature Review, p. 18, 37-38). The student treated the inverted hierarchy by refusing to take charge so that mother had to do so. The student then helped mother set and enforce rules and consequences for behaviour as advised by Madanes (1981).

The complicating factor was that mother and father had been unable to resolve their marital and separation issues and continued to fight and refight those issues to the detriment of the children (Literature Review, pp. 20, 28, 34). These children had little if any, respect for their parents (Literature Review, p. 27) and their anger was shown in lack of cooperation and devaluation of parental efforts. This anger was disrupting their own developmental progress. The middle child had been pulled in as a substitute spouse to his mother (Literature Review, p. 28) and while that process had the potential of harming his attempts to separate from her, it had also given him the experience of assuming responsibilities that enhanced his sense of competence and maturity (Literature Review, p. 29). Although the therapeutic efforts with this family were only somewhat successful, the student's learning experience was considerable, both professionally and personally.

Family Five

This single-parent family unit consisted of mother (42 years) and daughter S (16 years). Mother had been married for eleven years and divorced for nine years from father who was alcoholic and only peripherally involved with the single-parent family unit. Daughter S saw her father on an occasional basis but felt rejected by him in favour of his drinking and unstable lifestyle. Mother phoned in requesting counselling because her daughter wanted to leave home and was on the verge of a nervous breakdown. Mother had been on sick leave from work on and off for about nine months and had recently had an operation for a foot ulcer. She described much tension in the home since her daughter had no respect for her and did nothing to help out in the home. She agreed to complete the evaluation forms if they were sent by mail and to bring them to the first session.

The way the family presented itself for the first session and the appearance of both members was very significant. Both mother and daughter were on crutches, mother because of her recent operation, daughter because of a sports injury. Mother was very small, at least six inches shorter in height than her tall, thin daughter. Mother presented as an organized, competent, middle-class woman who worked for the government. Daughter S's appearance could have been described as sloppy, unkept, somewhat angry and depressed. The enmeshed relationship, with no visible hierarchy, was obvious. They even finished each other's sentences.

Mother described the conflict as starting when daughter S started bringing boys home at the age of thirteen years. About eight months

previously daughter S had had a miscarriage. The student noted that mother seemed more sad than daughter at the loss of the child and observed that probably most mothers of pregnant fifteen year olds would have welcomed the miscarriage. Mother said that her daughter's miscarriage had reminded her of the two miscarriages she herself had suffered after daughter S was born. The student stated that mother appeared to carry the family's sadness and daughter the family's anger. Both agreed.

The student assessed the family and consulted with the team between the first and second sessions. It was observed that this single-parent family had very little extended family and was thus very isolated. Both maternal grandmothers had died before daughter S was born and mother had been an only child. Father's family was largely cut off because of the divorce and his unstable lifestyle. The conflict between mother and daughter served to reduce the severe enmeshment, helped the daughter to grow up and separate from her mother, and distracted from the sadness and grief regarding the family's deficits and losses - father, the intact family, the potential additions to the family and the maternal grandparents and an extended family system. The team suggested trying a sculpture to illustrate to the family their own inverted hierarchy.

At the beginning of the second session, the student shared the results of the pretest application of the Family Assessment Measure and the Family Problem Checklist. The student noted that although the overall rating that both had given the family was just slightly into the problem range, some of the scores were high in specific areas. Both

were amused that, although they were both satisfied with the amount of tasks completed in the home, mother was very dissatisfied with who had to do them, while daughter was satisfied with the arrangement. Mother noted that the discrepancy was no doubt accounted for by the fact that she did all the work. When the student pointed out that the areas of communication, expression of emotion and involvement were problematic, especially for daughter S, the daughter said that her mother was too involved in her life. The student also stated that it appeared that mother was very much more anxious about the situation than was her daughter. Both agreed that this was true.

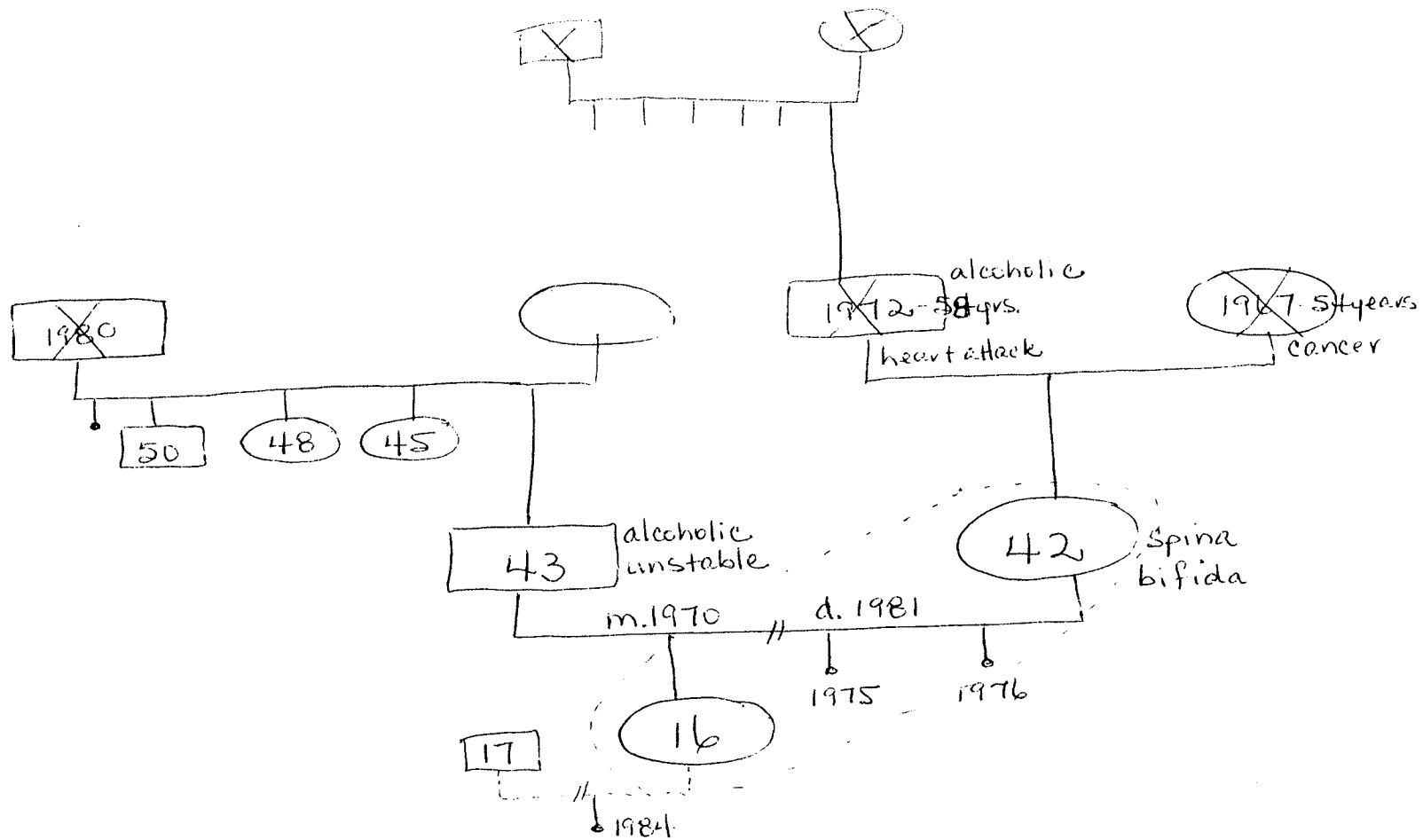
The student asked the daughter to sculpt her and her mother as to who was in charge in the family. The daughter placed her mother higher than her, in the position of control. The student disagreed and sculpted them with the daughter higher than the mother. The mother agreed with the student's way of positioning them. When the student observed that they were very deprived regarding family and that it must be lonely at times, mother started to cry and daughter appeared uncomfortable. Mother stated that that was why she wanted to be friends with her daughter. The student observed that the daughter was not old enough yet to be an equal with her mother. She really needed her mother to be parent still, since her mother had more maturity and experience in the world.

The student asked both what specific changes they would like to see happen in their home. Mother said that she wanted less conflict. When the student pressed for specific details mother became more vague and

started disqualifying her statement by saying that the situation was not all that bad. When mother finally said that she would like her daughter home for meals, the daughter claimed that she did not like to eat at supper time. Mother then backed off on that demand as well. The student pointed out to mother that it was very difficult to know what to work on if she could not specify what she wanted changed or was unable to persist in making legitimate demands. The student asked what she was afraid might happen if she specified and persisted with a demand. Mother replied that she was afraid that her daughter would leave home.

Mother phoned the next day and announced that her daughter had left the home the night before and had not returned. She was very worried that her daughter might be in danger on the streets. The student asked her what she was willing to do to get her daughter home. When she replied that she would do anything, the student observed that it must be hard for a daughter to respect a mother who believed that she had no rights. The student pointed out that if mother wanted her daughter home more than her daughter wanted to be there, mother then had no power. The student recommended that mother try attending a meeting of the Tough Love organization to get some support for taking control of her home.

Since the daughter had not yet returned home, mother attended the third session alone. The discussion was initially focused around mother and her family of origin. Her parents had both come from large families of which mother was now one of two remaining members. There was a three- and potentially four-generation pattern of overfunctioning women married to last-born alcoholic men. The student predicted that the daughter



GENOGRAM: FAMILY FIVE

would marry a last-born alcoholic male and mother commented that her daughter's present boyfriend was in that pattern.

Mother herself was an only child who was born with spina bifida that went undiagnosed until she was nineteen years old. That was the reason for her tiny stature and foot ulcers. She was missing one vertebrae, had a small hole in her back, and her legs were numb from the knees down. The foot ulcers developed as a result of injuries to the foot. It had been a medical miracle that she had been able to give birth to a healthy child. Mother had been hospitalized at least once per year for treatment related to her condition.

The student asked if mother had contacted Tough Love. She had gone to one meeting but did not like their approach since if she locked her daughter out of the house she might end up on the streets. The student remarked that, even though the daughter had stayed away from home many times, she had not hit "the streets" yet since she always had friends and boyfriends willing to give her a place to stay. It did, however, provide a powerful threat that kept the daughter in control of her mother.

Between the third and the fourth sessions, a number of telephone contracts were made. The first call was from mother who reported that, although her daughter had been home, she had left again. Mother talked about giving her daughter choices and the student pointed out that her daughter's actions were communicating the message that she could or would not make choices in her best interest. The student stated that mother should make some decisions for her daughter and suggested that

mother return to Tough Love. The student also spoke with the Child and Family Services worker who had refused to place the daughter in a foster home. Mother phoned to report that she had heard from her daughter who had implied that if she lived at home she might be physically violent to her mother. Mother said that she had been back to the Tough Love group but they had been inconsistent in their opinion of what she had done.

Both mother and daughter appeared for the fourth interview. The daughter had been home for two days after volunteering to come home by requesting a meal with her mother. Mother was pleased to have her home. The student observed that the daughter was still in control and asked mother how it had come about that her daughter was in charge. Mother described how dependent she had been on her daughter from the age of three years to do things for her. The student pointed out that it is hard to be in charge of someone to whom you feel indebted. The student asked the daughter how it felt to look after her mother. She expressed indifference to the burden since she had friends who were in the same position as she was - caretakers for their parents.

The dynamic whereby the mother expressed the sadness and the daughter expressed the anger in the family was raised again by the student who asked how that could change so that each could own their own emotions. The student also asked mother what she would do if her daughter ran from home again. Mother prevaricated, saying that she would not go back to Tough Love because they would disapprove of her allowing her daughter to come home without a contract. The student asked what rules were in place and about her position regarding meals.

The student then pointed out how mother managed to set a rule and disqualify the rule at the same time.

The fifth session was permeated with a theme of weakness. Mother described herself as not being good enough or attractive enough because of her disability. The student pointed out the strength she had needed to get through all the blows that she had sustained in her life. Daughter was steadfast in her denial of the burden she had had to carry, her sadness and her anger at her losses. Mother pointed out that she was no longer involved in her daughter's personal issues and problems with her boyfriend. The student supported her by acknowledging how hard that must have been for her. The student raised the issue of whether one's body shape and abilities determined one's worth. Mother argued that they did and her daughter tried to support her but ended up proving the student's contention that one's worth in one's own or another's eyes should not be affected by one's physical capabilities.

In the interval between the fifth and sixth sessions the family had pondered the issue raised by the student. They had come to the conclusion that physical attributes were connected to one's self-worth, but that they did not equal one's self-worth. The student then asked the question as to whether physical attributes should be connected to self-worth and left the issue with them. Mother provided the information that her daughter had been in a physical fight with a girl at school and had been suspended. The student observed that it must be necessary for the daughter to display toughness and wondered what that meant to her.

Mother then raised the issue that the school had discovered her daughter's past absenteeism and had sent a letter to the home. She then disqualified the issue by saying that it was in the past and her daughter had attended for the past two weeks. The student pointed out that it was difficult to know whether this really was important to her or to the school since there were so many contradictory messages being communicated on the subject. Mother and daughter then talked about their contempt for people who admired their strength in adversity. The student pointed out that she felt in a bind since whatever she said of a supportive nature would then be interpreted as insincere. The student, who had been researching the effect of chronic illness on families in preparation for the live session, asked questions around family patterns regarding illness. The maternal grandmother had had yearly bouts with pneumonia during which mother had had to stay home from school to care for her.

In the pre-session preparation for the live (seventh) session, the team noted that the student really had no therapeutic contract with this family. They had never specified what they wanted to do and how the student could help them do it. The student then began the session by asking what changes had happened since the beginning of therapy. Both agreed that there had been no changes but they were not fighting as much as they had. The student asked how they accounted for that and mother said that she had backed down on some issues. Daughter said that she still had trouble with her temper. The student gave them both the credit for the changes that had been made. Mother pointed out that

"people" had sent them from helper to helper but no one had helped them. The student asked them what they needed from her at this point. Daughter said that they needed someone to tell them to have supper between four and six in the evening and someone to tell her to come home between ten and eleven o' clock. The student observed that it sounded as if they needed someone to come to live with them and organize their lives. Neither appeared to react to the statement.

Both mother and daughter insisted repeatedly that they wanted to know the student's opinion of their family and what they could do. When the student pointed out that she believed she had been consistent in saying that mother should be in charge and make the rules for the household, mother did not agree to that approach. The team pulled the student out at that point thinking that a power struggle was imminent that the student would lose. The team decided to send in a message addressing the comment that mother had made about it being a problem that her daughter wanted to leave home. They commended the daughter for appropriately anticipating her coming adulthood and reassured mother that it was normal to want to move out at sixteen years of age. The daughter argued that it was not normal to want to leave home at her age and then raised the issue of her violent temper.

The team came back with the observation that the daughter's physical fights were really the temper tantrums that she did not get to have as a child. They therefore prescribed that the daughter have one temper tantrum per day in her room, with her mother monitoring to make sure that she that she did not hurt herself or damage anything. There

ensued an argument with the daughter insisting that she could not have a temper tantrum without damaging anything. Mother remained quiet or supported her daughter but they finally agreed to follow the prescription with mother making the remark that she felt old.

During the post-session consultation, the team noted that mother's final remark was a reference to the fact that by asking her to monitor her daughter's behaviour the team had asked her to be a mother not a friend. They also noted that the daughter expressed the mother's anger and that until mother could learn to express her own anger, the established patterns would continue. They believed that the physical fights might have been evidence that because of mother's disability, the daughter might not have received enough touching as a child. The team thought that the key to dealing with the family was to be oppositional and doubt their ability to do anything for themselves.

When both mother and daughter came in for the eighth session, the student asked about the tantrum prescription. The daughter reported that she had had a couple of tantrums but then did not feel angry so she did not do it again. The student asked if mother had supervised but she had not because she was not home. The student asked them where they wanted to go in therapy. Mother said that they still wanted the student to tell them what was wrong and help them solve it. The student asked what problem they wanted solved and mother answered that her daughter wanted to leave home and that was not normal.

The student disagreed and said that it was normal for her to want to leave home but that she had to make the decision as to whether to

leave home without the resources to support herself. Mother asked the student to give her opinion as if her daughter was twelve years old. The student refused and said that it was neither reasonable nor respectful of a sixteen year old's growing need for independence to treat her as if she was twelve. The daughter asked the student what she would do if the daughter left home without the appropriate resources. The student replied that her mother would have to make the decision as to whether to allow her to go, have her picked by the police, brought home, or placed in care.

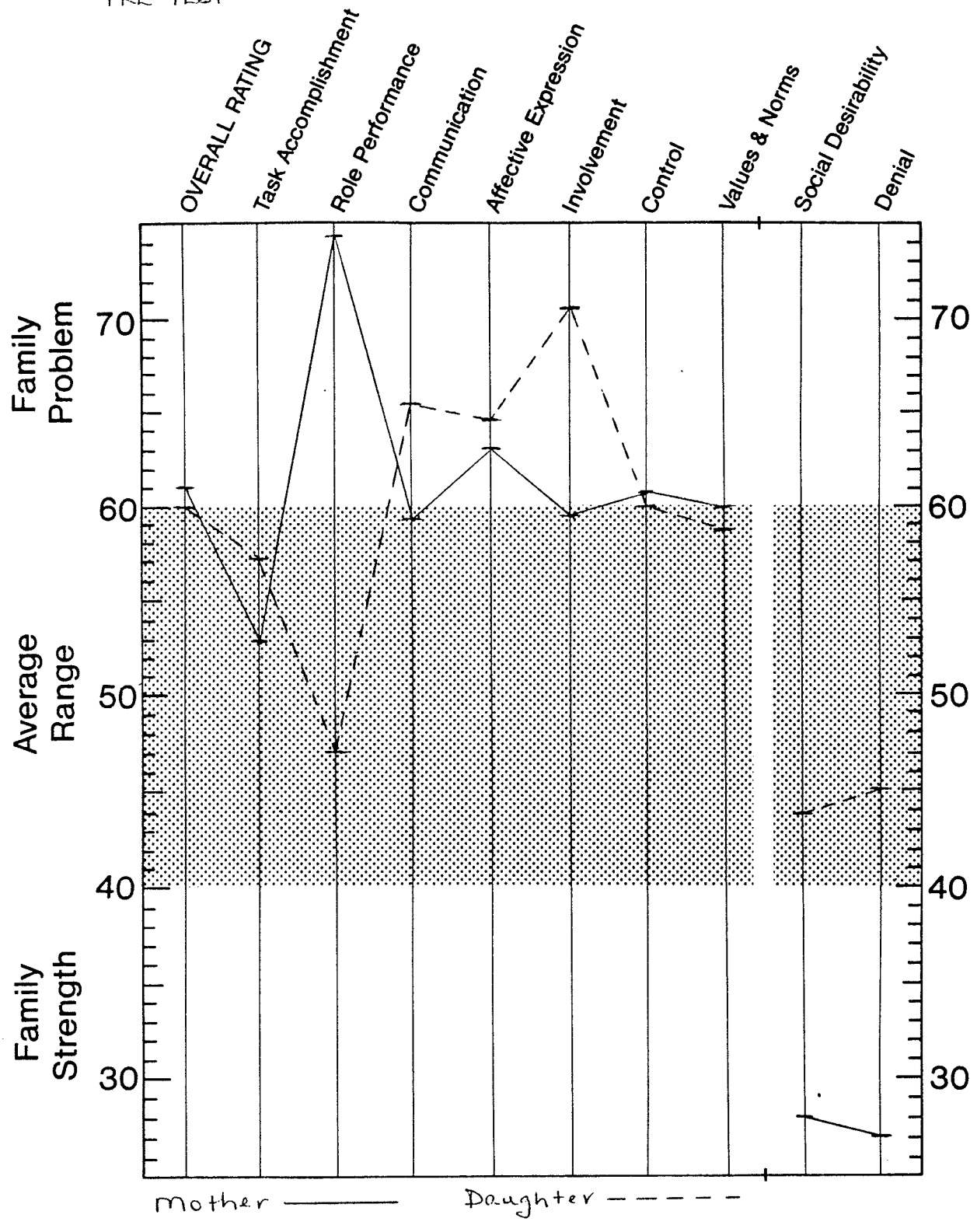
Mother was becoming more and more angry through this exchange. She decided that she has had enough of this. "Everyone" had said that they had a problem and they had done their parts and come in for counselling. The student had not done her part to tell them what was wrong and how to fix it. The daughter was calm through her mother's anger and when her mother left, followed her out.

While the student regretted the termination of therapy in such a manner, it was apparent that three therapeutic things had happened in the manner of the ending. Mother had become angry instead of sad and had owned and expressed her own anger. Mother had made a decision and had thus taken ownership of the problem. Appropriate hierarchy had been established when the daughter had accepted the mother's decision, albeit reluctantly, and followed her mother out of the session.

In retrospect, it is apparent that the real issue was mother's anxiety that her daughter would leave her by leaving home. That was the reason for the anger at both the student and the team when they

FAMILY FIVE
PRE-TEST

FAM GENERAL SCALE



validated the daughter's desire to leave. The unacknowledged agenda was to have the therapist take charge of the family to prevent the normal separation/individuation process from occurring. Perhaps it would have been helpful to have explored mother's anxiety around what would happen to her when her daughter left home. Would she be able to cope without her? The student believed that the likely response would have been denial but since with this family the questions seemed to be more important than the answers, asking the question might have been useful.

The student requested that the family complete the posttest application of the evaluation instruments but they refused to do so.

Family Five was a particularly powerful learning experience for the student because it showed the powerful impact that a serious debilitating condition in the mother can have on the single-parent family (Literature Review, p. 18-19, 22, 32). The parent-child bonds intensified by the separation and divorce (Literature Review, p. 10) were further intensified by the mother's dependence on her daughter to perform tasks that would have been hers had she been well. As noted in the literature review, the child then acted as a substitute spouse (Literature Review, p. 28), and became worried about her mother's incapacity (Literature Review, p. 22) and angry about her mother's incompetence (Literature Review, p. 27). Problems surfaced because mother lacked social independence (Literature Review, p. 10) and therefore was finding it difficult to recognize and validate her daughter's growing needs for separation and independence. It is not surprising that mother also had difficulty claiming her authority. Not

only was she dependent on her daughter but her husband had also been abusive (Literature Review, p. 18). The student treated hierarchical inversion by refusing the proffered invitation to take charge of the family, define their problems and prescribe the solutions. Making mother responsible for rules and consequences and validating the daughter's desire for independence was so powerful for the family that they left in anger and frustration, thereby assuming responsibility for the issues that had always been rightfully theirs.

Family Six

This single-parent family consisted of mother (34 years) and son J (15 years). The parents had been married for four years and separated or divorced for twelve years. Son J saw father regularly and had considerable contact with both extended family systems. The single-parent family unit lived in a self-contained basement suite in the home of the maternal grandmother. Mother phoned the Institute requesting counselling on the advice of her local Child and Family Services office. She said that she was very concerned about her son who was smoking, drinking, doing poorly in school, and had had girls in his bedroom. During the initial telephone contact, mother agreed to complete the Family Assessment Measure and Family Problem Checklist if they were sent to her by mail and to bring them to the first session.

Mother and son J arrived for the first session exhibiting the presenting issue. Mother was looking harassed and worried and J, with his trendy clothes (torn and disreputable) and hairstyle (hair completely shaved off except for a piece at the front and the nape of

the neck) was trying to appear laid back and indifferent. Mother launched into a description of J's rebellious behaviour and the student offered observations and suggestions designed to take the heat out of the issues. The student was thus reframing the behaviour from rebellious to experimentation with adult lifestyle choices which was a developmentally appropriate task at his age.

Mother's anxiety over J's lacklustre performance in school had led her to call in his father for increased power and support. Father had cooperated and J had received a consistent message from both parents that improved performance in school was expected. The student congratulated mother for both parents on their ability to cooperate in the best interest of their son. Mother outlined the family's present situation. She and J were living with a man on a part-time basis since he worked up north for days at a time. This arrangement had been in place for four years and the only problem with it was that the partner was an alcoholic. Mother had a back injury which meant that she had been on Disability Insurance and was then on Unemployment Insurance. Her physical condition was much improved and she was looking for work.

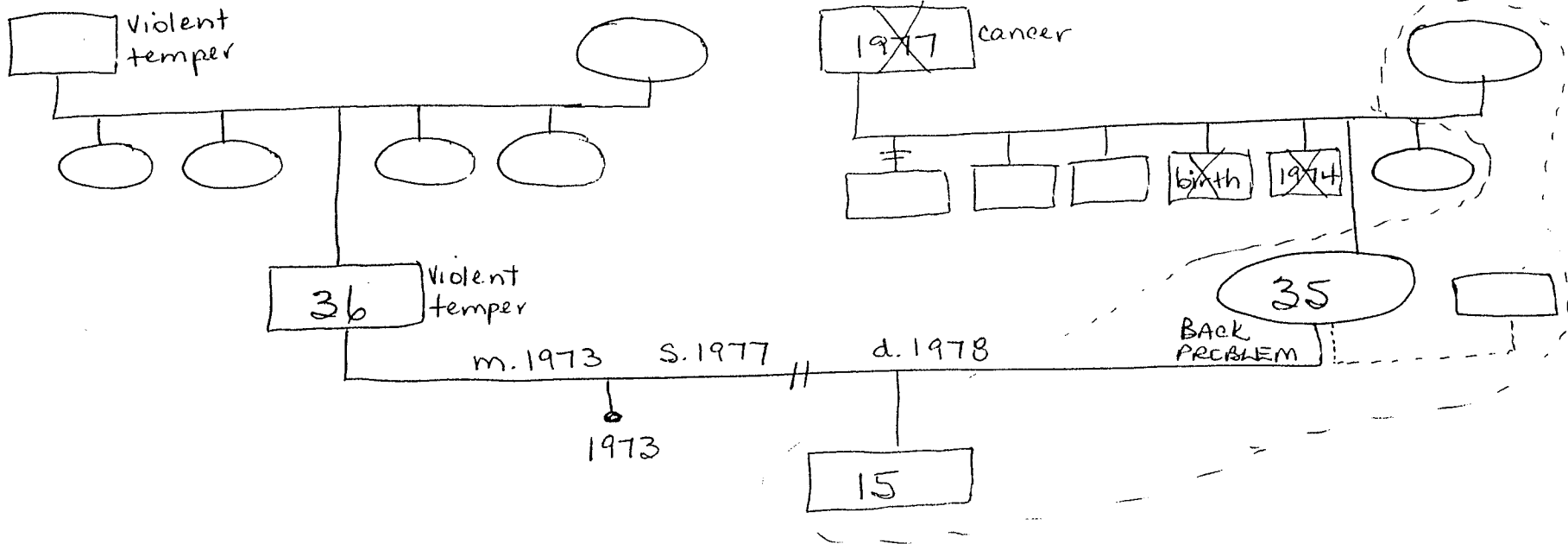
The student asked both mother and son what question each would most like answered from counselling. Both considered the question very carefully and then mother answered that she would like to know whether she would get her former son back. The student very gently answered her question in the negative since her son is now an adolescent and would mature to adulthood. He would never be a child again. Mother had tears in her eyes and the student empathized with her by referring to her own

struggle with the identical issue with her own son. The student stated that all mothers have to grieve the loss of their children as they grow to adulthood. Son J looking somewhat uncomfortable, said that he would like his mother to accept that he was growing up. The student and the family contracted for a total of four sessions to explore the issues.

At the beginning of the second session, the student outlined the results of the Family Assessment Measure pretest. Both identified Task Accomplishment as a problem but neither seemed upset with who did the work that was done. Mother felt that communication and expression of feelings were not as good as she would have liked. Son J was more concerned with his mother's overinvolvement in his life and her lack of acceptance of his views on rules and how he would like to see things done. Son J was very much more anxious about what was happening in the family and this was a surprise to both of them.

The remainder of the second session was focused on family information and the student drew a genogram. Mother was the sixth-born child and first daughter of seven children. Since she had been her father's favourite child, her relationship with her mother and sister had been problematic during her growing up years. She believed that she now had a good relationship with both and described good boundaries in her relationship with her mother in whose house she and J lived.

Mother and father had married very young, when both were still adolescents, because mother was pregnant. She subsequently miscarried that child but gave birth to J two years later. The parents separated when J was two years old. Both mother and son described father and his



GENOGRAM: FAMILY SIX

family as very angry, physically abusive people. J admitted that he feared his father's anger and mother admitted that when J became angry he was becoming more like his father. When mother said that J had developed scoliosis at the age of seven. The student noted that both mother and son had developed back problems at the same time. Mother announced that her part-time live-in partner had been dry for over a week and asked if he could come to the next session since he would be in town. The student agreed.

Between the second and third sessions, the student consulted with her team. It was obvious that mother and son had had an enmeshed relationship for years and that the present crisis was a result of J's growing need for independence. There appeared to be a lot of strengths in this family. Mother was appropriately in charge of the system, each showed respect for the other's right to speak without interruption, and J was willing to accept responsibility for his actions. Mother was attempting to control J's developmentally appropriate behaviour with the result that J was becoming more resentful of and angry at her. The more angry and resentful he became the more upset and controlling she became. Three positive functions of J's rebelliousness could be discerned. It was J's attempt to grow up and individuate from his mother as was appropriate at his age. It served to bring his parents closer together to deal with his behaviour. It also served to exacerbate the divisions between mother and her live-in partner.

Only mother and son J arrived for the third session because the live-in partner had started drinking again and had refused to

participate. The student predicted that mother would have difficulty letting J grow up as long as she was unhappy in her live-in relationship and as long as she was unemployed. As long as those two situations continued, J would be the focus of her concern. The student pointed out the positives she saw in both of them. The student admired J's honesty and ability to look at himself and his actions with maturity that was remarkable for his age. The student admired mother's determination to do a good job of raising her son and her ability to listen to his point of view even when she did not agree with it.

The student pointed out that J had outstanding ability to get others to do tasks that were rightly his responsibility. The student pointed out that that ability could have good and bad consequences depending upon how he used it. The student wondered how mother encouraged or cooperated to allow her son to avoid performing tasks that he could benefit by doing. The family agreed to come in for a live session as the final session in the original contract.

The live session was cancelled at the last minute because son J had injured his leg in an accident with his skateboard. The final session was focused on the clear communication of rules and consequences to reduce conflict around everyday chores and routines. The student again pointed out mother's success at raising a son who had no major difficulties and some notable strengths. Mother then spoke of her distress around her family's (especially her mother's) criticism of her and the way she was raising her son. Apparently maternal grandmother would criticize her daughter's parenting and then sabotage mother's

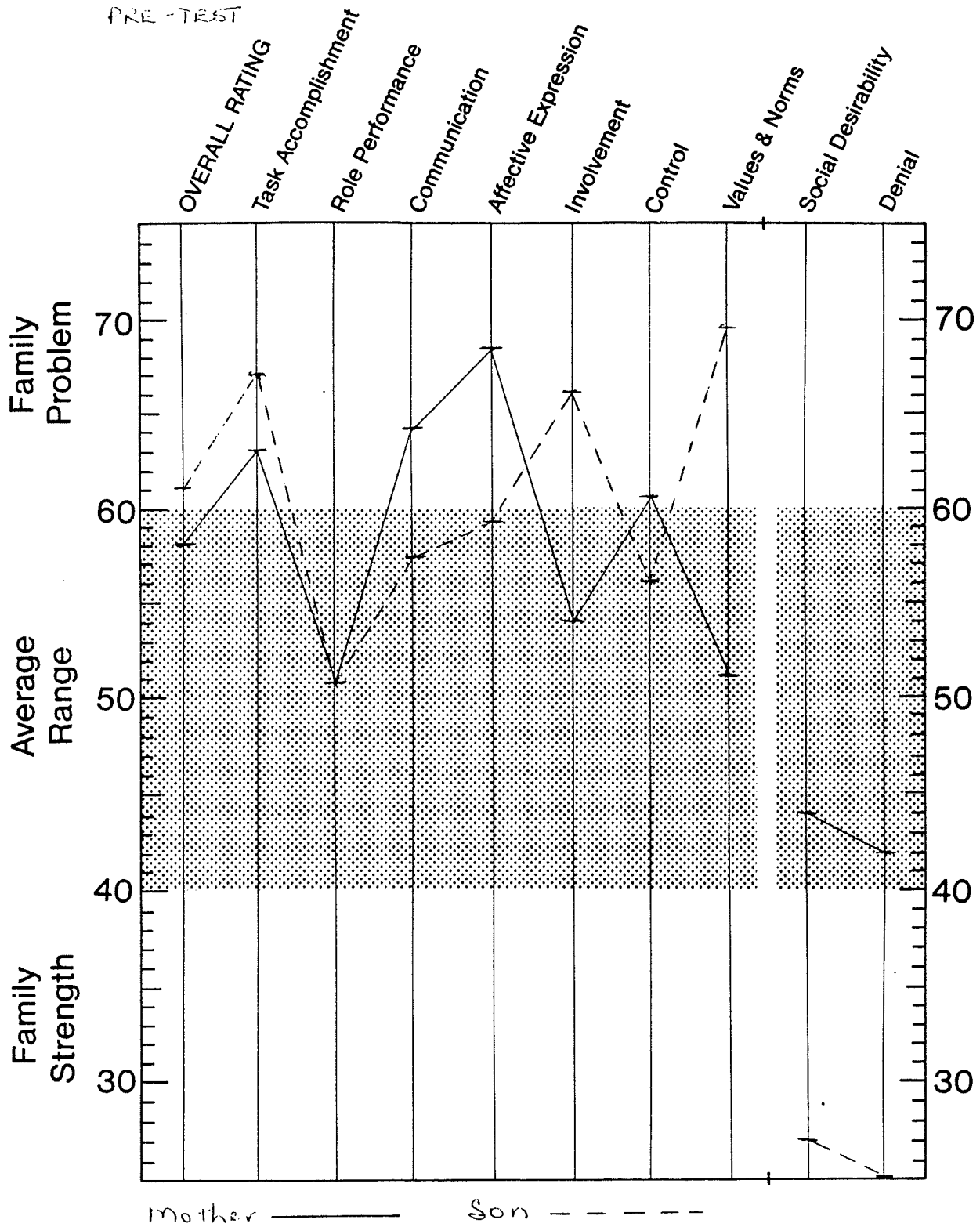
attempts to assume her authority by giving her grandson money and permission to disobey his mother's instructions. The student pointed out this dynamic and initiated a discussion as to how mother could deal with her own mother and obtain her support and cooperation. The student suggested that mother approach maternal grandmother, describe what she saw happening and request her assistance in working together for J's benefit.

The student offered an extension of the original contract but the family felt able to handle further issues independently. An agreement was made that the student would be available for consultation if necessary. The family agreed to complete the post-test application of the evaluation instruments and to return them.

The final scores on the Family Assessment Measure showed improvement in most areas of family functioning. The overall rating was well into the average range for both family members. Both were happier with the level of task accomplishment although mother was less happy with who was doing the work. This change may reflect the fact that she had returned to work and was more aware that she was shouldering more of the burden that she would like. Mother was much happier with the level of communication and both were more pleased with the level of communication of feelings. Both showed improved scores in the area of involvement and J in particular was happier with how much and often his point of view was heard. Son J's level of anxiety had decreased markedly. The results follow.

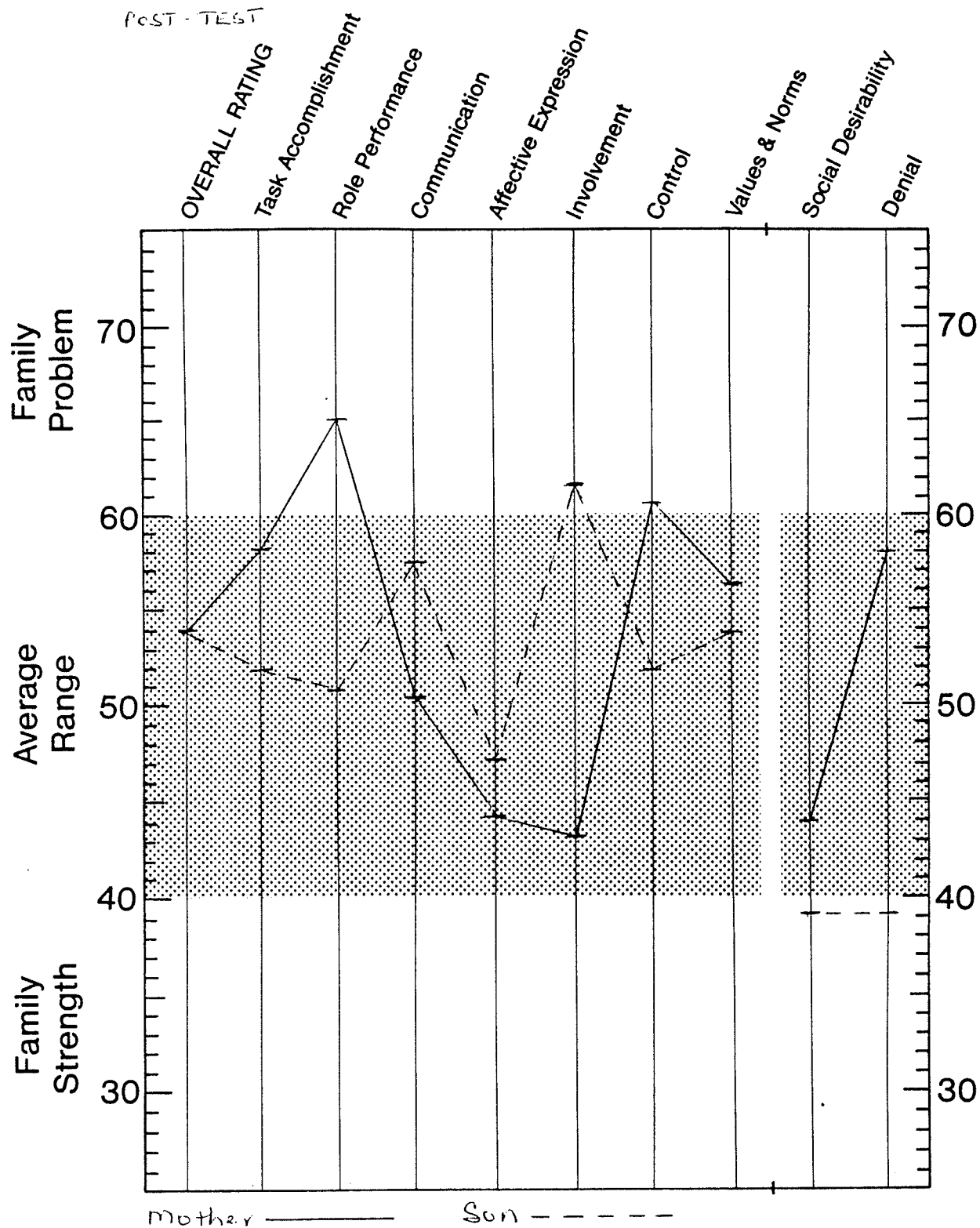
FAM GENERAL SCALE

FAMILY SIX
PRE-TEST



FAM GENERAL SCALE

FAMILY SIX
POST-TEST



Family Problem Checklist

Mother: Improvement on 16 dimensions, no change on 4.

J: Improvement on 9 dimensions, deterioration on 5, no change on 6.

The student's work with Family Six was focused on helping mother and son negotiate the changes required in their relationship to allow for the son's need for increasing independence from his mother. In that process the student experienced and observed many of the dynamics of the single-parent family described in the literature review. Because the parent-child bonds are so strong and emotionally intense in the single-parent family, individuating is a more difficult task for the child (Literature Review, p. 10). There was also evidence that the son had difficulty accepting his mother's authority (Literature Review, p. 17) to the point where she had to enlist his father's support to convince him to expend more effort on educational tasks. Because of his mother's back problems, the son was unable to take his mother for granted and worried about the financial problems they had because of her unemployed status (Literature Review, pp. 18-19, 22). There was also some dependency on the third generation evident in the proximity and the interference of the maternal grandmother (Literature Review, pp. 39-40). The student was able to help mother recognize and accept her son's growth to adulthood, albeit with some grieving attached. The student was able to deal with the third generation factor only by coaching mother on ways to confront the maternal grandmother and to elicit her support. The maternal grandmother was likely an integral part of the family unit, as was the live-in partner and it is probable the more change would have occurred faster had they been available for involvement in the sessions.

Family Seven

This family did not fit into the student's stated area of learning in that the primary focus was on the noncustodial parent, the father. However, it is being included in this practicum report because it deals primarily with the resolution of the divorce experience and it included contact with members of the original single-parent unit. Father (44 years) phoned the Institute requesting counselling because he was severely depressed and suffering from acute anxiety. He was also worried about his daughter S (18 years) who was also very anxious, had been physically abused by her mother and was neither working nor attending school. Son J (17 years) was doing well and still lived with his mother while S was living independently. Father had been divorced from mother for almost ten years.

Father arrived for the first session with both daughter S and son J. Son J had been included because he and his mother had had a fight the night before and J had gone to his father's house to stay while his mother recovered from her anger with him. Neither S nor J were happy about being brought to the therapy session by their father with whom they had not lived since the divorce. Both refused to be taped or to complete the evaluation instruments. Neither would participate in the session until father got up and left. Then both started talking about their problems with their mother and their aunt. Daughter S felt particularly scapegoated by her father's family, while her brother J was favoured by them. Both agreed that their mother had a violent temper. The student described S's developmental stall (no work, no school) as

loyalty to her family (her mother had not worked since the divorce), and J's school achievements as loyalty to the family as well (father had always worked).

Since neither child would return to therapy, the student worked individually with father for four sessions. During that time it became increasingly apparent that the man's depression and anxiety were rooted in his unresolved divorce experience. The ex-spouses were still involved in an enmeshed, conflicted relationship into which the children, especially daughter S, were triangled. There were few, if any, boundaries and no differentiation between individual and family issues. The team recommended that the student request that mother join father for at least three sessions aimed at clarifying boundaries, the responsibilities of the parental subsystem, and resolving the outstanding divorce issues.

Mother cancelled out of the first session at the last minute, probably because of her anxiety, but she appeared for the next session. The student initiated discussion of the visitation arrangements and how they had changed over the years. The subject of daughter S and how they had been unable to cooperate to stop her out-of-control behaviour between the ages of thirteen and sixteen, quickly surfaced. Both parents would be worried and looking for their daughter but, in one notable instance, mother had found her but had not communicated that fact to father who spent many more hours worrying and looking for his daughter.

Father was able to admit that he was still angry about that situation and, after some prodding from the student, mother was able to apologize for her lack of sensitivity to his distress. The student pointed out that because each had blamed the other for being a poor parent, daughter S was able to manoeuvre between the two parents to her own detriment. Both reported being depressed in the marriage and disappointed that neither was able to fill the expectations held at the beginning of their relationship.

At the beginning of the next session, the student advised mother to be cautious and not to trust until she felt comfortable. Both mother and father felt that they had performed much more competently as parents in the past couple of years. They kept in touch by telephone and had cooperated to help S obtain Student Aid. However, it was apparent that S still had to act as the go-between to initiate contact between the parents. The student pointed to this pattern and decided to verbalize her prediction that both were afraid to resolve their relationship with each other. The student stated that her hunch was that mother was afraid that if she worked things out with father, she would lose him and that father was afraid that if he worked things out with mother, he would be engulfed. Therefore, their anger at each other protected them from their respective fears.

The student then turned to father and reminded him that he had wanted to learn to communicate with his ex-wife and that the best way was to do it, to talk to each other instead of through the student. Their direct communication clarified another dynamic in the family

triangle. Whenever mother and daughter S had a fight, S would run to father for help. The student made the observation that if father were ever able to decide that the relationship between mother and daughter was their business, their relationship would improve. Both agreed that S had been good at keeping them connected for years. The student pointed out that as long as one parent kept interfering in or rescuing S from her relationship with the other parent, S would never learn how to persevere with an issue to its resolution.

Discussion then focused around the pattern and themes in the marriage. Both were depressed and looked for support and care from the other who was unable to provide what was needed and wanted. The result was mutual disappointment, fear, anger, and feelings of rejection because each looked to the other for what needed to be found in themselves. This was a new idea for them both and mother especially resisted it at first. The student persisted and defined the difference between sharing which is a legitimate expectation in marriage and being emotionally dependent and expecting the spouse to fill unmet needs from childhood. Father asked mother to attend one more session so that they could communicate to the children that the fighting had finally stopped. Mother reluctantly agreed, stating that she did not need help, she had come only to help him.

The student began the session with the whole family by making a lengthy statement describing the dynamics in the family. She stated that as a family, they had managed to remain neither married nor divorced for ten years. In spite of the marital separation, they had

remained stuck together and daughter S had been the glue. She had sacrificed her individual development for the sake of the family. Her acting-out behaviour had given her father an essential role in the family as her rescuer. His continuing involvement had kept her mother from having to handle the loneliness and the responsibility that a true separation would have meant. By taking the role as the "bad child", S had allowed her brother to be the "good child" and take responsibility for only his own issues. Since her parents were unable to cooperate to control her behaviour, S had grown up largely unsupervised, and able to do whatever she wanted. This situation meant a lot of excitement, power and control for her. She was able to avoid working on her relationship issues by jumping from one parent to the other. The student stated that the parents were now ready to be truly divorced and they no longer needed the help of S to stay together. The student expressed worry about what would happen to S now that her parents no longer needed her.

The family, led by father, then discussed the changes that they were going to make in how they handled issues. In that process S confronted mother regarding her alcohol and drug abuse. Mother denied S's perception of the problem and S pointed out that the denial of the problem was the problem. The student pointed out that the whole family tried to rescue each other and that S being concerned about her mother's problem distracted her from dealing with her own problems. If S dealt with only her own problems, then mother might have to confront hers.

The family then communicated their wishes to each other. S asked her mother not to come to her place when she had been drinking. Mother

and daughter agreed to deal with their own issues and father agreed to stay out of their relationship. Daughter S asked her father to refrain from offering his guidance and opinions repeatedly unless she asked for them. Father expressed his love and acceptance for his daughter. The student observed that fathers often feel that it is their responsibility as "good parents" to offer their guidance whether requested or not. The rest of the family decided that they had had enough therapy and the student continued individual therapy with the original client, father.

This family provided for the student a valuable experience in helping a family bring a "difficult divorce" (Literature Review, pp. 37-38) to closure. Because the parents had been unable to resolve the issues between them they had continually battled and triangled their elder child into the relationship (Literature Review, p. 20, 28, 32-33). By inviting both parents to sit down and discuss their past and present issues, resolve them and come to an agreement regarding future contact, the student was able to help them to put their past relationship into perspective and to concentrate on the welfare of their children. It is interesting that because of the unresolved divorce, so many of the more problematic dynamics of the single-parent family outlined in the literature review, were readily apparent, especially in the elder child. She was over-involved with both of her parents (Literature Review, p. 10), angry at and disrespectful of both parents (Literature Review, p. 27), and was acting as the substitute spouse for her mother (Literature Review, p. 28, 37). For her part her mother had stayed at home, unemployed since the divorce, incapacitated by factors

(depression, alcohol abuse) existing before the divorce (Literature Review, p. 13, 34). The student's work with this family brought clarity and completion to the parental relationships and enabled the daughter to concentrate on her appropriate developmental tasks.

Family Eight

This single parent family consisted of mother (44 years), a helping professional, and daughters K (14 years) and L (12 years). Mother had been married to father for five years and the separation had occurred eleven years previously. Father was alcoholic, lived in another province and had not seen his daughters since shortly after the separation. The parents were legally divorced in 1982. Mother had referred the family for counselling because of conflict in the family between the siblings and between parent and child. The conflict was centred around chores and mutual respect.

The family appeared for the first and subsequent sessions casually dressed and pleasant. Mother was very verbal and would dominate the interaction especially when anxious. Daughter K was small in stature and slight of build and presented as quite meek and timid, somewhat young for her fourteen years. Daughter L, although eighteen months younger than her sister, was quite a few inches taller, of stocky build and presented as angry and resistant, somewhat older than her twelve years.

The first session was focused on the presenting problems of task assignment and completion and mother's inability or unwillingness to stay apart from sibling conflict. The student suggested that certain

chores be assigned to a specific person so that if the work was not done, it would be obvious who had failed in her task and the allowance reduced accordingly. That arrangement would reduce the arguments around who was responsible for work left undone and K's complaint that, although she did her work, her allowance was often docked because L had not done hers.

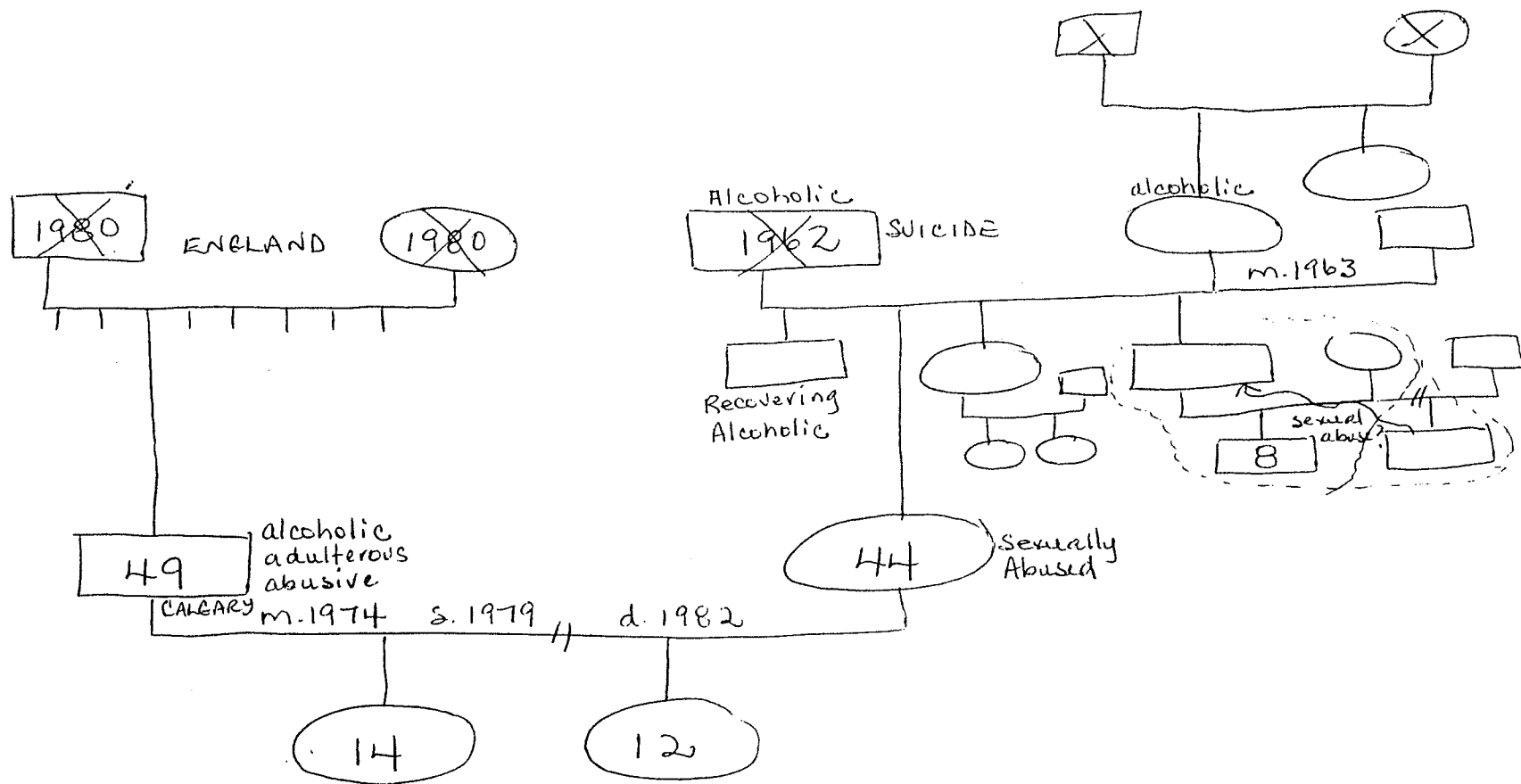
Mother complained that the worst sibling conflicts erupted just after she arrived home from work, when she was least able to cope with them. The student assisted the family to agree to allow mother at least an hour's "breathing space" after she arrived home from work before the daughters could approach her with their issues. The student then asked the family how mother got "hooked" into dealing with issues that properly belonged to the girls themselves. Mother said that she knew what she should do but she could not seem to do it. The student then pointed out the positive aspects of her involvement in their issues: the family became closer, knew each other better, the girls could compete endlessly to see who could win their mothers' approval, and mother could be totally involved in her children's lives and not have to make a life of her own. The student explored the family's support system and discovered that the maternal grandparents were very supportive and family members stayed with them from time to time.

The evaluation instruments were scored and examined for information to share at the second session. It was apparent that, although daughter L was identified as the rebellious child, she was the most content with her family. All her scores were in the average range, including the two

that tapped anxiety. Both mother and daughter K identified more problem areas. They agreed that communication was a problem. Daughter K felt that tasks were not always performed without difficulty and that emotions expressed were often overly intense. Mother was not happy with who did most of the work in the household and felt that the family needed more togetherness.

Only mother and daughter K arrived for the second session. Daughter L had felt ignored in the first session but had apparently agreed to attend the third session. The student completed a genogram by collecting family of origin information. Both of mother's parents were alcoholic. Her father had committed suicide when she was an adolescent. Her mother's drinking increased after her father died. Her mother had remarried shortly thereafter and the drinking was now largely controlled except during holidays. Both daughters had witnessed a drunken scene the previous Christmas. Mother had had to explain to her daughters the dynamics of an alcoholic family in order to deal with their distress.

Mother was the second born child, but eldest daughter, of four children. As such she had been the parentified child and had largely raised her younger two siblings. Her parents' alcoholism had been a considerable issue for her in a number of ways. Because of their preoccupation with obtaining and consuming alcohol, she had been left unprotected on many occasions as a child and had been sexually abused by a male relative. She had received treatment for the abuse and believed that it was a resolved issue in her life. One of her brothers had been charged with sexual abuse of a family member but had been acquitted.



GENOGRAM: FAMILY EIGHT

Mother had met father when they were both working in the same town. The marriage had been a very painful experience because he was alcoholic, physically abusive and adulterous. He had declared bankruptcy after the separation so mother had had to do so as well. Mother's mother had been fond of father because they could drink together. The marital separation was characterized by much drinking and several suicide attempts on father's part.

Between the second and third sessions, the student consulted with her team. It was agreed that this was a somewhat enmeshed single-parent family where the mother was controlling rather than authoritative. The family conflict and disrespect served the positive functions of helping to separate the individuals in the enmeshed system, expressing the daughters' growing need for independence and responsibility appropriate to adolescents, and helping to distract mother from the possible unresolved issues in her family of origin, e.g. suicide, alcoholism and sexual abuse. The team suggested that the student return to the presenting issue and deal with the conflict in the family.

All three members of the family attended the third session. The issue of the sibling conflict was discussed with considerable emotion. Daughter L accused her sister of running to their mother with tales of L's behaviour and misbehaviour. When mother agreed with L's interpretation of the pattern, K burst into tears, feeling betrayed because, she said, her mother asked her to keep track of what her younger sister was doing. The student helped the family to clarify what issues required K's vigilance and what did not and mother was able to

recognize that she had given K mixed messages about her responsibility for monitoring her sister's activities.

Mother stated that she still became "hooked" when her daughters became physically violent with each other. The student urged mother to take a firm stand on this issue by saying "People are not for hitting" in a way that communicated her values and expectations in a clearly recognizable fashion. Mother said that she grounded her daughter L when she became violent. Daughter L complained that her violence was reacted to more than her sister's because she was bigger. The student recognized her frustration at the unfairness of it. The student also commented on the shifting alliance pattern in the family and commended the family for their flexibility in not becoming stuck in one way of relating and supporting each other.

Daughter K complained that her mother tolerated negative school-based behaviour from L much easier than from her. The student made the comment that it sounded as if K was saying that she thought that her mother was intimidated by L's anger. K agreed that that was what she saw. The student noted that K expressed the family's anxiety and L expressed the family's anger. The student invited the family to come for a live session in front of the one-way mirror. They agreed to take advantage of the opportunity. The student prepared for the live session by researching the issue of the alcoholic family system.

All three members arrived for the live session but daughter L was so uncomfortable and self-conscious that she kept her back to the mirror for the first part of the session. The student asked the family to

describe what had happened in therapy to that point. Mother said that things were going much better. There were not as many sibling fights and mother was able to stay out of them by telling K to deal with her sister rather than by jumping in to rescue K by grounding L. Mother was also taking time to read the newspaper after coming home from work and before making the evening meal and dealing with her daughters. The student asked what benefit there was in continuing therapy since the problem was solved. Mother thought that it was useful to get together to talk about issues since they seemed to lack the chance to do so at home.

The student then asked what the children's issues were with their mother. The daughters tried to negotiate an extension of their curfew and flexibility around the timing of completing household chores. The student allowed the family to work at the issues without much interference from her. Mother was neither intimidated nor coerced by her daughters and would only state that she was "thinking about it".

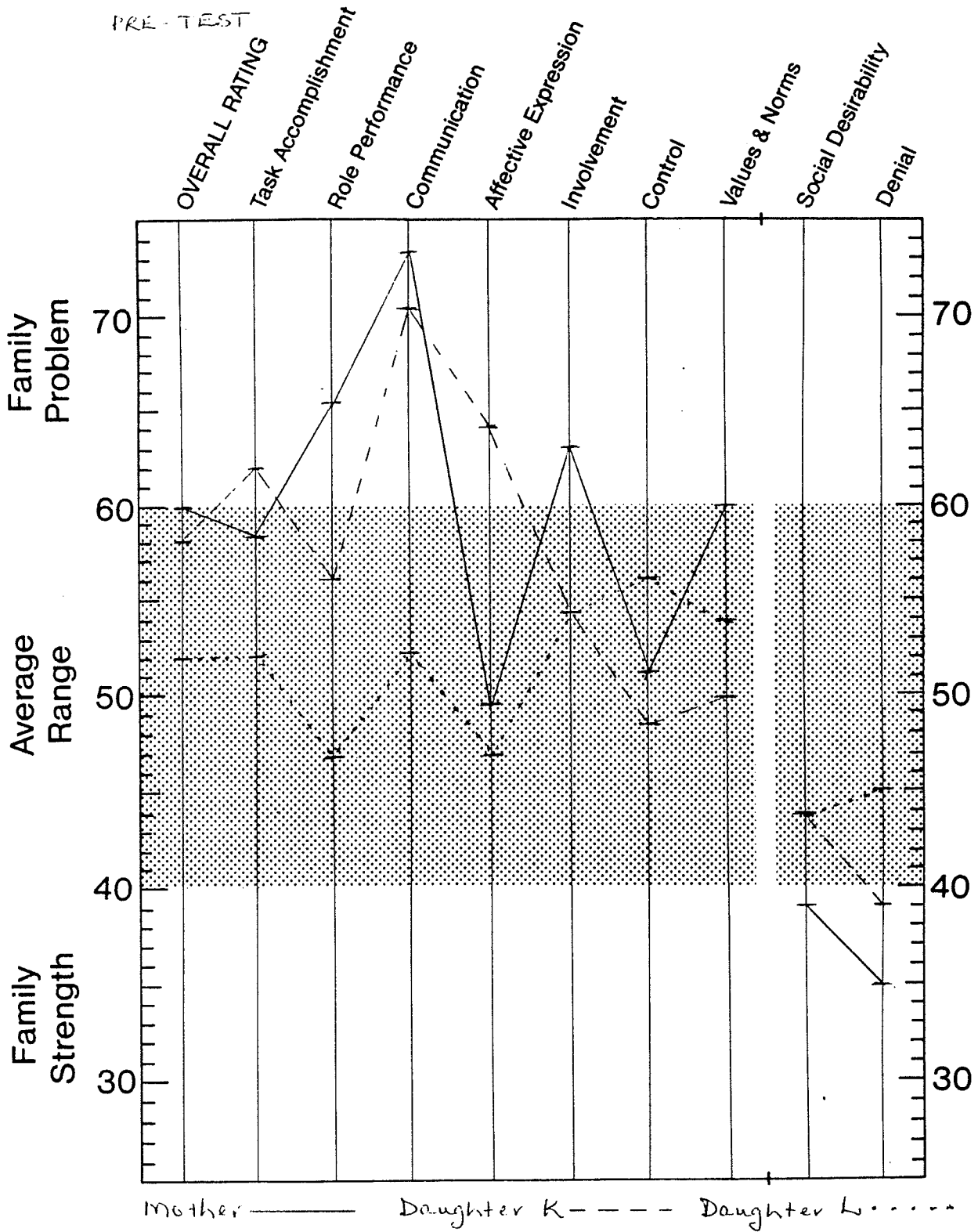
About halfway through the session, the family and the team switched sides. The family went behind the one-way mirror and observed the student and her colleagues discussing their observations of the family. The team had noticed L's feisty manner and wondered if the anger was hiding sadness. They noted that it must be hard for K to be loyal to both her mother and her sister when they were disagreeing. They wondered what the family did for fun as a unit and one member of the team supported mother by revealing that she had much earlier curfews for her children and was much more demanding regarding chores.

The family really enjoyed being behind the mirror. Daughter L turned toward the mirror when she came back and said that she felt that they had really understood her. Mother said that L was often criticized, especially by her grandmother when she had been drinking. Mother's interpretation of that was that L was feisty and did not hesitate to make her wants and needs known. She was not quiet and cooperative like her sister. Both daughters felt that their grandmother favoured their cousin because he was male. The team phoned in asking how the girls tried to be boys to get their grandmother's favour. Both girls denied making any attempts to take on a masculine persona (but K had a very short haircut and wore baggy clothes and L acted feisty and aggressive). Mother said that she had tried to protect her children from the drinking in her family so that they could have the childhood that she had never had. The student congratulated her for her largely successful efforts to protect her children from her family's alcoholism and ended the session.

During the post-session, the team noted that the extended family was the real issue for this family. Mother's nostalgia for her own lost childhood may have been influencing her to try to prolong her own children's childhood. They noted that daughter K presented as younger than her chronological age and wondered if the children needed their mother's permission to grow up. They also noted that mother had done a good job of changing the alcoholic system but was still "hooked" in spite of herself.

FAM GENERAL SCALE

FAMILY EIGHT
PRE-TEST



The work done with Family Eight was required because, as stated in the literature review, single-parents are often so focused upon earning a living and completing concrete tasks that they seldom have the time or energy to address the emotional needs of their children (Literature Review, p. 17). The intensity of the parent-child bonds (Literature Review, p. 10) was apparent as was the elder daughter's assumption of the parental role of monitoring her younger sister's behaviour (Literature Review, p. 28). The student supported the family by assisting them to communicate feelings, raise and resolve emotional issues and by encouraging and validating mother's role as the authority in the home.

Additional Families Counsellled

The following section describes the work done by the student with families who were available as a unit for three or less sessions. The student has described the process of counselling for each family individually and outlines the learning involved at the end of the section.

Family Nine

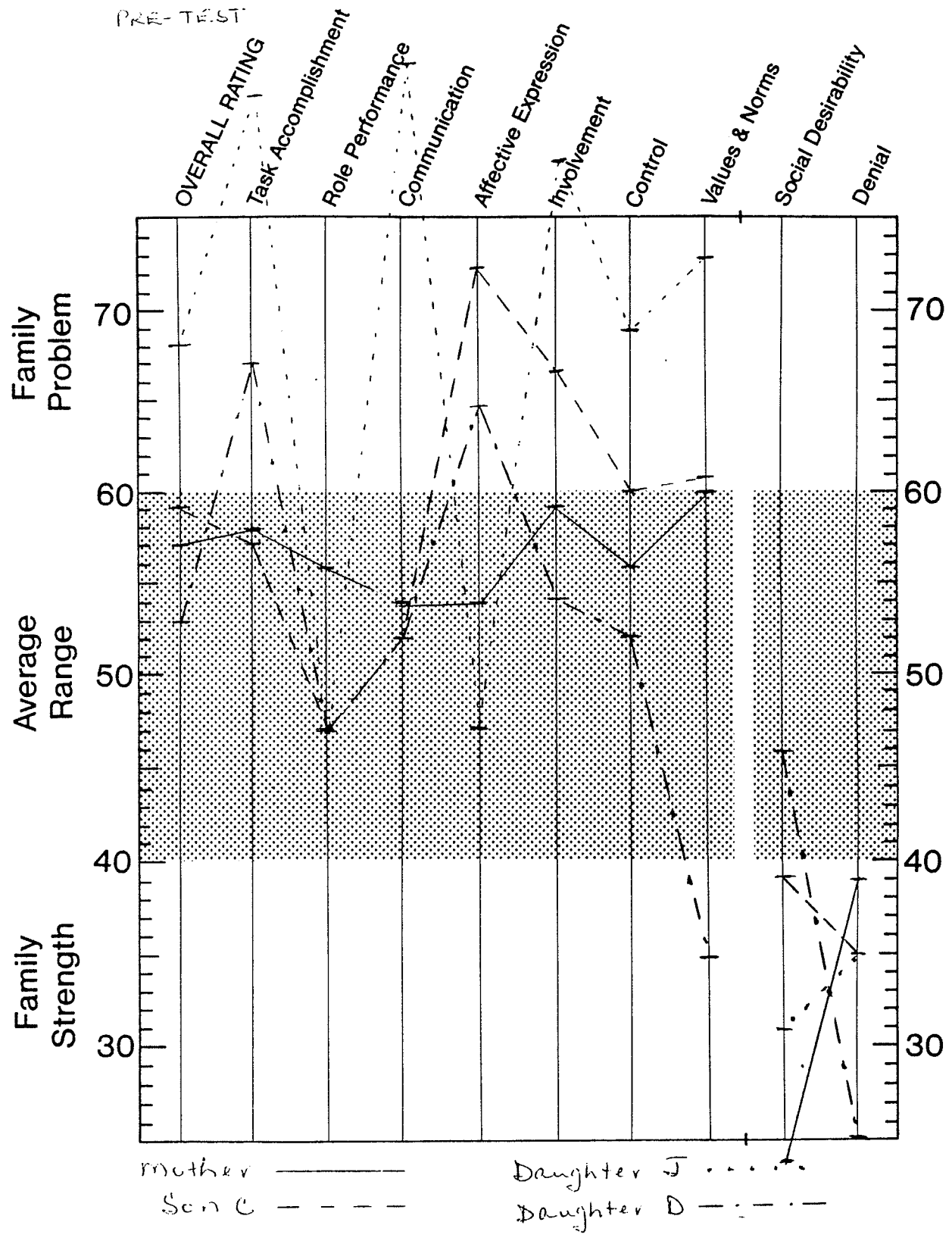
Family Nine consisted of mother (43 years), three adopted native siblings: son C (16 years), daughter J (15 years) and daughter D (13 years), and two natural children: son S (6 years) and daughter C (4 years). Father had been forced to leave the home four months previously by the police and Child and Family Services because of the severe physical abuse of the children. Daughter J (15 years) had talked to the authorities after her father had beaten her and left serious injuries. After her father had left the home, J had assaulted her mother and had then been taken into care by Child and Family Services. Most of her time in care had been spent on the run or locked up in Seven Oaks Centre for Youth. Mother phoned the Institute requesting help for the remaining five members of the family in adjusting to and accepting the situation.

The first session was spent completing the evaluation forms and getting acquainted. Daughter J had been transported from Seven Oaks for the session. She completed the forms and then left for the streets where she remained for several days. The results of the Family Assessment Measure were very revealing. In spite of her claim to be distressed about the situation, none of mother's scores were above the average range, although her anxiety was high. As could have been predicted, daughter J had the most elevated scores, scoring in the "problem" range on the overall rating as well as on task accomplishment, communication, involvement, control and values and norms. Son C scored in the problem range for affective expression, involvement and values and norms. Daughter D scored in the problem range on task

FAM GENERAL SCALE

FAMILY NINE

PRE-TEST



accomplishment and affective expression. All family members showed high anxiety in their scores.

The second session, attended by mother, son C (16 years), daughter D (13 years), son S (6 years) and daughter C (4 years), was focused on discussing how such a complicated family was created. Son C and daughter J were full siblings but their sister D had a different father than they had had. The children had been badly deprived during their infancy and childhood and had spent more time in foster care than at home. When C was six years old, the Children's Aid Society had obtained Permanent Orders of Guardianship on all three children. Mother was teaching in the school C was attending at the time, came to know him, and she and her husband decided to apply to adopt him. When they found out that he had two sisters, they adopted them as well. The first natural child was born three years later.

Unfortunately, father had had a very physically abusive upbringing himself and he soon started using his father's methods of discipline on his adopted children with the aforementioned result. Although a third (live) session was scheduled for the family, it was cancelled by mother because of her decision to leave town and go to live with her parents in another province. This decision was precipitated by a crisis in which daughter J had come home severely beaten, mother had enlisted father's help in dealing with the situation, father had tried to convince mother to allow him to come back home, and daughter J had tried to entice daughter D into the street life.

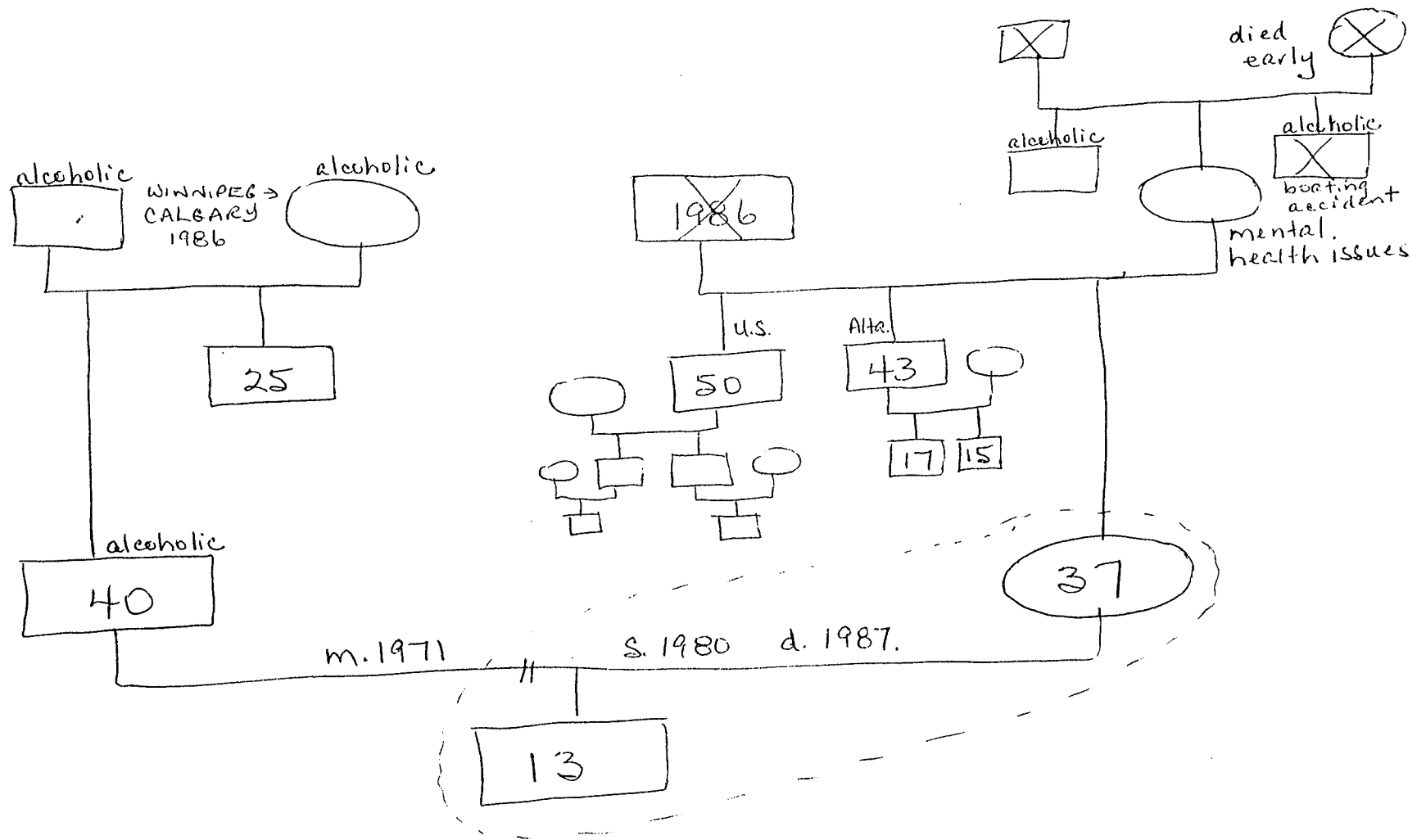
The most valuable learning experience for the student came from preparing the research paper on violence in the family since the family was scheduled to be seen live. It was in that research that the student learned the systemic nature of physical violence and how all family members, abuser, victims and silent observers play an essential part in creating and perpetuating the cycle of violence.

Family Ten

Family Ten consisted of mother (37 years) and son M (13 years). Mother had been separated and divorced from father for nine years. She telephoned and requested counselling because she had been having problems with her son for about two years. She reported that her father had died two years before and her mother had had a nervous breakdown six weeks previously. She was having trouble coping with day-to-day parenting.

The first session was focused on completion of the evaluation instruments, doing a genogram and discussing the presenting problem. This family had suffered many losses. Father, his brother and both of mother's brothers lived in other provinces. The paternal grandparents had moved to another province two years before at about the same time that maternal grandfather died. Maternal grandmother had a psychiatric condition that made her very emotionally dependent on her daughter. Father and his family were alcoholic and mother had alcoholism in her family as well.

The presenting problem was mother's distrust of son M. Their close enmeshed relationship was being stressed by his entrance into



GENOGRAM: FAMILY TEN.

adolescence. He was making bids for more responsibility but she was having trouble allowing him to learn through experience. The student gave them both direct messages about the appropriateness of trusting M to do his own schoolwork, look after himself when his mother was working and decide how he would like to use his time. The student stressed that mother had to remain the authority for rules and consequences in the home but that she should resist the school's attempts to apply responsibility for M's school behaviour and achievement to her.

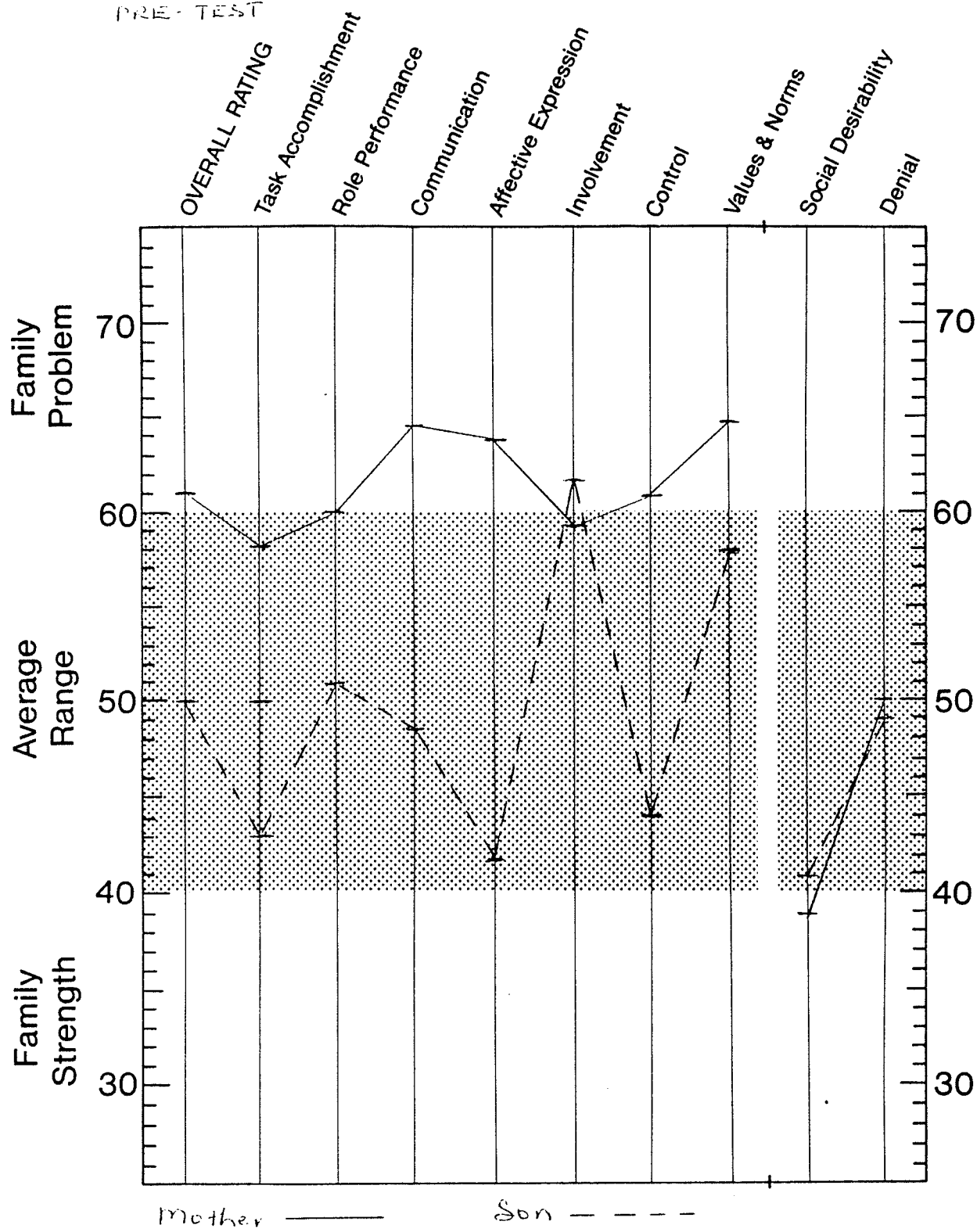
The Family Assessment Measure showed that all of M's scores were in the average range and most of mother's scores were just into the problem range. Son M's highest score was in involvement which reflected his anxiety that his mother was too involved in his life. Mother showed some desire to improve communication, expression of feelings and agreement on values and norms.

During the second session, both mother and son agreed that things had improved for them both. Mother was trusting son M more by giving him a curfew but not monitoring what he was doing when he was outside the house. He was responsible for coming home after school, doing his homework, eating his meal and then he could do what he wanted until his curfew time. He had been faithfully observing the curfew. The student cautioned M about becoming too good too fast.

Mother had attended a Beginning Experiences weekend where she had mourned the loss of her marriage. She had never completed that task because there had been too much to do to ensure her and M's survival and welfare after father had left the family. She also had to grieve her

FAM GENERAL SCALE

FAMILY TEN
PRE-TEST



lost chance to have had more children. The separation had come suddenly for mother when her husband packed his clothes while she and M were out and came back two days later to let them know that the separation was permanent. Because father had been a heavy drinker, mother would never leave son M in his care. The parents had some minor disagreements in the present over the planning of access visits and the spending of maintenance payments but generally, mother reported, the relationship was distant but functional.

Therapy with this family was terminated when the student phoned to reschedule a cancelled third appointment and mother said that since things were going fairly well for both of them, she did not feel the need for further counselling. The student was disappointed because she felt more work could be done on the relationship with the maternal grandmother and mourning the loss of most of the extended family system.

Family Eleven

Family Eleven consisted of mother (34 years) and daughter C (12 years). Mother had been married twice. The first marriage, to C's father, had ended because father had sexually abused C twice. The second marriage had ended two years before and adoptive father had regular access to C. Mother had herself been adopted and her adoptive mother had died one month before mother telephoned the Institute requesting counselling. Mother reported that her daughter was a discipline problem in school and that, although the school was offering the help of the Child Guidance Clinic, she wanted to work on her relationship with her daughter.

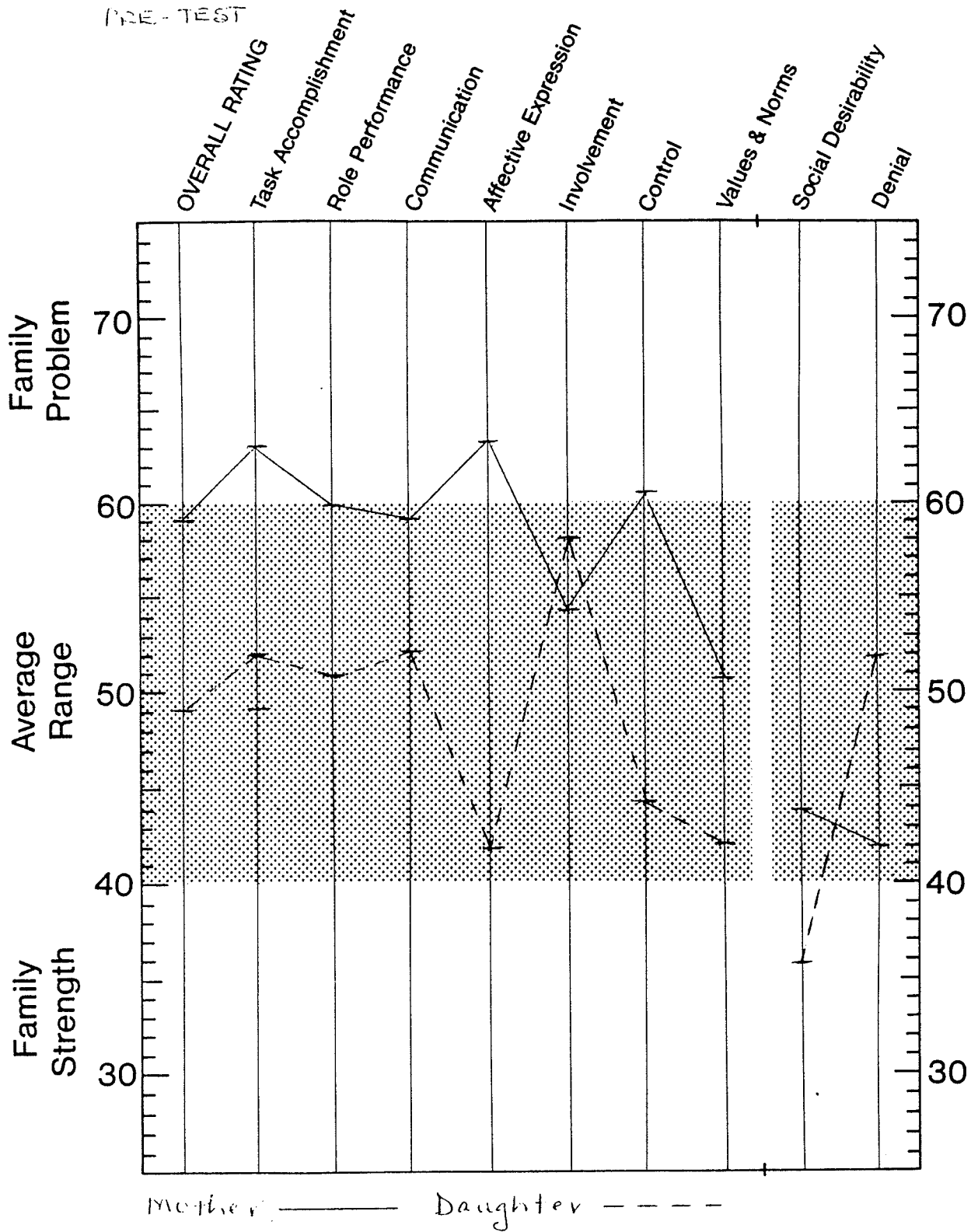
During the first session it became obvious quickly that the death of the maternal grandmother had been a very important event for this family. Daughter C's school performance had deteriorated over the preceding year but the behaviour problems had intensified since the death of her grandmother. Complicating the issue was the fact that a few weeks before the grandmother's death, mother and C had moved into an apartment with a man with whom mother had an ambiguous relationship. Both mother and daughter shared a bedroom except when daughter C slept on the couch.

Mother shed many tears while talking about her mother's death. She reported that her daughter had shed almost none at all. The student emphasized the view that tears were positive. It may feel like one is falling apart but it is the strong who recognize the healing power of tears. Tears are also a tribute to the importance of the attachment to the dead person. Daughter C then shed a few tears, but she continued to care for her mother by handing her tissues. Each was gentle with the other and there was little, if any, evidence of any hierarchy. The student silently hypothesized that this enmeshed mother-daughter relationship had probably been stabilized by the maternal grandmother as the "third leg" of the triangle. Now the family was looking for a replacement.

The student consulted with her team between the first and second sessions. The team noted that mother and daughter C were each other's only biological relatives. They also noted that C's misbehaviour served a number of positive functions for the family system. It helped to

FAMILY ELEVEN
PRE-TEST

FAM GENERAL SCALE



distract mother from her grief over her mother's death. It signalled the lack of an appropriate parent-child hierarchy and the enmeshed nature of the relationship. It enabled daughter C to express her own grief without being sad. It had also provided excitement and peer status and had mobilized help for the family. It was considered that an appropriate metaphor for this family would have been two kittens who had just lost mother cat.

The scoring of the Family Assessment Measure showed that, although mother was more concerned about the family than daughter C, neither was extremely concerned or anxious. Daughter C's scores were all in the average range. Mother's scores were just into the problem range in the areas of task accomplishment, affective expression and control.

Both mother and daughter C reported at the beginning of the second session that things had been better since the first session. Mother announced that she was attending parent-teacher conferences that night and the student asked her if she had ever considered attending them with her daughter. The student then outlined her reasons for preferring that arrangement where the school personnel could praise or complain directly to the child in the parent's presence. The student had found that it had produced better results regarding the child's performance and had removed the parent from the relationship-destroying role as communicator of angry and ill tidings.

The student then explored some of the hierarchy issues by asking what rules mother had set and what the consequences were if the rules were broken. It appeared that daughter C was openly and flagrantly

disobeying her mother's requests/demands that she return home and mother's anger was erupting in physical measures. The student suggested that mother communicate her expectations to her daughter right there in the session. Mother did so but hesitantly and without firmness or conviction. The student pointed that out to her and had her do it again. She tried and the results were a little better but still pretty weak. The student stated that she thought that it would be hard for her daughter to take her seriously since their friendship probably got in the way. Mother agreed that she and her daughter were close and that it was hard to be in charge and make her daughter do what she was supposed to do.

Mother observed that her daughter was tougher with her friends than she had ever been at her age. The student pointed out that the more tough mother was able to be, the softer her daughter would be able to be. Mother also mentioned that her daughter had been involved in two minor sexual abuse incidents with third parties - some fondling perpetrated on her and a friend by older adolescent males in public settings.

The third session was cancelled and the family did not show for the fourth session. Two months later mother telephoned to say that things were getting worse with her daughter. Mother had phoned Child and Family Services who had suggested that she return to therapy with the student. Mother confessed that she had told the agency that the student was "too nice". The student requested clarification by asking to whom was she too nice? To the daughter? Mother agreed. The student pointed

out that she could be as tough as nails to the daughter in a one hour session but what would really count would be whether the mother herself could resist wanting to be "too nice" to her daughter every day. The student gave her an appointment and mother said she would "bring a big stick". The fifth session was cancelled and the family did not show for the sixth session.

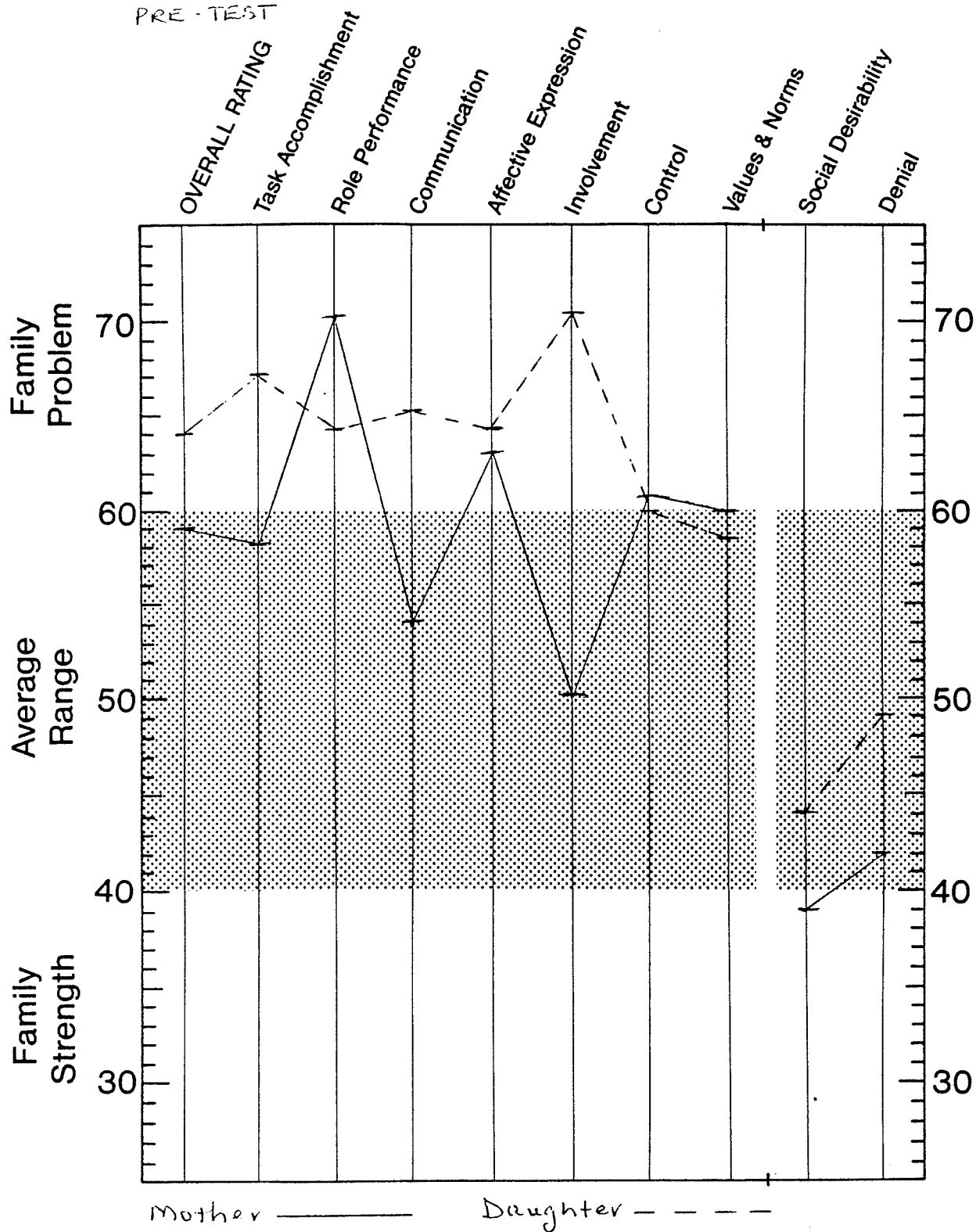
Family Twelve

Family Twelve consisted of mother (33 years), daughter A (13 years), son A (6 years), son Y (4 years) and son Z (2 years). Mother had been married to father for eleven years and separated from him for eighteen months. Daughter A was mother's child from a previous relationship. Although daughter A completed the evaluation forms, she refused to come to the first session so mother came with the three young boys. They were fairly effective at preventing much therapeutic work from being done by being anxious, crying, misbehaving, claiming their mother's attention, etc. The student suggested that mother come back alone and the student would help her understand the normal reactions to separation and divorce.

The student and mother met for six individual sessions. During that time the student heard mother's increasing anger and frustration with her adolescent daughter. The scoring of the Family Assessment Measure had shown that mother and especially, daughter were very concerned about the situation in the family. Daughter A showed elevated scores in the problem area on all scales except control and values and

FAM GENERAL SCALE

FAMILY TWELVE
PRE-TEST



norms which were just in the average range. Mother's overall rating was just in the average range but she scored very high on role performance, affective expression and just on the border between problem and average for the areas of control and values and norms. Both showed somewhat high but still average levels of anxiety.

Mother phoned and made an appointment to bring her daughter in because A had left home without permission and had gone to stay with her aunt for a couple of days. When mother and daughter arrived, they had a friend of A's with them. Daughter A claimed that she had left home because she could not stand living with her mother and her brothers any more. The student asked for specifics and daughter A complained that she had no privacy since, even though she had her own room, her mother and her brothers barged in at any time without warning. The student supported the daughter's desire and need for privacy and pointed out to mother that she should recognize her daughter's growing maturity by extending to her the courtesy that she would give another adult. Mother reluctantly agreed.

Daughter A then claimed that she was seldom called for meals and that those to which she was called were not worth eating. She asked to be able to buy and cook her own food. Although neither mother nor the student could understand how this could work in practice, the student convinced mother to let her daughter try out the arrangement and judge its success or failure after one week.

Mother then requested that the issue of task assignment be addressed. It was agreed that daughter A could choose any three chores

but she had to specify which ones she was choosing and she had to complete them by a specified time. An agreement was also worked out around how often and for what pay daughter A would babysit her young brothers. The student recorded the agreements and mother signed the contract willingly. Daughter A almost balked at signing the contract but finally did so at the urging of her friend who thought it was fair.

Mother and daughter returned ten days later with the three young boys. The session was chaotic since mother and daughter were yelling at each other and mother had had to bring her daughter forcibly to the session. The daughter then sat in a corner and sulked, refusing to speak, while her brothers kept her mother occupied by acting out their anxiety. Mother complained about her daughter being angry, verbally abusive and disrespectful. The student observed that that was probably the only way that she could get her mother's attention and then the student supported mother by asking her how she kept her sanity in the noise and confusion. The student's original remark caught the daughter's attention and she decided to agree with the student's observation.

The student then observed that there was a wide gulf between mother and daughter and that if they could not find a way to reach each other across that gulf, the daughter would sacrifice her welfare in favour of her brothers' and bail out her mother by leaving home. Mother was completely taken aback and asked if that was what she had done for her mother by leaving home at sixteen. The student confirmed it and observed that children are very caring of their parents and that if they

think that they are putting an intolerable burden on their family, they will leave home. If mother and daughter could not find a way to connect in a positive fashion, then the situation would deteriorate to the point where the family would lose at least one of its members, most likely daughter A.

The student asked about the contract they had signed and mother reported that daughter had carried through on almost the entire agreement. The student enthusiastically congratulated the daughter for showing extraordinary maturity by carrying through on an agreement that she had signed reluctantly. The student asked mother if she had thanked her daughter and recognized her achievement. She had not. The student had to prompt mother to do so.

The daughter then said that one of the hardest things about her relationship with her mother was the fact that her mother never took her problems seriously. She made a joke out of them. Mother then proceeded to prove her daughter's point by asking if she was referring to a certain situation and laughing while she said it. Daughter A burst into tears and mother remained immobile. The student asked mother what was stopping her from comforting her daughter. The mother said that she felt manipulated. The student observed that the distress seemed genuine to her and asked what about sadness and vulnerability made mother so uncomfortable. Mother said she did not know. The student urged her to respond to her daughter and mother went to sit with her. Mother and daughter talked softly and cried with mother apologizing, while the student struggled to keep the youngest two children from interrupting.

When they were finished and mother was making another appointment, daughter A took charge of the youngest child, on her own initiative, and comforted him. The student observed to mother how much of an asset she had in her daughter. Mother agreed. The surprised student received a hug from the daughter as she left.

Mother arrived for the next session alone and said that, although she and her daughter had attempted to get some time together, they had failed. The student urged mother to make it a priority. The daughter invited herself to the next session and mother and daughter discussed mother's ambivalence towards the church, daughter's struggles with her peer group, and mother's difficulty in overcoming her anxiety regarding some of her daughter's choices in friends, dress and activities. The student acted as facilitator, clarifier and sometimes director of who should speak and who should listen but mother and daughter were generally able to communicate without much help. Combined individual and family work is continuing.

Family Thirteen

Family Thirteen was composed of mother (34 years), son M (13 years) and daughter M (11 years). Each child had a different father. Mother had not been married to either father but had been married for one year to a man diagnosed as a paranoid schizophrenic. She had been divorced for about seven years from him. Mother referred the family for counselling because there was "violence and rebellion in their home". Son M had kicked daughter M in the stomach. Between the initial phone

call and the first session mother called the student to say that son M's school guidance counsellor and Child Guidance Clinic social worker had both told her that she had to give her son more freedom. She informed the student that if she was planning to tell her that as well, the appointment should be cancelled. The student replied that her approach was always to make sure that parents retained authority in their households so mother agreed to attend.

The three members of the family, a study in contrasts, arrived together for the first session. Mother was of Anglo-Saxon heritage, with very fair skin, hair and blue eyes. The children were obviously of East Indian ethnic/racial origin, with dark hair, skin and eyes. Mother confirmed that both their fathers had been East Indians already married to other women. Neither father was involved in the children's lives. Mother, however had a generous boyfriend who bought expensive gifts for her and her family. Both children, but especially son M, showed curiosity about their fathers but mother became defensive and anxious and closed the subject by saying that the children could search for their fathers when they were older but she would give no further information at that point. Mother had legally changed both her names from her birth name to a name that was not only different, it even reflected completely different ethnic origins altogether.

The family was also a study in emotional contrasts. Although there was a great deal of warmth and caring expressed by family members, there was also extreme anger. Son M was thirteen years old and trying to grow up by differentiating from his mother and becoming physical when she

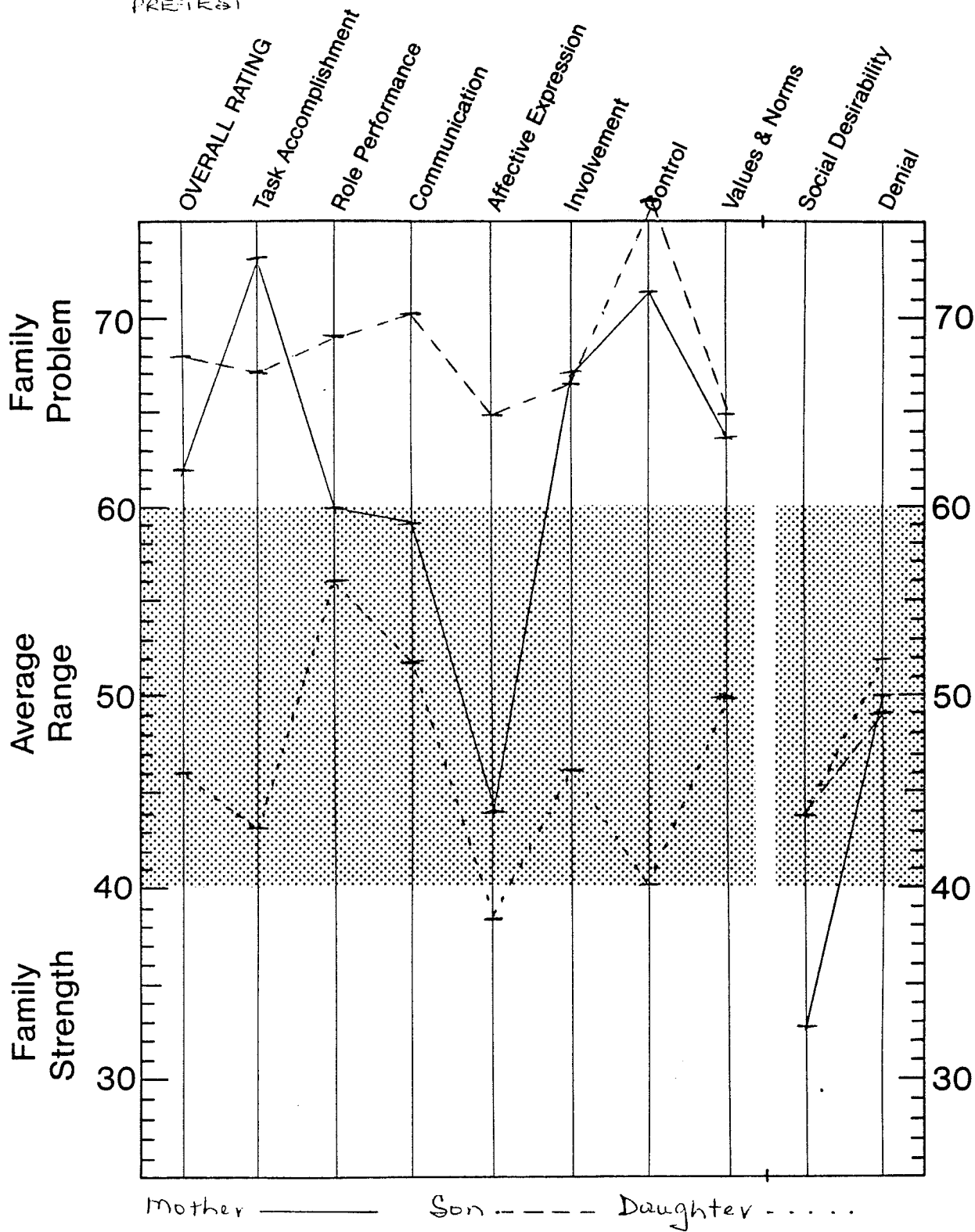
could not hear him. At these times when son M became very angry, both mother and daughter M aligned against him. The student pointed to this dynamic and described it after it occurred in the session.

Although the presenting problem was stated as the violence between brother and sister, it was obvious that son M was seen as the abuser and daughter M as the victim. Mother described two incidents when her son had lashed out, hurting his sister and his mother. Mother explained what was happening by saying that son M's father had been physically abusive and had broken her collar bone on one occasion. The student turned to son M and commented that it must be difficult to make himself heard when he lived in a household with two females. He emphatically agreed.

The children both expressed worry and resentment that their mother was out so much, at least three or four times a week. Daughter M, especially, worried about the danger out on the streets in the dark. The student asked if mother worried about her children being out after dark because of the danger. When she answered in the affirmative, the student noted that there was a mirror effect - her anxiety about them mirrored theirs about her. Although mother agreed to and made another appointment, she was very upset at the idea that she would have to pay, even five dollars per session. She cancelled the scheduled session and did not phone back to re-schedule.

The student scored the evaluation instruments and found that, predictably, daughter M's scores were all in the average range. Mother's overall rating was just into the problem range with task

FAMILY THIRTEEN
PRETEST
FAM GENERAL SCALE



accomplishment being a particular area of concern, along with involvement, control and values are norms. Son M's scores were all in the problem range with communication and control being particular areas of concern. These results confirmed the student's clinical assessment that son M was the scapegoat of the family.

The student consulted with her team who observed that the family system was extremely enmeshed with mother and daughter M aligned against son M. Mother was seen as being very controlling and the opinion was expressed that there was much more happening both in this system and the extended family that could provide a better explanation of the dynamics. The sibling conflict was seen as serving to defuse son M's anger at his mother and his sister by allowing him to vent it in relative safety, on his sister. It also served to connect son M to males outside the household by showing him as a tough, macho male. It may have expressed his loyalty to his father while distracting mother from her problems and fears. Trying to prevent the violence and protect daughter M kept mother closer to home which was reassuring to the children who feared for her safety when she was out drinking.

Family Fourteen

Family Fourteen consisted of mother (37 years), daughter P (17 years), daughter B (12 years), daughter C (5 years) and daughter A (4 years). Mother was married once for six years, to P's father. The other three daughters had different fathers. Mother phoned the Institute and requested counselling because daughter P (17 years) had

been so physically violent that she had been taken out of the home by Child and Family Services. Since being placed she had harassed the family by coming over drunk and mother wanted counselling for the other family members to deal with the stress created by daughter P (17 years).

The four members of the family remaining at home came to the first and only session. There were two themes: the violence perpetrated by daughter P, which was the focus of discussion and the painfully evident inverted hierarchy which was, unfortunately, not. Daughter P had been extremely violent over the preceding five years. She had given one of her mother's friends a concussion by hitting her over the head with a telephone, she had choked her sister B (12 years) to unconsciousness, and, most recently, she had bitten her mother so severely that she required stitches to close the wound. Mother implied that her daughter's violence was really not her fault since her daughter had been in a car accident at the age of eleven and had sustained head injuries. Mother believed that her eldest daughter had undiagnosed brain damage.

The inverted hierarchy was most in evidence by the out of control behaviour of the two youngest children. Daughter B tried to amuse them for a while but it was not until their behaviour got intolerable that mother took some action to deal with it. On reflection, the student should have pointed out the mother's lack of authority in her family but, thinking she would have more chances to do so, she contented herself with observing it. By recommending therapy with only mother and daughter B, the student avoided the hard work of getting mother to take

control of her family and violated mother's definition of the problem as being her younger daughters' distress. The family did not return for further therapy because, mother said, things were going better and her daughters were becoming calmer and less stressed by the situation.

Family Fifteen

Family Fifteen consisted of mother (34 years) and her two daughters L (14 years) and S (4 years). Mother had never been married to the father of both of her daughters, she had just had two separate periods of live-in relationships that produced one daughter for each period. Mother had, however, been married once, between the two live-in relationships with the same man, and she and her husband had been separated for five years. Mother was referred to the Institute for counselling by her local Child and Family Services agency because her daughter L (14 years) was rebellious and running away from home. She wanted help to sort out what to do about the situation.

The first and only session with this family was remarkable for the level of anger and blaming in the room. Daughter L (14 years) was almost uncontrolled and uncontrollable. She was loud, angry, swearing, blaming, belligerent, contemptuous of both her mother and her sister and wrote on herself and everything else within her reach with a ball point pen. Mother presented as angry, feeling helpless to cope with her daughter's behaviour and blaming of L, her maternal grandmother, L's father and L's friends for L's behaviour. She complained about L's treatment of her four year old sister and showed the student three

healing marks on S's back caused by L's treatment of her. Daughter L defended herself and said the marks had been the result of an accident. The student observed that the incident had been previously close to child abuse and asked mother what she would do if there was a further incident. When mother said she did not know, the student said that she should call the police.

Mother complained about L's role modelling angry, violent behaviour to her four year old sister. The student pointed out that mother should have enough impact on a four year old so that L's actions should not affect her. The student encouraged mother to see herself as able to take charge and deal with her daughter L's behaviour.

Mother described her contact with her extended family. She phoned her mother at least once per day and spent much of her time with her sister who lived next door. The maternal grandparents had had much of the responsibility for raising L since she and her mother had returned to live with the maternal grandparents between live-in relationships. The student and the family made another appointment which the family did not keep.

In retrospect, the student believes that, instead of trying to put mother in charge of her family, she should have tried to connect with the real power, daughter L (as the student later did in Family Twelve) by describing the apparent alliance between mother T and the interloper, daughter S. It was apparent that, if there was an authority in the room, it was the daughter. However, the real authority in the family was most likely in the extended family system in which mother was so

enmeshed. It was apparent that mother was very angry at her own parents but it was equally apparent that, because of her dependence on them, she did not dare to express it. The student would likely have joined better with the family by tapping some of the emotion in mother that was being expressed by her daughter.

Family Sixteen

Family Sixteen consisted of mother (37 years), daughter J (16 years) and son S (9 years). Mother had been separated from father for nine months at the time of the referral. Mother phoned the Institute requesting counselling because she had been in an abusive marriage and was finding everything hard to handle. She said that her son was having trouble with the separation and was beginning to be abusive to her.

Although the student made the appointment for the family, mother came to the session alone because she said, there were some things that the student had to be told before counselling began. She then related the horrific story of a marriage that had been mentally, physically, emotionally and sexually abusive. She had considered separation when her husband was in the hospital getting psychiatric treatment. But she had decided to take him back even though he had been diagnosed as being psychotic. Then the year before her daughter J (16 years) had disclosed that her stepfather had sexually abused her from the age of eleven years. Mother chose to believe her daughter and separate from her husband. However, she had chosen to keep the reason for the separation from son S (nine years).

Three months previously, father had assaulted mother during an argument and had broken her jaw and knocked out three of her teeth. Although she cried almost continuously during the session, there was no evidence of anger. Mother said that her daughter J had declared that she thought that when she left home, her mother would return to her husband.

The student noted that in her original request for counselling, mother had said that son S was having difficulty with the separation. The student said that that was hardly surprising since he was not aware of the real reason his father had had to leave the home. The student recommended that mother bring the family in so that the issues could be discussed openly. Mother became quite agitated and said that what she really wanted was someone to assist her daughter J by counselling her. The student explained the importance of open communication in the family and offered her assistance in that direction. Mother refused, saying that she felt that her daughter J was the one who really needed help. The student pointed out that J qualified for free help from Child Guidance Clinic or Child and Family Services because of the issues involved.

In retrospect, it might have been more helpful to mother to have helped her examine her reasons for not wanting her son informed about what his father had done to his sister. However, the reality was that this family still required crisis intervention, not therapy, and mother was refusing to make use of the services available, such as the Evolve program. It was obvious that daughter J was the authority in the family

and that she had done what she could to protect her mother and her brother.

Family Seventeen

Family Seventeen consisted of mother (33 years) and daughter C (14 years), and S (8 years). Mother had never married and her daughters had different fathers. She phoned the Institute requesting counselling because C (14 years) was questioning her identity, asking about her father, and had packed her bags and was ready to leave. Mother said that she had never been able to communicate with her daughter because she was conceived in anger.

The student made two appointments with the family at the time of the original referral but mother was unable to get C to come to a session so both appointments were cancelled at the last minute. Mother then phoned the Institute four months later and requested an appointment because daughter C was in foster care.

Mother and daughter S (8 years) came in for the session. Mother spent the first half of the session describing her daughter C's change from a "sweet little girl" to an angry, balky, sullen, resentful, violent adolescent about eighteen months previously. Mother, who was a Christian fundamentalist, said that she was not sure of the reason for the change but she thought that it might be due to demon possession or rock music. Mother reported that daughter C had assaulted her mother, wrecked the house, ruined many of the household goods and had threatened her sister twice with a knife. Mother admitted that the house was much

more peaceful without her daughter but stated that she planned to request that her daughter come home for visits so that she would not lose her low-rental townhouse.

Mother then talked about her family of origin. Her father had been alcoholic and physically abusive and her mother emotionally abusive. The family moved constantly. Mother had become pregnant with her daughter C as a result of a rape at age seventeen. She considered both abortion and adoption but her father had threatened to kill her if she relinquished the child for adoption. The maternal grandparents had provided much of the care daughter C had received, especially when mother had had severe health problems around the birth of daughter S (8 years). mother described an out of body experience that she had had when she had died and been resuscitated on the delivery table. Thus while daughter C was connected with the anger and pain of a rape, daughter S was connected with a miraculous conversion experience.

Mother said that she wanted to bring daughter C in for family therapy and that she would make an appointment and request that the worker bring C in for the session. The student agreed but mother cancelled the appointment two weeks later saying that she did not have time for counselling at that time. The most effective intervention that the student was able to use with this woman was about lying. She said that she had lied to her father about some bruises her daughter had given her and the student had the impression that this woman altered the truth frequently to allow for her perceived vulnerabilities. The student talked to her about the commandment regarding bearing false witness and

pointed out that God had had good reason for including that one since lying so often got the one lying or others into trouble.

Family Eighteen

Family Eighteen consisted of mother (31 years) and daughter M (14 years). Mother had been married and divorced once but not to the father of her daughter M. Mother was a dry alcoholic who had been sober for seven years. Mother G phoned the Institute and requested counselling because her daughter was on the run for the second time and would not come home. By the time the student received the intake and scheduled the first interview, the crisis had passed and things were going well. Both mother and daughter came in for one appointment. Mother explained that she had decided to keep the appointment because she felt she and her daughter should talk over what had happened with an impartial third party.

Daughter M explained her runs by saying that her mother would not let her do anything, or go anywhere without interrogating her endlessly and wanting to know everything about her activities. She also felt that she had an unrealistic curfew. Mother reported that the problems had started as her daughter entered adolescence but she felt that she had always been controlling of her daughter since she had been sexually abused at age eight by one of mother's boyfriends.

The student pointed out that it sounded as if the two of them had been in a relationship where the more mother controlled, the more daughter rebelled and the more daughter rebelled, the more mother

controlled. The student asked how they had solved the problem. Mother reported that during her daughter's second run, she had realized that the problem was serious and had talked to her sisters who pointed out her need for control to her. Mother was then able to hear her daughter and decided to change her style of parenting. The student stated that it sounded as if mother had projected her own abuse experiences as an adolescent on to her daughter. The student also noted that the daughter's rebellion had served notice that, since she was growing up and maturing, mother's over-control was no longer functional or necessary. The student cautioned them against making too many changes too fast, predicted that the situation would not remain as smooth as in the present (they were on a honeymoon) and agreed to be available to them if a breakdown occurred. They have not contacted the student for further service.

Learning From Briefer Therapeutic Contacts

The additional families counselled, as with the longer-term contacts, exhibited many of the dynamics outlined in the literature review. All families showed strong, enmeshed relationships between parents and children to the point where the single-mother had difficulty recognizing the changing needs of her children as they negotiated the adolescent developmental stage (Literature Review, p.10, 25-26). In families 15 and 17, problems had surfaced because the single-parent had failed to become independent of her parents (Literature Review, p. 10, 39-40). Families 10 and 13 had difficulty with mothers and sons trying

to understand the difference between legitimate authority and controlling behaviour (Literature Review, p. 17). The mothers in families 9, 11, 14, 15, 16 and 17 had difficulty claiming their authority and thus a child had taken on the responsibility with the resulting inverted hierarchy (Literature Review, p. 18, 40-41).

As emphasized in the literature review, when things go wrong in the single-parent family the children show the symptoms and the children in these families were good examples of that principle. The adolescents were angry at parental incompetence, whether connected to the separation and divorce or not, in families 9, 12, 13, 14, 15, 17 and 18 (Literature Review, p. 27). In many of these families, specifically 9, 11, 12, 14 and 16, the adolescent had assumed the role as substitute spouse (Literature Review, p. 28). Some adolescents (those in families 12 and 18) showed the positive, maturing effects of the assumption of more responsibility (Literature Review, p. 29) but in two families (11 and 13), the expected worry of the children about the mother's welfare was excessive (Literature Review, p. 22). One single-parent had to grieve the loss of her marital relationship nine years later (Literature Review, p. 42).

Thus, the experience of working with the families was an interesting and informative process, part of which was observing and experiencing the dynamics predicted in the literature review. The student not only became trained in how to handle families but also educated in what issues to expect and how they present themselves in families.

IV. Conclusion and Educational Benefits of the Student

This practicum has provided a very rich learning experience for the student on several levels. The student increased and enhanced her knowledge of single-parent families, of systemic family therapy and therapeutic techniques, and of herself in relationship with these clients.

Single-parent families are difficult candidates for therapy. Their most common characteristics of being under-resourced in terms of time, energy, and money plus the tendency to hierarchical inversion and confusion mean that it is a challenge to get them into therapy and to keep them there until a logical conclusion is reached. The children often lack motivation and do not see themselves as the problem. Therefore, their resistance is often strong and effective in a family where mother has difficulty claiming her authority. The result was that the student observed a higher proportion of cancellations and "no shows" in this group than in any other group she counselled.

The student saw the overburdened nature of the single-parent family form reflected in the fact that five of the families came in for counselling while the mother was unemployed or on sick leave from work. The student hypothesized that the mother then had the time and energy, either to notice that things were not going well and to do something about it or, perhaps, to become over-involved in and over-concerned about her children's affairs. This may be an indication that, under ordinary circumstances, the single-parent has neither the time nor the

energy to address the emotional needs of the children (Families 1, 8, 12).

The single-parent families seen were more different from each other than the same. In general the issues around the separation and divorce were minor and fairly easily resolved in a maximum of three or four sessions. The separation and divorce seemed to be more important in bringing the existing weaknesses and dysfunctions in the family to light. These more important and more difficult issues were different for each family.

Most of the issues dealt with in therapy were issues that the family would have had in some form even if still intact. Difficulty communicating on an emotional level can occur in any family form (families 1 and 12) as can unresolved mourning (Families 3, 4, 5, 10, 11). Alcoholic dynamics such as need for control and over- and under-functioning are common as are an inability to trust and difficulty with boundaries, which are features connected with physical and sexual abuse. Even inverted hierarchy, which is a characteristic of many single-parent families and which the student found to be one of the most difficult dynamics to reverse, often had its roots in the intact family. It can occur when both parents are depressed and unable to take charge, as in Family 4, or where the father kept control over both mother and children with physically and emotionally abusive behaviour as in Family 3.

In families with considerable evidence of inverted hierarchy, at least one of the children showed extreme anger. Sometimes the anger was focused inward in the form of depression, but more often it was focused

outward in the form of physical violence (families 5, 9, 14, 15, 17). The student wondered if, as in Families 15 and 17, early and considerable involvement in the parenting of the children by the maternal grandparents contributed to the problem by weakening the bonding between the never-married single-mother and her child.

In situations where the parents are just separated, an inverted hierarchy may be an invitation to have the father return to the family to take charge, although he may or may not be inclined to do so (Families 3 and 4). Entering therapy may be an attempt to have the therapist take charge, identify and treat the problems and care for family members (Families 4, 5, 9, 16).

In general, families with acknowledged or implied severe physical and sexual abuse histories were most ambivalent about therapy and were some of the most difficult families with which to join, earn their trust and work on a continuing basis (Families 9, 14, 15, 16, 17). This experience confirmed Gurman and Kniskern's (1981) view that the more dysfunctional the family, the less effective is therapy. Perhaps simply having the family only in the therapy room creates too narrow a focus for these more troubled families. The student had the opportunity to become informed about the power of the network approach where the therapeutic effort includes extended family, friends and representatives of all agencies involved with the family. The student hypothesizes that this more comprehensive approach to deeply dysfunctional families might yield more gratifying results.

Developmental issues seemed to be the most amenable to treatment. Informing the parent about the changing needs of children as they enter adolescent was quite effective. The student noticed that, in this practicum experience, a developmental issue where the parent was having difficulty recognizing and responding to children's changing needs for responsibility and independence indicated the presence of alcoholism in the intact family or the single-parent herself (Families 2, 5, 6, 8, 10, 18). Therefore, the need to control one's adolescent children may have originated in the alcoholic dynamics of the intact family and, possibly, the family of origin.

The student learned and practiced several therapeutic orientations and techniques in the systemic school. As outlined in the proposal, the student primarily used direct, structural methods such as questions and suggestions around the presenting issues, e.g. task assignment, developmental changes and needs, features showing family hierarchy, etc. The student also observed and commented upon the interaction she observed in the session and, when appropriate, asked the family to experiment with alternate ways of relating. The student then made observations and coached the family on how to do it differently or encouraged them to continue the new way. This technique was used particularly with hierarchical confusion or inversion.

The student also employed a few strategic maneuvers from time to time by predicting failure, relapse or abandonment of therapy. Prescribing caution was also used when a family or individual in that family was particularly mistrustful. The student reframed behaviour

from bad to helpful to the family, protective of the family, or, most often, normal for an adolescent testing out his or her abilities to move from childhood to adulthood. The student also tried some psychodramatic techniques with varying success. The sculpturing did not have the impact on Family 5 that the student would have hoped but distributing the slime as a metaphor for sexual abuse was particularly helpful, probably because it was an extension of an idea presented by Family 3 itself. In general, the student found that her techniques were most effective when she was being honest and straightforward with the family, e.g. prescribing caution when the student really believed that the family should be careful to protect its vulnerabilities until it felt safe to reveal them.

Although, in the proposal, the student decided to define the problem in behavioural terms and work with the family to its resolution, in practice with this family form, it was discovered that some preferred to identify the problem and to contract for a specified number of sessions because of concerns regarding the time, money and energy needed to come for therapy. The student found that this arrangement actually worked very well because the time pressure meant that both student and family went to work quickly on the pertinent issues and tried to get them resolved before the contract expired. The student had planned to collect the information for the eco-map and the genogram during the first two sessions of therapy but she found that she had to be more flexible in order to allow for the family's anxiety about the presenting problem. If the anxiety was high, those questions were often seen as

irrelevant and the student found it much more productive to gather the information over a number of sessions while exploring the context of the family and its problems.

In particularly resistant families, the question was found to be more important than the answer if the answers tended to lead to arguments. Sometimes just asking the question or making a casual comment and moving on seemed to make the family members reflect more on their own process than on disqualifying the therapist.

The student found that, if the real presenting problem was in the room, it was obvious to her and she could intervene fairly quickly to address it. However, if at least part of the real issue was elsewhere, i.e. in the family of origin (Families 4, 6, 8, 10, 15), it was very difficult to work productively with the people in the session. The student also found that if the energy in the room was low and family members were looking bored, she was focused on the wrong issue. When the right issue was tapped, everyone's interest was piqued and the tension increased.

Some families appreciated the evaluation instruments (Family Assessment Measure and the Family Problem Checklist) more than others. The student observed that the results of the instruments were interesting and seemed more useful with more educated, higher status clients. Other families seemed to regard them as an intellectual exercise which, by its nature, excluded them. The student felt that she could have used the results of the instruments more extensively in her

clinical work and would recommend that students receive training in how to use evaluation instruments more productively in this area.

The student believes that, if one is open, every learning experience is a potential source of knowledge about oneself. This practicum experience was a confirmation of that belief. The student was able to identify personal issues that impeded her ability to work objectively and effectively with clients and therefore became more self-aware and gained more choices and options in working with families.

The experience with Family E highlighted the student's anxiety about having clients walk away angry. In a way it was a break through that anxiety since, for the first time, the student was able to persist with an intervention that was unpopular with the client even though she knew that the clients' abandoning therapy was a distinct probability. But, instead of placating, she was able to continue to press forward in the clients' best interest.

In the process of recording the course of therapy with Family D, the student became increasingly aware of and anxious about her inability to confront this family with its own patterns. At first she believed that she may have been intimidated by the physical size of the sons in the family. However, she eventually realized that it was not their size, it was the force of their disqualification of themselves and others that was intimidating. She was then able to identify the source of the fear and anxiety as being in her own family of origin issues. Therefore, the disqualification was particularly powerful for her and she retreated to the safety of the silent observer role, which was

neither helpful to nor effective with the family. The student believes that identifying this dynamic within herself will empower her to overcome it in the future.

The student learned that she has a talent for allowing conflict to happen and to proceed without becoming anxious and eager to intervene prematurely. This talent proved to be an asset in working with a family for whom conflict was an accepted part of life. The student was able to allow the family to argue and fight in an environment which was safe from physical violence. Once the family had had their say to each other, the student was able to use the observations to make interventions that were very effective with the family. The talent also proved to be a liability in that the student allowed an adolescent to continue to express hostility rather than finding the real issue or theme that was present under the anger. The student believes that she has learned to identify with which families to use the talent because, in a more recent case, she allowed the dynamics to continue only long enough to use what was happening in an intervention to address the issue under the anger in a direct and effective way.

The student's most significant learning experience is an ongoing one. It is difficult but very important for females to learn to claim their personal power and authority and how to use it. It is particularly important for females who want to intervene effectively in troubled families. Most women find it much easier to be nurturing and supportive than to be confrontive and the student is no exception. However, all these qualities are important if one expects to see results

from one's efforts with families. The growth experience is in learning when to use one's ability to support and when to use one's ability to confront and how to combine the two. As the practicum experience progressed, the student became increasingly aware of feeling powerful and confident in dealing with families. She also noticed that she became more successful at joining with families and holding them in therapy, at least until the important issues were addressed. There was a real sense of satisfaction achieved in this process. The student is confident that her skills and sense of personal power will continue to increase as she works in the field.

The practicum experience as a whole has been an extremely rewarding one for this student. She has felt supported and validated by her advisor, her committee and her supervisors. The research and practice enhanced her knowledge base and her skill level and the writing consolidated the learning as she identified other interventions she could have tried with perhaps better results. Many of these alternatives have been noted and described in the recording. The student considers that the research, practice and writing of this practicum to be a peak learning experience for her and thanks all who, whether they knew it or not, contributed with their support, encouragement, knowledge and cooperation.

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VI. Appendix 1

LIVE SESSION PRESENTATION AND REVIEW

THERAPIST _____ SUPERVISOR _____

DATE _____ CASE NUMBER _____ SESSION NUMBER _____ HISTORIAN _____

PRE-SESSION HYPOTHESIS

TEAM PROCESS

INTERVIEW PLAN AND GOAL(S)

MID SESSION: REVIEW AND HYPOTHESIS

MAIN INTERVENTION PRESENTED:

TEAM PROCESS

POST SESSION ASSESSMENT/HYPOTHESIS

PREDICTIONS/RECOMMENDATIONS (For Family and Team)

VII. Appendix 2



Alcoholism and Drug

Addiction Research Foundation

Fondation de la recherche sur la toxicomanie

Central Office
 33 Russell Street
 Toronto, Ontario
 Canada M5S 2S1
 (416) 595-6000

November 14, 1988

Linda D. Gibson

Dear Linda:

Thank you for your recent letter and interest in the Family Assessment Measure (FAM III). I have sent a "kit" which includes copies of FAM, an administration and interpretation guide, as well as some related articles. We charge a nominal fee of \$5.00 for this kit to cover our printing costs.

You have permission to use FAM in your thesis research. Enclosed also is a sheet which describes how you may obtain further copies of the test booklets and answer sheets.

Please let me know if I can help you further. All the best with your research.

Sincerely,

Lisa Johnson
 FAM Coordinator

LJ/rs

Encl.

VIII. Appendix 3

F A M Family A Assessment M Measure

GENERAL SCALE

Directions

On the following pages you will find 50 statements about your family as a whole. Please read each statement carefully and decide how well the statement describes your family. Then, make your response beside the statement number on the separate answer sheet.

If you STRONGLY AGREE with the statement then circle the letter "a" beside the item number; if you AGREE with the statement then circle the letter "b".

If you DISAGREE with the statement then circle the letter "c"; if you STRONGLY DISAGREE with the statement then circle the letter "d".

Please circle only one letter (response) for each statement. Answer every statement, even if you are not completely sure of your answer.

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Jack Santa-Barbara

Please do not write on this page.
Circle your response on the answer sheet.

1. We spend too much time arguing about what our problems are.
2. Family duties are fairly shared.
3. When I ask someone to explain what they mean, I get a straight answer.
4. When someone in our family is upset, we don't know if they are angry, sad, scared or what.
5. We are as well adjusted as any family could possibly be.
6. You don't get a chance to be an individual in our family.
7. When I ask why we have certain rules, I don't get a good answer.
8. We have the same views on what is right and wrong.
9. I don't see how any family could get along better than ours.
10. Some days we are more easily annoyed than on others.
11. When problems come up, we try different ways of solving them.
12. My family expects me to do more than my share.
13. We argue about who said what in our family.
14. We tell each other about things that bother us.
15. My family could be happier than it is.
16. We feel loved in our family.
17. When you do something wrong in our family, you don't know what to expect.
18. It's hard to tell what the rules are in our family.
19. I don't think any family could possibly be happier than mine.
20. Sometimes we are unfair to each other.
21. We never let things pile up until they are more than we can handle.
22. We agree about who should do what in our family.
23. I never know what's going on in our family.
24. I can let my family know what is bothering me.
25. We never get angry in our family.

Please do not write on this page.
Circle your response on the answer sheet.

26. *My family tries to run my life.*
27. *If we do something wrong, we don't get a chance to explain.*
28. *We argue about how much freedom we should have to make our own decisions.*
29. *My family and I understand each other completely.*
30. *We sometimes hurt each others feelings.*
31. *When things aren't going well it takes too long to work them out.*
32. *We can't rely on family members to do their part.*
33. *We take the time to listen to each other.*
34. *When someone is upset, we don't find out until much later.*
35. *Sometimes we avoid each other.*
36. *We feel close to each other.*
37. *Punishments are fair in our family.*
38. *The rules in our family don't make sense.*
39. *Some things about my family don't entirely please me.*
40. *We never get upset with each other.*
41. *We deal with our problems even when they're serious.*
42. *One family member always tries to be the centre of attention.*
43. *My family lets me have my say, even if they disagree.*
44. *When our family gets upset, we take too long to get over it.*
45. *We always admit our mistakes without trying to hide anything.*
46. *We don't really trust each other.*
47. *We hardly ever do what is expected of us without being told.*
48. *We are free to say what we think in our family.*
49. *My family is not a perfect success.*
50. *We have never let down another family member in any way.*

FAM GENERAL SCALE

Date _____
 Name _____
 Age _____ years
 Sex: M F

Your Family Position

1. Father/Husband 4. Grandparent
 2. Mother/Wife 5. Other, _____
 3. Child Specify _____

- | | | | | |
|---|--|--|--|--|
| 1. a = strongly agree
b = agree
c = disagree
d = strongly disagree | 11. a = strongly agree
b = agree
c = disagree
d = strongly disagree | 21. a = strongly agree
b = agree
c = disagree
d = strongly disagree | 31. a = strongly agree
b = agree
c = disagree
d = strongly disagree | 41. a = strongly agree
b = agree
c = disagree
d = strongly disagree |
| 2. a b c d | 12. a b c d | 22. a b c d | 32. a b c d | 42. a b c d |
| 3. a b c d | 13. a b c d | 23. a b c d | 33. a b c d | 43. a b c d |
| 4. a b c d | 14. a b c d | 24. a b c d | 34. a b c d | 44. a b c d |
| 5. a b c d | 15. a b c d | 25. a b c d | 35. a b c d | 45. a b c d |
| 6. a b c d | 16. a b c d | 26. a b c d | 36. a b c d | 46. a b c d |
| 7. a b c d | 17. a b c d | 27. a b c d | 37. a b c d | 47. a b c d |
| 8. a b c d | 18. a b c d | 28. a b c d | 38. a b c d | 48. a b c d |
| 9. a b c d | 19. a b c d | 29. a b c d | 39. a b c d | 49. a b c d |
| 10. a b c d | 20. a b c d | 30. a b c d | 40. a b c d | 50. a b c d |

FAM GENERAL SCALE

Date _____
 Name _____
 Age _____ years
 Sex: M F

Your Family Position

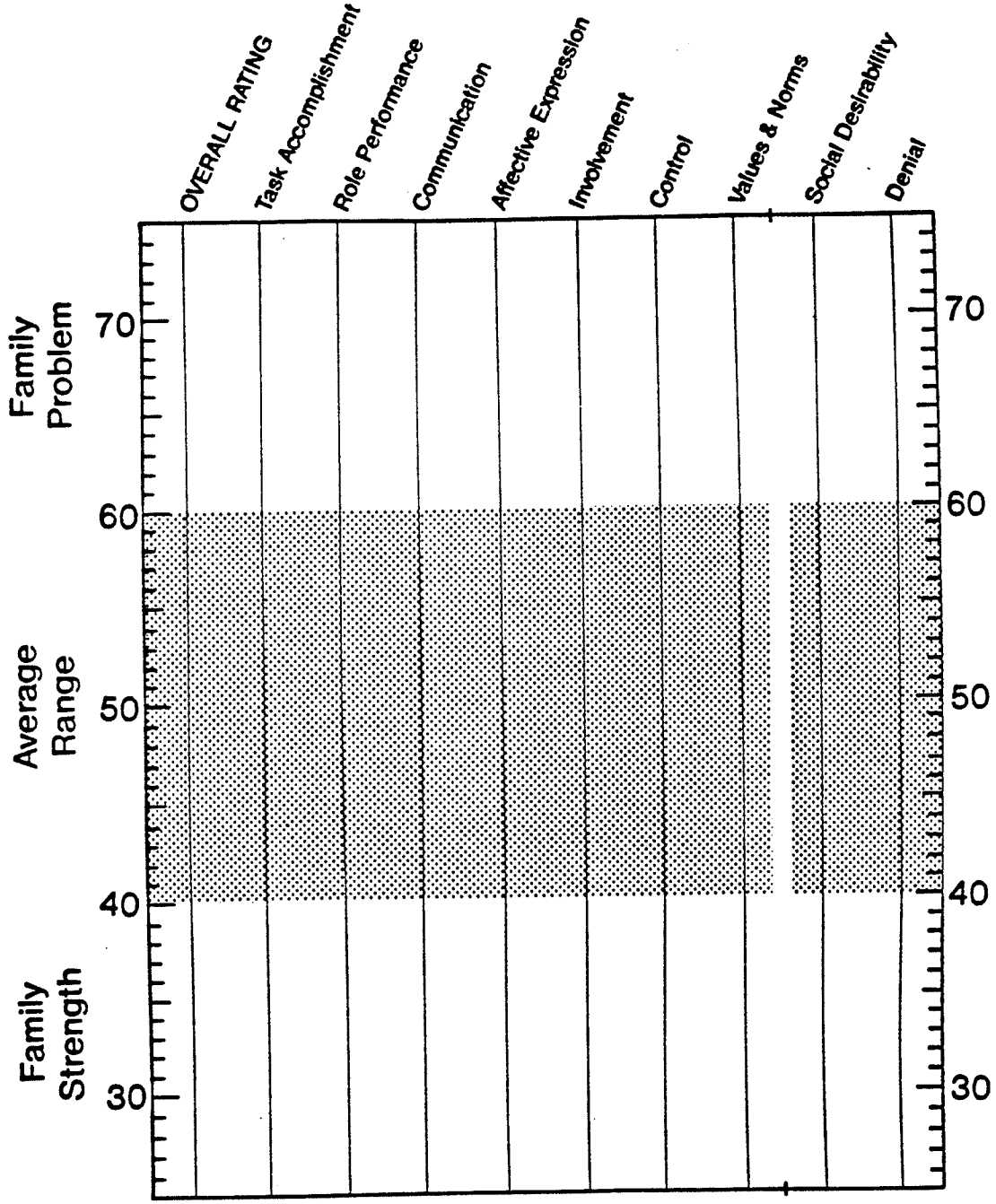
1. Father/Husband 4. Grandparent
 2. Mother/Wife 5. Other, _____
 3. Child Specify _____

Note: This instrument is still under development and may not be used without written permission from the authors.

16.	0	1	2	3	20.	0	1	2	3	30.	0	1	2	3	40.	3	2	1	0	50.	3	2	1	0
9.	3	2	1	0	19.	3	2	1	0	29.	3	2	1	0	39.	0	1	2	3	49.	0	1	2	3
8.	0	1	2	3	18.	3	2	1	0	28.	3	2	1	0	38.	3	2	1	0	48.	0	1	2	3
7.	3	2	1	0	17.	3	2	1	0	27.	3	2	1	0	37.	0	1	2	3	47.	3	2	1	0
6.	3	2	1	0	16.	0	1	2	3	26.	3	2	1	0	36.	0	1	2	3	46.	3	2	1	0
5.	3	2	1	0	15.	0	1	2	3	25.	3	2	1	0	35.	0	1	2	3	45.	3	2	1	0
4.	3	2	1	0	14.	0	1	2	3	24.	0	1	2	3	34.	3	2	1	0	44.	3	2	1	0
3.	0	1	2	3	13.	3	2	1	0	23.	3	2	1	0	33.	0	1	2	3	43.	0	1	2	3
2.	0	1	2	3	12.	3	2	1	0	22.	0	1	2	3	32.	3	2	1	0	42.	3	2	1	0
1.	3	2	1	0	11.	0	1	2	3	21.	0	1	2	3	31.	3	2	1	0	41.	0	1	2	3

D	SI	VI	C	INV	AE	COM	RP TA

FAM GENERAL SCALE



IX. Appendix 4

FAMILY PROBLEM CHECKLIST

Below is a list of family concerns. Indicate how satisfied you are with how your family is doing NOW in each area. Put a check (x) in the box that shows your feelings about each area.

	Very Dis-satisfied	Dis-satisfied	In Between	Satisfied	Very Satisfied
1. Showing good feelings (joy, happiness, pleasure, etc.)					
2. Sharing feelings like anger, sadness, hurt, etc.					
3. Sharing problems with the family					
4. Making sensible rules					
5. Being able to discuss what is right and wrong					
6. Sharing of responsibilities					
7. Handling anger and frustration					
8. Dealing with matters concerning sex					
9. Proper use of alcohol, drugs					
10. Use of discipline					
11. Use of physical force					
12. The amount of independence you have in the family					
13. Making contact with friends, relatives, church, etc.					
14. Relationship between parents					
15. Relationship between children					
16. Relationship between parents and children					
17. Time family members spend together					
18. Situation at work or school					
19. Family finances					
20. Housing Situation					
21. Overall satisfaction with my family					
Make the last rating for yourself:					
22. Feelings good about myself					

NAME: _____

Date: _____

X. Appendix 5

CASE SUMMARY

THERAPIST _____ SUPERVISOR _____

DATE _____ CASE NUMBER _____ SESSION NUMBER _____

(P) PRESENTING PROBLEM

(O) ORGANIZATION OF THE SYSTEM: Genogram and Structural Map

(E) EXPLANATION: Offered by Client(s)

(T) TIME: On-set, Sequence and Relevant History

(f) INTERACTIONS: Systemic Sequences, Attempted Solutions

(c) COALITIONS: Hierarchy Within and Between Generations

(S) SYSTEMIC FUNCTION: Positive Functions Served by Symptom(s)

SPIRITUAL, EXISTENTIAL AND VALUES ISSUES:

COUNSELLING GOALS (Client's and Therapist's)

A DESCRIPTIVE METAPHOR:

FURTHER RESEARCH OR CASE MANAGEMENT CONCERNS: