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**TRACING THE STORYLINE FROM PARENT TO CHILD
INSIGHTS INTO IMPROVED FAMILY THERAPY**

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From Childhood

The darkness in the room was like enormous riches;
there the child was sitting, wonderfully alone.

And when the mother entered, as if in a dream
a glass quaked in the silent china closet.

She felt it, how the room was betraying her,
and kissed her child, saying, "Are you here?"

Then both looked toward the piano in fear,
for often at evening they would have a song
in which the child found himself strangely caught.

He sat stone still. His great gaze hung
upon her hand, which, totally bowed down by the ring,
walked over the white keys
as if plowing through deep drifts of snow.

Rainier Maria Rilke, translated by R. Bly

ABSTRACT

The effects of the application of attachment theory and classification measurements to family therapy was examined in order to judge its contribution to family therapy. A narrative case study analysis of attachment relationships was conducted of the first three counselling sessions with five solo mothers of European-origin seeking assistance with their children's behaviour.

The Adult Attachment Interview (George, Kaplan & Main, 1985) was a vital component of the application of adult attachment concepts within a family therapy setting. The results of the interview formed the basis for assessment of intergenerational transmission of attachment relationships, and the client's ability or readiness to be in a therapeutic relationship.

This approach helped the therapist better understand the clients' conceptualisation of intimate relationships in order to more accurately address dysfunctional habits of relating.

The findings suggest that the integration of attachment theory into traditional family therapy methods can greatly enhance the therapist's understanding of historical causes of the presenting problem. This enriched understanding can point to more comprehensive therapeutic interventions, which will contribute to fundamental and lasting improvements in family relations.

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CHAPTER ONE

INTRODUCTION

Four years ago, families affected by abuse could begin to access free counselling at the centre where I work as a family therapist. The majority of these families are headed by females, many of whom have recently freed themselves from an abusive relationship with their children's father. Many have also experienced abuse in their families of origin. Since offering the free service, the proportion of our clientele who are coping with abuse has increased dramatically, requiring a re-examination of our therapeutic approach. Our centre is experimenting with integrating an attachment approach with family systems therapy, assuming that it will better address the underlying problems our clients face. Before the centre fully commits itself to this new direction, however, a study is warranted to assess its merits on a sample of our clientele, which is the purpose of this research.

Traditionally the counselling centre has used family therapy models based on systemic, social constructionist, solution-focused (de Shazer, 1982, 1985, 1991; de Shazer & Lipchik, 1986; Haley 1980, 1990; White 1989, 1995) and cognitive-behavioural (Beck, 1976; Kendall, 1992) techniques. These models have focused assessment on the present family configuration, beliefs and constructions about the problem, and the resulting behaviours. Presenting problems have been analysed with a systemic approach, whereas exploration into past generations of family history was discouraged as pursuit of a problem-saturated red herring (Haley, 1980).

Behavioural and solution-focused therapies have appeared to be of limited value at our agency with clients with serious problems stemming from abuse. In seeking answers for a more appropriate intervention, we looked to attachment theory as a possible framework of analysis, because attachment relationships are known to suffer in families where there has been abuse (Crittenden & Ainsworth, 1989; Parker, 1994). Effective therapeutic interventions aimed at healing attachment between parents and children are believed to lead towards greater mental health and resilience in times of stress (Bowlby, 1987; Fonagy et al., 1995). Life stressors, such as poverty, and unstable housing, often accompany families affected by abuse, compounding their inability to cope with the challenge of parenting. An interactional model which encompasses attachment relationship, life events, racism, and home environment has been used in several studies (e.g. Lamb, 1978; Main & Weston, 1981, both cited in Routh & Bernholtz, 1991; Erickson, Sroufe, & Egeland, 1985; Sroufe, Egeland & Kreutzer, 1990; Lewis & Feiring, 1991).

John Bowlby's (1969/1982, 1973) theory of attachment, or how humans form and maintain family relationships, has greatly influenced counselling approaches since he

began his work in post-war England. Bowlby was commissioned by the World Health Organisation (WHO) to research the mental health of post-war homeless children. He studied how mothers and infants interacted, rather than the father-child relationship, as women were conceptualised as the primary caregivers even more so in that era.¹ From Bowlby's WHO report and his later work at the psychoanalytic-based Tavistock Clinic in London, he developed the conviction that the child-mother relationship should be preserved, even in the case of neglectful mothers. Maternal deprivation, he asserted, put children at increased risk of physical and mental illness.

The theory of internal working models was developed by Bowlby to help explain how destructive parenting behaviours develop and how they are transferred to the next generation. Relationship problems, such as spouse abuse or dysfunctional parenting, are believed to be rooted in the individual's internal working models of self and other. To facilitate change in family relations, the family therapist needs to know how the clients conceptualise intimate relationships in order to help them change dysfunctional habits of relating.

Bowlby has provided the theory; contemporary clinicians are currently seeking ways to apply it to their own unique populations. Applying attachment concepts to family therapy is relatively new (Byng-Hall, 1991, 1995; Friedrich, 1995; Cowan, Cowan, Cohn & Pearson, 1996; Radojevic, 1996). No research of which the writer is aware has been conducted in Aotearoa/New Zealand exploring the application of attachment theory to family therapy. It is hoped that this case study of attachment discourse will provide an impetus for further research of its kind in New Zealand.

Case studies can provide examples of narrative that can help the therapist 1) understand and better match the relating needs of the client in order to strengthen the therapeutic goal of mediating the effects of insecure attachment in adults and children; 2) conceptualise an individually-tailored behaviour management plan for the children which encompasses the family's attachment patterns.

With narrative examples of the client's attachment pattern, it is hoped that therapists will be better able to mediate change in the individual and in the family system. This study thus proposes that an assessment of a mother's state-of-mind regarding attachment can illuminate the therapeutic process.

Bowlby (1949: 123) was one of the first to recognise that children's problems must be treated within the context of their families:

Child guidance is thus concerned not with children but with the total family structure of the child who is brought for treatment. . . the problem usually lies in the relationships between him and the members of his (sic) family.

Half a century later, adult attachment researcher George (1996: 411) echoed Bowlby's words:

In sum, professionals in psychiatry, psychology, sociology and law were all beginning to emphasise that abuse was a phenomenon that occurred in the context of relationships (author's emphasis).

1 In recognition of male and female caregivers, with a biological or non-biological relationship to the child, in this thesis the terms "caregiver" and parent will be used largely interchangeably.