

THE ESSENTIALS OF

# *Family Therapy*



MICHAEL P. NICHOLS

WITH RICHARD C. SCHWARTZ

# The Essentials of Family Therapy

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## Foreword

**T**he people training in family therapy now and in the years to come owe a debt to Michael Nichols and Richard Schwartz. The ideas and concepts of the revolutionary field of family therapy are scattered through many sources; the ideas are difficult to find and, sometimes, to understand. These authors have done the searching and reporting and have done it well. They present the ideas and concepts clearly and bring the ideas up to date.

Family therapy is now clearly established with many different approaches. A foreword writer has a problem trying to say anything new. I'll try some general comments and my own experiences.

In the 1960s I was editing *Family Process* and searching the field for papers. We had to decide whether to encourage manuscripts to be published in this new journal or to encourage authors to publish in established journals to make family therapy more well known. We decided to use the journal to acquaint people with the new ideas. As I went about trying to get papers for the journal, I became a therapist watcher visiting different groups. It was interesting to see how people defined family therapy and how often therapists changed the name but not the game as they continued in their way of doing therapy while calling it family therapy. They were balanced later by purist family therapists who would not allow the term to be used unless a whole family was in the room.

Now, a half century later, one can look back and remember the variety of ideas developing and the enthusiasm of the therapists. They discovered something new in the air that they had not been trained to understand. I can recall running a meeting in the late 1960s to honor Don Jackson who had recently died. Approximately 45 therapists attended, almost all in the country. They were rebel enough to be willing to provide a new idea about therapy. At the meeting, they realized, that their view was different from those of their colleagues, yet it was all family therapy. No one thought of a textbook.

It is interesting to be an author who has his work summarized in a textbook. I am in that position, and I have some data to support agreeing or disagreeing with what the book says about the history of family therapy. I was involved with some of the major projects, both working and traveling about. My different projects included ten years with Gregory Bateson, an unorthodox anthropologist; ten years with John Weakland, a chemical engineer; equal time with William Fry, a devotee of humor; five years at the Mental Research Institute with Don Jackson, an unusual psychiatrist; and with Virginia Satir, a different social worker. I spent ten years in Philadelphia with Salvador Minuchin, who was doing serious work with the poor when others were not, and seventeen years consulting with Milton Erickson, who was a psychiatrist different from all others. I spent ten years in private practice, doing brief therapy and consulting with him.

It was those therapists willing to be unorthodox who brought about change. The orthodox defense of long-term therapy and psychodynamic theory was everywhere, and change was difficult. Perhaps unorthodox people are necessary to escape from an orthodox therapy.

The authors of this textbook did well in describing our group as well as the other groups I observed over the years. The remarkable happening was how therapists shifted in one or two decades from a passive individual therapy that was financially sound, to a social, active therapy in which the ideas and techniques and philosophy were exactly the opposite. For example, in that period, therapists went from bragging about being nondirective to seeking training in that art because no one except Milton Erickson knew how to give a directive well.

This text reminds me of the controversies and disagreements that therapists enjoyed in that time of change. I recall that a group of psychiatric residents in San Francisco invited me to teach them family therapy in a seminar. They asked to see me at night and to keep it a secret. Therapists who were trying to devise new ideas met therapists trying to salvage the best of the past. They differed. It became necessary to train therapists in private institutes and workshops because academicians were still salvaging the past.

Those days are gone, as this textbook of different approaches shows. The teachers of the past had to abandon their basic ideas as times changed and their students were taking up interactional family views. It was hard on some teachers, usually the better ones, because they had learned the past ideas so well and had great investments in them. Now, for better or worse, interpersonal ideas have become established in the field, and this change affects research and diagnosis and new definitions of therapy problems. Thanks to these authors, we have some worthwhile guides into the future.

Jay Haley

## Preface

One thing that tends to get lost in academic discussions of family therapy is the feeling of accomplishment that comes from sitting down with an unhappy family and being able to help them. Beginning therapists are understandably anxious about how to proceed, and they are not sure they will know how to be helpful. (“How do you get *all of them* to come in?”) Veterans often speak in abstractions. They have opinions and discuss big issues—social constructionism, postmodernism, managed care, second-order cybernetics. Although it is tempting to use this space to say Important Things, I prefer to be a little more personal. Treating troubled families has given me the deepest satisfaction imaginable, and I hope that the same is, or will be, true for you.

In this first edition of *The Essentials of Family Therapy*, we tried to describe the full scope of family therapy—its rich history, the classic schools, the latest developments—but with more emphasis on clinical practice than history and theory. There are lots of changes in this version: more up-to-date descriptions of the latest models, treatment of basic clinical practice, a richer description of the contemporary influences on the field, and a more thorough and consistent emphasis on clinical techniques throughout.

When you read about therapy, it can be hard to see past the jargon and political packaging to the essential ideas and practices. So, in preparing this volume, we traveled widely to visit and observe the actual sessions of the leading practitioners. The result is a more pragmatic, clinical focus. We hope you like it.

So many people have contributed to my development as a family therapist and to the writing of this book that it is impossible to thank them all. But I would like to single out a few. To the people who taught me family therapy—Lyman Wynne, Murray Bowen, and Salvador Minuchin—thank you.

Some of the people who went out of their way to help us prepare this book were Jay Efran, Stephanie Fellenberg, Frank Dattilio, Robert Taibbi, JoEllen Patterson, Joseph Miccuci, Paul Nichols, Insoo Berg, Cheryl Ramage, Kathy Weingarten, Vicki Dickerson, Jeff Zimmerman, Cloe Madanes, Jay Haley, and Salvador Minuchin. To paraphrase John, Paul, George, and Ringo, we get by with *a lot* of help from our friends—and we thank them one and all. We are especially grateful to Janice Wiggins and Alyssa Pratt at Allyn and Bacon, and Jennifer Harper at Nesbitt Graphics, for making a hard job easier.

The author and the publisher wish to express their gratitude to the reviewers of this text, their comments have greatly enriched and contributed to our work: Patricia Ann Guillory, Southern University at New Orleans; Charles Hendrix, Oklahoma State University; Clarence Hibbs, Pepperdine University; Kaye Nelson, Texas A&M University.

Finally, I would like to thank my postgraduate instructors in family life: my wife, Melody, and my children, Sandy and Paul. In the brief span of thirty-three years, Melody has seen me grow from a shy young man, totally ignorant of how to be a husband and father, to a shy middle-aged man, still bewildered and still trying. Sandy and Paul never cease to amaze me. My little red-haired girl (who can bench press like a football player) is about to return to the United States after two and a half years of service in the Peace Corps. Proud of her? You bet I am! And my son, Paul, to whom (masculine reticence being what it is) maybe I haven't always expressed the depth of my love, has grown to young manhood true to himself, true to his friends, and true to his mother and me. If in my wildest dreams I had imagined children to love and be proud of, I wouldn't even have come close to any as fine as Sandy and Paul.

Michael P. Nichols  
*Williamsburg, Virginia*



## **Brief Contents**

CHAPTER 1	The Foundations of Family Therapy	1
CHAPTER 2	The Evolution of Family Therapy	7
CHAPTER 3	Getting Started in Family Therapy: Basic Techniques	34
CHAPTER 4	The Fundamental Concepts of Family Therapy	54
CHAPTER 5	Bowen Family Systems Therapy	76
CHAPTER 6	Strategic Family Therapy	97
CHAPTER 7	Structural Family Therapy	120
CHAPTER 8	Experiential Family Therapy	139
CHAPTER 9	Psychoanalytic Family Therapy	157
CHAPTER 10	Cognitive-Behavioral Family Therapy	179
CHAPTER 11	Family Therapy Enters The Twenty-First Century	202
CHAPTER 12	Solution-Focused Therapy	221
CHAPTER 13	Narrative Therapy	234
CHAPTER 14	Integrative Models	248
CHAPTER 15	Comparative Analysis	262
CHAPTER 16	The Scientific Basis of Couples and Family Therapy Research	278



# Contents

Foreword by Jay Haley xi  
Preface by Michael P. Nichols xiii

## PART I The Context of Family Therapy

### CHAPTER 1 The Foundations of Family Therapy 1

The Myth of the Hero	3	The Power of Family Therapy	5
Psychotherapeutic Sanctuary	4	Recommended Readings	6
Family versus Individual Therapy	5		

### CHAPTER 2 The Evolution of Family Therapy 7

The Undeclared War	7	John Bell	16
Small-Group Dynamics	8	Murray Bowen	20
The Child Guidance Movement	10	Nathan Ackerman	22
The Influence of Social Work	11	Carl Whitaker	23
Research on Family Dynamics and the Etiology of Schizophrenia	12	Ivan Boszormenyi-Nagy	24
Gregory Bateson—Palo Alto	12	Salvador Minuchin	24
Theodore Lidz—Yale	14	Other Early Centers of Family Therapy	25
Lyman Wynne—National Institute of Mental Health	15	The Golden Age of Family Therapy	26
Role Theorists	15	Summary	29
From Research to Treatment: The Pioneers of Family Therapy	16	Key Concepts	30
		Recommended Readings	31
		References	32

### CHAPTER 3 Getting Started in Family Therapy: Basic Techniques 34

The Stages of Family Therapy	34	Termination	40
The Initial Telephone Call	34	Termination Checklist	40
The First Interview	35	Family Assessment	41
First Session Checklist	37	The Presenting Problem	41
The Early Phase of Treatment	37	Understanding the Referral Route	41
Early Phase Checklist	39	Identifying the Systemic Context	42
The Middle Phase of Treatment	39	Stage of the Life Cycle	42
Middle Phase Checklist	39	Family Structure	42

Communication	43
Drug and Alcohol Abuse	43
Domestic Violence and Sexual Abuse	43
Extramarital Involvements	44
Gender	44
Cultural Factors	44
The Ethical Dimension	45

Family Therapy with Specific Presenting Problems	46
Marital Violence	46
Sexual Abuse of Children	49
Working with Managed Care	50
Recommended Readings	52
References	52

## **CHAPTER 4 The Fundamental Concepts of Family Therapy 54**

Cybernetics	55
Systems Theory	57
General Systems Theory	58
Social Constructionism	59
Constructivism	60
The Social Construction of Reality	62
Conclusions	63
The Working Concepts of	
Family Therapy	64
Interpersonal Context	64
Complementarity	64
Circular Causality	65

Triangles	66
Family Structure	66
Process/Content	67
The Meaning (Function) of Symptoms	68
Family Life Cycle	68
Family Narratives	69
Gender	70
Culture	71
Key Concepts	73
Recommended Readings	74
References	74

## **PART II The Classic Schools of Family Therapy**

### **CHAPTER 5 Bowen Family Systems Therapy 76**

Overview	76
Evolution of the Model	76
The Basic Model	78
Differentiation of Self	78
Emotional Triangles	79
Nuclear Family Emotional Process	79
Family Projection Process	80
Multigenerational Transmission Process	80
Sibling Position	80
Emotional Cutoff	81
Societal Emotional Process	81
Normal Family Development	82

Development of Behavior Disorders	83
How Therapy Works	84
Therapy	84
Assessment	84
Therapeutic Techniques	88
Bowenian Therapy with Couples	90
Bowenian Therapy with One Person	91
Current Status of the Model	92
Summary	93
Key Concepts	95
Recommended Readings	96
References	96

### **CHAPTER 6 Strategic Family Therapy 97**

Overview	97
Evolution of the Model	97
The Basic Model	99

Normal Family Development	101
Development of Behavior Disorders	102
How Therapy Works	103

Therapy	104
Assessment	104
Therapeutic Techniques	105
The MRI Approach	106
Haley and Madanes Approach	108
The Milan Model	110
Other Contributions	113

Current Status of the Model	113
Summary	115
Key Concepts	116
Recommended Readings	117
References	117

## **CHAPTER 7 Structural Family Therapy 120**

Overview	120
Evolution of the Model	120
The Basic Model	122
Normal Family Development	124
Development of Behavior Disorders	125
How Therapy Works	128
Therapy	128
Assessment	128
Therapeutic Techniques	129
Joining and Accommodating	129
Working with Interaction	130
Structural Mapping	130

Highlighting and Modifying Interactions	131
Boundary Making	133
Unbalancing	133
Challenging Unproductive Assumptions	134
Current Status of the Model	135
Summary	136
Key Concepts	137
Recommended Readings	137
References	138

## **CHAPTER 8 Experiential Family Therapy 139**

Overview	139
Evolution of the Model	139
The Basic Model	141
Theoretical Concepts	142
Normal Family Development	143
Development of Behavior Disorders	143
How Therapy Works	144
Therapy	144
Assessment	144

Therapeutic Techniques	145
Emotionally Focused Couples Therapy	150
Internal Family Systems Therapy	151
Current Status of the Model	152
Summary	153
Key Concepts	154
Recommended Readings	154
References	155

## **CHAPTER 9 Psychoanalytic Family Therapy 157**

Overview	157
Evolution of the Model	157
The Basic Model	159
Freudian Drive Psychology	160
Self Psychology	160
Object Relations Theory	160
Normal Family Development	161
Development of Behavior Disorders	162
How Therapy Works	164

Therapy	166
Assessment	166
Therapeutic Techniques	166
Current Status of the Model	174
Summary	175
Key Concepts	175
Recommended Readings	176
References	176

## **CHAPTER 10 Cognitive-Behavioral Family Therapy 179**

Overview	179	Behavioral Couples Therapy	188
Evolution of the Model	179	Assessment	188
The Basic Model	181	Therapeutic Techniques	189
Normal Family Development	182	The Cognitive-Behavioral Approach to Family Therapy	192
Development of Behavior Disorders	182	Treatment of Sexual Dysfunction	193
How Therapy Works	183	Current Status of the Model	195
Therapy	184	Summary	196
Behavioral Parent Training	184	Key Concepts	196
Assessment	184	Recommended Readings	197
Therapeutic Techniques	185	References	198

## **PART III Recent Developments in Family Therapy**

## **CHAPTER 11 Family Therapy Enters the Twenty-First Century 202**

Erosion of Boundaries	202	Spirituality	210
Postmodernism	203	Tailoring Treatments to Populations and Problems	210
The Feminist Critique	203	Medical Family Therapy and Psychoeducation	211
Social Constructionism and the Narrative Revolution	205	Psychoeducation and Schizophrenia	211
Family Therapy's Answer to Managed Care: Solution-Focused Therapy	206	Medical Family Therapy	213
Family Violence	206	Managed Care	213
Multiculturalism	207	Conclusions	214
Race	208	Key Concepts	216
Poverty and Social Class	209	Recommended Readings	216
Gay and Lesbian Rights	209	References	217

## **CHAPTER 12 Solution-Focused Therapy 221**

Overview	221	The Woman Who Was Stronger Than She Thought	226
Evolution of the Model	222	Current Status of the Model	228
The Basic Model	222	Summary	230
Theoretical Concepts	222	Key Concepts	231
Normal Family Development	223	Recommended Readings	232
Development of Behavior Disorders	224	References	232
How Therapy Works	224		
Therapy	224		
Assessment	224		
Therapeutic Techniques	225		

## **CHAPTER 13 Narrative Therapy 234**

Overview	234
Evolution of the Model	235
The Basic Model	236
Normal Family Development	238
Development of Behavior Disorders	238
How Therapy Works	239
Therapy	239
Assessment	239
Therapeutic Techniques	240
Externalizing: The Person Is Not the Problem	240
Who's in Charge, the Person or the Problem?	241

Reading between the Lines of the Problem Story	242
Reauthoring the Whole Story	242
Reinforcing the New Story	242
Deconstructing Destructive Cultural Assumptions	243
A Case of Sneaky Poo	243
Current Status of the Model	244
Summary	245
Key Concepts	246
Recommended Readings	247
References	247

## **CHAPTER 14 Integrative Models 248**

Eclecticism	249
Selective Borrowing	250
Specially Designed Integrative Models	251
Comprehensive, Theoretically Inclusive Models	251
The Metaframeworks Model	251
Integrative Problem-Centered Therapy	252
Models That Combine Two Distinct Approaches	253
The Narrative Solutions Approach	253

Integrative Couples Therapy	254
Other Integrative Models	256
Models Designed for Specific Clinical Problems	257
Working with Family Violence	257
Community Family Therapy	258
Summary	259
Key Concepts	260
Recommended Readings	260
References	261

## **PART IV The Evaluation of Family Therapy**

## **CHAPTER 15 Comparative Analysis 262**

Theoretical Formulations	262
Families as Systems	262
Stability and Change	262
Process/Content	263
Monadic, Dyadic, or Triadic Model	263
The Nuclear Family in Context	265
The Personal as Political	266
Boundaries	267
Normal Family Development	267
Development of Behavior Disorders	269

Inflexible Systems	269
Pathologic Triangles	270
Therapy	271
Assessment	271
Decisive Interventions	272
Summary	274
Key Concepts	276
Recommended Readings	277
References	277

## **CHAPTER 16    The Scientific Basis of Couples and Family Therapy Research    278**

Outcome Research: How Effective Is Family  
Therapy?    279

Overall Efficacy of Family Therapy    279

Family Therapy for Adult Disorders    279

    Serious Mental Disorders    279

    Depression and Anxiety    280

    Alcoholism and Drug Abuse    281

    Medical Problems    282

    Sexual Problems    283

Family Therapy for Children's  
Disorders    283

    Behavior Problems    283

    Emotional Problems    284

    Physical Problems and Eating  
    Disorders    285

    Substance Abuse    286

Family Therapy for Interpersonal  
Problems    286

Relationship Problems    286

    Prevention of Relationship

    Problems    287

    Implications    289

Process Research: What Makes Family  
Therapy Effective?    290

    The Therapeutic Relationship    290

    The Process of Change    291

        Effective Interventions    292

        Change over Time    293

        Change Mechanisms    293

    Implications    294

Practice into Science    295

Key Concepts    295

Recommended Readings    296

References    296

Appendix A Selected Readings    303

Appendix B Careers and Training    306

Author Index    313

Subject Index    323

# CHAPTER 1

## The Foundations of Family Therapy

**T**here wasn't much information on the intake sheet. Just a name, Holly Roberts, the fact that she was a senior in college, and her presenting complaint: "trouble making decisions."

The first thing Holly said when she sat down was, "I'm not sure I need to be here. You probably have a lot of people who need help more than I do." Then she started to cry.

It was springtime. The tulips were up; the trees were turning light, leafy green; and purple clumps of lilacs perfumed the air. Life and all its possibilities stretched out before her, but Holly was naggingly, unaccountably depressed.

The decision Holly was having trouble making was what to do after graduation. The more she tried to figure it out, the less able she was to concentrate. She started sleeping late, missing classes. Finally, her roommate talked her into going to the Health Service. "I wouldn't have come," Holly said. "I can take care of my own problems."

I was into cathartic therapy back then. Most people have stories to tell and tears to shed. Some of the stories, I suspected, were dramatized for sympathy and attention. Most people seem to give themselves permission to cry only with some very acceptable excuse. Of all the human emotions we're ashamed of, feeling sorry for ourselves tops the list.

I didn't know what was behind Holly's depression, but I was sure I could help. I felt comfortable with depressed people. Ever since my senior year in high school, when my friend Alex died, I'd been a little depressed myself.

After Alex died, the rest of the summer was a dark blur. I cried a lot. And I got mad whenever anyone suggested that life goes on. Alex's minister said that his death wasn't a real tragedy, because now "Alex was with God in heaven." I wanted to scream, but I numbed myself instead. In the fall I went off to college, and, even though it seemed somehow disloyal to Alex, life did go on. I still cried from time to time, but with the tears came a painful discovery. Not all of my grief was for Alex. Yes, I loved him. Yes, I missed him. But his death also provided me with the justification to cry about the everyday sorrows in my own life. Maybe grief is always like that. At the time, though, it struck me as a betrayal. I was using Alex's death to feel sorry for myself.

What, I wondered, was making Holly so sad? In fact, Holly didn't have a dramatic story. Her feelings weren't focused. After those first few minutes in my office, she rarely cried. When she did, it was more an involuntary leakage than a sobbing



release. She talked about the future and about not knowing what she wanted to do with her life. She talked about not having a boyfriend—in fact, she rarely ever had any dates. She never said much about her family. If the truth be told, I wasn't terribly interested. Back then I thought home was the place you have to leave in order to grow up, to become your own person.

Holly was vulnerable and needed someone to lean on, but something made her hold back, as though she didn't feel safe, didn't quite trust me. It was frustrating. I wanted very badly to help her.

A month went by and Holly's depression only got worse. I started seeing her three times a week, but we weren't really getting anywhere. One Friday afternoon Holly was feeling so despondent that I didn't think she should go back to her dorm alone. I asked her instead to lie down on the couch in my office and, with her permission, I called her parents.

Mrs. Roberts answered the phone. I told her that I thought she and her husband should come to Rochester and meet with me and Holly to discuss the advisability of Holly taking a medical leave of absence and going home. Unsure as I was of my authority back then, I steeled myself for an argument. Mrs. Roberts surprised me by agreeing to come at once.

The first thing that struck me about Holly's parents was the disparity in their ages. Lena Roberts looked like a slightly older version of Holly; she couldn't have been much over thirty-five. Her husband looked sixty. It turned out that he was Holly's stepfather. They had gotten married when Holly was sixteen.

Looking back, I don't remember much being said in that first meeting. Both parents were very concerned about Holly. "We'll do whatever you think best," Mrs. Roberts said. Mr. Morgan (Holly's stepfather) said they could arrange for a good psychiatrist "to help Holly over this crisis." But Holly said she didn't want to go home, and she said this with more energy than I'd heard from her in a long time. That was on Saturday. I suggested that there was no need to rush into a decision, so we arranged to meet again on Monday.

When Holly and her parents sat down in my office on Monday morning, it was obvious that something had happened. Mrs. Roberts's eyes were red from crying. Holly glowered at her and looked away, her mouth tight and grim. Mr. Morgan turned to me. "We've been fighting all weekend. Holly heaps abuse on me, and when I try to respond, Lena takes her side. That's the way it's been since day one of this marriage."

The story that came out was one of those sad histories of jealousy and resentment that turn ordinary love into bitter, injured feelings and, all too often, tear families apart. Lena Roberts was thirty-four when she met Tom Morgan. He was a robust fifty-six. Apart from their ages, the second obvious difference between them was money. He was a successful stockbroker who'd retired to run a horse farm. She was waitressing to support herself and her daughter. It was a second marriage for both of them.

Lena looked to Tom to be the missing male role model and source of discipline in Holly's life. Unfortunately, she couldn't accept the strict rules Tom felt invited to enforce. And so Tom became the wicked stepfather. He made the mistake of trying to take over and, when the predictable arguments ensued, Lena sided with her child. Things got bad, and then worse. There were tears and midnight shouting matches. Twice Holly ran away to a friend's house for a few days. The triangle nearly proved Lena and Tom's undoing, but things calmed down when Holly went off to college.

Holly expected to leave home and not look back. She would make new friends. She would study hard and choose a career. She would *never* depend on a man to support her. Unfortunately, she left home with a lot of unfinished business. She hated Tom for the way he picked on her, and for the way he treated her mother. He was always demanding to know where her mother was going, who she was going with, and when she would be back. If her mother was the least little bit late, there would be a scene. Why did her mother put up with it?

Blaming Tom was simple and satisfying. But another set of feelings, harder to face, was eating at Holly. She hated her mother for marrying Tom

and for letting him be so mean to her. What had her mother seen in him in the first place? Had she sold out for a big house and a fancy car? Holly didn't have answers to these questions; she didn't even dare allow them into full awareness. Unfortunately, repression doesn't work like locking something away in a closet and forgetting about it. It takes a lot of energy to keep unwelcome emotions at bay.

Holly found excuses not to go home much during college. It didn't even feel like her home anymore. She buried herself in her studies. But rage and bitterness gnawed at her, slowly sapping her strength until, in her senior year, facing an uncertain future, knowing only that she couldn't go home again, she gave in to hopelessness. No wonder she was depressed.

I found the whole story sad. Not knowing much about family dynamics and never having lived in a stepfamily, I wondered why they couldn't just get along better. The worst of it was that they had so little sympathy for each other. Why couldn't Holly accept her mother's right to find love a second time around? Why couldn't Tom respect the priority of his wife's relationship with her daughter? And why couldn't Holly's mother listen to her daughter's adolescent anger without getting so defensive?

That session with Holly and her parents was my first lesson in family therapy. Family members in therapy talk, not about actual experiences, but about reconstructed memories that resemble the original experiences only in certain ways. Holly's memories resembled her mother's memories very little, and her stepfather's not at all. In the gaps between their truths was little room for reason and no desire to pursue it.

Although that meeting may not have been terribly productive, it certainly put Holly's unhappiness in perspective. No longer did I think of her as a tragic young woman, all alone in the world. She was that, of course, but she was also a daughter torn between running as far away as possible from a home she no longer felt part of and being afraid to leave her mother alone with a man she didn't trust. I think that's when I became a family thera-

pist. To say that I didn't know much about families, much less about techniques for helping them, would be an understatement. But family therapy isn't just a new set of techniques; it's a whole new approach to understanding human behavior—as fundamentally shaped by its social context.

## THE MYTH OF THE HERO

Ours is a culture that celebrates the uniqueness of the individual and the search for an autonomous self. Holly's story could conveniently be told as a coming of age drama: a young person's struggle to break away from childhood and provincialism, to take hold of adulthood and promise and the future. If she fails, we're tempted to look inside the young adult, the failed hero.

Although the unbounded individualism of the hero may be encouraged more for men than for women, as a cultural ideal it casts its shadow on us all. Even if Holly cares about connection as much as autonomy, she may be judged by the prevailing image of accomplishment.

We were raised on the myth of the hero: the Lone Ranger, Robin Hood, Wonder Woman. When we got older we searched out real-life heroes and put them on a pedestal: Eleanor Roosevelt, Martin Luther King, Nelson Mandela. These were men and women who stood for something. If only we could be a little more like these larger-than-life individuals who seem to rise above their circumstances.

Only later do some of us begin to realize that the "circumstances" we wanted to rise above were part of the human condition—our inescapable connection to our families. The romantic image of the hero is based on the illusion that authentic selfhood can be achieved as a proud, autonomous individual. We do many things alone, including some of our most heroic acts, but we are defined and sustained by a network of human relationships. Our need to worship heroes is partly a need to rise above inadequacy and self-doubt, but perhaps equally a product of imagining a life unfettered by all those pesky relationships that somehow never quite go as we would wish.