

SEE IT: RELEVANT POINTS TO REMEMBER

First segment of See It – Name It – Change It

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Introduction: “See It Name It Change It’ is a shorthand way of capturing the therapy process (all therapy, not just Family Therapy or Structural Family Therapy) in a phrase. The “it” is of course **pattern**. All therapy revolves around finding patterns of dysfunction in individuals and relationships and changing them. This method spells out a way of thinking about that process that can help therapists slow down the blur of events and keep them in some focus and order. Very briefly, the idea is that there are 3 separate crucial skills. The first is the ability to see and understand patterns of behavior quickly and accurately. The second is to be able to talk about those with the client/family in a way that makes them clear and accessible, and useful to the individual(s) in question. The third is the process whereby you change those patterns with the client/family. We will look at each in some detail.

“You can observe a lot just by watching.” – Yogi Berra

First, some general observations about Structural Family Therapy. It is useful to have a framework for the beliefs behind it.

Structural Family Therapy is a normative therapy. It operates with reference to a norm of what is a healthy way to function, esp. relative to boundaries, hierarchy, etc. Accordingly, a good question when confused or lost often is, “What would a healthy family do in these circumstances? What would I like to see?”

SFT is an idealistic therapy. It shoots for an ideal in which the family works really well, with boundaries and hierarchy and closeness and effective rules. It pushes for the family to be excellent, growth-producing and coherent. You seldom get there completely, but it is exciting and appropriate to pursue it. Therapy usually fails for shooting too low, not too high. Shoot high.

SFT is a pragmatic therapy. It works with what is real and important in the here and now. It shoots for changes that are visible and strong and will make a difference. It seeks out the ideal family interactions by working on the real ones, in a real way. It holds to a high standard of honesty and directness.

SFT is a transparent therapy. We tend to work out in the open, with direct strategies and inputs, more than with a hidden agenda or a subtle shift in mind. Our families can usually tell (and tell us) what we are working on, and why, because we have usually brought them in on our thinking. We often make the patterns we see very clear by making the invisible visible, and by saying the unsayable.

SFT is an active therapy. It works not just with ideas and concepts, but with physical movement and active engagement. It manipulates space (who sits where, who interacts with whom, how close people get or how much they touch) and also challenges peoples' notions of what is possible. It relies on therapists who are active, involved, and dynamic.

The best single description of SFT comes from Jay Haley, who said, **“SFT is not about solving the problem, it’s about repairing the problem-solving mechanism.”** This is a vital difference and must be remembered as much as possible. The goal is always to get more effective functioning out of the family in ways that we know represent good structure, so that the family makes better decisions and produces healthier interactions and relationships. If you are solving their problem, you are helping them only in the most temporary and superficial way; and in some ways you are hurting them. Making the family better able to solve its own problems is always the goal.

The conceptual framework that we call “See It – Name It – Change It” is built on the idea that there is a clear sequence of actions by the therapist that can lead to change, based on: seeing the pattern of dysfunction clearly, and making sense of it in your head; sharing that pattern with the family in a way that is tolerable and even interesting to them; and reworking the pattern in a healthier way, directly and effectively. Here is a brief (and oversimplified) example:

A young family with 2 children is seen because the older one, 7, is getting in trouble at school and at home, disobeying authorities, and acting out. You quickly see that the mother is very tentative with the boy, cautious and overly gentle in correcting him, while the father is restrained but clearly angry and rather threatening-looking when the boy misbehaves. After seeing several iterations of this pattern, the therapist names it to the mother: “You worry about being too hard on him, don’t you?” Mother says yes, and is able to also agree that she sometimes worry that the father is too hard on him, as her father was on her. The therapist conducts an exploration of that pattern,

with the father agreeing that he feels she is too soft but feels she does not allow him to take part in the disciplining out of fear of her, which makes him even angrier. The therapist helps the parents talk about this difference (in the same session, with the child in the room) and see why it is confusing for the son as well as discouraging for both of them. He then helps the parents negotiate a changed pattern, where the husband agrees to not come down too hard on the boy but be clear and direct, while the wife agrees to support his involvement as he does it. They learn to talk directly about what they want to do to teach the son better ways of behaving, as they work on it together. That new pattern is then enacted several times in the therapy, with dad leading and mom supporting and voicing her concerns, and then with mom taking a stronger voice and father supporting and encouraging her. Dad learns to honor her concerns and work with the boy in a less angry way, while mom learns strong leadership that they can practice together.

“Seeing it” requires that we become good at observing behavior beyond the merely noticing what events happen. We must learn to see where there are dynamic interpersonal patterns of behavior. All behavior is a function of interpersonal patterns at some level, and we must be good at picking these out and making sense of them. This means 1) observing well, 2) believing what we see, 3) checking our hypothesis against ongoing behavior, and 4) comparing it to reasonable norms. You observe (1) that the father mentions something he wants done and the son acts like he didn’t hear it. The father moves on. The therapist needs to (2) register the interaction as real and not normalize it (‘the son probably didn’t hear him, or he wasn’t clear, or there’s a lot going on, or maybe it’s because I’m here’) and then (3) watch the pattern further: why can’t the father get his son to listen? What does he do that is ineffectual? What does the mother do as he gives up? What happens next? Does the son notice that he is ignoring the father? Does anyone react noticeably? 4) As you see it happen, you look at what a “healthy” family would do here: How serious is this? What “should” happen? You might observe this pattern silently and store it to check on, or (more likely) bring it up directly and ask about it, depending on the circumstances; but you do not want to see it as a simple interaction with no meaning in the family.

The issue is not pathology, it is pattern: seeing what has become routine and expected, even though it doesn’t work. Families often take pattern totally for granted, saying “That’s just how he is”, or “I can’t get him to listen” with no expectation of it being changeable. Noticing patterns and bringing them for review and alteration is a principal function of a therapist.

The main patterns we look for are those connected to family structure:

Hierarchy: who is in charge, and what support or opposition do they get?

Boundaries: Are there clear delineations between generations? Between individuals? Clear expectations? Is there privacy and safety? Can people say what they need to to each other without undue hurt or anger?

Alliances: Are people able to work together well? Give and receive support? Is there scapegoating? Favoritism? Do the parents work together or divide over the child? Do the kids support each other or compete?

We sometimes engage in boundary-making, where boundaries are too weak or unclear; we use ourselves to highlight rules and expectations. We also sometimes engage in boundary-softening, where boundaries are too rigid and there is not enough connection.

The 3 main patterns of family dysfunction are Enmeshment, Disengagement (active) and Disengagement (passive).

One of the truisms of seeing pattern is the idea that **the whole is always available in the part**; i.e., the larger pattern is represented in many fragments and is visible in many small interactions. You don't have to see the whole pattern played out in its full form to get the idea.

Learning to see pattern and structure is not easy and not obvious. The better you get at it, the more available and ubiquitous it is. As we look at tapes and see pattern, we want to always ask the next question: if this is the pattern, what would be better? What would represent an improvement, however small? What would be a significant step forward? What would be a really great turnaround or transformation? Learn to see pattern, and to let it guide you toward where you want to go, both short- and long-term.