CHAPTER 6

Structural Family Counseling

Structural Family Counseling is one of the oldest and most consistently used models of family counseling. The writers agree with Michael Nichols (1984) that, “The main reason for its success is that it describes families as having an underlying organization in terms that provide clear guidelines for diagnosis and treatment” (p. 469).

Salvador Minuchin, the founder of structural family therapy, contributed a number of concepts that family counselors use to understand how families function and to help the client families with whom they work (Minuchin, 1974; Minuchin Montalvo, Guerney, Rosman, & Schumer, 1967; Minuchin, Rosman, & Baker, 1978). Family counselors observe a tremendous number of interactions among family members. Careful observation helps them recognize repetitive patterns of interactions, or family dynamics. Minuchin’s Structural Family Counseling further helps family counselors make sense of a family’s dynamics by providing concepts that translate observed dynamics into descriptions of how the family is organized and the nature of its relationships, in other words, the family’s structure.

Rather than beginning his career by conceptualizing and studying individuals and families, Minuchin’s professional life began as a physician specializing in psychiatry. During the 1960s, he began working with children and adolescents identified as “delinquent.” These children were primarily from low-income families and had come to the attention of the juvenile justice system. Minuchin began seeing these children with their families. Because the other early family counselors had been primarily concerned with theory and its application mostly to middle-income families, their techniques did not always apply to the families with whom Minuchin worked.

Minuchin’s Structural Family Counseling arose as a method of intervention with low-income, multiproblem families. As he wrote about his work, however,
the methods he used and the ways he thought about families were soon viewed by other family counselors as useful when working with families presenting with a variety of problems other than poverty and delinquency.

This chapter begins by exploring some of the family concepts that either originated in or were further developed for use in Structural Family Counseling. You will then read about some of the tools that make Structural Family Counseling unique. Finally, you will read about the application of the methods of Structural Family Counseling to the Manning-Kelly family.

**STRUCTURAL FAMILY COUNSELING CONCEPTS**

Structural Family Counseling arose from contemporaneous work by Minuchin and a number of his colleagues who were working with patients in psychiatric hospitals. Concepts developed by Murray Bowen (Chapter 5) are apparent in Minuchin’s theory, especially the concepts of boundaries and triangulation. However, while Bowen approached these ideas from a psychodynamic and multigenerations perspective, Minuchin applied them to how the family is structured. These distinctions will become more obvious as we describe Minuchin’s Structural Family Counseling theory.

**STOP AND THINK:**

As you read this chapter, notice the similarities and differences between Minuchin and Bowen’s (Chapter 5) theories and approaches to family counseling. In your notebook, write down these similarities and differences as you notice them.

Three concepts are crucial to Structural Family Counseling as described by Minuchin. These are boundaries and their impact on relationships (generational, permeability, diffuse/rigid boundaries continuum, enmeshed/disengaged relationships continuum); triangles and other alliances and coalitions; and hierarchies. Understanding these concepts will allow us to more clearly understand how and why Structural Family Counseling interventions change families in the way that they do.

**Boundaries**

Minuchin viewed boundaries as a reflection of family rules for managing physical and psychological distance among members, between groups or
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subsystems of family members, and between the family as a whole and both extended family and nonfamily systems. In other words, through repeated interactions, families develop rules about closeness and distance at all levels within and outside the family system.

STOP AND THINK:

Think about your own family and the families of your friends growing up.

1. Were you able to run in and out of any of their apartments or houses to eat a snack or use the bathroom?
2. Were there other homes you wouldn’t go into without being invited?
3. Are there both public spaces and private spaces in your own family’s home, or can visitors go anywhere?
4. Do family members close and/or lock the doors of bedrooms? When and why?
5. Are there times children know not to disturb their parents?
6. If siblings argue, do parents intervene or let their children “work it out” themselves?
7. Is it all right to talk about your family to people who are not family members?
8. Are there topics of conversation that aren’t talked about between parents and children, or would one of your parents complain to you, for example, about the other’s behavior or about money?
9. Do family members tell each other everything that happens to them?
10. Do you tell one of your siblings or one of your parents more than you tell other family members?
11. Do family members believe each other’s lives are private and only provide information on a need-to-know basis?
12. Did your parents help you with homework? If yes, how old were you when they stopped? Do you continue to talk about your classes and assignments?
13. Can you think of other questions that might reflect family rules about closeness and distance?
The answers to these questions reveal information about the rules governing distance and closeness within your family. These rules can differ dramatically in different families. Additionally, how a family defines boundaries is influenced by the family’s cultural identity. For example, in some cultures, an elder speaks for all family members, whereas in a family of western European descent one family member speaking for others would be considered a sign of diffuse boundaries and enmeshed relationships (see below). Family counselors therefore attend to a client family’s culture and its general assumptions about rules governing relationship boundaries to fully understand and avoid pathologizing an individual family’s boundaries.

Minuchin’s theoretical perspective on boundaries reflected his absorption into Western culture. As you read about them, remember that they are not universal. In other words, what is considered dysfunctional in some cultures may be viewed as functional in others. Although the purpose of this text is to introduce you to the general concepts that underlie family counseling, the writers encourage you to familiarize yourself with cultural differences in their application as you proceed in your studies of family counseling.

Relationships are defined by the boundaries between and among family members. When these boundaries are so easily crossed that members have difficulty knowing where one member stops and the other begins, the boundary is labeled diffuse. One of the typical ways a family counselor can recognize a family with diffuse boundaries is when one member speaks for other members of the family, although as previously mentioned, this is specific to the dominant culture in the United States.

The relationships among family members and within and between subsystems in families with diffuse boundaries are enmeshed. When relationships are enmeshed, the boundaries are so unclear, or diffuse, that members do not develop individual identities. It is difficult for families with diffuse boundaries and enmeshed relationships to allow children to explore relationships outside the family with peers or other adult role models. Sometimes it is even difficult for young adult children from enmeshed families to leave home during the launching stage of the family life cycle.

It may also be difficult for enmeshed families to differentiate appropriate roles for parents and children. Do you know someone who says she’s her mother’s best or only friend? Even as a young adult, it is difficult for someone in the child subsystem to be friends with someone in the parent subsystem. Would you really want to hear about your parents’ concern about their sexual relationship? Probably not, and yet best friends sometimes share such concerns for emotional support.

When the roles and behaviors of parents and children are not clearly differentiated, families often experience the kinds of problems that bring them
to counseling. This statement, like all that follow, is specific to the dominant culture in the United States and cannot be assumed to be universal.

Enmeshed relationships are different than close relationships. People who are close to each other care deeply about each other and each allows the other to see who she or he really is. People who are enmeshed don’t see that they are separate and fail to recognize aspects of the other that are not identical to self. So you might say a close friend puts up with more hurtful behavior from her boyfriend than you would; if you were in an enmeshed relationship with her, you might not even notice that she isn’t just like you and instead focus only on his hurtful behavior and how you would handle it. The risk, of course, is that your friend would feel that you were not listening to her and instead might be angry that you were deflecting the conversation from her problem to talking about yourself. The problem then becomes not his hurtful behavior but your failure to see her as separate from yourself. Additionally, if you told her to dump him and she didn’t, then you might be angry that she did not listen to you.

Alternatively, when boundaries are virtually impossible to cross, they are labeled rigid. The relationships arising in the presence of rigid boundaries are termed disengaged. Families with rigid boundaries, like families with diffuse boundaries, do not provide children with a sense of self. In families with rigid boundaries, there is not sufficient connection for children to learn who they are by seeing how parents and siblings respond to them. In families with diffuse boundaries, on the other hand, identities of members are not distinct, and children do not learn who they are apart from other family members.

Families with disengaged relationships do not often present voluntarily for counseling. They more frequently come to the attention of juvenile authorities and so are more likely to be seen for court-mandated services.

Diffuse and rigid boundaries and the resulting enmeshed and disengaged relationships may be thought of as two ends of a continuum. As one moves inward from the ends, boundaries become clear and relationships flexible. Minuchin considered clear boundaries and flexible relationships to be especially important between generations, as they allow parents and children to be close without confusing who is responsible for what.

There is great variation among families with clear boundaries. Some are very close, spend lots of time together, talk often when they cannot be together, and hold a strong family identity. Others are not as close, spend less time together, talk less frequently, and do not hold a strong family identity. Yet members of these families know they can rely on one another and are loved by the other members of their families. As closeness and distance within families approach either end of the continuum, however, the characteristics of boundaries and relationships may become problematic for family members and for the family as a whole.
There is no clear line of demarcation between each type of boundary. However, as a family counselor, you can recognize how the boundaries and relationships are either facilitating or impeding family functioning. Minuchin believed that when boundaries fall at either extreme of the continuum, they impede the adaptability of the family and its members to stress, exacerbate symptoms within the family, and require intervention by a family counselor to achieve more balance, clarity, and flexibility.

In her book, *Schopenhauer’s Porcupines: Intimacy and Its Dilemmas*, Deborah Anna Luepnitz (2002) described the parable for which the book is named. When it is very cold, porcupines begin to huddle closer together for warmth. However, when they become close enough to be pricked by one another’s quills, the porcupines move apart to avoid pain until they are so cold that they once again shift direction and move closer together. At the extreme ends of this process, the porcupines are either uncomfortably cold or uncomfortably irritated by each other’s quills. Finding a balance somewhere in the middle allows them to attain warmth without pain. There is not a perfect balance point, and each group of porcupines will move closer together and further apart until it finds its own. What’s important is not where the balance point is but that the porcupines in the group are neither uncomfortably cold nor uncomfortably pricked. The porcupines also provide an excellent example of homeostasis (Chapter 4).

**Coalitions and Triangles**

The concepts of coalitions and triangles are credited to Murray Bowen but are also central to the practice of Structural Family Counseling. According to Bowen, dyadic and triadic relationships, or those that occur between two or three family members, are the essential building blocks of family dynamics. However, when tension and anxiety build in a dyad, the dyad becomes unstable and the tension and anxiety can be defused by triangulation, the process of bringing in a third person. When this happens, the family remains in equilibrium, but the stress in the dyad is not resolved. Paradoxically, the presence of the triangle actually interferes with resolution of the issue that created the instability and anxiety in the dyad in the first place. Most commonly, dysfunctional triangles involve both parents and a child.

Minuchin also believed that, when flexible or fluid through time, triangles are a normal part of family life. From his perspective, it is only when they cross generations and become rigid, or fixed through time, that they become
dysfunctional. To address dysfunctional triangles, Minuchin recommended strengthening the boundary between the parental and child subsystems. This restructures the family, hence the name, Structural Family Counseling.

In any group, including families, members form alliances with one another for various purposes involving mutual benefit. Alliances fulfill family needs in a way that is beneficial to all family members. Alliances can involve any two or more family members. When an alliance occurs among three family members, it is also referred to as a triad.

Christina’s cousins, Paul and Patricia, formed an alliance to help their father with the demands of their mother’s cancer treatments. While the time they devoted to this endeavor may have detracted from the time they spent with their partners, everyone agreed that their alliance to care for a sick parent was important, temporary, and worth the time it took.

By contrast, coalitions are negative alliances between any two or more family members. Most commonly, they are two or more people either excluding or pitting themselves against another family member. When a coalition occurs among three family members, it is called a triangle. This distinction is important, because a triangle involves bringing a third person into a distressed dyad and thus puts great pressure on that person, while the same pressure is spread among several people and focused on the excluded family member in larger coalitions.

The person who is triangulated into a distressed dyad or excluded from a coalition often is the one who exhibits symptoms and brings the family to counseling. In other words, that person often becomes the identified patient. While coalitions and triangles often keep the family system in equilibrium, they do so at the expense of individuals and, thus, ultimately to the family as a whole.

Christina’s stepfather, Mark, described his first wife as alienating his children from him. It appears the family developed a coalition among his first wife, Shoshana, their two children, Jason and Ashley, and Shoshana’s parents that excluded Mark. Shoshana would make plans for the children with her parents and not tell Mark, then laugh at him while telling the children that he forgot to attend. This pattern repeated over and over again, creating a family dynamic that included a coalition among Shoshana, her parents, and the children that excluded Mark. The children could not have left the coalition, even if it made them uncomfortable, because the parents’ conflict would have left them no option other than to form a new coalition with Mark against Shoshana. Declining to participate in the coalition was not an option for Jason and Ashley, because neutrality would have forced Mark and Shoshana to address the problems in their relationship, risked dissolution of the marriage, and left the children feeling at least partially responsible. When Jason left home...
for college, the coalition fell apart and, rather than resolving their issues or forming a triangle with Ashley, Mark and Shoshana divorced.

Triads are fundamental units of communication within families. They are inevitable. If they are shifting and flexible, they generally do not cause problems. However, when they become rigid and inflexible and when they involve two or more members forming a coalition against a third, they can be problematic.

Christina’s stepmother, Daniella, taught her to cook. This alliance between Christina and Daniella was flexible, in that Martin or one of the younger children could join if they wanted to, and temporary, in that it only involved an activity in which they shared an interest. At other times, Christina had conversations with her father, Martin, that Daniella did not participate in, sometimes because she wanted to give them father-daughter time and other times because she was busy doing other things.

Alternatively, a triangle shifts attention away from the true problem onto secondary symptoms. It is also a coalition, with consequences for a single child. Christina’s stepfather, Mark, and his first wife, Shoshana’s, children, Jason and Ashley, could talk and complain about their parents’ behavior, and each could validate the other’s discomfort. By contrast, when there is only one person who deflects the tension from the dyad, that person has to display very obvious symptoms in order to create enough distraction. Emma, Mark and Liz’s daughter, exemplifies the presence of a triangle. Her dependence on Liz exceeds the needs of her disability, and excluding Mark is unnecessary. Her excessive dependence has left Emma less mature than she could be and may inevitably create issues for her with peers and a concomitant diminishing of her self-esteem, already threatened by her motor differences.

Similarly, Christina and Liz triangulated other family members into their distressed relationship. Christina brought her Aunt Barbara, her stepmother, Daniella, and her father into her fights with Liz about postgraduation plans. Liz brought in Mark and Emma. Martin Jr. avoided triangulation, but that avoidance brought its own toll of distancing him from the family. And while Christina’s eating disorder may have been a multigenerational effect (see Chapter 5), she may also have been triangulated into her mother’s distressed relationship with Mark, her on-going fights with Liz distracting them from their marital problems.

As the result of a triangle, the third person, who is usually a child, may exhibit physical, emotional, or behavioral symptoms that can be quite severe. Minuchin and his colleagues did a study of children with diabetes. They sat the children behind a one-way mirror and let them observe their parents
interacting. They simultaneously monitored the children’s blood sugar. The results indicated that when the parents argued, the children’s blood sugar was more likely to spike than when they observed their parents interacting without conflict. Since elevated blood sugar can cause both acute symptoms and long-term problems, the child’s blood sugar spikes required adult attention. Minuchin and his colleagues concluded that this phenomenon indicated the presence of a triangle in which the child’s diabetic symptoms disrupted parental distress, stopping it from escalating and also leaving it unresolved.

Sometimes the presence of a third person brings the other two together for a common purpose, as when parents need to care for a diabetic child exhibiting acute symptoms of the disease. Other times, as when Christina and Liz argue, the child engages only one of the parents to the exclusion of the other, which also stops the escalating instability in the dyad and attendant anxiety. In every example of a triangle described in this section, a child has become part of the parental subsystem. According to Structural Family Counseling theory, in each of these examples, the family needs to be restructured so the child returns to the child subsystem and the parents can address the distress in the parental subsystem. With clear boundaries between the generations, the child can interact with and be close to both parents without becoming part of the parents’ relationship with each other.

As you can see, the most common triangles involve two parents and a child and result from the distress in the parents’ relationship. Such triangles usually result in the dyadic distress remaining unaddressed and unresolved and the child developing a symptom that either brings the parents together to help or provides a rationale for one of the parents becoming overly involved with the child to the exclusion of the other parent. In either case, the parents are distracted from their couple problems. As a result, the tension between them doesn’t escalate to the point of divorce. However, because of the distraction provided by the child’s symptoms, the parents’ problems also remain unresolved.

### STOP AND THINK:

1. Take a moment to reflect on the difference between the triangle involving Christina and Liz that excludes Mark and the triad involving Christina and Daniella that excludes Martin.

2. Now identify an alliance and a triad in your own family. Are either of these also a coalition or a triangle?
Liz and Christina formed a triangle that excluded Mark when they repeatedly fought about Christina’s future. This repetitive, unresolved argument between them appeared to be stressful for other family members, who either withdrew (Martin Jr.), made minimal efforts to help (Mark), or attempted to deflect Liz’s attention (Emma). Christina and Liz’s fights had created a rigid boundary around them that no one, including Mark, Liz’s husband and Christina’s stepfather, could cross. It thus placed Christina in the midst of the marital subsystem. And Christina’s presence in the marital subsystem both masked and prevented resolution of the distress between Liz and Mark.

Alternatively, Christina and Daniella formed a triad with Martin when Daniella gave Christina cooking lessons. Martin elected to exclude himself, rather than being prevented from participating. Christina and Daniella cooking together only applied to one activity and did not arise from distress in Daniella and Martin’s marriage. The boundary around them when they were cooking remained clear and could be easily crossed if Martin or one of the other children wanted to be in the kitchen with them.

Structural Family Counseling focuses the family away from the identified patient, strengthens the boundary around the parental subsystem, and addresses the distress in the parents’ dyadic relationship with the intention of resolving, rather than deflecting it. With a more functional structure, specifically a clear boundary between the parental and child subsystems, the identified patient’s symptoms will be alleviated, and the parents will be positioned to acknowledge, address, and ultimately resolve the distress in their dyadic relationship.

Hierarchies

Structural Family Counseling aims at strengthening hierarchies. Hierarchies involve generational boundaries that are assumed to lead to more functional family dynamics.

Clear boundaries between generations lead to parents assuming parental responsibilities and children not stepping into parenting roles, while both generations continue to interact with one another. They do not preclude children taking on age-appropriate responsibilities and decision making. Older siblings can babysit younger siblings without becoming primary caretakers and disciplinarians. Similarly, children and parents can enjoy close relationships without the children taking care of their parents’ emotional needs. Family counseling interventions aimed at strengthening generational hierarchies are yet another way of framing the need to get the identified patient out of the parents’ relationship.
Minuchin once compared the role of the family counselor to that of a grandparent, teaching parents how to parent and helping them teach children how to be children. As you read about the techniques of Structural Family Counseling, consider your thoughts about that statement.

Clear generational boundaries were apparent in Christina’s father’s family. He and his wife, Daniella, took responsibility for caring for their two young children, his stepson, and his two older children. As previously mentioned, Daniella was teaching Christina to cook, and Christina admired Daniella to the point that she told her mother she wanted to be like Daniella. Martin’s mother, Roxanne, expressed her views that Martin should have been providing more religious experiences for his children. She then stood back and allowed Martin to decide how he wanted to parent his children, not commenting on areas in which she either agreed with his parenting or found less important than religion.

Similarly, Martin talked to Liz when he needed to communicate about Christina or Martin Jr. When he needed to alter the visitation schedule, he called or e-mailed Liz, rather than asking Christina or Martin Jr. to let their mother know. This kept them free of any potential conflict and from being triangulated into the negotiation between him and their mother.

STOP AND THINK:

Do the hierarchies in your family involve clear boundaries between generations? How?

STRUCTURAL FAMILY COUNSELING

Structural Family Counseling is based on the concepts already described in this chapter. Structural family counselors focus on increasing individual and relationship health by restructuring the family. Restructuring is aimed at boundaries, hierarchies, coalitions, and triangles. Structural family counselors assume that any change in the family structure will reverberate throughout the family system, and, as it does, individual and relationship health will improve.

Structural family counselors engage every family member in the processes of assessment and intervention. They ask each member how they view the presenting problem and to explain specifics about what happens throughout the family when it surfaces.

Structural Family Counseling requires an active counselor who is willing to question the family’s assumptions about themselves, help them increase their
reertoire of ways to interact, and use what is happening in the room to enact the dysfunctional family dynamics and suggest alternatives to change them. Structural family counselors do this bearing in mind the need to restructure the family in order to change it.

Questioning Family Assumptions

Families, like individuals, tend to make the assumption that what they think and feel and how they behave is safe and good because it is familiar. Christina’s half sister, Emma, had a central nervous system disorder that affected her movement and the clarity of her speech. The family seemed to accept the assumption that Liz therefore needed to focus the bulk of her attention on Emma, often to the exclusion of her husband, Mark, and her two older children. And, although her repetitive argument with Christina about posthigh-school plans engaged her with her older daughter, the family appeared to assume that nothing else would or even should distract her from Emma.

It was up to the family counselor to question assumptions like these. A consultation with Emma’s pediatrician revealed that although she was scheduled for regular appointments for speech and occupational therapy that intruded on play and social time, Emma was able to function as independently as any other 4-year-old. She walked independently, was able to feed and bathe herself, and had exhibited no cognitive deficits. Yet within her family, she was treated as though this was untrue. Being treated as more disabled and dependent than she was interfered with Emma’s social and emotional development. Simultaneously, Liz’s involvement with Emma created distance from her husband, Mark, and her older children, neither of whom appeared happy and both of whom had displayed identifiable symptoms of emotional distress.

Enactments

Enactments are a technique frequently used by Structural Family Counselors. Enactments allow the family to practice corrective interactions which, once experienced in the counselor’s office, can be recreated and practiced at home.

The first step in an enactment involves the structural family counselor observing the sequences of interactions within the family and using these observations to map the family boundaries, coalitions, and hierarchies. This process is called tracking. It can occur while the counselor establishes a therapeutic relationship with the family and asks questions about the presenting problem and how it plays out in the family dynamics.
The second step in an enactment involves the structural family counselor inviting the family to enact their dynamics. If the family was complaining about the arguments between Christina and Liz, the counselor could invite them to talk about Christina’s postgraduation plans in the office. Family members may have become self-conscious, and the counselor could encourage them by asking questions about what they thought was happening and what usually happened next. The counselor could also ask other family members what they did while Liz and Christina argued and what they thought about the argument.

The structural family counselor then moves the family into the third step of the enactment, which involves the family counselor redirecting behaviors to clarify boundaries and hierarchies, thereby disrupting coalitions and triangles. To repeat, structural family counselors assume that changes in the family’s structure will change the dynamics and thus the mental health of the family members and the functionality of their relationships with one another.

Redirecting during an enactment may include asking family members to move around the room and sometimes even moving office furniture. Redirecting may also involve orchestrating the conversation, asking a silent member to talk to a particular family member, or interrupting a family member who is talking. Such redirection enhances the repertoire of interactions among family members and allows a shift in structure and dynamics.

We will now turn to the application of Structural Family Counseling to the Manning-Kelly family. The following section demonstrates how enactments work, using excerpts from the Manning-Kelly family’s counseling.

**USING STRUCTURAL FAMILY COUNSELING WITH THE MANNING-KELLY FAMILY**

After the Manning-Kelly family sat down in the family counselor’s office, she introduced herself and said hello to each family member, thanking them for taking the time to come in that day. Because Liz had called her to arrange the appointment, the family counselor decided not to begin the conversation by addressing her. She also did not want to begin by talking to Christina, as that might communicate to the family that she agreed with their assumption that the identified patient was the problem. She also avoided beginning with Martin Jr. or Emma, because siblings are often more helpful after their parents and the identified patient have described what goes on in the family.

Mark, Christina’s stepfather, was the logical family member with whom to begin the conversation. Like many women who initiate family counseling, Liz
had warned the family counselor that he might not want to be involved. If the identified patient’s father or stepfather doesn’t want to be in counseling, then part of the family counselor’s job in the first session is to engage him in the process to maximize the possibility that the family will continue counseling.

FC: I want to thank you all for coming in today. I know how difficult it is to coordinate schedules, and I also think it’s important that you’re all here. As you all know, I spoke to Liz briefly on the phone. So, Mark, I’d like to start by asking you what is going on.

The family counselor did not identify the problem as Christina’s. A nonspecific question that addresses “the problem” or “what is going on” avoids the counselor falling into the trap of agreeing that the problem resides within the identified patient, rather than with the family. Questions like this one allow family members to define the problem that brought them to counseling in a variety of ways. It also conveys that the family counselor doesn’t see the problem as residing solely in the identified patient, even if the family members do.

Mark: Well, I’m not sure exactly why you wanted me here. I understand Christina’s doctor is worried about her weight, and Liz has always been concerned about weight and health. But I don’t see weight as a problem for either of them.

At this point, it was very tempting to ask Mark about how Liz’s concerns about weight and health affect their relationship and the family. But a structural family counselor would remain focused on identifying patterns of interactions, or dynamics, among family members in order to identify and then change the family structure.

FC: And what do you think about their worry?

Again, the family counselor’s goal was to avoid labeling the problem as being about Christina’s weight or even the possibility that an eating disorder is a multigenerational phenomenon in this family.

Mark: I think Liz looks fine. And Christina’s just being a teenage girl. My daughter worried about her weight when she was in high school, too.
At this point, it was also tempting to ask about his daughter. However, counselors cannot focus on everything at once, and the purpose continued to be to learn about the family’s structure.

FC: So it isn’t much of a problem for you.
Mark: No.
FC: What happens when Liz or Christina worries about weight?
Mark: I’m not sure what you mean.
FC: Well, do they talk about their weight? Argue with you when you tell them they look fine? Do they insist others eat the way they’re eating? Things like that.
Mark: No. Well, Liz sometimes goes on diets and won’t eat what the rest of the family is eating, and she doesn’t believe me when I tell her she looks fine. But the arguments are mostly about college.

This is not surprising. The issue in families is very rarely limited to the problem that brought them to counseling. In reality, it may have taken longer for the argument that exemplifies the dysfunctional impact of the family structure to emerge. For illustrative purposes, the process was foreshortened here.

FC: Christina and college?
Mark: Yes.
FC: Tell me about that.
Mark: Liz could tell you more about it. [Pause]
FC: OK, but at some point I’d like to hear your take on it. Liz?
Liz: I’m not sure what this has to do with Christina’s alleged eating disorder?

Family structure, like all aspects of its dynamics, serves to maintain the family’s homeostasis. Shifting the conversation from Christina’s doctor’s concerns to what was happening in the family may disrupt the family’s equilibrium and thus be perceived as a threat by family members. It is safe to assume, as the family counselor did, that Liz’s refusal to talk about the family apart from Christina’s problem was a homeostatic mechanism.
FC: Neither do I, at this point. But I suspect what goes on in the family affects everyone in the family. So I’d like to hear more about you and Christina and college.

While not wishing a confrontation with Liz, focusing on the presenting problem and the identified patient only serves to maintain the family’s equilibrium, preventing any meaningful, second-order change from happening (Chapter 4).

Liz: [Pause] Well, as you know, Christina is a junior in high school and needs to apply to college in the fall. [Christina sighed loudly, rolled her eyes, and looked at the floor while Liz ignored her.] Most of her friends used their spring breaks to visit colleges, and Christina refused. [She glared at Christina.]

Christina: [Glaring at her mother] They didn’t all. [At this point, Emma began pulling on Liz’s sleeve and holding the paper on which she had been coloring so Liz could see it.]

FC: Mark, is this what happens at home?

Mark: Usually they start arguing with each other.

FC: So Emma doesn’t distract Liz at home?

Mark: No. Well, not until after it’s been going on awhile.

FC: Liz and Christina’s argument?

Mark: Yeah.

Already, there was a pattern emerging. Liz made a statement about how Christina was not doing what she expected of her, adding the pressure that all her friends were doing what Christina refused to do, Christina contradicted her, and Emma interrupted the argument. The expression on Mark’s face suggested he had not put the pieces together prior to that moment. Note also that Mark and Martin Jr. were observers of the argument, at least up to this point.

FC: Do you ever try to stop the fight?

Mark: Every now and then. Mostly when I’m tired.

FC: What do you do when you get involved?

While it would have been interesting to hear about Mark’s internal processes, the structural family counselor remained focused on identifying dynamics that would provide information about the family structure.
Mark: I tell Liz to let it go. Probably not the right thing to do. [Smiles, but not with his eyes] But they get nowhere talking about it, and she doesn’t need to get all stressed out.

FC: I’m sorry, Liz gets stressed out when they argue? Or Christina? Or both?

Mark: Well, I guess Christina must get stressed out, too. But I was thinking about Liz.

It would have been very tempting to ask what happened between Mark and Liz when she was stressed. However, identifying interactions among all family members remained the counselor’s goal. And family systems, in an attempt to maintain equilibrium, will distract the family counselor from attempts to change the family dynamics.

FC: [To Martin Jr.] What do you do when your mom and sister argue?

MJ: Nothing.

FC: Do you watch?

MJ: Mostly if I’m there I leave.

FC: Where do you go?

MJ: My room or out if it’s [during the] day. I guess sometimes I tell Christina there’s no point trying to convince Mom. Later, when we’re talking.

FC: So when you talk to Christina about it, that happens later, not while Christina and your mom are arguing?

MJ: Yes.

We now have a preliminary picture of the family structure. Note that we have almost no information about the content of the argument itself or whether it has any impact on Christina’s relationship to food. As structural family counselors, those are secondary to determining the family structure. To review, the theory states that changing the structure will lead to other changes within the family and its members.
What we see is that Mark and Liz are not aligned in a parental subsystem. This may be because Mark is the stepfather and they agreed not to parent each other’s children. However, a structural family counselor would focus on the structure of the marital subsystem within the larger family system.

The observed structure of the Manning-Kelly family lacks a strong parental subsystem with clear boundaries around it, leading to several important questions. Was there distance and tension between Mark and Liz that the argument with Christina masks? This would be one triangle. Was Emma serving as a surrogate parent to distract and thus stop, though not resolve, the fight between her mother and stepsister when Mark remained disengaged from it? That would be a second triangle. Was she also part of a triangle with Mark and Liz, as Christina was? Did Martin Jr.’s distance serve as a mechanism that kept him from becoming part of a triangle or coalition within the family? And finally, that he talked to Christina alone about anything suggests the presence of a sibling subsystem clearly differentiated from the parents.

FC: [Continuing to address Martin Jr.] What do you think about what’s happening between your mom and sister?

MJ: [Smiling] I don’t really know.

FC: [Smiling also] OK, I’m going to let you off the hook for now. But I think you’re probably a very good observer, and I’m going to ask for your help after I’ve talked to your mom and sister.

MJ: [Nods]

FC: Christina, you haven’t had a chance to talk. And the rest of us have been talking about you especially and sometimes also your mom as though neither of you were here. I’d like to hear from you what goes on at home, but first I’d like to ask your mom to finish her description, if that’s all right with you.

C: [Nodding] Fine.

FC: Great. Liz, I think I interrupted you earlier, and I would like to hear about what’s going on about Christina and college.

Liz: I don’t know what else to say. Christina has got to decide where she wants to apply. Time is running out.

FC: It sounds as though you’re feeling some urgency about Christina’s college decision.
Liz: Of course I am. I care about her [Christina snorts], and it’s nearing the end of her junior year. And I don’t understand why she isn’t feeling the time slipping away.

FC: And how are your concerns playing out between the two of you?

Once again, the counselor avoided identifying Christina as the identified patient with the wording of her question.

Liz: Well, Christina seems determined to ruin her life. She refuses to talk to me about college, to even think about college. She says she doesn’t need to go [Changes to a sing-song voice] because she wants to be a housewife like Daniella and Barbara.

FC: And Daniella and Barbara are?

Liz: My ex’s wife [Note she doesn’t say Christina’s stepmother] and my sister [Again, not her aunt]. It’s ridiculous. [Voice rising in pitch and volume] She’s limiting herself so much, and I don’t want to see her dependent on some man to survive.

FC: So what do you do to help her understand that?

While being empathetic, structural family counselors do not address the feeling level of family life as part of their intervention. Liz’s intentions appear positive; however, the intervention would be on the family structure, rather than the content of Liz’s concerns and Christina’s resistance to them.

Liz: She’s got to think about college, plan some visits for the summer, begin thinking about her application essays. [Looks at Christina] At least talk to the college counselor at school.

FC: And you tell her this?

Liz: Yes.

FC: And what happens?

This is tracking sequences of behavior.

Liz: She’s defiant and disrespectful.

FC: How does she show you defiance and disrespect?
These words have meaning for Liz, but there is no way for the counselor to know what the particular meaning is. So once again, the focus returns to sequences of interactions, rather than detouring into meanings.

Liz: She refuses to do any of it. She says she doesn’t need to go to college because she wants to be a housewife. [To Christina] Barbara went to college.

FC: [Turning to Christina] You’ve decided you don’t want to go to college?

C: Yes. I mean, no.

FC: [Smiling] No to college or no to decided?

C: No to college.

FC: And you’ve decided to be a housewife and stay-at-home mom like your aunt and stepmother?

Liz identified these two women in terms of their relationship to herself. When talking to Christina, the counselor intentionally defined them in terms of their relationship to her.

C: I want to be a stay-at-home mother, like Aunt Barbara and Daniella.

FC: Oh, you want to be at home full-time while your children are growing up.

C: Yes. [Glaring at her mother] I think it’s better for children.

FC: And you don’t like that your mother works outside the home?

C: I don’t care what she does. I want to be home with my children.

FC: And that’s a perfectly fine choice, one many women make when they can afford to. Help me understand how it’s connected to whether or not you go to college.

C: I just don’t see why I should waste 4 more years in school when I don’t want to use it to get a job afterward. I might as well start my life now, start working.

FC: OK, so your life now is working, not having children?

C: Well not yet, no.
FC: And so your mother says you need to make college decisions because the next step in your life is college, and you don’t see any reason to because the next step in your life is work. And the two of you argue about what the next step in your life is. Then what happens?

A structural family counselor would stick to questions about family dynamics and the structure they portray. Changing those, rather than individual thinking, feeling, or behavior, is the goal. The assumption, as discussed earlier, is that changing family structure changes individual functioning. And so, while the counselor questions the assumption that they’re really talking about being a housewife and not working outside the home while raising children, the sequence of interactions, rather than the assumptions they make, are the focus of her questions.

C: She gets mad and yells at me and tells me I’m throwing away my life on some man.

FC: And then what happens?

C: I tell her what I do with my life’s none of her business. It’s my life, not hers.

FC: I see. So you’re arguing about who is in charge of your life?

C: Yes! That’s exactly it.

Liz: [Angrily, to the counselor] This is ridiculous. Of course it’s her life. But she’s obviously not mature enough to make reasonable decisions, and she’s going to regret what she’s doing. As her mother, I’m responsible for guiding and protecting her from herself.

The counselor could have allowed herself to become defensive and responded to Liz’s anger. Doing so, however, would have disrupted the sequencing of the family dynamics, so she decided to return to Liz’s frustration with her later.

With respect to the family structure, it appears that Liz recognized the formation of an alliance between the counselor and Christina and, perhaps anxious that it would become a coalition against her, turned her anger on the counselor to disrupt her conversation with Christina. If that is the case, then likely something similar happens at home whenever an alliance forms. In keeping with structural family counseling, the counselor decided to explore that possibility.
FC: Mark, when do you get involved?
Mark: As I’ve said, these fights can happen in Christina’s room.
FC: And you’re not there? Where are you?
Mark: I don’t know. Somewhere in the house.
FC: Does Christina call her mother into her room, or does Liz initiate the conversations?
Mark: Well, you’d have to ask them.
FC: So Liz doesn’t tell you she’s going to talk to Christina about her future?
Mark: No.
FC: What about the times you’re there when they argue?
Mark: Well, they usually start arguing somewhere else in the house, where I happen to be.
FC: And what do you do?
Mark: I try to let them work it out, but then if it’s going nowhere, I might explain to Liz that if she leaves her alone, she’ll come around.
FC: And then?
Mark: She gets mad at me for interfering.
FC: Liz gets mad? Or Christina?
Mark: Liz.
FC: How does she show you she’s mad?
Mark: Well, she says it’s none of my business, or I didn’t do such a great job with my own daughter.

An experiential family counselor (Chapter 7) would have empathized with how Mark might feel when Liz brings up his daughter. A structural family counselor would remain focused on the family structure as distinct from members’ emotions about each other.

FC: And Martin Jr.? Do you ever get involved?
MJ: I just leave.
Chapter 6: Structural Family Counseling

FC: You get out of there.
MJ: [Nods]
FC: Can’t help your sister?
MJ: Not when she and Mom are going at it.
FC: Do you and Christina ever talk about college when your mom’s not around?
MJ: Not really. But sometimes we talk.
FC: [Turning to Liz] So Liz, I’d like you to talk to Christina about college. Maybe trade places with Martin Jr. so you can sit next to her.

This was the invitation to an enactment.

Liz: Now?
FC: Yes.

When Liz got up, Emma followed her to where Martin Jr. had been sitting, while he got up and moved to the couch. Emma stood next to Liz after she sat down, on the other side from Christina.

Liz: You want me to start?
FC: Yes, please.
Liz: [To Christina] I don’t understand why you don’t want to go to college. Most girls your age look forward to living in a dorm, decorating their room, making new friends, taking more interesting classes than they could in high school.
C: [Not looking at her mother] It’s a waste of time. I’ve already told you that.
Liz: How can you know before you try it?
C: [Looking at her mother] Because I’m not like you. That’s what you would do if you were me.
Liz: Because it’s the smart thing to do.
C: No. You’d do it because it’s the perfect thing to do. You want to be the perfect mom with the perfect family and the perfect job and the perfect life.
Liz: And you are so angry, Christina, that you’ll ruin yours thinking it’ll hurt me. What did I ever do to you that was so awful? I took care of you and your brother, worked, and raised you after the divorce, created a lovely home for you and made sure you had all the things you needed, that you wouldn’t suffer because your father and I were divorced.

C: [To the floor] It’s all about her, always.

FC: [After a pause] Is this where it ends at home?

Liz: She always turns it back on me and then refuses to talk about it.

FC: Mark? Where are you at this point?

Mark: Sometimes I’m not even there. Liz’ll go into Christina’s room, and I hear them yelling and then a door slam.

FC: And when you’re there?

Mark: Well, I figure this is between the two of them.

Liz: Do you have any thoughts about it?

Mark: Well, yeah, I think Christina is smart and would do well in college. And I also think this is between her and her mother.

FC: Liz, what would you like Mark to do?

Liz: I’d like a little support. And a little fathering. It’s not like he met her yesterday.

FC: I’d like to come back to what goes on between you and Mark. But first I’d like to go back to the argument you were having with Christina. Let’s have Liz and Mark on the couch, and Martin Jr. and Christina back where you started.

This is to more clearly define the parental subsystem as separate from the child subsystem.

FC: Emma, would you like to sit with your brother and sister? I can pull a chair over there for you? [Emma shakes her head and holds onto Liz’s arm]

FC: Ok, maybe another time. [Turning to Liz and Mark] Liz, now start the conversation again with Christina about college. Start with, “Mark and I would like to talk to you about planning some college visits this summer.”
This is where the enactment began to become an intervention to change the family system. Placing the parents together and, ideally, the three siblings together, changed the boundaries and hierarchy within the family. Instead of Mark and Martin Jr. being observers who remained relatively uninvolved, Mark was physically moved into a coparenting role with Liz. This conveyed nonverbal and relationship messages about the two of them as parents, whether he said anything or not.

Similarly, positioning Christina with her siblings conveyed both a structural and hierarchical change that would theoretically reverberate throughout the family. Ideally, Emma would have gone to sit with them, removing her from a triangle with Mark and Liz. Her refusal to leave Liz’s side is a good example of how a counselor cannot change a family in one session.

Finally, Christina does have a biological father with whom she interacts frequently. When assessing the family, the counselor would either ask about him and his role in the family structure or, preferably, invite him and his second wife to a session.

The family counselor chose to invite Martin and his wife, Daniella, to a session. Below is an excerpt from that session. The family counselor also asked a colleague to join her as a cocounselor for the session because of the number of people in the room.

Inviting a cocounselor or counselor in the role of consultant to work with a family was common practice for many years. However, with changes in the way mental health is funded, it is no longer economically feasible for most families to work with two counselors. To illustrate structural family counseling, however, we included a second counselor when Christina’s entire nuclear family was present.

FC: Welcome. I’m glad you are all here together. I think it will help me get a better sense of the family as it is now and also learn more about your history as a family than seeing each nuclear family separately would have. And, as I mentioned when I suggested a session with all of us, I’ve asked my colleague, Family Counselor 2, to join us because, with so many people, two pairs of eyes and ears will be very helpful. So we’re all on the same page, last time, everyone who was here had a chance to talk about how they understand the reason you’re here. So I’d like to begin by giving you, Martin and Daniella, a chance to talk. But first, FC 2, is there anything you’d like to add?

FC 2: [Making eye contact around the room] I only want to say how nice it is to meet all of you.
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FC 1: Martin, would you like to start?

Martin: Why we’re here, right? [FC 1 nods] To tell you the truth, I’m not sure why we’re here. You said it might help Christina, and of course I’ll do anything to help my daughter. [Looking at Liz] But I’ll tell you, when she’s with us, she seems fine to me.

Liz: [Sighs, purses her lips, and shakes her head]

FC 1: [Nods] Daniella?

Daniella: I agree with Martin. Christina is a lovely young woman, and we’ve never seen any evidence of her having problems. When she’s with us, she’s outgoing and cooperative and fantastic with her younger sister and brothers. She does her homework and seems happy to be part of whatever the family is doing. So when she told us about this, that she was going to counseling, we wondered why.

FC 1: I see.

FC 2: [To FC 1] It sounds to me as though Christina is a different person at her dad and Daniella’s than she is at home with her mom and Mark. I wonder what accounts for that.

C: [Mumbles] It’s easier there.

Liz: Of course it’s easier there. You don’t live there.

C: They’re my family, too.

Martin: Liz, let her talk.

Notice the triangle, with Christina and her father, Martin, teaming up in a coalition against Liz.

Liz: [To Mark] Are you going to just sit there and let him talk to me that way?

Mark: He’s her father.

Remember that Mark not only had nothing to say while Liz and Christina argued in the first session, he also reported keeping out of their arguments at home.
FC 1: Martin, have you and Liz talked about the doctor’s concerns about Christina?

Martin: Liz told me about them, yes, and they sound very serious. But as I said, we don’t see any evidence of problems when Christina is with us.

Liz: Of course not!

FC 1: [Ignoring Liz and continuing to address Martin] What do you make of that?

Martin: Well, I think Liz is a wonderful mother. But she has her hands full with Emma and her work, and things seem a bit out of control over there.

Notice he did not mention Mark. Has he also noticed how uninvolved Mark is? Or, is he challenging Liz’s ability to mother effectively, as her verbal and nonverbal responses to his statements suggest?

Liz: Could we get through 5 minutes without you criticizing me?

Martin: I’m not criticizing you, Liz. You’re a wonderful mother. It seems, though, that things are a bit out of control at your house, at least with Christina.

Notice the triangle with Christina brought into what appears to be unresolved tension between Martin and Liz. She appears to be the identified patient in both her mother’s marriages.

Liz: And things are always so controlled at yours?

Martin: [Maintaining a calm voice tone in the face of Liz’s challenge] Why do you hear everything I say as critical of you?

Liz: Uh, because you’ve always criticized me? You’re the most critical person I know.

FC 2: Somebody may have mentioned this last time, but I’m curious why Martin and Liz aren’t sharing custody of Christina and Martin Jr.

FC 1: Martin? Liz?
Martin: When we first separated, Liz suggested it would be easier on the children if they lived at one of our homes and visited the other. And I thought she might be right.

FC 2: And now?

Martin: I’m not sure. But Christina is about to graduate from high school and Martin Jr. isn’t far behind. There doesn’t seem to be much point in revisiting our custody arrangement.

Liz: Seriously Martin?

FC 2: [To Martin] I’m curious what you were thinking when you said things seem a bit out of control at their mother’s.

Martin: It’s an observation.

FC 2: I’m unclear what you’ve observed.

Martin: Just that the doctor is worried about Christina’s health, and Liz has told me she’s concerned about Christina’s attitude about college.

FC 2: The doctor and Liz are worried about Christina. What about you?

Martin: Not really. She’s a bit thin, but she seems healthy enough to me.

Daniella: Honey.

Martin: What?

Daniella: [to FC 2] He tries not to, but he worries a lot.

Martin: Daniella.

FC 2: [To Martin] You don’t want anyone to know you’re worried?

Martin: I agree with Liz that all this fuss isn’t good for Christina.

FC 2: I see.

The exchange revealed quite a bit about the dynamics between Martin and Liz and between each of them and their new spouses. It is especially noteworthy that Daniella sat near Martin, leaned toward him, and occasionally interjected information he was not including, even risking his displeasure when she revealed he worried about Christina. Mark, on the other hand, sat across the room from Liz, did not follow the conversation with his eyes, and said nothing.
Chapter 6: Structural Family Counseling

unless someone directly asked him. He specifically declined to engage with Liz when she attempted to include him.

FC 1: Perhaps this is a good time to ask about the family’s history. Liz and Martin, you’ve been divorced for 8 years?

It would be a mistake for the counselors to fall into a discussion with the parents about whether or not the doctor’s concerns are valid.

Liz and Martin: [Both nod]

FC 1: What happened?

Martin: Pretty much what you saw here just now. We’re both strong willed and want other people to agree with us. And after awhile it seemed as though I couldn’t say anything without being accused of criticizing her.

FC 1: Liz?

Liz: That about sums it up, although I would add that I couldn’t say anything without being criticized by him. He acts like it’s all in my head—he’s so sane and I’m so out of control—but he lets people know when he’s displeased in a very indirect and hostile way.

FC 1: Uh-huh.

It is now clear that control was an issue between Martin and Liz. This exchange was also an example of how a counselor cannot address everything that arises during a session and must make choices. In this case, the counselor decided to stick to the topic at hand and not digress into an attempt to resolve the marital issues that remained between Liz and Martin. However, as you will see, it is important that she heard about them. Additionally, family counselors can always return to a topic of importance at a later time.

FC 2: Mark, let’s get you involved. When did you and Liz begin seeing each other?

Mark: Right after my separation, in 2004.

FC 2: So a couple of years after Liz’s?

Mark: Uh-huh.
And how soon did you meet Christina and Martin Jr.?

Almost right away.

And what happened in your first marriage?

Her parents moved here right after the kids were born, and the three of them kind of pushed me out of the family.

Your first wife and her parents?

Yes.

And how did you react to that?

Well, I was supporting everyone and Shoshana, my ex, was home with the kids. She didn’t go back to work until they were older. And there were three of them and one of me. I don’t know. What would you have done?

Sounds like you weren’t sure what to do?

I didn’t have much choice. You seem to think I had a choice.

And how did the marriage end?

Being structural family counselors, both chose to ignore the emotional tone of Mark’s responses and focused on the family structure.

She told me that she felt alone in the marriage.

And then?

And then I left.

How old were your children?

They were 16 and 18 when we split up. Our son had just left for college.

And did you share custody of your younger child?

My daughter? No. She told me she’d fight me for custody, and I wasn’t that close to my kids by then anyway.

Are you closer to your children now?

Not really. Jason’s away at school, and Ashley moved back home after college.
FC 2: Do you see them?

Mark: Maybe once or twice a year. Jason stays with his mother when he’s in town, and they’re both busy with friends.

FC 2: I see. And how old were Christina and Martin Jr. when you started living with their mother?

Mark: Well, we didn’t live together until we got married. But I was there a lot from the beginning.

FC 2: So your relationship with Liz began in 2004, and Martin Jr. and Christina are 14 and 17 now. They must have been about eight and 11 when you first met them?

Mark: Mm-hm.

FC 2: And Daniella, when did you and Martin begin your relationship?

Daniella: [Smiling] I think it was about a year after Martin and Liz split up, in 2003. Christina must have been 10 and Martin Jr. seven. They were so cute, and I remember thinking how lucky I was to have met a man who loved his children so much and was good to my son and also wanted us to have more children together.

FC 2: So you and Martin have other children, also?

Daniella: Yes, a boy and a girl, two and four And as I said, I have an older son who’s 11 now.

FC 1: Martin Jr.? Christina? I’d like to hear from the two of you also. What was it like when your parents split up and then meeting your stepparents and stepsiblings?

MJ: [Shrugs] It was fine. I don’t know Mark that well, but he’s OK. My brother Jamal is really cool.

FC 2: I’m sorry, I don’t know all your brothers’ and sisters’ names. Which one is Jamal?

MJ: He’s the 11-year-old.

FC 2: I see. Thanks. And he lives with you and Martin, Daniella?

Daniella: Yes.

FC 1: Christina?
C: Yeah, the little kids are all right.

FC 1: And what about your stepparents?

C: Daniella is wonderful. She takes care of everyone. And I like hanging out with her and my dad.

FC 1: [After a pause] Anything else you’d like to add about your family?

C: No, not really.

FC 1: Liz?

Liz: I don’t see where you’re going with all this. We told you a lot of it last time. We’re here because the doctor was worried about Christina, and I didn’t want to be accused of neglecting her, and then you pretty much insisted the entire family come in last time and even more of the family this time. Are we going to bring my parents and Martin’s in next time? And my sister and her family the next? I don’t notice that more people here is changing anything.

FC 1: So you’re pretty frustrated with how long it’s taking us to learn about your family. Tell me what you’d like to see change.

Liz: I already told you. [To FC 2] Didn’t she tell you? We’re worried that Christina won’t consider going to college, and we think the doctor is overreacting.

Daniella: She is awfully thin.

Liz: Stay out of this, Daniella.

Martin: Liz!

Liz: [Glaring at Martin] As I was saying, if there is a problem at all, it’s that Christina won’t even consider going to college. And talking about all the divorces isn’t going to change that.

Daniella: Martin, it’s time to say something.

Martin: No, no.

Daniella: If you don’t, I will.

Martin: [To Liz] Look, I’ve always thought you were a fantastic mother. But I don’t like the way you’re talking to Christina here.
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Liz: You don’t like the way I’m talking to Christina here? I’m trying to help her, which is more than anyone else in this room seems to be doing.

C: [Tears running down her cheeks] Mom, please.

Liz: This is between your father and me. [To FC 1] The children should not be here for this. I don’t know what you’re doing, but I do know it’s hurting my daughter.

FC 1: I suspect that Christina and Martin Jr. haven’t heard anything that surprised them. Although I wonder whether they knew you’re as isolated as you are?

Liz: Isolated?

FC 1: Yes.

Liz: I don’t know what you’re talking about.

FC 1: You turn to Mark for help, and he tells you Christina is your kid. You turn to Martin with your concerns about Christina going to college, and Martin tells you he’s concerned about how you talk to her. Christina talks about how close she is to Daniella, and both she and Martin Jr. say they hardly know Mark even though he’s your husband and has been in their lives for 6 years. Daniella stands up for Martin and he for her. Who stands up for you? And who do you feel close to? I don’t see that there’s anyone in this family who is there for you, who will listen to your worries. I would feel very lonely and besieged if I were in your position.

Liz: Oh.

FC 1: And I think part of what we need to work on is getting the pressure off Christina and Martin Jr. and maybe Emma, too, to be in the middle of what’s going on among their parents. And to do that, we need to work on a way for you and Martin to put what tore you apart in the past so you can work together as parents now and for Mark to stand up for you when you need him.

Notice how the family counselor got Liz’s attention through empathizing with her isolation before suggesting her hypothesis, or assessment, that the problem was lack of resolution of Liz and Martin’s marital issues. By doing
so, she also began to move from taking a history and observing dynamics to assessing the family and suggesting a goal. She was talking about restructuring the family to strengthen the generational boundaries between parents and children, allowing parents to resolve their conflict and freeing Christina from the role of identified patient. Family counselors need to establish trust, often through empathy and tolerating the clients’ intensely negative feelings, before clients can hear an assessment that may be unwelcome. And with families, the assessment inevitably concludes that the problem does not reside with the identified patient but rather with the family as a system.

STOP AND THINK:

1. What might it be like to be Liz during the session?
2. If you were one of the family counselors in this session, what other avenues might you have explored as the family brought up new topics tangential to the goal of the session?
3. What are the differences between the sessions with and without Christina’s father and stepmother?

CONCLUSION

In this chapter we explored the concepts of structural family counseling, as well as the methods used by structural family counselors. Then we applied them to the Manning-Kelly family.

Structural family counseling elaborated upon the concepts of boundaries and triangles while adding the importance of hierarchies to family functioning. The practice of structural family counseling includes questioning family assumptions, tracking family dynamics, and inviting the family to an enactment during which the counselor can facilitate interactions that change the family’s structure. Structural family counselors believe that changing the family structure leads to both changes in family functioning and the mental health of family members.

The Manning-Kelly and Jones families sessions contain examples of the important concepts of structural family counseling. Excerpts from family counseling sessions with the family illustrate the tools used by structural family counselors to facilitate change.
Chapter 6: Structural Family Counseling

In the next two chapters, as in the previous one, we examine theories and methods of family counseling and demonstrate their use with the Manning-Kelly and Jones families. As you read about these theories and methods, note the similarities and differences to structural family counseling.

Extend Your Learning:

1. In small groups, role play an enactment of an interaction you imagine would take place between Christina and Liz or another subgroup of the families discussed in this book. Have observers comment on the structures and boundaries they see in place.

2. Watch the film, *Silver Linings Playbook* (2013). In a written assignment or in a group discussion, note the boundaries and family structures you see in that family. Are these boundaries clear, rigid, or diffuse? How do the boundaries appear to affect family functioning? Which boundaries need to be changed in your opinion? Why? What alliances, coalitions, or examples of triangulation do you see? What might an enactment look like in this family? Are there any examples of enmeshed or disengaged relationships in this family? Explain.

STOP AND THINK:

1. What have you learned about the Manning-Kelly and Jones families in this chapter?
2. What assumptions have you made about the Manning-Kelly and Jones families?
3. How do you distinguish what you know from what you assume?
4. What else do you need to know about these families in order to practice structural family counseling with them?

In the next two chapters, as in the previous one, we examine theories and methods of family counseling and demonstrate their use with the Manning-Kelly and Jones families. As you read about these theories and methods, note the similarities and differences to structural family counseling.

REFERENCES


FOR FURTHER STUDY