nizes her behavior, and she may lose therapeutic perspective. The only shield that may protect the therapist is a systemic epistemology. She must work with the theoretical and experiential knowledge that the family is a multibodied single organism.

13 Complementarity

The Kellerman family have functioned for many years with an arrangement that the members feel is the *cuadro* of the family. The father is somewhat isolated and the mother somewhat hyper, but they have evolved a style of living together that works. They have areas of shared interest: they are both involved in political issues, like music, and enjoy each other when they visit friends. The daughter, Doris, has grown up as a responsible person, always being a good student, very sensitive to the "vibes" of other people, and close to her mother, in whom she confides and who confides in her when the father becomes too involved in his business. The mother and daughter find support and enjoyment in each other's company, but the daughter is also sensitive to the father's vibes and she remembers outings with him when she was younger that she enjoyed as a very special treat. The son Dan, who found this threesome arrangement quite tight, developed an interest in sports and has an extrafamilial world of friends with whom he shares these "non-Kellerman" areas of interest.

It all worked out well until the daughter finished high school and, searching for a non-Kellerman world of her own, went to Israel for a year to live in a kibbutz. The family organism, proceeding according to its previous rules, recruited Dan to maintain the appropriate distance between the husband and wife. The boy was reluctant to change his extrafamilial world for a higher concentration in the world of the family. A

this point, when the three-person family organism demanded a transformation from its previous four-person shape, the remaining family members insisted on more of the same. The result was that the mother-son dyad developed conflicts, the son "accepted" the label of the identified patient, the father increased his isolation and guilt, and the daughter returned home to check and repair the system. They then added a family therapist to get out of their mess.

In this fable each member of the family takes a skewed view of the whole. Each one declares, "I am the center of my universe." The father declares, "The problem is probably me, because I am not very emotional." The mother says, "I am very vulnerable to the negative aspects of the marriage relationship, and I am the one who is having the most reaction." Doris thinks, "My mother has a need that I have to fill, and this is one of the reasons I had to come back home." Dan says, "My mother is always telling me, 'You're just like your father.' " The four members see themselves as cause or as effect: "I am the entity—a whole. I contain myself, the present surrounds me and impinges on me. I respond to this context, or I manipulate it, because I am the focus." But it is clear from only one session that four members-as-parts are necessary to maintain the appropriate distance which ensures a style of life that feels harmonious for the family. The actions and transactions of each one of the family members are not independent entities but part of a necessary movement in the choreography of a ballet. The movement of the whole needs four constrained dancers.

"You have to be a delinquent," the judge tells the whore in Jean Genet's *The Balcony*. "If you are not a delinquent, I cannot be a judge." The same recognition of the importance of mutuality and reciprocity is seen in the *I Ching:* "When the father is a father and the son is a son, when the older brother plays his role of older brother and the younger, his role of younger brother, when the husband is really husband and the wife a wife, then there is order."[1] But as Lewis Thomas observes: "The whole dear notion of one's own Self—marvelous old free-willed, free enterprising, autonomous, independent, isolated island of a Self—is a myth: Yet, we do not have a science strong enough to displace the myth."[2] Clearly, the idea of human beings as units remains at war with the notion of the interdependence of all things.

Yet in this war between concepts of the self as a unit and the self as part of a whole, there is a complementarity of opposites. As Fritjof Capra notes, the Eastern mystics become aware that "the relativity and polar relationship of all opposites are merely two sides of the same reality: since all opposites are interdependent, their conflict can never result in the total victory of one side, but always be the manifestation of the interplay between the two sides." The conflict between the ideas of the individual as self and the individual as part of the whole is the result of an unnecessary dichotomization. Niels Bohr tackled an impossible dichotomy when he introduced the notion of complementarity to physics: "At the atomic level, matter has a dual aspect: it appears as particles and as waves. Which aspects it shows depends on the situation. In some situations the particle aspect is dominant, and in others the particles behave more like waves." But the particle and the wave are "two complementary descriptions of the same reality, each of them being only partly correct and having a limited range of application. Each picture is needed to give a full description of the atomic reality and both are to be applied within the limitations given by the uncertainty principle."[3]

If this analogy is carried to family therapy, the self is seen as both a whole and a part of a whole—"both a particle and a wave." "Which aspects it shows depend on the situation." In individual experience, the focus is on the individual as a whole. But when the complementary aspects of the self become parts of a whole, the other parts of that whole, which also are discrete entities, are seen as affecting the behavior and experience of all parts. Beyond the parts, there appears a new entity: an organism, multibodied and purposeful, whose parts are regulated by the rules of the whole. The individual may not experience this multibodied organism, precisely because he forms a part of it. Still, watching a football crowd, one is reminded of Lewis Thomas' observation that "ants are so much like human beings as to be an embarrassment."[4]

One of the therapeutic goals in family therapy is to help family members experience their belonging to an entity that is larger than the individual self. This operation, like the unbalancing technique, aims at changing the hierarchical relationship among family members, but this time by challenging the whole notion of hierarchy. If the family members can achieve a way of framing their experience so that it spans longer periods of time, they will perceive reality in a new way. The patterns of the whole organism will achieve salience, and the freedom of the parts will be recognized as interdependent.

This concept is foreign to common experience. People generally experience themselves as acting and reacting. They say, "My spouse nags me." "My wife is overdependent." "My child is disobedient." From the castle of the individual self, they see themselves as besieged and as responding to that siege. At a session with the Kingman family, composed

of the husband and wife and a young psychotic daughter who is almost mute, the therapist asks the girl how long she has been in the hospital, and both parents answer simultaneously. He asks the parents why they answered when he asked their daughter a question. The mother says that the daughter makes her talk. The father explains that since the girl is always silent, they speak for her. "They make me silent," the girl contributes, with a vague smile.

Each of these people has a blind-man-with-the-elephant version of the same reality. Experientially, each of them is correct, and the reality that each defends is the truth. Yet many other possibilities exist in the larger unit.

People in Western culture are constrained by the same sequential grammar. They too tend to see the girl's silence as moving the parents to answer, or the parents' speed as silencing the girl. At one level, everyone knows that these are two sides of one coin. But they do not know how to see the whole coin, instead of heads or tails. They do not know how to "circle around the object and get a superimposition of multiple single impressions" when they are part of the object they must encircle.[5] This requires a different way of knowing.

To facilitate this different way of knowing, the therapist must challenge the family members' accustomed epistemology in three respects. First, the therapist challenges the problem—the family's certainty that there is one identified patient. Second, the therapist challenges the linear notion that one family member is controlling the system, rather than each member serving as a context of the other. Third, the therapist challenges the family's punctuation of events, introducing an expanded time frame which teaches family members to see their behavior as part of a larger whole.

CHALLENGE TO THE PROBLEM

The therapist's first challenge to the certainty of an identified patient apart from context, may be simple and direct. An agitated, depressed patient, Mr. Smith, started the first family session with Minuchin saying, "I am the problem." "Don't be so sure," the therapist told him. The rest of the family agreed with the patient's formulation: "I am the world, and I am the problem."[6] In effect, they were saying, "You are depressed and upset. You alone need help." The family therapist observed the same data, but saw it in terms of how people act and are activated in a system.

Similarly, when Gregory Abbott starts a family therapy session with his wife by saying, "I am depressed," the therapist's first question is not an acknowledgment ("You are depressed?") but a challenge ("Is Pat depressing you?"). Simple questions like this challenge the way people experience reality. They introduce uncertainty.

Therapy starts with a shared consensus of family members and therapist that something is wrong. The family is in therapy because their way of being has failed them, and they want to search for alternatives. Yet because they are wedded to their accustomed truths, they will resist alternatives even while seeking them. The therapist, who occupies the hierarchical position of the expert, may with a simple statement—such as, "I see other factors in the family that contradict your view that you are the patient"—put a different light on the shared experience of an identified patient. The response of the family and the identified patient himself may be to restate their reality that, "He is the patient."

In some families the symptoms are clearly borne by one person, as in psychosomatic families or families with a psychotic member. In such cases the therapist can use the authority of his expertise, stating that in his experience with families like these, the families are always involved in the maintenance of the problem, and are frequently involved in its origin. He may add, "I know you cannot see it that way yet, but stay with me for a little while, just on faith." He may suggest, "Talk among yourselves about the way the family supports or contributes to Janie's problem, because you know more about each other than I do." Or he may treat the situation like a detective story: "You have the clue. I will listen while you explore it."

Sometimes the therapist will challenge by expanding the problem to more than one person: "You have a problem in the way you relate." A parent who brings an unmanageable child is confronted with the reframing, "You and your daughter are involved in issues of control." An identified patient may be described as the family healer, since the family's concentration on him saves the siblings, or as the detourer of problems between other family members. A therapist may work with paradox, introducing confusion into the family reality by suggesting that the symptom should be maintained, since it serves the health of the family as a whole.

All these presentations block the routine response to the identified patient as if he were a whole autonomous entity. The therapist challenges the family presentation of the identified patient as a possessed

person. But since the family came to therapy because their ways of dealing with the identified patient have not worked, the therapist only makes explicit what the family members already know.

CHALLENGE TO LINEAR CONTROL

The therapist challenges the notion that one member can control the family system. Each person is rather the context of the other. In the case of the agitated depressed patient, Mr. Smith, the second question Minuchin asked, after "Don't be so sure," was, "If your problems were caused by somebody outside of you, by somebody in the family, who do you think would cause you to be so depressed?" Again, the therapist was not introducing new data. He was introducing a different way of punctuating reality.

The response to the question, "Who is involved with you in a reciprocal relationship that supports your symptoms?" is usually some variation of "I own my illness." Although a person may blame his family for a thousand and one issues, he does not give them the control of his symptom. "I own my depression" is in essence a statement of the integrity of the self. Moreover, only the individual can report the felt experience. To accept mutuality of ownership of a depression would seem to be a surrender of self. Therefore, the therapist tries to induce the recognition of a mutuality of context rather than of ownership.

In the Ibsen family, consisting of a father, mother, and 26-year-old son with severe obsessional symptomatology, the son spends two to three hours in rituals before he can cut a piece of bread. So every night the mother cuts his bread for the next day. The therapist asks the family who composes the music that they all dance to. After some hesitation, the young man says, "I think I do." The therapist suggests that he should move, sitting not between his parents but in front of them, so that he can see how they dance to his music. Later the therapist asks if the son has noticed that his mother is obsessed with cutting bread for him every night. Perhaps, the therapist suggests, he is dancing to her music. This sequential left-and-right attack on the discreteness of self creates havoc in the family's well-formulated concept of the ownership of the problem. Once they have grown comfortable with the concept that the parents dance to the son's music and the son dances to his mother's, the therapist may then want to confuse them further by pointing out how the dance of the mother and son protects the father from involvement.

There is a generic technique for buttressing the concept of reciprocity: the therapist describes the behavior of one family member and assigns

the responsibility for that behavior to another. The therapist may say to an adolescent, "You are acting like a four-year-old," and then turn to the parents and ask, "How do you manage to keep him that young?" Or the therapist may say, "Your wife seems to control all the decisions in this family. How did you engineer all of that work for her?" In this technique the therapist is, in effect, affiliating with the person he seems to attack. The family member whose behavior is described as dysfunctional doesn't resist the description because the responsibility is placed on another.

The same technique can be used in signaling improvement. "Now you are acting your age," the therapist may say to the child, and then shake hands with the parents, saying: "Clearly you did something that allowed John to grow up. Can you describe it? Do you know what you did?" By pushing the family to own the change of one of its members, the therapist encourages the system as a whole to accept the notion of the reciprocity of each of its parts.

The individual therapist tells the patient: "Change yourself. Work with yourself so you will grow. Look inside and change what you find there." The family therapist makes a seemingly paradoxical demand: "Help the other person to change." But since change in a person necessitates change in his context, the real message is, "Help the other to change by changing yourself as you relate to him." The concept of causality loses its rough edges of blame in a conceptualization that posits the indivisibility of context and behavior. Both the assignment of responsibility and the consequent allocation of blame recede into the background of a more complex design.

CHALLENGE TO PUNCTUATION OF EVENTS

The therapist challenges the family's epistemology by introducing the concept of expanded time, framing individual behavior as part of a larger whole. Although this intervention rarely achieves its aim of changing the family's epistemology, family members may catch a glimpse of the fact that each of them is a functional and more or less differentiated part of a whole.

In families, an individual may change his behavior for a while without affecting the organism as a whole. For instance, in a lunch session with the family with an anorectic, the parents may alternate between a demanding position and a protective one. But the result is an equal balance, which keeps the child triangulated and noneating.

In the Kellerman family, the husband starts the session as distant,

unemotional, and immobile, while the wife requests proximity. When the husband is impelled by the therapist to offer proximity, the wife responds with a phobia about being touched, keeping the previous distance. Individual behavior changes from moment to moment, but the system remains the same.

Traditional psychoanalysis, challenging the notion of willful behavior, promotes the illusion of an internalized context. The interpersonal school, field theory, gestalt, and relationship theories keep the context outside, limiting one's individual freedom without challenging one's individuality. Family therapy, by introducing the self as a subsystem, opens the vista of the individual as a part of a larger organism.

The techniques of introducing an expanded framework are generally of a cognitive nature. The therapist may point out to family members that their transactions are rule-governed, saying: "You have been doing the same dysfunctional dance for ten years. I will help you look at things differently. Maybe together, we can find other ways of dancing."

Pointing out the isomorphism of transactions serves to indicate that the behavior of the family obeys rules which transcend the individual member. For example, in an enmeshed family a youngster sneezes; the mother hands the father a handkerchief for him; the sister looks in her purse for a handkerchief. The therapist says, "My goodness, look how one sneeze activates everybody. This is a family that makes helpful people."

In another case the father disqualifies one daughter a few minutes after all the siblings have jumped on her. "This is a family that makes scapegoats," the therapist says.

The Abbotts are a couple in their thirties who have been separated for a month, the husband having left his wife and two very young children and moved into an apartment to "find himself." Three minutes into the session, the husband responds to a protective statement by the therapist.

Gregory: You seem very compassionate. I feel your warmth, so I feel more comfortable. What's happening with me right now with regard to my relationship with Pat is, I'm feeling less depressed having gone—being out of the house.

This statement is made from the perspective of "I feel your warmth, so I feel more comfortable. I'm feeling less depressed." The husband positions himself at the center of his reality and contemplates a universe that exists only because he is observing it and reacting to it.

Minuchin: Are you saying that Pat depresses you?

The therapist answers with a statement of relationships. Between these two statements there is an epistemological schism. In Gregory's world there is a clear boundary between himself and the surrounding world: if a tree falls in the woods and he is not there, the tree has not fallen. Gregory's reality is what is mapped by his senses and reconceptualized by him. The therapist's question, "Does Pat depress you?" challenges Gregory's epistemology by saying, in effect, "You are not a whole; you are a part of your context." The therapist's statement, couched in necessarily sequential language, is not yet dealing with a holon, but it expands Gregory's universe to include an interactional context: Pat.

The rest of the session revolves around an attempt on the part of the therapist to erode the certainty with which the couple conceives of the reality of their individual relationship by introducing the notion of complementary transactions between parts of a holon.

Gregory: I don't give her that responsibility, you know; I don't lay that on her. I feel depressed and I felt really depressed for some time in the situation.
Minuchin: Hold it! You said you were depressed at home, you left home, and you are less depressed. You are saying that Pat depresses you.
Gregory: No, I really take responsibility for being depressed. I can't put it on her.
Minuchin: For a moment, follow me. You are depressed, and Pat does not help you with your depression.
Gregory: Right.
Minuchin: Why doesn't Pat help you?
Gregory: I guess I feel that a lot of my needs weren't being met. I felt very frustrated. I felt very deprived.

Gregory "owns" his depression like a badge of honor. Married for ten years, he nevertheless considers himself devoid of a family context; neither wife nor children are responsible for or contribute to his depression. The therapist accommodates to Gregory, accepting his wholeness, but

suggests a family context for his depression: Pat is not the cause, but since she is not helping him, the void of her response contributes to his condition. Gregory's world is expanded to include at least his interaction with his wife. Gregory's response is a masterpiece of "I feel" statements, but he accepts the fact that he is responding to an impact from outside.

Minuchin: Can you be more concrete? I don't know in what way Pat isn't helping you.
Gregory: We had planned a vacation in Florida in December, and we had a lot of problems dealing with getting away on vacation or arranging for babysitters.
Minuchin: You wanted to have a vacation with Pat alone, without the children?
Gregory: Yes, with Pat alone. The longest we've gone is for three or four days at a time once or twice, and I wanted to take a longer period of time and go to Florida. Like a week.
Minuchin (to Pat): How did you see that enterprise?
Pat: First of all, I want to interrupt you, because we've gone for longer than three or four days and it was ten days you wanted to go. I'm very picky about those things because it's very painful for me to leave the kids at this age, or maybe it will be later on too, and I felt that I was willing to go because he wanted to go and it had been an issue for such a long time. It was just very hard to leave them.

Pat's reality is a reality of responses. Caught between the necessity of allocating priorities to the needs of her children and those of her husband, she feels exploited by his demands. In this family, the spouse subsystem and the parental subsystem, which doesn't include the father, are in conflict.

Minuchin: So, you're depressed also?
Pat: I'm very depressed now. I've been very depressed since he left.
Minuchin: What does Gregory do to depress you?
Pat: He talks about leaving frequently. And I feel that he doesn't want me for me. That he's talking in a very distant kind of way—"I want to expand and enjoy myself, take care of myself, and do exciting things and have a good time, and if it's not with you, it can be with someone else."
Minuchin: I want to force both of you to think concretely. *(To Pat.)* What does he do to you that makes you feel like you want to kick him?

(To Gregory.) What does she do to you that makes you feel like you want to leave? Talk with each other about that.

In the painful void of the separation, both spouses increase their *I* view of the world. The therapist requests that each observe the other as a context for self, and he initiates a transaction between the spouses.

Pat (to Gregory): You talk to me as if you are presenting a history of some other family, but I don't get any sense that you really want me. And you talk about wanting certain things in a very arrogant, cocky sort of way, about you getting filled up and you having an independent life; and I want to hear from you, "I want you, I need you," and I don't hear it. I hear you saying, "Let's have some kind of joint therapy," but it sounds very intellectual, very distant, and you are happier and relieved to be away from the situation. I guess I want you to suffer and want me back, and I don't see it.
Minuchin: He has a much easier time. You are with the kids. He doesn't need to be with the kids. He takes himself out and you get all the problems.

Whereas "Pat's family" functions as a complex system, including individual, parental, and spouse holons, both spouses have agreed to keep "Gregory's family" functioning as a simple system, with only individual holons in interaction.

Pat: Well, that's what I resent. I want him to want me so desperately that he is willing to put up with all the hassles and responsibilities and the things he doesn't like because being together would be the only thing that he wants.

In their world of integer selves, neither spouse sees Gregory's self as being a part of the children's context, with obligations and responsibilities toward them. Also in Pat's conceptualization, love doesn't seem to occur in a context between people. It is a feeling that emanates from the lover to the loved, like the warmth of the sun, without expecting anything back. With this concept of reality, there is nothing that she can do to produce change except wanting things to be different.

Minuchin (to Gregory): What are the kind of things about her that would make you feel like she wants you to feel?

The therapist continues avoiding interventions that are related to individual dynamics, instructing the husband to think about his wife as a context for his own changing.

Gregory: Her fears, her worries about the children if she's away from them, depress me, and that's something that I would like to change. To feel some freedom, so that when we are both together, we are really together, and if we're with the kids, fine, we're really with them. But I don't feel that I have her really to myself when we're alone. It's like the kids are still there because they are still in our minds.
Minuchin: So, you must be doing something that is not exciting to Pat that she needs to take the kids with her when she is with you. Now, what do you do?
Gregory: You know she—
Minuchin: What you are saying is that in some way or other, she finds that being with you is boring, and she prefers the kids to you. Are you a boring person?
Gregory (laughing): I think that's great. I really never thought of it in those terms. You know, I find it's funny.

The therapist interprets the formation of the overinvolved mother-children subsystem as a "result" of the failure of the spouse subsystem. This shift of perspective has a freeing effect on Gregory. Perhaps he could change the relationship of Pat and the children by changing himself in the spouse holon.

Minuchin: Is he a very boring person?
Pat: I wouldn't use the term "boring." But he's not there, is the feeling that I have. He's not there emotionally.
Minuchin: Then you want to kick him back.
Pat: I guess I chronically want to, so it's hard to sort out how much of it is that.
Minuchin: You chronically want to kick him?
Pat: Yes.
Minuchin (to Gregory): How does she do that?
Gregory: I feel her anger often, being irritable, kind of short, kind of stern, matter of fact, and also sexually not available. Tired, getting more tired and going to bed earlier, just not affectionate, not bubbly, or into really being with me. You know, making contact with me.
Pat: Neither are you.

Gregory: I feel especially in the sexual area I approach you very often, very frequently, and I really feel your lack of interest, and it has gotten better at times, but the majority of the time I'm pursuing you.
Pat: And I don't accept your saying that. I think that I've been variable and you've been variable, but I really don't agree that you have been any more available than I've been, and I've been aware of having sexual feelings toward you at times when you've been totally rejecting me and talking about leaving.
Gregory: And I remember we talked about it, how I started turning off when I kept feeling rejected by you.
Pat: And I feel that I kept turning off when I felt rejected by you.
Minuchin: I want you to continue.

The transactional focus moves the couple toward a kind of symmetrical seesawing in which equilibrium is achieved by alternating one-upmanship. The spouses maintain their focus on the individuality of two units responding sequentially to each other. The therapist experiences the couple's signal that they have reached their usual threshold of nonresolution and are ready to move away to a different issue. He keeps them together, hoping that in their stress they may begin to explore alternatives.

Pat: A few weeks ago it really seemed as if things were starting to crystallize when we started talking about how absurd it was because we were both wanting the same thing, to feel love by the other one, and I really started to feel closer to you and found you more appealing and you were softer and I was liking you better softer and you seemed to be wanting affection also, and then that's when we had one more fight and you were just ready to go and you just left.
Gregory: That was one particular day, and I felt you really being motivated and really warm and I let down also. And one little argument did make me feel angry again because of all the things in the past, especially the Florida thing.
Pat: Gregory, it wasn't one day. It was a few days, and then you went on a vacation alone three weeks ago by yourself and that's why it got so cut off at that point.

The wife starts contact by describing the development of a transactional pattern leading to intimacy. She then reverts to a grievance, to which Gregory accommodates by moving to a symmetrical escalation, and the wife accommodates to the husband, and so on.

Minuchin: I have been keeping a score card, and I would give each one of you three points: you are pretty good, you kicked him three times, and you kicked her three times. Since you both tied your score, continue and try to get out of it.
Gregory: I feel confused. I feel very hot right now and anxious and pressured.

The therapist describes the couple's transactional pattern and insists on change in it. The husband counters with a regression to the self as a unit.

Minuchin: You don't understand what I'm talking about. You know, I'm fascinated by the fact that you don't understand something very simple. I am saying, "Do begin to talk with each other in such a way that the other person doesn't feel like kicking you back."
Gregory: I feel like I'm wanting to be accepted by her right now.
Minuchin: She can't. She can't if the only thing that you tell her after kicking her is that you want her to accept you. You need to do better than that. You need to do it in such a way that she should want to.
Gregory: I'm wanting you to remember my softness, my vulnerability, and my loving for you and my loving for the kids, and I'm feeling confused right now. I'm aware of hurting you and I don't like that feeling, and I'm aware of keeping my distance and I don't want you to know that. I'd like to cover it up.
Pat: I am very afraid of you leaving me.

Whereas the spouses' language is still sprinkled with *I* statements, they have accepted the fact that they are the context for each other and that, as such, they can influence their spouse's behavior by behaving differently to that person. The therapist's insistence on the reciprocity of the spouses' behavior and, indeed, the indivisibility of the spouse holon relieves each of its members of the total responsibility for the holon's reality. Both of them, as parts, are needed for maintaining or changing the holon's choreography. Later on the husband talks about a day that he spent with his two children in his apartment.

Minuchin: How did that work?
Gregory: It was a very good experience because I realized that I had more patience and more tolerance with them when I was doing it myself, and I was in control of the situation and they responded to me and I fed them and changed diapers. You know, it was very easy.

Minuchin: You were with both kids?
Gregory: Right. And I wasn't resentful, and I felt that I could take care of them in my own way without her criticism that I will do it wrong.
Minuchin: When you take care of the kids, your wife is your supervisor?
Gregory: Well, if I'd do it my way, and she would say you can't do that, I'd start backing up.
Minuchin: I'm pleased that you had that experience of spending one day alone with your children.
Gregory: I am, too.
Pat: I was, too. I came home that day and I was really very moved by seeing what was going on, and I had the feeling that it is unreal and crazy that we're separated, because he was very soft with them and very involved and stayed for another two hours and we fed them dinner together and played with them together. He said it was because he didn't have any expectations of me, but he was very easy and soft with me and I really felt good with him. But then he left.
Minuchin: He says that he can be a father when he is a father, but he can't be a father when he is your spouse.
Pat: He said since we're separated he feels more like a father.

The organization of this family is such that the spouse and parental holons are conceived as in conflict, robbing from each other. This leaves as a "solution" for Gregory to be a father only when he is not a husband.

Minuchin: And what happened when you were together?
Pat: He just wasn't there. I think it became a cycle. He just went out of the room if the kids and I were there.
Minuchin: It is a cycle in which you participate.
Pat: But he kept saying no, I don't want to spend more time with the kids, and so if we were home with the kids, I was the one that was expected to be with them.
Minuchin: It's also true that you took the kids and spent a lot of time with them when you felt alienated from him, and you (*to husband*) felt that when she was with the kids, she was not giving you anything, but you supported it because it gave you more time for yourself.

The adult members of this family have managed to defend their individuality against the encroachment of the family system with the catastrophic result of being themselves diminished by the process of belonging. In families that find themselves in this or similar situation, it is

useful to give a task to the husband to take care of the children for a period of one or two weeks as a way of experiencing the sense of belonging to the parental holon. It is also useful for the spouses to meet with the therapist without the children during this time to develop a sense of belonging to a holon larger and richer than each one of them.

Ernest Frederick Schumacher points out that if man ever wins the battle with nature, he will be on the losing side.[7] Similarly, family members must understand experientially that if they win the battle with the family, they will lose their belonging. To get this point across, the therapist must be able to expand the family members' focus of attention, teaching them to see not a movement, but the whole dance. They must experience not action, response, and counterresponse, but the whole pattern.

14 Realities

A family has not only a structure but also a set of cognitive schemas that legitimate or validate the family organization. The structure and the belief structure support and justify each other, and each can be a therapeutic point of entry. In fact, a therapeutic intervention will always affect both levels. Any change in the family structure will change the family's worldview, and any change in the worldview will be followed by change in the family structure, including change in the use of the symptom to maintain the family organization.

A family coming to therapy presents only their narrowed perception of reality. They may be defending institutions that have lost their utility, but in their worldview, nothing else is possible. They want the therapist to repair and polish their accustomed functioning, and then hand it back to them, as it were, essentially unchanged. Instead, the therapist, a creator of worlds, will offer the family another reality. She will use only the facts that the family recognize as true, but out of these facts she will build a new arrangement. Testing the strength and limitations of the family constructions, she will build upon their foundation a more complex worldview, one that facilitates and supports restructuring.

THE FAMILY'S WORLDVIEW

In 1952, Minuchin was in Israel interviewing a recent immigrant, an adolescent Moroccan girl, who had vague psychosomatic complaints. In