

**INTRODUCING SYSTEMS THEORY USING *ORDINARY PEOPLE*:
A RESOURCE FOR EDUCATORS**

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Dedication

For Joel

Abstract

The intent of my Master of Counselling final project is to offer instructors a teaching resource, based on a classic film, for when they want to shift their students' conceptualizations of clinical cases from an individual focus to a family systems perspective. Within this project, the film *Ordinary People* (Paramount Pictures, & Redford, 1980) is introduced as a strategy to guide instructors in helping students to identify and analyze how patterns of behaviour within a family maintain problems, and how, from a systemic view, those patterns may be adapted to better serve each member. With this foundational knowledge of family systems theories, students have increased options for understanding their client's issues, and creating appropriate treatment plans.

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Chapter 1: Overview and Introduction

Based on what appears to be a lack of family systems theoretical training among graduate-level counselling programs in Canada, this project provides university instructors with a tool to promote systemic theoretical thought in their students when individual theories of change have been the primary focus of their training. Using the film *Ordinary People* (Paramount Pictures & Redford, 1980) for illustrative purposes, I present a variety of teaching strategies that can be used in the classroom as an effective addition to textbook learning. A combination of both individual and systems-focused theoretical knowledge provides students with a solid foundation to develop their therapeutic style.

In this chapter I present a summary of the project, including an explanation of my interest in the topic and a rationale for completing a project of this nature. This is followed by a brief overview of the development of family therapy, and the core elements shared by all family systems theories. In the remaining paragraphs I outline the applied portion of the project (Appendix A), clarify frequently used terminology, and provide an outline of the project's organization.

Statement of Interest

I entered the Master of Counselling program at the University of Lethbridge with the intention of working with adolescents in individual counselling. As I came to learn more about counselling theories, however, my focus began to change. Instead of being interested primarily in the individual, I started to realize the profound impact one's family could play in contributing to, and maintaining problems, as well as in implementing change. I wondered how working with a client's family could transform the way the

individual and the family system functioned. Based on my curiosity, I sought out a practicum within a community agency that focused on family therapy. It quickly became apparent that my education, based more prominently on individual counselling, would not be sufficient in an environment that sought to promote change at the systemic level.

My examination of graduate counselling programs in Canada reveals that I am likely not alone in my clinical struggle. Out of 40 programs I identified, across nine provinces, roughly half appear to require system-specific training (i.e., three credit hours or more) of graduate students. In my quest to prepare for my practicum placement I learned rather quickly that shifting my thinking from an individual perspective to one that considers the individual within the system is not without its difficulties, and was a problem experienced even by early pioneers in the field (Kerr, 1981).

Project Rationale

Researchers have found evidence to suggest that including family members in the treatment of various psychological problems is efficacious, and interventions aimed at the family may effectively prevent psychopathology in the first place (National Research Council and Institute of Medicine of the National Academies, 2009). In addition, including one's family in therapy may have the added benefit of strengthening the social supports that promote psychological well-being (Pernice-Duca, 2010). Including family members in treatment, however, requires a distinct model of treatment with objectives unlike those of other, more individually focused counselling theories.

Without specific theories "clinicians would be vulnerable, directionless creatures bombarded with literally hundreds of impressions and pieces of information in a single session" (Prochaska & Norcross, 2010, p. 4). However, the authors who often impart

theoretical knowledge to students through textbooks of counselling theory may combine all theories of family systems therapy into one chapter (e.g., Corey, 2009; Murdock, 2013; Parsons & Zhang, 2014), providing a simplistic overview of difficult, and often novel concepts. The end result is that students may not feel confident enough in their grasp of the literature to feel adequately guided in practice.

Analysing client concerns from a system's perspective requires alternate ways of understanding the presenting issues, and different techniques to address them. For students who have been introduced to individual counselling methods first, this modification requires a shift in at least two important ways: (a) understanding behaviour of individuals within the larger context of the family, and (b) promoting change through transformations within the system (Erikson, 1973). According to Josephson (2008), the first step in understanding this type of approach is learning to conceptualize a case from a systems perspective.

The use of film to teach counsellors-in-training has become an accepted instructional method in recent years (Koch & Dollarhide, 2000; Maynard, 1996; Villalba & Redmond, 2008), as doing so offers students the opportunity to engage in the learning process in different ways. Rather than relying on memorization, students are given an opportunity to develop a connection with the characters on screen while considering various theoretical standpoints from which to view them. Scholl, Gibson, Despres, and Boyarinova (2014) contended that such an experience is more likely to have an increasingly enduring effect on students.

The film *Ordinary People* (Paramount Pictures, & Redford, 1980) has been credited as a useful learning tool for teaching future practitioners individual therapy with

adolescents (Miller, 1999), and family therapy within a 13-week theories course (Maynard, 1996). Despite the age of the film, I found the story to be engaging and relevant, with a plot that naturally fit with the theories I selected for this project. From the film, students are able to expand upon the story in a theoretically significant way by witnessing both the private and public personas of the characters, observing their interactions with one another, and considering the various systems that impact the family and its individual members.

Providing students with a broad understanding of family therapy can prepare them for more in-depth learning of the diverse theories that make up the whole of systems work. Having come to appreciate the basic differences between working with an individual versus working with a family, students may begin to include in their approach a systemic framework for working with clients when it is deemed appropriate.

The following outline of family systems theory as it emerged illustrates some of the struggles early family therapists contended with as this approach sought credibility. This section also provides a context for the project, and specifically the information found in Chapter 3, where various theories are expanded upon to shape the analysis of the film from a systemic perspective.

Family Therapy: A Brief Sketch

By the late 1940s and early 1950s, the notion that family was an important facet of individual change was beginning to materialize among various practitioners, independent of one another, and in diverse, but complementary ways. This was a significant shift from a more traditional focus on the individual apart from their context.

Kerr (1981) viewed this period as one of “working underground” (p. 228), in which therapists were hesitant to discuss their emerging theory openly with others.

The psychoanalysis in which these theorists were trained had “admonitions about a therapist seeing more than one member of a family, for fear of contaminating the transference” (Kerr, 1981, p. 228), which was understood as providing the means for creating therapeutic change. Experience with clients, however, was beginning to make clear that something was missing from these practitioners’ individual approaches to change. These theorists were noticing that the relationships between an individual and various systems outside of themselves were capable of both contributing to, and helping to resolve psychological issues.

Common Elements of Family Systems Theory

While various systems-based theorists had differing views regarding what aspects were theoretically important, there are shared core elements that form systemic perspectives. These elements include (a) considering problems in terms of the system or family, (b) interrupting dysfunctional patterns, and (c) developing treatment plans that include family members (Nichols, 2013). A review of these essential points will be presented next as it has the potential to be a useful starting point in the discussion of family systems therapy.

Element 1: Considering problems in terms of the system or family. Central to the concept of family therapy is seeing the family as a unit, or a system composed of various individuals. Motivated by Western society that values autonomy over dependence, therapists may find themselves biased toward treating the individual. From this viewpoint, it is assumed that the individual is responsible for change. Any attempt to

provide a systemic approach with this mindset, however, has the potential to reduce family-aimed therapy into a cycle of blaming and scapegoating. For example, the client who has been identified as the source of the problem further becomes the victim, or perpetrator, as the therapist and family work to identify how that individual caused, and can solve their problems. Alternatively, when concepts of individual therapy are set aside, the focus of therapy shifts towards the meanings attached to one's behaviour (Hoffman, 1985). "Family therapy redefines the individual as a system embedded within many other systems, which brings an entirely different perspective to assessment and treatment" (Corey, 2009, p. 439).

Element 2: Interrupting dysfunctional patterns. Central to systems therapy is the therapist's invitation to the family to focus on patterns of interaction between two or more members of the family unit, rather than focusing only on helping one member of the family change his/her behaviour. To do so, the therapist must help each member of the family to feel welcomed and accepted, regardless of the reason why the family presented for therapy. By focusing attention on each family member within the system, any anxiety they may be feeling about being a part of therapy and the change that may occur, may start to dissipate as they become more comfortable with the counselling process (Corey, 2009). With anxieties lowered, therapists have the opportunity to see relationships within the system play out quite naturally in the therapeutic setting. As a systems observer of these patterns of relating, the family therapist is in a position to help family members look for clues to understand the perceptions that govern their behaviour, and develop new, more functional patterns of relating.

Element 3: Developing treatment plans that include family members. The third element of systemic work expands upon the idea that change happens within the entire system, which encourages the responsibility family members have in supporting each other's mental health and well-being. The notion that many of the problems that lead individuals to seek out counselling stem from issues within the family unit (Heru, Keitner & Glick, 2012), combined with practice guidelines that promote systemic therapy as an effective treatment option (Heru, Keitner & Glick, 2012; Institute of Medicine, 2009), compels therapists to consider the impact of that system. With this understanding, families, guided by their counsellor, have an opportunity to consider the patterns of behaviour that define the family, and to play a role in finding solutions that focus on changing these patterns in a direction that is beneficial for all members (Corey, 2009). One benefit of this approach is that support that can be found within the family helps individuals to know that they are accepted and have a place of belonging, by feeling loved, cared for, and valued (Pernice-Duca, 2010).

Overview of Applied Project

For the applied portion of this project I have created a manuscript to be submitted for publication in an academic journal that is focused on best practice teaching methods for post-secondary educators. This manuscript provides a description of specific aspects of family therapy theories and a compelling portrait of a family, from the film *Ordinary People* (Paramount Pictures & Redford, 1980), to help post-secondary students conceptualize systemic approaches. The end result is a resource for instructors of counselling theory to enhance the way they teach family systems theory to ensure

students have a foundational, albeit introductory, understanding of this approach to counselling.

Operational Definitions

To ensure mutual understanding of the terms *parent* and *family*, these terms will be defined using the work of Josephson (2008). This author stated that “family refers to those who have daily interactions with its children and assume the responsibility of meeting their emotional and developmental needs. It implies biological, affective, and legal bonds, occurring in concert or separately. The term parent refers to those who make decisions on behalf of children” (Josephson, 2008, p. 407).

The notion of the *identified patient* refers to the member of the family who is presented to the therapist as the problem that requires attention. This individual is often the bearer of the most visible and problematic symptoms within the family unit. As a result, many families may assume that the primary focus of therapy will revolve around this individual’s issues.

Project Structure

I have organized my project into four chapters followed by the proposed manuscript to be submitted for publication (Appendix A). In this chapter I expanded on my interest in the project and a rationale for completing it based on my experiences as a graduate student completing a practicum in family therapy. In Chapter 2 I draw the reader’s attention to how the information for this project was obtained, as well as a statement of ethical conduct and APA adherence. In Chapter 3 I provide an outline of the specific components of family systems theories and how these components impact a counsellor’s understanding of a client’s presenting issue, using the Jarrett family from the

film as a case study. Finally, in Chapter 4 I explore the strengths and limitations of this project, propose areas of future research, and share some concluding thoughts.

Chapter Summary

For instructors seeking to provide students with a better understanding of family therapy, this project aims to provide an illustration of how family therapists view client problems. Based on my own status as a novice, my experiences as a student, and my efforts to understand family therapy myself, I have identified a gap in graduate-level counsellor training that I seek to address.

By using a case conceptualization based on the Jarrett family in the film *Ordinary People* (Paramount Pictures & Redford, 1980) I will provide instructors with students more well-versed in theories of individual therapy an opportunity to consider clients from a new perspective. With this general knowledge, instructors can provide a broad foundation on which students may increase their understanding of systemic theories of counselling. This learning is important, as family therapy has demonstrated efficacy in both the prevention and treatment of psychological problems (National Research Council and Institute of Medicine of the National Academies, 2009). Before exploring the current literature in the field, the research process used to create this learning tool will be discussed.

Chapter 2: Methodology

In order to identify how the information used in the creation of this project was attained, the author outlines the search terms and databases used to conduct the literature review for this project. A statement of ethical conduct and APA adherence are also included in the paragraphs that follow.

Research Process

The literature for this project was based on the available published works regarding family therapy. Searches in relevant databases (i.e., PsychINFO, PubMed, ScienceDirect, Wiley Online Library, Child Development & Adolescent Studies, PsychiatryOnline, and Google Scholar) revealed ample resources to prepare this project.

A number of search strategies were used to garner a comprehensive overview of the topic. The following search terms, or variations of, were used: a) teaching family therapy; b) common factors of family therapy; c) history of family therapy; d) using movies to teach family therapy and e) efficacy of family therapy. From these findings, additional relevant publications were culled from cited works. Because themes of family therapy have remained relatively constant through the years, searches were not limited by date; however, priority was given to those works published between the years of 2004 and 2014 when studies were similar.

Film Analysis

In selecting scenes from the film that were used to illustrate various concepts of family therapy, I relied on my own experiences as a viewer. Having watched the film a number of times I analysed the scenes that not only demonstrated the concepts well, but also felt significant from the perspective of the viewer. Considering the impact an

emotional response can have on student learning outcomes (Scholl, Gibson, Despres, & Boyarinova, 2014) helped to guide my selections.

Statement of Ethical Conduct and APA Adherence

Throughout this project I consistently adhered to the *Publication Manual of the American Psychological Association* (American Psychological Association, 2010) and the *Canadian Code of Ethics for Psychologists* (Canadian Psychological Association, 2000). Because no human participants were used, submission for ethics approval was not required. The manuscript located in appendix A was prepared to the specifications of the journal submission requirements.

Chapter Summary

Using a broad range of resources found with PsychINFO and Google Scholar, I reviewed the current literature regarding the field of family therapy and teaching family systems theory. Based on the information found, various scenes from the film were chosen for analysis that best represented the theoretical concepts discussed in Chapter 3. The following chapter highlights my findings as they relate to the problems experienced by the fictional Jarrett family in the film.

Chapter 3: Using Selected Literature to Analyse the Jarrett Family

The intent of this chapter is to provide an analysis of the Jarrett family in the film *Ordinary People* (Paramount Pictures & Redford, 1980) from a number of systemic perspectives. Within this chapter, the film is utilized to conceptualize key concepts of four theories of family therapy: those developed by Alfred Adler, Murray Bowen, Virginia Satir, and Salvador Minuchin. Each theory is expanded upon to include a discussion of a therapist's role in sessions, and the techniques they may use to promote change, in an effort to further solidify students' understanding of what it means to provide therapy that is systemic in nature. Considering the Jarretts from a variety of perspectives provides a foundation for the applied portion (manuscript) of this project (Appendix A). Prior to addressing these theories, a brief summary of the film is presented as an introduction to the family that will provide the details of the case study.

Ordinary People: A Brief Summary

The film begins by showing various scenes of the Jarrett family, which includes Beth, Calvin, and their teenage son, Conrad, living what appears to be a fairly normal life. Despite the seeming ease with which they present their happiness to the world – Beth and Calvin chatting happily with friends, and Conrad attempting to fit in at school – that contentment is largely a facade. Out of the public eye, the Jarretts are visibly struggling to cope with significant changes in their family having recently lost Buck, the eldest son, who died in the same boating accident Conrad survived. Conrad struggles with depression, as evidenced by him withdrawing socially, sleeping restlessly, and having trouble maintaining his focus at home and at school, while his parents strive to find ways to move forward as a newly configured family of three.

Following a suicide attempt, Conrad is sent to a psychiatric facility to address his mental health struggles. What viewers see is that following his discharge, and return home, the depressive symptoms persist. Even with his current state of poor mental health, however, Conrad is portrayed as trying to make significant changes in his life to feel happy again, and is referred to therapy for help. By utilizing more individually-focused interventions Conrad appears to be successful in addressing some of his problems with the help of his therapist, Dr. Berger.

As Conrad's symptoms diminish, however, new challenges begin to arise within the family unit. For example, tensions arise between Beth and her husband Calvin that become difficult for each to ignore. Furthermore, Beth's negative feelings toward Conrad become increasingly evident. The distance both Calvin and Conrad feel from Beth seems to draw them closer to one another while pushing her further away. The resulting stress on each individual member weakens the entire system to the point that the family suffers from a significant rupture that leads to Beth moving out of the family home.

Having seen the family's problems climax, counselling students may begin to search for new ways to conceptualize the Jarrett's story in an effort to effectively address the ways in which one member's mental health can shift the entire family dynamic. For example, students may be curious about the ways in which a different approach to therapy may help address the problems between Beth and Calvin that come to the surface as the story develops. The goal is for students to become curious about systems therapy and develop an appreciation for its clinical use. The remainder of this chapter is dedicated to illustrating concepts of family therapy by utilizing the story of the Jarrett family as a case study.

Using Theories of Family Therapy to Conceptualize the Jarrett Case

The following pages show how practitioners from each of the four selected family theories may intervene to alleviate the Jarrett family's reported symptoms. As noted at the opening of this chapter, Adlerian, Bowenian, Experiential, and Structural theories of family therapy will be considered in turn. For each theory examined, three central elements of each will be presented, along with the therapist's role, and techniques that may be used, to promote a basic theoretical understanding of systems therapy in students.

Key Concepts of Adlerian Family Systems Therapy Applied to the Jarrett Family

Adlerian therapy is shaped, in part, by the assumption that individuals may easily fall into negative patterns of interacting with others that are motivated by mistaken beliefs and goals. In this sense, while all behaviour is interactive and purposeful, the logic that guides one's actions may be faulty (Carlson & Yang, 2008; Corey, 2009). The inclusion of the family within this theory relates to the belief that it is within one's initial social system – the family – that individuals learn what is required of them to interact successfully, and find belonging with others (Carlson & Yang, 2008). Due to the important nature of this system, problems may arise from one's feelings of alienation, and the mistaken goals that stem from this belief. The three key concepts that will be explored in greater depth in the following pages are (a) family atmosphere, (b) mistaken beliefs and goals, and (c) alienation.

Family atmosphere. Family atmosphere relates to the unique ways each family has of interacting. Sherman and Dinkmeyer (1987) contended that “the conjunction of all the family forces – the climate of relationships that exist between people – is termed the family atmosphere” (p. 9). What this means is that within the system, all members exert

influence over the others, which characterizes the way family members relate to one another (Bitter, 2008), or the tone of the family's interactions.

At the very start of the film, viewers watching from an Adlerian perspective may begin to piece together some assumptions regarding the family atmosphere in the Jarrett household. Upon returning home from the theater, Beth retreats to the couple's bedroom, while Calvin, seeing Conrad's light is on, checks in on him to make sure he is okay. Notions that Beth is emotionally unavailable, that Calvin fulfils a nurturing role, and that Conrad is stuck between them are further solidified the next morning over breakfast.

The pattern of behaviour the Jarretts display is likely one that has been learned by each parent from a young age within the family in which they were raised. Within their own families of origin, Beth may have learned that displaying emotion is a sign of weakness, while Calvin may have learned that the task of being a father required constant emotional availability to his son. From the experiences each brings to the marriage, parents take on an especially meaningful role in the establishment of the family atmosphere, as the relationship between them "is often the clearest indication of what will constitute the family's way of being and interacting" (Bitter, 2008, p. 102).

Given the understanding of parents in their natural role as leaders within the family, an Adlerian therapist may elect to begin working with Calvin and Beth alone to help shift long-held patterns of behaviour. In this case, a useful technique for beginning to understand the family atmosphere in the Jarrett home would be to elicit from each parent a description of a typical day for their family. Descriptions of the family at breakfast may lead the therapist to expect that similar patterns of relating to each other, and Conrad, are repeated throughout the day in a number of different contexts (Bitter,

2008). The therapist may tentatively hypothesize that the atmosphere in the Jarrett home also contributes to Conrad's expectations of himself, and those around him, outside of the home.

Based on how he has learned to function between the differing expectations of others within his own home – his mother's unspoken requirement for order, quiet, and emotional distance, and his father demands for emotional closeness – may contribute to Conrad's lack of confidence with others. For example, an atmosphere among the Jarretts that requires quite different behaviours to appease the different expectations of his parents often leads to Conrad not knowing what to do to make others happy, while his own happiness takes a less important role. For example, during his first visit with Dr. Berger Conrad's face expresses some surprise when he is asked why he is there, perhaps not knowing which answer he would need to give to meet the expectations of his counsellor. As the film continues, this pattern is repeated again when he asks Dr. Berger if he is telling him to quit the swim team. Rather than considering his own position on a number of issues, Conrad relies on others to help him determine how he should think and act.

Mistaken beliefs and goals. As seen throughout the film, Conrad holds certain beliefs about his parents as truths – Dad likes him because he has no taste, and Mom cannot forgive his suicide attempt. Because these assertions compel specific, often misguided patterns of relating, Adlerian therapists are curious about how family members make sense of why things happen. Even if these beliefs are faulty, they contribute to individuals setting out to achieve misguided goals in their relationships with others, which can cause of host of problems for the family as a whole.

Another mistaken belief that shapes the way the Jarrett family interacts is Beth's conviction that Conrad wants to hurt her. As a result of this mistaken belief she may feel justified in distancing herself from her son, based on the logic that getting too close would only result in an increased risk of harm to her. While there may be subtle hints early in the film that this is the case (Beth's reaction when Conrad won't eat his favourite breakfast that she has prepared, for example), she also comes out and says it directly when she learns that Conrad has quit the swim team and failed to tell her about it. Beth believes that he has made a conscious choice to keep this information from her so she will be embarrassed when her friends find out she does not know, and she responds in a way that befits this incorrect assumption.

This scene around the Christmas tree depicts the potential of mistaken beliefs to lock the entire family system into a pattern of negative interactions. As a result, identifying and correcting these errors is of central concern to the Adlerian therapist (Christensen, 2004). One of the ways a therapist may draw attention to these mistaken goals and beliefs is to ask the family members about specific examples about who does what in reaction to someone's behavior. For example, learning Conrad is depressed does not inform the therapist about the mistaken goals that may be present within the family system. An Adlerian therapist would instead ask Beth for a specific example of a time when she saw her son depressed, and elicit from Beth a description of her feelings and actions when she interacts with her son.

When the therapist learns that Beth feels angry that Conrad wants to hurt her, it would reveal the mistaken goals and beliefs of this pair. Once the Adlerian therapist explored these beliefs with the family system, and the family understood how these

assumptions added to dysfunctional relating, the therapist would then move towards promoting shifts in behaviour among family members. For example, the therapist may ask Beth to attempt to suspend her beliefs about Conrad until she has checked them out with him, asking, perhaps, what led to Conrad's behaviour, rather than insisting it is because of his motives to hurt her.

Alienation. Alienation refers to a perceived or actual lack of acceptance within one's family (Carlson & Yang, 2008). This is a critical concept in this theory as Adlerian therapists believe that many family problems centre around family members believing they do not belong, or carry little worth within their family unit (Carlson & Yang, 2008). The sense of alienation an individual feels within their own family often extends outside of the home as well. In fact, Bitter (2008) contended that "with rare exception, the atmosphere in which we are raised tends to become the model for how we expect life and the world to be" (p. 102).

With the Jarretts, an Adlerian therapist may hold the assumption that Conrad's mental health concerns stem from his feelings of alienation from his mother. Throughout the film viewers see evidence of the older son, Buck having a special role in the family which may send a message to Beth's younger son that he does not hold a worthy position in the family unit. Students viewing the film may notice Conrad having flashbacks of how his mother looked at Buck— the way she laughed at his jokes and how she seemed completely immersed in his stories. As the family's struggle grows, Beth bolsters Conrad's feeling that he is not accepted when she loudly states that "Buck wouldn't have been in the hospital". Beth's statement clearly emphasized the differences between her *good* son, and her *bad* one, confirming Conrad's feelings of alienation.

The lack of worth Conrad feels from his mother extends to his relationships outside of the home as well. At the restaurant with Jeannine, Conrad struggles to open up emotionally to her. When he does though, the swim team enters and places a lot of attention on Jeannine which makes her laugh. Conrad's reaction to her laughter is to stop speaking to her – a reaction that, at first glance, seems somewhat odd. However, when viewed from a systemic perspective, an Adlerian therapist may see how Jeannine's laughter mimics the laughter of Conrad's mother on the phone, after he attempted to spend time with her and she asked him to go up to his room to clean out his closet instead. Jeannine's laughter may remind Conrad of his belief that he is not lovable which effectively shuts him down emotionally.

In a therapeutic environment, the Adlerian therapist would invite a conversation about how the family's interactions may foster Conrad's belief that he is unlovable. The therapist may be curious to understand, from each family member's perspective, how Conrad's belief that his mother does not love or accept him impacts those around him and how it spreads to other relationships. The primary goal of the Adlerian therapist is to help the family “to reorganize so that each person contributes to the whole in a meaningful way and that the family contributes to the development of each member” (Carlson & Yang, 2008, p. 202).

Summary of Adlerian Family Systems Therapy. Adlerian theory showcases the power of an individual's perceived reality on the functioning of the entire family and relationships beyond. The philosophy of Adler overlaps with Bowen's theory in that both believed in the ease with which patterns occurring in one's home extend into relationships outside one's family of origin. However, in contrast to Adler, Murray

Bowen was more interested in developing a strong conceptual basis from which to consider families, rather than techniques to implement change (Nichols, 2013). I turn to this theory now with an elaboration of three concepts using the Jarretts as a case study, in the same way Adlerian theory was explored.

Key Concepts of Bowen Family Systems Therapy Applied to the Jarrett Family

Murray Bowen's experiences with clients from a systemic perspective led him to believe that "human relationships are driven by counterbalancing life forces: individuality and togetherness" (Nichols, 2013 p. 76) that are shaped by patterns established throughout multiple generations of a family. Long-held patterns of relating within families can contribute to problems if individual family members cannot find a balance between these forces. The three key concepts that will be considered in greater depth here are (a) differentiation of self, (b) emotional triangulation, and (c) multigenerational emotional processes.

Differentiation of self. Bowenian therapists believe emotional anxiety within a family often leads to a sort of fusion of its members. Fusion, or a lack of differentiation of self, means one is connected to others in an exaggerated and often negative way (Nichols, 2013). Evidence of fusion from the Jarrett family is evidenced by the relationship between Beth and Calvin. It is interesting to view Beth and Calvin's interactions from a Bowenian perspective as their symptomatic behaviour could otherwise be more simply viewed as nagging on Beth's part, and passivity on Calvin's. However, the understanding of fusion, as described by McGoldrick and Carter (2001), is when family members "may attempt to control or dominate others, fail to develop themselves, or give up part or most

of their autonomy out of fear that they will lose the love of other family members” (p. 283-284).

To put this concept in context, Calvin attempts to create some differentiation when he comes home from his appointment with Dr. Berger and confronts Beth about her behaviour before Buck’s funeral. At the time, Calvin went along with his wife’s insistence that he wear different shoes to the funeral. The pattern of Calvin submitting to others is evidenced throughout much of the film, perhaps a sign of his own anxiety about the family’s current situation. For Calvin, going along with the views of others helps to relieve some of his own anxiety, but at the expense of not developing his own opinions.

In a therapeutic environment, a Bowenian therapist may notice Beth’s tendency to answer questions on Calvin’s behalf, or Calvin looking to his wife for her thoughts on a topic before he offers his input. Observing these interactions offers a useful starting point for therapy, in that it points out a lack of differentiation and sets the tone for continued sessions.

In many ways, the Bowenian therapist acts as a coach to families in therapy. Promoting interactions between Calvin and Beth that are not guided by each one’s anxiety can help them to look at themselves more clearly, as their perceptions are not clouded by emotionality. When Calvin and Beth’s lack of differentiation shows itself in therapy the therapist may ask process questions aimed at reducing anxious and patterned responses in favour of increased objectivity. Exploring the behaviour from each individual’s point of view can offer clarity regarding what drives their individual anxiety, and a direction for creating positive changes in the couple’s relationship.

Emotional triangulation. Like differentiation of self, emotional triangulation within relationships is often the result of anxiety. Nichols (2013) wrote that “as anxiety increases, people experience a greater need for emotional closeness – or, to avoid pressure, a greater need for distance” (p. 78). In order for individuals to relieve the emotional discomfort of an interpersonal conflict, for example, a dyad may direct their attention to a third, uninvolved person to help draw attention away from themselves. Based on the inclinations of the third party, the dyad may be supported in resolving their difficulties. However, in many cases, the dyad’s diverted attention allows the conflict to remain unresolved, and involve an (often) innocent third party (McGoldrick & Carter, 2001). Given the distance between the original two, closeness may be achieved with the outside member, but this bond occurs at the expense of the dyad, whose members may choose not to engage in the struggle of working through their difficulties.

Triangulation is evident in many instances throughout the film when Beth and Calvin’s disagreements turn toward Conrad. Unknowingly, he has become the third member of the conflict, a pattern that viewers begin to see as a fixed way of relating between the couple. For example, even though he is not present while Beth and Calvin are golfing in Texas, their argument turns toward him when it gets too intense. This shift of focus allows for a needed distraction, yet it keeps the interpersonal conflict unresolved – which was very evident at the end of the film when the couple has an explosive fight that raises unresolved issues from the past.

For a Bowenian therapist observing triangulation between the Jarrett family, their therapeutic aim would be to make this dynamic transparent. For example, upon making their observation of triangulation overt to the family, the therapist might encourage the

couple to turn toward each other to emphasize the fact that the conversation includes only them. When they unknowingly revert back to their usual pattern of distraction through their concern for Conrad, the therapist may coach them by redirecting them back to the conflict at hand. Overall, the goal is for the therapist to help renew the bond between the parents by strengthening direct dyadic communication while helping them to realize the drawback of relying on others to distract them from their own difficulties.

Multigenerational emotional processes. Bowenian therapists study patterns of relating and are known to look for evidence of these patterns repeating over multiple generations. They believe interpersonal patterns of relating are learned and passed on to each generation. Like Adlerian therapists, Bowenian therapists are curious about when a member's belief becomes an entrenched pattern of relating to others. For example, with the Jarretts, the therapist might help the family create a genogram, tracing two to four generations back to determine the root of Beth's belief that emotions should be avoided.

Beth's anxiety in emotionally-laden moments is evident when the family met with her parents over the holidays, when after Conrad's outburst, Beth retreats to the kitchen to avoid the unpleasant nature of the situation. When her mother joins her, one can see that each woman shies away from emotional topics. For example, when Beth's mom asks what Calvin thinks of Conrad seeing Dr. Berger, Beth quickly changes the subject – exclaiming that she thinks the plate she dropped earlier can be repaired – effectively shifting the tone of the conversation in a way that mirrors her mother's own level of comfort with emotionally laden conversations.

One of the differences between Bowenian and other family system therapies is the belief that the entire family does not need to be present in therapy, or even pursuing

change, for change to occur, as long as one member is. Because Beth seems to be less motivated to make any changes, Calvin may be encouraged to attend sessions on his own. Seeing the patterns from the past that continue to impact their relationships may provide him with some insights into where things are going wrong. He may be encouraged to take on a different role at home – one where he asserts himself more directly with his wife, feels courageous enough to form his own opinions, pulls away somewhat from Conrad, or refuses to involve him in the disagreements he and Beth have. Despite not being involved in therapy, the other members of the family must make some modifications to adjust to Calvin's new behaviours.

Summary of Bowen Family Systems Therapy. Bowen's work continues to highlight the ways families learn to behave in relation to others from what they have seen demonstrated in their family of origin. The theory contends that issues can arise when anxiety limits one's options for responding to others. While Bowen was interested in the negative effects of family members reacting in ways to avoid their own anxiety, Virginia Satir had her own ideas regarding the impact of failure to express emotions adequately, with her theory on communication patterns among family members.

Key Concepts of Experiential Family Therapy Applied to the Jarrett Family

Virginia Satir's Experiential Therapy is guided by an appreciation for the inner resources all humans have available to them to make the changes they desire. Such a stance guides a therapist's practice as he/she works to address the communication patterns that create dysfunctional patterns of behaviour within families. With this understanding "experiential family therapists work from the inside out, helping individuals uncover their honest emotions, and then forging more genuine family ties out

of this enhanced authenticity” (Nichols, 2013, p. 146). The concepts central to the Experiential therapist’s work are (a) communication stances, (b) patterns of dysfunctional communication, and (c) incongruent communication messages.

Communication stances. A hallmark of the Experiential method was Satir’s identification of four distinct roles that family members may assume and how these roles can impact the functioning of the entire family. Satir posited that there are a number of dysfunctional communication stances family members can take in different circumstances. The roles she identified were those of the placator, the blamer, the super reasonable, and the role of irrelevant (Satir, Banmen, Gerber, & Gomori, 1991). Assuming any of these roles promotes dysfunctional communication, as can be seen within the Jarrett family with Calvin and Conrad often taking the role of the placator, while Beth typically takes on an irrelevant stance, which makes it difficult for them to adequately cope when difficulties arise.

The placator communication stance requires a family member to act incongruently by pleasing others at the expense of their own feelings. Essentially, the placator is the people pleaser of the family, whose self-talk and actions revolve around the notion that one must be nice - never causing trouble, or speaking harshly, but taking full responsibility when things go wrong (Satir, Banmen, Gerber & Gomori, 1991). This role is evident in the film in the conversations Conrad has with Dr. Berger – claiming that all the problems are his fault, he is not good enough, and if anyone loves him it’s his father, which does not really mean much, as his father loves everyone. Rather than taking care of his own needs, Conrad spends his time trying to ensure that others are not bothered by him. True to Satir’s observations over the course of her career, the

psychological effects of Conrad's role as the placator include depression and suicidal behaviour (Satir, Banmen, Gerber & Gomori, 1991).

Like Conrad, Calvin often takes on this role as well, perhaps as a response to Beth taking up the irrelevant stance. Rather than taking full responsibility for problems as her husband and son tend to do, Beth's response when conflict and stress arise is to pretend it's not there. Throughout the film, she can be seen changing the subject when she becomes uncomfortable, in an effort to divert everyone's attention away from the topic at hand. According to Satir, Banmen, Gerber, and Gomori (1991), internally, Beth's behaviour likely stems from feeling that her family does not care for her.

Noticing the appearance of these roles, the therapist may have family members sculpt these stances in an exaggerated, physical way. For example, Satir, Banmen, Gerber, and Gomori (1991) described the modeling of the placator's body language as "on [one's] knees...ward[ing] off an impending blow" (p. 38). The point of this exercise is to draw attention to how that stance plays out for Conrad and those responding to it. Conrad's perception of himself, and resulting behaviour, indicate that he is incapable, which requires others to be put in a position of authority over him.

Dysfunctional communication. Poor communication within families is characterized by communication that is "indirect, unclear, vague, dishonest, distorted, and incomplete" (Rasheed, Rasheed, & Marley, 2011, p. 140). When families are unable to communicate in effective ways, Experiential practitioners believe the family then lacks the skills necessary to create an environment that nurtures its members (Satir, Banmen, Gerber, & Gomori, 1991). The result of poor communication patterns is often feelings of low self-esteem (Satir, Banmen, Gerber, & Gomori, 1991). When families are immersed

in communication patterns that are confusing, victim blaming, or distorted, the family tends to lack flexibility.

An Experiential therapist may contend that Conrad's symptoms represent the presence of dysfunction within other family members, or the family system as a whole. The rigid, inflexible nature with which Beth responds to problems at home may serve to increase her own self-esteem by maintaining a sense of normalcy, but it does little to help Conrad, who needs a different response from her.

In many ways, Beth's communication to, and about, Conrad is distorted. When she and Calvin are discussing their plans for Christmas, she wants to do what they have always done, without acknowledging that things are not as they have always been. She contends that getting away would be good for Conrad too, and taking a break from therapy might actually convince him that seeing a therapist is not the right choice for him. As a result of this distorted, incomplete communication the entire family is left trapped in a pattern that fails to acknowledge the changes that have occurred in the family whether they like them or not.

In response to such distortions, the therapist may be interested in Beth's expectations of Conrad and how his condition affects her. It seems likely that in discussion with the therapist Beth would clarify her expectation that if Conrad was able to change, the issues the family is dealing with would be resolved. An assumption such as this may serve to lessen Beth's anxiety, and help her to re-establish her sense of self-worth (Satir, Banmen, Gerber, & Gomori, 1991), but it is a continuation of dysfunctional communication, and does little to address the problems the family is facing. In order to face these distortions, the therapist may work with Beth toward more open and honest

communication allowing her to begin to acknowledge her own discomfort within her family, why she favours Buck, the animosity she has toward Conrad and Calvin, and how her family of origin history has led her to deny her own emotions.

Incongruent communication messages. Congruency in communication is achieved by matching verbal and non-verbal messages, and by ensuring that the verbal messages shared use words that accurately convey one's emotions and experiences. Congruent communication is an important factor in enhancing the self-esteem of family members. When messages are incongruent – the tone of voice, one's posture, or a gesture made do not match the spoken word – family members are left confused and unsure of which message they should respond to (Rasheed, Rasheed, & Marley, 2011).

In the earlier explored conflict between Conrad and Beth that Calvin mediates, Conrad states that Beth hates him, but then quickly changes his statement and agrees with Calvin that she doesn't. While Conrad may just be trying to free his dad from discomfort, this interaction may also represent the confusion he experiences regarding his mother's feelings for him. She does things that are indicative of love, but her lack of interest in engaging in any meaningful way with Conrad sends mixed messages and leaves him wondering what is true, and what is not. An Experiential therapist may posit that Conrad's low self-esteem is directly linked to interactions such as this that lead him to feel insecure in both himself as an individual, and in relation to those around him.

In working with the family, the therapist may focus attention on the experiences of various members in certain situations. For example, when Conrad finds Beth in Buck's bedroom, she seems to have a difficult time connecting with him. One technique for shifting Beth's view of Conrad and identifying how her communication patterns may be

confusing to him would be to return to that situation in her mind, playing it again from her point of view, then her son's, then that of an outside observer. In each instance she would be asked what she noticed in each situation that she had not been aware of, and what she could see more clearly now about herself, her son, and the way she communicates with him and how that may be perceived (Satir & Baldwin, 1983).

Summary of Experiential Family Therapy. Satir's focus on communication provides a clear direction for therapeutic work – identifying, addressing, and shifting these communication patterns. Like the Experiential therapy approach, Salvador Minuchin's Structural therapy is focused on what is happening for the family in the present, with the understanding that changes in current functioning have the potential to alter long-held, and dysfunctional patterns of behaviour (Minuchin, 1974). One of the other similarities between Structural work and the previous three theories considered is the assumption that individuals come to rely on very specific patterns of behaviour that limit their options for relating with others in different ways. This theory will be presented next, and is the last one to be analyzed in this project.

Key Concepts of Structural Family Therapy Applied to the Jarrett Family

Minuchin's understanding of how problems in the family unit arose and were maintained was linked to the way the family system organized itself. The patterned ways in which a family is inclined to function represents their structure, the understanding of which guides the therapy process and allows for the "therapist to intervene in a systematic and organized way" (Nichols, 2013, p. 122). Structural therapists believe that in order to address the problems families bring to therapy they must first address the system's organization that influences problematic interactions. There are three concepts

that are hallmarks of the Structural approach to family therapy; these concepts are (a) structure, (b) subsystems, and (c) boundaries.

Structure. The structure of a family relates to the way its members organize themselves in relation to one another. Despite changes that have occurred that make these patterns less functional, families may fail to accommodate to these changes in terms of their organization (Nichols & Schwartz, 1998).

For example, throughout the film, viewers see the Jarrett family eating dinner together. Their places at the table are indicative of the structure they have created for themselves within their system. Calvin sits in the middle, seemingly pulled in two very different directions by Beth on one side, and Conrad on the other. Beth and Conrad have the most distance between them – sitting opposite one another, seemingly similar to the way they seem to relate to one another on a regular basis. From a Structural perspective, structures are often long-held, unconscious rules within the family that have become rigidified, or stuck.

The goal of therapy is to increase the family structure's flexibility (Minuchin & Nichols, 1993), which requires a process of joining and accommodating, before creating enactments that can promote structural shifts. With the Jarrett family, a structural therapist would have to take on the complex task of joining, not just with the family as a whole, but each individual member.

Upon entering the therapist's office, the family would likely position themselves in a similar way to at home – hinting at the underlying structure that may need to be adapted. Because the family structure also includes Buck, the therapist may ask the family to determine where he would have been seated to help determine how the family

needs to reconfigure after his death. For the therapist to have any impact on the family it is necessary for he/she to join the family in their preferred structure – perhaps opening the conversation with Beth regarding what the problem is that brings them to therapy.

Helping to build an alliance with Beth by appealing to her role as a leader in the family may help ease some of the anxieties she has about being in therapy. In turn, Calvin and Conrad are also addressed. The therapist is looking to connect with all members by accepting their understanding of events.

Subsystems. Subsystems refer to the groupings that occur within families (based on gender, tasks, generation, etc.) that contribute to the way the family works (Nichols, 2013). These subsystems may provide families with a strong sense of their organization, but can also keep them stuck in patterns that may no longer be adaptive.

For the Jarretts, the family subsystems were significantly altered when Buck died. Having observed the family's interactions throughout the film, students can imagine how the family interacted around the dinner table prior to Buck's death. Buck taking his usual place in the empty chair at the dinner table may look something like this: Beth and Buck sit next to one another and seem particularly engaged in their own conversation, forming their own alliance. Calvin sits between his wife, with whom he forms the parental subsystem (given their shared tasks as parents), and Conrad, which forms another subsystem based on their close relationship. Like Calvin, Buck's place at the table forms a buffer between Conrad and Beth, and may be indicative of the emotional barrier between them. Finally, Buck and Conrad form their own subsystem, based on their shared gender and generation. According to Minuchin's theory, these subsystems are unlikely to change unless circumstances do, as they did when Buck died.

As seen in the film, the family appears to be struggling to adapt, while also rigidly holding on to old patterns that no longer work. Beth did not need to invest a lot of individual attention in Conrad because he had his brother and his Dad filling that role. Given their previous subsystems it seems unlikely that Conrad or Beth were particularly troubled by their lack of interaction, as each was getting their emotional needs met in other ways. Without Buck fulfilling some important roles, however, the family is at a loss – not quite sure of how to interact with each other. For example, Beth may have been able to communicate with the Conrad through Buck - who was closer to her - in a way that was effective. Now, with Buck not there she struggles to find a way to connect effectively with Conrad.

Structural therapists stress the importance of all family members being present in early sessions so structural patterns can be seen directly. Having already accommodated to the Jarrett's preferred structure, the therapist can utilize enactments to help shift the structure. Having observed the family in action, the therapist may notice Beth and Conrad's disengagement from one another, as evidenced by their limited interactions with one another. In reaction to this lack of engagement both tend to rely more heavily on Calvin to express their frustration with one another, hindering their ability to act independently. In an attempt to change this pattern the therapist may, for example, encourage Conrad and his mother to discuss Conrad quitting the swim team. It is likely that Calvin would jump in at some point to defend Conrad's actions, which may make Beth feel angry. Like at home, family members revert back to their usual patterns of interacting. The role of the therapist in session, however, is to help the family practice a

new structure: either discussing what may have gone wrong when they slip back into old patterns, or pushing them to keep working at developing new ones (Nichols, 2013).

Boundaries. In healthy families, boundaries represent distinctions between individuals, and can range from rigid to diffuse. Clear boundaries, the healthy middle-ground, promote independence in family members, without moving toward isolation. Rigid boundaries, on the other hand, promote that independence, but rely on less affection and support to do so. The opposite of rigid boundaries are those that are diffuse, promoting enmeshment between members. In these families, diffuse boundaries discourage independence by way of too much closeness.

Conrad seems to have established both rigid and diffuse boundaries in relation to his parents. The enmeshment with his father is finally addressed at the end of the film, with Beth having already left, when Conrad asks Calvin not to be so easy on him. Nichols (2013) wrote that “too much closeness cripples initiative” (p. 125). In many ways, Calvin’s preoccupation with his son keeps Conrad from asserting his independence and from having to develop a relationship with Beth. With his mother, the increased independence that comes from her disengagement comes at a cost of not feeling loved or supported by her.

One of the ways a therapist can help Beth and Conrad shift away from disengagement is to address their avoidance of conflict, and help bypass the tools they use to avoid it (Nichols, 2013). For Conrad and Calvin the necessary shift comes from encouraging both parties to speak for themselves. In each case, the therapist may decide that it is important for the family to come in different arrangements to sessions, such as Beth and Conrad, Calvin and Conrad, and Calvin and Beth.

Summary of Structural Family Therapy. The focus of the Structural therapist's work is on the ways in which families organize themselves. This understanding of structure, combined with a focus on present day-to-day functioning, provides families with an opportunity to begin shifting long-held patterns of dysfunctional behaviour (Minuchin, 1974). As with each of the theories considered, identifying and understanding the patterned ways in which family members relate to one another can help its members reflect on whether or not these patterns work and, if not, family therapy can help them to construct positive alternatives.

Chapter Summary

Considering the Jarrett family from a number of family systems theories contributes to a broad understanding of how family therapists conceptualize cases, and what the therapy process entails from differing perspectives. Without these theories organizing a practitioner's awareness, it would be difficult to know which aspects of the family's functioning are useful to address in hopes of creating meaningful change (Nichols, 2013). Using the family from the film *Ordinary People* (Paramount Pictures, & Redford, 1980) helps to illustrate the focus of Adlerian, Bowenian, Experiential, and Structural therapists in sessions. With conceptualizations offered for each of these four theories, a strong foundation has been created for the applied portion of this project found in Appendix A. The following chapter addresses the strengths and limitations of this work, as well as areas of future research, and ends with some concluding thoughts regarding the process of completing this project.

Chapter 4: Conclusion

The purpose of this project was to provide graduate-level counselling program instructors with a resource for teaching theories of family therapy to their students. This chapter begins with a discussion of the various strengths of this project, followed by the limitations I perceive. With these limitations in mind, I offer a number of ideas for future research that build upon this project.

Project Strengths

Completing this project fulfils a perceived gap in graduate counsellor training by expanding on what appears to often be only a brief overview of family therapy, necessitated by a limited time frame in which instructor must provide knowledge of individual and systemic theories of counselling. In addition, textbooks of counselling theory may present theories of family therapy as one, which has the potential to provide students with an incomplete and often confusing picture of what it means to practice systemically. As an alternative to this approach, I have sought to provide instructors with a resource for teaching specific theoretical concepts from different schools of family therapy to enrich their understanding of what family systems therapy looks like.

Utilizing a film, such as *Ordinary People* (Paramount Pictures & Redford, 1980) satisfies Maynard's (1996) request to do something different when teaching counselling theory, and builds upon the learning tasks he promoted by identifying key scenes in the film that illustrate specific concepts of family systems theory. Having students conceptualize three core element of each of four theories through the use of a fictional family helps bring these concepts to life, while offering students an opportunity to apply this learning from an objective standpoint.

Using my own status as a novice, I have created a resource that would have been highly useful to me as a student. My own process of learning these theories of family therapy helped to guide this process. I have been very intentional in structuring this resource in a way that would have addressed my needs as a student, as I suspect those needs are shared by others. By introducing family therapy's common elements and then illustrating only some of the key elements of four different theories I have endeavored to create a resource that builds on students' prior knowledge and imparts a clear and concise introduction to family therapy.

Project Limitations

The most apparent limitation of this project is that its scope is limited to only four theories of family therapy. However, this may not be a limitation if it is considered that instructors may not have time to teach more than a few systems-based theories due to time constraints often imposed on them (being required to teach individual and systems theories in one three credit hour course). While this focus on four theories does provide an introduction to systems thinking and case formulation, it does not directly promote an understanding of other theories, or the changes that have occurred within the realm of systemic work in more recent years.

In addition, due to the nature of this project, there was no external review of my interpretations of each system as it relates to the film, aside from receiving input from my supervisory committee. Furthermore, I recognize that the concepts I determined as key to student understanding of family systems theory may not be shared by others.

Lastly, my understanding of each concept is influenced by my own views and beliefs which may differ from others. For example, I did not take a systems theory

course, so my knowledge came primarily from the preparations I did on my own for work at my practicum site and for this project. Based on recommended readings from various family therapy professionals I developed a foundational knowledge on which to support this project.

Areas of Future Research

As a result of the limited scale of this project, additional course development in counselling theory that utilizes the film *Ordinary People* (Paramount Pictures & Redford, 1980) could extend to include more family systems approaches such as Narrative Therapy, Cognitive-Behavioural Family Therapy, and Solution Focused Therapy for families. Mirroring the format of this project has the potential to provide a broader foundational knowledge of family systems work, and a full course in family systems theory.

In addition, the use of this film throughout an entire course of counselling theories, including individual focused therapies, could be useful. The benefit of such an approach is the opportunity for students to clearly and effectively contrast the various theories as they apply to the Jarrett family, having gotten to “know” these characters so well. For example, having approached Conrad and Beth’s relationship from a number of perspectives, students may more clearly see the differences between various theories, and more broadly, the fundamental differences between individual and systems work.

In direct relation to this project, the following recommendations are directed at those individuals who choose to experiment with this teaching resource to see if it enriches students’ learning of family systems concepts in introductory theory courses in graduate-level counselling programs. In all cases, instructors are encouraged to contact

the author with feedback regarding their use of this project, and student engagement and outcomes.

Of primary importance is an assessment regarding whether or not students enjoy the film *Ordinary People* (Paramount Pictures & Redford, 1980). If students do not find the story of the Jarrett family compelling they may quickly lose interest in course material that is focused on this film. Given this possibility, future research could identify other films students may find more engaging that provide the character development and plot necessary to promote theoretical knowledge of family therapy.

In an effort to understand the value of this project, future research may be done to see if the approach used promotes increased understanding of family therapy compared to a lecture style format that provides a theoretical overview of family therapy. A possible research question to evaluate the efficacy of using the film as a pedagogical device could be: Do student self-reports regarding their understanding of family systems theory differ based on the teaching style provided by instructors? This study could analyse the learning of two groups of students presented with one of two different teaching styles: the process promoted in this project, versus one that is based on textbook learning. At the end of a designated period of time spent teaching these theories, researchers may ask students to rate their understanding of the various concepts on a scale from one (do not understand) to ten (fully understand). While this study relies on subjective self-reports of students, it offers a starting point for additional future research by providing a general understanding of the student experience and learning outcomes.

Finally, an important area of future research is to determine if instructors of family therapy find this project a useful addition to the information found in textbooks of

counselling theory. Some questions of interest are: Does the film contribute in a positive way to the teaching and learning that occurs in the classroom? Are students better able to maintain an objective standpoint by discussing fictional characters, rather than having to bring their own family issues to mind? Does the structure of this resource serve to scaffold students' learning by starting at a more basic level before moving on to specifics?

Project Summary

This final project provides an approach for teaching the fundamentals of family systems theory to graduate-level counselling students and is a resource I would have benefitted from as a student. The fact that many graduate programs lack family systems-specific training indicates that my own struggle to learn family systems theory is not uncommon. Understanding a systems approach to therapy requires a difficult theoretical shift from theories of individual therapy, and utilizing the Jarrett family from the film *Ordinary People* (Paramount Pictures & Redford, 1980) offers a way to conceptualize this complex approach to therapy.

Conclusion

While my aim was to provide a resource for others, this project has served as a useful teaching tool for me as well. Over the course of a year I have worked to increase my understanding of what it means to view clients systemically, both theoretically and in practice. I firmly believe that in doing so I have become a better practitioner, who is able to more aptly consider the influence of the family and develop effective treatment plans. The finished product is one that I am very proud of and I hope it will become a valuable resource for others.

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Appendix A

Using *Ordinary People* to Teach Theories of Family Therapy

PREAMBLE

Purpose

The following is the applied element of the Master of Counselling project. It is a manuscript for the journal *Training and Education in Professional Psychology* (<http://www.apa.org/pubs/journals/tep/>), which will be submitted to the editor of the journal after the University of Lethbridge has approved the project. The first author of the article will be me, Tenley Wiens, and the second author will be my project supervisor, Dawn McBride¹.

The purpose of this manuscript is to contribute a unique teaching resource that addresses a gap in counselling theory training among many graduate counselling programs in Canada. This manuscript provides an outline for counselling theory instructors seeking to shift their students' conceptualizations of clinical cases from an individual focus to a family systems perspective using the film *Ordinary People* (Paramount Pictures, & Redford, 1980) for illustrative purposes.

Journal's Instructions to All Authors

Appendix B contains the guidelines for preparing and submitting a manuscript to the journal *Training and Education in Professional Psychology*.

¹ This preamble closely follows the format and structure of *Sense of community online: Self-regulated learning and avoiding the drama triangle* (Master's project), by J. Gerlock, 2012, AB, Canada: University of Lethbridge. Copyright 2012 by J. Gerlock

Formal Style Requirements

The manuscript is prepared according to the *Publication Manual of the American Psychological Association* (6th edition), as per the *Training and Education in Professional Psychology* journal's specifications.

Copyright Statement

The material included in this draft manuscript is subject to copyright and permission of the author or the author's supervisor (Professor Dawn McBride) should be sought prior to use. For permission please email the author's supervisor at dawn.mcbride@uleth.ca. The reader may use ideas from this project and draft manuscript providing they are referenced as:

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ABSTRACT

This manuscript offers instructors of counselling theory a teaching resource, based on a classic film, for the purpose of shifting their students' conceptualizations of clinical cases from an individual focus to a family systems perspective. Within this project, the film *Ordinary People* (Paramount Pictures, & Redford, 1980) is introduced as a strategy to guide instructors in helping students to identify and analyze how patterns of behaviour within a family maintain problems, and how, from a systemic view, those patterns may be altered to better serve each member. With this foundational knowledge of family systems theories, students have increased options for understanding their client's issues, and creating appropriate treatment plans.

KEY WORDS: counselling theory, family systems therapy, *Ordinary People*, teaching family systems theory

Using *Ordinary People* to Teach Theories of Family Therapy

A search of graduate counselling programs in Canada indicates that only half of these programs offer family systems-specific theory training (3 credit hours or more) to their students (Wiens, 2014). Based on a perceived lack of training (Wiens, 2014), this manuscript invites university instructors to use a popular film to promote systemic theoretical thought in their students when individual theories of change have been the primary focus of their training. More specifically, this manuscript provides a method for presenting both a basic introduction to family systems theory by highlighting the core elements shared by all systemic theories, and a detailed analysis of how four family therapy theoretical approaches would likely analyse the dynamics of the Jarrett family from the film *Ordinary People* (Paramount Pictures & Redford, 1980).

The use of film to teach counsellors-in-training has become an accepted instructional method in recent years (Koch & Dollarhide, 2000; Maynard, 1996; Villalba & Redmond, 2008), as doing so offers students the opportunity to engage in the learning process in valuable ways. Rather than relying on memorization, students are given an opportunity to develop a connection with the characters on screen while considering various theoretical standpoints from which to view them. Scholl, Gibson, Despres, and Boyarinova (2014) contended that such an experience is more likely to have an enduring effect on students.

The film *Ordinary People* (Paramount Pictures, & Redford, 1980) has been credited as a useful learning tool for teaching future practitioners individual therapy with adolescents (Miller, 1999), and family therapy within a 13-week theories course (Maynard, 1996). Despite the age of the film, the story continues to be engaging and

relevant, with a plot that naturally fits with the theories selected for this resource. From the film, students are able to expand upon the story in a theoretically significant way by witnessing both the private and public personas of the characters, observing their interactions with one another, and considering the various systems that impact the family and its individual members.

Before presenting an introduction to the Jarrett family, and a brief synopsis of the film, a rationale for teaching family systems theory to students is provided. Following this discussion, five teaching strategies are presented. The first supplies an overview of three concepts shared by all theories of family therapy which offers students a guiding framework for the remaining four strategies. From here, various scenes from the film are utilized to illustrate elements of the systemic theories put forth by Alfred Adler, Murray Bowen, Virginia Satir, and Salvador Minuchin.

Teaching Family Systems Theory to Counselling Students

Researchers have found evidence to suggest that including family members in the treatment of various psychological problems is efficacious, and interventions aimed at the family may effectively prevent psychopathology in the first place (National Research Council and Institute of Medicine of the National Academies, 2009). In addition, including one's family in therapy may have the added benefit of strengthening the social supports that promote psychological well-being (Pernice-Duca, 2010). Including family members in treatment, however, requires a distinct model of treatment with objectives unlike those of other, more individually focused counselling theories.

Analysing client concerns from a system's perspective requires alternate ways of understanding the presenting issues, and different techniques to address them. For

students who have been introduced to individual counselling methods first, this modification requires a shift in at least two important ways: (a) understanding behaviour of individuals within the larger context of the family and its interrelated elements, and (b) promoting change through transformations within the system (Erikson, 1973). According to Josephson (2008), the first step in understanding this type of approach is learning to conceptualize a case from a systems perspective.

Ordinary People: A Synopsis

The film begins by showing various scenes of the Jarrett family, which includes Beth, Calvin, and their teenage son, Conrad, living what appears to be a fairly normal life. Despite the seeming ease with which they present their happiness to the world their contentment is largely a facade. Out of the public eye, the Jarretts are visibly struggling to cope with significant changes in their family having recently lost Buck, the eldest son, who died in the same boating accident Conrad survived. Conrad struggles with depression, as evidenced by him withdrawing socially, sleeping restlessly, and having trouble maintaining his focus at home and at school, while his parents strive to find ways to move forward as a newly configured family of three.

Following a suicide attempt, Conrad is sent to a psychiatric facility to address his mental health struggles. What viewers see is that following his discharge, and return home, the depressive symptoms persist. Even with his current state of poor mental health, however, Conrad is portrayed as trying to make significant changes in his life to feel happy again, and is referred to therapy for help. By utilizing more individually-focused interventions Conrad appears to be successful in addressing some of his problems with the help of his therapist, Dr. Berger.

As Conrad's symptoms diminish, however, new challenges begin to arise within the family unit. For example, tensions arise between Beth and her husband, Calvin that become difficult for each to ignore. Furthermore, Beth's negative feelings toward Conrad become increasingly evident. The distance both Calvin and Conrad feel from Beth seems to draw them closer to one another while pushing her further away. The resulting stress on each individual member weakens the entire system to the point that the family suffers from a significant rupture that leads to Beth moving out of the family home.

Having seen the family's problems climax, counselling students may begin to search for new ways to conceptualize the Jarrett's story in an effort to effectively address the ways in which one member's mental health can shift the entire family dynamic. The goal is for students to become curious about systems therapy and develop an appreciation for its clinical use. The remainder of this manuscript is dedicated to illustrating concepts of family therapy by utilizing the story of the Jarretts as a case study.

Teaching Strategy 1: An Introduction to the Shared Elements of Family Systems Theories

While various systems-based theorists have differing views regarding what aspects are theoretically important, there are shared core elements that form systemic perspectives. These elements include (a) considering problems in terms of the system or family of interrelated members, (b) interrupting dysfunctional patterns, and (c) developing treatment plans that include family members (Nichols, 2013). A review of these essential points can be a useful starting point in the discussion of family systems therapy, as highlighting the essence of how systems therapists regard clients' presenting problems may be entirely new ideas to students. In addition, presenting these elements

before viewing the film helps instructors communicate more effectively to students what they should be looking for as they watch the Jarrett family work to deal with their issues.

Considering Problems in Terms of the System or Family

Primary to the concept of family therapy is seeing the family as a unit, or a system composed of various individuals. Motivated by Western society that values autonomy over dependence, students may find themselves biased toward treating the individual. From this viewpoint, it is assumed that the individual is responsible for change. Any attempt to provide a systemic approach with this mindset, however, has the potential to reduce family-aimed therapy into a cycle of blaming and scapegoating by identifying one client as responsible for the problems within the family system. Within therapy, the client who has been identified as the source of the problem further becomes the victim, or perpetrator, as the therapist and family work to identify how that individual caused, and can solve their problems. Alternatively, when concepts of individual therapy are set aside, the focus of therapy shifts towards the meanings attached to one's behaviour in relation to other family members (Hoffman, 1985). "Family therapy redefines the individual as a system embedded within many other systems, which brings an entirely different perspective to assessment and treatment" (Corey, 2009, p. 439).

Interrupting Dysfunctional Patterns

To help shift the therapeutic focus off the family's identified patient, the therapist must help each member of the family to feel welcomed and accepted, regardless of the reason why the family presented for therapy. By focusing attention on each family member within the system, any anxiety they may be feeling about being a part of therapy and the change that may occur, may start to dissipate as they become more comfortable with the counselling process (Corey, 2009). With anxieties lowered, therapists have the

opportunity to see relationships within the system play out quite naturally in the therapeutic setting. As a systems observer of these patterns of relating, the family therapist is in a position to help family members look for clues to understand the perceptions that govern their behaviour, and develop new, more functional patterns of relating.

Developing Treatment Plans that Include Family Members

The third element of systemic work expands upon the idea that change happens within the entire system, which encourages the responsibility family members have in supporting each other's mental health and well-being. The notion that many of the problems that lead individuals to seek out counselling stem from issues within the family unit (Heru, Keitner & Glick, 2012), combined with practice guidelines that promote systemic therapy as an effective treatment option (Heru, Keitner & Glick, 2012; National Research Council and Institute of Medicine of the National Academies, 2009), compels therapists to consider the impact of that system. With this understanding, families, guided by their counsellor, have an opportunity to consider the patterns of behaviour that define the family, and to play a role in finding solutions that focus on changing these patterns in a direction that is beneficial for all members (Corey, 2009). One benefit of this approach is that the support that can be found within the family helps individuals to know that they are accepted and have a place of belonging, by feeling loved, cared for, and valued (Pernice-Duca, 2010).

Having seen the film in its entirety, ask students to consider how these three elements differ from what they have just observed. For example, instructors may ask:

- How might the counselling relationship between Dr. Berger and Conrad have benefited from a systemic approach?

- How could the Jarrett family as a whole benefit from family systems counselling?
- Are there drawbacks to a systemic approach that may prevent students from providing family systems therapy to their clients? When? With which client's or presenting issues?

Having provided a broad overview, students should be prepared for a more focused approach to studying family systems therapy that builds upon the concepts discussed in this introduction. See Table 1 for an overview of these strategies, including the clips from the film that demonstrate the key concepts students should be aware of for each theory.

Table 1

Teaching Strategies Using the Film

Theory	Key Concepts	Therapist Interventions	Demonstrated in Film (time)
Adlerian Family Systems	<i>Family Atmosphere</i>	Parental focused session; Typical day	Beth & Calvin coming home (5:08-6:20); breakfast at home (6:49-9:26); Conrad & Dr. Berger (18:00; 34:07)
	<i>Mistaken Beliefs & Goals</i>	Correcting mistaken beliefs and goals	Beth telling Conrad she has learned that he has quit the swim team (1:04:47-1:07:31)
	<i>Alienation</i>	Renegotiation of family interactions	Conrad & Beth in dining room(43:20-44:57); Conrad & Jeannine with swim team (1:26:17-1:28:44)
Bowenian	<i>Differentiation of Self</i>	Coaching; Process questions	Calvin & Beth in garage (1:19:05-1:20:55)
	<i>Emotional Triangles</i>	Detriangulation; Coaching	Calvin & Beth at golf course (1:47:54-1:49:47)
	<i>Multigenerational Emotional Processes</i>	Genogram; Therapy with one client	Family at the home of Beth's parents (56:34-58:41)

Experiential	<i>Communication Stances</i>	Family Sculpture	Conrad & Dr. Berger (1:39:05-1:45:47)
	<i>Dysfunctional Communication</i>	Acknowledging one's parts	Beth & Calvin discussing Christmas in London (24:07-25:08)
	<i>Incongruent Communication Messages</i>	Different points of view	Beth & Conrad in Buck's room (27:15-28:25)
Structural	<i>Structure</i>	Joining	Family at dinner table (13:50-14:57)
	<i>Subsystems</i>	Accommodation; Enactments	Calvin & Dr. Berger (1:17:30-1:18:22); Beth & Buck (44:35-44:53); family at dinner table (13:50-14:57)
	<i>Boundaries</i>	Boundary making	Conrad & Calvin in backyard (1:58:50-2:01:00); Beth coming upstairs (5:07-5:27)

Teaching Strategy 2: Introducing Adlerian Family Systems Theory

Adlerian therapy is shaped, in part, by the assumption that individuals may easily fall into negative patterns of interacting with others that are motivated by mistaken beliefs and goals. In this sense, while all behaviour is interactive and purposeful, the logic that guides one's actions may be faulty (Carlson & Yang, 2008; Corey, 2009). The inclusion of the family within this theory relates to the belief that it is within one's initial social system – the family – that individuals learn what is required of them to interact successfully, and find belonging with others (Carlson & Yang, 2008). Due to the important nature of this system, problems may arise from one's feelings of alienation, and the mistaken goals that stem from this belief. The three key concepts that will provide students with a basic understanding of Adler's theory are (a) family atmosphere, (b) mistaken beliefs and goals, and (c) alienation.

Family atmosphere. Family atmosphere relates to the unique ways each family has of interacting, and the influence all members exert over others, which characterizes

how family members relate to one another (Bitter, 2008). Having students notice not only the patterns of relating between members of the Jarrett family, but also how this is mirrored in relationships outside of the home, presents a clear and compelling example of the impact the family system can have on the behaviour of individuals.

Re-watching the opening sequence that shows Beth and Calvin coming home for the evening, and breakfast the next morning offers a useful starting point in demonstrating the Adlerian concept of family atmosphere. Upon viewing Beth and Calvin's behaviour in each instance, ask students what they may assume about how the Jarrett family functions.

- What might be important to each member of the family?
- What might Beth and Calvin have learned in childhood about what it means to be a parent?
- What might Conrad have learned about what it takes to be a member of this family?

Following this discussion, show both clips of Conrad with Dr. Berger to highlight the implications of the family atmosphere outside the home. Conrad has received a lot of mixed messages regarding what it means to be a member of society as a result of what he has learned within his own family. For him, making sure he is pleasing others has a tendency to take precedence over his own needs and desires.

In this case, students may assume that the best way to change the atmosphere is to get all family members in a room to work their problems out together, however, Adlerian therapists may begin in a different way: seeing parents alone to take advantage of their position as the leaders of the home to create change. Having the parents discuss a typical day in their home presents the therapist with enough information to make some tentative

hypotheses about the family atmosphere, as students have already done through the assumptions they made about the family's values and beliefs.

Mistaken beliefs and goals. Mistaken beliefs, or an individual's faulty understanding of others' behaviour is directly related to the achievement of misguided goals in relationships with others. For Beth, a mistaken belief she holds is that Conrad wants to hurt her. As a result, she seems to behave in ways that create distance between them to minimize being harmed by him, which impacts the entire family's functioning.

What is especially important for students to acknowledge here is the interconnectedness of Beth's mistaken goals and the functioning of the rest of the family. To help illustrate this point, have students carefully re-watch the scene where Beth lets Conrad know she has learned from a friend that he has quit the swim team.

- Despite this belief being held by Beth, what impact does it have on the rest of the family?
- How does each member respond in reaction to this belief that impacts the family's level of functioning?

Upon exploring Beth's mistaken beliefs with the family, and the family understanding how these assumptions contributed to dysfunctional relating the therapist would move towards promoting shifts in behaviour among family members. For example, the therapist may ask Beth to attempt to suspend her beliefs about Conrad until she has checked them out with him, asking, perhaps, what led to Conrad's behaviour, rather than insisting it is because of his motives to hurt her. Instructors may guide students through a role play of this technique to begin developing the language and skills necessary for intervening in this way.

Alienation. Alienation is a critical concept in Adlerian theory, as these therapists believe that an individual's perceived or actual lack of acceptance within one's family is central to many counselling issues, both inside and outside of the family (Carlson & Yang, 2008). Bitter (2008) wrote that "with rare exception, the atmosphere in which we are raised tends to become the model for how we expect life and the world to be" (p. 102). Comparing Conrad's experiences with his mother to the way he relates to others outside of the home helps illustrate this point.

With the Jarretts, an Adlerian therapist may hold the assumption that Conrad's mental health concerns stem from feelings of alienation from his mother. One important scene that highlights Conrad's feeling that he is of little worth to his mother is when he asks if he can help her get ready for dinner. Have students compare this clip to Conrad's date with Jeannine when the swim team arrives at the restaurant, imposes on their date, and makes Jeannine laugh.

- How is Conrad's interaction with Jeannine reminiscent of his interaction with Beth?
- What might Conrad be feeling in each instance?

In a therapeutic environment, the Adlerian therapist would invite a conversation about how the family's interactions may foster Conrad's belief that he is unlovable. The therapist may be curious to understand, from each family member's perspective, how Conrad's belief that his mother does not love or accept him impacts those around him and how it spreads to other relationships. The primary goal of the Adlerian therapist is to help the family "to reorganize so that each person contributes to the whole in a meaningful way and that the family contributes to the development of each member" (Carlson & Yang, 2008, p. 202).

- How might students work with the entire family to help Conrad feel like he is a worthwhile member of the family without causing others to feel blamed?

Teaching Strategy 3: Introducing Bowen Family Systems Theory

Murray Bowen's experiences with clients from a systemic perspective led him to believe that "human relationships are driven by counterbalancing life forces: individuality and togetherness" (Nichols, 2013, p. 76) that are shaped by patterns established throughout multiple generations of a family. Long-held patterns of relating within families can contribute to problems if individual family members cannot find a balance between these forces. The three key concepts that will be considered in greater depth here are (a) differentiation of self, (b) emotional triangulation, and (c) multigenerational emotional processes.

Differentiation of self. Bowenian therapists believe emotional anxiety within a family often leads to a sort of fusion of its members. Fusion, or a lack of differentiation of self, means one is connected to others in an exaggerated and often negative way (Nichols, 2013). McGoldrick and Carter (2001) elaborated on this point by clarifying that fusion is when family members "may attempt to control or dominate others, fail to develop themselves, or give up part or most of their autonomy out of fear that they will lose the love of other family members" (p. 283-284). With this understanding, students may immediately identify fusion between Beth and Calvin. Without this language, however, they may have initially labeled it as nagging on Beth's part, and passivity on Calvin's.

- Have students reflect on the interaction between Calvin and Beth in the garage after his meeting with Dr. Berger, labeling the behaviours they see using the language provided by Bowenian theorists.

- What do students notice about the role anxiety plays in the behaviours of each?

In many ways, the Bowenian therapist acts as a coach to families in therapy, which may seem like a somewhat foreign concept to students. As a coach, the therapist may work to promote interactions that are not clouded by emotionality, which enables them to view their situation more clearly. When Calvin and Beth's lack of differentiation shows itself in therapy the therapist may ask process questions aimed at reducing anxious and patterned responses in favour of increased objectivity. Exploring the behaviour from each individual's point of view can offer clarity regarding what drives their individual anxiety, and a direction for creating positive changes in the couple's relationship.

- As therapists, what process questions might students ask to help coach the couple through tense interactions without allowing strong emotions to pull them into old patterns of relating?

Emotional triangulation. Like differentiation of self, emotional triangulation within relationships is often the result of anxiety. Nichols (2013) wrote that "as anxiety increases, people experience a greater need for emotional closeness – or, to avoid pressure, a greater need for distance" (p. 78). In order for individuals to relieve the emotional discomfort of an interpersonal conflict, for example, a dyad may direct their attention to a third, uninvolved person to help draw attention away from themselves. Based on the inclinations of the third party, the dyad may be supported in resolving their difficulties. However, in many cases, the dyad's diverted attention allows the conflict to remain unresolved, and involve an (often) innocent third party (McGoldrick & Carter, 2001). Given the distance between the original two, closeness may be achieved with the outside member, but this bond occurs at the expense of the other member of the dyad.

Students may benefit from the imagery of a rubber band being stretched between three points to clarify the nature of triangles. In this instance, each point represents a member of the Jarrett family.

- As students view the scene with Beth and Calvin arguing on the golf course how are they noticing the distances between the points changing?
- How is this interaction reminiscent of other interactions between Beth and Calvin?

For a Bowenian therapist observing triangulation within the Jarrett family, their therapeutic aim would be to, first, make this dynamic transparent before helping family members shift it. When Beth and Calvin unknowingly revert back to their usual pattern of distraction through their concern for Conrad, the therapist may coach them by redirecting them back to the conflict at hand. While role playing this situation, have observing students continue with the imagery of the rubber band to help shape the coaching process and identify when triangulation is happening.

- Do students notice how easily the therapist can be drawn into triangulation?

Multigenerational emotional processes. Multigenerational emotional processes are based on the belief that interpersonal patterns of relating are learned and passed on to each generation. Viewing the scene with the Jarets and Beth's parents helps to solidify the notion that individuals carry with them processes they experienced in their own childhood homes. Working as a group, begin this discussion by creating a genogram that includes each of the individuals seen in this clip. First add family members, before moving on to include as much information as possible about each individual, given what students have learned from the film. New connections between the generations may be made clear as students visually re-create this information.

- Focusing on Conrad, Beth, and her mother, what patterns are beginning to emerge?
- What might Conrad carry on into his own family?

As students begin to see how much information can be gleaned from a genogram they may be able to appreciate the Bowenian notion that it is not necessary to see all members of the family for positive changes to occur. For example, understanding that Beth comes from a family that does not feel comfortable addressing emotionally difficult topics, Calvin may feel less frustrated with Beth's insistence that they don't talk about these things. Instead, he may decide that these topics need to be delicately and consistently broached in a safe environment to help create a positive shift.

- What are some possible benefits and drawbacks of seeing just one member of the family?

Teaching Strategy 4: Introducing Experiential Family Systems Theory

Virginia Satir's Experiential Therapy is guided by an appreciation for the inner resources all humans have available to themselves to make the changes they desire, which may already be a familiar concept to students. Such a stance guides a therapist's practice as they work to address the communication patterns that create dysfunctional patterns of behaviour within families. From this teaching strategy students will develop an understanding of how "experiential family therapists work from the inside out, helping individuals uncover their honest emotions, and then forging more genuine family ties out of this enhanced authenticity" (Nichols, 2013, p. 146). The concepts central to the experiential therapist's work that will be expanded on here are (a) communication stances, (b) patterns of dysfunctional communication, and (c) incongruent communication messages.

Communication stances. A hallmark of the experiential method was Satir's identification of four distinct roles family members may assume and how these roles can impact the functioning of the entire family. The roles she identified were those of placator, blamer, super reasonable, and irrelevant (Satir, Banmen, Gerber, & Gomori, 1991). Conrad's role as the placator is clearly seen throughout the film. Using Conrad as an example, students can begin to see how any stance contributes to dysfunctional communication within the family.

Play the clip of Conrad with Dr. Berger where he goes on to take full responsibility for the problems in his family. Students should be able to see that the placator is the people pleaser of the family, whose self-talk and actions revolve around the notion that one must be nice - never causing trouble, or speaking harshly, but taking full responsibility when things go wrong (Satir, Banmen, Gerber & Gomori, 1991). Rather than taking care of his own needs, Conrad spends his time trying to ensure that others are not bothered by him. True to Satir's observations over the course of her career, the psychological effects of Conrad's role as the placator include depression and suicidal behaviour (Satir, Banmen, Gerber & Gomori, 1991).

Noticing the appearance of these roles, the therapist may have family members sculpt these stances in an exaggerated, physical way to draw attention to this pattern. For example, Satir, Banmen, Gerber, and Gomori (1991) describe the modeling of the placator's body language as "on [one's] knees...ward[ing] off an impending blow" (p. 38). Have students create this family sculpture to illustrate the impact of this role.

- How would those around Conrad be forced to respond when he acts as the placator?
Students can contribute their suggestions of where, and in what position Beth and Calvin may be in this family sculpture.
- How might the family sculpture change as Conrad releases some of the pressure he places on himself during his session with Dr. Berger?

Dysfunctional communication. Poor communication within families is characterized by communication that is “indirect, unclear, vague, dishonest, distorted, and incomplete” (Rasheed, Rasheed, & Marley, 2011, p. 140). When families are unable to communicate in effective ways, Experiential practitioners believe the family then lacks the skills necessary to create an environment that nurtures its members (Satir, Banmen, Gerber, & Gomori, 1991). The result of poor communication patterns is often feelings of low self-esteem (Satir, Banmen, Gerber, & Gomori, 1991). When families are immersed in communication patterns that are confusing, victim blaming, or distorted, the family tends to lack flexibility.

In many ways, Beth’s communication to, and about, Conrad is distorted. Show students the scene of Beth telling Calvin she wants the family to go away at Christmas. Rather than acknowledging that things are different this year, she wants to do what they’ve always done.

- Have students consider the ways in which Beth’s distorted and incomplete communication leaves the entire family trapped in a pattern that fails to acknowledge the changes that have occurred?

In order to address Beth’s distortions - that if Conrad was able to change, the issues the family is dealing with would be resolved - the therapist may work with Beth

toward more open and honest communication. Doing so may allow her to acknowledge her own discomfort within her family, why she favours Buck, the animosity she has toward Conrad and Calvin, and how her family of origin history has led her to deny her own emotions.

- How might an Experiential therapist use themselves as a tool to promote effective communication? How would they respond to Beth's distortions when they arise in therapy?
- What feelings might Beth be afraid of acknowledging? Helping students recognize how this form of communication releases her from having to feel vulnerable or fearful serves as an important lesson in the necessity of acknowledging these hidden emotions before being able to address them.

Incongruent communication messages. Congruency in communication is achieved by matching verbal and non-verbal messages. In addition, ensuring that the verbal messages shared use words that accurately convey one's emotions and experiences is an important factor in enhancing the self-esteem of family members. When messages are incongruent – the tone of voice, one's posture, or a gesture made don't match the spoken word – family members are left confused, and unsure of which message they should respond to (Rasheed, Rasheed, & Marley, 2011).

While this concept may represent itself fairly clearly throughout the film, have students elaborate on it by identifying examples of incongruent communication. As future therapists, this is an important tool in working with clients.

- What are some of the subtle non-verbal signs that they see displayed that demonstrate a lack of congruence in communication?

Show students the clip of Conrad finding Beth in Buck's room, when she seems to have a difficult time connecting with him. One useful technique for shifting Beth's view of Conrad and identifying how her communication patterns may be confusing to him would be to return to that situation in her mind, playing it again from her point of view, then her son's, then an outside observer.

- Have students place themselves in Beth's position as a client to experience what that may be like. How are they seeing Beth and the situation differently?

Teaching Strategy 5: Introducing Structural Family Systems Theory

Minuchin's understanding of how problems in the family unit arose and were maintained was linked to the way the family system organized itself. The patterned ways in which the family is inclined to function represents their structure, the understanding of which guides the therapy process and allows for the "therapist to intervene in a systematic and organized way" (Nichols, 2013, p. 122). Structural therapists believe that in order to address the problems families bring to therapy they must first address the system's organization that influences problematic interactions. There are three concepts that are hallmarks of the Structural approach to family therapy and are important for students to have a clear understanding of are: (a) structure, (b) subsystems, and (c) boundaries.

Structure. The structure of a family relates to the way the family members organize themselves in relation to one another. Despite changes that have occurred that make this structure less functional, families may fail to accommodate to these changes in terms of their organization (Nichols & Schwartz, 1998). Having students think about

structure in a physical sense can aid in the understanding of this concept and how it is addressed by a counsellor.

Viewing the family's placement at the dinner table is indicative of the structure they have created for themselves within their system.

- What can students assume about each members position in the family?
- What might Calvin's seat between Beth and Conrad be symbolic of?

From a Structural perspective, structures such as these are often long-held rules within the family that are rarely considered needing any alteration, and will likely be recreated when the family sits down for their first session with a counsellor. Based on a family's hesitance to change, counsellors need to move slowly at the start of therapy. One of the tools students need to be aware of is the process of joining families in much the same way they would meet individual clients at a place that is comfortable to them.

- Have students brainstorm ways they may help the family feel comfortable within the first session. How would they subtly engage the family's usual structure?

Subsystems. Subsystems refer to the groupings that occur within families that contribute to the way the family works (Nichols, 2013). These subsystems may provide families with a strong sense of their organization, but can also keep them stuck in patterns that may no longer be adaptive. Having students view Calvin's meeting with Dr. Berger, Beth and Buck's interaction in the backyard, and the family of three at the dinner table can shed light on some of the subsystems in place among the Jarretts.

Imagining the family around the dinner table prior to Buck's death, students can begin to hypothesize about the substructures in place by considering a variety of cues that include space, generation, engagement, gender, and tasks (Nichols, 2013).

- Which subsystems do students notice? What roles do those subsystems serve?
- Now that the family structure has been altered, how does maintaining their old subsystems impact the family's functioning?

Having considered these questions students will be better able to recognize the value Structural therapists place on seeing the entire family in sessions, as subsystems are typically more accurately recognized by an objective observer. Having accommodated to the Jarrett's preferred structure the therapist can now utilize enactments to help shift the subsystems in the family. The role of the therapist in this instance is to help the family practice a new structure: either discussing what may have gone wrong when things fall apart, or pushing them to keep working at it (Nichols, 2013). Have students' role play an enactment that requires the family to discuss Conrad quitting the swim team.

- What kind of role does the therapist need to take on to prevent the family from simply reverting to the way in which the conversation transpired in the film?
- How might a therapist encourage the family to try something different?

Boundaries. In healthy families, boundaries represent distinctions between individuals, and can range from rigid to diffuse. Clear boundaries, the healthy middle-ground, promote independence in family members, without moving toward isolation. Rigid boundaries, on the other hand, promote that independence, but rely on less affection and support to do so. The opposite of rigid boundaries are those that are diffuse, promoting enmeshment between members. In these families, diffuse boundaries discourage independence by way of too much closeness.

Re-using the genogram from earlier can aid students in understanding this concept by seeing a visual representation of rigid and diffuse boundaries between Conrad and his

parents. These boundaries are demonstrated in the film in the final scene between Conrad and his father, and earlier with Beth when she walks past Conrad's bedroom without checking in on him as his father does. These patterns are further solidified in the clip when Calvin talks to Conrad after he and Beth have an argument regarding him not telling her he was not swimming anymore.

- If students were to envision this instance enacted in the therapy room, how might they help create healthier boundaries within the family?
- What might prevent students from addressing the problematic boundaries they may observe between their clients?

While having Beth and Conrad engage in conflict may initially seem problematic to students, having them address it fully can help them create this shift. Additionally, allowing the enmeshment to continue between Calvin and Conrad may make sessions more pleasant, but both parties need to be encouraged to speak for themselves. Students may begin to appreciate the benefit of seeing these groupings separately to ensure family members are not distracted by others as they work to shift unhealthy boundaries.

Project Limitations

While this project provides a number of teaching strategies that fit into the time constraints often imposed on instructors of counselling theory (being required to teach individual and systems theories in one three credit hour course), the most apparent limitation is that its scope is limited to only four theories of family systems therapy. While this focus on four theories does provide a broad foundation for further learning within a short period of time, it does not directly promote an understanding of other

theories, or the changes that have occurred within the realm of systemic work in more recent years.

In addition, my understanding of each concept is impacted by my own views and beliefs which may differ from others, and were not subject to an external review. For example, I did not take a systems theory course, so my knowledge came primarily from the preparations I did on my own for work at my practicum site and this manuscript. Based on recommended readings from various family therapy professionals, and my own experiences as a novice in the field of family therapy, I developed a foundational knowledge on which to base this resource.

Areas of Future Research

As a result of the limited scale of this resource, additional course development in counselling theory that utilizes the film *Ordinary People* (Paramount Pictures & Redford, 1980) could extend to include more family systems approaches such as Narrative Therapy, Cognitive-Behavioural Family Therapy, and Solution Focused Therapy for families. Mirroring the format of this approach has the potential to provide a broader foundational knowledge of family systems work, and a full course in family systems theory.

In addition, the use of this film throughout an entire course of counselling theories that includes individual focused therapies could be useful. The benefit of such an approach is the opportunity for students to clearly and effectively contrast the various theories as they apply to the Jarrett family, having gotten to “know” these characters so well. For example, having approached Conrad and Beth’s relationship from a number of

perspectives, students may more clearly see the differences between various theories, and more broadly, the fundamental differences between individual and systems work.

The following recommendations are directed at those individuals who choose to experiment with this teaching resource to see if it enriches students' learning of family systems concepts in introductory theory courses in graduate level counselling programs. In all cases, instructors are encouraged to contact the author with feedback regarding their use of this project, and student engagement and outcomes.

Of primary importance is an assessment regarding whether or not students enjoy the film *Ordinary People* (Paramount Pictures & Redford, 1980). If students do not find the story of the Jarrett family compelling they may quickly lose interest in course material that is focused on this film. Given this possibility, future research could identify other films students may find more engaging that provide the character development and plot necessary to promote theoretical knowledge of family therapy.

In an effort to understand the value of this resource, future research may be done to see if the approach used promotes increased understanding of family therapy compared to a lecture style format that provides a theoretical overview of family therapy. A possible research question to evaluate the efficacy of using the film as a pedagogical device could be: Do student self-reports regarding their understanding of family systems theory differ based on the teaching style provided by instructors? This study could analyse the learning of two groups of students presented with one of two different teaching styles: the process promoted in this manuscript, versus one that is based on textbook learning. At the end of a designated period of time spent teaching these theories, researchers may ask students to rate their understanding of the various concepts on a scale from one (do not understand)

to ten (fully understand). While this study relies on subjective self-reports of students, it offers a starting point for additional future research by providing a general understanding of the student experience and learning outcomes.

Finally, an important area of future research is to determine if instructors of family therapy find this teaching format a useful addition to the information found in textbooks of counselling theory. Some questions of interest are: Does the film contribute in a positive way to the teaching and learning that occurs in the classroom? Are students better able to maintain an objective standpoint by discussing fictional characters, rather than having to bring their own family issues to mind? Does the structure of this resource serve to scaffold students' learning by starting at a more basic level before moving on to specifics?

Conclusion

This manuscript provides instructors responsible for teaching a counselling theory course a resource for helping shift their students' conceptualizations from an individual to systemic theoretical focus. Providing five teaching strategies that elaborate on the key concepts of family systems theories as a whole, as well as the specific theories of Adler, Bowen, Satir, and Minuchin provides specific concepts of what it means to think systemically. With this foundational knowledge students are in a position to more fully appreciate the impact of the family system on its members and how this systemic understanding may be addressed therapeutically.

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Appendix B

Instructions for Authors from

Training and Education in Professional Psychology Journal

The journal where the proposed manuscript (see Appendix A) will be sent to for review has specific instructions that authors of manuscripts must follow. The following is a direct copy of the relevant sections taken from the source below:

American Psychological Association. (2014). Instructions to authors. Retrieved from http://www.apa.org/pubs/journals/tep/

Call for Manuscripts

The Editorial Board of Training and Education in Professional Psychology® (TEPP) encourages the APPIC membership, the membership of the academic training councils, and all members of the psychology education community to examine issues relevant to the process and procedures of psychology education and training and contribute manuscripts to this journal.

TEPP is specifically for psychologists and other mental health professionals who educate, supervise, and train mental health practitioners during their academic programs as well as during their participation at practicum, internship, and postdoctoral settings.

Manuscripts for TEPP can be research or theory based. All manuscripts must focus on the practical implications of the proposed theory or summarized research. Any topic in the general area of supervision, training, or the process of education leading to licensure is appropriate for examination and discussion in TEPP.

TEPP manuscripts examine such topics as:

- Supervision theory and process

- Supervision procedures
- Supervisory relationship
- Supervisee problems and due process issues
- Training activities
- Ethical and legal aspects of training and supervision
- Boundary issues
- Training in research and scholarly activity
- Research into the process of supervision
- The process of training leading to licensure

Special thematic issues of the journal will provide in-depth examination of a particular training and education topic.

Manuscripts

Manuscripts should be approximately 25 pages in length in total including tables and references (more pages must be strongly justified).

Each manuscript should conclude with a specific section on the implications of the research or theory presented.

Manuscripts should be written with the goal of enhancing the practice of education, training, and supervision.

Review Policy

Once TEPP receives a manuscript, the Editor reviews the manuscript for appropriateness for publication and competitiveness for publication in TEPP. If appropriate, the Editor assigns the manuscript to an Associate Editor who seeks blind review by at least two consulting editors or ad hoc reviewers.

The editorial review process takes approximately 60 to 90 days for the author to receive editorial comment about the manuscript

Manuscript Preparation

Prepare manuscripts according to the Publication Manual of the American Psychological Association (6th edition). Manuscripts may be copyedited for bias-free language (see Chapter 3 of the Publication Manual).

Review APA's Checklist for Manuscript Submission before submitting your article.

If your manuscript was mask reviewed, please ensure that the final version for production includes a byline and full author note for typesetting.

Double-space all copy. Other formatting instructions, as well as instructions on preparing tables, figures, references, metrics, and abstracts, appear in the Manual.