

THE SYMPTOM AND THE SYSTEM: THERAPY AND BOWEN FAMILY SYSTEMS THEORY

It was never easy for Murray Bowen and others explaining his family systems theory to communicate to the helping professions that family therapy is a way of seeing and thinking and not a technique about how many people participate in a therapy hour. The method of coaching individuals towards differentiation of self in the family emotional system is and has been for some time the most common therapeutic approach used by practitioners of Bowen theory. Simply put, the focus is on improving one's ability to be separate yet in meaningful relationship with important others. The focus on self in the system is used, successfully, to "treat" any clinical problem one can think of. This therapeutic focus taps into deep emotional processes devised in evolution which drive and guide mind, behavior and the individual in all social species. Seeing this evolutionary product, the emotional system, leads to a mindful neutrality in the therapist's relationship to life and therefore to the patient and the problem. However, like any big change deliberately sought, it takes some pre-existing vision and flexibility to deal with the difficult, the unexpected and the unknown, and most of all, a determined and disciplined effort over time to get to a systems view.

On Friday, October 10th, at the general RECAMFT meeting Laura Havstad, Ph.D. will be presenting on Bowen theory and family therapy. In her presentation Dr. Havstad will focus on the following issues:

- A brief overview of Bowen Family Systems Theory and the assumptions about human nature that it stands on
- Humans as part of nature and the emotional system that Bowen observed and described
- The concepts of the theory and clinical examples
- The ubiquity and functioning of the relationship system in symptom development and symptom remission and the role of anxiety
- Problems of seeing the emotional system; subjectivity and bias in understanding self and others

October 10th RECAMFT Meeting

10:30 - 11:00 social & sign in
11:00 - 1:00 meeting

The Symptom & the System: Therapy & Bowen Family Systems

Laura Havstad, Ph.D.

Odd Fellows Temple/ Mercer Hall, 545 Pacific Avenue, Santa Rosa

November 14th, 2008

Enhancing Client Resources with the Use of Somatic Techniques
Kitty Chelton, MFT

December 12th, 2008

Holiday Celebration

January 9th, 2009

Maternal Infant Bonding & Related Issues
Tony Madrid, Ph.D.

- The retreat of the profession from systems thinking
- The individual and the system – what one person can do in a symptom producing system
- Clinical issues: coaching individuals toward differentiation of self; working on oneself in one’s own family; basic principles of family systems therapy
- Becoming expert as a systems thinker and family systems therapist

After completion of the presentation the attendees will understand: **1)** How Bowen theory directs the therapist to pay attention to the relationship system, how to think about the clinical problem, and self regulation; **2)** The functioning and the critical role of the relationship system in symptom development and remission; and **3)** the therapeutic method of coaching individuals “to differentiate a self in the emotional system” as a “treatment” for emotional illness, relationship problems and even physical illness.

Laura Havstad, Ph.D. is a Clinical Psychologist in private practice in Sebastopol since 1981 where she has lived and raised her family. Dr. Havstad is the Director of Programs in Bowen Theory, an educational non-profit in Sonoma County since 1989. She leads the Theory and Clinical Practice Seminar for clinicians seeking expertise in Bowen theory and therapy in Sebastopol which commences its 20th year this fall. She is a consulting editor of the journal *Family Systems* and taught on the faculty of the Behavioral Science Program of the Family Practice Residency Program of Community Hospital in Santa Rosa as an adjunct professor of Family and Community Medicine at UCSF. Dr. Havstad has lectured and presented papers frequently on Bowen family systems theory and psychotherapy in the United States, and had the opportunity to present and lecture in Bowen theory to professionals and graduate students last year at the University of Kwazulu Natal in South Africa.

Join us for this highly informative presentation!

Programs Chair, Christine Erickson, MFT is in private practice in Santa Rosa and can be reached at 888-8363.

President’s Message

Kate Maxwell, MFT

I often wonder why it is that other people don’t see what I see in a political figure. So I have a question for all you therapists, all you masters of observation. My question is a serious one: Do you think that the experience of careful observation of our clients gives us an inside awareness of political figures as well?

In the past I’ve often felt that I could sense the inner experience of some of our political leaders. My sense wasn’t just limited to political figures, but to other public figures as well. But today I’d like to focus on the politicians. I’ve often had fun demonstrating the way Bush walks because there is a communication in his motion and when I imitate his walk I believe that I can feel the state of his being. Give it a try: pull your shoulders back, pull your chin in, puff out your chest, let your arms swing loosely from your shoulders, turn your toes out and try walking. How does it feel? As long as I’m bashing a Republican, in the interest of fairness, let’s consider a Democrat: Bill Clinton had the knack of

delivering very serious topics with an amazingly self-satisfied grin. (A little narcissism there perhaps?) I had a lot of respect for Bill Clinton, but I often wished that he could place the topic foremost, rather than himself. His incongruence was probably noticed by more than a few therapists. You might try grinning while talking about a serious situation. How does that feel?

Imitation is a wonderful tool! As children, it was one of the first ways we explored acting in a social group, although, the basis of many of our postures and facial expressions are not learned, but are innate behaviors which communicate our emotions and often our social status. People who don’t have the ability to read the language of gesture, facial expression and posture are severely socially and/or psychologically impaired. Somewhere recently I read of a study that indicated the lowered head, which is recognized as a sign of defeat among humans, represents the same sign of defeat

among many animals. Did we need a study to verify that?

So, my point is that facial expressions, movements and posture communicate a link to an essence of experience. It's one of the points of Malcolm Gladwell's enlightening book, Blink. Most humans are privy to the meanings of physical communications. Now let's add in the additional information of "tone" of voice. I believe that in our culture we are trained to ignore the tone of voice and respond only to the meaning of the words. How many times have you had the experience of responding to tone of voice and been told that you misinterpreted what the person said: "I said ...!" As a culture we may be missing a lot of valuable information when we agree to play by **those** rules. How would you define an arrogant tone of voice? Do you think there's a common interpretation? Can you imitate an arrogant voice? If you imitate the voice what other physical expressions come into play? Imitation is a lot of fun and conveys a great deal of information to the person doing the imitation. Have you ever privately imitated a client just to see how it might feel to inhabit the person? I recommend it. It can be quite informative.

When we sit with a client we are using all the information available to us in order to understand the client's experience and, of course, we can expand our understanding with questions or with more subtle invitations to exploration. This training undoubtedly seeps into our everyday world and we may find that we can read people fairly well. However, I must say (from personal experience), that I can really be off the mark when I have an agenda. Of course in the therapeutic environment we do our best to avoid personal agendas. Remember Al Gore's presentation when he was running for President? So stiff he was that he scared a lot of people. Do you think that they were concerned that his mind was also stiff? Well now we know that his passion lay elsewhere and when he focused on his passion the stiffness melted away (his speech at the Democratic Convention). Considering the element of **passion**, we tend to trust someone when they are passionate—at least we tend to trust them in the area related to their passion.

When I observe our current presidential candidates, I am watching posture and facial expression as well as listening to tone of voice. I am watching for indications of respect for diversity as well as for arrogance and rigidity. I am looking for signs of passion and sincere commitment. Can I approach the political candidates free from any bias? No. I don't believe that I am really able to **see** any of the candidates clearly.

As therapists we may be more sensitive to somatic and psychological expression than the average person, but

we will also, typically, have gaps in our ability to assess the financial, organizational skills, etc., necessary to effectively manage the leadership of the country. We all have the tools, by the simple virtue of being human, to understand much of another person if we can remain objective. However, our objectivity is typically clouded with emotion when it comes to backing a political candidate. When it comes to choosing between political candidates perhaps all we can do is reveal more fully to ourselves our own values and agendas.

Good luck in your search for your chosen candidate. Have fun imitating all of them for your own edification and **do** play the voting game.

Kate Maxwell, MFT

Kate Maxwell is in private practice at the Erickson Institute in Santa Rosa and can be reached at 237-8900.

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The 5150 Raffle is held every month at the RECAMFT general meeting. All attendees are eligible to win. Winners please contact the person donating the service within 6 weeks. Feel free to pass the prize to someone else if you are not able to take advantage of the offering. If anyone has ideas about people who might be interested in donating future 5150 prizes, please contact Jan Lowry-Cole at 542-7987. Enjoy! (For winners of the raffle, please give Jan feedback about the service you receive.)

For those of you who may not have read the first of my columns in the September edition of RECAMFT's Therapist, It feels important to recap on the purpose of this monthly column. My recent move to Navarro, Mendocino has resulted in professional need and desire to widen my professional connections to include my new home county. It is also a way to represent the therapeutic agencies and private practitioners who do important work but are under-represented. My intention is to gather information about therapeutic services and agencies in Mendocino and Lake Counties and share them with RECAMFT'S readership for the purpose of developing referrals and building resources.

This month, I'd like to focus on Redwood Children's Services an agency that has as its credo, "Taking Action to Enrich Our Children's Futures." RCS is a non-profit and nonsectarian agency that provides specialized care and services to foster children and their families throughout the Mendocino and Lake County areas. As a foster child herself, Executive Director, Camille Schraeder started the agency in 1995 in an attempt to improve the lives of foster children in the area. In a phone interview Camille stated that what makes RCS special is that they are dedicated to improving the lives of all children in Mendocino and Lake Counties and particularly to those in the 16-21-age range who have a difficult time transitioning into independent living situations. To illustrate this, Camille said when she became independent she couldn't drive, had no idea of how to find a job and hadn't been in a grocery store for 6 years.

Camille feels that what sets RCS apart from other multi-level agencies is that Programs are created specifically to respond to needs of particular children. For instance, she said that Clover House was created in response to the needs of one little girl in particular. She also feels strongly that a collaboratively operated program such as Transitional Housing Placement Program's Mendocino House in Ukiah where Department of Social Services, County Mental Health, the County office of Education and RCS all take equal responsibility for the health, well-being and success of children transitioning into independent living situations. This creates a strong safety net and after one year of operation, they have a 100% success rate. She feels fortunate that the public agencies in Mendocino and Lake Counties are



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Bob Casanova is an experienced, licensed marriage and family therapist (MFT) who provides realistic, comprehensive recommendations to Therapeutic Schools, Residential Treatment Centers and Outdoor Therapeutic Treatment Programs for teens and young adults who need help coping with such challenges as:

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- Learning differences
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- Self harm
- Eating disorders
- School failure or refusal
- Adoption/attachment issues
- Asperger's/PDD/NLD
- Family conflict
- Loss and grief
- Divorce

BOB CASANOVA Educational Consultant
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progressive and committed to this type of cooperation and continuity.

This tendency toward developing programs to meet community need resulted in a rapid growth within RCS. Committed to best practices while serving community needs, RCS was accredited in 2005 through the California Alliance of Children and families, which requires auditing of every program and department throughout RCS.

Since its inception, RCS has grown from the original, Foster Family Agency (FFA) to include, Mendocino County Children's Center (MCCC) in Willits, Clover House and Crossroads, both in Upper Lake, Transitional Housing Placement Program (THPP) in Ukiah, Children's Therapeutic Services (CTS) and RCS Summer Camp. FFA has facilities in Ukiah and in Lakeport. CTS have centers in Ukiah, Upper Lake and Willits and is the mental health component of RCS. Although CTS has a number of in-house licensed therapists and interns, they also contract with a number of private mental health practitioners in Mendocino and Lake Counties.

This is only a brief overview of the extensive network of services under the umbrella of Redwood Children's Services. If you would like to learn more about this organization, please go to their website at www.rcs4kids.org or call their toll free number at 800-219-5800. If you have thoughts or comments, please contact me at the number below. Otherwise, I'll talk to you next month.

Lesley Osman, MA, MFT, graduated in Transpersonal Psychology from John F. Kennedy University's Graduate School of Holistic Studies, and specializes in Ecotherapy. She apprenticed in Wilderness Rites and is a certified Applied Ecopsychologist and Earth-based healer. Lesley has a private practice in Point Reyes Station, Marin County where when appropriate the work is conducted outdoors. She offers trainings to other professionals who have an interest in "greening" their group or individual practice. Lesley can be reached at 415/663-8655 or www.ecoroots.org

TO: Mendocino and Lake County therapists
FROM: The RECAMFT Board of Directors

We welcome you to our newsletter mailing list and as honorary temporary members of our chapter. We invite you to join RECAMFT, maybe even make it to a monthly meeting (we would love to meet you), and support this column and the cost of mailing to your counties in the year to come. Please contact Lesley or Gail with questions or ideas. We would love to hear from you.

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WHAT YOU MISSED By Michael Krikorian



Wendy describing differences between BPD and PTSD

On September 12, we heard an informative and entertaining presentation by Wendy Wheelwright, MFT, on "Treating Narcissistic and Borderline Personality Disorders." Besides maintaining a private practice, Wendy works as Program Director of Progress Sonoma, a crisis residential unit for County Mental Health patients. For this presentation, Wendy combined her extensive knowledge of personality disorders with her self-confessed sarcastic sense of humor to lay out a model for identifying, understanding and treating these disorders.

Wendy first described those clients with Narcissistic Disorder. She told of how, due to the fragile sense of self, they typically enter therapy via a court mandate such as domestic violence or due to depression created by not getting the unrealistic mirroring they seek from the world. She states that the Narcissist fundamentally lacks a sense of self and seeks to fill this void through external appearance, validation, associations and accomplishments. Narcissists avoid the underlying feeling of a vast emptiness by using grandiosity and then rage at those who don't act in a way that reinforces their grandiose false self. Freud, Kohut and Kernberg all see narcissism's origins in the first 3 years of life when a problem arises in the normal course of psychological development. Interestingly, Wendy states that there may be an increase in narcissistic disorders today due to more parents being unable to say "no" to their toddlers.

Treatment takes skill and an awareness of the common countertransference reactions such as the desire to "burst their bubble." She suggests not confronting the self-aggrandizement at first but to gradually point out their vulnerabilities and defensive patterns over time. She described her way of "playing the narcissism against itself" when giving a confrontation by stating first, "I'm thinking that maybe you can handle my hunch about what is happening here because you are a pretty (aware, smart, on-the-ball) person..." She also pointed out how group therapy can provide a chance for the Narcissist to do reality testing of their perceptions and learn to acknowledge others as separate persons. The danger is that they can take over the group and end up grandstanding.

Next, Wendy educated us on Borderline Personality Disorder (BPD). She states that BPD has its origins in significant abuse or neglect before age 5. The core issue for them is emotion dysregulation. This manifests as the individual being oversensitive and overreactive with an inability to modulate the resulting strong emotion. The person may then act on these strong emotions with everything from fights to suicide gestures to reckless spending, sex or substance abuse. The BPD tends to see people as all good or bad with resulting idealization or devaluation. Life is built around efforts to avoid real or imagined abandonment. Wendy states that one way to differentiate BPD from PTSD or DID is that Borderlines blame others for their suffering while those with PTSD or DID are aware of problems within themselves.

Wendy sees (and practices) Dialectical Behavior Therapy (DBT) as an effective treatment for Borderline Personality Disorder. DBT is a structured treatment that has both an individual and group component weekly. During group sessions, clients are taught 4 types of skills: mindfulness, emotion regulation, interpersonal effectiveness and distress tolerance. Then, during individual sessions, the client brings in issues from the week recorded on "diary cards." Self injurious behaviors take first priority followed by therapy interfering behaviors, then quality of life issues. The work focuses on improving particular coping skills use in daily life.

In the beginning stage of DBT, the client is actually encouraged to call the therapist between sessions if needed for help in coping. The client is gradually weaned from depending on these phone calls over time. DBT teaches many skills to help the client build the ability to self-soothe and modulate their own emotional state so as to reduce desperate acting out behaviors and an unstable life.

Thank you, Wendy, for a lively and informative presentation. Wendy can be reached at 526-6902.

Michael Krikorian, MFT, sees couples and individuals, adults and teens in his practice in Santa Rosa. 579-0838

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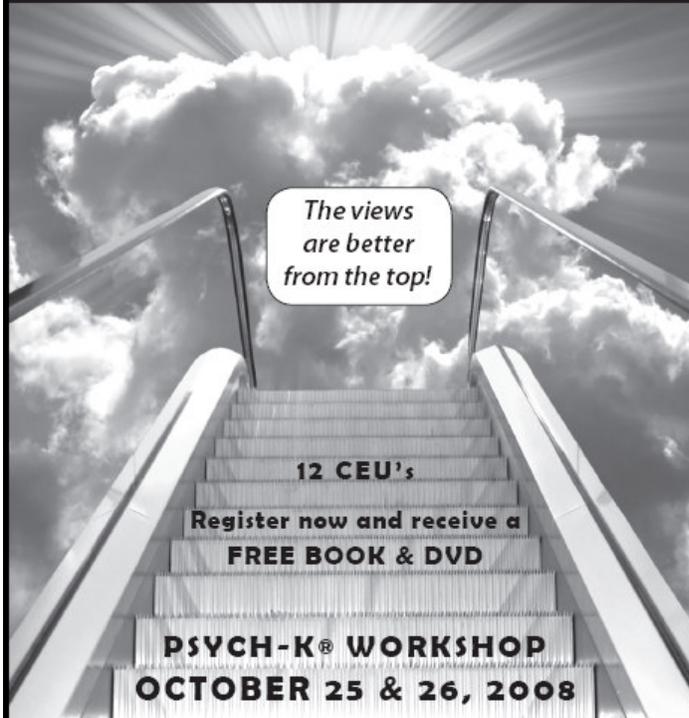
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INTERN GREETINGS *from Karen Nemrow*

Can it really be September? Welcome back! I want to take this opportunity to welcome all new interns to our chapter. Perhaps this is the first newsletter you are receiving? The newsletter is a great way to keep up with what's happening in the county. Please let me know if there are any events/trainings/happenings that would be of interest and I will post them in the next newsletter. One of my goals for this year is to start an informal intern support group. It can get lonely out there and it would be great to be able to bounce ideas around and support each other as we go through internship. Please send me an email

(karenbnem@comcast.net) if this is something that appeals to you. Do you have ideas or suggestions about what support you wish the chapter offered to interns? Let me know!

Looking forward to meeting and getting to know each other as the year begins. I hope to see many of you at the next chapter meeting.

Karen (*Sorry, this missed the September issue. Editor*)

Karen Nemrow, MFT Intern is in private practice in Petaluma and can be reached at 765-4999



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Ethics Group Meeting

The Ethics Group meets once each in the Fall, Winter, and Spring. Topics for group discussion are generated from our own clinical practices or by an issue that has come up for one of us. For example, we discussed how to create and put in place a Clinical Practice Will, which we all should have.

Our meetings are informative and stimulating and RECAMFT members are invited to attend. No ongoing commitment is required.

Next Meeting - October 3rd, 2007

1:30 - 3:00 pm

For more information call Coralia Serafim at 781-0133

Trauma Response ***Margaret Newport***

The American Red Cross is presenting a **Foundations of Mental Health** workshop for licensed MFCs, LCSWs, and RNs on November 8th, 2008 from 9:00-5:00 in San Rafael at 712 Fifth Avenue. This is a required class for Certification with the CAMFT Trauma Network. There is no charge for attendance, but if you want the 6.5 CE units, the cost is \$20. For more information call 510 595-4447. Join the team!

Margaret Newport, Trauma Coordinator RECAMFT is a member of American Red Cross, CAMFT Trauma Response Network and worked with Project COPE, County Volunteer Fire Dept Emergency Medical Technician & Critical Incident\Debriefing, and Santa Cruz Community Counseling Center Crisis for Youth & Families Program Manager.

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Rhaea Maurel	1997
Paula Hall	1996
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Don Scully & Randi Farkas	1993-1994
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IN THIS ISSUE

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- Join our Advertisers for Targeted Referrals inside The Redwood Empire Therapist