

# [Differentiation of the self](https://assignbuster.com/differentiation-of-the-self/)

Murray Bowen laid a foundation for family systems theory and established an effective way of carrying out family therapy. Among his concepts is that of differentiation of the self, which will be explored in this paper. The paper begins with my own connection with the idea. Next, I explore the theory, describing key players in its development, those related to differentiation, and how it can be used to treat family therapy issues.

Keywords: Bowen, differentiation of self, family therapy

” I am he as you are he as you are me and we are all together.” (Lennon and McCartney, 1967.)

In the above lyrics from the song “ I am The Walrus”, the singer sees himself and others as just another version of each other. Any differentiation between self and other is erased.

The ability to self-differentiate, however, is critical for personal development, especially with respect to family members. Consequently, the differentiation of the self is not merely a theoretical idea but also a life task for all individuals, including family therapists. As I listen to this Beatles’ song, I reflect upon how I both might find my place in the world and how I might relate to my family of origin. I find Bowen’s theory of differentiation of the self compelling because it offers me a means of reviewing past family relationships and dealing with present dynamics in a positive manner, rather than simply cutting off family members entirely and disowning them.

Personal Connection To The Theme

My interest in Murray Bowen’s idea of differentiation of the self arose as I reread family therapy literature. Bowen’s theories spurred me to reevaluate my life, most recently my marriage of June 2010 and my first move outside my parents’ home in September of the same year. I had moved into this house with my family in August 9, 1974, the day that Richard Nixon resigned from office. This move from our previous home took place to live in a better school district as well as help care for my elderly maternal grandparents. Those grandparents died in 1975. On February 13, 1976, just three days after my ninth birthday and when my brother was not yet eight, my father died of a heart attack.

The changes to our family dynamics were profound. At a very young age, I was forced into a position in which I had adult responsibilities as “ the man of the house,” and as my mother’s confidante, which included not only hearing adult topics, but being triangulated when my brother acted out. Other new alignments included us brothers acting against our mother and my brother and mother aligning against me. These dynamics have continued and remain the dominant modes of interactions between us three. At times, over the last nineteen years, our emotional interactions became particularly intense, including my departure to attend college, my brother’s moving in and out of the house several times, and my mother’s repeated illnesses.

From 1991 to 2010 I served as my mother’s caregiver, with extensive duties including her transportation, errands, house-cleaning, unofficial psychotherapy, and some medical care. During this period, I sacrificed career advancement and earning potential by refusing to consider jobs that would lessen my availability to her if needed. At the same time, I also pursued avenues such as computer training to keep me busy and out of the house. It was very difficult to resolve these competing goals.

The dynamics began to change when I met my wife in April, 2009. We bonded over a period of six months, became engaged, and were wed on June 27, 2010. My mother was opposed to our relationship from the start, insisting that a relationship would get in the way of my schoolwork. My brother also was hostile to my wife, saying snide things. Clearly, both preferred the status quo of my enslavement. After the wedding, my wife moved into the house and helped me take care of my mother for two months. This situation soon became intolerable for all three of us. We moved out on September 1, 2010, angering my brother because he had not been consulted about our mother’s care arrangements. Since then, I have provided my mother with community resources for her various needs, leaving it up to her to decide if she wishes to use them, as I do not have the time to take care of her any more.

Meanwhile, I am currently addressing my self-differentiation process in both individual and couples therapy. As I reflect again upon the Beatles song, I apply it to my own situation, seeing how critical it is to differentiate on the one hand from the “ he” (referring to a deceased father) and the “ he” (referring to a brother), not to mention a “ she” (referring to a mother).

I know firsthand how it is a major challenge to become oneself yet at the same time retaining healthy and loving ties with one’s family of origin. It is with this difficult enterprise in mind that Murray Bowen developed his highly influential theory. This paper will discuss this theory and its relation to differentiation of the self, beginning with a history of the theory, its key-players and successors.

Early History and Successors

According to Nichols and Schwartz (2009), Murray Bowen was a psychiatrist at the Menninger Clinic in the late 1940s. He was interested in the relationship between schizophrenics and their mothers, which he understood not as a symbiosis of two equal partners, but as an amplified version of a tendency to emotionally react in relationships. Then, while working at the National Institute of Mental Health (NIMH), which he became a part of in 1954, he initiated the hospitalization of entire families with a schizophrenic member. Among his significant findings was the realization that the entire family was involved in the bond between the mother and the disturbed child. From these observations he formulated the idea of anxious attachment, a phenomenon in which closeness in troubled families is driven by anxiety to the point that family, members were stuck together or fused to the point that they lacked personal autonomy. When the NIMH project ended in 1959, Bowen moved to Georgetown University, where he worked for 31 years. In 1990, he died after a long illness, but not before imparting his wisdom to several students and successors.

Nichols and Schwartz (2009) note that Bowen’s students Philip Guerin and Thomas Fogarty formed the Center For Family Learning in New Rochelle, New York in 1973. Guerin was interested in measuring the severity of the conflict and then singling out specific issues to work on. This therapy model had several components. Guerin stressed the multigenerational context of families, carefully defined familial relationship patterns, and paid close attention to addressing the intense emotions of the family member. Bowen also passed the mantle to Betty Carter and Monica McGoldrick, who are best known for elucidating the family life cycle and promoting feminist perspectives within the field. Perhaps Michael Kerr is Bowen’s most faithful student and colleague. He has been the director of the Georgetown Family Center since 1977. He wrote the book Family Evaluation with Bowen in 1988.

Theoretical Constructs

Bowen’s theory is multifaceted. According to Winek (2010), his first main idea is that of chronic anxiety, which holds them together. Bowen found that although chronic anxiety is found across the animal kingdom and it is less a cognitive response than an automatic one. When the anxiety experienced by individuals is low, those persons have a greater capacity to contemplate either a specific situation or their overall existence. When the level of anxiety increases, the ability to think about a situation calmly declines and affected individuals become far more emotionally reactive. Over time, an emotionally reactive person becomes conflicted, distant or emotionally cutoff. These cutoffs will be discussed later.

As noted by Winek (2010), the contrasting ideas of differentiation and emotional fusion are important to Bowen in the attempt to relieve a patient of that anxiety. Differentiation refers to how a person functions in response to his or her level of anxiety. This is an individual reaction in that differentiated persons can deal with their anxiety on their own and allow emotional issues to be addressed without being fused with others’ emotions. Bowen worked with Michael Kerr to develop a differentiation scale, and stressed that the more differentiated a person was, the less likely they would be ill or irrational because of stress. In contrast, emotional fusion is in many ways an unhealthy extension of a natural process. When infants are born, they are emotionally fused with their primary caregiver, usually the mother. They have the developmental task of developing their own personality, and should be able to grow into adolescence and adulthood, move out and start their own family. If a family is said to be fused, family members share common emotional responses. If a single family member experience anxiety, the entire family does so as well. If one member attempts to become more autonomous, the other members collectively experience these actions as abandonment.

Emotionally fused persons are disempowered in several ways. They can cope with anxiety-producing situations either emotionally or intellectually, but not both at the same time. They also have an “ all or nothing” approach in dealing with relationships, to the point that when these relationships become too intense, they tend to cut off emotionally and physically. These acts of cutting off do not ultimately reduce anxiety, but instead increases it (Winek, 2010).

Other ideas important to Bowen include the “ pseudo-self”, which he developed with Michael Kerr. When people sense they lack positive attributes such as strength and wisdom, within themselves, they attempt to put on a false front that exhibit those traits to

seek validation from others, the false self they present is the “ pseudo-self.” Another important idea Bowen presented is that of “ borrowed functioning,” which refers to an individual who ostensibly functions at a higher level than his or her partner. For example, in a couple in which there is a health problem, the ill partner may be functioning at a lower level in part because the other partner is invested in perpetuating a dynamic in which he or she is a caretaker. Both pseudo-self and borrowed functioning operate at an unconscious level (Winek, 2010).

Winek (2010) states that the remaining constructs developed by Bowen further help to elucidate differentiation of self. Other theorists refer to a family system but Bowen calls it the emotional system. Bowen refers to a naturally occurring multigenerational transmission process, in which current generations are connected to past generations. Thus, current symptoms in a given family emotional system may derive from an earlier generation. These longstanding symptoms may persist until individual family members are able to differentiate further.

One can think of differentiation, fusion and the pseudo-self all as attempts to relieve anxiety in an emotional system. According to Winek (2010), this is particularly apparent in Bowen’s idea of the emotional triangle. When two family members experience anxiety, they achieve balance by incorporating a third member into their relationship, thus creating the triangle. Triangles occur in what Bowen called nuclear family emotional system. Viewed in this way, any constant anxiety within a family unit over time would show up as a dysfunction within the whole family. An example of a triangle is when parents experience marital difficulties, but rather then address the problems together, they focus their attention together upon one or more children. Bowen also was able to conclude that birth order will affect a child’s relationships including involvement in triangles by drawing upon Walter Toman’s work concerning ten distinct personality subtypes of siblings based on birth order.

Lastly, Bowen extended his work with the family to apply to society as a whole, which

he believed also operates like a family, with its own multigenerational transmission, chronic anxiety, and struggles of differentiation. Within both a family and society, there are ebbs and flows in anxiety, with social problems occurring when high anxiety is present. Bowen even applied his idea of societal regression to the family therapy profession, and was concerned that it might have rapid growth, but also fade quickly like a fad. He was afraid that it might quickly ebb and flow (Winek, 2010). Fortunately for mental health professionals and society, family therapy has not faded.

More Perspective On Differentiation

Becvar and Becvar (2009) provide further detail regarding differentiation, noting that Bowen was concerned with two kinds of differentiation, both the external differentiation of the self from others and also the internal differentiation of feeling processes from intellectual processes. People who are undifferentiated from others are likely to marry or make permanent commitments to each other. Instead, a couple composed of two undifferentiated persons will experience one or more of the following: emotional distance between themselves, dysfunction in at least one of the spouses, open conflict, or projection of problems onto children. Children indeed are significantly affected in such a family. Bowen’s believed that because a child resonates the mother’s instability, the mother, thinking the child is the one with the problem, becomes overprotective, thus further impairing the child.

According to Bowen, simply because individuals live physically apart from their family of origin, it does not mean that they are differentiated. As noted above, even a complete emotional cut off is not a successful form of differentiation. Until emotional attachments and cutoffs are successfully negotiated, fusion will increase and the multigenerational transmission will persist. Amidst these attachment issues, a highly differentiated person will recover from stress because they have more coping mechanisms in contrast to a person who is less differentiated. Finally, Becvar and Becvar stress that though Bowen valued a high degree of differentiation, he nevertheless acknowledged that it was a theoretical ideal in which each person could be self-reliant, and not make others responsible for their emotions (Becvar and Becvar, 2009).

Assessment and Treatment Issues

Walsh and McGraw (2002) discuss the practical applications of Bowen’s theory for the assessment, diagnosis and treatment of family issues. Therapists following Bowen’s theory do not pathologize a single family member, but instead address the problem in the context of the family system. The first sessions consist of taking a history of the presenting problem, the nuclear family as a whole, as well as a history of both spouses’ extended family systems. Thus might include the initial documentation of births, divorces, and deaths on a genogram. Particular attention would be given to any triangles and emotional cutoffs that affect the nuclear family. The most important issue for Bowenians in the practical applications of his theory is to foster differentiation of the self. The reason is that if individuals increase differentiation, they can better cope with anxiety intellectually and will hopefully lessen their emotional reactivity as they improve their intellectual functioning. A related goal with family therapy is to take care of unfinished business in the family of origin. Bowenian therapists will seek to reduce anxiety and lessen symptoms. While symptom and anxiety reduction can occur between a few sessions or months of treatment, improving differentiation can take years.

Along with assessment, Walsh and McGraw (2002) delineate six steps in treatment. First, the presenting problem is explored, Second the therapist works with the family to develop their genogram. Third, systemic questions are used to understand family relationships. Fourth, the focus is broadened to larger family systems. Fifth, feedback is provided to families. Finally, techniques are used to promote change. In contrast to other family therapy models, Bowenian family therapy does not employ many techniques. Those that are used are designed to decrease anxiety and emotional reactivity in the family. The use of genograms remains the most important component in this model, because genograms both organize family information and capture family dynamics.

Also central to success in family therapy are other techniques. This includes the therapist’s commitment to a stance of emotional neutrality, thus ensuring that he or she does not being triangulated into the system. To this end, Bowenian therapists employ factual questioning to focus with the family upon their dynamics as opposed to the tense emotionality and reactivity. They make use of didactic teaching by directly teaching family members about emotional systems so that family members can think more objectively. Other helpful techniques a therapist can suggest for family members include role-playing, talking to an empty chair to represent absent members, journaling, and writing letters to each other about family situations and their feelings about them. In multiple family therapy, families work as a group, with Bowen addressing one family at a time while the other families observed (Walsh and McGraw, 2002).

Discussion

In preparing for this paper, I learned how much of Bowen’s theory made sense for my own life. My development as an adult including my family’s response to my recent marriage have provided unique educational models. I have learned how to enforce boundaries with my mother and brother, while my wife does the same with her family. I started preparing this paper shortly after we started couples’ work to deal with our families of origin. While I have not finished my differentiation work, I see myself in the midst of the process with my wife. We want to have healthy emotional lives, and are concerned about passing on dynamics to our children.

I have also realized that there are common treatment issues in all families. For example, many families like my own face anxiety in how members relate. There are degrees of fusion and separation in families. Mine has been obviously fused, probably for some generations back. I also realized that physically cutting myself off from my family or my wife doing so would not help anyone. I choose to acknowledge my own family experience with those clients I meet, and will seek to remain objective.

My own preference for using Bowen’s model is to be more engaged than observational. I am particularly interested in using the aforementioned techniques of genograms, role-playing, letter-writing and the empty chair. As a future counselor, I also know that differentiation does not mean isolation and abandonment of one’s family, and I will take that knowledge into my practice. In returning to the song lyrics, I hope that I can apply Bowen’s theories to my life and my work. My goal is to separate being me from “ he” or “ you” or “ she”. Then, I can truly say that we are altogether as individuals, not in a fused mass.