

Neutrality in family systemic therapy



**ASSIGN
BUSTER**

As a learning therapist, I am often being reminded of the concept of neutrality when reviewing one's relationship with the clients. This gives rise to my interest to review the development of neutrality in the field of family therapy, its relevance in clinical work, and its value and limitations. To trace the origins of the development of neutrality, one would have to begin with the Milan systemic family therapy. The Milan associates have been well known for many of its intervention techniques.

Towards the end of 1970s, Gianfranco Cecchin and Luigi Boscolo observed, in their training, that their students were curious about the therapist's behaviour in session. The focus on the therapist then gave rise to the publication of the team's article, "Hypothesizing-circularity-neutrality: Three guidelines for the conductor of the session" (Selvini et al, 1980). In this article, the Milan team defined neutrality as "a specific pragmatic effect that his other total behaviour during the session exerts on the family (and not his intrapsychic disposition)" (Selvini et al, 1980: 11).

Lynn Hoffman (1987) mentioned that the three guidelines addressed by the article represent an attempt to translate the implications of Bateson's idea of cybernetic circularity. In the case of neutrality, it translated Bateson's idea into a basic therapeutic stance. On one hand, it means that the neutral therapist positions himself in relation to the different family members such that at the end of the session, the family members are unsure which side the therapist is on. It would appear that the therapist is allied with everyone and no one at the same time.

On the other hand, Hoffman offered another slant in explaining the concept. Instead of viewing neutrality as being non-positional, she suggested that the concept speaks of multi-positional. By taking the positions of the different family members, the therapist gains the way to stay on top and above the family. In other words, the neutral therapist is able to take a meta-position in the session. As a result of being neutral, when there is opposition view being raised by a family member against another, the therapist is able to manoeuvre in such a manner that he is not caught in any coalition within the family.

If the concern of staying clear of alliances in the family is the intent of being neutral, one wonders if it is connected to the issues of transference and counter-transference as postulated by the psychoanalytic therapists. Transference refers to the patterns of experience that the client brings and enacts in the therapy whilst counter-transference refers to the involvement of the therapist in the relationship and the emotions, attitudes and patterns of relating that the therapist may begin to feel and enact in the context of the therapeutic relationship (Flaskas, 1996: 39).

The psychoanalytic therapists have cautioned against being caught in issues that are brought about by transference and counter-transference and be mindful of them in session, in order to stay clear from being drawn into clients' struggles and losing one's sense of objectivity. In this case, it appears that to be neutral in session has the similar intent, that is, to possibly avoid such issues. Tying it to Murray Bowen's family systems theory, one can also find traces of neutrality being discussed in the context of therapist-client relationship.

Bowen cautioned the therapist to avoid being drawn into the family emotional system, guard against taking sides in disputes or become overly sympathetic with one member or angry at another. In Bowen's theory, the therapist needs to stay connected with the family members yet not be triangulated into their conflicts in order not to fail in promoting further differentiation among family members (Goldenberg & Goldenberg, 2000). Like a neutral therapist, the Bowenian therapist supposedly remains sufficiently detached, thereby staying on top of the situation. In the strategic and structural family therapies, the therapist's position was not extensively discussed.

However, there has been an emphasis for the therapist to be respectful and empathic in session. For instance, a structural family therapist, in order to produce change, needs to first join with the family members. In joining, the therapist conveys acceptance and respect of family members and their ways of doing things. In this manner, the Milan group's concept of neutrality is connected with the structural therapy's concept of joining. The intent for both therapists is also to allow the family members to listen to each other's stories.

While in neutrality, it is a stance that is undertaken throughout the therapeutic process, the structural therapist may move into realigning the boundaries and restructuring the hierarchies in the family. To achieve that, the structural therapist may at times align with one family member. This is where neutrality ends for the structural therapist. Into the 1980s, the Milan team splits into two pairs where Cecchin and Boscolo continued to develop

their systemic ideas in clinical work, the concept of neutrality also took a different form.

Along with the movement into post-modernism, neutrality was redefined by Cecchin in his paper (1987), “Hypothesising, Circularity and Neutrality Revisited: An Invitation to Curiosity”, as an attitude of curiosity in responding to criticism that it is impossible to remain absolutely neutral. The position of neutrality stemming from a stance of curiosity explains clearly the state of the therapist’s mind in conducting a session. The neutral therapist seeks to know each and every family member’s reality and not for the absolute truth.

In the earlier definition of neutrality, it implied that to be non-neutral means one family member’s reality is privileged over the other. However, in Cecchin’s paper, he clarified neutrality in curiosity as taking the individual family member’s reality as one of the many realities and emphasized that the therapist has to understand the families’ beliefs and meanings that form their realities. By doing so, the therapist stops seeing the client’s reality as dichotomous. Neutrality then is no longer viewing issues raised as good or bad, right or wrong.

It is to understand the meanings that family members attach to their experiences and the patterns that fit in their system. By adopting the attitude of curiosity, the therapist sees the family as a whole and takes away labels. Describing the neutral therapist as one who accepts all the perspectives presented by the different family members and not seeks out an absolute truth connects to the concept of multi-partiality contributed by

Harry Goolishian. In order to be multi-partial or curious, the therapist needs to operate from a position of not-knowing (McNamee & Gergen, 1992).

By adopting the position of not-knowing, the therapist also opens up possibilities and room for conversation to emerge as a collaborative outcome between the therapist and the clients. Taking a not-knowing stance in therapy fits into Cecchin's definition of neutrality in curiosity. It has the similar intent and perhaps effect in therapy. Being neutral also involves being mindful of one's language. As Anderson and Goolishian's collaborative language systems approach has stated, "the therapeutic system is a linguistic system" (McNamee & Gergen, 1992).

Being part of the observed system, the therapist and the clients are conversational partners who together engage in a shared inquiry. Conversations, tailored to each family member rather than based on preplanned intervention techniques, involve active and responsive listening immersing one in the clients' concerns. The therapist may offer tentative ideas but take care not to operate on preconceived ideas of what the story would be. To engage with the clients' understanding of their experience, the therapist needs to suspend his own preconception and commitments (Flaskas, 1996).

The concept of neutrality is also present in other post-modernist's approaches although not as distinct as in Goolishian and Anderson's approach. Being neutral and curious in therapy signified that the therapist does not take on the expert position in session. This is in line with the framework delineated in the narrative therapy. In narrative therapy, the

clients are guided to share their narratives with the therapists who would take it as their realities and modified from then on. Central to their therapeutic stances is the process of active listening, allowing the client to tell their stories in their own time and in their own way.

In this aspect, the process of neutrality is being facilitated. Neutrality is also described vis-a-vis change or therapeutic outcome. Karl Tomm (1987) further expanded the use of neutrality as a strategic stance rather than a posture of acceptance. To be overly neutral, the therapist may simply accept things as they are and eventually stop doing therapy. He opined that by deliberately using neutrality as a strategic technique may effect change. Therefore, neutrality becomes a conscious and deliberate move by the therapist from time to time with a certain purpose in the session.

A therapist does not remain neutral at every point of the process but changes according to the feedback received from the members in the system. As Burbatti & Formenti (1998) added, the concept of neutrality does not merely characterise a therapist's every behaviour, rather it is a "pragmatic effect" of the session. Through a series of consecutive non-neutral behaviour, the final sum of the process has to be neutral. Hence, neutrality is seen as the overall effect arising from the experiences between the therapist and the clients. Neutrality can also be examined in the context of the therapist's beliefs and orientation in practice.

To be neutral would mean that the therapist should not insist and stick to a particular way of operating or approach but look at what fits the observed system. Speaking of neutrality at this level, one would need to bring in the

concept of irreverence introduced by Cecchin (1992). According to Cecchin, an irreverent therapist introduces an idea but does not necessarily believe that people should follow it. “ Irreverence is to never accept one logical level of a position but rather to play with varying levels of abstractions, changing from one level to another” (Cecchin, 1992: 11).

It is also not to insist on a specific outcome or change in the observed system. Moving on to the critiques of neutrality, the feminist family therapists have come on strong. They challenged the idea of neutrality that encouraged the therapists to maintain a position where all members of the family feel sided and not against. They argued that people are not held accountable for their behaviour if a position of neutrality always prevails. When there are issues that are clearly sexist, the neutral therapist is perpetuating the inequality by the very fact that he or she is remaining neutral.

For example, if a husband is abusing his wife and the therapist remains neutral then one is feeding in and condoning his misuse of power. They also argued that if the couple is already on an unequal relationship, the neutral therapist is merely elevating the level. When the therapists attend to experiences of inequity in the lives of their clients, they may worry that doing so constitutes taking a non-neutral stance, however not attending to such inequities is likely to have the effect of condoning them, of giving the stamp of the therapist’s authority to the idea that such relationships are normal that they require no notice.

In attempting to avoid the “punitive, judgemental and pathologising behaviour”, it may seem the therapists “have trapped themselves into a stance of moral neutrality” (Jones, 1993: 146). Jones (1993) raised the issue that if a therapist and some members of the client group share membership of a socially dominant group, it is quite likely that a therapist’s discounting of questions of power in relationships and society will contribute to the subjugation of other perspectives and voices in the client group. Therefore, the therapist needs to acknowledge the presence of such inequities in the culture and society at large.

To avoid being caught in such a situation, the therapist needs to constantly examine one’s own premises, whether one is influenced by the dominant discourse in co-constructing the clients’ realities. So, the therapist’s concern should be the pragmatics of how to pay attention to such relationships in a way that maximizes the opportunities for change and choice of all members of the therapeutic system, including the therapist, and not merely maintaining neutrality. Neutrality In Clinical Work Working with couples and families, the concept of neutrality is certainly relevant.

As a practitioner, we are often reminded to connect with all members in a family session so that no one is being neglected or made to feel like a piece of ‘furniture’ in session. So, the therapist needs to be mindful of the ‘air-time’ that each member has in session, like what the Milan team has stated that neutrality implied support. That is to say, each family member had to be supported in a neutral or equal way. The clients would then feel validated and respected in the process. To add on, neutrality is particularly helpful in working with couples.

The couple needs to experience the therapist as being neutral so that each of them would want to continue working with the therapist to achieve change. Therefore, the concept of neutrality is valuable in establishing a therapeutic relationship between the therapist and clients and perhaps even to effect change. As mentioned earlier, a neutral therapist is also one curious therapist who seeks out the different realities of the various family members. The therapist's curiosity about the family is not an inquisitive intrusiveness but a respectful interest in the family, their lives and the issues that the family finds relevant to itself.

By eliciting the different beliefs and meanings attached to their realities, the therapist increases the chances of effecting change in the family systems. If family systems are understood in terms of Maturana's idea of autopoiesis, then being neutral increased the possibility for the therapist to perturb the system such that its structure allows it. Looking at the limitations of neutrality, it brings to mind the risk of the therapist being seen as indifferent, aloof or distant while being neutral in session. The role of emotion was not mentioned in explaining the concept of neutrality.

When one member feels overwhelmed by emotions and breaks down, the therapist needs to attend to that emotion and connect with the client on that level. It adds to the depth of the connection between the therapist and the client even though doing so may compromise the therapist's neutrality. In addition, there are clients who come for therapy with the intent to obtain an opinion from the therapist. The challenge presented to the therapist would be to balance neutrality while meeting the clients' request. Besides, Cecchin has mentioned that neutrality is an ideology (Hoffman, 1987).

Therefore, when the concept of neutrality is put up against morality, the therapist's dilemma surfaced. One can act as a social controller but not as a neutral therapist at the same moment. It is challenging to remain neutral while enforcing a social rule. In a child abuse case that I recently managed, I struggled with the need to be neutral and curious in understanding the reality of the mother (who hit her child) and the need to enforce non-violence as a social worker. Certainly in areas where there are clear issues of crimes or abuses, the place for neutrality may be obscured.

This is because to continue remaining neutral runs the risk of taking away the responsibility in the abuser, thereby supporting the act. The ability to be neutral is also limited by the therapist's work context. Working in institutions like prison or child protection unit, the therapist needs to bear in mind the agency's protocols and values which would compromise one's neutrality in therapy. Furthermore, the issue of gender can limit one's neutrality in working with couples or families. Neutrality becomes a delicate issue when a female therapist works with a male client or vice versa.

For instance, in a recent case, after I have seen the wife several times on an individual basis, the wife finally agreed to a joint session with her husband to discuss their parenting and marital difficulties. After engaging the husband for a while, I realised that the husband had come in with the idea that I was aligned with his wife. It took me a while to realise that I need to attend to the issue of neutrality. Given that the husband had a preconceived idea that the therapist is aligning with his wife, the challenge is to introduce neutrality in such a way that the husband felt aligned yet at the same time not neglecting the wife.

It was indeed a delicate balance to ensure both parties felt equally sided. While Cecchin explained that to be neutral in session is to ask questions and avoid making statement, it is possible to be non-neutral in one's questioning. As discussed in Goolishian and Anderson's approach, language is one factor that is pertinent in being neutral. Coming from a dominant social group and being influenced by one's culture or gender, a therapist's language is not entirely neutral. In understanding the clients' worldviews and deciding on what to be curious about reflect a biased choice.

In fact, by asking a question of a particular member also implied a choice and is therefore not neutral. As a social being exposed to social sanctions, rules and dominant discourses, the therapist is not devoid of views. He would still have some of his beliefs and values that would affect his ability to maintain neutrality. Since the therapist, in the second order cybernetics, is one who is also part of the system that is being observed, there is a possibility where the therapist would inadvertently influence the clients with his perspectives.

Therefore, it is difficult to truly sustain one's neutrality in session. One can only be mindful of one's prejudices and preconceived ideas about others to ensure neutrality is in place. To ensure that the therapist is genuinely neutral or curious requires several monitoring systems in place like the use of self-reflectivity, supervision and team approach. Besides enlisting the help of fellow colleagues in monitoring one's neutrality in session, it is also crucial that the therapist is able to monitor his own position in the system.

Appreciating the relationship between neutrality and the capacity to continue to facilitate the flow of information is a necessary skill. In conclusion, the therapist maintains neutrality towards points of views, towards persons, towards outcomes, and towards the overall system itself. In the process of doing so, the therapist needs to adopt a certain level of self-reflexivity in considering his premises. Depending on the context and issue being discussed, neutrality may need to take a second place as the therapist puts on the role as an agent of social control.

The therapist may be operating from the perspective of an agent of social control at one point but he can also move to a position of neutrality to understand the client's beliefs and meanings for his reality. So, if a session is segmented frame by frame, a therapist's neutrality may vary. Like Cecchin has mentioned, a therapist is 'someone' in moment in relation to the context, who has acted in time. There is no possibility of absolute neutrality but rather a position or more or less neutral. So, a therapist's neutrality is not static but evolving.