FAMILY SYSTEMS, COUNSELLING, AND SCHOOL PROBLEMS

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Abstract

In recent years numerous papers have appeared which encourage school counsellors and school psychologists to appreciate the special role families might play in school problems experienced by children. Specifically, it is suggested that a proportion of children's school problems might be serving a functional role in the family system and that family members may act in ways to maintain those problems for the sake of family stability. The clinical and empirical evidence supporting such a view is examined and some implications for the school counsellor are discussed.

Résumé

Les dernières années ont donné lieu à plusieurs publications incitant les conseillers et les psychologues en milieu scolaire à porter attention au rôle particulier que la famille peut jouer en rapport avec les difficultés scolaires vécues par les enfants. De façon spécifique, les auteurs de cet article proposent qu'une certaine portion des difficultés scolaires des enfants peuvent avoir un rôle fonctionnel dans le système familial et que les membres de la famille peuvent agir de façon à maintenir ces problèmes au nom de la stabilité de la famille. Ils analysent les données cliniques et empiriques susceptibles d'appuyer un tel point de vue et discutent des implications pour les conseillers en milieu scolaire.

In recent years there has emerged in the school counselling (DiCocco & Lott, 1982; Friesen, 1983; Goldenberg & Goldenberg, 1981; Mullis & Berger, 1981; Perosa & Perosa, 1981; Sawatsky & Donahue-Wilcox, 1980; Seligman, 1981; Worden, 1981), and in the school psychology (Green & Fine, 1980; Loven, 1978; Peck, 1971; Smith, 1978) literatures, a strengthening interest in the possibility that the

problems a child develops in school might be serving some sort of purpose within the child's family system. When Ryan (1981) surveyed five journals in school counselling and school psychology, he found a sharp increase occurred at the end of the 1970's in the number of published articles focusing on the family in some major way, although not all of these reflected a family systems orientation. The fact that *The School Counselor* devoted two full issues in 1981 to the family theme, with many of the included papers exploring a family systems perspective, suggests that the interest in the family among counsellors has continued to grow into the

1980's. It seems possible that the tremendous growth in the field of family therapy (Hoffman, 1981) has indeed had some sort of impact on the thinking of many of those who deal primarily with children in school settings.

At the same time, Ryan's (1981) analysis shows that it is difficult to gage the depth of this new found interest in the family. As might be expected when a new domain is opened, the large majority of these family oriented papers are what can be termed "issue-raising" in nature. For the most part, they present no data nor do they provide much in the way of case information aside from very brief illustrative anecdotes that may or may not be fictitious. The Goldenberg and Goldenberg (1981) and the Worden (1981) papers are typical in their offer of interesting and useful introductions to the family system/school problem linkage while relying mainly on the logic of analogy to lend validity to the claim that the work of family therapists has relevance for the school counsellor. Instead of examining any evidence (of which there is as yet precious little) that might show how a reading or school discipline problem might play a functional role in the family system, the presented arguments usually point to a variety of extra-school problems which have been shown to have family functions. The observation then made, and not always explicitly, is that there is no good reason to expect that all school behaviours would be exempted or immune from such family involvements.

The specific purpose of the present paper is to examine the small number of available studies which do offer data bearing on the claim that school problems can serve a functional role in the family. There are two interesting characteristics about these studies. The first is that, in spite of the current increase in interest in the family, not all are of recent origin; the first study dates back about twenty years. The second is that most of these studies seem to reflect specific and short term scholarly interests of particular researchers; there appears to be no group of researchers who have established a continuing program of research centred on the problem. This last point, considered along with the small size of the literature, is particularly intriguing in view of the case that the majority of teachers attribute many of their pupils' problems to those pupils' families (Christensen, Ysseldyke, Wang, & Algozzine, 1983; Medway, 1979). As Lightfoot (1978) has observed, the home and the school seem to be "worlds apart" with the

chasm between them exceedingly difficult for social science researchers to bridge regardless of the linkages that seem obvious to teachers faced with the practical responsibilities of managing a classroom.

The Family Systems Perspective

In light of the fact that there are a number of papers extant in the literature which explore how family therapy concepts have meaning for school counselling (see, for example, Goldenberg & Goldenberg, 1981; Mullis & Berger, 1981; Perosa & Perosa, 1981; Worden, 1981), it seems unnecessary to repeat these very informative efforts. At the same time, however, there are some important points that must be made if the significance of the research to be reviewed is to be appreciated.

Put most simply and roughly, the family systems approach is predicated on the assumption that human behaviour is primarily determined by the network of social and physical events within which it is embedded. While intrapsychic processes are by no means ignored, any search, within the systems orientation, for the significant causes of behaviour generally leads to an inspection of the subject's environment with a special focus on the interplay among the actions of other people. In short, the family systems perspective is strongly environmentalist in nature and, as such, asks for a radically different construal of psychological reality from what is typical in conventional western thought. Hoffman (1981) has argued that these "...new ways of thinking have led to an epistemological revolution, one that touches all the sciences and that challenges many traditional concepts, from the belief in linear causality to theories of individual motivation" (p. 3).

Systems theory asks that the conventional habit of dividing psychological existence into the mental and the physical be set aside. In place of an array of conceptions that encourage dualist thinking (Ryle, 1949), the systems theorist offers a frankly monist point of view where mental-concept terms are decidedly metaphoric in nature. The person is to be primarily regarded as a biological organism whose actions acquire meaning and direction, to a large degree, from the behavioural context rather than from any sort of inner causal agent such as a mind (especially one that is in any sense capable of acting independently of the physical and social world). Interestingly, and with respect to this particular characteristic,

the systems perspective shares a communality of views with Skinner's (1974) radical behaviorism, although family systems theorists are not as deeply troubled by talk about theoretical constructs. In any event, by emphasizing the environment and deemphasizing mental processes as important sources of influence, the systems approach leads to what can only be termed unconventional methods of therapeutic intervention.

It is, of course, easy to talk like a systems-oriented clinician, but it is not so easy to act as one. If the "new ways of thinking" mentioned by Hoffman are not adequately appreciated, a clinician or a researcher will tend to mistakenly assimilate system concepts to the sort of traditional understanding of behaviour that has dominated psychological theorizing for decades. In that event, the danger is that the theoretical and therapeutic focus will be returned to the individual dominated by intrapsychic forces with the system context which then comes to be regarded merely as a new way of conceptualizing the complexity of the problems with which the individual must cope. Consequently, and from time to time, it is possible to find statements that imply that therapy based on systems notions basically amounts to no more than a set of novel techniques. As a case in point, Young (1980), in an otherwise very interesting attempt to encourage counsellors to consider family processes in their work, wrote:

> Let me assure you the principles and the techniques used are the same as in one-to-one counselling. We need the same sensitivity, the same empathy, the same understanding, the same observational skills, the same listening skills. What is different is the number of people in the room and the resultant dynamic interaction between the people present. (p. 201)

One must, of course, be fair to Young and acknowledge that the purpose of the above quoted passage was to allay the fears of counsellors who might be shying away from facing the family issue. At the same time, there is a good deal more to successful interventions in the family system than those brief comments suggest; the counsellor's most basic understanding of causation must change.

Thus, the discussion arrives at the problem of linear versus circular causality. The way this particular issue is handled, perhaps more than any other single characteristic, sets systems theory apart from the more traditional views of individual and family behaviour. There is, to be sure, a danger in any conceptualization that reduces the complexities of social and biological processes to two categories, but there are certain heuristic advantages offered in the linear-circular distinction. Perhaps some discussion will clarify the nature of these two concepts.

Linear causality refers to the understanding that, in general, change progresses in an orderly and unidirectional manner much in the way a row of dominoes can be made to fall by toppling the one at the beginning of the line. To be sure, the array of dominoes can assume highly complex shapes by following curved lines and doubling back on itself, but the event that causes any given domino to fall is the behaviour of the domino immediately in front or behind. By and large, the traditional models of causality employed in psychology and the mental health fields have been in the linear category; diagnosis typically refers to a search for the designated causal agent. Clinical investigations normally seek to determine who or what group is causing someone else to have a problem, to be a victim.

The notion of circular causality, which is not nearly so easily defined, seems to have arisen in attempts to find ways to describe how biological organisms relate to one another (Bateson, 1979). Living forms, unlike objects in the world of physics, do not lie still in the manner of dominoes after they have been knocked over. When organisms have been affected by the actions of others, they continue to act and retain the capacity to influence the influencers in return. Causal effects are multidirectional and recursive. Accordingly, people are pictured as acting in interdependent systems such that their behaviours are mutually useful and supportive. From this perspective, for example, it is inappropriate to regard a seriously misbehaving child as one who is a passive victim of poor parenting. Rather, the suggestion is that the child has cooperated with other members of the family, most usually the parents, in developing a difficulty that in some perverse way helps to stabilize the family (Haley, 1977). Through a mechanism or a set of mechanisms that are not at all well understood, the child and the parents, for their own reasons, may cooperate in creating the conditions which subsequently lead to the development of problem behaviours in the child that, in turn, seem to bring sense of relative security to the family structure. Any thera-

peutic endeavor that does not deal with such complex and shifting lines of causality will likely be of only very limited success.

If the radical character of the family systems perspective is to be accepted as having relevance for school counsellors in their work with troubled children in schools, it seems important to ask whether or not there is any evidence, clinical or otherwise, indicating that school problems could have any sort of functional role in the family. It is to this literature that attention is now turned.

School Problems and Family Systems: A Review of the Evidence

In a paper that was probably too far ahead of its time, Miller and Westman (1964) summarized their work with 18 families each having a son with a reading problem that had not responded to the best remedial techniques available. Their aim was to find evidence to support the view that, "parents and children resist change in the reading disability because it contributes to the family's survival" (p. 71). The data they reported, being largely case note summaries, are more intriguing than conclusive but the fact that their observations noted events in the lives of their families that appear entirely consistent with what could be predicted from family systems theory suggests that serious consideration should be given their findings.

Probably the most interesting case material presented by Miller and Westman (1964) is that focusing on the responses of each family to improvements in their child's reading performances. A generally observed pattern was that family processes following improvement tended to be those that would undermine the childrens' positive changes. One of the mothers, for example, regularly, "helped her son with his homework in front of the television screen; the set was turned on so the father could enjoy the antics of Bugs Bunny" (p. 73). In virtually all families, the parents insisted in not hearing information that would indicate that intellectual ability could not account for the reading problem. Even, "most of the boys protested that they were not very bright" (p. 73), in spite of the fact that all were within the normal range on nonverbal ability measures. Of particular note were the families where serious substitute problems emerged as the reading skills of the child improved:

One mother said that she must be losing her mind. She had always wanted her son to read well, but whenever she thought of his recent progress she broke into tears. Her husband on learning of the boy's improvement stopped working and began to show unmistakable psychotic symptoms. Following another boy's rise in reading level, his mother started an argument with his father, who beat her up and left home. She became severely depressed and neglected her family. So distressed was the child that he did no work at school, and his ability to read deteriorated markedly. His father then returned, his mother lost her depression, and the family continued as before. Learning of a son's improvement, his parents began to punish him drastically for misbehaviour they had previously ignored. He continued to do good work at school, but started to stay away from home whenever he could. They then made another brother the object of the same tactics which had contributed to his sibling's retarded reading. (p.75)

Needless to say, Miller and Westman's (1964) findings did not take the educational establishment by storm. Peck (1970, 1971), however, based his doctoral research, in part, on the Miller and Westman work. Instead of employing a clinical methodology, Peck chose to take an empirical approach to the analysis of communication patterns found in families having a child with a serious reading disability. He found that the families of children having reading problems suffered from disturbances in communication while such disturbances were generally absent in his non-problem contrast families. Moreover, the communication problems he observed in the reading-disability families were quite consistent with those reported in research on other types of troubled families including so-called schizophrenic families. Peck concluded that the family system might well function powerfully to maintain the child's reading problem even where this might mean subverting the school's attempts to correct the difficulty. He suggested that remedial efforts which are directed solely at the child and without regard for the family role of the disability might well end in failure. Once again, educational and clinical researchers did not seem impressed by the possibility that reading may sometimes reflect a family system problem; any research on the reading issue in particular seems to have ended with Peck's work.

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Some evidence consistent with Peck's proposals may be seen in Gerber's (1976, 1977) more recent reports on research with families having symptomatic and non-symptomatic children. Gerber chose as his sample families in which a male child was suffering from either some learning problem or from emotional/behavioural problems and compared the functioning of these families on certain variables with that of families of non-symptomatic children. In one report (Gerber, 1976), he found that the parents of children with learning problems were more conflicted between each other in some of their self-reported value orientations (Allport-Vernon-Lindzey) than were parents of non-symptomatic children. In a further aspect of the same study, Gerber (1977) used a doll placement technique to assess the degree of intrafamilial psychological distance. He showed that there were characteristic differences in the doll-placement choices of the parents depending upon whether or not their son was free from school-related problems or suffered from either learning or behavioural problems. These observations are certainly consistent with the implications of systems theory that school problems may sometimes be a relatively direct expression of current and presumably pathogenic dynamics within the child's family.

In perhaps the most elaborate study to appear to date, Perosa and her colleagues (Perosa, 1980; Perosa, Hansen, & Perosa, 1981; Perosa & Perosa, 1982) compared the structural interaction patterns in families with and without a learning disabled child. As a first step, Perosa (1980; Perosa, Hansen, & Perosa, 1981) developed a questionnaire to measure the family system dimensions identified by Minuchin in his work with psychosomatic families (Minuchin, Roman, & Baker, 1978). She administered the questionnaire, which had a reasonable level of internal consistency, to 25 learning disabled families and 25 non-learning disabled families. Her sample of learning disabled children included a very wide variety of problems ranging from those with speech and hearing difficulties to others having emotional disturbance although all children were achieving at levels lower than their intellectual abilities would have predicted. The non-learning disabled families were selected to match the problem families on as many dimensions as possible.

Perosa's (1980; Perosa & Perosa, 1982) findings showed that there were a number of

similarities, but not a perfect match, between the families in her sample having a learning disabled child and those families classed by Minuchin as having a psychosomatic child such as an anorexic daughter. In the typical learning disabled family, compared to her non-problem families, Perosa found that the mothers and children sensed disengagement among the family members; they were not confident that emotional support would be provided when it was really needed. The fathers of the learning disabled children were more rejecting of their children although there was an indication that those same families were more overprotective on the whole. Also of significance was the finding that, in learning disabled families, conflicts tended to be avoided and when avoidance was not possible, conflicts were more likely to be left unresolved. Learning disabled families were generally characterized by more instances of triangulation, the formation of two person alliances (typically the mother and child) against a third (typically the father). Finally, the learning disabled child was significantly more likely to be blamed for family difficulties than was the non-problem child. Overall, Perosa's findings lend support to Peck's (1971), as well as to Miller and Westman's (1964), conclusions in spite of obvious differences in clinical populations and research procedures.

Taken together, the studies reviewed so far all share the same weakness in relation to the issue of evidence to support the claims of family systems theory: basically, they are correlational studies that derive their strength mainly from the fact that their findings appear consistent with theory predictions. The fact is that it is possible that the families of learning disabled children may have any number of problems simply because they contain a difficult child. It may very well not be the case that the problem child was created to contain a family malfunction. In the bulk of studies published to date it is very nearly impossible to discern the causal relationships that create the effects evident in child and parental behaviours. What is needed is research that makes use of more controlled experimental procedures either in series of individual case studies or in studies using group designs with randomly assigned control groups.

Interestingly enough, just such a study (Klein, Alexander, & Parsons, 1977) has been reported although the focus was not entirely on school-based problems. There researchers randomly assigned eighty-six families of 13 to

16 year-old delinquent boys and girls to one of four alternative treatment conditions. These were designated as: no treatment controls, client-centered family approach, eclectic-dynamic, and behaviourally oriented short-term family systems approach. Investigation of post-treatment court referrals for behavioural offenses, or recidivism, in the six to eighteen month period following treatment disclosed a rate of 26°/o for the children from families who had received the short-term family systems treatment. This rate of 26°/o compared favorably with à 50°/o rate for the no-treatment controls and rate of 47°/o for the client-centered group and 73°/o the eclectic/dynamic group. An equally interesting point emerging from the study concerned the court referral rates for siblings 2.5 to 3.5 years following the initial treatment interventions. These sibling referral rates were 20°/o for the families treated through a systems approach, 40°/o for the no-treatment controls, 59°/o for the client-centred families, and 63°/o for the eclectic/dynamic families. It would seem that simply working with the family per se is not enough; only the program where focused effort was directed toward the family system led to strikingly positive outcomes for the various family members. In interpreting their findings these investigators argued that pathology occurs "in the system in which the individual is embedded" rather than in the identified "patient".

Clearly, it is not yet possible to declare the case made; still more and better evidence will be required before skeptics will readily accept that school problems have a functional role to play in the family system. Nevertheless, the data available so far encourages further research effort. It will be interesting to see if the flurry of issue raising papers that appeared in the special theme issues of the *Canadian Counsellor, The School Guidance Worker,* and *The School Counselor,* which were published in the late 1970's and early 1980's, will lead to more widely supported research programs. The next few years will tell the tale.

In the meantime, too, there are grounds for suggesting that school counsellors could profitably examine the involvement of family processes in the cases they encounter. This is not to say, of course, that school counsellors should begin to add family therapy to their repertoires. Despite Young's (1980) encouragements, the fact is that no more than a small handful of school counsellors

will have the appropriate training in family theory and therapy to support such a move. It is simply enough to recommend, at this stage, that counsellors consider the possibility that families may be very intricately connected to the problems they encounter in their school offices. In being so mindful, counsellors may be able to be more successful in avoiding family triangulation maneuvers, in understanding remedial failures, and in sensing when the nature of the client's problem has exceeded the counsellor's capacity to deal with it. To know when to refer a case to an appropriate fellow professional is, itself, a mark of true professionalism.

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