H. Charles Fishman A Single-Parent Family:

A Disorganized Organized System

Treating Troubled Adolescents

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A Single-Parent Family: A Disorganized Organized System

Does my sassiness upset you? Why are you beset with gloom? 'Cause I walk like I've got oil wells Pumping in my living room.

Just like moons and like suns, With the certainty of tides, Just like hopes springing high, Still I'll rise.

-MAYA ANGELOU

IN a 1981 presentation at the Philadelphia Child Guidance Clinic, Virginia Goldner discussed the popular notion that "the family is falling apart." Her conclusion was that it is not the *family* that is falling apart, but the concept of the family as the perfect "Ozzie and Harriet" system—the conventional, white, middle-class, two-parent, one-worker couple that marries early, rears children, and does not divorce—that had disintegrated. Goldner's contention is that the contemporary concept of the nuclear family was, in fact, seen as the norm only for middle-class couples that began their households in the first decades following World War II. She asserts that many of the trends cited as proof of the decline of the family, such as declining marriage and fertility rates and rising divorce rates, were actually the norm until the postwar period. This contention is supported by Michael Rutter (1980), who points out that the fertility rate was falling steadily into the 1930s, that the divorce rate has been rising since the late nineteenth century, and that the trends toward later marriage and a higher proportion of the population entering marriage date only from the end of World War II.

It seems clear then, that the stresses on the modern family have been in operation for some time and do not represent significant new information for the therapist. Indeed, as Jane Howard (1978) proposes, the real news is not that families are dying but that they are changing in size and shape. Of fifty-six million U.S. families, Howard reports that only 16.3 percent are of a conventional, nuclear variety. Furthermore, the number of children living in a single-parent household has been variously stated at

from 20 to 50 percent of all families; and of these single-parent households most are likely to be headed by separated or divorced women (Hogan 1983).

This change to the single-parent household is a significant reordering of the American family system. As family therapists we need to guard against the prejudice of calling single-parent families "nonintact." The truth is that single-parent families are just as intact as two-parent families, and their needs are not met by treating the members of such a system as individuals who live in a transitional organization. In our practices we will find that the single-parent family is indeed a norm. Treating such a family, however, requires a special use of self by the therapist.

General Principles

CONFIRMING THE PARENT'S SENSE OF SELF

The person *of the parent* comes before the person *as the parent*. This means that the therapist must confirm and reinforce the sense of self of the presiding parent. Self-respect is the key to effectiveness as a parent. For the therapist, then, the priority is to focus first on the parent as an individual. Only when self-respect is confirmed and strengthened is it possible to move on and establish the parent's effective role in the family.

APPLYING THE THERAPIST'S USE OF SELF

The therapist's use of self to support the parent is even more important in working with singleparent households than it is with two-parent families. In many single-parent systems there is no corroboration or support for adult views. The parent, most often the mother, can come to feel outnumbered and overwhelmed and begin to doubt her own sense of what is correct or appropriate. What the therapist aims to accomplish in such situations is to provide options and support for the parent, confirming her view of reality. This process of confirmation can help the individual begin to see herself differently as a person and head eventually to a role change. Frequently the therapist needs to be involved in creating a therapeutic subsystem, albeit an artificial one, in which the therapist supports the parent. By working with the parent it is possible to put together a coherent generational subsystem. This process is cru cial because there are fewer options and resources for the single parent.

SEARCHING FOR SUPPORT IN THE LARGER CONTEXT

The third principle for treating single-parent families is that the therapist needs to be even more sensitive to the contemporary forces in the ecology. This heightened sensitivity is essential because the therapeutic subsystem is both temporary and artificial and has less enduring power. It is important, therefore, that the therapist search the larger context to find other individuals, organizations, or institutions that can provide additional support.

Clinical Case: Ruth, Struggling to Please Everybody

The case that follows illustrates many of the challenges presented by a single-parent system. At the time of intervention the mother and her children were in crisis. The mother said the kids were uncontrollable. The mother and father were fighting long-distance over the telephone and the entire system was reverberating from the imminent departure of the eldest daughter for college.

ASSESSMENT USING THE FOUR-DIMENSIONAL MODEL

History

The mother, Ruth, was a single parent who had been divorced for quite some time. The father was not around, having moved to another state. There were four, very attractive children: Hope, age eighteen, Lisa, seventeen, Robert, fifteen, and Jane, twelve. The family had a somewhat unusual living situation in that the mother, in addition to her clerking job, was raising dogs (thirteen at the time) in order to earn money for the kids to go to college as well as to provide for their other needs. It was this living situation that the father found untenable, claiming he could not handle the kids plus all the dogs. Before leaving he had often expressed his rage by severely beating both his wife and the animals.

It was the oldest child, Hope, who contacted the therapist. She was going off to college on a full scholarship and was concerned about leaving the other kids with mother. She raised the possibility of

foster care and other alternatives and asked of the therapist, "How can I get my siblings out of the house because Mom is so horrendous?" As an example she cited the plight of the youngest child, who had some goldfish which she loved. When the child misbehaved, the mother threw out the fish food and let the goldfish die.

The mother worked as a payroll clerk and made twenty-two thousand dollars a year. In addition, she received child support. According to Hope, the other girls worked as janitors to pay their tuition in Catholic school because their mother gave them nothing.

Development

Hope was the mother's lieutenant and functioned as a parental child. She had responsibility without true authority. This daughter was strikingly beautiful, with dark eyes and long black hair down to her waist; she was a brilliant student and had been offered a scholarship at an Ivy League school. This move would be an even greater stress for the family since the mother's best support would be far away. This acute pressure emerged against the backdrop of three other adolescents in the home, a major developmental stress even without Hope's leaving.

The mother and father, of course, had developmental issues of their own, including the real-life financial pressures of supporting four increasingly expensive children.

Structure

This system was characterized by an extreme problem in family hierarchy. As the sole representative of her generation in the home the mother did not have her adult perceptions reinforced in the current system; furthermore, father actively undermined her. Her plight typifies that of many a single parent. The children capitalized on their mother's weakness by threatening to live with their father if she attempted to discipline them. Her inability to deal with such threats had made her more of a peer than an executive to her children. This lack of effective control led to a chaotic home life, which was exacerbated by the mother's overinvolvement with the dogs she was breeding. As with her children, she was incapable of setting limits for the animals and allowed them the run of the house. The resulting chaos had been instrumental in the father's abandoning the family. The continuing animosity between

the parents had also been exploited by the children, who played one adult against the other.

Process

From the perspective of the outsider this system was in chaos, lacking even the most rudimentary rules of decorum. At any point, seemingly at random, conflict might erupt and dissolve any semblance of effective control. It was clear that this lack of control was a direct result of the mother's inability to exert executive leadership. Furthermore, the overt conflict among the siblings was commensurate with the considerable conflict avoidance in the mother. She simply was not able to confront her children in a manner that would change their behavior.

As a consulting therapist, my immediate subjective experience on encountering this system was one of extreme anxiety and impotence. The family's constant bickering made me want to run for cover, and my attempts to establish some order or control left me feeling powerless. No sooner had one fire been put out when another would erupt in a completely unexpected area. Moreover, the system exerted a constant pressure on the therapist to be drawn in and take the place of the missing parent. The challenge in the face of this pressure was to continue working to support and bolster the mother's executive authority instead of acting to fill the vacuum and take over for her.

THE HOMEOSTATIC MAINTAINER

In this system the homeostatic maintainer may well have been the father. When things heated up and the mother attempted to exert any authority, the specter of father as an alternative emerged and the mother was defeated. Apparently, the father did not intervene to support his wife, but instead criticized her, even from a distance, and told the children they could come and live with him. In addition, despite the fact that the father had been gone for some time, the mother still harbored a hope that he would return or that somehow they would get back together. This hope reinforced her inaction. Waiting for the father's return was like "waiting for Godot": it kept the mother from facing reality and coming to terms with an unacceptable status quo.

THE THERAPY

The primary goal in the brief therapy with this family was to join with the mother, to create a transitional adult-adult support system that would enable her to function as an effective parent and maintain a workable hierarchy. The therapist's first job was to reinforce the mother's sense of dignity and help her enact a sense of indignation and justification for making difficult but necessary decisions. In the session that follows my focus was initially on attempting to work with the family's therapist to sort through the discord and discover the best way of supporting the mother.

The therapist, a young woman, had seen the family three times. According to the therapist these sessions had been quite unusual, with individuals crying or laughing for no apparent reason. In spite of what the children said, the therapist reported that the mother had spent money for their braces, saw to it that they did their homework, and in general did make an attempt to see to their needs. This woman worked very hard and was not present in the home very much. Her absence, and the fact that there were thirteen dogs with the run of the house, had resulted in an environment that was a shambles.

The session began in relative chaos. It was clear from the beginning that there was an attenuated hierarchy in the system and that there was an extreme amount of overinvolvement and overprotectiveness. Furthermore, the mechanisms maintaining the homeostasis were readily apparent. One of the most powerful of these was the mother's paralysis when the children threatened to go live with their father if she did not accommodate to them. Guilty over the divorce and her part in it, the mother would retreat, saying that she believed it essential for the family to stay together. She could not act in any adult, executive fashion that might carry the risk of dissolution.

In the early part of the session it became clear that the young family therapist had become inducted into the system and was taking the children's side against the mother. I therefore called her out of the room and suggested that she side with the mother, to create a subsystem of therapist and mother, a generational boundary that would help reestablish a functioning hierarchy in the system. What follows is a segment of the session subsequent to that point.

THERAPIST (to the mother): You're trying to please your kids.

MOTHER: I have been lately. I told them, since the divorce, we're a team. We're supposed to work together.

THERAPIST: What do you need from them?

MOTHER: Cooperation. I want them to pitch in and do their share and what I've got right now is blatant rebellion. Every time I open my mouth, it's "Shut up, bitch" from him *(indicating Robert)*. We walked out the other day from a counseling session and he stood out by the parking lot and said, "Are you four bitches coming?" I mean, that's not a very good attitude. That's not cooperative. "I have to live with three bitches." He called everyone a bitch all the way home.

THERAPIST: And what did you do?

MOTHER: I just figured let him get it out of his system.

THERAPIST: Do you like being called a bitch?

MOTHER: Of course not, but I'm not going to cry over it.

THERAPIST: How about stopping it? You've done a lot, you've come a long way, you've sacrificed a lot in raising these bright, well-put-together kids. And you don't deserve to be called a bitch.

MOTHER: I know.

THERAPIST: Does she?

ROBERT: Yes.

THERAPIST: Well, I'm sorry, but you're wrong. She's your mother, and mothers don't deserve to be called bitches.

I have a sense that in spite of the intervention, entropy is setting in and the therapist is losing her capacity for therapeutic leadership.

JANE: He [Robert] says he's been trying to do his share around the house, but he hasn't done one thing.

ROBERT: You haven't done anything either.

JANE: Yes, I have ...

- ROBERT: You guys want me to say my feelings? Fine. I said them all other times—it's getting worse and worse every single time. I didn't do anything to her [the mother].
- HOPE: And she [the mother] sits there! This isn't how she is at home! She sits down talking to you [the therapist] that's not how it is at home. And then you say, "Yes, I think she's a very good mother." Well, I don't think she's a good mother!

LISA: Hope, she's changed.

THERAPIST: How did you get to be valedictorian ...

It is evident that there is a coalition of the children against the mother. One against many is a common plight of the single parent. However, the therapist allows herself to be inducted into filling the executive vacuum in the system. She steps in to take over for the mother rather than encouraging her to assert her executive role. By doing so the therapist gives the family the implicit message that the mother is not able to fulfill her parental function.

THERAPIST: How did you get to be where you are without having a very good mother?

HOPE: I had a lot of nice friends. THERAPIST: Friends don't raise vou. HOPE: Yes, they did, my friends raised me. THERAPIST: No, this woman raised you. HOPE: No, she didn't! She didn't raise me. She goes to work and ... ROBERT Bull LISA: She did give you food. HOPE: We've been on our own THERAPIST: Mothers raise their children. JANE: And she pays for haircuts. HOPE: Maybe she raised me, but she hasn't given me any love. THERAPIST: What about your braces? Mothers who don't care don't give their kids braces. ROBERT: Then she shouldn't have given me braces. HOPE: She didn't give me any braces. THERAPIST (to the mother): What do you want from them? You need to let them know what you need. And I will help you get it. The therapist has been inducted into becoming the mother's champion. In so doing she has rendered the mother even less effective. MOTHER: First of all, I have raised them to be very independent and self-sufficient. And now they are all so independent and self-sufficient that they are butting heads with me.

THERAPIST: But you are the mother. You need to be the fearless leader.

HOPE: She's never been the fearless leader.

THERAPIST: Well, then I don't know how you got to be where you are.

HOPE: I always had to be the one to take care of them. All my life. Ask any one of them.

ROBERT: Yep.

HOPE: I'm the leader! I did everything! The clothes! I cleaned the whole goddam house! And you say she's the fearless leader. I don't like that. I was the leader.

THERAPIST: No. She's the mother. And the mother is always the leader.

- ROBERT: She brought home the bacon, but we fried it.
- THERAPIST: If she didn't bring home the bacon, you'd have nothing to fry; just an empty pan. (To the mother:) Tell them what you need from them.

MOTHER: Well, if I had two nights a week when I know they're there and have my permission....

(All of the children are talking at once, giggling and joking derisively.)

THERAPIST: These kids don't take you seriously.

(It had become increasingly evident that the session needed to be redirected, and at this point I entered the room.)

DR. FISHMAN: Hello, I'm Dr. Fishman, I've been behind the mirror.

MOTHER: How do you do, I'm Ruth, and this is

DR. FISHMAN: Oh, I don't want to meet them. I have no interest in meeting such disrespectful kids. (To the kids:) I understand you're even supposed to be bright.

HOPE: Yes, I am pretty bright.

DR. FISHMAN: Well, you'd never guess it. (To the mother:) The kids are so disrespectful to you.

MOTHER: That's why we're here. It's come into full bloom in the last two months.

DR. FISHMAN: You don't deserve it.

MOTHER: Thank you.

(When I entered I deliberately sat down next to the mother. She was a moderately overweight woman with

brown hair and brown eyes, dressed in slacks and a sweatshirt. As she thanked me I saw her eyes well up with tears.)

DR. FISHMAN: Why don't you give them a choice? They can stay with you and be respectful and act their ages, or go with their father. You shouldn't have to move and remarry for them. You should have your own life.

ROBERT: She does.

- DR. FISHMAN: Wait a minute, I'm talking. Your kids probably have a fantasy that you'll get back together and be very happy, but you know there were reasons that you split.
- MOTHER: That has nothing to do with this. But the fact is that I've wanted to go back with him. I talked with him the other day, and we both wanted to do it. But the kids were so terrible—I told them at the time of the divorce that I'd never marry someone if I thought there would be a problem between the kids and that person.
- DR. FISHMAN: Who do they think they are, that they're telling you? Why don't you do this—why don't you have the kids leave, and you and your husband live here.

MOTHER: Yeah, or I'll go and leave them.

DR. FISHMAN: That would be a possibility.

MOTHER: But I can't do that.

DR. FISHMAN: Sure you can. There are foster homes-if they're not going to be respectful.

ROBERT: You're just trying to scare us.

- DR. FISHMAN: No, I'm not. I've seen families do it.
- MOTHER: Do you think there's any possibility that this could be solved in some way? That's why we're coming here. That's why I'm bringing us.
- DR. FISHMAN: I don't know, what do you think?
- LISA: I don't want to
- THERAPIST: I think with all your skills, with all the experience you have, it is a possibility, but you will have to be very strong.
- DR. FISHMAN: I don't know. They treat you like they're your mother, not like you're the mother.
- MOTHER: They tell me what they're going to do and what they're not going to do. We sat down and made jobs, and I'm the only one that's doing mine.
- DR. FISHMAN: I don't think they should continue living with you. I think you really should think about that. You're not required by law, you can put them in foster homes. They should earn their keep. The solution is they should earn

their keep with you and be respectful to you.

MOTHER: Well, I would never have considered that it was bad enough at this point that that's what I should do.

DR. FISHMAN: Well, talk about it. I leave the room.)

I am attempting to increase the intensity in order to address the important but unstated issues in the system, namely that the mother is being blackmailed by her children's threat to leave and that she is overwhelmed by these demanding adolescents. What is necessary here is, first, to call the children's hand and so remove the power of their threat and, second, to move to support the overwhelmed mother. If we can help the mother take effective and definitive action, even for a short time, it will enhance her position in the system and force the children to accommodate to her rather than her accommodating to them.

As I returned to my position behind the mirror I was hopeful that my intervention would change the course of the session and allow the mother to begin acting on her own behalf instead of relying on the therapist to fill the parental vacuum.

The mother then related a conversation she had had with her ex-husband. As she spoke it became clear that in many ways the children were instrumental in the break-up of the marriage. Apparently, the children would not tolerate their father, and there was a profound coalition of the mother and the children (not to mention the dogs) against the father. In the sequence that follows, the mother is beginning to realize that it may not be possible for them to get back together.

- MOTHER: There's too much turmoil, too much agony and hostility. And I said that we couldn't make it because of the kids. And he's willing to wait. Whatever I think is best. He's not going to interfere. He doesn't just want to take Robert and Lisa, and then Hope would go away to college and Jane would be alone while I'm at work. He thinks that would be sad. So he's thinking of everyone. He wants the family to stay together.
- THERAPIST: But maybe the family shouldn't stay together.
- LISA: I was thinking of going to a foster home on my own. Because I think it's terrible at home. I was thinking about doing it just....
- THERAPIST: Maybe that's the best idea.
- JANE: I don't want to go.
- THERAPIST: You want to stay?
- JANE: Yeah, I want the whole family to stay together and be happy. Hope and Lisa are—no, they don't want to—Lisa wants to go to Kansas. If she really wants to go to Kansas, she'll go. Like I said to Mom, "Why don't you just let Hope go, and the rest just stay home?"

MOTHER: What I want is to do what's best for the whole family. And right now we are a family and your father is the long-distance member of the family, but he has a very low tolerance level. He would be totally frustrated, and it would be very difficult for him to handle a situation like this.

THERAPIST: It would be difficult for anyone to handle a situation like this.

MOTHER: He couldn't cope with it. I mean he would be knocking heads against walls. And he would be yelling at me because he usually takes things out on me. But he wants to help me, he doesn't want to see me handle it alone.

The mother's statement that the father does not want her to handle the situation alone corroborates my feeling that this woman looks for people to become her champion. In the absence of the father she inducts the therapist into assuming that role. Of course, her need for a champion to defend her against the children is not a sound reason to reunite with her husband. If the parents decide to reunite it should be from a position of strength, not because the children present such dire problems that a parental coalition is necessary. If they were to pull together just to cope with the children it would be a short-lived relationship, since in any case the children will be gone from the home in a few years. Moreover, it would be a profound boundary violation for the parents to base a reconciliation on the desires of the children.

THERAPIST: What do you want?

- MOTHER: Forgetting him—I would like to have a cooperative, helping family without all this hostility between all the different members. The issue of the dogs came up. They all have their favorite dogs, and they use the dogs to irritate each other. If Lisa is mad at Robert, she'll kick his dog. They don't like Jane's dog, so they'll scream at it. They don't like certain dogs because they represent certain people they're mad at.
- THERAPIST: It sounds like you have a bunch of kids, and this is how they get at each other. It sounds like you're talking about little kids.

MOTHER: Maybe it's the fact that she [Hope] was only thirteen when we divorced.

LISA: That's a possibility.

THERAPIST: That would be sad. It would be a shame if you were all stuck being kids for the rest of your lives.

- LISA: Well, we were raised by a kid-so we're stuck being kids.
- THERAPIST: No, you were raised by a woman. It seems to me that if your kids would like you and your ex-husband to get together, if they want to be a family again, they need to prove it to you by showing you that they can work together and be a family.

ROBERT: We don't want to, though. We don't want to. Hope doesn't want to, I don't want to, and do you (to Lisa) ...

LISA: What?

ROBERT: Want Mom and Dad to get together again-and move down there?

LISA: I want them to do what's right-what they'd be happy about and what we'd be happy about.

- HOPE: I said to Mom last night, "If you want to go back to Dad then you should go back to Dad." And I mean that. If you really want to go, then go. And forget about us. He should be your first choice. But I also said that I wish she would consider us, and if she does consider us, she won't do it.
- THERAPIST: You need to prove to her that she should consider you.
- LISA: I said to her on the phone, "Don't even think about us, do what is right for you." That's what I said.
- HOPE: That's what I said, too. But she said she's going to consider it. And I'm glad she's considering it. But if she's going to, then ...
- THERAPIST: Wouldn't it be nice if you guys would consider her? Your mother is in the position of having to constantly defend herself.

The therapist is again getting caught up in the role of the mother's champion.

LISA: So are we.

ROBERT: So are we.

THERAPIST: How do you show her?

HOPE: I've been keeping up with the list of things.

ROBERT: So have I.

(Later in the session the therapist presses the point of changing the children's behavior.)

THERAPIST (To the mother): If you investigate foster care and do what needs to be done to make the children respect you—because they act like little children.

ROBERT: If that's what you want-fine.

THERAPIST: That's all I see. That's what you show me.

ROBERT: Whatever. I'm leaving. (He leaves the room.)

THERAPIST: You have a very hard task.

JANE: He does that all the time at home, and then there's nothing she can do. What is she going to do, chase him? She locks him out and the front door's broken.

Robert, who had run from the therapy room, was discovered at the end of the day sitting in the waiting room looking very forlorn. The therapist attempted to contact his mother without avail. The family lived in the distant suburbs, about an hour or so away; the therapist transported him for this

interim period to a local house for foster children. The foster home was then able to contact the mother and arrange for Robert to be picked up. During the ride home he was screaming at his mother and calling her a "bitch." The mother stopped the car and told the boy to get out. Many hours later, a very contrite son came to the mother's door, apologized and asked if he would be allowed to stay.

For a time things seemed to improve. However, the children eventually reverted to their threat. The mother took them up on it and told them that if they did not shape up they would have to go live with their father. As a result, Robert and Lisa did in fact leave for their father's household.

THE FOLLOW-UP

Following up a year and a half later, I found that the father had turned out to be a terrible caretaker. His twenty-year-old girlfriend lived in the house, he was never there, and the children were neglected. However, Lisa had acquired a boyfriend in the area and so chose to remain with her father. Robert, on the other hand, returned to live with his mother and is now reported to be doing very well, even stating that he "gets along great with Mom."

As for the mother, at one point she was prepared to go through with a reconciliation with her exhusband. However, at the last minute he called to say he really did not think it would work out after all. Naturally, this was another letdown and was taken as a crushing blow. But the woman was eventually able to begin righting her unbalanced life. She transferred to a less stressful job which allowed her to spend more time at home. And during the absence of the other children she was able to establish a good relationship with her youngest daughter, Jane. In addition, the mother got the house together, reduced the number of dogs to three, and began to build an orderly life out of the chaos. Once she assumed responsibility and established for herself an effective executive role in the family she felt herself to be a bright, competent person able to assert control over what had been an impossible situation.

Of course, this is not a fairy tale, and not every part of the story has a happy ending. Hope, although doing quite well in college, is now completely estranged from her mother. She has become very religious, lives with the family of a friend, and barely speaks to her mother.

Summary

My first impression of this family was from behind a one-way mirror in the observation room. From that vantage point I observed the family enter the room and seat themselves in a semicircle. At first glance it was difficult to pick out the mother. She and three of the children slouched into their chairs, pulling them slightly askew, like rebellious teenagers. In the absolute center of the semicircle, formally dressed and ramrod-straight and attentive, sat the eldest daughter, the parental child. As the session began the therapist, quite naturally, addressed not the mother but this eldest child. I found this scene both poignant and ironic.

This is the occupational hazard that we all fall into at various points in working with systems in which there is a disempowered leader. We find ourselves unintentionally doing exactly what we do not want to do—undermining the very person we should be supporting. The net effect is to disempower that person. This is the same trap that society sets for the single parent, especially when that parent is the mother. The single parent is treated not as the head of an intact system but as a person in transition— awaiting her "other half," a champion, a knight in shining armor. It is the therapist's challenge to avoid that trap.