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Title	Review of Psychotherapeutic Interventions in infancy: A seminar given by Dr Margareta Berg-Broden / Alan Carr. Social constructionist psychology and family therapy: Reflections on Professor Ken Gergen's paper to the Psychology Dept, University College Dublin 20th June 1996 / Alan Carr
Authors(s)	Carr, Alan
Publication date	1993-12
Publication information	Carr, Alan. "Review of Psychotherapeutic Interventions in Infancy: A Seminar given by Dr Margareta Berg-Broden / Alan Carr. Social Constructionist Psychology and Family Therapy: Reflections on Professor Ken Gergen's Paper to the Psychology Dept, University College Dublin 20th June 1996 / Alan Carr." Family Therapy Association of Ireland, December, 1993.
Publisher	Family Therapy Association of Ireland
Item record/more information	http://hdl.handle.net/10197/6398
Notes	The attached PDF includes two review articles from 'Feedback' magazine. The first is Carr, Alan. Review of Psychotherapeutic Interventions in infancy: A seminar given by Dr Margareta Berg-Broden. Feedback 1993 (1), pp. 5-6. The second is Carr, Alan. Social constructionist psychology and family therapy: Reflections on Professor Ken Gergen's paper to the Psychology Dept, University College Dublin 20th June 1996. Feedback 6 (3), pp. 27-31, 1996.

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Carr, A. (1993). Psychotherapeutic Interventions in infancy. Report on a seminar with Dr Margareta Berg-Broden. *Irish Psychologist*, 19 (10), 123-124. Reprinted in *Feedback*, 1993, No 1.

Psychotherapeutic Interventions in Infancy

A Seminar given by Dr. Margareta Berg-Broden

Review by Alan Carr, Ph.D., Lecturer, Department of Psychology, U.C.D.

This fascinating seminar was held under the auspices of the Irish Institute for Integrated Psychotherapy and the Irish Forum for Child and Adolescent Psychotherapy at All Hallows College on 2nd April 1993.

Margareta, a Swedish psychologist and psychotherapist, is an international authority on the treatment of mother-infant attachment difficulties. She has worked over the past twenty years in the US, France and Italy. She currently practises at Viktoriagarden, a unit within the Child Psychiatric Clinic of Malmo in Sweden.

Psychologist, Psychotherapist and Mother

Margareta opened the seminar by saying that her understanding of attachment difficulties and her method of remediating them is based on an integration of knowledge from three sources. First, she draws on the empirical child development literature. Second, as a trained psychoanalytic psychotherapist and a practising family therapist, she is in a position to use her insights from this field to inform her practice. Finally, as a mother of five (including a pair of pre-term twins!), she has a wealth of experience as a parent which, in my view, is the cornerstone of her knowledge base.

The Mother-Infant System

The mother-infant relationship is a subsystem of the family, to which the infant and mother both bring strengths and competencies on the one hand and vulnerabilities on the other. For mothers, one of the most important competencies is the capacity to identify and respond to her infant's care eliciting signals. Another is the capacity to maintain socially supportive relationships and tolerate stress during the infant's early life. A major vulnerability is having expectations of the infant which do not match the

actual characteristics of the baby. For example, if a mother's imaginal child is an easy temperament girl and the actual infant is a difficult temperament boy, then the mother's expectations represented by her imaginal child make her vulnerable to developing attachment difficulties with her infant. Depression and personality disorder are also important risk factors that make mothers vulnerable to developing attachment difficulties with their infants.

For infants, their health, their capacity to elicit caregiving behaviour in their mothers and their temperament are some of the more important factors effecting the quality of their attachment to their mothers. Premature babies and infants with low birth weight are particularly at risk for developing attachment problems.

Attachment difficulties occur when there is a mismatch between the mother and the infant. This mismatch may involve the mother's expectations of the child and the child's actual characteristics, as has already been noted. A mismatch may occur between the child's capacity to signal its needs and the mother's capacity to detect and respond to these signals. A mismatch may also occur between the demands that the child places on the mother and her capacity

to tolerate the stress associated with these demands.

Four Types of Reactions to Attachment Difficulties

When a serious mismatch occurs between the mother and infant, attachment difficulties develop. The type of symptoms that the infant develops as a response to attachment problems depend largely upon the temperament of the child. Margareta classified infants into four temperamental categories and outlined the form attachment difficulties take in each of these.

Active-unstable temperament children when they develop attachment problems become angry and difficult to manage. They cry incessantly and present with colic or feeding problems.

Passive-unstable temperament children when they cannot elicit caregiving in their mothers become inert. They behave as if they have given up. They sleep for long periods and cause no trouble. For this reason, they are particularly vulnerable to developing long-term problems since their mothers are unlikely to ask their GP or paediatrician for help with them.

Active-stable children, no matter how neglected they become, keep fighting for attention. Margareta delightfully

described them as dandelions that find their way up through cracks in concrete. They keep fighting for attachment from their mothers, even in the face of continued frustration. They carry their tension in their hands. Their fists are often clenched. They, like dandelions, are real survivors.

Passive-stable children, Margareta likened to swans. They hold their heads up high, peering around waiting for an opportunity to gain their mother's attention, but they do not cry out like dandelion children. They hold and contain themselves, waiting expectantly for any morsel of affection that may come their way. These swan children may develop psycho-somatic neck pain later in life.

Therapy at Viktoriagarden

The aim of Margareta's therapy is to help the mother and infant overcome the blocks or barriers to engaging in what are predominantly genetically pre-programmed patterns of attachment behaviour. That is, infants are genetically pre-programmed to cry, smile, make eye-contact and move so as to elicit maternal caregiving behaviour. Mothers (and indeed fathers or other relatives who become

directly involved in infant care) are pre-programmed to respond to the infant's care-eliciting signals with very specific types of behaviour. For example, mothers talk in motherese because this has specific characteristics which maximize the chances of the child understanding what is being said that help the child develop conversational concepts like turn-taking. In motherese, speech is high-pitched and infants are particularly sensitive to high-pitched sounds so they are more likely to attend to it. In motherese, the vowels are drawn out and the phrasing is in discrete chunks. These features also hold the child's attention. Also, in motherese, the cadence at the end of sentences lets the child know that it is their turn to respond.

The therapeutic model used at Viktoriagarden has two main components. The first is direct work on the mother-infant relationship. This involves the therapist conducting sessions with the mother and infant together; identifying patterns of interaction that are interfering with the development of secure attachment and facilitating change by coaching and supporting the mother to respond dif-

ferently to the infant in the session. The second component of therapy is focused individual psychodynamic therapy with the mother. The aim here is to help the mother resolve issues which are preventing her from responding to the infant's care-eliciting signals.

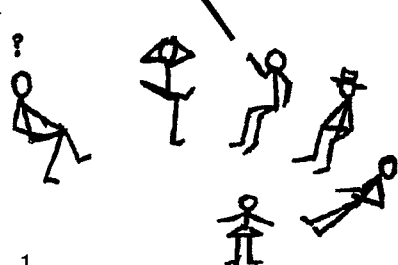
Margareta's approach to therapy is intense and brief. Clients attend four sessions a week and the average duration of therapy is four and a half months.

The afternoon at All Hallows was a refreshing event.

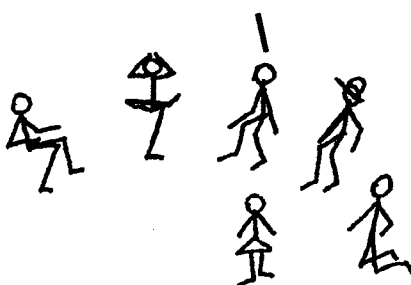
Throughout the seminar, Margareta improvised a variety of attachment difficulties and behaviours from both the mother's and the child's point of view. These delightful enactments, based largely on her own parenting experiences, added a levity and humanity to the presentation which unfortunately is often absent in such seminars.

Her most recent book, *Mother and Child in No Man's Land*, unfortunately has not yet been translated into English. When it is, there will be a special place on my bookshelf for it.

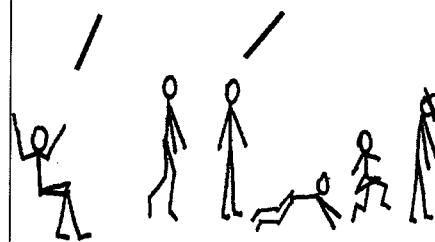
As a family we have decided that you need to continue to confuse us with spherical questions and paradoxical utterances becous' if you are confusing us then at least we are not confusing you. So we'd like you to think of how you might confuse us even better than before...



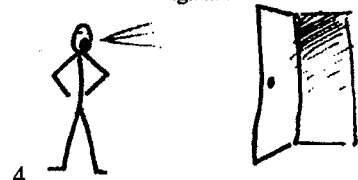
So we have decided to cancel your appointment for next week and we won't see you for another month. Between now and then we want you to 'BOSC' and 'PRAT' as many other families as you can.



But I haven't finished... Until next month!



Well, I want you to continue to undercut me like that 'cos it's good for you as a family and I forbid you to come back in less than a month and I'll continue to Milanese my other families 'cos you need me to and ... Sigh ... Jeez!



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Social Constructionist Psychology & Family Therapy

Reflections on Professor Ken Gergen's Paper to the Psychology Dept, University College Dublin

20th June 1996

Dr Alan Carr

Psychology Dept, UCD, & The Clanwilliam Institute

Introduction

Ken Gergen spoke to a full house at UCD on 20th June 1996. He outlined three criticisms of the representationalist position in academic psychology and then went on to sketch the implications for psychology of discarding a representationalist position in favour of a social constructionist stance. During question time, he also pointed out the implications of the social constructionist position for psychotherapists and family therapists in particular. He spoke for over 90 minutes and covered a large territory in both his main argument and his asides. In this brief reflection, I can do no more than sketch this central argument and give you a flavour of his views that have relevance to family therapy and systemic practice.

The Representationalist Position

He began by diagramming the representationalists' position as set out in Figure 1. This position assumes that a person or perceiver obtains knowledge about objects through the senses. This knowledge is received in the form of sensory perceptions which bear a mirror-like or photograph-like relation to the real objects they represent. When perceivers talk or write textual statements about objects, based on their knowledge of reality, these textual statements bear a map-like correspondence to the objects they describe. This representationalist position underpins the empirical approach taken in mainstream psychology throughout much of the English speaking world, but particu-

larly the US and the UK. (Incidentally, it is also the position taken by mainstream clinical psychology, social work, psychiatry and some schools of family therapy notably structural and behavioural family therapy.) Mainstream empirical psychology is part of a broader movement often referred to as modernism which began with the enlightenment. A central tenet of modernism is that if scientists strive to gain more and more accurate observations of objects using more and more refined instruments and methods and translate these into textual statements, a body of scientific knowledge will gradually develop which because of its accuracy, objectivity and thoroughness will lead to a better world. Ken Gergen pointed out that science in general, and mainstream psychology in particular, has not helped humanity to forge brave new worlds. This has led to a questioning of the modernist project. For mainstream academic empirical psychology, Ken Gergen neatly collapsed critiques into three broad categories:

- * The ideological critique
- * The literary-rhetorical critique
- * The social critique.

He then spelled out the central concern of each of these critiques. What follows is the nub of each of these three arguments, as I understand them.

The Ideological Critique

The ideological criticism of representationalism is diagrammed in Figure 2. Ideological critics of representationalism argue that textual

statements about objects do not bear a map-like correspondence to them. This is because all people, including empirical psychologists, perceive objects through the lens of ideology. With modern sciences, including empirical psychology, this lens is typically that of capitalism. The lens also privileges the position of white, middle-class males and marginalises the position of non-white people, people who are lower-class and also the position of women. Textual statements which make up the body of scientific knowledge within mainstream empirical psychology is therefore not objective knowledge. Rather it is a biased and prejudiced collection of opinions. This ideological criticism of modernism is well-represented by the work of Habermas³ and the feminist critique of science, Mary Gergen.²

The biased nature of observations within biology was humorously illustrated by Ken Gergen when he referred to possible metaphors biologists might use in describing sperms fertilising eggs. The metaphor of the thrusting sperm and the passive egg was contrasted with an alternative metaphor of helpless sperms being drawn in by a powerful yet selective magical pull from the egg.

The Literary-Rhetorical Critique

The literary-rhetorical criticism of the representationalist position was next addressed. It is diagrammed in Figure 3. The central argument here is that textual statements about perceived objects do not correspond to those objects because all textual statements are determined more by

language and its conventions than by the objects being described. Language is a closed self-referential system with every textual statement being related to every other statement. When a scientist observes objects in the world and describes these, his account is not an objective reflection of observed objects, but a narrative account given within the context of a textual history which in turn is bounded by the culture within which the community of scientists conduct their dialogue. Derrida¹ is an important exponent of this position.

The Social Critique

Following on from the literary-rhetorical critique of representationism, comes the third and final critique of the foundationalist position. The argument here moves from a focus on language as a determinant of scientific knowledge to language-users as a social community and the impact of the social process of this community on the development of scientific knowledge. The argument here is that textual statements about objects are determined more by the social process and the social context within which the scientist works than by the objects being studied. Empirical psychologists conduct research on particular topics using particular methods because these fit with the activities of their scientific peers and sponsors. These scientific peers read and write for the same journals and teach in the same types of university departments using the same types of conceptual frameworks and language. The sponsors fund particular types of research that conform to particular criteria and so scientists work within the constraints of these criteria. Graduate students wishing to pursue a scientific career conform to their academic supervisor's and university department's expectation to get good grades for their work. Thus, social processes involving peers and sponsors lead empirical psychologists to conform to the conventions of their scientific community by selecting topics and methods that conform to the communities' expectations. Conducting research projects

that do not conform to particular substantive or methodological criteria, while permitted, entails risks of being extruded from the scientific community, with consequent loss of belongingness, status and financial rewards. Furthermore, scientific communities are not even-handed in the way research results enter into the ongoing dialogue of the scientific community which is conducted in the journals and at scientific conferences. Research findings that are at variance with the beliefs of the scientific community are rarely published and often those that fit with the scientific communities' expectations are rarely replicated. This social criticism of representationism is well-presented by Kuhn's⁴ seminal work on the *Structure of Scientific Revolutions*. Ken Gergen argued in line with Kuhn, that significant new

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scientific knowledge arises not from the accumulation of objective facts using a specific method but from a shift in the conceptual framework used to make sense of scientists' dialogues with each other about their observations.

Whither academic psychology?

In the light of this critique, the question of what psychologists should do and what the science of psychology should be about was posed. Four possible avenues of fruitful enquiry were suggested by Ken Gergen:

- * Continue empirical work but within a pragmatic frame of reference
- * Subject modernist scientific narratives to cultural and historical analysis
- * Explore the ethical implications of choosing particular lines of inquiry and scientific frames of reference

- * Analyse issues such as identity or emotions within a social-constructionist rather than an individualistic framework.

Empirical Research for Pragmatic Purposes

The post-modernist position adopted by Ken Gergen does not entail an abandonment of empirical work but a recognition of the limits of the truth claims that can be made about the results of such work. Psychologists should continue to conduct empirical work, but with an acceptance that the fruits of such work offers no more than pragmatic solutions to local problems. Empirical work cannot throw light on universal truths or contribute to a grand narrative.

Within the field of psychotherapy quantitative and qualitative process and outcome research will not lead to a grand narrative about how change occurs in therapy or which therapies will always lead to problem resolution. However, this type of research may lead to many useful findings about which types of therapies work with which types of clients in particular socio-cultural contexts. The more rigorous this research is in the traditional modernist sense of the word, the more useful and the less ambiguous the local narratives will be. Evaluating therapeutic change from multiple-perspectives including the views of clients, therapists, referring agents and so forth would be an important emphasis for such research on therapy. This is because it would throw light on how constructs such as improvement or deterioration are socially constructed by the community of people involved in the therapeutic venture. [A similar position has been taken by the most rigorous empirical researchers in the field of family therapy, although often for different reasons.⁵ (Sprenkle & Bailey)]

Cultural and historical analysis of psychological constructs

Psychologists should recognise that many of the modernist frameworks we use in psychology are culture-

bound and explore the cultural and historical factors that have led to their development.

Ken Gergen pointed out that the cultural and historical critique of accepted and reified constructs has clear implications for the practice of therapy, and in particular family therapy. Dominant pathologising narratives about particular problems can be deconstructed through exploration of beliefs and practices within the families micro-culture. These can be explored in such a way that clients come to view them as no more than social-constructions that have been selected for reasons of habit or coherence. (I suggested that another common reason might be personal survival or survival of the family group, but I think this view was not shared by Ken Gergen.) In the longer term, the goal of therapy, according to Ken Gergen, is not to replace *a bad old narrative with a good new one*. No, for Ken Gergen, the goal of therapy is to help clients reach a position that they can adopt multiple narratives about problems depending upon the context in which they find themselves. This broader meta-narrative offers clients a new freedom to escape from the constraints of belief systems inherent in family micro-cultures which either construct problems or prevent their resolution.

Ethical awareness

Psychologists should accept that scientific enquiry is not value-free, since the scientific dialogues and narratives we choose to create ultimately have ethical implications. In the study of therapy, the implication of Ken Gergen's position is that there is an onus on all therapists to examine the ethical implications of particular styles of interviewing. Are those which bring forth deficit narratives as ethical as those that bring forth narratives about competencies? This is the central ethical question. Arising from it are other important questions such as under what circumstances are clinical interviewing styles that focus on deficits ethical? Is there a case to be made for a

temporary focus on deficits in risk evaluation in cases of domestic violence, child abuse or suicide risk?

New worlds for old

According to Ken Gergen, psychologists should create new discursive resources arising out of the central ideas of social constructionism. For example, rather than conceptualising people as self-contained repositories of cognition, emotion, motivation and self-identity, psychologists should explore the potential of reconceptualising identities, emotions motivations and so forth as socially constructed within a matrix of social relationships. This style of thinking is common currency among most family therapists trained in the systemic tradition, but is quite alien to most academic psychologists.

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The unanswered dilemmas

As you can gather from this reflection on Ken Gergen's presentation, it was a happening rather than a lecture. Of course, the social constructionist position is not without its dilemmas and paradoxes. Two of the main problems were posed during question time. The first was the dilemma concerning personal responsibility: *'If self is a social construction, how can a self be ethically responsible for his or her violent actions and how can there be justice?'* I couldn't follow the answer to that one. Sorry. The second problem was the paradox about the truth value of the social constructionist position – *'If all theories are social constructions, is not social-constructionism just another social construction'*. When faced up with this paradox, Ken Gergen said *'It's my dilemma, but now that you have posed it I give it to you. You may have it.'*

Closing notes

Ken Gergen is Professor of Psychology at Swathmore College, Pennsylvania 19081. His following works may be of interest to systemic practitioners, particularly the book on *Therapy as Social Construction*.

Gergen K. (1982) New York, Springer-Verlag. *Toward Transformation in Social Knowledge*.

Gergen K & Gergen M (1984) *Historical Social Psychology*. Hillsdale NY: Erlbaum.

Gergen K (1985) The social constructionist movement in modern psychology. *American Psychologist*, 40, 266-275.

Gergen K & Davies K (1985) *The Social Construction of the Person*. New York: Springer.

Gergen K (1991) The saturated family. *Networker*. September/October, 27-35.

Gergen K (1991) *The Saturated Self*. New York: Basic Books.

McNamee S & Gergen K. (1992) *Therapy as Social Construction* (pp.166-185). London: Sage.

Shotter J & Gergen K (1989) *Texts of Identity*. London: Sage.

References

1. Derrida J. (1996) *Of Grammatology*. Baltimore: John Hopkins University Press.
2. Gergen M. (1988) *Feminist Thought and the Structure of Knowledge*. New York: New York University Press.
3. Habermas J. (1981) Modernity vs postmodernity. *New German Critique*, 22.
4. Kuhn T. (1970) *The Structure of Scientific Revolutions. Second Edition*. Chicago: Chicago University Press.
5. Sprenkle D & Bailey E. (1995) The Effectiveness of Marital and Family Therapy. Special issue of *Journal of Marital and Family Therapy*. Vol. 21 (Complete issue No.4).

See Figures overleaf.....

Figure 1. The representationalist position.
Textual statements about perceived objects correspond to those objects.

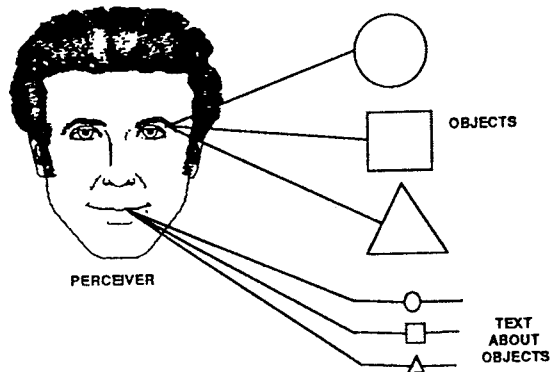


Figure 2. Ideological critique of representationalism.
Textual statements about perceived objects do not correspond to the objects because accurate perception and reporting of perception is distorted by ideology.

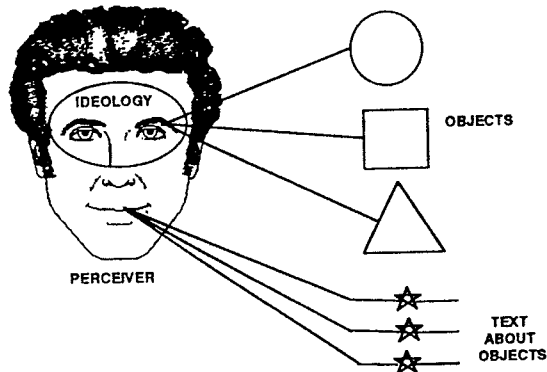


Figure 3. Literary rhetorical critique of representationalism.
Textual statements about perceived objects do not correspond to those objects because all textual statements are determined more by language and text than by the objects being described.

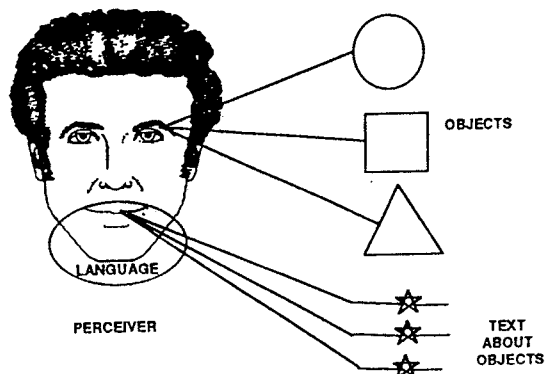
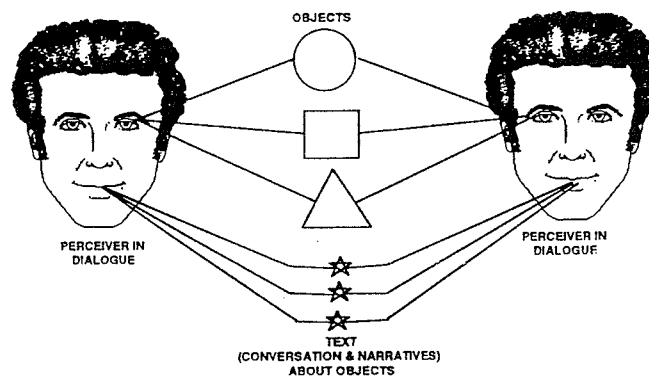


Figure 4. Social critique of representationalist position.
Textual statements about perceived objects do not correspond to those objects because they are determined more by the social context within which the statements are made than by the perceived objects.



News and Views

Regional Support: Many FTNI members have expressed a need for a support/networking forum at a regional level. To explore the possibility of this happening, a sub-committee has been established. This subcommittee would welcome suggestions from members. Please contact Breege O'Neill, c/o FTNI, 17 Dame Court, Dublin 2, or tel: 093-28300.

☆☆☆☆

Reading Group: Proving that there is "life after doing a Masters", Carmel, Ann Marie, Phil and Barbara [the Mater class of '94] have been holding a monthly reading group since their graduation. Armed with croissants and bagels, they congregate in Carmel's house on the first Saturday morning of each month and ponder on the works of authors, both familiar and obscure. Meeting times are negotiated with reference to babies and holidays; indeed the babies have contributed to the reading group by squawking at the appropriate times. It seems they are unconvinced that there is no objective reality!

☆☆☆☆

St Joseph's Adolescent and Family Services are running an Autumn/Winter series of six presentations from September to December 1996 arising from the many requests received from those who could not attend all the excellent workshops given at their very successful 'Key Approaches in Adolescence' Seminar last February. Topics to be covered include: 'Adolescence in the Family', 'The Dangerous Youth', 'Tele-Therapy', 'Group Work with Adolescents', 'Alternative Approaches in Schools' and 'Language Disorders and the Disturbed Adolescent'. This series is completely booked out but hopefully it may be the forerunner of others in the future.

☆☆☆☆

Family Therapy Forum in Galway

by Lorraine O'Gorman, Senior Social Worker, CGS, Galway

The groundwork for family therapy and systemic ideas laid down in the Galway region many years ago continues to bear fruit. The idea of a family therapy forum was initially suggested by Dr Carroll (Director of the Child Guidance Service, WHB) to launch the Family Therapy Service. 'Making Connections' was the title around which their first group meeting convened in October 1995. The aims of this forum are to provide links and supports for professionals, to reduce isolation and to create a space to learn, share and build on skills, i.e. to re-enliven the ideas of Family Therapy. The format for monthly meetings include some theoretical input with discussion and debate about the practical application in the work context, presentations of journal articles on relevant themes and case discussions.

Although changes in the field of Family Therapy towards professionalisation and increased training requirements has many positive benefits, there is a slight danger in increasing distance between those who work systemically and those who have been trained to work systemically. Attendance at forum meetings is open to any professionals looking to share ideas and gain supports in developing systemic ideas. Meetings are held from 2.30-5.30pm on the last Thursday of the month at Lyradoon Family Centre, 65 Lower Salthill, Galway, tel: 091-521059. The next meeting on 31st October will focus on child protection issues.

☆☆☆☆

Full Circle Books available from 18 Clanwilliam Tce, Grand Canal Quay, Dublin 2, Tel: 6761363/6762881, Fax: 6762800. Also on sale at EGM and Workshop. New Releases include: "Realities and Relationships" by Kenneth Gergen.