

varieties of enmeshment *

the resolution (or not) of the Oedipus complex

- The line that has to be drawn in families marks the difference between generations. The Oedipal struggle is not so much a symmetrical contest between father and son for mother's love as one in which a truth has to be established, namely that the boy is not the sexual partner of the mother†: "... the absence of the satisfaction hoped for, the continued denial of the desired baby, must in the end lead the small lover to turn away from his hopeless longing"

Freud, S. (1961) The Dissolution of the Oedipus Complex (1924) In *The Standard Edition of the Complete Psychological Works of Sigmund Freud*, vol XIX, London: The Hogarth Press, p173

the double bind

- the patient "would not know what kind of message a message is"

unable to distinguish 'logical types' ie which are metacommunications and which are not

"He might, for example, assume that behind every statement is a concealed meaning which is detrimental to his welfare. He would then be excessively concerned with hidden meanings and determined to demonstrate that he could not be deceived – as he had been all his life".

Bateson, G., Jackson, D., Haley, J. & Weakland J.H. (1956) Towards a theory of Schizophrenia. *Behavioural Science*, 1 (4) [reprinted in Bateson, G., *Steps to an Ecology of Mind*. London: Paladin, 1973.]

invisible loyalty

- "even when children are not charged with overt caretaking roles, they may function as cementing agents, holding their parents' marriage together" ...

"Seemingly meaningless self-destruction, unfounded violent attacks on the parent, delinquency, or psychosis in the offspring may all result from inalterable, fateful unconscious devotion to the parents"

Boszormenyi-Nagy, I., and Spark, G. (1973) *Invisible Loyalties: Reciprocity in Intergenerational Family Therapy*. Hagerstown, Maryland: Harper & Row, chs 6 and 10.

* extracts from slide presentation *Growing up: the gravitational pull of parents: clinical constructions*, Tavistock Clinic SpR group of child and adolescent psychiatrists, July 2013

† Kraemer S (2016) Narratives of fathers and sons: 'There is no such thing as a father' In Arlene Vetere and Emilia Dowling (eds.) *Narrative Therapies with children and their Families: A Practitioners Guide to Concepts and Approaches (Second Edition)* Brunner/Routledge

enmeshment

- “after several months of family therapy .. the parents were able to initiate and negotiate conflicts without involving their daughter”

“ a child may join or be enlisted by one parent against the other”

the children ... particularly the psychosomatically ill child, feel great responsibility for protecting the family”

“an inability to confront differences ... is characteristic of all such families”

“these patterns are not causal chains”

Minuchin S, Rosman B, Baker L. (1978) *Psychosomatic Families*, Harvard pp 28, 30, 31, 32, 50

- “enmeshed family patterns forecast children's depressive symptoms; controlling and disengaged interactions predicted anxious and depressive symptoms; and hostility forecast ADHD and somatic complaints.

Intriguing gender differences emerged. As predicted, whereas boys who experienced enmeshed family patterns more often developed symptoms of ADHD, girls who experienced enmeshed family interactions later showed symptoms of depression.”

Jacobvitz D, Hazen N, Curran M, Hitchens K (2004) Observations of early triadic family interactions: Boundary disturbances in the family predict symptoms of depression, anxiety, and attention-deficit/hyperactivity disorder in middle childhood. *Development and Psychopathology* 16 (3): 577-592

perverse triangle

- “The term *coalition* means a process of joint action *against* a third person ... the problem is most severe when the coalition across generations is denied or concealed ... when this becomes a way of life the family organisation is in trouble”

Haley, J. (1976) *Problem-Solving Therapy*. San Francisco: Jossey Bass. p. 109

- “what is the most important marriage in the family?”

Boscolo, L., Cecchin, G., Hoffman, L. & Penn, P. (1987) *Milan Systemic Family Therapy: Conversations in Theory and Practice*. New York: Basic Books. p 114

parentification

- “... innate among the human being’s emotional potentialities, present in the earliest months of postnatal life, is an essentially psychotherapeutic striving”

Searles, H.F. (1979). The patient as therapist to his analyst. In: *Countertransference and Related Subjects: Selected Papers* (pp. 380-459). New York, International Universities Press.

- “infants as young as 12 weeks make ‘triangular bids’ to share their affects with both parents: they rapidly alternate their gaze and affect signals between them”

Fivaz-Depeursinge E1, Frascarolo F, Lopes F, Dimitrova N, Favez N. (2007) Parents-child role reversal in trilogue play: case studies of trajectories from pregnancy to toddlerhood. *Attach Hum Dev.* ;9(1):17-31.

- If the parental couple is uncooperative/hostile, infants are “enlisted to serve the parents’ problematic relationship rather than to develop their own social competence”

Fivaz-Depeursinge, E., Lavanchy-Scaiola, C., Favez, N. (2010) The Young Infant's Triangular Communication in the Family: Access to Threesome Intersubjectivity? Conceptual Considerations and Case Illustrations. *Psychoanal. Dial.* 20:125-140.

- “infant–mother attachment disorganization predicted mother–toddler role reversal.

... Mother AAI role reversal with her mother, assessed before the child was born, predicted mother–toddler role reversal over and above attachment disorganization with mother in infancy.”

Macfie, Jenny, Fitzpatrick, Katie L., Rivas, Elaine M. and Cox, Martha J. (2008) 'Independent influences upon mother-toddler role reversal: infant-mother attachment disorganization and role reversal in mother's childhood', *Attachment & Human Development*, 10:1, 29 - 39

school refusal (anxious attachment)

- “ the relationship of one or other parent, usually mother, to the school-refusing child. ... it is found time and time again that mother treats the child as though he were a replica of her own mother, the child’s maternal grandmother. Not only does the mother seek from her child the care and comfort she had sought, perhaps in vain, from maternal grandmother, but she may behave towards him as though he were the dominant figure”

Bowlby J. (1973) *Attachment and Loss Volume 2. Separation: Anxiety and Anger*. Hogarth Press (Penguin 1978, p 309)

- “The anecdote of the mother urging her child to play, while grasping his arm in a vice-like grip (Kahn and Nursten, 1962), graphically portrays the generally accepted notion of maternal ambivalence regarding separation”

Coolidge JC, Brodie RD (1974) Observations of mothers of 49 school phobic children evaluated in a 10-year follow-up study. *J Am Acad Child Psychiatry.* 13(2):275-85

- “In other cases the apparent fear of school may hide a fear of harm befalling the mother in the child's absence, so that the child is compelled to remain at home to reassure himself of mother's safety.”

Hersov, L. (1972) School Refusal. *British Medical Journal* 3, 102-104, p. 103

Disorganised attachment

- complicated loss → disorganised controlling/caregiving attachment

“losses ... that were sudden or accidental, occurred in close proximity in time, occurred close to the time of birth of the child”

“many of the mothers describe psychological merging between themselves and their precocious and highly sensitive child”

“the centrality of unresolved loss and dissociative processes in the behavior of mothers and their disorganised children”

Solomon J & George C (eds) (2011) *Disorganized Attachment and Caregiving*. NY: Guilford Press

- “adolescents ... assume control in hurtful and nonconstructive ways.. making humiliating remarks ‘You cannot stand up for yourself ... you're useless’ ”
- “... may laugh at painful situations instead of showing empathy or remorse”

Henninghausen et al 2011 in Solomon & George, p 233

- “children who have been disorganised in their infant attachments ... [exert] active control on the parent's attention and behavior either through caregiving or through domineering-punitive strategies”

Liotti 2011 in Solomon & George ch 14

- boys far outnumbered girls in the disorganised/controlling group

Solomon & George 2011

Expressed Emotion

- Leff, J., and Vaughn, C. (1985) *Expressed Emotion in Families: Its Significance for Mental Illness*. New York: Guilford Press.

unresolved/preoccupied attachment

- “The intruders from the past have taken up residence in the nursery, claiming tradition and rights of ownership. They have been present at the christening for two or more generations. While no one has issued an invitation, the ghosts

take up residence and conduct the rehearsal of the family tragedy from a tattered script.”

Fraiberg S, Adelson E, Shapiro V. (1975) Ghosts in the nursery. A psychoanalytic approach to the problems of impaired infant-mother relationships. *J Am Acad Child Psychiatry*.14(3):387-421.

- “a higher proportion of women with borderline personality disorder were classified as showing disrupted affective communication than was the case for women with depression or those without a psychiatric diagnosis. In addition, these mothers were significantly more likely to exhibit fear/disorientation in response to the infant’s attachment bids, a pattern strongly associated with infant disorganized attachment”

Hobson RP, Patrick MP, Hobson JA, Crandell L, Bronfman E, Lyons-Ruth K. (2009) How mothers with borderline personality disorder relate to their year-old infants. *Br J Psychiatry*.195(4):325-30. doi: 10.1192/bjp.bp.108.060624.

“All subjects in the borderline group were classified as preoccupied, confused and mentally entangled (E) with respect to significant early attachment relationships. One of the features of the discourse encountered in such 'E' transcripts is marked and unexplained oscillations in attitude towards the nature and significance of the individual's past attachment experiences.

One of the diagnostic criteria for borderline personality disorder concerns similar oscillations in the individual's current interpersonal relationships, with initial idealisation being followed by abrupt devaluation and denigration. Thus it would seem that the 'observable' styles of disturbed interpersonal relatedness so characteristic of borderline personality disorder were mirrored in a direct way in these individuals' styles of discourse and thinking about early attachment relationships.”

Patrick, M., Hobson, R.P., Castle, D., Howard, R. and Maughan, B. (1994) Personality disorder and mental representation of early social experience, *Development and Psychopathology*, 6: 375-388.

maternal impingement

- “In health the individual soon becomes invulnerable in this respect, and if external factors impinge there is merely a new degree and quality in the hiding of the central self. In this respect the best defence is the organization of a false self. Instinctual satisfactions and object relationships themselves constitute a threat to the individual's personal going-on-being.”

Winnicott, D.W. (1960) The Theory of the Parent-Infant Relationship, *International Journal of Psycho-Analysis* 41: 585-595, reprinted in *The Maturation Processes and the Facilitating Environment*, London: The Hogarth Press,1965, p 37-55.

the oedipal triangle revisited

- “If the link between the parents perceived in love and hate can be tolerated in the child’s mind it provides him with a prototype for an object relationship of a third kind in which he is a witness and not a participant.

A third position then comes into existence from which object relationships can be observed. Given this, we can also envisage being observed. This provides us with a capacity for seeing ourselves in interaction with others and for entertaining another point of view whilst retaining our own, for reflecting on ourselves whilst being ourselves.”

Britton R (1989). The missing link; parental sexuality in the Oedipus complex. In: J. Steiner (Ed.) *The Oedipus Complex Today: Clinical Implications* (pp. 83-101). London: Karnac.

Fabricated and induced illness

- “We found high rates of chronic somatoform disorders in these women, with enduring somatoform disorders in 57% and fabricated symptoms in 64% (11 individuals had both chronic somatisation and factitious illness). In many participants the use of healthcare services was chaotic, with frequent visits to different accident and emergency departments, frequent changes of GP (often instigated by the GP) and lack of continuity of care. Discussion with the individual’s GP seldom yielded any useful information because the GP’s knowledge of the individual was often fragmented and brief. This association between persistent somatisation and factitious illness is known to occur in a subset of very high users of medical and surgical services”

Bass C, Jones D. (2011) Psychopathology of perpetrators of fabricated or induced illness in children: case series. *Br J Psychiatry*. 199(2):113-8. doi: 10.1192/bjp.bp.109.074088.

- “Some disorder of the caring role function may explain why professional carers are also overrepresented among mothers who treat their own children in this way. Finally, unlike other types of child abuse, fabrication or induction of illness seems to be perpetrated by all social classes, is not always associated with other types of family violence or crime, and is not associated with young inexperienced parents or socio-economic deprivation. In one series of 37 mothers, however, there were high rates of privation, childhood abuse, significant loss or bereavement (Gray & Bentovim, 1996).”

“Unresolved bereavement reactions might sensitise an individual to see dependent others as more ill than they really are, or to dread that a potentially fatal illness may be missed.”

Bass C, Adshead G. (2007) Fabrication and induction of illness in children: the psychopathology of abuse. *Advances in Psychiatric Treatment* 13: 169-177 doi:10.1192/apt.bp.105.001982

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