

Leaving home, and the adolescent family therapist

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Serious psychiatric problems of adolescence can be viewed as breakdowns at the prospect of adulthood, when "leaving home" begins to have real meaning, wherever the young person actually lives. Most young people seem to cope well enough with this process, but crises develop in those families where the growing child senses that it is too soon to grow up and leave, in case the parents could not survive in the "empty nest". I describe how a therapist gradually develops such a point of view.²

INTRODUCTION

I want to suggest that the psychiatric study of adolescence is in fact the psychiatric study of leaving home. In some senses this is perfectly obvious since adolescence is the time of life when separation from the family of origin has to take place, but it is often not appreciated just how important this transition is when young people break down at the very point when they should be taking off. By breakdown I do not only mean mental breakdown, although that is included [75 per cent of newly diagnosed schizophrenics are aged between 17 and 25 (Curran, Partridge and Storey, 1980)]. I also mean academic failure, drug abuse, overdoses, unwanted pregnancies and all the other problems that are so frequently associated with adolescence. I don't intend to discuss the causes of mental illness or of delinquency, which must include accidents of heredity, early experience and social environment, but instead to examine some common factors that provoke or maintain the varieties of adolescent failure, and which can be modified by family intervention.

Part of the reason why the "leaving home" aspect of these difficulties is ignored is the strenuous resistance on the part of the young people themselves to being considered as in any way tied to their parents or dependent on the home in which they grew up. In relation to their task, family therapists have to grow up too.

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² followed by a clinical vignette in the original version, now omitted

HOW IS IT DONE? ADOLESCENCE IN GENERAL

It has now become commonplace to challenge the myth that adolescence is a stormy period for everybody, but it is worth repeating the observation that most young people manage the transition from home to the wider world fairly well. One survey (Central Policy Review Staff, 1980) showed that 80 per cent of 16 year-olds lived at home, while 80 per cent of 24 year-olds had left, most of them having married. So during those eight crucial years, four-fifths of the young adult population has left home. The research team asked a selected sample what were the main problems and the response showed that the young people felt that they got on quite well with their parents except that they argued about clothes and hairstyles and what they were allowed to do in the evenings. So it looked from that study as if most people managed well. However, there is another figure from the same survey to set against that, which is that one-third of the marriages contracted under the age of 20 result in divorce within the next 15 years, and one-fifth of the marriages contracted between 20 and 24 end in divorce. So if marriage is the way that most people use to leave home, it appears to be successful only as a stepping stone. We need not regard the divorces as failures, though most people involved in divorce do not feel very successful about it at the time. The fact is that about one-quarter of these young people do not want to stay with their first choice. I do not want to discuss marriage here, but to explore what makes leaving home more difficult for some people and easier for others, and I want to re-state the rather paradoxical proposition that if you are happily and securely attached to your family and to your parents it is easier to leave without things going wrong than if you are anxious about them or at war with them (see Bowlby, 1979). I suggest that the crises of adolescence which so often come the way of psychiatrists are either false attempts at independence such as running away (Stierlin, 1972), getting pregnant, self-starvation (Minuchin, Rosman and Baker, 1978; Selvini Palazzoli, 1978), or abusing drugs (Stanton & Todd, 1981) on the one hand, or an actual refusal to be independent on the other, such as academic failure, overdose and mental breakdown (Haley, 1980), which imply amongst other things that the young person is not ready to go.

One form of investigation is to think how you managed this transition yourself, by considering the following questions: When did you leave home ? How old were you ? Where did you go ? How far from home ? And who was with you ? Were you going to work or to study ? How much money did you have with you ? Were you pregnant? Were you in love? Did you slam the door ? Were they angry with you ? Was anybody at home ill, or had somebody just died ? Were you afraid that you would not manage, or that the people you left behind would not manage without you ? What did you take with you ? What did your family know about where you were going? Had they seen where you were going to stay? Did they know the people you were staying with, or did you live alone ? Why did you leave at that particular time ? When you got to where you were going who did your cooking for you, or did you do it yourself? Who washed your clothes? Did you take them home, or go to the Launderette ? Were you the first to leave home or had other siblings gone before you ? Which sibling had the greatest difficulty leaving home ? (To go back further - remember when and how you learned to swim and to ride a bicycle because these, too, are metaphors for independence and developments that alter your relationship to parents in significant ways.) What obligations persisted after you left? How often did you feel you should visit your family ?

After thinking about these, and similar, questions it might become more apparent that leaving home is not simply an event but a process which continues in a rather indefinite way and everyone has to face it sooner or later. The reason why it is so useful as a focus for the family therapist is that it obviously takes place in all families and yet can be quite awkward for some. It is the bottleneck through which each person has to squeeze individually but which is also a potential crisis in the family as a whole. Just as having a baby put the young mother in touch with her own mother, so having children leave home puts the parents in touch with their own adolescence. It can stir the family tremendously. I am suggesting that it is the weakest link in the chain of family life and the one therefore most likely to be broken if there is stress. Sometimes the difficulty is that the parents themselves have not emotionally left home. This is particularly likely when young people leave home and very quickly become parents themselves. Then they find that they are in two stages of life at the same time, since they are trying to modify their ties with their own parents, while at the same time creating new ones with their children. This must take place in all families but it is a process that cannot be hurried.

Another potential source of tension is when the children, for one reason or another, are at risk of being more successful than their parents were at this particular age or stage of life. This is especially true of academic success in the teenage adolescent but also, later on, of success in marriage and in work. I quite often see families in which the children have had a much better deal than their parents had in their childhood, because of poverty, in the Third World or the Mediterranean, for example, or because of deprivation due to war, such as evacuation, but most painfully in the Nazi holocaust. In spite of all their parents best wishes the young people in these families are really unable to grasp the opportunities they now have, as if it would be disloyal to carry on without at least stopping in their development to acknowledge their good fortune. Parents often say that they had a much harder time when they were young, but they are quite baffled when the children seem to respond by spoiling their chances with bad, and sometimes mad, behaviour.

THE THERAPIST'S PROGRESS: THREE STAGES

Whether he works with whole families or just with the young people on their own, a psychotherapist is bound from time to time to find himself taking sides with one person or another in the family, and particularly with one generation or another, and to feel quite strongly that there is someone in the family who is the real culprit, the one who is stubbornly preventing a resolution of the problem. I want to describe three stages in the development of a family therapist and each stage is based on the idea that, even if he does not blame anybody in the family for the trouble, he is likely to feel sorry for someone and to take their side against the others.

(1) *The first stage*, which corresponds with the relative youth or inexperience of the worker, is to feel sorry for the young people themselves, and to try to rescue them from what seems to be parental persecution or neglect (see Jenkins, 1981). The adolescent's family seen from this perspective is nicely portrayed in the Beatles' song "She's Leaving Home" (Lennon & McCartney, 1967). When John Lennon and Paul McCartney wrote this they were themselves in their twenties, and they describe the stealthy departure from home of a young girl at 5 o'clock on a Wednesday morning. "Quietly turning the backdoor key, stepping outside she is free". It is quite clear that she has not been happy: "She's leaving home after living alone for so many years" says the song. The mother says "Why would she treat us so thoughtlessly, How could she do this to me? We never thought of ourselves, never a thought for ourselves, we struggled hard all our lives to get

by . . ." The penultimate line "Something inside that was always denied for so many years" implies most powerfully that the daughter has in some way been neglected by the parents and her only course is to run away. The whole piece describes a particularly suffocating kind of experience for the child whose parents did everything through her and nothing for each other.

When first released in the 1960s, these lyrics joined the chorus of criticism against the family as an institution, a movement which took its authority mainly from the writings of Ronald Laing (Laing & Esterson, 1964) and David Cooper (1967) and which viewed young adults with serious psychiatric problems as outspoken prisoners in families where all other problems, especially between parents, were brushed under the carpet. Many therapists of my generation must have been inspired to join the movement to fight against what seemed such terrible injustice.

In the first stage, then, the young therapist takes the side of the adolescent with the problem and is indignant with the parents, but he is also in danger of making the same mistake as the patient he is so keen to rescue, which is to attempt to change the parents' relationship with each other, even to solve their "problem". Selvini Palazzoli et al. (1978) describe a similar development in the therapist's career. In their early work with families they had made " . . . the repeated and obstinate error of believing that an adolescent couldn't get better unless the therapist was able to change intra-familial relationships, especially between the parents". Eventually they concluded that " . . . the task of the therapists is to behave in a manner as to destroy this false belief that the parents must be changed before the child can grow. It is not the task of children to improve the relationships between their parents or to substitute for them in their functions. An adolescent can successfully grow up and become mature regardless of the type of relationship between the parents. The essential point is for the adolescent to convince himself that his parents' relationship is none of his business".

(2) The problem that the parents are perceived to have in their relationship is how to face the departure of the children and the ensuing "empty nest" (see Roberts & Lewis, 1981) and *the second stage* of the therapist's progress has been reached when he transfers his sympathy from the young person who is trying to leave, to the parents who are about to be left behind. Haley (1973) describes the family situation like this "In many cases parents who have watched their children leave one by one without difficulty, suddenly have difficulty when one particular child reaches that age. In such cases the child has usually been of special importance in the marriage. He may have been the one through whom the parents carried on most of their communication with each other, or the one they felt most burdened by and held together by in common concern and care for him. A marital difficulty that may emerge at this time is that the parents find they have nothing to say to each other and nothing to share. They have not talked to each other about anything except the children for years". Looking at it this way makes the indignant therapist feel rather sorry for the parents who are now faced with the prospect of being left alone for the first time in 20 or more years. It is easier to see why they might need some time to relinquish their involvement with the child, and some help in doing so. The second stage therapist tends to support the parents, rather than blame them, and may join with them by criticizing the young person for being apathetic, delinquent or crazy, whatever it is. [Many therapists understand this to be the principal innovation of structural family therapy (Minuchin, 1974)] The advantage of this method is that the problem is re-defined by the therapist as one which the parents can deal with (in spite of their natural expectation that it is the therapist who will solve it.)

Difficulties arise when the parents, while being encouraged by the therapist to make plans so that the young person can grow up and leave, suspect that they must be to blame for hanging on to the child longer than they should, and begin to lose their nerve. Even when the therapist is emphasizing their strengths as parents, they can easily disqualify him by stubbornly demonstrating their incompetence, usually by insisting that only the adolescent can solve the problem, that they have "tried everything" and that nothing works. "It's up to her now" says father, with finality.

The young person, for all her bravado, and in spite of the command she is given by such a remark, is petrified. I imagine that this must be the dilemma of the young swift, which has to be ready at the first attempt to fly for months without stopping. These birds mate and sleep on the wing and do not land until they have to lay their eggs, to start a new family (Attenborough, 1979). When the time comes to leave the nest could it be that the parent swifts have to give their young one a push? Would any one be able to leave on such a journey without some sort of encouragement? This is what has to happen in the human family when the young person cannot leave, so that if the child is refusing to go to school the parents take her, if she is threatening suicide they watch over her, or if she is running away they keep her at home. In other words they take charge in the ordinary way so that she can begin to take charge of herself. When the parents retreat from the task of encouraging the child, there are many creative strategies, devious, playful or persistent, that can be enjoined by the therapist to restore their competence (Haley, 1980; Madanes, 1981; Minuchin and Fishman, 1981).

(3) The therapist in the second stage, then, enlists the co-operation of the family, but particularly the parents, in the service of change. An alternative attitude, in which no such commitment is expressed, is reached by taking the sideways leap to *the third stage*, where the therapist feels sorry for, and takes sides with, everybody, children and parents alike, because they are indeed in a trap that constrains one generation as much as the other. This is actually quite difficult to do because it runs against the grain of ordinary logical and practical thinking: "if something is wrong, then try to correct it". Following ordinary logic, the family therapist tries to get the parents to use their power over the child more effectively. Taking sides with everybody, on the other hand, means accepting that each person, and each generation, is equally powerful, which is another way of saying that the issue of power is irrelevant for the therapist in the third stage. Palazzoli Selvini *et al.* (1980) describe this position as "neutrality", which is attained by making alliances at different times with everyone in the family. "The end result of the successive alliances is that the therapist is allied with everyone and no one at the same time" (See also Hoffman, 1981). The point of view of the therapist who is trying to be neutral in relation to both generations can be summarized as statements which might be delivered to them in a family meeting. What one says to the adolescent in difficulties is "You are hopelessly stuck because you believe you can rescue your parents from the inevitable changes that are coming. You have to devote your efforts to that end and not to your own life and progress. *You are convinced that they cannot live without you*". To the parents the statement is "Your child believes that you need her to fail so that she will not leave you or outstrip you in achievements. The more you say "but we want you to succeed"! the more she will be sure that you are just saying that and do not really mean it. *You cannot convince her that you do not need her* because in her experience you have always been with her so she has no evidence that you can exist independently of her".

The therapist is not trying to change the family but is simply observing in a new way how both the parents and the adolescent are stuck. The prospect of change seems so awful for all of them, particularly for the adolescent who cannot bear the idea of not being needed by her parents. It is easier to believe that they cannot live without her than it is to step down from this heroic position and say goodbye, and thank them for whatever helpful things they have done. It is more comforting for the adolescent to hang onto the idea that the parents are indebted to her than to accept that she may in fact be indebted to them, and more comforting, in spite of everything, for the parents to hang onto their child.

When the therapist says to the family that both generations are caught in this sort of bind with each other, implying that no change can be expected for the time being, what might happen after a while is that the family says, in effect, "This is ridiculous--it can't go on like this!" and then something changes. Like the swifts, the parents can give a little push, or the child can take her opportunity and grow up. On the other hand, something else, quite unexpected, might happen, perhaps involving another member of the family such as a sibling or grandparent, or someone from outside the family altogether. It is not the business of the third stage therapist to arrange what should take place following therapy. These changes are, in any case, often curiously ignored by the family, as if they were automatic. The family's passage through therapy is merely one of the many things that happen to it in its development as an evolving natural system. Seen in this way, the question "Who (or what) caused the change" has no meaning.

The therapist who works this way is trying to free the family by accepting it as he finds it. To do this he has to cultivate a state of indifference to the outcome and to give up, if only for a moment, the desire to change the family. In the practice of psychoanalysis, too, Bion (1970), following Freud, says that the desire in the analyst for the patient's welfare, his cure, and even for his presence, interferes with the essential exercise of observation, which is his primary task. By saying that the move from second to third stages is a sideways one, I am implying that it is an alternative rather than an advance. Each attitude, one working for change, the other for acceptance, has its own distinct discipline. Many family therapists, as they refine their skill, must move from side to side between these two states.

CONCLUSION

... The young person's breakdown can be viewed as a fantastic (and desperately secret³) mission to save the parents, even when it is bound to fail. The truth is that only the parents can do what they have to do, whether it is to grieve, or to re-examine their own relationships, both with their own parents and with each other. Therapists are only powerful in the sense that they can harness developmental strengths in the people who consult them.

When the time comes for children to leave home there is a sense of crisis in some families and in these the parents have to learn that they can manage without the children, and the children that they can give up their belief that they are needed at home more than anywhere else. This calls for quite a lot of courage in both generations. I suspect that more people than we realise have not really left home at all.

³ "... the patient's love for his parents enforces upon him a deep secrecy regarding the sacrificial nature of his behaviour" (Bateson, 1961).

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