

Overview of Bowen Theory

Date : February 26, 2018

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In his seminal 1988 publication, *Family Evaluation*, Michael Kerr described the shortsighted nature of our approach to the most important human problems, “We demonstrate against war as if we understand the causes of war. We could just as easily demonstrate against schizophrenia” (p. 27). This critical view of what is known and what is not known, and how our inability to distinguish between the two impacts our decisions, will be an important emphasis of this section on Bowen’s way of thinking and the theory that is a product of that way of thinking.

The Bowen theory is a complex, highly integrated system of interrelated concepts which define various predictable patterns of human behavior. It is not possible to accurately portray the theory and the type of thinking that it represents with the space provided here, nor is it necessary. Bowen defined a system theory of the human family as an emotional unit, and the Buddha did not define a theory of the human family *per se*. Therefore, this section will only outline important aspects of Bowen’s work and style of thinking which pertain to the research question, “To what extent did the Buddha define a natural system?” Other concepts will only be briefly explained.

Bowen and systems thinking

Murray Bowen was unique in his study of human behavior from a natural system perspective. There are many systems theorists who use models derived from general systems or cybernetics ideas, but few who prioritized the study of human behavior as a natural phenomenon via systems thinking. There are many systems thinkers applying the concepts of complexity, isomorphism, and circular relationships as applied to human health and behavior, and all perspectives pass neglect the cellular, organic, mind/body and jump directly to the social to create a one-level theory. There are no other natural systems theorists who study the human family as an emotional unit which governs the behavior of the individual. This was Bowen’s primary contribution.

Perhaps more important than the idea of the family as an emotional unit was Bowen’s radical approach to medical research. At age fifteen when he was working as an “ambulance helper” he witnessed “bewildered, unsure, and fumbling” emergency medical personnel fail to care for a dying girl, and from that point he thought he could help medicine find better answers (Bowen, 1978, p. 483). As with many of the doctors returning from the Second World War, he was interested in

improving the treatment of psychological problems. He was trained as a psychiatrist and eventually became chief resident at the Menninger Clinic in Topeka, Kansas, which was the foremost psychoanalytic clinic in North America at the time. During his time at Menninger, he began developing new ideas about the influence of family members on the symptoms of his patients. He understood that Freud had intended to create a natural science of human behavior but began to think that the assumptions of psychoanalysis were too deeply rooted in human subjectivity. He had great respect and admiration for Freud as a “genius” theoretician with a unique ability to remain objective while in contact with his patients’ great emotional distress (Kerr & Bowen, 1988, p. 352). He believed that Freud had contributed one of the most important advances in the understanding of human behavior since Darwin.

But Bowen believed that Freud’s fatal mistake was straying from bare observation of nature by using concepts which could not be directly connected back to nature. He writes that Freud had made an “unwitting error[s] in judgement” creating a theory that was “tinged with feelings when it was based on the history of human civilization rather than science itself” (Kerr & Bowen, 1988, p. 357). In his book *Family Therapy in Clinical Practice*, Bowen (1978) describes his opinion on the limitations of psychoanalysis,

Few events in history have influenced man’s thinking more than psychoanalysis. This new knowledge about human behavior was gradually incorporated into psychiatry, psychology, sociology, anthropology, and the other professional disciplines that deal with human behavior, and into poetry, novels, plays, and other artistic works. Psychoanalytic concepts came to be regarded as basic truths. Along with the acceptance there were some long-term complications in the integration of psychoanalysis with other knowledge. Freud had been trained as a neurologist. He was clear that he was operating with theoretical assumptions, and that his concepts had no logical connection with medicine or the accepted sciences. His concept of “psycho” pathology, patterned after medicine, left us with a conceptual dilemma not yet resolved. He searched for a conceptual connection with medicine, but never found it. Meanwhile, he used inconsistent models to conceptualize his other findings. His broad knowledge of literature and the arts served as other models. A striking example was the oedipal conflict, which came from literature. His models accurately portrayed his clinical observations and represented a microcosm of human nature; nonetheless, his theoretical concepts came from discrepant sources. This made it difficult for his successors to think in concepts synonymous with medicine or the accepted sciences. In essence, he conceptualized a revolutionary new body of knowledge about human functioning that came to exist in its own compartment, without logical connection with medicine or any of the accepted sciences. The knowledge was popularized by the social sciences and the artistic world, but few of the concepts found their way into the more basic sciences. This further separated psychoanalysis from the sciences. (pp. 338-339)

Bowen believed that “The use of concepts from literature separated [Freud’s] theory from facts that could be proven and validated by science” (Kerr & Bowen, 1988, p. 357). He believed that the psychoanalysts and psychiatrists who came after Freud had convinced themselves that the

field represented a science,

The twentieth century has been involved in a debate about whether psychoanalysis is a science. It is a science in the sense that it defines a body of facts about human functioning never previously described. It is not a science in the sense that it has never been able to make contact with, nor be accepted by the known sciences. The use of the scientific method has lulled psychoanalysis and psychiatry into believing it can someday become a science. The scientific method is a way of ordering random and discrepant data in a scientific way in the search for common denominators and scientific fact. Researchers have spent decades studying and restudying facts within psychoanalysis, discovering some new bits of information within the closed compartment, but they have not been able to make contact with the accepted sciences. Use of the scientific method does not make a body of knowledge into a science. (p. 391)

Bowen had a particular interest in solving difficult problems. He began reading extensively in biology, evolution, and the natural sciences to understand how the “known sciences” had tackled new and difficult problems. He decided that any science of human behavior would have to be consistent with evolutionary theory, and began looking for an institution which would support research based on his developing hypothesis on the interpersonal nature of schizophrenia (Kerr & Bowen, 1988). He eventually moved to the newly created NIMH in 19XX and began the original study on the family where he would develop his family system theory (Bowen, 1978; Bowen, 2015).

The systems sciences were spontaneously emerging in different locations in the West and in various forms during the 1940's and early 1950's. Laszlo (1971/2003) and Bertalanffy (1968/2015) were developing systems philosophy and general systems concepts pertaining to a mathematical basis of nature. Wiener was developing his cybernetic theory based on the central idea of feedback loops as natural phenomena. The exact extent of the influence on Bowen by the emerging systems philosophy is unknown. But perhaps his most important contribution was his effort to leave aside *a priori* assumptions to produce a mode of original thinking. Bowen (1978) writes,

There is another common misconception that should be mentioned. Many believe that family systems theory, as I have developed it, came from general systems theory. That is totally inaccurate. I knew nothing about general systems theory when I started my research. It is a way of “thinking about thinking” which occupies the same position to divergent theories that the scientific method occupies in relation to divergent and discrepant facts. In the 1940s I attended one lecture by von Bertalanffy of which I remembered nothing, and one lecture by Norbert Wiener of which I remembered very little. Whether anything from those lectures found its way into my thinking is a matter for conjecture. I did extensive reading in biology, evolution, and the natural sciences, which I believe led to my formulation of emotional systems theory on the model of “systems” in nature. (p. 398)

This suggests that Bowen's natural systems view was unique in origin. While it can be

argued that Bowen took the term “system” from some element of academic culture at the time, he developed a simpler and more concrete meaning of the term which guided his research, and eventually his clinical practice. His theory emerged from observations based on his notion of systems thinking, and if the concepts in theory have any basis in the facts of nature, then it might be assumed that anyone thinking about and observing nature in this way would eventually discover them. Thinking in this way about homo sapiens as a natural system is perhaps his most important contribution. Further, this attitude toward science is perhaps the most important aspect of Bowen theory in this study.

Michael Kerr (1988), a close associate of Bowen, defines “systems thinking” as a broad category of science which focuses on relationships and processes instead of categories and properties of things. He defines it as a movement toward nature, and away from assumption and dogma. Kerr writes, if one equates “systems thinking with the ability to be aware of the process of nature instead of the *content* of nature, then there is evidence that systems thinking [in the West] dates back at least 2,000 years” (p. 14). The Greeks living in Ionia believed that the world was made of atoms and that everything that occurred now was the result of conditions propagated from the past, including their own existence.

Kerr then associates Ptolemy’s geocentric theory with a sort of “pre-Ionian” regression for almost two millennia, “This conceptualization prevailed over the ideas of the Ionians and influenced thinking for more than 1,700 years! In addition, man continued to believe that he was created in his present form and that, yes, diseases were caused by demons” (p. 15). One marker for this type of thinking would be a reliance on overly-simplistic, linear cause-and-effect thinking about a problem and the loss of the broader notion that causes are also effects. This linear “cause-and-effect” thinking is equivalent to what will be called in the present study “linear thinking.”

Kerr views Copernicus’ heliocentric model of the solar system, followed by Kepler’s theory of planetary orbits, and Newton’s predictive theory of universal gravitation as examples of developments rooted in systems thinking because they model processes instead of things. He argues that it is the fixation on the content and lack of attention to the processes of nature that sets science back. He makes the case that Bowen’s theory of the human family as an *emotional system* draws its therapeutic efficacy precisely from developing the ability to “think systems” in this way (Kerr & Bowen, 1988, p. 158). Kerr distinguishes the natural system in the context of Bowen theory,

Rather than applying general systems concepts to the family, Bowen assumed that the family was a naturally occurring system. The word “natural” refers to something that pertains to nature, to something formed by nature without human intervention. The concept of a natural system, in other words, assumes that systems exist in nature independently of man’s creating them. The existence of natural systems does not even depend on the human’s being aware of them. The principles that govern a natural system are written in nature and not created by the human brain. The solar system, the ant colony, the tides, the cell, the family of homo erectus, are all natural systems. The

human family system sprung from the evolutionary process and not from the human brain. We did not create it. We did not design human relationships anymore than the elephant or gibbon designed their family relationships. Family systems theory assumes that the principles that govern such things are there in nature for us to discover. (p. 24)

Caskie (1994) describes Darwin's theory as an exemplary natural system theory, "Darwin's theory of evolution was a natural systems theory that saw nature as a system, organized according to reciprocal relationships, mutually interdependent and mutually influencing. His theory described and proposed a mechanism which connected components of living systems" (Caskie, 1994).

Like classical psychological theorists, both Weiner and Bertalanffy developed systems views that assumed human behavior is more a function of what is unique to humans than what humans have in common with the rest of nature. Wiener's "first goal in building a theory was to smooth out the differences between the mechanistic and vitalistic positions in science through the use of common concepts derived from the field of communications engineering" (Caskie, 1994, p. 9). He believed that man's social structure was merely analogous to social structures in other species but that the faculty for language was the decisive organizer for human society. Similarly, Bertalanffy was interested in extending general systems concepts to human behavior and the rest of the sciences in an effort to unite the scientific disciplines. He was more interested in man's uniqueness and believed that "man's capacity for creating symbols, and thus, culture" was the primary organizer for the uniqueness (Caskie, 1994, p. 11).

Bowen stands apart from system theorists as one who prioritized the study the homo sapiens species as it is in nature. The resulting theory rests on the discipline through which he tested and refined his hypotheses to predict behavior at the group level. Kerr (1988) writes that just as Johannes Kepler's work on discovering that the orbits of the planets were elliptical instead of circular, a hypothesis had to be refined if it did not explain any single observation,

It has always been the task of science to modify theories and models to fit observations as opposed to modifying or ignoring observations to preserve existing theories. Kepler, although often frustrated by the existence of observations that did not quite fit his models, persisted until he was finally rewarded with a mathematically precise model that accurately described all the motions of all the planets (p. 16).

This ideal became the rule in the psychiatric ward during Bowen's original NIMH family study. The entire staff was involved in contributing to theory as a part of therapeutic work in the clinical ward (Bowen, 2015). This "research attitude" created an air of curiosity and objectivity which also played a key part in the application of theory to clinical problems, and most importantly served as a model for patients to adopt themselves (Rakow, 2016). Bowen (1978) detailed his approach to science and uniquely disciplined approach to clinical research during the NIMH study,

Psychotherapeutic principles and techniques were developed for each clinical situation. The

hypothesis also predicted the changes that would occur with the psychotherapy. When research observations were not consistent with the hypothesis, the hypothesis was modified to fit the new facts, the psychotherapy was modified to fit the hypothesis, and new predictions were made about the results of the psychotherapy. When an unexpected clinical crisis arose, it was handled on an interim “clinical judgment” basis, but the hypothesis was considered at fault for not “knowing” about the situation ahead of time, and not having a predetermined therapeutic principle. The therapy was never changed to fit the situation except in emergencies. The goal was to change the hypothesis to account for the unexpected crisis, to change the therapy to fit the hypothesis, and to make new predictions about the therapy. Any failure to change in psychotherapy was as much a reason to reexamine and change the hypothesis as any other unpredicted change. Strict adherence to this principle resulted in a theoretical-therapeutic system that was developed as an integrated unit, with psychotherapy determined by the theory. (p. 520)

Bowen's findings in this original study suggested that individual behavior is relatively unpredictable when conceptually separated from the group context, and in particular the context of the family emotional system. Studying the family “as an emotional unit” (Bowen, 1978, p. 192) suggests that the family lives and breathes as a single, multigenerational organism, and that variables which pertain to emotional process in the group may account for variance on a higher order than variables which pertain to an individual. The family unit is called a “system” in that “a change in one part of the system is followed by compensatory change in other parts of the system” (Bowen, 1978, p. 179). If there is a change in a symptom in one person, theory says chances are good that it would be related to a shift in one or more parts of the patient's emotional system.

These differences are also apparent in the various modes of family therapy which emerged during the time of Bowen's NIMH study. Kerr (1988) writes,

The way a therapist thinks about what energizes or drives the process he observes in a family will govern what he addresses in therapy. Many family therapists, for example, talk about the family being a “system” but they have many different ideas about what makes the family a system. (1988, p. 11)

Bateson, one of the most prominent family researchers of the time, used pre-existing machine-control ideas from cybernetics to think of the family system (Bateson, 1987). Bateson might conceptualize relationship as a set of reciprocal transactions between two people which serve to regulate the whole. His *double-bind* hypothesis is based on observations on a taxonomy of semantic abstractions used between mother and child which hold the child in a kind of emotional servitude with the mother. Nichols, a modern author of family therapy texts, might think of the family system as “an encounter between distinct interpersonal cultures” (Nichols, 2016, p. xxi). For Nichols, family therapy provides a mirror for one person to reflect their emotional experience onto another, similar to the classical encounter group concept. In that case, the goal of therapy might be to fill the room with an appropriate number of people to serve that purpose.

An important distinction between Bowen and his fellow family therapy pioneers was that his peers were interested in therapy while he was interested in developing a scientific theory of human behavior in the family. Bowen thought that prioritizing therapy over theory imposed preexisting assumptions onto the human as a natural phenomenon which might not be grounded in scientific theory. Kerr (1988) describes how the use of the term “system” to describe the human family as a product of nature differed from other family therapists in subtle ways,

Many biological and social theorists, for example, are convinced that the parts (cells, people, other organisms, or whatever they happen to be studying) so mutually influence one another that there exist “wholes” (body, family, or whatever) that must be understood as entities in their own right. The concept of “whole” implies that there exists an entity with principles of operation that regulate the functioning of the entity’s parts. A problem with the ideas of many of these theorists, however, is that they do not include a description of how the parts affect one another to create this “whole.” Without at least some idea about the “how”, it is quite easy to drift away from the realm of science and into the realm of holistic philosophy. . . . Systems is a descriptive term. It does not account for what is occurring, for what “drives” the process. . . . Saying that people function in reciprocal relationship to one another is a description of a phenomenon, not an explanation. . . . Saying that the human relationship process is rooted in instincts, has much in common with what occurs in other forms of life, and has a function in evolutionary terms is a step toward accounting for what occurs. This way of thinking about what “energizes” the phenomenon being described is contained in the concept of the family emotional system. (pp. 10-11)

Kerr’s meta-perspective on the term “system” echoes Bowen’s critique of Freud’s and other family therapists’ use of “discrepant models” to develop theory which describes a single phenomenon. For example, Salvador Minuchin used the terms *power*, *hierarchy*, *subsystem*, *boundary*, *alignment*, *coalition*, *triangulation*, and others to describe specific organizational *structures* which the therapist would adjust in a family (Minuchin, 1974). But the emphasis is on describing discrepant configurations within the family structure and not strong and well-defined process-oriented relationships between them. Each configuration stands on its own as a static entity. Because the relationships between the structures are loose, the terms themselves do not define a system where a change in one structure directly predicts a change in another structure. Thus, the application of each term to a particular case is left up the therapist’s intuition, which would likely have supported Minuchin as a remarkably intuitive master clinician. Therefore, the structural family “theory” serves more as a mental framework for organizing clinical interventions than the study of the family as a system which arises from nature.

Kerr responds to this “erosion” of the term theory as a research device, “The trend of the decades had been one in which therapists interpreted theory according to their own feeling states” (1988, p. 365). Bowen believed that human behavior would only be accepted as a science if it were “anchored in biology, evolutionary theory, and other knowledge about natural processes” (Kerr & Bowen, 1988, p. 5). Bowen thought that “systems thinking would provide the conceptual bridge from psychiatry to the accepted sciences” (Kerr & Bowen, 1988, p. 6) . He believed that the

“physical structure of the human brain was scientific, that the human brain *functions* to create feelings and subjective states, and that the brain is capable of separating structure from function” (Kerr & Bowen, 1988, pp. 354-355). Even the use of mathematics was in question, as a conceptual framework that relied on ideas created outside the observation of a specific natural context, and then often imposed upon nature to form theory. “To get beyond mathematics and technology, I fashioned a natural systems theory, designed to fit precisely with the principles of evolution and the human as an evolutionary being.” (p. 360).

Bowen broke from the mainstream in two ways: through the understanding that emotional functioning extends beyond psychological constructs and to all life; and the understanding of human behavior beyond the individual in the relationship system (Kerr & Bowen, 1988). Bowen Theory contains eight concepts; *nuclear family emotional system, differentiation of self, triangulation, cutoff, family projection process, multigenerational transmission process, sibling position, and emotional process in society*. Kerr (1988) writes, “None of these eight concepts in Bowen Theory were borrowed from psychological theory,” explaining that theory development occurred in a vacuum to allow for an entirely new way of looking at the individual. The orientation was instead a natural system theory and the focus was the shift from the individual to the family as an emotional unit. According to Kerr, this shift encourages one to “focus simultaneously on thinking/feeling behavior affecting atmosphere, and equal emphasis on atmosphere affecting each’s thinking/feeling behavior” (p. 9). In therapy, holding this perspective requires a “quantum leap in the conceptual capacity of the observer” to shift the unit of focus from individual to system and back again as often as the session demands (Kerr, 1981).

The Emotional System

Bowen’s primary assumptions were organized in the context of existing biological theory, including Darwin’s theory of evolution. Definitions of research terms were assumed to come from or relate to biology. What resulted was not only a concept to organize research on human behavior, but a concept to organize research on the individual, relationship system, and similar systems in other species. Titelman (2014) describes the emotional system as “behavior governed by the part of the human we share with the rest of life” (p. 304). The emotional system “describes the automatic processes by which an organism directs its response to the challenges and opportunities it faces” (Papero, 2016, p. 17). Kott (2014) writes that “What differentiates Bowen theory from other family systems approaches is its emphasis on the sensitivity human beings have to each other at a biological level” (p. 76). According to Bowen (1978), the emotional system handles the “myriads of sensory stimuli from the digestive, circulatory, respiratory, and all the other organ systems within the body as well as stimuli from the sensing organs that perceive the environment and relationships with others” (p. 372). In a detailed description on mammalian evolution, Bowen (1988) later writes, “The neocortex is designed for solutions of situations that arise in the external world. It receives signals primarily from the eyes, ears, and body wall” (p. 36). Titelman (2014) continues that “the emotional system includes ‘all the automatic functions that govern the autonomic nervous system’ and can be thought of as ‘synonymous with instinct that governs the

life processes in all living things' (Bowen, 1978, p. 356)." (p. 26). Kerr (1988) defines the emotional system in this way,

Given the limits of our present knowledge about living systems, it is possible to define the emotional system in only a general way. Defined broadly, the concept postulates the existence of a naturally occurring system in all forms of life that enables an organism to receive information (from within itself and from the environment), to integrate that information, and to respond on the basis of it. The emotional system includes mechanisms such as those involved in finding and obtaining food, reproducing, fleeing enemies, rearing young, and other aspects of social relationships. It includes responses that range from the most automatic instinctual ones to those that contain a mix of automatic and learned elements. Guided by the emotional system, organisms appear to respond sometimes based on self-interest and sometimes based on the interests of the group. (pp. 27-28)

Kerr writes that one function of the emotional system concept is to say that all of life is defined by universal life forces. Saying that a human is defined by their emotional system is to say that human behavior is fundamentally governed by forces which are common to all of life. This is a different way of looking at human behavior than beginning with the assumption that human behavior is defined more by what is unique among humans, namely the reflective and self-regulatory capacities made possible by the relatively recently developed neocortex. Kerr reflects on the pervasiveness of this sort of automatic response in all of life,

An example of emotionally determined behavior in a lower animal is the activity of a highly stimulated horde of soldier caste ants vigorously responding to intruders into their colony. The ants neither contemplate the meaning of their actions nor harbor strong nationalistic feelings; they simply act. Another example of emotional reactivity in a lower animal is the teeth baring of a male baboon in response to a stranger. The automatic movement of a plant, a barnacle, or a moth toward a light source is another emotional response. (p. 30)

Bowen (1978) defines it in this way,

Man is conceived as the most complex form of life that evolved from the lower forms and is intimately connected with all living things. . . . Emotional functioning includes the automatic forces that govern protoplasmic life. It includes the force that biology defines as instinct, reproduction, the automatic activity controlled by the autonomic nervous system, subjective emotional and feeling states, and the forces that govern relationship systems. . . . The theory postulates that far more human activity is governed by man's emotional system than he has been willing to admit, and there is far more similarity than dissimilarity between the 'dance of life' in lower forms and the 'dance of life' in human forms. (pp. 304-305)

The emotional system concept provides a channel of communication that can bridge the compartmentalization caused by polarities in biology, such as "psychic versus somatic causes of disease" (Kerr & Bowen, 1988, p. 28). "While immunologists, endocrinologists, virologists,

geneticists, and other specialists can all describe the activity of pathological processes in the systems they study, they cannot account for that activity adequately” (Kerr & Bowen, 1988, p. 29). Kerr writes,

For example, thinking of the body as an emotional system may enhance our understanding of a clinical problem such as cancer. If the body can be conceptualized accurately as an emotional system, then cancer may reflect some sort of disturbance in the balance of that system. This way of thinking about cancer is quite different from the way of thinking upon which most cancer research has been based. Research on finding the cause of cancer has tended to focus on what is occurring inside the cancer cell. The research question has generally been, “What has gone wrong with this cell to cause it to behave abnormally?” Research based on the assumption that cancer is caused by a defect or disturbance within the cell may eventually provide an adequate explanation. On the other hand, an adequate explanation may possibly depend on being able to conceptualize the body as a biological unit, for example, as a colony of cells. Cancer would reflect a disturbance in the unit as a whole. The disturbance observed within the cell would be a reflection of a disturbance in the larger system of which the cancer-containing organ is a part (p. 29).

Another feature of the emotional system concept is portability from the individual to the relationship system. Papero (2016) describes the emotional system as simultaneously serving two purposes in the individual: the internal regulation of the individual, and the regulation of the individual in the context of the relationship system,

Often active below the threshold of a person’s awareness, emotion involves multiple complex interactions of physiology and psychology that deeply influence the individual’s functioning (how the individual responds to the conditions he or she faces). That functioning in turn unfolds in sets of reciprocal interactions with important others, each influencing the other to form repetitive sets or patterns. These patterns can be observed and predicted in conjunction with variables in context. (p. 15)

This two-pronged function of the emotional system in an individual organism is one example of how an individual both defines and is defined by its context. Papero (2016) points out the reciprocal nature of emotion as “the force or energy that both produces and results from interaction between discrete living entities and between a living thing and environment” (p. 18). While Darwin defined emotion as the instinctual energy which compelled a single organism to action, Bowen extended this definition to include the interaction of instincts from multiple entities within a single system. Various systems may then interact at different levels, for example individuals in a family, or the various organic systems within an individual or within a single cell. This type of system is “driven” by emotion, is the product of millennia of evolution, and may even adhere to laws of organization more fundamental to life.

Kerr suggests that humans have a tendency to assume that human motives are psychological, that there is a reason for behavior. He believed that we assume that an emotional

response in an animal, such as rejecting and recoiling away from food, is automatic, while the same response in an adolescent female “is generally ascribed to a psychological conflict” (p. 30). We can ask the human “why” they respond the way they did but we cannot ask the animal the same question, and so we assume that the animal has a “how” but not a “why.” Kerr (1988) writes,

Focused as we are on psychological reasons, it is easy to forget that humans, like soldier caste ants and barnacles, are motivated to do many things on the basis of processes that have roots deeper (older in an evolutionary sense) than thinking and feeling (p. 31).

The emotional system concept underpins Bowen’s definition of the human family as a system. It defines the human family by the highly integrated nature of the automatic processes within each individual in relation to the group. Thus, just as the emotional character of the inputs and outputs of each organ in the body occur in conjunction with adjacent organs, homo sapiens has evolved to function in conjunction with adjacent homo sapiens as a highly integrated, emotional unit. The emotional inputs and outputs of each component in the system were designed to interact.

As Freud or other family therapists applied discrepant concepts to different aspects of human behavior, Bowen sought to develop a theory which could one day integrate all aspects of human behavior. The emotional system as an integrative concept was Bowen’s answer to overcoming the problem of using disparate models to describe a single phenomenon. Though the theory itself is not a complete picture of human behavior, he was careful not to add new concepts that did not have a relationship to established concepts. Thus, the emotional system concept provides a starting point for organizing research into the relationships between systems within the individual, relationship context, as well as how these relate to systems in other species. Bowen (1978) writes,

Man’s family is a system which I believe follows the laws of natural systems. I believe knowledge about the family system may provide the pathway for getting beyond static concepts and into the functional concepts of systems. I believe that family can provide answers to the medical model dilemma of psychiatry, that family concepts may eventually become the basis for a new and different theory about emotional illness, and that this in turn will make its contribution to medical science and practice (Bowen, 1978, p. 151).

Differentiation of Self

In biology, the term differentiation has a very specific meaning, which is, “The normal process by which a less specialized cell develops or matures to become more distinct in form and function” (2017). This definition contains a few important implicit points. First, that differentiation is a process. Second, that it pertains to an individual. Third, that it defines something which occurs in that individual in relation to a greater system. Fourth, it indicates that the individual plays a part in an integrated system because “specialized” is relative term which describes one individual’s function in relation to another individual’s function. Fifth, though it is not directly implied in the definition, it

might be inferred that the purpose of the process of differentiation is at least partially guided by the system, and that purpose is to produce a more adaptable system. The path of specialization is influenced or dependent on the individual's position relative to other specialized individuals. If a town of 50 has one baker, it is not likely that the next person will become another baker. One might further infer that the type of specialization which occurs is selected naturally for adaptability, an idea consistent with evolutionary theory. Increased specialization requires increased coordination, just as a society with different professional fields requires a common currency to communicate the value of their effort in work. Therefore, differentiation implies adaptability by virtue of increased specialization with increased coordination.

In his early research on schizophrenia, Bowen observed that families grappling with a psychosis were expressing a more intense form of the same emotional process as higher-functioning families (ref). He defined the *differentiation of self scale* to illustrate the continuum of a family or individual's dependency on the environment. Papero (2016) writes of the development of the construct,

. . . unlike the psychotic level *folie à deux*, Bowen observed that this 'psychological oneness' can be found not only in severely symptomatic families, but in all families to some degree. And some family members are more caught up in it than others. This observed variation became a part of the foundation for the development of the concept of the scale of differentiation of self, the core of the Bowen theory (p. 17).

A less differentiated family would require more energy and more resources to survive in the face of pressure from the environment. A more differentiated family would be more efficient in their response to environmental pressures and would have more energy to offer members of the family and also the environment. Kerr (1988) describes some of the qualities of more or less differentiated families,

Family systems theory also addresses the human's capacity for cohesiveness, altruism, and cooperativeness. Specifically, the theory attempts to account for the variability in these properties between families. The higher the level of differentiation of people in a family or other social group, the more they can cooperate, look out for one another's welfare, and stay in adequate contact during stressful as well as calm periods. The lower the level of differentiation, the more likely the family, when stressed, will regress to selfish, aggressive, and avoidance behaviors; cohesiveness, altruism, and cooperativeness will break down. . . The more differentiated a self, the more a person can be an individual *while in emotional contact with the group*. (p. 93).

This scale was intended in part to show that human families had much in common with other species, from the social structure of ants, to the stress and stampede effect in bovine herds, to mating patterns in primates (Kerr & Bowen, 1988; Gilbert, 2006). While the term differentiation pertains to life at all levels, differentiation of self is the process by which an individual human differentiates from their family of origin. It is the core construct of Bowen theory.

The scale illustrates the observation that every family operated along the same fundamental rules, he defined a scale which had no notion of normal and abnormal, as psychiatry had not properly defined the terms (Bowen, 1978; Nichols, 2016). Poor differentiation is not a pathological pattern developed later in life but is a lack of developmental maturation out of the symbiotic attachment between an individual and the emotional system. Though the effort of differentiation is more intense with caregiver bonds, the process also occurs to progressively lesser extent between an individual and their siblings, extended family, work, and social systems.

The goal of “coaching” in Bowen Theory is to assist an individual in expanding awareness beyond their personal frame to develop a level of equanimity with stressors from the rest of the environment (Titelman, 2013). That is, the “work is to differentiate self from one’s emotional systems – the work that makes the difference in lives” (Gilbert, 2006, p. kpp 29). Bowen defined two more systems which function along with the emotional system: the *feeling system*, and the *thinking system*. “The feeling system is postulated as a link between the emotional and intellectual systems through which certain emotional states are represented in conscious awareness” (Bowen, 1978, p. 356). “The intellectual system is a function of the cerebral cortex which appeared last in man’s evolutionary development and is the main difference between man and the lower forms of life. The cerebral cortex involves the ability to think, reason, and reflect, and enables man to govern his life, in certain areas, according to logic, intellect, and reason” (Bowen, 1978, p. 356).

Bowen wrote that “The terms ‘fusion’ and ‘cutoff’ describe the ways cells agglutinate and the way they separate to start new colonies of cells” (Kerr & Bowen, 1988, p. 362). The thinking and feeling systems in a less differentiated person are more fused in their functioning. That is, a fused system functions with a higher level of interference from the other. A person who is more fused is less able to access feelings without predominance of thinking, and less able to access thinking without a predominance of feelings. Differentiation of self is the process through which a person increases their capacity to choose between thinking and feeling as anxiety increases in the environment. Bowen observed that the people who applied this concept in their own families automatically benefitted from that effort in other areas of life. Therefore, the benchmark of differentiation is seen as how well someone has differentiated from the emotional system in their family of origin (Bowen, 1978).

The benefit of higher differentiation of self is less reactivity, longer foresight, and more energy to devote toward other more productive aspects of life. Markers of higher differentiation include the ability to remain firm in and state one’s deepest convictions without requiring others to change theirs, and to retain more access to the thinking system as anxiety increases in the group. These qualities make more differentiated people powerful leaders, even if they are not the one who are explicitly making decisions for the group. Alan Gurman (as cited by Wylie, 1991), professor of psychiatry at the University of Wisconsin Medical School describes differentiation of self, “Maturation, moral development, the ability to cope with stress, modulate anxiety, and assert yourself without stepping on other people’s toes; in short, being your own person – psychodynamic therapists have been talking about all that for years.” Kerr (as cited by Wylie, 1991) says it is very

simply, “Differentiation is the ability to think, feel, and act for oneself.”

“For oneself,” in this sense, points to an individual having more choice over their behavior and less automatic, reflexive, non-thoughtful behavior determined by reaction to the group. This individual-centric behavior not to be confused with *individualist* and *collectivist* tendencies in a group, which are factors of human culture. How mature, thoughtful, and intentional an individual responds to cultural demands are factors of the emotional system, which defines a more basic level of behavior than culture.

Bowen held that the thinking system is ideally informed through, but not ruled by, the feeling system. But differentiation is “not to be confused with avoidance” (Kerr & Bowen, 1988, p. 68). An avoidant person is just as reactive to their family emotional system as a person who is fused within it. Therefore, a more differentiated person is able to remain in contact with relationship while retaining the ability to choose between thinking and feeling as anxiety rises in the group. Less differentiated individuals waste energy coping with stressors from the environment that could otherwise be used for the more productive and enjoyable parts of life (Nichols, 2013; Papero, 2016). Just as less differentiated thinking and feeling systems are less able to function autonomously, less differentiated individuals are more dependent on their environment. They are more vulnerable to medical and psychological symptoms but are not necessarily symptomatic so long as the environment is sufficiently supportive (Bowen, 1978).

The original NIMH study, which ended in 1959, provided the valuable observations from a quasi-naturalistic environment of the in-patient ward. Bowen then moved his research to the Georgetown Medical Center where he continued developing the theoretical system. He published the theory in 1966. By that time, he had accumulated years of experimentation differentiating himself from his own family of origin, and when a death occurred in the extended family he was prepared to seize the opportunity to make an orchestrated move toward differentiation. In a report on this effort he described his theoretical view of the process and markers of differentiation of self as it applied to the counterbalancing life forces of *individuality* and *togetherness*,

Each small step toward the “differentiation” of a self is opposed by emotional forces for “togetherness,” which keeps the emotional system in check. The togetherness forces define the family members as alike in terms of important beliefs, philosophies, life principles, and feelings. The forces constantly emphasize the togetherness by using “we” to define what “we think or feel,” or the forces define the self of another such as, “My wife thinks that . . . ,” or the forces use the indefinite “it” to define common values, as in, “It is wrong” or “It is the thing to do.” The togetherness amalgam is bound together by assigning positive value on thinking about the other before self, living for the other, sacrifice for others, love and devotion and compassion for others, and feeling responsible for the comfort and well being of others. If the other is unhappy or uncomfortable, the togetherness force feels guilty and asks, “What have I done to cause this?” and it blames the other for lack of happiness or failure in self.

The differentiating force places emphasis on “I” in defining the foregoing characteristics. The “I position” defines principle and action in terms of, “This is what I think, or believe” and, “This is what I will do or will not do,” without impinging one’s own values or beliefs on others. It is the “responsible I” which assumes responsibility for one’s own happiness and comfort, and it avoids thinking that tends to blame and hold others responsible for one’s own unhappiness or failures. The “responsible I” avoids the “irresponsible I” which makes demands on others with, “I want, or I deserve, or this is my right, or my privilege.” A reasonably differentiated person is capable of genuine concern for others without expecting something in return, but the togetherness forces treat differentiation as selfish and hostile. (1978, pp. kpp 546-547)

Bowen gives a clinical example of a husband who stopped giving in to his wife’s demands for togetherness which impinged on his ability to care for himself. Though the wife protested, the husband was able to hold his ground, and once the wife adjusted to his new position she thanked him for it. Bowen considered “this sequence a basic increase in bilateral differentiation which can never return to the former level” (1978, p. 496).

Poorly differentiated people “share more of self” with others (Bowen, 1988), and so rely on others more to provide them a sense of wholeness. A commonly cited example from the NIMH study is where a psychotic patient would belch and the mother would say “excuse me” (Bowen, 1978, p. 6). While this patient and mother represent an emotional fusion, the father was just distant. Conversely, Siegel (2012) describes how infants of depressed mothers participate in the “sharing of such states” and can be as equally unresponsive as their caregivers. In terms of reactivity to stress, Bowen (1988) described differentiation as “the coefficient of personality” (p. 69), that some personality traits may have a genetic basis but differentiation partly determines how those traits are expressed. The telltale signs of low differentiation may disappear in situations where one is able to comfortably share self with another. The force of togetherness is dominant for both individuals in these situations but the comfort is temporary. Eventually one of the two experiences a deficit of individuality, and at that point the closeness becomes too intense to contain within the pair. One of the two will eventually seek a togetherness with a third individual, which in turn causes the rejected individual to try to get back inside the togetherness. In adults, poorly differentiated people are unable to survive either alone or apart and may cycle between immature relationships in order to feel whole. Bowen termed this cycling between individuality and togetherness *triangling* (Bowen, 1978; Kerr & Bowen, 1988).

Triangles

The triangle, not to be confused with the psychological concept of a triad, is the fundamental building block in the emotional system. Triangles serve an adaptive function in the group as pathways to balance anxiety. Triangles are what makes “strength in numbers” possible. In a well differentiated context an anxious individual can temporarily share their anxiety with others by increasing the level of closeness with one or more members. This behavior is basically similar to herding organisms such as cows or arctic muskox huddling together to protect against an

approaching predator (Gilbert, 2006). Patterns of triangulation become more fixed in place as the level of anxiety increases beyond a group's ability to adapt. Chronically anxious groups become more rigid in their functioning and patterns of triangulation eventually become set in stone (Bowen, 1978, 1988; Papero, 2015; Titelman, 2013). If members are fixed on the close side of a triangle they are considered to be *fused*, and wherever there is a fused dyad there is a third who is isolated.

The members on the more comfortable close side of a triangle or set of interlocking triangles cling to a chosen subjective reality which serves to lessen their own anxiety at the expense of the members on the far side of the triangle or set of interlocking triangles. Nichols (2013) adds, "Triangulation lets off steam but freezes conflict in place" (p. 78). These people are in effect ignoring more objective realities of their situation in favor of a subjective representation which supports their need for togetherness as a quick-fix in the moment. An example would be where one person gossips about another using facts which support their own point of view but ignoring other facts which refute it.

There are two ways for an individual to relieve tension with an emotional system, to fuse with it at the expense of self, or to cut off from it completely. The polar opposite of fusion, *emotional cutoff* also relieves tension in the short term but does nothing to change the underlying pattern of emotional reactivity that will affect all relationships in the person's life. Bowen (1988) writes that success in relationship requires harmony between individuality and togetherness, and "harmony [in relationship] requires giving up a bit of 'self'" (p. 81). He goes on to write that giving up too much self leads to increased anxiety and behaviors such as "overeating, undereating, overachieving, underachieving, excessive alcohol or drug use, and relationships such as affairs [which] are, in part, symptoms of anxiety and attempts to manage it" (p. 87). Ignoring the sensory feedback from these behaviors in favor of maintaining a more subjectively-informed sense of self provided by a fusion can lead to medical and psychological symptoms.

Conversely, the dilemma for cutoff individuals is that they will reencounter this pattern in other relationships because they still have very little "self" to give up in order to maintain harmony in the relationship. Bowen scholars (Bowen, 1978; Gilbert, 2006; Papero, 2014; Titelman, 2003) emphasize the benefit of maintaining a connection with as much of the extended family as possible. Bowen promoted maintaining an "'open relationship to every living relative', a goal he believed would do more for enhancing a solid self than anything else he could do in his whole life" (Titelman, 1998, p. 17). The more connections one has in their lives, the larger their support network is (Papero, 2014). In times of stress they can spread their need across more members without relying on a few rigid triangles.

Family Projection and Multigenerational Transmission

Attachment theory is one example of an effort to define a theory of human behavior which moves toward process as opposed to simply the content of nature. There are many conceptual overlaps with Bowen's research and attachment theory (Skowron & Dendy, 2004). Three main

differences stand out. First, that insecure attachment accounts for low adaptiveness to stress as a deficit in the caregiver's support of a child while Bowen theory accounts for problems as the result of overfocus as regulated by the family system. Second, attachment theory does not account for varying health outcomes in siblings which come from the same parents. Third, concepts in attachment theory pertain to the mother-child dyad while concepts in Bowen theory pertain to each member in the family.

Bowen observed four mechanisms that a family will use to bind anxiety in order of severity: conflict, over-functioning-underfunctioning reciprocity, triangling, and projection onto a child which is a particular form of triangling. Conflict requires little explanation. "Overfunctioning-underfunctioning reciprocity" (Kerr & Bowen, 1988, p. 57), sometimes referred to as one-up/one-down or symptom in spouse, occurs when one spouse begins to invest more resources into the relationship than the other which can lead to a symptom or some other kind of underfunctioning. Triangling occurs when anxiety cannot be contained within the parental relationships and the couple looks for a scapegoat or one parent allies with a third against the other parent. The fourth mechanism, projection onto a child, is the most difficult to resolve. Bowen observed that a single child could become the object of focus in the parent triangle. This occurs when a problem in a child offers a diversion from anxiety in the parental relationship. The overfocus increases anxiety in the child which makes the symptom worse. As the symptom in the child increases, anxiety in the parent or parents decreases. The child, unable to resist the parental overfocus, eventually accepts the family projection as part of themselves and the symptoms increase. The cycle is intensified as medication and individual psychotherapy are administered to the "sick" patient (Bowen, 1978).

In the original NIMH study, it was found that when a psychotic child patient would start to improve, the parent would develop a condition. The moment the parent began calling the child "sick," the patient's symptoms would reappear. This reciprocity was so predictable that the ward staff would use a change on patient's symptoms as a warning for the parent's symptoms, and visa versa (Rakow, 2016). These observations formed the basis for the concept of the triangle, as it was observed that a change in a symptom was preceded by mother or child ally with the ward staff against the other (Rakow, 2016).

Important observations came from the nurses on the ward, who Bowen trained not to "fix" the family's problems but to serve as a resource for the family taking responsibility for working out their own emotional challenges. This was a departure from the typical role of a nurse and was easier for some to adjust to and more difficult for others. But this "neutral" role allowed the nurses to conduct a more naturalistic observation of the staff. In a review of the nurses' notes from the NIMH study, Rakow (2016) cites an undated entry logged by Bowen,

Change in the functioning of one family member would be followed immediately by a reciprocal change in the functioning of the family member who was closest attached emotionally, and that this in turn would be followed by reciprocal change in other family members. There was one mother and patient who had no significant emotional ties other than to each other." [The A

family] “Each time there was a significant improvement in the patient, the mother would, within a few hours develop a severe physical illness, that could be prolonged and require hospitalization. In another family, the following pattern repeated three times in two months. It involved the mother and patient in the hospital and an adolescent son at home. The patient would get worse, more symptoms of psychosis, the mother immediately become more adequate, decisive, and resourceful, and within the next 24 hours the adolescent son would be picked up by the police for delinquent behavior, like stealing a bicycle, street fighting, and carrying an illegal knife.” [The C family] (Bowen, undated) (p. 148)

The selection of a particular child can occur for various reasons, such as overinvestment in the child’s future prior to birth or the development of a symptom in the child. Bowen hypothesized that the child who is caught in a projection process acquires a level of differentiation slightly lower than the parents. The other siblings who are relatively free of the emotional oneness of the projection process acquire a level of differentiation slightly higher than their parents. Levels of differentiation increase through some lines of inheritance and decrease through others in what Bowen termed the *multigenerational transmission process* (Kerr & Bowen 1988; Gilbert, 2006).

Accounting for variation among siblings is an area often missing from developmental theories such as attachment theory. Bowen wrote that each nuclear family participates in a basic multigenerational transmission process, where some siblings doing worse, some doing better and some doing about the same as their parents. That is, some lines are decreasing differentiation, some are increasing in differentiation, and some are maintaining the level of differentiation that they inherited. Because a less differentiated person is associated with poorer health outcomes, the multigenerational transmission process provides a doorway into longitudinal medical research.

The suggestion that mental illnesses such as schizophrenia or severe intellectual disability could be the inheritance of several generations of accumulated regression stands at odds with the predominant view that they are caused by physiological factors pertaining solely the individual. It does not just say that schizophrenia is a behavioral disease, but a roadmap to track the various medical and behavioral dimensions of functioning that “cause” such a disease when combined together. A concrete, physiological basis for these diseases may one day be found (Nelson, Bassett, Chamchong, Bullmore, & Lim, 2017) and appropriate therapies may then be developed, but the question of etiology ultimately remains. As concept that interlocks with the concepts differentiation of self, triangles, cutoff, and family projection process, the multigenerational transmission process concept provides a way to link broader longitudinal variables to present day health outcomes, while pointing to concrete solutions to increase family functioning in the future.

Bowen said that through a *family diagram* of at least three generations, one can very quickly see the transmission of more or less differentiation from parent to child (Papero, 2016). The less differentiated child will find a partner with roughly equivalent level of differentiation, which is then passed on to their children in similar fashion. In this way triangles can persist through the generations and beyond recent memory. Bowen went so far as to hypothesize that a schizophrenic

could be produced in as little as three generations (Bowen, 1978). Kerr (1988) gives an approximate timescale for the transmission process to occur,

Although functioning that is stable in most aspects and functioning that is unstable in most aspects are both linked to trends in functioning in a multigenerational family, the rapidity with which changes in levels of functioning (and, consequently, discrepancies in the functioning of family members) occur is variable. Marked discrepancies in functioning can occur in as few as three generations. For example, the functioning of the grandparents of a family member whose functioning is unstable in most aspects may have been fairly stable. Such quantum jumps in functioning are uncommon, however. It is much more common for only mild to moderate discrepancies in functioning to exist after four or five generations. So a fairly stable nuclear family unit can have a descendant who has a chronic schizophrenic level of functioning in just three generations (a quantum jump), but it is more common for such a marked decrease in level of functioning to require five to ten generations to develop. Similarly, a fairly unstable nuclear family unit can, in three or four generations, have a descendant whose functioning is stable in most aspects, but it is much more common for such a pronounced increase to develop over five to ten generations. (p. 223)

Expanded beyond the evolutionary timeline of homo sapiens, this key concept connects the theory to its roots in evolutionary biology by implying that every individual is the product of both the physiological, behavioral, and genetic inheritance. The family diagram, or visible representation of the family tree and the emotional processes through the generations, “reflects the ebb and flow of emotional process through the generations. It defines the vicissitudes of a living organism, the multigenerational family” (p. 306). Thus, consistent with evolutionary theory, the family unit and the species evolve over time to greater or lesser levels of differentiation and adaptation to the environment.

The evolutionary view thus described can appear deterministic, and the position of the child might appear hopeless as a sort of victim in the process. However, the reciprocal nature of the triangle also implies that each member has the opportunity to move toward differentiation. What’s more, emotional reciprocity also implies that one person pulling up in functioning automatically impacts the functioning of others for the better. In an often-cited passage, Bowen (1978) sums up the broad, bidirectional impact of a shift in the emotional system:

When any key member of an emotional system can control his own emotional reactivity and accurately observe the functioning of the system and his part in it, and he can avoid counterattacking when he is provoked, and when he can maintain an active relationship with the other key members without withdrawing or becoming silent, the entire system will change in a series of predictable steps. (p. 436)

This passage points to the predictability of the emotional system at the group level. What’s more, a longitudinal view of the family emotional process suggests that any one person’s efforts

can have a significant impact on the lives of many others to come. Similar to prominent systems philosophers, Bowen's approach discourages passivity in favor of engagement with one's social environment on the premise that the experience of others directly impacts one's own experience (Macy, 1991).

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