

The Bowen Family Theory and Its Uses

PSYCHOTHERAPY AS A SECULAR RELIGION



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PSYCHOTHERAPY AS A SECULAR RELIGION

The recent emergence of family theory and the strong public interest in family psychotherapy can be considered a sectarian movement with many similarities to religion. These comparisons are perhaps most pertinent when clinical applications of family theory are examined as a secular religion.

Although it is not humanly possible to objectively describe recent social trends in the United States, a few generalizations can be made. During the last two or three decades, our technological society appears to have produced fairly widespread isolation and alienation from essential human values. Dealing with problems of warfare, racial conflict, and violence has plunged our post-World War II society into the midst of a critical “human relations problem” (Ackerman 1971). The mushrooming growth of different kinds of psychotherapy in urban settings since the end of World War II can be viewed as a social response to the invasion of personal freedom, distortion of humanistic values, and loss of human connectedness that have been nurtured by

“gesellschaft” developments in the United States.

Durkheim’s definition of religion as a “sacred community” perhaps has a new significance in light of the depersonalized characteristics of modern society. In some respects, it is religion that preserves essential parts of the value complex of “gemeinschaft” in an industrial society. By promoting cooperation between men and women, religion can deintensify the lethal quality of the pervasive individualistic competition in modern society. Religion can also provide opportunities for individuals to participate in social interaction rather than merely a place on the sidelines from which to watch others (Bobcock 1970).

Traditional religious forms such as church and sect may not be in sufficiently strategic social positions to foster the greatly needed sacred community in the face of rapid modernization. Religious values and world views are frequently perceived as deviant in relation to modern values such as materialism, technological progress, and the urban way of life. Although religions may have much in common with contemporary protest movements such as the revolt of youth against affluence (Bobcock 1970), it may no longer be possible for religious

organizations to maintain their particular world views and activities and at the same time “swim in the societal mainstream” (Demerath and Hammond 1969).

The interplay between the sacred and the secular in society is a topic that has occupied much of the attention and energy of researchers in the sociology of religion throughout the field’s history. During the last three decades, the distinctiveness of religion and the separateness of the sacred seem to have broken down with the acceleration of modernization. This blurring of sacred-secular differences is a move from polar ends of a sacred-secular continuum to a middle ground. As the institution of religion continues to lose its apartness from other social institutions and religious activity merges with other types of social activity, the separateness between the sacred and the profane is disappearing (Goode 1968).

American religion has been viewed as an integral part of the dominant system of American values (Wilson 1969), as churches in the United States have more secular activities than churches in European countries (Argyle 1958). Throughout the last thirty years, the church has become more involved in secular affairs. The churches’

move toward secular concerns has been so abrupt during these years that some observers view the changes as “revolutionary” (Jacobs 1971). Ministerial roles in community problem solving may be considered a kind of social activism (Nelsen, Yokley and Madron 1973).

Some recent research on the relationship between religion and Americanism has been influenced by Herberg’s “generation hypothesis” (Herberg 1960). Religion is thought to occupy a central position in American culture because it was instrumental in the process of Americanization (Nelsen and Allen 1974), and this focus is perhaps a result of the tendency of American culture to stress the importance of belonging to some religious tradition (Herberg 1960).

Just as religious phenomena can be described in secular terms, especially during a period of rapid social change, secular phenomena can be described in religious terms. An examination of the recent psychotherapy movement may bring into sharper relief the world views and beliefs considered the sources of the ferment of our times (Parsons 1967). Using Durkheim’s terms, a study of the psychotherapy movement may indicate the nature of the “moral contract” between

human beings and the “conscience collective” of society in a period of economic and technological prosperity (Mawson 1970), “anomie” being the social state where individuals cease to accept the moral legitimacy of society. The family movement in general and the Bowen family theory in particular can be viewed as products or consequences of the breakdown of traditional norms in American society in the last few decades.

Psychotherapy Movement in the United States

Psychotherapy can be defined as the healing of the human soul, and it can be traced back to Pinel and Mesmer in the eighteenth century (Harper 1974). Conventional usage has pathological associations. Psychotherapy generally implies that an individual has been diagnosed as needing specific treatment for a mental or emotional illness. Since World War II, there has been a proliferation of many different kinds of psychotherapy in the United States. Although many forms of behavior change have been attempted throughout history, the self-awareness of man and woman has not attained the same degree of extensity and intensity as in our contemporary society. Out of this climate of heightened self-consciousness psychotherapy

has emerged as a significant process (Harper 1974). For the purposes of this discussion, emphasis will be placed on the particular aspects of psychotherapy that promote growth at the deepest levels of a person's being, and the frame of reference will be exclusively on theories and techniques that depend on verbal communication.

As some of the early Greeks suggested, human beings think about themselves only when they become aware of personal difficulties. Problems directly related to self shake one's confidence and threaten one's security. People postpone the necessity of facing themselves and their difficulties as long as possible.

Personal and social crises sharpen concern for individual and group well-being. These crises may be precipitated by conditions such as conflicts between old and new values, rapid social changes, or a breakdown of traditional social forms. When human beings can no longer avoid the disagreeable process of examining their problems as functioning social animals, they begin the long journey toward self-awareness. From a review of literature on self-conception, it appears that contemporary efforts to look at self are longer, deeper, and more systematic than those of any previous period.

The various schools of psychotherapy that came into existence in the 1960s have tended to be organized by charismatic leaders who attract a large body of followers (Gurman 1973a). Specific principles of whatever forms of psychotherapy are used have been described and criticized as “dogmas” (Gurman 1973b). Many theories and techniques of psychotherapy have been treated as having “transcendental” qualities or as being “sacrosanct” (Bry 1972). Most psychotherapy is nonscientific and can be considered a series of doctrines (Bry 1972).

It is difficult to find consensus on a definition of psychotherapy in the professional literature that does not include acceptance of the centrality of the interview situation. Although psychotherapy is becoming more generally recognized in the population at large, the methods and approaches used have been criticized for being almost as numerous as the practitioners engaged in it (Wells 1972). Sociologists generally consider the concept of emotional health as a culturally determined idea that is a product of public opinion. A psychotherapy perspective suggests that each choice a person makes or chooses not to make affects personal development and results in a change or perpetuation of being. In everyday practical terms, these choices are strictly limited, however, but they may be revoked (Zinberg 1970).

In some of the same ways that religion may maintain psychological stability (Lindenthal 1970), psychotherapy can enhance religious awareness. Interpersonal and intrapsychic experiences during a course of psychotherapy can be compared to religious enlightenment. Major turning points in psychotherapy and in religious conversion may indicate the same or similar phenomena.

Psychotherapy and Religious Experience

People generally consult psychotherapists in order to get “better,” an important assumption being that up to now they have been “sick.” Individuals who identify themselves as “patients” generally want to discover whether they are sick, whether they are bad, whether they can become good, or whether they cannot change themselves. Psychotherapy is inextricably entangled with many physical-mental-emotional concerns and also with many moral preoccupations (Zinberg 1970).

Perhaps more than anything else, psychotherapy is a way to find self. The impact of psychotherapy largely depends on the quality and degree of conviction the therapist displays in action. In some

instances, the fervor of a therapist is thought to inspire faith, hope, and trust in the recipient of the psychotherapy, perhaps assisting in the restoration or development of control of self. As so many influences affect a course of psychotherapy, it is difficult to determine how much of an individual's relief from symptoms or change in self can be attributed to the therapy and how much to other agencies (Bry 1972).

The search for self through psychotherapy may have developed at this point in history because o u r religious institutions have become increasingly impersonal in a depersonalized culture dedicated to materialistic improvement. The search for self may be an attempt to counteract the meaninglessness and vagueness of existing conventions and values. The standard of psychotherapy may be "love thy neighbor," "to thine own self be true," or "work and love." Once this standard become fixed as a concrete goal, it demands uncritical religious belief, although emotional health itself is necessarily a relative, limited, and variable concept. When health becomes an absolute end, it leads to disappointment, rage and the destruction of the very principles of humanity that psychotherapy is attempting to uphold (Zinberg 1970).

Some parallels can be drawn between psychotherapy and religion in terms of beliefs and practices. A common experience in the beliefs of both systems is that of conversion. Although conversion is usually considered a religious experience, it need not be explained as an extranatural or supernatural occurrence. Conversion can also be viewed as a particular kind of “enlightenment experience,” as a result of “therapeutic talk,” and as a product of “willpower” (Tremmel 1971). Conversion can be a regular, expected, or predictable occurrence in a successful course of psychotherapy.

An individual who has undergone a conversion appears to become a new person, making uncharacteristic choices and being motivated by a different set of beliefs. Those who have had a conversion experience are able to reverse or stifle specific trends that have dominated their lives. A “converted” person stops conducting life business in one way and starts doing it in another.

It is this kind of freedom, the “converting” choice, that gives people a sense of personal worth. The choice to change self is an explicit goal of both religion and psychotherapy. This choice represents a rebellion to the present structure of dispositions,

attitudes, thoughts, hang-ups, and energy expenditures in the existing self. The decision to change self is made insurgently and defiantly, but it is made freely (Tremmel 1971).

In moral or theological conversion, as in the change of self in psychotherapy, there is an increase in an individual's awareness of free will. The extended exercise of free will possible through the conversion increases moral responsibility and enhances the quality of individual activity. This sequence of events can be considered the "emergence of a new role,- outlook, belief, group identification, character, or personality" (Moberg 1962).

Perhaps both religion and psychotherapy endorse Americanism in similar ways (Eckhardt 1954). Among other shared characteristics of religion and psychotherapy are the dimensions of experience or "feeling," ritual or "cultic" intellect or knowledge, "practice" or "good works," and ideology or doctrine (Glock 1962).

Psychotherapy, Religion, and Social Class

Correlations between religious beliefs and practices are frequently negative (Demerath 1965). Religiosity, or socially enacted

religious fervor, has several identifiable characteristics that are given various emphases by different social classes. In medieval times the church discouraged social mobility, since presuming to raise status was considered the same as flying in the face of an omnipotent, omniscient God. Individualism, as expressed by social and spiritual mobility, was traditionally discouraged by the threat of excommunication (Jacobs 1971). In recent times, however, religion has become an accepted vehicle for social mobility (Laumann 1969, Roberts 1968, Winter 1961). In general, the experiential dimension of religion correlates negatively with social class. The lower the class the more involved an individual is, and the higher the class the less involved a person tends to be. In contrast to the experiential dimension, other aspects of religion, such as church attendance, correlate positively with class (Goode 1968).

Psychotherapy can also be correlated with social class. Members of lower social classes, for example, have much less understanding of psychiatric theory and psychiatric treatment (Hollingshead and Redlich 1958, Myers and Bean 1968) and more negative attitudes toward emotional illness and psychiatric treatment (Jaco 1957, Jones and Kahn 1964, Williams 1957). Members of a lower social class are

also much more concerned with and more inhibited by the stigma of mental hospitalization than are members of an upper social class (Myers and Bean 1968). The lower classes see only a narrow range of aggressive, antisocial behavior as suggesting a need for psychotherapy, but the middle and upper classes perceive a much wider range of behavior as indicating a need for psychotherapy (Dohrenwend and Chin-Shong 1967). As social and economic resources facilitate an individual's access to psychotherapy, a person and family from a lower class are less likely to seek psychotherapy than those in the middle and upper classes (Gove and Howell 1974).

The younger, urbanized, better educated, and more modernized segments of the middle-class American population, who attend church infrequently (Luckman 1967), are perhaps the most likely members of our society to initiate psychotherapy. Although psychotherapy does not purport to have ultimate answers, as does religion, involvement in psychotherapy appears to have some of the same personal dividends as religious participation. As religious institutions become more secularized and more depersonalized, psychotherapy can suggest ways to retrieve some qualities of religious experience in a secular setting. Although there is no single doctrine of psychotherapy,

different clinical approaches, such as the Bowen theory, can be viewed as secular religions in their own right.

Conclusion

As conversion behavior may describe changes in individuals' religious and personal beliefs (Johnson 1971), the popularity of psychotherapy may indicate more widespread changes in social and religious beliefs. Although the question of whether religion “informs” secular society (P. E. Hammond 1963), or whether secular society “informs” religion (Glock 1960) cannot be resolved, comparisons between psychotherapy and religion suggest that it is difficult to separate the sacred and the secular in modern technocratic society. This merger of the sacred and the secular may even be one of our most significant human relations problems since World War II, as ambiguity of values is difficult for human beings to cope with.

The events of every era seem disorderly while they are happening, and it will only be at a later point in time that clearer strands of meaning and pattern will emerge. The objective of psychotherapy—the attainment of human dignity and a sense of

personal worth—is a traditional religious theme. Enhancing self is a significant part of contemporary ideologies of protest and liberation, as well as of the Bowen family theory. Perhaps the complex social processes that have produced startling differences in life views, value assignments, and thinking styles between the post-World War II (“electronic”) and previous (“preelectronic”) generations can be considered a social mutation, analogous to a genetic mutation (Shands 1969). The family movement is a product of this era. Both psychotherapy and religion assist human beings in their necessary adaptation to a rapidly changing environment. In some respects psychotherapy may be more able to meet the specific personal needs of middle-class urban Americans in a technological age than religion. This is one of the thrusts of the Bowen family theory in our society today.

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