THE RELATIONAL HISTORY OF THE FAMILY WITH A SCHIZOPHRENIC MEMBER

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Summary. - Coherently with the systemic view, the authors consider the family interaction patterns in schizophrenia. Some typical redundant behaviours in the family system appear to be typical of the schizophrenic family. The authors investigate the family system and story through the international literature. Special emphasis in this work is placed upon the modalities of weaning from the parental figures, the conjugal bind of the parents and the interactive patterns with grandparents. In order to study these binds and according with many authors a fictitious family history is reported.

KEY WORDS: schizophrenia, family binds, family hystory, systemic theory.

Riassunto (La storia relazionale nella famiglia del paziente schizofrenico). - Gli autori partono dall' ipotesi della teoria sistemica sulla schizofrenia secondo cui le particolari modalità relazionali e comunicative del sistema familiare formano un costitutivo di ridondanza, se non di regola, tale da essere ritenuto un elemento fondamentale nella sindrome schizofrenica. Gli autori tentano un' analisi del sistema attraverso le storie familiari. Particolare rilievo viene dato, in questo studio, alle modalità di svincolo dalla figura genitoriale e vincolo coniugale dei genitori del paziente schizofrenico e alle modalità relazionali dei nonni del paziente. A questo fine viene riportata, nel presente lavoro, una storia familiare immaginaria.

PAROLE CHIAVE: schizofrenia, vincoli familiari, storia familiare, teoria sistemica.

The interest in the schizophrenic patients' history and in their family environment originates at the beginning of this century following Freud's theories. In looking for environmental factors associated with schizophrenia studies were made first into the birth seasons and the birth order. In 1916 Rubin found that schizophrenia tends to occur more often in children from the last half of a sibling than in children from the first half [1].

During the thirties and forties a large number of investigators studied the birth order relating to schizophrenia with mixed results in their findings [2-5]. In 1955 Roberts and Meyers made the hypothesis that shyness and submissiveness of the youngest males developed through competition with older siblings leads to protectiveness from the mother [6]. So, slowly and without coming into sight, the interest goes towards the mother looking for something pathological in her or in the relationship mother-child to understand schizophrenia.

Alanen in 1958 inquired about the mothers' relationships in their family of origin and found that they came from broken families and spoke about their childhood as being unhappy because of a defective and frustrating relationship with their mother [7]. Fleck in 1960 reports how often mothers remembered their own mother's great resistance to their emancipation [8]. Rowe in 1959 found that a large percentage of the fathers of schizophrenic patients were passive and without status in the family and that there was less stability and cohesiveness in the families. The fathers were often reported to have left their own parental homes early, going to work on their own [9]. Lidz in 1957 tried to identify three distinct types of father-child relationship patterns: a) fathers of schizophrenic daughters who compete with their wives for the daughter's allegiance; b) father of schizophrenic sons who cannot endure what they feel is rivalry; c) father of schizophrenic sons who are passive non-entities at home [10].

Mason in 1958 reported that the mother is the basis of the schizophrenic family because the father is generally absent or is a shadowy figure; he describes the mothers as controlling, overpowering, overprotective, guilt-ridden and unhappy women with deeply hostile and aggressive feelings towards their children, but at the same time unable to separate from them and grant them their independence [11]. In 1948 Fromm-Reichmann had coined the term "schizophrenogenic mother" to describe the malignant mother-child relationship [12]. Searles in 1958 concluded,

in his studies about the mothers, that the positive feelings like tenderness, sympathy, care, attachment remain largely repressed and are often brought to the surface in a distorted manner, disguised by hostility or indifference [13].

Bateson et al. in 1956, with the Double Bind Theory, introduced the hypothesis that the more frequent pattern in the mother-child relationship was a series of paradoxical messages between the two in a situation in which the child was largely involved with the mother yet unable to discriminate the paradox [14]. Bowen in 1959 formulated his Three Generations Theory according to which in order to develope schizophrenia there must be a child with a low differentiation of self [15]. Bowen suggests that there must be a gradual lowering of differentiation of self along a minimum of three generations, he suggests moreover that a functional emotional divorce exists between family members, with both parents being equally immature. Wynne and Singer in 1963 studied the answers given by schizophrenics' parents to the Rorschach test and found some paradoxical messages similar to that of the patients [16].

During the following years interactional studies went towards epistemological point of view loosing sight of the original goal: the etiology of schizophrenia. Today relational therapists are interested in the *hic et nunc* of the family because they share the opinion that by studying present family interactions we may find the best therapeutic techniques [17-20].

Whitaker suggests that if the therapist has no theory to support he is more open-minded and receptive to new ideas and he is not biased [21]. We think as well that it is difficult to connect the idea of circular casuality, which is at the basis of systemic theory, to an etiological hypothesis.

According to circolar causality the message sent by the mother would not exist as an effect if the particular child receiving that message did not exist in that particular family. Family therapy has showed that by modifying some communicative patterns and interfering with expressed emotions (EE) we get modifications in the whole family system: these modifications bring with themselves a lower rate of relapses in the schizophrenic patient [17, 22-24]. We suggest that studies on therapeutic goals should be interweaved with studies that tend to discover causes and reasons for schizophrenia. By the term "cause" we mean the start of the sequence cause effect; by the term "reason" we mean the board bidirectional cause effect that is the basis of schizophrenia. In this work, using these reports and the family histories collected from our patients, we try to follow an hypothetical process made by causes and reasons. Described here is the hypothetical sequence.

A woman, who in her childhood had a bad relationship with an intrusive mother decides to break off from her family by marrying a man who apparently has broken off his family and whose only goal is work. The marriage has implicit and static rules to prevent an excessively close relationship between the couple.

One child (the youngest, the favourite, the weakest the less self-differentiated) stimolates the mother's overprotection. This overprotection however produces a close relationship to which the mother, recognizing it, reacts by a widening hostility towards the child. By reason of this continuous watch for a balanced distance between mother and child we have the double bind relationship. This communicative pattern is a constituent of the schizophrenic family before and after schizophrenia arises [25]. If we enter into the details of this sequence we find at the start two people who did not get beyond the break-off stage from their families of origin. The father thinks he has progressed beyond the physical distance between himself and his original family; he thinks that by dedicating himself to his work he will protect himself from over-affection for his wife and children.

The mother believes she has broken from the family of origin by marriage and by choosing an unintrusive partner so that she will not be subdued again. As they are afraid of falling into another over-close relationship, the married couple fixes, in an implicit way, static rules that will have to remain the same through the years and any subsequent situations as they cannot change something they never discussed.

So the husband will devote himself increasingly to his work, and leaves things concerning the home to his wife. Neither of them knows if, when and by whom the rule has been decided; nor do they know that it is impossible to change it without running the risk of a inexplicable break in their relationship. With the birth of the children the mother will have to deal again with her own mother's intrusiveness and she is determinated not to develope a similar attitude in her own turn. But one child, for some reason, stimulates her overprotection. Feeling this as a threat to herself and to the child, she reacts by adopting an hostile attitude. Overprotection is a threat to the mother because on one hand she is afraid of a too close bind and on the other hand she is afraid causing her child the same pain that she suffered with her own mother: hostility would, perhaps, protects both mother and son.

But both overprotection and hostility are inherent in them and in a implicit and static whole they cannot modify that situation. This inability moves the mother towards the paradoxical communication described by the emblematic injunction "you should be independent". It causes the child an inability to obey without disobeying and to disobey without obeying.

The child has a overinvolving relationship with his mother; he tries to comply with her injunctions but he falls into indecidibility: everytime he obeys or disobeys she punishes him by hostility or intrusiveness in a endless oscillation without time and space. He lives his mother's anguish which is also his anguish and so he is unable to distinguish his own feelings from his mother's.

When, during adolescence, his mother pretends he is independent and leads his own life, he feels she has betrayed him. Because of this inability to explain in words his disappointment and his hate which are not only his own feelings but his mother's too, he falls into what is the world of everything and nothing, of saying and not saying, of what is his and what is not his: the schizophrenia world.

The advantage for the family system is that everything remains static. Overprotection and hostility can go side by side because of the illness, in a never ending hope for the child and the mother to get at last reciprocal independence and differentiation.

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