

no way be different, for we always do what we decide to do anyhow. After this discovery, we shall be ready for the next step: to change our decisions. Then we will be more likely and able to decide what is good for both ourselves and others, and be less afraid of the wrong things we may do.

It is this that will give us a new freedom to grow, to learn, to change our minds, to fulfill ourselves without struggle. This alone is peace of mind.

#### Footnote

1. The concept of equality is difficult to grasp for most people. It has two aspects, equality of rights and equality of worth (7).

#### BIBLIOGRAPHY

1. Adler, A., Social Interest: A Challenge to Mankind. New York: Capricorn Books, 1964.
2. Adler, A., Understanding Human Nature. New York: Premier Books, 1959.
3. Beecher, W., Bruck, M.A., Dreikurs, R., Feichtinger, F., Plotke, P., and Sicher, Lydia, Symposium on Guilt Feelings. Indiv. Psychol. Bull., 1950, 8, 3-48.
4. Dinkmeyer, D. and Dreikurs, R., Encouraging Children to Learn: The Encouragement Process. Englewood Cliffs, N.J.: Prentice-Hall, 1963.
5. Dreikurs, R., The Function of Emotions. Christian Register, 1951, 130, 11-14.
6. Dreikurs, R., The Hidden Reason. Unpubl. ms.
7. Dreikurs, R., The Impact of Equality. The Humanist, 1964, 24, 143-146.
8. Dreikurs, R., Psychotherapy as Correction of Faulty Social Values. J. Indiv. Psychol., 1957, 13, 150-158.
9. Worcheil, P. and Hillson, J.S., The Self-Concept in the Criminal: An Exploration of Adlerian Theory. J. Indiv. Psychol., 1958, 14, 173-181.

#### GROUP THERAPY WITH MARRIED COUPLES

#### THE BIRTH PANGS OF A NEW FAMILY LIFE STYLE IN MARRIAGE

by Danica Deutsch, Executive Director  
Alfred Adler Mental Hygiene Clinic, New York City

Historically the treatment of married couples in groups has developed from therapy with individuals and with families. Some partners apply directly for the solution of their marriage problems. Others come with different complaints, and only after a while does it become evident that their main difficulties are to be found in the marital relationship.

Marriage partners may be seen either individually, or as a couple alone, or together in a couples' group in which there are divorced and widowed people as well, or in a therapy group composed exclusively of married couples. This last approach has proven especially advantageous in that one's own problems are more easily recognized when one sees them mirrored in the interaction of the other married partners in the group.

As I pointed out in an earlier paper, "A Step Toward Successful Marriage," if a married couple has a need for conflict, there is no area of life together so insignificant that it cannot be exploited as a reason for discord. In exploring the basis for conflict, we find that each partner has come to the marriage with specific habits and expectations acquired in his own family--derived from his own family

life style--which he would impose upon the other. He assumes that his individual preferences, which are based upon his own unique experiences, are actually "universal law."

If the two life styles of a couple are not too contradictory, adjustment will be easier. However, if they clash, conflicts in varying degrees are bound to result as each partner finds resistance to change in the other.

A couple's problems may begin when one partner tries to apply his own parents' marital relationship or behaves in opposition to it. For example, a daughter may emulate a domineering mother and choose a weak partner like her father, or in rebellion against her mother's domination, she may seek a strong mate while shunning altogether the responsibility of an adult woman's role.

Once they are married, however, the picture can change drastically! We know that unconsciously men and women often dis-simulate their true feelings in courtship: an aggressive female may appear to be passive, a dependent male may put on the front of being masterful. The real test, however, comes in crisis situations, such as the husband losing his job, an unsatisfactory sexual relationship, the birth of the first baby, etc. Any frustration may become the trigger for conflict when the true nature of the partners' personalities emerges for the first time.

A questionnaire originally prepared for pre-marital counseling has been found very helpful also for married couples as a means of understanding the dynamics of their marital conflict. It covers the whole gamut of problems from the trivial to the profound.

This questionnaire (reproduced below) is given to each partner in the first session. When they answer it separately and later make comparisons, they are able to perceive on their own some of the basic areas of dissension that they had not been aware of before. The next session is then used to help them confront these problems directly. It goes without saying, however, that their insights will have value only if followed by re-training in therapy. For this, both partners have to be ready and willing to try. But even if only one of them is prepared for a change, it proves helpful, for the other partner will no longer get his old gratifying response.

In married-couple groups, as in individual therapy, earliest recollections, the family constellation and dreams serve as the means for understanding each of the partners' expectations of and attitudes towards other people as well as towards life in general.

In the groups, the saying that one can "see the mote in the other's eye and not the beam in one's own" is specially applicable. What each couple cannot see in their own marital situation, they easily spot in the other couples' conflicts--insensitivity to the partner's needs, insistence on one's own value system, dominating or using "weakness" to manipulate the other, conflicting views of their roles as fathers and mothers.

Especially effective and dramatic in married-couples' groups is the confrontation of each partner with his mistaken notion that his unique preferences are "universal law." Each partner can clearly see this distorted assumption mirrored in and reflected back by husbands and wives among the other married couples.

Another means of helping couples understand the dynamics of the marital conflict is the therapist's emphasis of the different ways in which individuals may experience life, according to personality types: whether they are visual, acoustic or motor types, introverted or extraverted, rational or emotional. Such differences in couples make for difficulties in understanding and adjusting to each other. The "rational" type may have to plan every step of the way before making a move and then carefully progress step-by-step; in contrast, the "emotional" type focusses on the goal and then chooses the means as she goes, trusting to life to find the opportunities she needs to get there. (I say "she" because it's mostly the female who functions this way.)

Let me cite an incident between an engineer and his wife planting tulips. She took her basket with bulbs and shovel into the garden. He asked, "Where are you going, without a string and stick to measure the distances, so that you can plant your bulbs at regular intervals from each other?" She answered, "If you want to do it with a string and sticks, do so. But if I am going to do it, let me do it my way. I don't like to set out my tulips like soldiers." His stiff, pedantic ways made her nervous, and her easy spontaneity disturbed him. They gradually learned to understand that each had arrived at his personality type through long training. Each had to learn to tolerate and give the other the freedom of responding to situations according to his own characteristic style.

In one group of four couples, the women displayed an exaggerated need for communication while their husbands revealed a pattern of withdrawal. One would think that their choice of partners was based on their need for complementing each other. However, what happened in their marriages was not what any of them had expected. In each instance, the partners had hoped that the other would adjust to his personal needs. Instead, the wife experienced deep frustration from not receiving the expected responses from her husband, while he, feeling constantly pushed and pulled by her, withdrew further--fearing that if he showed the least interest in what she had to say, he would only stimulate more of an outpour. In the end, the wives had become nags and the husbands had become isolates within each marriage.

When the complaints were initially aired, the men sided with the men and the women with the women. The wives supported each other in accusing the husbands of "lack of understanding"; the men displayed solidarity about "exhaustion after work" and the difficulties of making a living, whether they were employees or had their own businesses.

Some of their earliest recollections will make clear the source of the biased apperceptions accounting for their attitudes:

Husband "A": "Mother had to go to work and leave me alone when I was sick. I was very upset at her leaving me. I don't know what happened."

Husband "B": "I was sick with fever. My mother left me to go to the neighbor next door, and I became hysterical when I realized she was gone."

These earliest recollections reveal that the men were excessively apprehensive in their relationship to the significant women in their lives, their attitude being that "You can't trust a woman—she may leave you. Be on your guard all the time lest you be suddenly abandoned." At the same time, they had an exaggerated dependence upon these same women and were never satisfied with their wives' contributions. To avoid the pain of repeated disappointments, they withdrew.

Their wives, on the other hand, were also afraid of abandonment, as can be seen in their earliest memories:

Wife "A": "I went with mother to visit someone at the hospital and had to wait downstairs. It took a very long time, and at last mother came—I had been forgotten."

Wife "B": "I was picked up to go to nursery school—I cried and clung to mother's skirt."

In other words, both husbands and wives had memories of desertion and wanted the guarantee of complete security from the other. Neither was prepared to give more and both resented the excessive demands of the other. Each was accustomed to "expect," but not to ask.

Obviously, each partner had come to the marriage unaware of what he wanted or needed from the other. Continual irritations and clashes were inevitable. As was to be expected, the same jarring patterns showed up in their sexual relationships. The men complained of their wives' lack of interest, and the women's usual rejoinder was that they didn't relish the role of sex objects, desiring some attention during waking hours as well.

In the course of group therapy, the couples slowly began to recognize the pitfalls of their rigid, unrealistic demands. With the support of the therapist and the group, minor changes began to take place in most of the partners, who in time were willing to take chances at becoming more self-reliant, each at a different pace, of course. Husband "A," whose earliest recollection was getting upset at the age of three at being left alone by his mother, showed the most dramatic improvement. Against his wife's wishes and fears, he decided to look for a better job and happened to land one just at the time she had to go to the hospital for an operation. During this critical period, he was able to show himself actively capable of functioning independently for the first time in his life.

Many other examples of desirable change could be given; instead, it might be more interesting and valuable to mention the increasing numbers of papers and books devoted to the underlying dynamics of marital disturbances and their implications for family life.

In Strategies For Psychotherapy, Jay Haley points out that conflict occurs when couples disagree about the rules for living together, when they disagree about who is going to set the rules, or when either partner attempts to enforce incompatible rules. Tactics in their struggle for power may range from threats or physical assault to passive resistance or withdrawal, as we have seen, or "helplessness" to do what the other wants. The author sees a satisfactory marital relationship as one in which the two people can work

out agreements in the many areas of living together in a dialectic way.

Eric Berne, in his bestseller Games People Play, describes typical social interactions which apply as well to marital relationships. By "games" he means the maneuvers a person uses to contact other people when psychological problems preclude a direct approach. In a witty manner he describes the multiple disguised ways in which an individual challenges another to become his partner in a game specifically designed to maintain his own equilibrium.

Walter Toman's Family Constellation follows the Adlerian assumption that the birth order of the individual is significant and that his subsequent role in relation to his parents and siblings is carried over into his adult life. He expands this concept into predictability of marital relationships, hypothesizing that marriages which duplicate the spouses' sibling constellations are the more likely to be considered satisfactory. Thus, the youngest sister among brothers may do best with a husband who is the oldest brother of sisters. And, according to Toman, conflict is almost inevitable between singletons if both are fixed in their role of unchallenged "pride-and-joy" to their parents, a relationship they insistently and unhappily transfer upon the marriage partner.

This hypothesis as a prognostic tool has been challenged, however, by George Levinger and Maurice Sonheim in Complementarity in Marital Adjustment: Reconsidering Toman's Family Constellation." They found that there was "no association between birth order of either partner and the adjustment of the marriage." Interesting in this connection is the paper by Asya Kadis titled, "Re-Experiencing the Family Constellation in Group Psychotherapy," in which she reports how strongly patients cling to their childhood orientations.

These contradictory findings, most interestingly, demonstrate Adler's concept of indeterminism. Each individual may behave as if he were the younger, or the older, or the only male, etc. The therapist must therefore ascertain, not only the actual place each partner held in his original family constellation, but also which role he has chosen to act out in the marriage.

It is noteworthy that if there are children, they may become victims of the marital struggle for "victory" of one partner's life style over the other. The treatment of choice may then expand into "family therapy" to include the offspring as well as the couple.

To sum up, in group therapy with married couples the therapeutic goal is to make each partner aware of his excessive dependence upon and inappropriate expectations of the other and to help both create a new marital life style more adequate to their mutual needs. At the beginning, each of them may try to emancipate himself completely from his dependence upon the other. What both have to learn is that the art of living requires a compromise between dependence and self-sufficiency, which results in realistic interdependence and cooperation in all three life tasks: love, work, and social relationships.

If this is achieved, then--according to Alfred Adler--cooperation in love and marriage not only serves for the welfare of the two per-

sons involved and their own family, but also contributes to the welfare of the community.

This Guide For Pre-Marital Counseling, developed for use at the Alfred Adler Mental Hygiene Clinic in New York City, has proved to be a valuable means of helping troubled married couples begin to understand the dynamics of their marital conflict:

The answers to the questions listed below should be covered by the interviewer. The interview should be conducted first with each party separately and then with both together.

It is assumed that the interviewer already has formal data about the addresses of the parties, their ages, length of acquaintance, circumstances of meeting, etc.

1. What is your profession, educational background? Current interest?
2. Common interests and pleasures:
  - What are your leisure-time pursuits? Hobbies? (Intellectual or physical?)  
Do you prefer socializing with individual friends, with small groups, or in larger circles of people?
  - What kind of socializing do you prefer? (Talk, movies, nightclubbing, card games, etc.)
3. Habit patterns:
  - What is the rhythm of your daily life? Time of rising, time of retiring? Peaks of energy? How much sleep do you require? Do you sleep lightly or heavily?
  - Do you like your room cold or warm? Are you very sensitive to light and/or noise?
  - What are your food and eating habits? What kinds of food do you prefer? Do you have a rigid meal schedule? Are you choosy?
  - Do you drink? If so, how frequently and how much? Why? If not, why not?
  - Do you smoke? How much? If not, why not? Have you ever smoked?
  - How important is neatness in your life? Clothes? Home?
4. Set of values:
  - What "isms," if any, are important to you?
  - Do you consider yourself religious? If so, why? If not, why not?
  - How much are you interested in other people? Close family, wider family? Community circle, national affairs, universal problems?
  - What are your cultural interests?
5. What is your attitude toward work? Should both partners work?  
What is your attitude toward money or other material possessions? Spending money, saving? Joint or separate bank accounts?
6. The family constellation:
  - a. What kind of marriage did your parents have?
  - b. Who was the dominant spirit? Father? Mother?
  - c. How many siblings have you? What was your relationship with each other in childhood? Now?
  - d. Who is most like you? In what respect?
  - e. Who is most different from you? In what respect?
  - f. Are you critical? Can you take criticism?
- g. In-laws? Your attitude toward them? What is their role in your marriage?
7. What is your attitude toward sex? Your own? The opposite sex? Sex experience? Pre-marital sex relations?
8. What is your feeling about children? How many? What is your general approach to parenthood? Responsibility of mother and father? Discipline? Etc?
9. What do you think are your assets? Your liabilities?
10. What do you mean by being in love?
11. Do you regard marriage as an end or as a means to an end? Explain.
12. What would your three fondest wishes be?
13. Earliest recollections?

#### BIBLIOGRAPHY

1. Adler, Alfred. What Life Should Mean to You, Little Brown & Co., 1932. (Paperback: G. P. Putnam's Sons (Capricorn), 1958)
2. Berne, Eric, M.D. Games People Play, Grove Press, Inc., 1964.
3. Deutsch, Danica. "A Step Toward Successful Marriage," American Journal of Individual Psychology, Vol. XII, No. 1, 1956.
4. Dreikurs, Rudolf, M.D. The Challenge of Marriage, Duell, Soan & Pearce, 1946.
5. Haley, Jay. Strategies of Psychotherapy, Grune & Stratton, Inc., 1963.

6. Kadis, Asya L. Re-Experiencing the Family Constellation in Group Psychotherapy. Essays in Individual Psychology, edited by Kurt A. Adler and Danica Deutsch; Grove Press, Inc., 1959.
7. Levinger, George (University of Mass.) and Maurice Sonheim (Western Reserve Univ.). "Complementarity in Marital Adjustment: Reconsidering Toman's Family Constellation," Journal of Individual Psychology, Vol. XXI, No. 2, November 1965.
8. Papanek, Helene, M. D. Group Psychotherapy with Married Couples, Current Psychiatric Therapies, Grune & Stratton, Inc., 1965.
9. Toman, Walter. Family Constellation: Theory and Practice of Psychological Game, Springer Publishing Co., 1961.

## THE MALADJUSTED CHILD

by Paul Brodsky

### A Hypothetical Case

On a cannibalistic island somewhere in the Pacific the tradition demanded of the oldest son that he eat his grandfather when he had reached a certain age. The oldest son of a particular tribe, however, was disinclined to carry on that obligation. He was scolded, called a renegade, a disgrace to his family, even a subversive. His grandfather felt degraded by the boy's lack of respect for his age. However, instead of confronting the tribe's tradition openly, the young man developed difficulties with swallowing. At that point his family decided to call for a famous psychiatrist from Vienna.

The question now arose: What was the psychiatrist to accomplish? Was the oldest son of the family to be considered a "maladjusted" child? In light of the value system of that tribe he certainly was; in that of the psychiatrist's culture he was not. Thus, it appears that it was not so much a matter of diagnosing whether or not the young man was maladjusted, neurotic or suffering from a psychosomatic affliction; it was rather to determine the boy's outlook on life, what he expected to result from his behavior—his goal. He certainly had been brought up "properly," had been taught the right things, had been given the right examples. Yet he had arrived at an unexpected conclusion, had formulated an unexpected concept. Assuming that he was a generally "normal" child, that is to say that he would have passed all the intelligence, aptitude, and performance tests of his society, and would have adjusted to the culture within which he had been brought up, what he derived from what he had "learned," from what he had been taught, his fiction certainly deviated from what was anticipated. It represented his own creation, resulting from his own way of interpreting the stimuli with which he had been presented from within as well as from without.

How then was the psychiatrist to evaluate the "patient"? He could actually be considered quite normal, were it not for his symptom of difficulty in swallowing. Yet it is just that symptom which exposes the young man: it tells us that although he had built up his own fiction, his own conception of life, an adolescent revolution perhaps, now that he was faced with the consequences of his fiction he became apprehensive, unsure of himself, and fearful of having to assume responsibility for his decision. He felt fine so long as he was a revolutionary in thought only. He might be considered a great guy among his peers, like some of our school dropouts. He could feel