

The family life-cycle

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Introduction and analogies

My presumption in preparing this paper on the subject of family life-cycles has landed me with some ambivalence of purpose. I suspect that I really know – we really know – precious little truth about the evolution of my own – our own – family patterns; I can (and often do) pronounce confidently on the families of my friends and acquaintances; and the self-assured professional in me is never at a loss for the grand generalization about every other family on the planet. And I expect the same applies to other doctors.

So how easy it would be for me to try and teach my grandmother to suck eggs – ‘trans-generational education’ we call it in the trade. Yet the educationist in me urges me to aspire to aims more worthy than merely to remind you of what you know already. But how can I hope to comment usefully (usefully, that is, in terms of therapy) on human processes so complex, so interrelated, so multidimensional that they defy full description in the one-dimensional linear flow of scientific language? The lives of families resonate not only in the dimensions of space and time, but also in the realms of emotion and motivation, and raise at every humdrum turn ultimate issues of the meaning of life and death and relationships. A language more fitted to evoking echoes and insights in these fields is surely that of the poet and novelist.

When you have seen Shakespeare’s ‘As You Like It’, you have heard it all. ‘All the world’s a stage . . . and one man in his time plays many parts, his acts being seven ages . . . the infant, mewling and puking in his mother’s arms . . . the whining school-boy . . . the lover . . . the soldier, seeking the bubble reputation . . . the justice, full of wise saws . . . the slippered pantaloon . . . and, last scene of all, sans teeth, sans eyes, sans taste, sans everything’. If vision of that clarity informs your every act of therapy, then read no further – you have nothing more to learn. I, being of lesser stuff, have to look for images more familiar, more of the ‘kitchen sink’ variety. Julian Mitchell, for instance, brings us down to earth with:

‘Freud is all nonsense; the secret of neurosis is to be found in the family battle of wills to see who can refuse longest

to help with the dishes. The sink is the great symbol of the bloodiness of family life’ (Cohen & Cohen 1971).

The phrase ‘family life-cycle’ implies the symbol of a circle, the wheel of life, things going round endlessly. But the image of motion in a circle leaves out the important dimension of development over a period of time. I liked better the notion of family development as being an extrusion moulding process, rather like the way they make Blackpool rock. You take an unformed lump of whatever Blackpool rock is made of, and extrude it through nozzles of the right shapes until it comes out well-formed and with the cross-section you are looking for. I think that is not a bad analogy, in that it gets across the idea that the product – the family’s stage of development – is the resultant between the raw material you start with and the imposed constraints of powerful external shaping forces. Meeting the family for therapy somewhere along the way is like biting through the half-formed stick of rock, sampling the cross-section, reading the messages it contains, and trying both to infer the nature of the constraints that made it that way and to predict what it will look like after passage through the next moulding stage in the production line.

But I prefer an analogy comparing family growth to a river – with a source, with mergings and tributaries, flowing through a landscape of circumstance that channels and fashions it, but which it only slowly erodes, seeking always the best available course, taking the path of least resistance towards an infinite sea.

As therapists we stand as observers on the bank of a family’s river; we see the family’s breadth, its calm and its turbulence, its meanderings, the terrain that surrounds it, its whence and its whither. We hear in the splashing of its speech echoes of its past, presentiments of its future. We can, as therapists, dip our hands in the flow and feel its force, and make our own ripples; and, because we are intelligent and intuitive observers, we can rush ahead downstream and build our therapeutic dams and change the course of family history.

Other papers in this symposium will address the task of ‘therapeutic engineering’. That is called ‘therapy’. My task is to remind you of some

landmarks of family geography and of the principles of hydrodynamics that govern a family's flow around natural obstacles. (Rocks in a river are called by family therapists 'normative crises'!)

Seven stages of the family life-cycle

Let us follow the 'Typical' family downstream, through their normative crises. John Typical, beloved son of George and Daphne Typical, marries Mary, only daughter of Bill and Betty Inlaw. Before long, John and Mary are blessed with issue, first in the shape of young Wayne Typical. Two years later baby Sharon completes the family. First Wayne, then Sharon, go off to school. Before you can say 'puberty', Wayne and Sharon are teenagers. John and Mary learn to worry once again about motorbikes and the pill. Then Sharon, and later Wayne, meets someone nice and settles

down, leaving John and Mary punchdrunk but alone with each other again at last, wondering whether they are middle-aged yet. Flushes, flab and secret flirtings confirm that yes, they are. Their parents, George and Daphne, Bill and Betty, live out their lives and pass away quietly and cleanly. Naturally John and Mary grieve. But meanwhile Wayne and Tracey have children of their own. Grandparenthood brings to John and Mary a calm fulfilment, clouded perhaps by the weakening and death of old hopes and friends, but enhanced by a sense of proportion that enables them to face their own demise with equanimity.

Here in the Typical family life-cycle we can discern the seven traditional phases, as shown in the left-hand column of Table 1. They seem biologically or socially pre-ordained, in that each can be varied or curtailed, but omission of any one

Table 1. Phases, tasks and issues in the family life-cycle

Phase	Task	Issues
Pairing/marriage	Fusion	Leaving family of origin (emotionally and physically) Readiness for intimacy (psychological and sexual) Agreeing roles, goals and values Complementarity/symmetry of marital relationship
Childbearing	Creation	Sharing each other Role ambiguity - wife, woman or mother? Two's company, three's a crowd Pairing off
School-age children	Nurturing	Providing security (emotional and environmental) How to be a parent Separation Involvement with community Mother with more time again Differences between children
Family with adolescent children	Boundary-testing	Control versus freedom Power struggle and rebellion Individuation Social and sexual exploration
Family as 'launching ground'	Leaving/letting go	Changing roles of children still at home The empty nest - loss or opportunity? Parents rediscover each other Latent marital conflict
Middle years	Reviewing/reappraising	Mid-life crisis Fulfilment/disappointment Accepting limitations Changing self-image Anticipating retirement ? Death of parents
Old age	Intimations of mortality	Aging, illness and death Closing-in of boundaries Achieving serenity Religion and philosophy Isolation/dependency Bereavement

causes the death or disfigurement of family life as we know it. As with our understanding of other biological events, we can progress from simple description, and allocate each phase a preoccupying task or function (Table 1, centre column). The right-hand column of Table 1 groups together some of the common issues families may have to deal with at each phase of their life-cycle. This is necessarily sketchy and incomplete, for in truth 'all human life is here'. But your own worldly wisdom will put flesh onto my skeleton examples.

A normal, healthy, competent family ultimately 'self-destructs'. Each nuclear family is born, flourishes, decays and dies, its members at every stage finding within themselves the resources to adapt willingly to their changing status and fortunes. In my thumbnail sketch, the Typicals have been lucky. Nothing much out of the ordinary happened to them. In this they are untypically normal. 'Happy Families' is not the usual game for many of the people who come to us professionally.

In Tolstoy's 'Anna Karenina', the opening sentence reads: 'All happy families are alike, but an unhappy family is unhappy after its own fashion'.

In our understanding of contemporary family life-cycles we have to make room for the effects of upheaval and unhappiness: for single-parent families and working mothers; for divorce and separation; for remarriage and step-parenting; for illness and accident; for poverty, unemployment and role-reversal; for loss of contact with the extended family. And in order to help us understand these all-too-common variants, I shall present three conceptual models that might sensitise you to particular issues for particular families in particular crises. Returning to my 'river' analogy, here are three principles of family hydrodynamics, describing how the white water forms as a family flows past its seven normative rocks.

Three principles of 'family hydrodynamics'

The first principle is as follows: a family's ability successfully to negotiate one phase of its development is governed by its success or failure with preceding phases.

Phase 2 probably won't go well unless Phase 1 has been adequately completed. Satisfactory achievement of Phase 3 is the foundation for a good Phase 4, and so on.

Some examples: a young couple still enmeshed with their own families of origin and uncomfortable with their new roles of husband and wife will find the arrival of their first child a major threat to their precarious intimacy. A family can launch its young adults most successfully if (and only if) their preceding adolescence has solidly confirmed them as independent and autonomous. Somehow, the winding up of one part of the cycle releases in

the family the necessary resources for coping with the next part. Conversely, incomplete coming to terms with one phase stores up trouble for the next. In an unhealthy family, some of its members cling anachronistically to roles which were appropriate to an earlier phase of family development, but which should now be set aside or updated.

This observation has at least two implications for those of us who offer guidance when things go wrong. First, a problem at one stage implies a task in therapy to complete or resolve unfinished business from a preceding stage. For instance, part of helping someone through a mid-life depression is to deal with any left-over, unexpressed, 'empty-nest' feelings. As a rule of thumb, when you find a problem at one stage, try looking one stage back. Secondly, by recognizing when family life hits a snag at one stage we can predict likely difficulties ahead, and perhaps recognize them in time enough to do some preventive work in family care. We have something to learn here from our health visitors' work with young mothers, and from people offering pre-retirement counselling as a preparation for a fulfilled old age.

The second principle I want to consider could be called 'the pain of transition'. Central to any discussion of family evolution is the idea of individuals trying to come to terms with a remorselessly changing family context. People come and go; roles and relationships are always shifting. But change is risky, and can hurt. Every status quo, even if unpleasant, grows comfortable through familiarity. By the same token, every transition is a loss of that familiarity.

I find it helpful to think of the effects of transition using a model described to me by John Heron, as shown in Table 2. It considers three basic inherently human capacities: the capacity to make loving relationships, and hence feel joy; the capacity to understand the world and our place in it, and hence feel secure; and the capacity to exercise choice, and hence feel in control. Changing circumstances can callously interfere with each of these three capacities, and the resultant pain comes in three corresponding flavours: grief, at the interruption or severing of a loving relationship; anxiety, when we no longer understand what is happening to us; and anger, when our freedom of choice is denied.

Table 2. The threefold pain of transition

Human capacity for LOVE is felt as JOY	
Human capacity for UNDERSTANDING	is felt as SECURITY
Human capacity for CHOICE is felt as CONTROL	

During transition

INTERRUPTED LOVE is felt as GRIEF
LOSS OF UNDERSTANDING is felt as ANXIETY
DENIAL OF CHOICE is felt as ANGER

Every change that occurs in a family will produce a mix of these three emotions in its members. (This is not to deny that change can also be growthful and rewarding; but the positive side of it is often easier to express and acknowledge.) How each family member deals with the painful emotions of grief, anxiety and anger is a complex matter of psychodynamics, conditioning and family culture. Suffice it to say that many life events, predictable and unpredictable, cause a backlog of unfinished emotional business, denied and repressed feelings which if not cleared are carried on into later life stages to distort and contaminate. Healthy families deal with such feelings promptly and openly. But other families may need our help and counsel to free themselves of past pain.

Finally, I want to offer a way of looking at the different sources of transitional pain in the family life-cycle. Picture, if you will, the family as a cell of interrelating people floating along in a stream of time and place and events, and marked off from the rest of the world by a kind of semi-permeable membrane or boundary – rather like a red blood cell floating in plasma (Figure 1). The boundary, incidentally, can be physical (an actual house with a front door), or it may be abstract (an invisible

frontier between those who belong and those who do not). Its position and properties evolve as time goes by, and the boundary may have different locations for different family members.

The first and obvious source of transition for the family lies in the world beyond the boundary, whence come the influences of external life events, the family's historical, social, political and financial contexts, and the inevitable maturation effects of time passing.

The second source of change lies wholly within the family, where psychological and psychodynamic evolution is constantly occurring between and inside family members. Their own personal needs unfold; their relationships develop; their roles become realigned. In the process, pre-existing patterns of thought and behaviour are painfully stretched.

As family doctors we are, I suggest, not bad at spotting the effects of purely external events and purely internal changes. Patients present them to us fairly clearly during consultations. What we are not so good at is recognizing a third category of family transition, which I shall call 'cross-boundary transitions'.

Many things happen which result in people

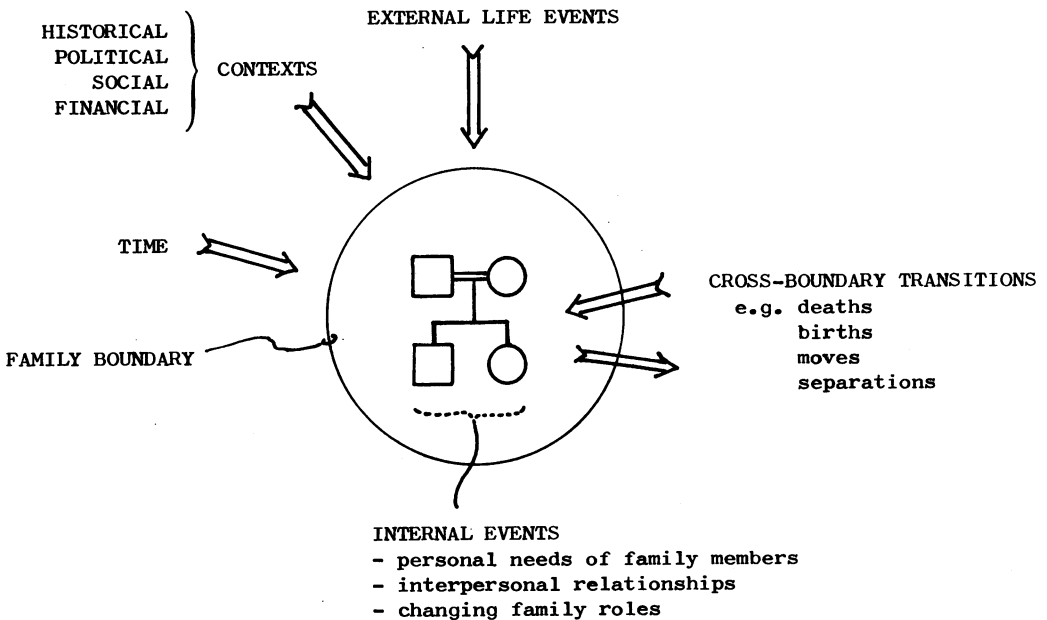


Figure 1. Three areas of family transition

moving into or out of the family group, crossing the boundary in the process. Boundary crossings can be permanent, for instance when someone dies or moves away, or is born; or temporary, if for example work or education sends people away for periods; or intermittent, as when children go to school or mother resumes her career. Any realignment in which someone breaches the existing family boundary is felt by the family as disruptive, and will generate in everyone the threefold pain of transition. The family will find itself having to define its rules about acceptance and inclusion, having to face the hurt of rejection or separation, and to cope with the temporary uncertainty as everyone shifts roles. I do not think that as doctors we are always as aware as we might be of this kind of event in a family's life, as the changes concerned are often devoid of an obvious medical dimension.

Yet we know they are relevant, or we should not be here writing or reading this.

This is written in 1984. In the other book, Aldous Huxley's 'Brave New World', the Big Brother figure, Ford, is credited with having been 'the first to reveal the appalling dangers of family life'. On this premise he based the most radical intervention possible into the family life-cycle, namely its complete abolition. It is laughable really – but it makes you think. What are we as professionals doing to prevent it?

Reference

Cohen J M & Cohen M J eds
(1971) *Penguin Dictionary of Modern Quotations*. Penguin, Harmondsworth; p 159 (quotation from chapter 1 of 'As Far as you Can Go' by J Mitchell)