This paper begins with the premise that the therapeutic space occupied by social work straddles both systemic and psychodynamic perspectives and therefore that social work has been ill-served by the traditional oppositionality between the two orientations. The systemic perspective on reflecting teams and processes is the primary focus and this is discussed in terms of intersections with themes in social work and psychoanalysis, in particular the psychoanalytic concept of reflective functioning. It is suggested that both perspectives — reflecting processes and reflective functioning — point towards the increasing democratisation of the therapeutic process in ways that bring it much more into line with key concerns and challenges in social work, particularly around therapeutic engagement of clients with more severe levels of psychological difficulty.

**Keywords** ethics; reflective team; systems; psychoanalytic psychotherapy; social work; democracy; therapeutic engagement

**Introduction**

I will begin by explaining my own professional background because it is relevant in the context of today’s conference — prior to my systemic clinical training I undertook a psychodynamic training whilst practising as a social worker. This experience obviously leaves me with my own particular perspective on the three dimensions of today’s conference but in particular it has left me with a strong conviction that the therapeutic space inhabited by social work is one that straddles both psychodynamic and systemic perspectives. I also think that was implicit in the traditional psychosocial model of casework articulated by previous generations of social workers (e.g. Hamilton, 1951; Hollis, 1970, 1972). Arguably the social work discipline has been ill-served by the historical opposition between systemic and psychoanalytic approaches. It has made it harder for social work to articulate an integrative stance for its own work and to build on its own deeply rooted integrative tradition. Therefore a conference which offers an opportunity for dialogue between the systemic and psychoanalytic orientations in terms of their application in social work is very welcome.

The subject of my paper is reflecting teams and reflecting processes and in keeping with the spirit of the conference I want to think about how this aspect of
systemic practice links with themes in psychoanalysis and in social work. I will begin with a very short fragment of clinical practice.

Mrs A, her two-and-a-half year old son and six year old son are seen because of the latter’s behavioural difficulties. She is a single parent and there is no contact with the children’s father. The atmosphere in sessions is fast moving and chaotic with much quarrelling and competition for mother’s attention. It is a situation where there seems to be little space for the complexity and nuances of life. Life is to be survived by just getting by. A traffic accident involving the family, which happened between sessions, is dismissed as of little consequence in that nobody was physically harmed. Plans to send the older child to boarding school at eight years are mentioned lightly as if he might not understand or care about what is being said. The children do not seem to know why their father is absent and he is rarely mentioned.

Following a reflecting conversation in which the team talk mostly about their own reactions and feelings whilst listening to the family’s conversation with the therapist, calm prevails for a time as if something has been contained, as if the family has momentarily absorbed the reflecting qualities of the team.¹

The reflecting team approach

The emergence of reflecting teams in the 1980s was a major development in family therapy methodology and something of a revolution in how we worked. Family therapists have always made use of the one-way screen in their work and the practice of having colleagues behind the screen observing the therapy and acting as consultants to the therapist was a longstanding convention. What changed in the 1980s was that the team shed their anonymity and came out from behind the screen. Previously the impressions of the team were shared exclusively with the therapist and it was then up to the therapist to process this feedback in the work that followed. Now what began to happen was that the therapist/family conversation would pause and the team would then share their thinking with both family and therapist in the shape of an evolving unscripted conversation amongst team members to which family and therapist would listen but did not contribute. Following this, the conversation between therapist and family would then resume and together they would process what had just been heard.

As so often happens in the world of therapy, this took off as a practice based innovation by, in this case, a group of Norwegian therapists led by Tom Andersen, and was only later worked up into a theoretical frame (e.g. Andersen, 1987, 1990). It came at a time of much wider paradigm change in the form of a shift towards postmodernist thinking in the systemic field and when the originators of this way of working began to write about what they were doing they linked it firmly with the postmodernist/social constructionist influences that were just beginning to come into the systemic field at that time (McNamee & Gergen, 1992). I will return to this theme later.

The practice of reflecting teams has proved remarkably enduring in systemic psychotherapy and has now become synonymous with systemic practice. As a style of
working it remains closely linked to team-work but from the start Andersen was keen
to emphasise that the principle of ‘conversations about conversations’ that is central to
the reflecting team approach is one that could apply in many contexts. These can
include situations where there is only one observer who has a reflecting conversation
with the therapist in front of the family or where the therapist works alone but takes a
step back from the immediacy of the session to reflect on the process that is unfolding
which he/she then shares with the family in a metaconversation about the
conversation they have just had. Tom Andersen is therefore careful to use the term
reflecting processes throughout his work to underline that his approach applies well
beyond the confines of the actual reflecting team. In his own words

we prefer to minimise the use of the word reflecting team, because that setting
represents only one of almost infinite ways of organising ‘reflecting positions’,
which means the shifting between being engaged in talking about an issue and
thinking about the talking about the issue.

(Andersen, 1989, p. 76)

From a social work perspective this flexibility of the approach in particular and the
sense that it can be applied creatively in a variety of contexts is very important given
that therapeutic engagement in social work contexts is often happening in snatched
moments in situations often far removed from the formality of the consulting room.

I mentioned that the practice of reflecting teams crystallised a new departure in
systemic thinking and practice. We need only reflect on the difference between
Andersen’s style of ‘open conversation’ with families and the practice of an earlier
generation of strategic family therapists in order to register the huge shift that is
represented. For example, take the following quote from one of the family therapy
pioneers, Jay Haley, writing in an earlier era and describing his practice at that
time.

He writes: ‘Change really comes about through interactional processes set off
when a therapist intervenes actively and directly in particular ways in a family
system and quite independently of the awareness of the participants about how they
have been behaving’ (Haley, 1971, p. 7). This way of working and thinking about the
work encapsulated in the above quote from Haley was one that left family therapists
vulnerable to criticism regarding the ethics of their engagement with families and in
the era in which Andersen’s reflecting team approach emerged, much of what was
written inside the family therapy field reflected this unease with prevailing ways of
working and conceptualising the work. Around this time an influential feminist
critique was also emerging in family therapy that drew attention to problematic power
differentials in families, their implications for our engagement with families, and the
extent to which this was not given due regard by the earlier generations of family
therapists (Hare-Mustin, 1978; Bograd, 1984; Goldner, 1985; Luepnitz, 1988).

The idea that as family therapists we could formulate our position mechanistically
as that of experts who act upon the family system from outside and to quote Haley
again, ‘quite independently of the awareness of the participants about how they have
been behaving’, was no longer tenable from an ethical perspective and it is important
to register it was in this ethical context that the reflecting team emerged. This is not
to say that Andersen’s style of working lacks continuity with earlier approaches and in
my view not enough credit is given to the links with Salvador Minuchin’s earlier
formulation of structural family therapy in which it was his practice for example to
take some family members behind the one way screen to observe other members of
the family engaged in the process of the therapy (Minuchin, 1967, 1974). Here one
can detect the beginnings of a way of working which in Tom Andersen’s terms is very
much about creating a ‘dialectic of talking and listening’ and the idea that in this way
you help people expand their thinking and have new thoughts about themselves and
their family.

Very often by the time a family seeks therapeutic help, communication and
thinking other than in a highly rigid fashion has all but ceased. To quote another family
therapist Terry Real (1990, pp. 260–261): ‘system members are caught up in
repetitive “monologing” … variety in thinking has dried up’. The reflecting team or
reflecting process seeks to shake up this stuck unthinking dynamic in the family system
and to do so in a way that maximises the chances for the families own thinking
processes to ignite — hence, for example, the custom that a reflecting team does not
as a rule make eye contact with the family whilst they are engaged in the reflecting
conversation. In this way the family is drawn into a space in which listening and
thinking is encouraged and immediate verbal reaction delayed.

The above is a very brief resume of the thinking behind reflecting teams and
reflecting processes. I now want to think about some implications of this central
strand of contemporary systemic practice in terms of how it connects with themes in
psychoanalysis and how it links with issues and challenges in social work. I will use the
theme of therapeutic engagement and the challenge of engagement as an organising
framework for what follows.

Therapeutic engagement

It is important to bear in mind that systemic technique, including the reflecting team,
evolved historically in contexts where therapists were often trying to engage and help
people not motivated primarily by an interest in the interpretation of intrapsychic
processes. I recall from my own social work training many years ago how helpful and
refreshing it was to read Minuchin’s then rather innovative therapeutic work with
‘families of the slums’ as he called them — and who in many ways reminded me of
some families on my own caseload presenting with multiple problems in the context
of acute social and economic deprivation. In this respect systemic family therapy
historically has considerable common ground with social work but also with
psychoanalytically informed therapy in so far as it also looks for ways of working with
people not readily amenable to a traditional interpretative insight oriented approach
and with whom such work has to be carefully constructed and timed. Here I should
say that — alongside Minuchin’s work — another text from my own social work days
that really spoke to the context in which I worked was Mattinson and Sinclair’s classic
text Mate and Stalemate (1979) where they describe interventions informed by
attachment and psychoanalytic theory that engaged very directly and straightforwardly
with the challenges and demands of social work in a social services context.
Returning to the theme of reflecting processes specifically and possible links with psychoanalytic thinking, it is interesting to consider similarity between the systemic reflecting process and the psychoanalytic interpretation. In my own work I have concluded that it is largely unhelpful to think of these interventions in oppositional terms and more helpful to think of them as points on a spectrum which has intrapsychic functioning at one end, interpersonal functioning at the other end and very considerable strands of overlap and common ground in between (Donovan, 2003a, 2005). On this spectrum the interventions of the psychoanalyst will probably veer more towards the intrapsychic/relational end of the spectrum whilst the systemic practitioner's primary focus on balance is more likely to rest at the interpersonal/relational side of the spectrum. What I find most interesting is the space in the middle where the two overlap and here I would argue there is enormous scope for creative cross-fertilisation between the two orientations. Viewed from this perspective we might even think of the systemic reflecting team as potentially offering a complex multi-layered transference interpretation which seeks to promote insight and at the same time offer emotional containment as demonstrated in the case vignette with which I began this paper.

When systemic psychotherapy began to be formulated in the 1950s many of the first generation of family therapists were already trained in the psychoanalytic tradition from which they distanced themselves. Arguably this historical split followed from the fact that systemic therapy did represent a very radical paradigm shift in therapeutic conceptualisation and treatment at that time. In Sebastian Kraemer’s words: ‘the gravitational pull of the prevailing theories was just too strong to allow for radical change’ (1997, p. 57). Family therapy needed to carve out its own separate space to secure the viability of a treatment modality organised around interventions with whole family groups and with an intensely relational focus. In this context it is important to remember that psychoanalysis in our times has a very different flavour from the individualistic ethos of the 1950s. It has since embraced object relations thinking to an extent that now locates it in a more harmonious connection with the relational and intersubjective ethos of systemic therapy. In that sense one could say the traditional oppositionality between the two orientations belongs to a bygone era. This is in no way to deny or minimise differences. However I also believe that oppositionality between the two orientations has obscured the extent to which systemic methodology has the potential to engage with unconscious processes in families and the extent to which psychoanalytic therapy must of necessity engage with some patients and families at levels where unconscious processes are not the explicit focus of the work.

In recent years much of the oppositionality or indifference between the two approaches has of course given way to interest in issues of similarity and difference. Much of what has been written in this respect comes from the systemic side but one of the notable exceptions is a contribution from two psychoanalytic therapists Fiona Brodie and John Wright who published a paper in the *Journal of Family Therapy* in 2002 where they acknowledge common ground between certain aspects of systemic thinking and contemporary themes in psychoanalysis. In particular they refer to similarity with the psychoanalytic concept of ‘the third position’ (Britton, 1989) and also the theory of reflective functioning (e.g. Fonagy & Target, 1996, 2003). Whilst
Brodie and Wright do not refer specifically to Andersen’s reflecting processes in their paper. I think their reference to the psychoanalytic formulation of reflective functioning as an area of commonality is important in the present context. In recent times the theory of reflective functioning has emerged in the psychoanalytic field as an influential developmental framework for conceptualising the difficulties of patients with limited reflective capacity. It draws attention to our capacity to ‘mentalise’, that is to reflect on our own and other people’s mental states including feelings, beliefs, intentions, desires and so on. This theory has emerged from a context of making sense of the difficulties of people who might be described as unpsychologically minded or concrete in their thinking and for whom significant areas of mental functioning appear to be inhibited. These are people who may be in very considerable personal difficulty and distress, sometimes with a diagnosis of borderline personality disorder. They are, in my experience, also frequently represented in social work caseloads. For such patients the psychoanalytic concept of reflective functioning highlights the clinical priority of engaging and encouraging their capacity to mentalise or reflect on their own and other people’s mental states. Psychoanalytic intervention with such patients often entails a way of working that is less focused on explicit interpretation of unconscious material at least in the earlier stages of the work, given the limited capacity of the patient for this reflective endeavour. Instead the therapeutic strategies recommended are strikingly similar to those of a systemic practitioner for example the emphasis on differentiating feelings, breaking down unmanageable experiences into simpler more manageable entities, helping the development of an ‘as if’ attitude where ideas can be thought about as ideas rather than as reality and so on. In other words all those things which I believe a good reflecting team conversation is likely to encapsulate.

I am aware that I am skimming the surface of a complex subject but I have risked doing so in order to point towards some shared concerns with systemic practice. What I find interesting about the psychoanalytic theory of reflective functioning is the way that it draws attention to the complex processes underlying our innate capacity not just to think and talk but also to think and talk about our thinking and talking. In systemic, psychoanalytic and social work interventions the focus is often on helping deeply troubled individuals and families for whom this crucial area of psychic and interpersonal functioning is seriously and painfully restricted.

**Ethics and reflecting processes**

Finally and most importantly what are the implications of the therapeutic developments described above specifically for social work? I have alluded to some in passing but for me the most important is the increasing democratisation of the therapeutic process on many levels, which these developments represent — first of all at the level of accessibility. More than ever both systemic and psychoanalytic orientations are working in ways that make therapeutic intervention more accessible to more people with more severe levels of difficulty. In the case of the reflecting team for example it acts as a very powerful means of opening up space for reflection in situations where there may be equally powerful forces militating against this
happening. There is something about the theatre of the reflecting team and that sense of just enough difference which it generates when done well, that can powerfully disturb stuck patterns of thinking and communicating and create a space for new thoughts to emerge. I think this increasing accessibility and flexibility of the therapeutic process represented by developments such as the reflecting team brings it closer to the concerns and challenges of social work and offers a useful tool for therapeutic engagement by social workers, who may wish to develop this aspect of their work.

There is a second level of democratisation that is also typified by the reflecting team and that is the way in which it emerged from an ethical context of unease with prevailing therapeutic methods. The reflecting team opened up backroom thinking and communication to the scrutiny of the family, giving the family at the same time an invaluable opportunity to witness a fleeting moment of relatively unconstrained communication — differences between team members for example are represented and contained in the dynamic of the reflecting conversation and talking is presented by the team as the appropriate arena for resolving and accommodating difference. As such the reflecting team can also provide a very useful arena from which to challenge in a relatively non-persecutory fashion, the powerful and destructive constraints on talking and thinking that can operate in families.

The reflecting team works from an ethical premise that some conversations are better than others and those that are relatively unconstrained are best of all. These are the kind of conversations where all parties are given the opportunity to speak and to be part of the deliberations in an age appropriate way, conversations which we are likely to think of as encompassing such ethical principles as respect, fairness, equality and justice. These ethical assumptions underpinning the reflecting team fit well with philosophical ideas around an ‘ethics of communication’ (e.g. Habermas, 1984, 1987) — that is a view of ethics as embedded in processes of communication unlike the theory of ethics in classical philosophy which remained tied to the paradigm of the individual and individual consciousness. Interestingly some of this influential thinking in philosophy and social theory around a communicative ethics is happening outside the frame of postmodernism and it is arguable that the theory and practice of reflecting processes is constrained by its adherence to a postmodernist paradigm. In particular there is a real danger that the postmodernist privileging of subjectivity and uncertainty in therapeutic discourse can undermine therapeutic expertise in ways that are potentially unhelpful and this can apply also to the expertise of the reflecting team (Donovan, 2003b).

**Conclusion**

The increasing democratisation of psychotherapy typified by such developments as the reflecting team brings it much more into line with core values and requirements in social work around transparency and openness in how we go about our work. Social work by its very nature has always worked closer to the ethical/political coal face than psychotherapy and perhaps for this very reason has been habitually preoccupied with its value base and with issues of power to a greater extent than the traditional
therapies including both systemic and psychoanalytic psychotherapy. One of the interesting aspects of the therapeutic developments to which I have alluded in this paper — whether it is the general object relations orientation of contemporary psychoanalysis, the theory of reflective functioning or the systemic reflecting process ethos, is the way in which they connect up explicitly with ethical themes. Put simply these developments reflect considerable preoccupation with our human capacity to recognise mental states in others and to engage with and relate to states of hurt, suffering and vulnerability in others. It seems to me it is in this ethical dimension of the therapeutic endeavour that we find the deepest connection to the social work task.

Note

1 See Donovan (2003b) for additional discussion of this clinical material from a systemic perspective.

References


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