The Use of Guided Imagery in Family of Origin Group Therapy

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Abstract
This paper describes the use of guided imagery in a family of origin group. The group is designed to facilitate the process of differentiation from family. Awareness is identified as the key “ingredient” that contributes to the developmental task of differentiation. The paper outlines three stages in the process of differentiation from family: identification, integration and activation of the individual’s thoughts, feelings and behaviours. The use of guided imagery is highlighted as a means for accessing the unconscious and increasing the clients’ awareness of family issues and promoting self-differentiation. Specific examples of guided imagery for family of origin work and an innovative use of the genogram are provided.

Résumé

Family of origin therapy specifically targets the individual’s developmental task of differentiation from the family. The family of origin therapy developed by Bowen and Kerr (1988), often involves a relatively “dry,” or tedious, intellectual exploration of the client’s identity within the family. In order to facilitate a more engaging and dynamic process we have developed a group approach that utilizes guided imagery and an innovative use of the genogram or family diagram. In this article we begin with some theoretical background to family of origin therapy and then introduce the guided imagery group approach.

Family of Origin Therapy
Currently there seems to be general agreement that an individual’s overall psychological functioning is closely linked to their experience within the family of origin. Bowen and Kerr (1988) describe the family unit as an “emotional field” which has a dramatic and pervasive influence on the individual’s beliefs, values, attitudes, feelings and behaviour.

Bowen’s initial observations of family functioning (1978a, 1978b, 1978c) provided therapists with some useful tools for understanding and
working with the family from a systemic perspective. His concepts of triangles, the differentiation of self-scale, the multigenerational transmission process, and family projection present a structured examination of the family system.

From Bowen’s perspective, personal relationship problems are almost exclusively a result of the individual’s unsuccessful attempt at “differentiating,” or achieving an individual identity, separate from the family “ego mass” (Bowen, 1988). Bowen states: “The ability to be in emotional contact with others yet still autonomous in one’s emotional functioning is the essence of the concept of differentiation” (p. 145). Differentiation may be perceived as a process whereby the individual becomes less reactive to enmeshed communication while being able to maintain or enhance intimate relationships with family members.

The varying approaches to family of origin therapy appear to share this common goal of differentiation. Although Bowen and Kerr (1988) state that their primary therapeutic goal is differentiation of self, the emphasis of their work is focused on the therapists’ diagnosis or evaluation of the family. Very little is written about the process of therapy itself. Bowen’s work seems to suggest that differentiation “happens” as the therapist effectively prompts the client to explore and examine the roots of the families’ emotional functioning. Bowen states that a multigenerational therapeutic exploration is essential for successful differentiation.

Bowen’s pioneering work with family of origin therapy has stimulated other practitioners to develop modified versions of the approach. While the Bowenian approach adopts a coaching model, sending clients home to actively practice their differentiation, Framo (1976) insists on bringing the client’s family of origin into the therapeutic sessions. In Framo’s approach the therapist and the family jointly explore the presenting problems and the therapist actively encourages open communication between family members.

Another approach to family of origin therapy involves the use of self-help exercises to increase one’s awareness of self-defeating family patterns (Richardson, 1987). Richardson’s book, entitled Family Ties That Bind (1987), provides specific questions that, when answered, contribute to a further understanding of one’s identity within the family.

Beck (1982) examines the use of family of origin therapy in a group context and suggests that group interactions allow the therapy to move beyond content to include process. It is Beck’s assumption that group interactions often mirror deeply ingrained patterns that originated within the client’s family of origin. The therapist intervenes to help clients process the immediate group interactions in an effort to break away from old, undifferentiated, and often unconscious family patterns.

In the present article we have chosen to adopt the family of origin term “differentiation” to refer to a process whereby the individual comes to a
greater awareness of their own feelings, thoughts and behaviour distinct from the family unit. As the individual begins to distinguish their own thoughts and feelings from those of other family members they develop a more coherent understanding of their own inner experience and of their worldview. Although we have decided to use the term differentiation to describe this process, we have made a conscious choice to steer clear of the related term, "differentiation of self" (Bowen & Kerr, 1988). Bowen’s use of the term “differentiation of self” is not clearly defined. He seems to suggest, however, that the process of differentiation leads to the development of an essential, unified self or an underlying identity that surfaces once the influence of the family has been analyzed and thereby neutralized (Bowen & Kerr, 1988). Postmodern conceptualizations, specifically the emerging narrative view, depict a more fluid self that is seen as “multivoiced” or as a “multiplicity of I positions” (Gergen & Gergen, 1988; Hermans & Kempen, 1993).

In order to address this concern over the nature of the “self” we have adopted a phenomenological perspective which emphasizes experience. Various aspects of the “self,” different voices or “characters,” to use Hermans and Kempen’s (1993) term, may be experienced without there being an essential, unified self. The method outlined in this paper is intended as a means for accessing and increasing the participant’s awareness of these various voices or characters. It is our assumption that the origins of these voices or characters can often be traced back to experiences within the family.

Differentiation, in the present context, refers to a process of personal development where the individual is eventually able to distinguish their own feelings and thoughts, their own voices, so to speak, as distinct from the feelings and thoughts of other family members. It is important to note, however, that successful differentiation increases the capacity of the individual to relate effectively with others, including family members. In other words, differentiation should not be equated with emotional separation or isolation from others.

Emotional reactivity and chronic anxiety are by-products of the individual’s inability to successfully differentiate. According to Bowen & Kerr (1988), if an individual can differentiate from their family of origin, their anxiety and reactivity level will decrease both within their own family of origin and all other relationship systems in which they take part. Bowenian theory, and other family of origin therapies, seem to agree that awareness is the key ingredient that leads to successful differentiation from one’s family of origin (Framo, 1976; McGoldrick & Gerson, 1985; Richardson, 1987; Wachtel, 1982). Keeping in mind the key ingredient of awareness, we incorporated the powerful methods of guided imagery into the therapeutic differentiation process.
An Innovative Approach to Family of Origin Group Therapy

Our approach to family of origin group therapy essentially involves the use of guided imagery and other exercises that are intended to increase the client’s self-awareness and differentiation. These awareness enhancing exercises are conducted within a group context. The group setting intensifies the overall therapeutic experience and allows for process-oriented work to occur. In this paper, however, instead of examining group process, we would like to highlight the use of guided imagery in family of origin therapy.

Frequently individuals are unaware of how previous experiences within their family of origin act as triggers to emotional difficulties in present relationships.¹ Once these experiences are accessed and brought to awareness, the individual becomes more conscious of the “worldview” that they have acquired through their exposure to the family environment. It is also important to uncover emotional experiences which the individual may have not examined fully or have repressed. Accessing deep emotional experiences requires more than a cognitive, insight-oriented exploration of the client’s family dynamics. The guided imagery exercises presented below are specifically intended to help clients access these emotionally charged, unconscious memories.

Awareness of the emotional ties, family beliefs and values, and repressed trauma from one’s family of origin frees the individual to be more emotionally responsive and available in present relationships. In this context it is important to make a distinction between the term “awareness” and the term “insight.” Insight implies a cognitive understanding; an answer to the question, why? Awareness may be conceptualized as a more inclusive term that contains the dimensions of cognition as well as emotion. Awareness, then, includes both the thinking and feeling dimensions of experience.

The Change Process—Identification, Integration, and Activation

Bowen’s descriptions of the therapeutic change process are brief and somewhat vague (Bowen, 1978; Bowen & Kerr, 1988). Bowen seems to have put more effort into developing an overall theory of family dysfunction rather than providing a guide for practicing therapists. However, it appears that the change process described by Bowen (Bowen, 1978; Bowen & Kerr, 1988) relies heavily on a cognitive exploration that is initiated by the therapist in collaboration with the individual or family. This emphasis is evident in the following quote from Bowen and Kerr (1988):

The process of trying to be more differentiated requires more awareness of the influences of anxiety and emotional reactivity on one’s actions and inactions, and

¹ For a complete discussion of how family of origin experiences contribute to present day relationship problems, see Bowen and Kerr (1988).
it requires some reexamination of one's basic assumptions about behavior and the origin of human problems. (p. 109)

Our therapeutic approach to the differentiation process differs from Bowen’s in the following identifiable ways. First, we have designed the group experience in such a way that the examination and processing of family of origin issues is largely left to the participants themselves. In the approach described below, the group participants utilize guided imagery to uncover the unexamined and unresolved issues from their families of origin. The participants are also provided with specific group exercises that are used as “tools” to explore their own history. This format ensures that the participants take charge of the therapeutic direction and seems to minimize the potentially detrimental effects of the therapist as “family expert.”

Secondly, our therapeutic approach differs from Bowen’s due to its emphasis on a non-verbal exploration of experience through guided imagery. The imagery exercises allow the participants to retrieve significant family memories and begin to integrate them into a more coherent understanding of their experience.

Thirdly, the group format provides the participants with an opportunity to “speak out” in public about their concerns and gives them the chance to “try out” new behaviours. The group is an ideal forum to discuss issues that were never dealt with in the family and provides the participants with a supportive atmosphere to experiment with new behaviours such as assertiveness or self-disclosure. As described below, using the group as a testing ground for new behaviour is an important part of the overall change process.

We view differentiation as a process that moves through three stages: identification, integration, and activation. Briefly, we view the stages as follows.

The first stage, identification refers to the process of recognizing and retrieving emotional and cognitive information about our past. In the process of growing up within our families of origin we all “sacrifice” certain aspects of our emotional and intellectual experience so we can survive without the family unit. These aspects of our experience are lost in the undifferentiated “emotional field” of the family. Certain expressions of experience, such as anger, joy, sexuality, and even rationality, are easily repressed within the pervasive influence of the family environment. The first task in the differentiation process is to “find these lost pieces” and recognize them as important aspects of our experience.

The second stage, integration requires that we incorporate these lost pieces of our experience so that we may develop our own unique perspective. As we integrate more of our experiences consciously we are able to act from a more empowered position.
Once the lost aspects of experience have been identified and integrated then we begin to see the third stage in the change process, *activation*. In the activation stage the participant experiments with new behaviours and practices them within the group. As well, individuals go home to "test" their level of reactivity to the family environment and practice acting from a more differentiated position.

The above stages provide a conceptual framework developed from our clinical experience and theoretical perspectives. This framework informs our utilization of guided imagery within family of origin group therapy. Before going on to describe the guided imagery exercises, which make up the heart of the approach, let us first provide some general suggestions for the overall format of the group therapy and describe some other exercises which we have found to be effective.

*Telling Your Story*

The particular format for family of origin group therapy, including details such as scheduling and group composition, can best be adjusted to the facilitator's personal preferences and circumstances. We have scheduled the group to meet for two hours, one night a week, for eight weeks. To create both a manageable and stimulating group environment the group size can be anywhere between six and twelve participants. We like to aim for a balance in numbers between male and female participants.

As stated earlier, the imagery exercises are the focus of the therapeutic process presently described. At least one guided imagery exercise takes place in every session of the eight-week group. However, in the first three to four weeks we also utilize the expression of the participant's "story" and the genogram to facilitate the overall process. The first one or two sessions can be used to invite the participants to share their life story with the group.

White and Epston (1990), amongst others, have emphasized the importance of "story" and the re-storying of experience. They propose "that persons give meaning to their lives and relationships by storying their experience and that, in interacting with others in the performance of these stories, they are active in the shaping of their lives and relationships" (1990, p. 13). Viewing one's family experience in narrative form provides the individual with wider perspective. A narrative presentation offers the storyteller the opportunity to examine how family beliefs, thoughts and emotions have contributed to the formation of their own "worldview." Developing an awareness of one's own worldview is another way to describe the differentiation process itself. Therefore, we believe the simple expression and articulation of one's story is a powerful tool in the process of differentiation.
As a means for clarifying and making meaning of their family experience, and also as a way to develop familiarity and trust in the group, each participant can be provided at least twenty minutes to express the story of their lives. In smaller groups, where there is more time available, at least half an hour is appropriate. The process of telling one’s story brings to awareness the past experience of the family and helps emotionally charged memories to resurface.

In order to continue this process of “telling one’s story” and introducing the family, the next exercise involves the use of a genogram or family diagram. The genogram, or family diagram, has predominantly been utilized by family therapists as a fact-finding device (Beck, 1987). McGoldrick and Gerson’s (1985) comprehensive book on genograms acknowledges that the process of gathering information for the genogram can bring up emotionally charged material and often acts as a means of “joining” with family members. Beck (1987) argues that the genogram can be used as “process” to enhance the “experience” for the client. Lewis (1989) provides a description of the creative use of colour-coded genograms and suggests methods by which families can participate in the genogram construction.

Our use of the genogram involves instructing the client on how to construct their own genogram and present it creatively to the group. Clients are given suggestions on how to use descriptive terms, colours or even family pictures to construct their genogram, and are asked to work on the genograms between sessions as homework assignments. Each client is then given at least 20 minutes to present their completed program to the group. The therapists and participants further the exploratory process by asking the presenter questions about their families.

The genogram utilized in this manner becomes a tool for process and places the responsibility for exploration and construction into the hands of the clients themselves. This approach rests on the assumption that activating the client’s own resources is often the most effective way to bring about therapeutic change.

Group participants often comment that genogram construction brings to the surface new insights about family dynamics and sheds light on previously unrecognized family themes. Participants may also be inspired to begin research into their family histories, consulting parents and other relatives and patching together a multi-generational “gestalt” that serves to reframe their present difficulties.

Unconscious processes are also involved in the exploration of one’s family history. We strongly believe that becoming aware of the behaviour and attitudes of one’s family members aids in the subtle process of differentiation and effective communication. It might be conceptualized as the unconscious doing the “work” for us, as we disentangle from the historical web of family influence. Wachtel (1982) describes the geno-
gram as a “map to the unconscious” and draws attention to numerous therapeutic applications of genogram work.

**Guided Imagery**

Although the use of language and verbal processing has certainly proven effective as a therapeutic medium, non-verbal processing may have some unique and valuable qualities. Hall (1977, p. 153) is of the opinion that “much of the truly integrative behavior . . . is under the control of those parts of the brain that are not concerned with speech” (p. 153). Sheikh (1983) speculates “that perhaps, after having been severed from visions, warped by words, and stifled by semantics for a long time, we are ready to restore our wholeness by returning to the nonverbal springs of our existence” (p. 392). It is for these very reasons that we have developed guided imagery exercises to aid in the difficult process of differentiation.

There are a considerable number of studies and reports that describe imagery as a powerful therapeutic method in general psychotherapy (reviewed by Applebaum, 1982; Sheikh & Jordan, 1983; Singer & Pope, 1978). Imagery is often used by psychotherapists to intensify the emotional experience of therapy. Overholser (1985) suggests that indirect methods of hypnosis, such as imagery, can be used to bypass the conscious mind and evoke capabilities within the unconscious mind. Zeig (1985) utilizes a process of generating hypnotic imagery and memories to access a client’s hidden resources and strengths.

Sheikh and Jordan (1983) reviewed the clinical uses of mental imagery and report that almost all of the imagery techniques used in individual therapy have found their way into group therapy. Saretsky’s (1977) book, *Active Techniques and Group Psychotherapy*, describes a number of techniques and exercises using imagery within a psychoanalytic framework. Joseph Shorr (1986) has developed “Psycho-Imagination Group Therapy” in which directed imagery is used to intensify group interactions and identity of self. According to Shorr (1986, p. 66) “Psycho-Imagination Group Therapy emphasizes the patient’s self-definition and the degree to which his self-concept permits or restricts his behavior vis-a-vis the other group members.”

Our use of guided imagery within the group is specifically for the purpose of facilitating the client’s access to repressed emotion and memories and to encourage further awareness of the emotional and intellectual influence of the family. Unlike Shorr (1986), where it appears that imagery is used to identify the self within the group, our use of imagery focuses on the client’s process of differentiating self from family of origin. Of course, when a group client achieves further differentiation from family, they are in a better position to begin the process of asserting themself within the group and developing meaningful relationships in their social world.
There are many different approaches to the use of imagery in psychotherapy and healing (Lazarus, 1984; Leuner, 1969; Rossman, 1987; Sheikh & Jordan, 1981; Shorr, 1972). A rationale for the importance of using guided imagery is presented at the outset to the group. Our approach is to present specific guided images at each meeting and to allow time for the members to get familiar with the imagery experience and share their awareness within the group. In our experience there are usually one, two, or three people at a time who choose to share each week. As people share their imagery experiences others are stimulated to explore some aspects of their experience related to their family.

Our standard procedure for presenting guided imagery is to dim the lights and speak softly at a very slow pace. We leave lots of pauses and make the structure of the imagery flexible, allowing the client to fill in the details and make decisions regarding the outcome of the imagery process. Background music can be added to intensify the trance-like experience.

Cautionary Note

It is important to note that the guided imagery exercises have the potential for creating intense emotional experiences. Participants may have a very disturbing memory return to consciousness or experience a flood of emotion when they are able to "access" some previously unprocessed sadness or fear. For this reason it is very important that the structure of the group be flexible enough to allow time to attend to individual participant’s reactions to the exercises. Also, the facilitators should be available to help the participants with any further processing or support that is required between group sessions.

We generally recommend that individuals who have had traumatic family of origin experiences, such as sexual or physical abuse, first attend individual counselling before taking part in this kind of group exercise. Individuals who have a history of psychosis or who are presently suicidal are also inappropriate candidates for this kind of group experience.

The Special Place Image

The Special Place Image was used at the outset of every group session. We use some relaxing flute music to accompany this guided image. The group clients are asked to close their eyes and begin a process of self-relaxation. Emphasis is placed on simple awareness of the body and attention to letting go of any thoughts that might be distracting. At this time, images may be provided to help participants imagine grounding "connections," i.e., roots, lights, or energy that helps the individual feel centred and grounded.

Next we ask the clients to go to a place where they will feel "whole." We suggest that it may be a new place or a place where they have been before.
Whatever the case, it is a place where they feel strong, confident, and at ease with themselves. Clients usually report that this imagery exercise is relatively easy, and the clarity and “realness” of the place increases significantly when repeated. We use the term “Special Place” as opposed to “Safe Place,” because “Safe Place” may be associated with fearful memories or be seen as a place to go in retreat from the world. The first image is used to help the client feel secure and willing to “accept” these aspects of experience that have previously been disowned or repressed. We have found that imagining, or remembering a feeling of being secure and comfortable, sets the stage for further differentiation. These imagery exercises may be perceived as a method of communicating with the unconscious thereby allowing more full range of experiences to surface into consciousness.

Images of the Family Environment

The next exercise that we use involves images of the family environment. The guided imagery invites the client to return to the family home and to make contact with an image of themselves as a young child. Orienting the client to sounds, smells, and colours of the family home and surroundings helps to intensify the experience.

One method of exploring the family environment is to ask the client to “see” themselves as a child and to go on a tour of the house with their child. The client is given some time to reacquaint themselves with “their child” and to get a sense of what the child is experiencing. With this imagery it is important to communicate to the client that whatever is “seen” and remembered is acceptable and valuable. Clients must be given a choice as to the extent, or detail, in which they wish to explore and address their family histories.

Our experience with this exercise is that the client is often flooded with new information, or awareness, related to themselves within the family. There is often a strong emotional reaction when individuals “connect” with their child, with clients usually experiencing an intense empathy for the child that they once were. After the exercise, clients frequently report that during the imagery they communicated to their child some approval or acceptance of who they are.

It is important to note that these imagery exercises, which are used to facilitate the process of becoming aware of the “lost pieces” of experience, are presented concurrently with the genogram exercises. Imagery brings up non-rational, powerfully emotional memories. The genogram construction, on the other hand, has a component of more conscious, cognitive exploration of family history and provides a “backdrop” upon which the newly retrieved imagery “information” can be placed. The emotionally charged information that at one time was incomprehensive,
blocked, or split off, from the child’s awareness, can now be successfully integrated by the adult.

The Inner Advisor Image

As Rossman (1987) notes, the idea of talking with an inner advisor is not new. Looking within, to a higher “Self,” an inner “Self,” or the God within, is a common theme in most religious and philosophical traditions. We use this imagery exercise to further the process of differentiation.

Clients who are in the process of differentiating themselves from their families of origin habitually look to others for approval and guidance. When they begin to identify and integrate with their own experiences there is a growing awareness of inner resources that can be relied upon for direction. The imagery exercise involves guiding the client to a place where they meet up with their inner advisor. Clients are encouraged to develop a relationship with their inner advisor. Once the client feels familiar and comfortable with their inner advisor they are encouraged to begin a dialogue with their advisor about family of origin issues.

Clients often report that their inner advisor took the form of an animal or a wise old woman or man. Rossman (1987) uses the image of an inner advisor to help people with their physical health; he comments; “Whatever you believe—that the advisor is a spirit, a guardian angel, a messenger from God, a hallucination, a communication from your right brain to your left, or a symbolic representation of inner wisdom—is all right” (p. 93). We have found the inner advisor image to be a great source of wisdom and strength. The advisor can be very helpful in processing family issues related to family of origin and helps the client with the differentiation process.

Family Dialogue Image

In the later stages of the group process, once the participants have had time to identify and integrate a wider range of experiences, we use the following pro-active imagery. This imagery is chosen for the purpose of “activating” new behaviours based on the clients’ newly integrated awareness of their experience. The following exercise helps prepare the client for action by rehearsing behaviour initiated from a more integrated perspective.

The client is guided to a place where they feel grounded or whole, perhaps the same place as their Special Place, and a suggestion is made that they invite a family member to engage in a conversation or dialogue with them. The content of the dialogue is left up to the client. We do suggest that the client may feel more comfortable if their Inner Advisor, or a caring person, is present to support them during the conversation. This exercise may be repeated, with different members of the family being engaged in intimate conversation.
The addition of other experiential exercises can be quite helpful at this stage of the group. Clients often experience intense emotions when they engage in conversations with family members at the imaginary level. We have found that the use of Gestalt exercises, such as the Two Chair exercise (Perls, 1969), enables the client to continue processing the family issues at a more emotionally conscious, and "present" level. Once the family issues are more conscious and the client has begun to be more expressive, it is up to the creativity of the group facilitators to effectively "work" through with the newly integrated material to complete the process of self-differentiation. As well, other activities such as "letting go rituals" help to complete unfinished business and free clients to live more fully from a more profound awareness of their human experience.

Conclusions

The task of differentiating from family of origin and articulating one's own worldview is a universal struggle of personal and spiritual growth. From our perspective, awareness is the key "ingredient" that leads to differentiation. The family stories, genogram, and imagery exercises described in this paper are all designed to increase the group participants' awareness of their family experiences and their process of differentiation.

There is considerable potential for the creative use of imagery in psychotherapy. In this paper we have highlighted an innovative use of guided imagery, in a group setting, to facilitate the differentiation process associated with family of origin work. We have found that imagery is a very effective method for engaging the abundant resources of the unconscious mind. The strength or impact of a therapeutic approach appears to increase when one combines methods that address both conscious and unconscious processes. Other combinations and uses of imagery in the therapeutic process are limited only by our imaginations.

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