Narratives of Fathers and Sons: 'there is no such thing as a father'

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Fathers are just as important to their children as mothers are. This is not so much related to the level of involvement that a father has with his child, as to the child's imagined link to him. Men and women become fathers and mothers when their offspring is conceived, creating both biological and psychological systems, and the setting for a family drama.

On this stage sons are not uniquely different from daughters, but are in childhood more vulnerable to parental failures. The paternal function interrupts a boy's exclusive bond with his mother. If father is unable to do it, the task may be performed by anyone, even by the mother herself.

In therapy the play is brought to life by the actors, family and therapist alike.

'Merely players'

"The theatre, more tangibly than any other art, presents us with the past".. "In the theatre you never leave the present" (Berger, 2001)

We are a storytelling species, but the telling of stories is not simply narrative, it has drama, too. People telling stories in family meetings have an audience. They do not quite know what they are going to say, so the play is improvised and the audience is also the cast. A father gives an account of a train journey across Britain he took alone at the age of 7. His son is listening, but only just, as he is 3 years old and very overactive. Part of its drama was created by my expression of amazement that he could have travelled so far alone. "How did you get across London?" I asked incredulously.

Theatre and therapy are connected. If effective, both create space for new experiences, bringing them to life. Plays grew out of rituals and stories developed by our ancestors long before anything was written down. As for humanity so for each human: some of our earliest memories are of sitting spellbound on a parent's lap listening, sometimes to the same story told again and again. Tribes, nations and religions thrive on mythical stories of creation and heroism[1] (Spencer & Wollman, 2002), which give meaning to

[1] The word 'fabulous' has come to mean something wonderful, though it originally refers simply to what is told in fable, or story, by implication fiction or myth. Therapeutic narratives are based on perceptions of real events. One woman took offence at my talking about her 'story', thinking that I was accusing her of lying. She had been sexually abused in childhood by her stepfather, and was not believed by her mother.

the present. The capacity to make sense of the past, in particular of the motives of one's parents and other caregivers, has now become a tool of psychological enquiry. Being unable to give a meaningful account of your own personal life history is seen as a deficit. The Adult Attachment Interview (Hesse, 1999) is designed to assess how the subject values attachments and is scored on the basis of its narrative coherence. This is closer to poetry than to logic, requiring creative thought. People who have had a very disturbed and disrupted childhood often fail to make any sense of it. They are the ones most likely to repeat the cycle when they come to have children of their own. Yet those who have, through luck or talent, found a way of understanding their parents' actions and attitudes[2] are more able to break the cycle of deprivation and damage. This is an active conversation with people who may already have died or disappeared.

The most powerful narratives describe irreversible changes in people's lives, neatly summarised by Shakespeare as 'exits and entrances[3]. Children grow into adult sexual beings and then into parents themselves. Meanwhile the original parents age and die. An early biblical narrative (Genesis, ch 10) simply lists these arrivals and departures like the text of an old fashioned title deed, without much drama. Fathers begat sons, who then inherited their possessions. Mothers and daughters were bystanders, even chattels, in spite of visible daily evidence of their major role in procreation, education, nutrition and childcare (Kraemer, 1991; Zoja, 2001). Until the twentieth century a struggle between generations was seen as exclusively man's work, representing the old and the new generations (Gosse, 1908; Turgenev, 1861).

Mothers and fathers, fathers and sons

The picture thus created is of an engagement between two people, but clinical work with families is not like that. Fathers I have met in family consultations have been, like most parents, keen to help their children, *but always with an eye on the mother.* Relationships, except the most infantile, are essentially triangular. Though he is not immediately aware of it[4], the infant's entrance is what sets the scene. The eternal triangle - of love, jealousy and betrayal - is older than any psychological theory but Sigmund Freud was the first to state that the child's desire for each parent is at least as strong as, or even stronger than, their desire for each other. He noted how the father's presence prevents Oedipus' fate: "The little boy notices that his father stands in his way with his mother" (Freud, 1920/1955).

From the infant boy's point of view, a father is at first a less immediate figure. The mother is all around him before he is born, and this experience continues for some time, gradually diluted by the entrances of other people, adults and older children, who take over from time to time. The speed of this process varies greatly, but the direction does not. The luckiest children get to know their father as an intimate early on. Most cultures tell us that the sexes are opposite so it comes as a surprise for new parents to discover that the infant requires more or less the same kind of care from both. Males experience hormonal changes when their partners have babies. A fall in

[2] even if they cannot forgive them. This is 'earned security' which they pass on to the next generation.

[3] All the world's a stage,/ And all the men and women merely players. / They have their exits and their entrances,/ And one man in his time plays many parts. *As you like it*, 2.7.139

[4] as early as four months children can manage triangular relationships (Von Klitzing et al 1999)

testosterone makes them more maternal. Yet the differences, however small, are significant. The father never had his child inside his body and he does not have to give much, in terms of volume of genetic material and of time, to produce him. He does not even have to survive until the child is born.

Babies have little concept of gender at birth but usually develop an identification with the mother, since she is the primary caregiver. To the others around him gender is of enormous importance and the little boy soon discovers that he is male, which is not the same sex as his mother. 'Disidentification' a term coined by Greenson (1968), is the painful process of becoming 'not female', a repudiation of femininity which is a familiar feature of most boys. 'I am not like her', he thinks; but then; 'who am I like?' What follows is an identification with masculinity (see Frosh et al, 2001). This is an uneven journey for most boys, who will make exaggerated efforts at being superman at one moment and become helpless infants the next[5].

Traditionally fathers came into their own when the child was older. For sons this was also the shift from mother's apron strings to an apprenticeship with father and his craft. In the modern world the presence in a small boy's daily life of real men, as opposed to stereotypical heroes in cartoons and stories, will help him to find a more balanced sense of gender (Pruett, 1993). The term 'role model' is often applied here, but is inadequate. Identification is much more than imitation. A famous footballer may be a role model, but real identification can only be acquired through personal contact. The boy needs a rounded character, not a cardboard cut-out.

In non-human primates there is relatively little connection between male parents and their offspring, but as humans evolved, the sharing of food and pairing[6] led to the possibility of father-child attachments, even in infancy. But, except in the rare case when the mother is absent, the male partner does not get far as a parent unless he is trusted by the infant's mother. He may not be the father at all, and even if he is, the mother may not want him. His role is optional, whatever anyone may wish or feel. Yet in spite of the contingent place of fathers they are of immense importance because we make so much of the reproductive process. It matters profoundly to a child, as to his parents, who made him. Human imagination makes tasks into things, but a father is nothing without a mother and a child, and the same applies at each point in the triangle[7]. He is both participant and witness, both player and audience.

Long before reproductive knowledge and gender identity are issues for the child, attachments to caregivers are being formed. Attachments to each parent are independent and develop at different rates (Steele et al, 1996). Recent studies seem to support the traditional sequence in which father becomes more important after 10 or 11 years (Lamb & Lewis 2004, Steele & Steele, 2004) but this turns out to be dependent on early intimate contact between father and child, such as bathing the baby. The Steeles found that fathers who have not understood their own life stories,

[5] Girls' identifications, if smoother, are more complex because they have to distinguish themselves from mother's person but not from her gender. Paternal functions are just as important for girls, but that is another topic.

[6] "if a male cannot tell when a female ovulates, he must tend her more or less continuously to be sure he sires her offspring" (Hinde 1982)

[7] "There is no such thing as a baby" said Donald Winnicott in 1940, perhaps the first to note the essentially systemic nature of the baby and mother couple. "The infant and the maternal care together form a unit" (Winnicott, 1960, p39). A father's function is equally dependent on the existence of the other two (Etchegoyen, 2002, p34)

and who have not mourned their losses, and are less engaged as parents. These men are more passive in their thinking and their children become less confident and less sociable. Grossman and her colleagues (2002) show how fathers in conventional families, where mothers spend much more time with the children, have a unique role in helping them to explore the wider world from mother's secure base. A specific connection between fathers and baby boys is highlighted by Feldman. She notes sex differences in the rhythms of intimate contact so that fathers are more in tune with sons, and mothers with daughters. "The coregulation formed between father and son during the first months may be essential environmental inputs that facilitate the formation of self regulatory capacities" (Feldman, 2003, p.17). Father's attentive care of his baby son seems helpful in its own right, not just as an adjunct to mother's.

When mothers are depressed following the birth it is their male children that suffer the most lasting effects, particularly in self regulation (Morrell & Murray, 2002). Some of these boys become dreamy or hyperactive, even at primary school age, long after the mother's depression has lifted. Here, an involved father can minimise, or even prevent, developmental harm. Similarly if the mother is physically ill after the birth, for example a premature delivery or an emergency caesarian section, a father might come into his own as a primary parent. There is nothing, apart from social prejudices and the lack of functioning breasts, to stop men from caring for babies effectively (Pruett, 1993). But in the absence of early intimacy he becomes more like a teacher, or coach. Studies on modern fathers show that they are most useful for the child's social and mental development when they are engaged in parallel with the mother, rather than 'taking over' when the child is older.

In recent decades in western and western-influenced societies, equal parenting has for the first time been considered possible. It is unusual in historical terms but it is not 'unnatural'. In some hunter gatherer societies men take an equal and active role in parenting[8], and this arrangement may have been more prevalent for the hundreds of thousands of years that hunting and gathering was our only way of life. It is now socially acceptable for a man to be closely involved in the care of his infant, occasionally more so than the mother. But familiar distinctions between parents still prevail, so that when a child is ill at school, for example, the default response is to call the mother. Segregation of roles - 'father's money for mother's domestic service' - was the norm in many mid twentieth century societies, but this is now in competition with a more complex notion: 'fair shares for adult parents'. The spectrum of parental roles is now greater, with some men as primary caregivers at one end, and traditional breadwinners who stay away from the nursery, at the other. In the middle, both parents may be earning money *and* caring for their children each day. All this offers richer variety and choice for families, and more opportunities for parental arguments.

When development goes well enough the players will negotiate their triangular life in small steps. Toddlers will have tantrums and both parents respond more or less effectively. Alongside the quality of their teamwork the capacity to do this comes from their own experiences of care in infancy. When our own rages have been calmed

[8] The Aka pygmies of Central Africa share parental care of infants, more than any other human group studied. There are no external enemies, so men are not needed as boundary keepers and protectors. "Husband-wife reciprocity is most likely the prime factor that leads to increased paternal involvement" (Hewlett, 1992, p171) Paternal investment is lower when the male has higher status, suggesting a link with non-human primate patterns in which males are more likely to care for children when they want to impress the female.

by bigger and more patient adults we carry within us a belief that loss of control can be managed. It is easier for two to deal with an explosive child than one alone, but it can also lead to conflict. One familiar sequence is an exhausted mother saying to the father 'you deal with him now!'

When things go wrong

Children with behavioural and emotional disorders almost invariably have a history in which this kind of containment has not happened. Even if the primary problem is mainly biological, the formation of a secure attachment between child and parents, and other caregivers, is the most important ingredient of mental resilience. Security does not depend on having his own two parents caring for him, but it does depend on having one or more faithful caregivers who can manage powerful feelings of love and hate between themselves and the growing child. It may not be fair that the mother carries a greater burden of responsibility for promoting secure attachment, but she usually does.

Many cases of postnatal depression occur when a lone mother has no confiding relationship with another adult. If she has to care for a child on her own, she is deprived of adult company and emotional support. Neither has a break from the other. Whether this is idyllic or maddening it cannot be good for either. The same applies where a man has to do the task alone, which is increasingly common. Babies thrive when they have a small number of familiar and loyal caregivers so that the child does not have to have an exclusive relationship with only one. Some of the pioneering family therapists would teasingly refer to this state as a cross-generational 'marriage' (Whitaker, 1977; Palazzoli, et al, 1978 ch 15). Jay Haley was the first to describe the 'secret coalition' (1976, ch 4). whose mischief has continued to preoccupy family therapists[9]. Families in therapy usually contain more than two people, but enmeshment between one parent and a symptomatic child is a common theme[10]. The props on the family stage include a bedroom door which may, or may not, shut out the child at night when he reaches a certain age.

Paternal function; making up the numbers

Exclusion and inclusion are not fixed positions. Each member of the trio is both part of a couple, and also excluded from one, in a third position, a metaposition[11]. It is a

[9] "the term coalition means a process of joint action *against* a third person…the problem is more severe when the coalition across generations is denied or concealed…when this act becomes a way of life the family is in trouble" (Haley, 1976, p 109.) Haley, one of the great pioneers of early family systems therapy, did not acknowledging the Freudian origins of the pathological triangle.

[10] 'enmeshment' here describes a harmful misconnection between parent and child which has been a focus of developmental psychology for at least 50 years; the double bind (Bateson et al, 1956), maternal impingement (Winnicott, 1960), anxious attachment (Bowlby, 1973), invisible loyalty and parentification (Boszormenyi-Nagy & Spark, 1973), enmeshment (Minuchin, 1974), Expressed Emotion (Leff & Vaughn, 1985), disorganised (Main & Hesse, 1990) or unresolved/preoccupied attachment (Patrick et al, 1994), and failure of reflective function (Fonagy & Target, 1997) or of attunement (Trevarthen & Aitken, 2001)

[11] "If the link between the parents perceived in love and hate can be tolerated in the child's mind it provides him with a prototype for an object relationship of a third kind in which he is a witness and not a participant. A third position then comes into existence from which object relationships can be observed. Given this, we can also envisage being observed. This provides us with a capacity for seeing ourselves in interaction with others and for entertaining another point of view whilst retaining our own, for reflecting on ourselves whilst being ourselves" (Britton,1989, p87).

paternal function to make such experiences and reflections possible. It provides "an alternative point of view" as one 16 year old boy who never knew his father elegantly put it.

There are of course many lone parents who can support a healthy independence in their children, but this is likely to depend on the parent having both internal and external supports. In her mind there are parents who can work together, and in her life she will have secure adult friendships (who can also do some babysitting). Both maternal and paternal functions will from time to time be performed by the same person, by parents of the opposite sex, or by people who are not parents at all. The Oedipal challenge is, after all, more about generation than about gender. Babies can't make babies.

Absent fathers

In his own mind no child is 'without a father'. In the absence of a given story he will make up his own. Nowadays fatherlessness is no longer regarded as an automatic disadvantage, nor is it rare. Some women choose to have children without involving the father after conception. Others find single parenthood preferable after trying to collaborate with the father or with another male adult. The findings of social science and developmental psychology show associations between variables, such as single parenthood and social difficulties, but these can be misused to make prescriptive statements about how families should be[12], or to criticise parents who do things differently, for example raising a child with no word or sight of father. During the last decades of the twentieth century single mothers in Britain and USA became political targets, as if all social problems were their fault. Yet there is statistical evidence to show the benefit of having two involved parents[13] (Cabrera et al 2000), even if they are not together.

Cooperation between parents is more difficult, but probably more important, if they are separated. Although parental separation is usually painful for children most harm occurs when there is unresolved and relentless conflict between them, together or apart (Kelly, 2000; Booth & Amato, 2001). Although they may think that he does not notice it the quality of the parents' relationship is always a matter of fundamental significance for the child. Careful agreement over contact, education and money is enormously hard work, especially when there are new partnerships, but it is a priceless gift to children when they do not have to feel responsible - like in-house marital therapists - for the way their parents get on with each other.

When the father is rarely or never seen, the child depends on his mother or other relatives to inform him. If a boy with no contact with his father hears from his mother only that he is a bad man (perhaps along with all other men) he will feel that he is descended from someone who not only could not stay at home to care for him but also would not, and therefore does not love him. This, though not necessarily wholly true,

[12] We might encourage fathers to bathe their babies, but any *obligation* to do so will not necessarily help, and may backfire. Associations between parental behaviours and child outcomes can only show what happens when people make their own choices.

[13] The more the task is shared the more the children will see that gender roles are not fixed. This is regarded as an advantage by most therapists but not by all families. Some have very traditional views which have to be respected and explored in every case.

is painful and disturbing to the child's self esteem (as much for a girl as for a boy). If the mother says good things about the absent father, that when they were together there were some good times, and that father loved his baby or his partner, or both, then the child has the chance of a good father in his mind[14]. This requires brave and active mental work on the mother's part. She may despise him, or feel nothing for him, but it is possible for a mother to make sense of her broken relationship with the father, much as parents can make sense of their own parents' deficits. A bad father can still be understood, and not just rejected out of hand. The same applies to missing mothers. These are therapeutic tasks (Dowling and Gorell Barnes, 2000). Some fathers are more helpful out of the picture (Jaffee et al, 2003) and sometimes there is very little good to tell.

Father waits in the wings for his entrance between mother and son

Though some modern young couples without children may hope to discard traditional roles, once the baby is born an unsymmetrical triangle is created. Biological realities do make a difference, and cultural prejudices about men and women do not simply disappear when we want them to. With few exceptions the mother is still the primary parent, while the father follows. This sequence is in many families much quicker than it was even twenty years ago but in others it is still traditional, with father seeing little of his children in the early months or years, and always deferring to mother when he does. Whatever the sex of the child, the mother tends to be the gatekeeper for his relationship with that child[15] (Allen & Hawkins, 1999, White, 1999). She introduces the father and child to each other, or fails to do so. And for boys there is the potential for comparisons, even rivalry, between son and father, while she is the referee.

The triangular predicament for boys is not unique but there are developmental differences between the sexes that make boys more vulnerable to both biological and emotional stress in the early years. Because of this fragility (Kraemer, 2000) boys take up most of the time of child mental health services, while girls predominate in adolescent clinics. Whatever the underlying problem - such as an inborn tendency towards anxiety, restlessness, inattentiveness, clumsiness, learning difficulties, social aloofness, or depression - the quality of triangular relationships has a powerful influence on the outcome. Clinically a case can be made for the familiar hypothesis: *that many younger boys with emotional and behavioural difficulties have powerfully enmeshed relationships with their mothers from which the father is to some extent excluded.*

Ben, a very bright and articulate child aged 8 frustrates his parents terribly, but his mother more than his father. He was referred because of poor coordination and learning problems. He had already had psychological and psychiatric assessments,

[14] "A father who is dead may be carried within the child's mind as a very alive figure depending on the mother's way of talking about the father". ".. a father who is physically present might nevertheless be lived as symbolically lost, absent or dead in the child's inner world" (McDougall, 1989, p 209). "The physical availability of the father may be neither sufficient nor necessary for triangulation to evolve. What does seem critical is a situation within which the child can envisage a relationship between the two other, emotionally significant figures." (Target & Fonagy, 2002, p57)

[15] or with a stranger: Hobson et al (2004) show how maternal sensitivity is correlated with the one year old child's capacity to engage more freely with other people.
When father is non resident, mother's relationship with him retains a strong influence on the quality of the child's relationship with him (Dunn et al, 2004).

and was regarded as very bright but with specific spelling and reading difficulties and borderline ADHD (attention deficit hyperactivity disorder). He had not received medication at his mother's request. Everything he is asked to do generates a self righteous tantrum. His mother pleads with him and the noise increases. Father wants to intervene but mother keeps him away saying he is too harsh. While the boy has his own weekly individual sessions with a psychoanalytic child psychotherapist[16], work with the couple uncovers a familiar story. Mother and baby did not have a good start together. He was born after a long labour, was often ill as an infant and mother felt oppressed by his demands. Her experience of men in her family of origin was that they always had problems. Her brother was clumsy and dyslexic and could not hold down a job and her father died in uncertain circumstances, possibly by suicide. Father's own father was distant and autocratic. The couple are loyal but it has been a struggle for them to work together for this child, especially since his younger brother was born, and had a much happier start. Ben is furiously jealous, accusing both parents of loving his brother more than him.

The child's therapist and I worked two-monthly with the parents together. These sessions were lively, affectionate and personal. All four of us in the room have different nationalities, and much was made of our differences, but also the fact that all of us have sons[17]. The therapists are a man and a woman. Ben's weekly individual sessions demonstrated his frustration at not being able to make things happen his way. He is very competitive with the therapist, wanting to sit in her chair. He asserts that he is in the Trojan horse and she is being invaded by him. She experiences this as a strong desire to get inside a maternal figure. He is enraged when the therapist comments on his omnipotence and tapes up her mouth to silence her (dramatic indeed). He was very engaged in his own therapy, but its effectiveness depended also on the quality of our contact with the couple, and on our active encouragement of the need for change in the way they manage Ben's outbursts. The telling of the story outlined above is not in itself therapeutic. Therapy, like theatre, happens in the present. Mother's imitation in these sessions of Ben's whining and her pleading responses is a vivid enactment of their entwined, but ambivalent, relationship. We wanted to show in particular how Ben is aroused - even sexually - by his mother's reaction to him. In the meantime mother, who had at first insisted that Ben should have special education, now became convinced that all his symptoms were due to ADHD, in spite of the fact that emotional outbursts are not part of the syndrome. I interpreted this as her desire to have a paternal prescription from someone like me, explaining how powerful – patriarchal even - a doctor feels when he has a drug up his sleeve[18]. But we rehearsed alternative scenarios for the three of them, showing how a child can be calmed when he knows that his parents are working together for him, rather than undermining each other. As I was soon to leave the clinic, I gave mother a pair of children's scissors, to cut the umbilical cord, from the play box in my room. She was amused and took them everywhere with her after that[19].

Father was now able to make his entrance. Within a few months Ben was getting gold stars for effort at school. It became clearer to what extent he has specific spelling and

[16] Salomonsson (2004) describes psychoanalytic work with a boy who has attention deficits.
[17] After some months of this work mother told me that she remembered seeing me sixteen years ago with our then toddler-aged sons in a double buggy *en route* to the play group.
[18] Overmeyer et al (1999) show how tempting it is to lose interest in psychosocial narrative when a prescription is available.
[19] until they were confiscated at an airport security check.

reading difficulties, which may need equally specific help. But he is far less troubled and troubling. His therapy continues, and in his play he becomes more preoccupied with his masculinity and rivalry with his father.

A father may be less useful at home than away from it. In a different family a nine year old boy who terrorised his mother with insults and kicks got little reaction from his father, much to mother's annoyance. We made some progress in family meetings exploring the child's early life and the parents' past family histories, but not much. It then turned out father was having an affair (with mother's best friend) and so had to leave the home. After many months of justified rage from the mother, he broke up with her friend and lived alone. The boy now settled, and went to a new school. Mother said at the end that she was proud of the way father now dealt with their son "in a way that only a man can do".

Drawing a line

'Drawing a line' describes the setting of a boundary. Amongst prehuman primates the male tends to beat the bounds of the band to keep out intruders. In humans, this is a familiar and traditional paternal role, too, protecting the family, but there is also a line to be drawn through the middle of it. The making of distinctions is the beginning of logical thought, and of morality too; the patriarchal Abrahamic God creates the world by marking the boundaries between sky and earth and between night and day. Gregory Bateson saw this process as the essence of mind, that knowledge is news of difference[20]. Again it needs emphasing that this is not something only men (or God) can do. The paternal function is not exclusively father's.

The particular line that has to be drawn in families is one showing the difference between generations. The Oedipal struggle is not so much a symmetrical contest between father and son for mother's love as one in which a truth has to be established; namely that the boy is not the sexual partner of the mother; the father is, or was. The boys I have failed to help in clinical practice did not get this message. Between them the mother and father managed to stifle it, leaving the child and mother to consume each other with intrusive thoughts and actions, with very disturbing results. These are boys who may be clever and charming but at the same time subject to violent or perverse impulses, to lying, or to terrors that from time to time overwhelm them. The importance of Freud in this context is his emphasis on the intimate passion between mother and son. However disguised, seduction is an essential part of the drama.

This, sometimes tragic, outcome is the legacy of several generations of parental failure. From a therapeutic point of view, there is no point in blaming anyone for it. The constellation of hostile, humiliating or neglectful parents whose children then become parents is a familiar narrative in most child mental health clinics. The young woman becomes a mother - perhaps in defiance of her own - with a man who is not able to support her. He may bring in money or be generous in other ways but he cannot manage the emotional complexities of triangular life[21]. This pattern occurs in

[20] Bateson frames the opening verses ("thunderous prose") of Genesis as a scientific statement about *order* : "...and God divided the light from the darkness..... and divided the waters which were under the firmament from the waters which were above the firmament.." (1973).

[21] "Essentially, the task for the mother, father and infant involves tolerating the link between two people they desire and which excludes them. This situation cannot be harmonious" (Marks 2002, p. 95).

many different cultures and social classes. Education, intelligence and money are no protection. The quality of care may on the face of it seem good, with a comfortable home and a good school, but clinical stories told by parents are often heartsinkingly predictable. "My father didn't care for me, he was only interested in his work [or other compulsive activity]. I just wished he would love me... My mother was depressed, she preferred my sister to me, I never felt really accepted, she was always trying to change me.." A particularly destructive pattern is where the mother has been sexually abused in childhood. She grows us feeling contaminated and has no trust in men. Yet she forms a partnership with one (or more) and has some children. The relationship is not strong and breaks down. The boy child takes the father's place, perhaps by sleeping with mother, or by fighting with her. Accounts of stories like this test the patience of any therapist, and some are just too terrible to tell. Family and narrative therapies rightly prize our focus on family strengths, but these cannot be invented, any more than a mother can sanitize for a boy the disappearance of his father. The clinical struggle is to rescue shreds of competence and love from a scene which feels to the therapist like a catastrophe[22].

Early intervention at the weakest link in the life cycle

I have met many parents with whom I can have lively conversations, and whose courage and intelligence I can admire, but whose ability to keep their actual child in mind is very limited. Instead he is experienced through a veil of projections from past relationships, and treated accordingly. This is a dilemma for systemic therapies. It is possible to engage parents in therapy who might never get any help in their own right, yet not be able to change the 'basic fault' if the damage has been too great. Thirty years ago Selma Fraiberg coined the phrase 'ghosts in the nursery' (1975, see also Fonagy et al, 1993) to describe the persecutory experiences of new parents, in particular mothers, when confronted with their baby's desires and demands. What breaks through at this fragile moment in the mother's life is her experience of her own mother a generation before, when she herself was an infant. If that was 'good enough' (i.e. the best it can or should be) then the flashbacks are helpful, as if her mother were with her now supporting her. If they were bad, for example if her mother was withdrawn, or intrusive, then her view of her baby is taken over by these involuntary and usually unconscious memories, so that the baby is no longer an innocent child but someone with a grudge, or worse, against his caregiver. This is a terrible start, and can set in train a series of misfortunes that are increasingly hard to reverse.

A father, or other family member, has his own ghosts to deal with too – and rarely any opportunity to reflect on them (Walters, 1997) - but the chances are that between them two parents will have different strengths and weaknesses which make it easier for them to overcome these threats. Given the more powerful effect of mother's care in the early months, this is the point in the life cycle at which another caregiver can modify its course. This is a paternal function, but someone else may perform it. Whoever it is, the haunted mother needs an intimate to support her. Besides that (and sadly a grandparent in such a case may in reality not be helpful) what is also required here is skilled help from health visitors and therapeutic professionals (Barnes, 2003), to prevent a vicious spiral of alienation and mistrust between mother and child, and

[22] It would not be possible to present one particular case to illustrate this. It is not ethical to publish such clinical narratives without permission, nor is it ethical to ask.

between mother and father. This is the time to tell the story in all its painful detail. It is live, like a stage play waiting to start. The adult attachment interview, a research tool, can be adapted for clinical use to elicit it (Steele & Steele, 2000). In the most serious cases clinical therapeutic interventions may otherwise come too late.

Because of the mother's pivotal role a narrative of father and son will always include the woman in between them. The triangular drama gives depth and meaning to the relationships between the participants and to others that follow. Clinical interventions are likely to be more effective while the story is being created, rather than years later, when it has become an established saga, in which the players have become attached, or even addicted, to their parts.

Epilogue: the therapist as actor

Some clinical stories would lead a passive audience to take sides with the victim, the one who seems the most hard done by. A therapist, in contrast, becomes an actor, part of the play. He or she can take sides but not for long. In the early years of family therapy much was made of 'the end of blaming' as if this could be done by will power alone. Technique is required to do this. 'Positive connotation' was devised to help the family systems therapist to be on no one's and everyone's side at the same time. In early use it could seem insincere, but practitioners gradually discovered that it made sense; that the effort to see some virtue in what appeared to be destructive was not a trick but an interpretation of deeply buried wishes or the celebration of unexpected consequences.

This conflict-avoiding strategy is easily misused. It is patronising to say 'well done' to someone in therapy when one feels just the opposite, but it is therapeutic to change your own perceptions so that you no longer feel critical. Although Ben's family story was not a tragic one, it was painful enough. His mother expected us to blame her, because she felt so guilty and had been, implicitly or explicitly, accused by others – perhaps even by her husband - of causing Ben's difficulties with her excitable temperament, as if she were drawing him into fights with her for her own purposes. This was a tempting hypothesis to make in the heat of the moment, but in family therapy it is a useless observation[23]. We had to see how the addictive quality of these rows was an expression, however distorted, of the passionate love between them, not of its denial. Once we had taken this step, which is based on a theoretical assumption about oedipal triangles, we ourselves felt different about her and her husband's predicament. From the way we were talking she could feel that we did not think she was a bad mother, or that father was derelict in his duty. From this position it was now possible to challenge the parents to do things differently, because it came from hard-won affection rather than frustration or criticism, easily experienced by family members as contempt.

The effort to do this is not unlike the actor's method as he gets into a state of mind that he cannot yet quite believe in. It seems wrong to think of a therapist as acting, which implies being false. Yet in order to get past the ordinary reactions of sympathy

[23] In psychoanalytic therapy there is time, and a need, to challenge head on destructive motives arising, for example, from jealousy and envy. In work with families more strategic and indirect methods are usually required to avoid shaming one family member in the presence of others.

and blame therapists need a method of responding which is both genuine and also unexpected. One way of doing this is to look out for the unacknowledged positive desires that drive what seem to be irritating attitudes. Love can be twisted into unrecognisable shapes. I have found repeatedly that positive connotations can seem fanciful or absurd while I am uttering them but almost immediately, because of the reaction they receive, begin to have a truth of their own, surprising me as much as the recipient. "In ordinary life truth is what really exists, what a person really knows. Whereas on the stage it consists of something that is not actually in existence but which could happen." "Truth on the stage is whatever we can believe with sincerity, whether in ourselves or in our colleagues." (Stanislavski, 1937, pp129, 130.)

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REFERENCES

Allen, S. M. & Hawkins, A. J. (1999) Maternal gatekeeping: Mothers' beliefs and behavior that inhibit greater father involvement in family work. *Journal of Marriage and the Family* **61**, 199-212

Barnes, J. (2003) Interventions Addressing Infant Mental Health Problems. *Children & Society*, **17**(5), 386-395

Bateson, G., Jackson, D., Haley, J. & Weakland J.H. (1956) Towards a theory of Schizophrenia. *Behavioural Science,* **1** (4) [reprinted in Bateson, G., *Steps to an Ecology of Mind.* London: Paladin, 1973.]

Bateson, G. (1973) *Steps to an Ecology of Mind,* St Albans: Paladin, p29

Berger, J. 'Ape Theatre', in (ed.) G Dyer *Selected Essays,* London: Bloomsbury, 2001 (p 548, line 10 and p 548, line 20)

Booth A, Amato P.R. (2001) Parental predivorce relations and offspring postdivorce well-being *Journal of Marriage and the Family* **63**(1): 197-212

Boszormenyi-Nagy, I., and Spark, G. (1973) *Invisible Loyalties: Reciprocity in Intergenerational Family Therapy.* Hagerstown, Maryland: Harper & Row, chs 6 and 10.

Bowlby, J. (1973) *Attachment and Loss Vol II : Separation, Anxiety and Anger*. London: The Hogarth Press, chs 15-20.

Britton, R. (1989) The Missing link; parental sexuality in the Oedipus Complex, in (ed.) J. Steiner, *The Oedipus Complex Today: Clinical Implications*, London: Karnac

Dowling, E., Gorrell Barnes, G. (2000) *Working with Children and Parents through Separation and Divorce,* Basingstoke: Macmillan.

Etchegoyen, A. (2002) Psychoanalytical ideas about fathers, in (eds) Trowell, J. & Etchegoyen, A. (2002) *The Importance of Fathers: A psychoanalytic re-evaluation,* Brunner Routledge, Hove, pp 20 – 41.

Dunn, J, Cheng, H., O'Connor, T. G., Bridges, L. (2004) Children's perspectives on their relationships with their nonresident fathers: influences, outcomes and implications. *Journal of Child Psychology and Psychiatry* **45** (3): 553-566.

Feldman, R. (2003) Infant-Mother and Infant-Father Synchrony: The Coregulation of Positive Arousal, *Infant Mental Health Journal,* **24**(1); 1-23.

Fonagy, P. Steele, M, Moran, G, Steele, H, Higgitt, A. (1993) Measuring the ghost in the nursery: an empirical study of the relationship between parents' mental representations of childhood experiences and their infants' security of attachment, *Journal of the American Psychoanalytical Association* **41**(4): 957-989.

Fonagy, P and Target, M. (1997) Attachment and reflective function: their role in self-organisation. *Development and Psychopathology,* **9;** 679-700.

Fraiberg, S, Adelson, E. Shapiro, V. (1975) Ghosts in the nursery; a psychoanalytic approach to the problems of impaired infant-mother relationships, *Journal of the American Academy of Child Psychiatry,* **14**: 387-422

Freud, S. (1955) 'Identification', in *The Standard Edition of the Complete Psychological Works of Sigmund Freud,* vol **XVIII,** London: The Hogarth Press, p 105.

Frosh, S., Phoenix, A. and Pattman, R. (2001) *Young Masculinities: Understanding Boys in Contemporary Society,* London: Palgrave,

Gosse, E (1908/1988) *Father and Son: A Study of Two Temperaments.* London: William Heinemann (London: Penguin Classics)

Grossmann, K., Grossmann, K. E., Fremmer-Bombik, E., Kindler, H., Scheurer-Englisch, H., & Zimmermann, P. (2002) The uniqueness of the child-father attachment relationship: Fathers' sensitive and challenging play as a pivotal variable in a 16-year long study. *Social Development,* **11**, 307-331.

Von Klitzing, K., Simoni H., & Bürgin, D. (1999) Child Development and early triadic relationships. *International Journal of Psychoanalysis*, **80**: 71- 89

Greenson, R. (1968) Disidentifying from mother: its special importance for the boy, *International Journal of Psychoanalysis* 49:370-374.

Haley, J. (1976) *Problem-Solving Therapy*, New York: Harper & Row

Hewlett, B. S. (1992) Husband-wife reciprocity and the Father-Infant Relationship among Aka Pygmies, in (ed.) B S Hewlett, *Father-Child Relations: Cultural and Biosocial Contexts,* New York; Aldine de Gruyter, p.153-176

Hesse, E. (1999). The Adult Attachment Interview, in J. Cassidy and P.R.Shaver (eds) *Handbook of Attachment: Theory, Research and Clinical Applications,* pp. 395-433. New York: Guildford.

Hinde, R. (1982) *Ethology; its Nature and Relations with Other Sciences*, Glasgow: Fontana, p 250

Hobson, R. P., Patrick, M. P. H., Crandell, L. E., Garcia Pérez, R. M. & Lee, A. (2004) Maternal sensitivity and infant triadic communication. *Journal of Child Psychology and Psychiatry,* **45** (3): 470-480

Jaffee S.R., Moffitt T.E., Caspi A. and Taylor A. (2003) Life With (or Without) Father: The Benefits of Living with Two Biological Parents depend on the Father's Antisocial Behavior, *Child Development,* **74** (1): 109-126

Kelly, J.B. (2000) Children's adjustment in conflicted marriage and divorce: a decade review of research. *Journal of the American Academy of Child and Adolescent Psychiatry,* **39**, 963-973.

Kraemer, S. (1991) The Origins of Fatherhood, *Family Process,* **30:** 377-392,

Kraemer, S. (2000) The Fragile Male, *British Medical Journal***, 321**: 1609-1612

Leff, J., and Vaughn, C. (1985) *Expressed Emotion in Families: Its Significance for Mental Illness.* New York: Guilford Press.

Lamb M. E. and Lewis C. (2004) The Development and Significance of Father-Child Relationships in two-Parent Families, in (ed.) M. E. Lamb, *The Role of the Father in Child Development* (fourth edition) Hoboken NJ: Wiley. 272-306

Main, M. and Hesse, E. (1990) Parents' unresolved traumatic experiences are related to infant disorganised attachment status; Is frightened and/or frightening parental behavior the linking mechanism? In M Greenberg, D. Cicchetti, E.M. Cummings (eds) *Attachment in the Preschool Years: Theory, Research and Intervention.* Chicago: University of Chicago Press, pp 161 - 182

Marks, M. (2002) Letting fathers in, in J. Trowell & A. Etchegoyen (eds) *The importance of fathers: A psychoanalytic re-evaluation.* Hove: Brunner Routledge, pp 93 - 106.

McDougall, J. (1989) *Theatres of the Body*. London: Free Association Books

Minuchin, S. (1974) *Families and Family Therapy.* London: Tavistock.

Morrell, J & Murray, L. (2002) Infant and Maternal Precursors of Conduct Disorder and Hyperactive Symptoms in Childhood: A Prospective Longitudinal Study from 2 Months to 8 Years, *Journal of Child Psychology and Psychiatry*, **43**:7, 1-20

Overmeyer, S., Taylor, E., Blanz, B. and Schmidt, M.H. (1999) Psychosocial adversities underestimated in hyperkinetic children, *Journal of Child Psychology and Psychiatry and Allied Disciplines,* **40** (2): 259-263

Palazzoli, M. S, Boscolo, L., Cecchin, G. and Prata, G. (1978) *Paradox and Counterparadox,* New York: Jason Aronson.

Patrick, M., Hobson, R.P., Castle, D., Howard, R. and Maughan, B. (1994) Personality disorder and mental representation of early social experience, *Development and Psychopathology*, **6:** 375-388.

Pruett, K.D. (1993) The paternal presence, *Families in Society: The Journal of Contemporary Human Services,* **74** (1): 46 -50.

Salomonsson, B. (2004) some psychoanalytic viewpoints on neuropsychiatric disorders in children. *International Journal of Psychoanalysis*, **85:** 117-136.

Spencer, P & Wollman, H. (2002) *Nationalism: A critical introduction.* London: Sage.

Stanislavski. C. (1937/1980) *An Actor Prepares.* London: Methuen Drama.

Steele, H., Steele, M., & Fonagy, P. (1996). Associations among attachment classification of mother, fathers, and their infants, *Child Development,* **67**: 541-555.

Steele, H and Steele, M (2004) The construct of coherence as an indicator of attachment security in middle childhood: The Friends and Family Interview. In (eds.) K. Kerns, and R. Richardson *Attachment in middle childhood*. New York: Guilford Press.

Steele, H. & Steele,M. (2000) Clinical uses of the adult attachment interview. In (ed) G. Gloger-Tippelt *Bindung im Erwachsenenalter*, Stuttgart: Klett-Cotta, p322–343

Target, M. & Fonagy, P. (2002) The role of the father, in (eds) J. Trowell & A. Etchegoyen *The Importance of Fathers: A psychoanalytic re-evaluation,* Brunner Routledge, Hove, pp 45-66.

Trevarthen, C., and Aitken, K.J. (2001) Infant Intersubjectivity: Research, Theory and Clinical Applications. *Journal of Child Psychology and Psychiatry,* **42**: 3-48

Turgenev. I. (1861/1998) *Fathers and sons*. Oxford: Oxford World Classics

Walters, J. (1997). Talking with Fathers: The Inter-relation of Significant Loss, Clinical Presentation in Children and Engagement of Fathers in Therapy, *Clinical Child Psychology and Psychiatry,* **2** (3): 415-430.

Warin, J., Solomon, Y., Lewis, C. & Langford, W. (1999). *Fathers, work and family life*. London: Family Policy Research Centre.

Whitaker, C. (1977) Symbolic Sex in Family Therapy. reprinted in J. R. Neill & D. P. Kniskern (eds) *From Psyche to System: The Evolving Therapy of Carl Whitaker.* New York: Guilford Press, 1982, pp 277-282.

White L. (1999) Contagion in family affection: Mothers, fathers, and young adult children, *Journal of Marriage and the Family* **61** (2): 284-294.

Winnicott, D.W. (1960) The Theory of the Parent-Infant Relationship, *International Journal of Psycho-Analysis* **41**: 585-595, reprinted in *The Maturational Processes and the Facilitating Environment*, London: The Hogarth Press,1965, p 37-55.

Zoja, l. (2001) *The Father: Historical, Psychological and Cultural Perspectives*, Hove: Brunner-Routledge, ch 11