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THERAPY IN THE NEW MILLENIUM:
New Sciences and Their Application to Therapy.
Effectiveness of Systemic Family Constellations

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ABSTRACT

More and more evidence emerges from various scientific discoveries and experiments that points to the essentially holistic and indivisible nature of our world. It has been suggested by various researchers that there is an “information field” that underlies and is an inseparable part of all things material. If proven, it can lead to a revolutionary shift in all sciences and natural sciences in particular. The information field is a very promising concept that might result in a completely different and highly effective approach to healing and psychotherapy. There already exist several approaches utilizing these ideas which show considerable effectiveness while utilizing short-term delivery. A therapy known as the Systemic Family Constellation is one of these approaches. The effectiveness of Family Constellations has been explored by means of online surveys designed to estimate the outcomes and experiences of Constellations participants.

CHAPTER I

Introduction

A human being is a part of the whole called by us, universe. He experiences himself, his thoughts and feeling as something separated from the rest, a kind of optical delusion of his consciousness. This delusion is a kind of prison for us, restricting us to our personal desires and to affection for a few persons nearest to us. Our task must be to free ourselves from this prison by widening our circle of compassion to embrace all living creatures and the whole of nature in its beauty.

~ Albert Einstein, 1954

In the last several decades, humankind has witnessed an unprecedented growth – practically an explosion – in the amount of information, knowledge and technology that is easily available to us. Discovery of the quantum world at the beginning of the 20th century gave science a new framework to view the world, and from that foundation sprung forth a whole new tree of scientific explorations. Although the majority of these explorations have not yet become a part of mainstream scientific thought, there is a plethora of frontier scientists and amateur explorers who have been quietly working their way through a constantly expanding field of knowledge. As the prominent British theoretical biologist, Rupert Sheldrake said, “...a very profound paradigm shift... is taking place in science: the shift from the mechanistic to an evolutionary and wholistic world view...” (Sheldrake,1997).

Over the years, starting with the discovery of quantum physics, multiple scientific theories have emerged which try to describe our world from a more holistic point of view. Among them are the theory of the

holographic universe, string theory, information theory, zero point energy theory, the morphogenetic field and the morphic resonance theory, and many others. All these theories point to the existence of some coherent and unifying “information field” that is related to our consciousness and might even help us to explain the phenomenon of consciousness itself.

Unfortunately, these ideas are still fairly unknown in the wider circles of the scientific community. The majority of scientists still subscribe to a Newtonian, predominantly mechanistic, materialistic point of view, especially in the areas of biology, medicine and other natural sciences.

In many ways, the same picture exists in the field of psychology and psychotherapy. In the last several decades, many new therapeutic approaches and modalities have been born, but they still live in the borderlands of therapeutic practice and new generations of therapists are generally unaware of their existence. For example, there are such fairly new developments as Holodynamics created by Vernon Woolf, Energy Psychology (with several separate branches, many of which utilize the knowledge of energy meridians accumulated in acupuncture); Arnold Mindell’s Process Oriented Psychology; Body (or body-oriented) Psychotherapy; Biodynamics Psychology and Psychotherapy developed by Gerda Boyesen; Brent Baum’s Holographic Memory Resolution, Dialectical Behavioral Therapy, Mindfulness psychotherapy and many, many others. Despite some research indicating the high effectiveness of several of these approaches, they have not received a wide degree of acceptance and recognition in the traditional therapeutic community.

As problems in society mount and lead to an overwhelmed and stressed-out public while managed care proliferates the mental health field, the effectiveness of psychotherapy and its duration become ever more important. Can new scientific theories help us to increase the effectiveness of therapy while decreasing the time required to achieve long-lasting results?

There are several psychotherapeutic approaches that utilize the new schools of thought and new scientific paradigms. One of these therapeutic approaches that is presented in this work is *Systemic Family Constellations* developed by the German psychotherapist, Bert Hellinger, a method which produces seemingly powerful and deeply transforming results. While widely used throughout most of the world, this approach is fairly unknown to the general public and the contemporary therapeutic communities in the United States. By shedding some light on this promising new therapy, the author is hoping to increase awareness in the mainstream therapeutic communities of its existence. A preliminary (albeit flawed), pilot study of the effectiveness of Family Constellations has been conducted in an attempt to determine whether the further investigation of this modality is warranted.

Background of the Problem

Even though research consistently demonstrates that psychotherapy in general is effective, the outcome of therapy varies greatly across all approaches and settings (Brown, Dreis & Nace, 1999). However, the last thirty to forty years of studies have failed to produce significant proof that some psychotherapeutic modalities and orientations are better than others in terms of outcome. In fact, more evidence indicates that it is not the specific therapeutic approach that makes a difference, but the client him/herself, the personality of the therapist and the quality of the therapeutic alliance (Hubble, Duncan, & Miller, 1999; Martin, Garske, & Davis, 2000; Seligman, 1995). Much debate and disagreement exist about what exactly works in psychotherapy. Over the years, more and more practitioners are turning their attention to the newest developments in other scientific fields in attempt to find the answers to this mystifying question. As a sign of the changes in the collective consciousness, more papers have been written in the last ten years than ever before on the necessity of a *holistic* and *unified* approach to all forms of the understanding of human functioning and dysfunctions, personality development and process of change, etc. As Magnavita (2006) summarized in his paper, “The evidence for unification can be seen in the trend among many scientific disciplines toward converging in support of the view that complex systems can be fully understood and studied only when they are conceptualized as *holistic*.”

In the same vein, more and more people have been turning to alternative forms of treatment including self-help materials for various kinds of problems. One of the possible explanations for this trend is a general disappointment by the public in the traditional forms of therapy. Even the skeptics who loudly criticize

“unproven methods,” admit that people “...avail themselves of complementary and alternative mental health treatments (including energy healing and laughter therapy) more often than conventional treatments.” (Lilienfeld, 2002).

However, the well-intentioned push of managed care for evidence-based therapies (EBT) and the general reluctance among many mental health professionals to attempt novel approaches have led to slow progress in this area. In addition, any method which is considered “unscientific” or “unsubstantiated” is usually met with fierce resistance by many academic clinicians.

Meanwhile, mental health problems present a serious challenge to society and affect millions of people every year. According to National Institute of Mental Health (NIHM, 2010), 26% of adults aged 18 and older can be diagnosed with some mental health disorder in any given year. For example, 14.8 million (6.7%) of all adults would have at least one major depressive episode during a given year. The situation is even worse with anxiety. NIHM (2010) reported that approximately 40 million Americans (more than 18 percent of all adults ages 18 to 54) suffered from various forms of anxiety (NIMH, 2010). Almost 20 million Americans aged 12 and older (8%) reported using illicit drugs during the previous year and almost 7% of the people in the same age group (or 17 million persons) reported heavy drinking in 2008. (SAMSHA, 2008).

As can be seen from these numbers, the need for effective mental health services remains rather high. As health care expenses soar and our country struggles with its current financial woes, the need for effective short-term psychotherapy increases tremendously.

In his review of the Consumer Reports survey of the effectiveness of psychotherapeutic services, Seligman (1995) noted that there seemed to be a correlation between the duration of therapy and its outcome. In other words, long-term treatments produced better results than short-term ones (Seligman, 1995). But even for brief therapies, the recommended number of sessions was at least several weeks. Considering our contemporary, hectic, fast-paced life and the limitations of the managed-care model of treatment, the therapeutic methods that can provide deep, long-lasting interventions, which are time-limited, become especially valuable.

It appears that the method presented in this work fulfills both requirements for effectiveness and the time-limited delivery of services. In fact, it has been noted that Family Constellations can produce long lasting results in just one or two sessions. Much anecdotal evidence, clients’ feedback and multiple case studies show the effectiveness and transformative power of this approach. Unfortunately, there is no formal, peer-reviewed research on the effectiveness of Family Constellations. This paper is trying to bridge that gap.

Purpose of the Thesis

The purpose of this work is twofold. First, an overview of several new scientific theories is presented and an attempt is made to explain the nature of the therapeutic relationships and therapeutic change using these theories. These scientific theories present a new paradigm which can serve as a framework to describe and explain the therapeutic approach of Family Constellations. The second task is to investigate the effectiveness of Systemic Family Constellations by conducting a pilot study.

Research Hypothesis

The hypothesis proposed in this work is that the Family Constellations approach is highly effective in solving certain emotional problems in a very limited amount of time. The pilot study is intended as a preliminary exploration to open the door for further research in this area if the results are promising.

Limitations

The limitations of the study can be attributed to the difficulty of contacting and gaining access to previous Family Constellations participants. The sample was drawn mostly from a pool of people who are interested in this approach and the existing clients of a few current facilitators. There is a strong possibility that people who filled out the questionnaire are biased. There was no control group for comparison of the outcomes. The surveys were anonymous and they collected self-reported results; no objective measurements were performed of the participant's mental state before and after their participation in constellations. The author assumes that the outcome results of the study might be higher than it normally would be in more natural settings. Therefore, these results cannot be generalized to a wider population.

Definition of Terms

Therapeutic alliance, therapeutic relationship – collaborative and supportive relationship formed between a therapist and a client during psychotherapy.

Effectiveness of therapy – “...applies to the effects of "clinic therapy" conducted "in the field," in the "normal" circumstances in which most therapies are provided.” (Pinsof & Wynne, 1995).

Systemic Family Constellations – a therapeutic intervention, approach developed by the German family therapist, Bert Hellinger.

New sciences, new scientific theories – areas of scientific exploration that are not yet widely accepted by the traditional scientific community, novel and vanguard scientific theories that have been proposed by various scientists.

Organization of the Remainder of Thesis

This paper contains the following sections: Chapter two presents an overview of research on the effectiveness of psychotherapy and on the common factors of what works best in therapy. A brief summary of several relevant scientific theories is given. An introduction and a brief description of Bert Hellinger’s Systemic Family Constellations are offered.

Chapters three and four describe the design, results and discussion of the results of a pilot study conducted to evaluate the effectiveness of Family Constellations.

Chapter five contains conclusions and suggestions for future studies.

CHAPTER II

Literature Review

Introduction

It is widely accepted in the mental health community and in the general population that psychotherapy “works.” Over the years, sufficient scientific evidence has been accumulated to support the belief that psychotherapy is safe and effective; it has enduring results for a large number of patients and across a broad range of problems. (Luborsky, Singer, & Luborsky, 1975; Seligman, 1995; Wampold et al., 1997). According to Smith & Glass’ (1977) review of 400 controlled evaluations, a typical client was better off after psychotherapy than 75% of untreated individuals. Another comprehensive review was conducted by Lipsey and Wilson in 1993. They evaluated 302 meta-analyses of the efficacy of the various psychological, educational and behavior treatments and were able to conclude that practically all of the treatment approaches had somewhat positive outcomes. The biggest study was conducted in 1994 by the *Consumer Reports* magazine. They surveyed around 4000 consumers to evaluate their experiences in seeking mental health help. Responses to this survey seemed to overwhelmingly demonstrate that psychotherapy was helpful in improving individuals’ sense of well-being and their general functioning (Seligman, 1995).

The Dodo Bird Verdict

Despite the evidence of the effectiveness of therapy in general, studies that compare the outcomes of various psychotherapeutic approaches and modalities are much less conclusive. In fact, American psychologist Saul Rosenzweig (1936) (as cited in Luborsky et al., 2002) came up with a hypothesis that later has become known as the "Dodo bird verdict." He suggested that difference between various models of psychotherapies is very small and non-significant and can be attributed to some common factors such as, for example, the relationship with the therapist. The Dodo Bird assumption has been hotly debated in literature for the last 30 years; it includes multiple meta-analyses and meta-analyses of meta-analyses and has enough voices on both sides. Several papers written over the years seemed to confirm Rosenzweig’s assumption (e.g. Luborsky, Singer, & Luborsky, 1975; Luborsky et al., 2002, Wampold et al., 1997). The very latest commentary by Budd and Hughes (2009), which offered an assessment of the thirty years of research of this question, concluded that the issue is still open and proving it one way or another might be impossible considering the nature of scientific exploration. However, the authors admitted that no convincing evidence exists that shows a clear advantage of one type of psychotherapy over others.

Common factors

If proven, the Dodo Bird effect poses a very important question: if it is not specific therapeutic approaches that work, then what? This is the question that the psychotherapeutic community has been grappling with for decades. Rosenzweig suggested that there existed some common factors, the main being the helping relationship with a therapist (as cited in Luborsky et al., 2002). However, there is much disagreement among professionals about the nature of these common factors. For example, Carl Rogers (1957), the founder of the client-centered therapy, postulated that several conditions, of which the personal relationship with a warm, non-judgmental and congruent therapist was the central one, were necessary and sufficient. Another school of thought was presented by Strupp (1973), who proposed three basic ingredients for facilitating therapeutic change: (1) creating and maintaining a helpful relationship by the therapist, (2) the power base from which techniques and interventions are used, and (3) the capacity and willingness of a client to benefit from the experience. Lambert (1994) came up with yet another perspective. According to him, 40% of therapeutic outcome could be attributed to the client and extra-therapeutic factors (for example, ego strength, resilience, social relationship, etc.), 30% to the therapeutic relationship, 15% to hope, expectations and placebo effects and 15% to specific techniques and intervention. (Lambert in Bergin & Garfield, 1994). In any case, it seems that specific techniques and interventions comprise only a very small percentage of a therapeutic outcome and the main focus is directed to “client factors,” “therapist factors,” and the client-therapist relationship.

As can be seen from the above, therapist-related factors can comprise up to 45% of the outcome in psychotherapy (30% relationship and 15% to specific techniques and intervention). There is much discourse in scientific literature about the high correlation between a “therapist variable” and the outcomes of therapy (e.g., Anderson, Ogles, Patterson, Lambert & Vermeersch, 2009; Horvath, & Symonds, 1991; Lambert & Barley, 2001; Okiishi et al., 2006). It seems that the therapist variable mostly takes two forms - “therapist effects” (personal characteristics such as warmth, empathy and congruence) and a “therapeutic alliance” (the therapist-client working relationship) – and both of these have been the focus of numerous research studies and meta-analyses. However, Lambert and Barley suggested that the therapist’s characteristics and the quality of the therapeutic alliance are not mutually exclusive, but are interdependent and overlapping (Lambert & Barley, 2001). Therefore, the term “therapeutic alliance” will be used in further writing to simplify matters.

Therapeutic alliance

The therapeutic alliance plays a very important and, according to some opinions, even the central role in psychotherapy. Much has been written on this subject over the years. Some researchers call it “...one of the most powerful predictors of outcome in psychotherapy...” (Catty, 2004). This concept can be traced back to Freud, to his idea of transference, though in his case it had a more negative connotation. It was further developed by various authors, including Carl Rogers, who made a huge contribution to the development of this idea by introducing his client-centered therapy. He stated that *interpersonal relationships* (with certain additional conditions) are necessary and sufficient for the process of personal change (Rogers, 1957). Then, in 1967 the term “*working alliance*” was introduced by Greenson (as cited in Horvath & Symonds, 1991). During the seventies, eighties and nineties the idea of a working therapeutic alliance had been further explored and redefined.

Nevertheless, no matter how much debate has been going on about the concept of the therapeutic alliance, it mainly revolves around the various theoretical aspects such as its correlation with outcomes, the personal qualities of a therapist, and the various characteristics of the therapeutic alliance (Catty, 2004; Crits-Cristoph, Barnackie, Kurcias, Beck et al., 1991; Horvath, Horvath & Greenberg, 1994; Horvath & Symonds, 1991; Howgego, Yellowlees, Owen, Meldrum & Dark, 2003; Luborsky, 1993; Martin, Garske & Davis, 2000). Unfortunately, it looks like there has not been much exploration into the fundamental nature of human beings or the fundamental nature of the bond between a therapist and a client. What is the essence of the therapeutic relationship, what is at its core? What exactly helps to bring about the change in a client?

It seems that in the process of therapy a new system or space is born, one that is bigger than its parts; it is as if the therapeutic alliance or relationship form completely separate, additional entity, a new medium. Could it be that this medium is precisely the agent of change that everybody has been looking for? Mahr (2006) calls this third entity the “collective wisdom.” He describes it as “together we know more.” He speculates that from

this "...together-knowing...new solutions actually become possible in all spheres of life...solutions which at first seemed inconceivable to us." (Mahr, 2006).

It appears that besides Mahr, very few practitioners have ever looked deeper into the process of change and therapeutic alliance than just the surface. Yet those who have, found themselves drawn into the realms of other sciences. For example, the New York psychoanalyst, Edgar Levenson (1976) and Catherine Johnston (1996) both came to regard the concepts of quantum physics as a possible explanation of the nature of change in psychotherapy and of the "relational space" (Johnston, 1996) formed between a therapist and a client. Thus, it brings the question: Can other sciences help us shed the light on the nature of therapeutic space and its effect on change in therapy?

New scientific theories

Traditional Western science is built upon the fundamental Newtonian view of the world as a collection of separate and isolated material objects interacting with each other. Despite all the progress made in the last hundred years, the natural sciences, including psychology and psychotherapy, still mainly subscribe to this world view. They still see people as individual entities, disconnected from one another. Our physical bodies and brains are all that matters. And according to behavior psychology, for example, "consciousness" does not even exist. However, the discovery of quantum physics at the beginning of the twentieth century challenged this view because it turned out that the laws governing our physical world did not work on the atomic and subatomic levels. Such phenomena as "non-locality" (an ability of two particles to communicate instantaneously, defying time and space), the "observer effect" and others indicate that there is more to world than meets the eye. It is important to note that some phenomena which emerged from the quantum theory have a direct relevance to the world of psychology. One example is the "observer effect" – the notion that the observing consciousness influences the outcome of an experiment and, in some ways, affects (and some scientists even think that it shapes) reality. The famous physicist, Niels Bohr (1958) put it this way: "...in the great drama of existence we ourselves are both actors and spectators." (Bohr, 1958).

The observer effect has far reaching consequences. It means that whatever we come in contact with is altered by the mere fact of our interaction. Is it possible that when we see our clients as functional, capable people, this very fact of our observation alters their perceived reality and brings these qualities out? Interestingly enough, the observer effect concept has become common knowledge outside of the quantum physics field and has led to the necessity of double-blind studies – to prevent the researcher's bias from affecting the studies.

Since the discovery of quantum physics, a number of scientists in different areas of human thought have tirelessly worked to create some unifying theory that would explain our world in a coherent and consistent manner, unlike Newtonian version which leaves out a lot of unexplainable phenomena. A quiet revolution in science is underway and the paradigm is shifting, though not as fast as desirable from a psychotherapeutic point of view. In this work, a review of several theories will be offered along with some ideas on how they might be applied to psychotherapy.

In the early seventies, two well-known scientists in their respective fields, David Bohm, a famous British quantum physicist, and Karl Pribram, a professor of psychology and psychiatry at Stanford University and a neurophysiologist, independently of each other proposed a new scientific theory, a framework that had the potential to revolutionize the whole scientific worldview. That was the theory of the universe as a hologram perceived by a holographic brain. Pribram speculated that what we "see" in the outside world are not actual objects but quantum frequencies and interference patterns which our brains are then converting into three-dimensional, holographic images. In that sense, brains do not produce thoughts, but merely serve as receivers and interpreters of information. One of the most fascinating properties of a hologram is that "...every part of a hologram contains all the information possessed by the whole..." (Talbot, 1992). It would mean that each one of us, as a part of a holographic universe, possesses information about the whole universe. If this is true, it would explain a lot of phenomena existing in our world that were always ignored by science due to its limited, materialistic perspective. Such things as miraculous healings, precognition, telepathy, remote viewing, etc.,

easily fit into a holographic perspective. It also provides a scientific explanation for Jung's concept of the collective unconscious.

The basic premise that can be derived from this framework is the *interconnectedness* of all things. In an attempt to explain the paradox of interconnectedness, David Bohm proposed that there exists a kind of new, unified field which permeates a deeper, subquantum level of reality. He called this field the *quantum potential* and postulated that this new field could provide an alternative explanation to certain previously unexplained phenomena of quantum physics. Bohm emphasized the importance of wholeness, but went even further and suggested that "...wholeness was in some ways the more primary reality..." (as cited in Talbot, 1992). It meant that the behavior of any part of the system was organized and affected by the whole. Bohm suggested that it did not make sense to talk about consciousness and matter interacting with each other, but that consciousness was just another, more subtle form of matter. In other words, "consciousness is present...in all matter..." (Talbot, 1992).

This is a very profound proposition. It means that on some very fundamental level we are all connected through our consciousness. And this suggests a completely different concept of reality than has been prevalent in the Western world. For the first time, science came very close to the realm of mystical and spiritual knowledge that has existed in Eastern traditions for centuries.

Over the years, more and more scientists have been accepting the idea of consciousness as being a primary "force" and a possible explanation of our reality. There was even a Quantum Mind Conference, organized in 2003 by the Center for Consciousness Study at the University of Arizona. The main topic of discussion was whether quantum physics could explain consciousness. Even though there was no agreement between different scientists as to the nature of consciousness and various opinions were presented simply as theories, the fact that this conference was conducted at all shows how far scientists have gone in their exploration of the subject (Novin, 2004)

Another interesting theory which is relevant here is the theory of *morphogenetic fields* and *morphogenetic resonance*. After fifteen years of research on plant and animal development, the prominent British biologist Rupert Sheldrake came to the conclusion that certain *organizing fields* exist that influence the morphogenesis of plants and animals. These fields are also known in biology under different names including biological fields, developmental fields, or morphogenetic fields. These morphogenetic fields affect the development of species by "...imposing patterns on otherwise random or indeterminate patterns of activity" (Sheldrake, 2005). They are transmitted from one generation to the others by means of non-local, morphic resonance, which serves as a kind of collective, instinctive memory. In this way, each member of species (including humans) is affected by and contributes to the collective memory of the group. Sheldrake also hypothesized that "...morphic fields underlie our mental activity and our perceptions..." (Sheldrake, 2005). For example, they might connect members of various social groups even when they are miles apart and provide them with some means of telepathic communication. Strong parallels can be drawn between Sheldrake's morphogenetic fields, Mahr's "collective wisdom", and Jung's "collective unconscious" and all of them can help in understanding of telepathy (though traditional science denies its existence), which in turn can serve as the foundation for the successful therapeutic alliance.

Sheldrake conducted extensive experiments on telepathy which were published in several peer-reviewed journals. For example, in one experiment carried out online, participants were asked to guess who sent them a message out of four possible senders. Out of 6000 trials, the hit rate was 1,599 hits (26.7%) which is statistically higher than the 25% of chance occurrence (Sheldrake, 2009). Another study where participants had to guess who called them over the phone demonstrated astounding hit rate 45% as opposed to 25% possible by chance alone (Sheldrake, 2009). Sheldrake proposed that telepathy and similar phenomena are natural occurrences and not paranormal.

But the real breakthrough work was presented by an award-winning journalist Lynne McTaggart in her book, *The Field*, first published in 2002. The author spent eight years traveling around the world and interviewing numerous scientists about their experiments and discoveries. What emerged from her quest was the undeniable evidence of some kind of unifying, pulsating energy field (called Zero Point Energy), which is

“...the central engine of our being and our consciousness, the alpha and omega of our existence” (McTaggart, 2008). Each chapter of her book described a different scientist in a different field of study, all of them conducting experiments the results of which would seem impossible from our mechanistic interpretation of nature. All these experiments and discoveries were summarized in the central point of her book, that nature was not “...blind and mechanistic, but open-ended, intelligent and purposeful, making use of a cohesive learning feedback process of information being fed back and forth between organisms and their environment” (McTaggart, 2008).

One cannot help but notice the striking similarity between the various concepts of “fields” offered by Bohm, Sheldrake and many other scientists mentioned in McTaggart’s book. They all seem to point to some underlying “reality,” a deeper level of consciousness that transcends our world and goes beyond any physical form or object. Is it possible that true healing and change in our clients happen when we help them access the deeper dimensions of consciousness and gain knowledge and understanding not available on the level of thoughts and words?

As Osborne and Baldwin (1982) argue in their article, only the awareness and self-knowledge acquired through acts of self-observation and phenomenological experience, which are closer to Eastern traditions, are capable of producing a real and long-lasting transformation. It is achieved by helping clients obtain “...glimpses of levels of experience which flow from the attainment of higher levels of consciousness” (Osborne & Baldwin, 1982). While the majority of Western psychotherapies rely on verbal communication, behavior change and intellectual analysis, the authors proposed that the only meaningful goal in psychotherapy should be the expansion of awareness and that the growth of personal consciousness needs to “...become the focal point for both client and therapist” (Osborne & Baldwin, 1982). One of the ways to facilitate such growth in a client is for the therapist to maintain his/her own high level of consciousness, thus creating a space for the client to expand. If we think about the world in terms of frequencies, then we can say that by maintaining higher frequencies of heightened awareness and *joining with the client*, we raise the frequency of the client’s consciousness by resonating with them. This might explain how the therapeutic alliance works to facilitate the change in a client and provides the scientific framework for the phenomenon which Carl Rogers observed in the client-therapist relationship.

If we were to accept the existence of the unifying information (or consciousness) field as the underlying force of the world we live in, it would open up a whole new ocean of therapeutic possibilities. The concept that nothing is separate, that everything is interconnected in the deeper dimensions of consciousness might lead to the development of completely new forms of therapy. Indeed, several examples of these new types of therapy have emerged over the last 30 years. One example which is presented in this paper is Systemic Family Constellations developed by Bert Hellinger. Even though Hellinger himself has not applied any of the newer scientific theories to clarify the inner workings of his approach, they can be used as a foundation to explain how this method works.

Systemic Family Constellations

Introduction

If we were to consider a method that produces powerful and deep-reaching results but lies completely outside the realm of understanding of our traditional Western science, it would be Systemic Family Constellations. Introduced more than thirty years ago by the German psychotherapist, Bert Hellinger, it followed in the footsteps of previous therapeutic schools. Hellinger was influenced by Gestalt therapy, by the work of Arthur Janov, the creator of Primal Therapy; by Eric Berne, who developed Transactional Analysis, and many others. The Family Constellations approach has gradually evolved over the years from *Psychodrama* by Moreno, Virginia Satir’s *Family Sculptures* and *Invisible Loyalties*, introduced by Boszormenyi-Nagy and Spark (Cohen, 2006). Even though the Family Constellations method is officially accepted by European family therapy associations and widely implemented throughout Europe, South America and countries of the former Soviet bloc, it is virtually unknown in the United States. Currently, there are perhaps a couple of dozen of practitioners of Family Constellations in the United States, though this situation appears to be rapidly changing.

Family Constellations is actually a kind of single-session group therapy, a process which can be described as "...a trans-generational, phenomenological, therapeutic intervention with roots in family systems therapy, existential-phenomenology, and the ancestor reverence of the South African Zulus" (Cohen, 2006). Phenomenology in this context refers to a direct, sensory and perceptual subjective experience of the participants. It is pre-conceptual "...knowledge through participation..." (Hellinger, 2003) and it is not guided by logic, reasoning, or will. The underlying idea is that we are not just biological and rational beings, but there exist other dimensions in our lives, the "knowing field" (Sheldrake, 1995), and by connecting to it we can gain insight and direct knowledge of certain facts and relations which previously were consciously unknown to us. It appears that during the process of a "constellation," the participants somehow gain access to the morphological field of our ancestors, our pasts and spiritual planes. This "knowing" or information field is what connects Family Constellations to the new scientific theories and is mentioned in the works of many other practitioners of systemic constellations, (e.g. Ulsamer, 2003; Roussopoulos, 2006). Roussopoulos (2006) mentions the zero-point field as one of several possible explanations for the underlying forces which make Family Constellations work. In fact, her statement about the zero-point energy field that "...information about everything that has ever happened in life, on Earth and in the cosmos is conserved within it. Not only that, but it is holographic - all the information is available at all times at any part of it..." – ties together Family Constellations, the holographic universe theory and the zero-point field concept.

During a typical constellation process, several participants are chosen to represent members of the client's family. When the representatives take their places during a Constellation, they create a picture, an image, or a slice of reality of the relational patterns and dynamics of the particular family which is beyond space and time. As Cohen (2006) stated, "...constellations create a three-dimensional matrix of the ancestral lineage that is not generally presented to consciousness in material form." This matrix or image, allows the process to easily and effectively reveal the hidden dynamics in one's family system. When the dysfunctional patterns in the family are restored on an "informational" or spiritual level during the Constellation, the effects of this process spill over into the physical dimension and often lead to concrete, tangible changes within the family, sometimes even influencing people who are not actually present during the session. As a result, people may report that children recover from diseases, spouses overcome addictions, and long-lost relatives suddenly "appear" in one's life. When performed properly, sometimes just one session is enough to solve very complex and deep-seated issues caused by systemic entanglements. In addition, it seems that the group energy created by the participants, aids in cutting through the powerful defense mechanisms of a client and it often allows them to resolve some early childhood attachment issues.

The Constellation Process

Constellation work is performed primarily in group settings. The size of the group varies significantly from 5 to 10 people, to as many as two hundred during some of the workshops given by Hellinger himself. Certain steps are followed in the typical setting. First of all, a client presents his/her problem. A facilitator clarifies some of the limited factual data: any significant events, people and relationships. Then the client (or the facilitator) chooses other participants to represent the members of his/her family and sometimes the client him/herself may be represented by someone else. The client then guides each representative to a certain position, facing in a specific direction (see Appendix B for illustration). Sometimes, the facilitator may suggest that the representatives themselves find their own positions by tuning in to their own intuition which taps into the "knowing field" and their bodies. The actual physical positions of the representatives in relation to each other will reflect the current state of the relationships in the client's family.

After substitute family members are placed, they describe their experiences in their current position and their feelings in the "here and now." Somebody might feel uncomfortable, "pushed out," isolated, crowded, angry, resentful, "stuck," lifeless, cold or hot. Sometimes representatives might fall on the floor or feel a physical pain somewhere in their bodies. In the case when a representative reports that "something is missing," other people can be brought into the Constellation as needed. Using feedback from the representatives, the facilitator may move people around (or suggest that they themselves move around depending on their feelings) trying to find the configuration where everybody feels comfortable and at ease. When this balance is found, the

tension that was there at the beginning of the Constellation dissipates. At this point, the client can be brought into the Constellation and asked to exchange places with his/her own representative. The facilitator might suggest that the client say some special phrases (e.g., “you are big and I am small,” “you died and I will live a little longer and then I will die too.”) or perform therapeutic rituals which might take the form of embraces, deep bows, or breathing with relaxation. This moment often brings a very strong emotional response and an intense release of feelings in the clients. Further interpretation of the events is not encouraged and the client is left alone to process and integrate his/her experience (Steifel, Harris, & Zollmann, 2002). Frequently, even though an emotional shift is felt immediately, the full effects of a Constellation may become deeper and more pronounced over time, sometimes taking several months or even years to fully emerge.

Theoretical Concepts

Even though Hellinger himself often claims that the facts and actual unfolding of events during a constellation are more important than any “...theory, belief, or ideology” (Hellinger, 1998), he nevertheless combined his observations made during hundreds and hundreds of Family Constellations into several basic postulates that were described in his numerous books. The following is a short summary of Hellinger’s main ideas and concepts.

Hellinger views a family as a multigenerational, extended system which includes parents, children, grand-parents; sometimes uncles and aunts and anyone else who might influence the family system. It might be, for example, a parent’s former spouse, a deceased child, or somebody’s long lost love (Steifel, Harris, & Zollmann, 2002). Every person that is born or brought into the system by marriage has *the right to belong*, nobody can be excluded. Because any family system tries to maintain equilibrium, when any members of the family are excluded (for example, former spouses, illegitimate children or family members who committed crimes or murder), family members in following generations will try to fill the vacuum to restore the balance and might identify with the missing members, often mirroring or repeating their fate. For example, if a divorced mother does not let her child get to know his/her biological father because she does not like some of his traits, the child might develop these traits in an unconscious attempt to “bring” the father into the child’s life. Hellinger calls this process “entanglement.” When the rights of excluded family members are reinstated (by honoring them, by acknowledging their fate, etc.), then balance is brought back and it frees other members of the family to live their own lives in a healthy, productive manner. Deceased people belong to the system as long as they are acknowledged and remembered by others (Hellinger, 2003).

According to Hellinger, family members are connected by a deep bond of love. He asserts that “...unlike other methods of classic family therapy, the most important element of my approach is the realization that behind any behavior, even the most unusual one, lies love. The hidden force behind all symptoms is also love. Therefore, it is very important that the therapist finds the point where all the energy of person’s love is concentrated because this is where the root of his family problem is, as well as a key to its solution.” (Hellinger, 2003). It is this bond of love that forces people to be *loyal* to their parents, grandparents and other members of the extended family. First introduced by Ivan Boszormenyi-Nagy and further deepened by Hellinger, these invisible trans-generational loyalties serve as unconscious regulators of balance, entitlement and merit and confine individuals to their narrow roles within a family structure. Family loyalties result from *relational ethics* which is an important dimension of any interpersonal relationship (Boszormenyi-Nagy & Spark, 1973).

Another very important concept in Constellations is the *orders of love*, which can be described as dynamic, systemic forces; laws that govern all the relationships between the various members within families. Love in the system can survive only when the systemic laws are followed. “Love is a part of order. The order was set before love and love can develop only within a framework of order. Order is a primary principle.” (Hellinger, 2003). These orders determine, for example, that energy flows from parents to children: parents give and children receive; that older members of a family have precedence over newer ones, and that the family group possesses a “...*group conscience* that regulates guilt and innocence...” (Cohen, 2006), which ensures family survival. Although it remains mainly outside of an individual’s conscious awareness, this group conscience determines whether the actions of a group member are in accordance with the unspoken rules, and if not, causes retribution, for example, some psychological or physical disorder in one of the descendents (Steifel,

Harris, & Zollmann, 2002). An additional aspect of the orders of love is the balance between giving and receiving. It works on an unconscious level by causing a negative psychological reaction when this balance is disturbed. In the Family Constellation approach, solutions to problems emerge when the orders of love are restored, for example, when excluded members of a family are acknowledged, respect is given, love is expressed, and reconciliation is accomplished (Stuck, 2006). Just an understanding and acknowledging of Hellinger's postulates can serve as a powerful addition to the conventional psychotherapy.

Limitations

The biggest obstacle in practicing Family Constellations is the training of facilitators and therapists. Whereas such therapeutic approaches like cognitive-behavior therapy or solution-oriented therapy follow some fairly standard procedures and can be systematized and taught, Family Constellations employs an entirely different approach. Practitioners of this method have to be completely "present" during a constellation, free from any preconceived notions and intentions and to be open to whatever emerges during the session. They have to be able to go beyond their limited logical thinking and connect to the wider "information field." As Albert Einstein said, "We cannot solve problems by using the same kind of thinking we used when we created them." According to Hellinger, a therapist has to be able to accept reality "as is," with all its terrible and dreadful aspects; he/she needs to be at peace with happiness and unhappiness, guilt and innocence, life and death. Only then can the therapist acquire the knowledge and power to be able to face horrible circumstances and sometimes change them for the better (Hellinger, 2003).

Of course, this puts unique requirements on practitioners. Their training cannot be limited to concepts and ideas; the main focus should be on the development of their own personal and spiritual qualities – even more so than in any other therapeutic approach.

Unfortunately, the fact that Family Constellations work the best in group settings limits its utilization as a stand-alone therapeutic method. However, many practitioners are trying to apply this method in individual therapy using various inanimate objects (e.g., wooden figurines, chairs, and even napkins) as a means to create an image that would allow the client to access the hidden dynamics in their family and resolve them. Interestingly, there are known cases when practitioners of Constellations used this approach remotely, over the phone or the Internet.

Application and Research

The growing body of case study data, the anecdotal evidence described in numerous books devoted to this subject, and the feedback collected from many facilitators and participants of workshops in different countries indicate that this method can be useful in solving a whole array of problems ranging from psychiatric disorders such as addictions, depression and anxiety to marital and relationship problems, and some medical issues such as cancer and MS (Steifel, Harris, & Zollmann, 2002, Lynch & Tucker, 2005, Cohen, 2006). This therapy approach can be essentially considered a single-session therapy, though it can be repeated as needed after some time for different aspects of the presenting problem, or for other problems as well. Constellations have also been used successfully in organizations to reveal and solve structural and organizational problems and in other larger groups.

The review of literature has revealed that some research has been done exploring the application of Family Constellations in various settings and for different problems. For example, British Constellations researchers investigated how applying systemic principles in a school setting might improve communication between students and teachers (Ingham, James, Roussopoulos, 2008). Also, the author has been notified that there were some studies underway of the use of Constellations for treating cancer, various addictions and other disorders. Unfortunately, the majority of these studies are published in the German language and are not easily available for an English-speaking audience.

However, it appears that there is no research or published outcome studies evaluating the efficacy of the Family Constellation approach for various problems. The current study is trying to fill this gap.

CHAPTER III

Methodology

The purpose of the current pilot study was to obtain preliminary data on the effectiveness of Family Constellations in solving certain client's problems. The hypothesis was that the Family Constellations approach is highly effective even when just one single constellation is performed.

Sample

The study utilized a convenience sample. It proved to be quite difficult to gain access to participants in Constellations. Three facilitators in the United States were approached with an appeal to distribute the link to the online survey to their clients. The second group of participants was obtained by appealing to the International community of constellations facilitators (all were members of an online Yahoo discussion group) to help in distributing a link to the survey. Several facilitators agreed to help and sent the link to their clients. All of the remaining participants were recruited by placing links to the survey on several discussion forums and message boards in Russia where participants and facilitators were engaged in discussions about Constellations.

Instruments

The survey used in this study was designed by the author. The questionnaire was developed in two languages –Russian and English (see Appendix A). Later, a French version was added. No validity or reliability data is available. Full anonymity and confidentiality of participants was guaranteed and no identifying data (names, contact information, etc.) have been collected. One of the interesting aspects of Family Constellations (derived from anecdotal data) is that even though sometimes the main symptom of a problem can be relieved in one session, it might take several months, or even years for the results to take hold. Because of this, a question about the depth of transformation was added in addition to a question about whether the presenting problem was solved.

Research Design

The study was conducted as a retrospective post-treatment survey. The survey consisted of nine questions; two of them collected demographic data (gender and age). The remaining questions collected data about the participants' previous therapeutic experiences and their experiences with Constellations. An assumption was made that if the participants reported that the presenting problem they came with to Family Constellations was solved, it indicated a positive outcome. In addition, respondents were asked to estimate the depth of their change on the scale from one to ten, one indicating no change and ten being the deepest transformation. Additional information was collected that described the client's presenting problem and what kind of dynamic was revealed during the Constellation. Later, a field collecting the participant's comments was added.

Procedures

The surveys (Russian and English versions) were created and posted online using the website <http://www.surveymonkey.com>, which provides an easy-to-use technology to create custom surveys. Several approaches were used to find individuals who experienced Family Constellations and would be willing to participate in the study. In the beginning, three American facilitators were asked to forward a link to the survey to their clients, however only one of them actually did.

In the next step, several Russian language forums and message boards were located on the Internet where people interested in Family Constellations participated in an exchange of information and discussions. Invitations to participate in the research with a link to the survey were posted on them.

Later on, the author joined the international online Yahoo discussion group for constellation facilitators from different countries and appealed to the members of this online community to distribute the survey among their clients. One of the members offered to translate the survey into French and a French version of the survey was posted online. Another constellation facilitator requested to have his own survey, so that he would be able to evaluate the effectiveness of the constellations among his own clients. All together, four facilitators distributed the link to the survey among their clients (two in the US, one in Canada and one in Russia). At the end of the study, four different cohorts of participants were generated.

All of the data have been collected over a ten month period.

CHAPTER IV

Results

The purpose of the current pilot study was to get preliminary data on the effectiveness of Family Constellations in solving certain client's problems. The hypothesis was that Family Constellations approach is highly effective for a wide range of problems.

Demographic characteristics and therapeutic experience

All together, 223 (N = 223) individuals participated in the study. They made up four different groups. English speaking participants formed two cohorts; one of them consisted of the clients of just one facilitator. He sent out 144 e-mails to his clients and 44 of them responded. The second English language cohort was a mixed group – clients of several different facilitators and possibly some facilitators themselves. Two others were comprised of Russian-speaking and French-speaking participants. The distribution of participants was as follows: 57.9% (N=129) - Russian-speaking multiple-facilitators group; 19.7% (N=44) – English-speaking multiple-facilitators group; 17.9% (N=40) – English-speaking single-facilitator group and 4.5% (N=10) – French-speaking multiple-facilitators group.

The following data describe the participants' demographic characteristics and their experiences with traditional therapy and Family Constellations. It applies to the total sample, across all four groups. 185 (82.9%) participants were females and 38 (17.1%) were males. Age groups differed significantly between different cohorts. The Russian cohort was younger on average, with 84% of participants falling into 20-40 age range, with the average age for the whole group being 32.1 years old. On the other hand, both English-speaking and French-speaking cohorts were quite older, with the majority of participants (68%) between ages 40 and 60. The average age for all three non-Russian cohorts was 46.3 years old.

The majority of the research subjects - 155 (69.5%) - had previous psychotherapeutic experience. On average, individuals participated in 2-5 Constellations, though some people had as many as 40-50 and one participant reported as having had 100 constellations. 33.6% of constellations happened 1-3 months ago, and all the rest were distributed almost equally (around 15%) across greater time intervals.

Presenting problems and outcome characteristics

Presenting problems were divided into several broad categories. Table 1 contains information about these categories and the constellation outcomes (whether participants considered their problems being solved or not). Across all cohorts, 86.1% of participants (N=192) reported that their presenting problem was solved and 13.9% of participants (N=31) reported that their problem was not solved.

It was assumed that a positive outcome could be registered if a participant answered “yes” to the question of whether a constellation helped to solve their presenting problem. However, some participants' comments indicated an intrinsic flaw in the survey design. Several participants mentioned that they could not answer this question explicitly. For example, one participant's presenting problem was an inability to conceive a child. She commented that even though she was still unable to become pregnant, the constellation provided her with insight and pointed to a further course of actions. Therefore she marked this question with the “yes” answer.

Table 1

Break Down of Presenting Problems and Their Outcomes

Presenting problems categories	Number of participants N (%)	Problems solved N (%)	Problems not solved N (%)
Relationship problems (with family, parents, children, intimacy issues, inability to find a partner, etc)	119 (53.4%)	103 (86.6%)	16 (13.4%)
Health concerns (physical symptoms, weight problems, disease, lack of energy, infertility)	27 (12.1%)	24 (88.9%)	3 (11.1%)

Mental health issues (depression, anxiety, addiction, low self-esteem, abandonment, abuse, anger issues)	31 (13.9%)	28 (90.3%)	3 (9.7%)
Problems with children (health, behavior)	5 (2.2%)	4 (80.0%)	1 (20.0%)
Professional or financial difficulties, organizational constellations	16 (7.2%)	12 (75.0%)	4 (25.0%)
Existential problems (loneliness, fear of death, purpose of life, loss, feeling of being stuck)	18 (8.1%)	15 (83.3%)	3 (16.7%)
Others (no presenting problem, general constellations, etc)	7 (3.1%)	6 (85.7%)	1 (14.3%)
Totals:	223	192 (86.1%)	31 (13.9%)

Another example was the constellation for a client with cancer. Even though, according to her comments, the constellation did not heal her cancer, it lifted her fears about an alternative treatment she had received and she is still cancer-free one year later. Technically speaking, the answer to the question of whether the constellation helped to solve the problem should have been “no,” but she chose “yes”. On the other hand, some people who replied to this question with “no” reported deep and transformative results. One participant commented that her particular problem was not solved, but the depression and heavy feeling she had lived with all her life have dissipated. Out of all people who said that their problem was not solved (31 respondents), seventeen (54.8%) reported the depth of transformation of 5 and higher.

The results for participants’ problems outcomes for different cohorts are shown in figures 1-4. The graphs represent the answers to question 8 of the survey: “Do you feel as though the Constellation helped solve your issue?”

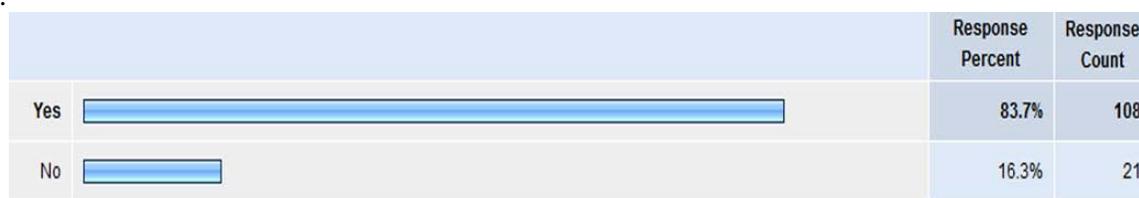


Figure 1. Results of Russian-speaking multiple-facilitators cohort.

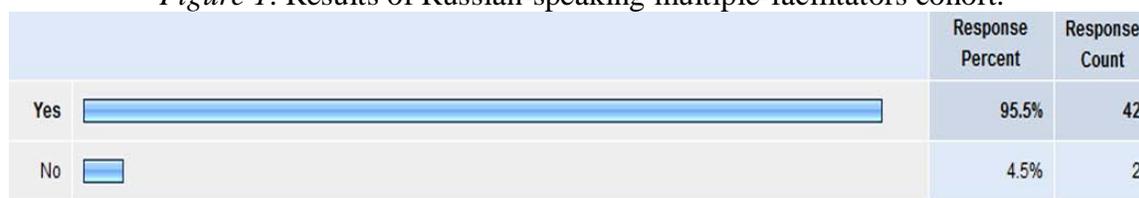


Figure 2. Results of English-speaking multiple-facilitators cohort.

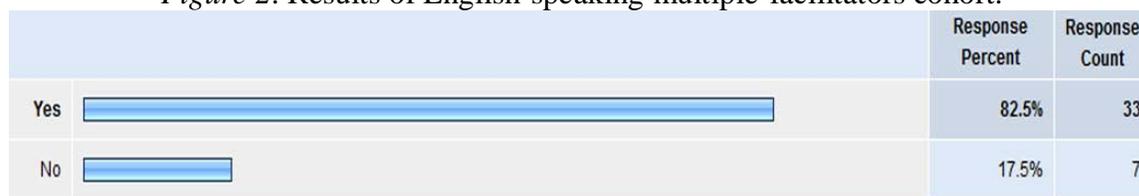


Figure 3. Results of English-speaking single-facilitator cohort.

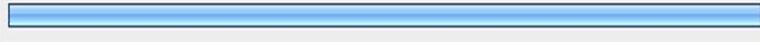
		Response Percent	Response Count
Yes		90.0%	9
No		10.0%	1

Figure 4. Results of French-speaking multiple-facilitators cohort

As can be seen from these graphs, the English-speaking cohort of multiple facilitators demonstrated the best overall results, with 95.5% positive outcomes.

An additional aspect of outcome was a question in which the participants were asked to estimate the depth of transformation following the most significant constellation. One interesting aspect of Constellations is that according to anecdotal evidence, it often produces a deep and long-lasting transformation after just one session. In fact, 113 participants (more than 50%) reported the depth of transformation between eight and ten on a scale from 1 to 10. The distribution of depth of transformation among participants for each cohort separately and across all cohorts is presented in figure 5.

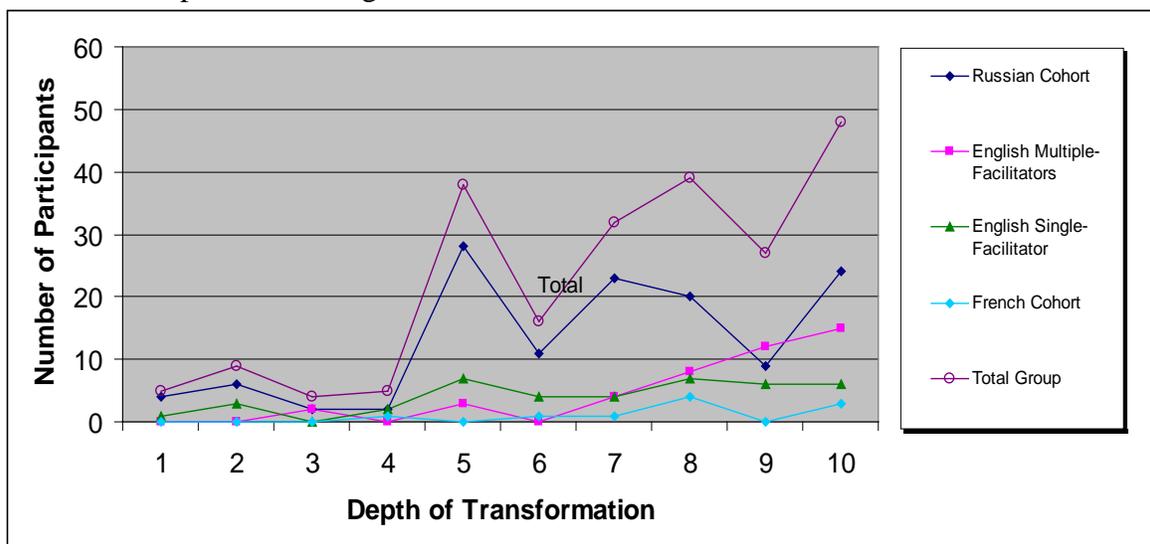


Figure 5. Distribution of depth of transformation among participants after a constellation.

As can be seen from this figure, the overwhelming majority of participants in the survey reported the depth of transformation after a constellation as five or higher. The average depth of transformation across all cohorts was 7.17.

Discussion

Several interesting findings emerged from the study. First of all, the main presenting problem in Family Constellations by far seemed to be the various issues with relationship - with parents, significant others, children (a little below 54% of all presenting problems). This category also included an inability to create an intimate relationship and find a partner. This points out to our, humans, fundamentally social nature. We are not happy when our relationships do not work. However, despite the seemingly significant success rate in working with relationships (86.6% of participants reported their problems solved), most probably Constellations cannot replace acquiring proper communication or conflict resolution skills and developing personality traits which make relating to other people easier and more meaningful. It is important to keep in mind that not one single method can be considered a panacea that would fix everything.

The area where the rate of positive response was the highest was in the category of mental health issues where positive results were reported in 90.3% of all cases. It might also indicate the area where the Family Constellations approach works the best. Anecdotal evidence suggests the possibility of curing cases of unexplained, deep and long-lasting depression and this study seems to confirm that. 17 cases of depression were reported during this study and only one of them was not resolved. This is an important and very promising preposition because depression and anxiety are the two prevailing mental health problems in the United States.

The participants' comments and the dynamics revealed during their constellations seem to suggest that in some cases the cause of depression is systemic and has roots in the family history. If this is true, it might open up a whole new perspective on the treatment of depression, especially in very resistant cases.

It also seems that Family Constellations can serve as a complementary treatment for addiction and substance abuse problems. Some research conducted in Germany about the application of Family Constellation in the field of substance abuse and dependence seems promising. In the author's current study, only one participant reported addiction as her presenting problems and she indicated that it was solved.

Another observation relates to the difference in outcomes between different cohorts. The best rate of outcomes was demonstrated by the English-speaking multiple facilitators group – 95.5% of positive replies. About half of that cohort (19 people) came from just one facilitator and other half came from participants in the Yahoo discussion group. Could it be that individuals in this cohort are highly enthusiastic about Family Constellations and therefore biased, which skews the result? Unfortunately, not enough information is available to arrive at a more precise conclusion. The lowest result, 82.5%, was recorded in the English-speaking single facilitator cohort. However, it can be speculated that this group was the least biased because clients were contacted directly, unlike all the other cohorts. Therefore, this particular result might in fact be the most accurate one. In addition, this particular facilitator performs a large portion of his work over the telephone or Skype (Internet-based telephone utility). If the Constellations approach can demonstrate such a high rate of positive outcomes in technology-assisted therapy, it might indeed prove the high effectiveness of this method as compared to others. In general, it seems that this approach is most effective in group setting, though no definitive data exist to support this claim.

It appears that the previous psychotherapeutic experience of the client does not have much influence on the outcome of a Family Constellation. Interestingly enough, there was a significant difference between numbers of participants with previous psychotherapeutic experience in the Russian cohort and the two English cohorts. In the Russian cohort, 48 individuals (37.8% of total number of Russian participants) did not see a psychotherapist previously. On the contrary, only 17.8% (15 individuals) of both English-speaking cohorts did not see a psychotherapist before they had their constellation. However, in each group, a positive outcome was reported by about 80% of participants with no previous psychotherapeutic experience. It suggests that prior psychotherapeutic experience is not necessary to gain benefits from Family Constellation work. The fact that the Russian cohort had a higher number of participants without psychotherapeutic exposure as compared to both English language cohorts might be related to a cultural attitude of mistrust and skepticism of the Russian people towards psychotherapy in general and their enthusiasm towards alternative methods of treatment. On the other hand, the high number of participants with previous psychotherapeutic experience in both English language cohorts might be indicative of dissatisfaction with traditional psychotherapy. More data is needed to confirm or disprove these findings.

It is important to mention that several people requested Constellations for some physical problems. Some of the cases can be considered quite remarkable. For example, one of the presenting problems was strong chronic “incurable” neurodermatitis which the client had suffered from since she was two years old. She reported her problem as solved and estimated the depth of transformation as 10. Another client claimed that her problem with infertility was resolved. Other resolved health issues included low back pain, endometriosis, and excessive weight. These healings might serve as an illustration of the concept of “information field.” When the information that underlies the problem changes, the problem may be resolved. This aspect of Family Constellations which transcends current scientific knowledge and is unexplainable from a Newtonian framework, might point towards potentially revolutionary discoveries in the areas of medical healing and psychotherapeutic treatment. These concepts were covered in the recently released documentary, *The Living Matrix*, which portrays several scientists who proposed that the medicine of the future would be “information medicine.” It was postulated that all diseases and disorders are caused by distorted information and when this information is harmonized and properly aligned, the disease disappears.

This study had several flaws and limitations. It did not utilize any objective measurements and comparison of pre- and post-treatment conditions, but relied instead on self-reported results. The sample was

not random; therefore a possibility of participants' bias cannot be excluded. No control group was utilized to compare results with. Considering the design of the study, its limitation and rather simple statistics, no validity of results could be established. The study is probably not generalizable to the entire population.

However, the findings presented here are largely consistent with the hypothesis that the Systemic Family Constellations approach is highly effective in treating a wide range of client's problems. However, inferences drawn from these finding must be considered tentative due to the above mentioned methodological limitations of the current study.

CHAPTER V

Conclusions and Recommendations

The purpose of this thesis was to investigate how new scientific theories might contribute to our understanding of psychotherapy and to explore the effectiveness of one of the newer approaches to therapy, Family Constellations.

The pilot study conducted for this purpose indicated that the effectiveness of the Family Constellations in solving the presenting problem was 86% and the average depth of transformation after constellation as reported by participants was 7.2 on a scale from 1 to 10. Even considering the limitations of the study and the fact that that rate of 86% is probably overrated due to participants' bias, it is still statistically significant. It has been proven that traditional therapy is effective and according to various studies, between 50 and 80% of clients show improvement after undergoing therapy (Asay & Lambert, 1999). However, there is a direct correlation between the duration of traditional therapy and its outcomes. In general, it was found by multiple investigators that about 75% of clients improve after 26 weeks of therapy and approximately 50% of clients show significant change after 8-10 sessions (Asay & Lambert, 1999). Taking these factors into consideration, it is easy to see that a "single-session" Family Constellation approach might indeed outperform the majority of other forms of therapy and appears to be superior to many other forms of traditional mental health help especially in terms of the correlation between the duration of therapy and its effectiveness.

These results are very promising, however a further and more thorough investigation of Family Constellations is needed to confirm, refine and validate (or invalidate) these findings.

Family Constellations also serves as an illustration about how utilizing access to the "knowing" or information field can create a powerful and deep transformation in a client. In the new millennium, the time has come for integration between different fields of science. Instead of competing with each other, information from various areas of study can complement other areas and help to explain previously unexplainable phenomena that abound in the world around us. Studying and understanding new scientific theories opens up a whole new exciting world of possibilities. If we, as therapists, embrace the idea of a unifying field of consciousness and learn how to intentionally access it, we may discover that we can join with our clients on a completely different level of being and facilitate previously unimaginable growth. We can take the idea of the client-therapist relationship first discovered and expressed by Rogers and develop it much deeper, armed with an understanding of its nature and forces behind it.

Yes, it will require a different kind of counselor, somebody who is courageous and open; who is engaged in their own personal growth and works to expand his/her own consciousness; who can be present and in-tune to the processes in the "here-and-now." It is a challenge, but it might result in more effective and transformative work and will benefit not only our clients, but will ultimately contribute to a better world.

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APPENDIX A

English Survey Sample:

1. Default Section

*** 1. You are (gender):**

Male

Female

*** 2. You were (how old) when you first participated in Constellations:**

*** 3. Have you ever seen a psychotherapist before?**

Yes

No

4. How many Constellations did you participate in as a client?

For the next several questions, please pick your most significant Constellation:

*** 5. Your most recent significant participation in a constellation:**

*** 6. Please describe briefly the issue you worked on during the Constellation (e.g., depression, relationships problems, addiction, pain, physical problem, etc.)**

7. Please describe briefly the pattern the Constellation revealed (e.g., I was merged with my aunt, there was a murder in the family, I was disconnected from my mother/father, etc.) (optional)

*** 8. Do you feel as though the Constellation helped solve this issue?**

Yes

No

*** 9. Do you feel as though your life has changed because of the Constellation? On a scale from 1 to 10 please rate the depth of the experience during and after the Constellations:**

	No Impact (1)	(2)	(3)	(4)	Moderate change (5)	(6)	(7)	(8)	(9)	Deep transformation (10)
Scale:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				

10. Would you like to leave a comment?

Russian Survey Sample:

1. Default Section

*** 1. Ваш пол:**

Мужчина Женщина

*** 2. Сколько вам было лет, когда вы впервые участвовали в Расстановках?**

*** 3. Был ли у вас опыт традиционной психотерапии перед тем, как вы приняли участие в Расстановках?**

Да Нет

4. Сколько Расстановок вы прошли в качестве заказчика?

Для ответов на следующие несколько вопросов, выберите вашу наиболее значительную расстановку:

*** 5. Когда произошла ваша последняя наиболее значительная Расстановка?**

*** 6. Пожалуйста, опишите кратко (не более, чем одним предложением) вашу проблему, с которой вы работали на Расстановке (например: депрессия, проблемы во взаимоотношениях с супругой(м), алкогольная зависимость, болезнь, проблемы с детьми и т.п.)**

7. Пожалуйста, опишите кратко, что показала Расстановка (например: я повторял(а) судьбу умершей тети, у меня была нарушена связь с мамой (папой), убийство в семье, ранняя смерть бабушки(дедушки) и т.п.)

*** 8. Чувствуете ли вы, что Расстановка помогла вам разрешить вашу проблему?**

Да Нет

*** 9. Как по вашим ощущениям, изменилась ли ваша жизнь после Расстановки? Пожалуйста, оцените глубину изменения по шкале от 1 до 10:**

	Никаких изменений (1)	(2)	(3)	(4)	Кое- какие изменения (5)	(6)	(7)	(8)	(9)	Глубокая трансформация (10)
Шкала:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Здесь вы можете добавить комментарий.

French Survey Sample:

1. Questionnaire

*** 1. Vous êtes (sexe):**

Un homme

Une femme

*** 2. Quel âge aviez-vous lors de votre première participation à une constellation:**

*** 3. Aviez-vous déjà travaillé avec un psychothérapeute auparavant?**

Oui

Non

4. A combien de constellations avez-vous participé en tant que client?

Pour les questions suivantes, pensez à la constellation la plus significative pour vous:

*** 5. Votre participation significative la plus récente à une constellation date de:**

*** 6. Veuillez décrire brièvement le problème que vous avez travaillé pendant la constellation (ex: dépression, problèmes relationnels, addiction, douleur, problème physique, etc.)**

7. Veuillez décrire brièvement la structure intérieure que la Constellation a pu mettre en évidence (ex: J'étais liée avec ma tante, il y a eu un meurtre dans la famille, j'étais déconnectée de ma mère/de mon père, etc.) (optionnel)

*** 8. Avez-vous l'impression que la constellation vous a aidé à résoudre le problème?**

Oui

Non

*** 9. Considérez-vous que votre vie a changé grâce à la constellation? Sur une échelle de 1 à 10, merci de bien vouloir estimer la profondeur de l'expérience pendant et après la constellation.**

	Aucun impact (1)	(2)	(3)	(4)	Changement modéré (5)	(6)	(7)	(8)	(9)	Transformation en profondeur (10)
Echelle:	<input type="radio"/>									

10. Voulez-vous laisser un commentaire?