THEORETIC OVERVIEW OF CIRCULAR QUESTIONS IN FAMILY AND SYSTEMIC THERAPY

Katica Stoimenovska Mantova

International Balkan University, Skopje, North Macedonia, k.stoimenovska@ibu.edu.mk

Abstract: Circular causality focuses on the reciprocal relationship between two events. The perspective of reciprocal relationships stems from the foundations of cybernetics, which refers to the regulatory action where one part of the system impacts another. This has helped the family therapist to make a change in how they view and understand interactions and to move away from linear causality where the intent of questioning is predominantly investigative, to circular questioning where the intent is to focus more on relational context and on the interactions between two events. While linear causality implies a process in which one event causes occurrence of another (or A causes B and B doesn't have any influence of A), circular causality implies that B has influence over the event A. Circular questioning is used in family therapy to yield information about the dynamics and relationships in a family. It was first introduced by the Milan Associates in their paper highlighting hypothesizing, circularity, neutrality as central guidelines for conducting a session. And it was use as means for conducting a systemic investigation of the changes and differences in family relationships which recursively support dysfunctional interactions or symptoms in the family. Circular questions allow the therapist to better understand the system and explore its nature and to explore the recurring contextual patterns of connection that make up the family system. It also represents a thorough investigation of the behavioral and ideological connections between the evolution of the presenting problem, changes within family relationships, and interactions around these dynamics reveals the family circle of relationships. It offers a change in family perspectives and encouraging family members to imagine how others think and feel by exploring the relationships within the family and introducing new ideas and ways of thinking to seeing things differently. This paper focuses on circular questioning theoretical basis. The aim is to make a brief review of the various types of circular questions and to clarify how these questions are applied in practice. By this we believe we will contribute to better understanding their essence and application in therapy. In this sense, we review the principle of circular questions, rules for submitting a circular question and we discuss the four categories of circular question; problem-oriented questions, questions oriented on the sequence of interactions, question for comparison classification and intervention circular questions. Circular questions are essential in family and systemic practice, their importance comes from their purpose - to generate multiple explanations and stories from a family situation and stimulate the curiosity of the therapist while avoiding their temptation to seek a one definitive explanation.

Keywords: circularity, circular questions, family therapy

1. INTRODUCTION

Circularity is one of the basic concepts in family and systemic therapy. It has its roots in cybernetics and it has been widely discussed in the family therapy literature by Bateson in his elaboration of the cybernetic epistemology of family systems. Thanks to the concept of circular causality family therapist were able to make a change in how they view and understand interactions and to move away from the traditional way of viewing interactions to a more relational context focusing on the interactions between two events. Namely, family therapists were able to move from the linear causality which implies a process in which one event causes occurrence of another, (or A causes B and B doesn't have any influence of A), to circular causality which implies that B has influence over the event A. This helped systemic therapists to see the problem in the dynamics of the relationships between family members.

The essence of circularity is its content, according to which behavior and belief do not appear in isolation, by themselves. We can best understand the family if we observe it in the context of the mutual relations of its members. According to this, the emphasis is on subsequent interactions that occur in cycles and are intertwined with family beliefs. These patterns of interrelationship and belief can in turn serve to reinforce symptoms. Examining the links between behaviors and beliefs, on the one hand, and changes that the symptom brings up in the family, on the other hand, reveals the relationship between symptom - system.

Circular interventions aim at the whole family to understand the nature of the circularity of relationships and behaviors in them, their connection not according to the principle of cause and effect, but according to the principle that the system is connected and in mutual interaction. There are three principals on which circular interventions are based - the principle of neutrality, the principle of hypothesizing and the principle of circular questions. Hypothesizing and circularity are core concepts of family-oriented systems therapy and should be viewed as specific to each model (e.g., Goldner, 1985; Riche' & Rosenthal, in press). The therapist's neutrality, on the other hand, is characteristic above all of the Milanese school (Papp, 1983; Palazzoli Selvini et al., 1980).

2. THE PRINCIPLE OF CIRCULAR QUESTIONS

The circular interview can be understood as a bridge that connects neutrality and hypothesizing. In circular interview the therapist's ability to conduct an interview based on feedback from the family, and as response to the information he received about the relationship comes to expression.

The therapist's focus is on the relationships that exist between family members and not on individual symptomatology. Each question focuses on the differences in the perception of family members in relation to events or relationships. The therapist tries to separate and clarify the confused ideas in family relations and then offers them to family in the form of new questions.

Circular questions are a useful tool for collecting information, adapted to generate hypotheses and interventions, which gives the family the opportunity to see itself systemically. It is thought that developing an awareness of the reciprocal relational connectedness of behavior can, to a large extent, in and for itself, produce spontaneous change (Penn, 1982; Palazzoli Selvini et al., 1980; Tomm, 1984b).

There are two intentions when asking the circular question — the first is to understand the system and therefore therapist ask questions in order to obtain information for/from the family. This gives opportunity for the family to listen and in this way to prepare the ground for change. The second intention is by asking a series of questions to give the family members the opportunity to listen to each other and to listen to feedback. By asking a circular question, therapist gets a map of the family as interrelated relations.

There are also few rules therapists refer to when submitting a circular question: in order to find out about one member of the family, we ask the other; in order to explore topics, we ask each family member the same question; through a series of circular questions, we discover: - feedback links within the framework of the family; - feedback relationship between the family and the therapist and - with circular questions, we lead the family to think for themselves, and to evaluate themselves from a different angle and in a different way.

There are an infinite number of different circular questions and numerous ways of their classification. According to one of them, circular questions are placed in four categories, and they are:

Problem-oriented questions;

The question oriented on the sequence of interactions;

Question for comparison – classifications;

Intervention circular question (they give material for change).

In all types of questions, therapists introduce dimensions: present, past and future - a hypothetical situation. Within the framework of each time dimension, the following can be examined: - differences or changes within the family in terms of relationships, - beliefs or behaviors of the members of the family or between them and the rest of the family; - agreement or disagreement between family members; - explanation of why such relationships or interactions continue to be the way they are and what the intentions and meaning of certain behaviors are.

3. CIRCULAR OUESTION CATEGORIES

3.1. Problem-Oriented Ouestions

Usually, therapists begin the first interview with problem-oriented circular questions in order to define the problem and elicit information from each member regarding their perspectives on the situation. These questions start with exploring the present ("What problem is the family facing now?"), then explore the past ("When did this problem first arise?") and explore everyone's expectations about how it might be in the future or in some hypothetical event ("If this situation remains as it is now and in the next five years, what will you do then?").

By using this question, the therapist tries to understand how each family member perceives the existing problem in the family. He is exploring the point of view of everyone by asking them to explain the current situation (their hypotheses, if any, why they consider it a problem or why that problem exists). Children will often avoid identifying problems in the family. They can answer questions about what kind of changes they would like in their family.

3.2. Questions Oriented on The Sequence of Interactions

A question oriented on the sequence of interactions are used by the therapist in order to examine the interactions that are related to the existing problem. Using this questions therapist tries to discover the entire cycle or order of behavior among family members, who may be in continuous interaction with the symptom and in this way consolidate it in its lasting. Some example questions that should be asked to each one of family members are: "Who does what and to whom?" (In relation to the problem, symptom or hypothesis of the therapist). The circular view of the problem is obtained when the entire cycle of repetitive interaction becomes clear. When we are talking about questions oriented on the sequence of interactions, we need to have few things in mind:

- It is important to inquire about specific mutual behaviors (e.g. the daughter is asked: "When your mother is asking your brother to clean his room and he is refusing it, what does you dad do?", "And then what does mom do?", "what happens after that?").

- Another important thing is that the therapist should inquire about the differences or changes in order to observe and examine the consequences of the changes, (e.g. "Has your brother always behaved like that? ", "What is the difference in his behavior now? ", "How did dad react to such a situation early on? ".
- It is also important that questions should be used in connection with the presumed situations in order to take away the power from the individual, who is threatened with inappropriate behavior, to manipulate the family: (e.g. "would this happen if your brother doesn't/have clean the room?", "would your father do that to you?", "would your mother do that?").

It should be asked who agrees with whom in relation to the presented order of behavior, e.g. "Who agrees with you that mom yells at your brother every time he wants to go out with his friends?".

Every family member should be asked for an explanation for the behavior of the member in question, in relation to the problem. Their explanations for the differences and changes that have occurred should be sought. They should ask themselves what meaning certain behaviors, reactions, symptoms, expressions, or suggestions have for them and what meaning, in their opinion, it has for other members. These questions serve to examine cognition, values, rules and myths about how it is and what should be (e.g. "How do you explain that the father often leaves home? ", "How does your mother explain your dads going out?").

3.3. Question For Comparison - Classification

With questions for comparison and classification are examined relationships, beliefs, values, attitudes, thoughts and feelings. The members of the family are also asked to describe the behavior and beliefs of the other members and to define the relationships that exist between the family members. Questions should be asked of each family member that relate to the other members: their behavior, beliefs, work they attach importance to, thinking, traditions, habits, feelings and relationships.

Here it is important that the family members are asked to list and to compare the similarities and differences that exists between them and to rank them by degrees; also, the alliances should be explored and "classifications" within one generation, between generations and trans generationally should be examined. These questions can be: **Direct question** – asked directly to the family member, example - "With whom are you closest?", "Who worries the most when a problem will arise?", "Who spends the most time with whom?" or **Triadic question** - when we turn to one family member to give a comment, i.e. his perception of the relationship between the other two members of the family, where new questions that are asked are based on the previous answer obtained from a family member.

This technique of asking questions represents the metacommunication of one member of the family in relation to the relationship between the other two. Due to the fact that it happens in their presence, the general rule in dysfunctional families for relationships to remain undefined and unclear is violated. Defining unclear relationships is also a key therapeutic intervention (e.g. therapist ask the sister: "What does your mother think when your brother doesn't clean his room?", therapist ask the brother: "What does your mother think when you don't want to clean your room?", we ask the mother: "What do you think, does your son is making a good judgment of what you think in that situation?").

Another important thing that should be explored are differences or changes that happened in alliances over the time. It is necessary to examine how these changes can be related to the existing problem (e.g., "How is it that the behavior of the brother bother the mother differently than the father?", "How is this family different from your primary family?", "How close is your husband to the children compared to your father when they grow up?", "Who will be closest to the mother when you all going to leave?").

It is also important to be asked who agrees or disagrees with whom, because in this way the therapists will get information about relationships (e.g. "Who disagrees the most with mom?", "Who in the family agrees with you that dad is closest to your brother?", "Do you agree with mom that they got along well before you left the house?", "Do you agree with your daughter that you and your husband would divorce if she leave the house?" etc.).

Family members should be asked to explain the meaning of unions, dissolutions and patterns of relationships in the family (e.g. "What leads you to the idea that father and daughter are the closest compared to other family members?", "What do you think that their closeness means?", "How do you explain the distance that existed between you two at that time?", "Explain why you think that your parents would not divorce if you have left home?" etc.).

3.4. Intervention Circular Ouestions

The fourth category of circular questions - Intervention circular question, differs from the rest by its purpose: they are used to provoke family patterns and interactions after the existing interactions in the family and value systems are clarified, and the hypotheses are confirmed. These are the questions that initiates the change. Redefining the problem or positive connotation, paradoxes and metaphors serve as an indirect way to obtain new information and opportunities for change. Based on the reaction of the family members to the intervention questions, information can

also be obtained with the help of which the hypothesis for the relationships and beliefs that contribute to the maintenance of the symptom is confirmed or rejected.

Few things are worth to mention regarding these questions. First is that this type of circular question should be used only when sufficient information will be obtained from the family to be able to assess the degree of rigidity, and some working hypotheses would receive adequate validation.

Second is that therapist should start with those questions which are the least offensive and which threaten the family members the least, in order to test the family reaction.

Third thing is that questions should be asked that will lead the members of the family to try to introduce new behaviors:

- one should ask how the identified child will learn to adopt the desired behavior, each family member should ask themselves what they think would be effective and what would not. Their suggestions should be used, and some suggestions should be given added, including the wanted reaction, and maybe even a paradox (eg. "What do you think would help your daughter the most to start sharing her feelings with others?", "Do you think it would be effective to start asking yourself every day how she spends her day?".
- If in the family one parent keeps to the side, the children should be asked: "What did you do with your father in the past week?".
- If it is assumed that there is a loose marital relationship, the question should be asked: "How much time do you spend alone as spouses and do some pleasant activities instead of parties? ", "How often do you sleep together? " etc.
- It might be interesting to challenge some belief or family rule that seems rigid. At the same time, it should be careful to not be judgmental, but some other option should be used, such as "What would happen when you would offer to help your wife around the children once a week?".
- An attempt can be made by setting new frameworks or paradoxical circular questions (e.g. "How did your son learn to be creative?", "Who else is prone to creativity in your family?" (positive connotation for "disobedient" or "dissolved"), "What, in your opinion, would your parents do if you told them that you are not ready to change, that they need you to stay at home and not go to work, to watch over them while you getting old?").

It may happen that the more rigid and dysfunctional the family is, the more necessary it is for the intervention to be as direct as possible, in order to enable the achievement of positive changes. To the extent that this is true, these types of questions must be used very sparingly and carefully. In this way, this approach will be useful to the extent that the family is prepared to experiment with alternative behaviors, even though this has not been directly stated. Intervention questions can be used as an indirect method of learning how to solve problems together and make decisions.

4. CONCLUSION

Circular questioning is a technique used in systemic <u>family therapy</u> to "invite participants in a conversation to consider relational aspects of the topic being investigated" (Evans & Whitcombe, 2015, p. 28). Circular questions are used to help define the problem, understand interactional sequences, assist family members in comparing and contrasting each other's behavior, and they are used as interventions. The goal of circular questioning in family systems therapy is to invite the family members to learn about themselves by exploring relationships, behavior, and responses to each other behavior. Asking questions about how the family relationship system works now, how it worked in the past, and how it might work in the future gives a lot of information about the differences in family. From this information the family learns how their system really works and challenging their belief about how it works can give them more options for change.

Each type of circular questions has its please in therapy session and used properly can be beneficial for the therapy. However, we must not forget the fact that therapy has a much greater importance than the techniques that are applied. Therapists must be able to understand that every family is unique, but also flexible and creative. Therapists must always keep this fact in mind when using any of the techniques, even when using circular questions.

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