

INTRODUCING SYSTEMS-CENTERED® THERAPY

Developed by Yvonne M. Agazarian, Ed.D.

Systems-centered practice is developed from a theory of living human systems and tests the hypothesis that systematically modifying defenses, in the context of the phases of system development, will reduce the forces that inhibit change and release the drive so that it can be directed towards the goals of change.

Systems-centered therapy (SCT)

Systems-centered therapy assumes that self-centeredness is the major source of personal and interpersonal pain. SCT enables a shift from self-centered relationships to an increased awareness of the self in a systems-centered context. Every context has its own goals, and every change in goal requires a corresponding change in role, if people are to relate to each other in a goal-oriented way. With systems-centered awareness comes an increasing ability to make the transitions in relationships that are required in the multiple contexts of every day, both at home and at work.

Systems-centered therapy systematically weakens the restraining forces to change by modifying defenses in a structured sequence that paces the patient's ability to choose. In the process of modifying each defense, the patient acquires skills that increase their ability to undo their own defenses. As each defense is undone, the patient is able to take the fork-in-the-road away from the symptoms, generated by their defensive responses; and towards discovering the conflicts, between their impulses and the fears of their impulses, that were defending against. Through this process, patients regain their ability to use their common sense (and existential humor!) to manage the every day conflicts between themselves and reality.

Clear outcome criteria for each step in the sequence of defense modification locates the patient in the SCT treatment plan. Because each defense modification addresses a specific and different symptom, therapy can be delivered either continuously or chunked into modules. SCT can therefore be applied to the goals of both short-term and long-term therapy.

For more information: Visit the SCTRl website at www.systemscentered.com

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THE DIFFERENCE BETWEEN FUNCTIONAL AND STEREOTYPE SUBGROUPS

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FUNCTIONAL SUBGROUPS

all subgroups
join around similarities
and split around differences
functional subgroups
contain and explore differences
instead of stereotyping
and scapegoating them

functional subgroups
join around similarities
and split differences between them
functional subgroups "contain" all conflict
within the group-as-a-whole

each subgroup discovers
new differences
by exploring the similarities within them

so each subgroup discovers
new similarities
by exploring the differences between them

when the differences within each subgroup
join with the similarities between each subgroup
the group-as-a-whole transforms into a new group
able to work differently from the old group

Re-integrating around similarities.
after deliberately splitting around differences
moves the group-as-a-whole
along the path to its goal

functional subgrouping
upsets the social order
by making a place for everyone
and letting everyone find their place
to make the social system work

STEREOTYPE SUBGROUPS

all subgroups
join around similarities
and split around differences
stereotype subgroups come together
around obvious similarities
like black and white,
male and female, them and us

everybody knows
how to make stereotype subgroups

everybody knows
what to do and what to say
to make top dogs, under dogs and little dogs

everybody knows
how to keep the ups up
and the downs down

everybody knows
how to keep the ins in
and the outs out

everybody knows
how to make scapegoats of each other

Stereotype subgrouping
discriminate differences
and won't integrate them

stereotype subgrouping
manages the hatred and fear
that is aroused by differences
by creating a social pecking order
by having a place for everyone
and keeping everyone in their place
to make the social system stable

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