Spontaneity, Sociometry and the Warming Up Process in Family Therapy

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The central task of the family therapist is to help the family generate spontaneous interaction with one another. Spontaneity is the catalyst for emotions, thoughts and actions, and the fact remains that people need association with others to spark their spontaneity. Family members can do this for one another; however, families in need of help oftentimes have lost the ability to relate to one another at this level. Many families requesting therapy have a style of interacting which blocks spontaneity; rejection or isolation of members is the result.

When a family seeks help, the family therapist must ascertain if family members are experiencing difficulty because 1) the criteria for membership within the family are not conducive to spontaneous participation by each of its members and/or 2) individual family members do not possess an adequate process of warming up to their thoughts, emotions and actions. Stated another way, the therapist needs to assess if the norms of the family disallow spontaneous interaction, or if the expression is no longer available because the individuals have long ago blocked its route within themselves. Often the therapist discovers that both of these conditions of difficulty are operating. Helping the family system and the individuals within it becomes the focus.

Theory

In 1933, J. L. Moreno, M.D., officially introduced Sociometry at a medical convention at the Waldorf Astoria Hotel in New York. Exhibiting his charts to those in attendance, Moreno displayed configurations of red, blue and black vectors and presented a visual illustration of social forces operating within a system (Moreno, 1953, p. xiii). Choosing to elucidate a complex thesis through concrete visual form, Moreno initiated an entirely novel process to explain individual dynamics and group behavior. This process was the culmination of years of sociometric research and theoretical development which laid the foundation for his subsequent publication, Who Shall Survive? (Moreno, 1953). Over the years people have extracted and adopted parts of Moreno's concepts and techniques, e.g., the sociogram, psychodrama, sociodrama, role playing, group dynamics and group psychotherapy, and struggled to understand the relationship of the warming up process to spontaneity and sociometry.

Spontaneity is energy with specific characteristics which differentiate it from boredom, fear, depression, anxiety and rage (Hollander, 1979). Spontaneous energy has parameters, a here and now focus, a goal of creativity, is adequate to the context and is novel. “Spontaneity operates in the present, now and here; it propels an individual towards an adequate response to a new situation or a new response to an old situation (Moreno, 1953, p. 42). It is, therefore, the catalyzing agent for our emotions, thoughts and acts.

The process which activates spontaneity is called the warming up process (Moreno, 1953, p. 42). Each human being has an individualized manner of preparing to respond either emotionally, intellectually, physically or spiritually. The process occurs swiftly and often unknowingly. Frequently attention is paid to the end product of the process, i.e., the thought, the act, the emotion and not to how it developed. (How it developed is much more difficult to ascertain.)

The warming up process is circular. The nature of the warm up determines the completeness of any act, thought or emotion. Likewise, the completeness of the expression of the act, thought or emotion dictates the fullness of the integration-termination; and incomplete terminations interfere with the ensuing warming up process. People encounter difficulties in their communications when their warm ups are incomplete (Moreno, 1953, pp. 39-42).

What causes an incomplete warm up? Consider for a moment that each expression has its own pathway. Each act, emotion or thought requires a unique preparatory period for complete involvement in the expression of the experience. Through the basic socialization process, some of the paths for expression may become blocked, and the warm ups cut off, leaving an unspontaneous state and an inability to respond adequately. An individual may live for years not knowing how to cry, to be angry or to think in a certain way, because the warm up has long ago been blocked or undeveloped.

For others, the process of warming up is well known; however, they fear the consequences if they allow themselves to flow naturally. They inhibit expressing themselves to avoid rejection and/or isolation with the group of people with whom they are associating. The end result is an unspontaneous state.

Individuals require access to their warming up processes; they need a range of expressions available to them, i.e., spiritually, physically, emotionally and intellectually. The more channels they have open the more spontaneous and creative their lives. When spontaneity is low, people experience varying degrees of impulsivity, boredom, anxiety, fear, depression or rage (Hollander, 1979).
Sociometry

People do need people. Many fight this concept because they confuse needing people with being defined by others and/or with others assuming responsibility for them. The truth of the matter is that associating with other people activates many warming up processes. To experience social isolation and/or rejection in all spheres of life is tantamount to a living death. Nearly everyone knows this intuitively. Individuals will sacrifice their integrity to maintain relationships and consequently blame and condemn their need for others.

Spontaneity is required to attract others for association, and association is needed to experience spontaneity. Spontaneity begets spontaneity (Moreno, 1970, p. 9).

Moreno describes the process of social gravitation as one where individuals systematically make selections and gravitate to one another (Moreno, 1953, p. 3). Consider, for example, the development of the new group. As strangers meet, they move toward some people, away from others and ignore still others. What evolves is a rather simple organizational structure with dyads and triads interacting with or standing in close proximity to one another, and individuals standing alone on the periphery. Most people gravitate to individuals who they believe will help them activate their warming up processes. If, for example, a woman is well aware of her fear of new groups, she may look for a kind, gentle face and stand next to that person to help her feel calm and clear-headed. Another person knows that if he can discover the starting time, the leaders, and the goals of the group, he will be able to generate his warm up to its optimal level. Each person uses unique criteria when choosing associations.

The organization changes as the spontaneity of the members rises. Choices are constantly being made and the criteria continue to develop. The woman who needed a kind face suddenly decides she would like to know what time the meeting begins and chooses someone who might have that information, and once that need is satisfied she realizes that the man she chose is from her neighborhood and they begin chatting; a new warm up has begun. They look animated; another woman is attracted to the energy and joins them. A short time later a friend of the second woman joins the triad, the conversation changes, spontaneity lowers, anxiety rises. They do not know how to find a criterion which can include all four members. They form their natural dyads and continue talking. Later, the first woman talks enthusiastically to her partner and then to the other dyad about the upcoming meeting, and the foursome finds a route through which to interact. A man who has been on the fringe joins the group.

A woman stands on the periphery impatiently waiting for the meeting to begin. She is consumed by her concern that she will not have time to complete her grocery shopping before supper. She peruses the group and can see no one interesting. She notices that no one approaches her, and it reinforces her belief that people rarely reach out and that her concerns about grocery shopping merit more consideration.

Norms, the prescriptions and proscriptions which govern member behavior, are evolving. The people, through their verbal and nonverbal interaction, determine what behaviors, feelings and thoughts are valued. Some people are highly chosen, they seem to embody what is valued at that point in time; others are actively rejected, they seem to be the antithesis of what is valued; and some people are not noticed.

When criteria for membership are narrowly defined, the likelihood of people being isolated and rejected is higher. When someone is in an isolated or rejected position in a group, that one has difficulty activating the warming up process and will instead be bored, afraid, depressed, anxious or enraged. When people are unspontaneous they disrupt, interrupt and/or want to destroy. They have no spontaneity operating for them which would help them create and experience others; on the contrary, they only want to reduce their own discomfort. They cannot catalyze others' warming up processes; others sense this and interactions are avoided.

Focus: The Family

There is a natural selection process for interaction in all families. The process results in an informal social structure which slowly evolves between and among members of a family; it is profoundly powerful. It influences family members' self-esteem, and their ability to share, trust and take risks. Members spontaneously are influenced to choose each other for association by their natural selection process. The interaction creates and acts within the context of the family norms. Individual members vary in their ability to meet the norms (criteria) established by the composite of members (family). Families which have narrowly defined the membership criteria will have more isolated and rejected members in their ranks than those which can incorporate a wide repertoire of feelings and behaviors. One major task of all families is to develop a variety of criteria which allows each member to be a part, i.e., actively integrated, for in the absence of this developmental process isolated or actively rejected individuals will disrupt the family.

Fortunately, the majority of people have a small number of collectives of people to which they feel they belong, e.g., work, educational, religious, and/or social. However, many of the people who present themselves for therapy have for a variety of reasons closed themselves off and no longer spontaneously express themselves in their primary relationships. The central tasks of the family therapist are: 1) to help family members discover their individual warm up processes and, 2) to examine the criteria for membership, i.e., those norms which are disallowing or allowing spontaneous participation by each of its members.
Case Example

A family reached out for help when fourteen-year-old Linda began skipping school, had been discovered smoking “pot,” and would not verbally communicate to her sixteen-year-old brother, David, or forty-two-year-old mother, Joan. When the three came for counseling the problem was defined (by mother) as Linda’s inability to communicate.

The mother and son had a warm, spontaneous relationship. They valued one another’s brightness, ability to articulate their beliefs, and physical attractiveness. They could communicate intellectually, emotionally, spiritually and physically with each other at levels of intimacy in which each could express herself or himself spontaneously and creatively. They could naturally and freely disclose themselves. Mother and son “clicked” with each other and spontaneously facilitated the growth of the other and expressed positive feelings about each other and themselves.

Fourteen-year-old Linda was painfully shy, perceived herself to be an inept, fat, plain girl with “dishwater-blond” hair. She focused her gaze upon the floor while speaking, and her blank expression would only be altered by an occasional tear which would trickle down her face. When Linda entered the conversation, spontaneity was reduced to a minimum. She was sociometrically isolated and rejected in the family; and no amount of interaction, given the status quo, would integrate her.

Linda had no close friends and accused the kids at school of calling her names, e.g., “Fatty.” Her “first love” had recently found someone else. She felt as isolated at school as she did at home. She came into counseling welcoming the opportunity for someone to listen to her pain.

David, on the other hand, excelled academically, was excellent in sports, and was one of the most popular boys in his class. He had learned how to influence his environment. He appeared satisfied with his active life.

Mother, Joan, was a successful lawyer and single parent, a warm, sensitive woman who was quite pleased with the management of her life. She once had viewed herself as an “ugly duckling” and had recently experimented with her sexuality and found herself to be vital in relationships with men and women. To be intimately involved with her daughter meant an acknowledgement of her own deeply buried feelings of ineptitude and inadequacy. While in the process of developing more positive feelings towards herself, she avoided communicating with her daughter and avoided feeling the depth of her low self-esteem. She felt intrepid about her growth and could not allow herself to slow down to face herself inwardly or her daughter.

Interventions of the Marriage and Family Therapist

The family therapist can be useful as a change agent in the family system by influencing the norms and helping individuals find new pathways for expressing themselves. The emotions, thoughts, and the behaviors of the therapist when in the presence of the family act to:

1) Help generate spontaneity among family members.
2) Develop sources of information for what are acceptable and unacceptable thoughts, emotions and behaviors within the family system.
3) Provide indicators for locating the power and determining who feels isolated and/or rejected within the system.
4) Help change the norms of the system.

The therapist can help generate spontaneity among family members. Given that the central task of the family therapist is to generate spontaneous interaction among family members and given that spontaneity begets spontaneity, the spontaneity of the therapist is a vital ingredient in the therapeutic process. It is incumbent upon the therapist to know his or her particular process for warming up. Once spontaneity is high, the existential relationship between therapist and client(s) can fructify and learning can occur such that the nature of the interactions can be changed.

The therapist’s experiences are sources of information for what is acceptable and unacceptable within the family system. The therapist is in a precarious position because he or she is as susceptible to being isolated or rejected for “breaking the rules” as is any one of the family members. The therapist can also be socialized to suppress specific emotions or to behave in a particular way while in the company of the family. The therapist’s internal responses to the family are an excellent indicator of the nature of the forces at work within the system. The static nature of language is often inadequate to describe the dynamic processes of a family. When a family describes its difficulties, the messages must be heard in the context of the existential reality experienced by the therapist. If the therapist finds himself or herself being talked out of his or her reality, then that therapist may be experiencing isolation or rejection in that system. This process needs to be confronted, for other family members will in all likelihood share these experiences and feel both confused and unable to trust their perceptions.

The experiences of the therapist are indicators for locating the power and determining who feels isolated and/or rejected within the system. If the family therapist: a) feels rejecting of a family member; b) cannot experience emotion when in the presence of a family member; c) feels spontaneously drawn to a family member, or he or she can hypothesize that other members are feeling likewise. Family members have different degrees and kinds of influence on the total collective. The influence depends upon how well they actively integrate within the family. For example, a member who can spontaneously embody the norms will be respectfully responded to, while another who is an anathema to the system, is scorned or ignored. The therapist needs to identify the influential mem-
bers of the family, for they have the most power to influence systematic changes toward a more tolerant and accepting atmosphere. However, since the influential members are interdependent with others to maintain their positions, the entire system needs to be engaged.

The following is an important consideration when interpreting a family in the manner previously described:

The family therapist may experience his or her isolation and/or rejection within the family system. The therapist will have low spontaneity and may feel closely identified with the isolates and rejectees of the family. If the therapist forms a dyadic relationship, the two then become an isolated or rejected dyad in the system. They will disrupt and interrupt the system in much the same manner as an individual. It is important for the therapist to engage the entire system if creative change is to occur.

The therapist can help change the norms of the system. Frequently, a particular emotion is not allowed expression in the family. When the therapist detects this norm, he or she can express the emotion when appropriate to the context and support other members to do likewise. The therapist can explore with the members their individual styles for expressing the emotions and in the process alert others to what is being communicated.

Case Example

In the single parent family described earlier, the following interventions were made in efforts to re-negotiate the criteria for membership within the system. In the presence of son, David, and mother, Joan, the therapist began to establish a relationship with daughter, Linda. Emotional support was offered to Linda who was encouraged to entrust the therapist with her secret feelings. In the process she existentially disclosed herself to her mother and brother. The therapist, in fact, established a new criterion for membership for that moment. The sociometric criterion might be expressed this way, “With whom would you most like to spontaneously share your pain at an intimate level?” Linda and Joan chose the therapist, while David refused to make a choice and became an isolate at that moment. He could not spontaneously meet the criterion. Linda shared her feelings as did Joan. In the process, the two began to develop a genuine intimacy. The therapist turned the interaction away from herself to the two of them. David repeatedly interrupted the process by expressing his discomfort, telling jokes and teasing Linda. He was experiencing his isolation and the concomitant loss of his power. The closer mother and daughter became, the more uncomfortable David became. The therapist encouraged David to talk about his discomfort. With a display of emotion, he revealed his pain related to the loss of his father. The entire family had for the first time, simultaneously, begun to accept their tears and anger. The therapist explained that anyone of the three of them might periodically be isolated depending upon the nature of the interaction, but that it was detrimental to all concerned to have one member consistently isolated. The therapist supported the expression of the total spectrum of feelings and acknowledged that the manner in which a feeling was expressed could be challenged but not the right of the feeling to exist.

Focus: The Individual

Frequently the task of the therapist is to ascertain if family members have “turned off” an expression because they either fear the consequences or the expression is no longer available to an individual because of early painful experiences. If the former is true, working with the entire system will be beneficial. If the latter is true, the therapist will also need to work directly with an individual.

First a word needs to be said about how the therapist makes the determination. There are basically three areas to investigate: the family, the dyad, and other contexts. The therapist should consider an individual focus: 1) if the majority of family members are allowed free expression of a feeling and one person is unable to do so,1 2) if the individual cannot express a particular feeling in the therapist’s presence and the therapist feels confident that he or she (the therapist) is comfortable with that feeling, and 3) if the individual reports or the therapist experiences him or her having difficulty with the feeling in other contexts, e.g., with friends, at school, at work.

Case Example

The therapist can help the family member understand his or her process of warming up to particular feeling states by exploring it historically and/or existentially.

In the historical approach the client is guided to the period in his or her life when the awareness of the feeling ceased. The time, circumstances, place and people involved in a specific representative event are established and “re-lived,” i.e., abstracted. The following is an example of how this was accomplished with the mother, Joan, regarding her inability to cry or to be in the presence of someone else’s tears. She was asked to remember the last time she had cried.

The critical event for Joan occurred at age sixteen, when she tearfully helped her older sister dress for a prom to which she (Joan) was not invited. Joan’s boyfriend, for extenuating circumstances, was unable to go. Her mother angrily confronted Joan saying, “You are so selfish! It’s no wonder boys don’t want

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1. The exception occurs when one person has been systematically isolated and/or rejected from the family. In this case his or her inability to express the feeling may be an inference of sociometric position rather than his or her ignorance regarding the skills with which to express the feeling.
to go out with you. Now, dry your eyes and help your sister!” As Joan reviewed
the incident she cried profusely and expressed her anger towards her mother,
sister, and ex-boyfriend. After her catharsis, Joan could understand the pro-
cesses by which she had incorporated many of her mother’s values regarding
specific feelings. She exclaimed at one point, “Because my mother couldn’t
handle my feelings does not mean she didn’t love me, or that others aren’t quite
capable of being with me when I’m sad, angry, happy, or sexual!” Joan could
see her process unfolding and realized that previously when she could sense her-
self beginning to feel sad or angry, she would become very “productive,” i.e.,
write a paper, read a book, clean the house, and thus avoid actually feeling
herself. She recognized the necessity of taking time to feel.

She began to understand that she had been unable to complete her grieving
and thus terminate from her adolescent years because she had blocked the
pathway to her tears and anger. She also began to realize why she had not
couraged her daughter to cry.

The existential approach focuses on the reality of the moment, i.e., it
traces how a feeling is cut off during a counseling session. For instance, as
Linda started to cry, Joan busied herself by explaining why Linda was sad.
This was in stark contrast to the overwhelming existential sadness felt by the
therapist. The therapist shared the difference in the two experiences and asked
Joan how she had chosen to “explain” Linda rather than feel the sadness that
Linda seemed to be emanating. As Joan was gradually able to disclose her pro-
cess, she shared how her tears embarrassed her, how she disliked feeling awk-
ward, and therefore, how she felt safer thinking about her feelings rather than
feeling them. With support she learned to become aware of the instant she
chose to redirect a feeling into a thought. Over several months’ time, Joan
began to value her expression of sadness and anger as integral parts of her life
and progressively felt freer to allow her joy, love and tenderness to become
disclosed as well.

Summary

The inability to spontaneously express oneself in a particular situation leads
to an incomplete termination of the experience; and clients struggle with in-
complete terminations of significant people, events, places, times, and things.
“Incomplete terminations interfere with new beginnings” (Hollander, lecture,
1967). People cannot move on until they have completed a warm up, spontaneously
expressed their feelings, creatively integrated an experience and
acted upon it. The process provides learnings and energy which can be used as
a stimulus for yet another warm up. People need others to activate this process
because spontaneity in one person begets spontaneity in another.

In family therapy, the spontaneity of the therapist is a vital ingredient in
generating spontaneous interactions among family members. When each mem-