Climbing the Family Tree: Working with Genograms

by Brian Stagoll* and Moshe Lang**

The genogram is a practical and widely adopted tool for mapping families in therapy. Its use can be easily learnt and is recommended for beginners in family therapy. The genogram promotes thinking in systemic and transactional terms, and shifts emphasis away from individual problems to relational issues. A family system can be given a visual focus, and this often reveals patterns and connections previously unnoticed. A set of conventions for constructing genograms is suggested, with ways of elaborating on this basic frame. The applications of the genogram in joining families, in planning interventions, as a clinical communication medium, and in learning family therapy are discussed. Other types of network diagrams are briefly listed, and a clinical example of a genogram is given. Finally, limits and cautions on the use of genograms are discussed.

A question asked by beginning family therapists is how to order and record the great mass of data and observation presented by a family. One of the early skills it is necessary to acquire in learning family therapy is “mapping”: reducing or compressing data into a manageable form which can serve as a guide for further exploration and navigation around the family system. Beginning therapists express frequent feelings of becoming lost and even trapped, in the blooming, buzzing confusion of a family, without much sense of direction or signposts to lead them out of the gloom. They find the guidelines of individual-oriented therapies inadequate, resembling something like trying to coach a football team by focussing only on the actions of single players. What is needed (to continue the metaphor) is a way of mapping the interactions of the players, the points of strength and weakness, the functional and dysfunctional patterns of teamwork and how these relationships affect the flow of the game and its ultimate outcome.

Various mapping strategies have been developed by family therapists to meet these needs. One of the most widely utilised is the genogram. This was largely developed by Murray Bowen and his school (Bowen 1966, 1978) and can now be regarded as a basic tool in family therapy. The genogram consists of a family tree diagram, usually drawn over three generations. It is traditionally drawn on a large sheet of paper, to allow incorporation of a wide range of social and psychiatric data onto a single page.

CONVENTIONS

The most widely adopted conventions for drawing genograms† are those proposed by Waterman in “The Book of Family Therapy” (Ferber, Mendelsohn and Napier 1972). This schema has been adopted, for example, in recent articles by Guerin and Pendagast (1976), Hartman (1978, 1979) and Kaufman (1979).

Males are indicated by squares, (placed on the left), females by circles (placed on the right), unknown sex (e.g. in utero; previous generation etc.) by triangles. A marital pair is indicated by a line drawn from a square to a circle, adding the marital date on the line. A divorce is indicated by a stroke through the line; a defacto relationship by a dotted line. Children are entered according to age, with the oldest on the left. A deceased member is indicated by an “X” through the square or circle, with the year noted. A dotted line can be drawn around all current members of a household; an arrow (with a date) can indicate a family member who has left or relocated. (See Figure 2.)

†Not, alas, adopted by this Journal! (See back cover — “Instructions to Authors”).

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With this system even complicated blended families can be easily pictured. To the basic nuclear family diagram can be added the families of siblings and cousins (along the horizontal axis) and the earlier generations and families of origin (vertical axis).

ELABORATIONS

On this basic frame can be hung a considerable array of information, all linked together on one page. The genogram provides a skeleton which can be fleshed out with a rich saga of family history. Hartman (1978, 1979), Orfanidis (1979) and Guerin and Pendagast (1976) all detail many varied bits of data which can be included on the genogram. These may include: details of the location of family members, their frequency of contact, the times of major moves (e.g. migration) and who stayed at home or came later; the occupations, educational statuses, languages spoken and relative fluency in English of family members; the naming patterns, and possible relationships to losses or identifications; the temporal links between births, deaths, marriages, the onset of chronic illnesses, accidents etc; the responses of different members to these events, especially deaths, and how grieving was managed; sibling order effects e.g. different roles, identifications (cf. Toman 1976); health/illness habits of members, e.g. alcohol intake.

This list of details could be multiplied further. The genogram is an effective and practical tool for mapping an excursion into the history and sociology of a family, providing a way of interviewing in a calm, non-threatening structured way. The genogram is not a tool for eliciting affect per se, but partly because of the aura of “safe”, objective data-collecting it conveys, it can paradoxically produce much affective material.

Apparently benign questions, such as ‘When was the last time you saw him, what were the circumstances, how was his health?’ can generate an unexpected emotional response. The sensitive interviewer can often pick up some nuance of feeling, or an amplitude of response through quietness, to withheld tears or other affect, to quietness again. These responses may be early indications of family secrets, unresolved mourning, or buried, hidden conflicts and unfinished business between family members. Similarly the request for an epithet, caricature or personality portrait of a family member may evoke another level of memories, or parts of the family romance and myths, or recall expectations and rights and wrongs forgotten in the past. Sometimes these processes may be reflected in much more information being available on one side of the family, e.g. commonly the matriarchal side (shown by an empty left-hand side of the page).

These themes may be gently taken up later, when hints which are picked up in an early interview are recalled and linked into place.

A couple was seen whose relationship was characterised by frequent fights and arguments over the fact that the wife earned more than the husband, spent much more freely and demonstrably enjoyed the results. The husband constantly criticised his wife for her materialism and extravagance. Attempts to negotiate around their different styles got nowhere. However the genogram revealed that the husband’s father had been an uncontrollable spendthrift, and this had lead to marriage breakdown. As the wife became aware of this, her perception of her husband changed, from seeing him as a miserly wet blanket to somebody who was carefully trying to avoid falling into the same trap as his father, with consequent marriage failure.

EFFECTS: THE GENOGRAM AS A WAY OF “SEEING SYSTEMS”.

The visual focus of the genogram provides a novel way of “seeing” information about a family. Many therapists (and also families) have reported suddenly “seeing” a previously unnoticed connection or absence. This can occur “at a glance”, literally as a “revelation”. This effect may be related to the particular quality the genogram has of reframing and translating private troubles into public (family) issues. There is a move away from seeing the isolated individual, alone with his intrapsychic conflicts, to seeing a family member connected (or disconnected) with his extended network. The impact of seeing, in diagrammatic form, the identified patient enveloped in a complicated tangle of “family” can be quite stunning.
The opposite picture of an individual or couple cut off and alone can be equally profound. The genogram can also markedly reduce the self-blame and guilt a person feels around his failure to overcome his problems.

A man struggling with a drinking problem, on seeing his genogram with alcoholic relatives scattered all over the page for several generations, began to realise how well he was coping against this family background and weight of generations, and also the enormity of the task he set for himself of avoiding alcohol.

Such experiences seem to operate by shifting a person's awareness, at least temporarily, away from his subjective preoccupation with self to a more objective awareness of where he fits into his social nexus. Hartman (1979) refers to this phenomenon as “objectification of the family system”.

“The process whereby a person begins to see his family system as a complex object for study, replacing the family as it is subjectively experienced with the objective family that can be looked at “out there”.

This can also occur for the therapist, and indeed must, if he is to develop a “systems consciousness”, and learn to think interactionally. Genograms provide one method of facilitating this way of thinking. As a therapist becomes practiced in their use, he or she can develop a facility to rapidly “read” their shapes and patterns, as declining or growing, fading or flourishing, exploding or constricting. The saga of human history can take an added and new meaning as the protean rhythms of family systems move through space and time, repeating unto the next generation. Sometimes very distinctive patterns can be revealed in this way.

A family was referred with a child who was failing at school. Taking a genogram and paying very specific attention to the educational attainment over the last three generations revealed that most males in the family did poorly at school until fairly late — around age 13 or 14 — when their school performance suddenly took off, leading to great subsequent success. This discovery was deeply reassuring to the family.

APPLICATIONS

Drawing a genogram is often helpful in the following contexts.

1. **Getting to know a family.** Genogram construction is a concrete task in which all family members can participate. No great verbal or artistic skills are required, and thus family members can be given a chance to perform competently in a strange and often threatening new setting. The therapist can share with the family the process of elaborating their history, traditions and life, and find areas where he can express genuine interest and curiosity about their backgrounds and learn from them. All family members, even the youngest or the most “disturbed”, can participate in this process. The unfolding of a family history in this way can be very enriching to the therapeutic context. It allows the family to “normalise” their experience and place it in a historical tradition, with successes and struggles, as well as failures, being elucidated. As we have noted, the shift of emphasis away from individual problems to relationships in a larger system can see a melting away of the focus on the identified patient. Involving a family in genogram construction is also a way of putting them in the “expert” position, letting them teach the therapist. Such tactics are particularly useful when working with families of different ethnic backgrounds and language to the therapist (Stagoll, 1980).

The genogram can often bring out how another family member has successfully coped with a problem in the past, giving a family a sense of optimism and feeling of being able to cope, which may be lacking.

Andrew, age 10 years, was seen for school refusal and depression. His 16 year old sister, now doing well as an apprentice hairdresser, was invited to the second family session; she told of how she also had had great difficulties in going to school, which she had overcome. Her success confirmed the parenting skills of the mother and father (who were passively pessimistic and demoralised) and gave her brother a model and coach on how to get back to school. The father then also told of his difficulties going to school, and how he had learnt to deal with school bullies. This was
all new to Andrew and it threw a new and more positive light on things. With the help of his sister and father he was soon back at school, and the family was restored with a sense of their coping capacities.

For a chaotic or disorganised family caught up in a recurrent crisis, the structured and concrete task of drawing a genogram can have very positive effects in ordering and “objectifying” the problem (cf. Hartman 1979). Beels (1976) gives a lucid example of this process in the first interview of the family of a young schizophrenic woman. He comments at one point, after Edna, the identified patient, has corrected a detail in the family genogram...

“Though Edna said almost nothing else during the interview she was not so acutely psychotic that she could not observe and make effective disagreement. A family’s and patient’s best level of psychological functioning comes to the fore during a concrete task like a genogram. They are grateful not to be attacked first on the salient aspects of their pathology.”

Sometimes drawing a genogram can be set as a homework task. This again can facilitate interaction around a concrete task and give the family or individual a chance to show what they can do, and open up and locate the problem in a wider context. Important experiences may be catalysed outside the session. Firestone et al. (1977) describe the following:

“The parents of a schizophrenic patient spent several sessions talking about their families of origin, and the mother prepared a full scale genealogy at home. This woman, aged 50, subsequently took the risk of leaving her husband for two days for the first time in their marriage to accompany her sister to the family graveyard in the country. Material evidence of her self-esteem was given by her wearing of contact lenses instead of glasses for the first time.”

Getting a genogram constructed can be useful when the picture as presented by a family does not seem to hang together — i.e. when the therapist can’t quite work out why the family is presenting, or senses that “something is missing”. A genogram widens the frame from an individual or couple to a larger system and the “missing” data may then become available.

A family with two daughters was seen. One daughter had been made a Ward of the State and was not living with her parents who had been declared “unsuitable.” They were concerned that the other daughter would also be removed from home. However it was difficult to work out what their specific concerns or fears were based upon. They appeared to be conscientious, caring parents. The family had been involved for 10 years with various psychiatrists and welfare officers and felt a great deal of resentment. It was judged as unwise to ask family permission to contact these past workers, as this would likely have destroyed any possibility of an alliance with the family. Instead the family was set the homework task of doing their genogram. The results were dramatic. The mother, the youngest of 13 siblings found out that every one of her siblings had had a total severance of the relationship with one of their children, either a child leaving home and losing contact, being kicked out and not heard from again, or being made a Ward of State. She had never known about this very strange family pattern of emotional cut-offs and rejections. This reflected the secrecy and cut-offs around communication in her family. The family coping style of denial and secrecy had left her feeling alone and guilty, and without much support. Researching a genogram allowed her to tackle these issues and she felt much less alone and more competent as a parent. She (and the therapist also) could now understand more what her anxieties were about.

2. Charting a therapeutic course. The genogram’s applications as a joining technique merge into its uses in helping plan new directions and set new goals with the family. Recording a genogram quickly gives a scan on what is known and what is not known, which members are not in attendance, who should attend, who can be excused, and what are the individual contracts to be clarified with separate members... these are issues which can be easily plotted. The problematic areas of relationship, such as triangles, overclose bonds, emotional cutoffs, and delegations, can be located. The balance of responsibilities and...
loyalties can be mapped, and the wishes and fears of members around issues of exit and entry can be detailed. From this data explicit tasks can then be set, e.g. renegotiating sibling conflicts; promoting a mourning reaction (e.g. by suggesting a graveside visit); reinvolving distant family members (e.g. going to talk to elderly relatives), bringing in the parents of an adult couple (cf. Framo 1976, Headley 1977). An example of planning strategies for change, using the genogram as a map, is Friedman’s classic paper “The Birthday Party” (1971). This paper should be required reading for all beginners in family therapy.

Genograms can also be helpful at points when therapy appears stuck. The prescription for genograms can necessitate a person getting involved in “family research”, and moving away from an overcharged dyadic relationship. A long-married couple without children, feeling their relationship had become ritualised and caught in an impasse, struggled in therapy, seeming to go nowhere. Shifting the focus to genograms was helpful in overcoming this. After some detailed work on their families of origin the wife reported: “look, I do understand now what it is all about. It’s quite clear that my husband is very quiet, withdrawn and an unassertive man. So was his father before him — so were all his brothers. That’s the way he was when I married him, and I got it through my thick head that I was going to change him. And I realize now the folly of my ways—how silly I have been in my attempts to change him, and once I realised that and told him so, things seem to have changed a great deal.”

“Family research” can open up communication lines and can have a contagious effect as other family members get involved in the research. This effect can be used to involve family members who have been reluctant to attend therapy sessions.

Parents with teenage children were doubtful about their ability to get the children to come to therapy sessions. They were instructed on how to draw a genogram at home. On a large sheet of paper they wrote down what they saw as the particular attributes of each family member, and invited the children to do the same. The children got very curious and involved in this process, leading on to their active attendance and participation in future therapy sessions. Modifications of this process can be useful with individuals. Elderly people, even those that appear demented, often respond enthusiastically and with great clarity to a genogram-based interview. This seems to provide a framework for their reminiscences and memories which allows them to see themselves as a link between days gone by and the present. Such interviews can be moving experiences. Extending this experience to an isolated older person e.g. in a nursing home, and younger relatives can have many benefits for both parties. Hartman (1979) describes how...

“They may live in different worlds, disagree on many subjects, and they may have struggled with stilted exchanges for years. The one thing they share is that they belong to the same family and as family pictures and letters and mementoes begin to be pulled out of chests and bottom drawers a genuine exchange beings to develop.”

Doug Purnell (1980) has recently described similar learning experiences around getting old people to describe their “stories” and recall their genograms. He also describes, with examples, how he uses genograms when interviewing couples who are planning marriage. This would appear to be a very useful and sensible form of premarital counselling, bringing out the dimensions of the two family systems coming together, and their varying traditions, struggles and myths. He comments...

“I use this interview to help individuals recognise their own identity, to value their own family and to take some of the values of their own family and negotiate the routines and patterns which they establish in their marriage.” (p. 48).

The genogram is useful as a way of “bringing in the family” into individual therapy. David Cooper (1971) defines the basic problem in psychotherapy as “the problem of the progressive depopulation of the room.” He states...

“At the commencement of therapy the room may hold hundreds of people, principally all the person’s family over several generations, but also significant other people. . . Bit by bit in therapy one identifies the members of this vast family and all its
extensions and asks them, appropriately enough, to “leave the room,” until one is left with two people who are free to meet or leave each other.”

A genogram can bring “the family” in to individual sessions, and map their exits, as therapy proceeds. We shall touch on this process briefly later on when discussing training. Carter and Orfanidis (1976) have described it in detail.

3. Communicating about a family system. In teaching, supervising and consulting contexts it is very helpful to have a genogram displayed for all to see, on a blackboard or butcher paper to allow for additions. This gives an immediate visual focus to the group which directly encourages transactional modes of thinking. It can provide, as it were, a meditative centre to concentrate thoughts upon. This effect is not to be underestimated.

As we have noted the genogram can compress a large array of linked data onto a single page. It therefore has considerable utility in clinical recording. The single entry, immediate retrieval, good economies of staff time in preparation, and flexibility of format all make it a very practical front-line method of data recording. This is of course facilitated further when staff in an agency all use the same conventions of genogram construction.

4. Learning family therapy. We have argued previously that mastering family mapping skills is an important early learning task. Construction of one’s own genogram is a very effective exercise for therapists in the very initial and introductory stages of learning (Stagoll, Lang, Goding, 1979). This experience can awaken and imprint a systems consciousness, along the lines we have already suggested. Later on in training the more detailed investigation of the trainee’s genogram can be a very relevant learning experience. As previously noted, Carter and Orfanidis (1976) have given a detailed description of issues, theories and tactics involved in this process. An elective seminar with an experienced teacher where students are able (without any compulsion of any kind) to present their genograms, along with other memorabilia such as family photos (Anderson and Malloy 1976) can be a vital experience in learning to be a therapist.

VARIATIONS AND ADDITIONS

The genogram maps the family system across time (history) and to a lesser extent through space (ecology). It may be appropriate to add other ecologic and non-family data to the page, e.g. referral source, members of helping and neighbourhood networks (including schools, work, church, recreation, health and welfare staff, friends, etc.), types of residences etc. If the page becomes too crowded with data it is useful to record a separate and complimentary diagram incorporating ecologic data. Various schemes have been suggested for this: The Social Network Diagram (Capildeo et al. 1976); the Family Network Map (Attneave 1976); the Eco-map (Hartman 1978). Once again, these diagrams give a visual focus that encourages transactional thinking. They have the particular virtue of making visible and explicit the shape and size of the social network. This is becoming an increasingly recognised variable in how well families and individuals cope with crises. (Henderson 1978). Pattison (1975) has emphasised the importance of extending our vision beyond the nuclear family to the larger “intimate psychosocial system”. These diagrams promote this awareness.

On the genogram it is also possible to draw lines which connect and summarise the nature of key relationships. The conventions suggested by Minuchin (1974) can be readily applied. In teaching and supervision these lines can be drawn over the genogram, preferably in another colour. In this way key triangles, detouring routes, overinvolved “enmeshed” bonds or conflicts can be depicted.

EXAMPLE (Figure 1).

This partially drawn genogram portrays a complex and scattered family network. John age 12 was the identified patient, depressed and school refusing. He lived with his maternal grandmother age 80 and half-sister Anne age 16. Two years before his mother had died suddenly, and his father, who had never married his mother, was kicked out of the house by his grandmother, who blamed the father for her daughter’s death. The father had come to Australia from Indonesia during
World War II; he had been a pearl diver then. Now he lived alone, 20 years in a factory job, a quiet, depressed man. The grandmother was a typical “battler”, rather frail but with a loud voice and language to match. She was the last survivor of 14 siblings, and had nieces and nephew scattered all over the State. However she had lost contact with them since the death of her daughter, which had been preceded two years before, by the death, by accident, of her husband. John had been named after his grandfather. Anne had two older half-siblings from her father's first marriage, and she saw them regularly. Her father had died when she was two years old. However just before this her mother had moved back with her mother, and started a relationship with Ajip, John's father.

Written out in linear form this family history is hard to follow. The genogram brings it into focus much better. Several factors become clear from the genogram.

(a) John, Gran and Anne are relatively isolated, despite a large potential family network of support, as is Ajip, John's father (who has no-one in Australia). Anne is probably the best off, being able to visit her adult half-siblings, and this is reflected in her good functioning at school.

(b) The shape of the genogram is “declining” with several recent deaths and losses. John's school refusal started when his grandmother was temporarily ill. He is understandably concerned about her health, and feels he can't leave her alone. His grandmother reinforces this behaviour, and leans on John, as she had leaned on her daughter and husband.

(c) John's father is isolated and withdrawn. His natural shyness and the effects of being a very early Asian immigrant to Australia have been reinforced by recent events. He is depressed, but continues working and supporting John and Gran, even though he is excluded. This shows some strength.

The genogram suggests several possible moves.

(a) Involve Ajip in the family sessions and see if a reconciliation between Ajip and Gran can be achieved. Encourage Ajip to become involved with John, and help Gran give John permission to spend time with his father without John feeling guilty.

(b) Arrange support and company for Gran during the day so that John can go to school without worrying. Sup-

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**Figure 1**

PARTIAL GENOGRAM OF JOHN’S FAMILY

1979

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**Figure 2**

Symbols:

- **MALE** (Placed to the left)
- **FEMALE** (Placed to the right)
- **UNKNOWN**
- **MARRIAGE**
- **NON-MARITAL CONJUGAL RELATION**
- **SEPARATION**
- **OFFSPRING**
- **DEATH**
- **RELOCATION**
port may come from neighbours, the local doctor, Council home-help, or family members. Encourage Gran to start visiting her nieces and nephews again and vice versa. Suggest a holiday in the country for Gran and John at one of their relatives.

(c) Encourage Ajip to talk with John about his early life as a pearl diver, his experiences in the War, his coming to Australia, his childhood in another country etc.

(d) When supports have been mobilised and John is back at school (preferably taken by his father), then family sessions can be planned to talk about the deaths and losses, and help mourning.

(e) Encourage the grandmother to talk about her early days, her life in the depression, her large family or the history of the inner suburb she has lived in all her life; try to connect her telling of her story with her nieces and nephews or local community groups.

(f) Don't forget about Anne: although she is currently functioning well, she is also vulnerable. She should participate in family sessions, although she may be reluctant. Her relations with John could be looked at and probably improved, to the benefit of both of them.

CAUTIONS

Alex Haley who has undoubtedly stimulated more family research than all of us, once excused himself for being late by saying he had been asked “How’s the family?” Ten years later he answered in “Roots” (1976). Researching genograms may lead into unexpected areas.

Like any clinical tool the genogram cannot be isolated from the ongoing context of therapy. The construction of a genogram can facilitate the release of powerful emotions and memories, and these can backfire. The genogram is not a blunt instrument to be used to obsessively and systematically probe into areas temporarily left better unexplored. It must be applied in a therapeutic context of respect and empathy, not as a blow torch to strip away family secrets, myths and shameful memories.

There should be flexibility about the timing of its application. It is useful to sketch out a frame containing demographic data in the initial interview; this, as we have noted, sets an emphasis on systems ways of thinking and acting, and makes it clear that it may be relevant to involve other family members in later sessions. When to move beyond this basic frame (if at all) is a matter for clinical judgment, and of what the family wants from therapy. As immediate crises and current issues become less intense the family may move naturally into exploration of their history; alternatively if there is no urgent immediate situation to be dealt with, they may move straight away into detailed exploration of the genogram.

Sometimes couples may compete with each other or intrude into each others attempts to construct their genograms. This, of course, will be symptomatic of their problematic ways of interacting, and can itself become a focus for the therapy. There is a temptation sometimes to exclude the intruding member of a couple so that the other one can “get on with the job”. This temptation should be resisted. The experience of having one member of a couple listen quietly while the other talks about their genogram can be very beneficial. The listening spouse has a chance to gain information and understanding about his or her spouse and in-laws that they may never previously have been revealed, with a consequent diffusion and cooling-down of blaming and hostility. Such sharing can lead to visibly increased empathy and understanding between a couple (as in the example of the “extravagant” wife and the “miserly” husband.) If competitive demands for attention and time are too disruptive, and the requests for one member to listen quietly with a chance to give feedback at a later point is not followed, then one useful tactic is to work on the genogram with one member of the couple alone, but tape record the session, for the other to listen to and respond to later. This can create a necessary boundary between the couple, without closing off all communication.

One other occasional problem is the “genealogic defence”: the endless construction
of a family tree by families (and therapists) as a way of avoiding or intellectualising away very current here-and-now conflicts.

One occasionally forgets, especially when deep into family histories, that the purpose of therapy is to bring about changes, not record elegant diagrams. The Swiss gentleman, who, when offered a choice of going to Heaven or reading about it, chose the latter, is not our ideal model of a family therapist.

CONCLUSION
The genogram is not an end in itself, but a tool for mapping and intervening as a family therapist. It has proven to be a useful and widely adopted device, and can be learnt early in the training process. It provides a useful frame for describing and thinking about transactional and systems phenomena and can be the base for a commonly-shared language amongst family therapists, each struggling to develop his or her own personal ways of exploring and mapping.

It can also be very useful in a number of specific ways.
1. As a way of joining with a family, and helping a family order its experience in a non-blaming, objective fashion.
2. As a way of “expanding the frame” to larger systems, especially when the picture presented by the initial group seems incomplete.
3. As a way of introducing the historical dimension when the focus on here-and-now interactions alone does not seem to be leading anywhere and is “stuck”.
4. As a way of finding an answer to very particular questions a family may have, by revealing repeating transgenerational patterns.
5. As a way of “objectifying” powerful family affects and helping get some distance from them, thus reducing the heat and increasing the light.
6. As a concrete way of bringing the “family” into sessions of individual therapy.

These are effective techniques in their place, but, finally, there are no easy answers to the initial question we posed about how to order and record family systems data.

The genogram is a practical simulation of reality, but it is only a simulation. We must always bear in mind that the map is not the territory. (Bateson 1972).

REFERENCES
Stagoll, Lang