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**Circular questioning and neutrality: An empirical investigation
of the process**

Scheel, Michael J., Ph.D.

The University of Nebraska - Lincoln, 1993

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PREVIEW

Circular Questioning and Neutrality:
An Empirical Investigation of the Process

by

Michael J. Scheel

A DISSERTATION

Presented to the Faculty of
The Graduate College at the University of Nebraska
In Partial Fulfillment of Requirements
For the Degree of Doctor of Philosophy

Major: Interdepartmental Area of
Psychological and Cultural Studies

Under the Supervision of Professor Collie W. Conoley

Lincoln, Nebraska

August, 1993

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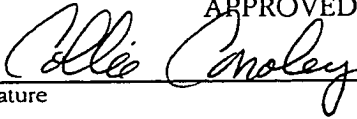
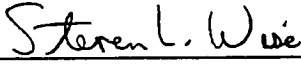



Circular Questioning and Neutrality: An Empirical Investigation

of the Process

BY

Michael John Scheel

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Circular Questioning and Neutrality:
An Empirical Investigation of the Process

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University of Nebraska, 1993

Advisor: Collie W. Conoley

This study investigated the theoretical propositions of the Milan method of family therapy. The focus of the investigation was whether some circular questions are more likely to jeopardize client perceptions of the therapist's neutral stance with the family. Raters categorized circular questions as either interventive or descriptive.

Interventive circular questions were postulated to jeopardize neutrality more than descriptive circular questions. The three dependent variables, each postulated to be related to therapist neutrality, were: (a) client perceptions of therapist side-taking, (b) client level of discomfort, (c) client resistance as demonstrated through topic initiating client interaction.

The three families comprising the sample each reported an identified problem child demonstrating oppositional and aggressive behavior. Interviewers asked individual family members about therapist side-taking and feelings of discomfort for sampled circular questions after family members viewed videotape replays of the family therapy session. Raters conducted a content analysis of transcripts.

An alternating treatment single case design was

employed for each family studied. Results were mixed. Interventive questions were more likely than descriptive questions to be associated with client perceptions of side-taking. Four of the nine clients in the study responded minimally to perceptions of side-taking. Two of the three families demonstrated more discomfort for interventive questions than for descriptive questions. Higher levels of discomfort were more likely to be associated with interventive questions for all three families. Families did not respond in a topic initiating manner to interventive questions significantly more often than for descriptive questions. Results from follow-up analyses indicated that different responses within a family to a circular question may be due to the isomorphic quality of the question.

The introduction of interventive and descriptive questions and the refinement of what is meant by neutrality make an important contribution for training therapists in the Milan circular questioning technique and the role of process expert. This investigation is also important because it demonstrated that empirical research is possible in family therapy while maintaining its naturalistic context.

Acknowledgments

I want to thank my wife, Joan, for her gift to me through this project. She contributed to its completion in so many ways. I probably would not have come back to graduate school and to this project without her encouragement. Joan's willingness to sacrifice for me has provided a message that I could hear. This message is about my own self-worth and about the worth of my contributions to others as important. Throughout the dissertation study and my pursuit of this degree Joan supported and encouraged me. I gained strength and the ability to persevere through her belief in me.

I also want to thank my chair and mentor, Collie Conoley. He supported me in a study which was less traditional for a dissertation. He encouraged me to seek meaning in research above convention. He has also modeled the quality of innovativeness in research for me, and I hope I have learned this lesson well. I also want to thank him for his friendship. I value that above all else in our relationship.

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CHAPTER ONE: STATEMENT OF PURPOSE

Circular Questioning and Neutrality:

An Empirical Investigation of the Process

In 1980, the Milan Associates initially promoted the technique of circular questioning as a family counseling interview process consistent with systemic epistemology (Selvini Palazzoli, Boscolo, Cecchin, & Prata, 1980). Circular questioning as opposed to a more linear causal method was designed to help a family form more systemic ways of viewing and addressing the problem for which they had come to therapy. The Milan Associates proposed three ingredients as essential for the promotion of systemic change through circular questioning: hypothesizing, circularity, and neutrality (Selvini Palazzoli, Boscolo, Cecchin, & Prata, 1980). Hypothesizing was thought of as the means of systemic assessment, circular questioning as the interviewing technique, and neutrality as the basic therapeutic stance. In their early work, the Milan Associates implied hypothesizing, circularity, and neutrality were interrelated and essential as part of the process of circular questioning (Palazzoli Selvini et. al., 1980). Systemic therapists state that if a therapist does not remain neutral to all family members, then the interview would take on more linear causal qualities such as blaming one member of the family or considering only one hypothesis about the problem (Boscolo, Cecchin, Hoffman, & Penn, 1987).

Circular questioning is the procedure a therapist uses to maintain a neutral stance. The present investigation is process-focused and will test the theorized relationship between the circular questioning process and therapist neutrality in the naturalistic setting of family therapy.

Tomm (1984) provides a distinction between a circular question and a question which is more linear. A circular question "orients the observer to focus on recursiveness in the interaction between parts of the system and to hypothesize about holistic patterns" (p. 118). A more linear question "orients the observer to focus on discrete sequences and to hypothesize about causal connections" (p. 118).

Even though there has been no empirical investigation of the connection between neutrality and circular questioning, theories about the relationship have been forwarded. Boscolo, Cecchin, Hoffman, and Penn (1987) postulated that circular questioning in general "respects the therapist's neutrality toward the family" (p. 96). Theorists also have proposed that circular questions of an interventive nature may place therapist neutrality in jeopardy (Tomm, 1985; Boscolo et. al., 1987). Originally, circular questioning was devised to elicit important information from the family on which to base systemic interventions that were delivered to the family at the end of the interview (Selvini Palazzoli et. al., 1980; Penn,

1982). With an evolution of the circular questioning process, it has been proposed that the process of circular questioning by itself can act as the primary intervention (Tomm 1985, 1987; Penn, 1985). Boscolo et. al. (1987) propose that the circular questioning process can produce change independent from other interventions. They state that "It is through this give and take, the therapist questioning, the family answering, that the family's notion(s) ... amplify or change" (p. 97), and that "the questions become interventions in microcosm throughout the interview process" (p. 97).

The relationship between the therapist's neutral stance toward the family and the circular questioning process has been of concern in the literature when therapist questions become interventive. Furthermore, whether the therapist can remain neutral and not appear to side with any one member of the family while using interventive questions seems tenuous. Boscolo et. al. (1987) state that it is impossible for the therapist to stay entirely neutral and also intervene in the family. This study investigated whether a therapist must leave neutrality to stimulate the family system to activate their internal capacity to affect change. It is proposed that the therapist can later re-establish a neutral position. To initiate change, however, the therapist may abandon neutrality during times of interventive questioning.

In this study, it is hypothesized that a relationship

exists between types of circular questions and client level of emotional discomfort, client perception of the side the therapist appears to take, and whether or not the client resists answering the circular question. This hypothesis assumed that emotional discomfort, perception of side, and resistance in answering are, if not indicators at least related to therapist neutrality. Specifically, the hypothesis predicted that interventive questions would be associated with non-neutrality and descriptive questions with neutrality.

This investigation is important because little has been known about the effect on family members of therapists' questions constructed from the therapists' realities that are intended to change the meaning systems of family members. This investigation is also important because there has been no research to date demonstrating the foundational assertions of the circular questioning interview process. Circular questioning and generally systemic family therapy have become popular methods for conducting family therapy as indicated by numerous articles about its clinical use (e.g. Burroughs, 1985; Christofas, Goldsmith, Marx, Mason, & Peatfield, 1985; Jackson, 1986; Matthews, 1984; Mauksch & Roesler, 1990; Nitzberg, Patten Spielman, & Brown, 1985; Lindsey, 1985; Reder, 1985; Speed, 1985). Even though circular questioning is a popular technique, little is known in a scientific manner about the effect of different types

of circular questions on families.

The epistemology of circular questioning assumes the therapist and the client family both possess subjective views of reality. Therefore, both may possess different understandings of neutrality. The therapist will be able to report the intent of a question. However, it is important to be alert to what kinds of questions are disruptive of neutrality and which questions are not from the clients' perspectives. The results from the present investigation should help therapists be clearer about how their behavior affects perceptions of those they counsel during family therapy.

Three different methods of assessment were employed to operationalize the three dependent variables. Each of the three dependent variables was postulated to possess a relationship to the construct of interest, therapist neutrality. The three methods are postulated to be cognitive, affective, and behavioral indicators of neutrality. Three methods were employed, because the literature concerning the definition of the construct, therapist neutrality, is not clear. This study was designed to provide information to more clearly define what is meant by neutrality in systemic family therapy. The client's cognitive awareness of therapist neutrality and client feelings of discomfort were assessed by asking family members about perceptions of whose side the therapist was on

and about the client's emotional state when different circular questions were asked by the therapist. This was done through individual interview sessions after each family counseling session. Each individual family member was shown segments of a videotape of the family counseling session when circular questions were asked by the therapist. Each family member was then asked to recall thoughts and feelings experienced during the portion of the family session when circular questions were posed. Resistance was assessed through a content analysis of transcripts of the counseling sessions. Client statements analyzed as topic following were operationalized as a lack of resistance and client statements analyzed as topic initiating were operationalized as the presence of resistance.

Hoffman warns that systemic family therapy as the Milan Associates practice it, is not a "cookbook" approach to how to work with a family. It seems for the purpose of training however that the process needs to be further delineated so that trainees in conducting systemic family therapy can discern what strategies are most helpful. Experts in circular questioning propose that mistakes can be made which sacrifice a neutral therapist stance with the family (Tomm, 1985; Boscolo et. al., 1987). At this point in the field of systemic family therapy, it seems that intuition guides therapists in the use of circular questions and the consequent impact on client families. The investigation of

neutrality as an essential ingredient in the circular questioning process provides an opportunity beyond intuition to understand more fully what kinds of questions lead to mistakes in the Milan method as well as what kinds of questions are facilitative toward the goals of the process.

Research Questions

- 1) Are interventive circular questions perceived as a non-neutral therapist stance and are descriptive questions perceived as a neutral therapist stance by clients?
- 2) Are interventive circular questions associated with more client discomfort than descriptive circular questions?
- 3) Are interventive questions associated more with client topic initiating responses than descriptive questions, and are descriptive questions more likely to be associated with topic following responses than interventive questions?

CHAPTER TWO: REVIEW OF LITERATURE

Family Systems Theory

The review of literature builds a conceptual and theoretical orientation to the present investigation. A more empirically-based discussion is not possible because of the absence of research related to circular questions and therapist neutrality. Before a review of concepts directly connected to the independent and dependent variables, it is important to provide a foundation for this discussion. For this purpose, basic considerations of systems theory as well as explanations of the concepts of second order cybernetics and isomorphism are provided. Then, a more specific discussion of the relationship between circular questions and therapist neutrality follows.

Systems theory: Some basic considerations

First, a description of systems theory and its relevance to family therapy is presented. A distinction is made between linear causality and circularity. This provides an important context in which circular questioning can be understood.

A system may be defined as sets of elements standing in interaction (VonBertalanffy, 1968). Goldenberg and Goldenberg (1985) view a system as an entity of component parts that covary. They view each part as constrained by the condition of the other units of the system.

Systems theory emphasizes the basic concepts of

wholeness, the interaction of component parts, and organization (Gray, Duhl, & Rizzo, 1969). Organization in a system is represented by a set of components that stand in a consistent relationship to each other. The system is said to be organized around these relationships (Steinglass, 1978). Wholeness means the system is greater than the sum of its parts. In systems theory, it is believed that no system can be viewed in isolation from other systems, and that no system can be adequately understood by breaking it down into its parts (Goldenberg & Goldenberg, 1985). To break the system down into its parts is thought of as reductionism. Systems theory rejects traditional reductionistic concepts such as the stimulus-response (S/R) model. This model is viewed as simplistic, mechanistic, and linear in its way of explaining behavior by a step by step cause and effect equation. In contrast, the system is thought of as the context in which relationships between component parts may be understood and if necessary, changed (Goldenberg & Goldenberg, 1985).

Claiborn and Lichtenberg (1989) provide an interactional systems view through the presentation of the construct of reciprocal causality. They define reciprocal causality as person and situation variables affecting each other in an ongoing, circular (multidirectional) way. Each variable in the process functions as both cause and effect. Claiborn and Lichtenberg (1989) describe reciprocal

causality in the context of human interactions as first, a person acting in a situation as the person construes it. The person, then, expects the action to have a particular effect. After the action, the person receives feedback. The feedback shapes not only the subsequent actions of the person but also the cognitions that guide subsequent constructions of situations. Therefore, person and environment reciprocally influence each other. This is in contrast to a linear causal view of the world. Claiborn and Lichtenberg (1989) view linear causality as unidirectional with one set of variables serving as causes and another as effects. For example, a behaviorist might explain behavior as a function of environmental stimuli that act as a means of reinforcement for behavior. Another example might be taken from a rational-emotive framework in which irrational thinking mediates problematic thinking and behaving. A medical model perspective also serves to illustrate linear causality. Diagnoses such as schizophrenia or dysfunctional family might be seen as the cause of maladaptive behavior by an individual.

The construct of circularity is a perspective similar to reciprocal causality and the interaction of components in a system. The difference is interactions are viewed within the context in which they occur. Goldenberg and Goldenberg (1985) define circularity as the view of causality understood as occurring within a relationship context and by

means of a network of interacting loops. Tomm (1984) contrasts circularity with linear causality in a discussion of the epistemology of the systems therapy model. He believes it is more useful for therapists to adopt a circular epistemology than a linear one when working with families. Tomm (1984) views a linear epistemology as one that "orients the observer to focus on discrete sequences and to hypothesize about causal connections" (p. 118). A circular epistemology "orients the observer to focus on recursiveness in the interaction between parts of the system and to hypothesize about holistic patterns" (p. 118).

Tomm (1984) believes that the predominant thinking mode in our culture is linear rather than circular. He sees people tending to apply reductionistic thinking and to emphasize only small segments of what is present. Tomm (1984) states there is a preoccupation with causes. Causes are based on linear thinking. Tomm (1984) believes the understanding of mental events as circular processes requires a deliberate attempt to synthesize behavioral connections into larger, holistic patterns. The context of systemic family therapy provides the opportunity to do this.

A discussion of second order cybernetics will now take place. A review of this concept is important for an epistemological understanding of family systems therapy. Second order cybernetics offers a conceptualization of the reciprocal causal nature of the relationship between