I like to get a sense of new clients’ family backgrounds. In the first few weeks, I ask for data—the facts about who is who, what things happened to them in their childhood, and how they happened. We have not said one negative thing about their families, yet clients start getting anxious:

“Are you going to be blaming my parents like every typical therapist?”

“That was back then. I only want to deal with the here and now.” (These same folk usually have no trouble talking at length about the past if their parents were positive and loving and fostered positive values within them.)

“I can’t speak ill of them. They did the best they could.”

“Why go back to how they were then? That’s not how they are now!”

The problem is that clients offer these statements while I’m doing something neutral, such as writing down their family history. Even the fact gathering and data giving reminds them of negative, dysfunctional events that occurred while they were growing up.

When something’s wrong in a family, kids may not be able to put words to it, but unconsciously they know that things aren’t right. So clients immediately start warning me that it’s off limits to identify or discuss anything questionable in the family closet.

I stress to clients that we’ll explore the positive things their caregivers did do and how they did love them. You couldn’t have come this far in your life without those who raised you. But it’s unrealistic to think that any parent is all good or all bad, or to believe that you received from that parent only the positive and none of the negative.

As a result of family dysfunction, children often fall into various predictable roles. If you don’t explore how these issues may play out in your current adult relationships, you’ll either relive the agony of your childhood or won’t be able to maintain healthy coping skills and relationships. Facing your childhood and your parents is to go from child to adult—one of the most important paths to adulthood.

Working on issues that involve your parents isn’t about blaming or villainizing them, nor is it about being victimized from what your parents have done to you. Most parents aren’t truly mean-spirited and intend no harm. I’ve worked with clients whose parents were chronically or mentally ill, depressed, overworked, stressed about financial constraints, left with one divorced parent to do the work of two, with no help from extended family, and many other dysfunctions that might have contributed to any poor behavior. But these negative circumstances weren’t their fault. They did the best they could and deserve some understanding.

The Internalized Parent

Even if you think you’ve dealt with your parents’ issues and put them to rest, that’s not likely true because you have two sets of parents: external and internalized. The external are your physical parents, whether alive or dead. Even if you’ve settled any long-standing issues with them, your covert internalized parents—both positive and negative—linger on. They become the undertow you don’t see until you get close to someone in either an adult love relationship or close friendship. Your internalized parents are what you project onto your partner, since your relationship with your partner most completely imitates the close-knit ties you established with parental figures in childhood. You establish “family” with your partner, viewing him as more than a friend. You interact with him more than anyone else, as was likely the case with your family.

Functional and Healthy Families

In a healthy family, the two parents are adults who rely on and meet each other’s emotional, mental, and sexual needs. The two parents are adults who rely on and meet each other’s emotional, mental, and sexual needs.
ual needs. They may have other adults who meet their needs, but maintain a boundary that lets them maintain their adult status—mentally, emotionally, psychologically, and sexually—and lets the children maintain their own. But the boundary is permeable: at times, the roles might reverse, with the adults acting like children or the children like parents when the adults become dependent, intentionally or otherwise.

For example, adults might act childishly playful and irresponsible, or suffer an illness that puts them temporarily in a dependent role. Any other adult in the house usually picks up the slack, but the children might be called on to fill in by assuming an adult role until the parent recovers. Things like this do happen, but the key word is temporary. In a healthy family, parents would seek out help to keep their children from taking on too much. Then the children can go back to being kids once again.

**Dysfunctional Families**

In a dysfunctional family, such a model isn’t occurring, nor is any adult even striving for it. The parents step into the child role and stay there, intentionally or not. They might use the child for their own needs. A child is not in charge; he cannot make decisions or block dynamics in a family. In any case, the adults are always accountable, never the child.

Parents and caregivers can wound or negatively influence us in so many inadvertent ways. No parent or parenting figure can get a child perfectly through all the necessary developmental stages before age eighteen. Life happens! I agree, therapy is not about going back and getting stuck. But most clients when they come in are already stuck by recycling the unresolved issues over and over.

**Abuse**

Difficult though it may be, clients can quickly single out past events of mistreatment. I recently had a client in my office sobbing and saying, “To survive love, I had to get away from those I wanted love from the most.” His family was so mean and abusive; he knew he had to remove himself as far away as possible.

**Neglect**

Not believing that they were products of neglect, clients find this problem much harder to identify and stay longer in therapy to learn how to cope with it. They tend to imagine neglect in the worst light, such as children left alone for long periods in unsafe environments. But other types of neglect are sometimes worse because they are so subtle and so covert that they’re easy to dismiss. In an alcoholic, violent, or abusive family, one at least can say what did happen. Yet things that are not said or not done in a family still have the same effects.

Clients have said, “My parents always cared for me.” But it then comes out that they provided custodial care, nothing more. Lack of attention can be even worse than actual abuse.

**Name, Rank and Serial Number**

Not only do you keep the secrecy but often so do your parents. Your parents may purposely or unconsciously deny what upsetting things they did to their children years before. They feel they did the best they could, and usually they did. Often parents will say, “I didn’t know any better,” or “It wasn’t called physical abuse then, it was called discipline.” True, applying today’s insights and values may not seem fair. But remember it’s important that your parents own what they did and didn’t do.

When you’re talking about your childhood, the worst the parent can do is say, “It wasn’t intentional,” “I don’t remember,” “It didn’t happen that way,” or “You’re making a bigger deal out of it than it was.” Perhaps they do feel this way, but more needs to be said. You deserve more than “I don’t know” or “I did the best I could,” which is what I call nothing more than a simple name, rank, and serial number.

Your parent needs to add non-defensively, “I’m sorry that hurt you” or “I didn’t mean it that way, but I can see it affected you badly,” or “I recall it differently, but your memory is just as valid” or “I was so young and I wish I’d known more.” No matter how the conversation goes—or when you reflect on childhood in therapy or support groups—after your parents say they’re sorry or you forgive them, remember that you’re still the one who has to do the work—not them.

**What If They Didn’t Mean It?**

I have worked with clients who remain angry at parents who have died, and feel guilt for being so angry. “They couldn’t help dying. Now they’re dead. How can I be mad at them for that?” I respond that being mad is normal and human. You counted on them to be around for you. Now they have gone and left, and you still need them. Feelings aren’t about logic; when they present themselves in therapy, our job is to validate them, understand them, and experience them—even if they’re angry at a parent for dying.

Caring doesn’t rest in the decision as much as it does in the thinking about the child. Being closely tracked and having attention paid helps to build the child’s self-esteem, which later provides the foundation for healthy adult relationships. Not having had these advantages can lead to problems that the child as an adult will have to learn to resolve on his own.