STRUCTURAL FAMILY THERAPIES AND SUSTAINABLE FAMILY RITUALS: A CASE STUDY OF SELECTED FAMILIES IN KAMPALA CAPITAL CITY AUTHORITY.

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Abstract: The study assessed Structural Family Therapies and Sustainable Family Rituals in Kampala Capital City Authority (Uganda). The research questions were: What is the nature of structural family counselling practiced in Uganda? How are sustainable family rituals practiced in Ugandan families? How can structural family counselling enhance sustainable family rituals in Uganda? The sample sized was 217 family members with more female (53%) than male (47%) respondents from varying socio-economic environments and ethnicity. The study used Family Environment Scale and Family Rituals scale as instruments. Figure.1 showed that structural family therapy components ranged from the highest as family subsystems (53%), followed by family boundaries (28%) and the lowest being family structure (19%). Findings on family rituals reflected that family routines (44%), family traditions (26%), family celebration (17%) and all the above (13%). The research concluded that family subsystems (cf. Figure. 1 with 53%) positively influence family routines (cf. Figure. 2 with 44%). The study recommended that the Uganda Counselling Association challenge family researchers to find ways of developing assessments and measures for understanding personalities of individual family members in the context of the society at large so as to enhance collaboration between family therapists and families in promoting family rituals.

Key words: Structural Family therapy; Sustainable Family rituals

Introduction

Family rituals: Fiese et al., (2002) defined family ritual as a various patterned interactions among family members that are repeated over time. Family rituals avail families with a sense of identity and belonging. Pleck (2000) advanced that family rituals usually stir up strong emotions, and are frequently reminisced about and discussed within the family. Family rituals also provide a sense of continuity across generations. In another perspective, family rituals are a way of transmitting family values, history and culture from one generation to the next.

Fiese (2006) pointed out that family rituals can be contrasted with family routines, which also occur repeatedly but lack the symbolic meaning that family rituals hold. Family rituals are highly important to the welfare of all family members and to the family structure itself.

Structural family therapy: Goldenberg & Goldenberg (2008), gives the major supporters of structural family therapy as; Salvador Minuchin, Harry Aponte, Charles Fishman and Braulio Montalvo who contended that family problems arise from maladaptive boundaries and subsystems that are created within the overall family system of rules and rituals that govern family members' interactions.

Statement of Problem:

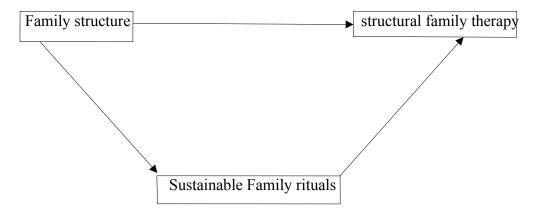
The indigenous African family system set was based on the hierarchical frame work that was structural in nature with different family subsystems working in a harmonious and symbiotic relationship. Several authors have given wider range of behavioural and psychological outcomes for healthy family systems functioning (Imber-Black, 2002; Fiese & Hooker, 1993; Baxter, 2010). Despite the scholars' propositions, the family rituals have been compromised and as a result this has led to dysfunctional family routines, traditions and celebrations that affect the overall quality of family life. Basing on the above justifications, the study seeks assess how structural family counselling can enhance functionality of family rituals in Kampala District-Uganda.

Research questions:

- 1. What is the nature of structural family counselling practiced in Uganda?
- 2. How are family rituals practiced in Ugandan families?
- 3. How can structural family counselling enhance family rituals in Uganda?

Structural Family Therapy:

Figure 1. Conceptualization of structural family therapy and family rituals.



Family rituals: Fiese et al., (2002) asserted that family ritual refers to a set of behaviours that is repeated and that is symbolically meaningful. Family rituals avail families with a sense of identity and belonging. The family rituals usually stir up strong emotions, and are frequently reminisced about and discussed within the family.

The Family rituals can be contrasted with family routines, which also occur repeatedly but lack the symbolic meaning that family rituals hold (Fiese et al., 2002). In fact, whereas family routines offer structure to the family, the family rituals avail the stability, warmth, and belonging that promote members' development and motivation. Family rituals are highly important to the welfare of all family members and to the family structure itself.

Corey (2001) adds that the structural family therapist give the concepts of theory as; family structure (invisible set of functional demands or rule which organize means of family members relating to each other. Family subsystems have various classifications such as spousal (wife and husband), parental (father and mother), sibling (children), extended (grandparents, other relatives and other people of contact). Family boundaries are emotional barriers that protect and enhance

the integrity of individuals, subsystems, and families, hence governing the amount of contact with others.

Goldenberg & Goldenberg (2008) asserted that structural therapeutic notions entail hierarchies between the generations within a family, with semi-permeable boundaries permitting a sufficient flow of information up and down, for example between parents and their children. The structural family therapists intervene with the objective of making the family structure approximate this normative model. The techniques used in structural family therapy involve challenging directly absent or rigid boundaries, unbalancing the family equilibrium by temporarily joining with one member of the family against others or setting homework tasks designed to restore hierarchies. Corey (2001), adds other structural family techniques include; family mapping, enactments, reframing, accommodation, working with family interaction, tracking sequences, intensifying and restructuring. Some of the techniques are explained below:

The structural family therapy has a similar systemic approach to family issue as the African family systems. Therefore, structural family therapy can be applicable in the African family context to a given extent. It should be realized that these family therapies do not adequately address the African family systems issues that relate to family rituals.

Dimensions of family rituals: Fiese and Kline (1993) suggested eight dimensions of family rituals that promote family cohesion. These eight dimensions include the following (Fiese and Kline, 1993): Occurance; Roles; Routines; Attendance; Affect; Symbolic significance; Continuation and Deliberateness. The dimensions of family rituals are manifested types of family rituals.

Types of family rituals: Wolin and Bennett (1984) discovered three types of family rituals that differ by setting and the degree to which they are connected to cultural practices. These include the following (Family Celebrations, Family Traditions and Family routines).

Fiese (2006) asserted that family celebrations are rituals in which the family observes holidays or occasions that are widely practiced by the culture and are special in the family. Family traditions are activities which are less culture-specific and more unique to each family (Cox, 2012). They are not necessarily celebrated annually, although they occur regularly in families. The events

included in this category are vacations, visits to and from extended family members, anniversary and birthday customs, parties with special food and music, participation in community events, and activities with kin members. Cox (2012) contended that a tradition is "any activity you purposefully repeat together as a family that includes heightened attentiveness and something extra that lifts it above the ordinary ruts." Family routines are rituals which are most frequently enacted but least consciously planned by the participants (Walsh, 2006). Family routines include activities such as regular meals, bedtime routines for children, customary treatment of requests, leisure activities, and discipline of children, every day greetings and goodbyes. The family rituals and routines are exercised with corresponding techniques.

Ritual Techniques: Beck, R. & Metrick, S.B. (2003) emphasized that there are several ritual techniques that include the following:

Words as ritual technique: Beck, R. & Metrick, S.B. (2003) argued that words have ritual techniques include the following: Invocations and prayers, extemporaneous or pre-scripted; Story: 1. Pathworking, guided meditation and for any meditative technique, be very careful to do a thorough re-entry!; 2. Enactment and mystery plays.; iii. Sharing, talking stick rounds, discussion; iv. Poetry, song lyrics. Rhyme and meter are both trance-inducing and mnemonic, A spell should be simple, so that it seems to say itself and v. Statements of desire, intent, commitment are ways of expressing one's will within the intense atmosphere of ritual is powerful, effective self-programming.

Methodology:

This research used Exploratory – Case study design, because a lot can be learnt from a few examples of selected families' structural issues (Blaxter et al, 2010).

The case study enabled the researcher to assess the structural family levels, family rituals to get informant's beliefs, attitudes and opinions about the topic of assessment (Amin, 2005).

Area of the Study

The research was carried out in Kampala Capital City Authority of central Uganda, because the key respondents and informants handling issues of structural family counselling and family rituals. The study area was also relevant because it has various counselling centres like

Wamukisa teenage counselling centre, Hope and Beyond rehabilitation centre, Consider counselling centre, Mbuya reach out, Rapport counselling centre, Matunda ya wazee among others.

Study population

Family members from eight counselling centres within Kampala Capital City Authority participated in the study. They were aged between 10 to 70+ years and were randomly selected using the counselling centres the sampling frame. The final sample consisted of 217 family members. There were more female (53%) than male (47%) respondents from varying socioeconomic environments and ethnicity, since the area is cosmopolitan in nature.

Table 1: Composition of targeted sample size, population category and corresponding sampling method

Category	Sampling method	Target	Sampled
		population	Population
Family heads	Opportunistic sampling	48	30
Counselors and social	Purposive	150	100
workers			
Parent(s)	Simple random sampling	110	50
Children and Adolescents	Snow ball	90	20
Other family members	Stratified random sampling	52	17
	Total	450	217

Sample size and selection

Procedures for determining sample size: In this study the sample size will be determined basing on Yamane's formula (Yamane, 1967) guidelines for estimating the sample size. The sample size of research participant will calculated basing on Yamane's formula (Yamane, 1967) table in appendix.1:

Determining the sample size using Slovene's formula of calculating the sample size as

n = required sample size

N = population size

e = Level of precision 0.05 (error of 5 percentage point) or level of confidence (usually 5% standard)

$$n = \frac{N}{1 + N(e)^2}$$

$$n = \frac{450}{1 + 450(.05)^2}$$

n = 217

Study instruments and measures

Family Environment Scale

The Family Environment Scale (FES) is a self-administered test that assesses the social climate and functioning of all types of families. There are 90 items to which participants have to respond with either "True" or "False". The questionnaire examines three family environment dimensions. These dimensions include the (a) family relationships, with the subscales cohesion, expressiveness and conflict; (b) family system maintenance, with the subscales organization and control, and (c) the personal growth dimension, with 5 subscales: independence-autonomy, achievement, intellectual-cultural activities, active recreational activities, and -moral-religious.

Three subscales in the family relationships dimension were deemed relevant for the present study (such as, cohesion, expressiveness and conflict).

Family Ritual Questionnaire:

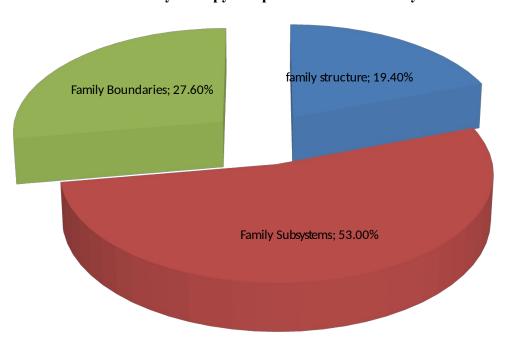
The practice of family rituals will be measured by the Family Ritual Questionnaire (FRQ) developed by Fiese and Kline in 1993 (see Appendix A). This questionnaire was adopted from Fiese and Kline (1993). The FRQ is a 56 item questionnaire which explores rituals in seven settings emerge from family routines (Baxter & Clark, 1996). These settings include Dinnertime, Weekends, Vacations, Annual Celebrations (birthdays, anniversaries, among others.), Special Celebrations (weddings, graduations, family reunions, among others.), Religious Holidays (Christmas, Idi Elifitri, Easter, among others), and Cultural and Ethnic Traditions (baptisms, naming ceremonies, funerals, among others.). Each setting contains eight statements.

The participant are to read the statements and decide whether each one is "really true" of their family or "sort of true" of their family.

The FRQ will measure seven dimensions of these family rituals. These dimensions are Occurrence (how often the activity occurs), Roles (assignment of roles within the activity), Routine (regularity of activity's occurrence), Attendance (expectations about who attends the activity), Affect (emotional investment in the activity), Symbolic Significance (attachment of meaning to the activity), and Deliberateness (advance preparation for the activity). According to Fiese's FRQ scoring manual the Ritual Meaning Factor is calculated by summing the scores of the Occurrence, Affect, Symbolic Significance, and Deliberateness dimensions. The FRQ scoring directions indicate which items in each setting fall under each of the seven dimensions.

Findings

Figure 1 revealing the structural family therapy components that influence family rituals



structural family therapy components influnce family rituals

Source: Research (2015).

When the respondents were asked that whether structural family therapy components influence family rituals, the following alternatives were opted for ranging from the highest family subsystems (53%), followed by family boundaries (28%) and the lowest being family structure (19%).

Table.2: Shows the other the Structural Therapeutic techniques are used to enhance family rituals.

Structural Therapeutic techniques are used	Frequenc	Percentag	Cumulative %
in enhancement of family rituals.	\mathbf{y}	e	
Working with family interaction	70	32.26	32.26
Tracking sequences	41	18.89	51.15
Intensifying	17	7.83	58.98
Restructuring	23	10.61	69.59
All the above	66	30.41	100
Total	217	100	

Source: Research (2015).

The respondents also identified other the Structural therapeutic techniques used to enhance social wellbeing in family life. Of the available options, Working with family interaction was the highest at 32.26% while those who chose the option of Intensifying represented 7.83%.

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The family of Bob 38 years old and Marie 32 years is composed of four children; Paulette, 15;

Ronnie, 11; Emmy, 8 and Patrick, 5 years. Bob is a civil engineer who gets roads and housing

construction contracts. Marie is a hotel waitress. The children keep arguing, quarrelling and

fighting each other when the parents are not at home. However, the parents enter in the house the

children reorganize themselves as if there was no problem in the house, yet the young ones carry

bruises and wounds.

In the process, Bob and Marie start a hot argument on what had happened to the children. Bob

accuses Marie of spoiling the children while Marie Scorns at Bob for not being a responsible

father since he does not take responsibility to his family.

Source: Respondent (2014)

Source: Research (2015).

In applying, Structural family therapy Bob and Marie understood the subsystems in the family

set up influence each, thereby impacting on the family structural relationships within their

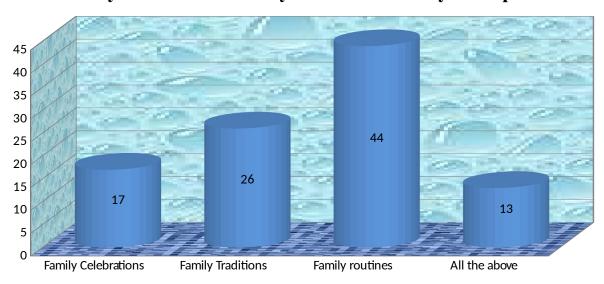
hierarchical functioning. The above scenario reflects that the members of the sibling subsystem

keeping rigid boundaries to the parental subsystem. The parental subsystem in attempt to

penetrate into the sibling subsystem, a discord develops in the couple subsystem as manifested in

the counter accusations between Bob and Marie.

Figure. 2: Family rituals used by structural family therapists



Family rituals are used by structural family therapists.

Source: Research (2015).

When the respondents were asked the family rituals used by structural therapists in enhancement of family life, family routines scored the highest with 44%, followed by family traditions 26%, family celebration 17% and the lowest being all the above 13%.

Discussion of findings

According to the findings indicated in figure.1 family subsystems scored highly among the components of the family structural therapy with 53%. The highest percentage of the findings is in agreements with Minuchin (1998) who give preeminence to in family organized as hinged on the family subsystems. The family subsystems include as spousal (wife and husband), parental (father and mother), sibling (children). The researcher concurs with the findings and the author at hand, because the family subsystems are central in building holistic family systems.

The findings revealed family boundaries to have second highest with 28%, which is in line the understanding that boundaries are emotional barriers that protect and enhance the integrity of individuals, subsystems, and families, hence governing the amount of contact with others (Becvar & Becvar, 2000). Although, the findings and Becvar & Becvar's (2000) argument

concur, the impact of family structure needs not to be underestimated on family organization, order and leadership.

The family structure scored the lowest of percentage 19%, this is in agreement with Corey (2001) who argued that structures are not explicit and are an invisible set of functional demands or rules that govern family members operate.

According to Table. 2 the findings indicated that working with family interaction technique as the highest with 32.26%. This process of family interaction acts as a basis of rejoining family members together thus creates an accommodative style for each family member in the family structure. The family interaction helps the structural family therapist gain a foothold so as to access the members' way of dealing with their problems. This ultimately helps members of different subsystems to change dysfunctional sets and rearrange or realign the family organization (Minuchin, 1974).

According to the findings, the lowest option was Intensifying technique represented with 7.83%. In this technique, the structural family practitioner is meant to create a concrete conceptual map about what is happening in the family to make it functional (Aponte& Van Deusen, 1981).

Case study.1 of Bob and Marie's Case transcription and interpretation:

According to Minuchin (1974), members of any given family relate according to given arrangements that govern their transactions. These arrangements usually though not explicitly stated or recognized form a whole structure of the family. The reality of the structure is of a different order from that of the individual members. From the scenario of Bob and Marie all behaviour of the different subsystems needs to be viewed in the context of family structure. The family therapist using structural approach in the case at hand needs thus to initiate structural interventions that are active, carefully calculated or even manipulative to alter rigid, out modeled or unworkable structures that the sibling subsystem have created on the couple subsystem. To achieve the desired end, the family of Bob and Marie needs to be helped to negotiate the out modeled rules and to seek greater boundary reality (Colapinto, 2000). The therapist needs to look at the family with the big picture of an integrated whole of the family system and not of subsystems, because the subsystems are part of the family systems that enrich the pattern of life

within the family and give a clue to the big structure and organization of the system (Becvar & Becvar, 2000).

During the counselling sessions with Bob and Marie, while using structural family therapy, the therapist applied various counselling techniques such as; challenging directly absent or rigid boundaries, unbalancing the family equilibrium by temporarily joining with one member of the family against others and setting homework tasks designed to restore hierarchies (Goldenberg & Goldenberg, 2008). The other structural techniques that can be used by the therapist include; family mapping, enactments, reframing, accommodation, working with family interaction, tracking sequences, intensifying and restructuring (Corey, 2001).

Bossard and Boll (1950) argued that family rituals are powerful organizers of family life that offer stability during times of stress and transition. In figure.2 the implication of the findings indicate that families use different family rituals with different variation and intensity and rarely do families use all the family rituals as indicated with the minimum score usage percentage of 13 (all the above option). The findings divergently revealed that family routines (44%) are commonly exercised by most of the families that family routines include activities such as regular meals, bedtime routines for children, customary treatment of requests, leisure activities, and discipline of children, every day greetings and goodbyes (Walsh, 2006).

The researcher gained an insight that rituals avail access to how the family, as a group, is organized and finds meaning in their collective lives. This is in line with other scholarly studies of family rituals (Fiese et al. 1993); who argued that rituals serve to protect mental health under high-risk conditions (Bennett et al. 1987) and vary in significant ways across cultures (Martini 1996). These rituals are essential in creating a balance in the mental health functioning of all the individual family members.

Conclusions and Recommendations

The research concluded that family rituals and routines are influenced by the structural family therapy basing on the nature of family structure, family subsystems and family boundaries that enhance functional family systems. Structural family therapy especially on the family subsystems (cf. Figure. 1 with 53%) positively influences family routines (cf. Figure. 2 with 44%).

Recommendations based on the nature of structural family counselling practiced in Uganda:

The study recommended that the Uganda Counselling Association challenge family researchers to find ways of developing assessments and measures for understanding personalities of individual family members in the context of the society at large.

Recommendations based on how family rituals should be practiced in Ugandan families:

The research recommended through the Ministry of Gender, Labour and Social Development that to enhance a collaboration between family therapists and families as family therapists design plans that are culturally sensitive to family systems and family developmental environment. The study calls upon for the interactional nature of family relationship when family therapists are employing interventions on the basis of family routines and rituals.

The National Council for Higher Educational together with the Ministry of Higher Education to encourage tertiary training institutions to develop programmes and curricular for educators and practitioners to be well grounded on how work with families and to families find ways to celebrate their family success. This will help family members to full participate in routines and rituals of their family life.

Recommendation based how structural family counselling enhances family rituals in Uganda:

The study recommended that the Uganda Counselling Association and Uganda Behavioural alliance to provide a framework for the practitioners to understand that the symbolic meaning attached to family rituals give means on how family members create new levels of interconnetctivity that maintains the family system together. The adoption of this therapeutic framework will act as a basis of the family routine to hold a promise for the systematic interventions of families threatened with developmental and socioemotional concerns. This process within daily family rituals and routines acts a carriage with innate interventions that promote nurturing family life styles.

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