鑲嵌於文化與現代性社會交織中的家庭關係與互動：
回應李岳庭教授「家族治療本土化的研究與展望」文

程婉若*

摘要

　　本文係針對李岳庭教授撰寫「家族治療本土化的研究與展望」文之回應。李教授從回顧過去 10 年家族治療相關文獻，整合他自己的經驗及反思西方家族治療理論與華人文化之間的扞格不入，指出筆者認為一個至為重要的觀點，即為在運用來自西方或是北美家庭治療理論與學派，不可忽略本土文化對家庭關係及互動模式的影響。與此同時，他也提出家族治療本土知識的建構、訓練與研究上的展望與方向。本文首先從藉由耙梳臺美婚姻家庭治療歷史發展，回應李教授對臺灣在家庭治療的訓練以工作坊形式居多；其次，就家庭治療學派理論須與在地文化嵌合呼應李教授主張西方家族治療概念運用在臺灣在地家庭須思考其適用性。在支持家族治療本土知識的建構的同時，筆者藉由提問「本土」的界定，建議推進一步結合社會位置的交織性、社會、政治、經濟制度之脈絡因素以及文化概念之間的交互作用來梳理家庭關係與互動。本文的最後，針對家庭系統互動模式研究可能需要思考的議題及未來方向。家庭治療本土知識的建立是一個重要的學術路線，期待更多精采的對話，使伴侶/婚姻與家庭治療在下個十年在臺灣展現它特有的風格。

程　婉　若*　　國立彰化師範大學輔導與諮商學系（wcheng@cc.ncue.edu.tw）

壹、前言

　　李岳庭教授是臺灣少數在美國接受完整的婚姻與家庭治療訓練後返臺教書，並致力於建構華人文化觀點之家庭治療的學者。李教授觀察過去 10 年來臺灣家庭治療訓練及研究，在文中指出一個極為重要的觀點，在運用來自西方或是北美家庭治療理論與學派，不可忽略本土文化對家庭關係及互動模式的影響，此外，他亦從本土文化脈絡提出未來在家庭治療訓練及研究上需留心以及發展之處。筆者認為婚姻與家庭治療本土化並非在創造另一個知識霸權，而是一個重要學術路線的開展，針對李教授就臺灣在家庭治療的訓練現況、西方文化與華人文化間的衝突、以及研究發展，在這篇回應文提出個人的淺見與問題，目的是希望有更多對婚姻與家庭治療有興趣的學者與實務工作者在未來持續有更多的對話，為臺灣家庭治療下一個 10 年共同努力。

貳、臺美婚姻與家庭治療訓練發展的歷史與現況

　　誠如李教授在文中所述，專業人員如欲精進各家庭治療學派與技術，須持續參與工作坊進修。筆者觀察的現象亦是如此，先就美國與臺灣婚姻與家庭治療的歷史發展說明，臺灣在婚姻與家庭治療的訓練何以是以工作坊為主。在美國孕育家庭治療自 1960 初期成為的心理治療專業之一的沃土，可追溯到 1946-1953 年之間的梅西基金會（Macy Foundation）在紐約市舉辦一系列探討控制論的研討會（英稱 Macy Conference on Cybernetics），邀請社會學、文化人類學、生物、神經學、生態學、數學、經濟學、政治學、心理分析、語言學及電算科學等跨領域專家集思廣益，試圖針對有機體、社會及機械系統之行為運作和訊息回饋發展與融合成一套知識。除了訊息的傳遞與控制（Weiner, 1948），控制論在家庭治療領域被界定在有機體系統的樣態（forms）與行為模式（Bateson, 1972）。換言之，控制論關切的不是事件本身而是行為的方式（Ashby, 1956）。事實上，也就是控制論、系統和訊息交換理論使得早期進行家庭研究和其後之家庭治療師能從心理分析視框走出，從家庭訊息交換及往來連結的互動模式理解精神障礙（Rasheed et al., 2010）。其中，最知名的即是 Bateson 等在 1956 年發表的「Toward a theory of schizophrenia」。這篇在當時為劃時代的文章奠定訊息交換理論（communication theory），特別是邏輯型式理論（theory of logic types），以及控制論在往後 30 多年婚姻與家庭治療理論發展的重要基石，藉由觀察思覺失調病人及其家庭成員間的互動，提出迥異於個人內在心理動力與問題線性因果之循環因果關係，更指出思覺失調症狀行為病人處於一個「無論怎麼做都討不了好」的「雙重束縛」（double bind, p. 252）。控制論結合描述系統結構的一般系統理論（General Systems Theory, Bertalanffy, 1969）為 1960 年初期後各家庭治療學派，如：MRI、結構派、策略學派、米蘭學派等，重要的哲學基礎。

臺灣家族治療的發展可追溯到 1960 年代晚期，精神科醫師陳珠彰及他的社工同僚吳就君開始在臺大醫院以讀書會方式，自學家庭治療並運用在精神科心理治療實務（Chao & Huang, 2013）。對照當時歐美家庭治療的發展，已是系統取向（如：MRI、短期家庭治療、結構學派、策略學派、米蘭學派前期等）、經驗取向（如：Whitaker's 象徵與經驗學派、Satir 模式）、以及臺灣較為陌生的脈絡取向（如：Boszormenyi-Nagy）等各學派百家爭鳴時期。當時臺灣也力邀國外家庭治療的創派大師及實務工作者來臺開設訓練工作坊，例如：Virginia Satir 首於 1982 年來臺開設「家庭的誕生」（the birth of family）工作坊；其後更有許多精神科醫師遠赴歐美等國家接受家庭治療的短期訓練，將不同家庭治療學派引入臺灣，如：楊連謙、董秀珠（1997）之結構－策略取向家庭治療。時序跨入 2000 年後，後現代取向家庭治療大師，如：Michael White、Insoo Kim Berg、Harlene Anderson，先後來臺開設工作坊，為家庭治療帶來不同觀點。引進家庭治療取向書籍及工作坊為訓練模式，或許可部分解釋李教授的發現，國內的家族治療以工作坊形式之理論技術的介紹與應用為重。

　　美國婚姻與家庭治療有其專業協會——American Association for Marriage and Family Therapy（AAMFT），學生從婚姻與家庭治療碩士班或是博士班畢業後，特別是隸屬 AAMFT 之婚姻與家庭治療教育認證（Commission on Accreditation for Marriage and Family Therapy Education）之研究所學程，即符合報考該州或是其他州之婚姻與家庭治療師執照。從學位學程、專業執照、再教育之專業訓練、全國及各州之婚姻與家庭治療專業協會、及至專業期刊（如：Journal of Marriage and Family Therapy、Family Process、American Journal of Family Therapy、Contemporary Family Therapy、Journal of Feminist Family Therapy），婚姻與家庭治療與精神醫學、心理學、社會工作和諮商等在美國並列 5 大助人專業。然而，婚姻與家庭治療在臺灣的發展誠如李教授指出，在校訓練因課程受限於心理師法規及系所課程安排考量，僅能提供家庭治療概論性課程。筆者同意李教授的觀察，在臺灣多數輔導諮商學系及研究所會開設家庭諮商課程，在有限的時間內盡可能含括一切基本概念。雖然彰化師範大學在 2007 年成立臺灣第一個婚姻與家庭治療研究所，但婚姻與家庭治療在臺灣並無專門證照，它和輔導與諮商同受心理師法規範。在婚姻與家庭治療碩士班雖開設較多的專業課程，但是，在符合諮商心理師證照考試應修習的學分數就已達 21 學分的情況下，仍是擠壓開設婚姻與家族治療專業課程的空間。因此，如同李教授所述，對於大多數輔諮所的學生，如欲進一步學習婚姻與家庭治療，僅能參與相關工作坊。這的確是婚姻與家庭治療在臺灣特有的發展方式。

參、家庭治療學派與在地文化的嵌合

文化的體現是透過常民的日常實作與協作。在家庭治療中亦是如此，諮商師的專業介入技術及實作（professional doings）都是文化意識形態的展現。如同李教授在文中指出，Bowen 的「自我分化」（self-defferentiation）的概念運用在臺灣在地家庭須思考其適用性。筆者十分認同這個觀點，意圖進一步梳理潛藏在這個觀點中的意識形態，並以一個實際的案例，一方面呼應李教授指出，西方文化重視自我分化與獨立；而對於重視孝道文化脈絡下，需打破自我分化程度與親子關係之間的關聯性，另一方面進一步說明在家族主義文化脈絡下，自我必須放在家庭關係中思考，為家人著想、承擔責任亦是自我的展現。

　　自我分化係指個人處理情緒反應的能力，在情緒壓力下的回應是透過理性思考而非情緒驅使，如此在關係中能達到親密與自主的平衡（Bowen, 1978）。自我分化程度較高的父母更能自我調節（self-regulate）及維持堅實的自我感（a solid sense of self），在教養上更具彈性，明確地區分父母親及孩子的責任界線，父母能釐清並清楚地表達自己的期待，卻不將自身的期待加諸在孩子身上，尊重孩子的選擇，放手讓孩子面對難題，讓他／她為其決定負起責任。父母自我分化程度高，其子女自我分化程度亦高，並能夠建立親密又自主、健康的親子關係。這的確不只是反應個人主義的思維，更是新自由主義（neo-liberalism）的體現。新自由主義主張在「市場至上」的原則下，政府降低對經濟的干預，包括：削減公共開支、財產私有化、放寬企業管制、放棄貿易保護措施，因此在一個成熟的公民社會中，人與人之間相互競爭以極大化個人權益（Adams et al., 2019）。為此，新自由主義更強調解除任何妨礙個人成長及自我表達的限制，讓個體擁有自我決定（self-determination）的自由，並能自我依賴（self-reliance）。高度自我分化父母培育自我決定並負責任的子女，親密與自主兼具的親子關係成為「理想」自我及關係的文化樣態，是個體致力追求的目標。這個理想自我和關係成為心理主流論述（psy-discourse）是獨立於脈絡之外存在，在文化標準化的過程中，無論是透過教育、媒體、政策等，論述知識成為對在地文化現狀的挑戰，並提供替代的選項，同時抹去在地文化特性（Sugarman, 2015; Teo, 2018）。

　　以筆者在實務中的個案 Z 為例。Z 正為是否繼續攻讀研究所而煩惱，他的計畫是大學畢業後先工作幾年的時間，累積工作經驗的同時也賺取未來念研究所所需之學雜和生活費。然而，他的父母希望他在大學畢業後就直接攻讀研究所，並表示無論是補習或是未來念書的學費，都願意在經濟上給與最大的協助。Z 的父母親在諸多生活事件和議題上都會尊重他的看法和決定，然唯有升學一事，父母會再三表明他們的期望，而他常幾經自我掙扎後，安靜地接受父母的安排。但是，從社經階層文化來思考則產生不同的理解。Z 的父母親為藍領勞動階層，除了作農還需在建築工地打工來維持家庭的基本溫飽，Z 是家中的么兒，也是在手足中唯一就讀國立大學的孩子，父母無非只是希望這個會念書的孩子藉由優秀的學歷能從藍領階層翻轉至中產階級，在經濟上更有餘裕。最後，Z

也決定先去念研究所,原因之一是擔心父母的健康每況愈下,未來無法兼顧就學與照顧。在這個案例中,若是從 Bowen 的理論來看,Z 和他的父母即為典型的低度「自我分化」,父母將他們的期待投射在 Z 身上,而 Z 已成年但卻對他的未來生涯計畫無法自主規劃。然而,從家庭需求優先於個人之臺灣家族主義文化看,個體的自我分化需要從家庭關係與脈絡來理解。

傅柯(1982)指出個體成為主體的過程是透過客體化(objectification)轉化人的存有(human beings)及形構知識(knowledge)。其後進行主體與他人及與自我的區分(dividing practices),如:情緒化／理性、健康／失功能、依賴／自主等,區分的重要性在於它不只影響個體如何認識自己及世界,更是治理(governance)及自我規約(self-regulation)的運作手段之一。個體運用知識進行標記、分類、概念化、貼上身分標籤,產生自我知識與意識,將自己歸屬某一身份或認同,最後轉化成為主體。仍是以 Bowen 的理論思考上述案例,自我分化程度的高或低成為一個區分,個案透過與被視為「問題」解決專家的諮商師談話後,了解自己為「低度自我分化」的個體以及對親密關係的影響,他們「選擇」朝向「自我負責」,諮商師透過會談提升他們的自我分化程度並建立「健康」的親子關係,在這個去在地文化脈絡的過程中,諮商師無可避免地成為新自由主義的代理人。

在臺灣家庭中,仍有成員自我抑制忍耐、順從長輩、相互合作以促成家庭團結與和諧之文化規範(葉光輝等,2006)。因此,筆者十分同意李教授在文中指出,無論是擔任父母之間的協調者或是幫手、甚或需要執行父母的角色和責任之所謂「親職化」孩子,是有其在地文化意涵。個案的行為也必須放置在地文化、脈絡及社會處境才能發展不同於專業理論知識之理解。然身處在複雜的文化脈絡和社會關係中,諮商師等助人專業工作者無可厚非地希望找到一個去蕪存菁、簡單又可以迅速地梳理並解決個案問題的地圖。因此,治療學派和專業理論就如同地圖,幫助諮商師命名和說明他／她所觀察到的現象、解釋概念之間的關聯性、以及在定義問題的同時也能提出問題解決之道。然而,家庭系統理論先鋒之一,Gregory Bateson(1979)引哲學家 Alfred Korzybski 的主張「地圖不是領土、單詞不是事物」(The map is not the territory, and the name is not the thing named, p. 30)說明,在所有的想法、知覺或是對知覺的討論裡,在報導和被報導的事件之間都需要編碼(coding)和轉換(transformation),在這個過程中將事物分門別類(classification)就是關鍵了。因此,他指出命名就是區分,而繪製地圖本身就是命名的過程。分類承載價值,標明哪些事值得或不值得做、個體想或不想成為哪類型的人(Hacking, 1999)。在按圖索驥的過程中,Ian Hacking(2006)提醒思考命名／標籤的兩個向度,其一來自於專家們創造出來的「現實」(reality);另一個向度為被標籤、命名的個體對所命之「名」及「現實」的反應與行動。家庭系統取向概念,無論是「親職化兒童」或是「跨代聯盟」等,皆是被創造的「現實」,而治療師依現實進行介入才有其正當性;但「現實」與個案

及其家庭每日的「真實」（actuality）可能是有落差的，因此，治療師須敏察這個「現實」中「名」是如何改變個案在真實生活與他人互動。

肆、從傳統文化到多元文化：文化交織性

近代心理治療的發展迄今已超過 200 年的時間。心理諮商在臺灣的發展始於 1958 年中國輔導學會創會，而家庭治療更是再晚 10 年後才起步；但相同的是，所有的理論和技術皆是來自於西方或是北美。不只是心理專業知識，許多政治、經濟、社會、教育等領域也大量參考或是援引西方或是北美國家帶有「進步」價值和意識形態的制度和運作模式，來改善「保守」社會的因循守舊。西方和北美的進步與東方的保守形成一種「自我」（Self）與「他者」（Others）之區分。進步價值常與政治正確相連結（卡維波，2019）；在「他者」的社會中，「進步」價值成為一種凝視（gaze），檢視自己與他人的思維行動是否「正確」，而一次又一次地區分「自我」和「他者」。這在臺灣當代社會屢見不鮮，西方進步價值的階級資源分佈在不同世代間是有落差，形成「長輩」和「年輕世代」的區別（卡維波，2019）。以教養孩子為例，臺灣當代的中產階級父母比起他們的上一代擁有更多的教養資源或是跨國資源，他們多以與孩子合作以及親子間平等和相互信任等特徵來描述理想的親子關係，認為不能也不願用他們父母輩常用之權威和服從的管教方式，因為上一代過時、傳統的教養方式不適用於現代的孩子；然而，這些父母也承認常常在無意間過去父母那一套就不知不覺地上身而深感懊惱（藍佩嘉，2019）。因此，無論在西方國家或是臺灣接受心理諮商或是家庭治療專業訓練的助人工作者，需要有意識地梳理潛藏在諮商介入（如：提升個案自我分化程度、理性表達自我需求、一致性的溝通等）中的以個人自我為重的「進步」價值是如何影響個案及他們的社會關係，特別是在臺灣較像是 Roland（1988）指出強調連結、情緒涉入、與原生家庭共感，以及重視家庭情感與認同並捍衛家庭名聲的「家族自我」（familial self）。

筆者十分認同李教授在文中提醒以案家的文化為主軸來了解這個家庭，對於建構本土化的常模及量表與本土文化的理論和技術也樂觀其成，常模和量表都是科學化建立理論知識的方式之一。然而，在臺灣這片土地上，有不同的族群、國籍的人們數代落地生根，也有因跨國婚姻或是工作而移民居留在此。因此，如何定義「本土」便成為重要的問題。是以族裔群體來界定，如：華人？東、西方文化典範來劃分？還是國家框架，如：臺灣？因為「本土」這個區分，如同 McGoldrick（1998）指出，就像界線定義了誰在內、誰在外。筆者再次以美國婚姻與家庭治療的發展為例。在號稱民族文化熔爐的美國這片土地上，從 1960 橫跨 1970 甚至其後 2、30 年中，家族治療領域獨領風騷的人物，如：Bowen、Minuchin、Ackerman、Whitaker、Jackson、Watzlawick、Weakland、Fisch、Bateson、Framo、Boszormenyi-Nagy、Milan group、Haley 等皆是男性，而 Virginia Satir 在當時是

極少數女性家族治療先驅人物,卻在婚姻與家庭治療年會中一場名為「Virginia Satir 對家庭治療來說是危險的嗎?」(Is Virginia Satir dangerous for family therapy?)遭到極不友善的面質,從此遠走海外進行訓練不再參與任何專業會議。在這些傳統家庭治療學派中,標準家庭是以白人、異性戀、中產階級的核心家庭為原型,其中男性為一家之主而女性提供家務及情緒勞動使得男主人可以沒有後顧之憂的在外打拼(McGoldrick, 1998)。自 1970-1998 年非傳統之異性戀婚姻家庭快速從 19%爬升至 30%,其中包括大幅成長的異／同性戀伴侶同居、同志伴侶領養孩子組成之家庭、女性家長之單親家庭等,這些家庭已不願意隱身在白人、異性戀、中產階級、男性觀點之家庭主流價值後,他們的價值需要被看見和認可,在當時有許多社會倡議運動風起雲湧,作為助人專業工作之一的家庭治療卻一直難以回應這樣的改變(Leslie & Morton,2001)。首先,家庭治療專業面臨女性主義許多的質疑,例如,Hare-Mustin(1978)指出,家庭治療忽略傳統性別社會化的結果,更增強性別角色刻板印象,使得女性的處境更為不利;Bogard(1984)認為家庭系統取向治療將暴力視為穩定失功能之婚姻關係的平衡(equilibrium)機制,參與暴力互動循環模式中的夫妻都有能力控制自己的行為,治療師建議夫妻聯合治療(conjoint therapy)處理「暴力系統」(p. 562)不只是強化傳統性別角色,更是使得受暴婦女的生命安全處於危險中;Penfold(1989)評論家庭治療單看家庭系統,忽略學校、職場、同儕、社經階層、種族與性別,特別是兩性之間不平權和性別角色社會化等議題對家庭關係的影響。直至 1980 年代晚期,除了性別,在檢視貧窮、經濟弱勢、種族歧視等議題過程中,一再突顯當時的家庭治療中都是以北美標準核心家庭為規範,同志、單親等其他型態的家庭都只是附加(add-ons)或是特殊性質的家庭,這些觀點更是擴大社會的不平等(McGoldrick, 1998)。1990 年後,多元文化(diversity)才被納入婚姻與家庭治療的學術與專業訓練中。千禧年後,多名家庭治療領域知名大師主張治療師必須關切個案家庭問題所鑲嵌的社會結構性議題(Hardy, 2001; McGoldrick, 2001; Sluzki, 2001),進而納入社會正義的觀點(Tomm, 2003),發展社區家庭治療(Rojano, 2007)以及與社區共同協作之工作計畫,如:Families and Democracy Project(Doherty & Carroll, 2007),與社區中的家庭共同合作進行社會改變。

　　他山之石,可以攻錯。筆者絕非認定美國婚姻與家庭治療發展路線應為推動臺灣家庭治療的標竿,而是藉由梳理它的發展歷史提供臺灣家庭治療工作者思考發展在地知識的可能性。當今的臺灣社會與美國類似的地方在於涵納多元族群、信仰、性傾向等,以及多樣態的家庭組成,如:異性戀伴侶同居或婚姻家庭、同志家庭、新住民家庭、單親家庭、隔代教養家庭、寵物伴侶關係。此外,為提升經濟發展以及長期照顧人力需要,已有大量的東南亞移工進入臺灣社區和家庭共居,更為臺灣多樣文化增添顏色。臺灣家庭治療學界與實務界需要正視與回應這樣快速、多元變遷的社會。筆者建議從交織性(intersectionality, Crenshaw, 1991)的觀點來思考。每個個體都處在多重的社會位置

（multiple social positions），如：性別、社經、性傾向、信仰、族群、國籍、世代、障礙等，這些社會位置中有不同的社會類別（social category），如：性傾向包含異性戀、同性戀、跨性別等，社會類別牽動個體的社會認同。在社會權力階層中，個體因為具有某些社會位置而享有特權（priviledges）和優勢（advantage），同時也因某些其他的社會位置而處於不利或是受壓制的地位。個體是同時具有這些社會位置，難以將某一社會位置獨立其他社會位置之外，因為它們彼此交織（intersect）而產生交互嵌合作用（interlocking effect）。社會位置的交織性在社會、政治、經濟、教育等制度脈絡下產生複雜、無法簡化、不同及易變的效應（Brah & Pheonix, 2004），形塑個體間的日常互動及能動性。

在筆者研究受暴婦女「不配合」家庭暴力防治中心的專業服務發現，「受害者」是個案進入家暴體系後被賦予的社會位置，面對家防體制高舉之受暴婦女人身安全福祉優先的意識形態，與她其他的社會位置，如：妻子、母親與兒媳婦，在嫁雞隨雞、嫁狗隨狗的傳統文化以及家庭優先之性別文化有所抵觸，個案無法配合家防體制不言而喻（程婉若，2019）。因此，筆者十分認同李教授主張在發展臺灣家庭治療知識時不能忽略的是在地文化對互動模式的影響因素，但建議更推進一步必須結合社會位置的交織性、社會、政治、經濟制度之脈絡因素以及文化概念之間的交互作用來梳理家庭關係與互動。以孝道文化概念在高齡化社會家庭中照顧議題為例，成年子女一直被視為照護失能父母的第一順位（陳正芬、王增勇，2017）；然在家庭內的性別分工與社經階層的交織性來看，傳統上照顧被認為是兒子的責任，但實際的照顧工作是由兒子的妻子來承擔，這是照顧工作的性別轉移（藍佩嘉，2009），然而在婦女勞動參與率提升、家庭居住型態的改變、長期照顧體系建置與服務仍不完備、以及照顧人力短缺等結構性因素下（梁麗芳，2016），具經濟優勢的家庭將媳婦照顧工作轉給聘用的家庭看護外籍移工，形成孝道外包的市場轉移（藍佩嘉，2009）。此外，雖是父權優先的文化脈絡，家人間的互動仍然顯示母系家庭的重要性（Yi et al., 2006），在子女共兼父系與母系家庭照顧工作的期待下，勢必影響夫妻／伴侶及與其他家庭成員間的協商和互動模式。因此，影響家庭互動模式的複雜性與變動性是受到傳統文化、個體社會位置的交織性、個人及家庭發展歷程、親子代間及伴侶和家庭關係、社會體制與政策之結構性因素等交互作用。而在考慮現代社會中複雜的文化交織性脈絡時，對本土化的思考可能就不只是文化框架的設定，而是涉及更複雜的本土文化如何在現代社會中交織，就此而言，歐美的方法框架就仍與臺灣社會相關現象的分析有所交集而仍有參考之處。

伍、臺灣家庭治療研究發展

從歷史脈絡來看，婚姻與家庭治療與研究一直有著矛盾的關係。早期家庭治療的先驅認為他們是「研究者－治療師」（researcher-clinicians），如同 Wynne（1983）和 Haley

（1978）宣稱研究者與治療師是沒有差別的。他們藉由反覆觀看治療錄影帶或是從單面鏡後觀看彼此的治療，並花大量的時間討論家庭的互動模式和治療介入與策略對個案及其家庭的影響，從中形成假設。因為假設的發展、測試、修改和在測試都是發生在治療的情境中，因此，研究與治療有直接的關係（Sprenkle & Bischoff, 1995; Sprenkle & Moon, 1996; Wynne, 1983）。

　　然而，以當今的研究標準來說，彼時視為的研究會被認為不夠嚴謹。在受到量化及實驗研究的影響下，家庭治療師不只是需要對許多模糊的治療概念給予清楚的操作性定義，同時也要面對能否發展出具信度及效度之測量方式的挑戰，這都成為家庭治療成效研究（outcome research）的推手（Sprenkle & Piercy, 2005）；與此同時，有其他治療師（如：Pinsof）以量化方法進行治療歷程研究，這些研究進展確立家庭治療在心理治療領域佔有一席之地。其中以 Minuchins 和他在費城兒童輔導門診（Philedaphia Child Guidance Clinic）的同僚為 53 名飽受厭食症之苦的個案以結構學派進行家庭治療最為知名，在後續追蹤治療成效發現 86%的成功率（Minuchin et al., 1975）。雖然這個研究在研究方法學有瑕疵，包含：缺乏控制或對照組、沒有獨立於治療之外的研究團隊、後續個案追蹤時間長度不一致等，仍奠定結構派家庭治療舉足輕重的影響力。然因量化研究簡化和線性的特性，隨著質性研究被廣為接受，家庭治療研究將注意力更放在發現和細節性描述治療的細微之處及複雜性（Atkinson et al., 1991）。

　　如同李教授指出，臺灣家庭治療研究多數仍偏重在理論技術的介紹和應用以及系統觀點之個案分析，建議發展互動模式的評估標準，以互動模式概念化取代個別成員診斷，並發展以家庭為研究單位，開創新的研究方法學進行家庭互動模式研究。但在此可以進一步思考的是，要能建立一套互動模式的評估標準以便能進行概念化，這個系統是封閉式或是開放式？在自然科學實驗中，封閉系統可能自然存在（如：太陽系）或是藉由人為的方式製造出來，透過內外部的控制得當，研究者可觀察到規律的行為序列，並能指出行為運作的機制（mechanism）。屬於社會科學一環的家庭治療處理的是開放系統，亦即，系統與它所處的環境之間有訊息或能量的流動以適應改變。因此，在開放系統中，關係依情境而定，即便家庭治療師觀察到的家庭成員互動模式的重複或是規律性，都只是在某些時空或事件的限制與選擇下，找到「接近」規律性的互動模式。無論是家庭或是治療的關係系統的規律性互動模式，都會依據情況而產生變化。所以，如同 Sayer（2016）指出，互動模式本身不具解釋力，而是必須能找出是什麼形塑模式來進行解釋。此外，互動模式是需要從其鑲嵌在文化意識形態、社會位置交織性以及社會、政治、經濟等脈絡之間的交互作用來理解，因此，要建立評估標準，無論是為治療或是研究，都需要相當難度的轉化。

　　研究方法學上，Tubbs 與 Burton（2005）認為民族誌（ethnography）對於有志以系統觀點進行家庭治療研究是一個極佳的選擇。在複雜的人際互動找到規律性的互動模式，

民族誌透過描述性報導並分析脈絡、事件、行為以及對話，更是指向文化詮釋（Van Maanen, 1995）。Wolcott（1995）指出，民族誌意圖「看見並試圖在文化模式中理解人類的社會行為......，去了解文化是如何影響某群體之特定面向」（p. 83-84）；而系統取向家庭治療研究者本就對於關係、重要事件、支配互動的行為順序的規則、以及在互動過程中產生的意義等深感興趣。然而，無論是以民族誌或是按李教授的建議需要有創新的研究方法學設計，臺灣在地家庭治療研究都需思考以下的議題：首先，家庭治療師是否如家庭治療發展先驅們（如：Bateson、Jackson、Minuchin 等）既是治療者同時是研究者？倘若是，可能會產生專業倫理上雙重關係的爭議；倘若不是，治療與研究各有其獨立運作的團隊，在對於互動模式界定觀點相左，如同 Flaskas（1992）觀察，雙方可能產生惱人的競爭。其次，家庭治療是被安排在座位、燈光、面紙等皆有特定設置的環境中（大部分是治療師工作的諮商室），且大部分是以談話的方式進行，並非家庭每日真實生活的情境，在諮商室中與治療師或是單面鏡後的治療團隊同處的互動，與日常生活互動可能有所不同。因此，研究者或許可考慮搜集諮商室內及真實生活中的家庭互動進行分析，並且訪談家庭治療師與家庭成員，找到諮商室內及外促發改變的因素，將臺灣家庭治療研究從理論介紹與應用和系統觀點之個案分析，擴大至歷程及成效研究，對建立家庭治療本土化的知識有極大的幫助。

陸、期待下個的十年

在少子化與高齡化、家庭組成多元的臺灣社會中，伴侶／婚姻與家庭治療的需求不減。然而，即使是在訊息快速傳遞、全球化的今日，潛藏在西方或是北美家庭治療理論思維中之個人和家庭文化意識形態與臺灣在地文化仍有不同，而諮商師等助人專業工作者在長期專業養成的過程中，常常不自覺內化這些西方或是北美的異性戀、白人、中產階級家庭之文化意識形態。確實如李教授所述，專業人員需要敏察在地多元文化，並能在進行伴侶／婚姻與家庭治療過程中能夠從在地文化層面進行反思。婚姻與家庭治療訓練和研究之本土發展的確是一個很重要的學術路線，在這條路上已經有學術以及實務工作者關注並投入心血，觀點不同是必然，但對話絕對必要。期待下個十年在喧囂聲中，伴侶／婚姻與家庭治療能在臺灣綻放它特有的美麗。

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Patterns of Interaction in Family Relationships Embedded in The Intersectionality of cultures and Modernity: A Response to "Research and Prospect in the Indigenization of Family Therapy"

Wan-Juo Cheng*

Abstract

This paper is a response to Dr. Lee's article entitled "Research and Prospect in the Indigenization of Family Therapy." Through both reviews of the existing literature regarding family therapy in Taiwan from the years 2011-2020 and reflections on his clinical practice as well as the discrepancy between family therapy approaches and Chinese culture, he points out that clinical practice with families on the basis of family therapy models that are the most influential in the contemporary West may not fit into families with Chinese culture background, which the author believes it is significantly imperative for all clinicians to be aware of, and further proposes the future directions of family therapy for training and research in Taiwan. This paper is divided into four sessions including, (1) going over the historical development of family therapy in both US and Taiwan to correspond to Dr. Lee's observation that family therapy training in Taiwan is primarily through workshops; (2) discussing cultural ideologies embedded in therapeutic models that is contradictory to family cultures in Taiwan, which is consistent with Dr's Lee's viewpoint, and further pointing out the consequence if clinicians are not aware of the cultural discrepancy; (3) inquiring to the concept of "indigenousness" and then suggesting of understanding family interactions from the perspective of intersectionality of social positions, local culture, and socio-political-economic structures, with support to Dr. Lee's commitment in developing alternative knowledge regarding family therapy in Taiwan; and (4) providing issues of empirical studies on patterns of interaction in family relationships for researchers to speculate and implications for future directions that might help building

alternative knowledge about family therapy in Taiwan. On the way to develop alternative knowledge requires efforts of those who are interested in family therapy, this paper serves as an initiative to support in formulating a system of knowledge working with couples and families in Taiwan.

Wan-Juo Cheng*   Department of Guidance & Counseling, National Changhua University of Education (wcheng@cc.ncue.edu.tw)

I. Preface

Professor Yueh-Ting Lee is one of the few scholars in Taiwan who received complete marriage and family therapy training in the United States and then returned to Taiwan to teach; and is committed to constructing family therapy from a Chinese cultural perspective. Professor Lee observed family therapy training and research in Taiwan over the past ten years and pointed out an extremely important point in the article. When applying family therapy theories and schools from the West or North America, the influence of local culture on family relationships and interaction patterns cannot be ignored. In addition, He also proposed what needs to be paid attention to and developed in future family therapy training and research from the context of local culture. The author believes that the indigenization of marriage and family therapy does not create another intellectual hegemony but develops an important academic line. In response to Professor Lee's discussion on the current status of family therapy training in Taiwan, the conflict between Western and Chinese culture, and research development, I put my opinions and questions forward in this response article. The purpose is to hope that more scholars and practitioners interested in marriage and family therapy will continue to have more dialogues and jointly prepare efforts for the next ten years of family therapy in Taiwan.

II. The history and current status of the development of marriage and family therapy training in Taiwan and the United States

As Professor Lee mentioned in the article, professionals must continue participating in workshops for further training if they want to improve themselves in various family therapy schools and techniques. This is also the phenomenon observed by the author. First, I will explain the historical development of marriage and family therapy in the United States and Taiwan and why the training in marriage and family therapy in Taiwan is mainly based on workshops. The fertile ground for family therapy as a psychotherapy specialty in the United States since the early 1960s can be traced back to the Macy Foundation's series of seminars on cybernetics held in New York City between 1946 and 1953. Macy Conference on Cybernetics) invites experts from sociology, cultural anthropology, biology, neurology, ecology, mathematics, economics, political science, psychoanalysis, linguistics and computer science to brainstorm ideas on organisms, The behavioral operations and information feedback of social and mechanical systems develop and integrate into a body of knowledge. In addition to transmitting and controlling messages (Weiner, 1948), cybernetics in family therapy is defined in the forms and

behavior patterns of organic systems (Bateson, 1972). In other words, cybernetics is concerned not with events per se but behavior patterns (Ashby, 1956). Cybernetics, systems, and information exchange theory enabled early family research and subsequent family therapists to step out of the psychoanalytic perspective and understand mental disorders from the interactive model of family information exchange and communication (Rasheed et al., 2010). Among them, the most famous is "Toward a theory of schizophrenia" published by Bateson, Jackson, Haley and Weakland in 1956. This epoch-making article at the time laid an essential foundation for communication theory, especially the theory of logic types, and cybernetics for developing marriage and family therapy theory in the next 30 years. Through observation, the interaction between patients with schizophrenia and their family members proposes a circular causal relationship that is entirely different from the individual's inner psychological dynamics and the linear cause and effect of the problem. It also points out that the behavioral patients with schizophrenia symptoms are in a "double situation" where "no matter what they do, they can never get better"—double bind, p. 252. Cybernetics combined with General Systems Theory (Bertalanffy, 1969) that describes system structure is an essential philosophical foundation for various family therapy schools after the early 1960s, such as MRI, structural school, strategic school, Milan school, etc.

Family therapy development in Taiwan can be traced back to the late 1960s. Psychiatrist Zhu-Chang Chen and his social worker colleague Chiu-Chun Wu began to teach themselves family therapy through reading groups at the National Taiwan University Hospital and applied it to psychiatric psychotherapy practice (Chao & Huang, 2013). Comparing the development of family therapy in Europe and the United States at that time, it already had a systemic orientation (such as MRI, short-term family therapy, structural school, strategic school, early Milan School, etc.), experiential orientation (such as Whitaker's symbolic and empirical school, Satir model), and Taiwanese A period of contention among various schools of thought such as the relatively unfamiliar context orientation (such as Boszormenyi-Nagy). At that time, Taiwan also actively invited foreign masters and practitioners of family therapy to come to Taiwan to offer training workshops. For example, Virginia Satir first came to Taiwan in 1982 to provide the "birth of family" workshop. Later, many psychiatrists went to Europe, the United States, and other countries to receive short-term training in family therapy and introduced different schools of family therapy to Taiwan, such as the structural-strategic family therapy of Lian-Qian Yang and Xiu-Zhu Dong (1997). After the time series entered the year 2000, masters of postmodern family therapy, such as Michael White, Insoo Kim Berg, and Harlene Anderson, came to Taiwan to hold workshops, bringing different perspectives to family therapy. Introducing family

therapy-oriented books and workshops as a training model may partially explain Professor Lee's findings. Domestic family therapy focuses on introducing and applying theoretical techniques in the form of workshops.

The United States has its professional association for marriage and family therapy, the American Association for Marriage and Family Therapy (AAMFT). After students graduate from the master's or doctoral program in marriage and family therapy, especially the marriage and family therapy education certification (Commission) affiliated with AAMFT on Accreditation for Marriage and Family Therapy Education) are eligible to apply for marriage and family therapist licensure in this state or other states. From degree programs, professional licenses, further professional training, national and state marriage and family therapy professional associations, and professional journals (such as Journal of Marriage and Family Therapy, Family Process, American Journal of Family Therapy, Contemporary Family Therapy, Journal of Feminist Family Therapy), marriage and family therapy ranks among the top five helping professions in the United States, along with psychiatry, psychology, social work, and counseling. However, regarding the development of marriage and family therapy in Taiwan, as Professor Lee pointed out, psychologist regulations and department curriculum considerations limit on-campus training, so only introductory courses in family therapy can be provided. The author agrees with Professor Lee's observation that most guidance and counseling departments and research institutes in Taiwan will offer family counseling courses that cover all basic concepts as much as possible within a limited time. However, the National Changhua University of Education established Taiwan's first Marriage and Family Therapy Institute in 2007; Taiwan still has no marriage and family therapy license. It is regulated by the Psychologist Act, along with counseling and consultation. Although there are many professional courses in the master's degree program in marriage and family therapy, the number of credits required for the counseling psychologist certification exam has reached 21 credits, so the major in marriage and family therapy is still squeezed out—curriculum space. Therefore, as Professor Lee mentioned, most students in counseling graduate school can only participate in related workshops if they want to further learn about marriage and family therapy. This is a unique way of developing marriage and family therapy in Taiwan.

III. The integration of family therapy school and local culture

Culture is reflected through the daily practice and collaboration of ordinary people. The same is true in family therapy. The counselor's professional intervention techniques and

professional doings manifest cultural ideology. As Professor Lee pointed out in the article, Bowen's concept of "self-differentiation" needs to be considered for its applicability when applied to local families in Taiwan. The author strongly agrees with this point of view and intends to sort out further the ideology hidden in this point of view, and uses a practical case to echo Professor Lee's point that Western culture values self-differentiation and independence in the context of a culture that values filial piety, it is necessary to break The correlation between the degree of self-differentiation and the parent-child relationship, on the other hand, further illustrates that in the context of familial culture, the self must be considered in the context of family relationships. Thinking about family members and taking responsibility are also self-expressioSelf-differentiation refers to an individual's ability to handle emotional reactions and respond under emotional stress through rational thinking rather than an emotional drive to balance intimacy and autonomy in relationships (Bowen, 1978). Parents with a higher degree of self-differentiation can better self-regulate and maintain a solid sense of self, are more flexible in upbringing, and clearly distinguish the boundaries of responsibility between parents and children. Parents can Clarify and express their expectations clearly but do not impose their expectations on the child. Respect the child's choices, let the child face problems, and let him/her take responsibility for his/her decisions. Suppose parents have a high degree of self-differentiation. In that case, their children will also have a high degree of self-differentiation and be able to establish a close, independent, and healthy parent-child relationship. This is indeed a reflection of individualistic thinking and a manifestation of neo-liberalism. Neoliberalism advocates reducing government intervention in the economy under the principle of "market supremacy," including cutting public expenditures, privatizing property, relaxing corporate regulations, and abandoning trade protection measures. Therefore, in a mature civil society, people and People compete with each other to maximize their interests (Adams et al., 2019). To this end, neoliberalism emphasizes the removal of any restrictions that hinder personal growth and self-expression, allowing individuals to have the freedom of self-determination and self-reliance. Parents with a high degree of self-differentiation cultivate self-determined and responsible children. A parent-child relationship that combines intimacy and autonomy becomes the cultural pattern of the "ideal" self and relationship and is the goal that individuals strive to pursue. This ideal self and relationship have become the mainstream psychological discourse and exist independently of context. In cultural standardization, whether through education, media, policies, etc., discursive knowledge has become a challenge to the status quo of local culture, and provide alternatives while erasing local cultural identity (Sugarman, 2015; Teo, 2018).

Take the author's case Z in practice as an example. Z is worried about whether to continue studying for graduate school. He plans to work for a few years after graduating from college. While accumulating work experience, he can earn the tuition and living expenses he will need for graduate school. However, his parents hope that he will directly study for graduate school after graduating from college, and they expressed their willingness to provide maximum financial assistance, whether it is tutoring or tuition fees for future studies. Z's parents respect his opinions and decisions on many life events and issues. However, their parents repeatedly express their expectations when entering higher education. However, he often quietly accepts his parents' arrangements after struggling with himself several times. However, thinking in terms of socioeconomic class culture yields a different understanding. Z's parents are blue-collar workers. In addition to farming, they also work at construction sites to maintain the family's basic food and clothing. Z is the youngest child in the family and the only child among his siblings to attend a national university. His parents hope that he can study.

With excellent academic qualifications, children can move from the blue-collar class to the middle class and become more financially comfortable. In the end, Z also decided to go to graduate school first. One of the reasons was that he was worried that his parents' health was deteriorating and they would not be able to balance education and care in the future. From the perspective of Bowen's theory, Z and his parents are typically of low "self-differentiation." The parents project their expectations on Z, who has become an adult but has no expectations for his future career. Plans cannot be planned independently. However, from the perspective of Taiwan's familial culture, where family needs take precedence over individuals, individual self-differentiation needs to be understood from the perspective of family relationships and context.

Foucault (1982) pointed out that individuals become subjects to transform human beings and form knowledge through objectification. Then, differentiate the subject from others and the self (dividing practices), such as emotional/rational, healthy/dysfunctional, dependent/autonomous, etc. The importance of differentiation is that it not only affects how individuals understand themselves and the world but also how they understand themselves and the world—one of the operational means of governance and self-regulation. Individuals use knowledge to label, classify, conceptualize, and attach identity labels to generate self-knowledge and awareness, attribute themselves to a particular identity or identity, and finally transform into subjects. Still thinking about the above case based on Bowen's theory, high or low self-differentiation becomes a distinction. After talking to a counselor who is regarded as a "problem-solving expert, the case learned that he was a "low self-differentiated" person.

Individuals and their impact on intimate relationships, they "choose" to move toward "self-responsibility," and counselors improve their self-differentiation through talks and establish a "healthy" parent-child relationship. In removing the local cultural context, Counselors inevitably become agents of neoliberalism.

Taiwanese families still have cultural norms of self-restraint and tolerance, obedience to elders, and cooperation to promote family unity and harmony (Yeh et al., 2006). Therefore, the author strongly agrees with what Professor Lee pointed out in the article that whether children serve as coordinators or helpers between parents or even need to perform the roles and responsibilities of parents, the so-called "parenting" of children has its local cultural implications. The behavior of the individual case must also be placed in the local culture, context, and social situation to develop an understanding different from professional theoretical knowledge. However, in the complex cultural context and social relations, counselors and other helping professionals hope to find a map that can eliminate the unnecessary, retain the essentials, and quickly sort out and solve individual case problems. Therefore, therapeutic schools and professional theories serve as maps that help counselors name and describe the phenomena they observe, explain the connections between concepts, and define problems while proposing solutions. However, one of the pioneers of family systems theory, Gregory Bateson (1979), cited philosopher Alfred Korzybski's assertion that "the map is not the territory, and the name is not the thing named" p. 30) illustrates that in all thoughts, perceptions, or discussions of perceptions, coding, and transformation are required between reporting and reported events. In this process, classification is the key. Thus, he points out that naming is the distinction, and mapping itself is the naming process. Categories carry values, indicating what is or is not worth doing and the types of people individuals do or do not want to be (Hacking, 1999). In searching according to the picture, Ian Hacking (2006) reminds us to consider the two dimensions of naming/labeling. One is from the "reality" created by experts; the other is the labeled and named individual pairs. The reactions and actions of the designated "name" and "reality." The concept of family system orientation, whether it is "parental child" or "cross-generational alliance," is a created "reality," and the therapist's intervention based on reality has its legitimacy; but "reality" and the case there may be a gap in the daily "actuality" of patients and their families. Therefore, the therapist must be sensitive to how the "name" in this "reality" changes the patient's real-life interactions with others.

IV. From traditional culture to multiculturalism: cultural intersectionality

The development of modern psychotherapy has spanned more than 200 years. The development of counseling in Taiwan began in 1958 with the founding of the China Guidance Association (renamed Taiwan Guidance and Counseling Association), while family therapy only started ten years later. Still, the same thing is that all theories and techniques come from the West or North America. Not only psychological expertise but many political, economic, social, educational, and other fields also refer to or quote systems and operating models with "progressive" values and ideologies in Western or North American countries to improve the conformity of "conservative" societies. The progress of the West and North America and the conservatism of the East form a distinction between "Self" and "Others." Progressive values are often associated with political correctness (Kavipo, 2019); in a society of "others," "progressive" values become a gaze, examining whether one's own and others' thinking and actions are "correct," and distinguishing between "self" and "other" again and again. This is common in Taiwan's contemporary society. There is a gap in the distribution of class resources with Western progressive values between different generations, forming a distinction between the "elders" and the "younger generations" (Kavipo, 2019). Take raising children as an example. Contemporary middle-class parents in Taiwan have more parenting resources or transnational resources than their previous generation. They mostly describe the ideal parent-child relationship regarding cooperation with children, equality, and mutual trust between parents and children, believe that they are unable and unwilling to use the authoritative and obedient discipline methods commonly used by their parents because the outdated and traditional parenting methods of the previous generation are not suitable for modern children; however, these parents also admit that they often unintentionally adopt the same practices as their parents I fell asleep unknowingly and felt deeply annoyed (Lan, 2019). Therefore, whether in Western countries or Taiwan, helping workers who receive professional training in psychological counseling or family therapy need to consciously sort out the issues hidden in counseling intervention (such as improving the degree of self-differentiation of the case, rationally expressing self-needs, and consistency). How does the "progressive" value of personal self-focus in communication affect the cases and their social relationships, especially in Taiwan? Roland (1988) pointed out that the emphasis is on connection, emotional involvement, empathy with the family of origin, and the "familial self" that values family affection and identity and defends the family's reputation.

The author strongly agrees with Professor Lee's reminder in the article to use the client's culture as the main axis to understand the family. I am also optimistic about the construction of indigenous norms and scales and the theory and technology of local culture. Norms and scales

are both scientific—one of the ways to build theoretical knowledge. However, in Taiwan, people of different ethnic groups and nationalities have settled here for generations, and some have immigrated to live here because of cross-border marriages or jobs. Therefore, how to define "indigenous" has become an important issue. Is it defined by ethnic groups, such as Chinese? Divide Eastern and Western cultural models? Or is it a national framework, such as Taiwan? Because the "indigenous" distinction, as McGoldrick (1998) points out, is like a boundary that defines who is in and who is out.

The author takes the development of marriage and family therapy in the United States as an example. In the United States, which is known as the melting pot of national culture, from 1960 to 1970 and even the next two or three decades, there were leading figures in the field of family therapy, such as Bowen, Minuchin, Ackerman, Whitaker, Jackson, Watzlawick, Weakland, Fisch, Bateson, Framo, Boszormenyi-Nagy, Milan group, Haley, etc. are all men. Virginia Satir was one of the few female family therapy pioneers then. However, at the annual meeting of marriage and family therapy, a speech titled "Is Virginia Satir dangerous for family therapy?" left Satir faced with a very unfriendly confrontation. From then on, she went overseas for training and no longer participated in professional conferences. In these traditional schools of family therapy, the standard family is based on the white, heterosexual, middle-class nuclear family, in which the male is the head of the family, and the female provides housework and emotional labor so that the male owner can work outside the home without worries (McGoldrick, 1998). From 1970 to 1998, the number of non-traditional heterosexual marriages and families increased rapidly from 19% to 30%, including the substantial growth of heterosexual/homosexual couples living together, families composed of gay couples adopting children, single-parent families with female heads, etc. These families have Unwilling to hide behind the mainstream values of family from a white, heterosexual, middle-class, male perspective, their value needs to be seen and recognized. Many social advocacy movements were surging at that time, but family therapy, one of the professional tasks of helping people, has always been difficult to respond to such changes (Leslie & Morton, 2001). First of all, the family therapy profession faces many feminist questions. For example, Hare-Mustin (1978) pointed out that family therapy ignores the results of traditional gender socialization and strengthens gender role stereotypes, making women's situation even more disadvantaged; Bogard (1984) believes that family systems-oriented therapy regards violence as an equilibrium mechanism to stabilize dysfunctional marital relationships. Couples involved in the violent interaction cycle model have the ability to control their own behavior. The therapist recommends conjoint therapy to deal with it. "Violence system" (p. 562) not only reinforces

traditional gender roles but also puts the lives of violent women at risk; Penfold (1989) commented that family therapy only looks at the family system and ignores schools, workplaces, peers, social and economic issues. Class, race, and gender, especially the impact of issues such as gender inequality and gender role socialization on family relationships. Until the late 1980s, in addition to gender, in the process of examining issues such as poverty, economic disadvantage, and racial discrimination, it was repeatedly highlighted that family therapy at that time was based on the North American standard nuclear family and other types of families such as gay and single-parent families were just These views of add-ons or families of special nature widen social inequality (McGoldrick, 1998). It was only after 1990 that diversity was incorporated into the academic and professional training of marriage and family therapy. After the millennium, many well-known masters in the field of family therapy advocated that therapists must pay attention to the social structural issues embedded in individual family problems (Hardy, 2001; McGoldrick, 2001; Sluzki, 2001) and then incorporate the perspective of social justice (Tomm, 2003), developing community family therapy (Rojano, 2007) and working with communities, such as the Families and Democracy Project (Doherty & Carroll, 2007), to work with families in the community to effect social change.

"The other mountain's stone can polish jade" (idiom; means: we all have something to learn from others). The author by no means believes that the development path of marriage and family therapy in the United States should be the benchmark for promoting family therapy in Taiwan, but rather, by sorting out its development history, it provides Taiwanese family therapy workers with the possibility of thinking about developing indigenous knowledge. Today's Taiwanese society is similar to the United States in that it accommodates diverse ethnic groups, beliefs, sexual orientations, etc., as well as diverse family compositions, such as heterosexual couples cohabiting or married families, gay families, new resident families, single-parent families, and intergenerational families. They are nurturing family and pet companionship. In addition, to enhance economic development and care for long-term workforce needs, many Southeast Asian migrant workers have entered Taiwanese communities and lived with their families, adding color to Taiwan's diverse culture. The academic and practical circles of family therapy in Taiwan must face up to and respond to such a rapidly changing and diverse society. The author suggests thinking from the perspective of intersectionality (Crenshaw, 1991). Each individual has multiple social positions, such as gender, socioeconomics, sexual orientation, belief, ethnicity, nationality, generation, disability, etc. There are different social categories in these social positions, for example, sexual orientation includes heterosexuality, homosexuality, transgender, etc., and social categories affect the social identity of individuals. In the social

power class, individuals enjoy privileges and advantages because of certain social positions. At the same time, they are disadvantaged or suppressed because of certain other social positions. Individuals have these social positions simultaneously, and it is difficult to isolate one social position from other social positions because they intersect with each other and produce an interlocking effect. The intersectionality of social positions has a complex, fundamental, different, and volatile impact on social, political, economic, educational, and other institutional contexts (Brah & Pheonix, 2004), shaping daily interactions and agency among individuals.

When the author studied the professional services of domestic violence prevention and treatment centers for women who have been violently "uncooperative," they found that "victim" is the social position assigned to the case after entering the domestic violence prevention system. In the face of the domestic violence prevention system, the personal safety and well-being of battered women are given priority. The ideology of the woman conflicts with her other social positions, such as wife, mother, and daughter-in-law. In the traditional culture of "marrying a chicken, follow the chicken, marrying a dog, follow the dog" and the gender culture of family priority, the clients cannot cooperate with the family defense system. It goes without saying (Cheng, 2019). Therefore, the author strongly agrees with Professor Lee's assertion that the influence of local culture on interaction patterns cannot be ignored when developing family therapy knowledge in Taiwan. However, I suggest that further advancement must be based on the intersection of social location and the context of social, political, and economic systems: factors and the interaction between cultural concepts to tease apart family relationships and interactions. Taking the cultural concept of filial piety as an example of the issue of care in families in an aging society, adult children have always been regarded as the priority in caring for disabled parents (Chen & Wang, 2017); however, the gender division of labor within the family is closely related to the socioeconomic class.

From the perspective of intersectionality, care is traditionally considered to be the responsibility of the son, but the actual care work is undertaken by the son's wife. This is a gender transfer of care work (Lan, 2009). However, as women's labor participation rate increases, family living patterns change, and the long-term care system and services are still incomplete. Due to the shortage of care manpower and other structural factors (Liang, 2016), families with economic advantages transfer their daughter-in-law care work to hired foreign family caregivers. Migrant workers form a market shift for filial piety outsourcing (Lan, 2009). In addition, despite the cultural context in which paternal authority is given priority, family interactions still show the importance of the matrilineal family (Yi et al., 2006). With the expectation that children will care for both paternal and matrilineal families, this will inevitably

affect couples/partners. And patterns of negotiation and interaction with other family members. Therefore, the complexity and variability that affect family interaction patterns are influenced by the interaction of traditional culture, the intersection of individual social positions, personal and family development processes, intergenerational relationships between parents and children, partner and family relationships, and structural factors such as social systems and policies. When considering the complex cultural interweaving context in modern society, thinking about indigenization may involve setting a cultural framework and how more complex local cultures are intertwined in modern society. In this regard, the European and American methodological framework still has some intersection with analyzing phenomena related to Taiwanese society and still has reference points.

V. Research and development of family therapy in Taiwan

Historically, marriage and family therapy and research have always had a contradictory relationship. Early pioneers of family therapy considered themselves "researcher-clinicians," as Wynne (1983) and Haley (1978) claimed that there was no difference between researchers and therapists. They form hypotheses by repeatedly watching therapy videos or each other's therapy sessions from behind a one-way mirror. They spend a lot of time discussing family interaction patterns and the impact of therapeutic interventions and strategies on the case and their family. Because hypothesis development, testing, revision, and retesting occur within a therapeutic context, research has a direct relationship with therapy (Sprenkle & Bischoff, 1995; Sprenkle & Moon, 1996; Wynne, 1983).

However, by today's research standards, the research considered at that time would be regarded as insufficiently rigorous. Influenced by quantitative and experimental research, family therapists not only need to give clear operational definitions to many vague treatment concepts but also face the challenge of developing reliable and valid measurement methods. have become the promoters of family therapy outcome research (Sprenkle & Piercy, 2005); at the same time, other therapists (such as Pinsof) have used quantitative methods to research the treatment process. These research advances have established the role of family therapy in psychotherapy and occupy a place in the field. Among them, Minuchins and his colleagues at the Philadelphia Child Guidance Clinic are most famous for using the structural school of family therapy for 53 cases suffering from anorexia. In the follow-up of the treatment results, the success rate was found to be 86% (Minuchin et al., 1975). Although this study has flaws in the research methodology, including lack of control or comparison group, no research team

independent of the treatment, inconsistent length of follow-up case tracking, etc., it still establishes the decisive influence of structural family therapy. However, due to the simplified and linear nature of quantitative research, as qualitative research became more widely accepted, family therapy research focused more on discovering and describing in detail the nuances and complexities of treatment (Atkinson et al., 1991).

As Professor Lee pointed out, most family therapy research in Taiwan still focuses on introducing and applying theoretical techniques and case analysis from a systemic perspective. It is recommended to develop evaluation criteria for interactive models, replace individual member diagnosis with interactive model conceptualization, develop the family as the research unit, and pioneer new research methodologies to study family interaction patterns. But what can be further thought about here is that it is necessary to establish a set of evaluation criteria for interactive models so that they can be conceptualized. Is this system closed or open? In natural science experiments, closed systems (such as the solar system) may exist naturally or be created artificially. Researchers can observe regular behavioral sequences through proper internal and external control and point out the reasons for behavioral operations. Mechanism. Family therapy, part of the social sciences, deals with open systems. That is, there is a flow of information or energy between the system and its environment to adapt to change. Therefore, in an open system, relationships depend on the situation. Even if the family therapist observes repetition or regularity in the interaction patterns of family members, they can only find "close" patterns under the restrictions and selection of specific times, spaces, or events. Sexual interaction patterns. The regular interaction patterns of relationship systems, whether family or therapeutic, will change depending on the situation. Therefore, as Sayer (2016) pointed out, the interaction model does not have explanatory power, but it is necessary to determine what the shaping model is to explain. In addition, the interaction model needs to be understood from its interaction between cultural ideologies, the intersectionality of social positions, and social, political, and economic contexts. Therefore, it is necessary to establish evaluation standards for treatment or research. Both require quite a difficult conversion.

Regarding research methodology, Tubbs and Burton (2005) believe that ethnography is an excellent choice for those interested in conducting family therapy research from a systemic perspective. Finding regular interaction patterns in complex interpersonal interactions, ethnography points to cultural interpretation through descriptive reporting and analysis of contexts, events, behaviors, and conversations (Van Maanen, 1995). Wolcott (1995) pointed out that ethnography intends to "see and try to understand human social behavior within cultural patterns... to understand how culture affects specific aspects of a group" (pp. 83-84).

Researchers in systems-oriented family therapy are inherently interested in relationships, important events, the rules that govern the sequence of behaviors in interactions, and the meanings that arise during interactions. However, whether it is based on ethnography or innovative research methodological design as suggested by Professor Lee, indigenous family therapy research in Taiwan needs to consider the following issues: First, whether family therapists are as good as the pioneers in the development of family therapy (such as Bateson, Jackson, Minuchin, etc.) are both healers and researchers? If so, disputes over the dual relationship in professional ethics may arise; if not, therapy and research each have their own independently operating teams with different views on defining interaction models. Flaskas (1992) observes that annoying competition may arise between parties. Secondly, family therapy is arranged in an environment with specific settings such as seats, lights, tissues, etc. (mostly consultation rooms where therapists work), and most of them are conducted in the form of conversation, which is not the daily reality of the family. Life situations and interactions in a counseling room with a therapist or a therapy team behind a one-way mirror may differ from everyday interactions. Therefore, researchers may consider collecting family interactions in the counseling room and real life for analysis, interviewing family therapists and family members to find the factors that promote change inside and outside the counseling room, and introducing Taiwan's family therapy research from a theoretical perspective. Case analysis with applied and systemic perspectives expanded to process and effectiveness research is of great help in establishing indigenous knowledge of family therapy.

VI. Looking forward to the next ten years

In Taiwan's society, where the birthrate is declining, the population is aging, and families are diverse, the need for couple/marriage and family therapy continues to grow. However, even in today's world of rapid information transmission and globalization, the personal and family cultural ideologies hidden in Western or North American family therapy theoretical thinking are still different from Taiwan's local culture. As counselors and other helping professionals in the process of long-term professional development, we often unconsciously internalize the cultural ideologies of heterosexual, white, middle-class families in the West or North America. Indeed, as Professor Lee mentioned, professionals need to be sensitive to local multiculturalism and be able to reflect on the indigenous cultural level during the process of couple/marriage and family therapy. The indigenous development of marriage and family therapy training and research is indeed a crucial academic route. On this road, academics and practitioners have paid

attention and devoted their efforts. Different views are inevitable, but dialogue is necessary. I hope that in the next decade, couples/marriage and family therapy can bloom its unique beauty in Taiwan amidst the noise.

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