# Systemic analysis of group affiliation: Clinical uses of the SAGA

By Philippe Compagnone and Catherine Jean, Université de Bordeaux2

# Introduction

SAGA was initially developed for use in clinical setting for family therapies. Adapted from the FAST (Family System Test) developed by Gehring (1992), SAGA examines family representations of their dynamic relationships and social organization. Following our initial explorations using the FAST, we sought to develop a more user friendly systemic tool capable of assessing both affinities and power differentials of family social ecology (Crook, 1970; Strayer, 1984) in both clinic and research settings. In its current version, the SAGA serves as a floating object establishing « an experimental and exploratory field that family members share with therapists» (Caillé et Rey, 2004, p 49).

As a clinical procedure, the SAGA offers a concrete illustration of Minuchin's structural perspective on family dynamics (Minuchin, 1974). Family dynamics depend both on alliance relationships (mutual affinity and support) and on lines of authority (influence and decision making). The family is viewed as a dynamic system characterized by repetition of transactional patterns between members establishing how, when and with whom different individuals can relate. These patterns, more or less stable, reflect explicit or implicit reciprocal adaptation and bargaining between family members.

In order to access the family structure, Minuchin defines the concept of boundaries as the rules by which someone participates in a subsystem. These rules secondarily define how and where the authority lies. Characterizing the boundaries enables the characterization of the family functioning. Within a system, the boundaries between the different subsystems can either be clear, permeable or rigid. According to this approach, proper functioning within different subsystems implies clear boundaries. Every family subsystem is said to have specific tasks and make specific demands on its members. The boundaries have to be sufficiently marked to allow the personal development of each member of a particular subsystem protected

from interference by other subsystems, but also sufficiently opened to allow communication and interaction between subsystems and with the social world.

Families are subject to both internal pressures coming from developmental changes of its different members and to external pressures from the social world. The functionality of a family depends on the abilities of family members to mobilize appropriate transactional patterns when internal and/or external conditions demand adaptive restructuring. Although relationship styles, such as enmeshed relationships and/or social disengagements (Minuchin, 1974), do not in themselves determine the health status of a family, from a family dynamic perspective, such transactional patterns can be viewed as factor of vulnerability in case of demand for change.

In enmeshed relationships, boundaries are too permeable and family members become over-involved and entwined in one another's personal and emotional life. Interference between subsystems increases (knowing each other's secrets, being continually attuned to each other's feelings). Family members have strong feelings of loyalty and belonging and little autonomy. A small demand on one member has an immediate impact on the whole system. On the other hand, rigid boundaries define the disengaged style where family members share a common home but operate as separate units with little interactions or exchange of feelings. Often family member have strong sense of personal autonomy, but lack a feeling of belonging or being in connection with each other. In such cases, the level of stress must often be quite high in order to mobilize the entire family network in a collective adaptive response.

The function of the family, as a mediator with the social world, is to provide a context where each family member can develop a sense of identity, balancing feeling of belonging and feeling of autonomy. Centripetal functions protect family members and enhance their feeling of belonging. Centrifugal functions promote individuation processes and prepare children for their future emancipation, developing selfcompetence, social skill (co-operate, compete, resolve conflict) and autonomy (emotional, economic and social). So, ideally boundaries have to be all together flexible, confining and permeable to allow for the necessary interactions for the system to function (as a living cell). If the boundaries are too permeable, the system loses its integrity, if they are too rigid the exchange with the context is too poor and the system's entropies goes up (Salem, 2005). As a dynamical system, only pathogenic and dysfunctional families maintain a fixed balance between centripetal and centrifugal forces. Periodically, most families go through life cycle transitions or crises, requiring adjustments, in particular with positive feedback promoting new behaviors. The expressions of a child's autonomy represent such natural crises when boundaries have to be re-negotiated within the family. During its evolution a family goes from balanced to unbalanced phases. A dysfunctional family is a system responding to external and internal demands by reification of its functioning. Thus, a main factor for the adaptation of a family is its degree of openness to internal and external information (Salem, 2005).

The concept of boundaries can easily be assessed from two dimensions: cohesion and hierarchy. Cohesion indicates who is with whom, in other words this variable underlines the different subsystems in the family. Hierarchy brings to light the issues of authority and leadership within the family system, as well as in its various subsystems. In assessments of family cohesion and family hierarchy, tools such as FAST or SAGA provide a picture of the family in different contexts in order to help the therapist elaborate a notion of current family functioning. Highlighting transactional patterns and boundaries, this information facilitates the formulation of hypotheses about the functionality of family transactions and family organization. In the structural approach the therapist contribution is to remodel the boundaries: he clarifies diffuse boundaries and opens the rigid ones.

# SAGA description

SAGA is a three dimensional test where little puppets (8-12 cm) representing each member of the family are placed on a circular board (diameter 45 cm) divided into 41 colorful (yellow and red) squares. The SAGA provides the dynamical representation of the organization of the family from the point of view of one or all the members of the family in three situations: typical functioning, interpersonal conflict and ideal functioning.

In the case of the collective assessment with all the family members, each member of the family puts in turn his/her puppet on the board. Then, each member has the possibility to change the place of any puppet, as he/she wants. The process continues until every body is more or less in agreement with the result. Once the puppets are in place, the family points out with tokens who decides and how often (to what level with red token) and who has influence and how often (to what level with blue token). The same representations are requested from the family in a situation of conflict (using a practical example from the family's life) and in identifying what would be the ideal situation (if everything were possible...). To record each representation, it is easer and faster to use photographic snapshots. It will be possible to use these pictures any time later during the therapy.

Cohesion is measures in terms of the distance between pairs of puppets on the board. Hierarchy is indexed in terms of the number of red or blue tokens estimating the power of decision or of influence of each family member. From a research perspective, different variables can be derived depending on the immediate objective. For example it is possible to assess the cross generational coalition when comparing the cohesion from one dyad parent-child to the parental dyad. Comparing child and parental hierarchy can reveal hierarchy reversals. However, in clinical context, we do not need such guantitative evaluations. A gualitative assessment from the analysis of what went on during the session and from the pictures of the SAGA placements in the different social contexts is sufficient to provide useful therapeutic hypotheses concerning family functioning.

# **Clinical illustration**

CREAF (Resource Center for Child, Adult and Family) is a non-profit organization offering individual and family therapy. Our team is composed of professional therapists from different theoretical and practical backgrounds (Cognitive and Behavioral Therapy, Psychodynamic analysis, as well as Family Therapy). CREAF favors brief therapy (about 10 sessions over ten to fifteen weeks) to help individuals and families in the elaboration of a plan for optimizing use of their own resources when to coping with crisis. When the declared reason for consultation concerns a specific child, a first therapist sees him or her, usually with both parents present. (Unfortunately, only one parent (usually the mother) too often accompanies many children). Once the therapeutic alliance is established the first therapist is able to propose a session with the participation of a second therapist. This session is organized with SAGA mediation in order to clarify dynamic relationships within the family. The joint session with two therapists occurs only once. With the help of information available from the SAGA, the second therapist attempts to provide a second perspective and complementary information on both the family system and on the prevailing family/therapist relation (here we see a similarly to the "gossip" approach). The findings from this joint session are ultimately integrated by the first therapist in the elaboration of a therapeutic project for the family. In this context, SAGA serves to generate and to circulate information pertinent to adjusting both the family system and the more complex system of collective therapeutic support.

## Case study

A therapist, trained in developmental psychology, first met with Peter and his mother when Peter was 2.5 years old. He had begun pre-school the previous month and his mother was concerned about certain behavioral problem, both at home and at school. The mother complained about constant conflict between her and her son, who provoked and aggressed his younger sister (13 months old). Teachers at school described Peter as a difficult child. The purpose of

the first therapeutic sessions with Peter and his mother was to reassure the mother concerning her own parental skills and to reframe her perception of the apparent problems in terms of developmental explanation of early psychosocial stages. As a child between 2 and 3 years, Peter was seen as temporarily caught in a negativistic period, where he could be expected to resist parental demands in order to assert his emerging autonomy. After a short session with the mother about parenting, the first therapist was able to see Peter alone to help him understand his emerging autonomy and to cope more effectively with daily separations from his mother. After three sessions, the mother was considerably reassured and more confident about her capacity to cope with Peter's tantrums. During the same period, Peter gained more assertiveness at school and in his relationships with adults. At this time, the mother talked about her own difficulties concerning her role as a wife since the birth of her last child. She saw herself as a dedicated mother unable to allow others to assume the care of her children, including even her husband. With respect to their conjugal relation, she complained about the distance of her relationship with her husband. Often when he was at home, she would invent chores to isolate herself, rather than to engage into communication with him. With this new topic in mind, a meeting with a second therapist was planned around the SAGA to assess the position of each member in this family of four. The goal of this joint session was to clarify the boundaries of the conjugal and parental system from those of the children system.





Figure 1. Illustration of the SAGA in a clinical case study. Upper left panel: Puppets chosen by Peter and his family (P = father, M = mother, Pierre = Peter, E2 = Peter's sister). Upper right panel (1B): Positioning of the puppets and influence tokens on the SAGA board in a typical situation. Lower left panel (1C): Positioning of the puppets and influence tokens on the SAGA board in the ideal situation. Lower right panel (1D): Positioning of the puppets and influence tokens on the SAGA board in the ideal situation.

## Description of the SAGA

The entire family was present (father, mother, Peter and his sister) with the two therapists. Throughout session, the little sister remained on the coach between her parents (even though she had the opportunity to play with different toys arranged in a play area). Peter remained near his mother, but as far as possible from his father. The parents alone decided the placement of the four puppets on the SAGA board, as well as the attribution of token of influences associated with each family member (under 6 years old the instructions can be difficult to understand). Peter's activities

alternated between looking at what his parents were doing and playing with toys.

## Typical situation

The mother placed her puppet in the center of the board with her two children closer to her than to her husband. She commented, "I am feeling single". The father agreed, but he placed his puppet closer to his daughter's figure, reinforcing his withdrawal from the relationship between Peter and his mother, the son's puppet was arranged with his back to the father (Figure 1B). Regarding differentials in to decision-making power, the mother gave herself 9 tokens, while the father gave himself only one. Peter received 5 tokens for influence, his sister 2 and the father 1. At this time, the father commented that he had been working a lot, leaving the house early in the morning, coming back late in the evening. The mother described herself as exhausted by the day at home alone with the children.

## Conflicting situation

Two kinds of opposition were described as typically arising in the family: Conflicts between the parents and conflicts with the children. The common conflicts between the parents usually started with an argument between Peter and his father, the mother intervening before their resolution of the conflict. The position of each member of the family was changed as shown in the pictures of Figure 1C. Concerning the power of decision during the conflict the mother got 5 tokens and the father one. The involvement of Peter in the conflict situation led to him being given 5 tokens for the influence.

## Ideal situation

The mother hesitated at length, pointing out her ambivalence and difficulties at allowing her husband a place too close to the children. Eventually, speaking together the parents agreed on their common desire "to restore the peace" in their family. They then placed the parental puppets close to one another in front on the children's. All four puppets being placed within the inner most circle of the board (Figure 1D). The power of decision was represented by 4 tokens for the mother and 3 for the father. 2 tokens of influence were given for each child.

This brief session using the SAGA allowed the formulation of a series of different topics as systemic hypotheses:

- 1. The interference of the mother in the relationship between the father and their children, which prevented the father to assume his paternal position with his children. This dynamic placed Peter in a situation where he often provoked conflict with his father in the presence of his mother.
- 2. The strength of the relation between Peter and his mother and the difficulty, for both, to accommodate to mutual separation. Such a situation could engender a conflict of loyalty for Peter because he may feel that he betrays his mother when he gets along with his father or another adult.
- 3. The difficulties for the father to assume

his place near his children because he suffers from a feeling of "rejection" by his son.

At the end of the SAGA session, parents and therapists agreed on the need to work on the couple in order to clarify the boundaries between the parental system and the children system. Peter was again having some difficulties at school, the mother insisted on the need for him to continue seeing the child psychologist. Both therapists interpreted this demand as the need for the mother to be reassured while facing the task to focus on her couple. Finally, two sessions during the following month were needed to assure that the mother has integrated the various topics highlighted during the SAGA session. The impact of the parental communication and of the maternal exhaustion made it particularly difficult for the mother to link to the family's ambience and to Peter's behavioral problems. Little by little the mother accepted the idea to focus less on her son and to take more time for herself and for her couple in order to live again as a women and as a wife and not only as mother. She also accepted to renew the trust in her husband and to separate from her highly controlling position in the family, especially concerning the children's education.

# Interpretation

This case study highlighted the importance for a systemic approach when working with children in difficulty, especially with regards to how these difficulties impact and involve the whole family. The situation described here illustrated the difficulties of separation between a mother and her child, accentuated by the beginning of schooling (usually, in France, when the child is around 3 years old). In this case it signaled the first true separation between Peter and his mother. From the behavioral difficulties of her son, the mother, little by little, became aware of the dysfunction in their family and accepted to engaged into a family session around the SAGA. Such a session would not have made sense at the beginning of therapy. It was first necessary to reassure the mother concerning her son's behavioral problems and her own parenting skills. Similarly, more time was necessary after the SAGA session in order to allow the mother and the father to integrate the information generated by the SAGA.

This series of therapeutic sessions revealed to the mother her tendency to over protect her son and her particular difficulty in accepting his emerging autonomy, which was less apparent in her relation with her daughter. The mother admitted the unique place that Peter had assumed in her live. The birth of Peter had allowed her "to fill a void" and "given her an identity". In the same time, during individual sessions, the behavior of Peter indicated an urgent need to be supported by adults, showing a lack of confidence in relationships and the difficulty to accept the relationship constraints imposed by his mother. Thus, while the first therapist worked with individual sessions on the self-confidence and on the autonomy of Peter, the family session, using the SAGA, allowed placing these behaviors in the context of family dynamics. A central issue for the mother was accept the father assuming his place within the family, helping her to extricate herself from an over enmeshed relationship with Peter. The readjustment of this triangulation seemed to be a joint solution offering each person a means for correcting the dysfunction of family roles. It offered the possibility to open and to explore family members' roles in the larger social world (especially the school for Peter, and personal activities for the mother).

During the SAGA session, the father was more involved with his children and was able to clarify the boundaries between the different sub-systems of the family. The father clearly expressed his desire to support his wife in the education of the children and to establish a closer relationship with his son. It was also possible to move onto the difficulties for the mother to trust her husband and more generally to accept to share decision-making power in the education of her children. As a floating object, SAGA revealed issues and difficulties for Peter in his process of autonomy associated with his mother's anxiety about separation, related to her fear that her son would no longer need her. This situation led Peter, by loyalty and with the concern to protect his mother, block his exploration the surrounding social world and his emotional investment in the school setting. The therapeutic task essentially became to clarify the boundaries between parents and children, and to restore the father as an agent of separation between his wife and son promoting the autonomy of the child

# Conclusion

The unexpected appearance of the SAGA as a game (color of the board, puppet, token) jostled the usual markers and seemed to break down many defensive strategies of resistance and opposition during the course of the family therapy session. If the game aspect of SAGA especially attracts children, the parents were not insensitive to it. The family can have an impression of sharing quality time around this game. Thinking and feelings can be expressed (by verbal or non verbal communication) without blaming anyone. Each member was able to position him/ herself giving and receiving information with other family members.

At all times, SAGA acts as a mediator of communication between therapist and the family and among family members. From a clinical perspective, SAGA serves as a floating object as defined by Caillé and Rey (2004). "Floating objects take the place in the meeting. They are the symbol of this meeting and will represent the trace of this meeting" (p23). Notion of trace is reinforced with SAGA by the possibility during the therapy to refer back to the different situation pictured. The consideration of the SAGA as a floating object implies, in the context of a clinical approach, the necessity to adapt the procedure depending on the personal approach of each therapist, even if it is proposed as a codified technique. In the clinical context, the use of SAGA provides considerable additional information beyond the calculation of the proposed variables. Information can be gleaned from observing the placement order for puppets, modifications of initial arrangements, discourse of family members, visual attention, and even selection of puppet for each family member. Each therapist will be able to use these indices depending on his/her own theoretical framework. In order to explore these different aspects, typical follow-up questions are proposed (www.sagasupport.org).

The SAGA leads the family into metacognitive reflection about its knowledge of itself. Each member of the family can consider family relationships in different ways. The diversity of the representation seen in the different contexts shows the flexibility of the family. This capacity becomes a resource for the therapist who can use it to promote necessary changes. The ideal situation allows for the family members to uncover possibilities they had not foreseen. Following Ausloo's (1995) recommendations, the therapist using the SAGA did not propose specific solutions for the family, but instead empowered the family in their effort to find their own solutions using their own resources.

#### References

- Ausloos, G. (1995). La compétence des familles. Toulouse, Erès.
- Caillé, P. et Rey, Y. (2004). Les objets flottants: Méthodes d entretiens systémiques. Fabert, Paris.
- Crook, J. H. (1970). Social organization and the environment: Aspects of contemporary social ethology, Animal Behaviour, 8, 197-209.
- Gehring, M. (1992). Evaluation du système familial: le FAST, L Application des Techniques Modernes, Braine-le-Château.
- Minuchin, S. (1974). Families and Family Therapy, Harvard Univ. Press, Cambridge, Mass (traduit en français en 1978 sous le titre « Familles en thérapie » Erès, Toulouse).
- Salem, G (2005). L approche thérapeutique de la famille. Masson, Paris.
- Strayer, F. F. (1984). Biological approaches to the study of the family, In RD Parke, R. Emde, H. Macadoo, GP Sackett (Eds.), Review of child development research: Vol. 7: The family. Chicago: University of Chicago Press.

#### Philippe Compagnone

Maître de Conférences en Psychologie Clinique

Université de Bordeaux2

Thérapeute des couples et des familles

Centre Ressource pour l'Enfant, l'Adulte et la Famille

philippe.compagnone(at)u-bordeaux2.fr

#### Catherine Jean

Psychologue du Développement

Centre Ressorce pour l'Enfant, l'Adulte et la Famille