The "Milan Approach" to systemic therapy

The term **"Milan Approach"** was coined by Lynn Hoffmann to identify the original contribution that Luigi **Boscolo** and Gianfranco **Cecchin** gave to systemic therapy. This presentation shall refer to the works by Boscolo and Cecchin, especially after they parted from Mara Selvini Palazzoli and Giuliana Prata, although the four authors do share most of the roots of this approach.

1. **The roots**

The roots of the "Milan Approach" are to be found:

- **In the communication studies carried out by the Mental Research Institute team in Palo Alto**

At the beginning, the Milan team adopted a very pragmatic and strategic approach, but soon their focus shifted towards **semantics** and the **story** of the system, which in turn led to a more **complex** approach

- **In the general systems theory**

It is well known that several schools of thought and different sensitivity domains contributed to developing the general systems theory. The founding fathers of the Milan Approach are physicians (Dr. Boscolo is a pediatrician) and hence it is no surprise that their way of approaching living systems stems from the typical principles embraced by the **organismic** school: a focus on organization, differentiation, evolution and involution processes permeates the systemic approach followed by our founders. However, the underlying method was extremely **relational**, which years later led Gianfranco Cecchin to make statements such as: "I am a Taliban of relations"

- **In cybernetics**

In the early stage of their work, the founding fathers borrowed mainly the following principles from cybernetics:

- Rejection of linear causality and mechanism (rejection of "determinism")
- Focus on feedback processes
- A positive connotation of the so-called "cybernetic error"
- The attitude towards a non-authoritative governance of the therapeutic system

- **In the individual background of each of the team members**

The founders of the Milan Approach are **psychoanalysts**. Because of their analytical mindset, they are very close to the theories of authors such as Helm Stierlin and Murray Bowen and to the **cross-generational sensitivity**.

Moreover, Luigi Boscolo often quotes Dostojevsky, while Gianfranco Cecchin sometimes uses music metaphors ("polyphony").

2. The roaring years of the Milan Approach

The 25 years or so between the late 1970's and early 2000's were the "roaring years." Boscolo and Cecchin founded and then expanded their school, proving to be very open to the influence of their students working in troubled social settings undergoing transformations. They also traveled around the world and they took home lessons from each significant encounter. During this period of time, the most meaningful influences came from:

– **Radical constructivism**

Because systems are autonomous from an organizational standpoint and cannot be changed "from outside", the priority is given to therapeutic strategies that upset the system so that the latter can find its own, autonomous paths towards growth and change

– **Second-order cybernetics**

Then the focus gradually shifted: the initial emphasis on modeling family patterns largely moved towards the relationship between therapists and clients and even more strongly towards the "relation of the therapist with himself/herself." This is the so-called "observer cybernetics." Maps, prejudices, and attitudes of the therapist are the main area of interest and of change

– **Social constructionism**

The model was also strongly affected by social constructionism. However, although it was sometimes seriously questioned, the systemic identity of the model was never abandoned. The attempt was rater that of integrating some aspects of social constructionism into the model (process for conducting the therapeutic conversation, valuing the client as an "expert", cultural relativism, and further de-medicalization of the therapy and of the therapist).

– **Narrativism**

Bateson stated that "our mind work by stories." Therefore, it is not surprising that the narrativist movement – mainly represented by White and Epston – took up a major role in the Milan Approach. Also, Luigi Boscolo is a talented "story teller", and he uses stories as one of his key therapeutic resources for getting closer to "the other" and allowing him/her to feel recognized as a human being. On the other hand, Gianfranco Cecchin re-interpreted stories told by individuals and families according to principles that are very similar to those of the "commedia dell' arte." Clients identify themselves with interpretations that are sometimes surprising and sometimes bizarre and trigger processes of change.

3. Crisis and settlement

At the start of the new millennium, the members of this school of thought became aware of the difficulties in integrating all these different influences into a consistent model. They started wondering about the possible gap between what was done during their therapies and the way this was described. Hence, they felt the need to "re-tune" their approaches onto the clinics, which now and then was at risk of being overshadowed by the enthusiasm for the "next theoretical big thing," and to do some "sifting" work in order to better separate what was important and qualifying for the model and what was not. The sudden death of Gianfranco Cecchin exacerbated the feeling that this was needed.

4. The "Milan Approach" nowadays

As at today, the most qualifying points of our model seem to be the following:

- Great appreciation for the Batesonian model **(aesthetic approach)** as it was set out in the author's original theories. More specifically, there remains a **focus on communication, relation, context as a matrix of meaning, and on the fact that pathology** can make sense when considered as part of broader processes. **A therapist belonging to the Milan Approach looks much more like an artist than a technician**
- **De –pathologization of the client and de-reification of suffering systems.** Suffering in the mental and relational worlds cannot be described exactly as we describe suffering in the biological world, even though the two different arenas belong to the same living world. Using diagnoses and other resources that are typical of the medical domain only makes sense in a context that takes into due consideration factors such as **time, processes, relations, and cultures**. A cautious approach is taken to using a "medicalizing" language implying an unavoidable determinism, while priority is given to using, insofar as it is possible, a language that enhances **growth** and the **ability to choose**
- Great value of the **hypothesizing** activity, both in its original sense of **guiding the therapist's work** but also – and perhaps much more so – as a **model for conversation** both in the therapy room and behind the mirror, and finally as a **mental attitude** of the therapist
- **Circularity,** i.e. the ability to guide the conversation based on the family's feedback and to think based on relations and differences
- The use of **positive connotation,** which is also meant as a mental attitude more than as technical trick
- **Creativity, curiosity,** and **irreverence**, which allow to privilege what happens **at the heart of the relationship** rather then what one might expect in light of the reference theories
- Focus on **affections**, i.e. pathways to **participation into the client's system**, and **emotions**, i.e. the privileged place for triggering change
- Attention to **narratives** and **time** as a recursive connection between past, present, and future and as an opportunity (or obstacle) for people to meet

- Focus on **cultural changes**, challenges posed by multi-culturalism, gender issues, and processes of change in the family identity
- An increasingly stronger connotation as a **meta–model** in which, over time, each individual therapist finds that he/she can integrate his/her orientations and personal skills.

5. Where are we headed?

The "challenges" that make us evolve mainly come from the following sources:

- **Our own peculiarities**. The clinical and educational activities of the school are entrusted to a community of professionals and scholars. Each of us has a specific "bias" linked to his/her personality, roots, and special skills
- **Changes in educational requirements.** Our students' needs have changed as a result of the changes that have taken place in the social context in which they are going to work. While the traditional **family and couple setting** remains the preferred scenario for our interventions and research, a lot of emphasis is placed on **individual** therapy, on **variable setting** therapies, **group** therapies, **self-help groups**, **multi-disciplinary** work in disadvantaged and socially marginalized contexts, and **community**-like settings
- **Theoretical evolution.** Not only has the systemic theory evolved over time, but the new paradigms on the nature of conscience and of the physical world are demanding new theoretical models
- **Social and cultural changes.** Italy is experiencing a severe crisis not only in its economy and social relations, but also in terms of community identity. In no area of our being together can the answers of the past be considered satisfactory, and even less so in the field of psychotherapy.
- **Contrast with other models and other schools.** The Milan Approach takes a relaxed critical stance against any form of theory, underlying its unavoidable temporary nature. However, it does not deny the important role played by theories. Indeed, it maintains that the differences among theories is a value and tries not to fall prey to forms of premature eclecticism or syncretism. At the same time, those clinicians who embrace different models often have the feeling of treading on a common ground, despite the big differences between the way they often represent what they do and the world they belong to. The vital tension that originates when we admit that we belong to a common world can only be expressed by recognizing and valuing differences, and this is one of the main reasons why we try to foster professional and scientific relations with colleagues from all over the world.

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