FAMILY PROCESS

Healing Intergenerational Wounds: An Integrative Relational–Neurobiological Approach

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Old resentments and unfinished business from the family of origin can constrain adults in current relationships with parents or siblings and negatively affect relationships with partners or children. This article explores how old wounds get reactivated in current relationships and contribute to the intergenerational transmission of painful legacies and trauma. Building on intergenerational family theory and interpersonal neurobiology, the dynamics of reactivity and pathways for growth are explored. While much of the time the human brain is on autopilot, driven by habits and emotional reactivity, we are capable of bringing prefrontal thoughtfulness and choice to close relationships. Rather than being victims of parents or our past, we can become authors of our own relational life. Interventions are offered to help adult clients "wake from the spell of childhood," heal intergenerational wounds, and "grow up" relationships with family of origin. The damage caused by parent-blaming in therapy is explored and contrasted with Ivan Boszormenyi-Nagy's emphasis on rejunctive action and cultivating resources of trustworthiness in intergenerational relationships. The family is considered both in its cultural context—including stressors and resources for resilience—and in its life cycle context. Aging in the intergenerational family is discussed, focusing on ways adult children and their parents can grow and flourish with the challenges at this time of life. Throughout, the theme of relational ethics—how we can live according to our values and "reach for our best self" in intergenerational relationships —informs the discussion.

Keywords: Intergenerational Wounds; Family of Origin; Intergenerational Legacies; Intergenerational Transmission; Interpersonal Neurobiology; Intergenerational

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In working with an adult individual or couple in therapy, it often emerges that a current impasse is fueled by unfinished business from past relationships, especially the family of origin. Vulnerabilities and survival strategies formed in childhood may persevere into adulthood, negatively impacting clients in their relational lives now. This article offers an approach to healing old intergenerational wounds with adult clients, informed by systemic and multigenerational theory, as well as by the growing field of interpersonal neurobiology. It addresses multiple factors fueling family reactivity and offers an integrative therapeutic approach that allows clients to grow beyond old constraints and make relational choices in keeping with their higher values.

Intergenerational work may be prompted by a family crisis, in which an entire family—adults and their siblings and parents—seek counseling; or a subsystem may come for help,

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for example, a sibling group, or parents and a child. This article focuses on family-of-origin work in the context of individual or couple therapy when unresolved issues from the family of origin are identified as affecting the current functioning of the adult client. The approach presented here builds on the contributions of pioneers in intergenerational family therapy—especially Murray Bowen and Ivan Boszormenyi-Nagy—and subsequent generations of intergenerational theorists and clinicians.

PART ONE: INTERGENERATIONAL IMPASSES

The Past Haunts Us: Unfinished Business from the Family of Origin

An otherwise competent adult may regress to the level of an angry adolescent when dealing with parents or siblings. Flying home for a visit can turn a 40-year-old into a reactive, disempowered child. Why is it so easy to lose one's higher self when in the orbit of the family of origin? Why does the past have such a hold?

Some people deal with the pain of their past by moving far from their parents, taking "the geographical cure" (Walsh, 2016a), or they cut off entirely. These "cures" rarely work, as unfinished business from the family of origin continues to haunt the individual in a new, faraway home. Others are stuck in an over-functioning role. Parentified children with too much responsibility when young, they remain trapped in the caretaker role with parents and often in other relationships as well.

Scratch the surface of an unhappy couple's impasse and you may hear echoes of childhood experiences of loneliness, fear, longing, or anger. Clients live out self-defeating scenarios from the past in current relationships, carrying resentments from childhood that distort their perceptions and behavior. Psychodynamic therapists call this transference.

As William Faulkner (1975) noted, "The past is never dead. It's not even past." Old wounds are replayed in intimate adult relationships, with our partner—and often with our children as well. "When unresolved issues are writing our life story, we are not our own autobiographers; we are merely recorders of how the past continues, often without our awareness, to intrude upon our present experience and shape our future direction" (Siegel & Hartzell, 2003, p. 28).

But we are not doomed to carry grievances and re-create past relational scenarios forever. We can reckon with childhood wounds and transform our relationship with them, freeing ourselves to be more flexible and resilient in our current relational life. Rather than being *victims* of the past, we can become *authors* of our own life, with active agency for healing and growth.

The shift from victimhood to authorship with regard to family of origin involves working on internal perspectives and feelings from the past, as well as transforming current relationships with parents and siblings. We will consider both. The goal is to widen the lens so one is less trapped in a constraining story about the family of origin, and, where possible, to "grow up" current interactions with family members (Fishbane, 2013b).

A Relational, Multigenerational Perspective

The dominant culture in the United States promotes individualism and competition. Older psychological perspectives endorsed independence and separation/individuation as hallmarks of adult development. But current research and theory from human development, psychology, attachment, and neuroscience suggest that humans are fundamentally social creatures, interdependent throughout life (Fishbane, 2001; Lieberman, 2013).

Wired to connect

The child's brain is wired through attuned connection with parents and caregivers (Siegel, 2015). Nurture matters. While human infants are born with genetic

predispositions and temperaments, how they are raised affects the expression of these predispositions. Interactions with parents and caregivers shape the connection between neurons in the young child's brain and even affect the expression of genes—a process known as epigenetics (Meaney, 2001, 2010). Early trauma, abuse, and neglect negatively affect the child's growing brain, predisposing that individual to physical and mental health difficulties in adulthood (McGowan et al., 2009; Perry, 2002). Secure attachment with parents predicts positive social, emotional, and academic development for the child (Sroufe, 2006).

The need for connection does not end in childhood. The benefits of positive relationships —and the deleterious effects of negative ones—continue in adulthood. Neuroscientists have found that social rejection activates pain centers in the brain (Eisenberger & Lieberman, 2004), and loneliness can negatively affect one's health (Cacioppo & Patrick, 2008). Adult love is considered an attachment relationship (Hazan & Shaver, 1987). Adults in a satisfying marriage or partnership are physically and emotionally healthier than those in an unhappy relationship (Kiecolt-Glaser, Gouin, & Hantsoo, 2010); the stress of an unhappy marriage takes a toll on health, negatively affecting the immune system, increasing chronic inflammation, and shortening telomeres, the protective coating on the end of chromosomes, potentially contributing to premature aging and earlier death (Kiecolt-Glaser & Glaser, 2010). Given the negative effects of chronic relational stress on immune and cardiovascular systems, ongoing resentment or turbulence in the adult child–parent relationship may negatively impact health as well. It certainly can have adverse psychological and relational effects, as we will explore.

Culture and the intergenerational self

The myth of individualism that characterizes the dominant culture in the United States is not shared by many traditional cultures, which emphasize interdependence, intergenerational connection, and honoring parents (Erdem & Safi, 2018; Falicov, 2015; Fishbane, 2009). Imagine a debate between the American cowboy—symbol of rugged individualism —and the Jewish mother. He is riding off into the sunset; she wants him to come for a visit. For cultures that are more collectivist, differentiation of self does not mean separation; "self-construal" coexists with interdependence (Erdem & Safi, 2018). In immigrant families, adolescent and adult children may be caught between conflicting messages about autonomy and intergenerational care and connectedness in the two cultures. The emphasis on individualism in Western culture can foster resentment toward parents, pathologizing "the ties the bind." The difference in pace of acculturation between immigrant children and parents may exacerbate this tension (Llerana-Quinn & Mirkin, 2005).

Religious cultures place a high value on honoring parents; in the Hebrew Bible, the fifth commandment, honoring father and mother, is linked to living a good, long life. The spiritual development of filial piety is central in many traditional religious communities (Fishbane, 2009). This commitment can help the adult child maintain a sense of respect even while navigating challenging moments in intergenerational interactions.

Legacies: intergenerational transmission

Intergenerational theory posits that we are links in a multigenerational chain (Fishbane, 2005). We inherit legacies from parents and grandparents and pass on legacies to our children. Some legacies we consciously choose to transmit: religious rites, bedtime rituals, cherished values. Other legacies may be unconscious or insidious. A man becomes enraged with his child like his father did with him; a woman is hypersensitive to feeling criticized by her teenage daughter, a legacy from this woman's relationship with her own critical mother. Thus, destructive legacies from one's own past or "legacy burdens" from prior generations (Schwartz & Sweezy, 2019) are unwittingly enacted in current relationships and passed onto the next generation.

Intergenerational transmission of trauma has been studied in recent years (Firestone, 2019), and neuroscientists are exploring intergenerational transmission of epigenetic changes. Studies found epigenetic changes in stress reactivity of rat pups depending on how attentive their mothers were. These epigenetic changes in resilience to stress were in turn passed on to the second generation, the pups of the pups (Champagne, 2008). This process of intergenerational transmission of epigenetic changes has been studied in humans with trauma exposure, for example, Holocaust survivors and their children (Yehuda & Lehrner, 2018).

Unconscious legacies and unfinished business from the family of origin can be destructive in current relationships. We will explore ways to help clients identify their legacies from the past and choose which ones they want to maintain and pass on and which to let go. We are not doomed by genetics or early upbringing; nor are we doomed to be in thrall to the past. We can choose who we want to be in our present relationships.

The larger context

While the focus in this paper is on positive and negative legacies within the family, the larger context in which the family is embedded can be a source of support or stress. Families experiencing racism, oppression, immigration, poverty, or war often carry severe stress. Parents who endured such traumas may inadvertently pass on to their children a legacy of fear or isolation even if the family now lives in relative security. Socioculturally attuned contextual therapy highlights the larger context of historical injustice and trauma (McDowell, Knudson-Martin, & Bermudez, 2018).

At the same time, cultural strengths offer families sources of support or resilience, as traditional beliefs or faith sustain the family in difficult times (Falicov, 2015; Walsh, 2009, 2016a). Identifying both positive and distressing aspects of the family's journey within the larger context is crucial in understanding and working with current dilemmas.

Interpersonal Neurobiology and Intergenerational Reactivity

Emotional reactivity can run high in families. A Thanksgiving dinner turns into an occasion for resentment rather than gratitude. A postfuneral gathering erupts into a fight over who gets a favorite picture of Dad. A visit home to Grandma's house ends in a screaming match and an early departure for the airport. Why do parents have such a hold on their adult child's heart? Why do adult children harbor so many grievances and lose their maturity with their parents?

Interpersonal neurobiology sheds light on these painful interactions. Neuroscience research has proliferated, largely due to technological advances that allow scientists to study the brain in real time, using scanners such as the functional MRI machine (fMRI), which measures blood flow to the brain. Blood carries oxygen, used by brain regions that are active. In addition to scanners, other neuroscience data come from research on animals, persons with brain damage, and neurotransmitters and hormones in brain and body. Most recently, scientists are doing cutting edge research on genetics and epigenetics. The growing field of interpersonal neurobiology (e.g., Schore, 2019; Siegel, 2015) addresses recursive processes between brains, bodies, and relationships. It can shed light on the emotional reactivity that characterizes distressed intergenerational interactions.

The tripartite brain

The human brain is complex, with billions of neurons and trillions of neuronal synaptic connections. The brain has been broadly divided into the brain stem (seat of automatic reflexes), limbic system (amygdala and hippocampus), and neocortex (more recently evolved part of the brain). While we share with other animals the brain stem and parts of

the limbic system, the prefrontal cortex, front-most part of the neocortex, is unique in its highly developed human form. This prefrontal area allows us to reason, choose responses thoughtfully, act according to higher values, regulate the amygdala, and modulate emotional reactions. The amygdala, deep inside the brain, is often the source of emotional reactivity. Always scanning for danger, when the amygdala senses threat it sets off the fight or flight (or freeze, in dire circumstances) response. It is the amygdala that fuels many family fights—for example, when one sibling feels threatened by the behavior of another or when parents and adult child erupt in an accuse-defend impasse.

An inflamed amygdala can overwhelm prefrontal capacities; rage blocks the ability to think clearly. The challenge is to calm down and get prefrontal functioning back online in order to make better choices. A goal in any relationship, and certainly in family interactions, is to respond thoughtfully rather than react in a kneejerk manner, bringing prefrontal thoughtfulness to limbic reactivity. Self-regulation is a key element in differentiation, to be discussed more fully below.

The amygdala, with its focus on survival, is biased toward the negative; overlooking a threat could lead to life-threatening danger. A negative moment with parents or siblings really catches one's attention, while more benign or positive moments may go unnoticed. Furthermore, the amygdala works much faster than the prefrontal cortex. One gets upset before having any idea why. And the amygdala is imprecise and often inaccurate; it works in a "quick and dirty" manner (LeDoux, 1996). While the prefrontal cortex at times is able to moderate the amygdala, allowing one to calm down and regain perspective, it can be difficult to counter emotional reactivity.

In addition to assessing danger, the amygdala encodes emotional components of memories. If a person was hurt at a young age, the amygdala (functioning from birth) retains that emotional experience as implicit memory, even if the event is not "remembered" because the explicit memory system (which relies on the hippocampus) was not yet fully developed. In a current upsetting interaction with parents or siblings, reactivity is heightened if this dynamic carries a whiff of old painful moments from childhood. One then has a reaction that is out of proportion to the current situation. The past casts a shadow over the present.

Automaticity versus choice

Much of the time the human brain is running on automatic pilot, with the emotional brain in charge. Since the amygdala works faster than the higher brain, when the prefrontal cortex does get engaged, it faces the mess the amygdala has just made. Often the reactive person seeks to justify their response, making the situation worse. Neuroscientist Michael Gazzaniga (2008) points to "the Interpreter" function of the prefrontal cortex, noting that humans are narrating creatures who may create a story to justify irrational behavior. These stories often involve blaming the other. The blame game derails many family interactions.

But the prefrontal cortex is not just slow and self-justifying. It is key to the ability to live according to higher values. Emotion regulation, response flexibility, and moral behavior all rely on this area of the brain (Siegel, 2015). The intergenerational approach described here highlights multiple ways to facilitate emotion regulation and augment prefrontal thoughtfulness in family interactions.

Clients come to therapy feeling disempowered, victims of their spouse, parents, or siblings. They also may be victims of their own automatic, amygdala-driven reactivity. We help clients develop their ability to *choose*—how they want to respond, and who they want to be in the relationship—and a sense of agency (Firestone, 2019; Fishbane, 2013a). One woman in therapy announced that she could not be the daughter her mother wanted, so she could not be her mother's daughter at all. She was contemplating a cutoff because she did not share her mother's expectations for their relationship. I asked her, "What kind of daughter do *you* want to be?" It was a revelation to her that she had a choice and that she

could have a voice in determining the rules, boundaries, and expectations of the mother–daughter relationship.

Habits and change

Another aspect of automaticity has to do with habits, which are supported by circuits of neurons in the brain. The stronger the habit, the more connected the neuronal circuit, and vice versa; the bio-behavioral influence is recursive. When relational habits have been repeated over and over again, with family members engaging in the same dances over years, they become automatic. We help clients interrupt familiar, self-defeating sequences, making different choices that lead to different outcomes.

The human brain is also capable of change. In the past, scientists believed that neuroplasticity (the ability of the brain to change) was only available to the young; recent research shows that neuroplasticity can continue throughout life. But there is a catch: Neuroplasticity is harder in adulthood and needs to be nurtured. Studies have shown that neuroplasticity is enhanced with daily physical exercise, which increases blood flow to the brain (Ratey, 2008); paying attention; and learning new things (Doidge, 2007). Bringing an open mind and curiosity to family relationships can be challenging, but it is precisely this stance that promotes growth and healing in intergenerational life. Brain plasticity and multigenerational relational plasticity go together. But the past often has a hold on us and affects our current relational reactivity.

Overlap of Present and Past: The Magic Question

When a couple is stuck in an impasse, there is often an overlap between the present and the past, especially from the family of origin (Scheinkman & Fishbane, 2004). Mike and his wife Janice are caught in a recurring impasse. After they have an argument, Janice apologizes—but Mike refuses to do so. This infuriates Janice, who complains that Mike always blames her, while resisting examining his own behavior after a fight. I gently ask Mike, "Is this experience familiar to you, that someone close to you is pushing you to apologize, and you just can't?" Mike takes a breath, tears up, and relates how his father always blamed him when he and his brother fought when they were boys. His father would rage and humiliate Mike, trying to force him to apologize. But, Mike relates, as a boy he would never apologize; holding out gave him the only power he could muster in that unhappy home. Janice had never heard this story; she softened, and their impasse around apologizing dissolved. She became more empathic and less insistent on the apology, while Mike learned to separate his unhappy past from his present relationship with Janice and found creative ways to indicate his regret to her.

Intergenerational and psychodynamic therapists have long noted the power of the past, especially the family of origin, to affect current relationships. I call my query to Mike "the magic question" (Fishbane, 2013a) because it opens a door from a current impasse to a larger story, an intergenerational tale that provides a wider and deeper perspective. I ask this question with respect and curiosity, not with blame or criticism. I had already shared with these clients Gottman's research about the importance of repair in couple relationships; Mike knew it was the smart thing to do, but he just could not apologize. In these moments when one is stuck in irrational behavior, the magic question and exploring intergenerational roots of the impasse can transform the conversation, decreasing defensiveness and heightening empathy.

The Stories We Tell

Before the magic question intervention, Mike was caught in a bind: either cave in to his angry wife or stubbornly hold his ground and refuse to apologize. He was also caught in a

constraining story about his father, Ken. Mike saw Ken through the resentful eyes of a child whose father's temper frightened him. When Janice was angry at him, Mike's amygdala registered danger and he hunkered down in defiance. The overlap between the present and the past was complete. Mike was a prisoner of his past and of his view of his father. And he was stuck in a narrow repertoire of options when his wife was hurt and angry.

What Mike did not know was that his father had gone to therapy in the intervening years and worked to tame his temper. Ken was now taking responsibility for his own behavior, which he had not done years ago, and had sought to make amends with his son. But Mike would have none of it; he kept his distance from his father and held on to his (outdated) story about him. Mike was stuck with a child's view, frozen in the past (Fishbane, 2013a; Wachtel & Wachtel, 1986; Walsh, 2016a).

In our work, I helped Mike "grow up" his view of his father, taking in new information that widened his perspective on Ken. In our discussions, Mike came to see that his refusal to apologize mirrored his father's stance when Mike was a boy; Ken never apologized after his rages at his son. With my encouragement, Mike tentatively reached out to his father and learned of his father's work in his own therapy. Ken discussed his struggles learning to apologize, his difficult relationship with *his* father, and his desire to repair with his son now. Mike's narrative of his father was beginning to change. This work freed Mike to experiment with apology in his marriage.

Seeing parents as toxic or as resources

Blaming parents for one's problems is endemic in our culture. Indeed, when parents are abusive or neglectful, the child often is harmed; trust can be shattered, negatively affecting future relationships. If parents are still abusive or dangerous, the adult child needs to set firm limits for self-protection and protection of the next generation. And if the abuse was severe—physical, sexual, or emotional—the adult child may need trauma treatment.

While many of the principles discussed in this paper apply even to such extreme cases of large T Trauma, we are focusing here primarily on situations of small t trauma (Shapiro, 2018) and emotional wounds in the intergenerational family. In most families, parents were not egregiously abusive or neglectful. They may have been critical or prone to angry outbursts, or depressed, anxious, preoccupied, or emotionally remote. The term "abuse" is used liberally by adult children and their therapists; this may keep the client stuck in a resentful, blaming mode with parents.

Given the brain's bias toward the negative, it is easy to notice what's wrong in intergenerational relationships and harder to see the positive. One man in therapy said to me, "I know my mother loves me, but she's so critical, it makes me want to stay away from her!" I paused and said, "Can we back up a minute? We'll look at her criticism in a minute. But you quickly passed over something that caught my attention: Your mother loves you. Can you tell me more about that?" I am not denying or belittling his pain at his mother's criticism; we will explore that in depth. But when he glosses over a positive resource—his mother's love—I help him take a second look at this gift in his life.

Parent-blaming in therapy

Part of the therapist's job is to empathically witness how clients were hurt or let down by their parents in childhood. But this can blend into blaming parents, when the therapist takes on the role of advocate for the client, with an adversarial stance toward parents. Many therapists, over-responsible, parentified children in their own families of origin, have the instinct to save or rescue clients from their unhappy past or current strained relationships with parents and siblings. If abuse is ongoing—if parents are actively

abusing substances or pose a physical threat, clearly the therapist needs to advocate for the client's safety.

But often the process is more nuanced. If a client feels unworthy or deficient because parents were critical or nasty, or feels responsible for parents' depression, drinking, or divorce, part of the therapeutic task is to challenge the adult child's self-blame and place responsibility for parental behavior on the parents themselves. However, there is a fine line between identifying parental responsibility and blaming parents. Clients are often caught in a seesaw of blame: It is either the child's fault or the parents' fault. In this intergenerational whodunit, someone has to be blamed. I find a more productive discourse to be one of responsibility rather than blame, with a view sympathetic to the struggles and limitations of both parent and child.

Contextual Therapy: Ivan Boszormenyi-Nagy

Multidirected partiality

Ivan Boszormenyi-Nagy ("Nagy") offers an antidote to the blame game, encouraging the therapist to hold a position of "multidirected partiality" (Boszormenyi-Nagy & Krasner, 1986), with concern for both adult child and parents. He suggests that when the therapist sides with client against parents, it sets up a loyalty bind that does not serve the client well; parent-blaming in therapy can create iatrogenic problems for the client, who is now more indignant at parents. Many clients in individual therapy decide to "share" with their parents what they have learned in therapy—the many ways parents have failed them. This rarely goes well. Parents may become defensive and lash back, or may become hurt or depressed from their child's blaming tirade, which is not helpful for their now-guilty child. In addition to being a stance of the therapist, multidirected partiality is a viewpoint we encourage clients to adopt, in which the adult child is able to hold their own perspective and that of other family members as well.

Rejunctive action: resources of trustworthiness

Nagy has a unique position among family therapists. His contextual therapy approach, influenced by the philosopher Martin Buber, addresses processes of loyalty, obligation, dialogue, and repair in intergenerational relationships. Nagy focuses on "rejunctive action" in the multigenerational family, looking for ways to heal distressed relationships. While exploring wounds, he also looks for "resources of trustworthiness" (Boszormenyi-Nagy & Ulrich, 1981) that may be hidden or latent in the family.

Loyalty and invisible loyalty

Nagy contends that adults owe their parents a debt of "filial loyalty" for the care given them in childhood—even if that care was not optimal. He suggests that if one does not find a way to be constructively loyal to parents as they age, the adult child may become hampered by "invisible loyalty," living out destructive intergenerational dynamics in other relationships, for example, with spouse or children (Boszormenyi-Nagy & Spark, 1973).

In this view, an adult may seek to collect damages for childhood wounds, but at the wrong address—looking, for example, to one's child to heal old pain from the relationship with parents. Linda, a 40-year-old woman, is chronically resentful toward her father for being emotionally absent in her childhood; he was absorbed in his career. Linda's father wound is healed when she gives birth to a baby boy who adores her. When he becomes a teenager, however, the son turns away from his mother and toward his peers (a normal developmental process). Linda becomes enraged, as her father wound is reactivated in the context of her son's shifting attention from her to his friends. Now Linda is burdening her

own child and causing damage; "the victim becomes the victimizer" through the "revolving slate of vindictive behavior" (Boszormenyi-Nagy & Ulrich, 1981, p. 167).

Intergenerational care

In Van Kilsdonk's (1987) preface to a book about Nagy's contextual therapy, two stories from Greek mythology are compared: Oedipus and Aeneas. Oedipus, the more familiar tale thanks to Freud and Shakespeare, tells of a man who inadvertently kills his father and marries his mother. It is a story of competition and sexual conquest. By contrast, consider the story of Aeneas. This adult son, fleeing burning Troy, is holding his young son's hand and carrying his crippled, blind father Anchises on his shoulders. This is a story of intergenerational loyalty and care. Van Kilsdonk invites the reader, in light of Nagy's theory, to consider each of these images as emblematic of what it means to be a person. Is the individual fundamentally self-oriented and competitive? Or are intergenerational care and concern central? Of course both are aspects of the human being, but Nagy highlights processes of care and connection. As we turn now to clinical interventions, we will consider ways to be constructively loyal to parents while balancing self-care and commitments to one's partner and children.

PART II: CLINICAL INTERVENTIONS

Living Under the Spell of Childhood

Feeling like victims, many adult children are stuck in a blame mentality with their family of origin. These adults, disempowered, are living "under the spell of childhood" (Fishbane, 2005), waiting for their parents to finally give them what they need. The adult child may be 50 years old, the parents in their 70s, but the child keeps hoping—and keeps getting disappointed.

Waking from the Spell of Childhood

Letting go of unrealistic expectations of parents can be liberating. But it is also painful, as it involves grieving the loss of the fantasy of the good parent. I would suggest three major components to "waking from the spell of childhood" (Fishbane, 2013a) and owning one's adult position: seeing parents as real people separate from one's own needs; being able to take care of and parent oneself; and being able to hold one's own with family members, to have differentiation of self. We now explore each of these aspects.

Seeing parents as real people

Seeing parents as real people (Framo, 1981), individuals in their own right, not just in their role of Mommy or Daddy, is called "filial maturity"; researchers have found that this mature perspective rarely manifests in the adult child before age 30 (Fingerman, 2002). This makes sense, since the prefrontal cortex is not fully developed until age 25. But many adults past middle age still hold the young child's view of their aging parents and are easily wounded if parents are critical or let them down.

Michael Kerr (personal communication, 2003) offers an exercise that facilitates a shift to filial maturity: "Think of your mother as your grandmother's daughter and get to know her that way." Clients can be encouraged to cultivate curiosity about their parents' own life journeys. Genograms are an essential tool in systemic therapy approaches, tracking relationship patterns and family life experience over the generations (McGoldrick & Gerson, 2008). Conversations with Mom or Dad about their childhood can be revealing, especially if the child's tone is one of interest rather than blame. Sometimes family secrets emerge in these conversations that shed new light on old dynamics. Maria always felt it

was her responsibility to heal her mother Carmela's sadness, but never knew why her mom was sad. Only in her twenties did Maria learn about Carmela's childhood of loss and insecure attachment with her own parents in the context of a complex immigration process from Guatemala. Hearing this fuller story, Maria was relieved to finally understand the roots of her mother's mysterious bouts of sadness; she felt empathy for the little girl her mother once was. This conversation was liberating for Maria and helped her see her mother through compassionate adult eyes, even as she came to accept that she could not heal her mother's pain.

Self-care: parenting yourself from the inside out

The second key element in waking from the spell of childhood is the ability to care for oneself: "You can give to yourself the tools that your parents were not able to offer you as a child. In many ways, this is parenting yourself from the inside out" (Siegel & Hartzell, 2003, p. 138). These tools include self-regulation and self-soothing when upset. Adapting an Internal Family Systems technique (Schwartz, 1997), I ask clients struggling with hurt feelings to image their upset inner young child and imagine their inner good parent comforting the child. Other techniques for emotion regulation include mindfulness meditation, focused breathing, reappraisal (reframing), and naming one's feelings. All of these self-regulatory practices activate the prefrontal cortex and calm the amygdala (Fishbane, 2013a).

Differentiation

The third component of intergenerational maturation is differentiation of self. McGoldrick and Carter (2001, p. 289) have finely tuned this Bowen concept: "[Differentiation] consists of developing personal and authentic emotionally engaged relationships with each member of the family and changing one's part in the old repetitious, dysfunctional emotional patterns to the point at which one is able to state, calmly and nonreactively, one's personal view of important emotional issues, regardless of who is for or against such a view. It involves learning to see your parents as the human beings they are or were, rather than as your 'inadequate parent,' and relating to them with respect and generosity."

Differentiation, an antidote to emotional reactivity, helps the adult child stay calm and take parental behavior less personally, and it can help the over-responsible person set reasonable limits with parents or siblings. It has been suggested that one should be responsible *to*, but not *for*, the family of origin (McGoldrick, 2016). The change in preposition here leads to a profound relational shift.

Miriam, a parentified child, worked hard to please her parents, and she extended this care to her in-laws as well. Miriam, her husband, and young children hosted Passover each year for their extended families; both sets of grandparents stayed in their home for the holiday week. Miriam prepared for weeks to make the home welcoming. The food was cooked and the table set when their guests arrived. But every year, tension would bubble up between Miriam's mother and mother-in-law, who had a competitive, mutually suspicious relationship. Their sniping at each other was subtle and mostly nonverbal. Miriam, ever sensitive to these two mothers and their feelings, would pick up the vibes and become more and more agitated, until she finally blew up in the middle of the holiday. As we later explored in therapy, Miriam's sense of responsibility for everyone's happiness led her to be hypersensitive and erupt in anger. I encouraged her to take responsibility only for her own behavior, not for the happiness of her mother and mother-in-law. She saw that being responsible *to* her family for her own actions, but not responsible *for* their reactions, would relieve her of her burden of over-responsibility. The following Passover, with Miriam's new perspective, there was no blowup; the mothers-in-law navigated their own relationship without Miriam in the middle.

Murray Bowen encouraged his trainees to go home on a visit to their family of origin with the mindset of a scientist; they were to observe family dynamics and reactions, including their own. This homework assignment activates the higher, observing brain, making it less likely the trainee would react in old, kneejerk patterns with family (and if they did, that became part of the study). Bowen himself did this exercise, his story told at an early family therapy conference and later published as a book chapter (Bowen, 1978).

Bowen has been critiqued for over-emphasizing rationality and independence and for not taking cultural context into account. These imbalances have been addressed by subsequent generations of multigenerational thinkers, as in the McGoldrick and Carter quote above, which emphasizes emotional engagement in family relationships. From a neurobiological perspective, both reason and emotion are vital for healthy functioning; it is their integration that is key (Siegel, 2015). And, as we have seen, we are highly relational creatures, interdependent with others. Socioculturally attuned intergenerational approaches consider differentiation and family processes in cultural context (McDowell et al., 2018; McGoldrick & Hardy, 2019).

Differentiation of self is not a skill that is achieved once and for all. Changing family and life circumstances challenge one in new ways; differentiation evolves throughout the life course. Holding one's own respectfully with parents when young and single poses different challenges than when one becomes partnered or has children. Caring for elderly, frail parents may require new capacities in the adult child, such as patience in the face of illness, disability, or loss. Differentiation poses lifelong challenges for the parent as well. Holding a clear and respectful stance with an adolescent child can be difficult; respecting boundaries and negotiating expectations when an adult child marries or has children requires its own set of skills. Aging with grace poses new challenges for differentiation. Throughout all these stages of life, and on both sides of the parent–child relationship, differentiation involves the capacity for emotion regulation, healthy boundaries, and respect.

The only person you can change is yourself

Trying to change people in the family of origin is usually a recipe for conflict and disappointment. One of the axioms of systemic thinking is: The only person you can change is yourself (McGoldrick, 2016). Yet, as Lerner (1985), among others, has noted, one person changing their part in the intergenerational dance often does change the dance. Lerner also points out that when a person changes their typical behavior in the family dance, the family may "push back" and take a strong "Don't change!" position.

Lerner offers a strategic response to this conservative or resistant family position, identifying a three-step process of change. First, identify the change you want to make in your behavior in the family system. Next, anticipate the "no change" reaction from others in the family. Third, plan your response to that reaction. Lerner notes that most people give up after step two when parents or siblings reject their bids for a new mode of interacting.

From a hierarchical to a generational view

Some people approach family relationships as a zero-sum game, viewing relationships with parents from a Power Over perspective. Indeed, when the child is young, parents do have more power. The power hierarchy shifts as the child grows up; adolescence is often a time of struggle over who is in charge of the teenager's life and choices. Many adults continue to view their parents through a hierarchical Power Over lens and feel resentful about it. Some try to turn the power hierarchy on its head, threatening parents that they will not see their grandchildren if they do not keep their opinions to themselves. While setting limits with parents is often necessary and can be healthy, at times it can turn into a threat that reflects a breakdown of dialogue and respect.

I have proposed that shifting from a "hierarchical view" to a "generational view" of parent–adult child interactions can be transformative (Fishbane, 2005). In the generational

perspective, parents and adult child are seen as links in an intergenerational chain; parents inherited legacies and burdens from their own parents and grandparents. And the adult child may now be a parent, making his or her own mistakes and hoping for eventual understanding from children when they grow up. Generational intelligence (Biggs & Lowenstein, 2011), the ability to see others in terms of their own life course and generational cohort, is key to filial maturity. This perspective contributes to "growing up" the relationship between parents and adult children on both sides.

Many religious traditions endorse honoring and respecting parents. The fifth commandment, Honor your Father and your Mother, and values of filial piety can help adults deal respectfully with parents rather than becoming reactive (Fishbane, 2009). In some families, this can lead to Power Over expectations, with the adult child feeling an obligation to obey parents' wishes. Children of survivors of the Holocaust often feel constrained by both guilt and obligation given their parents' suffering (Firestone, 2019). Immigrant parents may expect of their child the same duty-bound behavior they showed to their own parents in the country of origin. This can stir up powerlessness, resentment, or guilt in the adult child, especially when living in a larger culture such as the United States that promotes individualism and freedom of choice. A generational view even in these hierarchical families can increase compassion in the adult child toward parents. The therapist can help a client struggling with these complex loyalty issues to think creatively about ways to honor and respect parents while at the same time honoring their own vision and desires.

Boundaries

Having clear boundaries is vital in intergenerational relationships and a key aspect of differentiation. Boundaries are not just for keeping the other out; they also allow healthy connection (Jordan, 1997). Without a clear boundary, the adult child may become angry or guilty with family members, reacting to the parent or sibling in a defensive manner.

The fence exercise

An imagery technique called "The Fence Exercise" (Fishbane, 2005) can facilitate healthy boundaries. Janelle, an African-American woman raised by her mother in a single-parent household, has always been a parentified, over-responsible child. She struggles now with trying to protect herself from her mother Shirley's emotionality. Shirley gets hurt easily by friends and relatives, and complains to Janelle. Janelle feels compelled to help her mother, but gets upset when Shirley does not take her advice and continues to stew about her hurt feelings. No suggestion Janelle offers her mother seems to help. Janelle sees Shirley as a "help rejecting complainer" and keeps trying to change her, a losing proposition. Janelle becomes irritated with her mother and then feels guilty for hurting Shirley's feelings.

I ask Janelle to imagine her mother as a neighbor, with a fence between their yards. It is a symbolic fence—she can see over it to her neighbor's yard—but it is clear whose yard is whose. I ask her to picture herself offering gardening advice to her neighbor, whose garden is not flourishing; the neighbor does not take the advice, planting sunflowers in the shade, and shade trees in the sun. Janelle can still have a lovely summer on her side of the fence and enjoy her own garden even if her neighbor is making horticultural mistakes—as long as Janelle remembers that her neighbor's garden is on her side of the fence, and Janelle's is on the other side. If the neighbor plants poison ivy that will creep over to Janelle's side, she has to protect herself. But otherwise, her summer does not have to be ruined because of her neighbor's poor gardening habits.

Janelle finds this exercise helpful; she understands that she is been poking around in her mother's garden to no avail. She comes to therapy the next session announcing, "I put my mother on her side of the fence this week. I didn't get upset when she started

complaining about how her cousin treated her. I was sympathetic, but didn't offer advice. I didn't get hooked by her negativity, and we had a more pleasant conversation. Afterward I didn't stew about it the rest of the day. I let my mother be my mother." Accepting Shirley as she is, Janelle is able to be more generous. Her compassion toward her single mother deepens when she learns more of her mother's story, including growing up with poverty and racial discrimination.

Good boundaries are necessary for healthy empathy. Among the key components of empathy identified by neuroscientists are a boundary between self and other, and self-regulation in the face of the other's pain (Decety & Jackson, 2004). Being empathic with parents or siblings is only safe if one does not lose oneself in the process and does not take over the other's pain as one's own. This is particularly challenging for women socialized for caretaking and empathy; women are typically "kin keepers" (Fingerman, 2002). Women in heterosexual relationships often take care of their in-laws as well as their own parents, and some are resentful toward their male partner for foisting his parents on her. This is particularly acute if the man's survival strategy growing up included avoiding and tuning out his mother's voice.

Some clients are anxious about having a fence they can see over in this exercise; they prefer a tall barricade. They are fearful of any engagement with members of their family of origin. I might say to such a client, "The wall is yours; you can build a barricade. Would you like to put a window in the wall, so you can see what's on the other side? Or a door that you can open or close, or lock as you see fit?" Clients are relieved that I will not pressure them to connect when they feel it is too frightening or unsafe to do so. I work with their fears, helping them become empowered as they consider how to relate to parents or siblings. As always, the rule is Safety First; if there is a current threat of abuse or danger, I do not encourage clients to attempt re-engagement with family members in an unsafe way.

Boundaries, culture, and the life cycle

Expectations and practices around boundaries are culture-specific. "Enmeshment," a term used early on in family therapy, inadvertently pathologized cultures that value intergenerational closeness such as daily contact in the adult family. Current approaches are more culturally attuned and nuanced.

Boundaries in intergenerational relationships evolve over the life cycle. The birth of a baby or experience of divorce or illness in the younger generation may require more help from parents. When parents age and become frail, the adult child may step up and take on a more active role, calling and visiting more frequently. Ultimately, the adult child may take on a caretaking role with parents, helping with medical, financial, or legal challenges.

Hurt and Repair in Intergenerational Relationships

Hurt is inevitable in families. The approach described here promotes intergenerational repair where possible. There are multiple roads to repair in the family. Here, too, culture matters; in some ethnic groups, talking things out directly can clear the air. In others, such overt conversations are taboo; directly expressing needs or concerns is considered offensive. Given the caveat that there is not a "one size fits all" route to repair and forgiveness, we now explore intergenerational hurt and repair.

Guilt and apology

Hurt and misunderstandings are common in intergenerational family relationships, as family members navigate conflicting needs and expectations. Repair is a key, and apology is a central aspect of repair. But apology can be challenging, especially if framed as losing

a power struggle or if the apologizer is seen as "the bad guy." If a child was shamed or forced to apologize when young, as Mike was, apology in adulthood may feel threatening. If, by contrast, a child was taught that apology is a sign of emotional intelligence and if parents themselves were role models for apology, the adult child will likely be more flexible about repair.

Guilt is an integral component of repair, as one owns responsibility for a moment of hurt or disconnection. But many are allergic to guilt, viewing it as toxic. The philosopher Martin Buber (1957) differentiates between healthy guilt and neurotic guilt, offering a perspective that promotes self-responsibility without excessive self-recrimination. The latter can be crippling; owning up to a mistake may lead to extreme self-criticism. By contrast, Buber suggests that healthy (or "existential") guilt is our conscience. Without a conscience, one is a sociopath. Guilt, as uncomfortable as it may feel, is a signal from the body that one has erred and hurt someone. Guilt prompts repair and rejoining the group when one has violated its norms, which has an evolutionary advantage; in human prehistory, being part of the group was key to survival. Buber notes that many therapists confuse existential guilt with neurotic guilt and seek to relieve their clients' guilt feelings without exploring the healthy potential of self-responsibility and repair.

Difficulties with owning one's own guilt can lead to blaming others. If it's not my fault, it must be yours. Indeed, much blaming behavior in families stems from an allergy to guilt. In therapy, I reframe guilt as an opportunity to explore self-responsibility and, if appropriate, to take measures to repair. In this view, healthy guilt and self-responsibility are part of relational empowerment (Fishbane, 2011). This mature relationship with guilt can go askew in families that use "guilt-tripping" or shaming to enforce norms or prevail in a dispute.

Forgiveness and acceptance

On the other side of apology is forgiveness. Many adults, unforgiving toward parents over old childhood grievances, feel like victims of their parents and of their past. This angry blame stance takes a toll physically, psychologically, and relationally. Being stuck in blame with parents can affect how one acts with a spouse or child as well as with members of the family of origin. Forgiveness is considered an act of self-care and a movement toward relational healing; research suggests that the person who benefits the most from forgiving is the forgiver, laying down the toxic burden of anger (Worthington & Scherer, 2007). Forgiveness is not the same as condoning, forgetting, whitewashing, or justifying past wrongs. It is also not the same as reconciliation. Forgiveness is putting down the burden of anger and resentment, and letting go of the wish to seek revenge or punish the other party.

While some psychologists recommend unilateral forgiveness, others propose a more relational, dyadic process (Spring, 2004). Spring describes four stances for the injured party: Genuine Forgiveness, Refusing to Forgive, Cheap Forgiveness, and Acceptance. In Genuine Forgiveness, the offender takes responsibility for the injury, apologizes, and makes amends. This process facilitates healing and forgiveness by the injured one (Hargrave, 1994). When the offender refuses to take responsibility or make amends, is currently dangerous, unavailable, or dead, what is the hurt person to do? Spring offers three possibilities. The first is Refusing to Forgive: the stubborn refusal to forgive or move on. But this chronic anger takes a toll on body and soul. The second option is what Spring calls Cheap Forgiveness: forgiving quickly, with little processing of the wound. Here, the onus is on the forgiver; it is a unilateral process. In religious or cultural traditions that highly value unilateral forgiveness (e.g., the Christian tradition), the process is hardly cheap; it can stem from a profound spiritual commitment to not harbor a grudge (Kraybill, Nolt, &

Weaver-Zercher, 2007). But Spring points to the dangers of quick forgiveness, especially if the offender has not repented or changed: There is a high probability of future violations.

The fourth of Spring's options is Acceptance. When parents are not available for repair or apology, the adult child does not have to be a victim or hold onto anger into the future. Acceptance allows one to see parents' limitations in the context of their own family-of-origin story or societal context (e.g., economic hardship, immigration, racism, or other forms of discrimination). Understanding the sources of parental problematic behavior does not excuse it, but it does contextualize it, which allows for a more expansive and compassionate view of parents. This shift helps the adult child move beyond the victim role, and beyond anger and resentment.

Acceptance and letting go of unrealistic expectations are key in transforming family dynamics. Wanting parents or siblings to be different than they are is a recipe for tension and disappointment. Accepting the limitations of family members can be liberating, especially while appreciating the positive qualities those individuals bring to our lives. My mantra is "Take the best and leave the rest" (Fishbane, 2013a). This perspective saves a great deal of aggravation and interpersonal tension, even as it allows one to see overlooked blessings. This approach does not encourage accepting the unacceptable: abusive or dangerous behavior in interactions with parents or siblings. Good boundaries are crucial, and the most important principle in any relationship is Safety First. When abuse is not a factor, awareness of the limits of family members allows one to engage in these relationships without becoming agitated each time one is disappointed.

Reconciliation

Forgiveness is not the same as reconciliation. One can choose to forgive parents or siblings for past wrongs and accept their limitations and not necessarily be in an active relationship with them if they are currently abusive or dangerous. Furthermore, reconciliation is a continuum; short of a complete cutoff (which family therapists have long identified as having its own deleterious effects), the adult child can choose how and when to interact with problematic family members. Sending a birthday or holiday card or calling periodically can maintain a connection while protecting the individual from harm.

Cultivating Resources of Trustworthiness: Gratitude and Generosity

As noted, the brain is biased toward the negative; disappointments in the family of origin grab one's attention. It is easy to overlook the positive. Creating a readiness for the positive and a habit of gratitude can be transformative in the intergenerational family. Research has shown that cultivating gratitude can promote physical and mental health and well-being (Emmons & McCullough, 2003).

Gratitude: the Blessings Jar

Some couples and families foster positivity and gratitude with a ritual called The Blessings Jar (Fishbane, 2013a). They look for moments when a family member does something positive, jot it down in a little note, and put it into a jar. Each year on Thanksgiving, they open the jar and read the notes aloud. This not only ritualizes gratitude, it sets an intention to notice positive actions in the family.

Generosity: family relationships are not a zero-sum game

We live in a competitive, zero-sum culture; if you win, I lose. Many people bring this Power Over view to their couple and family interactions. But this is a poor model for close relationships. I would suggest that Power With (co-creating a mutually respectful connection) and Power To (being your best self, including self-regulation and differentiation) are more productive stances for the intergenerational family (Fishbane, 2005, 2011). Again, I

am not suggesting that we overlook or condone dangerous Power Over behavior, but I am proposing that when we routinely look at family interactions from a Power Over perspective, informed by cultural beliefs that if you win, I lose, we all lose.

Research suggests that we are not just wired for self-protection and fight-flight-freeze; we are also wired for care, connection, and generosity (Keltner, 2009; Taylor, 2002). Generosity and gratitude can enhance family life and personal well-being. But to cultivate them, we may need to challenge assumptions from the dominant culture.

Updating Relationships with Family of Origin

Interactions in the adult intergenerational family are often shadowed by patterns from decades earlier. Parents may offer unsolicited advice, a habit practiced for many years when children were young and needed instruction and guidance. Adult children may seethe with resentment at what they perceive as gratuitous criticism and intrusiveness by their parents. Siblings may be stuck in an older sibling–younger sibling dance, unable to see each other through adult, equal eyes, or may be constrained by competitiveness over parental love and favor.

An antidote to old patterns and resentments is having updating conversations with family members, reflecting current realities rather than old perceptions or habitual interactions. On a mature basis, adult family members can reflect on their modes of interaction and rethink how they relate; they may decide to amend old rules and roles as they navigate the family life cycle. As children become adults and marry or find partners, it is often necessary to re-negotiate boundaries and expectations. We focus here on updating relationships with parents.

The loving update

Preparation for the update

If an adult client is stuck in unproductive, angry interactions with parents, or is harboring old resentments, before initiating a meeting with parents we explore old family-of-origin wounds and consider new perspectives that could shift the impasse. Seeing parents as the young children they once were or in the context of their sociocultural challenges often softens the adult child's anger, opening up curiosity and compassion for the parent's own struggles and life journey. In these individual sessions, I hold a stance of multidirected partiality, extending compassion to both client and parents. I encourage the adult child to hold both perspectives as well: their own pain, and curiosity about where hurtful or disappointing parental behavior came from. We develop a multigenerational perspective, using where possible the "least pathology assumption" (Fishbane, 2013a), giving parents the benefit of the doubt. I am not questioning the client's painful experiences; the challenge for therapist and client is to hold the adult child's pain while cultivating curiosity and compassion for parents. I do not encourage an actual Loving Update conversation with parents when the adult child is still seething with anger, lest the conversation turn into a blame fest, which would be counterproductive. Once the client's resentment has been tempered, we prepare for an intergenerational meeting.

The invitation

Some clients choose to invite one or both parents to a session; others prefer to meet with parents on their own. In either case, the invitation needs to be nonthreatening. It could start with, "Mom, I love you, and I'd like us to have a better relationship." Some clients choke on the word "love," and prefer something like, "Mom, you know I'm in therapy working on x, and I could use your help." Most parents, when they hear their adult child ask for their help—especially if the adult child has been distancing—respond positively, happy to

be included and helpful to their child. How the invitation is offered matters; an accusatory tone by the adult child will likely be met with defensiveness in the parent.

If the meeting is to be held in the office, I prepare my client that I will extend multidirected partiality to parents as well as adult child; I explain that it may feel threatening to parents to come into their child's therapy, and parents may feel anxious that they are going to be blamed for their child's problems. I work to counter this fear by extending a warm welcome to parents, thanking them for coming, and indicating that sharing their perspective might be helpful to their child's work in therapy. I make it clear to the client that by opening to the parent, I am not shifting my alliance away from my client nor am I casting doubt on the suffering the child experienced in the family. Rather, I am making space for both realities, to facilitate an intergenerational dialogue in which both sides feel safe.

Tony's Loving Update

Tony complained in therapy about his mother's neediness and clingy behavior. He would flinch when she tried to hug him, feeling suffocated, and kept her at arm's length. She was wounded when he pushed her away, which made him feel guilty. Tony saw his mother as demanding and guilt-inducing, and he could not tolerate the pressure, so he kept his distance. Tony came to therapy because he found it difficult to get close to women; when they became emotionally invested in the relationship, he would bolt. Seeing a possible link between his aversion to his mother's overtures and his reactivity when women became attached to him romantically, Tony agreed to invite his mother Angela to a session.

Given Tony's description of his mother, I expected a large, overbearing woman to enter the office. Instead, in walked a little old lady, terrified that she was going to be blamed for her son's problems. I put her at ease and thanked her for coming, indicating how important it was to Tony that she was willing to come and be a resource to us in understanding her son.

I asked Angela about her own upbringing and her relationship with her parents. She hesitated, as she had never told Tony the real story of her childhood. Sensing Tony's interest and feeling safe, Angela opened up for the first time about her past. Born soon after her parents arrived in the United States from Italy, Angela had been physically abused by her parents as a young child and would hide out in the cellar to avoid being beaten. She also confided that from childhood onward, she made a vow that if she ever had children, she would love them to pieces, would never be abusive, and would never tell them about her own traumatic childhood, as she would not want her children to have such terrifying images in their heads. She did have one child—Tony—and then her husband died young. On her own with her son, she created a safe home and worked hard to provide financial security. And she loved him to pieces.

Listening to his mother's story, Tony's heart opened. He had never heard the stories of his mother's childhood abuse and was astounded by her courage in not repeating the abuse as a parent, and in deciding not to frighten her son by telling him about her traumatic childhood. In that moment, in Tony's mind his mother shifted from being a pathetic, clingy woman to being a hero.

Subsequent to this revelatory moment, Tony and his mother began a dialogue about how to establish expectations and boundaries that worked for both of them. Each considered their role in the impasse which had led to frustration and distance, and discussed more productive ways to communicate and interact. Tony expressed gratitude to his mother for all she had done for him and for "loving him to pieces"; and he explored ways she could love him that would allow him to remain in one piece, to be whole and authentic in the relationship rather than instinctively push her away. Angela was a willing partner

in this conversation, seeing that her behavior had been driven to some extent by her past and her desire to be a supermom. She came to see that in trying to give her son all she had lacked as a child, she had inadvertently alienated him. This meeting had a profound impact on the mother–son relationship. They committed to working to create more mutual respect and boundaries that allowed both to be comfortable. They also made a deal that if Tony felt he needed some space with his mother, he could say so openly. Taking space was now in the service of the relationship, not a rejection of his mother.

While this Loving Update conversation did not magically cure Tony's romantic relationship difficulties, it did help him rethink his kneejerk reactions to women and their "neediness." He worked on being more honest in these relationships, and negotiating space and connection in a way that promoted dialogue rather than defensiveness.

The update is not a one-time event

While the Loving Update meeting was transformative for both Tony and Angela, at times they would slip back into old habits. Periodically, Tony would reflexively push his mother away or Angela would come on strong with her desire for closeness. With the help of an occasional booster session, they recovered quickly from these moments and renewed their commitment to keep their communication open and not fall into old patterns. Eventually, they were able to recover from these difficult moments on their own, viewing them as opportunities to reflect and restore a healthier connection.

Challenges of Change

As we have seen, the human brain is wired for habit. Old behavioral repertoires are hard to change; when in the presence of family members, habitual survival strategies are automatically activated. These familial patterns can become constraining. Our views may be outdated; we suffer from "hardening of the categories" (Cozolino, 2008) with parents and siblings. Due to the tenacity of relational habits and rigid perspectives, change in the intergenerational family can be difficult.

The fact that we are blessed with neuroplasticity throughout life, however, does allow both adult children and parents to change and grow. But this requires the intentionality to choose new responses and the tenacity to stick with them so new, more benign habits become wired into the brain. In times of stress, fatigue, or illness, we may revert back to old habits as old neural circuits get reactivated. It is helpful to predict this with clients, so they are prepared and can be proactive in the maintenance of change.

Within family relationships, there is a delicate balance between pushing for change and acceptance of what cannot change. Here is my Intergenerational Serenity Prayer, riffing on the AA Serenity Prayer: "Grant me the courage to change what I can in this relationship—to challenge myself to grow; the generosity of spirit to accept what I can't change—both my parents' and my own limitations; and the wisdom to know the difference between what we can change and what we need to accept about each other."

Aging in the Intergenerational Family

The family journey is both vertical (through the generations) and horizontal (through the life cycle) (Carter & McGoldrick, 1988). As parents and children age, the dynamics and challenges evolve.

Challenges for the parent of adult children

This paper has focused on the challenges for adult children in "growing up" their relationships with parents. Similar challenges face the parent; updating and improving relationships in the adult family is a reciprocal process, in which both generations evolve

beyond outdated views and interactions. For parents, who have been raising and civilizing their children from birth, letting go of responsibility for their adult child can be difficult. Indeed, we never stop being parents to our children; a "postparental" stance is unrealistic (Walsh, 2016b). Parents continue to feel concern and offer care to adult children, in-law children, and grandchildren. But the responsibility is no longer the parent's, even as the attachment continues throughout life.

Adult children do not want unsolicited advice or criticism from parents, but they do want support (Isay, 2008). At times, this support is emotional or financial. It often extends to loving and caring for grandchildren—a relationship that is beneficial to all: "Think about how children like to hear stories over and over again and how older adults like to tell their stories again and again—a sort of lock-and-key mechanism for the transmission of culture" (Cozolino, 2008, p. 198).

Wise aging

As parents age, they may think about legacies they are leaving for the future. Their focus may be on their own family—caring for children and grandchildren, transmitting values, and offering support. They may be concerned as well to give back more broadly to society, focusing on stewardship for the future (Bateson, 2011; Cowan & Thal, 2015).

A significant literature is emerging—fueled by baby boomers—on aging well and cultivating wisdom. Cowan and Thal (2015) noted that we tend to see aging with a declinist perspective, focusing on the physical, cognitive, and professional losses that come with age. They offer an "opportunity paradigm" of this period of life, with a focus on cultivating character virtues such as gratitude, generosity, patience, and equanimity; and highlighting legacy and stewardship for future generations. Neuroscientists have found that brain changes with aging allow for greater integration, perspective, emotion regulation, and wisdom (Cozolino, 2008).

Caring for vulnerable elders

As parents age and become more frail, many adult children become more involved and protective with their elders. Cultures differ dramatically on the expectations at this stage of life; in some cultures, the child takes the parent into their home; in others, the expectations are less. Even when a parent is frail and the adult child steps up the caregiving, the child does not become a parent to the parent; this is not a role reversal (Walsh, 2016b). Rather, this stage of life offers the adult child the opportunity to offer generosity, compassion, and filial piety to the aging parent.

Caring for elders can be spiritually enriching. Confronting parents' vulnerability and mortality allows adult children to consider their own vulnerability as they acknowledge the fragility of life. But the challenges can be daunting, for example, balancing care for parents with self-care or attending to one's partner or children. Being at the center of the "sandwich generation" can be stressful, especially if there are not financial or relational resources to ease the caregiver's burden. Setting limits respectfully on one's time and availability can be difficult. When money is limited, a caregiver child—often a daughter—may become stressed from multiple obligations. Caregiver stress has been known to negatively affect health (Bennett, Fagundes, & Kiecolt-Glaser, 2013; Epel et al., 2004), although recent research suggests that narrative identity about caregiving that highlights a sense of meaning can lessen these effects (Mason et al., 2019). If the adult child sees caregiving as a spiritual opportunity and not just a burden, the outcome may be more positive, both psychologically and physically.

The caregiving process is eased when parents are cooperative and grateful. But many parents resist care or limits, driving when no longer capable, or living in a house with stairs when they are at risk of falling. Others are secretive or disorganized about their

financial situation or may not have written a living will or medical power of attorney. And some parents are bitter and resentful about needing care or critical of the help their child offers. These scenarios pose additional difficulties for the caregiving child and may reopen old wounds from the past. In stepfamilies, unresolved tension between parent, step-parent, and adult children can complicate decision-making and care with aging parents (Papernow, 2018).

On the other side of these distressed relationships, some adult children are demeaning or controlling with their elderly parents, bypassing their need for dignity and autonomy, acting in a Power Over manner that exacerbates intergenerational tension at this delicate time of life. For both aging parent and adult child, navigating this stage of life can be daunting.

The caregiving saga can be particularly difficult for the parentified adult child, who was put in an over-responsible role in the family as a child. This child often tends to be the one taking on the main caregiving with a frail parent and may resent being once again in this over-responsible position. Caregiving for parents with dementia poses its own difficulties and stresses, including caregiver compassion fatigue or burnout (Day, Anderson, & Davis, 2014).

Sibling relationships

Often one adult child—typically, as noted, a daughter—carries most of the caregiving burden, while other siblings do not step up to help or criticize their sibling for her decisions. In more successful family scenarios, other siblings do help and express appreciation and support for the work the caregiving sibling is providing to parents. Some are able to create "caregiving teams" (Walsh, 2016b) so one child does not carry the burden alone. Healing old sibling wounds is crucial if they are to successfully navigate this time of life.

"Growing up" the sibling relationship has benefits beyond caretaking parents. Many brothers and sisters are caught in older–younger dynamics that were shaped decades before or may still be living out competitive scenarios from childhood. Resolving old sibling wounds and reshaping the relationship based on current realities can create sources of resilience and joy in the family. All of the principles discussed above—emotion regulation, differentiation, forgiveness, acceptance, "take the best and leave the rest"—serve siblings well in growing up their own relationships.

Parents dying

It is a privilege to be with elderly parents when they die. Even when the relationship has not been optimal, this process can be healing. Rick had a contentious relationship with his father Henry for many years; the two kept a wary distance from each other. But when Henry was in his last months of life, dying of cancer, Rick—who had done significant work in therapy to heal old familial wounds—chose to invite his father to live in his house. With the help of hired caregivers, Rick offered his father a safe haven in which to die. Father died in son's arms, and the experience was transformative. Rick described himself as a "midwife" to his father's passing; the experience was deeply spiritual for him. His father, frequently cantankerous in the past, expressed love and gratitude to his son for the care at the end of his life. The process was healing for both men. Rick's own children, in their twenties, witnessed their father's ability to heal old wounds and care for his father. The way one treats elderly parents becomes a lesson to one's children—for better or worse.

Beyond the grave

When unfinished business dominates the intergenerational relationship, without the healing described in this paper, old wounds continue to fester beyond the grave. Parents who were unable to give blessings or engage in repair in their lifetime, and adult children

who carry resentments beyond their parents' death, contribute to passing on unfinished business and toxic legacies to subsequent generations. If parents are still alive and the relationship is fraught, Nagy encourages clients to imagine standing at parents' graves in the future and think about what one could have said or done—and, he urges, do it now, before it's too late. But even if parents have died without resolving old wounds, the adult child can do the work we have discussed, re-considering parents' limitations in terms of their own life journey, and coming to a sense of peace and acceptance.

CONCLUSION: RELATIONAL ETHICS

Nagy's focus on relational ethics has particular relevance to intergenerational relationships throughout the life cycle. His commitment is to the client—as well as to all persons who may be impacted by the therapy—including unborn generations. The contextual perspective encompasses past and future, and one's role linking the two: "The dimension of relational ethics can be thought of as a bridge from one's past, stretching through oneself to the future" (Hargrave & Pfitzer, 2003, p. 21). The way we relate to our past and the actions we take now will affect future generations.

Contemporary intergenerational theory integrates relational ethics within the larger sociopolitical context (McDowell et al., 2018; McGoldrick, 2016). Historical injustices such as racism, homophobia, marginalization, and familial experiences of war, trauma, or immigration inform our understanding of intergenerational family dynamics. The definition of family itself is evolving in the context of diverse family structures including gay and lesbian families, single-parent homes, divorce, and stepfamilies (Walsh, 2015). Healthy family functioning is considered within its cultural context; as we have noted, some cultures prize autonomy, while others highlight interdependence (Erdem & Safi, 2018; McGoldrick, Giordano, & Garcia-Preto, 2005).

These macro views expand our thinking about families in context. At the same time, interpersonal neurobiology adds the micro view of emotional reactivity, emotion regulation, and differentiation in intergenerational relationships. Integrating these micro and macro perspectives deepens and widens our understanding of family dynamics and informs therapeutic change. Relational ethics allows us to "reach for our best self," as we approach intergenerational relationships with the lens of values and intentionality.

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