

“A SYSTEMIC EXPLORATION OF THE CHALLENGES FACED BY EMPLOYER  
AND EMPLOYEE WHEN THE LATER IS UNDERGOING ACTIVE CANCER  
TREATMENT”.

By

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### **DECLARATION**

I MAZWITHA SHAVA student number 30276187 hereby declare that the mini dissertation with the topic:

“A SYSTEMIC EXPLORATION OF THE CHALLENGES FACED BY EMPLOYER AND EMPLOYEE WHEN THE LATER IS UNDERGOING ACTIVE CANCER TREATMENT”

is a product of my own work and all the references sited.

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Above all God, for the strength to persevere.

## **ABSTRACT**

The purpose of the research was to explore the challenges faced by both employer and employee when the later undergoes active cancer treatment from a systemic perspective. A qualitative research was conducted using a case study of six sessions with both employer and employee. The study revealed that the employer and employee defined their relationship and boundaries as a system. The research project made a great impact on the researchers' map regarding cancer or any other symptom, the person with cancer and the employer. In the researcher's old map, before the research project, cancer implied a very threatening disease which rendered both the employer and the employee helpless and powerless.

Through the research project the researcher discovered the significance of not having preconceived ideas as according to this study both the employer and employee had the freedom to punctuate their challenges in relation to the latter undergoing active treatment.

## **SUMMARY**

The goal of this study is to explore the challenges faced by employer and employee when the latter experience cancer treatment. The researcher is using a systems theory perspective to explore the interaction between the employer and the employee before, during and after the period of treatment.

A brief literature review on the traditional lineal treatment of cancer is provided first. This is followed by a detailed literature review on principles of systems theory and the challenges faced employer and employee when the latter undergoes treatment from a systemic perspective.

A single case study that consists of an employee diagnosed with cancer, the manager and the human resource team. A therapeutic research study is conducted with the above as a system focusing on the interaction process.

## **KEY CONCEPTS**

Employer, Employee, Systemic perspective, Relationships, cancer.

## CONTENTS

<b>CHAPTER 1: INTRODUCTION</b>	<b>1</b>
1.1 Introduction	1
1.2 Problem formulation	2
1.3 Motivation for the study	2
1.4 Goals and objectives	4
1.5 The research question	5
1.6 Research design	5
a. Type of research design	
b. Research method	
1.7 The research process	6
1.8 Unit of analysis, data collection and data presentation	7
1.9 Limitations of the research study	7
1.10 Presentation of content of the study	7
 <b>CHAPTER 2</b>	
 <b>LITERATURE REVIEW</b>	
2.1 Introduction	8
2.2 The principles of systems theory	8
2.2.1 Punctuation	8
2.2.3 System, sub-system and suprasystem	9
2.2.4 Feedback	10
2.2.5 Boundaries	12
2.2.6 Wholeness	14
2.2.7 Context	15
2.2.8 Equifinality	16

## II

2.2.9 Circularity	16
2.2.10 Nonsummativity	17
2.2.11 Symptom (problem) as communication	17
2.2.12 Symmetrical and complementary relationships	18
2.2.13 First and second order change	18
2.2.14 The map is not the territory	20
2.2.15 Binocular vision	20
2.2.16 Co-evolution	21
2.2.17 Stability and change	21

### **2.3 The link between systems theory and the employer/employee interaction when the latter undergoes cancer treatment.**

2.3.1 The Employer-Employee relationship from a systems theory perspective	23
2.3.2 The employer-employee-cancer boundaries	24
2.3.3 The Employer-Employee-Cancer Wholeness	24
2.3.4 A binocular vision to work as the interactional context	25
2.3.5 Employer-Employee-Cancer, a circular relationship	25
2.3.6 Employer-employee a Symmetrical and Complementary relationship	26
2.3.7 First and second order change in the employer-employee interaction	26
2.3.8 The map is not the territory	26

## **CHAPTER 3: THE INTERVIEWS**

3.1 Introduction	27
3.2 Background	27
3.3 Intervention during session 1	28
3.4 Intervention during session 2	30
3.5 Intervention during session 3	33
3.6 Intervention during session 5	37
3.7 Intervention during session 6	38

### III

3.7 The closing session	40
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## CHAPTER 4

### FINDINGS AND CONCLUSION

4.1 Introduction	42
4.2 The findings	42
4.3 Conclusion	46

5. List of sources	48
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## APPENDIX 1



## **CHAPTER 1**

### **1.1 Introduction**

In this study the researcher will be using a systems theory perspective to explore the interaction between working people diagnosed with cancer and their employers. The researcher worked for Cancer Association of South Africa for a period of two years. During her employment, social work intervention was focused on the cancer patient and their families as support systems. Through her interaction with individuals diagnosed with cancer she discovered the personhood as employee among those who are employed has not been given attention.

Despite all efforts by health professionals and social workers there seems to be less focus on what is happening to the employer and employee interaction when the latter is undergoing cancer treatment. During group therapy, a lot was mentioned regarding coping with the various losses such as hair loss and loss of employer's time. From the researcher's perception most of these losses are associated with the self as employee in relationship to the employer.

The study of systems theory introduced the researcher to reflect on the previous interventions and to consider viewing the employed individual with cancer as an employee and to focus on what is happening to the interaction with the employer during the period of diagnosis and treatment. As Keeney (1983:10) mentions you can not consider one without the other. A focus on the interaction between the two is important.

This chapter therefore is focused on the traditional definition and treatment of cancer mainly based on the medical model and a detailed discussion on what motivated the researcher to embark on the study. From chapter two the researcher will be using a systems theory perspective to explore other systemic interventions aimed at the challenges faced by employed individuals diagnosed with cancer and their employers.

## 1.2 Problem formulation

Traditionally cancer is seen as any type of malignant growth or tumor, caused by abnormal and uncontrolled cell division (Collins English dictionary 2006:235). In support of this definition Mrs Burkhuizen a social worker at the Cancer Association of South Africa (2004 May 5) says that cancer is a disease that affects any part of the body and has the potential to spread to other parts as well. Mrs Burkhuizen further gave an example of the functioning of cells in the breast which affects the breast and eventually the functioning of the whole human being. From a medical perspective the affected area can be described as cancerous, malignant growth or tumor (Dollingers, Rosenbaum & Cable, 1994)

Dollingers et al (1994: 48) and Alberts (1993:33) mention, radiation, chemotherapy and surgery as the three main cancer treatment modalities. Active treatment often lasts for three to six months. During this period the patient experience side effects of treatment such as, nausea, vomiting, fatigue, diarrhea, hair loss and loss of other parts of their body (Alberts 1993:38).

The researcher, who also worked at the Cancer Association of South Africa in Pretoria supports experts in the field (Naomi Neethling, Stomatherapist at Coloplast South Africa 2005:05) that a cancer diagnosis and treatment is often a traumatic experience. The side effects weaken the patient's body and affect all areas of life, including their employment.

The basic conditions of employment Act (1997) stipulates that workers may take up to 36 days sick leave period on full pay in a three year period. However those who are in the first six months of employment are only entitled to one day of paid sick leave for every 26 days worked. Considering the fact that active treatment can take up to six months, this means that finance is another concern for the employee. There is a high possibility that the employee might exhaust the paid sick leave. According to Public service policy and procedures on Incapacity leave and ill health retirement (March 2007), employees who have exhausted their sick leave qualify for incapacity paid leave. This may not be enough

as and thus employees run the risk of losing their jobs. However the researcher embarked on this study to explore the challenges faced by both employer and employee, from a systems theory perspective.

From the researcher's perception there seem to be challenges for both employer and employee other than income and job security mentioned above. Being away from work to receive treatment can be challenging for both employer and employee. For the employee it can mean loss of sense of belonging, fear of being declared medically unfit to work and fear of the fact that cancer can reoccur after treatment. Other challenges of treatment could be treatment costs, relocating to an interim home in order to be nearer to the hospital, physical changes such as hair loss, change of duties due to ill health and a feeling of dependency when the employer spends time accommodating their need for change of duties or working conditions. For the employer the challenges may include failure to accommodate changes of employee functioning and loss of time and resources making arrangements to accommodate employee. However these challenges are based on researcher's perceptions based on medical literature and her experience while employed at Cancer association. The research study will enable the researcher to compare her perceptions when she was working with cancer patients and intervention during the study using a systemic perspective.

In the light of the above the researcher embarked on a study to investigate the challenges faced by employer and employee when the latter experiences active cancer treatment according to their perception of the experience. **The research question therefore is, what are the challenges faced by the employer and the employee when the latter experience active cancer treatment from a systems theory perspective?**

### **1.3 Motivation for the study**

The Cancer Association of South Africa (CANSA) has a variety of support services such as interim homes, hire services and support groups. These services are facilitated by trained nursing staff and expert social workers (Alberts, 1993:156).

Despite all the support available for cancer patients, the aspect of their employability remains a major challenge to both the employee and the employer. Gates and Fink (1997:146) mentioned that employers and fellow employees basically fear the cancer patient especially if the patient has an obvious handicap or cosmetic deformity. Some are frightened by mistaken suspicion of contagion, others by loss of time or effort requiring assistance in coverage, by chance of increasing sickness. However some employees and employers are well informed about the disease and are able to accommodate colleagues.

According to Alberts (1993) another added concern is the work performance of the employee with a history of cancer. This is due to the reoccurring nature of the disease. From the researcher's experience with cancer patients, in the six months period of treatment she realized that a lot of support is given to the patient and the family. However she also realized that little is being done to the working cancer patient especially regarding the challenges faced by both employer and the employee with cancer.

There is not a large body of research on coping with treatment of cancer for both the employer and employee. It is for this reason that an exploratory study is considered, to find out the challenges faced by the employer and the employee when the latter experiences active cancer treatment. From a systemic perspective a focus on the employer and the employee is the core aspect that motivated the researcher.

#### **1.4 Goals and objectives**

**The goal is to obtain a systemic understanding of the challenges faced by employers/employees undergoing active cancer treatment.**

To achieve the above goal the following **objectives** are set for the study:

- To briefly describe cancer from a systems theory perspective.

- To explore and describe the challenges faced by both employer and employee when the latter experiences active cancer treatment.
- To describe what the researcher has learned with regard to the challenges faced by both employer and employee that can be used in social work practice.
- To pave the way for a doctorate study of the subject

### **1.5 The research question**

*From a systems theory perspective, what are the challenges faced by both the employer and the employee when the latter experience active cancer treatment?*

### **1.6 Research design**

According to De Vos, Strydom, Fouche & Delport (2002) research design can generally be classified under qualitative and quantitative categories. Qualitative research is holistic and aims to understand social life and the meaning that people attach to every day life. The data that is gathered is typically unstructured. The researcher plays a role in the research process and her punctuation is inevitable. In otherwords she becomes part of that which is observed (Becvar & Becvar 2009:78). The researcher also co evolves during the research process.

Qualitative research elicits participants' own punctuations and produces descriptive data in the participant's exact words. The unit of analysis is holistic and concentrates on the relationship between elements. The whole is always more than the sum of its parts (De Vos et al (2002).

### **a. Type of research design**

The researcher intends to use a single case study, which is an exploratory design (Fouche in De Vos et al 2002). The case being studied is an employee who experiences active cancer treatment and the employer as a part of the system. An exploratory design will enable the researcher to identify and explore the systems, subsystems and supra systems as the different contexts in which the employer and the employee gives and receive feedback.

### **b. Research method**

The exploration of the case involves in-depth interviews with the employer and employee who experience active cancer treatment. The interviews will be conducted at a convenient place for the parties involved.

## **1.7 The research process**

The researcher is in a process of compiling a comprehensive literature study on systems theory in order to understand cancer, challenges of cancer treatment and the experiences of both employers and employees.

The researcher will ask for written permission from Coloplast South Africa to conduct the study with their patients. The researcher has already communicated with Nursing sister Naomi Neethling, who welcomes the idea. Upon approval by the management of Coloplast South Africa, the matron will make a referral to the researcher and she will also request consent from the person concerned. The researcher intends to conduct several sessions with the employee as referred and the systems involved.

The interviews will be recorded and data will be transcribed. The data will be evaluated for themes and inferences.

### **1.8 Unit of analysis, data collection and data presentation**

In this study the unit of analysis is a transcription of seven interviews /sessions that were held with an employee and the human resource team at the employer's premises. The data consists of a partial transcription of the direct words of all participants involved. The whole content of the interviews will be added as an appendix. Permission was obtained from the employer and the employee to tape record the sessions. For the purpose of this study the researcher will fulfill the dual role of researcher as well as therapist. As a therapist ethical considerations such as confidentiality are of priority. The researcher is aware that as a therapist the two systems might have certain issues that they consider private from each other. The employee will exercise his right to confidentiality and the same applies to employer.

### **1.9 Limitations of the research study**

The research is of a qualitative nature, the description and interpretations are based on the researcher's punctuations. The researcher is aware that the reader might have a different map.

A description of a single case study of seven sessions is used; this might limit the value of the research study.

### **1.10 Presentation of content of the study**

The purpose and aim of chapter one is to provide the reader with a map of the goal and objectives of the study, the research design and the limitations of the research.

A brief description of key concepts and a comprehensive literature on the principles of systems theory is covered in chapter two.

Chapter three covers how the systems theory principles were utilized during the research study.

Chapter four focuses on the researcher's findings and recommendations.

## **CHAPTER 2**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

There is not enough research done on the challenges faced by employers and employees when the latter is undergoing active cancer treatment from a systems theory perspective. In this chapter the researcher will first define in detail the principles of systems theory that are applicable to this study. Thereafter she will demonstrate the link between the principles of systems theory to the study of the challenges faced by employer and employee when the latter undergoes treatment. The researcher will use systems theory to punctuate the interaction patterns between parties involved. Punctuation is one of the concepts commonly used within systems theory to describe the ever changing reality based on subjective constructions. The principles of systems theory are therefore discussed in detail first.

#### **2.2 The principles of systems theory**

##### **2.2.1 Punctuation**

One of the basic characteristics of communication is interaction, which entails exchanges of messages between communicants (Watzlawick, Beaven and Jackson, 1967). Participants always introduce punctuation in their interaction. Punctuation means that reality is not the same, what is perceived now as reality may not be seen as reality in the future. Punctuation takes place during a communication process. It is subject to change and self correction.

Keeney (1983) highlights that our punctuation of an experience or event is largely based on our epistemology. Epistemology is a way of creating knowledge. A therapist's epistemology usually distinguishes his habitual patterns of punctuation of the symptom.



Bateson and Jackson (in Watzlawick et al 1967) define punctuation as a series of communications involving uninterrupted sequence interchanges which they termed punctuation of the sequence of events. In a long sequence of interchange participants will punctuate the sequence so that it will appear that one or the other is dominant, dependent, inferior or superior and the like. Participants therefore set up a pattern of interchange which they may or may not agree. Punctuation organizes behavioural events and is vital to on going interactions. An example in a household there is a mother, a father and children because of these punctuations the individuals concerned are expected to behave in a certain way. Differences in perception and disagreements on punctuations can be the root of a symptom or problem in the interaction process.

### **2.2.2. System, sub-system and suprasystem**

Watzlawick et al (1967) define a system as an interactional relationship between two or more communicants in the process of, or at the level of defining the nature of their relationship. Hall and Fagen (in Watzlawick et al 1967) define a system as a set of objects together with relationships between the objects and between their attributes. Objects are components or parts of the system also called sub systems. Attributes are the properties of the objects/subsystem and their relationships tie the system together. Any object is ultimately identified by its attributes. In addition, Maturana (1975) describes the circular nature of a living system. Maturana further states that if the organization of the living system is circular then the living system is organizationally closed. By implication, organizationally closed living systems are autonomous systems. Due to the autonomous structure of the living system interactions do not specify how the system will behave rather the system specifies how it will behave. Organizationally closed systems are not dependent on input or information from outside the system.

Watzlawick et al (1967) further states that, subsystems and suprasystems exist in every organization or system. The system or organization is organized in a hierarchical structure. The suprasystem is higher than the subsystem while both are open systems interacting within specified boundaries. In other words the interactional relationship

between the system, subsystem and suprasystem is defined by the nature of the relationship and the context. Boundaries and context as punctuations are also principles in the systems theory and will be defined in detail.

The family as a system can be used to illustrate the interactional relationship between system, subsystem and suprasystem. The parents might be regarded as the suprasystem while the children become the subsystem. Within the children subsystem there might be more subsystems that exist among siblings. The interactional relationship is a circular process, in which both systems participate. No beginning and no end. They both co-evolve. However, Watzlawick et al (1967) maintain that subsystems and supra systems are open systems. This means that interaction rather than avoidance is involved from all communicants. The researcher's punctuation therefore is that feedback is involved in the interactional relationship. The feedback will keep the family system close or apart. Avoidance rather than interaction can be regarded as a symptom or a problem.

### **2.2.3 Feedback**

Keeney (in Becvar & Becvar 2009:67) defines feedback as the process whereby information about past behaviour is fed back into the system in a circular manner. Simple cybernetics defines both positive and negative feedback. The two concepts refer to the impact of the behaviour on the system and the response of the system to that behaviour. Positive feedback acknowledges that a change has occurred and has been accepted by the system, and negative feedback indicates that the status quo is being maintained. Both feedback processes may refer to something that is good or something that is bad. The 'goodness' or 'badness' of a feedback process can be evaluated in relation to context. Keeney (in Becvar & Becvar 2009) gave an analogy of the medical profession to illustrate the concepts of negative and positive feedback. In attempting to make certain diagnosis the doctors request that some tests be performed. If the results of the tests come back labeled negative, that means no change in body function has occurred. The status quo is being maintained. This is a good outcome. If the same tests were to come back indicating the presence of a certain disease, they would be labeled positive. In this case

the outcome is a bad one. On the other hand there is a woman who would like to have a baby. Suspecting that she is pregnant she goes to the doctor, who performs certain tests. The tests come back labeled positive indicating that she is pregnant. In this case the outcome would be considered a good one. If the tests were to come back labeled negative, indicating that she is not pregnant, that no changes had occurred in her body, the outcome would be punctuated as a bad one. By contrast positive results for a woman who does not want a baby would be labeled as a bad outcome, and so on. In systems theory therefore, good and bad can be decided only within a particular context that defines them one way or the other. From the researcher's punctuation, good, bad, negative and positive are judgments made by participants at that point in time. This punctuation is based on the fact that there is no one reality. In systems theory neither positive nor negative feedback causes anything. Both types of feedback are descriptors of processes in a given context at a given time. Understanding the feedback processes requires looking at both the behaviour and the response of the system to that behaviour.

Both Keeney (in Becvar & Becvar 2009) and Watzlawick et al (1967:134) postulate that feedback plays an important role in achieving and maintaining the stability of relationships. However both positive and negative feedback are necessary aspects of the process of any system's survival. Positive feedback is said to be an error - activated process in as much as it describes a process whereby information about a deviation from a previously established norm is fed back into the system and is responded to in a manner such that the difference is accepted. Thus, system maintenance behaviour occurs in response to change. Indeed the occurrence of a new behaviour in a system indicates that change may be necessary for the system to remain stable in a functional way. On the other hand, negative feedback processes indicate that fluctuations or disturbances are being opposed and a particular level of stability is being maintained. Information about this stability is being fed back into the system and responded to accordingly.

An example to illustrate the above is that of a family, as members grow and develop, maintaining stability in a functional way requires that the system allows for change at various points in the family life cycle. Initiation of change can come from both parents

and children. The family is likely to require a balance in the shift between dependence and interdependence in the relationship between parents and children. When children are young the balance is on the dependent end of the continuum. As they get older their need for independence increases. Parents may anticipate this need and allow for increased independence on the part of children. As independence is awarded to children by parents and is appropriately handled by children then, positive feedback processes are operative. On the other hand if parents continue to behave as if their children are each ten years younger than their age, the children might choose to violate rules and be rebellious. No matter how the parents choose to respond to these children's behaviour, either by accepting or resisting the need for change, positive feedback processes are operating. Once a pattern of acceptance and cooperation or resistance and rebelliousness is incorporated into the system, negative feedback is operating. Whether in a functional or dysfunctional manner the stability of the system is maintained in the context of both positive and negative feedback processes.

#### **2.2.4 Boundaries**

Boundaries can be explained as the principles that govern a system. Fisher (1991) views boundaries as the guidelines or regulations to follow. Keeney (in Becvar & Becvar 2009:69) describes boundaries in relation to rules. The rules according to which a system operates are comprised of the characteristic relationship patterns within the system. The rules express the values of the system as well as the roles appropriate to various behaviours within the system. A system's rules are what distinguish it from other systems and therefore rules may be said to form the boundaries of a system. However such rules are not visible but are inferred from repeated patterns of behaviour of members of a system. Keeney (in Becvar & Becvar 2009:70) further states that, a system exists only in the eye of the beholder. In other words, a system exists only as I; the observer chooses to define it, as a system-only as we infer rules and patterns of relationship within a system that define it as such form its boundary. The rules of a system are implicit for the most part, existing outside the conscious awareness of the members of the system.

The notion of rules and boundaries can be understood in relation to a family. In a family, members often do or not do certain things that they know are expected or not permitted. No one specifically mentions these rules such as going to church, being on time for dinner, or school performance. These sets of behavioural norms are what Keeney define as rules. The rules are unique to every family and give the family its own identity, different from other families. Therefore rules form the boundaries around a particular family system.

According to Watzlwick et al (1967) and Keeney (in Becvar & Becvar 2009) the concept of boundaries is also related to the hierarchical nature of systems. Any system, exists as part of a larger system or suprasystem, and has smaller subsystems for which it is the suprasystem. Boundaries connote the separateness of a system from a larger system and yet a belongingness to that suprasystem. Thus a family is a system and is also a part of the system of all families. Similarly subsystems of siblings and parental relationships exist within the larger system of the family. A system's boundaries and its rules operate in a circular between the system and suprasystem. During interaction with outsiders the family may choose to reject information, ideas and values from outside the family or from other families. The message being that information is not consistent with the family's ideals, values, rules or principles.

Watzlawick et al (1967) further state that, boundaries are punctuations not themes. Boundaries define lines of communication. Boundaries can be seen as punctuations. In the workplace (a system) various sub-systems punctuate the employer-employee relationship boundaries. Feedback plays an important role in defining boundaries during interaction between systems and subsystems. All the parties involved punctuate the boundaries and feedback is given and received all the time.

The concepts of closedness and openness as described by Keeney (in Becvar & Becvar 2009:71) are connected to boundaries. The extent to which a system screens out or permits the new input of new interaction is what is referred to as openness or closedness of a system. All living things are open to some extent, so openness or closedness is a

matter of degree. A balance between the two is desirable for a healthy functioning. The particular end of the continuum a given circumstance can be determined only relative to context. When a system and its identity are threatened by a context different from its own, closedness is the most viable option if that identity is to be maintained. An example is that, parents often encourage children to marry within their religious groups so as to help maintain a particular religious identity. On the other hand, immigrants to a new country often adopt the ways of a new society and allow great deal of new information as part of their effort to be assimilated by that society and to adapt to new values and norms. In this case the openness continuum is more appropriate.

Once again Keeney (in Becvar & Becvar 2009) highlights the need for balance between openness and closedness of a system. Being too open or too closed can be dysfunctional for a system. At either extreme, the system may be said to be in a state of entropy or tending towards maximum disorder and disintegration. By allowing too much input or not enough input the system jeopardizes its identity and thus its survival. On the other hand, when the appropriate balance is maintained between openness and closeness, we may say that the system is tending towards a state of negentropy or negative entropy that is, maximum order. The system is allowing input and permitting change as appropriate, while screening out information and avoiding changes that would threaten its survival. At either side of the continuum, entropy or negentropy the system needs some energy to organize and maintain the system, and some energy is needed for task functions. Too much energy devoted to one at the expense of the other can be problematic.

### **2.2.5 Wholeness**

Watzlawick (1967:134) outlines that the behaviour of every individual within the family as a system is related and dependant upon the behaviour of all the others. He maintains that all behaviour is communication and therefore influences and is influenced by others. The emphasis of this principle is that a therapist should not focus on the symptoms or the problem in isolation but the system as whole. In a family system this implies the individual and the significant others such as other family members or/ and the

employer/workplace. Significant others act as feedback loops in the interpersonal relationships.

In illustrating the principle of wholeness, Becvar & Becvar (2009) reiterated the fundamental rule in systems theory that the whole is greater than the sum of its parts. Thus there are various elements in this interaction. Thus even in therapy we may work with an individual but we do not consider that person in isolation. The perspective is relational and the focus is on context or the whole without which behaviour can not be understood.

From a systems theory point of view, there are many relationships that may come up as the size of the family or system increases. Like in a couple, they bring their relationships with their parents into this relationship, which would add another four elements, and then there is the relationship with grandparents, with religious figures, with friends. He may want to spend time with his friends, while she wants him to stay at home with her. One cannot count relationships or connections. It is much too complex and numbering would exclude some important relationships which they perceive as significant. Bateson (1979:18) emphasizes shapes, forms and relationships rather than logic and quantity. Bateson (1979:63) adds that, logic and quantity turn out to be inappropriate devices for describing organisms and their interactions and internal organization. In other words quantity does not determine pattern.

### **2.2.6 Context**

Context can be understood as the environment in which the interaction takes place. Bateson (1972:24) maintains that context is linked to meaning and without context words and actions have no meaning at all. All communication necessitates context and without it there is no meaning. An example within the family system is a family where the father is abusing alcohol, the mother's performance at work drops; children receive little or no attention from parents and become reluctant to come home after school. Within this context, the question of who started it is irrelevant and blaming the dad would be a linear

idea. Is it the drinking or maybe he felt threatened by the working wife and children not recognizing his authority? He could have felt lonely and overwhelmed and took to drinking as a way of getting help. Drinking then becomes his ally. All the above questions are relevant in the context of a family system.

### **2.2.7 Equifinality**

Watzlawick et al (1967:127) maintain that it is the nature of the organization of a system which determines the outcome of any input and not the input itself. The rule of causality does not apply. Keeney (in Becvar & Becvar 2009:72) defines equifinality as the tendency towards a characteristic final state from different initial states and in different ways based upon the dynamic interaction in an open system attaining a steady state. For example, in human interaction, there may be dysfunctional patterns of interactions. No matter what the topic, the members will argue and solve problems, discuss issues using the same redundant patterns. These redundant patterns are the characteristic end state referred to as equifinality. However, this end state is not predictable. Any or all interaction could be disrupted by the input or sometimes none at all. The concept of equifinality directs our attention to the level of process, and to focus on what is going on, here and now with the particular organization and on-going interaction in a system. The goal of systems theory is to understand the context within which a problem fits, to identify patterns maintaining that problem and to facilitate change in that context. Systems theory is concerned about attempted solutions and current communication about the problem, all of which become part of the process.

### **2.2.8 Circularity**

There is no beginning and end in a circle (Watzlawick 1967:46). This means that there is interdependency of elements in a given interaction. In this principle there is no cause and effect. The 'why' question should therefore be avoided. In the above example the father drinks, mother's performance at work deteriorates, children avoid home. Father's drinking can be seen as input but the outcome is unpredictable according to the circularity



principle. Mother and children could have drawn closer, trying to protect him by for instance throwing out his alcohol. This means the input, drinking, did not cause their behaviour. The organization of the system determines the outcome including behaviour. In this regard the family was organized in terms of its closeness. Every member was very close to the others. The input could be seen as introduction of another subsystem, which afforded the members the opportunity to create space for each other. This was probably a solution which became a problem.

### **2.2.9 Nonsummativity**

Watzlawick et al (1967:125) postulate that a system can not be taken for the sum of its parts. There is a link between this principle and wholeness. No part is bigger or more important than the other. Watzlawick et al (1967:135) further state that the analysis of a family is not the sum of its individual members. There are characteristics of the system, that is, interaction patterns that transcend the qualities of individual member subsystems. Many of the individual experiences of members, especially symptomatic behaviour, are in fact particular to the system. An example is the marital context described in 2.1.8 above. The behaviour of the children is part of the interaction pattern in the family and can not be viewed in isolation from other family members such as father's drinking and mother's love for her job. All symptomatic behaviour is part of the interaction pattern within the family system and its context.

### **2.2.10 The symptom (problem) as communication**

The problem as communication brings differences which keeps people both close and apart (Watzlawick 1967:78). The principle of difference can be defined in terms of Bateson's explanation of relationships and interaction. According to Bateson (1972), all phenomenons should be defined in terms of a relationship. No phenomenon has a meaning or identity in and of itself, but only in terms of its logical complement. We may punctuate a difference, but it can be so defined only relative to that from which it differs. A relationship must exist in order for us to see difference. The problem is seen as part of

the interactional pattern and cannot be viewed as an isolated incident. In systems theory it can also be seen as communication about the system and the differences in the interaction of its members.

### **2.2.11 Symmetrical and complementary relationships**

Symmetrical and complementary relationships can be described as relationships based on either equality or difference (Watzlawick 1967:68). In symmetrical relationships partners tend to mirror each other's behaviour and a relationship of equality is maintained and difference is minimized. A symmetrical relationship promotes competitive interactions. Symmetrical relationships involve a high level of similar behaviour. In the case of a couple the more she screams the more he screams back. If she screams (active) and he withdraws (inactive) the relationship can be viewed as complementary. Watzlawick (197:68) further state that there are two different positions in complementary relationships. One partner occupies a superior position, primary or one up position and the other corresponding inferior, secondary or one down position. A complementary relationship may be created by social or cultural context such as the doctor patient relationship. However, both parties participate equally in creating this relationship.

### **2.2.12 First and second order change**

In first order change (Becvar & Becvar 2000:65) the observer is not seen as part of that which is being observed. The observer is placed outside the system, observing what is happening on the inside of the system. However in second order change the observer is no longer a mere observer, but is seen as part of, or a participant in, that which is observed. The implication of this position is that the observer is influencing the observed but the observer is influenced by the observed in return. Keeney (1983:74) mentions, "the therapist is incapable of unilateral control and can be seen as either facilitating or blocking the necessary self correction". In other words Keeney highlights the implications of the observer being part or participant in what is being observed.

From this perspective change can either be first order or second order in nature. First order change occurs within the system, consistent with the rules of that system. Second order change involves a change in the rules of the system and thus a change in the system itself.

Watzlawick et al (in Becvar & Becvar 2009) gave an illustration of the nine-dot problem. First order attempts of solving the nine-dot problem are normally bogged down by the obvious assumption that the dots form a square. All attempts to get to a solution by staying within the square rules are examples of first order change solutions and in this instance are doomed to failure. By contrast, as soon as one changes the rule by allowing a possibility of extending the lines beyond the square, a solution is possible, and second order change has occurred. Second order change requires an imagination that is illogical to context, is paradoxical or 'crazy' when considered within the framework of the existing rules.

First order change consists of what we think of as the logical solutions to problems. In many instances change at this level does not produce the desired outcome but more of the same. An example is that of couple yelling at each other whenever there are disagreements but yelling back does not solve the problem. On one occasion the other party decided to ignore the yelling partner. However ignoring is an opposite behaviour and will not solve the problem but rather make it worse as ignoring could be seen as just a quiet way of yelling. The couple can be seen as stuck in the mud of disagreement. The more they spin their wheels the deeper they go. In this instance first order solutions have therefore failed and second order solutions might get the couple out of the mud. The focus now shifts to an illogical response to the hostile context of yelling and yelling and yelling and ignoring. An illogical response will allow new behaviour to emerge. An example is that when the wife starts yelling the husband puts on a judge's robe and walks gracefully closer to the wife pretending to make a ruling on the yelling behaviour. In this case the wife may immediately stop yelling, either laugh at the husband or for the first time decide to listen to the husband and the yelling pattern is interrupted. The husband's new behaviour can be seen as introducing difference to pave the way for change.

Difference can be defined as coming up with a new behavior to break the existing dysfunctional pattern.

Becvar & Becvar (2009) further mentions that the key to understanding problem formation and problem resolution is the awareness of the reciprocal nature of the behaviour, the importance of context that defines behaviour in which particular behavior meaning and thus the significance of the process.

### **2.2.13 The map is not the territory**

In all thought or perception, there is transformation, a coding between the report and the thing reported (Bateson 1979:37). The relation between the report and the thing reported tends to have the nature of a classification, an assignment of the thing to a class. Naming is always classifying, and mapping is essentially the same as naming. In other words, perception and reality are constructions. Our thoughts are a guide just like the map because it only gives directions but it is not the destination and having a map does not mean knowing the place. Therapists therefore need to consider the fact that their perceptions and reality are different from those of our clients. Differences do not mean wrongness it implies there are different ways of looking at things. According to Bateson (1979:38) our brains make images that we think we perceive.

### **2.2.14 Binocular vision**

Bateson (1979:78) defines the principle as double description. In interpretation the emphasis is on looking at any phenomenon from all combined angles rather than focusing on one aspect. It can be linked to the principle of wholeness and nonsummativity, the focus is on the whole. Seeing the connection between the different angles, create a depth perception. No part is bigger or more important than the other but all parts or angles have to be seen in relation to each other.

### **2.2.15 Co-evolution**

Bateson (1979:56) states that nothing comes of nothing. In other words both client and therapist learn from each other. They can punctuate and repunctuate when necessary and they co evolve in the therapeutic relationship where new ideas emerge. Co evolution can be linked to what comes first the chicken or the egg. We can not proudly say the chicken or the egg. The relationship is circular; there is no beginning or the end. Co-evolution can therefore imply that the chicken and the egg develop together. They are equally important in developing each other. The relationship is again like the tango dance, it takes two, and both parties are equally involved. Co-evolution can be linked to monism, which implies that no person can live in isolation. Human beings need and rely on each other's feedback.

### **2.2.16 Stability and change**

Keeney (1983:69) maintains that no behaviour, interaction or system is ever consistently the same. Change does occur whether desired or not. The difference between some present state and some preferred state activates the corrective response. All change is an effort to maintain some constancy and constancy is maintained through change. Change and stability are complementary to each other. Keeney continues to say that change can not be found without the roof of stability. In order for change to occur there must be some stability. Keeney (in Becvar & Becvar 2009:69) further states that, a system's ability to remain stable in the context of change and to change in the context of stability are defined by the concepts known as morphostasis and morphogenesis. Morphostasis is the tendency towards stability, a state of dynamic equilibrium. Morphogenesis refers to the system enhancing behavior that allows for growth, creativity, innovation and change all of which are characteristics of a functional system. In well functioning systems both morphogenesis and morphostasis are necessary. They can not be separated; they represent two sides of the same coin. Stability will always be rooted to underlying processes of change. Whereas either extreme of the morphogenesis/morphostasis continuum probably would be dysfunctional, in well-functioning systems an appropriate balance will be

maintained between the two. The rules of the system will allow for a change in the rules of the system when such change is in order.

An example can be that of a growing family that moves through the life cycle. As each new stage is anticipated and appropriate changes are incorporated into the family system, the family's level of functioning is maintained. By contrast, in the case of a family with an adolescent child, where the family does not allow for the needed change by behaving as if the child is still ten years young, an over emphasis on morphostasis at the expense of morphogenesis threatens the system's well-being. In the same way, if too frequent or too much change were permitted, the previously established degree of functioning of the family or system would also be threatened. In both cases however, it is the level of the rules that determines whether change is needed or stability is maintained.

To further explain the principle of stability and change Becvar & Becvar (2009) mention that, even though we do not particularly like problems, at least we are familiar with the problems we have. There is certain security in problems in terms of the predictability of our behaviour relative to them. On the other hand, change equals the unknown, and the unknown tends to be frightening given its lack of predictability and familiarity. At the same time that our clients request change there is usually a second or unconscious message of requesting not to be changed. The therapist therefore has the task to respond in such a manner that both requests are addressed. The therapist is therefore requested to enable the system to change how it changes in order to remain stable. The therapist can help by providing a context and ideas about the preferred reality but at the same time inform client not to implement change yet until at a certain time when both the client and therapist are ready. This approach attempts to provide a response to the double request for stability and change. The principle of difference can be used in this instance. Difference can be viewed as an attempt to break a pattern of interaction. Difference is the bridge between stability and change. Introducing difference can pave the way for change in existing patterns.

Becvar & Becvar (2009) further maintains that there is a way in which the problem makes sense and is being maintained. The efforts at change are part of the system, and the

system needs to maintain stability as it changes how it changes. A system corrects itself and therapy only provides the context.

### **2.3 The link between systems theory and the employer/employee interaction when the latter undergoes cancer treatment.**

#### **2.3.1 The Employer/Employee relationship from a systems theory perspective**

The employee with cancer can be punctuated as the system. According to Watzlawick et al (1967) the system is organized in a hierarchical structure. The employer can be punctuated as the supra system, the employee as the system and cancer as the symptom. The patient (system) and employer (supra system) are open systems interacting within specified boundaries. The interactional relationship between employer-employee-cancer is defined by the nature of the relationship or context which is the workplace. However feedback is required within the interaction relationship. The feedback will keep the relationship closed or apart.

For instance, if the employee tells the employer about the cancer, the employers' reaction will serve as feedback to the employee about the input (having cancer) he made. His response to the employers reaction, will serve as feedback to the employer, about the employers reaction.

The employee may give input as to how the treatment is going. The employer in turn gives feedback to the employee's input. The relationship is circular and is being defined and re-defined over time, through mutual feedback loops.

The researcher becomes the observer in the interaction between the employer and employee regarding cancer treatment. However the researcher can only observe through interviews with both parties together and separately. The researcher as an observer can only punctuate the interaction based on context and boundaries agreed upon by both employer and employee.

### **2.3.2 The employer-employee-cancer boundaries**

Boundaries can be seen as punctuations (Watzlawick et al 1967). In the workplace context the employer and employee punctuate their relationship boundaries. Feedback plays an important role in defining boundaries during interaction between employer-employee-cancer. Both employer and employee punctuate the boundaries and feedback is given and received all the time. During the treatment process both employer and employee are able to punctuate their boundaries. As much as both parties participate in defining boundaries the employee might decide to keep other aspects confidential. This implies that the employer also may have to maintain his boundaries. For instance the employer will not phone the doctor to enquire more about the treatment. The employee will choose to keep certain aspects of the illness confidential.

The concepts of closeness and openness are connected to boundaries ( Keeney in Becvar & Becvar 2009). To enable a healthy functioning, there is need for a balance between openness and closedness of a system. Being too open or too closed can be dysfunctional for a system.

However, it is also important to mention that, in the context of work unlike in the family certain boundaries can be permanent such as the employer will have to put a limit as to how long they can wait for the employee's return to work. Work is therefore the glue that keeps the relationship together or apart.

### **2.3.3 The Employer-Employee-Cancer Wholeness**

The emphasis of this principle is that the researcher should not focus on the symptom or the problem but the whole system (Watzlawick et al 1967). The whole system in the context of work needs to be considered. The following aspects can be form the whole:

- The impact on work or duties when the employee with cancer is away for treatment.



- The financial implications for both the employee and the employer.
- The possibility that the employee might come back unfit to perform the same duties or not coming back at all.

All these and many others operate as feedback loops influencing and influenced by each other.

#### **2.3.4 A binocular vision to work as the interactional context**

Context is linked to meaning, without context words and actions have no meaning ( Bateson 1972). In this study the employer-employee-cancer relationship is punctuation within the context of work. All interaction and the meaning attached to it are based on context. Due to the nature of the context, there is need to look at what happens to work when the employee is away? Who and what boundaries can be put if the employee returns and is unable to do the work?. These questions need to be explored in the context of work. Work is therefore the glue that connects the relationship. Both the employer and the employee will need to put on a binocular vision in exploring possible solutions to the above questions.

#### **2.3.5 Employer-Employee-Cancer, a circular relationship**

The principle of circularity emphasizes that there is no beginning or end but interdependency of elements in a given interaction (Watzlawick et al 1967). Even though the workplace context confines the interpersonal relationship, systems theory further argues that the employer and employee punctuate their relationship at any given time through feedback. The feedback from different parties could lead to different ways of looking at the same thing. In this regard cancer can be viewed as an input. The employer and employee determine what they will do with the input. The decision on what to do with the input is based on the organization of the whole system (equifinality).

### **2.3.6 Employer/employee a Symmetrical and Complementary relationship**

In terms of the work, the employer can be seen as having more authority, thus a complementary relationship. However, in terms of the experience of cancer, the employer might not have more knowledge or authority than the employee. This could also create a complementary relationship, but in reverse. Thus the relationship is continually defined and redefined by both parties

### **2.3.7 First and second order change in the employer/employee interaction**

In a first order change the employer and employee attempt to deal with issues within the rules of the system, such as sick leave arrangements according to agreed upon standards and rescheduling of workload among colleagues. Second order change takes place when the employer employee system are no longer able to make use of the agreed upon standards/rules and have to consider other solutions like a change in the rules of the system to accommodate each other. A process of co evolution can take place when the two learn from each other and from their construction of the experience around cancer and from each other.

### **2.3.8 The map is not the territory**

In the interaction between the employer and the employee both construct meaning about all parts of their interaction, including around cancer. In other words cancer does not determine the construction of their reality. They construct their reality about cancer, themselves in interaction with cancer, their relationship and the context of the workplace. In a therapeutic context, the therapist would have to use binocular vision, to see both sides of the relationship between employer and employee. The employer and employee would also use the binocular vision to punctuate and repunctuate their relationship and their experiences around cancer.

## **CHAPTER 3: THE INTERVIEWS**

### **3.1 Introduction**

In this chapter the researcher illustrates how she applied the systems theory principles in conducting the case study. The case study consists of seven sessions with an individual as a system that consists of himself as an employee, his manager and the head of human resources as the employer.

The researcher wishes to highlight that, she is using her personal punctuation to apply the systems theory in this case study. She is aware that other punctuations are possible.

The researcher will give a brief overview of the client, followed by a detailed description of intervention in each session. This is accompanied by the researcher's punctuation of the interview using a systems theory perspective.

### **3.2 Background**

- The client is a 35 year old man. He holds a degree in mechanical engineering. He is employed as a mechanical technician for a big company in the city of Pretoria.
- He was diagnosed with cancer 3 years after his employment commenced. He got seriously ill and was in and out of work several times over a period of 2 years. He was hospitalized and could not go to work for 6 months.
- He has now been back at work for 8months. He seems to be relieved that he can work again. He is still undergoing treatment. He mentioned that his appointments are scheduled in such a way that he does not have to be absent from work.

- The client mentioned several times that he loves his job and the ill health was a major blow for him especially the time he spent out of work feeling very sick and helpless.
- Going to work seems to be the only life he has. He talks very little about friends or family. His life revolves around work. He works in the same company with his brother but he hardly talks about him.
- He speaks a great deal about the poor relationship with his manager. It appears that the poor relationship is a major source of pain in his life at work. He believes he is totally unhappy because of the attitude of the manager.
- The client was referred by the nursing sister of a private cancer treatment (stoma) clinic in Pretoria. The client was very excited when the researcher called him for an appointment. The researcher discussed with client the possibility of participating in a research project based on his experiences. The client was willing and ready to get started.

### **3.3 Intervention during session 1**

The researcher visited the client at his workplace. The client prepared a conducive venue, comfortable, noise proof walls, with no interruptions from anyone. The client helped the researcher in making sure that the voice recorder was working. He mentioned that he would love to listen to himself one day. (*Client accommodating the researcher, demonstrating an attitude of caring*).

The researcher gave the client the expert role in describing his experiences of being diagnosed with cancer and receiving treatment while employed.

The client became visibly emotional. He went on at length describing his manager specifically saying, “.....he is a bad communicator, a racist who likes certain people

not others, he does not like my ideas, he sees black people as just baboons capable of doing nothing, he does not like people who are initiative, he wants us to use his brains, he takes out his personal anger on us. When he is stressed by his wife he fails to leave his stress at home, he is very biased for a manager.....”(Client’s *punctuation of the manager’s attitude towards employees*).

The client moved from talking about his current manager to his former manger that was totally different. He used to work from home and go to work when needed to do something in the office. He mentioned that, sometimes he would go in the evening and will be totally by himself. He would hardly meet the manager except talking to each other over the phone when it was necessary. (*The coming of the new manager disturbed client stability of managing himself. The client is threatened by changing from one managerial style to another*).

After the first manager was demoted the client was the acting manager. His health deteriorated during the time for appointing a new manager and he was in and out of hospital for 6months. During his illness, this new manager was appointed, who is now creating so many problems for him. (*the client communicating a theme of loss- loss of good health, loss of an opportunity to be the manager because of the illness, loss of stable working relationship with the manager*).

The researcher allowed the client time to carry on describing a bad manager and a good manager, the pain of not getting the managerial post. The client believes that he is better than the manager although he did not get the post. He believes their conflict is mainly due to the fact that the manager feels threatened by the fact that he knows the job because he has been acting on the post and has more experience. He could not get the post because of his race. He maintains that racism still exists in this country. (*The researcher stayed with the client’s stability by allowing him to continue using his own map to describe his experiences in relation to the manager*).

The researcher ended the session by highlighting that she, “... *picked up a theme of anger and loss and there is need to continue discussing these experiences of the ill health and work.*” She emphasized that work seems to be the glue that is keeping the relationship between the client and his good and bad managers and in the next session she would like to discuss more about these feelings of anger and loss and their impact on work.

The client thanked the researcher for listening without judging him because of his anger. He specifically mentioned that he feels it is not manly to show so much anger but thanked the researcher for giving him time to talk about this matter at length without interrupting. It appears that the client believes men should not show feelings. (*Staying with client stability/ so as to be non threatening*).

The client also highlighted that he was getting tired during the session. He mentioned that he usually feel weak and tired due to the effects of medication and the cancer treatment he received.

### **3.4 Intervention during session 2**

The client started talking about his bad manager (*stability of the client*). He describes the manager’s racist tendencies by saying that, the manager does not want his ideas because he is brilliant. “My manager is uncomfortable to make the MD aware that he has a strong team. He does not allow us to share our ideas. He is aware that if he shares with MD our ideas, the MD will immediately realize our potential. He always comes with ideas cast in stone but I always prove to him that the ideas do not work. I feel the manager want to set me up for failure. He provokes me so that I loose my temper and everybody can see that the manager is better...”

The researcher empathized with client’s feelings by saying; “*You seem to believe that, your manager has succeeded in building a secure prison and you are the inmate*”. *The researcher introducing a slightly new punctuation of the relationship–maintaining stability*).

The client responded with a bit of surprise and discomfort swinging his legs under the table. The client paused a bit and then it appears he made a decision to stay with his stability when he responded,

‘On many occasions he tried to build up cases against me. I was recently suspended during an investigation for missing panels. It was me and my colleague. As I speak my colleague is still on suspension. I’m back at work because they could not find any link to the theft’.

The researcher reframed the relationship between the client and the manager saying, *‘the two of you have a special relationship, and you seem to need each other* (pause). The researcher paused trying to ensure that the client is listening to the depth of the punctuation of the relationship. *‘The manager creates a prison for you but he makes sure that you will be able to escape. I’m not sure but I keep having this feeling that he cares about you’.*

Client became suddenly restless and excited, with a louder tone, “Precisely, precisely Mazwitha. We are supposed to be like father and son. It’s exactly how it should be like”! The researcher made an attempt to introduce change by using the client’s metaphor to analyze the relationships between client and manager. In order to stay with the stability the two spend more time discussing father son relationship. The client voluntarily pushed his stability a bit by comparing a father/son relationship with the employer/employee relationship. He mentioned that he is the son/employee and manager is the father/manager.

The researcher decided to go with the client’s punctuation of the similarity in father/employer and son/employee relationships. There was a moment of silence. It appears the client noticed the discrepancy in his behaviour compared to that of the behaviour of the ideal son and he immediately slipped to his stability of blaming the father/manager. He started blaming the father /manager for making it difficult for him to

respect him by showing favoritisms to some of the sons/employees at the same time expecting all sons to be good and to behave.

The researcher stayed with the stability by mentioning that, '*... it appears the father is now struggling with two son's behaviour (paused and maintained eye contact) at some stage we will have to look at the behaviour of the two sons*'. **The researcher is introducing binocular vision to the relationship.** Even in the absence of the manager trying to see the relationship from the manager's angle and from the angle of other employees/sons.

Client sighed deeply and praised the researcher saying that, 'It appears Mazwitha is now thinking outside the box'. (**Client is communicating fear of change**). The researcher responded by saying that, '*Today I also noticed that you are using metaphors a lot. It appears to me you are developing a different way of thinking about what is going on in your relationship with your manager. Perhaps we should finalize in detail what is going on inside the box and prepare for life outside the box.*' (**Pushing client stability and enabling client to start thinking of other possible maps**).

The client slipped back to his stability by saying that, 'in this case my manager is the one who thinks inside the box. He does not like people who are initiative. He gives you a recipe not even a recipe book. Immediately when he notice that the recipe is wrong then he dumps you with the responsibility to do it your way. Sometimes I get so angry that I stop blaming people who end up bringing a gun to work, shoot the manager then turn the gun to themselves'. (**Theme of anger and prisoner, helplessness.**)

The researcher responded by saying, '*It appears that you are very angry with your manager and you also feel helpless to the extent that you even have thoughts of putting an end to life itself*'.

The researcher took some time exploring client's suicidal thoughts. Researcher noticed that client is desperately reassuring her and decided to stay with his stability of blaming.

The researcher ended the session by giving the client homework as follows:



Observe what is going on between you and the manager in terms of feelings. (*Staying with the stability of focusing on the interaction and slowly introducing change by including himself as an object under observation*).

Observe and record who usually act as the son/employee and who the manager/father is. (*Enabling a binocular vision- in-depth observation of the interaction between the client and manager, taking note of the boundaries in the workplace context. In other words working with the wholeness of the system*).

The client to diaries observations everyday at least once a day until the next session in five days time.

### **3.5 Intervention during session 3**

The client phoned to ask for postponement and set the new appointment himself. On the session day the client put his homework task on the table and mentioned that it was not an easy task and he needed time to adjust to the researcher's way of doing things. **The client reframing the need to push his stability by giving it a new name 'adjusting 'which is change**).

Researcher mentioned that,'... it seems we are moving very fast, perhaps today we should do more reflection and a bit of planning for the future'. (*Pushing between stability and change*).

Client reassured researcher saying that he has contacted the Human resource manager and they are expecting the researcher's call for an appointment. (*Caring pattern emerging again, taking responsibility, self as manager*).

The researcher responded by saying, 'It appears you have done a lot of work, I can see the homework and you have also done preparation for the next session already'. (**The client seems to be pushing his stability**).

The client responded by saying, ‘Yes because these sessions are helping me I also have to help you with your research’ (*Caring*).

The researcher used the theme of caring to explore and to enable the client to reflect on the pattern of caring in relationship with manager. ‘*I can see that you care a lot about others, I’m wondering if probably your manager feels threatened by his junior caring for him*’.

The client responded, ‘I care a lot about him and I want him to care about me. He needs to act like a father and I’m the son’. The client gave a detailed description of the role of the father and role of the son. He describes the father as head of the family who gives rules; open to ideas of the children, all the children not some of the children.

A lot of time was spent discussing what is happening in this father/manager and son /subordinate relationship. The client indicated that the session is very deep and he feels the urge to think outside the box unlike his manager who always sees things inside the box (*maintaining stability of blaming the manager yet thinking about change. The researcher observed a pattern of always comparing himself with the manager*).

The client described ways of thinking inside the box such as:

Running away from the situation,

Becoming emotional,

Doing everything that the manager says without making any input. (*Maintaining stability*)

He further described ways of thinking outside the box such as:

Focusing on his career by behaving like an employee. (*A new punctuation of behaviour in relation to context*).

Challenging the manager's behaviour in a constructive way by maintaining the role as a son. Client said '...If I continue behaving like a son the father will eventually notice that there is nothing wrong with my son. Sometimes other people might make him realize that he has been selfish to his son. He can then apologize and come back to the family and eventually behave like a father to all his children. In other words if I continue to be the employee under him, doing what I'm supposed to do he will be forced to act like my manager'. ***(Change. The client sees the need to move from a symmetrical/ competitive relationship to a complementary relationship).***

The client further mentioned that, 'Even though I failed to do your homework the way you requested I have been thinking about it in my own way'.

The researcher added that, '*I noticed you like examples a lot as you were talking I was imagining a ship in a trip...*'

The researcher took out a clean page and made a sketch of a ship in water, the client joined by adding the captain, and the rest of the crew. The researcher and the client paused a while to decide on which direction is the ship going. At this stage the client was very quite paying a lot of attention to the drawing. It appears he only listened to the researcher as an attempt to find answers to what he was seeing and thinking about.

The researcher did all the talking but very minimal. '*The captain and the crew are definitely inside the ship and the ship is not at the harbor but moving*'.

The client responded, ' However it looks like the crew is all over the place and we are not sure in this ship whether the Captain is at the back or in the front'.

***(The researcher introducing difference to enable change by applying the tango dance concept to enable the client to see another map that both parties are equally involved in the dance/the sailing ship, himself, the manager and the rest of the crew).***

The drawing activity took approximately 24minutes. It was a long and intense activity. Both the client and the researcher sat back for several minutes talking about the drawing.

Although it took a lot of deep thinking, it was less painful. The client was able to reflect at his own pace.

The client also mentioned that he is feeling very tired but can not resist the urge to continue. He further mentioned that he gets so tired after the treatment and he is not supposed to strain his body. He is trying to look after himself everyday at work.

It appears that, the drawing activity marked a major turning point for the client. He managed to maintain his stability with less fear and doubt. Through the drawing he started to create new ideas about the manager and himself. He was comfortable in verbalizing his new punctuation of himself and the manager especially when he said ‘...the crew is all over the place and we are not sure in this ship whether the captain is at the back or the front’. *The client developed insight on boundaries by defining himself as one of the crew members separate from the manager yet sailing together as workers. Although change is not yet there or very minimal the activity created difference in paving the way for change.*

After a moment which appeared to be a short break, the client commented by saying that, ‘Lets continue drawing the ideal ship’.

The researcher did a lot of colorings as a way of joining the client in deciding positions of individual crew members. The client then put the captain in front so that he can give instructions to the crew.

The researcher further commented that, ‘...it will be interesting to see how your manager will draw the same ship. I would love to see how he positions himself’.

The client added that, ‘ I think the manager will draw the same ideal ship but will definitely mention the fact that in his ship it is very difficult to be the only Captain because there are experienced people, who see things before they happen’. (*Client presents with both stability and change*).

The researcher decided to use the opportunity and ask permission to involve the manager. *(The manager as part of the system).*

The researcher presented the request as follows, *'It could be only your perception of him. He might draw something else which might be interesting to think about. Through your permission I would like to meet him to listen to his drawing'.*

The client became restless and mentioned that he does not want anything to do with him. These sessions are meant to help him be stronger than the manager. He appreciates the sessions but he feels the manager will undermine him even more for bringing a shrink to help fight him. He recommended that researcher should continue setting an appointment with the Human Resource Manager. *(Client punctuation of himself as powerless in the eyes of the manager/stability).*

The session was ended by confirming that the two will meet to give feedback after meeting with HRM. The researcher will send an e. mail to HRM and will always copy the messages to the client to keep him informed as the client is the most important role player. The researcher will also try to involve the client in the meeting after introducing the matter to the HRM. *(Maintaining a relationship of trust).*

### **3.6 Intervention during session 5**

The session was focused on contracting with Human resource management. The researcher was welcomed by Mrs Sue who is the Head of human resource management for the company where the client is employed. Mrs Sue and Mr Rub the human resource managers were given an opportunity to ventilate their experiences during the client's illness. *(Nonsummativity, no part is bigger than the other, all parties are involved)* Mrs Sue mentioned specific painful memories when the client would come to the HRM office while on incapacity leave to sign for his salary. She described a specific day when the client mentioned that he really wanted to die because the pain was unbearable. Mr Rub

said, ‘...he also looked like he could die while sitting there waiting for us to process his documents ...’ (pointing at the chair where client was seated). They recalled incidents when they visited him in hospital seeing him under very scary life support machines. They mentioned that, it was even scary to see him in the office after seeing him in that state in hospital.

Mrs Sue further commented, “*It was a huge miracle to see him back at work. He looked like everything is fine until his manager come to report to us that he is extremely insubordinate*”. (***Feedback and another punctuation of the interaction pattern between client and manager***).

She continued’... *We were not sure what to do. We continued giving the manager support by listening to his concerns about him, giving ideas on how to cope here and there. The e. mail from you was a huge surprise and relief but also (she paused) some level of fear. We were surprised that the matter is so big even to people outside the company. We were also relieved that this lady might rescue us. At the same time we fear that the matter might get out of hand as we are not sure how you came into the picture*’. (***Manager communicating a concern about boundaries***).

The researcher clarified her role as the researcher and that she also has ethical obligations to facilitate the process of handling the matter. Mrs Sue and Mr Rub and the researcher came to a conclusion that there is a need to have a session with both the client and the manager. ( ***Wholeness of the system***). The researcher will act as the facilitator while at the same time conducting her research. The HRM took responsibility for arranging an informing all parties as to date, time and venue. The researcher conducted a short meeting with the client to give him feedback as agreed.

### **3.7 Intervention during session 6**

The researcher arrived first with the client at the venue. The client did not take a seat until his manager arrived. After the greetings the client left the room and only come back when HRM arrived. The client waited to be told where to sit by HRM.

***(The client demonstrating the subordinate role as opposed to managers' punctuation of him as insubordinate-researcher's punctuation).***

The HRM asked the client's permission and gave background of his ill- health from the time before the manager was employed up to the time when the manager came into the picture.

The client was given a chance to share his experiences of work and ill health. ***(input).*** The client started by apologizing that he might be emotional but he does not mean to offend anyone. He mentioned that, '...I'm grateful that I managed to come back to work as I was on the verge of death. It was hard as I was almost frail. I was struggling even to sit but I felt I needed to prove to the employer that I'm still worth having. I could not do my normal duties because it needs energy. I redefined my position and gave myself lighter duties, but in line with my qualifications. Instead of doing the normal physical duty of testing equipments I decided to do the quality assurance after others have done the testing. It is working for me but I feel the employer especially the HRM could have been more supportive, by coming in to check how I'm coping. I never complained but I feel it would have been more humane to just check'. ***(Employee's punctuation of the role of HRM).***

The researcher noticed that everyone was ready to respond after the client and mentioned that, what the client has said is just a perception. It is not necessarily the truth. Instead she requested the manager to share his experiences without approving or disapproving what the client has said. ***(The researcher emphasizing the need to respect each other's punctuation).***

The manager displayed a lot of relief nonverbally and responded by saying that, '*...even though I was not comfortable with this meeting, it seems it is going to help me. I only realized when I joined the company that I inherited a lot of things that I did not know. I totally agree with the client that we have been trying to cope. I struggled to challenge him on his work as he was only doing what he could consider his health. However the*

*biggest challenge was that the client is doing work for another department and it becomes difficult for me to account for his time and cost to company. So we were caught up in two relationships. On one hand the humanitarian relationship and actual relationship of meeting our targets as defined by the employer'. (The solution that became the problem).*

The HRM without giving detail said that, he acknowledges the gap in their role. It appears he wanted to apologize that the HRM has not been supportive. It was evident that both the manager and the client are relieved after they managed to talk about their challenges. The manager then made a recommendation that the client can be considered for several positions based on his observation of the client's abilities and benefits to the company. The HRM reassured the client and set another appointment with the client to discuss possible placement for the client. HRM thanked the researcher for facilitating the meeting. The researcher agreed with client that the two will have their closing session to finalize the research project. *(Equifinality - even though the manager and client were not aware that their different interactional pattern can lead them to a solution the solution or outcome was created by the whole system and was unpredictable).*

### **3.7 The closing session**

The client was very relaxed. *(Change)*. He continuously thanked the researcher saying that he enjoyed the way she interpreted life. He continued saying, 'It was another world, very interesting, and painful at times. There was a point when I asked for a break in these meetings and you agreed. You actually cornered me by agreeing because I actually wanted to quit but you gave me the space to decide. I told myself come-on young man go for it. So when you dropped the e mail checking on me I just decided to be man enough. So Mazwitha I'm conducting training today I was afraid to postpone this meeting in case I messed up your studies as the year is coming to an end. *(Caring)*. I can't say much but for my sake lets continue with the sessions after your research as you said. The sessions mean a lot to me. I was sure I'm an educated man but you showed me another world and it's important'.



*It appears that a lot of change took place through the meeting with HRM and the manager. The presence of everybody enabled a binocular vision of the symptom. Through feedback the manager, client and HRM went into a process of co-evolution. They realized they are important in developing each other. One never knows what comes first the chicken or the egg.*

In conclusion to this chapter, it can be said that applying systems theory enabled the client and the employer to explore changes in their relationship as influenced by client's illness. Attention was paid to the past relationship before the client's illness and also when he was away for treatment and the present relationship after the treatment. The whole system, employer and the client were involved in planning a solution for the future. The next chapter will provide an overview of the total research process.

## **CHAPTER 4**

### **CONCLUSIONS**

#### **4.1 Introduction**

In this chapter the researcher aims to present her findings from a systemic perspective, on the challenges faced by employer and employee when the latter undergoes cancer treatment.

The conclusions are based on her experience during intervention with the client and employer as well as her punctuation of the experience.

#### **4.2 The findings**

- In the case study conducted by the researcher, the client confirmed that he was away from work for six months receiving treatment. His absence from work posed challenges to himself as an employee and to the employer. As an employee he experienced several losses. Before he went away from work to receive treatment, the client was an acting manager. According to him, he was very sure that he would be considered for the position as manager. It appears he lost the opportunity as the employer appointed a new manager during the time he was away from work receiving treatment.
- On several occasions during the interviews, the client highlighted to the researcher that he was forgetful, getting tired and should not strain himself. Dollingers (1994) and Alberts (1993) mention fatigue and poor memory as one of the side effects of cancer treatment. As an employee the client mentioned that he is expected to perform tasks that require physical energy and a high level of

concentration. The client punctuated fatigue and poor memory as challenges to his position.

- After receiving treatment when the employee returned to work, he was faced with the changes in his body which is loss of good health, feeling weak, fatigue and poor memory and also the fact that he had lost the position as manager. It seems these were the biggest challenges for the employee.
- However it appears the employer or management were also faced with challenges around his illness. Considering that the client went away for six months, the management was supposed to take over his responsibilities. The appointment of a new manager was inevitable. They made sure that the work was done while at the same time he remained their employee. They took the necessary steps to ensure he received his salary including visiting him in hospital and requesting him to come to them to complete required documents.

Through using systems theory, the researcher and client were able to explore the following relationships between:

The client and the manager,

The client and the human resource team,

The client, the researcher and the human resource team.

- The relationship between the client and manager

When the client came back to work he was aware that he had lost his position as manager. However his stability was that he was the manager hence he constantly blamed the new manager for all the problems he experienced. He struggled to take instructions from the manager. He behaved as if the manager was not there; sometimes as if he was the manager and a symmetrical relationship existed. It appears this was the major contributory factor for the poor relationship as punctuated by the researcher. In exploring

this relationship, the researcher stayed with the client stability by using client's language and metaphors.

The use of the metaphor of son/employee and father/manager enabled the client to move from a symmetrical relationship to a complementary one. Other metaphors were used, such as, the client was the prisoner and the manager provided a safe prison. This enabled the client to see the manager's gestures as expressions of concern and caring about the employee. The drawing activity and the metaphor of thinking outside the box appeared to have made a break through when the client finally drew himself as just a crew member and the manager as the captain of the boat. More change occurred when the client suggested thinking outside the box. The client made suggestions such as he must continue to be the son/employee despite any challenges and the manager continue to be the father. In other words he took the responsibility to change and accepted a complementary relationship.

During the meeting with management in session 6 it was visible that the client was more comfortable as an employee. He communicated with respect. He never blamed the manager. The manager also came with clear ideas as to where the client can be placed based on his observation as the manager of the client's abilities and skills. Through a process of maintaining stability while introducing change the relationship between the client and the manager evolved from symmetrical to complementary. From the researcher's punctuation a complementary relationship is therefore most appropriate in the context of manager and employee relationship.

- The client and the human resource team

During interviews with the client as a system, different parts of the client system were explored such as his behaviour for example blaming the manager, emotions for example anger, needs, values and others. However, from a systemic perspective behavior can be understood in the context of the whole system. It therefore became necessary for the researcher and the client to involve the human resource team. The client and the researcher agreed that they should involve the human resource team.

The session with the human resource team enabled a binocular vision or a double description (Bateson 1979) to emerge in addressing the challenges faced by both employer and employee. Involvement of all parts of the system nonsummatively in a meeting/session provided a context where challenges were explored and addressed. During the meeting with human resource management (session 6) the researcher became the observer, the client gave input on the challenges he experienced on his return to work such as change of work and having to find his own ways to cope with loss of good health at work. The manager and human resource team gave feedback by acknowledging that they will take responsibility in making sure that the client is able to utilize his skills at the same time accommodating his health needs. In session 6 the human resource team agreed that they will meet again with the client and manager to negotiate a suitable placement. In this regard a process of feedback took place whereby both employer and employee received information about their past behaviour. This means that behavior of both employer and employee affected each other. The process of feedback therefore took place in a circular manner. From a systemic perspective the process of feedback enabled employer and employee to co evolve in addressing their challenges when the latter experience cancer treatment.

- The relationship between the researcher, the client and the management team.

During interaction with the client, the researcher became part of the therapeutic system. The client punctuated the researcher as his team in addressing his challenges with the manager and also in getting involvement of the human resource team. It appears the researcher became his source of strength and reassurance. Initially he did not want the researcher to meet with the manager. He did not want the manager to see that he is weak and that he resorted to getting support from a “shrink”. He also mentioned that the sessions are meant to make him stronger not the manager.

While the researcher and client were preparing for the meeting with management, the client mentioned that he wanted to make sure that he does not lose his temper because he does not want to embarrass the researcher. This again shows that he punctuated the researcher as part of his system. Although the client demonstrated a pattern of caring

even to the manager he constantly expressed gestures of caring by making sure the tape recorder is working, making sure the researcher felt welcome and comfortable. In other words the relationship pattern between the researcher and the client created a context where the challenges faced by both employer and employee could be addressed.

Keeney (in Becvar & Becvar 2009) mentions that a system exist in the eyes of the beholder. In other words it is the people concerned that define themselves as a system. From the researcher's punctuation, the interaction with the client created a therapeutic system, which later included the manager and the human resources team. It appears the whole system redefined the boundaries of the system when they agreed that the client and the management team will meet again to identify suitable placement for the former, without the presence of the researcher. By implication, the different inputs from client, researcher, and management team created thus illustrating the concept of equifinality. There was a mutual interaction and mutual influence among the three parties. There was mutual responsibility with no beginning and no end. There was no blaming of anyone as to what was happening in the system. A circular pattern of interaction therefore existed.

### **4.3 Conclusion**

As already mentioned the goal of the study was to explore the challenges faced by both employer and employee when the latter experiences active cancer treatment. The research project made a great impact on the researchers' map regarding cancer or any other symptom, the person with cancer and the employer. In the researcher's old map, before the research project, cancer implied a very threatening disease which rendered both the employer and the employee helpless and powerless.

Through the research project the researcher discovered the significance of not having preconceived ideas as according to this study both the employer and employee had the freedom to punctuate their challenges in relation to the latter undergoing active treatment.

The researcher wishes to further emphasize that it is important to keep an open mind and allow the client to share his map (perceptions and experience) with you.

Over all, the researcher is aware that this was a very limited study and she recommends including a larger sample in order to obtain richer data.

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## Appendix 1

The following is a transcription of the case study conducted by the researcher. The case study consists of 7 sessions with an individual as a system that consists of himself as an employee, his manager and two members of the human resource managers. There are no changes that have been made to the sentences used during the session.

Note: for the purpose of helping the reader to understand the interviews, the following names of participants are used mainly in session 5 and 6:

**Client:** refers to the employee

**Duane:** the employee's manager

**Rub:** depute head of human resource

**Sue:** head of human resource

**Researcher:** Mazwi

## SESSIONS 1

Client: (with lots of enthusiasm offering the researcher a sit) Yes, Mazwi this seems to be the most suitable place for our meetings.

Researcher: Yes I agree.

Client: These are the offices that we use with our clients. The glass walls are noise proof. We are not going to be interrupted by anyone. Everything is here, water, air-conditioning and plugs.

Researcher: In other words this is a serious business area.

Client: Precisely.

Researcher: I can see you made an effort and you are taking this very seriously.

Client: Yes who knows, where this might take us. It could be a beginning of me healing others from what I went through.

Researcher: As I requested in our telephone conversation, our meetings are going to be tape recorded. It is a requirement of the research project that I'm conducting.

Client: Precisely, in actual fact I was wondering where the tape recorder is. I did not imagine that this small cellophane like is the tape recorder.

Researcher: I am also in the process of learning to use it. Yesterday I practiced with one of clients at work and I listened it recorded very well. I hope it works the same today.

Client: Let me switch it on and see I normally don't struggle with technology but you never know. (examining the recorder). It is recording already everything we have said must be in here according to what I'm seeing on the screen. I would love to listen to myself one day so I will be helping you to make sure it is recording.

Researcher: Like I said over the phone, my research project entails interviewing an employee who was diagnosed with cancer and went through treatment.

Client: (became visibly emotional). Yes I was diagnosed with colon cancer, the most painful type of cancer. During the treatment I was not promised anything by the medical team except death. I could see it on their faces. However, I fought it and they fought with me and here (hitting the table with his fist).

My biggest concern is here at work. I'm stuck with a very bad manager. He is a white man off course, a born racist.

Researcher: You are very upset with him.

Client: You know he is a very bad communicator. He is a racist who likes certain people and not others. He does not like my ideas. He sees black people as just baboons, capable of doing nothing. He does not like people who are initiative. He wants us to use his brains.

Researcher: I can see you are getting angrier as you talk about him. It's like you are seeing him in front of you hurting you right now.

Client: I'm very sorry Mazwi to talk like this but I have to. I live with this pain every day. (Noticing his shivering hands, putting them under the table). Sometimes I feel he takes out his personal anger on us. When he is stressed about his wife he fails to leave his stress at home. He comes and dumps it on us.

Researcher: You sometimes feel that he steps out of a manager role.

Client: I do not understand that.

Researcher: You sometimes experience him as a husband lashing out to his wife.

Client: (sitting more relaxed). Yes, you can see even early in the morning that this man is already up in arms, besides he is too biased for a manager.

Researcher: His managerial style is of great concern to you.

Client: He is far worse if I'm to make a comparison with the manager I used to have before. My manager was totally different.

Researcher: I can hear from your tone that the previous manager fit very well in your definition of your manager.

Client: (looking a bit shy). I want to proceed but I'm not sure what you mean there Mazwi.

Researcher: you describe the previous manager as "MY MANAGER" and the current one as, "the manager".

Client: Ok, I did not notice that but you are right. I was enjoying my work I love my job. I used to make my own time table. I would work from home when I feel like and go to the office when it is necessary. Sometimes I would go to the office after hours when people are not there and would work in a peaceful environment. I would meet my colleagues when I want to.

Researcher: It sounds like you were managing yourself and it was very comfortable for you. The new manager came and took away all the comforts.

Client: It's not like that. (Pausing a bit). I'm getting tired. I need not strain myself by the way I'm still a patient. However we are getting into something very important that I need to clarify.

My health deteriorated drastically during the time the previous manager was demoted, "my manager as you said," (smiling). Although he was a great man, in terms of interpersonal skills, his performance was questionable. He was demoted and I was the acting manager. It was a matter of fact that the manager position was mine. Everybody was sure and comfortable with it but I got very sick (became very sad). I was in and out of hospital for 6 months. I can say I was almost in hospital for 6 months. During this time the current manager was appointed.

Researcher: (with a more gentle voice). I'm picking up a lot of sadness and a lot of losses so far. I would like us to pause and look at the losses. (A bit of silence). To me it sounds like you lost your good health to a certain extent. You lost an important opportunity to become a manager because of the ill health. You lost a good working relationship with your manager.

Client: You are right Mazwi but the fact of the matter is the current manager feels very threatened. He knows, I have been around. I have been acting on this post before. I definitely know the job better than him.

Each time I propose something, he is ready to attack me or to defend his weak mind I do not know.

Researcher: (maintaining silence).

Client: The fact of the matter is that racism still exists in this country. Nothing has happened to it. If you are black you must know you are a second class citizen.

Researcher: In this interview I have picked up that you have been battling with a lot of anger, not only anger but a lot of losses as well. I believe it is very important for us to continue discussing your experiences of ill health and work.

Client: (relaxing, ready to close the session). Precisely!

Researcher: Works seem to be the foundation or the glue that is keeping the relationship between you, your bad and your good managers.

Client: Yes. Precisely.

Researcher: In the next session we should discuss more about the feeling of anger and loss and their impact on work.

Client: Thank you Mazwi for not judging me because of my anger. I even feel bad for showing so much anger in front of a woman.

Researcher: You seem to believe that it is a sign of weakness to express your true feelings if you are a man.

Client: (smiling). I'm answered. Thank you Mazwitha for coming to our first meeting. (shaking hands). I'm a bit tired I hope you will find your way out.

Researcher: Thank you.

## SESSION 2

Client: Like I said before Mazwi, my manager is a born racist. He pretends that he does not approve of my ideas because he knows I'm brilliant. He is uncomfortable to make the (MD) managing director aware that he has a strong team. Sometimes he does not allow us to share our ideas.

(changing posture almost like ready to deliver a speech ). This manager is aware that, if he shares with MD our ideas, he will immediately realize our potential. He always comes with ideas cast in stone. But I always prove to him that the ideas do not work. (Pausing) Sometimes I feel that the manager want to set me up for failure. He provokes me so that I loose my temper and everybody can see that the manager is better.

(pause )

I remember specifically a day when I lashed out with anger and he remained very quite as if he was tape recording me. I realized that this man is planning something against me. He provoked me in order to pile up evidence of how far I can go with anger.

(silence ).

Researcher: From what I have gathered listening to you right now, (pause) you seem to believe that your manager has succeeded in building a secure prison and you are the inmate.

Client: (swinging his legs under the table). (pause). In many occasions he tried to set up cases against me. I was recently suspended during an investigation for missing cables. It was me and my colleague. As I speak my colleague is still on suspension. I'm back at work because they could not find any link to the theft.



Researcher: The two of you have a special relationship, and you seem to need each other (pause). It seems like the manager creates a prison for you but he makes sure that you will be able to escape. I'm not sure but I keep having this feeling that despite all these fights he cares about you.

Client: (with a louder tone) PRECISELY! PRECISELY MAZWITHA!. We are supposed to be like father and son. It's exactly how it should be like!

Silence.

Researcher: Let's look at that. It seems to be a good point that you are bringing. What is happening in this father son relationship? Who is the father? What is he doing to be awarded the title? The same applies to the son?

Client: in principle the son should listen to the father. The father should give direction but with respect.

Researcher: yes. Go on.

Client: You know the biggest problem is that my manager makes it very difficult for me to respect him by showing favoritism to some of the sons at the same time expecting all the sons to be good and to behave.

Researcher: It appears the father is struggling with his unique sons. ( pause ). At some stage we will have to look at these unique sons, their interaction with the father.

Client: (sighing deeply) It appears Mazwitha is now thinking outside the box.

Researcher: Today I also noticed that you are using a lot of matters. It appears to me that you are developing a different way of thinking about what is going on between you and your manager. Perhaps we should finalize in detail what is going on inside the box and prepare for life outside the box.

Client: in this case my manager is the one who thinks inside the box. He does not like people who are initiative. He gives you a recipe but not the recipe book. Immediately when he notices that the recipe is not working he dumps you with responsibility to do it your way.

Sometimes I get so angry that I do not blame people who end up bringing a gun to work, shoot the manager then turn the gun to themselves.

Researcher: you are very angry with your manager and you feel helpless to the extent that you even have thoughts of putting an end to life itself.

Silence

Researcher: Let's have a look at the option of putting an end to life. What method usually comes to your mind?

Silence

Researcher: Perhaps let's look at dying as a solution. What will be the benefits? Let's try and unpack.

Client: (pause ). As much as I said this Mazwi, I want to assure you that I'm a very sane man. Maybe a very angry man but very sane. I never thought of taking my life. I repeat and please I want you to trust me and I'm very honest with you I do not blame people who put an end to life. I won't do it but I do not blame them.

Researcher: I hear you Zam.

Pause.

Researcher: I would like to give you a task to prepare for our next meeting.

1. Observe what is going on between you and your manager every day in terms of feelings.
2. Observe and record who usually acts as a son and who acts as a father.
3. Diaries and record your observations every day until we meet again in the next five days.

Client: I can do that, but please give me that page to remind myself. The medication I'm using does work negatively on my memory as well.

Researcher: You may have it. Thank you once again for a comfortable venue and looking after the recorder through out.

## SESSION 3

Client: (putting the home work on the table). It was not an easy task. The reason why I asked for postponement of the session was that I needed time to adjust to your way of doing things.

Researcher: It seems we are moving very fast, perhaps we should do more reflection and a little bit of planning for the future.

Client: Yes before I even forget, I have contacted the Head of Human Resource, Sue. They are expecting a call from you for an appointment.

Researcher: It appears you have done a lot of work already I can see the homework and you have done preparation for the next session already.

Client: Yes, I need to push as well because these sessions are helping me and I must also help you with your research project.

Researcher: I can see that you care a lot about others, I'm wondering if probably your manager feels threatened by his junior caring for him.

Client: I care a lot and I also want him to care about me. He needs to act like the father and I'm the son.

He needs to know that the father is the head of the family who gives rules, open to children's ideas all the children not some of them.

Researcher: Let us have a look to the way the sons are interacting with the father.

Can we try to imagine from your day to day life or can we use the homework.

Client: (opening the homework only to reminder for him). It seems some of these sons have simply decided to let go. They take it lying down. They open their ears to listen if they are told to listen. They work if they I told to work.

Some of us we are different as you call it, unique sons the other day. I liked it by the way. We are innovative, self driven, visionaries. I have some ideas, something to offer to this world to this company in particular. We are not just part of the statistics.

Researcher: I'm wondering how the father feels about the sons who almost think and behave like him.

Client: Meaning what Mazwi? (Puzzled a bit).

Researcher: Meaning, we have sons who almost do not need a father.

Client: (smiling) Perhaps such sons are better and can rescue the situation when the father is almost taking the family down the drain.

Researcher: My next comment is, do we have a son in this case? How many fathers do we have?

Client: Well Mazwi, these sessions are so involving that I feel the urge to think outside the box unlike the manager who always sees things inside the box.

Researcher: Sounds like a good idea. Let's look at what is inside the box. (Taking a huge sheet of paper to draw the box).

Client: (moving closer) I would like to describe ways of thinking inside the box first.

Researcher: Go on perhaps I should put them in the box.

Client: Firstly running away is a way of thinking inside the box. I suppose it shows that one is coward like my manager.

Researcher: Go on.

Client: Doing everything that the manager says without making any input and becoming emotional. They are running out probably because of my poor memory they should be many actually in this instance.

Researcher: Ok what colour should we use for the items inside the box?

Client: Perhaps a strong colour because these are a matter of concern. I suppose if things were fine we would look for a relaxed colour or you will not be here (laughing).

Researcher: Now, let's look at those who think outside the box. What are their qualities?

Client: Focusing on my career, refusing to be destructed. Just behaving like an employee, no emotions, no outbursts, everything resolved in a gentleman fashion even though I do not know where I will find the other gentlemen like me.

Researcher: Are you then saying circumstances are making you loose the gentlemen in you?

Client: I think challenging the manager in a constructive way will be gentleman's idea.

Researcher: How?

Client: Like if I continue behaving like a son the father will eventually notice that there is nothing wrong with my son. Sometimes other sons will notice that he is being selfish and they will call him to order also.

Researcher: It seems you have a lot of support if you want to try and work things out.

Client: Yes, but I need yours too (maintaining eye contact).

Researcher: I agree.

Silence

Client: In other words if I continue to be like a son/employee he can then apologize and come back to the family and eventually behave like a father to all his children. In other words if I continue doing what I'm supposed to do he will be forced to act like my manager.

Researcher: I'm picking up that you are thinking a lot about your relationship with the manager.

Client: Yes! Precisely, precisely! and I think these meetings are helping too. To shape up my mind also. The day I postponed the meeting I was really feeling drained. I was almost torn between two masters. My body was tired but the desire to talk to this lady who put some needles in my sit (laughing). So interesting to talk to but geeeeeeeeeee!!!!!! she pricks on the way.

laughter

Researcher: You indicated that you were tired I think I feel the same right now. We worked I can see all the sheets are full of information.

Client: Yes, we are working.

Researcher: Thank you once again Zam.

Client: Hope you find your way.

#### SESSION 4

Client: By the way I'm the one who kept our sheets at least I did not forget them. I hope you didn't want to use them during the week. I thought about it when I suggested that I should keep them as it was raining when you left. (spreading the work sheets on the table).

Researcher: What has been going on in your mind so far?

Client: A bit of that homework (scratching his head).

Researcher: I'm picking up that you are a very meticulous person. You want things done. You can really be hard on yourself to get things done.

Client: You might be right (restless a bit).

Researcher: I noticed you like metaphors a lot. Today as a way of doing the homework and taking from where we left in the previous session, I'm imagining a ship in the ocean. ( silence )

Client: Ok, let's go on. I think I'm with you. (thinking a lot).

Researcher: We will have to make use of what we have. Here are the crayons, pencils, rubber and only one clean sheet.

Client: I'm worried about the recorder now because we are certainly not going to talk much now. We are in grade RR.

Laughing

Client: There we go (pointing to the recorder). We are with you don't worry!

Researcher: I suggest you draw the ship and I will use blue crayons to draw the water.

Client: There is the sheep in water!

Staring together

Researcher: I wonder who is inside!

Client: You are obviously not in side. I rather put myself here. There he goes poor Zam.

Researcher: Who should be next to Zam?

Client: Let me complete. (Drawing all the colleagues and manager inside the ship).

Researcher: (colouring the water )

Client: Let's have a look.

Researcher: The captain and the crew are definitely inside the ship and they are sailing.

Client: However, (smiling). I know what your next comment will be and I'm going to respond to that. It looks like the crew is all over the place and we are not sure whether the captain is at the back or at the front.

Researcher: I agree totally.

Client: Let's agree this is a true ship in this company (laughing) and we can now draw the imaginary, "ideal" ship. I suppose the outside the box story.

Client: ( drawing all by himself )

Researcher: I will continue colouring the water.

Client: You see now the big guy is in front, every tom and dick paying attention. I suppose it is fear of drawing. By the way this is an ocean. Nothing should go wrong no taking chances. No experiments for scientists like poor Zam.

Researcher: It will be interesting to see how your manager draws the same ship. I would love to see how he positions himself.

Client: I think the manager will definitely draw the same ship but will definitely mention that, in his ship it is very difficulty to be the only captain because they are experienced people who see things before they happen.

Researcher: Maybe we should now involve him in these sessions.

Silence

Researcher: Through your permission I would like to meet him and listen to his drawing.

Client: (visibly annoyed) I do not want anything to do with him. These sessions are meant to help me be stronger not the manager. I would like you to set up an appointment with the Head of human resource. She is waiting for your call.

Researcher: I agree. Today I will phone and get the e. mail address and I will put everything in righting to make sure they understand my purpose. I will also copy you every correspondence I make with the head of Human resource. After introducing myself to the Head of human resource I will set up a short meeting to update you and to plan with you.

## SESSION 5

Researcher: My name is Mazwitha as we discussed before.

Sue: I'm glad you made it. Not so sure but I'm glad. With employee issues you are not so sure how far you can go. Too much involvement can be detrimental and the other way round (looking a bit helpless).

Researcher: I agree we work with human beings one can not know what they want even when you think you know them better. My belief is that I just work with them. I make sure I do not live them behind. That is how I survive working with people.

Sue: I had made arrangements that myself and one of my supervisors will meet with you but it could not happen because we are quite busy sometimes. I normally do not like to be alone in such matters.

Pause

Sue: ( looking sad). Zam was quite sick. I have never seen that before. I have never seen a human being in so much pain. Looking at him in hospital bed will live you feeling so empty. He really fought for his life.



Apart from seeing him in hospital, I remember days when he had to come in to complete incapacity salary. We really did not mind going an extra mile for him and we do that to our employees but there are certain documents that needs top be completed to show that he is alive. He had to come. It was painful for us and for him as well.

I remember a specific day when he mentioned sitting there next to you that he really wants to die because the pain was unbearable.

Researcher: You felt even more helpless.

Sue: He also looked like he could die while sitting there waiting for us to process his documents.

Researcher: I can see it is like a miracle to be talking about him alive.

Sue: I can't stop imagining those machines in hospital all over him. It was even scary to see him at work after seeing him in hospital.

Silence

Sue: You are right it is a miracle. He looked like everything is fine when he came back only until his manager mentioned that he is very insubordinate. We where not sure what to do and he just continued updating us. We gave him ideas on how to cope but it appears as much as he tried it did not work.

The e. mail from you sounded like some good news or danger but we decided we have to take it on. It's like this problem will not disappear, now it is coming from outside. We have some fear that the matter is getting out of hand as we are not sure how you came into the picture.

Researcher: You feel a bit exposed and unsure. But I might as well clarify my position. I'm a qualified social worker doing a research project. Part of it involves interviews with an employed cancer and the people around him.

Sue: There is a need to involve the client and the manager.

Researcher: I think so as well.

Sue: I will invite everyone.

## SESSION 6

Rub: My name is Rub the deputy head of human resource. Sue will be joining us later as she is conducting a disciplinary hearing. On my right is Duane the manager Zam's ( client) section.

Through your permission Zam I would like to give the background of how we ended up here today.

I'm not sure Mazwi if this will suit your project. You are welcome to stop me and correct me.

Researcher: I'm quite comfortable, thank you.

Rub: As we all know, Zam really got sick and went to hospital since when he came back Duane was the head of the section. In other words Duane is here because he is the head of the section.

Duane: (nodding looking a bit worried). I need to know why I'm here. What is going on? I received the e. mail yes but so what! I'm I forced to be here? Are we doing a research or are we on duty? Why I'm I part of this? Why should I?

Rub: Perhaps Mazwi you will help me to explain but let me try. Before Mazwi came in the picture if have been having our in house problems. I'm sure Duane more than anyone else you will agree with me.

Silence

Duane: So? So what? I'm not being difficult or rude but you have to really talk to me. Put me in the picture.

Researcher: It's very important what you are saying as a starting point. We have got to be sure we are on the same page.

Rub: Mazwi is a researcher, a trained social worker who is now doing a masters degree. She comes to our company on her own capacity as a researcher. It happened by coincidence that what she needed from us was simply on the table. It was just at the right time as you know that we have been thinking of a way to help Zam.

Duane: I'm covered ( smiling) we may proceed.

Zam: ( clearing his throat first). I want to apologize in advance in case I get emotional but I do not mean to offend anyone. I got very sick. I'm grateful that came back to work as I was on the verge of death. It was hard as I was almost frail. I was struggling even to sit but I felt I need to prove to the employer that I'm still worth having.

Silence

Zam: I could not do my normal duties because it requires energy. I redefined my duty and gave myself lighter duties but in line with my qualifications. Instead of doing the normal physical duty of testing equipments I decided to do the quality assurance after others have done the testing.

Silence

It is working for me but I feel the employer especially the human resource managers could have been more supportive, by coming in, checking on how I'm coping. I never complained but I feel it would have been more humane to just check ( sighed deeply).

Researcher: I can see that everyone is ready to respond. I just want to mention that what Zam has said is his perception. According to him that is what happened. It is possible that according to others it is not like that but it is also a perception.

Silence

Researcher: I feel that we can proceed without necessarily approving or disapproving what Zam is saying. We can give our own perception.

Duane: (sighing with relief) Even though I was not comfortable with this meeting, it seems it is going to help me a lot. I only realized after I rejoined the company that I inherited things that I did not know. I totally agree with Zam that we have been trying to cope. I struggled to challenge him on his work as he was only trying to make himself useful.

Silence

However, the biggest challenge was that, Zam was now doing work for another department and it becomes difficult for me to account for his time and total cost to company. So we were caught up in two relationships, the humanitarian and the actual relationship of meeting our targets as set by employer.

Rub: Come in Sue we are nearing the end but I guess it could be where you are needed most.

Sue: Without disturbance hi all.

Rub: I would like to acknowledge the gap on our side as human resource managers, but it is equally important to mention that is not too late. We are willing to work on the matter to the satisfaction of all. We are the head of human resource but there are other parts of the company we need to liaise with to get proper placement and go ahead .at the moment we are not even sure where to start.

Duane: Since I was directly involved I have made my own research as to where Zam can be placed. I have identified areas where Zam's knowledge is actually needed.

Rub: without jumping the gun let us agree on the date to meet again with Zam as human resource and work on the suggested plans.

Researcher: Thank you very much for accommodating me. I do not think it is necessary for me to be part of the implementation. I suppose me and Zam we will meet again just to finalize my research task.

Zam: Thank you Mazwi I will walk with you out.

## SESSION 7

Client: we are not going to have a long session as I'm conducting training.

Researcher: I agree as you said on the phone.

Client: I think it was a good session. Im happy I did not embarrass you with my anger.

Researcher: perhaps you lost your anger during those discussions of ships, oceans, fathers and sons.

Client: you might be right (both laughing) but a point of correction Mazwi. What happened to my manager's anger? It was there at the beginning of the meeting I looked at you as he was lashing out and I noticed you understood y eye language. The guy almost lost it but he also lost his anger?

Researcher: Perhaps anger is contagious I must go and read my books again. Maybe when one member of the family has it the others will get it. The same applies when one member loses it the others notice and throw it away as well.

Client: But I must say it was another world for me. I liked it really. There was a point when I wanted to end these sessions and you agreed. You actually cornered me because you gave me the space to decide whether I can afford to lose this. So when you dropped the e. mail checking on me I took the opportunity.

Now Mazwi I have to go I'm conducting training. I believe me and you still going to meet. I want to also give you space to tie up your project then we look into my PERSONAL life.

Researcher: Thank you.



