

Deanna Weathermon | January 30, 2020

AHB 450 (1201-9445)

This genogram has been created to discuss the life and familial patterns of our patient, Deanna Weathermon. For this genogram, there have been three generations identified and explored, which spans over approximately 100 years. The family is a caucasian family with a wide range of European genetic descent.

After review of the genogram and discussion with the client, certain behavioral and medical patterns have been discovered. We will identify and discuss these patterns and what they could possibly mean for our patient. The first pattern we will look at is the medical diagnosis of diabetes. The patient's family shows a history of diabetes on both her father and mother's side of the family. There is even a case of childhood type I diabetes in her maternal uncle. The traumatic effects of having a medical diagnosis of diabetes could show patterns of trouble with food and eating habits. While diabetes is a disease of the pancreas, the relationship with food could impact the likelihood of that someone might activate the disease. Through observation of the genogram, the patient's brother has also been diagnosed, which in turn, could show an increase in the possibility that the patient could develop the disease as well. As a result of her familial history of diabetes and her unhealthy relationship with food, the patient decided over a year ago to change her lifestyle regarding food and has lost 60lbs as a result, therefore reducing her possibility of triggering diabetes.

The next pattern we should discuss is the history of alcohol and drug abuse. Both the maternal grandfather and paternal grandfather had an abusive relationship with alcohol. As a

result of this abusive relationship with this substance, the families struggled with relationships with their significant others. The maternal grandfather verbally abused the maternal grandmother and children while under the influence, which could be considered when looking at the relationship between the mother and father of our patient. The mother and father, while still married, struggle with a verbal “focused-on-negatively” relationship, where the mother is constantly yelling at the father with negative feedback and putting him and his topics of interest down. It could be determined that the mother acts this way as a result of how her father acted toward her mother as a result of the alcohol abuse.

The paternal grandmother ultimately divorced the paternal grandfather, which caused a trickle-down effect of an unhealthy, “distant” relationship between the patient’s father and paternal aunt. While they still communicate, they have lived far apart for at least the last 30 years of their lives and do not talk often. It is to be believed that the paternal grandmother was the aggressor in the relationship, which could explain why the father of the patient tolerates the negativity and verbal abuse from the mother.

In addition to alcoholism, there is also a history of drug abuse on the maternal side by the mother’s cousin, who ultimately passed away from lung cancer in 2002. While this piece of information is important, there is a clear reason for the abuse that showed up in the genogram which we will discuss further in the analysis.

Another discovery that was found is the series of unhealthy, codependent relationships between the mother and sister of the client. They struggle with doing anything without the other one. This has caused the patient to develop feelings of resentment and not-belonging. In addition, it is a driving force in the desire for the patient to move away from the immediate family

completely. The patient has always felt like a black sheep, and because she has always been left to survive on her own and manage for herself, she does not feel bad about the pending move. The patient's brother has stated to her that "the reason they don't help you as much is because you have always been able to manage on your own." While this may be true, the patient has expressed the feeling that regardless of her ability to take care of herself, it is still important to feel loved and at least offered the same privileges as the mother offers to her sister.

After consulting with the mother of the client, it has been discovered that there was also some substantial sexual abuse by the great uncle to the mother and the cousin of the mother. At a young age, the great uncle began molesting the cousin, which is believed to be the underlying reason for why she chose to use and abuse drugs during her teenage and young adult years. In addition, the cousin had 5 live births, but only kept 2 of the 5 children to raise. She placed her three daughters for closed adoption at birth, which she stated was to prevent them from becoming victims of her father's sexual abuse. The records are closed.

Due to the mother of the client also being a victim of sexual abuse, the way she chose to raise her children and how she deals with certain behaviors were also affected. She is more closed off from people and has a tendency to dislike being touched in any way. The client also has a diversion to touching, although not as prominent as her mother, likely as a result of the trained diversion from the mother.

Some positive things that the client disclosed about her family is that they are very close in the sense that they support each other and help with raising of the children. Although the family dynamic is very different between her own family and the sibling's families, it is obvious that they will be there for each other through the tough times and when they are truly in need.

The client has expressed the feeling that she often feels left alone though when it comes to raising her children, as her children are adopted and special needs, which has caused a certain level of alienation due to lack of understanding for the situation. Her primary support system is her husband, who she states is pretty amazing.

One challenge the client will have with raising her children is the history of speaking negatively to each other. She has expressed that she recognizes the area of opportunity and puts forth effort to make sure she doesn't speak to her husband and children the way that her mother speaks to her father and siblings. While she struggles with yelling, which is the environment in which she was raised, as well as her grandparents, she does try to change that behavior and speak more calmly to her children and husband. The client also recognizes that her childhood was rather controlled with regard to allowing external relationships and self expression, so she states that she tries to be more relaxed with things that she allows her children to participate in.

While her familial system is somewhat dysfunctional, she has made it clear that they obviously love and support each other as much as they possibly can. She also states that she recognizes their inability to give more, and that because she wants better for her own family, she puts forth the effort to make those conscious changes to help reshape her children's familial system and behaviors.

To conclude the genogram assessment, it is clear that there are obvious behavioral and medical patterns that could contribute to the reasons the client struggles in her life. It is also obvious that the client takes the need for change seriously and does not want the same behaviors to affect her children and grandchildren.

The fact that the client's grandparents had their children so late in life may have contributed to difficulties in discovering much of the family history, as a majority of the ancestors have been deceased for quite some time, many before she was even born, and there is not much available for interpretation outside of what she was able to obtain from her mother.

Being able to document and analyze information from this genogram has been beneficial because it helps show what could cause people to be who/how they are. Behaviors are the effect of whatever the cause is. It is because of incidents or diseases that the behaviors occur and get passed down through generations. The ability to recognize and point out patterns could help a client understand areas of opportunity, things they can work to change, or why they respond to things in certain ways. I believe there could be times where a genogram would be beneficial for a client. I think disease, domestic violence, and sexual abuse patterns are definitely ways that a client could benefit from having their familial structure documented for them to see. Having a visual to explain the whys can make some things easier for a person to understand.