Hospital in New York City as a part-time psychiatric resident. Minuchin also worked at the Jewish Board of Guardians where he lived in its institutional housing with 20 disturbed children. His training there was psychoanalytic, which did not seem compatible with his work with the children.

In 1951 Minuchin married Patricia Pittluck, a psychologist, and emigrated to Israel. There he co-directed five residential institutions for disturbed children. Most of them were orphans of the holocaust and Jewish children from Asia and the Middle East. Here he first began to work therapeutically with groups instead of individuals. Between 1954 and 1958, Minuchin trained at the William Alanson White Institute of Psychoanalysis in New York City. He went there because the Institute supported the ideas of Harry Stack Sullivan, who created interpersonal psychiatry and stressed the importance of interpersonal interaction. As he was training there, he began practicing family therapy at the Wiltwyck School for Boys, a school for troubled young people, or juvenile delinquents. Slowly, he began to feel that he needed to see a client’s family. He felt that seeing them alone, as per psychoanalysis, was not an effective treatment technique.

Minuchin and a number of other professionals there began working as a team to develop approaches to family therapy. These youths and their families tended not to be very introspective, so Minuchin and his team focused on communication and behavior, and developed a therapy form in which the therapist is very active, making suggestions and directing activities, for instance.

In 1965, Minuchin and his family (he now had two children) moved to Philadelphia, where he became, at the same time, director of psychiatry at Children’s Hospital of Philadelphia, director of the Philadelphia Child Guidance Clinic, and professor of child psychiatry at the University of Pennsylvania School of Medicine. During this time he began working therapeutically with children with psychosomatic illnesses. (Illnesses in which no physical basis for an illness can be found so the illness is attributed to psychological factors.) Research with these children and families indicated that family therapy could help these patients improve, and indicated maladaptive family patterns were partly to blame for these illnesses.

During the 1960s and 1970s, Minuchin became interested in the larger social world in which families are embedded. Thus he and his group started looking at communities and social service agencies, among other societal agents. In one project he and his colleagues, under an intensive program, trained minorities from the community to be family therapists.

During the 1960s, Minuchin and his colleagues, as well as a number of other groups, struggled to understand family dynamics. He explored what other family therapists and colleagues in the social sciences were doing, and drew on those that seemed to work. He found Gregory Bateson’s systems theory (a system is comprised of interdependent parts that mutually effect each other) to go a long way in explaining family dynamics. Minuchin also drew on the ideas of Nathan Ackerman, a child analyst who began to look at the interpersonal aspects of the family unit, and the ways individual behavior relates to that unit. Minuchin believes these are perspectives that are complementary.

Very basically, structural family therapy uses short-term methods to alter the coalitions and alliances of family members, and by doing so, alter how they experience one another. Faulty family organization is responsible for causing family maladjustment.

In 1975, Minuchin retired from his position as director of the Philadelphia Clinic. He was Director Emeritus of the Clinic from 1975 through 1981. In 1981, Minuchin established Family Studies, Inc., in New York City, an organization to teach family therapists. Minuchin left the University of Pennsylvania, Philadelphia in 1983, when he joined New York University School of Medicine as a Research Professor. His wife is also a Research Professor there. He retired in 1996 and currently lives in Boston.

Minuchin has contributed to numerous professional journals and coauthored numerous books, many of which explore the effects of poverty and social systems on families.

Marie Doorey

Further Reading
Allyn & Bacon Family Therapy Website http://www.abacon.com/famtherapy/


Further Information
New York University School of Medicine Department of Psychiatry. 550 First Avenue, New York, NY, USA. 10016.
Mnemonic strategies

Any technique used for the purpose of either assisting in the memorizing of specific material or improving the function of memory in general.

The basic coding procedure common to most mnemonic strategies is to mentally associate, in some manner, items of new or unfamiliar information with various interconnected parts of a familiar, known whole. Mnemonic devices range from the very simple to the remarkably complex. An example of a very simple mnemonic device is the use of the acronymic word HOMES to remember the names of the Great Lakes (Huron, Ontario, Michigan, Erie, and Superior). An example of a remarkably complex mnemonic device is the ancient Greek and Roman system of topical mnemonics, in which a large imaginary house, or even a town full of large imaginary houses, is intricately subdivided into thousands of quadrates, or memory places, each of which is available to be associated with an item of material to be remembered. The difficulties encountered in the application of mnemonic strategies appear to increase as the amount of information to be mastered increases, and involve issues such as ambiguity, confusion, and complexity.

There are several commonly employed mnemonic devices. For example, the method of loci is a system where objects to be remembered are imagined to be arranged in geographical locations, or locations in a building, the map or layout of which is well-known. The learner uses this map or layout to remember unordered items, such as a shopping list, by placing the grocery items on the map, and recalling them later in a well-known order. In this way, no items will be forgotten or missed.

### Further Reading


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**Mode**

One of the measures of central tendency in statistics.

In statistics, the mode is a descriptive number that indicates the most frequently occurring score or scores in a group of numbers. Along with the mean and the median, the mode constitutes the grouping of descriptive statistics known as measures of central tendency. Although the mode is the easiest of the measures of central tendency to determine, it is the least used because it gives only a crude estimate of typical scores.

*See also* Median; Mean

### Further Reading


### Example

124-125-128-129-129-130-130-130-130-131-133-133-133

The mode is 130.

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**Modeling**

The process of learning by watching others; a therapeutic technique used to effect behavioral change.

The use of modeling in psychotherapy was influenced by the research of social learning theorist Albert Bandura, who studied observational learning in children, particularly in relation to aggression. Bandura pioneered the concept of vicarious conditioning, by which one learns not only from the observed behavior of others but...