to work toward systems theory and get beyond the conventional concepts I had long held as "truth." I have tried to be scientifically accurate in the use of such terms as *hypothesis*, *concept*, and *theory*. These terms have come into such misuse that it is common for people to say "I have a theory" when it would be accurate to say "I have an idea" or "a wild guess."

The first important nodal point in the development of the theory was a research study conducted during the years 1954–1959 at the National Institute of Mental Health. In this study entire families lived on the ward with the schizophrenic patients. The baseline for this study had been developed in clinical work with schizophrenia at the Menninger Clinic in the period from 1946 to 1954. The live-in project was the source of a wealth of new facts about schizophrenia. In 1955 it led to the development of a method of family therapy. By 1956 it was leading to new theoretical ideas about schizophrenia. When it had become possible to see the relationship patterns in families with schizophrenia, it was then possible also to see less intense versions of the same patterns in milder forms of emotional illness, as well as in normal people. It was the comparison of the intense patterns in schizophrenia with the less intense patterns in others that eventually became the basis for the theory. By 1956 there were informal outpatient studies of less severe forms of emotional illness. Another parallel project had to do with the use of research knowledge with my own nuclear and extended families. In the 1940s I had tried to understand my own families with conventional psychoanalytic theory. This led to the inevitable emotional impasses and was discontinued until 1955, when new facts emerged from the family research. There was no way for writing to keep pace with the clinical investigation on several fronts. There were informal presentations to small professional groups during 1955 and 1956, but the first formal presentations to national meetings were in the spring of 1957. The papers were simple clinical description based mostly on conventional psychiatric theory. They were never published, because their content was incorporated in subsequent papers. One of these early papers is included in this volume for the sake of history.

The lag between the idea, the clinical application, the writing of a paper, and its publication is illustrated by "A Family Concept of Schizophrenia," which was started in 1957, finished in 1958, and finally published in 1960 as a chapter in *The Etiology of Schizophrenia*. The area of family therapy was being neglected. A companion to the "Family Concept" paper, entitled