FAMILY THERAPY MEETS CRISIS INTERVENTION

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FAMILY THERAPY HISTORY

• Began after World War II, when doctors noticed that families of schizophrenic patients communicated in disturbed ways.

• Observations of these patients led to considering a family as an system with its own internal rules, patterns of functioning and tendency to resist change.

• Therapist found that the schizophrenia improves when the “patient: was in the family system.
FAMILY THERAPY

• A form of psychotherapy that involves all members of a nuclear or extended family.
• Can be based on behavioral, psychodynamic and family systems theory.
• Views the family as a whole, and emphasized factors such as relationships and communication patterns rather than traits or symptoms in individual members.
FAMILY THERAPY

• Based on systems theory, which understands the family to be a living organism that is more than the sum of its individuals.

• Uses “systems” to evaluate family members in terms of their role within the system as a whole.

• Based on several major concepts: Identified patient, Homeostasis, the extended family field, differentiation, triangular relationships.
IDENTIFIED PATIENT

• The family member within the system that has brought the family to treatment.
• The concept of the identified patient is used by the family therapist to keep the family from scapegoating the identified patient or using him or her as a way of avoiding problems in the rest of the system.
HOMEOSTASIS

• Balance
• The family system seeks to maintain its customary organization and function over time.
• The family tends to resist change.
• Therapist use this as to explain why certain family symptoms surface at particular times.
• Use this to predict what is likely to happen when the family begins to change.
THE EXTENDED FAMILY FIELD

• Refers to the nuclear family and grandparents and other members of the extended family
• This concept is used to explain intergenerational transmission of attitudes, problems, behaviors and other issues
DIFFERENTIATION

• The ability of each family member to maintain his or her own sense of self, while remaining emotionally connected to the family.
• Healthy families allow members to differentiate.
TRIANGULAR RELATIONSHIPS

• Emotional relationships in families are usually triangular.
• When two members of the family have problems they “triangle in” a third member as a way of stabilizing their own relationship.
• The triangles in a family system usually interlock in a way that maintains family homeostasis.
• Common family triangles include a child and it’s parents; two children and one parent; parent, child and grandparent; three siblings or a husband, wife and in-law.
FAMILY THERAPY INTERVENTIONS

- Listening and empathy
- Joining
- Rules and boundaries
- Re-establishing hierarchies
- Reframing
- Strength based
- checking,, same page
- Exceptions
- Externalization
- Safety planning
- Education
- Goal setting
INTERVENTIONS

Listening/empathy

• Honor the individuals unique experience without validating it as right or normal
• “it sounds like you feel betrayed”

Joining

• Accommodate to the family’s style
• how they talk, words they use, how they walk
INTERVENTIONS

Rules and Boundaries

- Identify if the parents rules and boundaries are too rigid, too weak or just right.
- Asking families to change seats or turn towards each other.
- Block interruptions or encourage pauses for less dominate person to speak.

Re-establishing hierarchies

- Support parents when they make a request for their child.
- Greet the parents first.
- Let parents manage child behavior in session (rather than therapist take over).
INTERVENTIONS

Reframing
• Using the same “fact” the individual states to support another idea in a second perspective.

Strength based
• Assess family’s strengths and reinforce what is working and going well.
**INTERVENTIONS**

**Checking, same page**

- Summaries what the individual said and ask the rest of the family and individual if that is what they understood

**Exceptions**

- Ask family if there are times when the problem is less likely to occur
- Ask if there are particular people or settings in which the problem is less severe
INTERVENTIONS

Externalization
• Separating the problem from the person.

Safety Planning
• Develop a plan with the family if there is a crisis situation.
• Educate all members of the family about the plan.
CRISIS INTERVENTION

• Methods used to offer immediate, short-term help to individuals who experience an event that produces emotional, mental, physical and behavioral distress or problems.
PURPOSE OF CRISIS INTERVENTION

• Reduce the intensity of an individuals emotional, mental, physical and behavioral reactions to a crisis
• Help individuals return to their level of functioning before the crisis
• Talk though what happened and feelings about what happened while developing new ways to cope and problem solve
CRISIS INTERVENTION

• Individuals are more open to receiving help during a crisis
• Appropriate for children, adolescents and adults
• Takes place in emergency rooms, schools, correctional facilities and other social service agencies
PEDIATRIC EMERGENCY ROOM

• During fiscal year 2015, at Cincinnati Children’s Hospital, over 6500 families came through the ED having a psychiatric crisis.
• Families come in with children and adolescents with high risk symptoms, aggression, suicidal and homicidal ideation.
• The use of basic family therapy with other interventions during this crisis can assist in making a difference when working with the families.
CASE EXAMPLE