

# An Approach to Family Therapy

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## INTRODUCTION

Lifeline Brisbane has a team of professional family therapists who provide family therapy services from 3.30p.m. to 10 p.m. on four nights each week. The team consists of a full-time coordinator (40 hours per week) plus five part-time therapists, who between them work 48 hours per week.

## BASIC PHILOSOPHY

The Unit uses a systems approach which assumes that the behaviours of individual members of a system are the inevitable response to the behaviours of the other members of the system. Hence, for example, a child's stealing behaviour, is seen as inevitable when the child is viewed not in isolation, but in the context of the system within which the child exists.

Further it is assumed that if members of the system are able to enlarge their fields of vision then they will become aware of their ability to choose to continue behaving as now, or to do something different.

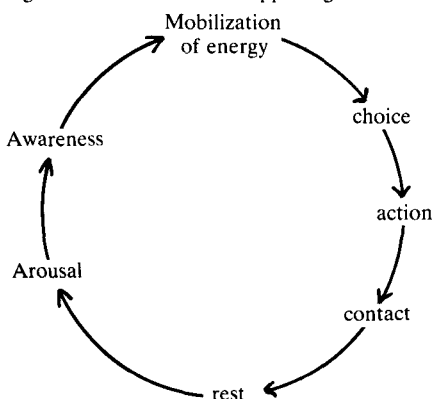
## THE THERAPIST'S ROLE

The role of the therapist is to help the family to enlarge its field of vision. This is done by enabling family members to catch a glimpse of each other's pictures of their family, and in addition for the family to be shown the therapist's own picture of the family. By seeing many different pictures each family member's own picture is enlarged and consequently choices for change are likely to emerge.

## METHOD USED

The method borrows ideals from Gestalt therapy and from the Milan Systemic Approach.

Gestalt therapy (see Zinker 1978) produces change by raising awareness. The emphasis is on general awareness in the here and now. Hence the family is encouraged to share pictures of what is happening within the family NOW. As shown in the Gestalt Awareness Cycle below, pushing for options or change merely increases arousal rather than producing change. When blocks occur in the cycle, the Gestalt Therapist refocuses her efforts on raising awareness of what is happening now.



## GESTALT AWARENESS CYCLE

The Gestalt therapist raises awareness by making statements which feed back to the client what the therapist notices occurring in verbal and non-verbal behaviour and in interactional processes. Hence in family therapy, Gestalt type statements are used such as the following:—

"I notice that whenever Fred talks Mother fidgets".

"I notice that a great deal of rescuing goes on in this family".

Awareness is raised by making such observational "Gestalt Therapy" type statements, and also by using circular questioning as used in the Milan approach to Family Therapy.

There are four types of circular questions. These are descriptive, other oriented, triadic and reflexive. For a good description of these see Mackinnon and James, (1987). The idea of circular questions is to elicit information from the family in such a way that each member of the family inevitably has a wide view of what is occurring. Circular questions also provoke interaction between family members and raise energy in the therapy room. Hence information tumbles out and the process of change starts. However it is expected that most change will occur between sessions rather than within sessions.

## WAY OF WORKING

At Lifeline Brisbane, our way of working is for the family and therapist to work together in one room, while the co-therapist observes and listens from an adjacent room, by means of a one-way mirror and sound system. Simultaneously the session is video-recorded for later review by the therapists and for possible playback to the family. Naturally the family's consent is required before this process is to occur. Interestingly, we have not yet had a family refuse permission.

The co-therapist in the observation room, observes the processes that are occurring among family members and feeds this information to the therapist by intercom phone, or directly, between sessions. The therapist herself inevitably gets caught up in the family system and is often unable, like the family, to understand what is really happening. The co-therapist is less engaged with the family and can usually identify what is happening with some clarity.

## STRUCTURE OF A FAMILY THERAPY SESSION

Two and a half hours is allocated for each family and this time is split up as follows:—

30 minutes: Preparation and review by the therapists alone.

70 minutes: **Main intervention session.** The therapist works with the family while the co-therapist observes.

20 minutes: The therapists meet alone to prepare feedback for the family.

15 minutes: **Feedback session.** The co-therapist gives feedback to the family.

15 minutes: The therapists meet alone to review the session and debrief themselves.

## THE MAIN INTERVENTION SESSION

During this session differences in family perceptions, behaviours, relationships, attitudes and feelings are explored by using circular questions and by the therapist continually feeding back to the family what she observes happening as the session proceeds.

## THE FEEDBACK SESSION

During the **feedback session** the co-therapist tells the family what she sees happening in the family. This is always accompanied by a simple sketch of the family using stick figures to demonstrate behaviours and relationships. The sketch may be a pictorial metaphor (e.g. one member of the family on a tightrope). Feedback is designed to make the family feel good, and to discover options for doing something different or for continuing to do as now. The therapists do not recommend or suggest change, but simply state what is occurring now. The family is thus confronted with the dilemma, to continue as now, or to do something different.

During Feedback by the co-therapist the family is asked to listen quietly. The co-therapist then returns to the observation room and the active therapist invites each member of the family to make one brief comment on the feedback given. The session is then terminated. Invariably substantial change occurs between sessions.

## GOALS OF FAMILY THERAPY

Regardless of the nature of the issues within each family, families who come to Lifeline are generally doing so because the tension levels in their families are such that they feel desperate and powerless to change their situation without outside help.

If one member of a family is hurting, then other members of the family are likely to be hurting too, but may not be able to express their hurt. Family therapy provides these others with an opportunity to express and deal with their hurt. This is particularly so for children, who are often not able to talk with their parents at home about their emotional problems or their real needs.

Family therapy allows families to become more aware of their options, and thus to find new ways of relating and behaving so that a more comfortable environment is created. Children growing up in such an environment are likely to function more effectively, and hopefully models of adaptive family life will be passed from generation to generation.