Marriage and Family Counseling

INTRODUCTION TO COUNSELING
**Definitions**

- **Marriage**
  - is generally seen as a socially or religiously sanctioned union between 2 adults for economic and/or procreational reasons

- **Family**
  - consists of those persons who are biologically and/or psychologically related through historical, emotional, or economic bonds who think of themselves as part of a household
History of Marriage and Family Counseling

- MFT is popular today in part of the rapid change in American family life since World War II
- Before WW II two types of families dominated American culture life; nuclear family (husband, wife, and children) and Multigenerational family (3 generations)
- Post WW II increase in divorce rate saw two more family types; single parent family and re-married family
- Changes in societal norms have also fostered the development of several other family forms; dual career family, childless family, aging family, gay/lesbian family, and multicultural family
History (cont.)

- Profession of MFC began in the late 1940’s and early 1950’s; major growth in the 70’s and 80’s
- 3 trends that had an impact on the family after WWII; sharp rise in divorce rate, changing role of women, and expansion of life span
Pioneers and Contemporary Leaders of MFT

- Nathan Ackerman (1958)-focused on psychoanalysis for families. Made family therapy respected in the profession of psychiatry by applying psychoanalytic practices.
- Jay Haley- most dominate figure of early family therapist. He took some ideas from Milton Erickson and blended them with his own thoughts. He had a major influence in developing strategic family therapy and structural family therapy.
- Early pioneers sometimes worked in groups; Gregory Bateson group and the Murray Bowen and Lyman Wynne group. Researched how families functioned with a family who was diagnosed with schizophrenia. Bowen developed the genogram (3 generational visual representation of one’s family tree depicted in geometric figures, lines, and words.)
• John Bell- started treating families as a group and began the practice of couple/group counseling
• Monica McGoldrick- emphasized the importance of multicultural factors and cultural background in treating families
• John Gottman and Neil Jacobson- helped practitioners understand better the dynamics within marriages and families especially factors related to domestic violence and higher functioning marriage relationships
Professional Associations

- **American Association for Marriage and Family Therapy (AAMFT)**
  - started in 1942, largest and oldest
  - gives guidelines for training professionals and working with couples and families
  - standards are drawn up and administered by the Commission on Accreditation for Marriage and Family Therapy Education (CAMFTE)

- **International Association of Marriage and Family Counselors (IAMFC)**
  - Division within the ACA
  - started in 1986
  - guidelines for training professionals; working with families and couples
Division 43 (Family Psychology), Division within the American Psychological Association (APA).
- created in 1984
- comprised of psychologists that work with families

American Family Therapy Association (AFTA)
- created in 1977
- identified as an academy of advanced professionals interested in the exchange of ideas
Education

- Each association has their own guidelines.
- A minimum of a master’s degree is required for becoming a marriage and family counselor/therapist, although debate persists over the exact content and sequencing of courses.
Why MFT is popular?

- Realization that people are directly affected by how their families function
- Financial considerations
- The encompassing nature of marriage and family counseling work makes it appealing.
- Growing need
- Approximately 50% of all problems brought to counselors are marriage and family issues; unemployment, poor school performance, spouse abuse, depression, rebellion, and self-concept issues
Theories

- Adlerian Theory (Alfred Adler)
  -almost all Adlerian therapy uses some variation of a four stage model, which consists of a) relationship building, b) investigation, c) interpretation, and d) reorientation
- Person-Centered Therapy (Carl Rogers)
  -goals are person-centered, not focused on the problem
  -learning how to cope with situations
  -self-exploration and experiences
- Reality Therapy (William Glasser)
  -counselors use WDEP (Wants, Direction, Evaluation, Plan)
Theories (cont.)

- Behavioral Therapy (Burrhus Frederick Skinner)
  - emphasis is on helping client eliminate maladaptive behavior
  - helps client achieve personal and professional objectives
- Structural Family Counseling (Salvador Minuchin)
  - action is emphasized over insight in order to alter and recognize a family into a more functional and productive unit
  - family rules are modified
  - Emphasis placed on parents being in charge
Theories (cont.)

- **Strategic Therapy** (John Weakland, Paul Watzlawich, Jay Haley, Cloe Madanes, and the Milan Group)
  - approach is to resolve or remove a problematic behavior brought to counseling
  - new functional behaviors are generated that will help individuals, couples, and families achieve a specific goal
- **Solution-Focused Family Therapy** (Steve Deshazer and Bill O’Hanlon)
  - goal is to help clients tap inner resources and to notice exceptions to the times when they were distressed
  - the clients own goals drive the therapy.
Theories (cont.)

- Emotionally Focused Therapy (developed in early 1980’s)
  - form of couples therapy which integrates experiential and systemic approaches in the process of therapeutic change
Important Counseling Variables

- Patience: Respecting clients’ pace
- Caring, yet firm and having boundaries
- Cultural and religious sensitivity
Important Client Variables

- Humility
- Commitment and hard work
- Psychologically aware
Marriage/Couples Counseling

- Three entities are considered in a marriage relationship: Two individuals and one couple
- Reasons couples seek counseling: Finances, children, fidelity, communication, and compatibility
- It is important for the counselor to see both members of the couple from the beginning
- Five of the main approaches a counselor may use when both partners enter counseling are: Psychoanalytic, Cognitive-Behavioral, Bowen systems, Structural-Strategic, and Rational Emotive Behavior Therapy
Family Counseling

- Generally, there is an identified patient—an individual who is seen as the cause of the trouble within the family. Counselors do not view one member of a family as the problems, but work with the whole family system.
- Family counseling has expanded since the mid 1970’s.
- Counselors stress the following concepts when working with families:
  - Nonsummativity: It is necessary to examine the patterns within a family rather than the actions of the specific member.
  - Equifinality: the same origin may lead to different outcomes, and the same outcome may result from the different origins. Treatment focuses on interactional family patterns rather than particular condition/events.
-Communication: It is important to attend to the two functions of interpersonal messages—content (factual information) and relationship (how the message is to be understood).

-Family rules: A family’s functioning is based on explicit and implicit rules. Family rules provide expectations about roles and actions that govern family life. To help families change dysfunctional ways of working, family counselors have to help them define/expand the rules under which they operate.

-Morphogenesis (the ability of the family to modify it’s functioning to meet the changing demands of internal and external factors): Instead of just talking, family members may need to try new ways of behaving.
-Homeostasis: Families have a tendency to remain in a steady, stable state of equilibrium unless forced to change. When a family member unbalances the family through his/her actions, other members try to rectify the situation through negative feedback.
The Process of Marriage and Family Counseling

- The process of family counseling is based on several premises:
  - Persons conducting the counseling are psychologically healthy and understand their own families of origin well. When this is the case, counselors are able to focus clearly on their client families and not contaminate sessions with issues from their own family life.
  - Counselors will not overemphasize or underemphasize possible aspects or interventions in the therapeutic process. This process means not being overly concerned about making family member happy but at the same time engaging members in a personable way.
The Process of Marriage and Family Counseling (cont.)

-The counselor to win the battle for structures (establish the parameters under which counseling is conducted) while letting the family win the battle for initiative (motivation to make needed changes)

-Family counselors need to be able to see the couple or family difficulties in the context in which they are occurring
Techniques

- The genogram
  - a technique used early in family therapy, provides a graphic picture of the family.
- Reframing
  - restating what has been said, giving different perspectives
- Tracking
  - recording events and stories as they emerge.
- Communication building techniques
  - listening techniques, fighting fair, taking turns expressing feelings etc.
- Family sculpting
  - visual aid envisioned by a particular person in the family
The Family Floor Plan
- similar to a genogram but more detail with family origin. Can include more generations

Family Photos
- family albums, builds rapport and discussion

The Empty Chair
- Gestalt therapy, helps express feelings

Family Choreography
- builds on sculpting ideas but adds to where the person would like each family member to be.
- Family council meetings
  - specific times for the family to meet and share with one another

- Strategic alliances
  - individual counseling

- Putting the client in control of the symptom
  - specific directives are given to when, where, and with whom it takes place
  - places control in the hands of the individual or system
Before a couple/family is seen for counseling, several matters would be addressed:
- the expectations the caller has for an initial session or for treatment.
- The counselor should get a description of the problem, the caller’s name, address, and phone number.
- While gathering this information, the counselor should listen for what is conveyed as well as what is not said.
- After this phone call, an appointment should be scheduled.
The first few sessions are the most critical.
The first thing a counselor should do is to establish rapport with each family member and the family as a whole. This type of bonding where trust, a working relationship, and a shared agenda evolve is known as therapeutic alliance.

Therapeutic alliance can be created through:
- Maintenance: where the counselor confirms or supports a family member’s position
- Tracking: where a counselor, through a series of clarifying questions, tracks or follows a sequence of events
- Mimesis: where a counselor adopts a family’s style or temp of communication, such as being jovial with a light-hearted family or serious with a family that is somber
In establishing a therapeutic alliance, it is important for the counselor to engage the family and its members enough to gain a perspective on how individuals view the presenting problem, person, or situation. This perspective is called frame. The counselor may challenge the frame of the family members to gain a clearer perspective of what is happening in the family or to give the family another option of how they can perceive their situation (reframe).

In the initial session(s), the counselor is an observer and looks for the “family dance”—the way the family typically interacts on either a verbal or nonverbal level. It is important when observing the family dance to see whether some member of the family is being blamed for the family’s problems (scapegoat).
Initial Session(s) (cont.)

- The first session(s) is usually when the counselor evaluates how the family is functioning and what may need to be done to help the family run more smoothly. Tentative goals are set and a return appointment is made.
Middle Phase of Family Counseling

- Between initial session(s) and termination.
- This is where the family will make needed changes in themselves, if they change at all.
- First-order change: families that aren’t sure if they want to change will make superficial alterations to what they do.
- Second-order change: where structured rules are altered.
- A way to help families stay engaged and to make progress is to give homework and psychoeducational assignments.
Termination

- Final phase of treatment.
- The family, the counselor, or both can initiate termination.
- Termination should not be sudden; it should be seen as closure.
- The counselor and the family can determine long-term goals and also talk about possible setbacks.
- The counselor should do a follow-up.
References


