

Syllabus

Course Overview

This course is delivered in the GuidedPath format.

In this course, you will be moving through the foundational clinical skills and initial rapport (although always attentive to these elements) to a focus on treatment planning and applying theory and model-specific interventions. In the first two units, you will be invited to view the process of therapy and your role as a therapist through the lenses of the self-of-the-therapist, cultural diversity, and social justice. The units that follow address crisis intervention and management and treatment planning, and the application of therapeutic interventions from the structural, strategic, and intergenerational family therapy models.

This course is a prerequisite course to MFTR-5821, which includes your first residency experience. Successful completion of this course is required for you to attend residency. You may register for the Residency Face-To-Face Event and make your travel arrangements for the residency in advance, but you will do so at your own risk. Registration for the MFTR-5821 course will not be processed until a passing grade in MFT5820 has been posted.

Accreditation Standards Chart

MFT5820 Course Competencies	Version 12 COAMFTE Standards
<p>1. Examine techniques for developing an effective therapeutic relationship with individuals, couples, and families, using a systemic family therapy perspective.</p> <p>Assessed by:</p> <ul style="list-style-type: none"> • u04a1: Clinical Aspects of Crisis Management. • u07a1: Treatment Plan and Case Conceptualization. • u10a1: Model Intervention Application. 	<ul style="list-style-type: none"> • FCA 1: Foundations of Relational/Systemic Practice, Theories, and Models. • FCA 4: Research and Evaluation. • FCA 6: Biopsychosocial Health and Development Across the Lifespan. <p>SLO–1. Knowledge and Research: Effectively integrate and apply research and theories in the practice of marriage and family therapy, including individual, systemic, and relational theories; theories of individual and family development across the lifespan.</p>
<p>2. Investigate assessment tools to develop treatment plans for individuals, couples, and families.</p> <p>Assessed by:</p> <ul style="list-style-type: none"> • u04a1: Clinical Aspects of Crisis Management. • u07a1: Treatment Plan and Case Conceptualization. • u10a1: Model Intervention Application. 	<ul style="list-style-type: none"> • FCA 1: Foundations of Relational/Systemic Practice, Theories, and Models. • FCA 4: Research and Evaluation. <p>SLO–1. Knowledge and Research: Effectively integrate and apply research and theories in the practice of marriage and family therapy, including individual, systemic, and relational theories; theories of individual and family development across the lifespan.</p>

MFT5820 Course Competencies	Version 12 COAMFTE Standards
<p>3. Identify assessment techniques for clients in crisis.</p> <p>Assessed by:</p> <ul style="list-style-type: none"> • u04a1: Clinical Aspects of Crisis Management. • u10a1: Model Intervention Application. 	<ul style="list-style-type: none"> • FCA 5: Professional Identity, Law, Ethics, and Social Responsibility. <p>SLO–4. Ethics: Understand and apply the American Association for Marriage and Family Therapy and code of ethics.</p>
<p>4. Examine legal and ethical principles that apply to clinical interactions.</p> <p>Assessed by:</p> <ul style="list-style-type: none"> • u04a1: Clinical Aspects of Crisis Management. • u07a1: Treatment Plan and Case Conceptualization. • u09a1: Academic Learner Review Reflection Paper. 	<ul style="list-style-type: none"> • FCA 5: Professional Identity, Law, Ethics, and Social Responsibility. <p>SLO–4. Ethics: Understand and apply the American Association for Marriage and Family Therapy and code of ethics.</p>
<p>5. Identify the effects and influence of diversity and sociocultural factors on one's own life and other participants in clinical interactions.</p> <p>Assessed by:</p> <ul style="list-style-type: none"> • u04a1: Clinical Aspects of Crisis Management. • u07a1: Treatment Plan and Case Conceptualization. • u10a1: Model Intervention Application. 	<ul style="list-style-type: none"> • FCA 2: Clinical Treatment With Individuals, Couples, and Families. • FCA 3: Diverse, Multicultural, and/or Underserved Communities. • FCA 8: Contemporary Issues. <p>SLO–2. Diversity and Multicultural Competence: Demonstrate knowledge of culturally and ethnically sensitive matters in a variety of settings, integrating concepts of advocacy and social justice.</p>
<p>6. Communicate in a manner that is scholarly, professional, and consistent with expectations for members of the mental health professions.</p> <p>Assessed by:</p> <ul style="list-style-type: none"> • u04a1: Clinical Aspects of Crisis Management. • u07a1: Treatment Plan and Case Conceptualization. • u09a1: Academic Learner Review Reflection Paper. • u10a1: Model Intervention Application. 	

To successfully complete this course, you will be expected to:

- 1 Examine techniques for developing an effective therapeutic relationship with individuals, couples, and families, using a systemic family therapy perspective.
- 2 Investigate assessment tools to develop treatment plans for individuals, couples, and families.
- 3 Identify assessment techniques for clients in crisis.
- 4 Examine legal and ethical principles that apply to clinical interactions.
- 5 Identify the effects and influence of diversity and sociocultural factors on one's own life and other participants in clinical interactions.
- 6 Communicate effectively through the appropriate application of grammar, punctuation, spelling, writing mechanics, and professional tone, while adhering to current APA formatting and style.

Course Prerequisites

MFT-R5821 must be taken the quarter immediately following MFT5820. Prerequisite(s): MFT5008, MFT5222, MFT5270.
Cannot be fulfilled by transfer.

Syllabus >> Course Materials

Required

The materials listed below are required to complete the learning activities in this course.

Integrated Materials

Many of your required books are available via the VitalSource Bookshelf link in the courseroom, located in your Course Tools. Registered learners in a Resource Kit program can access these materials using the courseroom link on the Friday before the course start date. Some materials are available only in hard-copy format or by using an access code. For these materials, you will receive an email with further instructions for access. Visit the [Course Materials](#) page on Campus for more information.

Book

Flemons, D., & Gralnik, L. M. (2013). *Relational suicide assessment: Risks, resources, and possibilities for safety*. New York, NY: W. W. Norton & Company. **Note:** This book is also used in MFT-R5821. ISBN: 9780393706529.

Gehart, D. R. (2015). *Theory and treatment planning in family therapy: A competency-based approach*. Boston, MA: Cengage Learning. ISBN: 9781285456430.

Library

The following required readings are provided in the Capella University Library or linked directly in this course. To find specific readings by journal or book title, use [Journal and Book Locator](#). Refer to the [Journal and Book Locator library guide](#) to learn how to use this tool.

- Aponte, H. J., & Kissil, K. (2014). ["If I can grapple with this I can truly be of use in the therapy room:" Using the therapist's own emotional struggles to facilitate effective therapy](#). *Journal of Marital and Family Therapy*, 40(2), 152–164.
- Becerra, M. D., & Michael-Makri, S. (2012). [Applying structural family therapy with a Mexican-American family with children with disabilities: A case study of a single-parent mother](#). *Journal of Applied Rehabilitation Counseling*, 43(2), 17–24.
- Bonnycastle, C. R. (2011). [Social justice along a continuum: A relational illustrative model](#). *Social Services Review*, 85(2), 267–295.
- Butler, M., Davis, S., & Seedall, R. (2008). [Common pitfalls of beginning therapists utilizing enactments](#). *Journal of Marital and Family Therapy*, 34(3), 329–352.

- Gaillard, L. M., Shattell, M. M., & Thomas, S. P. (2009). [Mental health patients' experiences of being misunderstood](#). *Journal of the American Psychiatric Nurses Association*, 15(3), 191–199.
- Gardner, B., Burr, B., & Wiedower, S. (2006). [Reconceptualizing strategic family therapy: Insights from a dynamic systems perspective](#). *Contemporary Family Therapy*, 28(3), 339–352.
- Hardy, K. V. (2001). [Healing the world in fifty-minute intervals: A response to "family therapy saves the planet."](#) *Journal of Marital and Family Therapy*, 27(1), 19–22.
- Hardy, K. V., & Laszloffy, T. A. (1995). [The cultural genogram: Key to training culturally competent family therapists](#). *Journal of Marital and Family Therapy*, 21(3), 227–237.
- Jankowski, P. J., & Hooper, L. M. (2012). [Differentiation of self: A validation of the Bowen theory construct](#). *Couple and Family Psychology: Research and Practice*, 1(3), 226–243.
- Johnson, S. (2001). [Family therapy saves the planet: Messianic tendencies in the family systems literature](#). *Journal of Marital and Family Therapy*, 27(1), 3–11.
- Kaslow, N. J., & Gilman Aronson, S. (2004). [Recommendations for family members following a suicide](#). *Professional Psychology: Research and Practice*, 35(3), 240–247.
- Knudson-Martin, C. (1994). [The female voice: Applications to Bowen's family systems theory](#). *Journal of Marital and Family Therapy*, 20(1), 35–43.
- Lopez-Zeron, G., & Blow, C. (2015). [The role of relationships and families in healing from trauma](#). *Journal of Family Therapy*, 39(4), 580–597.
- Lutz, L., & Irizarry, S. S. (2009). [Reflections of two trainees: Person-of-the-therapist training for marriage and family therapists](#). *Journal of Marital and Family Therapy*, 35(4), 370–380.
- Metcalf, L. (2018). [Marriage and family therapy: A practice-oriented approach \(2nd ed.\)](#). New York, NY: Springer.
- Nichols, M. P., & Fellenberg, S. (2000). [The effective use of enactments in family therapy: A discovery-oriented process](#). *Journal of Marital and Family Therapy*, 26(2), 143–152.
- Psychotherapy.net. (2010). [Bowenian family therapy \[Video\]](#).
- Psychotherapy.net. (2010). [Strategic couples therapy \[Video\]](#).
- Psychotherapy.net. (2010). [Structural family therapy \[Video\]](#).
- Psychotherapy.net. (2011). [Salvador Minuchin on family therapy \[Video\]](#).
- Richeport-Haley, M. (1998). [Ethnicity in family therapy: A comparison of brief strategic therapy and culture-focused therapy](#). *American Journal of Family Therapy*, 26(1), 77–90.
- Robbins, M. S., Feaster, D. J., Horigian, V. E., Rohrbaugh, M., Shoham, V., Bachrach, K., . . . Szapocznik, J. (2011). [Brief strategic family therapy versus treatment as usual: Results of a multisite randomized trial for substance using adolescents](#). *Journal of Consulting and Clinical Psychology*, 79(6), 713–727.
- Simon, G. M. (1995). [A revisionist rendering of structural family therapy](#). *Journal of Marital and Family Therapy*, 21(1), 17–26.
- Snowden, L. R. (2003). [Bias in mental health assessment and intervention: Theory and evidence](#). *American Journal of Public Health*, 93(2), 239–243.
- Spencer, B., & Brown, J. (2007). [Fusion or internalized homophobia? A pilot study of Bowen's differentiation of self hypothesis with lesbian couples](#). *Family Process*, 46(2), 257–268.
- Triangle Productions (Producer). (1997). [Jay Haley on strategic therapy \[Video\]](#). Alexander Street.
- Walsh, J., & Harrigan, M. (2003). [The termination stage in Bowen's family systems theory](#). *Clinical Social Work*, 31(4), 383–394.

External Resource

- Bowen Center for the Study of the Family (2018). [An idyllic and wonderful relationship \[Video\]](#). Retrieved from <https://youtu.be/6vdU9T3hPDA>
- Nova Southeastern University. (2019). [NSU suicide and violence prevention training \[Video\]](#). | [Transcript](#) Retrieved from https://www.nova.edu/promo-k.html?id=samhsa?video=1_ro4lqmcj&title=NSU%20Suicide%20and%20Violence%20Prevention%20Training&subtitle=Suicide%20Prevention
- UC Berkeley School of Public Health. (2011). [Working across differences in collaborations and partnerships \[Video\]](#). Retrieved from <https://www.youtube.com/watch?v=bOBTZ0bRPuQ>

Suggested

The following materials are recommended to provide you with a better understanding of the topics in this course. These materials are not required to complete the course, but they are aligned to course activities and assessments and are highly recommended for your use.

Library

- American Psychiatric Association. (2013). [*Diagnostic and statistical manual of mental disorders \(5th ed.\)*](#). Arlington, VA: Author.

Optional

The following optional materials are offered to provide you with a better understanding of the topics in this course. These materials are not required to complete the course.

Library

The following optional readings may be available in the Capella University Library. To find specific readings by journal or book title, use [Journal and Book Locator](#). Refer to the [Journal and Book Locator library guide](#) to learn how to use this tool. If the full text is not available, you may be able to request a copy through the [Interlibrary Loan](#) service.

- Arias, S. A., Dumas, O., Sullivan, A. F., Boudreaux, E. D., Miller, I., & Camargo, C. A. (2016). Substance use as a mediator of the association between demographics, suicide attempt history, and future suicide attempts in emergency room department patients. *Crisis: The Journal of Crisis Intervention and Suicide Prevention*, 37(5), 385–391.
- Figley, C., & Figley, K. (2013). Stemming the tide of trauma systemically: The role of family therapy. *Australian and New Zealand Journal of Family Therapy*, 30(3), 173–183.

Unit 1 >> The Self-of-the-Therapist and Client Engagement

Introduction

Only when you've struggled with yourself are you free to bring your person, not just your therapist's uniform, into the therapy room.

–Whitaker & Bumberry, 1988 , p. 21

Psychotherapy has changed quite a bit over the years, including a shift in the notion that the therapist is an objective observer in the process of therapy. The human being who happens to also be a therapist is now considered an integral and highly subjective part of the therapeutic system. As Whitaker and Bumberry (1988) eloquently state: "If psychotherapy is really going to be a human encounter, it requires a therapist who has retained the capacity to be a person" (p. 18). Learning who you are as a person is just as important as any set of foundational skills or particular family therapy model.

Harry Aponte, perhaps the leading scholar and trainer in self-of-the-therapist work (also known as *person-of-the-therapist*), asserted that "therapy is a personal encounter within a professional frame" (1994, p. 3). All aspects of family therapy, including theory and technique, are informed by the therapist's self. It is incumbent upon therapists to use their personal selves effectively

to establish a strong, enduring professional therapeutic relationship (1994, p. 3), beginning with having the courage to embark on a lifelong journey of exploring just who one is. Perhaps this takes the dictum "Know thyself" to a new therapeutic level.

So what does this entail and how does it happen? Because this is a personal process, it will likely look and feel differently for everyone. One way to think of this is as a conscious, persistent effort to know what makes your heart beat a little (or a lot) faster, especially as it pertains to your work as a family therapist. As Aponte and others suggest, it includes exploring and understanding one's values, biases, and beliefs as they pertain to family therapy. In other words, who we are and where we come from—including our families of origin and creation, various cultural dimensions (which we will discuss in Unit 2), and our experiences—inform all that we do as family therapists. As Deacon (1996) states, this ranges from the theories and models we feel most connected with, to the client issues we feel most anxious to face.

Throughout the course, beginning with this unit, you will be invited to participate in activities that encourage self-reflection and raise awareness of the relationship between the personal and professional. As Deacon (1996) suggests, this may lead to an expansion of your "range of creativity, choice, and insight" as a clinician (p. 171).

References

Aponte, H. (1994). How personal can training get? *Journal of Marital and Family Therapy*, 20(1), 3–15.

Deacon, S. (1996). Using experiential activities in the training of the person of the therapist. *Family Therapy*, 23(3), 171–187.

Whitaker, C. A., & Bumberry, W. M. (1988). *Dancing with the family: A symbolic-experiential approach*. Levittown, PA: Brunner/Mazel.

Learning Activities

u01s1 - Studies

Readings

Use your [Marriage and Family Therapy: A Practice-Oriented Approach](#) textbook to read the following:

- Chapter 1, "The Practice of Marriage and Family Therapy," pages 2–23.
 - This chapter provides an introduction to the text and an important review of concepts foundational to the understanding and practice of marriage and family therapy.

Use the Capella University Library to read the following:

- Aponte, H. J., & Kissil, K. (2014). ["If I can grapple with this I can truly be of use in the therapy room." Using the therapist's own emotional struggles to facilitate effective therapy.](#) *Journal of Marital and Family Therapy*, 40(2), 152–164.
- Lutz, L., & Irizarry, S. S. (2009). [Reflections of two trainees: Person-of-the-therapist training for marriage and family therapists.](#) *Journal of Marital and Family Therapy*, 35(4), 370–380.

Use the Internet to review the following, which will help you build the foundational clinical skills to develop effective therapeutic relationships with clients.

- [Asking Questions.](#)
- [Developing a Feeling Vocabulary \[PDF\].](#)
- [Developing a Therapeutic Alliance.](#)
- [Glossary of Foundational Clinical Skills \[PDF\].](#)
- [Glossary of Questions \[PDF\].](#)
- [Quick Reference Responses \[PDF\].](#)

Multimedia

- View [Therapeutic Models](#) and the related videos for each model.
- Check your knowledge of foundational clinical skills in [Clinical Terminology](#).

Optional Reading

You may choose to use your [Marriage and Family Therapy: A Practice-Oriented Approach](#) text to read the following:

- Chapter 2, "Self Care of The Therapist," pages 24–43.

u01s2 - Assignment Preparation

Looking Ahead

As part of this course, you will be completing assignments pertaining to risk assessment, treatment planning, and intervention application. Each of these tasks, beginning with the Unit 4 assignment, is based on a case study of your own creation. To generate the details and dynamics of your case study, complete the Biopsychosocial Assessment Form that is part of the [Case Study Treatment Plan](#) activity.

When you click on the tool, notice three tabs plus the introduction. Each tab will be used for a different assignment. The Biopsychosocial tab will help you create your case study and expose you to this kind of assessment. The case study portion will be due as part of a Unit 2 discussion.

The Risk Assessment tab will be completed as part of your Unit 4 assignment and the Treatment Plan tab will be completed as part of your Unit 7 assignment. Together, they illustrate key aspects of a Treatment Plan and Case Conceptualization. For now, focus on the Biopsychosocial tab and begin formulating the details of your case study.

Read the following descriptions to learn the requirements for each assignment you will complete for this course:

- The Clinical Aspects of Crisis Management assignment in Unit 4 .
- The Treatment Plan and Case Conceptualization assignment in Unit 7 .
- The Academic Learner Review Reflection Paper assignment in Unit 9.
- The Model Intervention Application assignment in Unit 10.

u01s3 - Scheduling a Meeting With Your FAF Faculty Advisor

You are probably aware by now that all program learners are automatically enrolled in MFTFAF6299, a tuition-free course. FAF stands for *Faculty Advising Forum*. This course contains resources about residency, licensure, fieldwork, and more. In addition, you have the opportunity to connect with a core faculty member from the MFT program to discuss your academic progress and get other support as needed. You may also engage with other local or regional learners, as the FAF sections are determined by state or region. Your FAF faculty advisor's contact information can be found in your MFTFAF6299 courseroom. If you are not enrolled in an FAF, please tell your MFT5820 instructor immediately.

Within the next two weeks, you must contact your FAF advisor to schedule a phone meeting for an Academic Learner Review (ALR). In most cases, you will be directed to an online calendar to schedule an ALR meeting with your advisor. Information about how to schedule an ALR meeting with your FAF advisor can also be found in your MFTFAF6299 courseroom. The ALR is an opportunity to reflect on your program thus far and set goals for successful completion. This enhances your development as you establish an ongoing relationship with a marriage and family therapy (MFT) professional.

This meeting can happen anytime before the end of the term, whenever it is most convenient for you both. It should take place before week 9 to give you ample time to complete your reflections for the Unit 9 assignment. The meeting must be confirmed for your Unit 2 assignment.

Below are helpful guidelines to follow when connecting with your faculty advisor:

- Address the faculty advisor using his or her proper title (such as "Doctor Smith") unless he or she gives you permission to use another form of address. All our faculty advisors have earned doctoral degrees in the field of MFT.
- Upon confirmation of your appointment, keep the meeting unless there is an unavoidable emergency.
- Keep the meeting to approximately 20–30 minutes to respect the professional's time, and thank him or her at the end of the meeting. A follow-up written thank-you message is also encouraged.
- Be prepared to address these specific items in your meeting:
 - Review of MFT Education Learner Dispositions.
 - Expectations and planning for Track 1.
 - Professional networking to set a foundation for fieldwork.
 - Setting three or more goals with at least one goal from each of the following categories, based on your timeline and program review.
 - Dispositions.
 - Refer to [Professional Dispositions \[DOCX\]](#) as needed.
 - Professional identity, fieldwork, and licensure.
 - Self-care and life balance.

u01d1 - Reflection on Self-of-the-Therapist

In this unit, you were asked to read two articles (linked in Resources) about the person-of-the-therapist (also known as the *self-of-the-therapist*). In this discussion, describe your understanding of the self-of-the-therapist and how this perspective can be valuable as a practicing marriage and family therapist. As the readings mentioned, signature themes often emerge with regard to the person-of-the-therapist. As you reflect on your life experiences and developing self-awareness, identify at least one signature theme that may emerge for you. Discuss ways in which this signature theme may affect your clinical work and strategies to address it.

Response Guidelines

Respond to the posts of your peers and respond to at least two, commenting on similarities and differences in your posts. Your responses should be substantive and contribute to the conversation by asking questions, respectfully debating positions, and presenting supporting information relevant to the topic. Throughout the course, be sure to adhere to the discussion guidelines provided in the Faculty Expectations message (FEM).

["If I Can Grapple With This I Can Truly Be of Use in the Therapy Room"](#)

[Reflections of Two Trainees](#)

[Therapeutic Models](#) | Transcript

Unit 2 >> Multicultural Diversity and Social Justice in Family Therapy

Introduction

To engage in a process of ongoing self-awareness, you will inevitably examine the ways various social and cultural experiences and factors influence who you are as a person in the world and as a family therapist. Therefore, although the topics addressing the self-of-the-therapist and those addressing multicultural diversity and social justice are presented in separate units, the subjects are unmistakably intertwined.

The focus of this unit is to examine the roles of multicultural diversity and social justice in MFT and to invite further exploration of how your unique characteristics inform your clinical work. Much more than aiming to increase awareness of the various ways in which our clients are unique, this course is intended to increase your awareness of your "cultural selves" (Hardy, 2011) in relationship to the cultural selves of clients and how you choose to address this in therapy. These factors—from the family therapy models and interventions that resonate with us to the ways we apply them—also guide our clinical decisions. This, of course, includes how risk assessments and treatment plans are formulated and carried out.

Multicultural diversity and social justice are distinct yet related ideas that have been difficult to define (Bonnycastle, 2011). One way to think about multicultural diversity is by recognizing a set of dimensions that comprise the values, belief systems, and social structures that provide meaning and shape people's lives, such as race, gender, ethnicity, national origin, socioeconomic status, religion and spirituality, and ability and disability. An awareness of one's membership or community of belonging as it pertains to these dimensions (female, Muslim, transgendered, for example) is one important element. Exploring these dimensions helps one recognize values and biases. Another critical step is gaining an understanding of how membership in various dimensions is connected to power, privilege, subjugation, and oppression. In addition to prompting consideration about who one is and who others are, this step involves considering how who I am impacts others—especially in terms of the therapeutic relationship. One way to view social justice, then, is as a belief in equality regardless of the various cultural dimensions to which a person belongs. This might include acknowledging the existence of inequity and its impact on multiple systems (the individual, family, community, and others), making a conscious choice to continually examine the ways these dynamics affect relationships, and taking an active role in working to undo these oppressive dynamics. You will read more about how these issues pertain to family therapy in the Johnson and Hardy articles in this unit.

References

Bonnycastle, C. R. (2011). Social justice along a continuum: a relational illustrative model. *Social Services Review, 85*(2), 267–295.

Hardy, K. V. (2011). *Working across differences in collaboratives and partnerships*. Speech presented at UC Berkeley School of Public Health, Center for Health Leadership's 2011 Annual Leadership Conference.

Learning Activities

u02s1 - Studies

Readings

Use the Capella library to read the following:

- Bonnycastle, C. R. (2011). [Social justice along a continuum: A relational illustrative model](#). *Social Services Review*, 85(2), 267–295.
 - National and international codes of ethics for therapists stress the importance of social justice. But social justice can be a fairly fluid concept. This article suggests a framework that places social justice on a continuum between oppression and equality. The hope is that the framework will help readers come to a personal understanding of the meaning of *social justice*.
- Johnson, S. (2001). [Family therapy saves the planet: Messianic tendencies in the family systems literature](#). *Journal of Marital and Family Therapy*, 27(1), 3–11.
 - This article examines the views of family therapy's most important thinkers on the value of family therapy in addressing social problems and their implications for the clinical and theoretical development of the field.
- Hardy, K. V. (2001). [Healing the world in fifty-minute intervals: A response to "Family Therapy Saves the Planet."](#) *Journal of Marital and Family Therapy*, 27(1), 19–22.
 - This response to Johnson's 2001 article examines how Johnson's article inspires as well as provokes.
- Hardy, K. V., & Laszloffy, T. A. (1995). [The cultural genogram: Key to training culturally competent family therapists](#). *Journal of Marital and Family Therapy*, 21(3), 227–237.
 - The authors of this article assert that training family therapists to be culturally competent requires raising the cultural awareness and cultural sensitivity of the learners. The article introduces a training program based on the cultural genogram.

Use the Internet to complete the following:

- UC Berkeley School of Public Health. (2011). [Working across differences in collaborations and partnerships \[Video\] | Transcript](#). Retrieved from <https://www.youtube.com/watch?v=bOBTZ0bRPuQ>
 - In this presentation, marriage and family therapist Dr. Kenneth V. Hardy discusses ways to build effective partnerships in communities and health organizations, and across sectors. He focuses on how aspects of cultural diversity, power, privilege, and oppression affect relationship dynamics in the therapy room and other contexts.

Discussion Preparation

For this week's second discussion you will need to complete the Biopsychosocial Assessment tab in the [Case Study Treatment Plan](#) media activity and post a PDF of your work in the discussion. Read the discussion instructions so you understand the requirements.

u02a1 - Confirmation of Meeting With FAF Faculty Advisor

By the end of this week (Unit 2), you should have scheduled an appointment and received an e-mail confirmation for a phone meeting with your FAF faculty advisor. The meeting should occur before week 9 to allow ample time for completion of the Unit 9 assignment. Once you have confirmed the time and date of that appointment, submit the following statement in the Unit 2 assignment area by the end of week 2:

I am scheduled to meet (or have already met) with my FAF advisor _____ (insert name of FAF faculty advisor) for an Academic Learner Review on _____ (insert date) at _____ (insert time).

Note: Prior to this meeting, review the Professional Dispositions document (linked in Resources) that outlines the ongoing evaluative process and professional dispositions.

Course Resources

Professional Dispositions [DOCX]

u02d1 - Social Justice in Marriage and Family Therapy

In this unit, you were asked to read the articles by Johnson and Hardy that exemplify two perspectives on the role of social justice in the field of MFT. For this discussion, provide what you consider the main arguments presented by each side. Include your personal reactions to the articles and which perspective most closely aligns with your beliefs about social justice as it pertains to your role as a family therapist. Doing some self-exploration, also discuss how who you are influences the perspective with which you most align. In other words, examine at least three dimensions of diversity (such as race, gender, religion, or socioeconomic status) and how your membership in these groups plays a role in your reactions and beliefs about the role of social justice and diversity in family therapy and your eventual clinical practice.

Response Guidelines

Read the posts of your peers and respond to at least one. Comment on the main points they highlighted and discuss similarities and differences in your perspective about the role of social justice in family therapy. Remember to adhere to the guidelines in the Faculty Expectations message (FEM) as you prepare your responses.

Course Resources

Graduate Discussion Participation Scoring Guide

u02d2 - Case Study Biopsychosocial Activity

In Unit 1, you were asked to begin thinking about, and working on, the case study that will be the basis for the Risk Assessment, Treatment Plan, and Intervention Application assignments. For this discussion, use the Biopsychosocial tab found in the Case Study Treatment Plan media activity (linked in Resources) to generate the details and background story of the case study family created for this course. Complete each section of the Biopsychosocial activity listed below, create a PDF, and post it in the discussion area. (Note: The Mini Mental Status Exam section does not need to be completed).

- Client Demographic Data (Identify 3–4 family members).
- Family History.
- Current Living Situation and Environment.
- Personal History.
- Medical Information.
- Substance Abuse or Addiction History and Current Situation.
- Emotional or Psychiatric History.
- Current Symptoms.
- Possible Consultations or Referrals.
- Other Information.
- Theoretical Model (Structural, Strategic, or Intergenerational/Bowen).

Response Guidelines

Review the case study information from two peers, providing substantive feedback and suggestions to fill in any gaps in each section of the Biopsychosocial Assessment. Imagine that you will be the therapist for the two case studies you review and include reflections based on what you would want to know more about from a clinical perspective. Remember to follow the guidelines in the Faculty Expectations message (FEM) as you prepare your posts and responses.

Course Resources

Graduate Discussion Participation Scoring Guide

[Case Study Treatment Plan](#) | Transcript

Unit 3 >> Crisis Management: Initial Assessment and Follow-Up

Introduction

According to Flemons and Gralnik (2013), the process of assessing for suicide involves more than just assuming that the individual descriptors on an assessment tool will alert us to our client's risk level. We must also look at the client's resources and how they can use those resources to help them stay safe.

In this unit, we will approach crisis management from the perspective of the initial assessment and the follow-up sessions after hospitalization. Our client's available resources—as well as their ability to access those resources to develop a safety plan—will be considered.

Once you have met with your client and assessed the crisis, you are ready to determine the next step in treatment. If you assessed the client as a high suicide risk, you would discuss treatment options and your agency's protocol with your client. You

would contact the authorities (and family, if appropriate) and your client would likely be hospitalized. If you assessed your client as a low suicide risk and this is one of the first times you have met, you would develop a safety plan and take the next steps toward building a therapeutic relationship with your client.

Jobes (2006) says it is important to collaborate with clients—to see the world through their eyes. A collaborative assessment, crisis response plan, safety plan, and treatment plan can be parts of the initial work with clients.

References

Flemons, D., & Gralnik, L. (2013). *Relational suicide assessment: Risks, resources, and possibilities for safety*. New York, NY: W. W. Norton & Company.

Jobes, D. A. (2006). *Managing suicidal risk: A collaborative approach*. New York: Guilford Press.

Learning Activities

u03s1 - Studies

Readings

Use your *Relational Suicide Assessment: Risks, Resources, and Possibilities for Safety* textbook to read the following:

- Chapter 1, "Foundations," pages 1–14.
 - This chapter provides an introduction to relational suicide assessments (RSAs), including therapeutic conversations and the RSA process.
- Chapter 2, "Therapeutic Principles," pages 15–53.
 - Here you examine therapeutic ideas and practices that inform a suicide assessment. These ideas and practices are presented in terms of a shifting of relationships: between the therapist and client, clients and significant others, clients and their problems, and among various experiential strands of the problems.
- Chapter 3, "Risks and Resources," read pages 54–73.
 - In this chapter, you learn which information is most relevant to gather in a suicide assessment, ways to get that information, how to use it, and how to collaborate with a client to create a safety plan.

Use the Capella library to read the following:

- Kaslow, N. J., & Gilman Aronson, S. (2004). [Recommendations for family members following a suicide](#). *Professional Psychology: Research and Practice*, 35(3), 240–247.
- Lopez-Zeron, G., & Blow, C. (2015). [The role of relationships and families in healing from trauma](#). *Journal of Family Therapy*, 39(4), 580–597.

Use the Internet to complete the following demonstration of a relational suicide assessment:

- Nova Southeastern University. (2019). [NSU suicide and violence prevention training \[Video\] | Transcript](#). Retrieved from https://www.nova.edu/promo-k.html?id=samhsa?video=1_ro4lqmcj&title=NSU%20Suicide%20and%20Violence%20Prevention%20Training&subtitle=Suicide%20Prevention

Optional Readings

The following optional readings may be available in the Capella library:

- Arias, S. A., Dumas, O., Sullivan, A. F., Boudreaux, E. D., Miller, I., & Camargo, C. A. (2016). Substance use as a mediator of the association between demographics, suicide attempt history, and future suicide attempts in emergency room department patients. *Crisis: The Journal of Crisis Intervention and Suicide Prevention*, 37(5), 385–391.
- Figley, C., & Figley, K. (2013). Stemming the tide of trauma systemically: The role of family therapy. *Australian and New Zealand Journal of Family Therapy*, 30(3), 173–183.

u03s2 - Assignment Preparation

Your next assignment is due in Unit 4. In preparation to complete the assignment successfully, complete the following:

- Read the assignment instructions and scoring guide to ensure that you understand all criteria.
- Review the [Case Study Treatment Plan](#) and begin drafting your assignment.

u03d1 - Referring High-Risk Clients

For this discussion, please reflect on your overall reactions to the prospect of telling a high-risk, suicidal client that he or she must be hospitalized. As you continue to examine the process of therapy through the lens of the self-of-the-therapist and multicultural diversity, address ways your own life experiences with family and/or friends and various cultural dimensions such as religion, gender, or ethnicity inform your reactions to this particular issue.

Refer to the RSA Interview and Safety Plan Guide (linked in Resources) as needed to prepare your post.

Response Guidelines

Read the posts of your peers and respond to at least two. These responses should be substantive and contribute to the conversation by asking questions, respectfully debating positions, and presenting supporting information relevant to the topic. Remember to adhere to the guidelines in the Faculty Expectations message.

Course Resources

[Graduate Discussion Participation Scoring Guide](#)

[RSA Interview and Safety Plan Guide \[PDF\]](#)

u03d2 - Legal Implications in Crisis Management

Investigate the rules and regulations of crisis assessment and hospitalization in your community and state. Describe the process you would need to follow to hospitalize a client if you were in an outpatient setting or conducting a home visit and determined that the client was at a high risk of self-harm or harming others or could not care for himself or herself. Also, provide 2–4 community resources for clients in various crises.

To become more familiar with these resources, consider talking to a crisis-line worker or a licensed therapist.

Response Guidelines

You need not respond to the posts of your peers for this discussion.

Course Resources

Graduate Discussion Participation Scoring Guide

Unit 4 >> Treatment Planning

Introduction

Documentation is an integral part of any comprehensive treatment process. Treatment plans are among the most important documents you will be responsible for creating as a therapist. Of course, they are a crucial guide for your clinical work as well as necessary for insurance reimbursement. Some state laws and ethical guidelines also require the use of treatment plans. We are charged with building treatment plans that fit our client's presenting problems and unique context and our philosophy as family therapists. In this course, we will delve into treatment planning through the lens of one of three models: structural, strategic, or intergenerations/Bowenian family therapy.

The treatment plan, which is most often a fluid process as therapy progresses, provides one basis for evaluating therapy. The goals, established at the outset of treatment, guide the treatment process and provide signposts along the therapy journey for evaluating therapy outcomes.

Bitter (2014) says that at some point after our therapeutic relationship with our client begins, we ask ourselves what is happening, why, and what can be done. Then we look for ways to address the goals of therapy. Interventions to help the family move toward accomplishing their goals, an estimate of the length and course of treatment, and how the results will be measured will be included in a treatment plan.

In this course, you will examine and apply treatment planning skills to a case study. You will also explore approaches to evaluating therapy progress and outcomes.

Once you set measurable goals, you will need methods to evaluate progress toward those goals.

Gehart (2010) discusses symptom-based treatment plans versus theory-based treatment plans. In this course, we will focus on theory-based treatment plans, based on the Gehart text and the three models we present here. Gehart talks about the three phases of treatment that go into the treatment plan:

- The initial, or early, phase (first 1–3 sessions), where the objective is to stabilize symptoms that brought the client to therapy (such as crisis, substance abuse, or cutting).
- The working, or middle, phase (2+ sessions), where goals are set that directly address the presenting symptoms (this is what third-party payers want to see).

- The closing, or late, phase (last 2+ weeks), where more global issues are addressed while looking for ways to help the client move toward and maintain better health. The closing phase is where you and your client discuss termination criteria and how you will determine whether goals have been met. Basically, we are trying to work ourselves out of a job, and when our clients no longer need us, it is time to terminate. Each of the models has its own methods to determine the time for termination, but there is some cross-theoretical consistency.

References

Bitter, J. R. (2014). *Theory and practice of family therapy and counseling* (2nd ed.). Belmont, CA: Brooks/Cole.

Gehart, D. (2010). *Mastering competencies in family therapy: A practical approach to theories and case documentation*. Belmont, CA: Brooks/Cole.

Learning Activities

u04s1 - Studies

Readings

Use your *Theory and Treatment Planning in Family Therapy* text to read the following:

- Chapter 3, "Theory-Specific Case Conceptualization and Treatment Planning," pages 35–46.
 - This chapter clarifies the purpose and value of theory-specific case conceptualization, presenting a history of treatment planning and explaining how to write useful therapeutic tasks, client goals, and interventions.
- Chapter 4, "Philosophical Foundations of Family Therapy Theories," pages 47–66.
 - Here you learn about key concepts of systemic therapy, how social constructionism relates to systems theory, and different approaches to choosing a theory to apply in a therapeutic situation.

Use the Capella library to read the following:

- Gaillard, L. M., Shattell, M. M., & Thomas, S. P. (2009). [Mental health patients' experiences of being misunderstood](#). *Journal of the American Psychiatric Nurses Association*, 15(3), 191–199.
- Snowden, L. R. (2003). [Bias in mental health assessment and intervention: Theory and evidence](#). *American Journal of Public Health*, 93(2), 239–243.
 - This article examines the possibility that racial and ethnic bias contributes to the documented reality of disparities in mental health care for various racial and ethnic classes.

u04a1 - Clinical Aspects of Crisis Management

Overview

In Unit 1, you were charged with creating an example case study using the Biopsychosocial Assessment Form that is part of the Case Study Treatment Plan (linked in Resources). Using your case study, imagine now that the family is experiencing a crisis situation. You might be a Red Cross volunteer during a natural disaster working with this family; a community-based clinician responding to school violence or other tragedy involving or affecting one of the family members, such as a student or teacher death; or a practicing clinician in whose therapy session a family member reports being suicidal.

Instructions

Write a 3–4 page paper in which you complete the following:

Part I: Introduce your case scenario and the context for your involvement with the family. Discuss how you would respond as the clinician when working with this family. Be sure to include the following:

- Discuss ways that you develop rapport with clients in crisis.
 - Identify some differences you may notice when working with clients in crisis versus those not experiencing a crisis.
- Describe the steps you would take when working with a client who presents in a crisis state.
- Identify assessments you might use. Discuss the rationale for the assessments.
- Identify interventions you will implement as a result of the assessments.
- Describe safety plans or next-step interventions that might be developed with the client family.
- Discuss ethical as well as your state's legal implications for the client family resulting from the crisis.
- Describe some best practices aligned with state and national standards for the MFT discipline that apply to working with families in crisis.
- Reflect on your overall reactions to working with the client family from your scenario.
 - As you continue to examine the process of therapy through the lens of the self-of-the-therapist and multicultural diversity, include ways in which your own family experiences and various dimensions of your culture, such as religion, gender, or ethnicity, inform your reactions to this particular issue.
- Support your ideas with references from peer-reviewed journals. You may use your course texts as supplementary references.

Part II: Complete the Risk Assessment Activity (Family Member Crisis Assessment) based on the case study and crisis situation in the Case Study Treatment Plan activity.

Additional Requirements

To achieve a successful assignment experience and outcome, you are expected to meet the following requirements:

- **Written communication:** Written communication should be free of errors that detract from the overall message.
- **APA formatting:** Format resources and citations according to current APA style and formatting.
- **Document format:** Submit your paper in Microsoft Word .doc or .docx format.
- **Length of paper:** 3–4 typed, double-spaced pages of content plus title and reference pages.
- **Font and font size:** Times New Roman, 12 point.

Refer to the helpful links in Resources as you prepare your assignment.

Course Resources

[Case Study Treatment Plan](#) | Transcript

[Capella University Library](#)

[APA Style and Format](#)

Treatment planning is an essential skill for all clinicians and can be considered a road map for the therapeutic process. A treatment plan is evident in all stages of the treatment process and is different from the stages of treatment. It is important not to confuse treatment planning with the stages of treatment.

Systemic family therapists cocreate the treatment plan with the clients. As road maps, treatment plans include measurable goals to gauge progress. For this post, discuss the parts of a treatment plan and some ways by which you identify progress.

As shared in your *Theory and Treatment Planning in Family Therapy* text, consider the phases of the therapeutic process (initial, working, closing) and discuss how you will monitor progress toward goals. In the working phase, it is important to maintain momentum. Ask "Is progress being made?" If not, what can be done to help make a shift? Might goals need to be revised or updated? You may use strategies such as scaling questions or ask your clients to rate their own change through the use of items such as the Outcome Rating Scale (ORS). In your post, please address the following:

- Identify the three parts of a treatment plan and briefly discuss the purpose of each part.
- Identify a strategy to use for monitoring progress in therapy.
- Discuss what you might do if no progress is being made.
- Discuss ways diversity issues can be addressed in the assessment and treatment-planning process.

Response Guidelines

Read the posts of your peers and respond to at least two, following the guidelines in the Faculty Expectations message.

Course Resources

Graduate Discussion Participation Scoring Guide

Unit 5 >> Multigenerational Family Therapy: Goal Setting and Treatment Planning

Introduction

Units 5 and 6 focus on the practical application of multigenerational family therapy rather than on teaching the model. It is assumed that learners enter this course with a basic working knowledge of the model from the Family Therapy Theories and Methods course, MFT5270. Unit 5 will also address the working phase of treatment, which includes goal setting and treatment planning, from the intergenerational family therapy perspective. Although a multigenerational family therapist is always attentive to the ongoing joining process with clients, once initial rapport is established and the family has been assessed, it is time to move on to discussing goals with your client family. These goals form the foundation of the treatment plan and guide the overall course of therapy.

We begin with a brief review of some main aspects of the model:

- **Encompasses:** Bowen's family systems theory.
- **Key Names:** Murray Bowen, Betty Carter, Monica McGoldrick.
- **Origin:** In the 1950s and 1960s, family systems theory, also referred to as *multigenerational*, *transgenerational*, or *intergenerational therapy*, was developed by Murray Bowen as a departure from individually focused models from the field of psychiatry. It focuses on the family as an emotional system.

- **Key Concepts:** Differentiation, triangles, family and societal emotional process, multigenerational transmission process, sibling position, emotional cutoff.
- **Therapy Goals:** To increase differentiation and decrease the family anxiety that is believed to influence how problems are generated and supported in family systems.
- **Therapist's Role and Function:** Intergenerational therapists are often thought of as assuming the role of coach or teacher in treatment with families. Therapists are also seen as models for differentiation.
- **Techniques:** Genograms, detriangulation, nonanxious presence, process questions, coaching, supporting differentiation.

References

Bitter, J. R. (2014). *Theory and practice of family therapy and counseling* (2nd ed.). Belmont, CA: Brooks/Cole.

Gehart, D. (2010). *Mastering competencies in family therapy: A practical approach to theories and case documentation*. Belmont, CA: Brooks/Cole.

Learning Activities

u05s1 - Studies

Readings

As you complete the following readings, pay particular attention to sections addressing assessment and treatment planning from a multigenerational family therapy perspective.

Use your [Marriage and Family Therapy](#) text to read the following:

- Chapter 3, "Bowen Family Systems Theory," pages 42–69.
 - This chapter provides a thorough overview of key concepts and interventions related to Bowen's model.

Use your *Theory and Treatment Planning in Family Therapy* text to read the following:

- Chapter 10, "Intergenerational and Psychoanalytic Family Therapy," pages 203–232.
 - This chapter gives you a view of multigenerational family therapy as developed by Bowen. This therapy draws heavily from object relations theory.

Use the Capella library to review the following:

- Hardy, K. V., & Laszloffy, T. A. (1995). [The cultural genogram: Key to training culturally competent family therapists](#). *Journal of Marital and Family Therapy*, 21(3), 227–237.

Use the Capella library and the Internet to complete the following videos:

- Bowen Center for the Study of the Family (2018). [An idyllic and wonderful relationship \[Video\]](#). Retrieved from <https://youtu.be/6vdU9T3hPDA>
- Psychotherapy.net. (2011). [Salvador Minuchin on family therapy \[Video\]](#).
- Triangle Productions (Producer). (1997). [Jay Haley on strategic therapy \[Video\]](#). Alexander Street.

Multimedia

- View the information about structural, strategic, and multigenerational family therapy in [Therapeutic Models](#).

Discussion and Assignment Preparation

In preparation for this week's discussion and your Unit 10 assignment, complete the following:

- Read the discussions and assignment overview.
- Psychotherapy.net. (2010). [Bowenian family therapy \[Video\]](#).
 - This video demonstration by a master clinician includes an interview about the theory and case, which will help you better understand how the model is applied and will help you complete the Unit 10 assignment.
 - Reading the discussion and assignment instructions beforehand will help you identify the parts of the video most relevant to these activities.

u05d1 - Multigenerational Family Therapy Treatment Goals

You were introduced to a family in this unit's video on Bowenian family therapy (linked in Resources). Using this family and session, as well as your text readings on goal development and treatment planning, identify the presenting problem and devise three specific goals for this family based on the information from the demonstration. There should be one goal each addressing the early stage of treatment, the middle stage of treatment, and the latter treatment phases. Be sure to clearly and thoroughly discuss how you arrived at these three goals and how they align with the multigenerational family therapy model.

Response Guidelines

Read the posts of your peers and respond to at least two, commenting on their identified goals. Provide constructive feedback regarding the alignment of the goals to the multigenerational model.

Course Resources

Graduate Discussion Participation Scoring Guide

[Bowenian Family Therapy \[Video\]](#)

u05d2 - Self-of-the-Therapist Activity

For this discussion, reflect on your reactions to the video demonstration of multigenerational (Bowenian) family therapy (linked in Resources). In your post, address the following:

- Identify which family member you felt most able to connect with and explain why.
- Identify which family member you felt most reactive to and explain why.
- Explain your reactions to the way the therapist interacted with the family.
- Note what in particular you liked about the way the therapist engaged with the family. How does this style match the way you would like to engage with clients?
- Please choose a dimension of your culture other than the one you used for the first Unit 6 discussion and discuss how your membership and experiences in this particular group influenced your reactions to the therapeutic interactions addressed

in the above questions.

- Choose at least two questions to address using this single dimension of culture. For example, you may examine how your gender influenced to whom you felt most connected in the session and your reactions to the therapist's style of engagement.
 - This is an opportunity to demonstrate your willingness to examine how your culture informs your reactions. With that in mind, please refrain from answers such as "I chose the dimension of gender and do not feel it influenced my reactions at all." This is effectively a nonanswer and does not demonstrate critical thinking or depth of self-exploration.
- Include any insights gained from the unit articles that address various aspects of culture when using the multigenerational model.

Response Guidelines

Read the posts of your peers and respond to at least one, discussing similarities and differences in your reactions to the case demonstration and cultural dimensions that were examined. Provide thoughts or feedback on additional ways your peer's cultural dimension may affect therapeutic interactions.

Course Resources

Graduate Discussion Participation Scoring Guide

[Bowenian Family Therapy \[Video\]](#)

Unit 6 >> Multigenerational Family Therapy: Applying Interventions

Introduction

Unit 5 focused on goal setting and treatment planning from the framework of multigenerational family therapy. In this unit, we turn our attention to techniques and interventions from the multigenerational family therapy model. The first step is to identify the appropriate interventions based on the challenges and goals of your clients. The next step is understanding when and how to apply the interventions effectively, fully integrating the model into your work as a therapist.

Learning Activities

u06s1 - Studies

Readings

Use the Capella library to read the following.

- Jankowski, P. J., & Hooper, L. M. (2012). [Differentiation of self: A validation of the Bowen theory construct](#). *Couple and Family Psychology: Research and Practice*, 1(3), 226–243.
 - In this article, the authors offer a closer look at differentiation—perhaps the foundational concept of this model.

- Knudson-Martin, C. (1994). [The female voice: Applications to Bowen's family systems theory](#). *Journal of Marital and Family Therapy*, 20(1), 35–43.
 - Research from studies of female development is examined to look at hidden gender biases within the theories guiding family therapy. In addition, an expanded model of Bowen's family systems theory is compared to a traditional application of Bowen's theory in this article.
- Spencer, B., & Brown, J. (2007). [Fusion or internalized homophobia? A pilot study of Bowen's differentiation of self hypothesis with lesbian couples](#). *Family Process*, 46(2), 257–268.
 - This article reports on a study that surveyed a group of lesbian couples. The survey examined issues of differentiation of self, internalized homophobia, and relationship satisfaction. The study found that the differentiation of the lesbian couples was not significantly different from that of random pairs. It also found that there was a positive relationship between differentiation of self and relationship satisfaction. Furthermore, the relationship of internalized homophobia to relationship satisfaction was more highly correlated than that between differentiation of self and relationship satisfaction.
- Walsh, J., & Harrigan, M. (2003). [The termination stage in Bowen's family systems theory](#). *Clinical Social Work*, 31(4), 383–394.
 - Careful attention to the termination stage of the clinical intervention process is especially critical in the current practice environment that demands shorter-term interventions and directly measurable outcomes. Although Bowen's family systems theory does not provide clear directives about the ending stage of intervention, the authors of this article propose a variety of ending strategies compatible with family systems theory.

Discussion Preparation

This week's discussion pertains to multigenerational—or *Bowenian*—family therapy. After reading the discussion, you may wish to review the following video, introduced in Unit 5, to prepare:

- Psychotherapy.net. (2010). [Bowenian family therapy \[Video\]](#).

Suggested Resource

American Psychiatric Association. (2013). [Diagnostic and statistical manual of mental disorders \(5th ed.\)](#). Arlington, VA: Author.

u06s2 - Assignment Preparation

Your next assignment is due in Unit 7. Read the assignment description and scoring guide to ensure that you understand all criteria and begin working on your assignment if you have not done so already.

Course Resources

[Case Study Treatment Plan](#) | Transcript

u06d1 - Multigenerational Family Therapy Intervention

Based on what you learned about the family in the multigenerational—or *Bowenian*—family therapy demonstration video (linked in Resources), imagine you are the therapist who will see them for their next visit. Identify an intervention from the intergenerational family therapy model that you would apply. In this discussion, briefly describe the following:

- The intervention.
- The general purpose and goal of the intervention.
- Who and what in the video example family are the target of the intervention.
- Some questions that would be used to apply this intervention.
- The desired outcome of the intervention.
- The elements that make this intervention systemic in nature.

Use the literature from the unit and any additional literature to support your discussion post. Remember to follow the guidelines in the FEM as you prepare your post.

Response Guidelines

Read the posts of your peers and respond to at least one. Discuss the similarities and differences in your interventions for the case demonstration. Provide additional thoughts or feedback about any ways the interventions your peer chose may impact therapeutic outcomes.

Course Resources

Graduate Discussion Participation Scoring Guide

[Bowenian Family Therapy \[Video\]](#)

Unit 7 >> Structural Family Therapy: Goal Setting and Treatment Planning

Introduction

Units 7 and 8 focus on the practical application of structural family therapy rather than on teaching the model. It is assumed that learners enter this course with a basic working knowledge of the model from MFT5270. Unit 7 specifically addresses goal setting and treatment planning from the structural family therapy perspective. Although a structural family therapist is always attentive to the ongoing joining process with clients, once initial rapport is established and the family has been assessed, it is time to discuss goals with the client family. These goals form the basis of the treatment plan and guide the overall course of therapy.

Following is a brief overview of the structural family therapy model:

- **Key Names:** Salvador Minuchin, Harry Aponte, Charles Fishman, Braulio Montalvo.
- **Origin:** In the 1960s, this model began with Minuchin's work at the Wiltwyck School for Boys and gained popularity in the 1970s while he was at the Philadelphia Child Guidance Clinic.
- **Key Concepts:** Family structure, hierarchy, family subsystems, boundaries.

- **Therapy Goals:** The model aims to foster family restructuring so boundaries and roles are clear and well-defined. Reorganization will encourage a family system that is supportive and facilitates growth for all members.
- **Therapist's Role and Function:** Structural therapists are typically very active and directive.
- **Techniques:** Joining and accommodating, unbalancing, family mapping, enactments, reframing, boundary making.

References

Bitter, J. R. (2014). *Theory and practice of family therapy and counseling* (2nd ed.). Belmont, CA: Brooks/Cole.

Gehart, D. (2010). *Mastering competencies in family therapy: A practical approach to theories and case documentation*. Belmont, CA: Brooks/Cole.

Learning Activities

u07s1 - Studies

Readings

Use your [Marriage and Family Therapy](#) text to read the following:

- Chapter 10, "Structural Family Therapy," pages 202–227.

Use your *Theory and Treatment Planning in Family Therapy* text to read the following:

- Chapter 7, "Structural Family Therapy," pages 125–146.
 - This chapter provides a view into structural family therapy, which is primarily associated with the work of Salvador Minuchin. You will look at Minuchin's work and ecosystemic structural family therapy, evidence-based treatments that draw heavily from traditional structural family therapy.

Multimedia

View the [Structural Therapy Practice Session](#).

Discussion and Assignment Preparation

In preparation for a discussion in this unit as well as the Unit 10 assignment, complete the following:

- Review the discussion and the assignment instructions before watching the following video to best understand what to focus on as you view the demonstration.
 - Psychotherapy.net. (2010). [Structural family therapy \[Video\]](#).
 - This video demonstration by a master clinician includes an interview about the theory and case to help you better understand how the model is applied.

u07a1 - Treatment Plan and Case Conceptualization

Case Study Treatment Plan

For this assignment, you will use the client family you created and assume you have worked with the family for two sessions. The purpose of the assignment is to further apply the models you have been studying in this course to inform and support the treatment plan process. Use one of the theoretical models listed below:

- Structural family therapy.
- Strategic family therapy (including MRI, Milan, and the Washington School).
- Multigenerational family therapy.

Use the Case Study Treatment Plan interactive media piece linked in Resources to record the data for this client family. You need not enter all the information in one sitting; you may save entered information and return to the media piece later to complete your entries.

In the media piece, enter information about the client family in the Treatment Plan tab.

Treatment Plan Tab

On this tab, enter information for a treatment plan you have developed to guide your work with this client family based on the biopsychosocial assessment and other assessments you have completed.

You will complete the following:

- Identify your chosen clinical model and describe each phase of the treatment plan process (early, middle, termination) from this perspective.
- Describe vertical and horizontal stressors.
- Cultural considerations related to the diagnosis and treatment plan.
- A discussion of the presenting problem for the client family.
- Assessments used to develop a clinical conceptualization of the family system.
- Long-term goals you have developed with the family.
 - Explain how these will be assessed and how they align with the client's presenting problem.
- Short-term goals you have developed with the family.
 - Explain how these will be assessed and how they align with the client's presenting problem.
- Consultations you may have had with other professionals regarding this case or that you may need to have in the future. These professionals may include school personnel, case managers, and other clinicians including psychiatrists or psychologists.
- Legal and ethical considerations and their impact on this family and the case.

Saving Your Treatment Plan as a PDF

1. When you have finished entering client information in the media piece, click **Preview Report**.
 - A Report Preview window displays. This window contains the information you have entered.
2. In the Report Preview window, click **Generate PDF**.
 - A PDF document of the report is generated.
3. Save the PDF to your computer.
4. Submit the PDF in the assignment area for this assignment.

Course Resources

[Case Study Treatment Plan](#) | Transcript

[Diagnostic and Statistical Manual of Mental Disorders](#)

u07d1 - Structural Family Therapy Treatment Goals

You were introduced to a family in the structural family therapy demonstration video in this unit's study (linked in Resources). Use the information about the family from the session you watched as your guide, and keep in mind what you read in each text about goal development and treatment planning. Then, complete the following:

- Identify the presenting problem.
- Devise three specific goals for this family based on the information from the demonstration. Include one goal addressing each of the early, middle, and late phases of treatment.
- Clearly and thoroughly discuss how you arrived at these goals and how these goals align with the structural family therapy model.

Response Guidelines

Read the posts of your peers and respond to at least two. Comment on some of the similarities and differences in the problems and goals that were highlighted.

Course Resources

Graduate Discussion Participation Scoring Guide

[Structural Family Therapy \[Video\]](#)

Unit 8 >> Structural Family Therapy: Applying Interventions

Introduction

In Unit 8, we turn our attention to techniques and interventions from the structural family therapy model. The first step is to identify the appropriate interventions based on your client's challenges and goals. The next step is understanding when and how to apply the interventions effectively, integrating the model fully into your therapeutic work.

Learning Activities

u08s1 - Studies

Readings

Use your *Theory of Treatment Planning* text to review the following, paying special attention to sections describing interventions and their application:

- Chapter 7, "Structural Family Therapy," pages 125–146.

Use the Capella library to read the following, again paying close attention to sections describing interventions and their application:

- Becerra, M. D., & Michael-Makri, S. (2012). [Applying structural family therapy with a Mexican-American family with children with disabilities: A case study of a single-parent mother](#). *Journal of Applied Rehabilitation Counseling*, 43(2), 17–24.
 - This article uses the example of a Mexican-American family headed by a single mother to demonstrate how structural family therapy can be applied, examining specific cultural patterns that affect healthy family functioning in families with Mexican roots.
- Butler, M., Davis, S., & Seedall, R. (2008). [Common pitfalls of beginning therapists utilizing enactments](#). *Journal of Marital and Family Therapy*, 34(3), 329–352.
 - In this article the authors explore some of the challenges novice therapists face when attempting to use enactments with clients.
- Nichols, M. P., & Fellenberg, S. (2000). [The effective use of enactments in family therapy: A discovery-oriented process](#). *Journal of Marital and Family Therapy*, 26(2), 143–152.
 - This investigation examines *enactments*: dialogues used in therapy sessions informed by structural family therapy. Enactments enable participants to observe and modify family interactions. The article includes detailed descriptions of therapist techniques and client responses.
- Simon, G. M. (1995). [A revisionist rendering of structural family therapy](#). *Journal of Marital and Family Therapy*, 21(1), 17–26.
 - The author asserts that structural family therapy in practice is motivated by two fundamental assumptions about human and family functioning: the assumption of competence and that of uniqueness. The article explores the logical consequences of this view.

Discussion Preparation

This week's discussions pertain to structural family therapy. After reading each discussion, you may wish to review the following video, introduced in Unit 7, to prepare:

- Psychotherapy.net. (2010). [Structural family therapy \[Video\]](#).

u08s2 - Assignment Preparation

Unit 9 Assignment: Academic Learner Review Reflection Paper

Next week, you will be writing your reflection on your meeting with your FAF faculty advisor. Take some time this week to review the assignment description and scoring guide. You may also want to review the [Professional Dispositions \[DOCX\]](#) and the [Academic Learner Review Reflection Template \[DOCX\]](#) as you prepare.

Unit 10 Assignment: Model Intervention Application

Take some time to review your Unit 10 assignment description and scoring guide so you understand all criteria. You will be using the family from your Unit 2 Case Study Biopsychosocial Activity discussion as well as your Unit 4 and 7 assignments, so you may also want to review the details you added to the [Case Study Treatment Plan](#).

u08d1 - Structural Family Therapy Intervention

Based on what you learned about the client family from the demonstration video (linked in Resources), imagine you are the therapist who will see them for their next visit. Identify an intervention from the structural family therapy model that you would apply in the session. In this discussion, briefly describe the intervention, including the following:

- Its general purpose and goal.
- Who and what is the target of the intervention.
- Some questions that would be used to apply this intervention.
- The desired outcome of the intervention.
- The elements that make this intervention systemic in nature.

Use the literature from the unit and any additional literature to support your discussion post.

Response Guidelines

Read the posts of your peers and respond to at least two, adhering to the guidelines in the FEM. Comment on the goals that your peers generated. Provide constructive feedback regarding the alignment of the goals to the structural model.

Course Resources

Graduate Discussion Participation Scoring Guide

u08d2 - Self-of-the-Therapist Activity

For this discussion, reflect on your reactions to the video demonstration of structural family therapy (linked in Resources). In your post, address the following:

1. Identify which family member you felt most able to connect with and why.
2. Identify which family member you felt most reactive to (disconnected from, irritated by, et cetera) and why.
3. Describe your reactions to the way the therapist interacted with the family.
4. Note what in particular you liked about the way the therapist engaged with the family. How does this style match how you would like to engage with clients?
5. Choose one dimension of your culture (gender, race, religion, sexual orientation, or other) and discuss how your membership and experiences in this particular group influenced your reactions to the therapeutic interactions addressed in the above questions.
6. Choose at least two questions to address using this single dimension of culture. For example, as a woman or man, you may examine how your gender influenced to whom you felt most connected in the session and your reactions to the therapist's style of engagement.

- This is an opportunity to demonstrate your willingness to examine how your culture informs your reactions. (With that in mind, please refrain from answers such as "I chose the dimension of gender and do not feel it influenced my reactions at all." This is effectively a nonanswer and does not demonstrate critical thinking or depth of self-exploration.)

7. Include any insights gained from the unit articles that address various aspects of culture when using the structural model.

Response Guidelines

Read the posts of your peers and respond to at least one, following the guidelines in the FEM. Discuss the similarities and differences in your reactions to the case demonstration and the dimensions of culture that were examined. Provide additional thoughts or feedback about any additional ways the dimension of culture your peer chose may also impact therapeutic interactions.

Course Resources

Graduate Discussion Participation Scoring Guide

[Structural Family Therapy \[Video\]](#)

Unit 9 >> Strategic Family Therapy: Goal Setting and Treatment Planning

Introduction

Units 9 and 10 focus on the practical application of strategic family therapy rather than on teaching the model. It is assumed that learners enter this course with a basic working knowledge of the model from MFT5270. A brief review of the strategic family therapy model follows:

- **Encompasses:** MRI (Mental Research Institute), the Washington School of Strategic Family Therapy, and Milan.
- **Key Names:** Gregory Bateson, Jay Haley, Don Jackson, Paul Watzlawick, Cloé Madanes, Maria Selvini Palazzoli, Luigi Boscolo, Gianfranco Cecchin, and Guiliana Prata.
- **Origin:** 1970s; stemmed from the use of a communications model for understanding schizophrenia.
- **Key Concepts:** Foundation in communication theory; double bind; feedback loops; circular causality; homeostasis; problems are real and are to be solved; emphasis on power, control and hierarchies in the therapy sessions; negative injunctions; ordeals.
- **Therapy Goals:**
 - **The MRI Model:** Two-step process: 1. Define the problem. 2. Resolve the problem.
 - **The Washington School:** Focus on the behavioral sequences, with little focus on insight.
 - **The Milan Model:** Also behaviorally oriented. This cognitive and strategic approach aims to break up coalitions and create more open communication and more flexible or fluid relationships.
 - **Therapist's Role and Function:** In the beginning, strategic therapists were directive and the therapist was looked to as the expert. The therapist, not the client (or clients), is responsible for initiating change.
- **Techniques:** Joining, reframing, directives, paradoxical interventions (for example, prescribing the symptom, restraining family change, amplifying family difficulties), relational questions, circular questions.

References

Bitter, J. R. (2014). *Theory and practice of family therapy and counseling* (2nd ed.). Belmont, CA: Brooks/Cole.

Gehart, D. (2010). *Mastering competencies in family therapy: A practical approach to theories and case documentation*. Belmont, CA: Brooks/Cole.

Learning Activities

u09s1 - Studies

Readings

Pay particular attention in these readings to sections addressing assessment and treatment planning from a strategic family therapy perspective.

Use your [Marriage and Family Therapy](#) text to read the following:

- Chapter 11, "Strategic Family Therapy," pages 228–259.
 - This chapter gives a thorough overview of strategic family therapy, so called because the therapist strategically designs interventions for change. This therapy has its foundations in communications theory.

Use your *Theory and Treatment Planning in Family Therapy* text to read the following:

- Chapter 6, "Strategic Therapy," pages 103–123.
 - Like the MRI approach, Haley and Madanes's strategic therapy is grounded in general systems and cybernetic theories and is a brief therapy approach.

Discussion and Assignment Preparation

In preparation for upcoming discussions and your Unit 10 assignment, complete the following:

- Review the discussions and the assignment instructions prior to watching the video to best understand what to focus on as you view the demonstration:
 - Psychotherapy.net. (2010). [Strategic couples therapy \[Video\]](#).

u09s2 - Assignment Preparation

Continue your working on your Unit 10 assignment. Review the instructions and scoring guide as needed to ensure that you meet all criteria.

u09a1 - Academic Learner Review Reflection Paper

By now you have met with your FAF faculty advisor for your ALR. For this assignment, you will write a 1–2 page reflection paper about that experience. Please note that because this is a personal reflection, it should be written in first person. You may use the Academic Learner Review Reflection Template to organize your paper, which should contain the following:

1. A review of your academic history (such as your learner transcript).
2. Your expectations and preparations for MFT-R5821, which includes the residency experience.
3. A timeline for taking MFT-R5821, MFT-R5823, and entering fieldwork.
4. A summary of your conversation with your advisor about your plans for finding a fieldwork site and furthering your professional networking experience.
5. A discussion of the professional dispositions and how they align with the profession. Identify strengths and opportunities for improvement vis-à-vis the dispositions.
6. The three (or more) goals you discussed with your advisor based on your timeline and program review. You should have created at least one goal from each of the following categories. For each goal, identify which student learning outcome (SLO) best aligns with the goal. Categories are as follows:
 - o Academic Success and Program Completion.
 - o Professional Dispositions.
 - o Self-Care and Life Balance.

You must also upload your Academic Learner Review Form sent to your Capella designated e-mail by your FAF instructor.

Refer to the helpful links in Resources as you prepare your assignment.

MFT Program Student Learning Outcomes

<p>SLO-1. Knowledge and Research: Effectively integrate and apply research and theories in the practice of marriage and family therapy, including individual, systemic, and relational theories; theories of individual and family development across the lifespan.</p>	<p>SLO-2. Diversity and Multicultural Competence: Demonstrate knowledge of culturally and ethnically sensitive matters in a variety of settings, integrating concepts of advocacy and social justice.</p>	<p>SLO-3. Clinical Practice: Clinical application and practice of systemic theory relevant to family dynamics in the field of marriage and family therapy.</p>	<p>SLO-4. Ethics: Understand and apply the American Association for Marriage and Family Therapy code of ethics.</p>	<p>SLO-5. Clinical Practice: Use a systemic perspective for client engagement, assessment, and intervention.</p>	<p>SLO-6. Professional Identity and Social Responsibility: Identify as a marriage and family therapist, aligning systemic clinical practice with state and national standards for the marriage and family therapy discipline, and engaging in community and scholarly activities.</p>
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Course Resources

Academic Learner Review Reflection Template [DOC]

u09d1 - Self-of-the-Therapist Activity

In this discussion, reflect on your reactions to the video demonstration of strategic family therapy (linked in Resources). In your post, address the following questions:

1. Identify which client you felt most able to connect with and why.
2. Identify which client you felt most reactive to (disconnected from, irritated by, et cetera) and why.
3. Describe your reactions to the way the therapist interacted with the clients.
4. Note what in particular you liked about the way the therapist engaged with the clients. How does this style match how you would like to engage with clients?
5. Please choose one dimension of your culture (gender, race, religion, sexual orientation, or other) and discuss how your membership and experiences in this particular group influenced your reactions to the therapeutic interactions addressed in the above questions.
6. Choose at least two questions to address using this cultural dimension.
 - o For example, as a woman or man, you may examine how your gender influenced to whom you felt most connected in the session and your reactions to the therapist's style of engagement. This is an opportunity to demonstrate your willingness to examine how your culture impacts your reactions. With that in mind, please refrain from answers such as "I chose the dimension of gender and do not feel it influenced my reactions at all." This is effectively a nonanswer and does not demonstrate critical thinking or depth of self-exploration.
7. Include any insights gained from the unit articles that address various aspects of culture when using the strategic family therapy model.

Response Guidelines

Read the posts of your peers and respond to at least one, following the guidelines in the FEM. Discuss the similarities and differences in your reactions to the case demonstration and the dimensions of culture that were examined. Provide thoughts or feedback about any additional ways your peer's chosen cultural dimension may also impact therapeutic interactions.

Course Resources

Graduate Discussion Participation Scoring Guide

[Strategic Couples Therapy \[Video\]](#)

Unit 10 >> Strategic Family Therapy: Applying Interventions

Introduction

In this unit, we continue our exploration of strategic family therapy. You will have the opportunity to practice demonstrating the model and to do some critical thinking about how to integrate this model into your work as a therapist.

Learning Activities

u10s1 - Studies

Readings

Use the Capella library to read the following.

- Gardner, B., Burr, B., & Wiedower, S. (2006). [Reconceptualizing strategic family therapy: Insights from a dynamic systems perspective](#). *Contemporary Family Therapy*, 28(3), 339–352.
 - Beginning with discussion of the development of the strategic model, including criticisms of the theory, the authors offer another look at the model through the lens of dynamic systems theory.
- Richeport-Haley, M. (1998). [Ethnicity in family therapy: A comparison of brief strategic therapy and culture-focused therapy](#). *American Journal of Family Therapy*, 26(1), 77–90.
 - Culture-oriented therapists try to do therapy within the worldview of clients. This article describes an alternative to culture-focused therapy: an abbreviated strategic family therapy using techniques that can be applied in any culture and that focus on family structure. The article also looks at problems of violence and alternate belief systems.
- Robbins, M. S., Feaster, D. J., Horigian, V. E., Rohrbaugh, M., Shoham, V., Bachrach, K., . . . Szapocznik, J. (2011). [Brief strategic family therapy versus treatment as usual: Results of a multisite randomized trial for substance using adolescents](#). *Journal of Consulting and Clinical Psychology*, 79(6), 713–727.
 - The authors observe that few African American youth receive more than eight therapy sessions and call for further research to prolong engagement and optimize treatment approaches.

u10a1 - Model Intervention Application

Overview

For this assignment, you will recommend two interventions for your chosen family based on the goals you set earlier in the course.

Instructions

Review the two goals you created for your example family. Based on each goal, and using the same theory that was the basis of your treatment plan, identify two key interventions that you would apply to help this family accomplish the goals. Generate a 5–8 page paper that addresses the following:

Intervention Description (2–3 pages)

- Provide a thorough description of each intervention.

- Describe your rationale for choosing each intervention, including why they will help address this family's presenting problems. Evaluate the ways each intervention considers, or fails to consider, aspects of the family context and culture. Include research that supports your rationale: existing data and articles that support use of this model and interventions with the presenting problems.

Intervention Application (1–2 pages)

- Choose one of the interventions and create a sample transcript demonstrating the application of this intervention.
- Include dialogue for the therapist and clients that reflect therapist questions consistent with language and aim of the model and intervention.

Note: Your transcript will begin in a session in progress, so imagine this is about 15 minutes into your session and you have already done your check-in with the clients. Make sure to note nonverbal interactions that are likely to take place during the intervention application (you notice a family member look away, smile, and so on).

Discussion of Impact and Change (2–3 pages)

In this section of your paper, address the following:

- Describe the impact of each intervention on the family system.
- Address questions such as:
 - How does the application of the intervention create change?
 - What did clients say or do that indicated the intervention was effective?
 - How will the family be different as a result of the intervention? Provide specific examples, such as "Because boundaries were strengthened between mom and son, son will be more likely to branch out and engage in age-appropriate peer relationships."
- Which family and relationship dynamics will shift, and how?

Additional Requirements

To achieve a successful assignment experience and outcome, you are expected to meet the following requirements:

- **Written communication:** Written communication should be free of errors that detract from the overall message.
- **APA formatting:** Format resources and citations according to current APA style and formatting.
- **Document format:** Submit your assignment as a Word .doc or .docx.
- **Length of paper:** 5–8 typed, double-spaced pages.
- **Font and font size:** Times New Roman, 12-point.

Refer to the helpful links in Resources as you prepare your paper.

Course Resources

[Case Study Treatment Plan](#) | Transcript

[APA Style and Format](#)

Based on the following vignette, using strategic family therapy, complete the following in your post:

- Discuss how you will engage this family from a strategic lens.
- Discuss what the goals for therapy might be.
- List two or three techniques you may apply that are typically associated with strategic family therapy models. Include a discussion of the rationale for choosing these techniques.
- Describe key aspects of cultural diversity and how you might attend to them.

Vignette

Nirisha, a high school senior, is expected to work full-time in her family's restaurant chain after graduation, where she has worked during the summer and on school breaks since middle school. Nirisha's mother told her she could earn a salary and move into the management of the successful restaurant chain. It is obvious to Nirisha that her parents are very proud of this booming business started by Nirisha's grandfather, who immigrated to the United States from India. It is also obvious to Nirisha that her parents intend for her to take over the business someday. However, Nirisha wants to be a graphic artist is not interested in the family business.

Nirisha has always been artistic and creative, and she has won many awards in school for her work. Her art and design teacher, Ms. Guerra, told her that she should consider attending the state university, where she could probably qualify for a scholarship. The problem is that Nirisha knows how disappointed her parents would be if she said she did not want to go into the family business. Nirisha's parents think college is impractical. Nirisha's younger sister, Sadguna, has a business mind, yet their father does not seem to be aware of that.

Nirisha feels torn, and she knows she should start applying for colleges soon. Her parents think she should be thinking about her future in the restaurant business. This has really started to cause problems in the family. Traditionally, in Nirisha's family's culture, children do what their parents want them to do, without question. No one in the family has ever talked to a therapist before, as far as she knows. Their family and extended family are very close-knit, and they do not really believe in turning to outsiders. If they had problems, they would never let anyone know it. Nirisha does not know what to do.

Response Guidelines

Read the posts of your peers and respond to at least two, following the guidelines in the FEM. These responses should be substantive and contribute to the conversation by asking questions, respectfully debating positions, and presenting supporting information relevant to the topic.

Course Resources

Graduate Discussion Participation Scoring Guide