Contextual therapy and "antwone fisher" essay sample

Literature, Russian Literature



Contextual Therapy and "Antwone Fisher" Essay Sample
Boszomeny, was one of the many who described inner conflicts and
extensive principles to external relationships. In 1986 he made known the
use of ethical systems within a unit of relatives. This ethical system is used
as a way to maintain trustworthiness, fairness, and loyalty between
members of a family (Gehart, 2014).

What is contextual family therapy?

This form of therapy is a relational approach and it is designed based on ones structures and processes. Relational determinants may occur in therapy, the contextual approach is built to benefit the client. In fact, contextual therapy assumes that the leverages of therapeutic interventions are fixed with relational determinants (Gehart, 2014). Facts, individual psychology, behavioral transaction, and relational ethics are the four dimensions of contextual therapy (Gehart, 2014). Contextual Therapy is systemic

Any circumstance or problem that occurs within a family that affects family functioning as well as relationships developed can benefit from systemic family therapy. Through a systematic perspective, within contextual therapy it strengthens trust and loyalty with family relationships. Contextual therapy falls in place with family therapy, often times the reason why one seeks CFT is due to situations dealing with family functioning. The therapist not only works with individual functioning but works with rebalancing the entire family unit.

Key Concepts: Dimensions of Relational Realities

Facts: aspects such as age, gender, race/ethnicity, and basic information about a person are considered facts (Gehart, 2014). Individual Psychology: This concept relates to ones inner thoughts, emotions and even memories (Gehart, 2014). Transactional Patterns: These patterns are how people communicate with one another (gehart, 2014).. Relational Ethics: This concept refers to the fairness in relationships (Gehart, 2014).

Ledger of Merits

Everyone has their own ledger of merit, which can be described as a "balance sheet" of credit and debts (Gehart, 2014). Entitlements and obligations begin to grow within ones inner accounting system. The interior accounting system includes: What one believes should be paid to them and what one owes others. For example, The Gehart (2014) text uses an example of a child being neglected by parents while being raised. In the future the person may handle relationships in an unjust or destructive way (Gehart, 2014).

Legacies and Loyalties

A legacy is defined as a mandate of how one is suppose to act and what to expect (Gehart, 2014). For example, when parent/parents betray the trust with their child/children it can teach them that people are untrustworthy. Loyalties are commitments to others that one holds in a close relationship (Gehart, 2014). If loyalties become unconscious and subjective to negative actions they become invisible loyalties. For Example, Gehart (2014) explains

that new couples could have commitments tied to their family they may not be aware of. Invisible loyalties appear as avoidance or indecisiveness in the new relationship.

Entitlements

Entitlements are what people believe is owed to them in a relationship. For example, a child's right to be cared for in an effective way is a mandatory entitlement. The Gehart (2014) text explains that when a child does not receive the proper care, the needs for love and trust are violated.

Destructive entitlements occur when one is claiming wrongness that he/she experienced in the past. A person claims constructive entitlements when he/she is fair, trustworthy, and giving equally in the relationships (Gehart, 2014).

Assessments and Interventions: Multidirected Partiality

Partiality is an important principle for connecting with clients in CFT. If the therapist is being partial that means the therapist is responsible to everyone affected by the change of systems (Gehart, 2014). Partiality simply means to empathize with each family member.

Listening and empathy

Listening and understanding directly to client stories without the therapist offering suggestions or validation is one way to utilize empathy (Gehart, 2014). Empathy can be used to assist the family in not hearing the therapist in a non-defensive way.

Interpretation and Promoting Insight

A therapist may offer interpretations by analyzing ledger of entitlements and indebtness. By doing so this is a way to encourage insight from the family members (Gehart, 2014).

Working Through

The Gehart (2014) text defines Working through as a process used to translate new insight into new actions within family relationships. New actions may include: changing behavior on insight discussed, helping client/clients to understand that he/she is projecting feelings onto partner that belongs in a different relationship and changing how one responds to his/her partner (Gehart, 2014).

Goals of Therapy

Goals in contextual therapy are intended to place long term changes for both the individual as well as ones relative functioning (Gehart, 2014). One of the goals is to direct the client/clients to pay attention to their unconscious processes (Gehart, 2014). By doing this the client/clients learn to acknowledge and make them conscious to promote autonomy and self-absorbed actions. The therapist uses a system to turn around the slate of destructive entitlements and decrease communication between others that are based on projections (Gehart, 2014). Projections are a way one may transmit their emotional feelings onto another person.

The therapist goal is to manage commitments of the family members to develop a fair sheet of entitlements and indebtness (Gehart, 2014). The primary goal is to help dysfunctional families by rebalancing the emotional ledgers between family members (Gehart, 2014). This helps the client develop a sense of equality and finally these techniques lead to a restore of emotions. The therapist helps clients recognize positive aspects that others have done by "giving credit" Giving credit means recognizing not just current unfairness but those form the past as well (Gehart, 2014).

How is it assumed that change occurs? How does the Therapist Facilitate change? Dr Warschanski of the ICCA (International Contextual Coaching Association) feels that "the use of contextual therapy is strengthened by examining what a client feels give meaning to his/her life after events that has affected them." (Page, 1). It is the therapist position to create a therapeutic context; this allows the client/clients to view him/herself differently to discover different possibilities (ICCA, 2012). While the therapist shapes the client's new thoughts, the client/clients then create new thoughts to replace negative ones. "The therapist will work with the assumption that; the client has the resources with him/her to solve the problem to achieve the goals being set." (ICCA, 2012, pg 1). Dr. Warchanski concludes that the therapist has the ability to facilitate change by using the function of communication rather than theories or methods studied (ICCA, 2012).

Diversity Considerations: Prolonged Sexual abuse and CFT
Survivors of prolonged sexual abuse describes that one has grown up in a chaotic home that lacks guidance or attentiveness (Gold 2010). Clients' coping with trauma such as child sexual abuse is an element used in treatment of CFT. The therapist works with the client to coach/teach one to

cope with stressors of daily living since trauma disrupts existing functioning (Gold, 2010). The therapist also works with current difficulties rather than focusing and making the past the main topic in therapy (Gold, 2010).

Legal and Ethical Considerations

Confidentiality: According to the American Association for marriage and family therapy code of ethics, family therapists are faced with ethical circumstances because sessions are with one or more family members (Miller, n. a). To avoid breaking confidentiality some therapist might refuse sessions with individual members.

Informed Consent: The call for help usually comes from one family member, and in turn that member might try to convince others to come for treatment. However, according to the code of ethics if therapy is called for more than one family member, getting permission from others is important (Miller, n. a)

Personal Values: A therapist is only human, and at times one will have other suggestions are feelings towards certain topics involving members of a family. The therapist must maintain professional boundaries when dealing with client/clients. The therapist should remain neutral at all times and maintain the clients respect for autonomy (Miller, n. a).

Research Support: Contextual Family Therapy with the Victims of Incest

The Lutz and Medway (1984) case study explains how a Contextual Family
Therapist applies the concepts to a family affected by the abuse of incest.
The concepts of intergenerational bonds and indebtness are covered. The

therapist goals involved increasing empathy between the victim and victimizer. The family consisted of a mother, father, 3 boys (1 boy suffers from brain damage) and "the victim" Alice "The victim" was molested by her father when she was ten years old, this abuse went on for five years. The family was referred to therapy after Alice was hospitalized for the use of drugs. During the therapy it is easily understood that Alice's father became unable to be trusted when he violated the incestuous relationship with her. Alice's loyalty and indebtedness diminished within her father by his lack of trust (Lutz and Medway, 1984). The therapist used techniques to help the family identify and express their feelings in therapy.

While the mother expressed how she continued to be overwhelmed with the sickness of their son, she admits that she was not fully satisfying her husband. She also expressed how she was filled with anger and hatred towards her husband for what he did. The father expressed how he turned to liquor to cope with his loneliness and stress from the family. The therapist helped the family to re-build a fresh relationship with the father/husband by the process of rejuncture. Rejuncture, the act of helping a victim learn to trust a victimizer (Lutz and Medway, 1984). Viewing a family through the Contextual model was helpful for a situation such as this. Lutz and Medway (1984) concluded that the approach allowed the therapist to help the family view themselves from a new perspective. By using this approach, the family was able to begin forgiving one another, rather than condemning one another (Lutz and Medway, 1984).

Contextual therapy and "antwone fisher" ... - Paper Example

Page 9

Contextual Family Therapy looks good on me!

Strength: Empathy

Since learning about this model, I have read many articles in the case of contextual therapy involve great traumas, Traumas such as: sexual abuse, incest, and even drug abuse. In order to work with clients affected by these crimes one must utilize empathy. The ability to empathize with someone does not mean to feel sorry for one. Psychology Today defines empathy as the act of emotionally connecting with the person's pain or grief. Empathy is one of my greatest strength since the experience I have had with my mother. To listen and understand a client who is grieving will better connect us emotionally and therapy can be more effective. I believe that an empathic ability is what makes a great contextual therapist perform effective therapy. Finding room within my own feelings, to imagine how my clients are suffering will make me a great CFT. Often times, I am a very emotional person, and to see someone in pain or grieving makes me hurt inside.

While I am able to empathize with others, I don't want to seem sad by what they are going through. This is an aspect I have overcame looking through someone else's perspective. My role is to facilitate change within my client/clients not feel sorry for them. In "Antwon Fisher" he had barriers, struggled to let anyone else inside of what he was feeling. Once he opened up, expressed how he felt it allowed the therapist to make a connection with him. The ability of empathizing holds a strong connection with a CFT, this ability I possess will strengthen and make contextual therapy more effective. Recovery Model and Contextual Family Therapy: Concept of Healing

Often clients seeking contextual family therapy have been traumatized by some type of abuse. I view the concept of healing as one term that connects with overcoming abuse. Having the ability to cope with trauma creates chances for healing. A victim is in fact scared and in pain from abuse. While in therapy the therapist works with the client/clients to heal the brokenness of trust and loyalties. While healing is the primary focus of the recovery model, within CFT healing a relationship, to build a "fresh" relationship is a process. The concept of healing in the recovery model makes a new way for one to live with symptoms (Craig, Cook, Ralph, Ridgway and Onken, 2007). In CFT the family is able to acknowledge what happened (Live yet cope with the affects), forgive what happened to begin to trust again.

Case Conceptualization: Antwone Fisher

Antwone, 26 yr old single African American male, in therapy for a command referral, Fisher is mandated to get an evaluation and an psychiatric recommendation to give clearance as to whether he is mentally fit to stay in the United States Navy. Fisher is unwilling to begin counseling, expressing to lieutenant Davenport, the attending psychiatrist, that he has "no problems"

Analyze " Antwone Fisher"

Antwone Fisher, an African American male, is 26 yrs old when he is enlisted into the U. S. Navy. He is referred to therapy when his commanding officer notices how violent his behavior is towards other sailors. Reports of aggressive and violent anger are witnessed aboard the ship from others.

Once in therapy Fisher refuses to open up and talk to the psychiatrist. Few studies have been conducted that address how African American clients overcame barriers in family therapy. One study concluded that most African Americans do not seek therapy because of stigmas attached to them (Hall and Sandberg, 2012). The simple fact that he acts out in anger, Antwone may feel that the therapist already feels this way about him and may hold certain facts against him. The problem is clearly shown that Antwone Fisher is a victim of his past experiences. Fisher's behavior is reacted from his experiences of physical abuse and sexual abuse while living in a foster home. Zimring, Keney, and Kaur (2012) concludes that children who are maltreated in foster care raises the chances of developing depression as well as angry problems.

While Fishers mother was in prison when he was born, she neglected him after she was released. She never returned to raise her child, and his father had already pased away. The Gehart (2014) text explains "The most significant dynamic affecting individual and family functioning is parental introjects, the internalized negative aspects of parents" (pg, 245). Though Fisher was in foster care, they were his "acting" parental figures. Entitlements, or what Gehart explains " Ethical guarantees" are merits that are mandatory in a child/parent relationship (Gehart, 2014). When children do not receive the nurturing they are entitled to, they later project it to other as debtors, and they then become destructive entitlements (Gehart, 2014). Because of the neglect and abuse he received in foster care, Fisher used those destructive entitlements and projected them onto others. For example, Fishers foster parents betrayed his trust when they allowed physical and sexual abuse to occur. The parent has passed down the expectation that people are untrustworthy (Gehart, 2014).

Treatment Plan

Initial Phase of Treatment

- I. Develop working therapeutic relationship: express concern for his and invite mother to therapy. Respect his forms of emotional expressions.
- a. Discuss the informed consent. Use a calming presence
- b. complete therapy where client feels comfortable, become attentive to his emotional responses and projection of certain responses
- c. make sure to keep my therapeutic neutrality by not reacting to his emotional response; respond.
- II. Asses individual systemic and broader cultural dynamics
- A.. explore detailed family of imprisonment.
- B. identify and discuss early experiences with any attachments to objects such as foster care parents.
- C. Explain what ledger of entitlements and indebtness are to further discuss and obtain his.
- III. Obtain Client agreement and treatment goals
- A. Identify goals that dress the presenting problems.
- IV. Client goal
- A. Increase awareness of parental interjects to increase autonomy in future

https://assignbuster.com/contextual-therapy-and-antwone-fisher-essay-sample/

relationships

and decrease his assumptions of insecure attachment in future relationships.

Intervention: Interpret and listen for his parental interjects to identify defense mechanisms related to his lashing out and physical aggression.

V. Maintain quality of working alliance

A. assessment intervention: continue to be attentive to the relationship of transference

and counter-transference.

VI. Client Goal

A. Decrease communication with others that are based on projections or revolving slate

issues.

Intervention: Interpolate examples of transference that he may have applied in therapy to help him decrease the projection patterns.

VII. Client Goal

A. Reduce the influence of negative parental interjects to reduce the assumptions of mistrust and abandonment in future relationships.

Intervention: Detriangulate to help split negative parental interjects of mistrust from future relationships. Identify any relationship in which he can work through any negative interjects that exist.

VIII. Client Goal

A. Increase autonomy by making unconscious processes conscious to reduce anger, depression, and anxiety.

Intervention: Identify strategies for keeping entitlements constructive rather than destructive. Monitor the use of defense mechanisms and the projection process.

References

Gehart, D. R. (2014). Mastering Competencies in Family Therapy: A Practical Approach to Theories and Clinical Case Documentation (2nd ed.). Belmont, CA: Brooks/Cole Cengage Learning.

Gold, S. N. (2010). Contextual Therapy for Prolonged Child Abuse Survivors.

Trauma Resolution & Integration Program, (pp. 1-56). Fort lauderdale, Forida.

Hall, C., & Sandberg, J. (2012). "We Shall Overcome": A Qualitative Exploratory Study of the Experiences of African Americans Who Overcame Barriers to Engage in family therapy. The American Journal of Family Therapy, 445-458.

Lutz, S. E., & Medway, J. (1984). Contextual Family Therapy With the Victims of Incest. Journal of adolescence, 319-327. Miller, A. (n. d.). Types of Ethical Issues a Counselor May Face When Working With Families. Retrieved October 28, 2014, from http://everydaylife. globalpost. com/types-ethical-issues-counselor-may-face-working-families-4732. html

Onken, S., Craig, C. M., Ridgway, P., Ralph, R. O., & Cook, J. A. (2007). An Analysis of Definitations and elements of Recovery: A Revie of the Literature. Psychiatric Rehabilitation Journal, 9-22.

Warchanski, D. (2012). Contextual Therapy. Retrieved October 28, 2014, from ICCA (Internaltiona Contextual Coaching Association: http://www.exlnz.com/services/contextual-coaching/

Wechsler-Zimring, A., Kearney, C., Day, T., & Kaur, H. (2012). Posttraumatic Stress Disorder and Removal from Home as a Primary, Secondary, or Disclaimed Trauma in Maltreated Adolescents. J fam, 813-818.