

# [Overall family structure](https://assignbuster.com/overall-family-structure/)

### Abstract:

This paper introduces Helen, Julie, and Garry a family subset from the movie, The Parenthood and provides a description of their overall family structure also seen in the form of a genogram. The paper also includes a literature review of both Behavioral Family Therapy (BFT), and Solution-Focused Family Therapy (SFT) with the author settling on SFT as the preferred method for eliciting change from a systems perspective; which also includes a treatment plan complete with practical interventions using SFT and a GARF analysis from the BFT approach. In addition to noting how Helen and her children relate to the larger family system the learner offers a look into her personal world based on the effects of treating this family.

### The Family Subset

The family subset to be discussed, from the movie The Parenthood, is comprised of a divorced mother of two children, one of which is engaging in teenage premarital sex, and the other is masturbating while watching pornographic films. This core group has expanded to include a husband for the teenage daughter who comes to live in the home of his new in-laws, a love interest for the mother, Helen, who eventually becomes a husband and the needed father figure for the pubescent son, and an extremely disinterested father who is preoccupied with his new life which includes a new set of children in addition to a new wife.

Helen is the second child of four born to her parents Mr. and Mrs. Frank Buckman. One of the more noticeable things about the family is the relationship that does not exist between the family patriarch and his older three children. It is especially painful to witness how hard Gil, the eldest son, tries to be such a good father by being so actively involved in the lives of his own children as a way to escape falling into the same pattern of his father’s parenting style. In addition, to the father’s distant relationship with his children is the very passive attitude of the mother. Her every attempt to assert herself into conversation and even the lives of her children are thwarted and ultimately overshadowed by the final say of her authoritative and detached husband.

Each of the four children Gil, Helen, Susan, and Larry’s parenting style and success in their sexual/marital relationships can be attributed to the way they interpret their own upbringing. As mentioned earlier, Gil’s desire to have a better relationship with his children has caused him to be extremely high strung which is possibly because of the self imposed pressure to succeed. Also, his oldest son, who he tries the hardest to bond with has been diagnosed with something akin to high-functioning autism to which he blames himself. However, his marital relationship appears to be pretty solid; thus, he has succeeded in not being like his father in the respect that he shows to his wife.

Susan, the youngest daughter has chosen a man who was able to tame her wild antics. She found his control to be quite sexually attractive. Susan’s response to her husband is a two-fold result of her bearing witness to her mother being controlled by her father as a child and wanting to rebel against that control while secretly desiring it. Nathan, Susan’s husband, is unlike her father in that he is very involved with their only daughter, Patty. The problem is that Nathan is overly occupied with everything that relates to Patty’s educational capabilities and has included her in every aspect of their lives leaving very little time for intimacy for a still newly married couple. Thus, causing distance in their relationship which forces her to not be like her mother at all, and initiates a separation from him for a while.

The youngest son, Larry, has seemingly benefited the most from the paternal relationship because the father saw a lot of himself in this son is not as successful as the other children whose relationships with their dad were not as close. Larry is extremely irresponsible and has only held on to the life lessons taught by his father that enable him to continue on his quest for getting rich quick. Larry does not have a stable companion, has never been married, does not hold a steady job, and has brought home a son whose mother is a Las Vegas showgirl at best. While Larry’s life seems to be the most exciting, he lives rather dangerously and his life is at risk as a result of his out of control gambling which is a part of his quick money schemes.

Helen’s children’s behavior is a reflection of the timing of her divorce rather than a reflection of her parenting style. Along with the end of a marital relationship between a husband and a wife during and after the divorce come feelings of failure, blame, and denial. The problem is that those emotions and thoughts are not exclusive to the couple involved but, often are things experienced by a child who is a product of divorce. When the parent who has the children, in this case the mother-Helen, has not adequately dealt with their own feelings concerning the divorce it makes it extremely difficult for them to address the needs, wants, and concerns of their offspring. Helen’s children’s actions are in relation to an unsmooth transition due to being a product of a “ bad” divorce (Carter & McGoldrick, 2005). And, thus have turned into a centrifugal family leaving the mother out and making her feel as if everything is her fault and there is nothing that she can do to make them happy (Capuzzi & Gross, 2007).

In our patriarchal society the man is often considered the breadwinner even if both parties are gainfully employed; while the woman is regulated to the position of primary caregiver. In this role, Helen is battling a range of life’s concerns from her own happiness which she feels she is neglecting because of her responsibility to her children. In her current state, she cannot be much good to her children although their safety and well-being is her main concern. The manner in which this family interacts with one another is a direct result of how their personal experiences with the divorce of Helen and her ex-husband has negatively impacted their thoughts and patterns of behaviors. Each taking on or placing the blame on self or one of the other remaining members of their family unit.

Therapy would serve Helen and her children, Julie and Garry, by helping them over this intermediary hump of emotions relating to the divorce crisis and propelling them into the next healthy stage of the family cycle they now find themselves. Group therapy would provide the family and opportunity to effectively communicate their individual issues for example, Helen might bring up her concerns surrounding her role as primary caregiver and the neglect that is self-inflicted in hopes that she might make up for whatever her ex-husband’s absence has deprived them of; Julie might discuss how she needs to feel the love of a male figure and although her choice might not be the brightest he is showing her the love that she feels she needs; Garry will likely open up about how his family has turned against him (his mother made his father not love him anymore, his father choosing to love his other son more, and his sister turning to her boyfriend and barely acknowledging him) just as his body has (because he no longer has a father to discuss and prepare him for the upcoming normal bodily changes associated with puberty).

In order for this family subset to reach a place of normal healthy functioning for a family unit it is necessary to assess and create an environment of understanding of the emotional attachment of the family system and, how easily the family is able to adjust to whatever natural and unsuspected events that occur during the life cycle (Maynard & Olson, 1987). The learner believes that the two systematic therapeutic models that will work best in bringing this family back to a positive place in their cognition, and behavior are solution focused therapy and family behavioral therapy. Solution-focused therapy will work to accentuate the successes of Helen and her children and move them away from current behaviors that have them each emphasizing on their own failures and that of other members of their family subset (insert citation here, Clinical Training in Solution focused therapy-Josee’ Lamarre, Journal of Family Psychotherapy 143-148, 2005). While Behavioral Family Therapy evaluates the family and how they currently work together so that changes can be made towards how they will interact with each other moving forward (insert citation here, Eileen Spillane-Grieco, Cognitive-behavioral family therapy with a family in high-conflict divorce: A case study, Clinical Social Work Journal 2000 105-119)

In using the behavioral model the position of the counselor is to assist the client family in changing specific behaviors which have been defined by Dr. Glasser as being “ comprised of action, thinking, feelings, and physiology” and, in turn will cause effective communication to develop (Glasser, 1980a). Solution-focused therapy suggests that the client family should look to what is presently taking place, and where they want to be in the future as opposed to what has transpired in the past. In changing the ‘ focus’ of the therapy sessions from that of the problem to that of achieving their personal goals based on what they would like to see as a result of their time in therapy will cause the client family to begin implementing the necessary steps to see those things realized. In addition, the client is instrumental to the process because they are constantly asked to define for themselves what is necessary for change to take place, or for the counseling being received to be effective (insert citation here: A Thumb-nail map for solution-focused brief therapy, Lance Taylor, Journal of Family Psychotherapy, 2005, 27-33); thus, causing Helen and her children to verbalize their responsibility to the success of their family unit.

### A Literature Review

The articles that will be discussed in this literature review will argue the importance of the helping relationship; provide insight into intervention models that have worked with a range of client race, age, and backgrounds utilizing both behavioral family and solution-focused therapies. In addition, the editorials will offer evidence towards how well these theories have worked and will work for the learner’s client family.

### On Behavioral Family Therapy

Thoughts about seeking help from a counselor can have negative connotations as expressed in the film from which we extract our client family-The Parenthood. Individuals are considered to be crazy, or think their problems are too insignificant, or are afraid of embarrassing themselves or their families with the kind of information that will be discussed. But, in actuality therapy provides an environment that is non-judgmental and safe, a counselor will affirm the feelings of the client and challenge them to think and behave in a manner that causes them to be more productive. It is those negative thoughts that will make it harder to get an entire family to come, as opposed to a single person, or even partake in the first couple of sessions. The problem has been statistically proven to be more likely a case of engagement. One article suggests that Behavioral Family Therapy (BFT) has the helping relationship as the foundation and if the counselor is able to build rapport quickly and earnestly then, it is more probable that the client family will not only remain engaged in the therapeutic process but, will likely have a successful outcome once therapy has ended (James, Cushway, & Fadden, 2006).

It is necessary to mention counselor responsibility in BFT considering that their role is valuable to the process. The therapist is required to explore and evaluate the how’s of the family system as it operates currently and it’s potential for operation in the future (James, Cushway, & Fadden, 2006). Without arguing for or against nature or nurture it is safe to say that family does play an important role in the way one acts consider the relationships of the Buckman clan as a whole and the dysfunction that ensues as they attempt to be different than the generation before them, and so then it should be equally safe to believe that therapy that would include the family is just as important in working towards change.

Change is the ultimate goal in identifying and then ranking behaviors that the client family would like to change are priority. Once they have been outlined then interventions to facilitate change are necessary. In keeping with the definition of behavior which included thinking one conduit for change is positive thinking through cognitive restructuring, each family member will create a list of strengths of all of the members of the family unit. The result brings about a sense of self-awareness and quite possibly a new way of what role one actually plays in the family structure. Part of the homework will be for each family member to work on maintaining this new self-image in between sessions and ultimately adopting it as a lifestyle change (Khodayarifard, Rehm, & Khodayarifard, 2007). This type of intervention will work well with Helen and her children as they are quite verbal in their disdain of each other. So, in highlighting the positive qualities of each other will not only affirm their role within the family, and work to dispel some of the former negative statements but, will cause them to live up to the attributes ascribed to them more often; thus, serving as a behavior modification.

Although there is overwhelming evidence that supports the effectiveness of family behavioral therapy an article from 2000 argues that research shows that this theory has not been sufficiently compared to other like orientations (Kolko, Brent, Baugher, Bridge, & Birmaher, 2000). However, BFT is still thought to be one of the best methods because of its relative adaptive nature that is specific to the preferred client demographics-family, individual: adult, adolescent, and etc. as the client family consists of a mother, and two children: one teenager, and one adolescent. Behavioral Family Therapy will work well in a family setting as Helen, Julie, and Garry can participate equally.

The self control technique is an effective intervention that can be applied to Helen and her children within the Behavioral Family Therapy model. This method holds that each individual is responsible for their own actions and possess the necessary qualities to change them (Teichman & Eliahu, 1986). Taking personal responsibility will force the family subset to see themselves separately from who they believe their parents to be and remove the need to place the blame on them for how they have decided to live their lives. For instance, Garry’s behavior will no longer lead to acts of destruction because his father has chosen to not be actively involved in his life instead, he will recognize that he has control over who he will be and that is completely separate from who his father is to him.

### On Solution-Focused Therapy

As the therapy name suggests there is an immediate purpose when utilizing this model. As such, after the necessary introductory things have been accounted for, one of the first pieces of information that the counselor needs to extract are the exceptions. These are windows into viewing potential solutions in that they identify specific instances where the client has already attempted to change what is considered normal behavior (Corcoran, 1997). Exceptions are seen as a kind of intervention in that positive affirmation is bestowed onto the person who has created an avenue for personal change and in so doing shows them how easy it is for change to occur. This will translate to Helen and her children perhaps through Julie who has demonstrated that she runs away from her problems-literally. She left home after an argument with her mother and impulsively got married; she left her husband and returned home when things got a little thick between her and Tod. But, during his stint as a race car driver, even though she vehemently opposed to this career option she showed up to the contest and was first at his side when he wrecked. All done of her own volition and thus, a time when she changed what could be considered normal or expected behavior.

With thoughts focused on the future exceptions it will allow for the client family to consider how they can make a difference in family squabbles and other relational issues by meditating on the future. What will not happen are constant thoughts on the pain, the frustration, and the angst associated with the dysfunctional state of the family but, instead each member will meditate on a “ dream solution”, which is ultimately a resolution to a problem (Bannink, 2007). One outcome to an ideal solution for this family would be that they no longer talked or yelled at each other but, now respected each other enough to quiet themselves and listen to the opinions and concerns of each other. Another benefit of the therapy would be for the family members to learn how to respond rather than react in a calm and rational manner.

Solution-Focused Therapy (SFT) will cause the client family to look to self for resolution as opposed to the very dysfunctional thinking of placing blame and pointing out the negative in others. It is believed by the author, that a person’s natural inclination is to think more negatively than positively in terms of what is likely to happen based on what has previously occurred. But, through the use of this model they find that the reverse is actually true and are likely to look forward to each day as opposed to dreading coming home to mom, or spending family time together (Reiter, 2007).

### Conclusion

Both, BFT and SFT focus on the relationship and building rapport with the client in addition to being able to fit a broad spectrum of clientele. The combination of Behavioral Family Therapy and Solution-Focused Therapy will help the client family come out victorious because of the effectiveness of each orientation separately. BFT would work to learn the negative behaviors and then work to teach and enforce new behaviors and SFT will mandate that their attention always be focused on bringing about a different outcome and therefore a preferred outcome.

While there are a myriad of downsides to both BFT and SFT they are so minute that they would not likely have an adverse affect on the client family. For instance, it may be that the length or number of sessions will be smaller than other theoretical approaches which would suit Helen just fine considering she is now the main source of income for the home. Fewer sessions can also work in favor of the client family in pushing them into setting realistic goals that need to be achieved and will also cause for the techniques learned while utilizing either approach be employed sooner rather than later and hopefully will continue long after the sessions have ended to go on with the changes that are necessary for success within their family unit.

Through homework and other intervention exercises a favorable outcome is expected of Helen, Julie, and Garry, the client family. They will unlearn playing the victim role and lashing out in anger, learn how to effectively communicate, accept what has transpired in their lives and in putting it behind them not out of embarrassment or shame but, out of a realization that the present and future is where their focus needs to be. In the end, the learner is confident that both the Solution-Focused Therapy and the Family Behavioral Therapy theoretical orientations will serve as a successful method of therapy for this family.

### Diagnosis and Treatment Plan

Helen and her children by all accounts can be considered a family that has not healed from divorce but copes with what that disruption to their family system translates for them and yearns to be well again seeks the counseling services of the learner. The remaining members of this unit individually and collectively exhibit a range of dysfunctional behaviors that include but are not limited to premarital teen sex, masturbation, yelling at each other and other dysfunctional communication patterns. The learner proposes that the therapeutic model that will work best in bringing Helen and her children back to a positive place in their cognition, and behavior is solution-focused family therapy.

Before a counselor or therapist is able to successfully engage the client through verbal communication, nonverbal clues are given as to potentially how bad the situation is by simple things like “ how [the clients] choose[s] to sit in the room” (Walrond-Skinner, 1976, p. 39). These kinds of nonverbal tools are just as important to assessing the situation as the ever blunt first question, “ why are you here today?”

The answer to that question is key in assessing the situation. From the interactions of the family as witnessed while in their natural habitat the following have been evaluated in regards to this operation of this family system: effective communication does not exist between the parent and children, the sibling emotional bond is nonexistent, and they do not rebound well when change occurs. After the initial general assessment or a description of the presenting problems has been disclosed the counselor must then set goals.

In a variety of settings such as corporate meetings, counseling sessions, and etc. one widely used acronym for goal setting is to be SMART: specific, measurable, attainable, realistic, and timely. The purpose of being smart when laying out the goals for others to adhere to is to ensure that they know what is expected of them without a shadow of a doubt; that a counselor or therapist will be able to easily notate when progress has been made or remains unachieved; to create practical objectives that while they may not be easy to accomplish are necessary for personal growth; and to ensure that there is a cap so that the client is aware that a deadline to check if improvement has been made.

With SMART in mind, the treatment plan for Helen, Julie, and Garry would include the following:

Goals:

1. Helen, Julie, and Garry will work together to improve effective communication
2. Helen, Julie, and Garry will learn adjustment skills as it relates to experiencing

unexpected situations specifically the divorce of Helen and her ex-husband

1. Julie and Garry will learn to interact as siblings by learning how to support

each other in an effort to build an emotional bond between them

Interventions :

1. Clients will be required to hear out the other members of their family

and to consider that person’s point of view. The request to begin considering the

point of view of others will begin within the second session between all three

members of the family unit and will continue being asked until the 10th family

session. In addition, the client family will be asked to apply this question to

instances when an argument is likely to take place as a substitute to the way they

normally communicate. This intervention will include the therapist and all

subsequent members of the host family: Helen, Julie, and Garry and will last for

at least ten sessions and will be assessed at the 10th session to see if it needs to

continue.

1. Helen, Julie, and Garry will journal about their past and present

feelings related to the divorce of Helen and her ex-husband on a daily basis, and

something will be chosen from each family members journal to be read aloud in

the following week’s session. This intervention will allow all family

members an opportunity to learn how each individual processed and is handling

the divorce. In addition, the family will be required to attend at least three

additional sessions of counseling in a Persons involved in Divorce support group

to be educated on the varying perspectives of all involved in such a process. This

intervention will include all members of the subsequent host family: Helen, Julie, and Garry and the therapist will act as the reader. The therapist will also be instrumental in securing a place for them within a support group; the family will be able to offer suggestions which the therapist will thoroughly consider and make an informed decision based on what is better for the clients. After the required three sessions, a decision as to how beneficial the group meets were and the necessity of continuing in them will determine whether more sessions are needed. That information will be considered from Helen, Julie, and Garry in addition to, the lead therapist of the group sessions.

1. Julie and Garry will begin to genuinely compliment each other at least one time

per day over the course of their time in therapy. In addition, they are to find out

something that the other is involved in like Garry’s new fascination with cars and

wholeheartedly support those endeavors making time for them at least two times

per month. The hope is to achieve the goal of creating a genuine sibling

emotional bond. This intervention will include only the sibling subset of the

client family unit. And, will consist of Julie and Garry having a separate bi-

weekly family session (for a total of two sessions per month) without their mother

Helen. During the last session for the month a verbal synopsis that will include

how well they enjoyed the time spent witnessing their sibling doing something

they loved.

The learner has implemented interventions that adhere to the thought behind solution-focused family therapy, and when evaluating Helen and her children will take into consideration the possibility for numerous modifications based upon client achievement of goals, and failures as it relates to not adhering to the scheduled mandates of the treatment goals (Seligman, 2004).

Each intervention applied would likely have the learner’s desired effect which will cause this family to knit closely together. They would own up to their own contributions to the state of their relationship as well as absolve themselves and the others of misplaced blame. The lines of communication will be open and no longer will they talk at each other in fits of hysteria or desperation. As a result of the intervention the family members will implement the communication skills learned which will include how to talk to each other and value the opinions, and feelings of one another even at those times of disagreement. Ultimately, this family unit will grow closer to each other, develop as a cohesive unit, mature in their personal pursuits and thought processes, and learn from each other which will cause them to have a smooth transition into the next life stage of their family subset’s life cycle.

### The Learner’s Personal Reflection

The entire process that began with watching the Buckman family at large and specifically the subset that included Helen, Julie and Garry and ended with setting goals that were believed to be to the benefit of making their family unit more cohesive had the learner slightly stressed. The limited experience in a counseling setting as a professional and as a client caused a recurring question regarding correctly processing and applying information. It is the belief of the learner that her experiences as wife, mother, daughter, sister, and etc. would create an excellent source from which to pull information from when dealing with clients and cause an equalizing of the relationship. While the learner can clearly relate to some of the dysfunction of the family on issues such as how families talk to each other, or not actually being able to relate or have things in common with siblings. One aspect of this family system that the learner has no personal knowledge of is divorce and how seriously it can upset the entire family cycle. The model for marriage for this learner has been that of her maternal grandparents who were married for 58 years before the death of her grandfather.

The lack of reaction to Helen being divorced considering the learner’s religious views was a very interesting dynamic. It is more likely that this can be attributed to how often she can be credited with desiring divorce than, recognizing that as a professional personal beliefs regarding things like divorce are irrelevant to the counseling process.

One of the biggest reactions was in regards to the ex-husband and his complete disregard for the well-being of his own biological children. This set off red flags of personal biases towards deadbeat dads as a result of the learner’s own father who was only sporadically involved in her upbringing, at best. Due to the internally boisterous response the learner will need to routinely do a self-check to ensure that her personal biases will not negatively affect the counseling environment that is a necessary conduit for client change. Due to the father’s utter removal from every aspect of his children’s life as a result of the divorce, Helen was regulated to the role of a single parent; and it forced their children into a single-parent family situation (Carter & McGoldrick, 2005).

Early on, the learner and her three sisters formed a pack after constantly witnessing the unnecessary sibling rivalry amongst their mother and her sisters. In clearing defining our goals for our sister-friend relationships, we are extremely honest with each other, genuinely concerned about every aspect of each other lives, and have vowed to remain so. From this relationship that was first built on a blood bond evolved four very different people, at various stages in their lives, who are now friends. Once the commitment was made to be different and was adhered to change occurred within the relationship between the learner and her youngest sister who she really did not know mostly because of the difference in age. Therefore, setting a goal for Julie and Garry to become more emotionally involved with each other was something that the learner can attest to.

One final thing to note, is how in the learner’s family which is multi-generational and includes not just an immediate family unit but, is comprised of extended family members there is always something that occurs that can upset the family system however, behaviors are not drastically changed as a result. The adaptability of the learner’s family unit has created an environment where others are always prepared to take on countless roles in the event that the traditional role holder is unable to continue on. Thus, the family is able to continue to run smoothly even after a major upset to the family cycle.

A person’s entire being is founded, rooted, expanded, and explored through the family framework which by all accounts is the initial segue into a host of firsts (Carter & McGoldrick, 2005). Thus, it stands to reason that it is completely necessary to ensure the stability of the family unit by ensuring it’s flexibility when presented with anything that has the power to modify the normal flow of the family system and, maintaini