Brief Strategic Family Therapy® (BSFT®) Specialized Engagement Techniques for

Engaging and Retaining Troubled Youth in Family Therapy

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It is difficult to engage and retain troubled youth and their families in family treatment



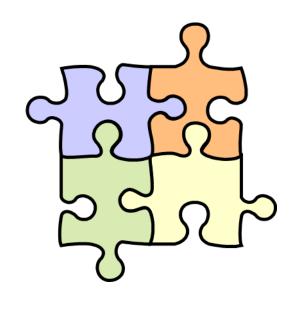










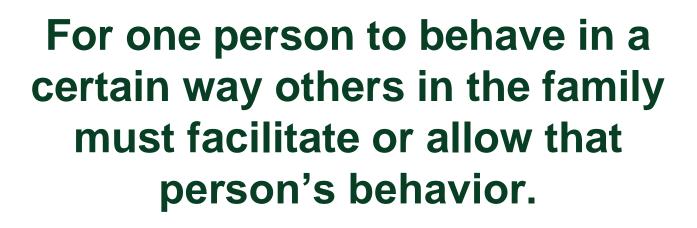


Family is a set of interlocking puzzle pieces

Family members are interrelated and interdependent

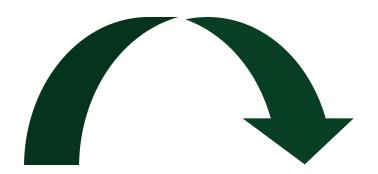






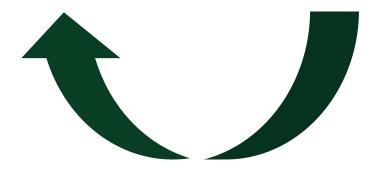


CIRCULAR CAUSALITY



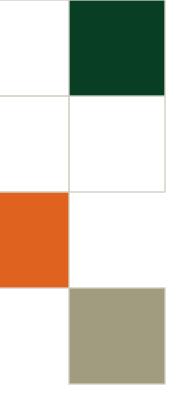
Mom and son are over-involved

Dad is distant









BSFT-Engagement builds on two important principles:

- ➤ The same family behaviors that are associated with the symptom (e.g. drug use, delinquency), also causes "resistance to engagement."
- Clinicians behaviors also contribute to the family's "resistance" to enter treatment. Clinicians behaviors can facilitate family engagement into treatment.

Changing therapist behaviors increases engagement and retention





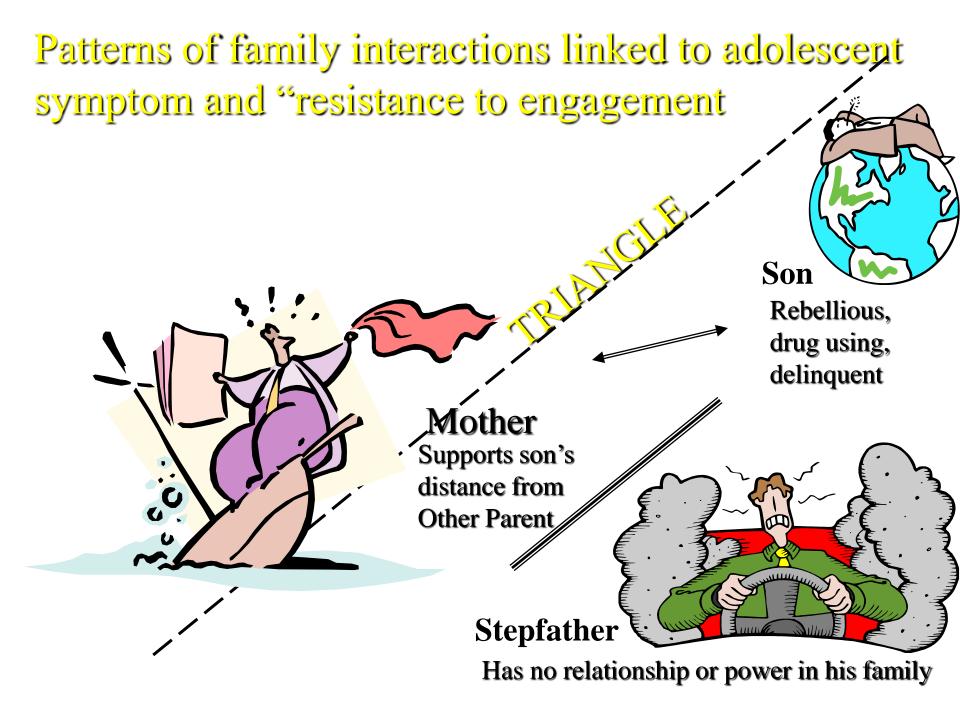
Resistant Patterns of Interactions are diagnosed at two levels:

- Identify the patterns of interactions that maintain the "resistance"
- Interface between the family and the therapist











High in the family hierarchy

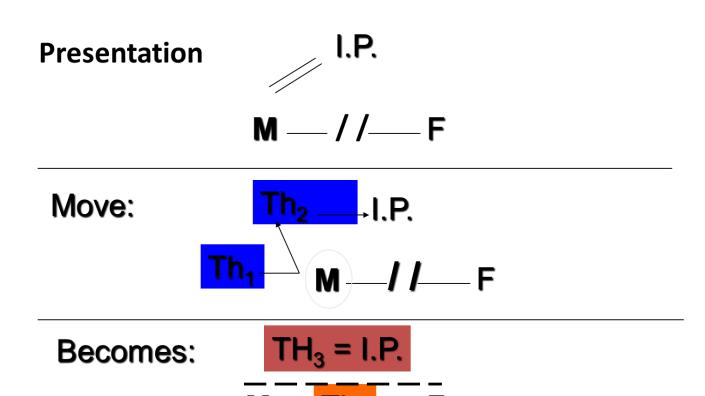
Cannot demote

Cannot ask others to control behavior

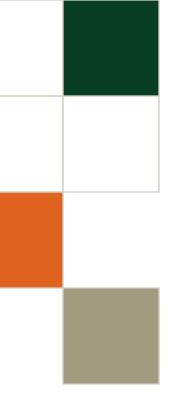
- Must recognize position and contact directly <u>Early</u>
- "Reframe" therapy in a way that "suits" the adolescents: what "works for her/him"
- > 3) Encourage use of her/his power in a positive way



Power I.P.







Disengaged Parent

(Can also refer to other parental figures)

Caller, usually mother, can bring child and herself to treatment, but "the child's stepfather does not really care" or "he is not really involved"

Disengaged Parent

Presentation

$$M = IP > F$$

MOVE:

$$Th_1 M = IP > F Th_2$$

BECOMES:



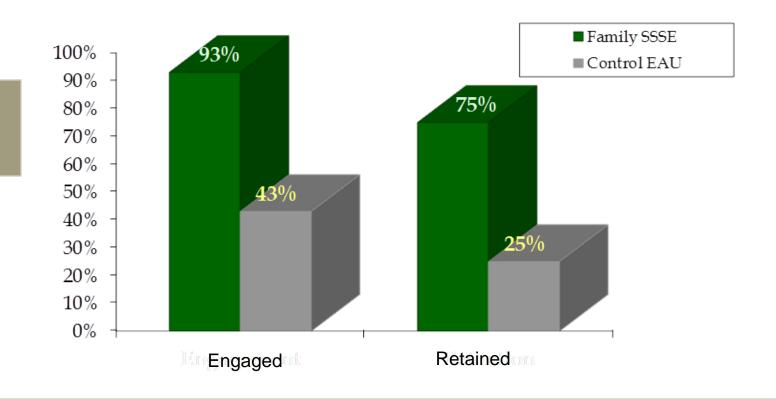








Engaging and Retaining Difficult Hispanic Youth and Family Members





National Drug Abuse Treatment Clinical Trials Network

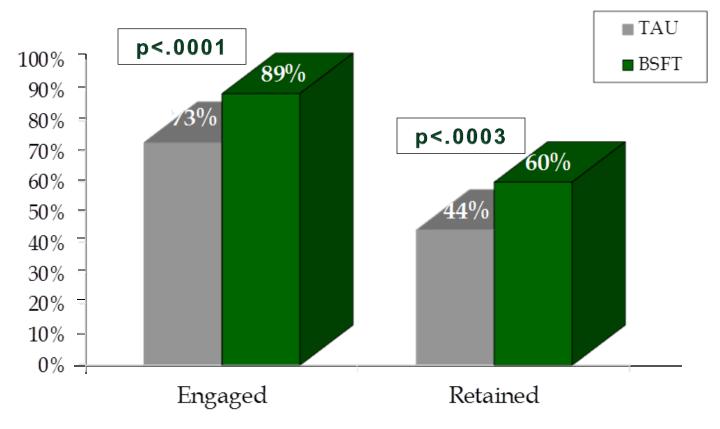
> 8 sites around the nation

Multi-racial/ethnic study

> 480 Families Randomized

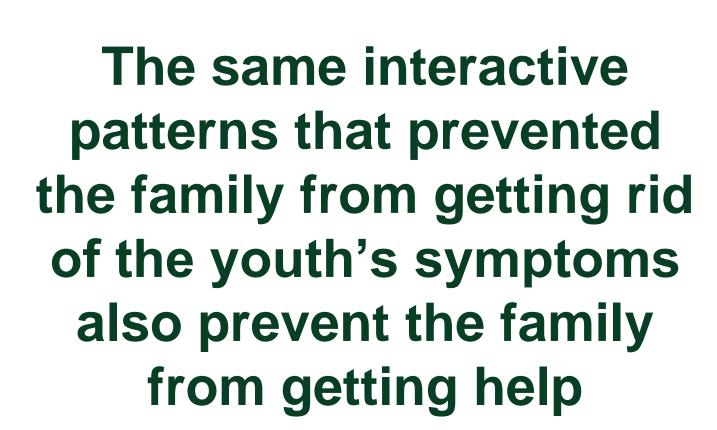


Engagement and Retention: Full Sample



(Robbins, et al, 2011)







Resistance is:

- The family's display of its inability to adapt effectively to a situation i.e. coming into treatment
- The therapist's inability to behave in ways that get around the family's maladaptive behaviors long enough to bring the family into treatment

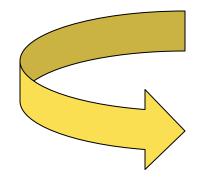


BSFT-Engagement PREMISE

Resistance

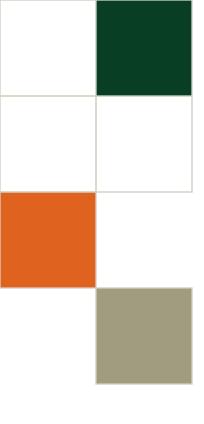
A symptom of the system's maladaptive interactions

The system's attempt to maintain its status quo



...therefore... the same diagnostic and intervention techniques apply in therapy and in engaging families into Treatment





The BSFT therapist will use intervention techniques such as joining and creating a motivational context for change to get around the maladaptive patterns and get the family into treatment





- Diagnose the patterns of interactions that cause the family as a whole not to come into treatment.
- > Get around "resistance" patterns
- > Change them *later* during treatment





Brief Strategic Family Therapy® and BSFT® are registered marks of the, University of Miami





- Crosswinds began in 1974, and currently serves over 2,200 children annually across Brevard County, Florida.
- Crosswinds runs a homeless/runaway shelter, and has a spectrum of programs including independent living, in-home family therapy, and diversionary programs.
- ➤ In 2007, Crosswinds was selected by Evidence Based Associates' Redirections Program to provide BSFT services.



BSFT Program at Crosswinds

- Crosswinds BSFT program provides in-home family therapy to 12-18 year old children on probation and their families
- ➤ BSFT works with the family system to improve support, communication, and family structure, therefore reducing the likelihood that the child will later be committed to a residential program.
- ➤ The BSFT[™] program began in November, 2007 with a team of 4 therapists.





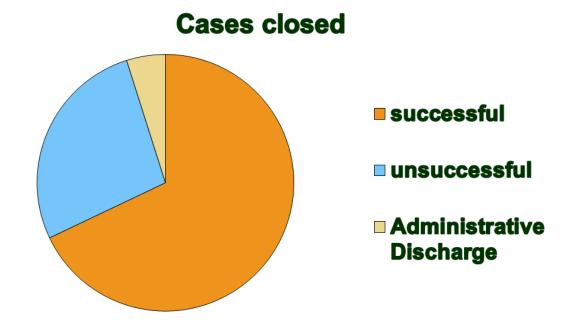
- > Referral problem
- > Engagement and retention
- > Substance abuse



UNIVERSITY OF MIAMI

Results

> 298 clients have been seen since inception (November, 2007)



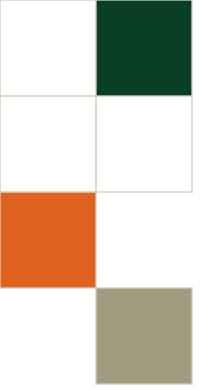






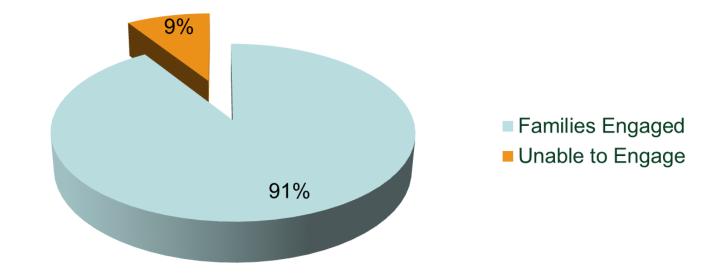
- > Since inception, 73% of clients have been closed successfully
- ➤ For 2009-2010, 22% of successful discharges have been adjudicated for a new charge during the one year post treatment.
- For 2010-2011, 16% of successful discharges have been adjudicated for a new charge, with 2% of cases still pending 1 year post treatment.
- Contract requirements are that 70% of youth are closed successfully (we closed 73%), and that 60% of youth do not recidivate (in 2010-2011, 84% did not recidivate).





Results: Engagement and Retention

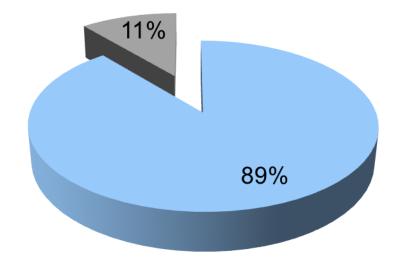
Engagement





Treatment Retained





- Retained Once Opened
- Drop Out Due to Engagement





Size of Brevard County

Population experiences with the "system"



- Family Diagnostics
 - Unbalanced Hierarchy
 - Protection of IPhood
 - Family does not have a decision making subsystem







Engagement at Crosswinds

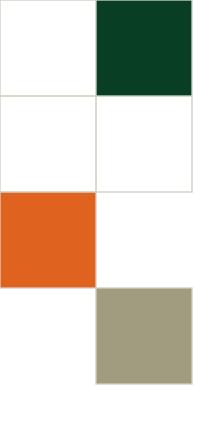
Reaching out to families

- First contact
- > Meeting the family where they are at
- > Persistent attempts









Engagement at Crosswinds Identifying Obstacles

- Helping to overcome obstacles as a joining technique
 - Helping the family to meet basic needs
 - Supporting the present hierarchy
 - Identifying early gains for family
- Resistance due to Homeostasis





Engagement at Crosswinds

Assigning tasks:

The first task we assign a family is to ask them to come together for the first therapy session





- Working with the first contact to engage the family
- Specialized engagement to pull in other family members





Using the Diagnostic Map

- The same maladaptive patterns that are present in a family system are the same patterns that will interfere with the family getting help
- Asking Process focused questions
- Assigning exploratory tasks
- Using BSFT techniques to overcome obstacles and homeostasis

