

Functional Family Therapy (FFT)

Source: Sexton, T.F & Alexander, J.L. (2004) *Functional Family Therapy Clinical Training Manual*. Seattle: WA Anne E. Casey Foundation

Knowledge of the rationale for FFT

Knowledge of systemic principles that inform the therapeutic approach

An ability to draw on knowledge that the relational model of family functioning assumes that families develop their own definition of a “problem”, and that this definition has the following components:

the problem is usually attributed to one member of the family

it has a negative emotional component

it is accompanied by blaming interactions that have become central to the relationship patterns of the family

An ability to draw on knowledge of FFT principles:

that FFT is designed to empower, not to rescue or control families

that FFT is based on a respect for the diversity of family life and does not seek to impose a single model of family functioning

that FFT aims to develop family members’ inner strengths and sense of optimism

that FFT seeks to promote viable change in family function that is adaptive and productive, given the resources and value of the system in which it operates

An ability to draw on knowledge that the focus of FFT is multi-systemic and multi-level (i.e. the focus is on the treatment system, the family and the individual).

Knowledge of problem behaviours in relation to FFT

An ability to draw on knowledge of risk and protective factors, including:

family factors (e.g. family conflict)

adolescent and parent factors (e.g. poor parental supervision)

social and environmental factors (e.g. low income, poor housing)

An ability to draw on knowledge of developmental stages and aspects of parenting that promote development (such as structure, nurture, guidance and monitoring)

Knowledge of the FFT approaches that enable therapeutic change

An ability to draw on knowledge of the three-phase approach to assessment and intervention in FFT:

engagement

behaviour change

generalisation

An ability to draw on knowledge of the need to develop individualised change plans that “fit” the family’s needs and focus on increasing the family’s competence in:

parenting skills

family communication

problem solving skills

conflict management skills

An ability to draw on knowledge of the role of relational and organising themes in the supporting and structuring the development of an FFT intervention

An ability to draw on knowledge that FFT requires sustained effort to understand and respect youth and their families on their own terms

BASIC FFT TECHNIQUES

Ability to initiate contact and undertake an FFT assessment

An ability to adopt a “*family first*” perspective as the organising principle for any assessment and subsequent interventions (construing the family as both the focus of the intervention and the agent for initiating and maintaining change)

An ability to describe and understand the family’s motivation in seeking help and to use this to inform all further interventions

An ability to structure an assessment process in a manner that supports the phased approach of FFT, specifically:

starting with a relational assessment focused on engagement and motivation

moving on to a behavioural assessment focused on behavioural change

ending with a multisystemic assessment focused on supporting generalisation

An ability to conduct a relational assessment focused on both the patterns of relatedness (i.e. those behaviours which surround problem behaviours) and the relational functions which serve to motivate and maintain relational patterns through:

a description of the behavioural sequences, emotions and beliefs that typify relational patterns in the family

a characterisation of the degree of relatedness, including the degree of psychological interdependence (contact/closeness vs distance/autonomy)

a characterisation of the hierarchical power relationships and the degree of control and influence exerted through them

An ability to conduct a problem-focused assessment that considers the impact:

of the problems on individual and family functioning

of risk and protective factors (that either increase or decrease the likelihood of problems occurring)

of family resources

of family values

of the values of the systems in which the family lives

An ability to conduct a multi-systemic assessment that considers:

the relationships between the family

the relationships between organisations in the wider environment

the capacity of the wider environment to support generalisation of any problem solutions

An ability to assess parental functioning (e.g. the degree of supervision and autonomy given to children at each age level), in the context of the family’s emotional resources and values

Ability to promote engagement and motivation

An ability to promote and maintain positive participation in treatment by building trust, respect, and developing an alliance with all family members
An ability to maintain a primary focus on the family from their perspective (<i>matching</i>) by respecting and understanding them, their language and their family norms
An ability to develop and maintain motivation for participation in all family members, and to promote behaviour change by:
reducing negativity and blame whilst still retaining responsibility
creating a family focus for problems, so as to introduce new possibilities for solving problems
An ability to direct the focus of engagement on family member(s) who are most negative and therefore most likely (and able) to prevent positive change being initiated
An ability to identify and work with the typical emotional content of the three phases of FFT, starting with fear and punishment, through shame and on to positivity and hope

Ability to deliver motivational interventions aimed at promoting engagement

An ability to change meaning by establishing a non-blaming relational focus for the intervention
An ability to refocus individual issues (problems) as relational issues by:
actively interrupting and diverting the focus of discussions from negative and blaming interaction patterns
using “pointing process” (i.e. identifying and pointing to family strengths that emerge in the course of the intervention)

SPECIFIC FFT TECHNIQUES

Ability to use reframing techniques and themes

An ability to draw on knowledge of the reframing as a constant and sustained process in FFT
An ability to use reframing techniques to shift the focus from negativity to positivity in family communications by:
acknowledging the negative
reframing the intent, motive or meaning of behaviour (e.g. “bad” behaviour may not only have a malevolent motive but also a positive (if misguided) intent)
reflecting on the effect of reframing of the problem with the family
refining and changing the reframing as a result of the reflection
An ability to develop reframing themes which describe problematic behaviours and which provide:
alternative explanations of the problematic behaviours (e.g. “bad” behaviour may not only have malevolent motive but also positive but misguided intent)
a historical perspective on the development of the problem behaviours (e.g. previous problems of the youth in infancy; previous social or economic problems for the parents)
new explanations of problem behaviours which provide hope for the future and encourage family members to “stick with” change despite the difficulties in doing so

An ability to support the family in developing organising themes which enable them to:
avoid blame, but share (and be clear about) responsibility for the problem behaviours
understand that although the “ways of being” that the family has developed was based on a wish to do the right thing, it has had unintended and unrecognised negative consequences
where previous attempts to help the family have failed, understand any ways in which this has contributed to defensiveness or hopelessness in the family
An ability to identify any changes in family members that are associated with the development of organising themes (e.g. the development of compassion, openness or hope, the emergence of increased positivity, a reduction in blaming) and use this to help the family develop a focus on behaviour change

Ability to use behaviour change techniques

Ability to establish behaviour change techniques

An ability to draw on knowledge of the range and use of behaviour change techniques in the phased model of delivery of FFT including:
for families: interventions to help families improve their parenting skills
with youth: interventions to help eliminate problems with drug misuse, violence and delinquency
An ability to apply behaviour change technologies to change problem behaviours, based on a good alliance, hope and positivity

An ability to develop an overall case plan which sets out:
an understanding of the family, the presenting problems and any underlying strengths and motivations
risk and protective factors in the family
a understanding of the problem in the context of the family relational system
the major themes/reframes around which the intervention is organised
an individualised change plan which identifies specific target behaviours and an associated implementation plan
the multiple systems involved that impact maintenance of change
An ability to develop and flexibly implement individual change plans that target presenting problem by reducing family risk and building family protective factors
An ability to determine the best focus for changing problem behaviours (e.g. communication, problem solving, sequence interruption)
An ability to identify the best methods to change problem behaviours (e.g. teaching, modelling, coaching, use of technical aids)

Ability to embed behaviour change techniques

An ability to develop specific session intervention plans which match interventions to the family context, and identify how they will be presented, initiated kept on track and followed-up

An ability to use behaviour change technologies, including:

intervening both in a planned and direct manner focused on a specific client issue(s) and also through taking advantage of incidents they arise in sessions

therapist modelling of appropriate behaviours within sessions

identifying “homework” for specific tasks, ensuring that this is feasible, clearly understood and has a high expectation of success

An ability to use a range of technical aids (such as audio/video recordings, therapist handouts, diaries and recording charts and reminders, school-home feedback systems and interactive rituals (e.g. games and relaxation training))

An ability to help the family develop positive communication skills (e.g. skills in active listening; taking responsibility (“I” statements); directness (“you” statements)), aiming to ensure that these are characterised by brevity, concreteness and behavioural specificity

An ability to help the family develop conflict management skills by:

avoiding conflict where possible (e.g. by diverting them away from issues that lead to conflict)

changing the reaction to conflict (e.g. by asking about the emotions, goals and consequences associated with the conflict)

containing conflict where possible (e.g. by taking a present and issues focused approach, or using “time out”)

An ability to help the family develop problem solving skills by helping them to:

identify a goal with the family in a specific area

ensure that the youth has an understanding of the nature of the problem and its impact on others, and is involved in generating, implementing and monitoring the problem solutions

identify agreed outcome(s)

agree what resources are required to achieve the goal, including any sub-goals or negotiations required to achieve the goal

identify any ways in which the suggested solutions might fail

review progress against the agreed outcome(s)

An ability to help improve parenting skills by teaching and supporting parents (and other family members) in the use of:

contracting and monitoring skills, and contingency management for younger adolescents

response–cost techniques and action-related consequences

time out

relationship-building and conflict-management skills which are integrated into the development of parenting skills

An ability to challenge “pathogenic beliefs” (e.g. all the youth’s problems are caused by eating too much chocolate) and develop alternative explanations linked to interpersonal functions and emerging themes in treatment

An ability to use formal and informal outcome measurement to support a behaviour change intervention

An ability to identify and work with resistance and in particular to consider if this stems from:

one or more family members who do not see the intervention as being of benefit to them

a lack of "fit" between the interventions and the type of problem behaviours in a family

therapist error(s)

Ability to support generalisation of the intervention

An ability to draw on knowledge of the desired outcomes of the generalisation phase (which aims to stabilise any family changes, and see the family acting in a self-reliant manner (e.g. making their own use of community resources)

An ability to assess the needs of the family for further interventions, including:

relevant community support (e.g. pro-social activities, educational services, monitoring/supervision)

additional professional services (e.g. individual therapy, parental education, anger management)

An ability to understand the range and use of generalisation techniques in the phased model of delivery of FFT (e.g. engaging the community and others from outside the family to support change)

An ability to use reframing in support of generalisation in order to :

maintain motivation when the felt need for change diminishes or when setbacks occur

redefine the aim as "keeping going" even when things have improved (i.e. to maintain a consistent focus on the long-term maintenance of change)

An ability to support the maintenance of change by:

educating the family about the "normal" experience of setbacks and the re-emergence of some problem behaviours

supporting the family in engaging again in the behaviour change intervention(s)

reminding the family of previous success and their central role in that success

An ability to help the family develop relapse prevention strategies so that they can confidently apply their new skills in different situations, by:

identifying situations where the problem(s) may occur

identifying strategies to be used when the problem(s) recurs

predicting when problem(s) may recur

An ability to support the family's ability to access further interventions (including both community support and professional services) which they identify as important in maintaining change

An ability to support the maintenance of change and the prevention of relapse by:

having a good knowledge of local community services and systems (e.g. local service providers, school system, criminal justice system)

having a good working knowledge of the referral systems of local community services and the key personal in those services