

# FAMILY

## Systemic Therapy

**Family Systemic Therapy (FST) is a well-recognized evidence-based psychotherapy that ameliorates the problems people present with in the context of their familial relationships and their social networks.**

This therapeutic approach is distinct from other traditional psychotherapies in that it actively considers the family system as a social unit rather than isolating a particular individual. It enables families to express and explore difficult thoughts and emotions safely and constructively, to empathize with each other's experiences & views and appreciate other's needs and thrive upon family strengths by making adaptive changes to their relationships. In essence, FST fundamentally focuses on familial interactions, quality of relationships, various aspects of family development and functioning, among others. Apart from this, FST is also based upon systemic assumptions, which highlights the role of wider systems within an individual's life, such as their community, society and culture to which they belong. With this in mind, FST regards 'context' to be fundamental for an individual's psychological development and emotional well-being, and in turn addresses an individual's problems in relation to the different social contexts in which a person can live: as a partner in a couple relationship, as a family member, or a person attached to particular cultural and/or religious associations.



The family unit can be both a great source of support but also a source of distress, misunderstanding and pain. Therefore, FST is an appropriate and effective method to enhance the ability of family members to harness a supportive network between each other. When presented with a problem and or maladaptive behavior, FST seeks out the interactional patterns that maintain it and the social dynamic that holds the interactions. From here, therapists collaborate with and enable families to use their resources more efficiently in a supportive manner, which is essential in helping members manage transitional stages of development and/or stressful life events. The goal is to shift the therapeutic conversation from problem-centered toward solution-focused in order to disrupt the vicious cycle of problem behavior maintained by inappropriate dialogues. FST is not only beneficial in resolving the impact of a situation

or a problem that affects the relationships between family members and functioning as a unit, but also in resolving a problem an individual faces that affects his/her familial and wider social relationships. By involving the wider systems in an individual's life, treatment can help to avoid the pathologizing of that individual and in turn address the problem behaviors more constructively.

**Current research literature supports FST as an effective and efficacious psychotherapy in improving the following circumstances:**

- Adjustment to chronic health illnesses
- Child and adolescent mental health (e.g. Carr, 2014)
- Child and adolescent behavioral difficulties and externalizing disorders (e.g. Retzlaff et al., 2013; Von Sydow et al., 2013)
- Emotional problems, including anxiety, depression, bipolar disorder, self-harm and suicidality (e.g. Carr, 2014)
- Eating disorders such as anorexia, bulimia and obesity (e.g. Gelin et al., 2015)
- Marital problems such as separation and divorce (e.g. Barnwell & Stone, 2016)
- Alcohol and substance abuse (e.g. Hock et al., 2015)
- Foster care, adoption and related issues (e.g. Brodzinsky, 2015)
- Transitional stages of life issues
- Parenting skills
- Traumatic experiences, loss and bereavement
- Your child looks frozen, withdrawn or even angry when asked questions by strangers or people she/he feels uncomfortable with.
- Your child uses non-verbal gestures like pointing, shrugging, nodding and other facial expressions to get their needs met even though they know how to verbally express themselves.
- Their struggle speaking in these settings have occurred for more than one month. This excludes the first month of starting school.
- The difficulties your child faces with speaking should also be viewed to interfere with her/his life.
- Their inability to speak must also be explained independently from any other language or communication disorder.

**Useful Links**  
[europeanfamilytherapy.eu](http://europeanfamilytherapy.eu)  
[aft.org.uk](http://aft.org.uk)

**FST is well supported by research in resolving a wide range of conditions/issues and typically involves the following aims:**

Improving family functioning and in turn strengthening solidarity, tolerance, trust and collaboration

Enhancement of mutual understanding, coherent communication and emotional support between family members

Building coping skills and effective problem-solving strategies toward various life dilemmas/situations

Empowering family members to use their resources in providing support for one another during various stressful situations including mental and physical illness, bereavement and transition.

Enabling family members to be supportive in the prevention and management of various emotional and behavioral problems in childhood and adolescence.

**Bibliography**

Barnwell, B. J., & Stone, M. H. (2016). *Treating High Conflict Divorce. Universal Journal of Psychology, 4*(2), 109-115.

Brodzinsky, D. (2015). *Understanding and Treating Adoptive Families. Contemporary Families: Translating Research Into Practice, 35.*

Carr, Alan (2014). *The evidence base for family therapy and systemic interventions for child-focused problems, Journal of Family Therapy, 36*(2): 107-157.

Carr, Alan (2014). *The evidence base for couple therapy, family therapy and systemic interventions for adult-focused problems. Journal of Family Therapy, 36* (2): 158-194.

Gelin, Z., Fuso, S., Hendrick, S., Cook-Darzens, S., & Simon, Y. (2015). *The effects of a multiple family therapy on adolescents with eating disorders: an outcome study. Family process, 54*(1), 160-172.

Hock, R., Priester, M. A., Iachini, A. L., Browne, T., DeHart, D., & Clone, S. (2015). *A Review of family engagement measures for adolescent substance use services. Journal of Child and Family Studies, 24*(12), 3700-3710.

Retzlaff, R. et al (2013). *The efficacy of systemic therapy for internalizing and other disorders of childhood and adolescence: A systematic review of 38 Randomized Trials. Family Process. 52*(4): 619-652.

Von Sydow, K., et al (2013). *The efficacy of systemic therapy for childhood and adolescent externalizing disorders: A systematic review of 47 RCTs. Family Process, 52*:576-618.