GRT

FAMILY THERAPY

Babasaheb Kadam

Regional Joint Director (Higher Education)
Kokan Region Panvel (Navi Mumbai)

Abstract:
Family treatment is a treatment approach that takes the family unit as its centering. Family specialists comprehend the passionate and behavioral issues of people as frequently being identified with issues in the family frameworks of which they are part. They accept that by attempting to advance change in the family, the side effects and issues of the relatives' will be determined, or if nothing else improved. Some of the time, yet less regularly, it is the family as a gathering that give issues. A vital gimmick of the family treatment methodology is an accentuation on the idea of roundabout, as opposed to straight causation. Family specialists are hesitant to respect occasions or practices in families as because of single, disengaged reasons, however have a tendency to see them as parts of, typically mind boggling, chains of occasions.

The Development of Family Therapy

The family treatment methodology to the treatment of psychological well-being issues was created amid the years that took after the Second World War. Psychotherapists of different psychological wellness disciplines, together with specialists from different orders, started to take a gander at their patients' families as conceivably adding to the issue they were treating. The thought that families may have a part in the genesis of psychiatric issue was not new. Freud and others from the beginning of therapy had proposed that the early adolescence family connections of their patients had brought on the mental issues with which these patients exhibited. In those early days, on the other hand, the reaction was to discrete the patients from their families for treatment. This was fulfilled either by seeing patients for treatment all alone while having insignificant or no contact with their families; or by conceding them to psychiatric doctor's facilities or different establishments where they could be administered to and treated far from the gathered unfavorable impacts of their families. What was new was the way to go that it was conceivable to work with families, in the without a moment's hesitation, to change their methods for working; and that this may be a faster and more powerful approach than individual psychotherapy with individual patients.

- **Communications Theory**

The cognitive understanding of what the individuals are stating to one another. What one part plans to pass on to an alternate is not effectively caught on. The correspondence of feeling. It is frequently imperative, if a family is to capacity well with no individuals creating side

effects, for the individuals to have the capacity to convey successfully to one another how they feel. Correspondence and force. Jay Haley has persuasively brought up that when one individual speaks with an alternate, that individual is moving to characterize a relationship. This presumably does not matter to each correspondence. Some are basically planned to give required data, for example, what time it is. Yet in the event that one individual has tenaciously to ask another the same other one—for the time this may say something in regards to the relationship between the two

- **Behavioral Family Therapy**

    Specialists who take a behavioral methodology incline vigorously on learning hypothesis. They comprehend the useless or freak practices happening in the families they treat as educated reactions that can be supplanted by more practical practices and methods for responding by the utilization of behavioral systems, for example, those laid out above. An unmistakable professional of and scientist in behavioral intercessions with families is Gerald Patterson. Like most behaviorists he has a tendency to be exact in his meaning of issue practices, completing a watchful examination of what is going on particularly what seems, by all accounts, to be keeping up the undesired practices before formulating mediations in the family framework intended to deliver behavioral change.

- **Extended Family Systems Therapy**

    The more distant family frameworks methodology is here and there alluded to as the "three generational methodology." Therapists of this school give careful consideration to the more distant families of their patients. They are awed by the way practices and methods for relating appear to be passed on starting with one era then onto the next. They underline the part of the groups of inception of the relatives in affecting current family working; and they play close thoughtfulness regarding the continuous connections the families they treat have with their more distant families. Huge numbers of their remedial intercessions consider, or really include, the more distant family.

- **Experiential Family Therapy**

    Advisors who go under the ""experiential"" rubric have a tendency to shun hypothesis. Rather, they join the family framework and permit themselves to wind up included in the extraordinary communications between the relatives. Carl Whitaker and Walter Kempler are the best-known advocates of this methodology. They don't offer us a reliable hypothesis, but instead trust their senses, or what Whitaker called, "The amassed and sorted out deposit of experience, in addition to the flexibility to permit the relationship to happen, to be who you are with the base of expectant set and most extreme responsiveness to validness and to our own particular development driving forces."

- **Psychodynamic Family Therapy**

It could be said, this is an inconsistency in wording, since family treatment is concerned with family frameworks, and not essentially with the psychopathology of relatives. Anyway a large number of the figures who assumed significant parts in the early advancement of family treatment came to it from a psychoanalytic foundation. The extent that there is such a mind-bending concept as psychodynamic family treatment, it is by all accounts treatment that plans to help relatives pick up understanding into themselves and how they respond with one another.

- **Strategic Family Therapy**

The ""vital"" school of treatment is less decently characterized than a percentage of alternate schools. Cloe Madanes, in her 1981 book, Strategic Family Therapy, proposed that it is the "obligation of the specialist to plan a system to take care of the customer's issues." She saw vital treatment originating from the work of Milton Erickson, who frequently utilized backhanded method for advancing change in his patients. These methods are examined underneath in the area "Indirect Interventions and Injunctions." An issue with the term "key treatment," nonetheless, is that probably every powerful specialist utilizes methodologies or something to that affect as a part of endeavoring to help families roll out the improvements they look for. It is in this manner to a degree uncertain.

Family Structure

The idea of family structure, either plainly communicated or inferred, is regular to numerous schools of family treatment. It was decently depicted by Salvador Minuchin in his 1974 book, Families and Family Therapy. It is identified with frameworks hypothesis ideas in that the apparent ""structure"" in a family framework comprises of the different subsystems in the family and the nature—that is quality and penetrability of the limits between them.

A run of the mill, well-working family may have very much a basic structure: a parental subsystem and a youngster subsystem. In two-guardian families some would recognize the guardian subsystem from the conjugal subsystem, since the way a couple relate as a conjugal pair is frequently unique from how they work as parental couple. There may be relied upon to be a decently characterized, yet not excessively inflexible and impermeable limit between the parental and the youngster subsystem

The way of the limits that exist between the subsystems in families is of extraordinary enthusiasm to the structural family specialist. Identified with this are the ideas of enmeshment and separation. Enmeshment is said to exist when the limits between relatives or subsystems are feeble and promptly porous; it infers an overclose contribution of those concerned. At the point when families individuals are enmeshed, their practices and, regularly, passionate states have checked consequences for one another. Rather than this, if individuals are withdrawn, the conduct of one part will have little impact on those with whom the part is separated.

In a less well-working family one may discover an alternate subsystem design. Case in point, there may be a subsystem comprising of the mother in an enmeshed association with maybe a couple youngsters, and an alternate involving the father. The limit between the two subsystems may be strong, with little collaboration or correspondence of feeling between them.

Numerous other family structures may be experienced; in reality the potential outcomes are boundless. In bigger families there may be more than one youngster subsystem; for instance, a more established kid subsystem and a more youthful kid one, or male and female subsystems. Furthermore the structural issues may not be kept to the atomic crew. The more distant family grandparents, uncles, close relatives, and different relatives—may be included. So might companions, school staff and others, contingent upon the limit between the family and its suprasystem

Family Development

- Families are not static elements. They change and create. Among the contemplations the specialist working with a family must consider and is the place the family is a major part of its life cycle, for families have life cycles, pretty much as people do. Additionally, numerous family issues end up being connected with challenges in undertaking from one phase of the life cycle to the following.
  The family life cycle has been portrayed and subdivided in an assortment of ways. In outline, be that as it may, it is for the most part as takes after. The beginning stage is self-assertive:
- The single grown-up individual.
- Two single grown-ups get together as a couple. Customarily they get hitched, yet in numerous social orders these days a formal wedding service is not needed. This may be termed the childless couple stage.
- The couple have a kid, frequently going ahead to have a few more. We now have the couple with youthful kids.
- The most established kid begins school. The family enters the phase of the couple with school-age youngsters.
- The most seasoned tyke enters immaturity.
- The first youngster (it require not be the most seasoned) leaves home. This is the family dispatching its kids into the more extensive world.
- The last youngster leaves home. This is the begin of the "unfilled home" organize.
- Retirement, maturing

The above is essentially a distortion. Obviously, a family can be, and to be sure will frequently be, in a few stages in the meantime. Some kids may be in school while others have not begun; some will have arrived at immaturity and others won't have. The folks may even have resigned before all the kids have left home. An extra muddling is that numerous families don't take after the above course. We see, for instance, family aggregates that have just contained one guardian from the begin; others disturbed by separation or the passing of one guardian; mixed groups of different sorts; gay person couples, with or without kids; families in which it is the grandparents who are administering to the youngsters.

What the family advisor must do, with each family that shows, is figure out where the family is a major part of its life cycle, and whether it is experiencing any trouble in moving starting with one stage then onto the next. It is regularly observed that a family has worked well at one stage, maybe before the landing of youngsters, however does less well at the following, for instance, when a third part, all things considered an infant tyke, is included. At the same time

any move can introduce a test, as can single parenthood, mixed family circumstances, and other extraordinary circumstances for instance, the detainment of a relative.

The family specialist's work gets to be much more unpredictable when families have ended up part up in light of partition or separation, an undeniably regular situation in numerous contemporary social orders. The kids' opportunity may be separated between the divided folks, whose contentions and contradictions may endure notwithstanding the detachment or separation. Enthusiastic issues, clashes of loyalties, monetary hardship and debate, and guardianship and access issues may be wellsprings of anxiety to all concerned. Frequently the youngsters endure most, and they now and then come to assume the part of pawns in progressing ""fights"" between their guardians. One or both folks may be in new connections, which can confound matters further.

In these circumstances the specialist may come to assume the part of arbiter, keeping up an impartial stance and being mindful so as not to end up overidentified with the perspective of any gathering. In the meantime the prosperity of all concerned, particularly the youngsters (who have a tendency to be most at danger), must be the essential concern of the advisor. In these frequently disastrous, even awful, circumstances specialists may need to cast their nets wide and include more than simply the particular family gathering that has at first looked for help—paying little heed to who is payin

Assessing Families :

Role Performance

In a well-working family every part has a part, or frequent example of conduct. Together, these guarantee that everything that needs to be carried out is carried out, and every relative's part is a fitting one. In broken families it might be observed that individuals, frequently those with indications, have accepted ""particular"" parts, for example, family substitute, ""parental"" tyke, wiped out part, or irritated or ""insane"" part.

Communication, Including Affective Expression

In a well-working family every part has a part, or constant example of conduct. Together, these guarantee that everything that needs to be carried out is carried out, and every relative's part is a proper one. In broken families it might be discovered that individuals, frequently those with manifestations, have expected ""quirky"" parts, for example, family substitute, ""parental"" tyke, debilitated part, or exasperates or ""insane"" part.

Affective Involvement

This is the degree and nature of relatives' enthusiasm for and sympathy toward each other. The accompanying sorts of contribution have been recognized:

•   Lack of inclusion. The relatives possess the same house however act rather like outsiders.
•   Interest or inclusion without sentiments.

•   Narcissistic inclusion. For this situation, one relative is included with an alternate to reinforce his or own sentiments of self-esteem, not in light of any genuine sympathy toward the other individual.

•   Empathic association. Here there is genuine looking after the needs of the other individual. This outcomes in reactions which address the needs of that individual.

•   Overinvolvement, or enmeshment.

This is a measure of the impact the relatives have on the conduct of other

Families Change

Advancing change is, obviously, the substance of family treatment. To attain to this the specialist must have a lucid hypothesis of progress. This can be in light of any of the hypothetical plans laid out above, or on others that exist. The advisor's hypothesis of progress is then the premise for the mediations he or she utilizes. The genuine strategies utilized differ generally, yet certain stages are needed:

The foundation of affinity. As affinity adds to, the members get to be seriously included with one another; trust likewise creates. The procedure has been given different names; a few specialists allude to it as ""joining"" the family or "building working unions." The methodology may happen rapidly or it may take a whole session, even a few. It includes both verbal and nonverbal strategies. Time spent securing compatibility is, notwithstanding, rarely squandered. Absence of sufficient affinity is a real reason for disappointment in family treatment and in reality in many tries that include associations with others.

• Mediating in the family framework. Having joined with the family, there are numerous ways the advisor may intercede in its value-based examples. They may be partitioned into immediate and roundabout intercessions.

•

• Since family treatment plans to help families find better approaches for working, a basic and clear approach is to offer the family recommendations, intended to help them roll out the improvements that the evaluation has indicated to be required in their method for working. The recommendations may be concerned with how relatives could act distinctively to one another, or convey all the more viably, or change their particular parts in the family—or whatever seems, by all accounts, to be required. They will likewise be identified with the specialist's hypothesis of progress.

Direct directives ought to be more than the giving of an ability to think guidance, on the grounds that they must be in view of a watchful evaluation of the progressions the family needs to make. Families introducing for treatment, while mindful that they have issues, or that relatives have manifestations, regularly don't comprehend what changes are expected to attain to the destinations they cove

•Rehearsing the family in correspondence methods; these may mean to advance the immediate, clear, and sufficient correspondence of data, suppositions, and sentiments between relatives;

•Discussing the parts the different relatives have been playing, and how these may be changed on the off chance that it gives the idea that modifications would be useful;
•Proposing behavioral mediations to manage undesired practices, or advance sought practices, from the youngsters;
•Suggesting, or demonstrating, more conscious courses for the relatives to interface with one another;
•Helping relatives to avow and backing one another, rather than the shared feedback that is regularly experienced in families with problems.

This suggests that despite the fact that the practices of one or all the more relatives have changed, there have not been the more basic changes in the family that may be required and are suggested by the term "second request change." Direct mediations may leave the working of the family framework in a broad sense unaltered, despite the fact that correspondence may be clearer, parts better characterized, et cetera.

The terms ""vital"" and ""systemic"" are utilized for treatment approaches that plan to realize more radical changes. These may include changes of point of view among the relatives, so that a few parts of the way the family capacities come to be seen and saw in new ways. This is the methodology of "reframing"—the giving of distinctive intending to conduct, emotions or connections. In "formative reframing," for instance, the withdrawn conduct of an immature may be reframed as ""juvenile,"" as opposed to ""awful."" "He's not by any stretch of the imagination a terrible child, he's simply experiencing difficulty growing up." Getting a family, including the youngster who is showing the troublesome conduct, to see the issue practices in this light speaks to second request change. The very methodology of formative reframing may influence the youngster's conduct. It may not be so adequate to see oneself as youthful, rather than being the solid, defiant youngster who does his or her own thin

- Reframing and positive connotation. Reframing— the giving of a different meaning to a behavior, or a pattern of behaviors—is the basic aim of most, if not all, indirect interventions. We have encountered one form—developmental reframing. Positive connotation is but a form of reframing, although it is an important one. For example, a parent's abusive behavior toward a child may be reframed (positively connoted) as a laudable attempt to correct the child's behavior. Therapy then can address the question of how the parent can develop better methods of achieving that goal. There are indeed few behaviors that cannot be positively connoted; what is required in doing so is the separation of the behavior from the motive behind it.
- Communication by metaphor. Metaphor is a long-established way of conveying messages indirectly and in a nonthreatening way. Situations may be reframed, new perspectives offered, and solutions to problems suggested without the issues being raised directly. Stories, anecdotes, other relationships, rituals, tasks, objects, and artistic productions may all carry meaning metaphorically.
- Paradoxical directives and related devices. When direct interventions have failed, it may be effective to suggest that, as ''everything'' has been tried, it may be better to leave things as they are. This effectively turns responsibility for change over to the family. Moreover, if they have, unconsciously, been trying to ''defeat'' the therapist, the only way they can now do so is by making the changes the therapist is advising against. Related to this are the declaring of therapeutic impotence and prescribing interminable therapy.

- Prescribing rituals and tasks. As we have seen, these may have metaphorical meaning, but they can also be used to interrupt repetitive, dysfunctional patterns of behavior. Examples are the ''odd-days- even-days'' routine, whereby parents take turns putting their children to bed; or the ''same-sex parenting'' plan, whereby the father is given responsibility for the boys in the family and the mother for the girls.

- Using humor. Helping family members to laugh at what they have been doing can, in the right situation, and in the context of profound rapport, be an effective change-promoting technique.

- Presenting alternative solutions or courses of action. This can be done by having the therapist admit to being uncertain about what is the best course of action and offering two or more; by having a ''Greek chorus'' observing though the one-way observation screen (a device widely used in family therapy) and sending in varying messages, or disagreeing with the therapist's ideas; or by staging a debate in the therapy room, the observers coming in to discuss possible solutions. Such strategies have several potential advantages. They make the point that there are choices to be made and that there is not necessarily only one possible solution to a problem; they invite families to take some responsibility for making changes; and they operate from the ''one-down'' position, that is, the therapist(s) are not presented as all-knowing experts seeking to impose their solutions on the family.

- Externalizing the problem. This is a process whereby a symptom is labeled or personified. '' 'Uncertainty' has taken over your life.'' ''How can you win the battle with 'Mr. Anger'?'' The family, or an individual, is then invited to consider ways of defeating or otherwise dealing with the externalized object.

REFERENCES :

1. Barker, P. (1992). Basic family therapy (3rd ed.). Oxford: Blackwell.
2. Barker, P. (1996). Psychotherapeutic metaphors: A guide to theory and practice. New York: Brunner/Mazel.
3. Duvall, E. M., & Miller, B. C. (1984). Marriage and family development (6th. ed.). New York: Harper & Row.
4. Epstein, N. B., Bishop, D. S., & Levin, S. (1978). The McMaster model of family functioning. Journal of Marriage and Family Counselling, 4, 19–31.
5. Imber-Black, E. (Ed.). (1993). Secrets in families and family therapy. New York: Norton.
6. Madanes, C. (1981). Strategic family therapy. San Francisco: Jossey-Bass.
7. Minuchin, S. (1974). Families and family therapy. Cambridge, MA: Harvard University Press.
8. Nichols, W. C. (1996). Treating people in families: An integrative framework. New York: Guilford.
9. Palazzoli, M. S., Boscolo, L., Cecchin, G., & Prata, G. (1978). Paradox and counterparadox. New York: Jason Aronson.
10. Steinhauer, P. D., Santa-Barbara, J., & Skinner, H. (1984). The process model of family functioning. Canadian Journal of Psychiatry, 29, 77–88.
11. Whitaker, C. A. (1976). The hindrance of theory in clinical work. In P. Guerin, (Ed.), Family therapy: Theory and practice. New York: Gardner.
12. Structural Family Therapy consider

13. The arrangements, or unwritten ''rules,'' that govern the interactions between family members.
14. The flexibility of the family's way of functioning, and how easily it can change.
15. The family's ''resonance.'' This is the extent to which family members are enmeshed or disengaged.
16. The family's life context, that is, the relevant suprasystems.
17. The family's developmental stage.
18. How the symptoms of the family member(s) who are presented for treatment fit into the family's transactional patterns.