

**A MULTIPLE FAMILY GROUP THERAPY  
PROGRAM FOR AT RISK ADOLESCENTS  
AND THEIR FAMILIES**

### **ABOUT THE AUTHOR**

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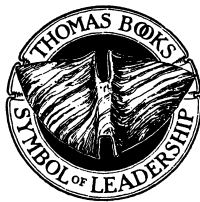
# A MULTIPLE FAMILY GROUP THERAPY PROGRAM FOR AT RISK ADOLESCENTS AND THEIR FAMILIES

*By*

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*This book is dedicated to all families who struggle to cope with life's challenges and those families who reach out to help and support them. As a result of my professional and personal experiences I have come to appreciate the incredible power of families healing families.*



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## Chapter 1

### INTRODUCTION

**M**ultiple Family Group Therapy (MFGT) has been utilized as an approach to treatment for the past four decades in this country. However, in spite of this long history, the popularity of this approach had initially been among a relatively small group of clinicians. In the past 20 years there has been a steady, increased interest in MFGT with professionals across a number of different settings utilizing this unique approach to treat the problems of at risk families. What is so interesting about this shift in emphasis is that many group facilitators today who use this treatment modality are passionate about its impact on families. And, of particular interest, many of the families being treated are often ones who have had long histories of chronic problems that have not been successfully addressed by other more traditional approaches to treatment (e.g., family therapy, group therapy). Moreover, families who have been recipients of this innovative service are just as positive in their feedback, often noting that this is the first intervention that elicited positive changes in their entire family system.

The purpose of this book is to provide the reader with a practice model for conducting effective multiple family group therapy with at risk adolescents and their families. This model provides practical guidelines for setting up, planning, and facilitating MFGT with a particular focus on the latter at risk population. In addition, a wide variety of interventions for each of the three phases (i.e., initial, middle, and termination) of this group model are provided along with related task forms. These intervention suggestions are the heart of the book since four of the ten chapters are devoted entirely to these group technique ideas.

This book is intended to serve as a “how to do it” manual for those helping professionals who are experienced group workers. Such individuals could include social workers, counselors, or psychologists who have had course work, supervision, and ongoing training in group work. Professionals who have had a specific background in MFGT will most benefit from the material in this book because they should be able to easily utilize the treatment interventions in their current group programs. Also, these professionals should be able to adapt, modify, and change some of the techniques so they can be more effectively utilized with their specific client population.

Even though the primary intention of this book is to provide an intervention-based practice model for MFGT, this author felt that readers would benefit from knowing the history and major studies that have been conducted on this unique approach to treatment. Therefore, Chapter 2 provides a literature review of MFGT with an emphasis on practice-based implications from studies and an identification of research still needed on this treatment modality. In addition, this chapter contains extensive literature resources that should provide readers with research and/or treatment programs on client populations or settings that may be similar to their own targeted client groups.

Chapter 3 outlines the Dennison Group Practice Model for MFGT, which provides a suggested framework for utilizing the interventions contained in Chapters 5 through 8. This model has been developed and refined by this author for the past 20 years. For some readers, who are experienced group workers, this group model will provide a new and somewhat different view of the group treatment modality. Many students and practitioners who have been trained on this approach report that it delineates specific goals for the initial, middle, and termination phases such that facilitators have very clear guidelines for planning and facilitating their groups. Readers are strongly encouraged to review this chapter before using the interventions contained in the following intervention chapters. The intent for providing this group practice model is not that professionals have to adhere to it strictly. Instead, readers should find that they will be able to more easily plan and facilitate their groups with a greater understanding of what makes a group an effective treatment modality.

Chapter 4 focuses on the pregroup phase and provides practical suggestions for setting up, composing, planning, and facilitating MFGT

with at risk adolescents and their families. These guidelines are based on findings from studies on MFGT, focus groups with both facilitators and participants, and field notes from this writer's training of practitioners involved in this treatment approach. Group facilitators will find that the material in this chapter outlines in very clear terms some of the essential tasks that should be completed before beginning a MFGT program. In addition, some related forms (e.g., planning session form) are contained in this section of the book so readers will not have to design forms related to some of the setup suggestions.

Chapter 5 contains relationship-building interventions that should be used throughout the group phases but with particular emphasis in the initial phase of a MFGT. Relationship building is so important and critical for MFGT that there are significantly more techniques provided in this chapter when compared with the number contained in the other three intervention chapters (i.e., Chapters 6, 7, and 8). It is hoped that the many different techniques provided in this chapter for building both relationships and trust among members of MFGT will provide readers with a wide variety of intervention ideas. Group facilitators are encouraged to modify and add to these technique suggestions so their interventions can be individualized to both their client population and their own style.

Chapter 6 contains psychoeducational interventions for the therapeutic instruction of both parents and teens in MFGT. These techniques, typically used in the initial group phase, provide instruction to group members through a variety of teaching approaches. Readers should again consider modifying these techniques so they can be the most effective for their particular group. These interventions are intended to provide nonthreatening yet educational methods for teaching families more effective ways to handle their presenting problems.

Chapter 7 contains problem discussion interventions that are intended for use in the middle phase of a MFGT. These techniques serve four purposes for members of MFGT: 1) increasing problem awareness, 2) increasing knowledge of alternative coping responses to problems, 3) providing group members opportunities to try out new coping responses, and 4) helping members integrate new coping responses into their repertoire. Again, readers are encouraged to change and modify these techniques to maximize their effectiveness for any particular group.