

FINAL PAPER: Clinical Treatment Planning for Families

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SWK656 NLS: Clinical Social Work Practice II with Families
Spring 2021
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The Cuela Family (*names were changed due to confidentiality*)

Lizbeth Cuela- Age: 34 (mother)

Marina Soto: Age: 53 (maternal grandmother, mother of Lizbeth)

Jorge Hernandez Age: 16 (Child)

Bryan Aguilar: Age: 6 (Child)

The ACS case came in because the mother walked in on her brother touching both of her children inappropriately. The mother was never aware, she called the police, and her brother was arrested and put in jail. ACS was involved and helped advocate for the mother and the children. ACS has recently closed the case. The mother and the maternal grandmother (lives with the family) have fallen back on keeping consistency with keeping up with resources after CPS closed the case. Jorge and Bryan are acting out in school. The mother is concerned that her children are going through the wrong path especially Jorge who is older.

When ACS was on the case the family was referred to individual therapy and family therapy. The family was complaint for a time, they will show up late for sessions, but they would still attend. Due to the mother's work schedule, she would miss more sessions than the others. After ACS has recently closed the case, the mother and maternal grandmother have been falling behind with taking the children to therapy and themselves.

Before any Theory application, there needs to be an assessment provided for each family member. This will provide assessment of risk and protective factors.

Theory 1: Trauma Focused Cognitive Behavior Therapy

Description of Theory 1: In brief, trauma-focused CBT is a structured, components-based, time-limited (i.e., 12–20 therapy sessions) intervention that includes education about trauma and its impact, strategies to promote relaxation and positive coping skills, techniques to address inaccurate or unhelpful thoughts (Hanson RF, Jobe-Shields, 2017).

Theory-based Treatment Tasks for family

With Trauma Focus Therapy the children that experienced related to abuse, gradual exposure to enable children to share details of their experience and process their trauma-related thoughts and feelings. It would be helpful task to have a joint parent-child session in order to increase open communication about the abuse and its impact, between children and the parent. This will provide parenting skills for the mother to manage problematic child behaviors that may be caused by the childhood sexual abuse.

Diversity and Tasks

Lizbeth mother of 2 boys Jorge (16) and Bryan (6). She is a single mother who immigrated from Mexico to the United States at the age of 25 (2012). The mother fled her home country because she was in a intimate partner relationship with her husband (father of Jorge) . The mother states that she needed a better life for herself, her mother(Marina) and her child (Jorge). Three years later 2015 she met the father of Bryan, She also experienced intimate partner violence with him while living in California. The mother, maternal grandmother and Jorge fled to New York City, Brooklyn 2016 and have been living here for 5 years. The mother relies on her mother as a support. Her Brother (28) was also a support when she arrived to

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Brooklyn New York but is currently in jail. He is accused for sexual molestation of Jorge and Bryan in 2020 (Gonzalez,2021).

Clients are coming from a Mexican family and a family with a history of sexual abuse and domestic violence. It is important to be mindful to be very delicate with the subject of sexual abuse in order to not have triggers. Mexican Culture gender roles are very different than American cultures. According to the Webster Dictionary *Machismo*, a strong, and by some considered exaggerated, sense of manly pride, associated with an attitude that the proper expression of masculinity includes virility, courage, and an entitlement to dominate, especially over women.

Goals, Objectives and Interventions

Goal 1- Reduce any PTSD symptoms for Jorge (16) may have from the trauma of the sexual abuse.

Intervention 1: Addressing behavioral and cognitive issues with children using Trauma focused therapy.

Intervention 2: Assessing and addressing any depression and anxiety symptoms in both children.

Intervention 3: Refer the mother to parenting classes to gain skills on parent and child interaction to support and cope with her children's struggles.

Theory 2: Satir Transformational Systemic Therapy (STST)

Description of Theory 2: Satir Transformational Systemic Therapy (STST), also known as the Satir method, was designed to improve relationships and communication within the family structure by addressing a person's actions, emotions, and perceptions as they relate to that person's dynamic within the family unit (Banmen, J. 2002).

Theory-based Treatment Tasks for family

STST helps address the effects of these experiences and help individuals achieve change and growth in order to heal. The Satir method is believed to be able to assist people as they work to achieve maximum personal growth, and therapists work to help people in treatment overcome inhibitions; develop courage, strength, and awareness; live in the present moment, and increase understanding of the self. This approach can also be a tool to strengthen interpersonal relationships and foster the development of balanced and healthy relationships through the process of self-actualization (Banmen, J. 2002).

Diversity and Tasks

Clients are coming from a Mexican family and a family with a history of sexual abuse and domestic violence. It is important to be mindful to be very delicate with the subject of sexual abuse in order to not have triggers.

Goals, Objectives and Interventions

Goal 2- Strengthen the importance of incorporating the family into therapy and addressing concerns in the family dynamic,

Intervention 1: The mother and grandmother will acquire an understanding of intergeneration dysfunction and effects of the family

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Intervention 2 The children will acquire an understanding of intergeneration dysfunction and effects of the family

Intervention 3: Exploring conflict or differences and coming up with different ways to resolve them as a family.

Theory 3: Experiential therapy**Description of Theory 3:**

Experiential therapy on the American Psychological Association's website results in a list of a number of different therapeutic methods that could be considered forms of experiential therapy, including Gestalt therapy, dynamic therapy, and even methods of Cognitive Behavioral Therapy. Many sites only list various alternative forms of experiential therapy, such as animal-assisted therapies (psychodrama, recreational therapy, art therapy, music therapy, adventure therapy, and others.

Theory-based Treatment Tasks for family

Experiential therapy is not just one form of therapeutic intervention, but a number of different types of therapy and therapeutic interventions designed to focus on actual involvement with different types of experiences, including emotional processing, interactions with others, creativity, and reflections of events that go beyond traditional "talk therapy." Essentially, these therapies help to make a person more aware of their internal representations of the world.

Diversity and Tasks

Clients are coming from a Mexican family and a family with a history of sexual abuse and domestic violence. It is important to be mindful to be very delicate with the subject of sexual abuse in order to not have triggers. The family is always the expert of the family.

Goals, Objectives and Interventions

Goal 3- For Bryan to receive experiential therapy in his sessions to address his inner feelings of the trauma.

Intervention 1: Art therapy: Images or creative artistic processes, such as painting or sculpting, are used to develop awareness and reduce negative experiences, Bryan can express himself this way.

Intervention 2 Play therapy: Therapeutic play is used to resolve psychological difficulties. This can help assess Bryan's bad behavior.

Intervention 3: Music therapy: This involves any number of techniques using music to instill positive changes in behavior.

References:

- Banmen, J. (2002). Introduction: Virginia Satir today. *Contemporary Family Therapy*, 24(1),
- Hanson RF, Kievit LW, Saunders BE, et al.: Correlates of adolescent reports of sexual assault: findings from the National Survey of Adolescents. *Child Maltreat* 2003; 8:261–272
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