Treatment Plan 3.0

Date: 4/29/2023 Case/Client #: Mr. Gomez/207896
Clinician Name: Oumou Diallo Theory: Solution-Focused Family Therapy, Narrative Therapy and Bowen Intergenerational Theory.

Modalities planned: ☐ Individual Adult ☐ Individual Child ☐ Couple x☐ Family ☐ Group: _____
Recommended session frequency: ☐ Weekly x☐ Every two weeks ☐ Other: _____
Expected length of treatment: 6 months

Treatment Plan with Goals and Interventions

Early Phase Client Goal: Manage crisis; reduce distressing symptoms.

1. RG will work on improving his mental health so that he can remain stable for his family and self.
   Measure: Able to sustain mental health for a period of six months_____.
   Interventions:
   a. By employing cognitive behavioral therapy, the family will learn to address negative thought patterns that causes tension and issues among family members.
   b. By employing cognitive behavioral therapy, the family will learn how to develop positive thought patterns to help build a healthy family.

Working Phase Client Goals: Target individual and relational dynamics using theoretical concepts.

PG is triggerd by school work. PG has a mental illness that makes it difficult for him to concentrate in school. PG is triggered when his grades are poor in school. This triggers him and causes him to have suicidal thoughts.

1. PG will work on improving his mental health so that he can prevent thoughts of suicidal ideations.
2. *Measure:* Able to sustain mental stability for a period of six months._____.

Interventions:
a. By employing cognitive behavioral therapy, PG will learn how to address negative thought patterns that causes him to want to commit suicide.
b. By employing cognitive behavioral therapy, PG will learn how to develop positive thought patterns to build a healthy mind so that he can proclaim positive affirmations over himself and learn to breathe deeply when he is facing anxiety due to his school performance.
c. By employing cognitive behavioral therapy, PG will learn how to develop positive thought patterns to build a healthy mind so that he can proclaim positive affirmations over himself by utilizing a journal to record his feelings on a daily basis.

1. RG will improve his communication skills with his wife so that they can reduce feelings of despair in their marriage due to their son's diagnosis with ADHD.

Measure: Able to sustain emotional stability for a period of six months._____.
Interventions:
a. Through marital counseling, RG will learn how to improve the emotional intimacy in his marriage.

b. Through marital counseling, RG will learn how to communicate his emotional frustrations of having to choose between his wife and son's emotional needs.

c. Through couple's therapy, both parties will improve their communication styles so that they can be on one accord and help one another deal with the crisis which involves their son's diagnosis of ADHD.

d. Through role play, both parties will learn how to listen to each other's feelings without it turning into an argument. Both parties will see and hear one another as they navigate and find ways to adopt new ways of speaking to one another.

3. MG will identify ways that she has caused emotional discomfort among her family, by being emotionally abusive.
Measure: Able to sustain emotional health for a period of six month_____.
Interventions:
a. Through motivational interviewing, MG will be provided with open ended questions that lead her to disclose her deep-rooted issues in her marriage.

b. Through motivational interviewing, MG will be provided with open ended questions that lead her to disclose how does her son's diagnosis makes her feel and ways that she needs support to sustain a healthy marriage and relationship with her son.

Closing Phase Client Goals: Long term goals or goals set by theory's definition of health.

1. Increase family's ability to systemically view the problem and their complementary roles to reduce MG's need to drink and smoke to distract family from the issues they are avoiding.
Measure: Able to sustain responsible alcohol/substance use behavior for a period of two weeks with no more than 1 mild episode of intoxication for a period of six months.
Interventions:
a. Use the strength-based perspective in order for MG and her family to see their sense of resiliency.

b. Circular questions to reframe MG'S drinking. Who does her drinking hurt the most in the present? Who will be hurt by it most in the long run? What positive/negative effects would this have on the family?

2.Increase effectiveness of the parental coalition in relating to children to reduce the need for PG to resort to suicidal ideations and to act out to get them on the same team.

Measure: Able to sustain effective parenting for a period of 2 weeks with no more than 2 mild episodes of defiance._____.

Interventions:

a. Use variation of invariant prescription in which parents clearly communicate alliance by not arguing in front of the children. Parents will use positive reinforcement to encourage their children and provide rewards and incentives to reinforce positive behavior in the home in order to improve family relations.

b. Directives to PG that increase their emotional connection with him, such as confessing positive affirmations instead of put downs in order to help strengthen PG's confidence and self-belief so that he can perform better in school.

Treatment Tasks

1. Develop working therapeutic relationship using theory of choice:

Relationship building approach/intervention:

a. Respect and trust the family system while adapting their language and maintaining therapeutic maneuverability. Maintain neutrality and use client language to build relationship with all members.

2. Case conceptualization of individual, relational, and community dynamics using theory of choice.

Strategies and techniques:

a. Assess the problem interactional sequences, including rise of tension, symptom, return to homeostasis, metacommunication, and complementary patterns; asses role of all members in the household.

b. Identify a solution focused approach so that family members can find creative ways to foster cohesion among family members instead of division. Circular questions to assess family meaning system and roles of each.

3. Identify needed referrals, crisis issues, collateral contacts, and other client needs.

a. *Crisis assessment intervention(s):* PG will be assessed and screened and provided a safety plan for when he is triggered and wants to commit suicide. PG will be provided the suicide hotline number, 9-8-8 to speak to an agent when he feels triggered to carry out his suicidal ideations. PG will be paired with a school counselor to obtain resources on how to improve his grades so that will not be a trigger for him to commit suicide. Tutoring will help him to improve his grades and overall academic success.

b. Refer MG to inpatient treatment program to address her alcohol/substance dependency.

c. RG will be paired with a Therapist so that he can learn effective coping mechanisms to deal with his anger issues. RG has unresolved early childhood traumas that affect his interaction

with his family. RG needs to address ways in which he was abused and neglected as a child so that he doesn't continue to abuse his family emotionally. RG reported that his father got physical and would hit him with his knuckles on his head. He stated that his Father would drown him as a child when he did not listen to him. RG needs to address these childhood traumas so he doesn't inflect the same hurt onto his wife and children.

b. *Referral(s)*The family will be provided with referrals to Mental Health Therapists and Psychiatrists for treatment, so that they can address their emotional and mental health needs so it will not strain the family and continue to promote discord in family relations.

Diversity Considerations

Describe how treatment plan, goals, and interventions were adapted to address each area of diversity:

Age: *Include developmental tasks, cognitive ability, family life cycle, generational differences, etc.:*

Treatment plan adapted to PG 16 and RG 45 age by using alone time to establish and maintain rapport.

Gender/Sexual Orientation: *Include specific gender role identity (e.g, working mother, traditional male, male-female transsexual, etc.), sexual orientation, ethnically based gender roles, etc.:*

Puerto-Rican vs. American gender role identities considered with interventions for reestablishing parental coalition; want to avoid unfair division of labor and burden within cultural traditions. As a Hispanic male, RG feels the need to be dominate and authoritative in his marriage and relationship towards his children.

Race/Ethnicity/Religion/Class/Region: *Include race, ethnicity (i.e., Italian American rather than White), immigration-status, religious beliefs, socio-economic status, and geographic region*:

Respect Catholic religious beliefs and Puerto-Rican cultural values toward divorce and parenting and used cultural/religious background to develop appropriate reframes and interventions.

Other factors: *Identify any other significant diversity considerations, such as school, work, community etc.:*

Assess PG's school and peer environments to better understand triggers for suicidal ideations. Assess MG's motivation and triggers to abuse substance and culturally viable options for avoiding substance use.

Evidence-Based Practice (Optional)

Summarize evidence for using this approach for this presenting concern and/or population: There is extensive evidence base for using solution focused family therapy approaches with families and adolescents

with mental health disorders. Virtually all evidence-based treatments for adult substance use have a significant systemic-strategic. Additionally, these approaches, particularly solution focused therapy have been shown to be effective with Latino families.

Client Perspective (Optional)

Has treatment plan been reviewed with client: x☐ Yes ☐ No; If no, explain: _____
Describe areas of Client Agreement and Concern: Both parents state that they believe the other person is the real problem, but are willing to conjoint family sessions for their son's sake. RG prefers harsher punishment for PG poor school performance. RG feels that PG's hair should be cut off as a form of punishment for low grades in school. PG feels that RG is harsh and feels pressure to perform in school despite of his mental illness. RG is overwhelmed with caring for his son who is diagnosed with ADHD. Client terminated his job to care for his son. RG became homeless because he could not maintain rental payments after terminating his job in order to care for his son who suffers from ADHD.

PG is overwhelmed with school work. He feels triggered by poor grades in school which causes him to experience suicidal ideations.PG feels that we are all going to die someday, so why should school work matter. MG feels that RG neglects her since he puts all of his attention towards caring for their son. MG feels that her son is causing a strain on her marriage. She feels that separating from RG is the best solution for them. RG has a strained relationship with his wife of twenty years. Client lacks physical intimacy with his wife. Both parties are contemplating separating for a while.

RG often pushes his son to perform well in school which is burdensome for his son. RG's high expectations in regards to school work serves as a trigger for PG who suffers from suicidal ideations. RG has an authoritative parenting style. This role can cause him to be seen as the bad parent in the eyes of his son. PG's diagnosis has caused RG to find creative ways to care for his son while

pursuing gainful employment in order to sustain their family. RG is willing to care for his son full time as his personal Care taker. Even though, mental illness is a negative stigma, it has brought them closer to one another in this time of crisis.

RG finds it is difficult to be a financial provider and care taker for his son. As a male figure, Client finds it difficult to maintain a healthy marriage because his son's mental illness is causing a strain on his marriage. *RG agrees that he is torn between caring for his son and maintaining a healthy marriage. RG disagrees that he is being authoritative in his parenting style.*

MG revealed that her substance abuse issues are due to childhood trauma she experienced as a child. MG had been abused as a child by her Mother who was a drug addict. MG turned to drugs to numb the pain of feeling abandoned as a child. Due to these issues, it has caused her to lack communication skills which is why she has issues building emotional intimacy in her marriage. MG feels that divorcing RG would be the best solution. The clinician feel that she must focus on a solution which would be to deal with her childhood trauma so that she can be healed. By healing her childhood trauma, she can communicate that she needs to feel loved and appreciated in her marriage. Through therapy, MG will realize that she is passing on the abuse that she endured as a child to her family through multigenerational trauma. The clinicain will employ the Narrative therapy and the Bowen Intergenerational theory to help the family observe the vicious cycle of abuse that has plagued this family. Through therapy, all parties will see the role they play in contributing to the family dysfunction and the role they can play towards building healthy family relation by observing their resiliency and strength through the strength perspective, all parites will realize that it is love and christ that needs to be restored in this family through the power of forgiveness.

RG needs to be a leader, not authoritatively but lovingly. Change is inevitable and necessary for this family to move forward. Communication needs to be establish across all parties. Everyone needs to speak lovingly and kind to one another. Through, christ and the holy spirit, both parents need to rely on God to mend the relationships in this family.

The clinician plans to help RG gain insight into how his behavior towards his son is causing an adverse reaction. The Clinician will help him to observe ways that he is directly affecting his son's health. RG needs to be more gentle with his son and wife so that he can establish more harmony within the family.

____Oumou Diallo_____,_____ 4/29/2023_____

_____,_____ _____

Therapist's Signature, Intern Status Date Supervisor's Signature, License Date

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