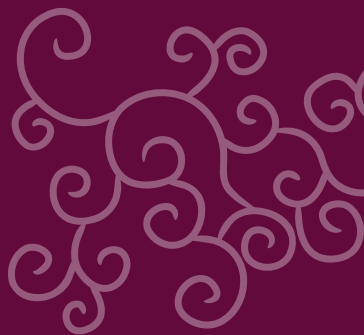


FAMILY THERAPY CAN HELP



FOR PEOPLE IN RECOVERY FROM MENTAL ILLNESS OR ADDICTION



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INTRODUCTION

When someone is affected by mental illness or addiction, it can affect the entire family. When that person enters treatment, the family's pain and confusion don't just go away. How does any family member move past the damage that has occurred? How does the family as a whole strengthen the ties that hold it together?

Family therapy is one answer. It works together with individual therapy for the benefit of all family members.





“I wonder if I can stay in recovery when I’m so cut off from the people I love.”

WHAT IS FAMILY THERAPY?

Family therapy is based on the idea that a family is a system of different parts. A change in any part of the system will trigger changes in all the other parts. This means that when one member of a family is affected by a behavioral health disorder such as mental illness or addiction, everyone is affected.

As a result, family dynamics can change in unhealthy ways. Lies and secrets can build up in the family. Some family members may take on too much responsibility, other family members may act out, and some may just shut down.

Sometimes conditions at home are already unhappy before a family member’s mental illness or addiction emerges. That person’s changing behaviors can throw the family into even greater turmoil.

Often a family remains stuck in unhealthy patterns even after the family member with the behavioral health disorder moves into recovery. Even in the best circumstances, families can find it hard to adjust to the person in their midst who is recovering, who is behaving differently than before, and who needs support.

Family therapy can help the family as a whole recover and heal. It can help all members of the family make specific, positive changes as the person in recovery changes. These changes can help all family members heal from the trauma of mental illness or addiction.

**“It feels good to be
connected again.”**



WHO CAN ATTEND FAMILY THERAPY?

“Family” means a group of two or more people with close and enduring emotional ties. Using this definition, each person in treatment for a behavioral health disorder has a unique set of family members. Therapists don’t decide who should be in family therapy. Instead they ask, “Who is most important to you?”

Sometimes members of a family live together, but sometimes they live apart. Either way, if they are considered family by the person in treatment, they can be included in family therapy.

- ✓ parents
- ✓ spouses or partners
- ✓ in-laws
- ✓ siblings
- ✓ children
- ✓ elected, chosen, or honorary family members
- ✓ other relatives
- ✓ stepparents
- ✓ stepchildren
- ✓ foster parents
- ✓ foster children
- ✓ godparents
- ✓ godchildren
- ✓ blended family members
- ✓ extended family members
- ✓ friends
- ✓ fellow veterans
- ✓ colleagues who care
- ✓ mentors
- ✓ mutual-help group members
- ✓ sponsors

WHEN SHOULD FAMILY THERAPY START?

Family therapy is typically introduced after the individual in treatment for mental illness or addiction has made progress in recovery. This could be a few months after treatment starts, or a year or more later.

Timing is important because people new to recovery have a lot to do. They are working to remain stable in their new patterns of behavior and ways of thinking. They are just beginning to face the many changes they must make to stay mentally healthy or to remain sober. They are learning such things as how to deal with urges to fall into old patterns,

how to resist triggers and cravings, how to adhere to medication regimens, and how to avoid temptations to rationalize and make excuses. For them to explore family issues at the same time can be too much. It can potentially contribute to relapse into mental illness or substance-using behaviors.

Family therapy tends to be most helpful once the person in treatment is fully committed to the recovery process and is ready to make more changes. The person’s counselor can advise on the best time to start family therapy.

Stages of Recovery

Individual in Recovery From Addiction	Individual in Recovery From Mental Illness	Family
Attainment of sobriety	Working with individual therapist to identify treatment goals	The family system is unbalanced, but healthy change is possible
Adjustment to sobriety	Working through various aspects of the treatment plan (e.g., actively engaging in therapy sessions, taking medications as prescribed, doing therapy “homework”)	The family works on developing a new system
Long-term maintenance of sobriety	Termination of treatment after goals have been achieved and a maintenance plan has been established	The family stabilizes a new and healthier lifestyle



“There is so much hurt and anger.”

WHAT ARE THE GOALS OF FAMILY THERAPY?

There are two main goals in family therapy. One goal is to help everyone give the right kind of support to the family member in behavioral health treatment, so that recovery sticks and relapse is avoided. The other goal is to strengthen the whole family’s emotional health, so that everyone can thrive.

Specific objectives for family therapy are unique to each family, and these objectives may change over time. The family decides for itself what to focus on, and when.

FAMILY THERAPY OBJECTIVES

Distrust	➔	Reconciliation
Guilt	➔	Forgiveness
Stress	➔	Strength
Frustration	➔	Understanding
Despair	➔	Hope
Sadness	➔	Support
Anger	➔	Peace
Conflict	➔	Agreement
Crisis	➔	Resolution



**“We’ve let go of so many
negative emotions.”**





“I wish I knew how to make my daughter quit drinking.”

IS FAMILY THERAPY THE SAME AS FAMILY EDUCATION?

No, family therapy is more than family education. Many behavioral health programs conduct education sessions for families on such topics as a particular mental illness, drug and alcohol addiction, treatment, relapse, and recovery. Families can use this information to better understand what is happening, how it might affect them, and what to do to help the family member in treatment.

Education is important, but many families also need help applying the information they have learned. Family therapy provides a safe and neutral space in which everyone learns how to adjust to life with a member recovering from mental illness or addiction. The therapist helps the family make changes so that members support each other and treat each other with respect, stop enabling unhealthy behaviors, and learn to trust each other.

Working with a specially trained therapist, family members take a close look at how they act with one another. They look at whether they are conducting themselves in ways that are hurtful or helpful. Family members learn how to modify their behaviors so that they support the needs of the person in recovery as well as the needs of the whole family, including themselves. They also learn how to better communicate with each other, and they practice new ways of talking, relating, and behaving.

Sometimes, a family has problems that have been hidden behind the drama of mental illness or addiction. These problems rise to the surface once the person with a behavioral health disorder goes into treatment. The family therapist can help the family talk together to resolve concerns and mend relationships. The family therapist can refer members of the family to individual counseling if they need or request it.

“I’ve learned how to focus on my own actions and responses.”





“I’m worried about how my wife’s mental illness is affecting our daughter.”

WHO CONDUCTS FAMILY THERAPY SESSIONS?

The leader of a family therapy session may be a licensed family therapist, social worker, psychiatrist, psychologist, counselor, clergy member, or some other type of professional. Whatever the title, the leader must meet the legal and professional requirements for working in family therapy. Special training and skills are required, because family therapy is quite different from one-on-one counseling.

The professional who conducts family therapy sessions may be associated with a center that specializes in this work. Sometimes the professional is on the staff of the behavioral health treatment program where the family member is a client.

It’s important that the professional who conducts the sessions be sensitive to the family’s unique characteristics. This person does not have to have the same background as the family in terms of culture, race, ethnic group, or any other factor. However, he or she must be respectful and understanding without being judgmental.

Typically, the family is provided with a 24-hour crisis phone number. If there is a family emergency between sessions, counseling professionals who staff the crisis line can provide support.

**“She’s getting the help she needs
to handle our family situation.”**





“I don’t even know how to be with my parents.”

HOW IS FAMILY THERAPY ORGANIZED?

Family therapy involves the entire family meeting together. Sometimes part of the family meets. The family therapist may work one-on-one with a particular family member, in addition to the family sessions, although this is not typical.

Sessions usually last about an hour and take place at a clinic, at the therapist’s office, or—less often—in a family member’s home. The focus of the session may be on the person in treatment, on another family member, or on the family as a whole. Sessions can be low-key or intense, depending on the purpose of the particular session.

Before starting the first session, the therapist may ask family members to sign a contract. This is a way to show that family members agree to certain behaviors, such as to continue individual treatment or to not interrupt each other. Family members also may be asked to sign a consent form to show that they understand the ground rules for privacy and confidentiality. Usually, everyone

including the therapist is expected to respect the privacy of what is said during each session and not share it with anyone outside the group. There are some exceptions to this rule, which will be explained on the consent form and by the therapist.

In the session, the family therapist may ask questions or listen and observe while the others talk. The therapist does this to learn such things as how family members behave and communicate with each other and what the family’s strengths and needs are. The particular techniques used by the therapist will depend on the phase of treatment for the member in treatment and the family’s readiness for change.

The family therapist may refer the whole family or individual members to extra sources of help. For example, the therapist may encourage family members to go for individual counseling, to join a mutual-help group, or to take classes on topics such as parenting or anger management.

“It feels more natural now.”





“I need to fix the damage I did to my family while on drugs.”

WHAT HAPPENS IN A PARTICULAR SESSION?

There are many things that can happen in family therapy. A session can be devoted to talking about family concerns and how people are feeling. Family members might use the session to talk about a particular crisis or problem that needs solving. Or, they might want to focus on the changes that have been happening.

Another possible topic for a family therapy session is coping skills, such as how to deal with anger, regret, or sadness. Sometimes just letting out feelings and talking about them in therapy sessions can bring relief, understanding, and healing.

The focus of a session might be on learning how to communicate more effectively with each other. For example, the therapist might coach a family

member to speak up, to practice saying “no” to unreasonable demands, or to give a compliment. Family members might be asked to rephrase a statement in a more positive way. The therapist also might help family members improve their listening and observing skills to reduce misunderstanding.

Sometimes the therapist asks family members to do homework before the next session. For example, the therapist might ask family members to watch for nice things that other family members say during the week. The therapist might ask family members to eat a meal together or to do something fun together, like play board games or go bowling. The homework is designed to help family members practice new and healthier ways of behaving with each other.

“I’m learning how to make amends.”





“He’s the problem—not me.”

WHAT IF FAMILY MEMBERS ARE UNWILLING TO TAKE PART?

Sometimes family members are unwilling to join family therapy. There are many possible reasons for this:

Fear. They may prefer to have the family unit stay as it is, even if that is painful, rather than take chances with the unknown.

Fatigue. They may be tired of dealing with the issues.

Concerns about power. They may feel that they have an advantage the way things are—or that they don’t, but family therapy won’t fix it.

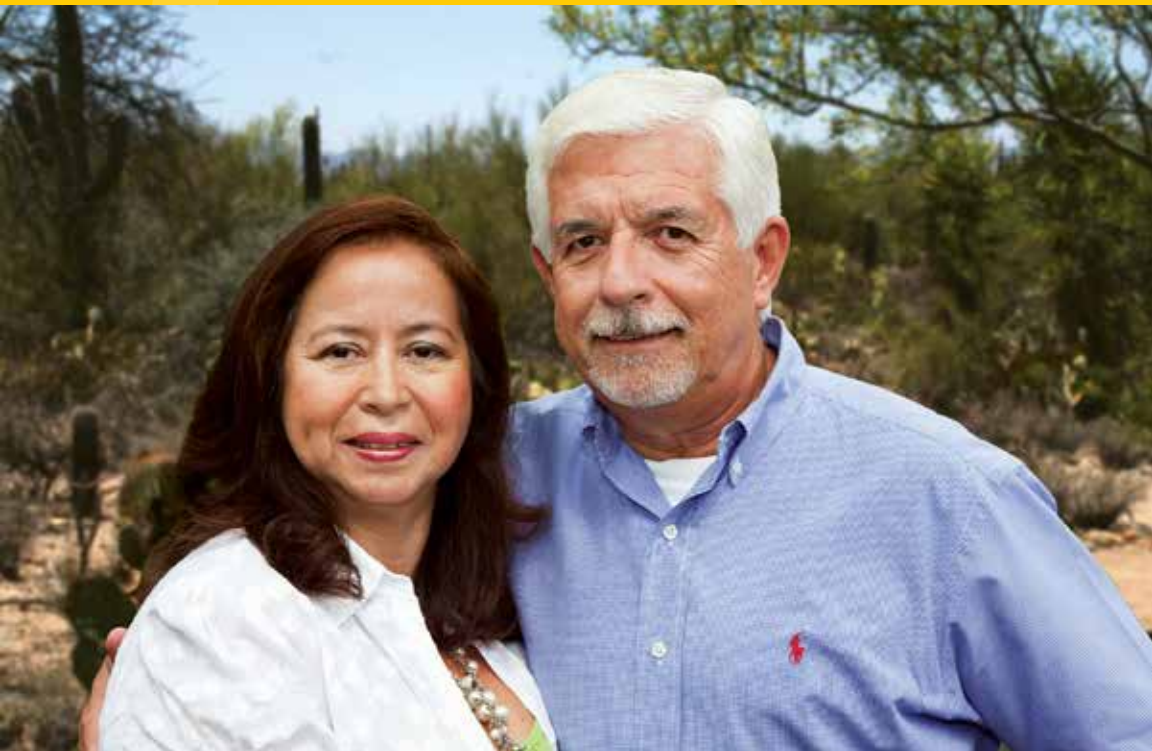
Distrust. They may be unwilling to risk speaking frankly with other family members or in front of a therapist.

Skepticism. They may not be convinced that family therapy will be useful, or they may have tried it before and not liked it.

It may help to have the family therapist talk one-on-one with unwilling family members. Together they can identify the reasons for resistance, figure out how to resolve concerns, and discuss the benefits of family therapy.

Sometimes what’s needed is simply time. Willing members of the family can choose to get started. Unwilling members can join when they are ready.

**“We’re both changing,
and it’s good.”**





“My partner and I need to learn how to live together drug-free.”

IS FAMILY THERAPY EFFECTIVE?

Research suggests that behavioral health treatment that includes family therapy works better than treatment that does not. For people with mental illness, family therapy in conjunction with individual treatment can increase medication adherence, reduce rates of relapse and rehospitalization, reduce psychiatric symptoms, and relieve stress.

For people with addiction, family therapy can help them decide to enter or stay in treatment. It can reduce their risk of dropping out of treatment. It also can reduce their continued use of alcohol or drugs, discourage relapse, and promote long-term recovery.

Family therapy benefits other family members besides the person

in treatment. By making positive changes in family dynamics, the therapy can reduce the burden of stress that other family members feel. It can prevent additional family members from moving into drug or alcohol use. Research also shows that family therapy can improve how couples treat each other, how children behave, how the whole family gets along, and how the family connects with its neighbors.

Family therapy isn't always easy. There will be struggles for everyone involved, but the outcome is worth it. Family therapy is an effective way to help the person in treatment, while also helping the family as a whole.



**“We’re more solid now that
we communicate better.”**



SAMHSA HOTLINES

Find Substance Abuse and Mental Health Services

<http://www.samhsa.gov/treatment>

24/7 Treatment Referral Line

1-800-662-4357 (HELP)

National Suicide Prevention Lifeline

1-800-273-TALK (8255)

<http://www.suicidepreventionlifeline.org>

DIRECTORY OF THERAPISTS

American Association for Marriage and Family Therapy

Provides consumer information and a Therapist Locator Directory.

<http://www.aamft.org>

MUTUAL-HELP PROGRAMS

The support groups offered by the following organizations are not run by professional family therapists. However, they are free and they can be helpful to people with addictions and their family members.

Adult Children of Alcoholics

<http://www.adultchildren.org>

Al-Anon Family Groups

<http://www.al-anon.org>

Alcoholics Anonymous

<http://www.aa.org>

Co-Anon Family Groups

<http://www.co-anon.org>

Co-Dependents Anonymous

<http://www.coda.org>

Families Anonymous

<http://www.familiesanonymous.org>

Nar-Anon Family Groups

<http://www.nar-anon.org>

Narcotics Anonymous

<http://www.na.org>





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1. Download or order from the SAMHSA Store at <http://store.samhsa.gov>.
2. Call 1-877-SAMHSA-7 (1-877-726-4727) (English and Español).

Many KAP consumer publications are also available for download from the SAMHSA Store in additional languages: Cambodian (Khmer), Chinese, Korean, Russian, Spanish, and Vietnamese.





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