

ED 336 712

CG 023 688

AUTHOR Engel, John W.; Lingren, Herbert G.
 TITLE Marriage and Family Therapy: Who Needs It? Where To Find It?
 INSTITUTION Hawaii Inst. of Tropical Agriculture and Human Resources.
 REPORT NO ISSN-0271-9916
 PUP DATE Aug 91
 NOTE 12p.
 PUB TYPE Collected Works - Serials (022)
 JOURNAL CIT Research Extension Series; n127 Aug 1991

EDRS PRICE MF01/PC01 Plus Postage.
 DESCRIPTORS Counseling Effectiveness; Counseling Objectives; Counselor Qualifications; Counselor Selection; *Family Counseling; Marital Instability; Marital Satisfaction; *Marriage Counseling; Psychotherapy
 IDENTIFIERS *Family Therapy

ABSTRACT

Finding a qualified marriage and family therapist that the couple or family will be comfortable with requires some effort on the part of the consumer. There are many people out there who advertise themselves as marriage counselors or family therapists but do not have the credentials. The client must shop around, interview prospective therapists, and evaluate qualifications, services, and approaches, or seek a clinical member of the American Association for Marriage and Family Therapy. For the most satisfying and effective outcome, the couple or family should seek professional assistance before the pain and dysfunction become so great that the motivation to change is lost. All families go through trials and tribulations. Some are developmental and may recede if the family system maintains its integrity during difficult times. But rather than hoping the problems will go away, the couple or family will benefit from dealing with it when it first occurs. Often, this will require the assistance of a trained therapist. (The addresses of these organizations which can provide referrals for therapists are included: the American Association for Marriage and Family Therapy; the American Association of Sex Educators, Counselors, and Therapists; and the National Council on Family Relations.) (CM)

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Marriage and Family Therapy: Who Needs It? Where to Find It?

John W. Engel and Herbert G. Lingren

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CG023688



The Library of Congress has catalogued this serial publication as follows:

Research extension series / Hawaii Institute of Tropical Agriculture and Human Resources.—001.—(Honolulu, Hawaii):

The Institute, (1980-
v. : ill. ; 22 cm.

Irregular.

Title from cover.

Separately catalogued and classified in LC before and including no. 044.

ISSN 0271-9916 = Research extension series - Hawaii Institute of Tropical Agriculture and Human Resources.

1. Agriculture—Hawaii—Collected works. 2. Agriculture—Research—Hawaii—Collected works. I. Hawaii

Institute of Tropical Agriculture and Human Resources.

II. Title: Research extension series - Hawaii Institute of Tropical Agriculture and Human Resources.

S52.5R47

630'.5—dc19

85-645281

AACR 2 MARC-S

Library of Congress

[8506]

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ACKNOWLEDGMENTS

The authors gratefully acknowledge the work of Dr. Vivian Halverson, Department of Human Resources at the University of Hawaii, and Ms. Luon J. Mathews for their contribution to *Marriage and Family Counseling and Therapy in Hawaii: A Consumer's Guide* (Research Extension Series 055, HITAHR, College of Tropical Agriculture and Human Resources, University of Hawaii, May 1985), on which this publication is partially based.

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MARRIAGE AND FAMILY THERAPY: WHO NEEDS IT? WHERE TO FIND IT?

John W. Engel and Herbert G. Lingren

INTRODUCTION

As David and Lisa leave for work, each is cool and distant toward the other. Echoing in their minds is last night's bitter argument, the conclusion of which was unsatisfactory to both. These arguments seem to be increasing in frequency and intensity. Intimate contact between them is decreasing. But they don't know what to do, and the opportunity for connection is lost. They silently ask: "What's wrong?" "Why can't we get along better?" "Should we even be in this relationship?"

In the 1990s, researchers estimate that approximately half of couples marrying for the first time will be divorced. The divorce rate for second marriages is even higher. Some will seek therapy and it will strengthen their relationship. Some will not seek therapy when it might have been beneficial to do so. Those whose marriages are troubled—like David and Lisa—are for the most part couples who want their relationship to improve and endure. But how do they find a therapist who has the training and experience to help them with their issues?

Unfortunately, it is not always easy to find a competent and qualified marriage and family therapist. Not all states have licensing laws or certification requirements that insure minimal standards of training and experience for those who call themselves marriage and family therapists. Hawaii does not license or certify marriage and family therapists, so the public is not protected from unqualified practitioners. Anyone can hang out a shingle and claim the title of marriage and family therapist.

This publication provides some necessary information to help consumers find marriage and family therapy services that are most appropriate for their family's unique problems and situations. To determine what information would be most helpful for someone seeking marriage and family therapy, a survey of clients and providers of marriage and family therapy services was conducted. Clients were asked to identify questions they had about marriage or family therapy early on in their search for help. Therapists were asked to identify issues and information that they considered important in the client's decision to seek help, or in selecting a qualified provider. These questions, issues, and responses provide the organizational basis for this publication.

Why Do People Seek Marriage and Family Therapy?

Usually, people go to a marriage or family therapist for help with a problem in the family system—trouble in the couple relationship, difficulties between parent and child, or general unhappiness in the family. In some cases, people want their family to function more effectively with less conflict. In other cases, there is a family problem that needs solving, a transition that requires adjustment, or a family crisis that needs attention. Some people seek therapy because they feel dissatisfied or unhappy with a relationship. Others wish to enrich an already satisfying relationship.

It is not uncommon for the family to feel highly stressed, which may be related to their financial situation, stressors at work, an unsatisfying sexual relationship, parenting or child-rearing differences, a child's behavior problem, discipline, or daily family chores. Other problems such as use of alcohol or other drugs, religious or cultural differences, in-law relationships, or illness or death of loved ones make it difficult for the family to cope. Most people feel some disenchantment with their marriage at times, feel inadequate in their parenting skills, discover role conflicts, feel jealous, or suspect infidelity.

Often the family knows it has a problem and has tried to solve it, but without much success. When marital and family dysfunction becomes chronic, professional therapy usually is the best solution. Basic individual and relationship problems often underlie the symptoms that family members have, preventing them from making the necessary changes to improve their situation. In many instances, one or more of the family members will deny there is a problem, while others suffer in painful silence. In many cases, changing the way family members communicate and work together leads to solutions and improved family functioning.

What Is the Difference Between Therapy and Counseling?

Marriage and family therapy focuses on creating an environment for greater well-being in primary relationships. It involves skill learning, problem solving, reconciliation, and reconstruction of relationships. It usually involves the couple or the family system or its

parts, and may include in-laws, grandparents, cousins, or ex-spouses and children from a previous marriage.

Counseling is a more generic term, often used interchangeably with therapy, but it means something slightly different. Counseling is an appropriate term when the approach is educational and when advice or guidance is the major approach or strategy being used.

Therapy refers to the systematic analysis of the family's functioning along with appropriate treatment strategies to alleviate discomfort and to create a more viable and satisfying relationship. There may be an educational component, such as learning more appropriate and effective ways of nurturing children; a skills component, such as learning more effective communication or conflict management techniques; and a restructuring component, such as a reorganization of how decisions are made or of how daily chores are assigned. Therapy assists the family to deal with conflict, emotional stress, and pain, and helps them learn strategies to reduce or manage it in a more constructive way. Therapy is an in-depth process of learning to behave in a different manner so the couple or family will experience a more enriched quality of life together.

How Does Marriage and Family Therapy Differ from Individual or Group Psychotherapy?

Marriage and family therapy differs from individual or group psychotherapy in focus and process. It focuses primarily on the couple or family system and the relationships within that system, and only secondarily on the individual. In contrast, traditional individual or group psychotherapy focuses primarily on the individual, and secondarily on family relationships. The process of marriage and family therapy promotes interaction and change in the family system so the family can more effectively meet its needs. In contrast, the process of traditional psychotherapy tends to involve more interaction between client and therapist. Group psychotherapy focuses on the sharing of problems and concerns with the group for their understanding, support, and assistance in the resolution of those problems.

How Do I Know If I Need a Marriage and Family Therapist?

While there is no simple formula that will tell you when to see a therapist, one general rule may be that if the relationship is painful or uncomfortable for you, you could benefit from professional assistance. When the marriage or family system seems to be in chronic conflict,

when satisfaction is low, when people's needs are not being met, it is wise to seek professional help as soon as possible. Therapy should not be a last-minute attempt to remedy the situation. Many couples or families wait too long before getting help, and issues become worse and more difficult to resolve. Nevertheless, it is never too late to make constructive changes in the family system so long as there is some motivation to try to work things out.

Sometimes the stress and pain in the family become so severe that family members cannot function effectively in their work environment, at home, or in school. Sometimes a school counselor, a supervisor at work, or a friend may notice difficulties and recommend professional help. Much of the time family members, even those directly involved, are unaware of the severity of the problem and the need for professional assistance.

To increase awareness of distress in the marriage (or any intimate relationship), Dr. David Olson, marriage and family therapist and professor of family social science at the University of Minnesota, recommends asking yourself the following questions:

1. Do you frequently find fault with or criticize your partner?
2. Do you often think about ways you want your partner to change?
3. Do you often wish you had not gotten involved with this person (or gotten married)?
4. Do you find yourself more withdrawn from your partner and more drawn into yourself?
5. Do you experience depression, tension, or headaches from worrying about your relationship?
6. Have you or your partner been drinking more or taking more drugs recently?
7. Do you feel your disagreements never get resolved and come up again and again?
8. Do you continually argue over seemingly insignificant and minor issues?
9. Are you afraid to express your anger or frustration to your partner?
10. Has your sexual relationship decreased in its frequency and satisfaction?
11. Are you becoming emotionally or socially involved with another person?
12. Do your children take sides with your partner against you, or vice versa?

The more "yes" answers you give, the stronger the recommendation for marital therapy.

Similarly, the following questions may help you become aware of distress in a family system:

1. Does anyone frequently use tranquilizers, energizers, or sleeping aids? Is alcohol use

excessive? Are marijuana, cocaine or crack, or other drugs being used?

2. Does anyone often complain of unexplainable fatigue or illness?

3. Are discussions about or between a spouse, child, or parent stressful? Is there blaming and fault-finding?

4. Are there concerns about excessive anger, withdrawal, or acting out by a spouse, child, or parent?

5. Does a spouse, child, or parent have questionable or unexplained physical injuries?

6. Is behavior inappropriate for the person's age or role in life?

7. Are self-deprecation, abuse of food or drugs, attempted suicide, or other self-destructive behaviors apparent?

8. Does a family member regularly feel lonely, isolated, moody, or depressed?

9. Is there marital distress and a lack of satisfaction with the quality of marital interaction?

10. Does a child have learning difficulties, behavioral problems, or low grades with no physical or intellectual basis?

11. Does a child run away, break laws, or become involved in the juvenile justice system?

12. Does the family have closed communication? Is it unable to discuss disagreements and find solutions to problems?

13. Do family problems persist, despite efforts to resolve them?

The more "yes" answers you give, the greater the likelihood of relationship or family dysfunctioning, and the stronger the recommendation for therapy.

While "yes" answers to the above questions can signal distress in the family system, it would be much better if such problems could be prevented. Families without obvious problems may want to go to a therapist for enrichment of relationships and strengthening of systems, which could prevent many difficulties from developing into severe problems.

FINDING A MARRIAGE AND FAMILY THERAPIST

How Do I Find a Competent Therapist?

Friends or relatives who have benefited from marriage or family therapy in the past may be able to help in the search. A minister, priest, rabbi, or other member of the clergy, a family physician or other professional may provide a referral to a competent therapist. The local mental health association or a mental health information and referral service may also be helpful.

The American Association for Marriage and Family Therapy (AAMFT) is recognized by the federal government as the professional organization qualified to provide the education and clinical training of marriage and family therapists. AAMFT can provide a list of therapists who practice in specific geographic areas. Other professional groups that provide services or make referrals include the American Association of Sex Educators, Counselors, and Therapists (AASECT), the Family Psychology section of the American Psychological Association, local community mental health centers, family service agencies, religious counseling agencies (e.g., Samaritan Counseling Center, Catholic Social Services), and local hospitals or employee assistance programs (EAPs). Therapists in private practice on Oahu typically list their services in the yellow pages of the telephone directory under "Marriage, Family, Child & Individual Counselors." Therapists meeting the clinical training standards of AAMFT can be found listed with the AAMFT logo in the yellow pages as well.

What Qualifications Should I Look for in a Marriage and Family Therapist?

According to AAMFT, a therapist should meet rigorous standards of academic and clinical training. Education and training should include completion of a master's or doctoral degree in marriage and family therapy from a regionally accredited educational institution, or an equivalent degree in some other program with a strong family therapy component (clinical psychology, psychiatry, social work, or pastoral counseling). In addition, the therapist should have at least two semesters of clinical and three semesters of practicum experience while in graduate work, and at least two years of postdegree clinical experience in marriage and family therapy under appropriate supervision.

The therapist's personality, and how comfortable you feel with him or her, are very important considerations as you search for a competent therapist. Compatibility of therapist and client personalities and values can be important in some cases. One way to test for compatibility is to make an agreement with the therapist for a "trial run" of some number of sessions (at least three). If you do not feel comfortable with the therapist after this trial period, or you dislike the person's therapeutic approach, you may wish to try another therapist.

During therapy, you may feel uncomfortable, anxious, even angry. There is a temptation to stop therapy when this happens. These emotions

can be an indication of progress and provide an incentive to continue, however. A skilled therapist will arouse feelings you did not know you had, and will explore these feelings with you to help reduce the discomfort they cause.

What Can I Ask a Therapist over the Telephone or During the First Session?

It is strongly recommended that you "interview" potential marriage and family therapists to find out how well they can satisfy your needs. Competent therapists should be glad to answer your questions about qualifications as well as hours and fees. You can ask them (or their secretaries) some questions over the telephone, while others should be saved for the first session. Keep in mind that time is money for therapists. They charge by the hour or by the session and may have only a few minutes between sessions for telephone conversations. The following questions should provide much useful information:

1. Are you a clinical member of the American Association for Marriage and Family Therapy? Therapists who have attained clinical membership in AAMFT meet or surpass the training and experience requirements for licensure in states that do have licensure laws. While AAMFT does not normally use the word "certified," clinical membership in AAMFT is its equivalent.

2. What kind of experience have you had in treating our kind of problem (e.g., communication, sex, child's behavior, work/family stress, lack of intimacy, quarreling)? Some therapists may not have adequate training in sex therapy, for example. Others may focus primarily on children's problems, while others may lack training in skill development (e.g., communication, negotiation). Most qualified and experienced therapists can help treat your relationship problems. If you feel this not occurring, terminate treatment and ask for a referral.

3. What is your treatment approach? Some therapists specialize in specific treatment modalities, such as behavioral, psychodynamic, feminist, constructivist, interactional, or brief therapy. Some specialize in a particular "school" of therapy, such as strategic, structural, Bowen, Milan, or object-relations. Most operate under an umbrella called family systems therapy. Some prefer working with families of several generations, while others work with nuclear families, couples, parent-child or sibling systems, individuals, or any combination of people. Some family therapists insist on seeing the whole family together, while others

are willing or prefer to work with different family subgroups. Typically, decisions regarding treatment or techniques depend upon and follow assessment of the problem, which may take one to several sessions.

4. How much will it cost? Community mental health centers, family services agencies, and churches may offer free counseling or charge fees based on family income. Marriage and family therapists in private practice generally charge between \$65 and \$150 per hour. In some situations, they may have a sliding scale based on family income, or fees may be negotiable in special cases. To some extent, charges vary according to the type of treatment. Co-therapy (with two therapists, often a man and a woman) usually costs more than if only one therapist is involved.

5. Is marriage and family therapy covered by insurance? Marriage and family therapy may or may not be covered by insurance. It depends upon the credentials of the therapist, the diagnosis of the problem, the agency the therapist works for, and the policy of the insurance company.

6. Where are therapy sessions held? Most sessions are held in the therapist's office. Some professionals are doing "home-based" family therapy, however, and others may be willing to meet elsewhere if time and treatment approach permit.

7. How long will therapy sessions last? While this can vary, the "50-minute hour" is most common. Longer sessions are often scheduled for families or groups because of the larger number of people involved.

8. When can therapy sessions be scheduled? Most therapists try to maintain normal (8:00 to 5:00) office hours. Many therapists are willing to schedule sessions during evening or on weekends to accommodate families with children or working couples, however.

9. Is there an appointment cancellation policy? Many therapists charge regular fees for missed appointments that are not cancelled early enough. In most cases, the therapist does not charge if a session is cancelled at least 24 hours in advance. Ask your therapist about the cancellation policy.

10. Will the therapist be available by telephone in times of crisis? Most therapists are available for emergency phone calls or appointments. Some therapists arrange for other professionals to be available during times when they cannot be reached (e.g., vacations, holidays, illness).

11. How often are therapy sessions scheduled? One session per week is most common. In

some cases sessions are scheduled twice a week; in others, sessions are scheduled every two weeks. The treatment plan should determine the frequency of therapy sessions.

12. What is the average length of treatment for your clients? Length of treatment depends upon various factors, including seriousness of the problem, the type of treatment plan, and the behavior change desired. Generally, the more serious the problem, the more work is required to alleviate it. It depends more upon the number of individuals involved, the type of change desired, and the motivation of the clients to accomplish the treatment goals. In general, it is not uncommon for 10 to 25 sessions to be needed for changes to be significant and permanent.

How Can I Avoid Quacks and Charlatans?

Clinical members of AAMFT have their own code of professional ethics. A copy of AAMFT ethical standards can be obtained from any clinical member in Hawaii or from the American Association for Marriage and Family Therapy (the address is given on page 8). In addition, because most professionals tend to follow similar ethical codes, some generalizations can be made about what to expect and what not to expect in therapy. The following are warning signs that may be helpful in identifying and avoiding a nonqualified individual (a quack, a charlatan, or someone who does not abide by the ethics of the profession):

1. Are services advertised flamboyantly? Professional ethics restrict marriage and family therapists from listing more than their name, degree, specialization, certification, and address. Given this restriction, the consumer should be at least cautious about large displays or other advertisements making extravagant claims.

2. Are diagnoses made quickly, even over the telephone, without analysis of relevant facts?

3. Are quick or guaranteed solutions to problems offered? In most cases, a quick and easy solution is unrealistic, particularly when the clients have already tried to solve their problems without professional help.

4. Are fees either excessive or too low? Is the therapist vague or unclear about fees?

5. Does the therapist appear uncomfortable with requests for information regarding credentials, training, or experience?

6. Does the encounter include intimate, sexual, or obscene elements? Is there an exclusive focus on sex or other behavior that appears to be unrelated to the problem or the treatment goals?

7. Does the therapist insist on home visits or house calls? While some professionals do offer home-based therapy, insistence on house calls may indicate that there is no office or professional practice.

8. Does the therapist claim to have all the answers and skills, and resist your request for referral to other professionals?

While the above have been found to characterize nonprofessional individuals, one or two "yes" answers do not necessarily indicate a charlatan. The wise consumer will refuse to submit to any encounter or treatment that is uncomfortable, degrading, or humiliating, however.

In summary, one can find highly qualified and competent professional marriage and family therapists by shopping around, by requesting referrals and recommendations, and by interviewing prospective therapists and evaluating their qualifications, services, and approaches.

ISSUES AND CONCERNS ABOUT MARRIAGE AND FAMILY THERAPY

Is Marriage and Family Therapy Only for "Sick" Marriages or Families?

The idea that only very "sick" marriages and families can benefit from therapy is a myth. Actually, most marriages, and most families, can benefit from professional help at some time. Change, stress, conflict, and problems can be expected in any relationship and therefore are a normal part of living together. The issue for most of us is whether we want to deal with our normal problems ourselves or need competent professional help. We make similar decisions when our cars are not running as smoothly as we would like. The professional marriage and family therapist is also trained to strengthen families that are already well functioning and happy, to prevent problems from arising and increase the quality of life.

Do I Need to Have a Problem to Seek or Benefit from Therapy?

No, you don't need to have a problem to seek or benefit from marriage or family therapy. Unfortunately, many families don't seek professional assistance until the problem is much more serious than it needed to be. Sometimes they wait too long—and it is too late. Some of the more serious problems could have been alleviated, or even prevented, if professional help had been sought early enough. Indeed, there need not be a problem at all. Most couples or families can strengthen their adequately functioning rela-

tionships. A bumper sticker said it very aptly: "Marriage is like a car; without fuel it won't go far." We need to think about activities and skills that will help us prevent problems so we can maximize the potential of our life together.

Do I Have to Be Married to Seek Therapy?

Persons need not be married to seek or benefit from therapy. Any two people who want to improve their relationship can benefit. Premarital counseling is increasingly popular, and is recommended by many therapists, clergy, church groups, and researchers in family therapy. Some religious groups require premarital counseling before performing a marriage. Postmarital counseling (for divorced couples who share children, extended family, friends, or property) is also increasingly common. Unmarried persons living together could benefit because they encounter the same problems as married people. Persons in other kinds of relationships, whether friendships or long-term relationships, seek assistance either to solve problems or to strengthen their relationship.

Must a Therapist Experience a Given Problem to Be Able to Help Someone Else?

No. The idea that only a therapist who has experienced the same problem can understand or help is a myth. Professional education, training, and practical experience help the therapist to understand, diagnose, and treat the condition without necessarily having direct personal experience.

Must the Therapist Be of the Same Gender to Be Helpful?

In individual therapy, a person may choose someone of the same gender if that feels more comfortable. But it is not usually necessary with a qualified and skilled therapist who is sensitive to gender differences. In marital therapy, that may occasionally be an issue for one of the partners. But in marital therapy the client is the marriage, not the individual. The therapist works primarily on relationship issues with the couple. If gender is an issue, perhaps co-therapy, with a person of each gender, will be a workable solution.

Is the Goal of Marital Therapy Always to Save the Marriage?

The objective in marital therapy is not always to "save" the marriage. Instead, therapy objectives are defined by the clients in consultation with the therapist. Client couples usually want to improve their relationship, if not save the marriage. Some couples seek

professional help after they have already decided to divorce. Marriage counselors also help people separate or negotiate the details of divorce, if that is the decision of the clients. Even couples who have previously divorced sometimes seek professional help to facilitate communications (e.g., regarding custody or visitation of children) and other aspects of the relationship that still exist despite a divorce.

Is It Necessary for Both Spouses or All Family Members to Attend Sessions?

In family therapy, one goal is to change the interaction patterns of family members so the relationships will be more satisfying. This suggests that it would be more effective and efficient if all family members participated in part of the therapy process. If the goal is to enrich or create a more satisfying marriage, the active participation of both persons will be most productive. If one family member is uncooperative and unmotivated, however, some productive work can still be done. Uninterested family members often get involved in therapy later if there is at least one motivated person involved.

Will the Therapist "Fix" or Change My Spouse or Misbehaving Child?

Therapists are neither mechanics nor magicians. They cannot "fix" a relationship nor change a spouse or child. Instead, they help people change themselves and their relationships. Although subtle, the distinction is important because, in therapy, the clients are learning how to take charge of themselves and create the kind of relationships they want. To facilitate self-control, self-responsibility, and relationship change, most therapists help clients explore options and alternatives rather than tell clients what to do, give advice, or make decisions for them. Clients with problems so serious that they cannot make decisions for themselves concerning their life, marriage, or family are poor candidates for marriage and family therapy. They may be referred elsewhere for individual psychotherapy and other treatment.

How Are Therapy Goals Set, and Can They Be Changed?

The goals of therapy are set by the client in consultation with the therapist. The therapy that follows should try to accomplish those goals. Therapeutic goals often change as therapy progresses. Many couples or families don't seek help until their problems are severe and painful. The pain can usually be reduced and life made more tolerable after a period of treatment. For

some families that is enough; their goal has been reached and therapy is terminated. Others want to make long-term and lasting changes in their life. New goals will be established as short-term goals are achieved.

As family therapist Carl Whitaker asks, "Do they want to bang on the piano or do they want to play Beethoven?" As consumers become more knowledgeable, more and more couples and families wish to make permanent changes in family structure and interaction patterns when they seek a therapist.

Are Therapy Sessions Confidential?

You can expect the therapist to consider everything you say in sessions to be confidential. The only exceptions to this are situations where a child is being abused, or where there is imminent danger to human life. In such cases, the therapist is required by law to report the situation to authorities, so that people's lives can be protected. In general, anything said to a therapist in a session, whether by an adult or child, is kept in strictest confidence unless written permission is granted to release it.

Do Therapists Become Emotionally or Physically Involved with Their Clients?

While many therapists are warm and caring, they are ethically and legally forbidden to become sexually involved with their clients. Therapists must establish clear boundaries and limits to any nonprofessional relationship (i.e., friendship) with clients outside of the office. When friends seek therapy, most professionals will refer them to another therapist. This helps maintain friendships and insures the clients' confidentiality and privacy.

Whose Side Will the Therapist Be On?

When couples or family members disagree, they sometimes want the therapist to settle things for them. They want the therapist to decide "who's right" and "who's wrong" in the relationship. Marriage and family therapists try not to take sides, except to be on the side of the relationship or the family as a whole. Fault-finding or blaming is destructive. Instead, the therapist focuses on relationships rather than individuals, even when they are doing therapy with only one person at a time. Therapists are concerned about "what" the problem is, not "who" the problem is. In focusing on the relationship, the therapist will try to help clients understand how the family system works, how what one person does affects others, and trade-offs and consequences of decisions people make. Therapy involves a search for constructive and

positive ways of making decisions and dealing with differences, feelings, and stress.

How Effective Is Marriage and Family Therapy?

It all depends. Marriage and family therapy is not effective for everyone and for all problems. Success depends upon a number of factors, including the motivation of the people involved; their willingness to make changes, to be patient with the process, to have realistic expectations about the outcome of therapy, and to put up with discomfort while making changes; the extent to which they can make the changes lasting and not revert to old patterns of behavior; and last but not least, the knowledge and skill of the therapist. Marriage and family therapy is the most effective treatment modality for solving problems of families and couples in long-term relationships.

Can Marriage Therapists Help Couples with Sexual Problems?

Marital relationship problems often have negative effects on sexual interaction and satisfaction. If the sexual problem is primarily a symptom of a dysfunctional love relationship, traditional marital therapy appropriately treats the sexual problem by treating the relationship. On the other hand, a sexual problem could be primary, and be having negative effects on a relationship. In this case, the focus of marital therapy on the relationship would be less effective because it would be focusing on the symptom rather than the cause. Since 10 percent or more of sexual problems have a physical basis, it is important that clients be referred to an appropriate physician to rule out a physical cause of the problem before starting behavioral or relationship sex therapy.

Consumers who want to find a sex therapist on their own, without a referral, should take the same precautions suggested earlier in looking for a marriage and family therapist. Sex therapists are not licensed in most states, so the consumer must be on guard against inadequately trained professionals or untrained individuals who claim to be sex therapists. In the absence of licensure laws, consumers must rely on professionals themselves to establish standards of competence. On the national level, the American Association of Sex Educators, Counselors, and Therapists certifies sex educators, counselors, and therapists on the basis of training, supervised experience, and an examination.

What Kinds of Questions Will the Therapist Ask?

The therapist will try to identify all the

dimensions of the problem, understand what the clients want, and measure their motivation to work for change. Several types of questions that clients might think about in preparation for therapy are these:

1. Why are you in therapy? What do you wish to change in a few weeks? In the long run, what do you hope to get out of coming here? While goals may change as therapy progresses, the clearer that clients are about goals from the start, the easier it will be to work towards them.

2. How committed are you to working on your problem? How much time, effort, and money will you commit? Will you change yourself? How much patience will you have if the progress is slower than you would like? These questions are not only about the investment of time and money, but also are about the depth of your commitment to your relationship.

3. How well do you communicate? How honestly and freely do you communicate your feelings? Can you listen without judging and criticizing? What are your decision-making patterns? How do you manage differences and disagreements? Communication skills are needed both to identify the difficulties and to implement the strategy to overcome them.

4. What is your family history? What was the relationship between your parents like? Grandparents? What destructive behaviors were there? Were there patterns of physical or emotional abuse, alcoholism, divorce, or other dysfunctionality? Many of our own ways of responding are learned from our parents and grandparents. Destructive patterns need to be broken.

5. When was the last time you had a physical examination? Are you currently taking any medication or drugs, or are you receiving treatment for a medical or mental health problem?

SUMMARY

In summary, finding a qualified marriage and family therapist that the couple or family will be comfortable with requires some effort on the part of the consumer. There are many people out there who advertise themselves as marriage counselors or family therapists but do not have the credentials. So the client must shop around,

interview prospective therapists, and evaluate qualifications, services, and approaches, or seek a clinical member of the American Association for Marriage and Family Therapy.

For the most satisfying and effective outcome, the couple or family should seek professional assistance before the pain and dysfunction become so great that the motivation to change is lost. All families go through trials and tribulations. Some are developmental and may recede if the family system maintains its integrity during difficult times. But rather than hoping the problem will go away, the couple or family will benefit by dealing with it when it first occurs. Often, this will require the assistance of a trained therapist. Remember, "If it is to be, it is up to me."

SOURCES OF INFORMATION

American Association for Marriage and Family Therapy (AAMFT)
1100 Seventeenth Street, NW
The 10th Floor
Washington, DC 20036

AAMFT is the foremost professional organization in the country for marriage and family therapists. AAMFT clinical membership indicates certification with qualifications that meet high standards of academic and clinical training. People can write to AAMFT for referrals to qualified marriage and family therapists who practice in their geographic area.

American Association of Sex Educators, Counselors, and Therapists (AASECT)
435 N. Michigan Ave., Suite 1717
Chicago, IL 60611

AASECT certifies sex educators, counselors, and therapists.

National Council on Family Relations (NCFR)
3989 Central Ave. N.E., Suite 550
Minneapolis, MN 55421

NCFR certifies family life educators.

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