

SECOND EDITION



SOCIAL WORK PRACTICE WITH FAMILIES

A RESILIENCY-
BASED APPROACH

MARY PATRICIA VAN HOOK

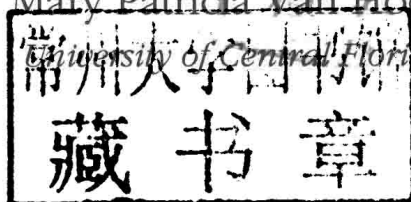
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A Resiliency-Based Approach

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Mary Patricia Van Hook

University of Central Florida



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Preface

The term *resiliency* has received increased attention with widespread recognition that people have the ability to cope with a variety of difficult life events. The issue of *Newsweek* marking the ten-year anniversary of the tragic events of September 11 had RESILIENCE in bold letters on the cover. Communities seeking to restore life after deadly tornadoes or floods are described as resilient. The strengths and assets-based approaches to micro and macro practice rely on concepts associated with the literature on resiliency. For me personally, the path to thinking about resiliency began early in my social work career as part of an attempt to understand how people managed to not only overcome difficult early life experiences but to emerge as contributing individuals.

As a beginning social worker I was working at a major New York City teaching psychiatric hospital on the children's services unit. In the course of arranging with a local foster care agency to place one of the children, we met the prospective foster father, a compassionate and responsible family man and father of two children. He and his wife were willing to open their home to a five-year-old boy from our program. He told his own childhood story of going from foster home to foster home until he grew too old for the foster-care system. During these years he developed the goal of providing a stable foster home to protect other children from his own experience. The time had now come to fulfill this commitment and he and his wife agreed to accept this little boy into their home. After meeting with this prospective foster father, the staff of the children's services discussed our own limitations in understanding the emotional and interpersonal strength of this man. If he had been a patient in the hospital and we had been asked to explain why he was in the hospital and unable to function or relate effectively with other people, we would have had no difficulty explaining his illness. We would have talked about attachment problems, ego deficits, and other contributing factors. We recognized that our theoretical tools had limited answers for why he was the caring, responsible man that he currently was. We were humbled at the complex nature of human beings and the presence of strength despite great odds.

Several years ago a colleague and friend of mine received a major award for his contributions to the field of mental health. He had been responsible for creating some important changes in mental health services and had

developed and administered several important mental health programs. In his acceptance speech, he described the source of his commitment to making a difference in the services offered. When he was a child, his father, a volunteer fireman, had died rushing to respond to a fire. He and his brothers were then raised by their mother, a fragile woman with many serious mental health problems. She was in and out of hospitals, and the boys experienced the stigma of family mental illness in their small community with very limited resources to help the family. As a result, he grew up dedicated to ensuring that other families would receive the help they needed—help that had not been available to him and his family. He became a committed and effective leader in the field of mental health, especially in providing care to those in underserved areas. When I described my friend's background to my students and asked for their description of his current situation, their stories were replete with pathology—inability to hold down a job, problems in relationships, perhaps substance abuse. They were surprised and rather skeptical when I described instead a caring husband and father, a respected leader in the mental health field, and a good friend to those around him. Perhaps if we had met his two older brothers, both of whom grew up to be dedicated public servants, and had learned more about the legacy left by his father we would have had some clue as to the source of his resiliency.

In the media we hear and read of children caught up in crime and drugs within their troubled neighborhoods. Many of these children join the case rolls of social workers and other counselors. Their stories reveal the trauma and ongoing dysfunction in the lives of the people involved. But receiving less attention are the children who somehow manage to forge productive and satisfying lives despite living in the same areas. We live in a world in which people must contend with the aftermath of accidents, violent actions, or severe illness that leaves families without a parent or partner. Other families face problems of poverty or political or social oppression. Families experience the loss of children through illness or accidents. No family is immune to at least some of these adverse life events, and many of the families that we see in social work have experienced several of them.

Social workers and related professionals realize that while discovering and identifying why people develop problems and disabilities are important, this information is inadequate for the assessment and treatment process. It is essential to find answers to how people manage to endure, cope, and even sometimes thrive under the troubles that can be part of the human condition. It is further important to identify the specific aspects of a person's life that make such coping possible (Blundo, 2002). The strengths perspective reminds us that such answers are critical in the design and implementation of prevention and treatment efforts and can promote the healing process (Saleebey, 2000). McQuaide (2000) in writing about women's resiliency at midlife goes even further. She describes assessment and treatment that is

vulnerability- and pathology-based as participating “in the process of subjugation—the subjugation of the resilient selves” (p. 74).

Recognizing the importance of identifying sources of strength, vitality, and effective coping in our work with families, this book draws upon the concept of resiliency—*the ability to bounce back after difficult times*. Resiliency offers a theoretically and empirically grounded framework for assessing the strengths of families and enhancing their ability to cope with difficult life events. This book is organized to explain the concepts of resiliency and the process of engaging and assessing families in ways that promote resiliency. It further links assessment with the selection of appropriate treatment models and techniques and illustrates how these models are used with families.

Part I of the book introduces the reader to the concepts of resiliency, the process of engaging and assessing families using a resiliency perspective (chapter 1, “The Nature and Sources of Resiliency”; chapter 2, “Setting the Stage for Work with Families: Development of the Therapeutic Alliance”; and chapter 3, “Assessment of Families”). Chapter 4 expands the treatment of resiliency regarding risk and protective factors in terms of cultural and family structural issues.

Part II discusses important family counseling approaches from a resiliency-based perspective (social learning/cognitive, psychoeducational, structural, solution-focused, narrative, multisystems, family-systems-Bowenian, and object relations). Each chapter identifies the key tenets of the model, ways in which it can promote resiliency, the role of the therapist, key treatment strategies, and the application with specific families. Several chapters include information about adaptations of the approach for specific cultural groups or problems facing families. This section concludes with chapter 13, “Spirituality,” an important aspect of life that can play a role in various models.

Part III includes chapter 14, “Families Coping with Difficult Life Circumstances,” which discusses the literature in terms of risk and protective factors for families that are facing a variety of difficult life events. Chapter 15, “Conclusion,” includes a brief summary of the elements of a resiliency-based approach to social work practice with families and a discussion of the important aspects of this approach in strengthening families.

Note: Some of the case illustrations in this book are drawn from the lives of real families. All names and identifying information have been changed to preserve confidentiality.

Competencies

This book is designed to address important competencies required by the Council on Social Work Education. The following identifies practice and human behavior competencies and ways in which they are addressed.

2.1.3 Apply critical thinking to inform and communicate professional knowledge.

A. Distinguish, appraise, and integrate multiple sources of knowledge including research-based knowledge and practice wisdom.

This approach is infused through the book. It incorporates information drawn from the world of research-derived knowledge and practice wisdom and defined as such. This information is presented to enable readers to integrate this information to draw informed decisions in the area of assessment and treatment.

B. Analyze models of assessment, prevention, intervention, and evaluation.

While the book is organized in terms of the basic theoretical framework of resiliency theory, the premise of the book is that resiliency theory can be a tool for selecting specific models of assessment, prevention, intervention, and evaluation. The book gives a basic model of assessment in the “Nature and Sources of Resiliency” chapter and the “Assessment of Families” chapter. It then moves beyond this to draw upon a number of specific theoretical frameworks that can be used for a specific type of assessment, model of prevention, intervention, and evaluation. This process occurs in all the chapters on treatment models (chapters 5–13) as well the chapter on “Families Coping with Difficult Life Circumstances.”

1.2.4. Engage diversity and difference in practice.

A. Recognize the extent to which a culture's structures and values may oppress, marginalize, alienate, or create or enhance privilege and power.

This issue is addressed in several ways in the book. Chapter 1 describes some of the important contextual risk factors that include poverty, oppression, neighborhoods that lack good schools, and problems regarding economic opportunities. These contrast with protective factors

that provide individuals with economic security, safe neighborhoods, good schools, and economic opportunities. Issues related to cultural structures that oppress and marginalize are further discussed in the chapter on culture, specifically a detailed discussion regarding ways in which members of cultural groups in the United States and Canada (including Latinos, African Americans, First Nations and other Indigenous peoples, and families of Asian origin) and family structure (gay and lesbian families) have been oppressed during their history as well as current marginalization. Case examples further illustrate these issues.

B. Gain sufficient self-awareness to eliminate the influence of personal biases and values in working with diverse groups.

In addition to information about diverse cultural groups that is designed to broaden one's understanding of diverse groups (especially chapter 4 plus case illustrations throughout the book), there is also a discussion about the issue of self-reflection in this book. It is especially addressed in terms of the barriers to the engagement process (chapter 2) and the need for self-reflection in dealing with spirituality and object relations.

C. Recognize and communicate their understanding of the importance of differences in shaping life experiences.

The chapters addressing assessments (chapter 3) and engagement (chapter 2) address frameworks to help the reader understand differences that shape the life experience (for example, culture, life cycle issues, unique family circumstances) and ways to incorporate these in the engagement and assessment process. The subsequent discussion of treatment models further points out how differences in family characteristics and life stories shape the nature of approaches to families.

D. View themselves as learners and engage those with whom they work as informants.

The treatment approach used in this book represents a partnership model between the counselor and the family members. In order to create an effective partnerships relationship, counselors must view themselves as learners from the family. Family members have the role of informing the counselor about the nature of the family, their goals, and their choices in terms of ways to address these goals. This crucial role of the family helps give a message of strength to the family members.

2.1.7. Apply knowledge of human behavior and the social environment.

A. Utilize conceptual frameworks to guide the processes of assessment, intervention, and evaluation.

This book is organized around conceptual frameworks to guide the process of assessment, intervention, and evaluation. In addition to an introduction to resilience (chapter 1), and chapter 3 ("Assessment"), the book

contains a series of chapters (chapters 5–13) that describe specific conceptual frameworks and the process of assessment, intervention, and ongoing evaluation in the use of these intervention frameworks. The resiliency framework is used as a means of selecting appropriate types of interventions. In addition, chapter 14, “Coping with Difficult Life Circumstances,” also describes a series of problems facing families from a resiliency framework and some of the interventions that would be appropriate.

B. Critique and apply knowledge to understand person and environment.

This book draws upon the resiliency framework to critique and apply knowledge about persons and the environment. It gives a framework in chapter 3, “Assessment,” and expands on this in the further chapters 5–13 regarding intervention methods. It also draws upon resiliency theory to understand persons and their environment in chapter 4, “Cultural Issues, Family Structure, and Resiliency.”

1.2.10 (a)–(d) Engage, assess, intervene and evaluate with individuals, families, groups, organizations, and communities.

A. Substantially and effectively prepare for action with individuals, families, groups, organizations, and communities.

The entire book is designed to give social workers the tools to prepare them to take action with families and family members (individuals). While the focus is on families, there is also discussion regarding interventions that are community-based (for example, response to First Nations and Inuit youth, multisystems model of treatment). Although the emphasis in this book is on families, there is also a discussion of the role of community risk and protective factors in chapters 2 through 14.

B. Use empathy and interpersonal skills.

The focus of this book is to enable the reader to use empathy and interpersonal skills informed by understanding of the family and its members. Chapter 2 especially addresses the skills involved in joining with a family. The subsequent chapters, especially chapters 5–14, identify skills in the assessment and intervention process.

C. Develop a mutually agreed-upon focus of work and desired outcomes.

The resiliency perspective discussed in this book is predicated upon a partnership between the family members and the counselor. Such partnerships need to have mutually agreed-upon focus and outcomes. Chapter 2, “Setting the Stage for Work with Families,” discusses this issue in depth. The issue is discussed further in the chapters regarding specific models of treatment (5–13).

D. Collect, organize, and interpret client data.

Chapter 3, "Assessment of Families," is organized around the process of collecting, organizing, and interpreting client data. It uses the resiliency risk and protective factors model for organizing the data regarding individuals, families, extended family, and wider community as it pertains to the family system. Chapters 5–13 further this process by discussing the process of collecting, organizing, and interpreting client data in terms of specific treatment approaches.

E. Assess client strengths and limitations.

Assessment of client strengths (protective factors) and limitations (risk factors) plays a key role in this book. Chapter 1 describes some of the risk and protective factors that have been identified in the research and practice literature. Chapter 3, "Assessment of Families," describes the process of assessing family strengths and limitations (at the level of individuals, family, and community). Chapters 5–13 discuss assessment of these issues through the lens of specific treatment approaches.

F. Develop mutually agreed-on intervention goals and objectives.

This book is based on a premise that a partnership between the family members and the counselor is the appropriate approach. As a result, goals and objectives must be mutually agreed upon. Chapter 2, "Setting the Stage for Work with Families: Development of the Therapeutic Alliance," describes the process of developing these mutually agreed-upon goals and objectives. The process is further discussed in chapters 5–15 in terms of specific treatment models.

G. Select appropriate intervention strategies.

The premise of this book is that the counselor must select an appropriate intervention strategy based on the assessment process. Chapter 3, "Assessment," begins the process of linking assessment to treatment models. Chapters 5–13 further provide clinical and theoretical information to identify the nature of an appropriate treatment approach for this particular family at this point in time.

I. Implement prevention interventions that enhance client capacities.

A resiliency approach views life as a circular process. As a result, as family members are able to cope with life events more effectively by changing the ways they appraise them, by learning new skills, and by experiencing themselves as capable people, they are able to cope with future life difficulties in a more effective manner. From this perspective, treatment and prevention are part of this circle. The book describes treatment approaches that are designed to enhance the capacities of clients

to cope. The introduction to resiliency chapter gives the theoretical basis for understanding how these life changes have a long-term prevention effect. Chapters 5–13 describe specific approaches. In addition, in the discussion regarding culture (for example, military families, Inuit youth), and problems (for example, substance abuse), issues related to prevention are included. The psychoeducational model has a strong prevention component.

J. Help clients resolve problems.

The entire book is organized around theoretical and treatment approaches that are designed to help clients resolve problems. The chapter on “Cultural Issues, Family Structure, and Resiliency” includes information about coping with problems, especially in terms of military families. While introduced earlier, information about coping with problems especially occurs during the chapters addressing the specific treatment approaches: chapters 5–13. Chapter 14, “Coping with Difficult Life Circumstances,” describes the risk and protective factors created by problems and some of the treatment approaches that can be useful in helping families cope with these problems.

K. Negotiate, mediate, and advocate for clients.

While the primary focus in this book is on work with clients, chapter 2 includes a discussion of potential reasons why clients might be reluctant to engage as a result of issues related to the referring agency or other services and the importance of advocating for clients and interpreting the client’s situation to the referring organization. The chapter “Multisystems Family Therapy” includes an extensive discussion about the importance of working with communities to develop new services to meet community needs, of advocating on behalf of clients, and the importance of mediating between families and community services to help families receive appropriate help.

L. Facilitate transitions and ending.

The treatment approaches in this book are designed to help families develop the skills and resources to address the problems that they are facing as well as gain strengths for future life issues. The discussion in chapter 10, “Multisystems Family Therapy,” specifically addresses the issues involved in helping families access other services and the transition process required. Helping families gain a sense of themselves as capable of addressing their life struggles (self-efficacy) and identifying the nature of these strengths (their coping strategies) is an essential part of the ending process. Part of the ending process is the consolidation of gains, and this topic is part of the treatment discussions.

M. Critically analyze, monitor, and evaluate intervention.

The partnership model supported by this book suggests that the process of evaluating an intervention is part of the partnership process. Counselors and family members together identify if and how the intervention approach is being helpful and modify it accordingly. Chapters on treatment approaches also contain information regarding evaluation studies of treatment approaches as they relate to specific problems and family types.

Contents

Acknowledgments	xiii
Preface	xv
Competencies	xix

Part I	Introduction to Resiliency-Based Practice	1
Chapter 1	The Nature and Sources of Resiliency	3
	What Is Resiliency?	3
	Types of Resiliency	4
	Risk, Vulnerability, and Protective Factors	4
	Life Events and Resiliency	7
	Historical Background	7
	Individual Resiliency	8
	Environmental Level	11
	Interpersonal Level	12
	Individual Level	13
	Family Resiliency	15
	Principles of Family Resiliency	16
	Key Factors of Family Resiliency	17
	Belief Systems	17
	Organizational Patterns	25
	Coping Process	26
	Social Support Systems	28
	Economic Resources	29
	Community Context	30
	Reactivation of Past Events	30
	Implications for Family Assessment and Interventions	30
	Family Crisis and Resiliency Models	31
	Adjustment Phase	32
	Family Adaptation Phase	35
	Family Appraisal Process	35
	Case Examples	38
	Family Illustrations	41