Creative family therapy within the framework of a manual based treatment model



Presented by

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What is MST?

- An evidence-based model för outpatient treatment for families with children between 12 and 17½ years with serious behavior problems
- MST is developed based on research that started at the Medical University i South Carolina i USA
- In Sweden, families are referred to MST via social services
- There are 9 MST teams in Sweden today
- A team comprises 1 team leader and 3-4 therapists



A short description of MST

- Intensive work, several sessions per week at times when the family can meet
- We work at home with the families, in the schools and other places where the youth is found, for a time-limited period of 3 to 5 months
- Family can reach a therapist via telephone 24/7
- Multi-systemic meaning that we work to link several different "systems" including the family, school, other community resources
- No two treatments look exactly alike because we always begin with an analysis of the factors leading to the problem behaviors for a particular child and then work to eliminate those factors given the strengths present in that particular system



Target population

Youth between 12 and 17 ½ years of age with serious behavior problems:

- Criminal behavior
- Aggressive behaviors including violence and the threat of violence
- Serious school problems
- Drug or alcohol problems
- Staying out all night or running away from home

An adult som kan and/or will take responsibility as a parent



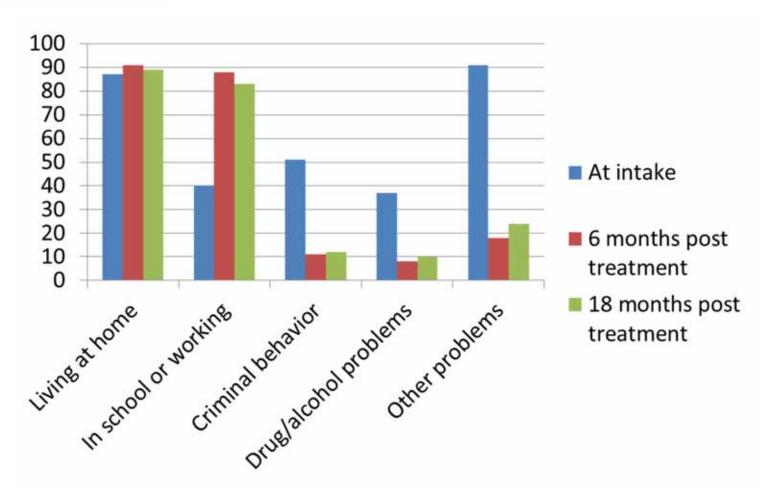
Quality Assurance

It's important that we can assure that we are true to the model and research. We require:

- •A written analysis of each case each week
- Supervision and consultation of each case each week
- Model adherence at all levels (therapist, supervisor, consultant) verified through statistically reliable instruments
- •Individual development plans for therapists, supervisors, consultants
- •Structured training at hire and continuous training sessions for teams (4 times per year)



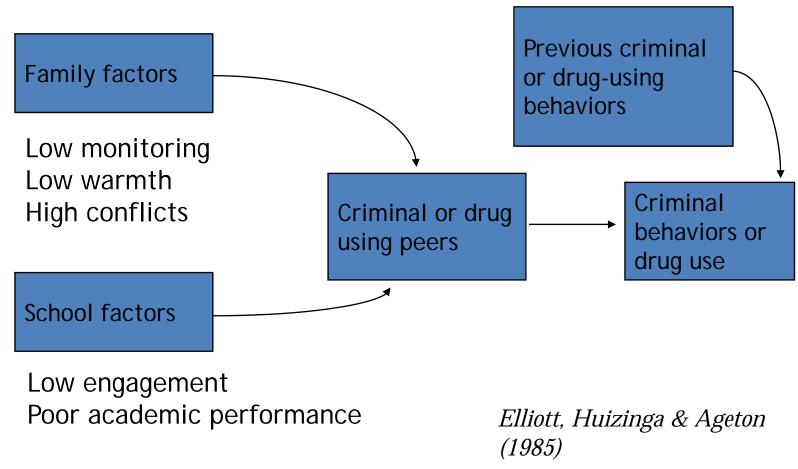
Results



Based on 699 cases in Sweden from 1/1/2008 - 30/6/2011

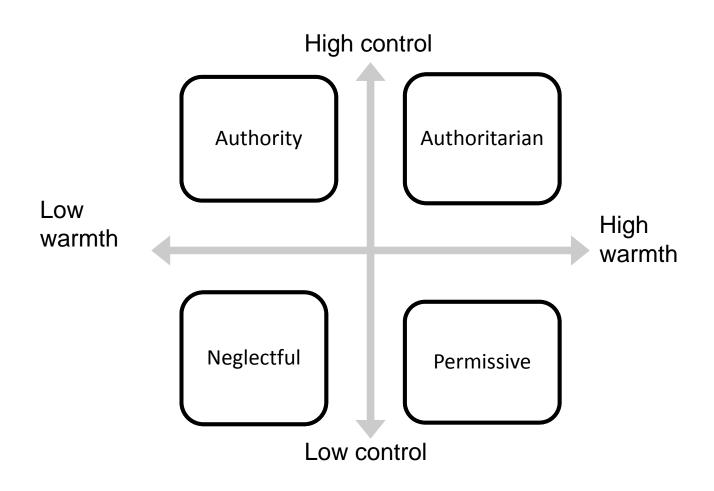


Criminal behavior and drug problems





Parenting styles grid





Common factors for low warmth





- Factor: Caregiver has a generally negative view of the youth
 - Reframing
 - "He is stubborn!" becomes "He has a strong personality!"
 - "He never does what he is told." becomes "He is independent."
 - Prepare a list of the child s strengths and positive qualities to have visible at every meeting



- Factor: Nonfunctional communication skills
 - Guided conversations
 - Use a task
 - Manipulate position and space
 - Role play each other
 - Sequencing interactions



- Factor: Lack of positive time together
 - A planned outing (Team pays first time if needed)
 - Parent learns to play video game of child s choice
 - Child invites a friend or two home (parent provides snacks, activities)
 - Cosy bedtime routine
 - Secret pal game



(Ideas from the group)



Common factors for unbalanced parental control





- Factor: Ineffective consequences and rewards
 - Putting our parents in touch with other parents to find out what the norms are in their community
 - Recognizing when simple strategies are what s needed and when a more structured written plan is needed
 - Never planning a consequence the parent isn t really ready to enforce
 - Using natural consequences



- Factor: Caregivers over-reacting to normal teenage behavior
 - Normal teenage behavior list
 - Stress inoculation
 - Contact with the child s friends parents
 - Button-pushing lists (from both sides)



- Factor: Caregiver is afraid of the teenager
 - ALWAYS do a thorough safety assessment and specific safety plan
 - Chi-square assessment
 - Use technology where possible (automatic shutdown of the computer, for example)
 - Involve the informal network



(Ideas from the group)



For more information about MST

www.mst-sverige.se (in Swedish)

www.mstservices.com (in English)