

# The Call for an Integrated Family Systems Model

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Providing transformative family therapy within a therapeutic treatment program is difficult to do. Pine River Institute attempted to meet this challenge by integrating a family systems model throughout their treatment program. The family systems model is largely informed by Satir Family Therapy, given the focus on strengths, personal responsibility, and experiential nature. Three significant program changes were needed in order to ensure the success of the integration of the family system model: shifting treatment philosophy and culture within the organization, adopting a family therapy model, and training and self-development work for all staff. Program objectives and descriptions were offered, as well as preliminary findings (from both parent narratives and from the research and program evaluation department) on program efficacy.

*Keywords:* therapeutic treatment programs, Satir family therapy, family systems

## INTREGATED FAMILY SYSTEMS MODEL

Providing transformative family therapy within the confines of a therapeutic treatment program presented a challenge on a number of fronts; from the geographical, when parents are far away from where their son or daughter is receiving treatment, to the cultural, when myths about treatment include the concept of sending your child off to “get fixed.” Larger still, however, was the challenge of pinning down what family engagement and participation was supposed to accomplish. Even more daunting was the implementation of a family therapy model that achieved sustained change within the family system, which, in turn, sustained positive change for the adolescent. In this article, some of the journey taken at Pine River Institute will be shared to establish efficacy in the family program using a fully integrated family systems model that leans heavily on Satir Family Therapy.

Parent engagement is a key to success in a therapeutic treatment program. The argument is well-established by Krissy Pozatek (2010; 2014) in her books *The Parallel Process* and *Brave Parenting*. What do we really mean, however, when we say that we engage parents and work with the families of the youth that we treat? Levels of engagement can vary tremendously across programs. In some cases, the parents serve solely as administrative support, providing financial resources and ensuring that the child makes it to therapy. In other programs, parents may be included in the therapeutic process to the extent that they are kept apprised of their child’s progress and processes, participating through phone calls, letters, and visits. They may be given books to read, podcasts to listen to, educational workshops to attend, and the opportunity to do a personal therapy retreat. Brad Reedy (2015) took it to a level deeper and advocated for deep personal change in the “self” of the parent in his book *The Journey of the Heroic Parent*. But how do we support parents to achieve these crucial changes? As we developed our family program at Pine River Institute, we read these books, we believed in them, and we tried to sell our parents on the idea that their parallel process is essential to the sustained growth and health of their child. We also continued to ask ourselves, what does the parallel process mean for a parent, and how do we help them actually grow alongside their child? How do we build full engagement in the therapeutic process with clear goals towards family system change? How do we ensure that our very differently trained therapists are grounded in an approach that moves families closer to these goals? What are the most effective therapeutic techniques that we can use to deliver therapeutic care to parents? And how do we dispel the myth that youth are dropped off to be “fixed,” without indirectly blaming the parent?

In looking for the answers to these questions, we realized what a tall order we had set up for ourselves. First, we discovered that we spoke the words “family

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## **INTREGATED FAMILY SYSTEMS MODEL**

systems approach,” but we did not really build a culture within the staff and within the families that could support the kind of deep work that parents needed to do in order to really change the family dynamics. We discovered some hard truths. No matter which way you come at it, parents feel blamed; in truth, we often blame parents when things are not going well. We also discovered that we mostly focused on the child maturing and mostly hoped that the family would shift enough to sustain the emotional growth of the child. In short, we found ourselves wanting.

Subsequently, the process to fully develop from the state of realization that we lacked a true and effective family therapy program into an integrated family systems model that actually transforms parents and families has been a gradual and fairly natural one. There was no single “aha” moment where we felt we “got it.” However, by recognizing the importance of parent engagement right from the beginning, we organically evolved our “scatter gun” approach, offering a plethora of options for therapy, learning, and growth, and we developed a comprehensive, unified approach to family work. As our program philosophy grew and matured, we slowly refined and streamlined our approach, adopting a coherent family systems model for therapy and skills development for parents, training all of our staff in the model, and “peppering” our program with the components of the model. Now, with a trained and dedicated staff, we offer a fully integrated and goal-driven family systems model for transformative and sustained change in our families. Before we embark on a description of the mechanics of the program, however, we need to focus on the paradigm shift that has allowed these mechanics to work.

### **Crucial Components for Program Change**

There are three inter-connected crucial components to the paradigm shift that we have achieved in our program. The first is a genuine shift in our treatment philosophy to focus on the health of the family system in which the youth is embedded. We embed this language of system change early on in our program, in our literature, on our website, and in our first meetings with families to mitigate any surprises for parents after the youth is in therapy. The families quickly learn that they are “too important not to be a part of the problem,” just as they are the key to the solution. Jokingly, we deliver the good news: “you did not cause this problem with your child,” and we deliver the bad news: “but it’s not likely to change unless you change.” We worked hard to create a culture amongst the parent community that values and is engaged in self-growth and the development of a deeper maturity within themselves with the main message being that if a parent is going to “help develop the self of a child,” they need to have a “mature

## INTREGATED FAMILY SYSTEMS MODEL

and separate sense of self' themselves. Parents are daunted by this, as well as curious, often recognizing early in the process the particular steps in the dance they did with their child. Our approach capitalizes on that curiosity, and parents soak in the attention we pay to them and their development, often with a ready willingness to explore themselves and their impact, for better and for worse.

The second crucial component is the adoption of a family therapy model that is strengths-based and focused on self-growth, self-responsibility, and communication. Our culture at Pine River has always been one of appreciation of strengths, so when we stumbled upon Satir family therapy, it was a natural fit. The universality of the model, the firm adherence to the belief that we are all inextricably connected, the focus on congruent communication, and the emphasis on growing the self of the therapist helped instill a genuine belief that we can support anyone to grow their self-esteem (Satir, 1991). Satir family therapy offers parents a chance to honor the coping strategies they learned as a child and to set them aside in order to develop a new relationship with their son or daughter. It has been a winning combination that has offered parents an opportunity to accurately recognize and accept themselves, to dissolve their guilt, own their emotions, and to open up to developing a deeper maturity within themselves. In short, it helps to develop a separate and strong sense of self so that they can be better connected in the relationship with their child.

The third crucial component is a comprehensive training of our clinical staff in Satir family therapy through experiential learning and engaging in our own self-growth. Family work is hard work. It's well worth it, but there is no denying how difficult it is. Many therapists are not adequately trained in family therapy and/or lack confidence in their ability to influence families. Younger therapists who have not been parents themselves can struggle to relate to the issues that parents face. We are all, to some extent, vulnerable to having an imperfect awareness of our own coping stances and unresolved family issues, and therapists are particularly vulnerable as they wade through the deep emotional muck with their clients. An easy trap for any therapist to fall into is the tendency to blame parents and to subsequently dismiss them from the change process. This countertransference can make therapeutic progression difficult, as boundaries between the self of the therapist and that of the client can get blurry. However, by training in experiential learning using the Satir methodology, we mitigate this risk. Our clinical meetings have become a safe space in which we talk about countertransference dynamics, along with other family issues that surface, so that we can move forward in our work with more appropriate boundaries and a healthier therapeutic perspective. This fosters the competency and confidence of therapists and makes for a coherent and highly supportive team.

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## **INTREGRATED FAMILY SYSTEMS MODEL**

We have also trained our front-line residential youth workers in components of the Satir model, including coping stances, temperature checks, the iceberg, and family sculpting. We have provided opportunities for everyone to explore their own family of origin dynamics, and we provided safe learning space to reflect on how this impacts their relationships with other staff, the youth, and the parents. With a well-defined Satir family systems approach that includes relevant professional development, therapists and staff on the floor have a framework in which to conceptualize the family dynamics, as well as a clear idea of what needs to change in order for the family system to experience greater health. A sweet example of how this manifested itself is occurred when our somewhat gruff chef shared with staff that he believed a student who was working in the kitchen was "placating" the kitchen staff as opposed to being "congruent."

Each of these crucial components leans heavily on the others and on a belief in the importance of creating an emotional growth program for the family that is focused on the parents growing as much as their child. This model permeates our student, parent, and staff culture with a common language, shared understanding of family dynamics, and collaborative approaches to fostering the necessary growth and healing in our families. This allows us to help families dispel existing myths about blame, engage families in systems change, develop professional competency, and ultimately foster better health among our youths.

### **How Does the Integrated Family Systems Model Work?**

The most important factor in developing a fully integrated family systems model is the director of family programs position, which is dedicated to developing and leading the family program, writing curriculum, supporting therapists who have challenging families, and making sure all that we do is true to our model and philosophy of how to help heal families. While the primary therapist takes responsibility for their specific team of adolescents and their parents, the director of family programs is available as a resource for consultation and support across the entire program for all of the therapists and all of the parents. The training for this position is grounded in specific training in family therapy, supervision, and leadership, which allows this staff member to play an important role in facilitating change within the organization.

Our integrated family systems model seeks to promote and sustain change within the family system by integrating three main strategies:

- Utilizing the theoretical principles of Satir family therapy as our primary methodology for opening up the family's awareness of their strengths, as

## INTREGATED FAMILY SYSTEMS MODEL

well as those aspects of family functioning that perpetuate the adolescent's behavioral issues

- Providing a therapeutic and educational process that supports our parents in developing a separate sense of self from their children so that they can truly recognize and be in connection to their child
- Offering psycho-educational resources to support the mechanics of family health, including healthy boundaries, communication skills, emotional regulation, etc.

All of this is delivered through a comprehensive family program that supplies formal and informal opportunities for growth throughout the length of stay of the adolescent. Contrary to the previous “scatter gun” approach, we have now more carefully shaped our content and mechanisms for growth and learning. We provide formal learning opportunities, biannual two-day parent workshops, an intensive three-day therapy process for parents, family phone calls, therapy sessions, support groups, and multi-family sessions.

The overall goal of the program is to support family members to heal and grow so that they can engage in a healthy and loving relationship with each other. The objectives are:

- To provide programming opportunities that invite family members to reconnect, enjoy each other's company, and build relationship through games, sports, shared meals, low-key visits, and group therapeutic programming
- To build engagement and invite family members to be open to grow
- To increase parents' ability to be attuned to their children and to set limits
- To help parents understand their part in the unhealthy family dynamics and give them the tools to change that
- To support parents to take ownership of the health of their family and assist their child's movement towards independence.

(See Appendix A for a synopsis of how the various components combine to support the objectives and a detailed description of these components.)

## **INTREGATED FAMILY SYSTEMS MODEL**

### **Sunday Family Visits**

Sunday family visits are the main vehicle for achieving the first objective, and they include Sunday brunch, followed by a multi-family psychoeducational group in which all family members participate, including little ones and grandparents, followed by an unstructured visit or off-campus outing with the adolescent. The multi-family group provides a venue where we can focus on connection and relationship as families learn the mechanics of healthy family functioning. Themes that would typically be covered include communication skills, how to do a Satir temperature reading, healthy boundaries, Satir coping mechanisms, and the Johari window. The activities are fun and engaging and promote conversations amongst family members that may not occur otherwise.

### **Tuesday Support Groups**

These weekly groups alternate between phone-in support for families who are geographically dispersed, and in-person groups for local Toronto families. They provide a combination of content and process. Phone-in groups center around a topic that aligns with whatever themes are being covered in the Sunday multi-family groups. A provocative article or video is sent out a few days prior to the call, and parents are invited to reflect on themselves in relationship to the material. It is a challenge to make this into a “process group” experience. However, parents seem to share openly about themselves in this format, and emotional expression is not uncommon. As our program develops, we are achieving more refinement in the content for these sessions so that each month covers a particular “unit” or theme that supports our objectives in a more targeted manner. In-person groups are run as process groups where parents bring forward their current concerns. The emphasis is on peer-to-peer learning and support as the therapist promotes sharing of ideas and experiences and punctuates these liberally with Pine River Institute (PRI) philosophy.

### **Parent Workshop**

The second and third objectives are achieved primarily through our formalized parent workshop, a two-day event that takes place at the campus twice a year. This is considered a mandatory part of the program for parents (we usually have 99-100 percent attendance). The content of the workshop is tailored to the stage that the parent/child is at in the program and is comprised of lecture series, self-development groups, and process groups.

The lecture series provides education to ensure that every PRI parent is aware of the maturity model and philosophical stance that our program is built on,

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## INTEGRATED FAMILY SYSTEMS MODEL

as well as attunement and limit-setting, which are the mechanics of our parenting philosophy. Both are based on the work of John McKinnon (2008) and John Santa. The lectures for first-time attendees also focus on our family systems-based philosophy of parent involvement, and every parent is made aware of our invitation to grow as a person. These lectures are built on the work of Krissy Pozatek and Brad Reedy.

For the self-development groups, we divide up parents according to what we hypothesize to be their area of “stuckness” in their personal growth as evidenced by their style of connection with their adolescent. For example, parents who are enmeshed with the child are grouped together and may discuss how enmeshment is actually a form of abandonment for the child. Parents who have high expectations and a more authoritarian, overtly controlling style would be grouped together to explore what it might be like to let go of control or perfectionism. Parents who have an attachment style that has been shaped by inter-generational trauma are grouped together to learn about the impact of trauma on the brain.

The process group component of the parent workshop includes a parent process group with other parents, as well as a parent/child process group, which is a very powerful experience for most families. Both groups are organized around the child’s particular team, and, in both groups, therapists raise a question to the participants to guide and focus the conversation. Parent process groups generally focus on parents sharing what they are working on in their own self-development. This presents yet another opportunity in an iterative process in which, throughout the program, parents are asked repeatedly to try to articulate their understanding of what they need to change in themselves. Depending on the stage of growth of the parent/child, questions posed in the parent/child process group can range from an opportunity to express appreciation for each other, to more challenging questions. For example, we might ask, “What is your biggest worry about your family’s functioning? Reflect on what you need to change in order to make things go better in the family.” These are generally highly emotional groups, and they lean heavily on the power of having all of the parents and kids witness, honour, and support each other’s revelations.

Parents who have attended more than two parent workshops are offered a customized workshop with our after-care coordinator. The after-care coordinator takes over from the primary therapist once the adolescent has transitioned from the residential program. Their role is to help the parent develop and refine the contract between parent and child, set realistic expectations for what might happen in after-care, emphasize the importance of continuing to develop connection with



## INTREGATED FAMILY SYSTEMS MODEL

their adolescent, and continuing to set boundaries. Their focus during the parent workshops is on assisting parents to prepare their child to launch. This captures our fifth objective.

### Parent Intensive

The three-day parent intensive is another mandatory activity for parents and is the main venue for achieving the fourth objective, which we believe is crucial to the overall outcomes for the adolescent. The intensive is a residential retreat for up to 10 parents that takes place over two evenings and three days. Participants stay at a small retreat center, sharing in the preparation and cleanup of meals, basically living together during this time. The intensive is rooted in Satir family therapy principles and practices. On the first evening, parents have a chance to share their story with everyone and express their vulnerabilities and their strengths; trust and safety are established within the group. In the morning, we review the Satir coping stances, and each person draws a complete family of origin map. Over the next thirty hours, we work our way creatively through “sculpting” some aspect of each person’s family. This is a powerful and moving process as parents participate in each other’s sculpt. The magical universality of human experience is what grounds Satir family therapy, and it manifests itself in innumerable ways during this process. Parents then have the opportunity to come back down to earth and sort through what they have learned, its practical applications in their lives, and how it can re-shape their role as a parent. Their adolescents are then invited in for the final process group to share with their parents what they need from them and to hear about what their parents have learned. The degree of alignment at this stage is often astonishing to the parents and extremely validating for the adolescents. For example, a parent who has discovered through her sculpt that what she really needs is to look after her own needs rather than focusing so much on her child is astounded when at the end of the intensive her child says, “Mom, I think you need to look after yourself better.” A statement like this from the child or from the therapist would have been empty without the powerful experience of the sculpt to ground it into the parent’s conscious awareness.

Parents self-select for the intensive based on their availability. We have tried to group parents from one team together, and although this is great for building support, it has proven to be logistically infeasible due to the staggered entry of our students. We continue to learn about this process. For example, in a recent parent intensive, we had inadvertently grouped together some “reluctant participants.” These were parents whose personal experiences made them guarded and reluctant to engage. The justification for their reticence became apparent

## **INTREGATED FAMILY SYSTEMS MODEL**

when the family sculpting started. Each person had a very difficult and disturbing childhood that they had survived via coping and defense mechanisms that needed to be in place. This shared history of coping helped develop connection and validation for the participants, but it also detracted from the learning, as there was less modelling of health within the group. Some less healthy coping mechanisms were reinforced during the informal discussions that took place in the evening. Families start the program at different times throughout the year, so it is difficult to offer the family program in a specific order. For example, one family might have the intensive workshop in their second month, whereas another might not get this portion until later in the program. Another family might not have accomplished all of the reading assignments before attending a parent workshop. We have found that the order of obtaining information and experiences is not particularly crucial, and that we can only do so much to control a person's change process.

Our multi-pronged approach plants seeds along the way that germinate for different people at different moments in the process. Some families may do all of the required work but not get their "aha" moment until late in the program during a family session that takes place after the child has started the return home. Repetition of the message in different formats, including experiential (e.g., sculpting) and didactic, combined with lots of connecting time with their son or daughter, adds up in its own unique way for all of the families who are truly engaged.

### **Family Therapy and Weekly Phone Calls**

Ongoing family therapy and weekly phone calls with parents build on the self-awareness that grows throughout all of these events. Our weekly phone calls are more than just an update about the child. The primary therapist for the child takes the lead with this work and consults regularly with the director of family programs to provide continuity in the process and to ensure that phone calls and sessions are targeted on the therapeutically salient matters at hand. Consultation and communication between these two roles are critical, and we take advantage of weekly formal opportunities as well as "lunch-line" conversations. In addition, we encourage parents to engage in their own personal therapy outside of PRI. As we succeed in helping parents understand the family system influences, there is more and more involvement of our parents in their own personal therapy.

## **INTREGATED FAMILY SYSTEMS MODEL**

### **Has Having an Integrated Family Systems Model Made an Impact on our Families?**

PRI is dedicated to understanding and holding ourselves accountable to improving our youth's health and behavior. We demonstrate those improvements by way of ongoing evaluation that measures youth mental, behavioral, physical, and relationship health. Naturally, as our family systems therapy approach evolved, we knew that we would want to show that it optimized our youth and family outcomes. This too was a journey in which we were learning, testing, and improving.

We have seen first hand that an integrated family systems approach can create positive change. Parents express a profound appreciation for the changes that they make in their relationship with their teenagers. In particular, it helps them open up to their own self-awareness and growth, increase their attunement and ability to set limits with their child, and understand their part in the family dynamics (Creighton & Mills, 2016).

The research team at PRI worked with the clinicians to understand the process and outcomes expected from family engagement. Together, we then conducted a cross-sectional study – one that takes a one-time “snapshot” – using clinician observation and existing client and family data. We were excited to share three important outcomes. First, family engagement with youth therapy was associated with reduced youth length of stay. At PRI, our length of stay is not based on a finite duration; it is a function of therapeutic progression. As such, youths who consistently demonstrate mature functioning in all ways will move more quickly through the program. Youths whose parents were rated by therapists as having higher attunement had shorter length of stay than those whose parents scored lower on attunement. In fact, on a scale of one to ten, for every one unit increase in attunement, we estimated 13 fewer days needed in program. The second finding related to mental health, and particularly to internalizing (i.e. mood) disorders. Youths whose parents scored higher on attunement had lower internalizing scores three to six months after Pine River Institute (PRI). In terms of externalizing (e.g., rule-breaking) disorders, youths who finished the program had the most improvements. In sum, youths who finish the program are more likely to reduce their problematic behavior, and when parents engage and learn skills of attunement, their youth are more likely to progress faster through treatment and sustain improved mental health.

More recent and very preliminary qualitative data suggests that for parents who buy into the process and engage in the integrated family systems approach,

## **INTREGATED FAMILY SYSTEMS MODEL**

positive change within the family occurs. Parents express a profound appreciation for the changes that they make in their relationship with their adolescents that link directly to our objectives as a program. In particular, we note that they comment on opening up to their own self-awareness and growth, increasing their attunement and ability to set limits with their child, and understanding their part in the unhealthy family dynamics. The Satir family therapy model seems to be an effective tool in setting the stage for change, particularly the family sculpting exercise that takes place at the parent intensive.

### **Opening Up to Self-Awareness and Growth**

Unsettling, exciting, and terrifying are adjectives parents have used to describe the impact of the realization that upon admitting their child to the Pine River program, they too had become part of a learning and growing process:

When my son entered the Outdoor Leadership Experience, I believed that PRI, with its intensive residential therapy programming, would be life-changing for him. It didn't occur to me that I too would be forever changed as a person and as a parent. The parallel process, the PRI model of family therapy, has taken me from being an enmeshed, anxious person and parent to a more self-aware and confident individual. I did not anticipate that my core beliefs about parenting, personal and family relationships, and "self" would be so challenged. Yet, 14 months later, I would, as a result of this intensive work within the PRI community. I have a new perspective about my role in my son's life.

And from another parent:

One of the biggest things that was unsettling was the understanding and acceptance that our son needed to change, but so did we. Without blame or guilt, which is next to impossible, we needed to come to the realization and acknowledgement that our son got to where he was through a combination of who he was and what he did, but also who we were and what we did. Through many discussions with many people, therapists, friends, and other parents in the program, I am comfortable that I was not a "bad parent," but I am equally comfortable saying that I was not the parent that my son needed.

## **INTREGATED FAMILY SYSTEMS MODEL**

### **Increasing Attunement and Limit-Setting**

Increased attunement and more effective limit-setting seem to come with self-awareness and growth as parents use the program to develop a sense of self that was separate from their son or daughter. The ability to be in a real connection with the child increased as parents engaged in this important work:

...our son's therapist challenged us and set limits that initially were very off-putting but definitely necessary for me to recognize my need to separate from my son.

For this parent, the change seems to be carried forward into other areas of life:

I make a conscious effort to use this model with my own mother. Putting my perceptions, interpretations, feelings, intentions, and reactions in context has helped me to express myself with clarity, and it eliminates judgements. It also has a sometimes less than desirable effect of setting firm boundaries where none existed before. It can get messy, but it is necessary for separation and setting limits.

For this parent, the awareness that he was separate from his son led to his ability to understand and better hold a boundary:

I came to a real understanding that my son is different and distinct from me and doesn't and shouldn't think all the same things that I think. My boundaries should be about what I'm prepared to do and accept and not about what he's "supposed" to do. The other highly effective change is that I needed to start to really listen to him and to accept different opinions and accept him for who he was and not focus on the ways that he wasn't the person that I thought he "should" be.

### **Understanding Their Part in the Unhealthy Family Dynamics**

Within an integrated family systems model, this is the crown jewel of the entire process. It seems to be the key that unlocks the door to understanding, acceptance, and moving forward in a positive way. The use of Satir family therapy is critical to this process for this parent as they "sculpt" their own family of origin and relate it to how they behave as a parent in relationship to their own child.

## **INTREGRATED FAMILY SYSTEMS MODEL**

Learning about the Satir family model of family therapy was perhaps the most challenging part of my experience at Pine River. The parent intensive or retreat, was nothing more than life changing for me. Participating in a family sculpting exercise...helped define why I have always tried to rescue my son and how my parents' parenting has affected how I too parent, or at least used to parent...It was an "aha" moment, unlike any I have experienced. I never understood much about boundaries because my family had so few. It was a painful and powerful experience.

This parent highlights the impact of their own family of origin work on their ability to be in relationships and to parent effectively:

Prior to PRI, I hadn't given much thought as to how my upbringing affected my parenting. I had been aware of how it may have affected my personality and some of my adult relationships, but even with respect to those, I don't believe that I understood how significant those impacts had been. I would say that the parent intensive and particularly the sculpting that was done, was so jarring that I was forced to look inward and see how all of those things were still driving my behavior all these years later.

Parents who have these types of experiences in the intensive usually see the merit in continuing on with therapy of their own outside of the program. The PRI process just kick-starts things by putting the whole picture into sharper focus for parents.

These preliminary findings were so exciting. They validated what we experienced and led to a deeper dialogue about how and what to measure to capture the benefits of family therapy. We have now added parent practices, parental maturity and attachment, and clinical observations of parent engagement and growth. We will soon be able to quantify parent changes and explore whether these changes foster more profound youth outcomes.

### **What's Next for Pine River's Integrated Family Systems Model?**

As we forge ahead, we are continually seeking better ways to move from instructional skills-based programming to providing more experiential learning opportunities for our families. These provide profound and moving therapeutic experiences that truly speak to the issues of the development of a separate sense of self for the parent so that they can better connect with the separate self of their adolescent. Efficiency in delivering such a program remains a continual challenge. In addition, we know that we have to focus on parent engagement with

## **INTREGATED FAMILY SYSTEMS MODEL**

parents who are difficult to reach. We operate on the assumptions that every parent wants desperately to be the best that they can be, however, some of our parents remain disengaged and, we believe, fearful of the process of self-growth. Finally, we will continue to collect outcome data to ensure that our efforts are effective. We are confident, however, that an integrated family systems model will continue to be a path on which we can build and grow effective service for adolescents and their families.

## INTREGATED FAMILY SYSTEMS MODEL

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# INTREGATED FAMILY SYSTEMS MODEL

## Appendix A

Objectives of the Family Program	Activity that supports that objective	When your child is in OLE	When your child is in Stage 2	When your child is in Stage 3	When your child is in Stage 4/5	At your 1 <sup>st</sup> Parent Workshop	At your 2 <sup>nd</sup> Parent workshop	At your 3 <sup>rd</sup> Parent Workshop	At the Parent Intensive	Throughout the program
To re-connect, enjoy the company of my son/daughter, and re-build the relationship.	<input type="checkbox"/> Write letters to your child <input type="checkbox"/> Write a Letter of Impact to your child <input type="checkbox"/> Regular Sunday visits	√	√	√						
To learn and apply the Maturity Model.	<input type="checkbox"/> Read <i>An Unchanged Mind</i> <input type="checkbox"/> Attend Maturity Model lecture	√				√				
To be open to grow and develop as a separate person from my son/daughter.	<input type="checkbox"/> Attend Tuesday Parent Support Sessions <input type="checkbox"/> Write your life story <input type="checkbox"/> Attend a Parent Intensive <input type="checkbox"/> Read <i>The Journey of the Heroic Parent</i> <input type="checkbox"/> Attend Journey of the Heroic Parent	√	√			√				√

## INTREGATED FAMILY SYSTEMS MODEL

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	<input type="checkbox"/> Attend Self-Growth sessions					√	√	√		
To increase my ability to be attuned to my child and to set limits appropriately.	<input type="checkbox"/> Attend Clinical Parenting session <input type="checkbox"/> Attend Attunement and Limit-setting <input type="checkbox"/> Read <i>To Change a Mind</i> <input type="checkbox"/> Learn the communication model			√ √		√	√			
To understand my/our part in the unhealthy family dynamics and develop the tools to change that.	<input type="checkbox"/> Create a Family Map <input type="checkbox"/> Do a “sculpt” of your family-of-origin <input type="checkbox"/> Family therapy at PRI <input type="checkbox"/> Get your own therapist			√					√ √	√
To take ownership of the health of the family and move to independence.	<input type="checkbox"/> Learn how to do a Temperature Reading <input type="checkbox"/> Read <i>Not by Chance</i> <input type="checkbox"/> Develop home visit contracts <input type="checkbox"/> Attend Preparing to Launch			√	√ √			√		

## INTREGATED FAMILY SYSTEMS MODEL

Objectives of the Family Program	Activity that supports that objective	When your child is in OLE	When your child is in Stage 2	When your child is in Stage 3	When your child is in Stage 4/5	At your 1 <sup>st</sup> Parent Workshop	At your 2 <sup>nd</sup> Parent workshop	At your 3 <sup>rd</sup> Parent Workshop	At the Parent Intensive	Throughout the program
To take ownership of the health of the family and move to independence	<input type="checkbox"/> Attend After Care Contracts session <input type="checkbox"/> Develop After-care Contract <input type="checkbox"/> Attend After-care Parent Support Group					√		√		