

RUNNING HEAD TITLE

**Family Work Therapy**

Dana Brooke Holloway

Southern Adventist University

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**Author Note**

Include any grant/funding information and a complete correspondence address.

### Family Work Therapy Paper

In contemporary mental health practice, the role of the family system is increasingly recognized as a critical component of effective treatment, particularly for children and individuals navigating complex emotional and behavioral challenges. Through the lens of systems theory, attachment theory, and evidence-based family therapy models presented in SOCW 676A, this course has highlighted the essential truth that no client exists in isolation. The lectures and readings reinforced that involving family members in treatment is not just beneficial but often necessary to achieve long-term therapeutic success. This paper reflects on key insights gained from the course content and explores how integrating family work into clinical practice enhances relational healing, strengthens support systems, and leads to more sustainable outcomes.

Working with children in mental health settings requires clinicians to look beyond the presenting symptoms and assess the larger context of the family system. Children's behaviors are often rooted in or amplified by the dynamics in their home environment. For instance, a child experiencing anxiety or defiance may be reacting to inconsistent parenting, interparental conflict, or emotional neglect. Course content emphasized that children are not isolated units of treatment but relational beings whose symptoms reflect deeper systemic issues. One of the most striking examples of this came from the video *The Legacy of Unresolved Loss: A Family Systems Approach*, where Monica McGoldrick (2006) demonstrated how unprocessed grief in one generation can resurface as emotional struggles in later generations. McGoldrick illustrated how children often unconsciously carry their family's emotional burdens, becoming identified patients in systems that avoid openly expressing grief. Applying this insight to clinical work highlights the necessity of involving parents and caregivers in the therapeutic process, not only to support the child but to examine and possibly shift broader family dynamics that sustain the child's symptoms.

Another key insight from the course came from Salvador Minuchin's model of Structural Family Therapy. In *Salvador Minuchin on Family Therapy (2011)*, Minuchin demonstrates that effective therapy requires the restructuring of the family unit by actively engaging in the interactional patterns that maintain dysfunction. His work highlights the importance of establishing clear hierarchies, strengthening parental subsystems, and redefining boundaries that may have become enmeshed or disengaged. These concepts are essential when working with families in which roles have become blurred, such as when children act as emotional caregivers or parental figures. In clinical practice, these dynamics often emerge in single-parent homes or families affected by trauma. Applying Minuchin's interventions, such as realigning alliances or reestablishing authority structures, can dramatically improve functioning not just for the child, but for the family as a whole. The film reinforced the idea that symptoms cannot be treated in isolation and that structural changes are necessary for sustainable mental health outcomes (Minuchin, 2011).

Bowenian theory also contributed significantly to the understanding of family systems and emotional functioning. In *Bowenian Family Therapy with Philip Guerin (2010)*, the focus is placed on multigenerational patterns, emotional cutoffs, and differentiation of self. One of the core concepts explored is that individuals often carry unresolved emotional tension from prior generations, which manifests as anxiety or dysfunction in their current family roles. Guerin explains that clients must increase their differentiation to manage emotional reactivity and maintain their sense of self within the family unit. This approach is especially helpful when working with adults struggling with identity issues, depression, or anxiety that seem to stem from long-standing family conflict or suppressed emotional expression. The film emphasized how these issues can often be traced back to unresolved tensions from previous generations, which reinforces the value of genograms and family-of-origin work in therapy. Understanding this framework enables social workers to guide clients in recognizing inherited patterns and empowers them to shift relational dynamics that previously felt fixed (Guerin, 2010).

Monica McGoldrick's *Couples Therapy: A Family Systems Approach* (2018) further illuminated how symptoms are not always housed within one individual but often arise from relational cycles and unmet emotional needs within partnerships. McGoldrick demonstrated how couples' conflicts are embedded within each partner's family-of-origin experiences, and how partners often reenact unresolved attachment wounds. This perspective is vital when working with families and couples, especially when children are involved. For example, when parental conflict is high, children often exhibit emotional or behavioral symptoms as a response to the instability in their environment. Using a systems lens, clinicians can address both the couple's dynamics and the ripple effects those dynamics have on the child's mental health. This reinforces the importance of holistic treatment that acknowledges and includes the emotional functioning of all family members, not just the identified client (McGoldrick, 2018).

Throughout this course, the consistent theme has been that individual well-being is inseparable from the quality of relational and systemic functioning. Children thrive in emotionally attuned, stable environments, and much of the work in therapy involves helping the adults in their lives become better co-regulators, boundary-setters, and emotional anchors. Adults, likewise, often find that their mental health symptoms lessen when they begin to understand and transform their role in long-standing family patterns. Integrating family work into mental health services is not only clinically sound but ethically aligned with the profession's commitment to a person-in-environment perspective.

This course has deepened my commitment to approaching therapy through a family systems lens. The readings, videos, and discussions have provided a robust foundation for understanding how to assess and intervene at the relational level. In future practice, I plan to incorporate genograms, family mapping, and systemic reframes as regular parts of assessment and treatment. I also plan to involve family members in treatment whenever appropriate and to pay close attention to multigenerational patterns, unresolved grief, and structural imbalances within the home. As a clinician, I now understand

that healing does not occur in a vacuum, and that by helping families function more effectively, we lay the foundation for sustainable healing in both children and adults.

References

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