

Case Conceptualization

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Vignette

The presenting patient is Henry Mills, a boy of 13 years of age. Henry has one older sibling, Theo, age 19, and parents Shannon and Michael. Shannon and Michael have been married for 23 years. A year ago, Theo graduated high school and moved across the country to attend a university. Henry has been isolating himself in his room and ignoring all chores. He has angry verbal outbursts at home and school and has been neglecting homework. This behavior began this school year and Shannon and Michael are seeking help through therapy based on the suggestion of Henry's school counselor. Shannon states that Henry has always been more difficult of a child to raise than Theo, however, these behaviors are new. Shannon has been hesitant to seek help for his son, feeling that this may be normal teenage behavior. Michael feels alone in his role of trying to discipline Henry and handle the behavior. Both parents agree that Henry's behavior is causing a stressful environment at home and how to handle the situation has caused marital conflict. Shannon, Michael, and Henry were present for the first session. At this time a family genogram was created that is included at the end of this paper.

During this session, Henry expressed that he is close to his brother Theo and his mother. Henry revealed that he feels the pressure of filling his brothers' shoes at home and is feeling overwhelmed as he has had a lot more of his mother's attention on him than he was used to. Henry states that his mother tries to involve herself in everything he does and is always nagging him or trying to talk with him. Shannon still cries often over Theo leaving home regularly. Shannon has spoken to Henry multiple times about her disappointment that Theo went to a university so far away, and that he didn't stay closer to the family as they shared a close bond and he used to do so much around the home to help the family out. It is also revealed that

Michael does not have much interaction with Henry or Shannon during the session, when he does, he is generally bickering with Shannon.

Case Conceptualization

Utilizing the system's theory as a framework for this case, Henry's recent behavior can be contributed to the dysfunction of the family system (Nichols, & Schwartz, 2004). The Mill's family is displaying many dysfunctional patterns that are resulting in Henry's symptoms. Shannon and Michael both blame Henry's behaviors for causing the problems in the family's functioning and their marital conflict. Henry blames the new pressure that his mother is putting on him to fill his brother's shoes at home and is struggling to cope with his mother's complaints about his older brother who he looks up to and the comparisons she makes. The Mill's family structure involves enmeshment, cross generational coalitions, and disengagement. Currently Michael and Shannon are using Henry as a scapegoat for their own marital problems.

Subsystems

The subsystems that exist in the Mill's family begin with Michael and Shannon as the parental figures of the family. Theo and Henry also share a subsystem as siblings. Additionally, each parent shares a subsystem with each of their children. When taking a closer look at these subsystems, it can be observed that each has unique behavioral patterns leading to dysfunction in the family system as a whole. There are unhealthy boundaries and cross generational coalitions in place impacting this family's functioning and disrupting the family hierarchy. Examples of enmeshment and disengagement are present in the subsystems as well.

Cross Generational Coalitions

One of the sources of the Mills family disfunction is the cross generational coalition between Shannon and Henry. Since Theo left home to go to university, Shannon has been leaning heavily on Henry for emotional support. This has left Henry subject to parentification, as he is assuming what should be his father's role in providing emotional support for his mother. In addition to this parentification, Shannon has added Henry as the third member in her relationship with Theo creating a triangle pattern. Shannon overshares her feelings of grief and disappointment about Theo's decision to attend university far away from home with Henry. This causes stress between the subsystem of Theo and Henry as well, especially since Henry is close to his brother Theo. Now he feels like he must hold secrets between his mother and brother, which is causing anxiety and stress. Michael appears to not be involved in the coalitions as he is emotionally unavailable and a bit disengaged as he tries to hold a parental disciplinarian role.

Boundary Assessment

When observing boundaries within the Mills family it appears that there are both rigid and diffused boundaries in place that help to further define problematic behaviors. Starting with Shannon and her children, it seems as though diffused boundaries are in place. Shannon is enmeshed in the lives of both of her children. Theo leaving home is made extremely difficult on Shannon due to her enmeshment. With Henry being the last child at home, this enmeshment has turned into overinvolvement, leaving Henry feeling increased stress and loss of some independence as he is trying to establish himself as a teenager. The symptoms of this system pattern are Henry's misbehavior and isolation as a means to pull away. Michael on the other hand seems to be disengaged from his children and his wife with somewhat rigid boundaries. Shannon's enmeshment with her children has left conflict between Michael and Shannon. See below for a visual chart displaying family structure.

Attachment

An important factor to consider when taking a systems approach is attachment and how attachment styles may be impacting family dynamics and a child's behavior. There are four different attachment styles that could be considered, each with distinct features. In the genogram, it was discovered that Shannon had several miscarriages and struggled to conceive Henry and Theo. While this may explain some of the enmeshment behaviors, both children did grow up with secure attachment due to her dedication as a mother. This is a strength that the Mills family does possess. This is exhibited by Henry's security in his relationship with parents and ability to self-reflect and manage emotions in therapy sessions when processing challenges. Shannon, however, does display signs of having an anxious attachment style, due to her loose boundaries with her children and interactions with her husband Michael.

Hierarchy

As discussed above, diffused boundaries have led to enmeshment between Shannon and her children leaving hierarchy structure fluid depending on the situation. When it comes to discipline, Michael is left isolated in a parental role. Recently, with Theo leaving home it seems as though Henry at times is left in a parent role to fill her emotional support needs and serve as a confidant to share her disappointment about Theo with. Shannon seems to lack this support from Michael due to his rigid boundaries and lack of emotional availability. In this family, a child-centered ethos has disrupted the family hierarchy (Nichols & Schwartz, 2004).

Family Development

The Mills family is in a unique stage of family development. Two major changes are happening at the same time. Boundaries impact a family's ability to accommodate to change,

making this important to incorporate into treatment (Nichols & Schwartz, 2004). Theo Mills, the oldest child has left home last year, which will impact all members of the family. The second change is that Henry at age 13 is reaching adolescents. Boundaries need to shift at this time to allow for more independence.

Strengths

Strengths that this family possess are that they are strong communicators, and they are dedicated to the therapeutic process. Both parents have been engaging in sessions and willing to answer questions and discuss challenges. Additionally, they seem to display the ability to acknowledge their wrongs. Culturally, this family comes from a faith-based background and views their religion as a source of strength and hope. Lastly, the Mills family have a large extended family in which they can turn to for support.

Treatment Goals

Each member of the Mills family has outlined their goals. Michael's goal is to improve his relationship with Shannon and learn how to handle Henry's behaviors. Shannon's goal is to adapt to life at home without Theo and to get down to the root of why Henry is behaving this way. Henry's goal is to get along better with his parents and to get his grades back up in school so that he does not have to attend summer classes. The clinician's goal is to assist this family in restoring healthy boundaries and a functioning hierarchical structure from a system approach.

Beginning Stages

In the beginning stages of Family Therapy, a genogram is developed, and family structure discussed. The Mills are a bit hesitant at first to share intimate details about their family, however they see the merit and fully participate. Rapport with the family is built and the

clinician is able to explore deeper into the unhealthy patterns of behavior to get a realistic grasp of what is going on. It is in this phase that a case conceptualization is developed as well as the clinician's treatment goals. In this case, the clinician's goal is to restructure the family and improve boundaries. In this first phase, it would be important to promote the first order change. The first order change would allow the family to work on change at the behavioral level (Nichols & Shultz, 2004). An example of this could be Michael being encouraged to talk out misbehavior with his son and provide comfort instead of strictly punishing. Another example could be that Shannon begins to talk with Michael about her empty nest grief instead of Henry.

Middle Stages

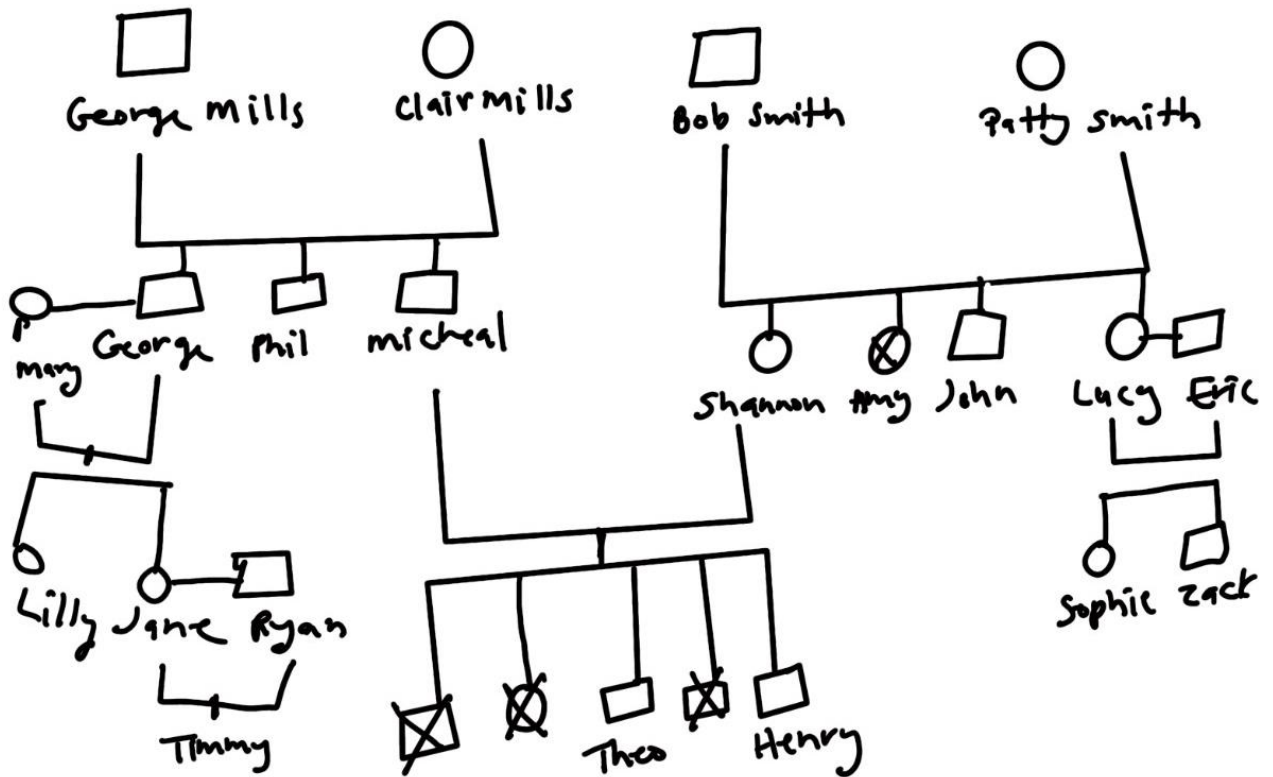
During the middle stages of therapy, the most difficult work must begin. This is the phase in which the family would need to restructure and establish new patterns of behavior (Nichols & Schwartz, 2004). During this phase enmeshment, disengagement, and coalitions were processed with the family. In the Mill's family case, Michael and Shannon were encouraged to join in the parental role and lead the family in adapting to the changes of Theo being out of the home, relating to him as an adult, and Henry's needs as he begins his adolescence phase. Shannon established healthier boundaries with her children and discontinued using Henry as a confidant. Shannon worked on processing her attachment style and her relationship with her own parents which revealed an unstable childhood. Shannon was able to begin developing an identity beyond mother being a mother. Michael would be encouraged to establish boundaries that decrease the rigid nature of his boundaries and to be able to adapt to the needs of his wife and children through life changes and to become more emotionally available. His family relationships were also processed revealing the same pattern of being an emotionally unavailable father went back multiple generations. Henry and Theo worked on expressing their feelings and learning how to

express needs or concerns with parents. Henry was able to work on skills to handle difficult emotions that were not destructive.

Termination Phase

At time of termination, all four family members are feeling a sense of security in their new patterns of behavior and feel the family is functioning well. Each not only has healthier connections with each other, but Shannon and Michael have a better understanding of their parents and have been able to begin working on those connections. Henry's behaviors at school and home have improved greatly and he seems happier. There are no further problems identified at this time for the family to address, so termination is appropriate.

Genogram



Boundaries Family Structure



References

Nichols, M. P., & Schwartz, R. C. (2004). *Family therapy: Concepts and methods*. Sigma Press.