NEED-ADAPTED TREATMENT OF SCHIZOPHRENIC PROCESSES: THE ESSENTIAL ROLE OF FAMILY-CENTERED THERAPY MEETINGS

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ABSTRACT: Need-adapted treatment is a psychotherapeutically oriented approach to psychoses that has been planned and is implemented individually in each case, combining different activities so that they meet the needs of each patient as well as the people making up her or his personal interactional network (usually the family). A systemic initial intervention, carried out as a conjoint session of the patient, the family members, and a team of 3-4 staff members is an essential part of this approach. The name “therapy meeting” was given to these sessions because of their notable therapeutic significance. Therapy meetings are often continued during the later phases of treatment to follow up the course of treatment and to reassess the therapeutic plans.

The development of psychotherapy of schizophrenic patients has been delayed for several reasons. One of them is the narrow scope of the method-oriented studies influencing the general opinion of psychiatrists and other professional workers on the effectiveness of psy-

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chotherapeutic approaches. We do not believe that the usefulness of psychotherapy with psychotic patients could be ascertained by so-called controlled therapeutic trials where the differences of the therapeutic challenge created by diverse patients are not taken into account. Innovative projects utilizing the principles of action research are, therefore, urgently needed.

We are working in a university hospital which at the same time is a part of the community psychiatric organization of the city of Turku (population 160,000). The goal of our team has been to develop a comprehensive, psychotherapeutically oriented treatment approach suitable for new and relapsing patients who have schizophrenia and other functional psychoses. The approach has been developed especially to meet the needs of the community psychiatric field. We find it important to emphasize this because that is the context in which a huge majority of these patients are treated all over the world.

Our approach is based on an integrated view of the treatment of schizophrenia. We try to combine different forms of treatment in a way which is flexible but tailored individually in each case so that the therapy should meet the needs of the patient as well as those of the family or other people making up his/her closest interpersonal environment. That is why we have named this approach the need-adapted treatment of schizophrenia.

Although our approach is comprehensive, integrating different activities, it is primarily based on systemic starting-points. We find this necessary for two main reasons. The treating organization with the people working in it is a system just as is the family of the patient. The mutual encounter of these systems leads to the formation of a new system, including both of them. The Finnish psychologist Jaakko Seikkula (1987) has labeled this system the “border system”. He emphasizes—as we do—the coevolving process through which both parties of this new system continuously influence the understanding as well as the activities of the other. The success of our therapeutic endeavors are very much dependent on this process, and a continuous examination of its nature and development should be a necessary part of our work. It may be an illusion to believe that the border system would be very easily controlled and a serious mistake to act as if it does not exist at all.

The second reason for the primary significance of a systemic point of view is that it provides us with the best starting-points for diagnosing the case-specific therapeutic needs. Because of this, we have to meet the patient together with his family members and/or other people closest to her or him right at the outset of the treatment.