RAIDS UPON THE RANDOM IN FAMILY THERAPY TRAINING: DISCOVERING WHAT BECOMES SIGNIFICANT

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ABSTRACT: How do you provide family therapy training in a primarily rural state with limited resources? A model for training therapists and supervisors that well may offer guidance to other states that face such a challenge is described here. A meta supervision approach over long distance was used in the three-year project that is described in this paper. Self-reports from the 31 participants who completed the program reveal some interesting positive reactions.

Widespread concern over access to well-trained family therapists led to the launching of the ambitious statewide three-year family therapy training project recently concluded by the Family Studies Institute at North Dakota State University (NDSU). The project was inspired by a report issued by the North Dakota Commission on Mental Health Services that underscored the need for additional training in family therapy for mental health professionals in the state. The Governor’s Commission on Children and Adolescents at Risk noted the need for better and quicker access to family therapy, while the assistant superintendent for clinical affairs at North Dakota State Hospital observed that there were few well trained family therapists in the state.

The mental health services commission recommended that: (a)
human service centers should place a higher priority and emphasis on providing family therapy to families where problems are clearly impacting the children; (b) supervision needed to be carried out on a continuing basis in order to ensure quality control; and (c) there was needed a system of continuing training and education for employees.

Inception of the idea for a statewide family therapy project originated in an interdisciplinary think tank involving faculty from the department of child development and family science at NDSU. Funds for the project were secured from the Otto Bremer and Bush foundations. The purpose of the project was to train supervisors and family therapists and to establish a network of family service professionals across both public and private agencies throughout the geographically isolated communities of rural North Dakota.

THE PARTICIPANTS

The project began with 35 participants, who were selected from a statewide pool of 66 applicants. Selection was made on the basis of the following criteria: (1) the applicants had a master's degree and some experience in family therapy; (2) the applicants' agencies were willing to let them attend the required 12 quarterly meetings and 36 monthly meetings; and (4) the applicants were willing to attend all quarterly and monthly meetings during the entire three years of the project.

Four persons left the project for personal reasons (i.e., moved to another state, took a different job, and other), leaving a final total of 31 participants. Of those, 21 therapists (13 females and eight males were trained in family therapy, and 10 therapists (five female and five male) were trained in various aspects of family therapy supervision. Their average age was 39.26 years. Ages ranged from 27 to 56 years. Half of the participants held graduate degrees in social work, another quarter had degrees in counseling, and the remainder had degrees in child development and family science, psychiatric nursing, psychology, and medicine. All participants were currently working with families in a variety of contexts such as state agencies, hospitals, and private profit and nonprofit family agencies.

THE TRAINING

The structure of the training consisted of monthly meetings that were held between a supervisor and two to four trainees at various