

## Telehealth Tip Sheet: FCT Family Life Cycle™

### PREPARATION:

- Get a copy of the timeline sheet to the family in advance. Have a plan for those who don't have e-mail and are only using phone sessions and not visual. Possibly dropping it off in their mailbox.
- Be sure the Parent/Guardian/Care Giver has the space to be alone so they can share the information privately.
- Prepare how you will present the 3-5 minute guided section when they guide the caregiver into sense orienting place, time, senses, memories, and feelings. Practice grounding, relaxation techniques and guided imagery with a colleague over the computer to familiarize yourself with this process within a telehealth format. An example can be found in the Resources section on the FCT website you can use/read off to practice while you are not face to face with the family.
- Listen and watch for signs of trauma
- Ask the caregiver to bring pictures of their childhood, adolescents and young adult years to the session.
- Review Ecomaps and referral information
- Be sure and have a follow-up session/call within 24 hours for those who do become triggered.

### Directions for the use of the Family Life Cycle (FLC) in Family Centered Treatment

*Determination of the Targeted Area of Family Functioning is to be done or the Family Assessment Device should be completed prior to this process. Complete the FLC with each caregiver independently/individually. The FLC process is divided into 3 stages. Given what we know about telehealth sessions, attention span, the content of the FLC, and the signs of trauma that may appear it is important to have a plan at least 3 sessions to complete the FLC. It is also important to diagnose during the FLC and identify red flags of when an individual may become triggered by past.*

- Drawing the Timeline** – identify the significant benchmarks in the FLC for the parent/caregiver. Identify the significant life event and place the marks on the timeline with notes to identify the life event (moves, births, deaths, major changes in family structure, etc.). Have the family write on their timeline (this will be their copy to keep) and the clinician should also indicate milestones on the FLC Clinician's Record 5.18 (this will be turned into the client chart).*
- Your Family Life Cycle experience.** What was it like for you? Your FLC experience – evaluating the stages and identifying the impacting experiences and relationships. Utilize questions from the FCT Clinician Guide to prompt discussion and memories.*
- Connecting how the experience now influences their parenting:** What does your current parenting look like and how was it formed –how did your past experiences influence your current parenting? Utilize questions from the FCT Clinician Guide to prompt discussion and memories.*
- Planning for the future** – “How I want my parenting process to be different or the same as what I experienced”.*
  - **What do I want to keep (do the same)?**
  - **What do I want to handle differently?**
  - **What do I want to make new?**

*The potential to bring multiple caregivers together to share their insight and learning is always a desirable component of treatment, but the decision to prompt such must be made in the context of shared power and shared parenting. It should not occur when there is unequal power or a parentified relationship with risk of use of the information to further the dysfunction. When such disequilibrium exists only bring them together for mutual sharing when individual sessions indicate that there is a commitment to develop an effective parental alliance.*

**2. LETS MAKE A PLAN:** *Given all the information shared allow the participant to commit to a plan. Let them know you are there to talk about anything that comes up or they have thought of once you leave. Ensure they feel supported and they are okay to finish the FLC for this session. Let them know this information is extremely valuable for them and thank them for sharing. Revisit this information at your next session and subsequent sessions as needed.*

### **Practical application**

#### **Step 1 Introducing the FLC to the caregiver / parent**

*“One of the things families with whom we have worked have taught us is that our past experiences have influence on how we handle relationships and how we parent. For some of us this has been a deliberate decision to do things the same way as we experienced them or to avoid doing things the same way as we experienced. For some of us, determination to do things like we experienced them or to do something different has not been a conscious effort; but just happened without a lot of thought. Families have taught us that being in charge and deliberately determining what you want to repeat or keep, what you want to do differently, and what you want to create new in your parenting process not only has helped them get through a current problem, but has prepared them for the predictable future stages that their children will yet experience. Would you be interested in looking at how to get more power and control over these predictable stages by taking a look at how you got to where you are in your parenting approach? “*

#### **Step 2: Drawing the timeline (using the template)**

*“Let’s look at a picture that could be described as a lifeline or time line of your life and the usual stages such as childhood, adolescence, young adult and adult.”*

*“As we look at this line you can mark or show me where to place bench marks or vertical lines on this horizontal line to show when significant events occurred for you; such as other births, deaths, moves, changes in family life, major event that affected you, relationships entering or leaving.... You are in charge of what we mark on here and where they go....it might be that many or few of them happened in each stage. There is no right or wrong....it is your life and when the major events that impacted you are not tied to a specific age.”*

*Note to the clinician: Ask open ended questions about each benchmark that they select. Always define or frame or remind the parent that they are in charge of what they choose to share about the experience, relationship or developmental stage. Traumatic experiences and trauma genic effects may be identified in this process that are currently impacting their functioning or current parenting styles/approaches. When such is identified, empathetically acknowledge the pain, the impact and indicate when they are ready further discussion can occur. Share with the parent that the past event does not need to negatively determine how they see themselves nor how they function currently.<sup>1</sup>*

**Step 3: Your Family Life Cycle Experience Let's look at how each stage was experienced for you.**

Proceed to the Stages of Life chart and questions. Write in or guide the parent to write in their thoughts in bullet point format.

**Step 4: Now; let's work on your getting more power and control. Planning for the Future**

- *What do I want to keep (do the same)?*
- *What do I want to handle differently?*
- *What do I want to make new?*

**Step 5: Let's make a plan.**

*Given all the information shared guide the participant to commit to a plan.*

1. *The significance of the FLC is to enable their gaining more power and control in their parenting rather than only parenting in reaction to what has happened to them. This is important to state as it defines the why of the FLC but also suggests to them that we see them as in charge.*
2. *Let them know you are there to talk about anything that comes up or they have thought of once you leave. Ensure they feel supported and that they are okay to finish the FLC for this session.*
3. *Let them know this information is extremely valuable for them and thank them for sharing.*
4. *If this process has become trauma triggering or indicative of emotional blockages check back with them by phone or in person the next day and continue to support them.*
5. *Revisit this information at your next session and subsequent sessions as needed.*

Note to the FCT Clinician: How does this information influence the plan for the future? Take notes for goals and strategies. How does this information fit or not fit with the FAD Area of Functioning or Targeted Area of Family Functioning (AFF) as is defined in the theme of treatment?

References

<sup>1</sup>*The expanded family life cycle: individual, family, and social perspectives* | edited by Betty Carter and Monica McGoldrick. - 3rd | 111111 | 9 00 00 ed., classic ed.

<sup>2</sup> *The expanded family life cycle: individual, family, and social perspectives* | edited by Betty Carter and Monica McGoldrick. - 3rd | 111111 | 9 00 00 ed., classic ed.