
**ASSESSMENT OF FAMILY THERAPY INTERVENTION AND HEALTH OF THE ELDERLY:
THE IMPLICATIONS, CAMPAIGN AND INITIATIVES**

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ABSTRACT

The study aimed at analyzing the assessment of family therapy intervention and health of the elderly: the implications, campaign and initiatives. Family therapy is a form of treatment that is designed to address specific issues affecting the health and functioning of a family. It can be used to help a family through a difficult period, a major transition, or mental or behavioral health problems in family members. Systemic and family therapy, like other therapies, has changed and developed to acknowledge that a consideration of people's understandings and how these are related to the culture in which they live is vital. There is a growing overlap between the various models developed since the 1950s, the psychological frameworks that professionals employ, and 'ordinary' people's knowledge. The paper reviewed the concept of family therapy, The concept of health, The implication of family therapy on the health of the elderly, The need for family therapy intervention in our society, The initiatives of family therapy intervention And The extent of campaign for family therapy. The study concluded that family therapy has always had enormous attraction for social workers who want to help and support individuals and families in thoughtful and effective ways. Working with families-whatever the focus of social work assessment or intervention- probably forms the bedrock of modern practice whether in elderly care, community care, child care or mental health care. Family therapy assists family members in learning about changes that come with aging, so they are more aware of how to support and assist their aging relatives. One of the recommendations made was that family therapy should be introduced in every family to help with issues that specifically affect family's mental health and functioning. It can help individual family members build stronger relationships, improve communication, and manage conflicts within the family system.

KEYWORDS: Family Therapy Intervention, Health and Elderly

Introduction

Family life in the West on the one hand has typically been seen as private, as a 'haven' yet at the same time there have been repeated attempts to explore, intervene in, direct, discipline and educate families. There have been attempts to correct the morals of the so-called 'feckless' or 'irresponsible' families, to see single-parent families as 'welfare scroungers' and so on. Aside from such overt attempts at shaping family life and conduct, there is a proliferation of more covert and insidious influences, such as images in magazines, television and films about what is desirable and acceptable from interior decor to children's education and sexual practices. These images and stereotypes have spread further to embrace not just families but also the activities of professionals in the business of bringing about change in families. Systemic and family therapy, like other therapies, has changed and developed to acknowledge that a consideration of people's understandings and how these are related to the culture in which they live is vital. There is a growing overlap between the various models developed since the 1950s, the psychological frameworks that professionals employ, and 'ordinary' people's knowledge. Most people these days have powerful ideas and expectations about what therapy will be like as well as their own explanations about what is wrong and what should change.

Working with families-whatever the focus of social work assessment or intervention-probably forms the bedrock of modern practice whether in elderly care, community care, child care or mental health care. It is little wonder then that family therapy has always had enormous attraction for social workers who want to help and support individuals and families in thoughtful and effective ways. Despite contemporary service provision being systematically defined in narrow case/care management terms, there are many opportunities inside and outside the statutory social services for using some of the skills and techniques associated with systems theory to aid assessment and intervention practice. In a family counseling setting, it can assist family members in learning about changes that come with aging, so they are more aware of how to support and assist their aging relatives. Family psychoeducation has also been found to be helpful with older adults who may be suffering from severe mental illness.

Concept of Family Therapy

Family therapy is a form of treatment that is designed to address specific issues affecting the health and functioning of a family. It can be used to help a family through a difficult period, a major transition, or mental or behavioral health problems in family members (Family Therapy, 2014). Family therapy can employ techniques and exercises from cognitive therapy, behavior therapy, interpersonal therapy, or other types of individual therapy. Like with other types of treatment, the techniques employed will depend on the specific problems the client or clients present with. Family therapy refers

to a method to develop and maintain healthy and functional family relationships. Family therapy aims to address psychological, behavioral, and emotional issues that cause family problems. Family members will work with a therapist to develop and maintain a healthy relationship (Klein, & Morales-Brown, 2020). Family therapy is a type of treatment designed to help with issues that specifically affect family's mental health and functioning. It can help individual family members build stronger relationships, improve communication, and manage conflicts within the family system (Varghese, Kirpekar, & Loganathan, 2020). Some of the primary goals of family therapy are to create a better home environment, solve family issues, and understand the unique issues that a family might face. Heberle, (2021) stated that family therapy is a type of treatment approach that sees families as integrated systems. Family therapy is based on the theory that family is a system, a unit in which the members are acting and reacting to one another.

Family therapy is a type of group psychotherapy. In family therapy, "family" is defined as a group of people who care about each other and call themselves a family. This could include parents and children, partners, grandparents, brothers and sisters, aunts and uncles, cousins, friends, caregivers and other professionals that are close to the group. The goal of family therapy is to help everyone in the family understand and support each other. This type of therapy can help when families are feeling overwhelmed, sad and angry; when they're unsure how to move forward; or when they feel that they are repeating the same harmful behaviours over and over. If a family is dealing with changes associated with illness, mental health and substance use problems, unemployment, moving, ageing, divorce, trauma, and death and grieving, family therapy can be helpful.

Concept of Health

The meaning of health has evolved over time. In keeping with the biomedical perspective, early definitions of health focused on the theme of the body's ability to function; health was seen as a state of normal function that could be disrupted from time to time by disease. An example of such a definition of health is: "a state characterized by anatomic, physiologic, and psychological integrity; ability to perform personally valued family, work, and community roles; ability to deal with physical, biological, psychological, and social stress". Then, in 1948, in a radical departure from previous definitions, the World Health Organization (WHO) proposed a definition that aimed higher, linking health to well-being, in terms of "physical, mental, and social well-being, and not merely the absence of disease and infirmity". Although this definition was welcomed by some as being innovative, it was also criticized for being vague and excessively broad and was not construed as measurable. For a long time, it was set aside as an impractical ideal, with most discussions of health returning to the practicality of the biomedical model (World Health Organization, 2006).

Health is a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity. A variety of definitions have been used for different purposes over time. Health can be promoted by encouraging healthful activities, such as regular physical exercise and adequate sleep, and by reducing or avoiding unhealthful activities or situations, such as smoking or excessive stress. Some factors affecting health are due to individual choices, such as whether to engage in a high-risk behavior, while others are due to structural causes, such as whether the society is arranged in a way that makes it easier or harder for people to get necessary healthcare services. Still, other factors are beyond both individual and group choices, such as genetic disorders (CDC, 2021).

The WHO definition links health explicitly with wellbeing, and conceptualizes health as a human right requiring physical and social resources to achieve and maintain. 'Wellbeing' refers to a positive rather than neutral state, framing health as a positive aspiration. This definition was adapted by the 1986 Ottawa charter, which describes health as 'a resource for everyday life, not the object of living'. From this perspective health is a means to living well, which highlights the link between health and participation in society. A major criticism of this view of health is that it is unrealistic, because it 'leaves most of us unhealthy most of the time few, if any people will have complete physical, mental and social wellbeing all the time, which can make this approach unhelpful and counterproductive (see Annual Report of the CMO (2013). It fails to take into account not just temporary spells of ill health, but also the growing number of people living with chronic illnesses and disabilities. Furthermore, it might be argued that focusing on 'complete' health as a goal contributes to the overmedicalisation of society by pathologising suboptimal health states. HM, Government (2011) proposed a new definition of health as 'the ability to adapt and to self-manage', which includes the ability of people to adapt to their situation as key to health. It also acknowledges the subjective element of health; what health and wellbeing mean will differ from one person to the next, depending on the context and their needs.

Concept of the Elderly

Conventionally, "elderly" has been defined as a chronological age of 65 years old or older, while those from 65 through 74 years old are referred to as "early elderly" and those over 75 years old as "late elderly." However, the evidence on which this definition is based is unknown. It is said that it originally dates back to more than a century ago in Germany, when Prince Bismark, the Chancellor of the German Empire, selected 65 as the age at which citizens would be able to participate in the national pension plan, for he might have expected that most people would die before reaching this age. However, with recent advances in medical and health science, the average lifespan has increased rapidly. Now, such a definition of elderly to simply include all persons over 65 years. Most developed Western countries set the retirement age between 62 and 67; this is

also generally considered to mark the transition from middle to old age. Having one's age within this range is commonly a requirement to become eligible for senior social programs. In non-Western nations, old age can begin as early as the mid-40s or as late as the 70s.

Old age cannot be universally defined because it is context-sensitive. The United Nations, for example, considers old age to be 60 years or older. In contrast, a 2001 joint report by the U.S. National Institute on Aging and the World Health Organization [WHO] Regional Office for Africa set the beginning of old age in Sub-Saharan Africa at 50. This lower threshold stems primarily from a different way of thinking about old age in developing nations. Unlike in the developed world, where chronological age determines retirement, societies in developing countries determine old age according to a person's ability to make active contributions to society. This number is also significantly affected by lower life expectancy rates throughout the developing world.

The ageing process is of course a biological reality which has its own dynamic, largely beyond human control. However, it is also subject to the constructions by which each society makes sense of old age. In the developed world, chronological time plays a paramount role. The age of 60 or 65, roughly equivalent to retirement ages in most developed countries, is said to be the beginning of old age. In many parts of the developing world, chronological time has little or no importance in the meaning of old age. Other socially constructed meanings of age are more significant such as the roles assigned to older people; in some cases it is the loss of roles accompanying physical decline which is significant in defining old age. Thus, in contrast to the chronological milestones which mark life stages in the developed world, old age in many developing countries is seen to begin at the point when active contribution is no longer possible." (Gorman, 2011).

The Implication of Family Therapy on the Health of the Elderly

In a family counseling setting, it can assist family members in learning about changes that come with aging, so they are more aware of how to support and assist their aging relatives. Family psychoeducation is also been found to be helpful with older adults who may be suffering from severe mental illness. According to Aschbrenner et al. (2011), it's an evidenced-based practice for improving the course of mental illness and can be a powerful source for support of health management among older adults. This intervention would be beneficial to all levels of family functioning, however, would be most effective in families in the mastery and coping level of family functioning. For family members and caregivers, it can include enhancing their caregiver skills, planning their activities, reorganizing the environment, and enhancing support systems (Boyacıoğlu & Kutlu, 2016). Even though there has been more visibility of counseling families and their aging family member, there is still an educational and research gap in

different models and theories specifically tailored to these issues. Research is still needed on the dynamics of families and their ability to effectively make decisions as a unit. Other implications deal with multiculturalism and socioeconomic status. Families from diverse backgrounds may be less likely to reach out to professionals outside of the family unit to seek additional assistance. It has been suggested by researchers that future interventions should be designed in a way that allows professionals working with families to incorporate cultural beliefs, values, and practices into intervention protocols (Cheng et al., 2020). A family's socioeconomic status may also be a barrier to families receiving interventions due to financial hardship.

The need for Family Therapy Intervention in Our Society

Family therapists tend to be more interested in the maintenance and/or solving of problems rather than in trying to identify a single cause. Some families may perceive cause-effect analyses as attempts to allocate blame to one or more individuals, with the effect that for many families, a focus on causation is of little or no clinical utility. It is important to note that a circular way of problem evaluation is used, especially in systemic therapies, as opposed to a linear route. Using this method, families can be helped by finding patterns of behavior, what the causes are, and what can be done to better their situation. Family therapy offers families a way to develop or maintain a healthy and functional family. Patients and families with more difficult and intractable problems such as poor prognosis schizophrenia, conduct and personality disorder, chronic neurotic conditions require family interventions and therapy.

Family therapy can help you improve troubled relationships with your partner, children or other family members. You may address specific issues such as marital or financial problems, conflict between parents and children, or the impact of substance abuse or a mental illness on the entire family. Your family may pursue family therapy along with other types of mental health treatment, especially if one of you has a mental illness or addiction that also requires additional therapy or rehabilitation treatment. For example:

- Family therapy can help family members cope if a relative has a serious mental illness such as schizophrenia but the person who has schizophrenia should continue with his or her individualized treatment plan, which may include medications, one-on-one therapy or other treatment.
- In the case of addiction, the family can attend family therapy while the person who has an addiction participates in residential treatment. Sometimes the family may participate in family therapy even if the person with an addiction hasn't sought out his or her own treatment.

- Family therapy can be useful in any family situation that causes stress, grief, anger or conflict. It can help you and your family members understand one another better and learn coping skills to bring you closer together.

The Initiatives of Family Therapy Intervention

Usual goals of family therapy are improving the communication, solving family problems, understanding and handling special family situations, and creating a better functioning home environment. In addition, it also involves:

- Exploring the interactional dynamics of the family and its relationship to psychopathology
- Mobilizing the family's internal strength and functional resources
- Restructuring the maladaptive interactional family styles (including improving communication)
- Strengthening the family's problem-solving behavior.

The Extent of Campaign for Family Therapy

Family therapy helps family members understand each other and work through difficult feelings in a safe space. This type of therapy focuses on improving the interactions and communication between family members. It is usually used when the family is contributing to a person's difficulties or when one person's problems are impacting other family members. When each person feels supported and works within their strengths, positive changes in relationships and in people's lives will hopefully result.

Family therapists may:

- Talk about each person's hopes.
- Encourage everyone to talk about their experiences and listen to each other.
- Clarify each person's beliefs, values, needs, hopes and assumptions so that everyone understands each other.
- Help families stop blaming each other and begin exploring how everyone can work together to make positive changes
- Help people understand the impact of their words and behaviours on other members of the family
- Help families talk about the challenges they're facing
- Support families as they work through their own goals.

Conclusion

The study concludes that family therapy has always had enormous attraction for social workers who want to help and support individuals and families in thoughtful and effective ways. Working with families-whatever the focus of social work assessment or intervention- probably forms the bedrock of modern practice whether in elderly care, community care, child care or mental health care. Family therapy assists family members in learning about changes that come with aging, so they are more aware of how to support and assist their aging relatives.

Recommendations

1. Family therapy should be introduced in every family to help with issues that specifically affect family's mental health and functioning. It can help individual family members build stronger relationships, improve communication, and manage conflicts within the family system.
2. Family therapy interventions should be designed in a way that allows professionals working with families to incorporate cultural beliefs, values, and practices into intervention protocols

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