Family Therapy History Theory and Practice 7th edition Gladding Test Bank

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Instructor's Resource Manual and Test Bank
for

Family Therapy: History, Theory, and Practice
7th Edition

Samuel T. Gladding
Wake Forest University

Prepared by
Nathaniel Ivers
Wake Forest University

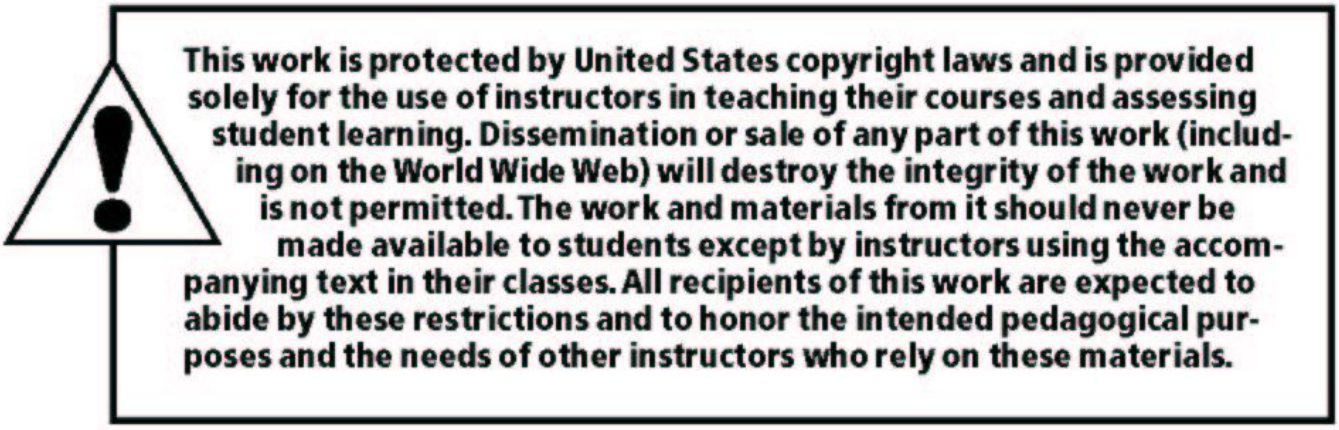
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Prologue

- Approximately 19% of the U.S. population is seen by marriage and family therapists each year at a cost of more than $300 million
- Despite these statistics, marriage and family therapy is relatively new with its theoretical and clinical beginnings starting in the 1940s and its real growth occurring from the 1970s until today
- Family therapy differs from individual and group counseling in its emphasis and clientele
    - ❖ Individual counseling is more intrapersonal
    - ❖ Group counseling is more interpersonal
    - ❖ Family therapy for the most part focuses on making changes in the family system
- Family therapy is connected to the influence of creative, innovative, and assertive mental health practitioners who devised and advocated new ways of providing services to clients

The Rationale for Family Therapy

- Family therapists believe that most life difficulties stem from and can best be addressed within the family system
- Family therapy is an effective treatment approach, particularly in cases of:
    - ❖ adolescent anorexia nervosa
    - ❖ adolescent drug abuse
    - ❖ adult alcoholism and drug abuse
    - ❖ adult hypertension
    - ❖ adult obesity
    - ❖ adult schizophrenia
    - ❖ aggression and noncompliance in children with ADD and ADHD
    - ❖ childhood and adolescent anxiety disorders
    - ❖ childhood autism
    - ❖ childhood conduct disorders
    - ❖ chronic physical illness in adults and children
    - ❖ couple distress and conflict
    - ❖ dementia
    - ❖ depression in women in distressed marriages
- Client satisfaction is high, with 97% satisfaction rates and high percentages of clients stating they received the help they wanted from marriage and family therapists

Reasons for Working with Families as Opposed to Working with Individuals

- Provides flexibility in conceptualizing cases from both linear and circular causality perspectives
- Provides for increased complexity and treatment options for clients
- Involves other real, significant people in the treatment process and brings the action into the room
- All family members receive treatment interventions simultaneously
- Family therapy tends to be briefer than individual counseling
- Family therapy focuses on the interpersonal rather than the intrapersonal which creates new and unique ways of resolving problems

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Chapter 1
The History of Family Therapy: Evolution and Revolution

Chapter Overview

Family Therapy Through the Decades

- Prior to the development of marriage and family therapy as a profession, older family members assisted younger members and adult family members cared for the very young and the very old
- Before 1940
  - ❖ focus in the United States was on the individual
  - ❖ society utilized clergy, lawyers, and doctors for advice and counsel
  - ❖ prevailing individual theories were psychoanalysis and behaviorism
- Catalysts for the growth of family therapy
  - ❖ courses in family life education became popular
  - ❖ establishment of marriage and family training programs (e.g., Marriage Council of Philadelphia in 1932)
  - ❖ founding of the National Council on Family Relations in 1938 and the journal *Marriage and Family Living* in 1939
  - ❖ county home extension agents educated and promoted understanding family dynamics
- Family therapy: 1940 to 1949
  - ❖ establishment of the American Association of Marriage Counselors in 1942
  - ❖ first account of concurrent marital counseling published in 1948 by Bela Mittleman
  - ❖ research on families with a schizophrenic member by Theodore Litz
  - ❖ National Mental Health Act of 1946 funded research on prevention, diagnosis, and treatment of mental health disorders
- Family therapy: 1950 to 1959
  - ❖ individual leaders dominated the profession
  - ❖ Nathan Ackerman used a psychoanalytical approach to understand and treat families
  - ❖ Gregory Bateson studied communication patterns in families with a schizophrenic member and developed the double bind theory
    - ▪ double bind theory - two seemingly contradictory messages may exist simultaneously and lead to confusion
  - ❖ Mental Research Institute was created by Don Jackson in Palo Alto, CA
    - ▪ changed problem conceptualization from a pathology oriented individual perspective to a more relationship based orientation
    - ▪ brief therapy developed at MRI as one of the first new approaches to family therapy
  - ❖ Carl Whitaker pushed the conventional envelope by seeing spouses and children in therapy
    - ▪ set up the first family therapy conference at Sea Island, GA
  - ❖ Murray Bowen studied families with schizophrenic members
    - ▪ held therapy sessions with all family members present
    - ▪ pioneered theoretical thinking on the influence of previous generations on the mental health of families
  - ❖ Ivan Boszormenyi-Nagy developed contextual therapy focusing on the healing of human relationships through trust and commitment
- Family therapy: 1960 to 1969
  - ❖ An era of rapid growth in family therapy
  - ❖ Increase in training centers and academic programs in family therapy
  - ❖ Jay Haley, expanding on the work of Milton Erikson, developed strategic family therapy
    - ▪ emphasis on the therapist gaining and maintaining power during treatment
    - ▪ strategic therapy uses directives to assist clients to go beyond gaining insight
    - ▪ edited *Family Process* from 1961 to 1969, providing a means for to keep professions linked and informed
    - ▪ Haley joined with Salvador Minuchin at the Philadelphia Child Guidance Clinic in the late 1960's

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- ❖ Salvador Minuchin developed structural family therapy, based on his work with the Wiltwyck School for Boys
  - utilized minority community members as paraprofessionals to better relate to urban blacks and Hispanics
- ❖ Virginia Satir was the only woman among the family therapy pioneers
  - started seeing family members as a group in the 1950's
  - utilized touch and nurtured her clients, emphasizing self-esteem, compassion, and affective congruence
  - published *Conjoint Family Therapy* in 1964 which stressed the importance of seeing distressed couples together at the same time
  - Virginia Satir was an influential, charismatic leader
- ❖ Carl Whitaker pioneered unconventional, spontaneous, sometimes outrageous appearing approaches, designed to help families achieve freedom and growth
- ❖ *Family Process* co-founded in 1961 by Don Jackson and Nathan Ackerman
- ❖ Nathan Ackerman published *Treating the Troubled Family* in 1966, advocating closer therapist involvement with families during treatment, being confrontive, and making covert issues overt
- ❖ John Bell developed a family group therapy model, advocated that children 9 years and older should participate in family therapy, and offered one of the first graduate family therapy courses in the United States
- ❖ Murray Bowen discovered that emotional reactivity in many families created undifferentiated family ego mass (i.e., family members have difficulty maintaining their individual identities and actions)

- Systems theory developed by Ludwig Von Bertalanffy in 1968
  - ❖ a way of looking at all parts of an organism simultaneously
  - ❖ a set of elements standing in interaction with one another
  - ❖ each element of a system is affected by what happens to any other element
  - ❖ the whole is greater than the sum of its parts
  - ❖ became the basis for most family therapy
  - ❖ less reliance on linear causality (direct cause and effect)
  - ❖ increased emphasis on circular causality (events are related through a series of repeating cycles or loops)
  - ❖ family therapists seen as a specialists within the field
  - ❖ first license regulating family therapists granted in California in 1963
- Institutes and training centers
  - ❖ Mental Research Institute continues its work in training and research
  - ❖ Family Therapy Institute of New York established with Nathan Ackerman as director
  - ❖ Philadelphia Child Guidance Clinic developed innovative supervision techniques such as the 'bug in the ear"
  - ❖ Family Therapy Institute of Philadelphia founded in 1964, merging the Eastern Pennsylvania Psychiatric Institute and the Family Institute of Philadelphia
  - ❖ Boston Family Institute founded by Fred Duhl and David Kantor, focusing on expressive and dramatic interventions and originating the family sculpting technique
  - ❖ Institute for Family Studies in Milan, Italy formed in 1967
  - ❖ an MRI based model that developed many innovative short term approaches
- Family therapy: 1970 to 1979
  - ❖ rapid growth in AAMFT based partly on recognition as an accrediting body for marriage and family training programs
  - ❖ The American Association of Marriage and Family Counselors (AAMFC) changed its name to the American Association for Marriage and Family Therapy (AAMFT) in 1977
  - ❖ *Journal of Marital and Family Therapy* founded by AAMFT in 1974
  - ❖ American Family Therapy Academy (AFTA) founded in 1977 to address clinical, research, and teaching issues
  - ❖ AAMFT and AFTA agreed on distinct roles within the profession
  - ❖ AFTA concentrated on the exchange of ideas among advanced professionals
  - ❖ AAMFT focused on accreditation of training programs
  - ❖ family therapy continued to growth and become more refined outside of psychoanalytical traditions
  - ❖ Nathan Ackerman died in 1971

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- ❖ the approaches of Carl Whitaker (experiential family therapy), Salvador Minuchin (structural family therapy), and Jay Haley (strategic family therapy) gained in popularity and influence
- ❖ *Families and Family Therapy* published in 1974 by Minuchin, serving as a practical training guide for structural family therapy
- ❖ *Psychosomatic Families: Anorexia Nervosa in Context* published by Minuchin and associates in 1978, highlighting the power of the structural family therapy approach in working with this disorder

- Influence of foreign therapies and therapists
  - ❖ family therapy grew rapidly in Europe, particularly in Milan, Italy
  - ❖ Milan associates
    - ▪ developed circular questioning (asking questions that highlight differences among family members)
    - ▪ developed triadic questioning (asking a third member how two other members of the family relate)
    - ▪ emphasis on developing hypotheses about the family before treatment begins
    - ▪ utilized outside of session homework assignments that were often difficult and ritualistic
  - ❖ R.D. Laing, a British professional, created the term *mystification* to describe how some families mask interactions between family members by giving contradictory or confusing explanations
  - ❖ Robin Skynner, from Great Britain, developed a brief psychoanalytic family therapy which complemented the earlier work of Nathan Ackerman and Ivan Boszormenyi-Nagy
- Feminist theory and family therapy
  - ❖ feminists began to question whether or not some concepts of family therapy were oppressive to women
  - ❖ *A Feminist Approach to Family Therapy* was published in *Family Process* by Rachel Hare-Mustin in 1978
  - ❖ belief that sexism limits the psychological well-being of women and men and must not be tolerated
- Family therapy: 1980 to 1989
  - ❖ marked by the retirement or death of many family therapy founders and leaders and the emergence of new leaders
  - ❖ increase numbers of women leaders who created new theories which challenged older ones
  - ❖ Women's Project in Family Therapy in 1988 focused on gender free approaches to family therapy
  - ❖ increased numbers of individuals and associations devoted to family therapy, including the International Association for Marriage and Family Counseling (IAMFC) of the American Counseling Association and Division 43 (Family Psychology) of the American Psychological Association
  - ❖ increased levels of research in family therapy to provide evidence of the effectiveness of family therapy
  - ❖ increased numbers of publication in the family therapy field, including the *Family Therapy Networker*
  - ❖ Creation of multisystemic therapy, an intensive family- and community-based approach for working with juvenile offenders
  - ❖ recognition of family therapy as one of four core mental health providers eligible for federal training grants
- Family therapy: 1990 to 1999
  - ❖ family therapy became a more worldwide phenomenon, with associations, research, and training institutes established across the globe
  - ❖ new theories were developed or refined
  - ❖ feminist family therapy examined gender sensitive issues in therapy rather than masculine or feminine issues, per se
  - ❖ the reflecting team approach of Tom Anderson used clinical observers to discuss their impressions with the therapist and the family, thus becoming a part of the therapeutic team
  - ❖ the therapeutic conversations model of Harlene Anderson and Harry Goolishian used a postmodern approach in which the therapist relates to the family in a more collaborative, egalitarian partnership
  - ❖ the psychoeducational model of Carol Anderson emphasized teaching family members about multiple aspects of mental illness, focusing on boundaries, hierarchy, and the integrity of subsystems
  - ❖ the internal family systems model of Richard Schwartz looks at both individual intrapsychic dynamics and family systems
  - ❖ social constructionism based models were radically different than systems based models in that they are based on the belief that our experiences are a function of how we think about them rather than objective truths

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- ❖ Basic Family Therapy Skills Project was established in 1987 to determine the essential skills needed for mastery of structural, strategic, brief, and transgenerational family therapy approaches
- ❖ increased awareness and focus on the influence of the therapist on the therapy (second-order cybernetics)
- ❖ increased importance of the family ontology or 'world view' stressing circularity and autonomy of systems
- ❖ change in training emphasis from producing narrowly focused, theory bound clinicians to a focus on how to work with specific populations or types of families

- Family therapy: 2000 to 2009
  - ❖ family therapy has spread to Europe, Asia, Africa, Australia and South America
  - ❖ International Family Therapy Association founded in 1987
  - ❖ professional associations continue to grow, providing services, educational opportunities, and publications
  - ❖ licensure has grown to all 50 states
  - ❖ marriage and family therapists recognized as one of five core mental health providers (along with psychiatrists, psychologists, social workers, and psychiatric nurses)
- Accreditation of family therapists
  - ❖ two associations accredit marriage and family training programs
  - ❖ Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE)
  - ❖ Council for Accreditation of Counseling and Related Educational Programs (CACREP)
- Developing culturally effective family-based research
  1. increased research on the effectiveness of family therapy with different cultural groups
  2. continued development of marriage and family therapy in regard to new narratives and approaches to working with couples and families
  3. health care reform
- Family therapy: 2010 to the present
  - ❖ Social conditions continue to change, requiring marriage and family therapists to formulate new and more socially relevant ways to work with couples and families
  - ❖ Professional associations such as the AAMFT and the IAMFC rely heavily on technology to disseminate information
  - ❖ Online therapy is becoming more popular and prominent
  - ❖ The AAMFT and IAMFC updated their respective codes of ethics in 2012 to keep pace with the times
  - ❖ The fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders* was published in 2013 and continues to pose challenges for family therapists' treatment of couples and families and reimbursement for their work
  - ❖ The Supreme Court of the United States rendered two important decisions in 2013 with ramifications for marriage and family therapists, one related to the legal definition of "spouse," and, a second lifted the ban on same-sex marriage in California

Key Terms

Basic Family Therapy Skills Project a project that began in 1987 which focuses on determining, defining, and testing the skills essential for beginning family therapists to master for effective therapy practice.

brief therapy an approach to working with families that has to do more with the clarity about what needs to be changed rather than time. A central principle of brief therapy is that one evaluates which solutions have so far been attempted and then tries new and different solutions to the family's problem, often the opposite of what has already been attempted.

circular questioning a Milan technique of asking questions that focus attention on family connections and highlight differences among family members. Every question is framed so that it addresses differences in perception about events or relationships by various family members.

dual therapy the name for conjoint couple therapy devised by Carl Whitaker.

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family life education the study of family life including developmental and situational factors that affect or change the life of families.

internal family systems model of Richard Schwartz which considers both individual intrapsychic dynamics and family systems.

interpersonal pertaining to matters or relationships between two or more persons.

intrapersonal thoughts, feelings, and processes within a person.

mystification the actions taken by some families to mask what is going on between family members, usually in the form of giving conflicting and contradictory explanations of events.

National Mental Health Act of 1946 legislation that authorized funds for research, demonstration, training, and assistance to states in order to find the most effective methods of prevention, diagnosis, and treatment of mental health disorders.

new epistemology the idea that the general systems approach of Bateson, sometimes referred to as cybernetics, must be incorporated in its truest sense into family therapy with an emphasis on "second-order cybernetics" (i.e., the cybernetics of cybernetics). Basically, such a view stresses the impact of the family therapist's inclusion and participation in family systems.

ontology a view or perception of the world.

psychoeducation a strategy that involves educational methods such as reading books, attending workshops, listening to audiovisual material and interactive discussions.

reflecting team approach an approach where clinical observers of a therapeutic session come out from behind a one-way mirror observing room to discuss with the therapist and client couple/family their impressions.

schism the division of the family into two antagonistic and competing groups.

second-order cybernetics the cybernetics of cybernetics, which stresses the impact of the family therapist's inclusion and participation in family systems.

skew (marital skew) a dysfunctional marriage in which one partner dominates the other.

social constructionism a philosophy that states experiences are a function of how one thinks about them and the language one uses within a specific culture. From this perspecitve all knowledge is time- and culture-bound. It challenges the idea that there is objective knowledge and absolute truth. Narrative and solution-focused therapy are based on social constructionism. system a set of elements standing in interaction. Each element in the system is affected by whatever happens to any other element. Thus, the system is only as strong as its weakest part. Likewise, the system is greater than the sum of its parts.

systems theory a theory, sometimes known as general systems theory, that focuses on the interconnectedness of elements within all living organisms, including the family. It is based on the work of Ludwig von Bertalanffy.

therapeutic conversations model a postmodern approach where the family therapist relates to the couple or family in a more egaliarian partnership

undifferentiated family ego mass according to Bowen, an emotional "stuck togetherness," or fusion, within a family.

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Classroom Discussion

1. Freud and others believed that the family is often the source of difficulties and, as a result, the patient should be treated separately from the family to avoid contamination. Family therapy, on the other hand involves family members in the treatment process and brings the action into the room rather than just talking about problems. If you were a member of a professional panel discussion of individual and family therapies, what rationale would you give for the value of family therapy?

2. Client satisfaction rates are claimed to be as high as 97% for marriage and family therapy clients. What do you think accounts for this high rate of satisfaction?

3. Like families themselves, the field of family therapy has changed markedly over the past few decades. Early approaches emphasized giving directives and therapists being "in charge" during treatment. In the 1990's, social constructivist models emphasized individual rather than absolute truths, and a more egalitarian therapist-client relationship. Discuss the merits of the 'therapist as leader' versus the 'therapist as collaborator' and explain how these two very different approaches might peacefully co-exist.

Multiple Choice Questions

1. Which of the following contributed to the development and growth of family therapy?
   A. The launching of Sputnik by the Russians.
   B. The establishment of career guidance programs.
   C. The initial establishment of marriage counseling
   D. The establishment in the 1930s of all male boarding schools

2. Which of the following groups, in the 1920s and 1930s, worked with families from an educational perspective to help them to better understand the dynamics of their family situation?
   A. Family Life Specialists
   B. Family Counselors
   C. Marriage Counselors
   D. County Home Extension Agents

3. Which one of these individuals is responsible for forming the American Association of Marriage Counselors (AAMC)?
   A. Ernest Groves
   B. Ludwig Von Bertanlanffy
   C. Paul Popenoe
   D. Abraham Stone

4. The systems theory developed by Bertanlanffy (1968) had less reliance on _____ and more emphasis on _____.
   A. family therapists; paraprofessionals
   B. circular causality; linear causality
   C. individual parts; societal influence
   D. linear causality; circular causality

5. Jack, a family therapist in the 1960's, emphasizes the importance of self-esteem, compassion, and congruent expression of feelings. Whose model of family therapy is Jack likely following?
   A. Virginia Satir
   B. Evelyn Duvall
   C. Salvador Minuchin
   D. Jay Haley

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6. A type of questioning developed by the Milan Associates, emphasized asking questions that highlighted differences among family members. This type of questioning is called:
   A. linear questioning
   B. triadic questioning
   C. open ended questioning
   D. circular questioning

7. A person who receives a message to "act boldly and be careful" is receiving which type of communication, according to Bateson et al., 1956)?
   A. Paradoxical intention
   B. Double-bind
   C. Circular communication
   D. Cognitive dissonance

8. Which one of the following therapists wrote on conjoint couple therapy and broke with traditional psychotherapy of the time by including spouses and children in therapy?
   A. Virginia Satir
   B. Jay Haley
   C. Carl Whitaker
   D. Murray Bowen

9. Family therapy focuses on the _____ rather than the _____, which creates new and unique ways of resolving problems.
   A. intrapersonal; interpersonal
   B. physical; emotional
   C. individual; system
   D. system; individual

10. In which theory of family therapy is it proposed that human suffering is embedded within a biopsychosocial-cultural framework?
   A. Contextual Therapy
   B. Strategic Therapy
   C. Biopsychosocial Family Therapy
   D. Structural Family Therapy

11. Which of the following refers to asking a third family member how two other members of a family relate?
   A. Paradoxical intentions
   B. Circular questioning
   C. Triadic questioning
   D. Bracketing

12. James gives conflicting explanations of events to mask what is really going on between family members. According to Laing (1965), James behavior can be described as _____.
   A. Paradoxical intention
   B. Scapegoating
   C. Enabling
   D. Mystification

13. Which of the following is a body of ideas about gender hierarchy and its impact rather than a specific model of therapy?
   A. Filial therapy
   B. Strategic Family Therapy
   C. Feminist Family Therapy
   D. Relational Cultural Family Therapy

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14. Which of the following was a major goal of the Women's Project in Family Therapy?
    A. To bring awareness to the absence of gender in the formation of systems theory
    B. To advocate that AAMFT affiliated therapists use feminist family therapy as their main theoretical lens
    C. To advocate for greater female representation in leadership roles in AAMFT
    D. All of the following were major goals of the Women's Project.

15. Which of the following organizations is a division of the American Counseling Association?
    A. Division 43
    B. AAMFT
    C. Association for Marriage and Family Counselors
    D. International Association of Marriage and Family Counselors

16. Which of the following therapies focuses on intensive family therapy along with community-based support for working with juvenile offenders with serious antisocial behaviors?
    A. Adlerian Family Therapy
    B. Structural Family Therapy
    C. Multisystemic Therapy
    D. Feminist Family Therapy

17. Which of the following is a democratic and collaborative model of working with couples and families, in which clinical observers of a therapeutic session come out from behind a one-way-mirror observing room to interact with the therapist and couple/family?
    A. Technology-Assisted Family Therapy
    B. The Reflecting Team Approach
    C. Ecological Family Counseling
    D. Multisystemic Therapy

18. This approach, developed by Carol Anderson (1988), is used with families that have a member with schizophrenia. Attention is given to teaching family members about multiple aspects of mental illness in a day-long survival skills workshop.
    A. Therapeutic conversations model
    B. Reflecting Team Approach
    C. Psycheducational Model
    D. Internal Family Systems Model

19. Which of the following is a philosophy that states that our experiences are a function of how we think about them instead of objective entities?
    A. Applied Berkelian Theory
    B. Social Constructivism
    C. Biocentrism
    D. Systems Theory

20. In which court ruling did the Supreme court rule that section 3 of the Defense of Marriage Act (DOMA) was unconstitutional under the Due Process Clause of the Fifth Amendment?
    A. United States v. Windsor
    B. Hollingsworth v. Perry
    C. Tarasoff v. University of California Berkeley
    D. Sutherland v. Madison Memorial

Essay Questions

1. What trends in society do you think will influence the future development of family therapy?
2. What historical event or development, in your opinion, most impacted family therapy?

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Chapter 1: The History of Family Therapy
Answer Key

Multiple Choice

1. C. initial establishment of marriage counseling
2. D. County Home Extension Agents
3. A Ernest Groves
4. D. linear causality; circular causality
5. A Virginia Satir
6. D. circular questioning
7. B. double-bind
8. A. Virginia Satir
9. D. interpersonal; intrapersonal
10. A. contextual therapy
11. C. triadic questioning
12. D. mystification
13. C. feminist family therapy
14. A. absence of gender in formation of systems theory
15. D. IAMFC
16. C. Multisystemic Therapy
17. B. The Reflecting Team Approach
18. C. Psychoeducational Model
19. B. Social Constructivism
20. A. United Sates v. Windsor

Essay Questions

1. Future development of family therapy?
   a. Answers, of course will vary, but they will likely revolve around social conditions, including economic, political, and religious conditions. Effective responses also will include assumptions about how technology will influence both the interactions and compositions of families and couples, as well as the delivery of family therapy.

2. Historical event that most impacted the development of family therapy?
   a. This answer, by definition, will vary significantly. It's not so much what the students choose as it is their rationale for how it impacted family therapy. For example, they may say that the biggest impact was the formation of professional organizations. This is a good start, but the important piece is their reasons for why professional organizations were so important to the establishment and development of family therapy.

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