Jackie, a 30-year-old woman has come to you because she needs support with her anxiety. She attributes a lot of her current feelings to her relationship issues. She and her partner have been having an increasing number of arguments recently, typically about Jackie’s behavior when they go out because Jackie’s partner thinks that she drinks too much. In response to questions about her use of substances, Jackie describes herself as a "social drinker." Each week, her typical pattern is to consume 3-6 drinks during each of her 2-3 nights of drinking. She began drinking regularly (1-2 times per week) and heavily (to intoxication) at the age of 15. She continued this pattern throughout high school. Jackie had cut back on drinking when she went to university because her new friends didn’t drink very much.

During her first year at university, Jackie "came out" as queer to her friends and family. At this time, she started to drink heavily again. After graduating from university, Jackie and her partner of two years (Sarah) moved in together.

Jackie reports that when they moved in together, they both decreased their drinking due to both financial concerns, as well as their interests in starting new careers. However, as they began to hang out with friends who routinely went to bars, both of them gradually increased the frequency and quantity of their drinking. They often go together, but Jackie drinks more than Sarah. Jackie shares that it is common for Sarah to be upset with her the day after they go out. Sarah has told Jackie that she doesn’t want to be with someone who wastes all of their money on alcohol. Jackie shares that she is confused by these comments because both Sarah and Jackie drink. Jackie wonders if Sarah’s responses are actually about something else. Jackie is hoping to cut down on her drinking and also work to solve some of the issues that have come up with Sarah.

**Discussion Questions**

List three questions (that were not mentioned in the case study) that you would ask Jackie. Explain why you have chosen each question.

What would you need to consider to approach this situation through an anti-oppressive framework?

What modalities do you think would be most helpful when working with Jackie from the course content below are the modalities.

Why do you feel this way? Be specific in your strategy and technique. You can discuss multiple approaches or modalities.

**Grade Assessment:**

Your response should follow these guidelines:

* **Length:** Your response should be 3 page in length
* **Format:** Use American Psychological Association(APA) for both formatting and referencing. Reference your sources using the latest edition of APA.
* **References:** In-text citations should appear throughout your paper and a list of references should appear at the end of your paper. APA style should be used for both in-text citations and your list of references. Note: the reference list **does not** count against your 1-2 page limit.
* **Style and organization:** This is an academic and professional piece of writing – use academic language; first person may be used moderately, if necessary. Headings can be used to divide and organization the various sections of your note.
* **Font:** The text should use Times New Roman, 12-point font and double line spacing.
* **Margins:** The left and right margins should be set to 1”.

**Total: 15 marks**

**Presentation (5 marks)**

* Flow of writing – the document is well-structured and logical
* The writing style assists with reader comprehension
* The document has been edited (for spelling and grammar)

**Content (10 marks)**

* The student clearly demonstrates knowledge of the modality
* The student applies the techniques and strategies discussed in the course content to the case-study
* The student identifies and explains techniques and strategies that are relevant to the case-study
* The student applies an anti-oppressive framework to the case study

Modalities from the course content:

Bowen Family Systems Theory

**Strategic Family Therapy -** There are three main approaches in strategic family therapy:

1. MRI’s Brief Therapy
2. Haley and Madanes’s Strategic Therapy
3. Milan Systemic Model

# Positive and Negative Feedback Loops

**Cybernetic:** Difficulties are turned into chronic problems by misguided solutions, causing positive-feedback escalations.

**Structural:** Problems are the result of incongruent hierarchies.

**Functional:** Problems result when people try to protect or control one so that their symptoms serve a function for the system.

An MRI approach focuses on cybernetic, although theorists such as Haley and the Milan Associates worked with all three.

**Structural family therapy.**

**Solutions Focused Therapy**

Enactment technique require three operations:

1. The therapist notices a problematic sequence
2. The therapist initiates an enactment – often by asking one family member to respond to a comment made by another family member.
3. The therapist guides the family to modify the enactment

# Joining and Accommodating:

# Joining can assist therapists with building rapport by providing an empathetic space for each family to tell their story.  Joining creates an environment for the therapist to assess the family’s current functioning.  Although joining takes place at the beginning of the therapeutic relationship, it is also an ongoing process as the therapist must maintain a steady relationship with the family.  The therapists’ ability to reflect an accurate understanding of the family back to the members is a key component to joining.

# Shaping competence

# Challenging Unproductive Assumptions

# Narrative Therapy – The role of stories, Finding support, Problem saturated stories, Unique Outcomes, etc.

# Cognitive Behavioural Therapy (CBT):

# Assessment, Common Thought Processes, The ABC model, Automatic thoughts, Core Belief (differ from assumptions), and Homework or action plans are often used by CBT therapists. Identifying core beliefs is using what is called the Downward Arrow Technique.

# Anti-Oppressive Approach