Interviewing family therapists at the World Family Therapy Congress, organised by the International Family Therapy Association (IFTA), held in Aberdeen, March 28-30 2019

Deni Gordon-Jackson, Charlotte Chiu and Sarah Eldrid

The International Family Therapy Association is the professional association founded in 1987 for those interested in the field of marriage and family therapy throughout the world. As such, it is the only organisation that provides unity for therapists from east to west, respecting traditional approaches and embracing the tradition of tomorrow. The goal of the congress is advancing family therapy worldwide by promoting research, education, sound practice, and promoting international cooperation. It facilitates an exchange of knowledge and ideas that support the health and well-being of families and other human systems. It creates opportunities for face-toface sharing of ideas, networking across the globe and promotes the growth of family therapy in many countries.

We are council members of the UKCP College of Family, Couple and Systemic Therapy and were commissioned by the college to attend the event which was held in Scotland this year. It was our first experience of a worldwide international event, and we were totally impressed and inspired by the collaborative 'family' experiences. We were saturated by the breadth and depth of knowledge demonstrated, and by the intensity of the plenaries and workshops available within the three days. There were over 350 delegates representing 38 countries!

We want to bring back learning about family therapy development in other countries, particularly regarding registration and regulatory requirement, standards, training, supervision and access to family

therapy. We imagine it would be interesting for our members to hear how family therapy works in other countries. We took a journalistic approach and have chosen to interview four delegates from three countries - India, Hong Kong and Sudan. We would have liked to have included more voices from different countries but, due to time constraints, this was not possible. For further information, we refer you to the research that Maria Borsca (2016), previous chair of the European Family Therapy Association, has done on looking at how each European country regards family therapy and systemic practice. As many will be aware, the European Association of Psychotherapy is responsible for the certification and accreditation of psychotherapists in Europe. The international association provides international certification and accreditation of courses and is collecting information about what is being developed in each country.

Below is the interview schedule:

- **1.** How does the public access family therapy in your country?
- **2.** How do you or others raise the profile of family therapy and systemic practice in your contexts/ country?
- **3.** Tell us how family therapy works in your country: Training, registration, supervision and regulatory structure?
- **4.** How has family therapy developed over time in your country?
- **5.** What are the influences, the supports and challenges in this journey?
- **6.** Anything else you would like to share with our members?

Conversation with Malavi
Madhusudan and Sarayu
Chandrashekar, individual
couple and family therapists
(MSc in Marital & Family Therapy)
and clinical supervisors from
Bangalore, India

Both Malavi and Sarayu are independent private practitioners, are location based and they see individuals, couples and families. Malavi works for a counselling agency called "Talkitover" that Sarayu helped to set up in 2010. They explained that people tend not to seek family therapy as such, but look for counselling. Bangalore has a National Institute for Mental Health and Neurosciences and there are other institutes in India including Delhi. This is an autonomous body operating under the Ministry of Health and Family Welfare of the Indian government. The Mental Health Act 2017 set up a regulatory body for mental health and continues to modify and review mental health care. There is an existing regulatory body for clinical psychologists, psychiatrists and special educators but not as yet for counsellors and psychotherapists. However, this is in process and there is a plan for a marital and family therapy training course in Bangalore. There are approximately twenty family therapists across India. Although there is no formal supervision requirement after their training, they are all making efforts in maintaining supervision and reflective practice.

Context 163, June 2019 45



Deni Gordon-Jackson, Sarayu Chandrashekar, Malavi Madhusudan and Sarah Eldrid

They explained India has a collectivist culture, in contrast to the western world. The training model for family therapy has been imported from the United States. In their workshop, they presented their paper applying a cultural adaptation in working with Indian families. They looked at adapting family therapy theories, interpersonal, spirituality, yoga, transactional analysis, object relations and regression therapy to fit with their local cultures.

Conversation with Joyce Ma, professor in the Department of Social Work at The Chinese University of Hong Kong

Joyce Ma received her training first from Wai Yung Lee and later from Salvador Minuchin in the USA. She is experienced in helping families of children and adolescents who have anorexia nervosa and other mental health challenges. Hong Kong has a mixed healthcare system, including both private and governmentfunded systems, offering free or reducedrate services. General medical practitioners and other helping professionals such as social workers, psychiatric nurses and psychologists refer patients for family therapy provided by a specialist team.

She described how family therapy has increased in popularity and gained a good reputation. Mental health services are funded by the government. Cognitive behavioural therapy is the mainstream approach, with psychologists also offering

family therapy. No family therapist is employed by the health service as the government has refused to recognise family therapy as a profession.

There are three masters programmes in Hong Kong, which trained helping professionals to make use of family therapy in helping. For instance, the Chinese University of Hong Kong has offered master-of-arts programmes in family counselling and family education.

The University of Hong Kong used to run its own Masters Course in Family Counselling and Family Education – the systemic approach is integrated into social work. Unfortunately, it has been terminated because of the departure of W Y Lee, the programme director.

In the past three years, Joyce ran a marital and family therapy training for experienced psychiatric nurses and has witnessed their theoretical shift from a medical approach to a more systemicdevelopmental model. The training programme has western theories and is adapted to fit local culture, for example, using Chinese metaphors, Buddhism and mindfulness. She offers training and supervision; and this enables accreditation from the American Association for Marriage and Family Therapy. Students completing the masters training in Hong Kong can seek accreditation in the USA if they have accumulated sufficient hours of clinical practice and clinical supervision. Currently, there are about 30 family therapists in Hong Kong. Joyce summarised the regulatory situation of family therapists in Hong Kong as follows:

"In Hong Kong, family therapists are not regulated by licensing. No ruling body exists to govern the practice by family therapists. There is no stipulation for family therapists to pass any qualifying examination for MFT



Joyce Ma, Deni Gordon-Jackson, Charlotte Chiu and Sarah Eldrid



Sarah Eldrid

in order to start practice locally. There is no requirement for family therapists in practice to be supervised. Moreover, practicing family therapists are very few in numbers, and MFT graduates have not gathered the required strength to even ponder licensing. Hence, there is a long way to go before licensing can be put on the agenda. It is almost impossible for the near future. The standard of professional practice relies on self-regulation" (Wong & Ma, 2013).

Conversation with Makia Himat, family therapist in the United Arab Emirates

Makia is from Sudan and had completed the Masters Program for Family Counselling and Therapy at the Family



Charlotte Chiu

Study Institute in 2000 at the Omdurman University, Sudan. In 2010, Makia moved to the University of Sharjah, in the Emirates, where she teaches on the Applied Sociology MSc in Family Counselling, which incorporates systemic thinking and training.

Makia's first cohort of family therapy graduates completed their training in 2004. Students came from social work and psychology. Clients are mainly self-referred to the family service. Makia expressed concern about the lack of regulation and resources; the lack of teaching staff and thus the PhD program being suspended.

Makia has been able to transfer her social work skills and continue her



Makia Himat, Sarah Eldrid and Deni Gordon-Jackson



Deni Gordon-Jackson

contribution to the development of family therapy in the United Arab Emirates, which she is passionate about. Makia described the support of the extended family as being very strong, but when it does not work it provides a lot of pressure for a family. She explained that she has expanded her learning by going to conferences, self-learning and looking at what fits the cultural thinking in Muslim families; using prayer, being kind and solidarity.

Makia described how there is a sense of shame in the culture of the society for seeking professional help and advice. However, the Islamic faith encourages the seeking of professional help in all circumstances. In managing suicidal behaviours and thoughts; the Islamic faith forbids suicide but encourages seeking help.

Makia is committed to raising the profile of family therapy and wanting to fight for the future development, accreditation and regulation of the profession. Makia recognises this is "her baby" and therefore is very passionate about it. She has been in discussion with the International Family Therapy Association board about how they can obtain regulation for the training.

As representatives of the College of Family, Couple and Systemic Therapy, the three of us felt the experience of participating in these interviews, along with being part of our first international association conference, was very humbling and inspiring. We felt much more connected to the rest of the 'world' community of family therapy and systemic practice. Sarah felt the desire to develop the connections we have made and hopes to consider doing some joint work together in the future. Charlotte felt reconnected with her country of origin,

Context 163, June 2019 47

Hong Kong, and was pleased to hear about the systemic developments in Hong Kong and China; and particularly appreciated the opportunity to learn about the registration, training, supervision and governance issues in different countries. Deni felt inspired by the many countries and their representative voices elevating systemic and family psychotherapy across the world.

We would like to give a special thank you to Makavi Madhusudan, Sarayu Chandrashekar, from India, Joyce Ma, from Hong Kong and Makia Himat from Sudan, who is practicing in the United Arab Emirates, for their time and generosity in sharing their experiences and who gave us permission to publish in our association's magazine. We are especially grateful for them for finding time for us during a very busy schedule. For us, the fact that the congress was across what would have been Brexit weekend made it all the more poignant for an international event.

References

Borsca, M. (2016) Systemic Therapy and National Healthcare Systems in Europe – Riga, May 2016 published in Borsca, M. (2016) Systemische (familien) Therapie und Staatliche Gesundheitssyteme in Europa. *Ein Uberblich Familiendynamik*, 41: 24-33. Wong, O.I. & Ma, J.L.C (2013) Development of family therapy in Hong Kong. *Contemporary Family Therapy*. DOI 10.1007/s10591-013-9251-9 Chandrashekar, S. & Madhusudan, M. (2013) Social construction of mate preferences of young indian adults. *Indian Journal of Health and Well-being*, 4(8): 1506-1511.

If there are any queries relating to this article, please contact the college email at cfcst@ukcp.org.uk

48 **Context** 163, June 2019