family therapy training course at Psychiatry Institute

Dr. Nathan B. Epstein brought the concept of family therapy with him from New York in 1960. When he was appointed Psychiatrist-in-chief at the JGH, he introduced his ideas to the Department of Psychiatry.

As a technique, family therapy is only 15 years old. It involves either the nuclear family (parents and children) or any group living together under one roof, in discussions with trained therapists whose aim is to help them live together better.

In the beginning, Dr. Epstein trained only residents in Psychiatry, social workers and nurses in the new technique. But word soon got around, arousing great interest in the psychiatric community. People from Psychiatry departments of other hospitals as well as from social agencies became interested in family therapy as a technique.

The program revolved around the therapist treating an individual member of a family and then involving the rest of the family in the therapy. The public interview was part of the treatment. A family would be referred through the Social Service Department to the Hospital Amphitheatre. For one and a half hours either Dr. Epstein or one of the people he had trained, would interview the family. An audience of between 50 and 80 people listened and observed the proceedings.

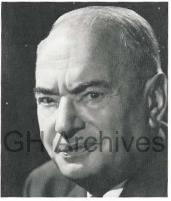
With the family therapy program in full swing, the training of personnel continued. Social workers and residents treating families would meet in large groups for supervision. Then people outside the Hospital, who were involved in treating families, came to the Department of Psychiatry seeking supervision. It was finally decided to set up an official course and charge a fee for it. Thus, in 1966, the Family Therapy Training Program, under the joint auspices of the Department of Psychiatry at McGill University and the Department of Psychiatry at the JGH, came into being. Since its inception, the program has expanded under the guidance of the next Psychiatrist-in-chief, Dr. Henry Kravitz.

Dr. Herta Guttman is now the Director of the Family Therapy Training Program and she has a faculty of 14 working with her. Thirty six people, among them, psychiatrists, psychologists, teachers, nurses and social workers, are presently enrolled in the course.

The prerequisites for application are (a) working in a setting through which there are families to treat; and (b) having a degree in a specific profession. There is no diploma issued for having taken the course, but each successful student receives a letter accrediting him with having completed it.

The backbone of the course in the first two years is supervision in small groups. Each group is instructed by four supervisors. The students present actual cases and receive guidance through open discussions. The final advice is given by the supervisors. Often the students will bring tape recordings of sessions with their clients, adding an extra dimension to the group discussions.

In Memoriam



Mr. David Kirsch

It is with deep regret that we record the passing of Mr. David Kirsch, one of the Hospital's founders, who died on November 6, 1973 at the age of 87.

Mr. Kirsch's involvement in social work in a leadership capacity began in 1910 when he joined the Board of the Montreal Hebrew Orphans and Sheltering Home.

In 1927 he was instrumental in producing a study which led to the creation of the JGH. He served from 1939 to 1958 as Chairman of the Hospital's Building Committee and was President of the Hospital from 1955 to 1958, when he was named Honorary President.

Mr. Kirsch was President of the Federation of Jewish Community Services from 1950 to 1953 and a Life Trustee of Allied Jewish Community Services, successor to the federation.

Dr. W.R. Slatkoff, executive director of the JGH, noted Mr. Kirsch's passing as that of a dear friend and colleague, one whose leadership will be greatly missed by the Community. Besides the supervision, there is a series of lectures given on the development of the individual, the development of marriage and the development of the family. A third feature of the program involves simulated families. Students assume various roles — some play family members, others the therapists. In this way, everyone gets the practice and the feeling of being a family member in distress, and it helps create a greater awareness of their own behaviour.

A fourth aspect of the course is the viewing, through a one-way mirror, of an actual family being treated on a weekly basis by a staff member. After the interview, the group of students meet with the therapist to discuss what took place.

During the third year, the course is run on a seminar basis. By this time, the students are expected to treat families on their own. Students take turns presenting actual cases to other students who act as supervisors. The teachers are on the sidelines as consultants. The students also read the most current literature on family therapy to further augment their fund of knowledge.

Besides the three-year course, there are two other programs available on a shortterm basis. One is an Introductory Workshop being held this year from January 28 to February 2. It is an intense fiveday introduction to some concepts, techniques and issues in conjoint family therapy. It is designed for people who have had no contact or very limited experience with family therapy.

The program consists of : (a) seminars of general interest which will provide lectures and demonstrations on various aspects of family interviewing; and (b) seminars organized according to the specific needs and wishes of the participants, in terms of their particular interests.

The second short-term program is being introduced for the first time this year. It is an Advanced Workshop to be held from February 7 to 9. It is an intense three-day workshop designed for people who have had at least three years experience in conjoint family therapy.

The program consists of : (a) participants' presentations of their own cases; and (b) round-table discussions of practical issues in conjoint family therapy. Many graduates of the three-year course who are working in social agencies return to take part in this workshop as a refresher course.

All of these programs are designed with the same result in mind — helpin, families cope better with the stresses of illness.