

4.6.4 Content

The CaFI intervention includes five key components:

1. Engagement and Assessment [2 sessions];

The initial sessions involve meeting the family together for the first time, building trust and engagement, developing a positive therapeutic relationship, and establishing alliance between family members. Therapists carry out a thorough assessment of the family and identify areas of need, as well as strengths and resources. An explanation of the intervention is provided, including its proposed structure and purpose, and how it can be tailored to benefit the family. Therapists develop a formulation of needs, which is discussed in supervision and revised throughout therapy as new information comes to light. The problems to be worked on in the family are prioritised based on the family's wishes and formulation, and family members are encouraged to set realistic (SMART – specific, measurable, attainable, relevant, timely) goals and expectations for future sessions.

The main aims of the *Engagement and Assessment* sessions are to:

- Develop therapeutic relationship and build trust.
- Establish alliance between service user and family.
- Establish personal accounts of schizophrenia and psychosis and treatment.
- Formulation of problems, strengths and resources in the family.
- Identify areas of need and priorities for the family and service user.
- Outline the purpose and structure of the intervention.
- Ensure treatment expectations are realistic.
- Develop SMART goals.
- Plan future sessions and family work.

2. Shared Learning [2 sessions];

'*Shared Learning*' is a collaborative approach designed to facilitate engagement and alliance. This approach allows the therapist, relatives and service user to learn from one another's experiences and acquire knowledge that will lead to more beneficial ways of managing difficulties related to schizophrenia and psychosis in the family. This includes information and beliefs about the cause, symptoms and prognosis of schizophrenia and psychosis, and their treatment and management in mental health services. Shared learning aims to facilitate more receptive attitudes, encourage more helpful responses and reduce unhelpful responses to symptoms. These two sessions lay the groundwork for intervention and behaviour change.

The '*Shared Learning*' sessions support relatives to acquire a higher level of knowledge about the following: understanding 'schizophrenia' and psychosis (particularly in the UK African Caribbean population), current treatment (including medication and psychosocial treatments) and resources available, NHS service structure and pathways to care, police involvement, and the influence of both illicit and prescribed drugs on symptoms. In subsequent sessions, the relatives are supported to apply this knowledge to develop strategies for coping with the service user's difficult behaviours.

Families are empowered via the acquisition of knowledge and an understanding of how to access information and resources outside of sessions.

The main aims of the *Shared Learning* sessions are to:

- Adopt a collaborative, '*Shared Learning*' approach with the family.
- Accept relatives' models for or ideas about the causes of symptoms.
- Provide relatives with alternative explanations about 'schizophrenia' and psychosis. as severe mental health problems that can be treated.
- Change relatives' attitudes to enable more choice for managing difficult situations.
- Prepare relatives with adequate knowledge to facilitate positive ways of coping.

3. Communication [2 sessions];

The '*Communication*' sessions support service users and relatives to communicate more effectively with each other and, if appropriate, with service providers. Therapists attempt to model and positively reinforce the family's use of good communication skills throughout all of the sessions. This includes establishing a set of ground rules for good communication from the outset. The specific communication skills that are addressed in each family are decided collaboratively with the family members and based on the initial assessment and formulation. Role playing and practice of skills is a key method of learning to supplement discussion around areas where new skills might be applied, and the effect that this might have on family relationships and relationships with services. Developing good communication skills lays down an important foundation for subsequent sessions on problem solving and goal planning.

The main aims of the *Communication* sessions are to:

- Identify positive and negative approaches to communication.
- Address any barriers to effective communication.
- Build on effective communication skills within the family.
- Support and empower families to express their needs to each other.
- Facilitate better ways of negotiating needs to services.

4. Stress Management, Coping and Problem Solving [2 sessions];

These sessions focus on helping both service users and relatives to manage current stressors through joint problem solving or other ways of coping that may be available to help. It flows from and complements the previous session on communication, as communication difficulties can be a significant source of stress for families and improved communication can help families work better at solving problems together.

The *Stress Management, Coping and Problem Solving* sessions aim to normalise feelings of stress in response to schizophrenia or psychosis and identify common sources of stress for the family. They also identify 'traps' that the family might fall into and how these might maintain stressful feelings and service users' problems. The sessions then help the family break vicious cycles through reappraising the service user's behaviour and emotions and identifying and practising other ways of

managing negative emotions. Service users are supported to manage their own symptoms and stress levels. Once equipped with more effective ways to manage stress, the family may work collaboratively together to help develop the service user's functioning in specific areas of need. This is achieved by setting SMART goals which uses and builds on service user strengths. These SMART goals are then Evaluated and achievements no matter how small are Rewarded.

The main aims of the *Stress Management, Coping and Problem Solving* sessions are to:

- Normalise stressful feelings in response to schizophrenia or psychosis.
- Help the family formulate their own role in maintaining stress and service user. problems in a non-judgemental way and always in the context of a good therapeutic alliance.
- Help families break out of vicious cycles buy changing their own thoughts, feelings and behaviours.
- Help families support service users in making changes in functioning by setting SMART goals which are Evaluated and Rewarded.

5. Maintaining Gains and Staying Well [2 sessions];

The aim of the final two sessions is to review and consolidate the material that has been covered over the preceding sessions and to develop a plan for staying well as a family and reducing the risk of further relapse. Therapists establish what recovery means for the family and help them set realistic expectations for positive change.

This *Maintaining Gains and Staying Well* sessions summarise and consolidate previous learning, give the family skills in identifying and preventing relapse, and help the family continue to maintain and generalise any gains in their functioning as a family unit or as individuals. The therapist anticipates and addresses any difficulties the family might experience with endings. The therapists provide the family with a good-bye letter, which is an important opportunity for the therapist to give positive feedback on the family's strengths and hard work in therapy.

The main aims of the *Maintaining Gains and Staying Well* sessions are to:

- Help the family identify signs of relapse and coping strategies, including action plans in relation to early warning signs or crises.
- Help the family reflect on and consolidate their learning, including ideas about how any gains can be maintained or generalised to other goals.
- Help the family to prepare for and deal with any difficult feelings in relation to ending therapy.
- Provide the family with good-bye letter as a powerful tool to communicate any positive experiences of working with their family and their strengths, as a family unit or individuals.