

# Functional Family Therapy

Youth Horizons  
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# Functional Family Therapy

- What is FFT?
- Relationship oriented, responsive, home based, flexible hours
- Reduce frequency, severity of conduct problems in youth aged 10-18 years:
- \* Violence \* Criminal offending \* Property destruction, \* Oppositional behaviour \* Bullying \* Alcohol & other drug abuse \* Family Conflict
- Three teams established 8 months ago

# Why did we implement FFT?

- Evidence base
- Cost effective
- Proven dissemination success at multiple sites
- Alignment with YHT and Maori cultural values
- Community and family based
- Geographic flexibility
- Training and quality assurance processes

# International Dissemination

- 6 countries—
  - Norway, Sweden, Netherlands, England, USA
    - Including Clinical Trials
  - New Zealand, Belgium in 2009
- 25,000 - 30,000 families served in FFT per year
- 270 sites worldwide
- 1500 therapists

What the Research tells us

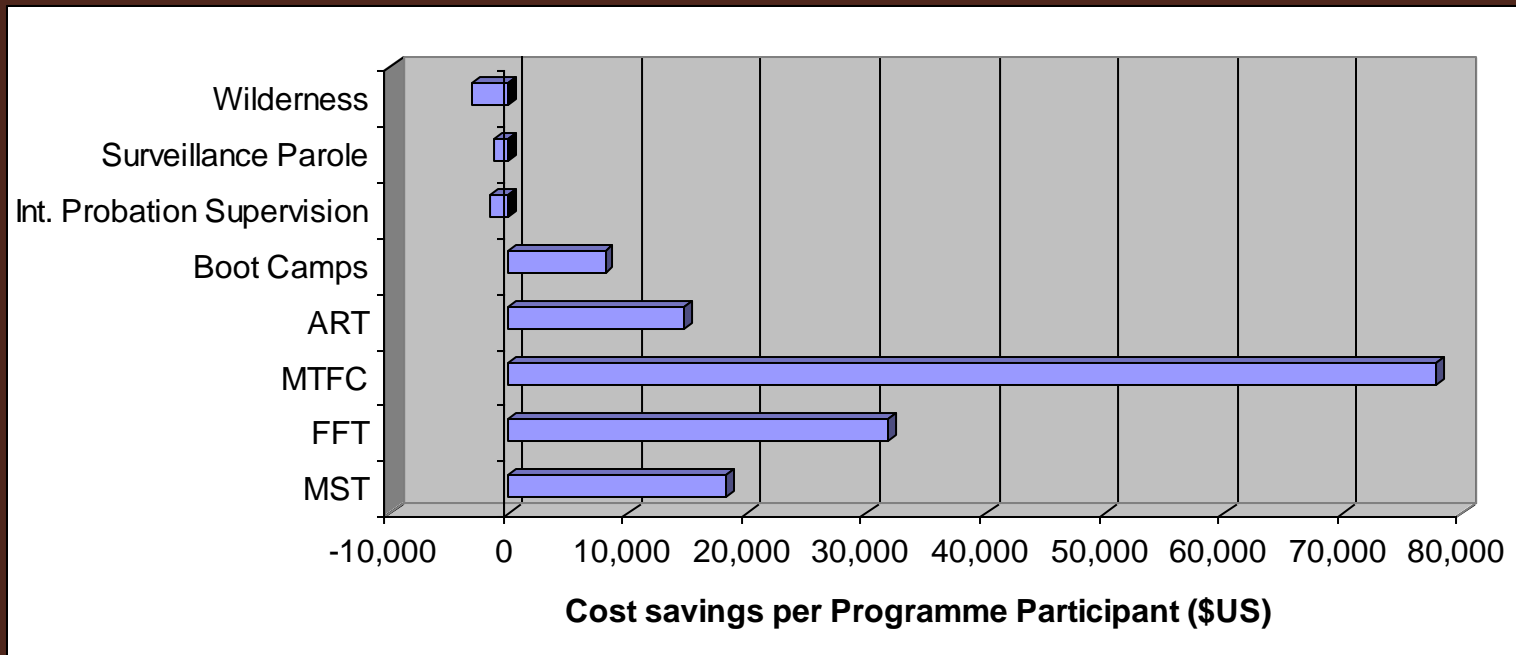
2004 Consensus

Family Based Interventions

*Four treatment programs stand out from others as “model” programs*

- Nurse-Family Partnership (NFP)
- Functional Family Therapy (FFT)
- Multisystemic Therapy (MST)
- Multidimensional Treatment Foster Care (MTFC)

# Financial Return on Investment for Youth Justice Programmes



Aos, S; Miller, M, and Drake, E (2006). *Evidence-Based Public Policy Options to Reduce Future Prison Construction, Criminal Justice Costs, and Crime Rates*. Olympia: Washington State Institute for Public Policy

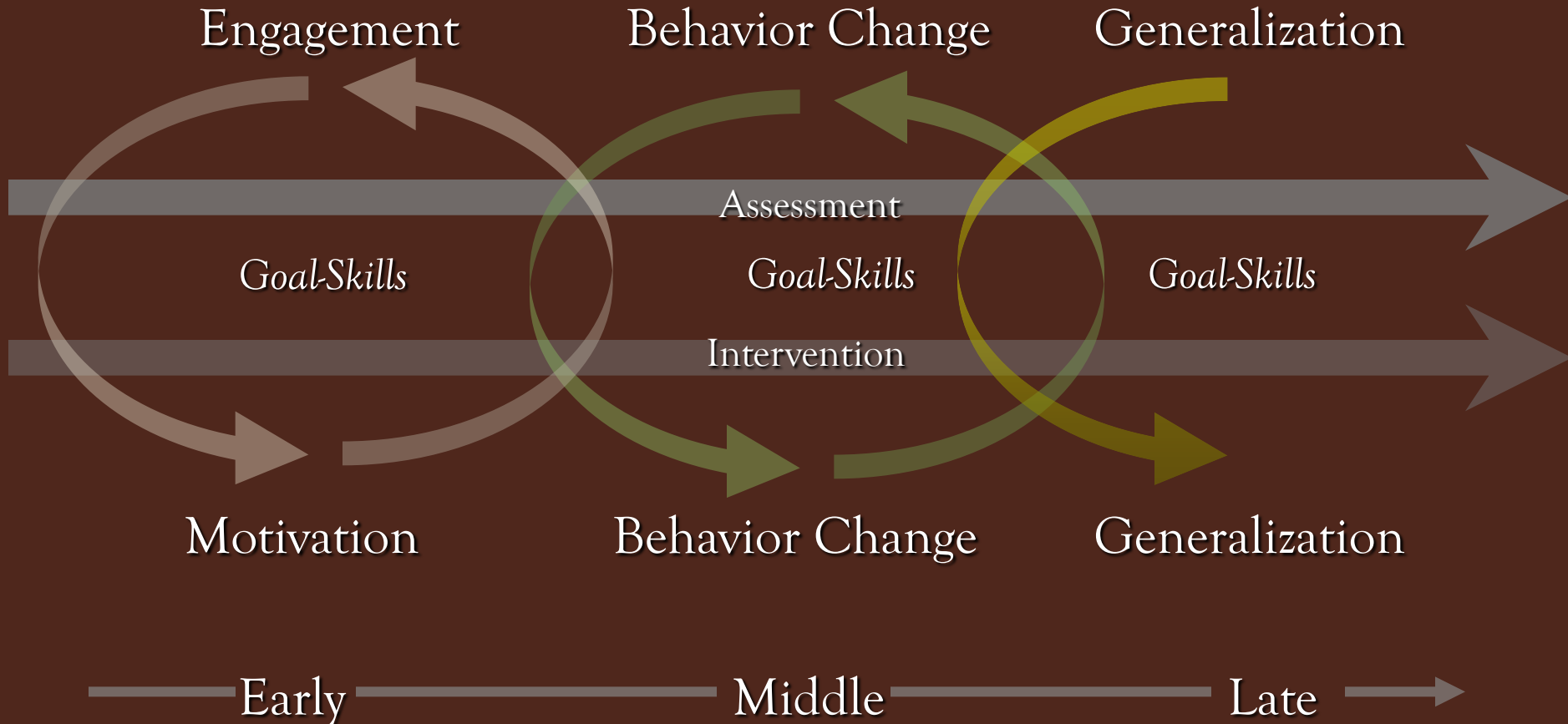
# FFT Specific Outcomes & Replications

- **Clinical research - 11 studies**
  - 10%-60% reduction in recidivism for up to 5 years for violent drug abusing youth
  - Up to 50% reduction in out of home placements
  - Reduction in crime severity for those who do reoffend
  - Dropout rates between 9-12%
  - Significant reductions in youth, mother, father interpersonal conflict
  - Improved family functioning

# Super Summary of the FFT Model & “FFT Attitude:”

- Philosophy / Belief System about people: a core attitude of Respectfulness of difference, culture, ethnicity, family form
- Family focused intervention involving alliance and involvement with all family members (Balanced alliance)
- Non judgmental Attitude; Therapists who avoid “taking sides”
- Focus on risk and (especially) protective factors; “Strength Based”
- Specific & individualized interventions for the unique challenges, diverse qualities, and strengths (cultural, personal, family forms) of all families and family members.
- An overriding Relational (versus individual problem) focus

# Functional Family Therapy Clinical Model



## What FFT is not

- X Solely Parent Training: Focuses on young person in context of family relational patterns
- X Clinic Based: In home unless good reason
- X Easy: Rigorous, challenging, not for faint-hearted
- X Crisis-response model
- X Exclusive: Other concurrent interventions O.K
- X Costly: (Larger case-loads, lower overheads, shorter intervention time-frame)
- X Fix-all panacea: Part of a wider continuum of services

# The New Zealand Experience

- Additional clinical support required first year
- External supervision
- Fidelity improving – good systems to monitor
- Training well paced and sequenced
- Excellent consultation provided by FFT
- Achieved target caseloads in Auckland and Waikato. High referral rate.
- Implementation deemed successful thus far by FFT Inc
- Research programme developed