



A Case History from a Family Therapist

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An Unusual Beginning

Adele¹ came into my consulting room beaming. She appeared not to know how to start or what to say to me. She didn't give any indication of why she had come – or what sort of trouble she was in. Neither was she distraught or crying, so I let her lead the way.

The Past

Adele was excited to tell me that she was adopted by a married couple in the UK – her adoptive father was American and her mother was English, and that they could not have children of their own so they chose her. They then went to America as a family and lived there where Adele spent her early years. She loved her father's American family and considered his extended family her own, integrating well. She recalled going to nursery school as a baby and then going to school in great detail and talked animatedly and affectionately of her cousins in America.

Her adoptive parents then divorced and Adele returned to England with her mother. She told me she missed her father who she loved very much and his family. She presented differently in that she was always smiling and finished every sentence with "like that"! I spelt out what I could do, which was to work with her in a confidential manner and that I would give her hundred percent but that I would expect the same from her. I also explained that I would also expect her to do homework. Placing emphasis on how we would both need to make a serious commitment and that she needed to consider carefully whether this was what she was willing to do. I offered her another appointment interested to see if she would return and how the case would unravel. I really didn't know what the real purpose of her visit was and why she had decided to attend the drop in centre, what was to most youngsters a last desperate resort. From what she had said I suspected that she would have preferred staying in America than returning to the UK and living alone with her mother in very different and reduced circumstances. And it was this sadness that lay beneath her decision to attend the drop in centre. Adele was experiencing what for anyone would be a very turbulent period but particularly for Adele knowing this was the second time she had been rejected in her young life. But what I couldn't quite understand was her apparent mastery of her situation and lack of negativity and remorse.

The Present

Adele arrived for the next appointment on time but limping. I asked her if she had been in the wars? She laughed and said she'd fallen off her bicycle in front of a bus! 'Like that'. She then explained in detail her visit to the local hospital: what the nurse had said, the local injection before the sutures, how the nurse had stitched the wound, and the number of stitches. Then she related the detailed consequences: how she had to catch the bus instead of cycling everywhere. What was particularly alerting was how she appeared to relish relating the details and engaging with me. But at the same time she was dismissive of the seriousness of the accident making small of the danger to herself and to other people travelling in the bus. Noticeable also was that she said nothing about the pain or what might have been if the driver of the bus hadn't been vigilant. I was concerned particularly by the intricate

story she was weaving which had a almost seductive quality, ensnaring me with the intrigue of her life? I thought nothing more about the bus except that it was an accident.

On that second visit she went on to describe her life in America and showed me photographs of 'her cousins in America' which she has brought with her. Noticeable was the degree to which she was explicit with details about the American family. She then told me, more as an incidental disclosure, about a 'friend' she had made in the local town and about his family. How she would help his family by painting a fence and doing odd jobs around the home for them, which they couldn't do for themselves. She explained that they couldn't write very well and that she would write letters for them – 'Like that'. Once again the detail and the intensity with which she became involved was far from the usual teenage preoccupation. I was interested and alarmed that this so called friend and his family appeared so dysfunctional and kept it on my radar. She hadn't yet disclosed what she needed to come for.

The next visit Adele came in with a Elastoplast over her right eye she engaged with me enthusiastically with once again the detailed description of the hospital visit – the nurse, the stitches etc. I asked her if the nurse was the same nurse who had stitched her leg? No Adele said it was a different hospital, - interesting. The following week Adele attended with strapping on her wrist and I realized the cut's were more than accidents. I had to assess if I confronted her in the present circumstances what she would do? I wondered if her visits to me were reinforcing her need to self-harm. Did she feel she had to interest me or impress me? With child self-referrals in particular there is no referral information or recourse to a family doctor. On the next occasion Adele appeared with her hair cropped extremely short - although this in itself was not harmful nevertheless it was a cut. She had changed the strategy from falling off her cycle in public to harming herself in the privacy of her home. By this time she had shown herself to be committed to her session's with me. She was well organized, reasonable, respectful, and punctual. but I realized she needed to receive the appropriate care and that the drop-in centre had no resources apart from the one to one confidential relationship. It was not set up to cope with the more serious disturbance manifested by Adele.

I confronted Adele with my concern for the mutilation and she appeared to be relieved. I wanted her to agree that I should meet her adoptive mother in the first instance and that secondly I wanted her to see a psychiatrist. She agreed but wanted to continue visiting me. I told her I would need to discuss her continuing needs with who ever

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¹The name used in this article is not real.

undertook her treatment and whatever was in her best interest, and this seemed to satisfy her. I didn't want her to feel rejection by me. Her mother made an appointment to meet me. We met alone with Adele waiting downstairs. Her mother appeared pleased and explained how she had had to return from the States, get a job, and find a home for herself and Adele in much reduced circumstances. I suspected that she was depressed and was struggling financially. Caught up in her own struggle she hadn't become suspicious with the various cutting incidents nor had she ever become involved with the hospital such as accompanying Adel. However she did know about the young man and his family who she felt Adele had adopted. - Saying that she wasn't against Adele having friends but this family bore no resemblance to her own relations and friends. I put it to her that I thought it was in Adele's best interest to refer her and she readily agreed saying that she perhaps had not been sufficiently aware of how the divorce had affected Adele she was too pre-occupied with how she would manage financially and with providing a home.

We invited Adele to join us and her mother explained her own position and shortcomings - it went very well - I saw this as a milestone not for Adele to take on her mothers problems as well as her own but at least everything was out in the open. I wrote to the psychiatrist in the area explaining Adele's case but he replied saying he did not treat personality disorders. Left with no alternative I needed to dig deeper and confront Adele with her need to mutilate herself. She explained how she would get a razor blade go in the bathroom, fill the bath, get in and then make an incision. As soon as she saw the blood appear she would feel relief - she felt no pain. I told her firmly that if she cut herself anymore I would cancel her next appointment. She never cut herself again. This may have seemed a drastic and perhaps un - therapeutic sanction but I acted intuitively.

Future

We had discussed her future together during our sessions and

she told me she wanted to enroll to take a nursing qualification and eventually work in an operating theatre. This sent alarm bells ringing. I could see Adele caring but with her propensity for cutting I felt this choice of career was inappropriate and not best suited to her needs. We explored other options - I asked her to visit the library as her homework and instructed her to come back with a list of career preferences. She was a bright girl and with the relationship between her mother and herself improving I hoped that this difficult period they had both been through could be overcome. There was also talk of Adele visiting her father and his extended family in the States, which her mother encouraged. This demonstrated a certain generosity and understanding on the part of her mother. Adele stopping mutilating herself and was accepted for a course. The course work occupied and interested her and I didn't see her again - I hoped that she would continue to improve.

Some two years later I moved jobs to another hospital and Adele managed to track me down. The hospital was in the countryside without a regular bus service so I was very moved with her effort. She had come to show me her baby. I congratulated her on her lovely child but inwardly I felt misgivings. I promised to visit her when I could. I found her in a block of council flats. She had married the 'friend' she was now pregnant with a second child. He was unemployed and had not any positive features - putting it mildly - she was 'nursing' him and his child. I was very sad here was a lovely girl: bright, and capable saddled with a dysfunctional man without any prospects of improvement or a future. Adele I knew would have wanted what was best for her children but in the circumstances there would never be any chance of fulfilling this aim. Looking back Adele did not have the continuing support she needed. She lacked a family which would help her thrive, love her unconditionally, and with that love discipline and caution her.

The case had come full circle she had left the family she loved in America and now she had created her own family - she had realized that dream, but at what a cost ?

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