Systemic Practice Competence List

Knowledge

1. An individual lives within multiple and varied systems e.g. family, community and health/social care, all of which connect and interact.
2. The ways that individuals relate to others will depend on a number of factors including; development al stage, physical health, family/systemic history and family/systemic lifecycle stage. Consideration of these will be relevant in the development of psychological problems and distress.
3. All meaning and understanding of systems are socially constructed within power relationships and cultural and socio-political contexts. There will always be multiple perspectives/alternative accounts and descriptions of interactions and relationships and therefore multiple “truths” exist at the same time, which are fluid.
4. There exists a continuous process of mutual influence through cycles of feedback which shape each person’s narratives, feelings, behaviour and relationships, and these cycles occur within and influence all systems because everyone, including the therapist, exists within systems.
5. Collaborative work with members of a system can allow for the promotion and maintenance of helpful change as positive and negative patterns of interaction are potentially modifiable.

Skills

Basic Systemic competencies

1. Ability to undertake a systemic assessment including gathering and clarifying information from relevant members of the system, including information about the decision to seek help and any concerns about the nature of the intervention.
2. Ability to use the assessment process to engage with relevant members of the wider system including, where appropriate referring agencies and support services, valuing the unique perspective of each.
3. Ability to engage all members in the system, empathically and respectfully by giving each member opportunity to communicate and ensure understanding of their purpose of attending related to the perceived problem area(s) and the beliefs concerning them.
4. Ability to present the rationale for a systemic approach to the client(s), and the wider system, help individual members to identify overlapping/shared goals and to use a variety of appropriate methods to aid everyone’s understanding of, and continued engagement with, the work.
5. Ability to monitor engagement and to identify when issues arise which may threaten engagement.
6. Ability to develop a collaborative systemic formulation taking into account the current and historical pattern of relationships, the role or function of the presenting difficulty within the system, the solutions that have already been tried/considered as well as the current and potential strengths of the system and the ways in which these promote or limit change.
7. Ability to utilise the formulation to develop the rationale for a systemic intervention including agreeing the role of the individual’s members of the system in this work.
8. Ability to ensure that the differing views, developmental needs, resources and abilities of all individual members of the system are considered and ensure that all appropriate individuals are actively involved in the intervention.
9. Ability to manage systemic endings taking into account individuals members continuing role in maintaining change upon discharge and the role of engaging the resources of significant members of the wider network.

Specific systemic competencies

1. Ability to use systemic hypotheses to promote ideas about change across the system to generate further lines of enquiry, leading to deeper understanding and facilitating new perspectives.
2. Where appropriate, construct a genogram with the client(s) to guide clarification of previous patterns of relationships and their possible impact on the current system.
3. Where appropriate, use circular interviewing techniques1 and maintain therapist neutrality to generate new understandings of how feelings, ideas, beliefs or perceptions of relationships are experienced by each member of the system, linking to wider contexts.
4. Ability to use systemic techniques to promote change2 and allow a ‘repositioning’ within the system in relation to the difficulties.
5. Where appropriate, use a range of experiential systemic techniques to enable members of the system to experience, express and communicate content which may be difficult to verbalise3
6. Where appropriate, make use of both spontaneously occurring and setting up in session enactments4 to promote reflection and facilitate change.