



Blueprints Model Programs **FACT SHEET**

FS-BPM03

1998 (Updated 03/2007)

Functional Family Therapy

Functional Family Therapy (FFT) is an outcome-driven prevention/intervention program for youth who have demonstrated the entire range of maladaptive, acting out behaviors and related syndromes.

Program Targets:

Youth, aged 11-18, at risk for and/or presenting with delinquency, violence, substance use, Conduct Disorder, Oppositional Defiant Disorder, or Disruptive Behavior Disorder. Often these youth present with additional comorbid challenges such as depression.

Program Content:

FFT requires as few as 8-15 sessions of direct service time for commonly referred youth and their families, and generally no more than 26 total sessions of direct service for the most severe problem situations.

Delivery modes:

Flexible delivery of service by one and (rarely) two person teams to clients in-home, clinic, school, juvenile court, community based programs, and at time of re-entry from institutional placement.

Implementation:

Wide range of interventionists, including trained probation officers, mental health technicians, degreed mental health professionals (e.g., M.S.W., Ph.D., M.D., R.N., M.F.T., L.C.P.).

FFT effectiveness derives from emphasizing factors which enhance protective factors and reduce risk, including the risk of treatment termination. In order to accomplish these changes in the most effective manner, FFT is a phasic program with steps which build upon each other. These phases consist of:

- *Engagement*, designed to emphasize within youth and family factors that protect youth and families from early program dropout;
- *Motivation*, designed to change maladaptive emotional reactions and beliefs, and increase alliance, trust, hope, and motivation for lasting change;
- *Assessment*, designed to clarify individual, family system, and larger system relationships, especially the interpersonal functions of behavior and how they related to change techniques;
- *Behavior Change*, which consists of communication training, specific tasks and technical aids, basic parenting skills, problem solving and conflict management skills, contracting and response-cost techniques; and
- *Generalization*, during which family case management is guided by individualized family functional needs, their interface with community based environmental constraints and resources, and the alliance with the FFT therapist/Family Case Manager.

Program Outcomes:

Clinical trials have demonstrated that FFT is cable of:

- Effectively treating adolescents with Conduct Disorder, Oppositional Defiant Disorder, Disruptive Behavior Disorder, alcohol and other drug abuse disorders, and who are delinquent and/or violent;
- Interrupting the matriculation of these adolescents into more restrictive, higher cost services;
- Reducing the access and penetration of other social services by these adolescents;
- Generating positive outcomes with the entire spectrum of intervention personnel;
- Preventing further incidence of the presenting problem;
- Preventing younger children in the family from penetrating the system of care;
- Preventing adolescents from penetrating the adult criminal system; and
- Effectively transferring treatment effects across treatment systems.

Program Costs:

The 90-day costs range between \$1,600 and \$5,000 for an average of 12 home visits per family. Current costs vary and are highly dependent on cost of labor.

The information for this fact sheet was excerpted from:

Alexander, J., Barton, C., Gordon, D., Grotpeter, J., Hansson, K., Harrison, R., Mears, S., Mihalic, S., Parsons, B., Pugh, C., Schulman, S., Waldron, H., & Sexton, T. (1998). *Functional Family Therapy: Blueprints for Violence Prevention, Book Three*. Blueprints for Violence Prevention Series (D.S. Elliott, Series Editor). Boulder, CO: Center for the Study and Prevention of Violence, Institute of Behavioral Science, University of Colorado.

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Holly deMaranville, Communications Coordinator
Functional Family Therapy, LLC
1611 McGilvra Boulevard East
Seattle, WA 98112
Phone: (206) 369-5894
Fax: (206) 664-6230
Email: hollyfft@comcast.net
Website: www.fftinc.com