

A stylized graphic of a family silhouette on the left side of the slide. It features a large light purple figure on the left, a smaller dark blue figure in the center, and a large light orange figure on the right. There are also several smaller circles in purple, orange, and red scattered around the figures.

Youth Interventions Foundation

| MDFT Academy



multidimensional
FAMILY THERAPY

Estonia
4th of June 2014

Angela Pasma, CEO

The foundation

- Mission
- Vision



Units

MDFT Academy

- Training MDFT
- Systemic thinking & working
- Forensic youth clinics
- LVB (mental retardation)

Schools

- Prevention
- Coaching teachers, mentors and social counselors
- Referrals

Municipalities

- Civil servants training
- Coaching social workers

Sports

- Soccer, coaching trainers & coaches and volunteers at a soccerclub

Organogram

CEO

Angela Pasma

Trainers NL & EU

- Sylvia Cool
- Kees Mos
- Kris Gerwen
- Janny Boskamp
- Eva Kaptijn
- Henno Verdam
- Margriet van de Houten
- Floris Brandwagt
- Hans Vullings
- Philip Nielsen
- Andreas Gartner
- Birgitte Spiel
- Olivier Phan

Quality Assurance NL & EU

- Joppe Rigter
- Carien Gelderblom
- Claudine Hunault
- Rianne Brand
- Samira Abdalas
- Tamara Verhoogt
- Ramon Peeters
- Tobias Dorfler
- 5 Finnish Raters

Operational staff

- Margreet van der Wel
– Training coordinator
& Secretary
- Danielle van der Gaag
– Operations & HR

Business Development

- Liesbeth Erftemeyer –
Business
Development &
Implementation
- Christa Rijswijk –
Business
Development &
Project Management
- Leena Ehrling –
Business
Development &
Implementation

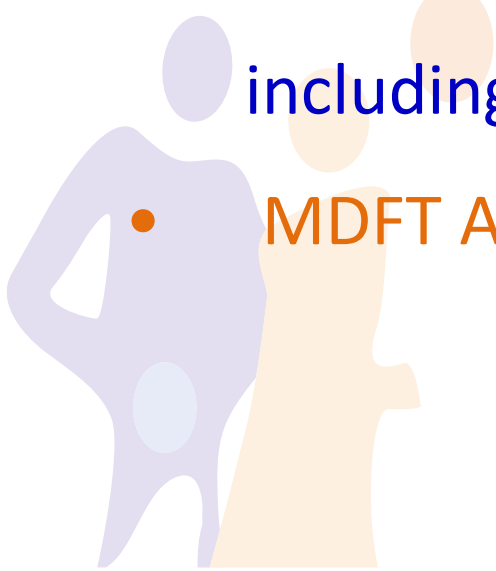
Minuchin & Liddle





History of development of MDFT

- Origin: **Miami** (H. Liddle, G. Dakof)
- 14 randomized controlled trials
- Five-Countries project Western Europe, including the **INCANT** trial (N = 450)
- **MDFT Academy**, since 2008



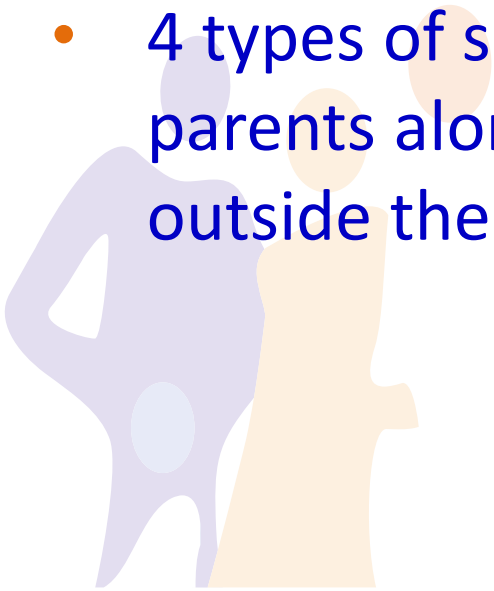
| Target group

- **Adolescents**, 12 – 19+ years of age
- Single problem or multiple problem behaviour, e.g., delinquency plus substance abuse (plus mental/ behavioural co-morbidity)
- 1 or 2 **Parents** willing to participate in the treatment



MDFT in a nutshell

- 6 months
- 3 stages
- 4 domains (youth; parents; family; systems outside the family)
- 4 types of sessions (with the youth alone; with the parents alone; with the family; with persons from outside the family present)



MDFT in a nutshell:

3 stages

- Stage 1: Motivation & Engagement

1 month

- Stage 2: Working the treatment goals and themes

3 – 4 months

- Stage 3: Sealing-off; aftercare

1 month



MDFT is not commercial

- Miami has granted MDFT Academy a licence, for MDFT training in Europe
- MDFT Academy, based in The Netherlands certifies all European therapists who have met the MDFT training standards
- Institutes get a licence, renewable every 3 years





Requirements for MDFT training/practice (1)

- Therapists (social workers, nurses, psychologists, psychiatrists) with experience in treating youth/families
- Prepared to leave the office (e.g., for sessions at the family's home), and to be called outside office hours
- Interested in combining treatment and case management



Requirements for MDFT training/practice (2)

- The therapist is the key figure for the family for all problems (spider in the web)
- The therapist works in a **team** (3 – 6 therapists, one being the team's **supervisor**)
- Caseload at any given time: 8 families



Training takes 2 years

- **Year 1:** training towards level Basic Level certification
- **Year 2:** training towards Master Level certification

From Year 3 onwards

- **Re-licensing:** once every 3 years
- **Service agreement:** every 3 years



Training requirements

- Intensive training with trainer MDFT plus monthly study days plus site visits
- Providing case conceptualizations, treatment goals
- Taped sessions, live supervisions
- Weekly phone consultations
- Midterm and final
- Team supervision with local supervisor
- Certification





Certification requirements

- Exams (2 in Year 1)
- Treatment adherence & competence tests of 4 family session DVDs per therapist (and 4 supervision session per supervisor)
- Session planning forms, treatment contact logs, supervisor reports
- Booster training for teams and supervisors



Training story of the Netherlands

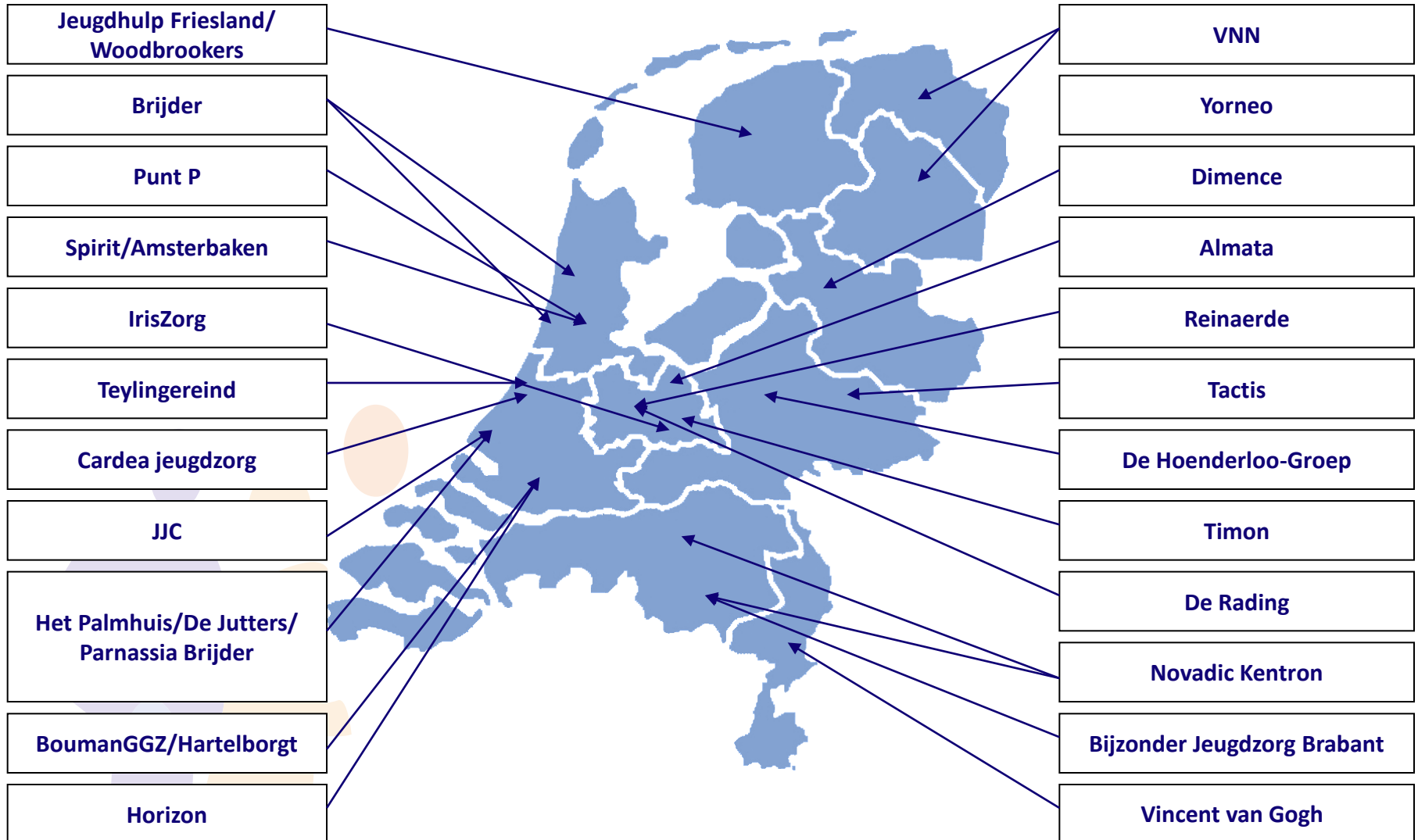
- MDFT Academy started in 2008
- Right now, we have **35** MDFT teams in the Netherlands
- Each year, we train up to 3 new teams + individual therapists



Distribution of MDFT in the Netherlands

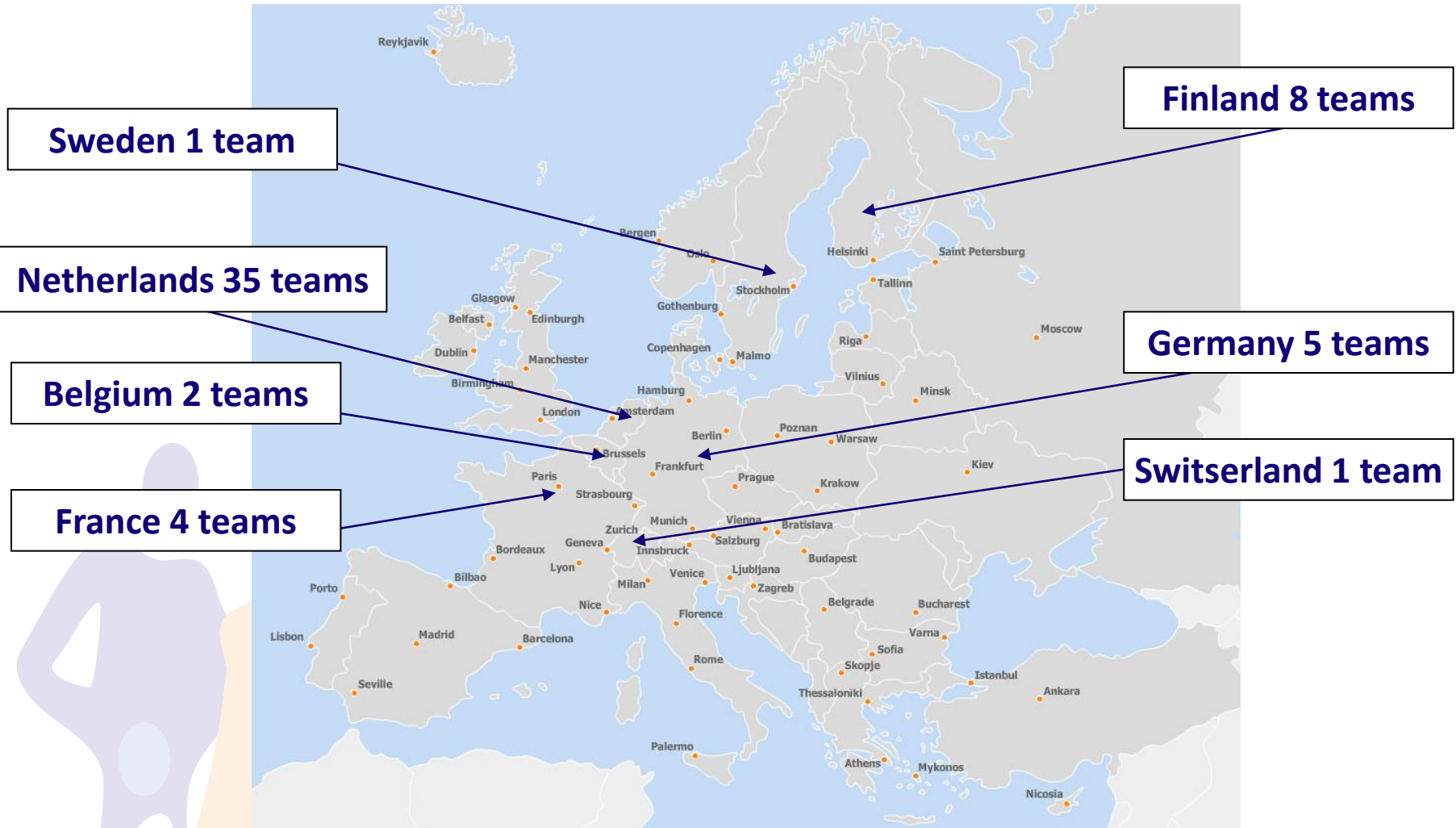


YIF | Youth Interventions Foundation





MDFT in Europe



Where is MDFT being practiced?

- In outpatient youth care
- In outpatient youth addiction care
- In outpatient youth mental health care
- In outpatient forensic care
- During juvenile detention (with outpatient aftercare)
- Idem: residential youth care
- Daycare

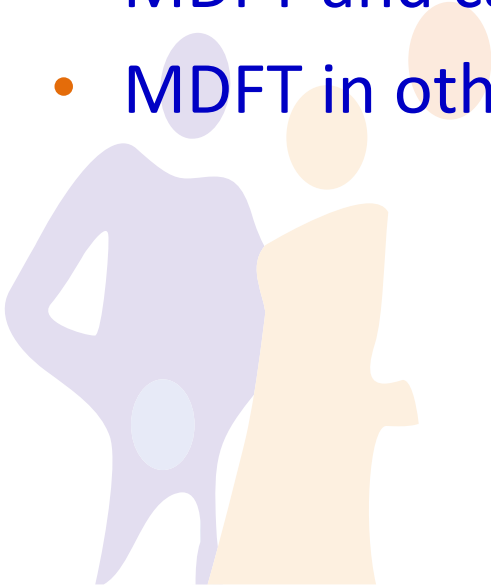
Modules of MDFT

- Adolescents outpatient - Available
- Adolescents inpatient - Available
- School-referred adolescents - Available
- Light mental retardation - Available
- Engaging parents - Available



Challenges

- Funding
- Interagency collaboration and coordination
- Implementing MDFT in your organisation
- MDFT and case referrals
- MDFT in other area's of youth care



MDFT is no panacea

- Other treatments, like cognitive-behavioural therapy, are also effective. However, in direct confrontations between MDFT and other active treatments, MDFT usually wins
- MDFT has broad effects because the risk and protective factors associated with the various problem behaviours are similar
- MDFT is treatment of choice in ‘hard cases’

Conclusion

- MDFT is reimbursed in European countries by health and social insurance agencies and governments
- Training is just one thing **Implementation** is quite another thing
- We have 3 implementation experts travelling around continuously

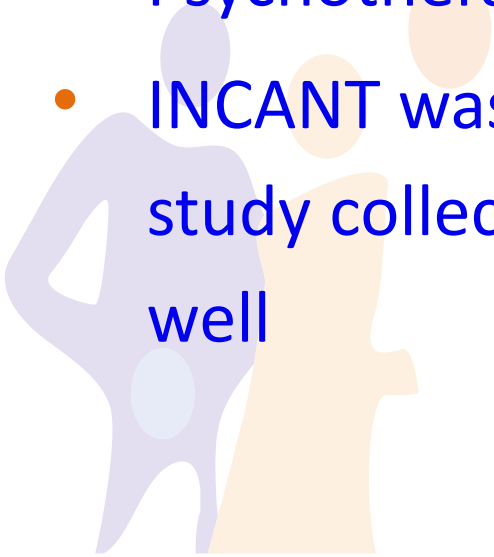


How does MDFT fare in European research?



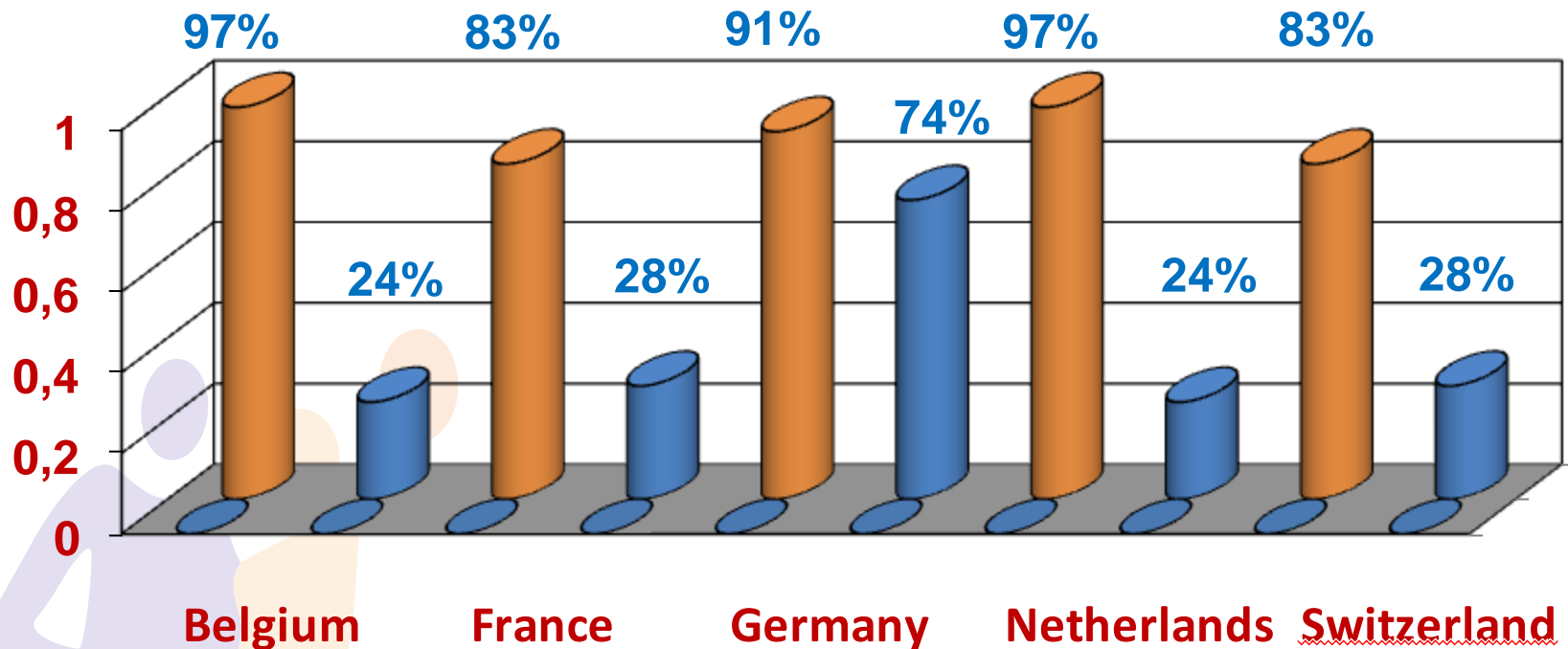
European research = INCANT

- Randomized controlled trial with sites in Belgium, France, Germany, the Netherlands, and Switzerland
- Two treatment conditions: MDFT and Individual Psychotherapy – IP
- INCANT was about cannabis use disorder, but the study collected data on other problem behaviour as well

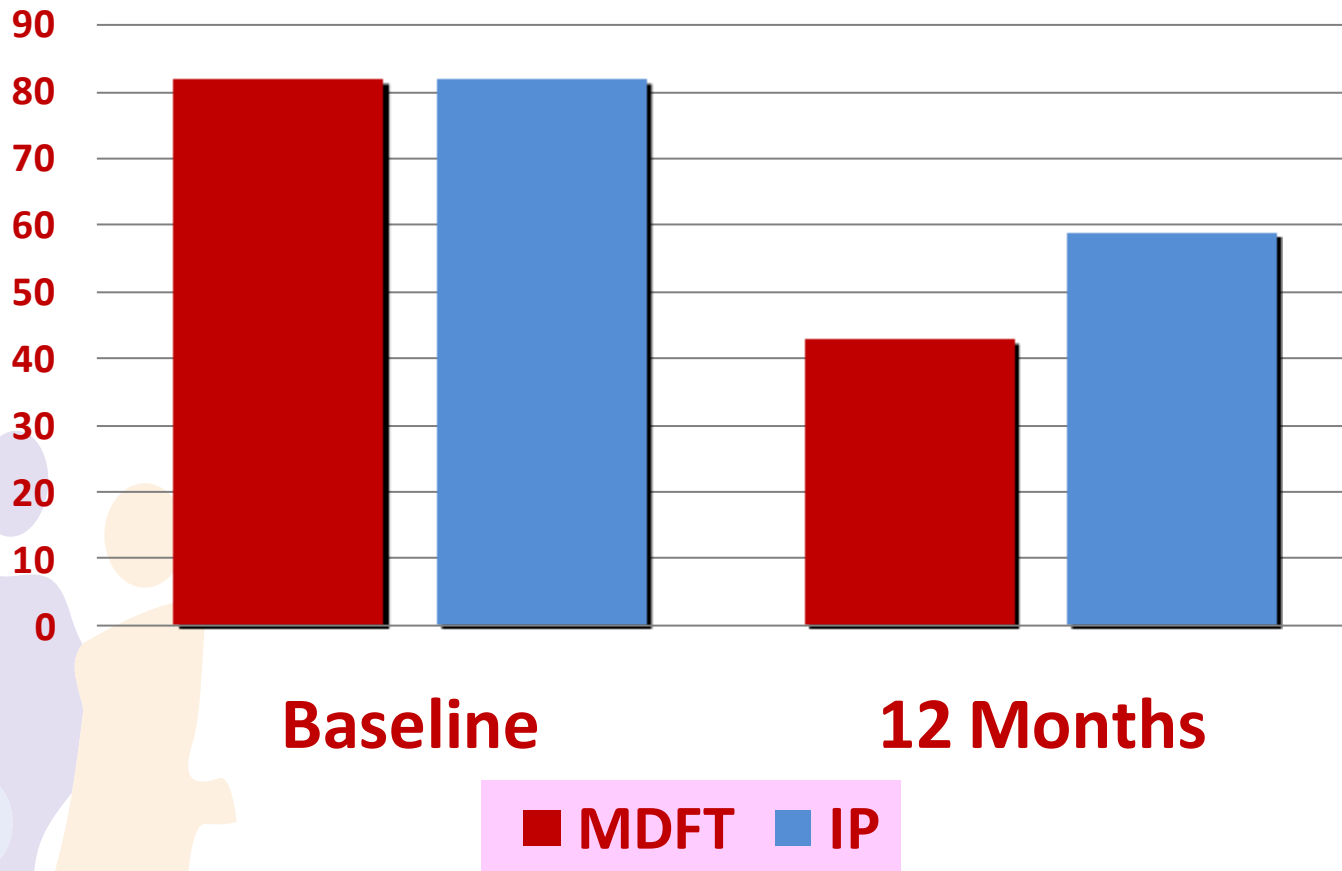


Treatment retention

(orange = MDFT; blue = IP)

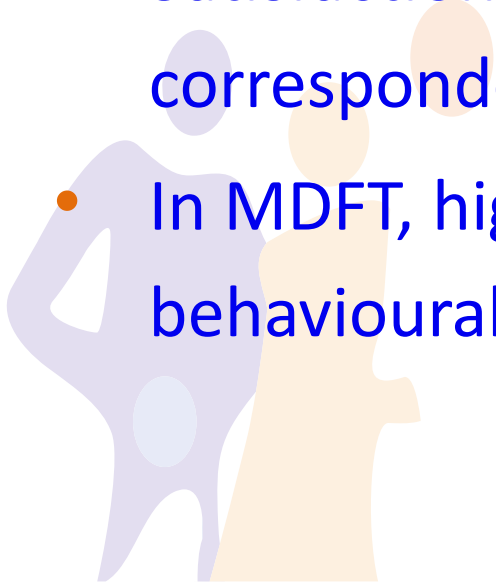


Cannabis dependence rate (%)



Treatment satisfaction

- MDFT youth were more pleased with the treatment than IP youth were
- Idem, MDFT parents
- Satisfaction rating given by the MDFT adolescents corresponded with the rating by their parents
- In MDFT, high satisfaction levels predicted good behavioural and systems outcomes



Implementation

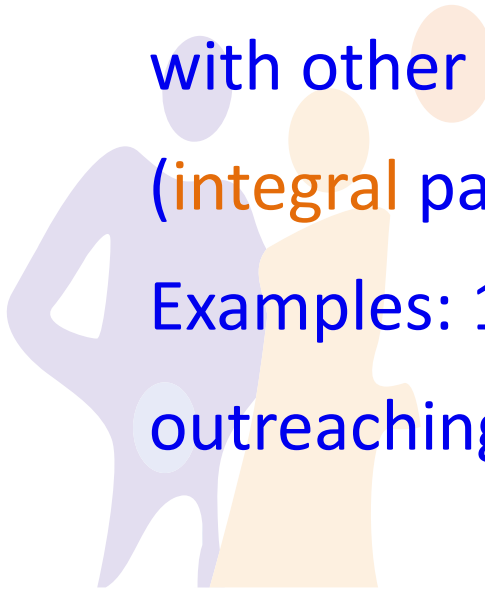
- Life has moved on since the conclusion of INCANT
- European MDFT training programmes have been set up
- Right now, about **56 MDFT teams** are operational Europe (in the Netherlands, Finland, Belgium, Germany, France, Switzerland), with more to come





Some final words on the flexibility of MDFT

- MDFT is an addition to preventive/early intervention services
- MDFT may use or share interventions or manpower with other services run by the treatment centre (**integral** palette of treatment and support).
Examples: 1) training in parental skills, 2) outreaching work



Thank you!

