Telephone Supporters - Amplifying the therapeutic effect

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The Parent's Counseling Clinic at SCMC

Schneider Children's Medical Center of Israel (SCMC), also affectionately known as Schneider Children's, is the only comprehensive, highly specialized care hospital of its kind in the country and in the Middle East, dedicated exclusively to the well-being of all children and adolescents. Schneider Children's also receives patients from the Palestinian Authority and Jordan, and from as far away as Africa, Asia and Eastern Europe, thus fulfilling its mandate to serve as a “bridge to peace” in the region.

Schneider Children's is all about children. It utilizes a unique approach to pediatric medicine where children are treated as children and not as small adults, with the understanding that children have different emotional and physical resources for healing. The Parents’ Counseling Clinic is dedicated only to parents and in our work we use Nonviolent Resistance to help parents improve their relationship with their children.

The therapeutic process in the parent's counseling clinic is a short-term process with a counseling team consists of an experienced psychologist and a telephone supporter. During the sessions the steps are specifically tailored for the individual family, and the parents receive written instructions on each step for building a new authority by non-violent resistance. The treatment is demanding but also highly motivating for the parents.

The parents receive telephone support by students who are especially trained for the purpose. The telephone support enables the parent to carry out, on a day to day basis, the steps designed with them during the sessions. The intensive therapeutic relationship between the parents and the counseling team enables the parents to undertake highly challenging and valiant parental steps, which are often needed to drastically change the family dynamics in a short time intervention.

Amplifying the therapeutic effect by the telephone supporter

The phrase "telephone supporter" may produce two different associations: The first being that of technical support, given when your internet connection or cable TV breaks down. The other is telephone counseling, usually used for psychological first aid. In practice, the role of the telephone supporters lies on the boundary between the two. On one hand, their function is to be an "ear" for the parents during the therapeutic procedure. On the other hand, their task is to implement the techniques given in the treatment sessions. This paper will outline the treatment provided in the clinic, with emphasis on the function of the telephone supporter. It will enumerate the advantages and complexities in this kind of therapeutic team.
The therapeutic procedure in the parent's counseling clinic starts with an intake and five to ten treatment sessions of 50 minutes each. Two phone calls should take place between sessions, 20 to 40 minutes each. The therapeutic team working with the parents includes a clinical psychologist and a telephone supporter, usually an undergraduate psychology student trained in the Nonviolent Resistance approach.

The telephone supporter is present during the treatment sessions and constitutes an inseparable part of the therapeutic team in the clinic. Twice a week a telephone conversation is carried out, including both parents. The purpose of the telephone support is first and foremost to enhance continuity and intensity in the treatment. Therefore, the conversations will usually revolve around the techniques taught in the sessions. During the conversation, parents are able to better understand the techniques, raise their objections and decide about the best way to implement them in their homes. For example, after parents are presented with the "announcement" in session, the telephone supporter listens to their stance and helps them turn their feelings into words, the appropriate words. The supporter encourages parents to imagine their child's reaction to the "announcement" and performs a simulation of the situation. This way, the parents are strengthened and better prepared for the following events. The second call that week will analyze the way the "Announcement" was performed and the effect it had on the child. All phone calls are summarized by the supporter and sent to the therapist for review.

When needed, the telephone supporter mediates between parents and other factors involved in therapeutic procedure, e.g.: teachers, counselors etc. The telephone supporter may explain the techniques to other supporters or assist the parents in guiding them. In cases when only one parent arrives to treatment sessions, the telephone supporter can keep the other parent updated by emailing summaries of the sessions and the phone calls.

The telephone supporters are specifically trained within the clinic, they are introduced to the approach and the techniques used to apply it. During their training, they experiences phone call simulations based on actual cases, which emphasize the important guidelines of the method. The supporters also take part in weekly group guidance sessions.

As mentioned, the phone calls add intensity and continuity to the therapeutic procedure. The telephone supporter is part of a supporting network of people involved, he helps encourage and stimulate the different supporters. From data collected by the clinic it can be noticed that treatments accompanied by telephone support are more efficient. On top of the assistance given to the parents, it enables the therapist to perceive a family's reality in a more accurate way. This information assists the treatment by making it better suited to the special needs of a family.

Sometimes, only by listening to the background noises of the house, the supporter can learn a great deal about how a family conducts itself. When the situation calls for it,
the supporter arrives at the family's home in order to vigorously implement one of the
techniques and advise the parents while the events take place.

Aside from the stated advantages in working with a telephone supporter, some
complexities arise as well. The first is derived from the team work this kind of
treatment calls for. In order to build an accurate treatment plan, the therapist relies to
a great extent on the supporter's summations and information. For this reason, the
information must be as continuous and as accurate as possible. This is not an easy
task. The relationship established between the parents and the supporters is different
than the one between the parents and the therapist. (e.g.: different emotional bonds,
level of trust, professional appreciation etc.) This can cause an imbalanced attitude
towards the therapeutic team. These issues are not related specifically to the role of
the telephone supporter, and may apply to any professional collaboration in the field
consisting of two people with education gaps and age differences. Parents' objections
to the treatment are often expressed by insinuations about the supporter's lack of
professional or parental experience (e.g.: "You don't have children, how would you
know?" or "How far along are you in your studies?"). These are matters to be brought
up at the group guidance session. Sometimes an opposite situation occurs, and the
parents become emotionally attached to the telephone supporter rather than the
therapist. This can affect the way they relate to the therapist during sessions.

A more specific complexity arises from the fact that part of the treatment is conducted
through the phone. Speaking to both parents at a time could be very challenging,
especially when their relationship is not optimal. In addition, it's a medium that does
not allow one to see the person's face or body language, which makes it all the more
difficult to understand the situation.

Parents expect different things from phone calls than from sessions. Many parents feel
that the calls are just a means to dismantle their emotional distress; others feel they
need to speak very strictly and firmly about the subject without going into details.
The duration of the conversation should range between 20 and 40 minutes. The setting
of the telephone session is not easy to preserve, due to the flexible duration and the
fact that it is not an ordinary clinical session. Sometimes parents refrain from calling
according to the scheduled time or repeatedly ask to reschedule; sometimes they call
more than twice a week.

More than 30 telephone supporters are active in the parent counseling clinic. Many
complexities have to do with their training and this kind of framework. Nonetheless,
during the last 8 years, since the clinic was established, connection with the
supporters, investment in them and the rewards they give back have become a pillar in
its existence. One of the examples of that relationship is that half of the clinical
psychologists working in the clinic were once telephone supporters. They were
accepted to the job when they called us by phone, we didn't need any kind of "work
interview"...
The role of the telephone supporter raises many dilemmas and adds complexity to the process. Even so, the amplification of the treatment, for the parents and the therapist, is irreplaceable. One of the progressions, that is often observed is the parents opening up to the supporter. At the first sessions they speak exclusively with the therapist, his/her authority is clear to everyone. Throughout the process the parents begin addressing the supporter more and more, sometimes to a point that the therapist has a marginal role…

This process can serve as evidence that even professional authority is enhanced mainly by presence and less relays on professional status. Sometimes when therapists are asked about a certain family in the weekly supervision they can state, smiling, that they do not know, it is now the supporter doing most of the work. As rumor has it, they love getting to that stage.