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Evaluating the efficacy of paradoxical family therapy for the treatment of family and individual problems: A case study

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Abstract

Abstract

The PTC model of paradoxical family therapy aims to simeltenously treat interpersonal conflicts of the family system and the possible disorders of the system members. Therefore, the present study had two main objectives. The first objective was to examine the efficacy of the PTC model of paradoxical family therapy for the treatment of interpersonal conflicts of the family members. The second objective was to evaluate the efficacy of the PTC model of paradox therapy for the treatment of the disorders of individual family members. A family of three, including the father (F), the mother (M), and their 15-year-old daughter (D) participated in this study. The PTC model of paradox therapy was applied in two forms: family therapy for the treatment of interpersonal conflicts of family members; individual therapy for the treatment of the D body dysmorphic disorder as well as her social anxiety disorder, and for the treatment of the M oversensitivity and overly intrusive behaviors. Evaluation of psychopathological indices as well as treatment outcomes were performed based on Perceived Body Dysmorphic Scale Besharat (2015), Liebowitz Social Anxiety Scale–Self-Report (Liebowitz, 1987), Mental Health Inventory (Veit & Ware, 1983), and the Treatment Outcome Subjective Rating Scale (Besharat, 2016) at the beginning, the end of treatment sessions, and in 18- and 30-months follow-up sessions. The results revealed a significant decrease in D's score of body dysmorphic disorder, social anxiety disorder, and psychological distress as well as a significant increase in D's score of psychological well-being. The results also revealed that the PTC model of paradoxical family therapy for the treatment of interpersonal conflicts of family members was completely successful. The family estimated their improvement at the end of the family therapy as 95%. Evaluation of the treatment outcomes in 18- and 30 months follow-up sessions showed that the treatment changes were continued as 90%. These results confirm the strong and permanent effects of the PTC model of paradoxical family therapy in the shortest possible time. The PTC model of paradoxical family therapy, as a very short-term, effective, efficient, and yet economical approach is suggested for the treatment of interpersonal conflicts of family members.

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Introduction

Family as a system (i.e., a set of members who are in stable interaction with each other) has undeniable effects on the emergence, development, and continuation of normal and abnormal psychological processes of family members (Besharat, 2018; Oltean et al., 2020). Research evidence shows that family interventions can, beyond treating the symptomatic patients, modify and repair interpersonal conflicts and problems of family members (Besharat, 2018, 2020; Rabet et al., 2025). Along with the strengths of each family-based treatment approach, these approaches suffer from limitations and weaknesses (e.g., a large number of treatment sessions, poor to moderate treatment outcomes, relatively high relapse rates, being limited to specific categories of psychological problems and disorders, being limited to specific socioeconomic classes, and being somewhat culture-specific) (Baucom & Boeding, 2013). These clinical and research realities call for the need to develop more effective family therapy approaches. The PTC model of paradoxical family therapy is one of the newest approaches to family therapy (Besharat, 2018, 2020). This paradoxical approach is originally psychoanalytic (Besharat, 2022, 2023a). Research findings (Besharat, 2020, 2023b) have supported the effectiveness and efficiency of paradoxical family therapy as a convenient, very short-term approach with very strong and fundamental therapeutic effects. In this article, the results of paradoxical therapy for a three-member family are reported at the family and individual levels simultaneously.

Method

This study is a clinical case study based on a baseline-intervention-follow-up design. The clients' pathological indicators are measured and assessed using scales and interviews at the initial stage, during the treatment process, at the end of the treatment period, and finally at the follow-up periods. The changes in treatment are also evaluated in each session and the follow-up periods, based on the clients' reports. A three-member family consisting of a father (F), mother (M), and a 15-year-old daughter (D) referred to the Paradox Therapy Institute for treatment of body dysmorphic disorder and social anxiety disorder of the daughter, the mother's inability to intervene, control, and extreme criticism of the daughter, and severe family interaction conflicts and inconsistencies. After signing a consent form to videotape the treatment sessions for research purposes and to publish the treatment results in complete confidentiality, the process of psychological assessments, clinical interviews, and paradoxical family therapy using the PTC method began. The Perceived Body Dysmorphic Scale (Besharat, 2015), Liebowitz Social Anxiety Scale–Self-Report (1987), Veit and Ware's Mental Health Inventory (1983), and Besharat's Treatment Outcome Subjective Rating Scale (2016) were completed by the clients. The clinical interviews confirmed the criteria mentioned in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (APA, 2022) for body dysmorphic disorder and social anxiety disorder in girls, as well as severe interactional conflicts between family members. None of the family members was under the influence of any individual, family, or medication therapy during the treatment process and follow-up periods.

Findings

D's pathological symptom scores for body dysmorphic disorder, social anxiety, psychological well-being, and psychological distress were estimated as 33.54, 44.87, 40.37, and 75.52 at baseline, and 33.24, 55.28, 52.41, and 33.26 at the end of treatment, respectively. D's assessment of the severity of her body dysmorphic symptoms on a subjective rating scale in the first treatment session was 100 out of 100 (i.e., the most severe dissatisfaction). This assessment was estimated by D at the last treatment session and after 18-month and 30-month follow-ups as 10, 15, and 10 out of 100, respectively (i.e., 90%, 85%, and 90% improvement and recovery, respectively) (see Figure 1). The sustained change index (RCI = 2.011-2) indicates that the amount of treatment change has been sustained. These assessments for the severity of social anxiety symptoms at the last treatment session and after the 18-month and 30-month follow-ups by D were estimated to be 10, 10, and 15 out of 100, respectively. In other words, 90%, 90%, and 85% improvement, respectively (see Figure 2). The sustained change index (RCI = 2.526-2) indicates that the amount of treatment change has been sustained.

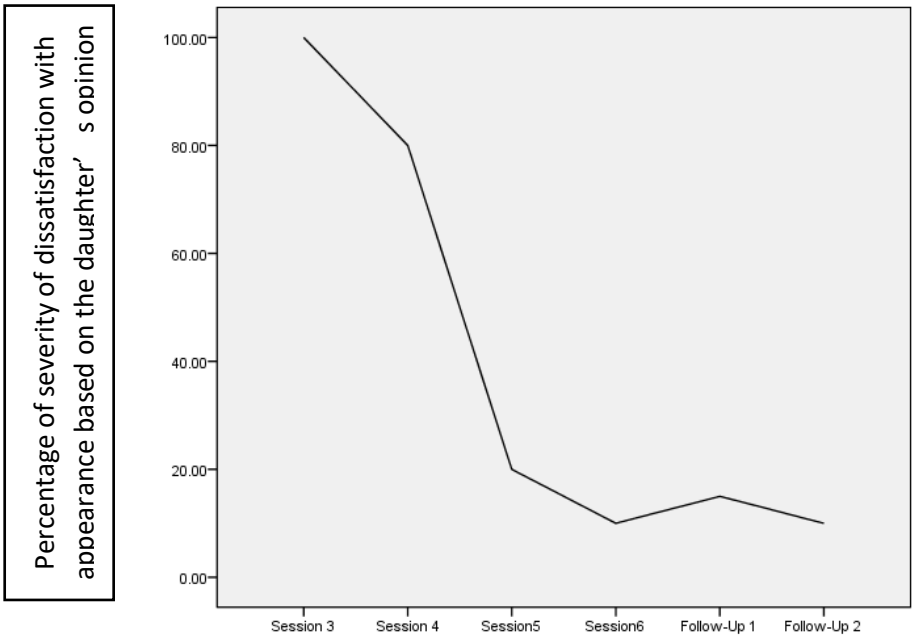


Figure 1. *Rating of the severity of the daughter's dissatisfaction with her appearance in family therapy sessions and follow-up stages*

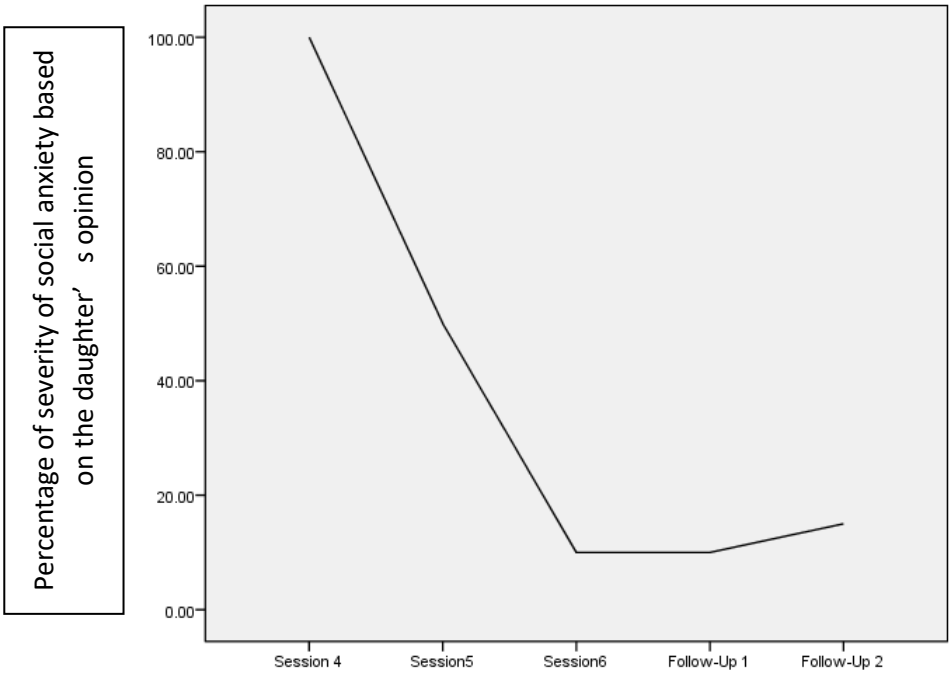


Figure 2*. Rating of the severity of the daughter's social anxiety in family therapy sessions and follow-up stages*

The results of paradoxical family therapy using the PTC method were evaluated based on the opinions of M, F, and D on a subjective rating scale of 0 to 100 in different sessions and in the first (after 18 months) and second (after 30 months) follow-up stages. Based on the opinions of all three family members, the estimated level of progress and improvement achieved by paradoxical family therapy using the PTC method in terms of the adjustment of conflicts and inconsistencies at the level of family interactions was estimated to be 60% in the fourth session (actually the first intervention session), 80% in the fifth session, 90% in the sixth session; 80% in the first follow-up, and 90% in the second follow-up (see Figure 3). The sustainable change index (RCI=2.693-2) indicates

that the amount of therapeutic change was sustainable. These results confirm the definitive effectiveness of paradoxical family therapy using the PTC method not only at the level of family conflicts but also at the level of individual psychological disorders (D). These results also indicate that the therapeutic changes resulting from paradoxical family therapy using the PTC method were stable and continued after thirty months.

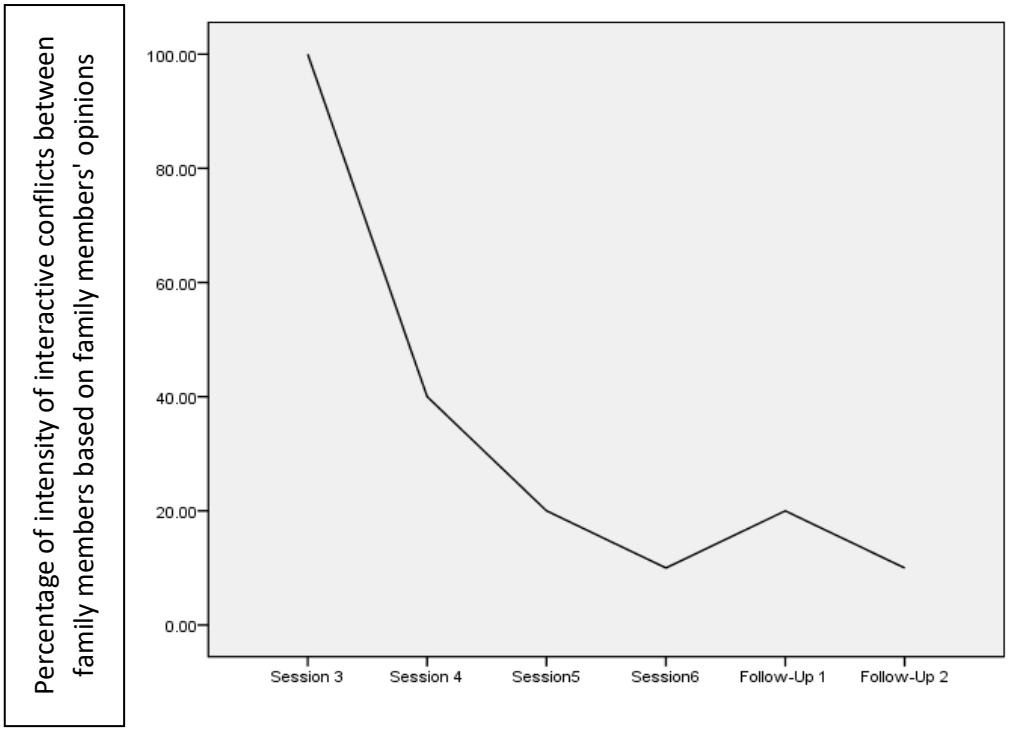


Figure 3. *Rating the severity of interactional conflicts between family members in family therapy sessions and follow-up stages*

Conclusion

Observing the effectiveness of paradoxical family therapy using the PTC method, simultaneously in two forms of family therapy and individual therapy, is one empirical support for the large volume of previous studies confirming the effectiveness of this therapeutic model. Paradoxical therapy using the PTC method is a very efficient and short-term therapy with an unparalleled speed of effectiveness. The number of treatment sessions is much less compared to other approaches in equal conditions. For instance, the pure treatment of conflicts and disorders in this family was completed in only three sessions. It should be noted that the therapeutic tasks were prescribed from the third session and were implemented by the family in the third, fourth and fifth sessions, and the sixth session was the final session. The depth of effectiveness of paradoxical therapy using the PTC method is also equal to the depth of the client and family members' personality; this claim is supported by the stability and continuity of therapeutic results in follow-up periods. The range of application of paradoxical therapy using the PTC method is one of the unique characteristics of this therapeutic model; it is application for both individual and family forms. It is also applicable for all psychological disorders ranging from anxiety to mood, from personality disorders to children and adolescents, from family therapy and couples therapy to paradoxical sex therapy. It is applicable for people of different ages with different educational and socio-economic levels. Another advantage of paradoxical therapy using the PTC method is its economy due to the very short duration of the treatment period. Finally, as mentioned in the last session of the treatment protocol and in the final family session, the client and her family members become therapists themselves at the end of the treatment; the unique feature of paradoxical therapy using the PTC method is that it begins by entrusting the full responsibility for the treatment to the client from the beginning under the supervision and guidance of the therapist and results in the independence of the client at the end of the treatment. Based on these empirical facts, the correct learning of paradoxical therapy

using the PTC method is recommended to all therapists in order to achieve professional goals and contribute more widely and effectively to the health of the community.

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Conflict of interest
There are no conflicts of interest in this study.

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