

Fédération Internationale pour la « Clinique de Concertation » ficc.contacts@gmail.com - 2 rue Fleurie, 7500 Tournai Belgique concertation.net

The Travail Thérapeutique de Réseau supported by the « Clinique de Concertation » and the Thérapie Contextuelle¹



Octobre 2022

Contact : Dr Jean-Marie Lemaire <u>drjmlemaire@gmail.com</u> – Catherine Mariette <u>catherin.mariette@orange.fr</u> The spaces of practice of the "Concertation Clinic" are accessible on the calendar of the website www.concertation.net. The terms "Clinique de Concertation » et « Concertation clinique » and "Sociogenogramme" are protected at the EUIPO (No. 009122318 and 009122326). Please respect the spelling

¹ The Network Therapeutic Work Supported by the "Concertation Clinic" and Contextual Therapy

• Findings

The upheavals that have fractured our societies in recent years have had profound impacts on professionals in the medico-social sector and the members of families they accompany and engage in their work. The mental health implications of the health crisis or concerns about climate change have been measurable: a decrease in positive perception of life, an increase in depressive and anxious states, sleep disturbances, and suicidal thoughts.

In addition to these mental health indicators, economic indicators highlight an increase in precarious situations and a disparity in the effects of the epidemic depending on geographical areas and social situations.

Furthermore, professionals who provide support to these families often find themselves confronted with a lack of material and human resources, which results, for example, in the social care of individuals requiring disability or medical care. These conditions, detrimental to their mission, lead to discouragement, burnout, resignations, and hinder coherent interventions for the targeted populations.

The results of such findings are unequivocally relayed in the media; thus, the difficulties that hinder the actions of social services (in the broad sense of the term) and that constitute the daily life of professionals are becoming increasingly apparent. Among other things, the fact that 25% of situations, presenting issues that exceed the responses and care facilities proposed by the various existing services, occupy 75% of working time; the so-called "hot potato" effect concerning situations that pass from desk to desk, undermining both the people being accompanied and those accompanying them.

Such a situation reveals a need for breaking down barriers. Interveners must be able to "step out" of the alcove or desk so that interventions can be made with a cross-cutting perspective on people's needs and not just in a logic of administrative divisions.

The number of complex situations, even "unsolvable" ones, had already alarmed public authorities and led to more integrative laws. But several reports (Marie-Arlette Carlotti's Assessment, December 21, 2012, Report by State Advisor Denis Piveteau, June 10, 2014) emphasized that their implementation is deficient.

The institutional response, which consists of promoting networked work, is ineffective because it does not enable its implementation. It remains solely in the logic of coordination, creating network coordinator positions that are a new layer added to previous ones, in a layering of interventions where family members and professionals struggle to recognize and identify themselves.

• Needs

In the face of increasing complex situations, even those deemed "unsolvable," institutional leaders and professionals in the fields of aid, care, education, regulation, and culture are seeking greater efficiency in managing and preventing multiple distresses. They are "disconcerted" by the fragmentation, sometimes the inconsistency, of their intervention contexts. Their demands pile up and overlap without combining and without intersecting family logics: how to work with young parents living on the street? How to work with the parents of "dropout" students? How to work with youth groups? How to work with the elderly? The list of categories that make up this accumulation and the waiting lists of files from various medico-social services can be endless.

Existing training programs are often intra-sectoral, developed in a logic of compartmentalization and pre-existing service offerings. They are not adapted to exceptional situations that have become the daily reality for more and more interveners from different sectors.

To counter the fragmentation of interventions by "desk," training in the *Travail Thérapeutique de Réseau* allows professionals mastering specific, even antagonistic, professional cultures to acquire a way of "working together," inscribing themselves both in territorial coordination work and in mutual valorization of professionals and various institutions and associations.

The methodology of the *Travail Thérapeutique de Réseau* is based on regulatory principles of the "Clinique de Concertation " and the Contextual Relational Ethics of I.B. Nagy. This methodology allows for following the signs addressed by users in multiple distresses, to learn this part of the profession that is foreign to academic training, precisely that of working "together" in fertile and stimulating "Overlap Fields." The technical tools used ("*Sociogénogramme*", *Tour de Présentation, Partialité Multidirectionnelle*) provide a rigorous framework but are open to the evolving realities of the field.

Training in the *Travail Thérapeutique de Réseau* provides the knowledge and technical skills specific to the " Clinique de Concertation " supported by the principles of Relational Ethics, to provide momentum to networks of professionals undermined by compartmentalized interventions. In particular, recognizing the activations of family members, whatever their form, in order to find the resources inherent in them to change critical situations. The *Travail Thérapeutique de Réseau* relies on family resources to enrich the organization of assistance, care, education, regulation, and culture. Especially those resources that are at the heart of the problem and are not typically identified within a coordination logic.

• Evolution

Refocusing missions, working in networks, reducing costs, supporting uncertain payment deadlines, consolidating frameworks, supporting transversality..." - the report of the High Council for Social Work in February 2017 redefined social work by placing it in the recent decentralization measures and entrusting its implementation to the Department.

As a result, administrative managers from sectors as differentiated as Child Protection, education and culture sector, and hospital sector, are tasked with enforcing texts putting people at the heart of support and promoting networked work.

The International Federation for the "*Clinique de Concertation*" (FICC) is approached by territorial authorities responsible for implementing new professional practices. They see in the *Travail Thérapeutique de Réseau* a methodology that offers a user manual to progress in the direction set by the legislator, both for the benefit of family members as well as the professionals and interveners activated by them.

Several institutions and networks of actors have enrolled or plan to enroll their professionals in the *Travail Thérapeutique de Réseau* training programs, so that this methodology gradually permeates the institution and the territory and is shared with partners from both public and private services.

Following the training, Workshops on the practice of the "*Sociogenogramme*" can be conducted internally within the service by a trained professional open to other professionals in the network activated by family members in situations of multiple distress. Professionals can also participate in Transmission Workshops, spaces for reflection and exchange on concertative practices, organized, without economic

Acquired Competencies

The trained professional is able to develop relay practices and valorize the overlapping fields activated in the network by users in multiple distresses. He/she has acquired the ability to disseminate the concepts of the *Travail Thérapeutique de Réseau* and to animate the different working figures with professionals activated by families in situations of multiple distress.

Back in his/her institution, and depending on his/her core competencies, this professional is able to promote medico-social interventions considering family members in their wholeness and their context, to accompany these individuals,

whose paths have been marked by family, educational, or professional disruptions, in finding references and limits.

He/she knows how to establish regulatory principles that allow professionals in the territory to know and recognize each other and to work together under the gaze of family members.

He/she knows how to facilitate workshops using the *Travail Thérapeutique de Réseau* tools : the "*Sociogenogramme*," the *Tour de Présentation* and the seven components of the *Partialité Multidirectionnelle* Presentation Round, 7 Components of multidirectional partiality.

He/she knows how to encourage actors in his/her territorial network to seize existing resources and deploy them, both at the family and network levels, in order to avoid constantly resorting to new interveners or experts.

He/she knows how to share the ultimate goal: that people regain confidence and assurance, in order to evolve their situation or at least make it more viable, and that tomorrow will be less worse than yesterday