# A FAMILY CENTRED APPROACH ACROSS THE LIFESPAN QUICK REFERENCE:

### **IMPLEMENTING FAMILIES AT THE CENTRE\***



### **KEY ELEMENTS**

port and services offered to them

Encourages cross-system collaboration

families, networks, and communities

and needs, and empowers them

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Shifts the culture in approaches to policy & practice

Sees people as individuals as well as vital members of

Complements an individualized (patient/client) focus

Focuses on the inherent strengths, capabilities, and in-

terconnectedness of families, identifies their concerns

Appreciates the resources that individuals, families, and

Acknowledges that individuals and families are experts

on themselves; are capable of making informed choices

with the appropriate information, time, and support;

and, are involved in relevant decisions, when possible

Recognizes the decision-making ability of individuals and

families is influenced by developmental capacity, acuity

of the individual's mental health &/or substance use

challenge, and the roles negotiated for this purpose

Tailors services to families' needs, preferences, culture

Builds on informal support systems instead of relying

professionals bring to the service relationship

## THE BENEFITS

#### Health and Well-being Benefits for Children, Youth, Adults VISION: Families in all their diversity are at the centre of service system cultures and responses

- $\Diamond$ Increases the understanding of systems about the needs of individuals and families experiencing mental health members and/or substance use challenges and improves the sup-

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  - Hastened recovery from mental health and substance use challenges
  - Increased family/caregiver employment
  - $\Diamond$ Increased stability of living situation
  - $\Diamond$ Greater educational attainment for children and youth
  - $\Diamond$ Increased child, youth, adult, and family satisfaction
  - Lowered risk of mortality from substance dependence and suicide
  - vouth. adults. and families

#### **Benefits Related to Systems and Services**

- $\Diamond$ More timely access to quality improved services
- $\Diamond$ Increased professional satisfaction
- $\Diamond$ Improved cost effectiveness of services
- $\Diamond$ More effective use of health & social care resources
- $\Diamond$ Reduced out-of-home placement of children
- $\diamond$ Reduced rate of re-hospitalization or relapse
- $\Diamond$ Reduction of stigma through opportunities for dialogue across systems and with families
- $\Diamond$ Reduced mental health and/or substance use problems

### **BE INVOLVED**

- $\checkmark$ Become a champion of family-centred approaches
- ✓ Develop your knowledge of family-centred approaches
- √ Share ideas and gain support, including from management
- ✓ Use a tool, such as the Family-Centred Practices Checklist developed by Wilson & Dunst (2002), to gauge the extent to which current practices are using a familycentred approach
- $\checkmark$ Read Families Matter: A Family Mental Health Framework for BC (F.O.R.C.E for Kids' Mental Health, 2012) to learn more about what families need and want
- $\checkmark$ Engage families. E.g. Ask families how they would like to be engaged in the services they and/or their family member are receiving, or bring families together in a focus group or advisory committee or council to inform movement towards a family-centred orientation
- $\checkmark$ Determine priorities. Work collaboratively with other professionals and families to identify strategies with the most impact on families and are easiest to adapt

The Spectrum of Family Engagement on the next page illustrates various types of family engagement and involvement. The degree of family engagement is influenced by system capacity and laws on information sharing as well as the acuity of the individual's mental health needs and individual and family needs for safety. However, every degree of engagement along this spectrum (except the experience of 'exclusion') offers opportunities for individuals, families and systems to benefit.

#### Key Elements and Benefits adapted from:

solely on professional services

and traditions

MacKean. G., Spragins, W., L'Heureux, L., Popp, J., Wilkes, C., & Lipton, H. (2012).

\*Families at the Centre: A Planning Framework for Public Systems in BC developed by the BC Family Mental Health and Substance Use Task Force with the Ministry of Children and Family Development and Ministry of Health.

- and Families
- Decreased risk of secondary mental health and substance use problems for current and future family
- $\Diamond$ Decreased family/caregiver stress and related problems
- Improved child/family management skills and function
- $\Diamond$
- $\Diamond$
- $\Diamond$
- $\Diamond$ Improved health, safety, and well-being of children,

### Centre for Addiction and Mental Health, Community Support and Research Unit. (2004).

WHEN A FAMILY MEMBER IS EXPERIENCING A MENTAL HEALTH AND/OR SUBSTANCE USE CHALLENGE

SPECTRUM OF FAMILY ENGAGEMENT

Greater Opportunity for Benefits for Individuals, Families and Systems

Exclude		Inform	Involve	Collaborate	Empower
Client-Focused	System Orientation	Person-Centred Family-Aware	Family-Involved	Family-Focused	Family-Centred
Families are not considered or engaged in efforts to work with individual clients.	Family Engagement Goals	Provide families with information to assist them in understanding approaches and options.	Obtain feedback from families on options and decisions. Involve families to ensure their concerns and hopes are consistently understood and considered.	Build on individual and family strengths. Collaborate with families for advice on decision making at the service level.	Strengthen family connectedness and resilience. Empower families to have a primary role in decision making at both the service and system levels.
Systems offer no promises to families regarding information, involvement or supports.	System Promise to Families	We will keep you informed to the best extent possible regarding the plan of care, effectiveness of interventions and opportunities for family- based input.	We will listen to you and acknowledge your concerns and hopes. We will let you know how your input has influenced our decisions.	We will look to you for advice and expertise and will incorporate your recommendations into our decisions to the best extent possible. We will equip our staff with the knowledge and skills to apply a family-centred ap- proach.	We will ensure our staff are fluent in application of family-centred approaches. We will centre our services on family -based input and apply your recom- mendations.
We are not informed about services offered to our affected family member, and receive no related services.	Family Perceptions	Our affected family member(s) receives services and we are informed.	Our family's advice influences the services provided as well as service planning.	The professionals focus on us and our affected family mem- ber. Our family is involved in service delivery, planning and action. We advocate for our own family.	Our family AND our affected family member receive the services we need. Our family partners with system representatives on service planning and policies for all families. We advocate with other families.

Adapted from ©2007 International Association for Public Participation, Spectrum of Public Participation www.iap2.org.; Ferreira, K. et al, Family Movement Milestones Poster (2012)

