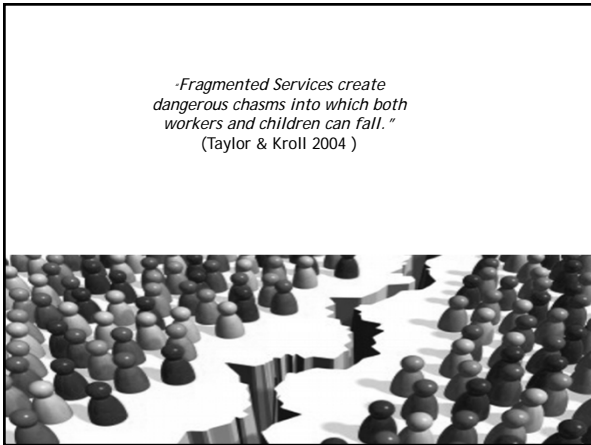


Listening to families: Building collaborative programs to support families affected by parental mental illness and/or addictions

Disclosure Statement:

Supporting Families (Richmond, BC) is not affiliated (financially or otherwise) with a pharmaceutical, medical device or communications organizations. Members on this collaborative table are mental health professionals affiliated with their respective community agencies funded by the Ministry of Health and/or Ministry of Children and Family Development in British Columbia.

- Learning Objectives:
- To learn about collaborative process with families.
 - To learn about collaboration with communities.
 - How collaboration works with multiple organization and roles.



LISTENING TO FAMILIES & WORKING WITH FAMILIES

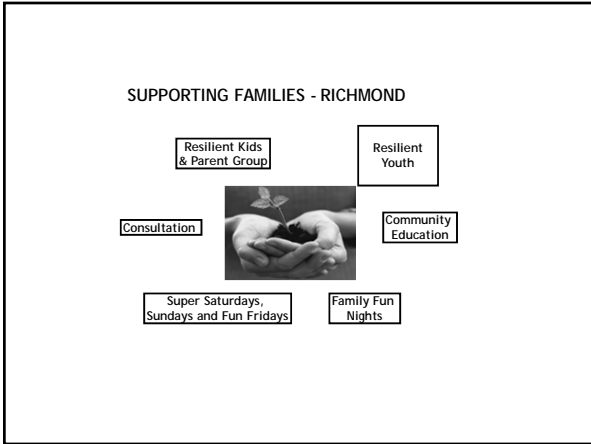
"...I have a mental health worker... but no one has ever asked me if I have kids."

Mental illness indirectly affects all Canadians at some time through a family member, friend or colleague.

20% of Canadians will personally experience a mental illness in their lifetime.


Mental illness affects people of all ages, educational and income levels, and cultures.

Adults with mental health and/or addictions have children and parent at the same rate as the general population



FAMILY LENS

- How many of you are part of a family?
- How many of you have loved or supported someone who lives with a mental illness and/or an addiction?
- How many of you discuss mental illness and addictions in families with those you work with?



Richmond Supporting Families

Uses a collaborative model to support families who are impacted by parental mental illness and/or addiction through groups, community action, education and facilitating the connection to community services.

Collaboration

- To work jointly towards commonly defined goals
- Together defining and sharing responsibility of achieving tasks
- Understanding the process of idea sharing is and an integral part of creating innovative practice ideas
- No clear formula

Commitment to Collaboration

- Keeping communication open
- Committing the time required to negotiate across agencies
- Seeing through the eyes of each other not just your own discipline
- Creating an atmosphere where all voices are part of decision making and respecting the work of ALL members
- Working together to address issues and concerns as they surface

Commitment to the families, services and collaborative process



From Ideas to Actions



ADVISORY GROUP

- Ministry of Children and Family Development - Social Workers
- Touchstone - Clinical Counselor
- Canadian Mental Health Association - Children and Youth Services
- Richmond Addiction Support Services - Clinical Counselor, Prevention Workers and Executive Director
- Vancouver Coastal Health - Manager Child and Adolescent Programs; and Clinical Counselor Richmond School Program/Belinda Boyd
- Chimo - Youth Worker
- British Columbia Schizophrenia Society - Regional Representative
- Force - Richmond Parent Representative
- Family Members (Invited or Requested)

Collaboratively Supporting Families

DEVELOPING A NEW LENS OF PRACTICE

Creating a new story across community involving

- collective action
- co-operation
- complex interactions
- building trust and relationships

Setting up Partnerships

from: Advancing Family Centered Care in Child and Adolescent Mental Health

- Children and Families drive the plan
- Children are part of the team
- Look at needs rather than problems
- Promote hope
- Involve the family, not just in language but in actions
- Provide accurate, understandable and complete information -they need to make informed choice

Building Partnership

Make decisions collaboratively that reflect the family not the professionals goals

If children are in care include the foster parents

Recognize and celebrate the family in all its diversity

Address barriers

Access strengths and resources on the families environment including supportive peers

Provide services that are flexible and will respond to the child and family needs, concerns and priorities

Think through a cultural lens ...families know what fits their cultural values and beliefs

INCLUSIVITY: Honoring the Client Voice

- **Accessibility:**
 - referrals accepted from parents, family members, health care providers, MCFD, schools, community agencies
 - remove barriers (e.g., transportation assistance provided)
- **Diversity:**
 - Ensure we represent the Richmond community - understand, respond to & model appreciation of individual/family diversity
 - interagency partnership provides increased language capacity & resources for new Canadian families
- **Honoring Client/Family Voice:**
 - parents not required to share diagnosis, asked to define challenges/impacts in their own words
 - all participants invited to provide feedback and routinely evaluate programs and services

TAKING ACTION ON WHAT FAMILIES TOLD US

Sustainability

- Agency specific workload commitments
- On-going funding
- Sharing ownership

Complex issues

- **TRANSPARENT INFORMATION SHARING:** Parents are told at information presentation that leaders are from multi disciplines and information is shared to better serve the children and family
- **SCREENING IN:** No screening out means we have to address what appears in the room
- **NO EXCLUSION:** All engagement is encouraged

PARTNERS

Supporting Families Affected By Parental Mental Illness
and/or Addiction: Richmond Community Table

