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# Implementation Challenges in Wrapping Interventions Around Families Living with Parental Mental Illness

Joanne Nicholson

*University of Massachusetts Medical School, Joanne.Nicholson@dartmouth.edu*

Beth R. Hinden


*University of Massachusetts Medical School, bhinden@rcn.com*

Joan Mikula

*Massachusetts Department of Mental Health*

*See next page for additional authors*

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# Implementation Challenges in Wrapping Interventions Around Families Living with Parental Mental Illness

## **Authors**

Joanne Nicholson, Beth R. Hinden, Joan Mikula, Kathleen Biebel, Valerie Williams, Katherine Woolsey, and Elizabeth A. Aaker

## Implementation Challenges in Wrapping Interventions Around Families With Parental Mental Illness

**Betsy Hinden, Ph.D.**  
**Joanne Nicholson, Ph.D.**  
University of Massachusetts Medical School  
**Joan Mikula, Assistant Commissioner**  
Massachusetts Department of Mental Health

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### Scope of the issue

- Many families are affected by overlapping child & adult mental health concerns.
- Within children's systems of care (SOCs; Hinden et al., 2006):
  - 52 % family history of mental illness (MI)
    - 37% parent hospitalization
  - 58% family history of substance abuse (SA)
    - 50% parent treatment for SA

### Vulnerable families/Special needs

- At high risk for out-of-home placement & custody loss (30% - 70%; Nicholson et al., 2001):
- Within SOCs (Hinden et al., 2005):
  - Greater number of risk factors (e.g., h/o trauma, delinquency), poorer functioning (e.g., strengths, symptoms, impairment), and greater caregiver strain at intake
  - Show poorer functioning and greater caregiver strain over time

### Service Barriers

- Families with overlapping child & parent mental health concerns may enter services through the child or adult systems.
- Regardless of point of entry, there are significant *organizational & practice* barriers that make adequate support & effective intervention for families difficult (e.g., categorical services, stigma; Nicholson et al., 2001).

### What do families with overlapping concerns need?

#### Family-centered, strengths-based SOCs:

- address stigma, i.e., see parenting as an important role for adults with mental illness
- reflect a much greater degree of integration across child & adult systems

### What do families with overlapping concerns need?

#### Family-centered, strengths-based programs that provide *family care management*:

- focus on recovery & rehabilitation for parents & resilience for children
- provide access to & advocacy within both child and adult systems
- promote self-determination & family driven goal plans or plans of care.

Family Options  
at Employment Options, Inc.

**Mission**

***To build resources and relationships to promote recovery and resilience in parents with mental illness and their children.***

Family Options

- **Key Concepts & Processes:**
  - *family-centered, strengths-based, family-driven & self-determined, recovery & resilience, engagement & relationship building, empowerment, availability & access, liaison & advocacy*
- **Primary service:**
  - *family care management*

Family Options  
Intervention Innovation

- **Involves entire family, including children <18, who may or may not have "problems"**
- **Draws from what we know about EBPs for adults with mental illness & parenting**
- **Builds on what we have learned works best in a clubhouse setting**
- **Requires shifting the agency's focus**

Family Options Outcomes Study

- **Parent & Child**
  - Well-being
  - Functioning
  - Supports & Resources
- **Family**
  - Empowerment
  - Supports & Resources
- **Program Fidelity/CQI**

Family Options  
Implementation Study

- **Focus groups with agency stakeholders**
  - 3 groups, 3 stages: program installation, initial implementation, full operation
  - Management team, agency staff & members, Board of Directors
- **Qualitative interviews over time**
  - Family Options staff & Clinical Consultant
  - Agency staff, clubhouse members, board of directors

What have we learned:  
*Community engagement is important.*

- **Build relationships with community organizations & provider agencies**
- **Develop mechanisms for communication & collaboration with partner agencies across child & adult sectors at the local, regional & state level**
- **Define & develop Respite resources**

What have we learned:  
*Workforce issues are important.*

- **Program Supervisor is a critical role** (challenges in translating model into practice, building interagency relationships, providing staff supervision & training).
- **On-going training and support are necessary to insure delivery of *family care management*** (challenges in navigating paradigm shift, building resources & relationships, creating a *family team* that supports achievement of family's goals).

What can children's SOC's do?

- **Provide education & training on the prevalence of & potential concerns related to parental mental illness for families in SOC's.**
- **Include adult providers on Child & Family Teams.**
- **Support recovery & resilience for parents & children.**
- **Develop connections with parenting & other adult resources and providers.**

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[bhinden@rcn.com](mailto:bhinden@rcn.com)  
[Joanne.Nicholson@umassmed.edu](mailto:Joanne.Nicholson@umassmed.edu)  
[Joan.Mikula@state.ma.us](mailto:Joan.Mikula@state.ma.us)

[www.parentingwell.org](http://www.parentingwell.org)