

# Bringing All Relatives Together

Statewide Growth



# Overview

- Introduction
  - BART's Place treatment philosophy
  - General types of interventions
    - By age group
    - By special issues
- Case studies- How sessions are identified, organized, and conducted.
- Questions, Answers, References, & Resources

# Treatment philosophy

- Collaborative
  - Engagement
- Psychoeducational
  - Resilience
- Family focused, child-centered
  - Recovery

# Treatment Considerations

- Collaborative-
  - What does the patient-parent want to achieve with a session?
  - What is the family and child concerned about?
  - How do we engage the family in a way that respects their input as well as the patient's perspective?

# Collaborative

- Barriers to collaboration
  - Negative attitudes, perceptions and perspectives held by family members and professionals
    - Different priorities
    - Different level of interaction/experience
    - Different training and expectations

# Collaborative

- Meeting needs while setting appropriate limits.
- Clarify expectations
- Reinforce the importance of the family viewpoint
- Reinforce the importance of the parent role for recovery.

# Treatment considerations

- Psychoeducational

- The Vulnerability-Stress-Resilience Model

- Adapt discussion for age / intelligence
- Look for strengths

- The patient is encouraged to be the primary teacher.

# Treatment considerations

- Family focused, child-centered
  - What are the immediate needs and concerns of the child/family?
  - What might the child and family anticipate in the future?

# Types of interventions

# Types of interventions: by age

- **Very young child** (infant to toddler (3-4 year olds))
  - Primary task: Spending time with parent
    - Encourage interaction
  - Attachment issue: Reassure child parent is ok
  - Explaining why parent is in hospital: not feeling good, yucky, upset.
  - Session focus: Parent is getting help from a doctor.
  - Appreciate the caregivers.

# Types of interventions: Age 4-7

- **Preschool to elementary age (4-7)**
  - Primary task: Spending time with parent
    - Encourage interaction
  - Attachment issue: Child can begin to notice differences from when they left the house. Point out positive changes.
  - Explaining why parent is in the hospital: Feelings have the flu, not well.

# Types of interventions: Age 4-7

- **Pre-school to elementary (cont.)**
  - Session focus: Reassure that parent is ok, not the child's fault. Parent not mad at child, etc.
  - Appreciate the caregivers

# Types of interventions: ages 8-12

- **Ages 8-12**

- Primary task: Spend time with parent; understand something about the illness/current circumstances/their coping.
- Attachment issue: Children are more cognitively aware of parent's absence and illness. Will often want parent to ask about them and interact with them. More inquisitive (when is parent coming home?)

# Types of interventions: ages 8-12

- Explaining why parent is in the hospital: Check the their understanding first and allay fears about what is going to happen to them or their parent.
- Session focus: Look for
  - Signs of the child showing care giving behaviors toward the parent. Assess the appropriateness of the child's sense of responsibility for the parent.
  - Signs of anxiety. Allow expression of feelings, look for coping.
- Appreciate and support the caregivers

# Types of interventions: by age

- **Teenage years (13-18)**

- Primary task: time with parent to discuss the illness and the teen's concerns about the situation.
- Attachment issue: Mix of attachment, separation, may challenge authority, possibly reversal of roles. Wide range of emotions.
- Explaining why parent is in the hospital: Many understand that parent has an illness.
  - Provide accurate information about the specific illness
  - Discuss impact on parent's behavior and larger impact on the family.

# Types of interventions: Teenage years (cont.)

- Session focus: Can vary-
  - First break vs. One of many hospitalizations.
  - Wide range of emotions are possible.
  - Educate: Answer questions, help teen to prepare for discharge.
    - What resources are needed/available.
    - Who are the ongoing caregivers and make connections to community resources.
- Appreciate the caregivers

# Type of Interventions- Special issues

- **Child witnessed suicide attempt**
  - Child will want to see parent safe.
  - Recognize that the situation was traumatic
  - Address family concern: decide before session about how much to talk about the suicide attempt.
  - Reassure the child where appropriate
  - Make appropriate referrals

# Type of Interventions- Special issues

- **Child witnesses violence/police involvement**
  - Prepare the caregiver/child: parent is better now (not violent).
  - Recognize that the situation was traumatic.
  - Assess the need to discuss the episode now.
  - Focus may be on having a safe visit and helping the family and child prepare for discharge.
  - Address concerns related to safety
    - Safe now
    - Safety plan for the future

# Type of Interventions- Special issues

- **Child directly affected by illness** (violence, focus of delusion, other)
  - Carefully review the patient's readiness for a session with the treatment team.
  - Discuss the background with the caregivers- ask how child is dealing with the event leading to the hospitalization.
    - Any contact with patient while in the hospital?
    - Child's response after the contact (phone, letter)

# Type of Interventions- Special issues

- **Child directly affected by illness**  
(violence, focus of delusion, other- cont.)
  - Talk with patient about what they would like to address regarding the incident.
  - Ask caregiver to prepare the child for a short discussion with their parent; check the child's readiness.

# Type of Interventions- Special issues

- **Custody questions:**

- We do not perform custody evaluations for the hospital or for other agencies.
- We do give feedback to the team about the session, especially if there are any concerns about the child's safety.
- If family members have concerns, we suggest that they contact children services with their specific information.

# Type of Interventions- Special issues

- **Custody issues**

- Client may request help explaining to the child why custody was surrendered to someone else.
- When custody is taken by the county, we can work with both the patient-parent and the social service agency to support a visit while the patient is in the hospital.

# Walking through a BART's Place visit

Case examples

