

Involving Families

The following are offered as practical suggestions for mental health staff. They concentrate on the dynamic process illustrated in the diagram overleaf.

1. Defining the partnership:	
Roles/tasks	Practical suggestions
Recognise the role of the family	<ul style="list-style-type: none"> • Make sure that the team is committed to working effectively with family • Ensure that it is easy for families to gain information, and access services and staff.
Clarify who is the family in each situation	<ul style="list-style-type: none"> • Find out from the tangata whai ora who the family is (eg, spouse or partner, parents, siblings, other relatives, friends, flatmates, ministers, support workers) • Additional sources for identifying whānau are appropriate (eg, Māori staff, and other Māori resource people in the community) • Remember that membership of a family or whānau may change over time.
Develop and maintain a partnership of equality with the family	<ul style="list-style-type: none"> • Make sure that you have the consent of the tangata whai ora to share their personal information with the family • Listen to the family throughout care, assessment and treatment processes • Be transparent in your involvement with all parties.
Be responsive to the cultural, emotional, physical, social and spiritual experience and needs of the family	<ul style="list-style-type: none"> • Make your workplace 'family and whānau friendly' • Wherever possible, meet the family in the place of their choice • Understand the importance of the pōwhiri process, ensure there are opportunities for it to happen and participate • Connect with the family – use appropriate self-disclosure • Use language that is comfortable for the family • Ensure the team includes staff who are skilled in responding to cultural and spiritual needs (eg, conducting karakia, giving and responding to a mihi).
Respect the privacy and confidentiality needs of the family and the tangata whai ora	<ul style="list-style-type: none"> • Clarify with the tangata whai ora what information can be disclosed to the family, <i>and vice versa</i> • Act according to the Privacy Act 1993 and the Health Information Privacy Code 1994 in relation to family • Provide 'non-public' places where family can meet with the contact person or team.
Identify and introduce the mental health staff to the family	<ul style="list-style-type: none"> • Be accessible to the family on their terms • Ensure that team members can meet, greet and host a family in a family-friendly way, including cultural and spiritual aspects such as mihi, karakia, and kai (eg, a cup of tea and biscuits) • Introduce all relevant members of the team to the family.
Clarify staff roles and responsibilities with the family and tangata whai ora	<ul style="list-style-type: none"> • Ensure that all team members understand the role each team member will play • Identify one team member as the contact person for the family • Ensure that the contact person shares all information with the rest of the team • Review job descriptions to ensure that team members can carry out any new responsibilities • Negotiate how ongoing contact is to happen (eg, when, how, why contact will/can take place).
2. Providing information, education and support:	
Inform the family about the services that can be provided and the support that is available to them throughout the care, assessment and treatment processes	<ul style="list-style-type: none"> • Provide information as needed by the family: <ul style="list-style-type: none"> – how the mental health service works – each mental health worker's role and function – what can happen throughout care, assessment and treatment – how they can be supported (provide it in writing as well) • Do not overload the family with information 'all at once', especially in a crisis. Provide information in writing so they can refer to it later • Prepare (or obtain) information so it is ready for use: pamphlets, fact sheets, videos etc • Offer information in a variety of ways so the family can choose what suits them; some may prefer discussion, others may prefer written information.
Provide relevant information, education and training regarding mental health and illness and the role the family can play in recovery, to enhance their understanding, skills and confidence in the carer's role <i>Remember that adequate explanation may entail repeating the same information several times at regular intervals</i>	<ul style="list-style-type: none"> • Focus on holistic treatment, rather than medication management alone. Assist with issues such as accommodation, psychosocial therapy, supportive social networks, and employment or alternative options • Assist families to: <ul style="list-style-type: none"> – resolve family conflict – provide in writing how they can be supported. Be sensitive to emotional distress – identify/solve specific problems, reach stated goals – develop family members' relevant skills – problem-solving and skill development improves their ability to support the consumer, leading to less need for professional support – strengthen positive family ties – care for <i>themselves</i> – unlimited self sacrifice 'in the interests of the tangata whai ora' may damage their ability to care and cope – learn about the illness – refer families to community courses about mental illness – maintain/expand their support networks, friendships, activities and hobbies – particularly those that take them out of the home. Put them in contact with local support groups • Ensure there is a 'non-blaming' approach to families <ul style="list-style-type: none"> – Make sure you have the same realistic expectations: <ul style="list-style-type: none"> – what does the tangata whai ora and family expect of the treatment programme? – is this what the treatment team is able to provide?
Provide support on an ongoing basis throughout the care, assessment and treatment processes	<ul style="list-style-type: none"> • Act on the information provided by the family and tangata whai ora when they speak about early warning signs or side effects of treatment • Support the supporters – talk to and advise teachers, guidance counsellors, employers, GPs, tohunga and others who are supporting the family (with the family's consent) • Support families by assisting them to: <ul style="list-style-type: none"> – understand what is meant by 'recovery' – plan how to work towards agreed goals, review progress, deal with emergency, crisis and relapse – care for themselves as carers and help themselves 'get back to normal' after a crisis – work out how to interact with mental health staff – understand what they can expect from staff and service providers.
Inform the tangata whai ora about the services and support that are available to them throughout care, assessment and treatment processes Provide relevant information, education and training regarding mental health and illness, including the role the family can play in their recovery	<ul style="list-style-type: none"> • Explain how the mental health service works • Plan with the tangata whai ora the nature of their involvement with family and staff, and how they will be supported at each stage of the process • Provide pamphlets or other information for tangata whai ora about: <ul style="list-style-type: none"> – their diagnosis and what it means – what is meant by recovery, how to work towards recovery, and how to review progress – medication and possible side effects of medication – early warning signs and what to do about them – helping themselves to 'get back to normal' after a crisis – how to interact with staff and what they can expect from staff and service providers – the role their family can play in care, assessment and treatment processes – the role of other supporters and advocates, and their contact details – any legal aspects of their care, assessment and treatment, and rights and responsibilities.
Mental health staff need to prepare themselves to work in partnership with families	<ul style="list-style-type: none"> • Ensure that you and your team understand the principles of working with families (eg, treatment co-ordination, problem-solving techniques, clear communication, setting goals, being accessible, being responsive to Māori, Pacific peoples, European, and other cultures) • Employ skilled staff • Seek any necessary education and skill training for you and the team in (for example): <ul style="list-style-type: none"> – current research findings on the value of involving families in recovery – attitudes to working with families – models for working with families (see Appendix 1) – the knowledge and skills needed by families – the skills and processes involved in educating families – the skills and processes for working with children and siblings of tangata whai ora.
3. Planning/preparing for the future:	
Negotiate ways in which the family can participate in the recovery process with the tangata whai ora, especially in those aspects of recovery that directly affect their own lives	<ul style="list-style-type: none"> • Help the family to understand the big picture – offer information about the long term • Assess the family for its resources, strengths, ways of coping, social networks and needs for support services <ul style="list-style-type: none"> – this will help you know what you can offer or contribute • Negotiate crisis management contracts with tangata whai ora and family – agree with the tangata whai ora <i>before a crisis occurs</i> on the treatment and care that will be offered, what information can be shared with family and the nature of their involvement, should the tangata whai ora become unable to consent • Suggest inclusion of a 'tangata whai ora friendly' person in these contracts – this person can be involved if there is conflict in the future • Where appropriate, discuss the appointment of a welfare guardian or property manager with the family, or preparation of an Enduring Power of Attorney by the tangata whai ora • Design and use 'user-friendly' tools for exchanging information, planning and care, such as: <ul style="list-style-type: none"> – information-gathering forms, and forms for families to send information to the contact person about recovery or early warning signs – an agreement form for treatment plans – relapse prevention and early warning sign plans.
Ensure that families are involved in wider issues in the provision of services	<ul style="list-style-type: none"> • Remember that families learn what works for them and what doesn't – acknowledge their experience • Involve families in consultations and discussions about how services should be provided and how they can be improved, (eg, planning, development, management and evaluation) • Involve family representatives in service provider governance.
4. Reviewing at critical points:	
Develop appropriate ways in which the family can participate in review processes at planned intervals	<ul style="list-style-type: none"> • Listen to the family – learn from the carers – they have experience and knowledge • Remain in close contact during times of crisis, to offer concrete advice and assistance • Make your interventions or solutions practical and real – negotiate goals with the family and tangata whai ora, and work towards them step by step, within best practice guidelines • Ensure everyone knows what is happening for the person if there is a crisis or relapse – suggest concrete solutions which will improve the situation.
Ensure reviews inform all aspects of working with the family (eg, definition of family and staff; information, education and support)	<ul style="list-style-type: none"> • Acknowledge family observations – families are accurate predictors of relapse • Use the outcome of reviews to: <ul style="list-style-type: none"> – make sure you are in contact with 'current' family – ensure the team has current knowledge of the family and tangata whai ora – ensure the team is meeting the current needs of the family – review plans and develop new plans for the future.

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