Maryland School Mental Health Alliance

*Family Involvement in School-Based Mental Health*

*Information for School Clinicians*

**Definition**

Providers who understand that families generally are the ones most knowledgeable about their own children will be more likely to find a returned respect and spirit of collaboration with families. It is important for providers to engage families prior to, and throughout the intervention process in order to increase buy-in, and to promote positive outcomes. Providers who consult with families regarding concerns they may have about a child’s mental health will benefit from family input, especially regarding the child’s behaviors outside of school.

Providers may have to explore alternative methods to maintain ongoing family contact. Some family members may be reluctant to visit the school, due to past negative experiences, or a perceived stigma attached to their child’s mental health needs. Staying in touch through the telephone, written correspondence, or e-mail may be more comfortable that face-to-face meetings for some families. Families may also be unable to take time away from jobs, making day-time meetings difficult. Providers who can approach families in a non-judgmental and cooperative spirit are more likely to have success in working with the child with mental health needs.

**Why do we care?**

- Positive family and staff interaction help to achieve overall positive school climate
- Providers in the schools can be a strong link between school staff and the family
- Providers and families who work collaboratively for a student will be more likely to have student cooperation

**The research tells us…**

- using phone calls or e-mail to contact families helps reduce perceived barriers to service access
- demographic characteristics are **not** associated with level of treatment involvement
- parents’ alliance with a school mental health clinician predicts whether youth and families use the skills taught during interventions
- when compared to individual therapy, interventions involving family support show greater reduction in child behavior problems
- caregivers involved in developing treatment plans for their child report higher levels of self-efficacy, which is related to greater investment in the treatment process
• collaborating with caregivers in the treatment process reduces the amount of time students spend in the treatment environment
• caregivers who participate in the treatment process report higher levels of self-esteem, which translates to more positive role modeling for students
• when clinicians seek feedback from caregivers, the caregivers are more likely to feel that their child’s needs are being met
• children receiving mental health services achieve more long-term, positive outcomes when clinicians include a mechanism for caregiver feedback into the treatment process
• incorporating family feedback into treatment processes creates a sense of shared responsibility for the well-being of the child receiving services. This, in turn, promotes buy-in from caregivers as they promote treatment goals at home.

What can we do about it?

• Work in a spirit of mutual respect and cooperation with families to insure success for every child in school.
• Adopt positive and effective communication strategies with all families. Utilize all available resources to communicate with families: email, home and cell phone, fax and hand-written letters.
• Attempt to engage every family regardless of their socio-economic status or race/ethnicity.
• Honestly address caregiver concerns before treatment. Ask them about their past experiences and how you can improve upon them.
• Ask families to openly discuss their expectations about mental health treatment for their child. Be optimistic, but realistic about outcomes that can be expected in a given time frame.
• Be willing to directly address problems in the therapeutic alliance with families and work together to improve the relationship.
• Consider having caregivers advocate for families new to treatment. Families involved in successful treatment processes can support other families.
• Create and share a community resource list with families. Provide practice information about who is eligible to participate and how to access programs.
• Design treatment plans with adjunctive, community supports in mind. Rely on local organizations (e.g., sports leagues, scouts, youth groups) to reinforce and further generalize treatment goals.
• State and national mental health groups often have excellent materials developed specifically for families. Have copies of their fact sheets readily available in your office.
• Think of different ways to involve caregivers in the treatment process beyond the initial session. Approach caregivers in a manner that shows how you value them as equals in the treatment process.
• Connect caregivers with family advocates who can guide and support their involvement in the treatment process.
• Take the time to find out what caregivers think about your services throughout the treatment process. Use this feedback as a way to improve the quality of the care you provide on an ongoing basis.
• View caregivers as experts. Families can provide a more comprehensive history for the child or adolescent and offer another perspective. Families should be allies in the treatment process. They can report successes and challenges, can help develop treatment plans and can reinforce treatment strategies at home.

Key Resources/Links

Center for the Advancement of Mental Health Practices in Schools
College of Education, University of Missouri
Excellent website with strategies for involving families in schools.
Tips for Involving Parents: http://mhrs.missouri.edu/involvingparents/index.shtml

Maryland Coalition of Families for Children’s Mental Health
“The Maryland Coalition of Families for Children’s Mental Health is a grassroots coalition of family and advocacy organizations dedicated to:
• Improving services for children with mental health needs and their families
• Building a network of information and support for families across Maryland”
www.mdcoalition.org  410-730-8267, Toll Free 1-888-607-3637

NAMI Maryland
“NAMI Maryland is an advocacy organization for family and friends of people with serious mental illness, and people who have a mental illness.”
http://md.nami.org/  410-863-0470, Toll Free Helpline 1-800-467-0075

Mental Health Association of Maryland
“The Mental Health Association of Maryland works to ensure that people with mental illness reach their rightful place as participation, productive members of our community.”
http://www.mhamd.org/  410-235-1178, Toll Free 1-800-572-MHAM (6426)

Learning Disabilities Association of Maryland
“Learning Disabilities Association of Maryland promotes awareness and provides support to maximize the quality of life for individuals and families affected by learning and other disabilities.”
http://www.ldamaryland.org/  1-888-265-6459

CHADD/Children and Adults with Attention-Deficit/Hyperactivity Disorder
Maryland Chapters
“CHADD is the nation’s leading non-profit organization serving individuals with AD/HD and their families.”
Local chapters are in Baltimore City and Anne Arundel, Baltimore, Harford, Howard, and Montgomery Counties.
http://www.chadd-mc.org/
“The AACAP developed Facts for Families to provide concise and up-to-date information on issues that affect children, teenagers and their families.” Fact sheets are available on line on topics such as childhood depression, Lying, Grief, Grandparents Raising Grandchildren and Grief. These are a small sample of the topics.
http://aacap.org/cs/root/facts_for_families/facts_for_families

Knowledge Exchange Network
The website for the National Mental Health Information Center, a component of the Substance abuse and Mental Health Services Administration. This website provides information on a multitude of topics. Examples of topics available are: “Your Child’s Mental Health: 12 Questions Every Parent Should Ask”, “The Myth of the ‘Bad’ Parent”, “Attention Deficit/Hyperactivity Disorder in Children and Adolescents”.
http://www.mentalhealth.samhsa.gov/

Reference

*Developed by the Center for School Mental Health (http://csmh.umd.edu) in collaboration with the Maryland School Mental Health Alliance.*