Family Psychoeducation
Introduction

The information and dates in this presentation are accurate as of the date of this presentation or delivery of content (Dec 2018)
Overview

› Define Family Psychoeducation
› Importance of Family Psychoeducation
› Psychoeducation across Service Provision
› Family Psychoeducation Models for those with Serious Mental Illness (SMI)
› Resources
What is Family Psychoeducation?

➢ Providing information and support to youth and their families to better understand and cope with a mental health condition

➢ Psychoeducation is found in most evidence based programs

➢ “Family Psychoeducation” also describes a set of evidence based models for adults and older youth with schizophrenia and other serious mental illness (SMI)

➢ Psychoeducation can be done individually or in group formats in a variety of settings and by a variety of professionals
Why is Family Psychoeducation Important?

➢ Provides youth and families with the necessary information to make informed decisions about care
➢ Increases coping skills and builds supportive resources
➢ Instills hope, reduces blame, and looks towards recovery
➢ Engages the family in treatment as appropriate
Key stages in service provision to provide psychoeducation

- Initial meetings / assessment period
- Service planning
- Ongoing treatment or service provision
Initial Meetings/ Assessment (in-person or by phone)

- Instill hope and reduce blame
- Understand the family’s strengths and resources
- Determine what the family knows or doesn’t know
- Clarify misconceptions about the condition and services
- Orient to mental health services and how they work – what to expect
Initial Meetings/ Assessment

Orientation to services:
- How do you access services?
- What are the services? What is therapy?
- Who will the family be seeing to access the services?
- Who do they contact with any questions or concerns?
- What resources are given to the family?
- What is the role of the therapist, caregiver, and child?

Is all of this communicated to the family?
Service Planning and Setting Goals

- Psychoeducation helps families to participate in shared decision-making with the provider
- Explain the diagnosis, course/prognosis, treatment options, strategies for coping
- Inform family about the risks and benefits of treatments or limitations of services
Service Planning and Setting Goals

**WHAT**
- What is the diagnosis?
- What does it mean?
- What are the symptoms?
- What is the prognosis?
- What are best practices in treating the illness?

**HOW**
- Be empowering – does the diagnosis make sense
- Be practical – is this a working diagnosis or a clear one
- Be sensitive – you are diagnosing a child with a possibly “chronic” condition
- Be hopeful (we can develop a plan that can make things better)
- Be collaborative – use of “we” and partnering with family and other services providers
Ongoing Treatment/Service Provision

› Psychoeducation can continue to be provided at any point in service provision
› Continue to share information on coping strategies for youth and family
› Encourage engagement in community supports – formal and informal (e.g., family/caregiver support groups)
› Continue to provide information on treatment and course of illness
› Re-evaluate needs and provide information on options if appropriate
Family Psychoeducation Models for those with Serious Mental Illness (SMI)

- There are a set of evidence based practice models (EBPs) that are also called Family Psychoeducation.
- These models were developed for adults (and older youth) with serious mental illness (SMI), such as schizophrenia.
- These models aim to engage families in supporting the individual with SMI. For younger youth, engaging families in treatment may look different and it is always helpful to use EBPs based on diagnosis and age or developmental stage of the child.
- Two common Family Psychoeducation EBPs:
  - National Alliance on Mental Illness (NAMI) Family-to-Family
  - Individual Family and Multifamily Groups
Family Psychoeducation for SMI: NAMI Family-To-Family

Peer Facilitated; 12 sessions for family members of adults (including older youth/young adults) with serious mental illness

- provides information and research on major mental illnesses
- provides information on treatment and recovery options
- builds empathy/understanding of the individual with the illness
- skills training on problem-solving, communication, and handling crises
- caregiver coping strategies
- identifying local community services and supports
- advocating for improvement and expansion of services

https://www.naminymcmetro.org/family-to-family-course/
Family Psychoeducation for SMI: Individual Family and Multifamily Groups

Professional/provider facilitated with family and consumer

Goal is to improve consumer outcomes, quality of life, as well as to reduce family stress and strain. Components include:

- joining (establish working alliance between provider-family-consumer)
- education (understand illness and what they can do about it)
- problem solving (work with family/consumer to identify strategies for handling difficult situations)
- structural change in the treatment (help family/consumer develop strengths based, respectful environment optimal for recovery)
- multifamily contact (connection to other families, support groups to reduce isolation and stigma)

Duration – 9 months to multiple years

Psychoeducation Messages

Examples of key messages to share with families:

- No one is to blame for the problems
- Take care of yourself
- Don’t forget the positive (reinforcement is a powerful tool)
- Together we can make real progress (what is my role, your role and the child’s role. “We are partners working together.”)
- Change takes time
- You are not alone (your child’s problems have been experienced by others)
- Dangerous situations need our immediate attention (self-harm and harm to others and property)
- Ask questions (important that we have a shared understanding)
- Important to reach out to and use your social supports
- Be hopeful (we can develop a plan that can make things better)
Psychoeducation – MCO Staff

- Depending on role, clinical staff can share much of the same information above directly with the family or encourage providers to do so.
- When reviewing medical records, is it apparent that psychoeducation at each of the stages was provided? Is there anything that shows that the provider helped to increase knowledge, understanding, and coping of the family?

Are there other ways you can you make sure families receive appropriate psychoeducation?
Psychoeducation – MCO Staff

› Can provider relations staff encourage providers to explore opportunities to address needs caregivers have for education and information?
  ▪ "Here at _____ we are encouraging our provider network to address the needs of families by assessing information the family may know about the child’s condition, treatment, and community resources and by providing recommendations on what role the family/caregivers can play in their child's services."

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Psychoeducation – MCO Staff

› Can member relations inform families of available services and their rights?
  ▪ “We are encouraging our staff and providers to provide you with any information you need so that you can make the best use of services. You are entitled to receive information from providers that will help you understand your child’s condition, options for services, and your role as a caregiver. You have a right to ask questions to make sure you have a full understanding of your options. Please let us know if this is not happening.”
Questions?
Resources for Psychoeducation

» NAMI
  - https://www.nami.org/Learn-More/Fact-Sheet-Library

» AACAP

» APA – Topics and Help Center

» SAMHSA
  - https://store.samhsa.gov/