

Let's Talk about Children



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*Picture Antonia Ringbom,
in Solantaus&Ringbom, 2002*

The Effective Child&Family Programme

The Method Family

- The Let's Talk about Children -discussion (LT, 1-2 sessions)
- the Beardslee Family Talk Intervention (FTI,, 6-8 sessions)
- Vertti Peer groups and family courses for parents and children
- Let's Talk Network Meeting
- Guidebooks
- Others to come?

The Methods share the same principles

- Promotion of protective factors in children's and family's lives
- Prevention of child mental health problems
- Future orientation, hope
- Focused, time-limited methods
- Provide the beginning, the family continues
- Based on understanding, respect, open communication (about the method and about problems)

The aims of the EC&F methods

- To support parents to be as good parents as possible in the present situation: tools for parenting
- To help parents to understand children and their experiences and children to feel understood; children to understand the parent and family situation
- To increase open family communication
- To give parents and family the up-to-date knowledge on protective factors / experiences
- To increase a sense of belonging, coping and mastery
- To help family live with the problems

...aims

- to help parents support their children at home and outside home by using
 - the family's own resources
 - resources of the family's own network
 - resources of different services
- to help the family reach the services they need

For practitioners

- Working with families with parental mental illness and alcohol&drug abuse is based on understanding the impact of parental problems on their abilities to interact with and to take care of oneself and others
- and understanding children's experiences and needs
- Understanding the situation and needs
 - of the parent
 - of the spouse
 - of the child
 - of practitioners from different sectors

Mutual understanding

- Within family –mother-father-children
- Between professionals and family members
- Between different professionals

Mutual
understanding?



Antonia Ringbom

Mutual
understanding?

Open
Communication?



Antonia Ringbom

- Beware of stigma
- Respect for the parents

The Stigma of mental illness

- Stereotyping
- Predjudices
- Discrimination

- "They are poor parents"
- "They will not be able to talk about their children"
- "How could they decide what is best for the children?!"

Stigma of mental illness and substance use extends to family

- to the parents if the child has problems
- to the children if the parent is ill
- (parents are sometimes wise not to tell about their problems to others)
- Professionals / WE STIGMATIZE FAMILIES
 - alcoholic family
 - psychotic family
 - Abusive family
 - anorectic family
 - "mental family" ...
- "Oh yes, she comes from an alcoholic family"



Antonia Ringbom

Method Family:

Respect for the parents

The parent talks with children about his/her problems

- The parent is not discussed about with children
- "Nothing about me without me"

The parents' role as parents is respected

- the parents decide what they want to tell their children
- and how to parent the children

Earlier....

- It would be good for children if you
- It would be best if you...
- You should...

- I know - We professionals know that
- it would be good for the children if you
- The professional acts as an expert in family matters: I know better than you.

The Effective Family approach

- "Other families have found this...useful"
- "What do you think, would it be something you might like to try?"

The Effective Family work

- Other families have found this...useful
 - professional knowledge offered to the family
- What do you think, would it be something you might like to try?
 - Parents' own experience, judgement and decision making is respected

Two experts meet

- Principles of talking with children about parental problems
 - for parents and practitioners to know

Working across sectors

- Apply the same principles!
- People have different needs
- which need to be validated
- and negotiated
- respect for each one's experiences, positions, responsibilities
- Find a common language!

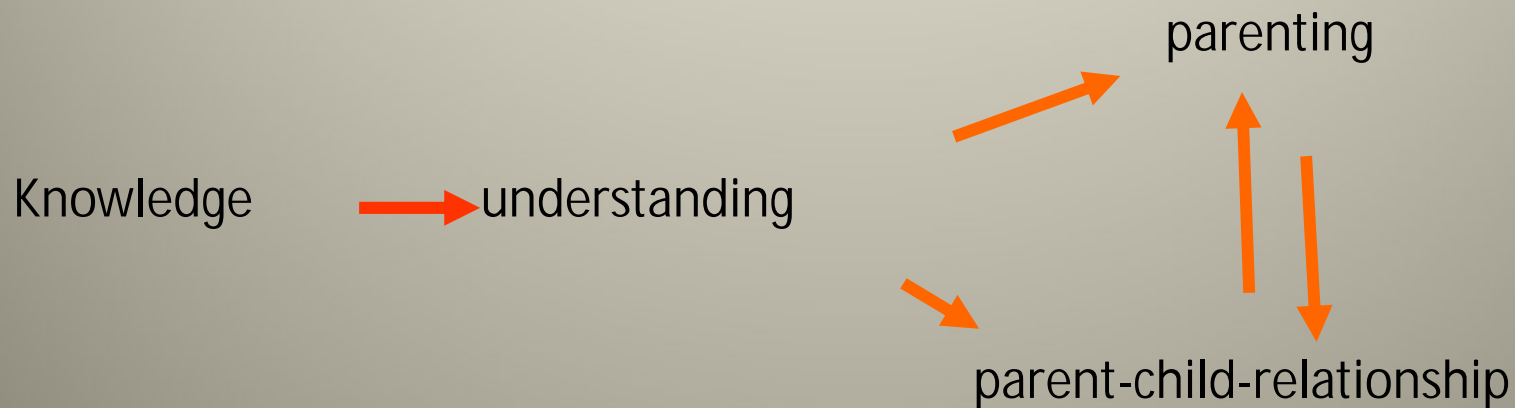
Talking with children about parental mental problems

- Principle number 1.
- The aim is to support parent - child relationship and to make problem solving possible
 - clearing out misunderstandings
 - demystifying mental illness
 - To help parents understand their children, children understand the family and their own situation and feel understood themselves

Talking with children...2

Principle number 2


- The aim is to increase mutual understanding
 - Plain knowledge is not enough



Talking with children about...3

Principle number 3

- Talking is a process between parents and children.
- Understanding develops over time

 Help for parents to discuss the problems with children

Talking with children about...4

- Principle number 4
- One talks about things/happenings which are within the child's experience
 - what children have seen, heard, what they are thinking about



Children need an explanation to their experiences

Talking with children about...5

Principle number 5

- A solution needs always to be built in, when children are told about major problems in their and their families' lives

 A door to the future needs to be opened

Talking with children about...6

Principle no 6.

- If family situation is explained to the child by a practitioner, there has to be a person to accompany the child, a person who is part of the child's life and with whom the child can share the experiences and reflect on them in everyday life.
- The child is not to be left alone with this information
- The parents have to be told what has been said about them to their children

MESSAGE FROM PARENTS TO CHILDREN...

1. My behaviour is due to my own problems Give examples: "Remember, yesterday I..."
2. My problems are not because of you
3. I take care of myself
 "I see the doctor / therapist..."
 "I take my medicine..."
4. Come and talk whenever you want



**MUTUAL UNDERSTANDING AND
SENSE OF SECURITY**

...MESSAGE FROM PARENTS TO CHILDREN

5. School is important ...even if I do not attend the parent evenings
6. Keep up with your friends and hobbies, even if I have difficulties
7. You can talk about these issues with your friend and people important to you / with



**SUPPORT FOR CHILDREN'S
SOCIAL LIFE**

What if parents do not want to talk?

- There is a reason for this – process the issues with the parent
- Fear of burdening the children
- Fear of stigmatizing the children
- Fear of being stigmatized within the family
- Not knowing what to say, how to say and when
- Mistaken images of what will be talked about

- The parent's own mental state – too suicidal etc
- Bad earlier experiences in services
- Negative experiences in the family
- If the parent does not want to do this
 - Make your judgement about what is best for the family and then consult your laws
 - Finland: Child Welfare Act, child protection

The Beardslee Family Talk Intervention

Beardslee et al, 2003, 2008

- 2 parent sessions
 - parents' narratives on what it has been for me
 - how my children have reacted: child perspective,
 - worries about children, children's strengths
 - questions for the children
- 1 session with each child
- children's well being
 - experiences of parental and family problems
 - responses to parents' questions
 - questions for parents and the family meeting

- 1 planning session with parents
- how children are doing
- children's experiences and their questions
- answers to the children
- plan for the family session: topics, responsibilities etc
- 1 family meeting
- Follow-up meeting
- The number of sessions depend on the family,
 - parents with substance abuse problems often need more than 2 parent sessions

Let's Talk About Children

a preventive and promotive
discussion / a brief intervention
with parents

Let's Talk About Children (LT)

- Originally designed for practitioners with no training and experience
 - in talking about or with children in professional settings
 - in making assessments of child development

Aims

- Let's Talk :
 - to inform parents about how to support their children,
 - to identify children who need additional support,
 - to open discussion about children in the treatment relationship with the parent
- Family Talk Intervention
 - those above and
 - enhancing protective factors leading to prevention of children's problems in the long run

Let's Talk About Children

- To be carried out with every patient with children (in Finland)
- 1-2 psychoeducational discussions with patient / both parents, more/less when needed
- Manualized

Let's Talk about Children

- Information for parents on how to support their children
- protective factors /processes
 - Within the family
 - Outside the family
- Promotive assessment of children
- Get the family connected with other services if needed

Psychiatric assessment of a child

- parents and children provide the material, the clinician asks questions
- the assessment is made by the clinician
- for the clinician
- to know what measures/treatment to recommend
- produces a symptom profile
- This is necessary for the treatment process

Promotive assessment in LT

- Information is elicited by parents and the clinician together
- assessment is made by the parents and the clinician together
- for the parents
- to help them to know how to support the children
- produces a profile of child and family strengths and vulnerabilities
- and means for the parents to act

Psychiatric vs promotive assessment

Psychiatric assessment

- assessment made by the clinician
- for the clinician
- to know what measures to recommend
- produces a symptom profile
- recommendations for treatment

Promotive assessment

- assessments made together with the parents
- for the parents
- for parents to know how to support the child
- a profile of child/family strengths and vulnerabilities
- tools for parents to act

Child and family strengths in LT

- things that are going normally
- no special capacities or achievements are needed
- The power of the normal!

Child / family vulnerabilities

- Things that are already problems
- Things that might become problems
 - Lack or weakness of protective structures
 - Child's own vulnerabilities
 - A vulnerable match between parental problems and child characteristics
 - a shy child and low-energy depr.parent
 - a lively child and parent with diminished impulse control (alcohol problems)
 - A handicapped child and depressed parent

Let's Talk Manual and Logbook

- The manual describes the principles
- The log book lists topics to be covered
- the order of the topics can be changed
- the logbook helps to stay focused on children

- the plain logbook version: lists topics
- 'an assisted logbook': includes suggestions for expressions that can be used

- Age specific forms to assess child development
 - pregnancy
 - 0- 3 years
 - 3-6 years
 - 7-12 years
 - 13 and up

Invitation to the Let's Talk

- Tell your patient about the LT discussion, its contents and aims
- Invite the other parent /partner or any support person to join
- Give the parental guide book to the parent
- Give the age specific forms to the parent
- The parent can also access the manual from the net

LT First Session ...

- Welcome and introduction of the method
- A description of the first session

...LT First Session ...

Promotive assessment of the child

- Explain how the assessment is made and what is meant by strengths and vulnerabilities

...LT First Session ...

Concluding the First Session

- Ask about the parents' experiences of the session
- Review the contents of the next session and the time and date

LT Second Session...

Discuss the time since you last met

- What were the feelings after the last meeting?
- How has everyone been?
- The purpose of this session

...LT Second Session...

Communication and understanding

- Parents' response to the guide books and the idea of talking with children about mental problems
- importance of open communication and mutual understanding
- children's reactions and possible misunderstandings- guilt, fears, insecurity etc

LT Second Session

Supporting parenting and children

- take the age specific sheets of each child
- discuss one child at a time
- Review the strengths and how to support them
- Review the vulnerabilities and means to support the child

Parents about Let's Talk about Children

- A good working relationship 71%
- 83% in LT had continued to discuss children in later sessions
- As effective as Family Talk Intervention in identifying children's needs for other services (about 20%)
- New tools for parenting 72%
- Increased understanding of children 52%

Parents about Let's Talk about Children

- I felt better after the intervention. 43%
- Motivation for treatment increased: 39%
- Increase in self acceptance 46%
- Decrease in sense of guilt 64%
- Decrease in prejudices in the family 35%

Eff C&F network meeting

- Is there a need for a Network Meeting?
 - to activate the social system around the child and family?
 - to involve other services?
 - both?

Preparing for the network meeting

- Give parents information of how the network meeting can help, and of those who could be of help
- Child participation: children need to feel safe!
 - family's own network
 - if authorities present, discuss the safety issue,
 - age of child
- Children's voice can be heard in many ways

Preparing for the network meeting-2

- Plan topics to be discussed
 - with the aims in mind
 - only those issues that help others to understand and support the children
 - agree on topics not to be discussed
- Also the parents need to feel safe

- Discuss and plan the overall structure of the meeting
 - who invites and whom
 - the info given in the invitation
 - the aim of the meeting: to support children's strengths and help in vulnerabilities
 - the reason why this person is invited
 - who begins, the role of the parents and the clinician

The network meeting -1

- Welcome (the clinician and the parents)
- the aim of the meeting in brief (the parents)
- Introduction of the participants
 - with explanation of one's connection with the family
 - and one's own expertise (what one could do for the family)

The network meeting -2

- Parents:
 - Describe the aim of the meeting in more detail
 - Tell about the family problems/mental health issues
 - tell about the child, delights and worries
 - hopes for the outcome of the meeting
- The clinician adds to this, if so agreed
- Discussion on the child and family situation situation
 - strengths and worries
 - what I could do (NOT what YOU could do!)

The Network meeting -3

- to come up with a plan
- each one's responsibilities
- follow-up agreed
 - who is responsible of the follow-up
 - But anyone can call up a new meeting when needed

Eff. Family Methods



Unspecific or
clear worry

need for protective
structures e.g. activate
social network



Let's Talk MEETING

- parents (- children)
- family's own network
- child's environments
- child psychiatric team
- social services
- others?

daycare

school

friends

hobbies

Parent comes for
psych. treatment



Eff Family methods



LET'S TALK NETWORK MEETING



ACTIVATION
of
Child/Family
social network

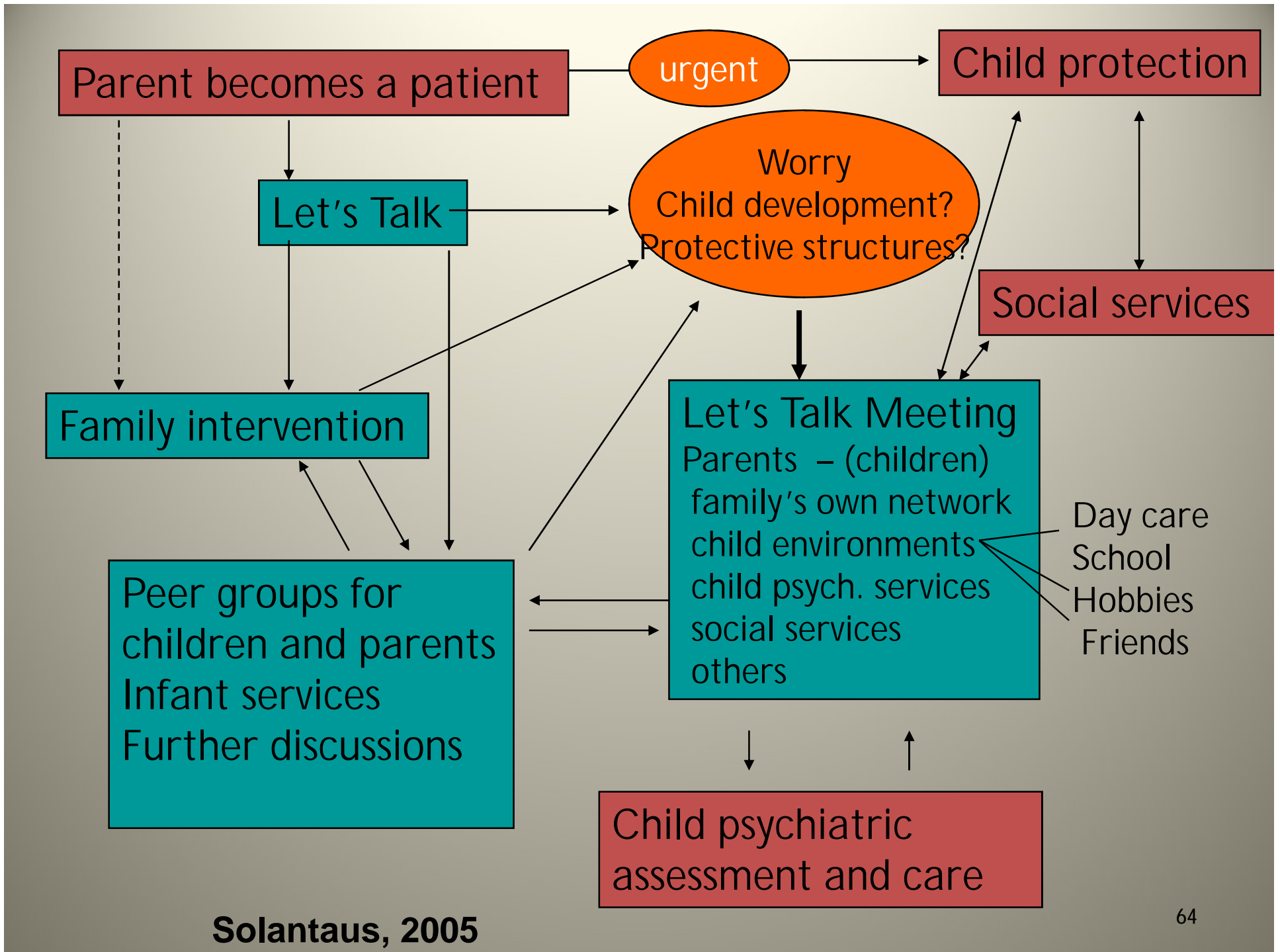
SUPPORT FROM
SOCIAL
SERVICES

CHILD
PSYCHIATRIC
Assessment / care

PARENT'S
PSYCHIATRIC
Assessment/care

Building bridges from adult psychiatry

- Collaboration with child psychiatry
- Permanent consultation system either strengthened or initiated in 50%
- Joint clinical case work 50%
- Collaboration with child protection
- Permanent consultation 40%
- Increased reporting 16%





Thank you!