



Current Family Engagement Practices in Winnipeg

Family Experiences of Adult Mental Health Care



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During the Family Engagement survey (May-July 2017), caregivers of adult children who experience any type of mental distress shared feedback about their experiences with mental health service providers from the past 3 years. The survey was sponsored by Manitoba Schizophrenia Society and the data analysis and reports are written by Inspire Community Outreach.

Details about the Survey: The survey questions and standards are reflective of family engagement practices recommended by both the Winnipeg Regional Health Authority Practice Guidelines for Involving Families (2013) and the National Guideline for a Comprehensive System to Support Caregivers of Adults with Mental Health Problems and Illnesses (2013).

Growing on Success When Families Shared Information to Caregivers:

Families experienced positives in their care. 68% of family members felt the information that they shared was valued and they felt heard. Other positive experiences included collecting and sharing information in a timely and consistent manner, allowing care planning together, and providing helpful support to the client themselves. Several respondents also reported service providers were helpful, took action or showed initiative, as well as were knowledgeable and competent.

"It is a very lonely, **isolating** experience for the family, as well as the individual with a mental illness."

Caregivers Noted Many Gaps:

53% of family members did not receive information on the roles of service providers or how the service providers would support their loved one's recovery and 65% were not given information on how they as family members could support their loved one's recovery. 64% reported not receiving personal support or information on community programs to meet their own needs as a caregiver. On occasion, staff suggested counseling or stated that there were barriers in sharing information and suggested that caregivers locate their own support.

"I was given a list of the team members and their telephone numbers. I was also encouraged to send questions by email so that they could be distributed to team members before a family meeting."

"[The clinicians] allowed an additional meeting to address concerns, when they thought they were done with my loved one..."

"They treated my family member with respect and listened without apparent judgment."

"The staff were quick to admit my family member in a time of crisis, without questioning the severity of their problems upfront."

"Involve the family! ...The relationship between the family members is fragile at this time and it's strength is what is needed for the very long journey ahead. Mental Health is not something you often recover from in one treatment or service. The Service providers need to understand that they are providing a singular service in a series of VERY MANY treatments and services. The one variable that never changes is the family support network that has to be there and be part of every step, so that communication is always accurate... **You need to know what came before to properly understand where you are now and what were the possible causes, and triggers.**"

"By not providing information to the family, really how can we help our loved ones? ...if they are acting unwell and not capable of making day to day decisions, how can they make a medical decision that would be in their best interest?"

The answer is that they can't."

Families indicated they can be better supported by regular and frequent sharing of information that was mostly related to their loved one's well-being and care plan. They also wanted support for resolution of family conflict and if their loved one refuses family involvement. They did not want to be relied on for care and wanted to receive education regarding mental illness, treatment (e.g. medication side effects, options) and community resources.

Discharge and reintegration into community: 50% of the open-ended survey responses (regarding recommended improvements or changes) related to how the service provider needs to work with the family to support their loved one to prepare for discharge and reintegration into the community. Families want support by regular and frequent contact after discharge.

"More planning with client as to what supports they would like before discharge!!
If a client has refused supports early in their hospital stay, (often) they leave the hospital with no supports or plan and the family is left trying to navigate the system."

Service Providers Can Benefit Families in Many Ways:

1. Provide caregivers with written and/or verbal information on:
 - a. Family engagement practices for each service
 - b. Intake, program and treatment details, including client care plan
 - c. Education regarding mental illness, resources, treatment, etc.
 - d. What information can and cannot be shared (i.e. PHIA)
 - e. How to share collateral information despite client not wishing to involve family
 - f. Important information (name, phone numbers) of service providers and community resources
2. Provide caregivers with help for their **own** needs including family peer support
3. Train and encourage service providers to build on their strengths which should be guided by lived experience (person with lived mental health experience and family support).
4. Encourage families to build on their strengths. They often support each other in meaningful ways and these natural supports can often be in place long after the care is over.

Advocacy, collaboration, training and education will allow forward momentum towards positively impacting some of our most vulnerable community members. When mental health service providers work together with families to create targeted solutions the impact can reduce risk not only to those with a mental illness, but also to the families who love and care for them. Rate of recovery for adult children with mental health concerns is directly related to the meaningful support experienced from service providers and their families. Improving meaningful family engagement is a win/win for our loved ones, the mental health system and the economy.

Working together we can make great strides toward reforming our mental health system, to be recovery focused, which will support the recovery process of our loved ones and our families.

Advocacy and Knowing Our Rights Remains Important

Reaching out to Health Minister Kelvin Goertzen and your local MLA. By email, phone calls and/or letters to inform them of your experiences, provides valuable feedback and aides in the growth and development of policies and procedures for mental health services.

MLAs contact information can be found here:

http://www.gov.mb.ca/legislature/members/mla_list_alphabetical.html

Health Minister Kelvin Goertzen

Email: minhsal@leg.gov.mb.ca

Phone: 1-204-945-3731

Address: Minister of Health, Seniors, and Active Living
Room 302 Legislative Building
450 Broadway, Winnipeg, MB R3C0V8

Dear Hon. Kelvin Goertzen,

I am writing to ask that your government ensures that mental health policies regarding meaningful family engagement and the implementation of these policies receive the highest priority by the regional health authorities in Manitoba. Furthermore, a percentage of the protected mental health funds received from the federal government to Manitoba be used towards providing caregivers of those living with mental illness more information, resources, and support in their valuable role. This will help make our communities stronger as caregivers will be able to more effectively fulfill their important role in their loved one's recovery. Implementing and improving family engagement practices is both evidence based, cost effective, and improves the wellbeing of Canadians.

Sincerely,

(Your Name)