Partnering with Families & Other Natural Supports on Individualized Service Plans (ISPs)

Positive familial support can be a good resource for young people during their transition years. However, family involvement and support during the transition years for young adults with mental health conditions can be complicated by changing family dynamics.

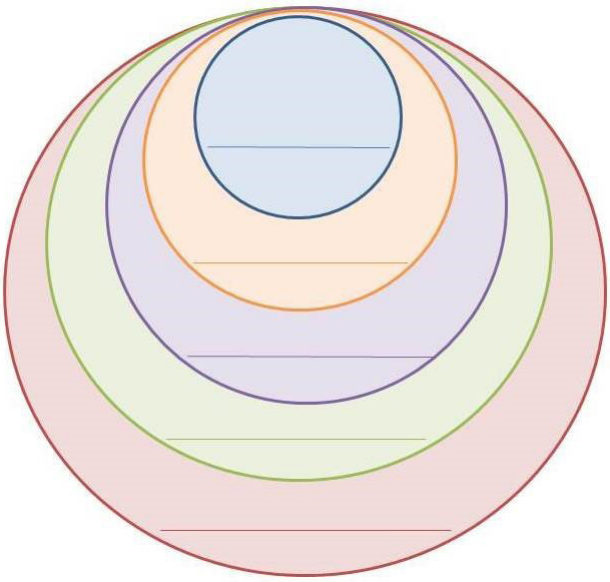
Best Practices When Working with Young Adults and Their Families

Have the young adult define their relationships

Do not assume anything about the people in their lives. Supports and services need to recognize that young adults may define their families in broad terms, and family sometimes extends beyond their blood relatives or legal guardians. Especially for young adults who have been involved in multiple systems and/or out-of-home care, you cannot assume their biological family will be their primary support.[1]

Below is a simple activity for young adults to periodic assess and identify their social network:

- Draw a circle with five layers.
- Have young adult put their name in the middle.
- Ask young adult to put the names of people most important to them in the rings closest to their name. Ask the young adult to put the names of less important people in the outside rings.
- Highlight the relationships that contribute most positively to their success in one color and the negative ones in another color.
- Discuss who young adults want involved in their care and how they see them being involved



Be sure that these discussions include an exploration of non-family supportive adults or allies as well as significant others and that you revisit this occasionally, as social networks tend to change.

Discuss conflict in relationships

Conflict is a product of our being different from each other and not always seeing the world in the same way. The goal is not to avoid conflict but to maintain a healthy relationship even in the midst of conflict. If conflict exists within the family or within a young adult's natural support system, attempt to understand it and work with the young adult to strategize how to navigate this relationship and work through the conflict. It takes practice!

Find creative ways to incorporate family input into youth-led treatment planning

Individualized Service Plans and goals should be youth-led (i.e. the young adult should be making decisions about what their goals are and how they want to get there). Some parents

might have difficulty with this shift in treatment planning because for many years they led their child's treatment plans. However, there are some practical ways to incorporate family or parent input into care without confrontation.[2]

For example:

Each team meeting should start with laying the ground rules for communicating with each other. For example, who leads the meeting, how others can share their input respectively, topics that should be off limit. Involve all group members in creating the rules and writing them on a whiteboard. Enforce the rules as needed. Refer to resources related to Achieve My Plan (AMP) for more tips on youth-led treatment planning.

Identify any behavioral health needs of parents or other family members

Sometimes the parents themselves, or siblings, have unmet mental health or substance abuse needs that can add stress to the family unit. It is important to evaluate and assess these needs in a strengths-based non-threatening way.

What We Know About Partnering with Familes

The "magic" age of 18

Family involvement for children under the age of 18 with serious mental health conditions is a cornerstone of the System of Care approach. However, when an individual legally becomes an adult the family dynamic can shift in two very important ways:

1. **Confidentiality and privacy laws**
   Confidentiality and privacy laws pose restrictions on information sharing once a young person turns 18. Most of the below laws and statutes require young people over the age of 18 to grant permission for their parents to access their health, behavioral health, or academic records. This change literally can take place over night and have major implications for how parent's access their young person's records and help them navigate their care.

2. **Exclusion of families from ISPs, education and employment goals, etc.**
   Many parents are actively involved in the treatment and care decisions of their children but after age 18 a young adult can refuse to involve his/her parents in treatment. In some cases, familial input in treatment can come to a halt,[3] even if families are still financially supporting their child. Often parents and young adults will disagree on their preferences as to how much the parents should be involved, which can create conflict.

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RESOURCES

National Federation of Families for Children's Mental Health
Resources for children, young adults, and families
https://www.ffcmh.org/

Parent Professional Advocacy League
Resources and advocacy specific to Massachusetts
http://ppal.net/

The Parent Information Network (Southeastern MA):
https://www.bamsi.org/program/parent-information-network-pin/

The Support Network (Western MA):
http://wmtcinfo.org/programs/support-network-of-families-of-wmass/

NAMI Family-to-Family
A free twelve-week educational program for caregivers and/or friends of people living with mental illness
https://www.nami.org/find-support/nami-programs/nami-family-to-family

Achieve My Plan
Best Practices for Increasing Meaningful Youth Participation in Collaborative Team Planning
https://www.pathwaysrtc.pdx.edu/pdf/pbAMPYouthParticipation.pdf

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