Applying the Principles of Family-Driven Care at the Community Level

Guiding Principles of Family-Driven Care and Examples for Implementation

Families and youth are given accurate, understandable, and complete information necessary to set goals and to make choices for improved planning for individual children and their families.

- Providers sit with families and explain the results of tests and options prior to any planning meeting so they can make informed choices. The families are allowed the time and supported as they ask questions and are given answers in a language and level that they can understand.

Families and youth, providers and administrators embrace the concept of sharing decision-making and responsibility for outcomes with providers.

- All stakeholders, including the family and others serving the child or youth, meet to discuss and decide desired outcomes. When there is a difference of opinion, everyone comes together and discusses their views and through a process of negotiation and conflict prevention a common agreement is reached.

Families and youth are organized to collectively use their knowledge and skills as a force for systems transformation.

- Peer run organizations have a mission and vision and can represent the needs of those they serve by providing information and training that offers opportunities to their membership to become trained as advocates and systems change agents.
• Family run organizations offer support and educational opportunities through a variety of modalities so that families and youth can participate in a manner that meets their unique needs. This may include family night meetings complete with dinner and respite, social networking, or a simple newsletter that is offered free of charge and available where families gather with their children.

• Whenever possible, families and family run organizations have data and information on those they serve to provide direction to agencies and programs regarding funding, gaps in services, and other issues relevant to necessary services. They serve as the reality check on how changes can impact families and youth and can back that up with quality and quantity driven data.

• Provider programs have an evaluation tool and process to measure and monitor their capacity and outcomes of family driven efforts. They produce an annual report that outlines their strengths and offer a strategic approach for all areas in need of attention. Their progress is tracked year to year.

• Programs have the positions and resources available for Family Support Specialists that represent the lived experiences of those served. They utilize a family driven approach to hiring, recruiting, training, supporting, and evaluating those employed.

Families and family-run organizations engage in peer support activities to reduce isolation, gather and disseminate accurate information, and strengthen the family voice.

Families and family-run organizations provide direction for decisions that impact funding for services, treatments, and supports.

Providers take the initiative to change practice from provider-driven to family-driven.

Administrators allocate staff, training, support and resources to make family-driven practice work at the point where services and supports are delivered to children, youth, and families.
•Communities, businesses, and other stakeholders promote stigma and discrimination reductions programs and activities that are targeted to the unique needs of their community and those they serve and regularly evaluate their efforts and outcomes to ensure that change is really occurring at the basic level of all relationships.

Community attitude change efforts focus on removing barriers and discrimination created by stigma.

•Businesses and programs identify community cultures and make efforts to learn about their customs and values. They use this information to ensure their materials and resources are relevant to those served.

Communities embrace, value, and celebrate the diverse cultures of their children, youth, and families.

•Programs, agencies, service providers, and organizations do regular cultural and linguistic evaluations and develop reports that outline their strengths, challenges, and progress from year to year. They use this information to offer those working with families and their children and youth receive targeted orientations and regular trainings to build their cultural and linguistic competence in all areas of need.

Every who connects with children, youth, and families continually advances their own cultural and linguistic responsiveness as the population served changes.

Adapted from Osher, T and Blau, G. 2007. Gaithersburg, MD: Federation of Families for Children's Mental Health and Center for Mental Health Services, Substance Abuse and Mental Health Services Administration

Brought to you by the MHTA. For more information on this and other projects please visit us at www.mhtransformationalliance.org