Building child centered service structures in adult social and health care, daycare and at schools — experiences from Finland



NATIONAL INSTITUTE FOR HEALTH AND WELFARE, FINLAND

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The Effective Child & Family - program

Personal experiences

- Experiences from everyday work: how to deal with patients' children? 1993->
- Solution focused, resource oriented and child centered family therapy from 2000
- Effective child & family program, professor Tytti Solantaus (Ec&f) 2001->
 - working with families with young children with parental mental health problems...depression, psychosis.. also somatic illnesses
 - the structured child centered interventions
 - research concerning child centered work
 - becoming a clinician and trainer with child centered interventions



- Psychiatric nurse 1993
- Psychotherapist 2000
- Family therapy trainer 2005
- Master studies 2004-2007
- PhD studies 2008-2012
- Running the Effective Child&Family Programme 2009-2015



The Effective Child&Family Programme 2001->

- to develop and provide evidence based methods
- to implement the work in health and social services, daycare and schools
- to ensure sustenance and continous development of the work
- to build bridges between different sectors
 - child-adult services, health-social services, daycare and schools
- to enhance prevention and promotion in mental health



Parental problems that might lead into difficulties for children

- Parental mental health problems and substance abuse
- Parental chronic and serious illnesses
- Low income, unemployment
- Parental criminality and imprisonment

- Siblings' difficulties
- Changes in family relations



Research background



The 1987 Finnish Birth Cohort

- All children born in Finland in 1987 (n=60 069)
- Including almost all Finnish education, health and social welfare registers
- Focus on mental health, behaviour and wellbeing from uterus to childhood and adulthood
- Follow-up from fetal period until early adulthood (20+ years) 1987-2008 using register data only
- Combining due social security numbers the data of the children and their parents (Hospitalisation data discharge diagnosis, date, duration, etc.) = e.g. parental illness and children's specialized psychiatric service use
- By professor Mika Gissler, PhD Reija Paananen



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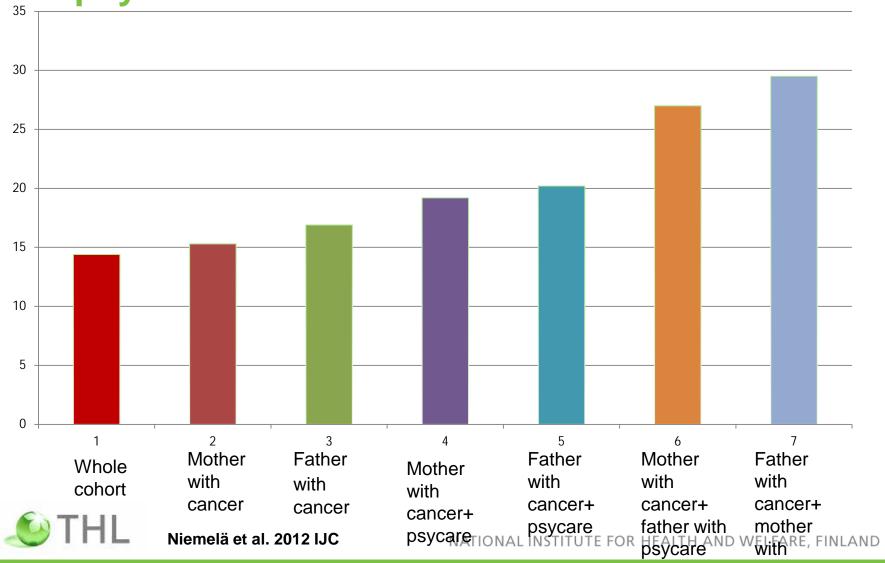
Number of children affected by parental cancer in the 1987 Finnish Birth Cohort

 By combining the register data of the children and their parents it was possible to find out that:

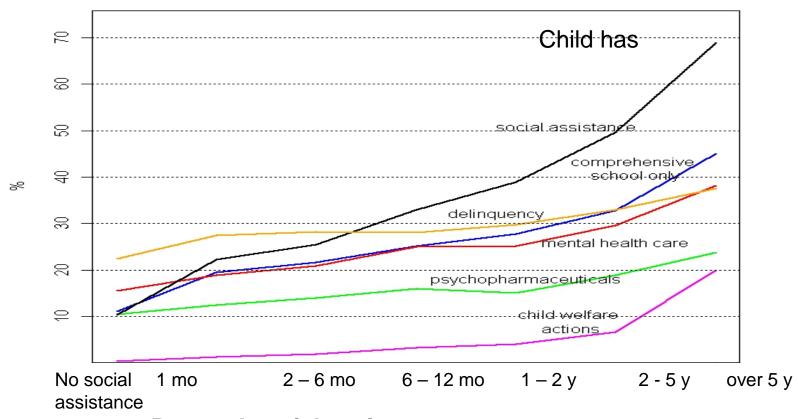
3 909 (every 15th child) children had a mother or father who was being treated for cancer during the years 1987 to 2008



Children affected by parental cancer in spezialised psychiatric care 1987 Finnish Birth Cohort

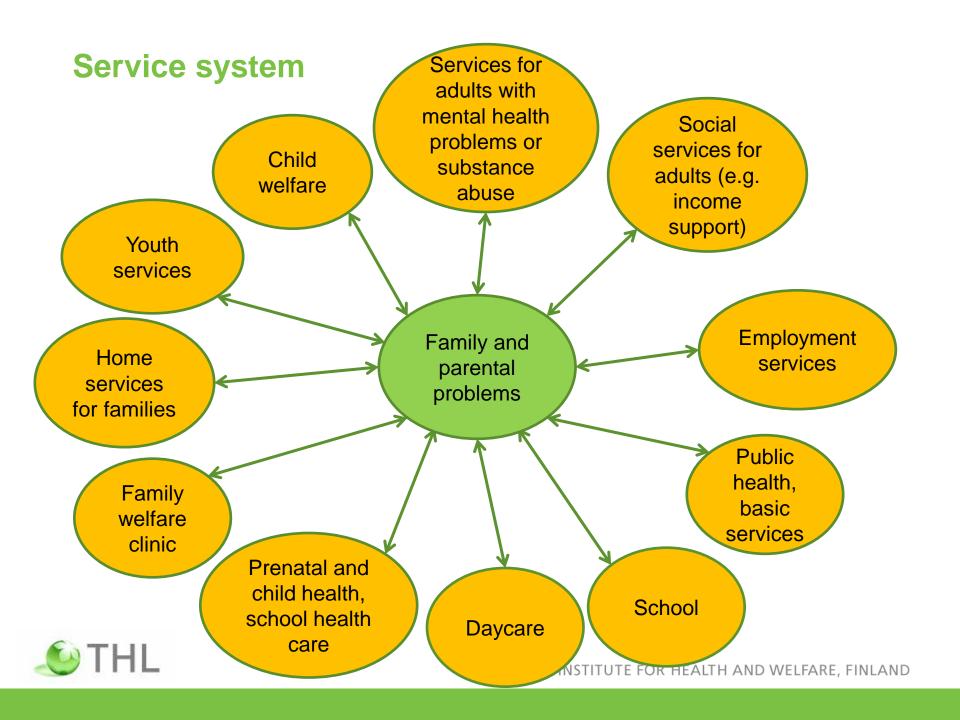


Childhood financial distress increases children's problems







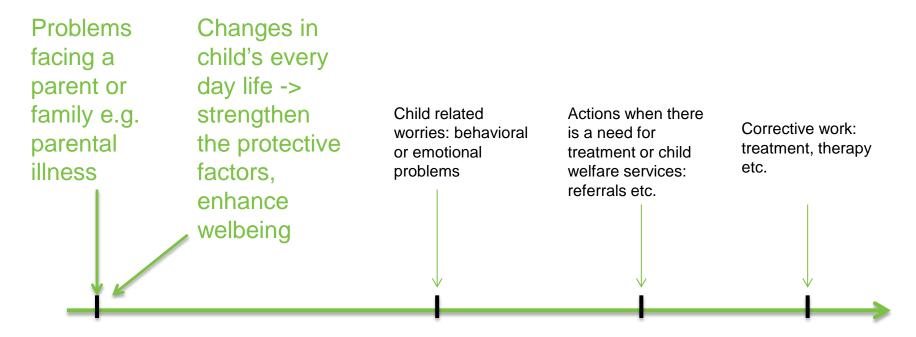


Current symptom/problem oriented services Corrective work: **Actions** treatment, therapy when there is a need for etc. Child related treatment or Changes in worries: e.g. child child's every behavioral or welfare **Problems** day life / emotional services: facing a parent reduction in problems or family e.g. referrals protective parental illness factors etc.



Welfare /resiliency oriented child centered services

Act now don't wait for problems!





Welfare /resiliency oriented child centered services –main concepts



Resilience, Resiliency

- Normal development despite risk factors
- "undestanding the needs of this particular child"
- Interaction between individual and environment (Luthar 2007, Rutter 2010)
- Not an individual's property



Developmental environments

- home, daycare, school, hobbies & friends
- Where child's development happens

- The meaning of everyday life and interaction
- "little things that happen again and again in everyday life"



Protective factors

Protective factors within the family

- Open communication & mutual understanding, parenting
- functional relationships, flexible problem solving

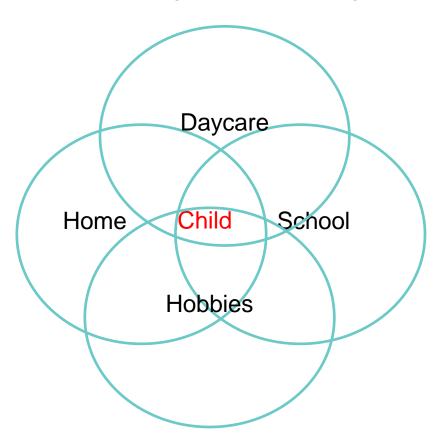
Protective factors outside the family

- play, friends, hobbies
- involvement in day care and school
- active social support system
- adul



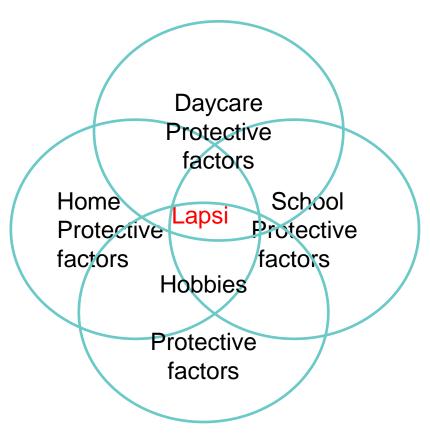
Developmental environments

(Solantaus 2002)



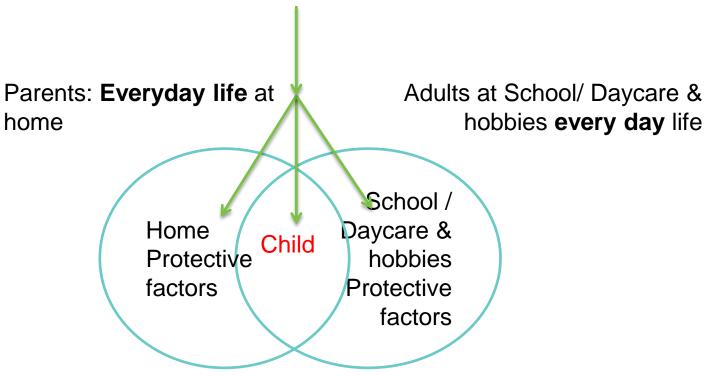


Protective factors of developmental environments





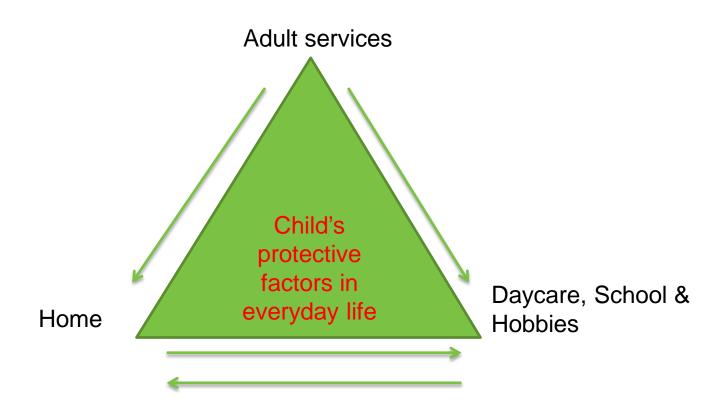
Promotion of child's development in different fields at the same time



Collaboration between developmental environments and

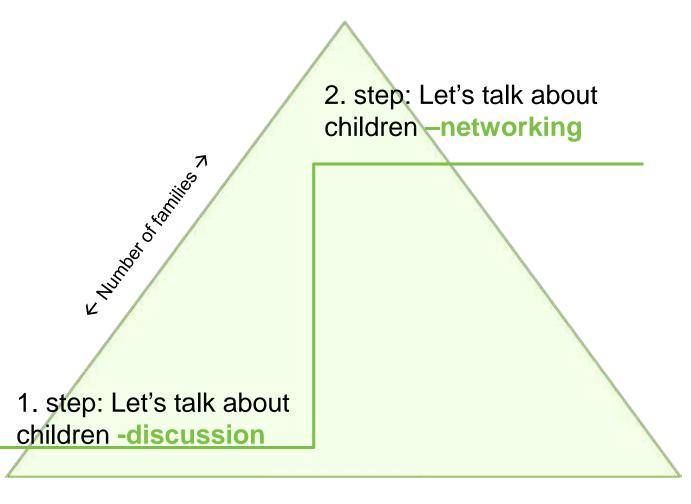
taking care of protective factors in your own field







Let's talk about children – two step method





Let's Talk about Children

- For adult social and health services
- For daycare
- For school



The Let's talk about the children – discussion (Solantaus)

- a child-focused discussion with the parents and at daycare and schools children can participate
- to assess the child's situation and protective factors
- Strengths: things that are going normally in everyday life
- Vulnerability: things that are problems at the moment or they can be problems in the future if we don't do anything
- to provide information on how parents can support their children (strengths and vulnerabilities at home and outside of home)
- to find out the ways how teacher in daycare or at school can support the child (strengths and vulnerabilities in a daycare and at a school)

1or 2, 45-60min sessions, at school 1 x 30 min

manualized



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



Let's talk about children – networking

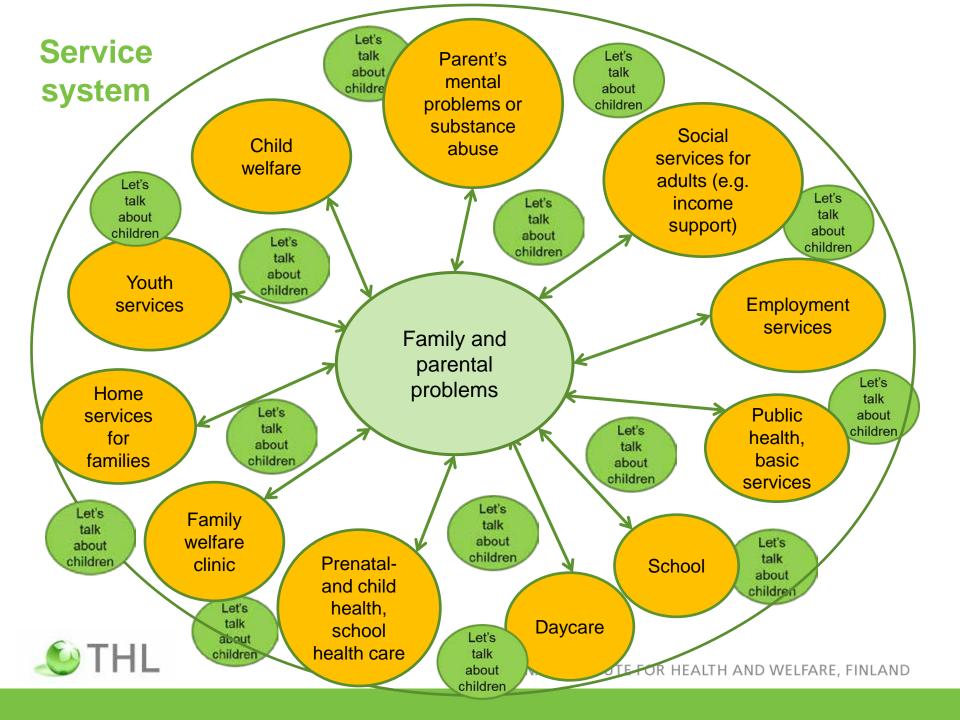
- If there is need for strengthen protective processes in child's life
 - Family's own network
 - Professionals
- Working with everyday strengths not just the things that are worries



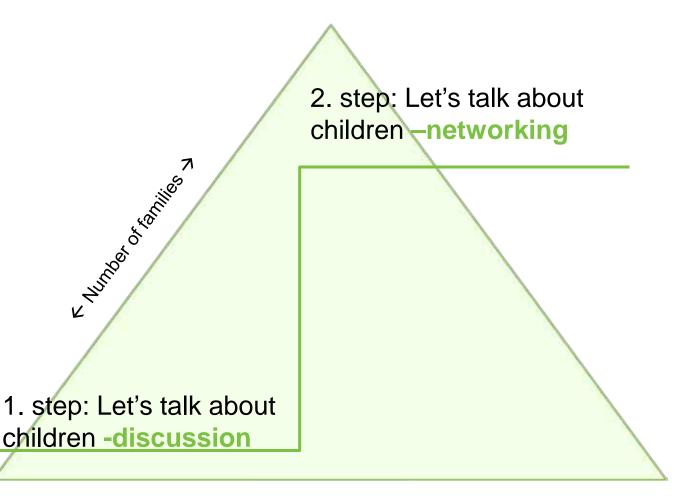
Principles

- Focus on resources (Who and what can be helpful)
- Make a commitment ("I promise to do")
- Concrete action ("What and when I do)
- Target oriented (all participants make a little change in their own field)
- Evaluation (Did I kept what I promised? What did I learn for the future?)





Let's talk about children – two step method





Child centered services in adult services

Treatment and therapy for children using Let's talk networking

More intensive intervention for families who need/want more support e.g. Family Talk Intervention and/or Let's talk networking

Universal intervention for all patients/customers with young children:

e.g. Let's Talk... intervention

All professionals: Do have children? Do you want talk about them?



Infrastructure for child-centered services

1. Strategy

 political decisions to ensure child-centered universal promotive and preventive services for all families

2. Organization

over-sectoral chain of responsibility to fulfill the strategy

3. Professional skills

training programs, (structured) interventions (safe, feasible, effective)

4. Informing municipal residents

support is provided for all families in municipality



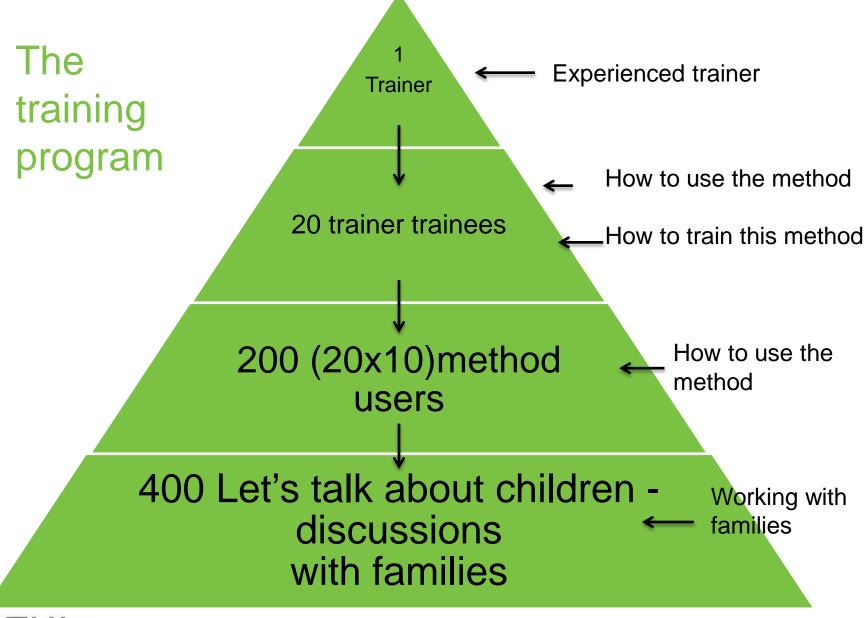
Let's Talk about children -training programs

- Method training:
 - 3 days
 - Working with two families
 - Learn how to use the method



- Trainers training
 - Completed method training
 - 4 days
 - Arrange two training days to other employees
 - Learn how to train the method
 - "Organization with own trainers"

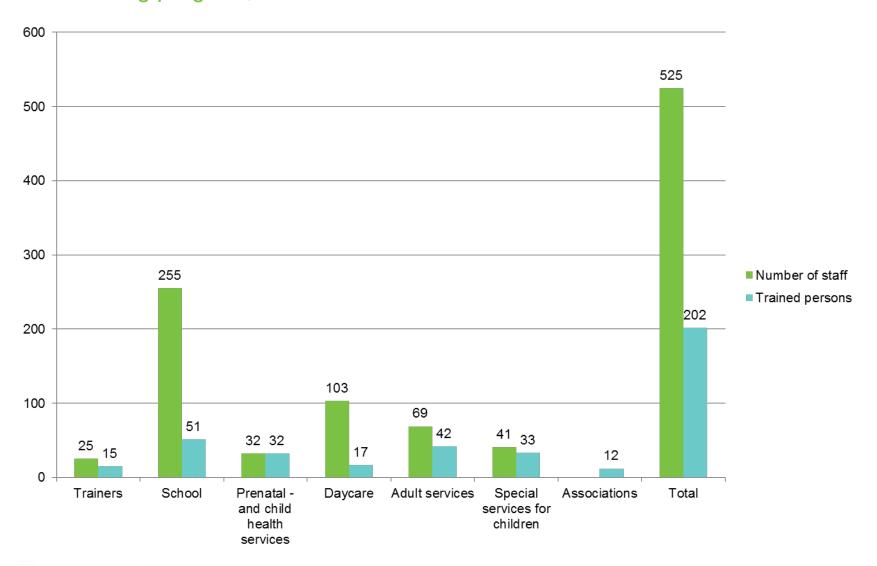






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The training program, situation in Raahe area





Thank you!

