

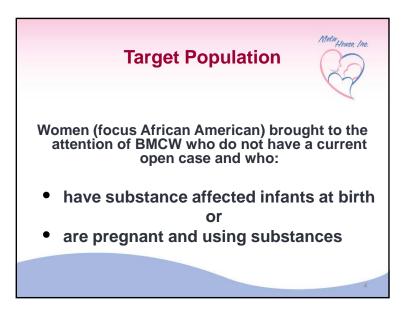


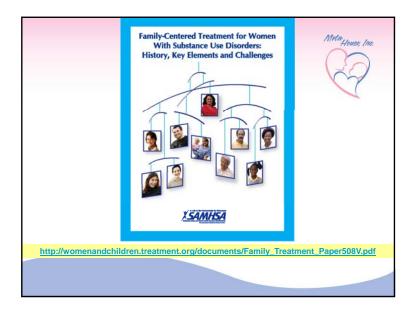
#### Goal

Implement a successful collaboration among DCF/BMCW and Meta House with a shared purpose of preserving the family unit and supporting the safety, permanence, and well-being of children.

Youce In

To meet this goal, we all strive to help the mother get sober!





#### **History**:

The Relational Theory of Emotional Development & the Psychology of Women

• 1976 Jean Baker Miller - Identified women's strong drive for affiliation as being valuable and a strength upon which to build.

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 Women's sense of self organized around making and maintaining affiliations.

#### **Self-In-Relation Theory**

 Self In Relation-- Stresses emotional development through connections

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- Connections fundamental to
   psychological growth and healing
- Healthy connections are growth enhancing
- Psychological problems stem from a disconnection or violation in relationships.

#### **Research on Women**

- The use of substances, the treatment experience and relapse are impacted by relationships, especially with children and significant others.
- For women there is a relationship between improved maternal functioning and their prognosis and the prognosis for the children.

## Women & Children's Programs Outcomes

Significant drops in substance use Improved employability Higher family reunification Improved parenting Less criminality Less psychological distress Longer lengths of stay Less depression Higher self-esteem of mothers Improved scores on measures of parental stress Improved emotional and behavioral functioning for children

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Improved parenting attitudes

#### Principles of Family-Centered Treatment

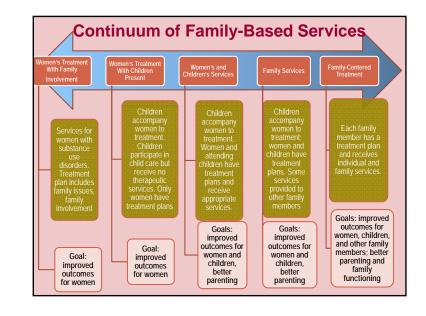
· Family-centered treatment is comprehensive

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- Women define their families
- Treatment is based on the unique needs and resources of individual families
- Families are dynamic, and thus treatment must be dynamic
- Meeting complex family needs requires coordination across systems

#### Principles of Family-Centered Treatment

- Services must be gender responsive and specific and culturally competent
- Family-centered treatment requires an array of staff professionals as well as an environment of mutual respect and shared training
- Safety comes first physical and emotional
- Treatment supports creation of healthy family systems



### Family Treatment Model The Culture



- Problems / Symptoms responses to overwhelming feelings - adaptations to trauma-and other feelings and thoughts.
- Interest is in what happened to that person/family not what is wrong with the person/family

## Family Treatment Model The Culture

- Focus is not a "Tradition of Toughness" with a strict behavioral model -Not a focus on rules, control, consequences
- The client is not seen as the problem when a difficulty occurs
- It's a partnership when there's difficulties it's a team problem

#### **Two Major Components**

- Philosophy
  - -What drives the interpersonal and organizational style that we will have with the women and families we serve?
- Services
  - -What are we going to provide?

### Philosophy

- Acknowledges and understands the female experience and frame of reference
- Recognizes the centrality of relationships in women's lives and their importance in the development of and healing from substance abuse.

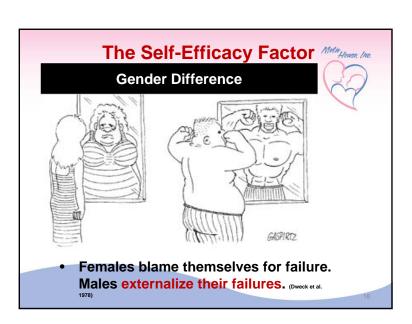
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#### Philosophy



- Recovery needs to revolve around the role that most defines their essence and absorbs their daily lives – being a mother
- Maternal reflective functioning and the enhanced ability to parent fosters a decrease in substance abuse.



#### The Commitment – Complex Nature of the Task

Shift from a focus on the woman as an individual to a focus on her many roles in relationship to others as a mother, family member, employee, community member



life – regardless of what you are being paid to do

#### **Making It Happen**



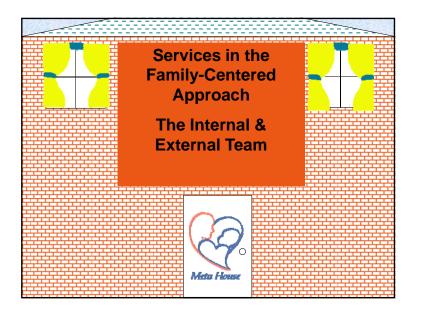
- Family-Centered models require an administrative willingness and capacity.
- Its not just adding additional components and providing staff training – necessary but not sufficient.

#### Making It Happen

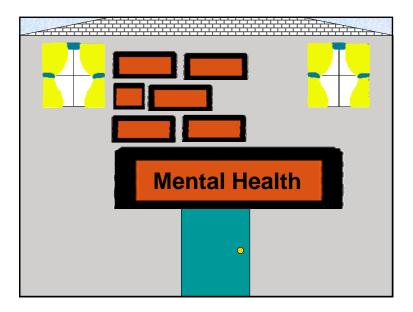
• It involves theoretical, administrative, policy, structural and funding changes.

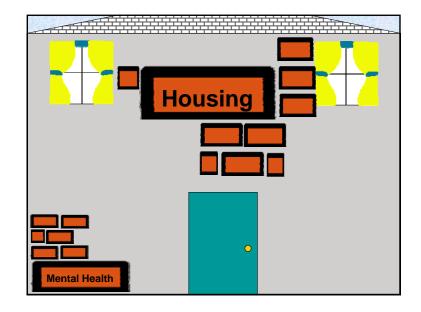
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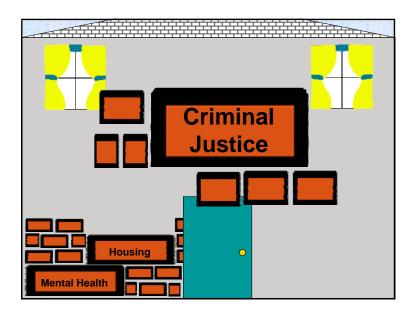
- Agencies become more complex in their policies and procedures, staffing patterns, facilities, equipment, evaluation, and funding sources.
- It involves a multi-disciplinary team of both internal and external staff.
- Requires coordination across systems.

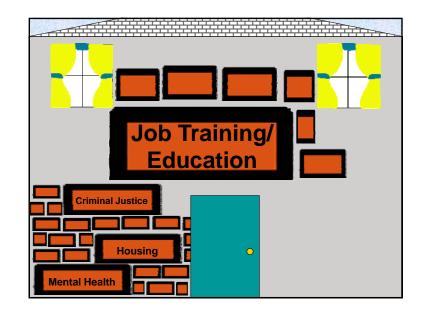


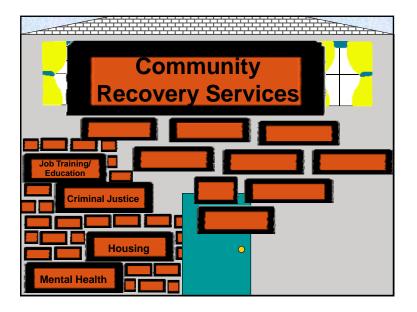


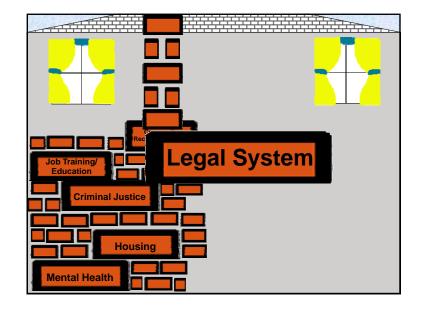


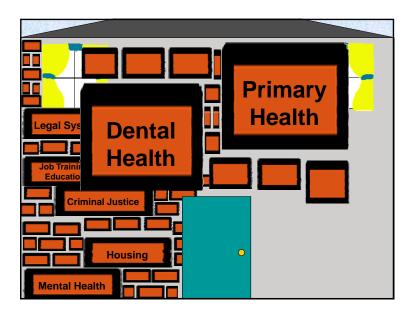


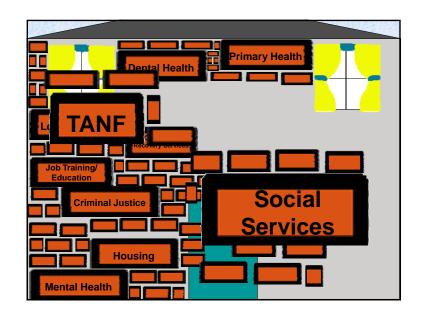


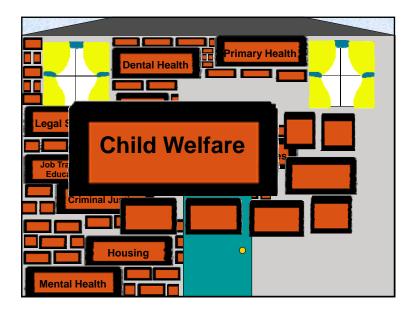


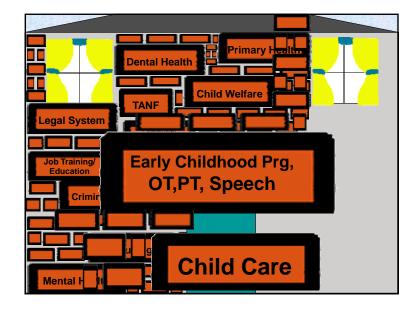


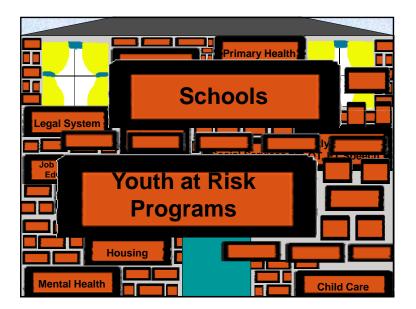


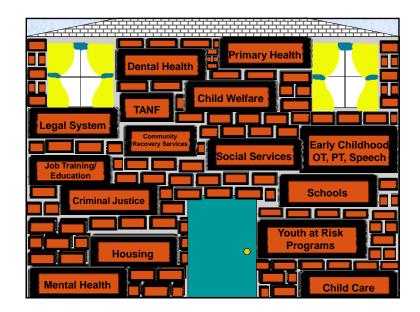


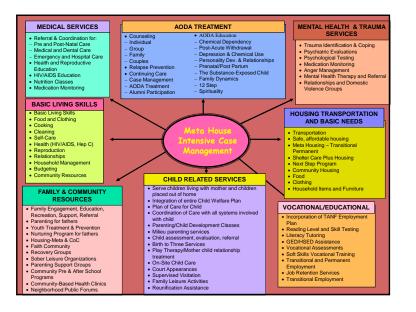














#### Building an Internal Team

- Many disciplines must operate as one
- Must share a common philosophy about the organizational and interpersonal style that is accepted practice for each family

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 Staff that has expertise and primary responsibility for the adults and those that have expertise and primary responsibility for the children - must become aligned

# Building the External Team

Families are likely to be involved in multiple systems

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- Each has their own goals, timelines, language, expectations
- Coordination and communication is vital
- Cross Train
  - It's a win win situation for everyone when the family succeeds in treatment.

