



***Restoring Hope. Reshaping Futures.***

---

# Facilitating Family Engagement Through Peer Support

Chrissie Veerkamp, CPSP, Parent Partner  
Debbie Nass, Parent Partner  
Joanna Dye, Parent Partner

# Introductions

- Who we are
- A glimpse into our story
- Why we do what we do

# Where are we going today?

## LEARNING OBJECTIVES

1. Encourage and build partnership among parents, treatment providers, and community.
2. What having a child in residential treatment looks and feels like through parent lens.
3. A look into the benefits of a peer support system built in that starts before the beginning and goes through the end of residential treatment.

# Where we were and are now

- Why
- We started with an idea and a dream
- Trainings attended
- Developing the position
- Where we want to go



# Why is having a Parent Partner important?

- Statistics have shown that parent involvement makes a huge difference in success.
- A parent may feel better able to trust a peer based on their history with “the system.”
- Understanding the emotions that a parent is feeling helps identify them for the family giving them a word for their feelings.
- Encouraging involvement and walking hand in hand supporting the family helps them engage more.

# Family Involvement

A RESEARCH-BASED STRATEGY FOR SUCCESSFUL OUTCOMES

|                     | NO INVOLVEMENT                             | INVOLVEMENT                          |
|---------------------|--|--------------------------------------|
| COMPLETE TREATMENT  | 8.1 Times higher to not complete treatment | 5.7 times faster (Sunseri, 2001)     |
| LENGTH OF STAY      | 12-18 months                               | 6-9 months (Krech & Hargrave, 2002)  |
| DISCHARGE PLACEMENT | More restrictive                           | Home/ Less restrictive (Stage, 1999) |

# Nexus Mille-Lacs Statistics

## Family Involvement:

- 2021 was 82%
- 2022 it increased to 96%, which is approximately a 14% increase.
- 70% successful discharges (20.7% increase)
- 73% of youth transitioned to less restrictive settings (10% increase)
- 47% of youth transitioned home (10% increase)

**I MAY NOT BE ABLE TO SOLVE  
ALL OF YOUR PROBLEMS, BUT I  
PROMISE YOU WON'T HAVE TO  
FACE THEM ALONE**



# What does it take to be a Parent Partner?



# Qualification

- Lived experience
- Desire to help
- Understanding “the system”
- Ability to find resources
- Compassion and understanding

# What is a Parent Partner?

A peer who can help bridge the gap between the families and the clinicians.

Someone who can explain the clinicians to the parents and the parents to the clinicians

A non-judgmental support for families from before the beginning until after the end.

Someone who can provide possible explanations to perceived behaviors.

A peer who has lived experience and understands the depths of feelings.

A sounding board for families and clinicians.

# TRUST

- The most important thing for us to “earn” from a family is trust
- Trust that we are on their side
- Trust that we have hope for them until they find theirs
- Trust that we believe they are the experts
- Trust that we are NOT judging them

# What does family involvement look like?

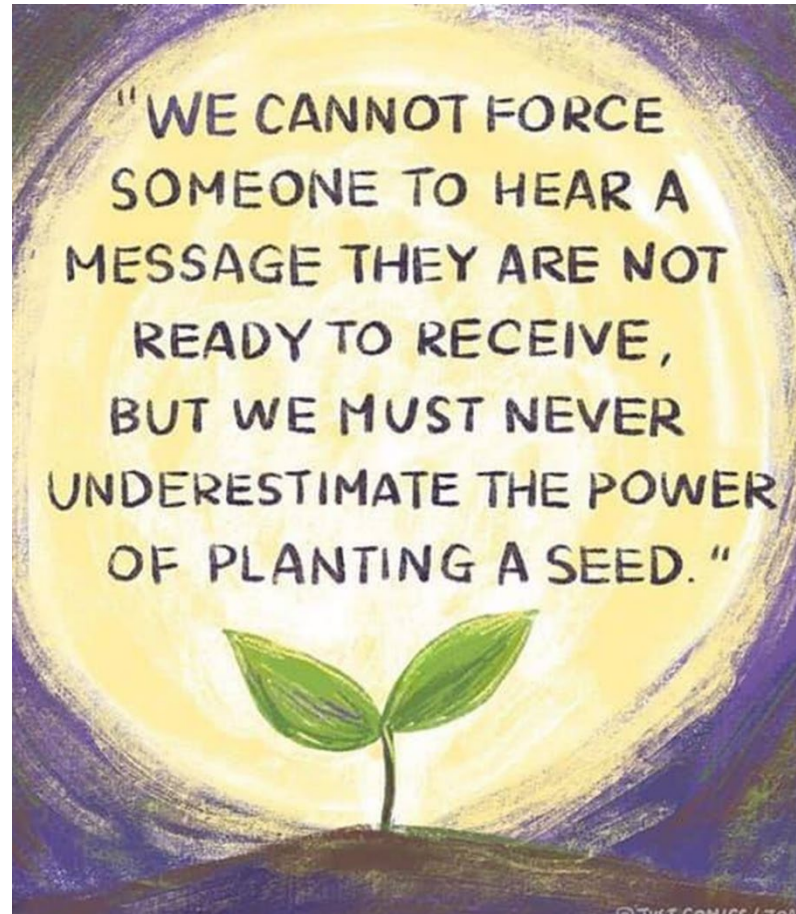
- Decisionmaking
- Complete inclusion throughout treatment
- Unrestricted family time
- Parents are experts of their child
- Not forced at parent's pace
- Actively listening to parents
- Clear and understandable expectations

# Positive Results

- It puts the family at ease because they know what is expected of them and their youth
- It makes the family feel supported, not judged and confused
- Families are more equipped to take their children home
  - More informed
  - More aware of risks
  - Healthier communication
  - More able to advocate
- Helping the entire family system, not just the youth

# Entering the System

WHAT PARENTS ARE EXPERIENCING WHEN THEIR CHILD IS INITIALLY SENT AWAY



To parent a child with a mental health disorder feels like driving in the dark...

..backwards,

..with your hands tied behind your back,

.. and an octopus wrapped around your face!





# By the time a family reaches the system, more times than not they are beaten down with...

## SHAME

*Not only because of the behaviors but they were not able to teach their child better. And now someone else may have been hurt so they have failed several children.*

## GUILT

*The amount of guilt they bear is huge. Why did they let this happen? Why were they not a better parent? Why can't they "fix" their child?*

## BLAME

*Parents are often blamed by friends, family members, county staff, schools, foster parents and residential staff. Think about the perception of a beaten down parent when we are asking them how, when, and where were they*

# Reaching the System

- Parents have asked, even begged for help with their child.
- Accusations of “lack of parenting” may have been tossed around.
- The family has lived in desperation for months even years.
- They are exhausted, broken, and shameful.
- Sometimes it appears they have or are giving up.



**Faith is taking the  
first step even  
when you can't  
see the whole  
staircase.**

# Perceived Resistance

From Defiance to Alliance

# Have you ever given up on a family... or wanted to?



- Perhaps because the parent was not able to stay sober or refused to acknowledge his/her own mental illness?
- Maybe the family was difficult, angry, or demanding.
- Maybe they just didn't show up.



# Perceived Resistance



- When families come to you they are in crisis and they need relief, stabilization, and support.
- Families need you to meet them where they are, validate their experiences and recognize their strengths.
- They need to be able to be hopeful.
- Please don't give up, don't judge and don't label them as 'resistant' or 'manipulative' or 'uncaring.'

# Perceived Resistance

*Def.* When someone interprets another person's actions as resistant without knowing their situation and their motivations for doing what they do.

Don't judge my story  
by the chapter you  
walked in on.

Quotes 'nd Notes

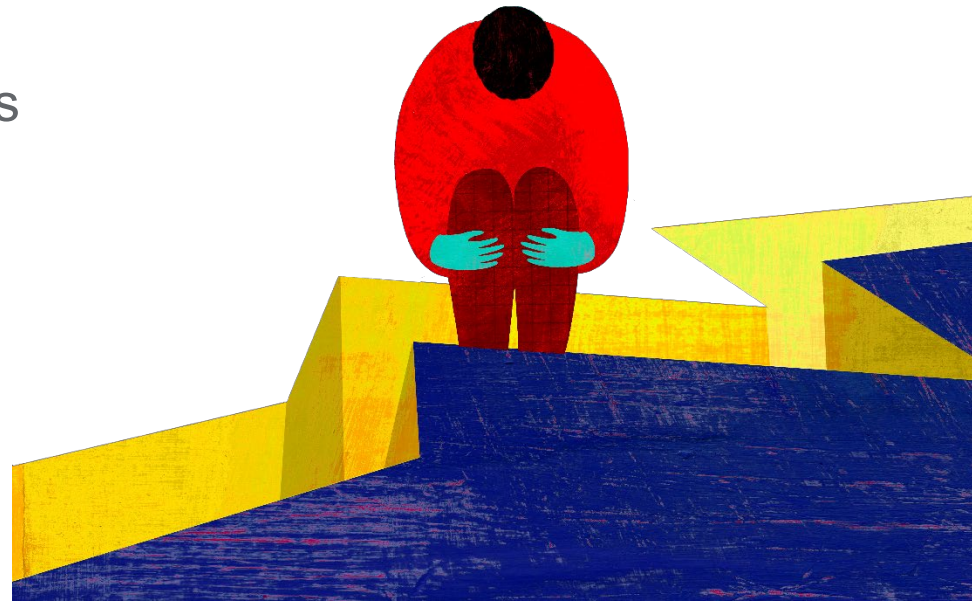
# What may be behind the Perceived Resistance?

- I have been that parent. I was seen only as the parent of the child in treatment, and yet my child in residential was just one aspect of my life.
- What is disguised as 'resistance' was fatigue, I also needed to focus on my other children with special needs while this child was in residential.
- I needed to deal with the trauma, both mine and my other kids, who had to watch me fall apart.
- I needed to keep a job, a roof over our heads, and food on the table. I needed to provide my other children with a new normal.
- I felt as though I was failing miserably at all of these responsibilities and was at the end of my rope.



# What may be behind the Perceived Resistance?

- Please remember that when families are vulnerable it will take extra effort on your part to see through what providers sometimes call 'resistance.'
- It is **not** resistance; it may be sadness and shame and feeling as if they are drowning or being overwhelmed and needing help but not knowing how to ask or find it.



# How do we engage “Resistant” Parents

- Empathizing with them
- Validating their struggle
- Sharing our story
- Earning the trust
- Having the “hard” conversations
- Non-threatening
- Just a peer



# Engaging



- Sometimes being the middle person between the family and the “system”
- Helping organizing thoughts for our families in crisis
- Helping them find their words

# Ambiguous Loss

## UNDERSTANDING PARENTS' GRIEF



Sometimes a parent grieves the loss of a child  
who is still alive.

-unknown

# When a child is sent away, the parents experience a loss...

“Researcher and clinician, Pauline Boss (1999) has called this difficult experience of loss, **ambiguous loss**, as family members are ‘frozen in their grief’ because we lack the social rituals that help comfort people and allow them to mourn the multiple losses they will encounter. Family members experience feelings of denial, anger, guilt, fear, sadness, and despair on their own as they try to cope with the consequences of mental illness and the perceived loss of their child.”

*Ambiguous Loss: Learning to Live with Unresolved Grief*  
Boss, 1999.

# Ambiguous Loss

The loss of something still there.

Can you think of examples?

# A person experiencing ambiguous loss may:

- Have difficulty with transitions or changes
- Have difficulty making decisions; feeling “paralyzed” or overwhelmed when having to make choices about one’s life
- Exhibit learned helplessness or hopelessness
- Have depression and/or anxiety
- Have feelings of guilt



# How to help a parent experiencing ambiguous loss

- Help the parent recognize and understand ambiguous loss. Giving them a name for what they are experiencing helps them not feel alone and crazy
- Reassure them that they are going through a grieving process even though their child has not died
- Remember when events such as holidays, prom, graduation, birthdays and even simple things like sleep overs and going to the mall may trigger grief in parents

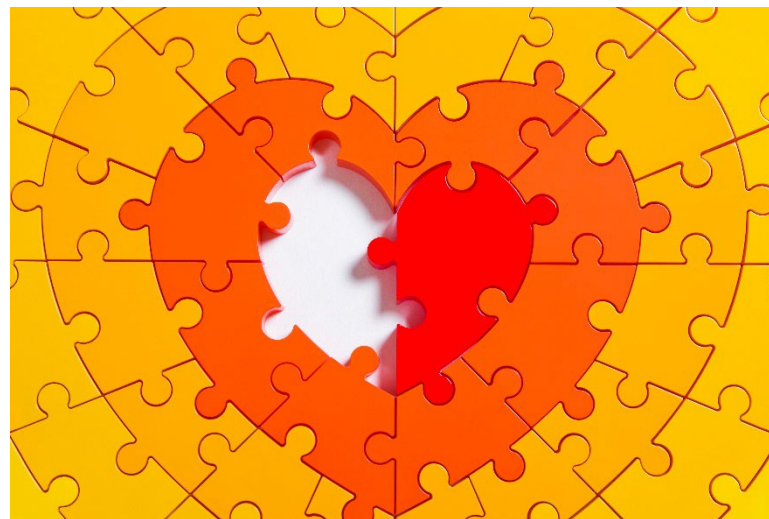


# The System

Everyone in this room has the power to make or break a family.

If you approach this situation with judgement, you will lose the family. They are coming to us in crisis and they are not strong enough to fight this battle **and** fight you.

No parent wakes up one day and thinks “I am going to destroy my child.” Parents do the best they can with what they have and know.



If they are judged, they will give up. They are thinking that they will never be able to live up to your expectations, so they will let someone “better” raise their child, someone who CAN do it correctly.

We need to validate, support, and teach them. Not judge and shame them.

The reality is that the “system” is designed to judge in a sense

Having a parent partner will explain things to the parent from a peer perspective and reassure the family that this is not judging, but information gathering.

A parent will hear things better from a peer because they have survived the system.

- All information gathering/assessments feel like it highlights your parenting flaws.
- Explaining assessments like CANS will help ease that fear
- Making a point to ask and highlight strengths

# How can you involve a Parent Partner?

- When you hire a parent partner you are adding a valuable resource to the team.
- They have a degree in parenting a child during a residential intervention, per say
- They can help bridge the gap between family and the clinicians
- Sometimes explaining the parents to the clinicians and or the clinicians to the parent.
- Helping the parent not only see their worth on the team, but helping them advocate for their child and themselves.

# Before the beginning through after the end



# Before The Beginning

## Parent partners reach out before intake

- Once a youth is identified, Parent Partners are a part of the interview process encouraging families to speak up.

## After an admission date is identified

- Reaching out to families to explain what to expect at the first meeting and answer any before questions.

# Through the Residential Intervention

- Attend all meetings to support and help advocate for them
- Regular contact to help ease fears and answer questions
- Involvement looks different for every family. Let the family lead the way with your guidance.
- Advocating for and teaching how to advocate are vital.
- Having support groups, family days on campus, and providing education



# Through the Residential Intervention

- PROVIDING EDUCATION
- What does this look like
- How is it delivered
- Example of topics

# After The End!

- Following up with families to help with the process. Identifying other resources, explaining “normal” behavior, basic support.
- Checking in at 24HR, 7 days, 4 weeks plus more if needed help ease the families fear of doing this alone
- Doing follow up calls to determine the ongoing needs of families and youth at 3 months, 6 months, and 12 months.

# Review

- Encouraging and building a partnership with the family only benefits the youth and the staff.
- Understanding what a parent may be thinking and on feeling can help engage them in treatment.
- Having a peer walking side by side from before the beginning and until after the end offers insight for staff and hope for families.

# QUESTIONS?

