

Finland: Working towards prevention, promotion and equality for families and children

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Finland is a small country with about 5,2 million inhabitants in Northern Europe. It is one of the Nordic well-fare states with a national health care system including primary and specialized health services. The national health and social legislation states that if a parent uses health or social services, the needs of care and support of the dependent children have to be attended to. This refers to both physical and mental health as well as substance use services. In addition, there is also mandated reporting if child abuse or neglect is suspected.

The Effective Child & Family Programme

The Effective Child & Family Programme (EC&F) was launched in 2001 to help the services to meet the families' and children's needs and full-fill the legislative demand. The EC&F Programme was initiated by STAKES (now the National Institute for Health and Welfare) and the Ministry of Social Affairs and Health under the leadership of Dr. Tytti Solantaus.

The core of the Effective Child & Family Programme is promotion and prevention. It is recognized that every family with parental mental health and substance use issues and severe somatic illness has questions and insecurities concerning parenting and children. It is the responsibility of the services treating the parent to provide the best information available on how parents can themselves support their children and also to help the parents to get additional support when needed. In addition, possible child protection issues and children's needs for psychiatric treatment and other services also need to be identified and responded to with every family.

The EF&F Program has committed to provide health and social services evidence based methods to promote family life, children's well-being and development, and to prevent child problems. To accomplish this, the program has adopted and developed prevention and promotion interventions and carried out research, and continues do so. The Program also ensures implementation and sustainability of the work. It acts together with the services to change the organizational strategy to include also the patients'/clients' children rather than focusing only on the adult, and to make attention to the patients' children into a routine activity when a parent seeks help. The third objective is to build a functional multisectoral service system around the families, and finally, to enhance prevention and promotion knowhow and activity in psychosocial services overall.

The EC&F Programme has now been active for about 10 years. Although there are no nationwide audits carried out, it seems fair to say that attending to the needs of the patients' children is a mainstream activity in mental health services for adults in 2011. Psychiatric clinics and mental health centers have trained

their staff extensively and good practice guidelines expect children and family to be discussed with every patient who has children.

The initial emphasis on mental health services has expanded to primary care, to substance use and physical health services and especially cancer care. The Programme has developed a Family of Methods including interventions focused on the parents, the family and support groups.

The Method Family

All interventions in the EF&F method family are based on the same principles. Respect for all family members and their experiences, mutual understanding and problem solving in the family and the network and focus on strengths and the future are overarching compasses. Our research shows that, indeed, parents' sense of self understanding grows and feelings of guilt and shame decrease and also children report less worries (Solantaus et al 2009). The methods are focused on prevention and promotion, they are short limited and manualized. There is also a training module for each method.

The Family of Methods includes six members and it is growing. The Let's Talk about the Children (1) is two-session discussion with the parent/s about the children. The aim is to help the parents identify the family's and the children's strengths and challenges and find ways to respond to them, and to help the family receive any additional services they need. This intervention is regarded as the minimum to meet the requirements of the Finnish law. It is available on the net for everyone, also for the parents to see and print out.

The Family Talk Intervention (2) by Dr Beardslee and his team involves the whole family in 6-8 sessions. The aim is to open up discussion and problem solving concerning family issues during the intervention process itself. Parents and children get professional support in starting the sensitive discussion on parental mental health and other affiliated problems in the family. Dr. Beardslee supported the training of the first training group in Finland in 2001-3. The Family Talk Intervention is described in more detail in other parts of this web page.

Vertti Support groups for children and parents (3) are also part of the Method Family. This intervention combines peer support and family process for the good of the children and the family. The intervention starts with Let's Talk about the Children –discussion with parents and a family meeting. This is needed to open the discussion about parental problems within the family in order to prepare the family members for the group process, where these issues are openly discussed from the beginning.

The group process itself comprises of ten sessions. The first, the sixth and the last sessions are for parents and children together, otherwise the groups work separately. The parent group discusses experiences of parenting, children's experiences and members and group leaders contribute to problems solving. The child group processes children's experiences and thoughts concerning the family. Discussions, creative activities, and play are used to elicit peer support and sense

of understanding and community among the children. The children also prepare questions for the parents concerning the mental and other family issues on their mind. The parent group receives the questions and discusses possible answers. In the joint 6th session, the children and the parents come together to discuss the children's questions. Parents might also prepare questions for the child group.

There are also support groups for parents (4) in some psychiatric wards. These groups are open for all patients who wish to discuss their children and the family situation with other parents with similar problems.

Many of these families need a range of services. If such a need is identified in the previously mentioned interventions, a Let's Talk Network meeting (5) is recommended to bring the services together for the family. For instance, if a concern about a child's mental health and school behavior arises, the parent is asked what they might think about inviting the teacher and a child specialist from family or child psychiatric services to discuss the child's situation. The parent is also asked to invite any other person who they think could support the child, for instance, a grandparent, a friend's mother etc. The same open and transparent procedure is more and more often used also when child protection services are needed.

There are also guide books (6) for parents and children. They can be used by families themselves, but often professionals use them as a basis for discussions with their patient.

The work is expanding to primary services. The general practitioners have a short time for each patient, and brief guidelines and handouts (7) are being prepared for both the practitioner and the parent. The Method Family grows with expansion of the work.

Research

Research on the Let's Talk about the Children and the Family Talk Intervention has shown that both interventions are safe and feasible in the Finnish family and service culture. The interventions do not increase parents' sense of stigma or worsen their mental health problems: quite on the contrary. Both parents and children report enhanced sense of well being after their interventions. Compared to the baseline, parents also report less emotional symptoms in children in the follow-up, especially in the Family Intervention group. In both groups, there was also a significant reduction of symptoms of anxiety, marginally so in hyperactivity and a significant increase in prosocial behavior. (Solantaus et al 2009, 2010)

Building infrastructure for multisectoral services

The Effective Child & Family Programme entered its second phase in 2010. We strengthened our activities to build multisectoral service system in community based services. This includes writing up of appropriate municipal strategies and policies, creating an infrastructure for multisectoral service system with leadership and budget, and training methods to work with families. The aim is to support families and prevent children's problems in families with mental and

physical health and substance use issues, unemployment, poverty and criminality.

We have had good experiences of the commitment of municipalities and how primary health, mental health and substance use services, the kindergarten and school, social services with family counseling and child protection, family income benefit services and unemployment services can all come together to discuss how families will get preventive services for their children regardless of the services they first turn to.

Literature about the programme (this is mostly in English, but there are plus there are many articles in Finnish – would you want those?)

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