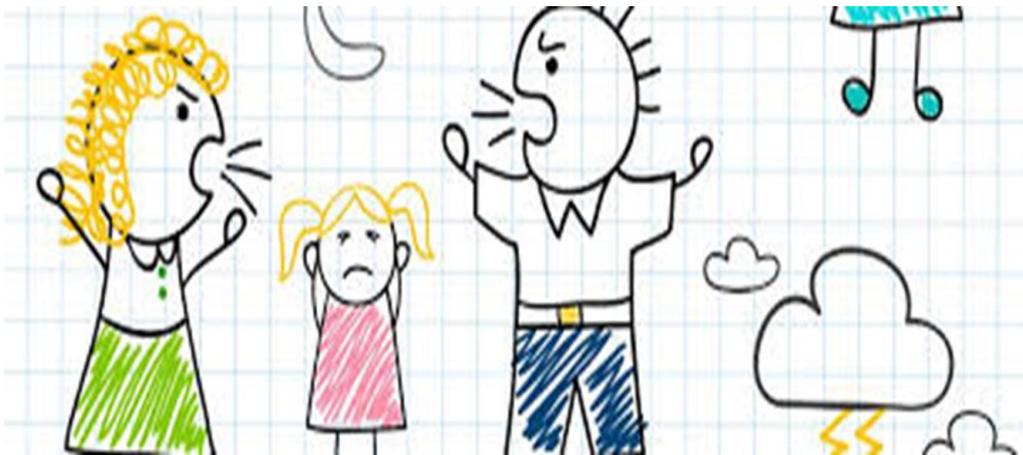


Care and treatment for families with multiple problems: messages from Europe



EUPHA

October 17

9:00-10:30

Milan, Italy



Organized by the EUPHA sections on Child and Adolescent Public Health

Rationale

Parents and children of so called 'multiproblem families' (MPFs) often experience difficulties in various areas of life like substance abuse, participation, parenting problems and psychosocial problems. Therefore, it is of great importance to provide care and treatment to MPFs focusing on these various areas of life to address these problems and make them more manageable on the shorter , but also on the longer term. Which types of care and treatment seem to work for these families? And why do these types of care work? What are (potentially) effective elements of interventions for MPFs?

The aim of this workshop is to pay attention to the various types research on care and treatment for MPFs, focusing on:

- Early childhood networks: Presenting the strategy and implementation of early child networks in Austria. These networks seem to play an important role in providing support to families facing different and mostly multiple burden/needs.
- A modular prevention program: Presenting the results of the development and evaluation of a modular group program for 8- to 12-year-old children from substance-abusing families substance-specific group interventions for children from substance-abusing families. It seems to lead to more positive effects than substance-unspecific work.
- What works for multiproblem families (MPFs): Presenting a systematic overview of the literature concerning evidence of the effectiveness of interventions used for MPFs.
- The evaluation of an organizational model: Presenting the design of an evaluation study on the effectiveness of an organizational model to support MPFs in the Netherlands.

The topics discussed within this workshop complement each other, which makes it possible to exchange knowledge between researchers, practitioners, policy makers and educationalists of various countries concerning the support for MPFs. In addition, we could learn from each other when it comes to optimizing the care for these families in various areas of life. The participants will be asked to actively take part in the discussions of the four presentations.

Main messages:

For improving the care offered to MPFs it is important to combine the knowledge gathered within different countries.

Program

09:00 -09:05

Opening of the workshop

Chair

Daniëlle Jansen, the Netherlands
EUPHA section on Child and Adolescent Public Health

09:05-09:25

Early Childhood Networks – Strategy and implementation in Austria

Marion Weigl - Gesundheit Österreich, Vienna, Austria



Sufficient evidence on the effectiveness of early childhood interventions/networks and the influence of social determinants on health is available and shows the potential of such interventions/networks to improve health and to reduce health inequity - not only in young age but also throughout the life course. Early childhood networks play an important role in addressing systematically and providing support to families with pregnant women or young children facing different and mostly multiple burdens/needs. In order to prepare and support the implementation in Austria, in 2011 to 2014 a research project was carried out with a whole range of activities and methods, i.e.: assessment of availability and structure of early childhood interventions and networks in all nine Austrian provinces (online survey, interviews, focus groups, stakeholder workshops), analysis of existing scientific evidence as well as experience from practice with early childhood networks, agenda setting and knowledge transfer in order to raise awareness and knowledge among stakeholders (different sectors and professions) on federal and provincial level.

The assessment showed that a lot of interventions for early years are available but mostly not systematically targeting resp. supporting families in need. In addition, cooperation and networking between different services is lacking. The research project resulted in the elaboration of a model for early childhood interventions in Austria as well a guideline for implementation. These activities led to a broad commitment to early childhood networks throughout Austria, across different professions and sectors, as well as the inclusion of this topic in several policy documents and strategies. From

2015 on, early childhood networks will be build up resp. extended in all nine Austrian provinces supported by a national centre for early childhood interventions.

Main messages

Early childhood interventions/networks can improve especially the life circumstances of socially disadvantaged families/mothers and as a consequence contribute to the health of their children.

To initiate and ensure a systematic implementation of early childhood interventions/networks a wide range of activities is needed, including raising awareness and providing practical support.

09:25-09:45

Project Trampoline – Design and Evaluation of a Modular Prevention Program for Children from Substance-Abusing Families

Michael Klein - German Institute for Addiction and Prevention Studies, Catholic University of Applied Sciences, Cologne, Germany



Children from substance-abusing families face a high risk for developing psychological or substance related disorders in adolescence or early adulthood. However, few prevention programs aimed at reducing psychological stress for these children exist in Germany, and, to date, none have undergone scientific evaluation. The aim of our project is to bridge this gap by developing and evaluating a modular group program for 8- to 12-year-old children from substance-abusing families. The program is tailored to their specific needs and resources. It consists of 9 modules and an integrated parent module.

The multicenter study with a pre-post-follow-up design was carried out at 27 out-patient counseling centers across Germany delivering the manualized intervention to groups of children. A prospective, randomized-controlled trial of the intervention was conducted. In total, N = 218 children with at least one drug or alcohol abusing parent were recruited. They were divided into two groups in order to compare a) an intervention group (Trampoline) with b) a substance-unspecific play group (control). Standardized measures were used for both participating children and parents in order to report on sociodemographic data, current parental substance use, stress level and coping strategies, family relationship quality, self-worth, self-efficacy and satisfaction with the intervention.

Both groups benefitted from this project in various areas. However, the Trampoline-group profited more than the control group with regard to substance-related concepts such as knowledge about alcohol and drugs and psychological strain related to the parent's addiction.

Trampoline improves substance-related knowledge and reduces psychological strain in affected children sustainably and may therefore be considered as an effective, evidence-based, standardized group intervention for the high-risk group of children from substance-abusing families.

Main messages

Substance-specific group interventions for children from substance-abusing families lead to more positive effects than substance-unspecific work.

09:45-10:05

What works for Multiproblem families? Availability of evidence-based interventions in the Netherlands.

Daniëlle Jansen - University Medical Centre, Groningen, The Netherlands and EUPHA section on child and adolescent public health



Multiproblem Families (MPFs) experience severe problems in multiple areas of life, such as psychosocial problems, parenting problems and socio-economic deprivations. Whereas care and treatment is highly needed for these families, there is little known about the effectiveness of interventions for MPFs. Therefore, the aim of this study was to conduct a systematic review on the effectiveness of interventions for MPFs in the Netherlands.

The Database Effective Interventions (DEI) of the Netherlands Youth Institute was used as a starting point for the systematic review. In the database, interventions are included aimed at the prevention and/or treatment of problems in child development. There are 28 interventions targeted on MPFs included in the DEI; all these interventions are at least theoretically grounded. Subsequently, a systematic review was conducted on studies with a randomized controlled trial, pre-posttest or quasi-experimental design published between 2005-2015. We used the databases PsychInfo, SocIndex, Medline, Eric, PiCarta and Web of Science. The search terms were related to the names of the interventions included in the DEI (i.e. Families First, Triple P or Signs of Safety).

In total, 320 studies were identified for further assessment. The initial sort (based on reading titles and abstracts) resulted in 18 studies. After reading full-texts, 8 studies

were included in the study which were related to 5 interventions of the DEI. The results of the review show that there is little evidence available concerning the effectiveness of interventions for MPFs. During this workshop we will discuss the ideas for further assessment of these potentially effective interventions. How should we proceed in future research?

Main message

The results show that there are no evidence-based interventions in the Netherlands, or at least they have not been examined in studies. Because of the complex and long-term problems MPF's deal with, it is important to have effective interventions.

10:05-10:25

Evaluation of an organizational model to support multiproblem families in the Netherlands – effects on (social) participation and family functioning

Els Evenboer – Department of Health Sciences, University Medical Centre Groningen, Groningen



Multiproblem families (MPFs) provide a huge public health challenge because of socio-economic deprivation, psychosocial problems, parenting problems, domestic violence and rule-breaking behaviours. Therefore, there is a strong need for evidence-based approaches to successfully manage the difficulties of MPFs in various areas of life. The aim of the study is to evaluate the effectiveness of an organizational model to support MPFs in the Netherlands on the (social) participation, self-reliance and quality of life of MPFs. The model is based on the Flexible Assertive Community Treatment (FACT) and the outcomes of a literature study concerning effective elements of interventions for MPFs. We assess the effectiveness of this model using a cluster-randomized stepped-wedge design, comparing FACT with Care As Usual (CAU) among 200 MPFs in six municipalities. Primary outcomes are (social) participation and family functioning. Secondary outcomes are psychosocial problems, care use, health literacy, self-reliance, quality of life and the satisfaction with the organizational model. In this workshop attention will be paid to the contents of the organizational model. FACT is a well-defined service delivery model for care and treatment of the most severely mentally ill people (SMI) in the community.

In this study the FACT method will be evaluated regarding its effectiveness for coordinating multidisciplinary care and treatment for MPFs within the Netherlands.

During this study we focus on factors that hamper or promote the usability of the organizational model in daily practice of care to MPFs. In addition, we will collect data on potentially effective components of the model. Results concerning the effectiveness of the working method are not available yet, because the data collection started just recently.

Main Message

It is important to evaluate the effectiveness of an organizational model for support of MPFs regarding (social) participation, self-reliance and quality of life of MPFs. In this way, more knowledge will be obtained on what works for multiproblem families.

10:25-10:30

Closing of the workshop