

# **Richmond**

# **Supporting Families**

# **Program**

## **Guide for**

## **Parent Group Leaders**



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## Table of Contents

<b>Guide for Parent Group Leaders .....</b>	<b>3</b>
Week One: Foundations .....	5
<i>Handouts</i> .....	5
<i>Supplies</i> .....	5
Week Two: Stress Workshop for Parents .....	6
<i>Handouts</i> .....	6
<i>Supplies</i> .....	7
Week Three: Attachment Based Parenting .....	8
<i>Handouts</i> .....	8
Week Four: Talking about MHSU with your kids .....	9
<i>Handouts</i> .....	10
Week Five: Developing a Care Plan .....	11
<i>Handouts</i> .....	12
Week Six: How to talk to others in the child's life .....	12
<i>Handouts</i> .....	13
Week Seven: Genetics and Mental Health/Addictions.....	14
<i>Handouts</i> .....	15
<i>Supplies</i> .....	15
Week Eight: Closing and Further Resources .....	15
<i>Handouts</i> .....	16
<i>Supplies</i> .....	16

# Guide for Parent Group Leaders

## Parent Group Overview:

This group sometimes takes place simultaneously with Resilient Kids (RK) (i.e., while the kids are in RK the parents are next door doing their own group). However this group has also been held as a stand-alone group (later in the evening, with dinner and childminding) and any parent/caregiver is welcome, regardless if they are parenting a child attending RK/RYY. When the Parent group has run alongside the RK, opportunities have been provided at the middle and end of the groups for the both the parents and kids to come together. In the middle it has been an opportunity for the kids to talk to their parents about what they have learned about emotions, and at the end it has been a chance at a wrap up celebration.

The parents who attend the psycho-education group are a mixture of parents experiencing MHSU issues themselves and /or parents /caregivers who do not identify as having MHSU, but who are parenting a child affected by a parent with MHSU (i.e., the partner has MHSU, or they are a grandparent parenting their child's child). Thus group leaders need to be mindful of the unique dynamics that can present in the group. In addition to coming to group to learn about and improve parenting capacity, parents will bring with them unresolved emotional challenges around having MHSU and/or taking on parenting responsibilities for a child of a family member who has MHSU.

Two things have consistently happened in Parent Group that group leaders need to plan for. There can be great variation in participant's interpretation of the content, ability to stay with the broader group discussion, and learning styles. Thus group leaders should be prepared to present material in various formats, using multiple examples and always check in and solicit feedback around if all members understand what is being discussed. Also at times group leaders might need to be fairly assertive in helping all group members remain with the topic/theme discussed. Secondly, at some point during the sessions, participants who would not identify as having MHSU, may express frustration or disappointment towards the parent in the child's life that does have MHSU. Although unintentional this can be challenging and hurtful toward the participants who identify as having MHSU. Group leaders need to be able to address this either during or after group. This can be a very good learning opportunity for participants.

## Structure of Parent Group sessions:

If running simultaneously with the RK group, there is a brief 5 minute period for the kids to separate from the parent and settle into group with the other kids and group leaders. If running as a stand-alone group in the evening, a meal is provided and parents, kids, group leaders and childminders share about a half hour meal together, and then the parents and group leaders separate into another room to do group, while childminders and kids engage in activities.

Each session starts with an Ice Breaker, getting to know each other activity. We use the Quirky Kids cards, that ask participants to tell us about... the longest you ever swam, the coldest you ever felt, the bravest you ever were, the farthest you ever ran etc., or we use "If" questions: if you could only eat one meal ever again, what would it be? If you could have dinner with any famous person, who would it be? If you could live anywhere in the world, where would it be? Etc.

Each session ends with a relaxation, stress reduction, mindfulness activity. These may be breathing exercises, guided imagery exercises, or body awareness (tensing/relaxing muscles). We try to provide activities that parents can go home and do with their children, such as blowing into a balloon, or blowing bubbles or Breathe and Smile (you can do this on your own, or facing another person: take a deep breathe in, at the top of the breathe, smile and hold the breathe for as long as possible. Exhale, blowing out all of the air, and at the bottom of the breath, smile and hold that for as long as possible, before breathing in again – repeat).

The handouts provided as an addendum to this document are used to guide the conversation and topic of each session. You will note that there are multiple handouts for each week. Group Leaders should select the ones will make the most sense for the dynamics/make up of each group. Parents have identified wanting concrete tips and reminders to be able to take home. Be open to allowing conversation to happen and encourage parents to share with each other. If you don't get to all of the handouts or material, parents take them home, and we touch base around the content at the next session.

Group leaders should be aware of other events, groups, activities happening in the community that may be of interest and support to parents and bring flyers or referrals to group as they come up. Also bringing and having something at each group for parents/participants to fidget/play with can be helpful for some to remain grounded in group and support engagement in group. We have used pipe cleaners, paper clips, bead, squeezing toys.

### *Weekly Group Outline of Themes*

Week	Theme
One	Foundations
Two	Stress Workshop for Parents
Three	Attachment based Parenting
Four	Talking about MHSU with your kids
Five	Developing a Care Plan
Six	How to talk to other's in the child's life (school professionals)
Seven	Genetics and Mental Health/Addictions
Eight	Closing and further resources

## **Week One: Foundations**

- Introductions (brief overview) – Ice Breaker
- Review the Parent Group “Welcome Package” and make sure forms are signed
- Confidentiality, who are the group leaders in SF (our program – Super Groups, Family Fun Night)
- Group Norms – quick brainstorm (we provide basics, open up to discussion if something needs to be added)
- What we talk about with kids in SF/ living with MH&A (foster resilience: – also what one of our kids said at the end of RK/RY: resiliency defined by one of the SF youth: “the strength to move forward even if you can’t see what is coming”
- Golden Rules for Families with Mental Health and/or Substance Use Issues
- Questions to Ponder and Self-Assessment Tool – briefly discussed and for parents to take home and think about for next group
- What do they want to know or get out of group?
- Closing stress reduction/mindfulness activity (usually Breathe and Smile)

### **Handouts**

1. Welcome Package (provided in a folder to take home)
  - a. Welcome Letter
  - b. Confidentiality Form – to be signed
  - c. Supporting Families Brochure
2. Golden Rules for Families with Mental Health and Substance Use Issues
3. Questions to Ponder as a Parent
4. Parent Self-Assessment Tool

### **Supplies**

- File folders for handouts
- Flip Chart Paper and Markers
- Sign in Sheet and pens
- Family Fun Night Poster and/or other community family events of interest
- Handouts

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## Week Two: Stress Workshop for Parents

- Ice Breaker and Check In
- Parenting Myths – discuss handout
- Parent Self-Assessment Tool (Strength and Goals Worksheet), and questions to Ponder review from last week to lead into managing stress
- Intro to Stress – **and a mindfulness activity** : Draw body – where do you feel stress: Body Scan
- Coping/Resilience - Healthy Mind Platter – handout/discussion
- What is Resilience hand out discussion
- Scale metaphor - how do you acknowledge/validate child's needs and how do you balance that with your needs and how do you explain that to your child – feelings that come with beginning to resent giving up and how do you deal with that feeling (when child is young put your own needs aside, then need to start to create more balance for yourself as they age)
- Daily Parenting Stressors handout/discussion
- Looking After Yourself Emotionally and Physically Handout
  - Recreation
  - Sleep
  - Nutrition
  - structure and routine
  - boundaries
- Balloon scenario; while one facilitator talks about stresses that come in a day, the other blows into the balloon to demonstrate how stress builds up and then at the end let go of the balloon to fly around the room, representing the parent/child melt down. Blow up the balloon again, this time talk about ways to reduce stress, while slowly letting the air out of the balloon (advise that this is also used with the kids in RK both to explain stress and to learn a breathing exercise)
- Closing stress reduction/mindfulness activity (use the Balloons for breathing – send home with parents)

### Handouts

1. Stigma - Myths about Parenting
2. Daily Parenting Challenges
3. What is Resilience?

4. Healthy Mind Platter
5. Looking after yourself emotionally and physically
6. Relaxation Resources

## Supplies

- Flip Chart Paper – to draw body
- Balloons and some to send home

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### **Week Three: Attachment Based Parenting**

- Ice Breaker and Check In
- Characteristics of a Healthy Family
- Attachment and Parenting: What does your child need from you, understanding what their child is trying to get from them (Roots of Attachment Diagram)
- Cultivating Family Rituals
- Discipline (Cheat Sheet and How to Respond to Misbehaviour):
  - 7 Principles of Natural Discipline
  - Don't take away from them or isolate
  - Positive reinforcement; often the child won't learn from mistakes, give them ideas for what will work for them
  - Provide scripting for parents
  - Collect Before You Direct: Eye contact – collecting your child
- Reinforce sleep, nutrition, recreation, balance – do things with child, be present with child
- Watch for "young carer behaviour/Alpha": making meals, taking too much responsibility: It's okay to tell the child, this is for me to worry about not you
- Closing stress reduction/mindfulness activity

### **Handouts**

1. Attachment and Parenting
2. Characteristics of a Healthy Family
3. Roots of Attachment Diagram
4. Five Ways to Cultivate Family Rituals
5. Seven Principles of Natural Discipline
6. How to respond to Misbehaviour
7. Discipline Cheat Sheet

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### **Week Four: Talking about MHSU with your kids**

- Ice Breaker and Check In
- Review of last week's concepts (was a lot to take in, may want to review handouts again)
- Parenting with Mental Illness (Child resiliency): key concept of giving the child the information and language they need to have a joint/family understanding of MHSU. This session is giving tools about how to talk about MHSU, it does not mean you need to go home and sit down and discuss
  - Uses examples and ideas from COPMI and COMIC (Australia resources from Children of Parents with Mental Illness program; <http://www.copmi.net.au/>): Adult children of PMIA what they wished others told them

#### Tips for Talking about Mental Health and Substance Use

- Age appropriate language for Developmental Age of Child: Matching the information you give to the question
- Scripting for parent: Ideas to encourage conversation:
  - Name it to tame it – giving language to emotion
  - It's OK to go say "I didn't know how to explain, but can now"
  - Ask them why they think their parent acts differently
  - Use tv/media if a show references a parent with a disability
  - Post Office – description
  - Remote Control/TV description
- Overall Concepts for children:
  - It is not their fault
  - They did not cause it
  - Their Parent's didn't cause it
  - They can't catch it: Genetics and Environment – ADAPT Clinic
  - Their emotions are normal – they should not feel bad if sometimes they are angry with their parent

- Many people have problems, all problems can be discussed and most problems can be managed or solved – HOPE
- Love for the child is not changed because of the illness
- Be a good role model – how you and other adults behave will influence children more than anything you tell them – how you feel and respond to the MIA is how the child will respond:
  - If you feel guilty or someone is to blame the child will Help Children learn effective verbal and behavioural responses
- If appropriate practice what child could say to others:
  - Explain that even though MIA is common, many people still do not understand it and that it is an illness
  - “My dad does that because he is sick, I wouldn’t make fun of your dad if he was sick, please don’t make fun of mine”
  - “If you understood what was wrong, I don’t think you would say that. He has an illness that makes him do that and he is taking medicine and trying to get better. It’s really hard for me so please don’t tease me about it”
- Psychological Vitamins Handout – as something they can do with their Kids when talking about MHSU
- Closing stress reduction/mindfulness activity

## **Handouts**

1. Parenting with Mental Illness: Child Resilience and Parenting
2. Tips for Talking about Mental Health
3. Psychological Vitamins

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### **Week Five: Developing a Care Plan**

- Ice Breaker and Check In
- Safety plan or Family Continuity Plan (handout for individual plans):
  - Try to do when you are well or your partner is well – at a time when you are all managing well
  - Identify your supports and resources:
  - Identify supports for child – ie. Go to a neighbour, speak to other adults about concerns (school, aunt/uncle), establish community connections for the child
  - Make sure the child is aware and participates in the plan
  - What does someone need to know about your child to help/care for them: favourite things to eat, bed time routines etc., games to play etc.
  - Going to hospital, going to treatment – planning for separation
- What's the plan if the child has sporadic contact with the affected parent – non custodial parent – for when the child sees that caregiver/parent
  - Legal custody issues
  - Focus on what the child's needs are – keep the child at the centre
  - Make sure the child has a safety for when they are with the other parent
  - Have a code word phrase "can you bring me ice cream"
  - Report concerns
  - Work with MCFD as a resource for Help
  - Parenting if Depressed, Feeling Triggered, feeling anxious: Symptom focussed to capture mental health and addiction: ie hard to get out of bed, not as present for child
  - Focus on basic needs – plan to meet those needs with child together: it's o.k. to have toast for dinner – just like if you have a flu/cold, sometimes you limit what can be done
  - Use your self care plan
  - Reach out to other adults for support

- Know that your anxiety will increase the child's anxiety

Reference Ulysses agreement – more formal with a Mental Health provider, templates are available, SF can work with your MHSU provider and yourself to develop

- Closing stress reduction/mindfulness activity

## **Handouts**

1. Making a Crisis Action Plan
2. Ulysses Agreement (<http://www.bcss.org/wp-content/uploads/Ulysses-Agreement-blank-adult.pdf>)

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## **Week Six: How to talk to others in the child's life**

- Ice Breaker and Check In
- Prepare for the conversation:
  - Be proactive and preventative: have the conversation before the issue comes up
  - It is helpful to have planned out conversations in advance
  - Write out questions/concerns in advance
  - Bring a friend or family member to provide support to you
  - Filling out forms – can keep a copy of the form information
  - Issue of consent, how can you communicate that you don't want to repeat your story
    - let professionals know you don't want to repeat your story, they can provide the information for you
- What doctors need to know/hear
  - Doctors are human too! They don't know everything and need your help
  - What is the language professionals use – what does it mean
  - Ask what the intended outcome of the treatment is
  - Ask how we will know if the outcome is being achieved: keep a notebook/record
  - Ask the doctor's help for ideas around how to explain to the child

- Know how to explain about side-effects etc. (ie. Diabetic children get a lot of education around their medication and food intake)
- What to say neighbours etc., other family members
  - Think about setting boundaries – let others know what is helpful and what isn't helpful (ie. It can be helpful for others to be able to identify when you are not doing well and ask how to support, it may not be helpful for them to come over and do things or tell you how to do things differently)
  - Let them know what you have told the children about mental illness/addiction in the family, so they can use the same language and it is not a secret
- MCFD (Ministry of Child and Family Development – Child Welfare office) – using MCFD as a support/what is available and how to get support, instead of viewing only as child protection.
  - ie. Child care subsidy, Respite Care, referral to Community resources doing Family work
- School
  - IEP (individual education plan) – you might need to make sure the new teacher in the new school year is aware of it – think about setting meetings at the beginning of the school year
  - Transition to junior/high school – connecting in advance of programs that are available
  - Role of the school counsellor – you can pave the way for the child to meet with them about a variety of issues – make them a source of support
  - Independence: What does your child need to be doing on their own and what do you need to do. What conversations should the child be having and with whom and what conversations should you be having – how do you help them have those conversations (ie. With friends, with teachers.)
- Closing stress reduction/mindfulness activity

## **Handouts**

1. Tips for Talking to Others about MHSU
2. Tips for Being your Child's Advocate at School

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### **Week Seven: Genetics and Mental Health/Addictions**

- Ice Breaker and Check In
- Jar model – no one inherits mental illness or substance use , you can only inherit a vulnerability to mental illness or substance use – how your genes then interact with your environment and other external influences leads to MHSU
  - Give everyone a Jar and wrapped chocolates. Have them separate the chocolate into the two colours, and add the first colour to the Jar to represent their genetic vulnerability to MHSU (ie. having a family member with MH) – advise that we all have genes/markers for MHSU so each Jar should have chocolate in it, if you have a family member with MHSU it may mean you have more, or more strongly implicated markers for MHSU
  - Then have them add in the other coloured chocolates to represent external or environmental factors (stressors: moving, loss of family members/pets, poor nutrition, substance use, work/school anxiety etc.), until their Jar is overflowing – that is the point when you have an episode of MHSU
  - However, resiliency and protective factors can ameliorate some of the stressor/risk factors, such as a buffering adult to speak with about worries, exercise, good nutrition, mindfulness activities, friends, community activities, pets etc. Have them remove coloured chocolates representing external risk factors as they are identifying the protective factors (it is okay and encouraged to eat the chocolates as they are removed)
- Holding something for a minute is fine, but if you hold for a long time you can't keep holding one, overtime things build up – cumulative effect of stress
- Understanding the Effects of Adverse Childhood Experiences (ACEs) handout
  - Review – discuss how common ACEs are (3/4 have at least one, 1-8 (4 or 5 kids in each classroom in BC) have four or more, which is the level of chronic/toxic stress implicated in Chronic diseases
  - However, we can influence the outcome by building in the Protective Factors

- Worried about your child's mental health, consider resources, Child and Youth Mental Health, your GP and in BC the ADAPT Clinic for Genetic Counselling at BC Women's and Children's Hospital (free to anyone in BC)

Closing stress reduction/mindfulness activity

### **Handouts**

1. Understanding ACEs
2. ADAPT Clinic referral form
3. Resilience/ACEs handout

### **Supplies**

- Jars

Wrapped Candy/Chocolate in two different colours (Lindt Truffles or Hershey Kisses are a good choice), or different coloured marbles etc.

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### **Week Eight: Closing and Further Resources**

- Ice Breaker and Check In
- Review all the previous week's and content, and answer any questions, or areas they would like to know more about.
- Provide list of supports available in Community and Provincially (CAP, CYMH, Connect Parent, Mindful Parenting – through Public Health, child subsidies, parent subsidies)
- Free/Cheap Recreation throughout the Community (<http://www.yoyomama.ca/> - helpful website of ideas of free/cheap things for families in BC)
- Remind again about how to navigate Resources
- Complete Parent Group Evaluation

- Have posters for Family Fun Night – upcoming groups/events
- If you can get free passes or gift cards in your community have them to handout
- Closing stress reduction/mindfulness activity

## Handouts

1. Parent Group Evaluation Checklist
2. Parent Group Evaluation Conversation Questions
3. Reading List for Children Affected by Mental Illness
4. Community Resource List (community specific – to be developed by each community)

## Supplies

- Have a resource list to hand out
- Have Recreation passes and gift certificates to hand out