

CaFI

Culturally-adapted
Family Intervention

African Caribbean service users & families

Mixed Focus Group
Tuesday 4th March 2014Dawn Edge – Lead Researcher
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CaFI Study Aim

To develop a culturally appropriate family therapy (Culturally-adapted Family Intervention - CaFI) for African Caribbean people with schizophrenia and their families.

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Current Family Intervention

1. Service User Assessment
2. Family Assessment
3. Psycho-education
4. Stress Management & Coping Responses
5. Problem Solving & Planning for Positive Change



Service User Assessment

Level of functioning

- How the illness affects service user's ability to function (day-to-day living)
- Ability to do everyday things like:
 - Getting out of the house/flat
 - Being around people
 - Shopping, cleaning
 - Personal hygiene
 - Managing money
 - Decision making
 - Make plans
- How spend time – meaningful activity, work, volunteering
- Vision and purpose – hope for the future
- Sleep pattern disturbed
- Diet and exercise
- Social functioning – isolation/loneliness/withdrawal

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Service User Assessment

Current and past episodes of illness.

- Problems at school
- Bullying, harassment
- Racism (as trigger for illness): AC living in white society
- Service Users' coping strategies – helpful and unhelpful
- Spirituality and belief systems
- Impact of symptoms and what makes them better/worse
- Fear
- Body image – weight loss and gain
- Mood swings
- Wellbeing and wellbeing
- Previous experiences of services – helpful & unhelpful
- Previous treatment and interventions – what worked/didn't
- Medication – side effects

Service User Assessment

Strengths

- Future hope
- Aspirations – linked to recovery process
- Spirituality and beliefs: Prayer/church
- Relationships and Friendships: stability, warm, trust, confidence
- Hobbies and activities e.g. art/computer, exercise
- Nutrition 'mood and food'
- Self-esteem and self-belief
- Social skills – ability to mix with people and make new friends/relationships
- Studies & work- service user experiences to benefit recovery

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Service User Assessment

Relationships

- How important are your relationships with your family and other people to you?
- Which are your most relationships?
 - Who do you go to for help and support? Who looks out for you?
- How does your illness affect your relationship with your family and other people who are important to you?
- Shame & stigma – family and community
- Tension in family: Blame, criticism, accusations
- Fear – family, professionals, community
 - Increase isolation
- How service user thinks family see/treat them
 - e.g. fear, think less capable, not to be trusted e.g. childcare, changed/‘like another person’, Mad/violent
- Service user as carer (children, siblings, parents)
- Intimate relationships – Libido
- Relations with people outside the family:
 - Problems at church/in community ; Maintaining friendships/relationships over time

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Family Assessment

- Previous experience of services – helpful and unhelpful
- Choice – how do they want to be worked with?
- Hopes and aspirations

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Psycho-education

- Stigma (normalising symptoms/illness to reduce)
- Spirituality and belief systems
- Different perspectives/approaches/models of illness
- How mental health ‘system’ works
- Rights of families e.g. visits, legal representation, carer assessment, financial support/benefits
- Medication: how it affects the brain, side effects, physical effects, anxiety
- Illicit drugs e.g. Cannabis use: use as self-medication, challenge stereotype
- Roles of health professionals psychiatrists vs. psychologists, SW, can be fearful
- Police involvement: lack of mental health training, differences between UK & Caribbean
- Challenging stereotypes: Black man is aggressive and violent
- Language and terminology e.g. CTO – Community Treatment Order, ‘sectioning’,
- Other treatment approaches e.g. alternative treatments, psychological therapies, hearing voices movement

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Psycho-education

- **What do you think are important issues to consider when presenting this information?**
- Different formats – more visual, TED Talks, Patient Voices
- Sending information prior to meetings → preparation, empowerment

Alternatives to term ‘psycho-education’:

- Psychological education
- Shared learning
- Information sharing
- Mental (ill) health awareness

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Stress Management & Coping

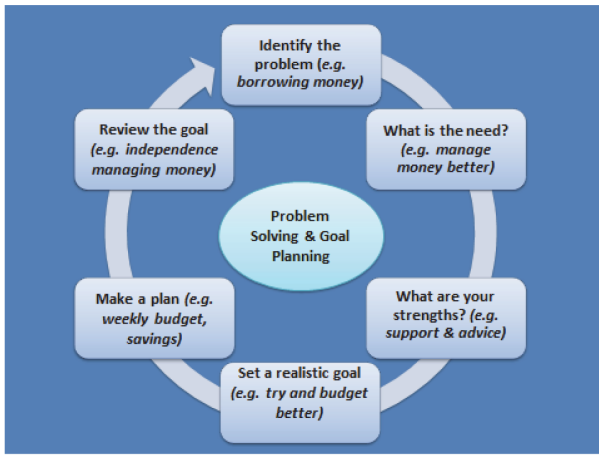
- Conflict in sectioning relatives
- Acknowledging role as carer and carer burden
- Carer rights and responsibilities
- Positive ways of coping – turning negative to positive
- Resources available e.g. ‘dialogue with voices’
- Boundary setting – responsibilities/roles in managing illness → reducing dependence
- Realistic expectations
- Two-way support

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Problem solving & goal planning

- People generally thought this was a good approach.
- Liked breaking goals into small, achievable steps i.e. a process.
- Contingency plans: Being explicit about what happens if someone becomes ill/goals not achieved
- Negotiated rewards for achieving goals – celebrating success
- Some people thought diagram unhelpful (suggests going round and round). What do you think?

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Please contact us....

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