



ENGAGING HEARTS & MINDS

Strong Families for a Strong Community – Fulfilling the Last Mile

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Supporting Multi-Stressed Families – What They Need and What Social Services Can Do

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Multi-problem or Multi-stressed or Multi-ability families?

- How do we conceptualise families which exist in a context where they face substantial challenges?
 - Should we focus on
 - the many problems they face?
 - their inadequate resources to deal with the stressors?
 - how they have been resilient/ resourceful in the face of many adversities?
 - How do we, while trying to destigmatize these families, also address real issues?
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Assessing Multi-stressed families

- Child factors
- Parent factors
- Child-rearing factors
- Family functioning factors
- Contextual factors
- Social network factors



Child factors

- Psychiatric problems (e.g depression, obsessive compulsive disorder)
- Developmental problems (e.g. autism spectrum disorder)
- Learning needs (e.g dyslexia)
- Behavioural problems (e.g aggression, defiance)
- Addictions (e.g. gaming, internet, substance abuse)
- Health problems (e.g childhood asthma)
- Victim or witness of abuse or domestic violence
- Problems at school (e.g truancy)



Parent factors

- Psychiatric problems (e.g. depression, schizophrenia)
 - Behaviour problems (e.g. aggression, criminal behaviour)
 - Addiction (e.g. substance abuse, gambling)
 - Poorer cognitive skills resulting in a low educational level and a lack of knowledge
 - Handicaps (mental and physical)
 - Health problems
 - Poor coping skills
 - Unrealistic expectations of parenthood
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Child-rearing factors

- Inadequate or inconsistent child-rearing skills
 - Difficulty in establishing or over-exerting authority
 - Lack of skills to set boundaries control
 - Low positive parenting and harsh parenting
 - Insecure attachment
 - Parents might be a victim or perpetrator of domestic violence, abuse, and/or neglect
 - Unrealistic expectation of child (e.g expectations of special needs child may not square with child's capabilities)
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Family functioning factors

- Disturbances in functioning of family as a system (e.g marital problems, family conflict)
 - Difficulties in communication (e.g higher maternal communication; low verbal fluency)
 - Family members disengaged or enmeshed
 - Low resilience
 - Feelings of learned helplessness and powerlessness
 - Limited organization or structure in daily routines
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Contextual factors

- Poor housing conditions (e.g. lack of hygiene, space, minimal privacy, neighbourhood unpredictabilities)
 - Poor nutrition
 - Financial problems (e.g., debts, loans)
 - Low-income work with little job security
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Social network factors

- Disturbed or absent social network resulting in family being socially isolated
 - Broader kin relations weak and conflictual
 - Family has an aversion/ misgivings against the community, perhaps resulting in conflicts
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Why multi-stressed families are so challenged?

- Multiplicity – family has to cope with several problems simultaneously
- Varying – problems are in different domains of life
- Complex – problems are interwoven and mutually modifying
- Chronic – problems are protracted and succeed one another
- Persistence – problems difficult to intervene with; agencies often give up



Consequences to children growing up in multi-stressed families

- While we should not be deterministic (and accept that people can be resilient), research does indicate the higher probability that children in these circumstances
 - Have poorer social mobility prospects (i.e fewer opportunities in life)
 - Are less likely to fend off the consequences of negative life events
 - More likely to transmit family pathologies to successive generations
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Multi-stressed families are also multi-treated families

- Why are multi-stressed families sometimes non-compliant to treatment?

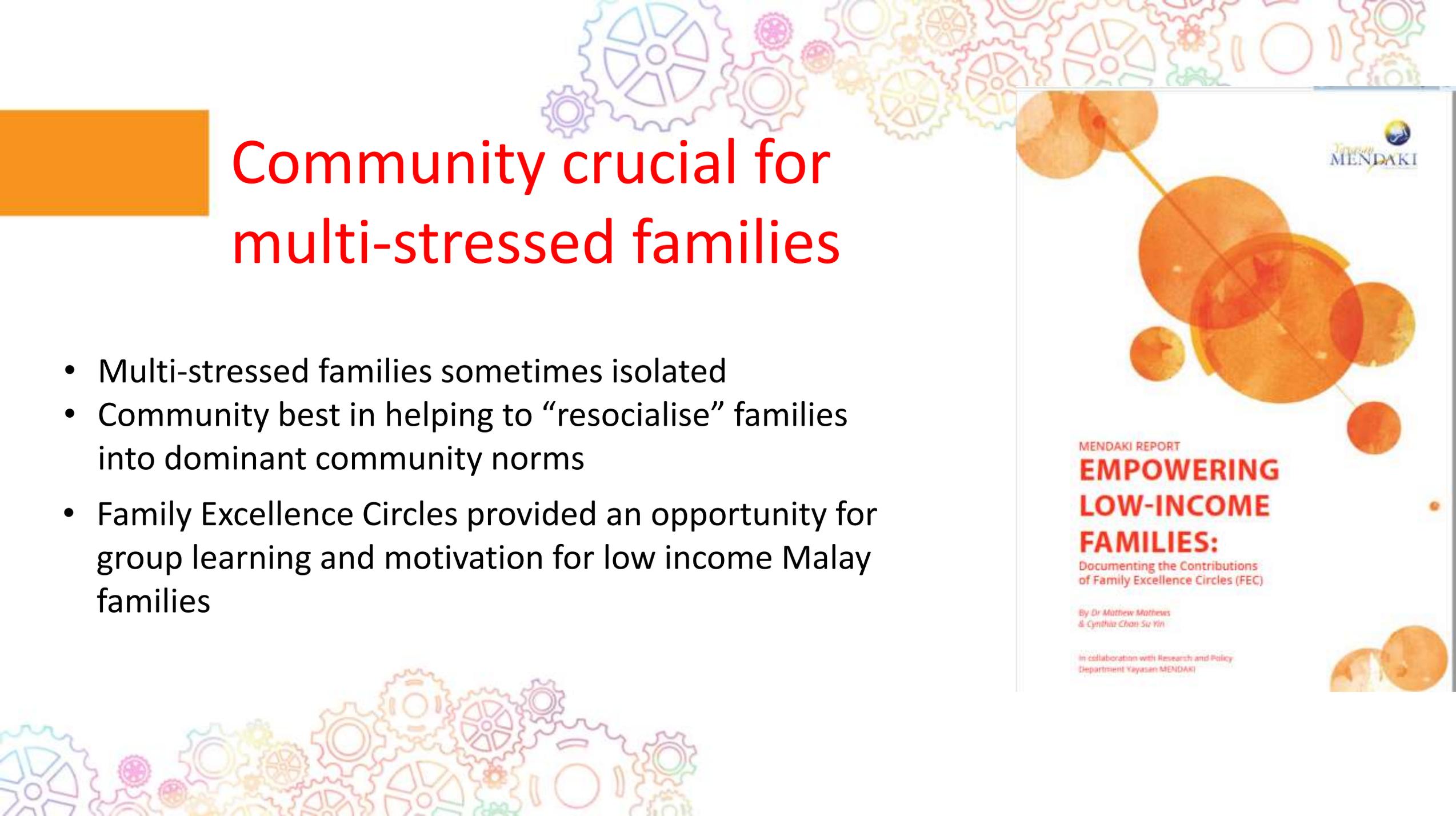
Perhaps we should ask:

- How does it feel like being forced into treatment?
 - How about being treated by many different agencies/professionals?
 - What about if the expectations between agencies are different and they cannot coordinate well?
 - What if agencies/professionals goals are different from those of the family?
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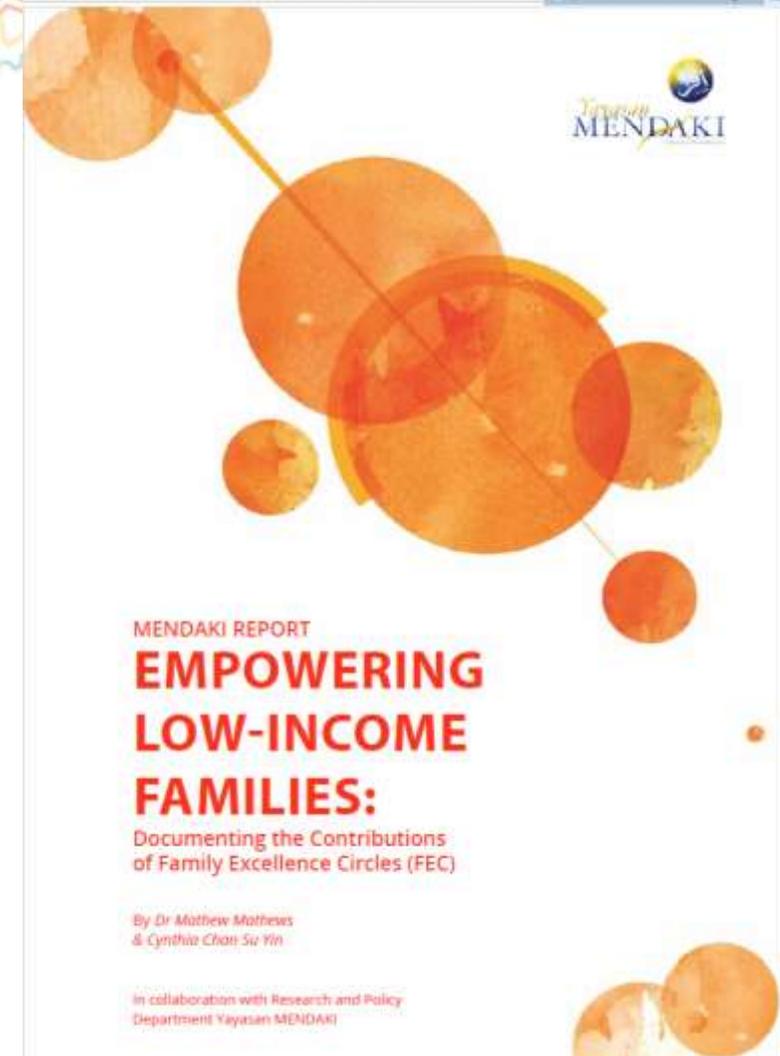
What multi-stressed families need?

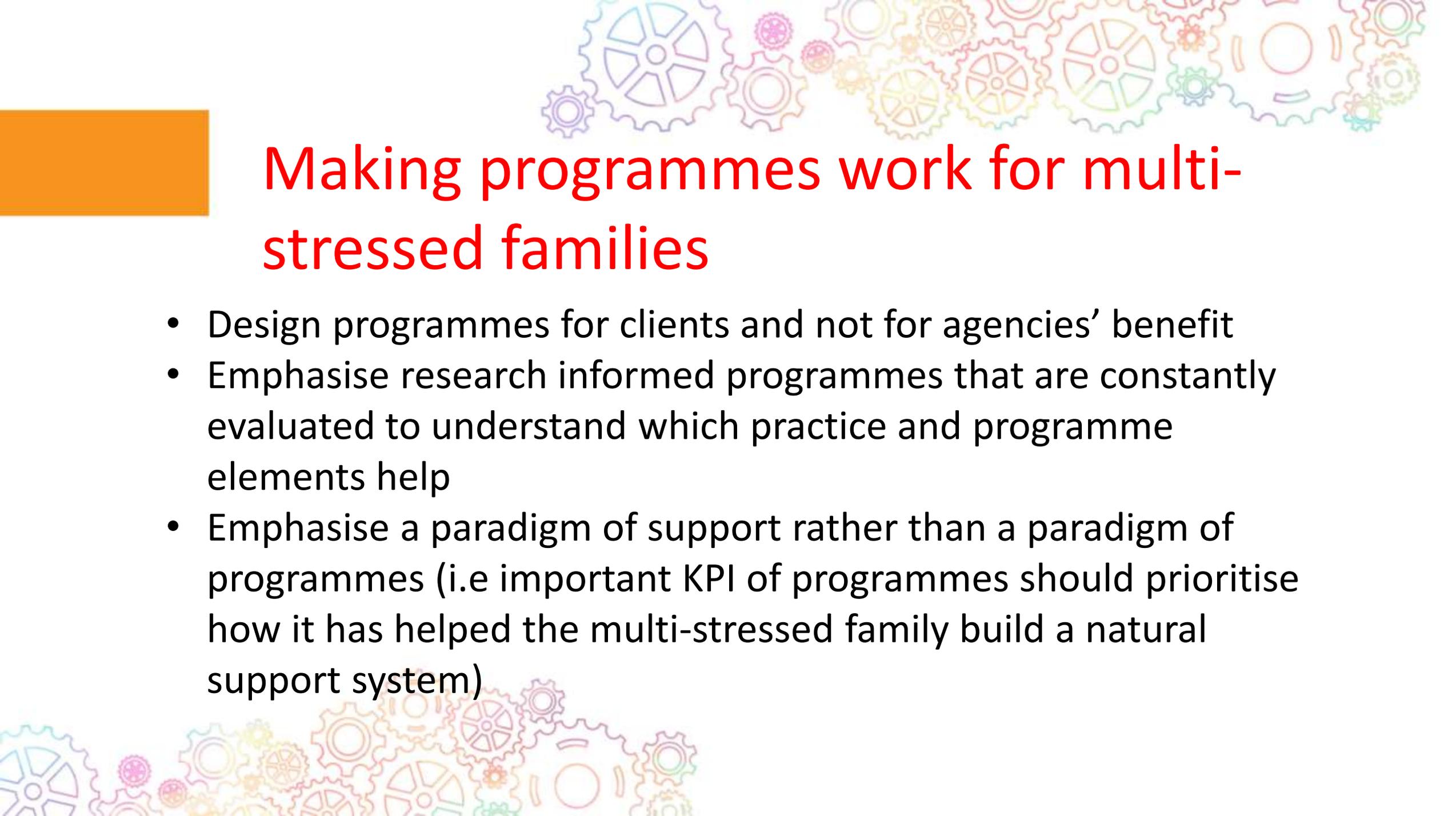
- Community and professionals who can empathize with the plight of multi-stressed families but do not relegate their condition as “fated”/ impossible to change
 - Space and empowerment to become co-creators of their welfare
 - Re-ignition of their hopes/ aspirations and encouragement to develop achievable, meaningful goals
 - Multi-disciplinary resource teams that help families transfer skills they have acquired into their context/ natural communities
 - Supportive natural support systems/ community
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Community crucial for multi-stressed families

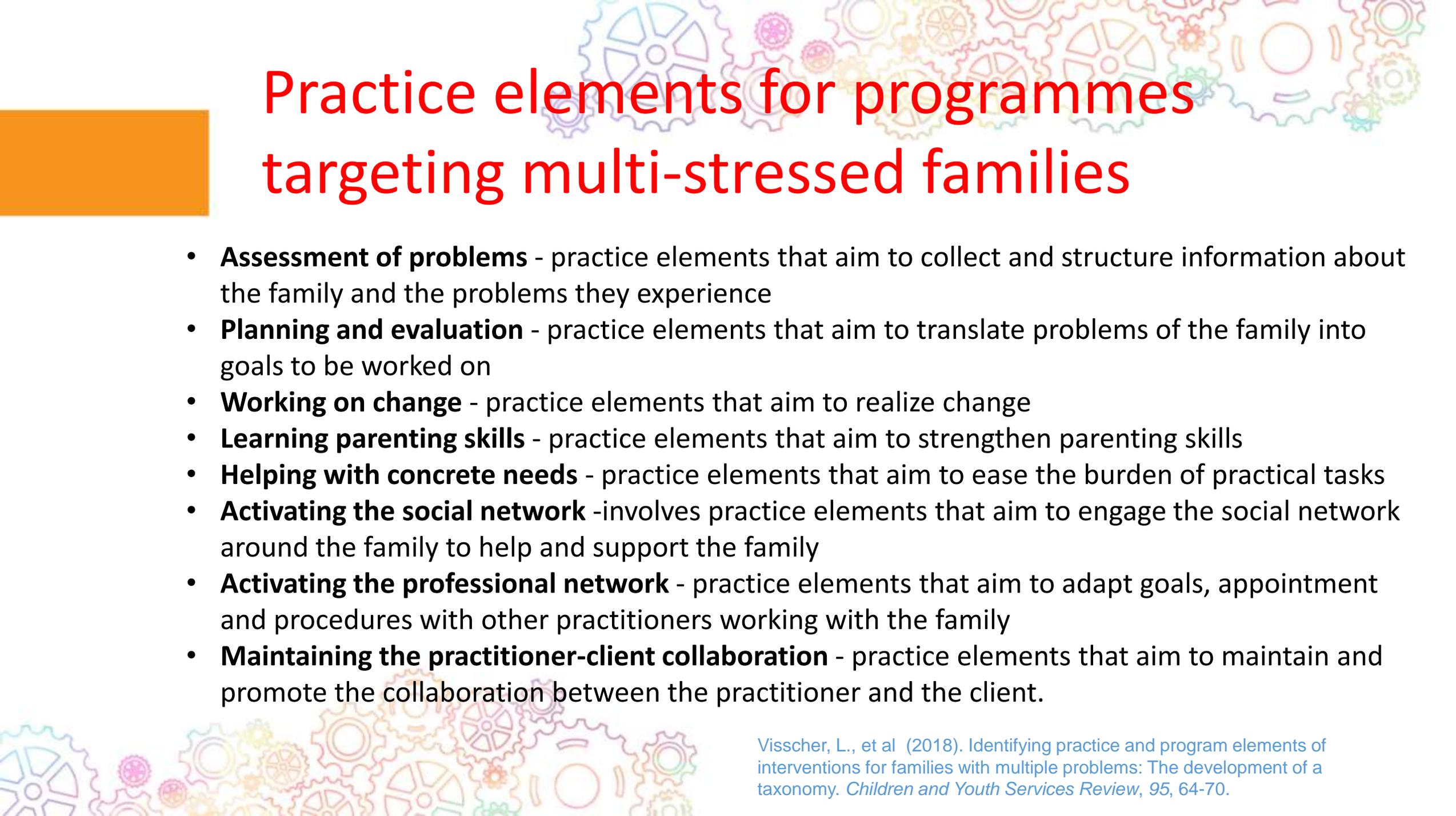
- Multi-stressed families sometimes isolated
- Community best in helping to “resocialise” families into dominant community norms
- Family Excellence Circles provided an opportunity for group learning and motivation for low income Malay families





Making programmes work for multi-stressed families

- Design programmes for clients and not for agencies' benefit
- Emphasise research informed programmes that are constantly evaluated to understand which practice and programme elements help
- Emphasise a paradigm of support rather than a paradigm of programmes (i.e important KPI of programmes should prioritise how it has helped the multi-stressed family build a natural support system)



Practice elements for programmes targeting multi-stressed families

- **Assessment of problems** - practice elements that aim to collect and structure information about the family and the problems they experience
- **Planning and evaluation** - practice elements that aim to translate problems of the family into goals to be worked on
- **Working on change** - practice elements that aim to realize change
- **Learning parenting skills** - practice elements that aim to strengthen parenting skills
- **Helping with concrete needs** - practice elements that aim to ease the burden of practical tasks
- **Activating the social network** - involves practice elements that aim to engage the social network around the family to help and support the family
- **Activating the professional network** - practice elements that aim to adapt goals, appointment and procedures with other practitioners working with the family
- **Maintaining the practitioner-client collaboration** - practice elements that aim to maintain and promote the collaboration between the practitioner and the client.



Programme elements

- Duration
- Intensity
- Supervision
- Consultation
- 24hour reachability



Visscher, L., et al (2018). Identifying practice and program elements of interventions for families with multiple problems: The development of a taxonomy. *Children and Youth Services Review*, 95, 64-70.