

Presentation to ATMCH  
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# Family-Centered MCH Education at the BU School of Public Health

# The problem

- Student preparation in this area has been inadequate
  - Academia has lagged behind practice in relation to family-centered care
    - Term “family-centered care” initially applied in clinical setting
    - Spread to policy level
    - Not yet embraced in academic settings
  - Students graduate with varying attitudes, limited skills and inadequate knowledge concerning family-centered care
  - Training has been largely on the job

# The broad parameters

## ■ Goals

- Assure that MCH programs address needs and reflect preferences and aspirations of families
- Assure that MCH program leaders share a deep commitment to and understanding of family-centered care

## ■ Outcomes

- Establish faculty buy-in
- Enhance faculty knowledge, skills
- Build student commitment
- Enhance student knowledge, skills

# Activities

- Identify point person and champion within faculty
- Hire parent consultant
  - Include in all strategic planning, academic policy discussion, hiring
- Assess faculty attitudes
  - Faculty survey
  - Interviews with parent consultant
- Engage faculty in ongoing discussion
  - Highlight in faculty meetings
  - Identify opportunities to incorporate into classes
  - Require at least one family-centered learning objective in each MCH course

- Reach students on entry into program
  - “Speed-dating” at orientation
  - Measure student attitudes on entry
- Promote new attitudes, teach new knowledge and skills
  - Highlight in concentrator dinners
  - Offer FCC fellowship opportunities
  - Infuse content into classes
- Aim for lasting impact on students
  - Conduct exit survey and focus groups
  - Create requirement for family-centered content in culminating experience paper

# Findings: how faculty define FCC

- Most faculty mentioned components of MCHB and AAP definitions
  - FCC acknowledges the central role of families,
  - FCC involves partnership, shared decision-making between family and provider
  - FCC includes support and strives for empowerment of families
  - FCC includes understanding of and sensitivity to family dynamics and cultural differences
    - At family level
    - At community level
  - FCC views the family as the focus for intervention
- Some faculty introduced concepts that go beyond published definitions
  - Family as a resource in an asset-based approach
  - Broad/inclusive, client-defined meaning of 'family'
  - Sensitivity to family burden (emotional and financial) in considering the impact of chronic illness on the family
  - Family perspective as reality–test for policy
  - Recognition of system as potential source of family stress
- Several expressed concern about politicization of the word “family”

# Findings: faculty views on importance of FCC

In relation to	Vitally	Very	Important	Slightly	Not
Research	5	1	1	3	0
Practice	4	2	3	0	0
Teaching	3	4	1	3	0
The field	5	4	2	0	0

# Findings: faculty views on importance of FCC for students

Who will work as	Vitally	Very	Important	Slightly	Not
Providers	6	4	1	0	0
Planners	6	5	0	0	0
Researchers	3	4	3	1	0
Admin	5	4	2	0	0

# Findings:

## student views on FCC at entry

- 68% of entering students had heard the term FCC
- Student definitions emphasized
  - Keeping families healthy
  - Comprehensive care for entire family
    - FCC = family practice
  - Addressing needs of children in family context
- No discussion of involvement, participation, shared decision-making, empowerment

# Findings: student views on relevance of FCC at entry

	To education	To future employment
Not relevant	.8%	.8%
Slightly relevant	.8%	1.6%
Relevant	10.5%	9.8%
Very relevant	35.5%	26.8%
Vitally relevant	52.4%	61%
Total	100%	100%

# Order of importance by student interest area at entry

<u>Interest area</u>	<u>% who see FCC as vital</u>
■ Family health	■ 60.8%
■ CSHCN	■ 59.8%
■ Infant health	■ 57.0%
■ Child health	■ 55.0%
■ Prenatal & maternal health	■ 49.2%
■ Adolescent health	■ 45.0%
■ MCH services	■ 41.3%
■ Women's reproductive health	■ 35.8%
■ Women's health	■ 34.2%
■ MCH care financing	■ 31.1%
■ MCH health policy	■ 26.9%

# Pre-post shifts

- Pre: Care at home given by the family  
Post: Recognizing family's importance; family role in decision making
- Pre I am not familiar with it: following family's health issues holistically?  
Post: Involving family in health decisions; encouraging participation, communication between patients & physicians
- Pre: Care involving all aspects of family wellbeing, both physical and psychological, since any change in one member's life will influence all other members of a family  
Post: A collaborative, participatory effort between patients/clients, their families and their health providers to attain the best outcomes possible, taking into account personal situations, cultures, beliefs, values, etc.

- Students seeking program development and planning careers moved from least interested in FCC to most interested
- Students interested in teaching and research thought FCC was of interest at pre and post
  - Note disparity between student and faculty views on relevance to research

# Matched pre-post responses

Level of understanding	Percent of Grads
Fully developed at pre and post	6.6%
Fully developed from pre to post	33.3%
Well developed from pre to post	26.6%
Slight growth from pre to post	33.3%
Total N	30

# FCC: a continuum of views

- Punitive or judgmental views
  - Did not show up in our survey responses
  - But widely reported by families
- Views ascribing limited but positive role for families in providing care to family members
  - Leads to focus on family education about care giving techniques, parenting
- Views that recognize family as major source of care and care management for family members
  - Leads to emphasis on support for the family care giving role; services such as respite, care coordination, and assistance with health system navigation
- Perception of families as full partners in planning, implementation, monitoring, evaluation, improvement
  - Encompasses a role for families in every aspect of maternal and child health, including financing, management and research

# Ultimately

- Our goal is to move faculty, and through faculty move students along this continuum
- Full adoption of a family-centered approach to public health education implies new approaches
  - To teaching
  - To research
  - To practice