Professionals are in charge and families are expected to be passive participants and accept, turn this model on its head and puts families in charge. Wraparound is about family engagement and involvement.

Components of Wrap Around in Massachusetts

- Individualized, Family Voice and Choice, Community-Based, Collaboration, Culturally Relevant, Team Based,
- Natural Supports, Strengths Based, Unconditional, Outcome Based

Notably Absent: Legal Aid and the multitude of ways that it is integral in many families difficulties. Especially Immigrant families who are likely currently feeling more vulnerable in this political climate and less likely to seek new organizations and providers due to concern for their citizenship status.

How Wrap Around is different than the traditional approach to mental health delivery:

- Traditional: Professionals are in charge and families are expected to be passive participants and accept what is offered.
- Wraparound: turns this model on its head and puts families in charge. Wraparound is about family empowerment.

Challenges: Because the Wraparound planning process listens to families, values their participation, honors their preferences, and respects their culture, it is a new opportunity for families to be in control of the care provided to their children. But it is up to families to seize this opportunity.

How to Improve Families Engagement

- Family Partner Engagement
- Provision of information and services with support
- Access to professional consultation when necessary
- Hub Service provision

OVERVIEW

- One case in particular which I would reference involved a Spanish speaking Ecuadorian family of immigrants. The mother and boyfriend emigrated to the US from Ecuador legally on visitor visas but stayed after the child was born. The mother never immediately obtained citizenship and left her child in the care of relatives. The patient was enrolled into a gang culture and was involved in acts of sexual and physical violence on younger children in order to “prove worth.” When the patient immigrated to the US at a young age the mother was terrorized to hear what had taken place. Almost immediately difficulty arose in school, outbreaks of violence, tantrums, sexual advances towards peers, and physical threatening in the home, leaving at all hours, refusing limits, and had started to experiment with drugs. The mothers boyfriend who was supportive was picked up in a routine traffic stop and had tests performed. The patient was deported back to Ecuador. It took this crisis situation to allow a referral for assistance. One was introduced to her Spanish speaking family partner (FP) that had an intensive care coordinator (ICC) and after almost 6 months finally started to engage with the FP which led to an intake meeting with the ICC and then allowed services. The ICC and FP made many referrals. The patient attempted convince mother to seek legal aid and work on legal citizenship but she refused. She was introduced to her Spanish speaking family partner (FP) first and the ICC was cultural based and on her legal status “just another who knows we are here” (legally, and why would then help us.” If legal assistance had been available through the community based provider organization that could come under the same umbrella perhaps they may have engaged sooner and could have alleviated some of the mothers stress and struggle with state resources for help managing a child with many behaviors.

CONCLUSION

Legal aid has been shown to offer significant benefits to individuals especially families with mental health difficulties.

Studies done by legal aid in Minnesota have shown that having someone that is being unable to access Legal Aid as the most at risk for being unable to access Legal Aid are those with mental illness or mental illness in their families.

Legal aid has been shown to offer significant benefits to individuals especially families with mental health difficulties.

- One way to address this lack of access or engagement is to bring legal aid to where these people are. One way to allow increased access for families is to utilize the existing hub system used in wrap around and include legal aid.

- By bringing legal aid into the system currently existing it would also legitimize peoples perception that they can have access to legal aid and allows already formed relationships to encourage individuals to engage legal aid.

ACKNOWLEDGMENTS

The experience and knowledge learned to present this case was done with great thanks to the Families and Communities Together Clinical team, including Intensive Care Coordinators and Family Partners who open their doors to Fellows and allow us to participate in their clinical supervision where we can observe with great appreciation how the Wraparound model honors their preferences, and respects their culture, it is a new opportunity for families to be in control of the care provided to their children. But it is up to families to seize this opportunity.

REFERENCES


- Legal aid is an integral part of recovery and stability for families utilizing wraparound. However, lowliness this aspect is missing and can lead to families having increased difficulty finding employment, managing their shelters, finances, and all too often navigating their immigrant status. Family partners and the hub provided by the intensive care coordinators an ideal way to create a sense of comfort and security in families accessing legal aid and improving the current climate of turmoil having a bridge between trusted providers who have legal aid. Family partners make their own choices and legal aid could create an increased sense of stability to aid in providing increased resources to address other challenges in their lives.