

WHOLE FAMILY APPROACH

7 MINUTE BRIEFING



Background

1

Why it Matters

2

What is family?

3

Factors affecting Households and Impacts

4

Pressures on the Care Giver

5

What gets in the way of Whole Family Approach?

6

Curious Questions

7

WHOLE FAMILY APPROACH

7 MINUTE BRIEFING



Background

1

Essex have chosen to move to Whole Family Approach which reflects the view that Think Family* can be expanded to the whole lifespan and used multi-generationally.

The 'Whole Family' Approach is a key concept to effective safeguarding and support practices with both children, unborn children and adults. We need to consider the impact of challenges on family life; those working alongside Children and Adults, and those important to them, need to look beyond the service user and how these other family members are supported from within their own and professional networks.

* Whole Family Approach originates from the concept that is 'Think Family' which was initially developed in response to the need to consider the impact of parental mental health on the care of their children.

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7 MINUTE BRIEFING



2

Why it Matters

- Working with the whole household, recognising that each members circumstances influence one another, both negatively and positively. Addressing individual needs is essential to enabling successful change, ultimately leading to better choices and outcomes for the entire family
- Helping people access the right services at the right time
- If a persons' needs in the household are not being met, it will affect others
- The learning and recommendations from safeguarding reviews informs us to work in this way

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7 MINUTE BRIEFING



What is family?

3

Families are no longer just the components of one household or a group of people related by blood or marriage. Families will define their own family.

Family may be a variety of associated people which may include friends, honorary and biological uncles, aunts and grandparents, neighbours or faith and community leaders. Families may also be split across more than one household as some couples may not live together, people may split their time between a number of households and many families are blended to include step and half relationships.

Culture shapes family values, behaviours and interactions. Traditions provide families with a sense of identity and belonging, which may change over time from one generation to the next.

Good practice invites us to understand the family network around the person. A genogram and ecomaps is a helpful tool to use to understand who is who in their whole family.

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7 MINUTE BRIEFING



4

Factors affecting Households and Impacts

There are a large number of factors that can affect someone's ability to care for themselves and others in their household or their behaviour is abusive or harmful to others. This could include:

- Physical Health
- Mental Health
- Financial Stability
- Violence and or anti-social behaviour
- Social Support
- Knowledge and Skills
- Time Management
- Environmental Factors

It is essential that practitioners who work alongside people actively consider behaviours on any other household members caring for them and offer support at the right time. This may include discussing where else they can get help from within their extended network; signposting to agencies or making referrals or safeguarding referrals (to other agencies).

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7 MINUTE BRIEFING



Pressures on the Care Giver

5

A carer is anyone who provides unpaid care for a family member, partner or friend who needs help because of their illness, frailty, disability, mental ill health or addiction.

Caring for a friend or relative can be a fulfilling and rewarding experience.

Carers also face difficult choices and sacrifices to continue in their caring role and may be vulnerable to experiences of isolation, financial hardship, or difficulties with their own physical or mental health. There is a statutory duty on local authorities to assess and support child and adult/family carers.

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7 MINUTE BRIEFING



6

What gets in the way of Whole Family Approach?

Fear:

- Worrying about making mistakes or facing criticism can prevent individuals from asking questions or exploring new ideas
- Being anxious about time and capacity
- Worries about sharing information
- To avoid “nosiness”

Assumptions:

- What factors influenced the decision you took (*own values, ethics, beliefs and biases*)
- Trying to make information fit early hypotheses

Knowledge:

- Not knowing how to or when to make a referral to another agency
- Not knowing what other agencies do

Environment:

- Stress
- Lack of time

Organisational Culture:

- Don't go looking for work
- Work pressures
- Single lens perspective/one dimensional outlook/Sole perspective/Singular perspective

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7 MINUTE BRIEFING



Curious Questions

7

Questions for reflection:

- Do we understand the impact of presenting behaviour on the person and those in the household? What is day to day life like and how much risk and harm may the presenting behaviour cause for others and does this need intervention?
- What are the family beliefs, rules, values and fears that stop them seeking and accessing support? How can we support people to consider their options?
- Have you sufficiently considered the history of the household members and impact of this, adverse childhood experiences, trauma and repeat behaviours and patterns?
- When people are only just doing enough, but change isn't being seen, how is this recognised and how do you respond to it?
- Do we understand the impact of the caring responsibility on the care giver; is this a reasonable impact or do they need support? (what is reasonable?)

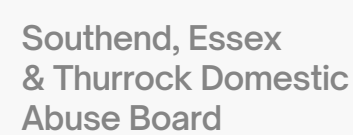
When you consider making referrals or signposting

- How do you decide if it is necessary and proportionate?
- Do you consider if the family member needs an introduction to a new service; will they self-refer without support?
- Have you considered their level of confidence and does this mean they need practical support?
- Have you considered family rules, culture, beliefs and values and how this can impact on making the referral or affect future intervention?
- How does your own values and biases influence the interpretation of need?

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This 7 minute briefing has
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