



**Outcomes Report of Activities Supported by
Campus Alberta HOPH Meeting Grant
(not exceed 2 pages)**

Date of Report	March 13, 2019
Date of Meeting	December 19, 2018
Title of Meeting	Family as a Social Determinant of Health
Team Lead(s)	Dr. Bonnie Lee & Dr. Andrew Greenshaw
Amount of Award	\$2500

Meeting attendance:

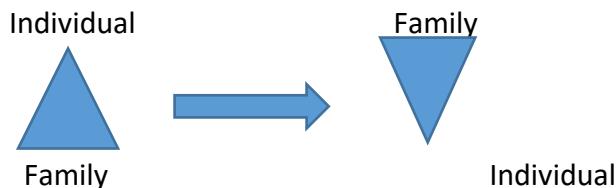
Total registered: 21; Attended: 14.

Representation: AHS AMH, ACE knowledge mobilization, Neuroscience, Rehab Services, Indigenous Treatment Services, Advocacy Group, university researchers

List, provide, or explain outcomes from the meeting:

Key Strategies and Opportunities:

- a. Paradigm shift needed from individual thinking to systems thinking and conceptualization.



Workshop participants observed that despite AHS purported commitment to place patients and families as the core principle of health services, the group consensus was that the current focus remains first at the individual level, and then the family as an adjunctive piece. This is different from placing the family as the “primary unit” of care, prevention and intervention. To do so would require a shift in paradigm with systemic training in conceptualization and interventions.

- b. This workshop brought together researchers and service providers working with family issues across different life stages. These different stages are interconnected. A life-course theme on families was presented as an important theme for future research and training planning.

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| 1. Early Childhood | 4. Couples |
|--------------------|------------|

2. Adolescence	5. Parents
3. Emerging and Early Adulthood	6. Intergenerations

- a. Lack of training, skills and expertise among service providers to facilitate family interaction in services. Small group discussions highlighted that lack of training, skills and expertise for working with families pose obstacles and ethical concerns:

- It is risky and unethical to bring family members together without the requisite training and skills, as relationships can be volatile and unpredictable.
- Ethical concerns exist when seeing family members separately rather than as a joint unit re issues of privacy and secrecy requested by individual family members workin with the same service provider.
- Families, community, nature and the cycle of life are an integral parts of indigenous worldviews and practices, but these are not always incorporated into their healing system due to barriers in training and skills.
- Relational disconnection exacerbates and maintains addiction and depression

5. **List (with projected timelines and names of participants) what activities or next steps are ensuing from the meeting (follow-up meetings, etc):** Knowledge Translation and Mobilization Strategies

- Collaborate and find commonalities with other resources and services, e.g. early childhood and ACE; couple relationships, parenting and addiction; indigenous worldviews and families.
- Align research reports and messages with “buzz words” that are circulating, e.g. ACE, brain science
- Use of digital methods for dissemination in short video clips and standardized toolkit to make it more accessible for consumers.
- Use existing popular avenues for dissemination of messages from research: Insight, Apple magazine, interviews on AHS website.
- Family Meeting or Family Week at the end of residential and other treatment to coordinate couple and family services with Day Programs.
- Apply for external funding to implement couple and family counselling research in existing system and demonstrate the need and effectiveness to a broader group of end-users.
- Different levels of training to raise service-providers' awareness, knowledge and skills of how to involve the families.
- Life course theme for future meetings and conferences.