Family Peer Support Specialists (FSS), also known as Family Partners, provide specialized support to parents, caregivers and other adult family members who are raising children with behavioral health challenges.

Those working as an FSS have direct experiences in a parenting role of a child with complex health needs, coupled with specialized training in the unique process of “walking beside” families experiencing complex needs. Through personal experiences, they have gained knowledge and perspectives about how health and education systems work, how insurance can be both a barrier and a benefit, as well as the many challenges families face when they have complex health and social needs.

The FSS assists families in identifying areas of their lives that may be impacting their ability to maintain stability in their day-to-day living. Identified obstacles (or barriers) may fall outside the scope of what might be addressed through a clinical lens and using an approach grounded in shared “lived experiences” can be a powerful and validating support for families. Through this support, families grow in their knowledge, capacity, skills, and overall resilience.

Common challenges in understanding family peer support:

Family Support Specialists partner with parents, caregivers and guardians to pursue outcomes determined by the families themselves. They help to normalize help-seeking, de-stigmatize mental health challenges, increase the family’s capacity for self-advocacy and self-efficacy, and increase supports across systems and life domains.

Family peer support includes having discussions of shared experiences raising a child with complex health challenges and navigating complex health, education and social systems. Personal experiences are disclosed with intention to assist the family in their process.

Because family peer support activities can resemble the activities of other types of providers, FSS are often viewed in roles that are not quite accurate. This document clarifies some of the activities that Family Support Specialists do and may help to clarify the role to create better cohesion among the various partners that make up the CATS team.
FSS activities that may look similar to social work:

- Helps the family identify resources to meet their needs.
- Helps the family locate resources in their community, such as support groups, food pantries, and other community-based family supports.
- Helps family understand the importance of their natural support network and helps them with ideas to build (or repair) their natural supports.
- Models hopefulness and mindfulness.

FSS activities that may look similar to care coordination or case management:

- Helps the family with strategies to coordinate care activities for their child and to identify who their Case Managers are (with their insurance, with their Coordinated Care Organization, with their health plan, etc.).
- Consults with the CATS therapist on family needs, barriers, and progress.
- Assists the family in learning how to obtain services in all facets of the family’s life (ie. helping them develop capacity to navigate systems).
- Supports the family during their crisis period with collaborative communication among various parties involved with the family and youth (may include: therapists, school personnel, insurance, and others).
- Communicates regularly with the family about barriers and strategies for gaining access to services and supports.
- Assists the family with understanding the value of therapeutic support for parents and siblings; assist them in accessing services.
- If the family is uninsured, helps connect them with Oregon Health Plan or other insurance options and provides application support.

FSS activities that may look like education or teaching:

- Shares psycho-education information, as well as knowledge acquired through personal experiences, including how FSS overcame barriers and obstacles.
  - Provides the CATS Family Guide and use the content for discussion, exploration, and learning.
  - Models skills related to parenting, positive communication, and self-care.
  - Informs family on where to get information if FSS knows about a resource that might help them fill a need.
  - Describes and role models “Collaborative Problem Solving” and other positive parenting techniques and helps the family get connected with classes and parent groups.
  - Assists family in how to evaluate new information from the Internet, friends, and other sources.

Some Family Support Specialists also teach classes designed for families and caregivers, such as NAMI Basics for Parents and Caregivers, Collaborative Problem Solving, Family-Centered Safety Planning.
<table>
<thead>
<tr>
<th>FSS does work with the family to develop skills.</th>
<th>FSS does help the family learn about advocacy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helps the family develop skills to get through crises, including de-escalation, emotion regulation, communication and asking for help.</td>
<td>Helps the family to learn about the importance of and skills for self-advocacy.</td>
</tr>
<tr>
<td>Supports family’s skill development in areas they need or want to further develop and to help them manage day-to-day life demands.</td>
<td>Supports the family to advocate for their needs.</td>
</tr>
<tr>
<td>Does tasks with the family, such as filling out paperwork for insurance and making phone calls to systems providers (ie. school, insurance, therapists, child welfare or foster system).</td>
<td>Describes situations in which FSS had to advocate and “push back” on systems providers.</td>
</tr>
<tr>
<td>Helps family identify their needs and find helpful information and resources to meet them.</td>
<td>Helps family prepare for and accompany family to school meetings, such as IEP meetings.</td>
</tr>
</tbody>
</table>

**FSS activities that may look similar to therapy and crisis safety planning:**

*Important note: FSS does not provide any form of clinical services and does not create the crisis safety plan.*

Assists the family in understanding clinical language and practicing collaborative communication with clinicians and other health care providers.

Collaborates with all CATS team members for better family outcomes and to support the entire family’s needs; communicates regularly with the clinical partner on what is being done to support the youth and their family.

Discusses the family’s concerns; supports the family in expressing their concerns and asking for what they need.

Attends the first in-home family meeting with the therapist in order to present the CATS program as a team-based support.

**Talks with family about the safety plan and also explore family-centered safety planning for all family members.**

Communicates with expertise about how to meet the family’s needs regarding safety planning; discusses the plan with clinical partners and the family members.

Asks family about safety, including lethal means, drug and alcohol use, interpersonal violence, and self-injury.

Explains and interprets safety plan in family’s first language (if fluent in that language); *see section on interpretation services.*

*Some Family Support Specialists are trained in CALM (Counseling on Lethal Means), QPR (Question, Persuade, Refer), ASIST (Applied Suicide Intervention Skills Training) and will use knowledge in these areas to support families.*
## FSS activities that may look like personal friendships:

*Important note:* FSS work can appear very personal and friendly; FSS are trained in how to maintain appropriate boundaries and to support the family in ways that honor those boundaries.

**Shares personal stories and experiences for a specific purpose and to benefit the family’s process.**

Helps family understand the importance of their natural support network and helps them with ideas to build (or repair) their natural supports, rather than rely solely on paid services.

Helps the family connect or reconnect with their cultural and/or spiritual supports.

Communicates regularly with the family by phone, email, and/or text, sometimes during “off hours.”

Meets with the family when and where it is convenient to the family (community spaces, home, office/clinic).

Supportively listens through the family’s grieving process, about their anger and frustrations, and about aspirations and hopes for their family’s future.

Locates and connects with support groups and other community social events.

## FSS activities that may look like legal advising:

The FSS will often assist families with reviewing and discussing paperwork or processes related to the following:

- Employment topics (FMLA, how and what to share with employer)
- Insurance (OHP, commercial insurance)
- Social system supports (TANF, food stamps, childcare)
- Education system (401 plans, IEPs, school meetings)
- Intellectual and Developmental Disabilities
- Social Security Disability Insurance (SSDI)
- Child Welfare, Juvenile Justice
- And more

Helps family prepare for and attend school and other education or vocation-related meetings, such as IEP meetings.

Assists the family in accessing information about complaint or grievance processes and help them file using their own words.

*Some Family Support Specialists are permitted by their employers to go to court meetings with families.*

## Regarding interpretation and translation services:

*Important note:* Interpretation and translation are formal services that involve specialized training. FSS does not act as an interpreter between the therapist and the family or their child, even if FSS is fluent in the family’s primary language.

**FSS may access language interpretation or translation services, if needed by the family, and advocate for all service providers to do the same.**

Assists with family’s understanding by re-stating clinical information into everyday language and assists community partners in understanding questions or concerns the family may be hesitant to express.

Helps to explain the safety plan in family’s primary language (if FSS is fluent in the family’s primary language and their role is as a bilingual/bicultural FSS).

*Significant gaps exist in this area across all programs.*
### Where Family Support Specialists do their work:

**Family Peer Support generally takes place in locations that are family-friendly; ideally, these settings do not look like “systems” environments (ie. doctor’s offices, government buildings), unless this is the family’s preference.**

FSS joins the family at locations where it is convenient and preferred by the family: the home, community locations (home, coffee shops, schools, family resource centers). FSS may travel across county lines if family moves or resides in both counties.

FSS communicates with the family using methods that the family prefers and chooses (ie. phone, text, email, in person), unless the FSS employer places restrictions.

*Some Family Support Specialists are not permitted by their employer to use text for any communication.*

### Regarding transportation:

*Important note: Employers have various policies and practices when it comes to transporting families and youth.*

**The FSS will support the family’s transportation needs so that they can access support or services by helping them find options that are feasible and accessible.**

FSS joins the family at locations where it is convenient and preferred by the family, such as in the home or other community locations (coffee shops, schools, libraries, or family resource centers).

FSS may travel across county lines if family moves or resides in more than one county.

*Some Family Support Specialists are not permitted to transport youth or families in business or personal vehicles.*

### Some final notes about the work of Family Support Specialists

**The FSS does not do the following activities:**

- Work directly with youth
- Babysit or supervise youth
- Supervise DHS visits
- Teach the parent how to parent or discipline their child
- Fix or change the behavior of the parent or tell the family what to do
- Take instructions from clinicians or other providers involved with the youth/family
- Give the family legal advice
- Become personally involved with the family

---

This document was prepared in a collaborative process with Family Peer Support Specialists and program staff from OHSU, NAMI Multnomah, Oregon Family Support Network, Lifeworks Northwest, and Oregon Health Authority in 2019.

It was reviewed and edited in collaboration the statewide CATS Family Support Specialist Collaborative in 2021.