

Factors Associated with Implementation of High-Fidelity Family Psychoeducation Programs in a Large State Initiative

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Research over the past 25 years has clearly demonstrated that family psychoeducation (FPE) interventions significantly improve the lives and independent functioning of people with severe mental illness by reducing relapse and promoting personal goal attainment such as employment. (Dixon, Adams, & Lucksted, 2000; McFarlane, 2002; McFarlane, Dixon, Lukens & Lucksted, 2003). While several models of family psychoeducation have evolved over time, the multifamily group model (MFG) has been shown in clinical trials to result in lower relapse rates, increased employment rates, improved social functioning, and reduced costs of care (McFarlane et al., 2003). The Substance Abuse and Mental Health Services Agency has included the multifamily group model as one of its six evidence-based practices for serious and persistent mental illness (<http://mentalhealthpractices.org/fam.html>).

Despite its demonstrated clinical efficacy, penetration of the MFG model into routine treatment settings has been low (Dixon et al., 1999, 2001). MacFarlane and colleagues (2001) explored a number of barriers and facilitators of MFG implementation. Barriers identified included financing of family services, time commitment, and conflict between the MFG philosophy and agency practice, while facilitators of implementation included the extent of local consensus on the importance of the initiative, effective training and supervision, and active efforts to identify and overcome barriers to implementation (McFarlane et al., 2001). Findings from the National Implementing Evidence-based Practices Project suggest that MFGs may be more challenging to implement than some other EBPs (McHugo, et al. under review). More work needs to be done to promote the implementation of family services, and to understand the barriers and facilitators of high fidelity implementation.

NYSOMH in partnership with the University of Rochester Family Institute for Education, Practice and Research, initiated the NYS Family Psychoeducation Initiative, which was designed to 1) implement MFGs in 34 agencies statewide, and 2) to explore the program and staff level predictors of MFG program fidelity. Program and staff

level data was collected at baseline, 12-months, and 24-months after the initial training. Measures included organizational structure, culture and climate, attitudes towards change, knowledge of family psychoeducation, and fidelity of MFG implementation.

In this presentation, we will: 1) provide an overview of the NYS Family Psychoeducation Initiative; 2) report on preliminary results of the evaluation, including time to implement; fidelity achieved; and staff, administrator, and organizational factors that may be associated with fidelity, 3) discuss lessons learned from the NYS Family Psychoeducation Initiative and 4) conclude with next steps for FPE in New York State.