



Psychiatric Rehabilitation Association

RELEVANCE OF CORE PRINCIPLES & VALUES

FOR WORKING WITH CHILDREN

The application of psychiatric rehabilitation principles and values in children's services has increased over the past decade with very positive outcomes. As children's services continue to move beyond behavioral health and pathology to services that build hope and skills for meaningful, development-enhancing participation within the family, school and community, PRA offers a definition and guiding principles to ensure that the outcomes are aligned with family-driven care and support youth in the mastery of social and emotional developmental life tasks. As the practice of psychiatric rehabilitation for children evolves and matures, PRA's definition and core principles shall be amended to reflect current best practices.

***Definition of Psychiatric Rehabilitation for children:** Psychiatric rehabilitation services promote quality of life, community integration, and successful transition to adulthood for children and youth who have experienced serious emotional or behavioral difficulties that significantly impair their ability to function successfully in home, school, family, or community life. Psychiatric rehabilitation services focus on empowering young people and their families to develop the skills and access the resources needed to increase their capability to thrive in the living, working, learning, and social environments of their choice.*

Psychiatric rehabilitation services for children and youth are undertaken in a spirit of partnership and collaboration between youth, caregivers, and providers. The services are individualized, driven by the perspectives and priorities of the young person and his or her family, and build upon existing strengths. They promote each young person's positive development, while supporting his/her movement along a developmental trajectory that will result in a successful transition to adulthood. Psychiatric rehabilitation services are an essential element of the health care and human services spectrum, and should be supported by high quality research demonstrating their effectiveness.

Providers of psychiatric rehabilitation services for children and youth need to be well-grounded in the principles and practices of psychiatric rehabilitation, as well as in critical competency areas specifically relevant to children's services, including partnering with families and young people, promoting resilience and self determination, and matching services to age- and developmentally-appropriate needs and goals.

The following Core Principles and Values, drawn from the principles of the association, are meant to guide psychiatric rehabilitation practitioners working with children, youth and their families*.

Principle 1—Hope & Respect. Psychiatric rehabilitation practitioners convey hope and respect, and believe that all children and youth have the capacity for learning and growth.

Principle 2—Culturally Relevant. Psychiatric rehabilitation practitioners recognize that culture is central to recovery, and strive to ensure that all services are culturally relevant to families and young people receiving services.

Principle 3—Shared Decision-Making. Psychiatric rehabilitation practitioners engage in the processes of informed and shared decision-making and facilitate partnerships with all people and community systems/agencies involved in supporting the children, youth, and families receiving services.

Principle 4—Strengths-Based. Psychiatric rehabilitation practices build on the strengths and capabilities of each young person to promote resilience and recovery, and to prevent or reduce disability.

Principle 5—Family-Centered. Psychiatric rehabilitation practices are family-centered; they are designed to address the unique needs of each individual served, consistent with the values, hopes, and aspirations of that individual and with consideration of his/her family system and other key supports.

Principle 6—Community Integration. Psychiatric rehabilitation practices support full integration of children and youth into their communities, where they can engage in age- and developmentally-appropriate activities that promote positive development and support their successful transition to adulthood.

Principle 7—Empowerment. Psychiatric rehabilitation practices promote self-determination and empowerment, and honors family voice and choice. Young people have the right to express their preferences, goals and aspirations, and to contribute meaningfully to decisions about the types of services and supports they receive.

Principle 8—Natural Supports. Psychiatric rehabilitation practitioners facilitate the development of personal support networks by helping children, youth and their families link to and use natural supports. Such natural supports include family, school, and community resources, as well as developmentally appropriate peer support programs.

Principle 9—Quality of Life. Psychiatric rehabilitation practices strive to help young people and their families improve the quality of all aspects of their lives; including social, educational, financial, intellectual, physical and spiritual domains.

Principle 10—Health & Wellness. Psychiatric rehabilitation practices promote a holistic view of wellness, and encourage children, youth and families to develop life-long habits for improving, and maintaining their physical and mental health.

Principle 11—Evidence-Based. Psychiatric rehabilitation services emphasize evidence-based, promising, and emerging best practices that produce outcomes congruent with empowerment, resilience and personal recovery. Such programs will include structured program evaluation and quality improvement mechanisms that actively involve persons receiving services.

Principle 12—Accessible & Coordinated. Psychiatric rehabilitation services must be readily accessible to children and adolescents whenever, wherever, and for as long as they are needed and eligible for children’s services. These services should be well coordinated and integrated with other psychiatric, medical, and school-based treatments and practices.

*For the purposes of this document, the term “families” may encompass relatives, legal guardians and other caregivers.