# OUR WRAPAROUND TEAM: SUCCESSES AND SUGGESTIONS

My son has had serious emotional and behavioral challenges since he walked into this world. I sought help for him beginning at the age of three. After early intervention; after numerous visits to doctors, therapists, and psychiatrists had met with limited success; and when his behavior at home, school and in the community became beyond the scope of our capabilities, it was suggested that he be placed in residential care. This was not what I wanted for my son. I didn't think that he needed to be "sent away," but I was at a loss about what to do. We had exhausted all resources available to us.

In May 2000, my son, then eight years old, was hospitalized for his emotional and behavioral problems. When he was discharged, we were referred back to our county Mental Health Organization (MHO) for continued treatment. Through my affiliation with Portland State University, I learned that there was a federally funded grant site conducting a research project at my county MHO. This grant was using Wraparound to expand services available to children with severe emotional and behavioral challenges that were at risk of being placed outside the home. This definitely defined my son. Through heavy advocating on my part, I was able to get the two required referrals for my son to participate.

Once our team had formed, it consisted of everyone I could think of who could possibly act as a support to or for my son. It included family members, friends from church, his therapist, his psychiatrist, our care coordinator, a family support worker, his teacher, and occasionally members from the school district's special services office. This team met a few times in its entirety. After a few



*Theresa Rea with son Cody*

months, many of the "natural supports" (family members and friends) who had been on the team withdrew their support. This was either because of personal reasons, or because their beliefs about the nature of my son's challenges were not compatible with mine. There were also personality conflicts among the natural supports that could not be resolved. As I am writing this, my son's team consists of his care coordinator, his therapist, and me. His psychiatrist is kept in the loop and informed of meetings, but does not attend. If school-related issues are on our agenda, we schedule the meetings at school under the terms of their contract hours. I am OK with this, mostly because we are getting ready to "close his case." I will assume the role of the care coordinator (as I had in the past) and keep the team informed. I am now the person who disseminates information about my son and his treatment to the various people involved. This

includes his doctor, his psychiatrist, his teachers, family, friends, and community supports.

The beauty of Wraparound, from my perspective, is that IT WORKS. It works because it provides an opportunity for everyone involved with my son to gather at the same table (even figuratively speaking) and discuss what he needs and what our family needs to keep him at home. Having everyone at the table informed and aware of his treatment, his goals, and more importantly, his strengths, has had an incredible impact. First, he saw everyone working together. All the important figures in his life were working on the same plan and the same goal, *for him*. This was a powerful message. Everyone with whom he interacted was in touch with who he was and where he was going. They were all aware of what was going on in other areas of his life. All events—at home, at school, in therapy, and in the community—were put out on the table once a month for everyone to revisit and evaluate. No one was in the dark about any detail of our lives or his progress. He is a different child today, thanks to the Wraparound philosophy and the dedicated people who have stuck with us along the rocky way.

There were two major challenges that kept Wraparound from being as successful as it could be for me and my family. First, services that our family needed (and still need!) did/do not exist. For example, one of my family's needs was/is after school care. I was a single, working mom with nowhere for my son to go after school. Daycares for kids with emotional and behavioral challenges simply don't exist. This has severely impacted my ability to work a full-time job. I remained a student through all

these years in part because of my love of academe, and in part due to the flexibility of the schedule.

Another challenge is that not everyone understands the values and theory of Wraparound. At the individual level as well as the organizational level, many of the agencies that we are involved with (including the schools) are unfamiliar with Wraparound. Individuals within agencies who are unfamiliar with how Wraparound works seem reluctant to have a parent and a family directing their own treatment. If these professionals are familiar with Wraparound, they do not appear to "buy into" the belief that families are an integral and necessary component of the team. At the organizational level, agencies have forms, protocol, procedures, and power structures that work to discourage creative problem solving to address unique family challenges. The daycare dilemma is a good example. The need clearly exists, not just for my family, but for many families like mine. How can these agencies, in partnership with families, go to work on solving this challenge? From my perspective, it requires stepping outside of policies, procedures, protocols, and turf protection. It requires creative thinking, believing in the power of families and community, and believing in the strengths of children and families like mine. When this happens, many families and their children with emotional and behavioral challenges can be provided with the necessary supports to keep their children at home, in school, and out of the juvenile justice system. Moreover, these families and children can flourish, given the opportunity.

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