

CONFERENCE ABSTRACT

New Patterns for Low-income Families - A model for comprehensive and coordinated efforts.

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Background: In Norway, more than one out of ten children grow up in poverty. Poverty and its consequences are often transferred across generations. Services to these families are seldom integrated and coordinated. We lack knowledge about the complexity they face and how measures should be organized to reach all family members. "New patterns" is a model for comprehensive and coordinated efforts for families with children who struggle with persistent low income and where the family experiences complex challenges.

Aims: The aim was to develop a cross-sectoral service model to coordinate services for integrated health and social carefor poor families, to prevent transfer of low income and the accompanying social, economic, and health-related consequences across generations.

Methods: In New Patterns a multidisciplinary team of researchers and practitioners/social workers has searched for best practice and included findings from a pilot study where families expressed frustration and powerlessness because no one addressed the "whole picture" of their situation. Based on these findings the New patterns-model was developed.

We have employed a project design where evaluation and implementation function as simultaneous and reinforcing processes, inspired by the framework Effectiveness-implementation Hybrid Designs (1). The model has continuously been developed based on the experiences and feedbacks from participating families and practitioners. Dialogue with local and national policymakers and professionals has been an important part of the implementation process.

Results: In New Patterns a family coordinator is responsible for close follow-up of children and adults in 10 families over a period of 5 years. Follow-up includes services from different sectors, i.e., culture, education, health- and social services, and volunteer organizations. The family coordinator preforms a detailed mapping of the family's needs, and together with the family develop a family plan enabling appropriate help and needed services. Through systematic mapping, close follow-up over time, practical and social support, and coordinator skills, the family coordinator develops trust-based relationships that provide new insight into the challenges and optimize the use of instruments in the traditional support system.

We have identified 10 effective elements in the family coordinator's follow-up of the participating families. These elements are illustrated in a Logic map, which shows the connection between follow-up and goal achievement, in short and long term, and the elements that must be present to

succeed. The model enables integrated health care and social care to families with complex challenges. New Patterns is implemented in 10 municipalities in Norway, including 200 families.

Conclusion: The family coordinator works with the family in the family's everyday life, including home visits and accompanying the family members to meetings with relevant collaborating services. The intervention does not introduce new services but coordinates optimal use of existing municipal welfare services. The New Patterns model is relevant for other target groups with complex challenges and were the health and welfare systems struggle to provide integrated care to all family members.

1. Curran GM, Bauer M, Mittman B, Pyne JM, Stetler C. Effectiveness-implementation Hybrid Designs: Combining Elements of Clinical Effectiveness and Implementation Research to Enhance Public Health Impact. Med Care. 2012;50(3):217-26. DOI: 10.1097/MLR.0b013e3182408812