The Integrated Care Association

Family-Centered Care Recommendations for Researchers

Research shows that FCC improves a wide range of outcomes for patients and family members. In addition, FCC research fosters trust, improves communication, and ensures that research priorities align with real-world needs. Researchers can conduct family-centered research by exploring family-centered topic areas, as well as utilizing family-centered methodology. Through the following recommendations, researchers can advance the recognition and value of family-centered approaches to care.

Integrating families into research processes can lead to:

- Improved study relevance by aligning research questions with family priorities
- Enhanced recruitment and retention through trust and engagement
- More effective interventions
- Better uptake of findings
- Stronger community partnerships

To fully realize the benefits of a FCC approach, researchers should:

- Include family-centered questions on surveys and measures
- Expand the lens beyond individual patient outcomes to include family-level outcomes
- Engage families as partners from study design through dissemination
- Create structures for family advisory roles
- Build systems that support family involvement across diverse settings
- Evaluate the impact of family involvement on research quality and outcomes
- Train other researchers in family-centered research principles

Suggested areas for continued FCC research include:

- Family's role in health and links to health behaviors and health outcomes
- Impact of family engagement on health and health care
- Impact of health issues on all members of the household (and vice versa)
- Implementation and evaluation of FCC interventions in integrated care settings
- Development of a standard measure to assess FCC implementation
- Using electronic health records (EHR) to examine the impact of FCC strategies (e.g., linking family health records) on patient and family member health outcomes

In sum, a family-centered approach is not just a compassionate model that supports health care quality, it is a scientifically sound strategy that enhances the relevance, rigor, and reach of research.

Selected FCC Research Resources and Exemplars*:*

- Berge, J.M., MacLehose, R., Eisenberg, M.E., Laska, M.N, & Neumark-Sztainer, D. (2012). How significant is the 'significant other'? Associations between significant others' health behaviors and young adults' health outcomes. *International Journal of Behavioral Nutrition and Physical Activity*, *9*(1), 35-41. doi: 10.1186/1479-5868-9-35.
- Berge, J.M., Mendenhall, T.J., & Doherty, W.J. (2009). Using Community-Based Participatory Research (CBPR) to target health disparities in families. *Family Relations*, *58*(4), 475-488. doi: 10.1111/j.1741-3729.2009.00567.x.
- Crandall, A., Weiss-Laxer, N.S., Broadbent, E., Holmes, E.K., Magnusson, B.M., Okano, L., … & Novilla, L.B. (2020). The Family Health Scale: Reliability and validity of a short- and long-form. *Frontiers in Public Health, 8,* 587125. doi: 10.3389/4pubh.2020.587125.
- Feinberg, L. (2012). *Moving toward person and family-centered care.* AARP Public Policy Institute: https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101585624-pdf.
- Feinberg, M., Hotez, E., Roy, K., Ledford, C.J.W., Lewin, A.B., Perez-Brena, N., Childress, S., & Berge, J.M. (2022). Family health development: A theoretical framework*. Pediatrics*, *149*(5). doi: 10.1542/peds.2021-053509I.
- Law, D.D., Crane, D.R., & Berge, J.M. (2003). The influence of individual, marital, and family therapy on high utilizers of health care. *Journal of Marital and Family Therapy*, *29*(3), 353-363. doi: 10.1111/j.1752-0606.2003.tb01212.x
- Pratt, K.J., Van Fossen, C.A., Berge, J.M.**,** Murray, R., & Skelton, J.A. (2019). Youth weight status and family functioning in paediatric primary care. *Clinical Obesity*, *9*(4). doi: 10.1111/cob.12314.

See our FCC Resources and Exemplars page for a list of other texts, resources, and research exemplars to guide continued FCC research.