



ROOTED IN HUMANITY

# Brief Action Guide for Social Workers

April, 2026



# A LIVING TREE GRAPHIC: INTERACTIVE TOOL BRINGS THE FRAMEWORK ALIVE FOR COLLECTIVE ACTION

This interactive tool visually maps the humanistic care framework onto a tree to help changemakers like you fully understand each component and how they work together holistically. Together, these components support a healthy ecosystem of care, similar to the ecosystem of a tree, where each part needs to work together for the tree to grow and thrive. Share this tool with others to inspire collective action.



[Access the Framework](#)

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# CENTER FOR INNOVATION IN SOCIAL WORK & HEALTH

Urgent action framework for care that matters to children with medical complexity, families & clinicians

**Focus on Change that Matters:** Family partnership is the trunk of the ROOTED IN HUMANITY tree for humanistic care. All systems change must be driven by and with families as equitable colleagues in care delivery, not designed for them.

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"I want [my son's] life - however long that is - to be able to impact other families and other people. Yes, it's hard, and yes, there are struggles, but there's such joy in it, too. I want families to remember why we fight for them - that they can impact other people."

**~CMC Family Focus Group Participant**

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## What You Get

A strategic action framework focusing on the most meaningful systemic conditions needed to mitigate persistent bias and enable relational whole-person care with children, families and practitioners, which is vital to their health and well-being. The ROOTED IN HUMANITY framework equips social workers to effectively champion family expertise at the systems level, while bridging clinical, community, and policy systems to understand the mechanisms at play, overcome barriers, and create essential structural changes together.

## Your Role

Effectively advocate for and help facilitate a focus on the right kind of organizational, policy, and cultural conditions to make humanistic care possible amidst many priorities and limited bandwidth. Design small changes with a big impact across shareholders. Partner with families to transform structures and articulate their pain points to co-develop practical solutions that matter. Bring your social work expertise to bear to guide implementation of humanistic care at all levels of systems change.

## Concrete Action Strategies for Collective Change

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- 1. Champion culture and power shifts:** Advocate for family colleagues in systems change with real decision-making power. Push for organizational recognition that families are medical providers of care at home and must be treated as colleagues to effectively improve systems. Use tools like the Family Engagement in Systems Assessment Tool (FESAT), developed by Family Voices, to assess and improve meaningful family engagement.
- 2. Advocate for payment that values relationship:** Push for reimbursement models that recognize social work's humanistic, relationship-centered contributions. Advocate for payment structures that fund protected time for listening, coordination, and family support for all team members rather than measuring only medical transactions.
- 3. Push for policies that cultivate humanity and well-being:** Advocate for streamlined administrative processes that reduce family burden. Leverage Early Periodic Screening Diagnosis and Treatment (EPSDT) benefits and fight implementation gaps. Champion policies that trust family expertise—like enabling families with flexible spending accounts to direct home care. Address policy barriers to peer support and respite access.
- 4. Advocate for measures that capture what matters:** Push for experience measures (PREMs) over satisfaction surveys. Advocate for and help develop metrics that capture family-defined quality of life, trust, and partnership, not just clinical outcomes. Help document the hidden costs of fragmented, dehumanizing systems to build the case for change. Help draw the line from relationship-driven care to better outcomes for all involved.
- 5. Shape education and training structures to advance disability justice:** Advocate for families and youth as co-educators and faculty in staff training. Push for interdisciplinary training that addresses implicit bias, ableism, and the social model of disability, notably addressing intersectionality. Champion integration of narrative medicine and reflective practice into organizational culture to emphasize the human element of care.
- 6. Build structures for collective sustainability:** Advocate for protected time for team reflection and processing of grief and moral injury. Push for team-based care models that distribute emotional labor and create psychological safety for vulnerability. Connect with cross-state networks to share strategies and build collective power for change.

## Key Questions for Reflection & Action

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1. What organizational or policy barriers currently prevent humanistic practice in my setting—and who has power to change them?
2. How can I partner with family leaders to advocate for structural change, rather than helping families navigate broken systems?
3. What payment or productivity metrics constrain relational care—and how can I advocate for alternatives?
4. How are families currently positioned in my organization—as advisors, or as colleagues with real power?
5. What coalitions can I build with families, clinicians, and advocates to push for systems-level change?
6. What infrastructure does my team need to sustain this work—and how can I advocate for it?


### Universality of the Framework

While geared towards CMC, this framework can support improving systems of care for and with anyone who lives with complex health and social needs at any age, and the clinicians engaging in their care.

“When the problem is understood, rooted in the daily reality of life lived, the questions that we ask to figure out how to solve these problems are going to be directed in the right way.”

**-Family/Clinician Faculty and co-developer of ROOTED IN HUMANITY**





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