CHILDREN AND FAMILIES LIVING WITH A FAMILY MEMBER WITH MENTAL ILLNESS: A RESEARCH REVIEW
FAMILIES AUSTRALIA
CHILD AWARE APPROACHES CONFERENCE
MELBOURNE, 18-19 MAY, 2015

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CHILDREN AND FAMILIES LIVING WITH A FAMILY MEMBER WITH MENTAL ILLNESS: A RESEARCH REVIEW

Plan of presentation

Prevalence of mental illness

Prevalence of family members of people with mental illness

The groups in families where a family member has a mental illness
  • The issues
  • Supports and services

Summary
Prevalence of mental illness

Adults aged between 16 to 85 years:
34% of the population, or 7.3 million people (ABS, 2008)

Children and young people aged between 4 and 17 years:
14% of children and adolescents, or 500,000 young Australians (Sawyer et al., 2000)
## CHILDREN AND FAMILIES LIVING WITH A FAMILY MEMBER WITH MENTAL ILLNESS

### PREVALENCE: FAMILY MEMBERS OF PEOPLE WITH MENTAL ILLNESS

<table>
<thead>
<tr>
<th></th>
<th>Number of family members identified as carers</th>
<th>Number of family members affected</th>
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<tbody>
<tr>
<td>Adults living with an adult family member with mental illness</td>
<td>Not known (Mental Health Council of Australia, 2009)</td>
<td>Not known</td>
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<tr>
<td>Siblings of a child with mental illness</td>
<td>Not known</td>
<td>Not known</td>
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<tr>
<td>Parents of a child with mental illness</td>
<td>Estimate 521,465 (Sawyer et al., 2000)</td>
<td>Not known</td>
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<tr>
<td>Children and young people of a parent with mental illness</td>
<td>Not known, although 4% of children under 18 in Australia have been identified as carers, with the average age for young carers being 12-13 years (Noble-Carr, 2002)</td>
<td>Estimated one million Australian children (Maybery et al., 2009)</td>
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The groups within families living with a family member with mental illness

Parents with mental illness who have dependent children

Partners of parents with mental illness

Children and young people of parents with mental illness

Grandparents caring for children of parents with mental illness

Parents caring for children with mental illness

Foster carers of children with mental illness

Siblings of children with mental illness
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Parents with a mental illness who have dependent children

Number: 577,500 one and two parent families in Australia who had at least one parent experiencing mental illness, ranging from ‘severe’ to ‘not severe’ (Maybery et al., 2009)

Characteristics: low income, single parent, isolated (Targosz et al., 2003)

Mothers:

Importance of motherhood

Children help to focus their lives

Parenting; and worry about their children
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Fathers:

Live with their natural, step, adopted or foster children (Fletcher et al., 2012)

Value their relationships with their children

Fearful children will develop mental disorder

Impact of stigma – avoid seeking help and treatment; influences decisions made about contact visits with children

Experiences of prejudice and discrimination, harassment and verbal abuse, social exclusion

(Reupert & Maybery, 2009; LeFrancois, 2010)

Different gender and parenting norms and expectations for mothers and fathers (Price-Robertson, 2015)
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Parents with a mental illness who have dependent children

Losses experienced –

- expectations in life
- housing, employment, friends and relationships
- contact with children
- self-esteem
- income
- rights
- fulfilment, and
- loss of hope  

(Kelly, 1999)
Parents with a mental illness who have dependent children

“Nowhere is the hope, despair, triumph and complexity of life more clearly illustrated than in our endeavours for our children — and mental illness pushes these experiences to extremes”

(Madeleine Kelly, 1999, p. 60).

“I have also learned that you can’t do it all yourself, and that it’s ok to ask for help. I think it can be very alien to a male to ask for help but I took that step when I asked my GP for anti-depressants. It was a big change, and made me nervous to do it, but I wanted to be there for my children and not pass on the shame that I experienced. I haven’t talked to them yet about my depression…. I want to be a father that my children are proud of, regardless of all my failings and imperfections. My children are my life and I am proud of them both” (a father cited in Price-Robertson, 2015).
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Parents with a mental illness who have dependent children

Supports and services

Ask parents about their children – their relationships with them, enjoyment they experience, worries they may have about them

Family Options – Marlborough, Massachusetts (Nicholson et al., 2009)

Mental Health Positive Parenting Program – Gosford, NSW
(Phelan et al., 2012)

Let’s Talk – talking with parents with mental illness about their children - copmi.net.au

Family Focus – family talk about parental depression and anxiety – copmi.net.au
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Partners of parents with mental illness

Limited research

Issues and needs of mental health carers identified in Mental Health Council of Australia (2009) research:

- Isolation; helpless; lack of knowledge about mental illness; ignored and patronised by professionals who did not understand their role; lack of services and support programs for carers; limited knowledge of impact on their physical and mental health

Personal accounts

- Paul Armitage (2006)
- Kevin Williams (2008)
- Karen (2008)
- Kerry Hawkins (2014)
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**Partners of parents with mental illness**

- Ask about partner’s understanding of symptoms and treatment and recovery process
- Ask how the partner is coping
- Acknowledge partner’s experience and perspective
- Tell partner that his or her involvement is critical to recovery process
- Help partner to call on and build support network
- Talk about couple relationship
- Ask about the children, how they are coping, concerns held for them
- Stay in touch with partner as ill parent recovers

*(adapted from Ballard, 2008)*
Children and young people of parents with mental illness

At least one million children in Australia have a parent with mental illness, 23.3% of children aged 0 – 17 years.

Risk and protective factors:

Genetic
Developmental
Environmental
Relationship
Community supports
Community attitudes and values
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Childrens' accounts (Aldridge & Becker, 2003; Bilsborough, 2004; Gladstone et al., 2011)

* Aware of stigma
* Hide family situation from friends
* School a refuge, but bullying experienced
* Impact on social life and education
* Mental health workers may ignore role of young people
* Difficulties in relationships with parent
* Worry about own future mental health
* Want to know what is happening – symptoms and treatment
* Optimism of children
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Children and young people of parents with mental illness

Experiences reported by adult children of parents with m.i.

(Foster, 2010; Dunn, 1993; Mason, 2008).

* Little or no information
* High level of parentification
* Burden experienced in caring for parent, also feelings of pride and responsibility
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Children and young people of parents with mental illness

Peer support programs  (Reupert et al. 2012; Riebschleger et al., 2009)

Aims – to increase children’s knowledge about mental illness; develop peer relationships; enhance adaptive coping skills

Findings, limitations, risks

Family intervention programs – Let’s Talk and Family Focus

(www.copmi.net.au)
Parental mental illness is a family matter
Grandparents parenting grandchildren of parents with a mental illness

Grandparent families = 0.7% of all families

Between 8,050 to 63,520 grandparent families in Australia

Also, a proportion of Grandparents as primary carers are hidden – tradition, culture, preference – impacts on receipt of supports

Reasons for becoming primary carers: mental illness of parent, substance misuse, incarceration, disability, military service, abuse and neglect, death of parent, family breakdown

Love, obligation, no alternative – important to understand reason

(ABS, 2011; Baldock, 2007; Brennan et al., 2013; Cowling, Seeman & Gopfert, 2015; Elliott, 2007)
Grandparents parenting grandchildren of parents with a mental illness

Impacts on grandparents: physical and mental health, financial, employment, relationships with family and friends, housing, social, issues of loss and grief, potential ill health and confronting own mortality, relationship with child’s parent, emotional and behaviour difficulties child may have, feeling ‘out of touch’ in school setting

Negotiating with Centrelink and state welfare department.

Supports and services: groups for grandparents – social and psychological support – learn about entitlements; where to access services such as respite care, child care, information about school work, other supports and services.

Empowerment training program: to strengthen feelings of competency, parenting skills, and ability to advocate for their needs (Cox, 2014)
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Grandparents parenting grandchildren of parents with a mental illness

Circumstances of becoming primary carer for grandchildren

Harriet (2008)

Jennifer (2008) – ”foster care was not an option”
Parents caring for children with mental illness

14% of children and young people aged 4 – 17 years had a mental health difficulty (Sawyer et al., 2000)

Impact on parents

UK study examined data relating to 10,438 children, found...

* parents of children with conduct disorders: 90% reported feeling worried, 66% depressed, 75% tired

* 25-50% all parents consulted General Practitioner, with two-thirds of this group being prescribed medication

Also – impacts on work, social life

(Meltzer et al., 2011; Mendenhall & Mount, 2011)
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Parents caring for children with mental illness

Impact on families

Negative impacts on family relationships with family and friends, social life, spousal/partner relationship

Enrichment in families related to positive self-concept and family relationships

Stress related to severity of child’s disorder, disempowerment, and lack of coordination among service providers.

(Angold et al., 1998; Friesen, 1989; Yatchemoff et al., 1998)
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*Parents caring for children with mental illness*

Interventions:

- education about mental illness
- family focused therapy
- parent skills in behaviour management, online supports
- problem-solving and stress management skills

(Mendenhall & Mount, 2011)
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Foster carers of children with mental illness

Foster family: private household where the carer/s have undergone a selection and approval process, authorized by relevant state government department to have children placed in their care (AIHW, 2011).

June 2013 – 9,561 authorized foster care households with a child in care in Australia

Reasons children placed in care: parents unable to provide adequate care and protection / substantiation of child abuse/neglect, may include parental mental illness, substance mis-use, violence

(AIHW, 2011, 2014; McHugh, 2007; Rutter, 2000)
Foster carers of children with mental illness

Presentation of children placed in foster care: emotional and behavioural difficulties arising from prior experiences

Costs and consequences for foster families:
Financial, time, emotional and psychological – end of placement, effect on relationships with friends – distancing

Differentiations not made between foster carer’s experiences in caring for different groups of children

Maintaining contact between child in care and birth parent
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Sibling of children with mental illness

Impact on siblings:

High probability of having an emotional or behavioural disorder

Family cohesion and positive support networks contribute to positive adjustment

Limited data on siblings at time of Human Rights Enquiry in 1993

Personal accounts: Clea Simon (1997); Spiro Wagner and Spiro (2005)
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Summary

* Impact on families, and individuals within families, when a family member has a mental illness
* Learning from the complexity of lived experiences
* Impact of the stigma related to mental illness
* Few evidence-based programs and interventions, but what is needed: information about mental illness, supports and services sensitive to the needs of each group, and to the family:
  - parents, children and young people, grandparents, foster carers, partners
* Scope for further research

Thank you.
United Nations Convention on the Rights of the Child

Article 13.1 –

The child shall have the right to freedom of expression, this right shall include freedom to seek, receive and impart information and ideas of all kinds …

Article 18.2 –

States Parties shall render appropriate assistance to parents and legal guardians in the performance of their child rearing responsibilities and shall ensure the development of institutions, facilities and services for the care of children.
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Foster, K. (2010). 'You’d think this roller coaster was never going to stop': Experiences of adult children of parents with serious mental illness. Journal of Clinical Nursing, 19(21/22), 3143-3151.


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References:


Mental Health

Which person has a mental illness?

If you can't tell why should we?

By Zoe & Kate 6th
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Vickirivers@exemail.com.au – for reference list

Copmi.net.au - *COPMI national initiative
- for e-learning programs
- for details of the MJA Open COPMI supplement 2012

* Children of Parents with Mental Illness