# Mental Illness: Understanding the Impact on Families and How to Help

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**"Trends and technologies may** change, but from the Stone Age to the Internet age, two aspects of life remain constant: Family can be the source of great joy and sorrow, and parenthood is a challenge."

(Sarah Rodman, Boston Globe, February 28, 2010, p. N1)



# **Talking Points**

- Rationale for a whole-of-family approach
- Examples from parents with mental illness
- Benefits of a whole-of-family approach
- Recommendations for moving forward



# A Whole-of-Family Approach: Families are the focus of mental health promotion, mental illness prevention, treatment & rehabilitation.



Families can take many forms. Children may be living with birth parents, step-parents, relatives, foster families, adoptive families, or in other "formal" or "informal" arrangements.

# **Mental Illness is Prevalent**

- Affects almost half of the Australian population during their lifetime; &
- 20% of the population at any point in time.
- Only 1/3 of individuals with mental illness use health services.

#### (Mental Health Council of Australia, 2010)



#### Children, Youth & Young Adults Live with Mental Illness

- At least 1/3 of young people (ages 12 to 25) have had an episode of mental illness.
- Peak ages of onset late teens to early 30's.
- Estimates suggest about 23% of Australian children have a parent with a mental illness.
- Children, youth may be siblings, carers.

(MHCA, 2010; Maybery et al., 2009)



## **Parenthood is Prevalent**

- Most Australians are or become parents
- In 2007, approximately 65% of women (ages15 to 44) gave birth, at an average age of 30

(AU Institute of Health & Welfare, 2009)



#### **Mental Illness and Parenthood**

- The majority of men (57%) & women (68%) in the U.S. with mental illness during their lifetime are parents
- This is true across diagnostic categories, including psychotic disorders
- The average age of individuals with mental illness at birth of first child is about 22 for mothers and about 25 for fathers



#### Young Adults (18 to 26) are Parents

- No mental illness  $\rightarrow$  19% are parents
- Moderate or mild mental illness → 25% are parents
- Serious mental illness → 29% are parents

(US data; GAO-08-678 Young Adults with SMI, June 2008)

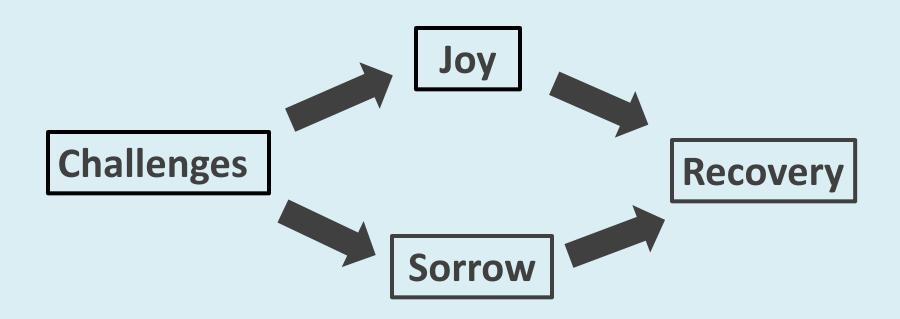


#### **Mental Illness Affects Everyone**

- Parents of adults with mental illness often provide care to their children & grandchildren
- Siblings may be at risk &/or be enriched by their experiences
- Carers & siblings benefit from information & support



# The Experiences of Parents Living with Mental Illness



"...You know, some people think you shouldn't have a baby because you have mental illness and because you're on medication." "...How to be a good role model for your kids when you have problems of your own...you want your child to grow up to be a healthy, well-adjusted adult..." "You have to go to work. You gotta' 'come home. You gotta' deal with the kids, deal with your own home. Your own problems, you know, really start piling up." "...In reality I don't want to go [to the hospital]. I want to be home. I want to be the mother. I want to be in charge of the house...cooking, cleaning, taking care of everybody, changing diapers."

"And when they come in and they say, 'We're taking what you have left--that's keeping you alive'...What do you think then?...You're a failure completely..."

"...No medication is going to slow me down. I have a 2-1/2 year old daughter. I have to be active for that reason. I have to be right behind her everywhere she goes..."

"...How do you establish a loving relationship with your child...when you're not with them a lot? They don't see you on a regular basis and you can't show them your love in the normal ways that [parents] show their love..."

# The Benefits of a Whole-of-Family Approach

#### Shift to the family's perspective

#### **To Promote Children's Mental Health**

- Families are the key determinants of whether children with mental illness will receive services; the extent of family engagement affects children's outcomes.
- Reach children in their natural settings.
- Fit interventions into these contexts.
- Work in partnership with families & local communities.

(Kazak, Hoagwood, Weisz et al., 2010)

## What Works for Older Youth

- Programs targeting employment & education, & those longer in duration are most successful.
- Mentors & case managers provide individualized support & aid.
- Child care for participants who are parents is associated with success in outcomes.

(Hadley, Mbwana, & Hair, Child Trends Fact Sheet, 2010)

# Provide Family-Informed Resources & Supports to Adults

- Consider an adult's family context, reproductive issues, & goals for family life.
- Provide family-informed treatment & services, e.g., supported housing, employment, education.
- Family-focused treatment focuses on the goals of family members.

(Nicholson & Henry, 2004)

# The Family Provides a Context for Recovery

- Hope
- Sense of Agency
- Self-determination
- Meaning & Purpose
- Awareness & Potentiality

(Onken, Craig, Ridgway, Ralph, & Cook, 2007)

Hope: "Never thought I was going to be a mom. They gave me the best. They give me love. I want to be ok for me and for them. I got to be strong. They are my life and keep me going. They affected me positively."

Sense of Agency: "Lately with the children transitioning, my morning is spent on phone calls, follow-ups, appointments, um, medical appointments...looking for, you know, working to get the individual counseling...having to stop to call the school..."

Self-determination: "I've learned my limits. I can establish boundaries. I can forgive myself for being human and having the illness, and try to...educate them on mental illness, in those teachable moments."

Meaning & Purpose: "So you know, life comes full circle. And our faith has definitely grown, solidified, and the children are participatory in that." Awareness & Potentiality: "I also try to learn from the traumatic and violent things that have happened in my life ... I'm constantly making sure that they're safe, they're ok, they think for themselves..."

### **Recommendations: The Key Elements** of Inclusive Livable Communities

- Housing
- Employment

(U.S. National Council on Disability, March 17, 2008)

### Housing

"The ache for home lives in all of us, the safe place where we can go as we are and not be questioned."

Maya Angelou

## Employment

# "As a cure for worrying, work is better than whiskey."

**Ralph Waldo Emerson** 

y: An International Challen

+ promoting Recovery

# "No one on his deathbed ever said, I wish I had spent more time on my business."

**Paul Tsongas** 

erting Parents with Psychiatric Disability

# "Fulfilling valued social roles is the key element in the recovery model."

- Worker
- Student
- Family member
- Etc.

(US National Council on Disability, March 17, 2008, p. 17)

#### Family roles are valued social roles

- Educate question assumptions
- Coordinate help families navigate our systems
- Collaborate build bridges among services & supports
- Partner with families to achieve their goals

#### Make it personal to make it happen!

#### How to start?

"My children give me strength, they give me hope, they give me the will to survive..."

a mother with mental illness

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