

# Position Statement 56

## Children of parents with a mental illness

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### Definition

Many children will grow up with a parent who, at some point, will have a mental illness. Mental illnesses in parents represent a risk for children in the family. These children have a higher risk for developing mental illnesses than other children. The risk is particularly strong when a parent has one or more of the following: Bipolar Disorder, an anxiety disorder, ADHD in the adult, schizophrenia, alcoholism or other drug abuse, or depression.<sup>1</sup>

Parenting and care of infants, children and adolescents may be adversely affected by mental illness through reduced emotional availability, changed perception of the child and impaired ability to support child development. These parenting difficulties may be episodic or enduring. Parents with mental illness may experience disruptions in their relationship with their child, social isolation and disadvantage, and the effects of stigma. The emotional sensitivity and responsiveness of a parent is usually a key factor in outcome for the child. Parental substance abuse considerably increases the risk of poor outcome for the child.

### Evidence

There is currently a lack of data regarding the number of adults utilising Australian and New Zealand mental health services who are also parents of dependant children. Many adult mental health services do not (or have only recently begun to) record whether their clients have children. The Children of Parents with a Mental Illness National Resource Centre, an Australian Infant, Child, Adolescent and Family Mental Health Association (AICAFMHA) initiative, has, however, undertaken an extensive literature review of what information is available, and found surveys which estimated that between 29 percent and 35 percent of mental health services clients are female parents of dependant children under the age of 18.<sup>2-4</sup> In 2005, it was estimated that there are between 21 and 23 percent of children living in Australian households where at least one parent has a mental illness.<sup>5</sup> In addition to those children living with a parent with mental illness, there are many children who are separated from their parents owing to hospitalisation. In the case of children who have a parent detained in a secure mental health facility, such separation can be prolonged. Overall, hospitalisation is considered one of the most stressful aspects of coping with a parent's mental illness and ongoing and specific strategies to support children in these circumstances are essential.

Children of parents with mental illness are demonstrated to be at increased risk of adverse developmental outcomes and mental health problems. AICAFMHA reports that estimates suggest that between one-third and two-thirds of children of parents known to Adult Mental Health services will experience difficulties.<sup>6</sup> The impact on the mental health of the child is determined by a complex interplay of genetic and environmental factors. This includes the age of the child, the nature of the mental illness, the involvement of adults in the child's life other than the mentally ill parent, and family relationships.<sup>6</sup> The stigmatisation of people with mental illnesses and its negative consequences can also affect all family members.<sup>7</sup>

## Recommendations

- If children of parents with a mental illness are to benefit from proposed enhancements to practice relating to services provided to their families, it is essential that psychiatrists themselves are involved in the development, implementation and review of good practice in this area.
- All assessment of adults with a mental illness must include:
  - (i) Identification of all dependent children.
  - (ii) Their current circumstances and safety.
  - (iii) The parent's (parents') capacity to provide physical and emotional care.
  - (iv) The direct effect of the parent's mental illness (and, for those in forensic mental health services, of the offending behaviour) on each child.
  - (v) The availability of alternative care and support for each child.
  - (vi) In the case of acute parental illness, as soon as is possible discuss with the parent their own concerns about their children.
  - (vii) Access to legal advice to ensure parental consultation in issues of care and custody, particularly when parental hospitalisation is likely to be prolonged.
- When a child appears to have significant difficulties, there should be consultation with and/or referral to an appropriate child and adolescent service.
- Child and adolescent psychiatrists should prioritise secondary consultations with adult mental health services and service providers. They should advocate for appropriate service responsiveness and promote good continuing interagency collaboration, particularly with adult mental health services. Training and ongoing education of psychiatrists must include these issues.
- On-going support must include the provision to parents and children of appropriate information about the mental illness and its impact. Care must include regular review of parental concerns about their children and, when necessary, the provision of parenting assistance and psychosocial support for them.
- Child protection issues must be considered. Reporting of child abuse and neglect is mandatory in most states and jurisdictions, and the process must be managed sensitively and collaboratively with patients and families.

The words 'mental illness' are used in this document to include both mental illness and disorder.

## References

- 1 Facts for Families. Children of Parents with Mental Illness. No. 39. American Academy of Child and Adolescent Psychiatry, 2004.
- 2 Cowling V. (Ed). Children of parents with mental illness. Melbourne: The Australian Council for Educational Research (ACER), 1999.
- 3 Farrell GA, Handley C, Hanke A, Hazelton M, Josephs A. The Tasmanian Children's Project Report: The needs of children and adolescents with a parent/carer with a mental illness. Hobart: Tasmanian School of Nursing and the Department of Health and Human Services, 1999.
- 4 Hearle J, Plant K, Jenner L, Barkla J, McGrath J. A survey of contact with offspring and assistance with child care among parents with psychotic disorder. *Psychiatric Services* 1999; **50**: 1354-1356.
- 5 Maybery D, Reupert A. VicHealth Research Report on Children at Risk in Families affected by Parental Mental Illness. Melbourne: Victorian Health Promotion Foundation. , 2005.
- 6 Australian Infant C, Adolescent and Family Mental Health Association Ltd (AICAFMHA). Information retrieved from the website [www.copmi.net.au](http://www.copmi.net.au). The Children of Parents with a Mental Illness National Resource Centre: Facts and Figures.
- 7 Phelan JC, Bromet EJ, Link BG. Psychiatric Illness and Family Stigma. *Schizophrenia Bulletin* 1998; **24**: 115-126.

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