



Empowering children and their parents. What is needed?

The level of *adult psychiatric services*

EUFAMI

„The Forgotten Children“

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Level of Services

Adult
Psychiatry

Children of
mentally ill parents

?

?

Children and
Adolescent
Psychiatry

?

Youth Welfare
System

Adult psychiatry

- System

„It's not our business“

- Structure

„No time“

„No knowledge“

„No partners“



- Relation to parents

Non-invasive

Low-threshold

Adult psychiatry

Why should **we** act?

↳ Prevention

↳ Holistic view

What **can** we **do**?

↳ Focus on parental needs

How can we **act**?

↳ Different levels of intervention

Preventive Psychiatry

- **Primary prevention** → **Child**
 - Identification of high-risk groups
 - Protection of sub-groups at higher risk of developing mental disorders
 - Applying adequate strategies (*healthy start of life; high-quality parenting; care for the children of mentally ill*)
- **Secondary prevention** → **Child and mentally ill parent**
 - Early recognition and effective management
 - Preventing progression by counselling to specialises services
- **Tertiary prevention** → **Mentally ill parent**
 - Rehabilitation measures
 - Reducing disability
 - Reintegration into community

Parenthood and Mental Health

- Important part of identity
 - Purpose in life
 - Motivation for recovering
 - Fear of custody loss



20% of psychiatric patients in a public mental health setting in Belmont (USA) perceived, that they might lose child custody or visitation if they were not adherent to treatment. Family members are often perceived as its source (Busch/Redlich 2007)

- Fearing effects on children
- Fearing effect on course of illness
- Stigmatisation
- Empowerment → individualisation of reproductive risks?

Considering parent's needs

- Parenting difficulties
- Balancing own vs. children's needs
- Communication about problems
- Difficulties of housekeeping
- Supporting networks
- Relationship problems
- Community support
- Economic, employment and education needs
- Domestic violence and abuse



Considering parent's needs

- 40% of patients are unsatisfied with the care of their children during their inpatient treatment
- 55% cancelled inpatient treatment because of inadequate care for their children
- 51% have strong resentment against youth welfare system

Schmid et al 2008

„I am not keen for them to visit me on the ward, even if there is a quiet room for because we've had patients come in before, and the children got quite scared when they just burst in to the room. The hospital is not the right environment for them“

Diaz-Caneja/Johnson 2004

Intervention level 1

- Reflecting norms and professionals' attitudes towards reproduction and mental health
- De-Stigmatisation of parenthood and mental disorder
- Early addressing of family planning issues (desire for children, potential problems, treatment options, implementation of supporting systems)

Intervention level 2

- Routinely registration of parenthood
- „Children/family-friendly“ rooms
- Age-appropriate information about mental disorders (e.g. posters, booklets)
- Assessing parents' needs



Intervention level 3

- Mother-infant treatment programs
- Provision of child care
- Parenting education and training programs
- Counselling services within psychiatry
 - Focussing on family system
 - Mediating between services involved
 - Case management

Conclusions

- **Prevention** is an important part of psychiatry, thus psychiatry has a pivotal role in addressing issues of patients' children
- Addressing the **needs of parents** is a first but central step in implementing effective prevention programs
- Adequate provision of care involves the **whole family system**