

Project 12019: Group Intervention Strategies for School Age Children who have a Parent with a Mental Illness

Aims: This project was undertaken by the Wentworth Area Health Service (\$87,340). The project aimed to prevent psychosocial disorder in children of parents with mental illness and to promote mental health in families affected by mental illness.

Description: Between 1994 and 1996 the Wentworth Area Mental Health Service trialed an intervention which aimed to prevent psychosocial disorder in children of parents with mental illness.

The resulting program, IMPACT (*Interventions to help Mentally ill Parents And their Children stay Together*) was established. It is a model for mental health promotion for families living with a parent with a mental illness.

Over a 12-month period, mentally ill parents and their partners and children attended group sessions which were facilitated by health professionals who were specially trained in issues relating to families and mental health. Parents and children attended alternate groups. The group sessions were based on five central themes: psychotherapy, psycho education, social skills, personal empowerment, and parenting education.

The program was evaluated on a number of qualitative and quantitative indices, including the Child Behaviour Checklist. Other psychometric instruments were used to evaluate the program and to identify aspects of individual and family functioning that enhance coping and to determine the implications of parental mental illness across generations.

Outcomes: The report states that very positive trends were observed in the pilot program and that further work should be undertaken in the area of psychosocial disorder in children of parents with mental illness.

Feedback from group facilitators, medical professionals and participants involved in the program, also indicated positive benefits across a wide range of outcome indicators. Improvements to family communication

and relationships were commonly cited. Participants said that they felt better about themselves, and their families were more optimistic about the future and felt more adequately equipped as individuals and as families to cope with adversity.

Despite a lack of statistical evidence, the children in the study appeared to make substantial improvements with respect to their pre-existing psychosocial problems. It was also demonstrated that improved service delivery and a family oriented approach to parental health had a positive effect on both children and families.

The report recommends that in the implementation of a program such as this, consideration should be given to child protection and family advocacy issues, mental health promotion and interagency collaboration.

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Project 24033: What are the best forms of intervention for children who have a parent with a mental illness?

Aims:

This project was undertaken by the Alliance for Children and their Mentally ill Parents (\$254,300). The project was established to coordinate and extend current and developing initiatives for children of parents with a mental illness and identify key elements in successful programs.

Description:

This national project titled C.H.A.M.P.S (*Children And their Mentally ill Parents*) was primarily funded to trial a range of programs for children whose parents had a serious mental illness. Little work had previously been accomplished in this area and the following key areas of concern were identified:

- this group of children fell between adult and childrens services and were often overlooked;
- historically adult psychiatry services had little involvement with the dependent children of their adult clients (or may not even know of their existence);
- child welfare workers were unused to working with the seriously mentally ill parent; and
- there was no known systematic approach to developing services for children of mentally ill parents in any State.

The specific objectives of C.H.A.M.P.S were to:

- pilot a number of initiatives that built on the work of the Alliance for Children and their Mentally ill Parents;
- evaluate these programs;
- develop specialised programs for workers involved with children of mentally ill parents; and
- disseminate the results of the project Australia-wide.

Outcomes:

In the early stages of the project an interim report titled *Hidden Children-Families Caught Between Two Systems* was produced which identified the needs of children and parents, and included the reflections of adult offspring of mentally ill parents and current interventions worldwide. The *Hidden Children* report and feedback led to the selection of a number of interventions that were trialed. The outcomes resulted in a systems change and a focus on increasing children's competency levels.

Under the project, the Working Together research initiative was undertaken to develop a "best practice standard" for service provision for service users and practitioners for adult clients and their dependent children. This included collaboration between mental health professionals and child welfare professionals with the purpose of breaking down territorial barriers between agencies and to clarify worker roles.

A *Staff Training Package for Adult Mental Health Workers* was developed to raise awareness of the issues of children of parents with a mental illness. It also aimed to encourage mental health professionals to be confident and proactive in providing support for their adult clients as parents, and of all family members including children. Additional State government funding assisted with the production of two informative videos, one for workers and the other for children and their parents.

A *Peer Support Intervention Scheme* trialed three discreet programs involving 24 families and 29 children. These programs provided an opportunity for children to be together, share their experiences and develop coping strategies. The evaluation report identified that the Scheme demonstrated an extremely positive qualitative effect on both children and parents. The Scheme's design and evaluation have been produced to encourage duplication of the peer support model across Australia.

A range of additional activities has been undertaken to ensure that the results of the project have been disseminated across Australia. Visits to NSW, WA, Qld, and the ACT have occurred. In 1996 the project conducted a conference with the Early Psychosis Centre in Melbourne and representatives from all States attended. In addition, 400 copies of the *Hidden Children* report have been distributed around Australia.

During the pilot project, the major issues of addressing the specific needs of children, developing best practice at an interagency level and the training for adult mental health workers were successfully completed. Reports and manuals were developed and made available. The project recommends that ongoing work and encouragement at a national level is required to continue this important initiative.

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Project I 2040: Families Together Program

Aims: This project was undertaken by the Benevolent Society of New South Wales (\$233,558). The aim of the pilot project was to prevent or lessen the negative effects of a parent's psychiatric disorder on their infant's development.

Description: The idea for this program grew out of the Benevolent Society's Early Intervention Program which found that families with children 0-3 years

of age or antenatally, need support with parenting where a parent has a long-term psychiatric diagnosis, for example, schizophrenia or bipolar disorder.

Until the inception of the Families Together Program there were no comprehensive community-based services in New South Wales for parents with a long-term psychiatric disorder who have an infant or who are pregnant. Many of the parents in the Families Together Program would have been institutionalised only a generation ago and their children placed in long term care. These families comprise a high-risk group in terms of the parents' welfare and protection of their infants and they are often disadvantaged because of their difficulties in using conventional community resources. It is believed that parents in these families want to do the best for their children but may find it difficult to balance the demands of parenting with the impact of a psychiatric disorder.

The Families Together Program offered home based support during pregnancy, birth and early parenting. Family Workers in the program advocated for families with government agencies and helped access community resources when appropriate. As well, the Program worked with parents to facilitate adequate support of their children's development.

Outcomes: The results from evaluating 19 families who were involved in the Program indicated that this is a vulnerable group of families. The Family Stress Checklist showed that 79% of the families were at moderate to high risk of abusing or neglecting their infants. Although 9 of these families were known to the NSW Department of Community Services prior to referral to the Program, there were only 3 notifications during the life of the Program. Outstanding evidence of the perceived usefulness of the Program was demonstrated by the fact that only 16 appointments out of a total of 1,169 were *not* kept by families in the 2 years of operation.

In the evaluation of this Program, it was found that parents felt more supported and confident after 12 months participation in the Program. From clinical observations it seemed that this may be related to improved bonding between parents and their infants.

This Program is at the forefront of responding to recent changes in philosophies and attitudes in mental health and child welfare. It demonstrated that specialised home based family support services such

as the Families Together Program can improve the experiences of parents and children in families where parenting is complicated by a long term psychiatric disorder:

Recommendations from the Families Together Program included that:

- the special needs of children under 3 years is acknowledged in families where a parent has a psychiatric diagnosis by providing specialist support;
- all professionals working with parents with a psychiatric diagnosis and young children need to be trained to understand the special issues for the parent and child; and
- interagency liaison is given highest priority in work with the client group to increase collaboration and bring a focus to the needs of children in families where multiple agencies are involved.

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