



# The wellbeing and mental health of the next generation

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TE RAU MATATINI



# Getting to know you

- ▶ How many of you are a parent?
- ▶ How many people in your life know that you are parent?
- ▶ Why?
- ▶ For those of you who are parents (or in a parenting role)...
  - ▶ Where or how did you learn to parent?
- ▶ Are you confident to support/give advice to others in relation to their parenting?

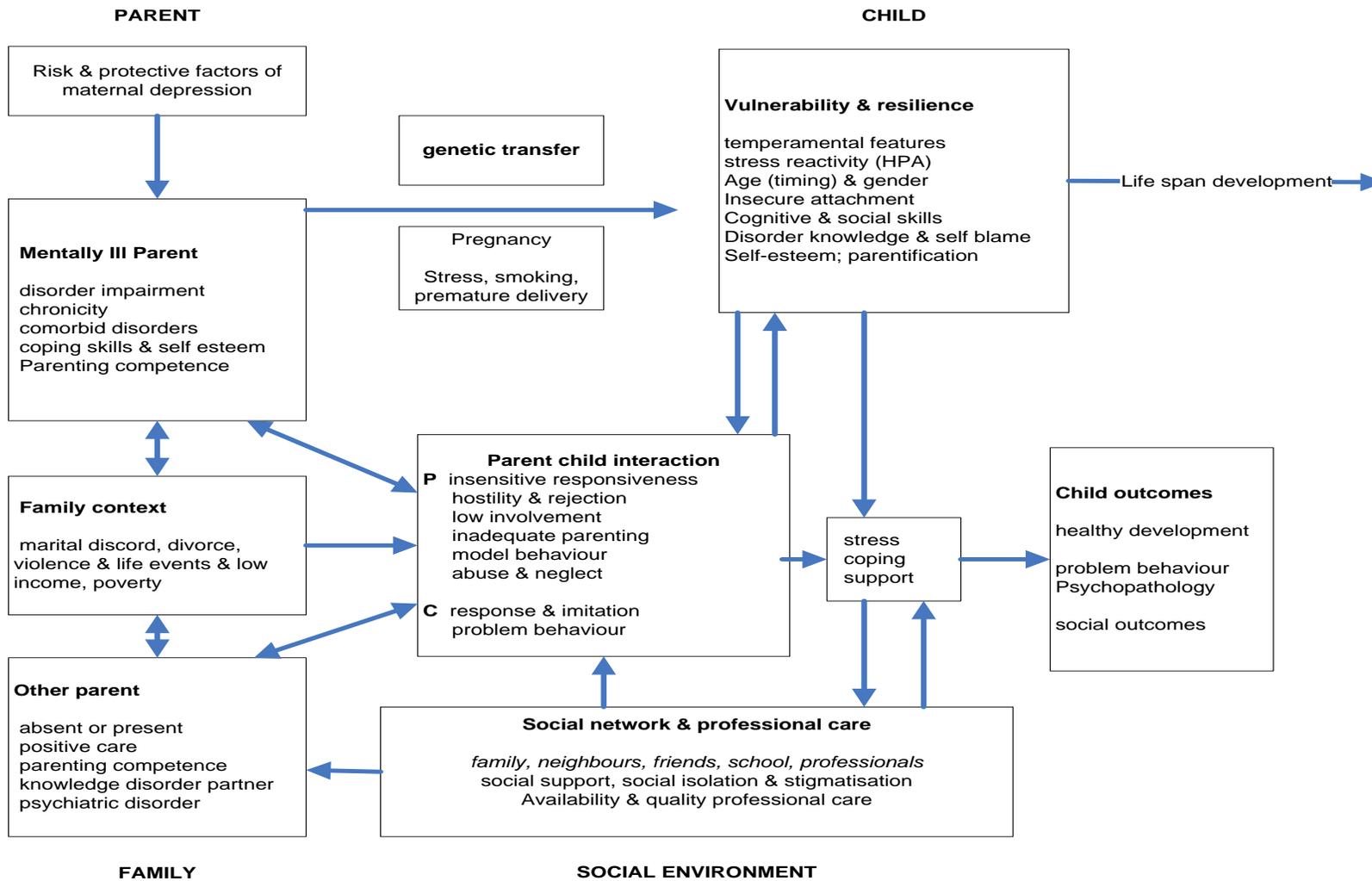
# Some case examples

- ▶ Its about a nine year old who was present when the ambulance was called for her mother's first panic attack when everyone thought it was a heart attack, who believed everytime her mother had a panic attack following that that her mother might die, because no-one was aware she had taken that in and thought to let her know about anxiety?
- ▶ Client leaving inpatient service, immediately taking over the care of a pre-schooler, talk with family about whether that is appropriate at that time
- ▶ A 14 year old young person whose responsible for cooking, cleaning and grocery shopping for themselves and their parent, who is struggling with their mood and meeting school obligations
- ▶ Children who talk about trying to get their mother out of bed when she is depressed and the helplessness they feel when they are unable to achieve that. Who witness their mother "pull herself together" for guests and other family (not uncommon) but wonder why she can't do it for them? And the meaning they make of that.

# Why Supporting Parents Healthy Children?

- ▶ Mental Health issues does not equal poor parenting skills
  - It's about a balance of protective factors and risk factors
  - Mental Health and Addiction factors: It's about functioning, chronicity, relapse and recurrence
  - Other Risk Factors

# Balancing Protective and Risk Factors



Adapted from Hosman, C. M. H., van Doesum, K. T. M., & van Santvoort, F. (2009).

# Why Supporting Parents Healthy Children?

- ▶ Its about reducing risk and increasing resiliency
- ▶ Parents fears
- ▶ We are uniquely placed to do this work.
  - ▶ We have specific skills and knowledge in the sector that parents can potentially benefit from
  - ▶ We can easily identify a group of people with a higher risk of developing mental health and addiction problems
- ▶ This is not a conversation these parents can easily have elsewhere.
  - ▶ Due to stigma and unwillingness to “reveal” themselves as mentally unwell or addicted

One services journey with  
supporting parents...

# Tu Tangata Tonu

- ▶ Tu Tangata Tonu name chosen by Barry Afaaso and Anaru Roberts who were part of our steering group at the time. Chief of Tikanga for ADHB, Naida Glavish gave her approval recommending a third element be added.
- ▶ Stand / Stand tall and do the right thing
- ▶ People
- ▶ Continuance / Permanence
- ▶ Supporting children in families where there is parental mental illness. (There are parallels for Addictions services)

# Tu Tangata Tonu

- ▶ Started as a project with two co-ordinators (0.8FTE, then 1.2FTE. Now 1.7 FTE)
  - Seema Wollaston
  - Myself
  
- ▶ A steering group
  - ▶ Leigh Murray - ADHB Family Liaison Co-ordinator
  - ▶ Julie Hagan - Consumer Advisor representative
  - ▶ Joy McConaghie - NGO Partner representatives
  - ▶ Emma Dore - NGO representative
  - ▶ Dr Suzie Farrelly & Jan Witherspoon - Adult MHS representatives
  - ▶ Anaru Roberts - Cultural advisor
  - ▶ Sarah Wallbank - Kari Centre Service Manager

# Tu Tangata Tonu

- ▶ In developing Tu Tangata Tonu we drew information from local NZ initiatives - Thanks to .....
  - ▶ Sonja Worthington (West Coast DHB)
  - ▶ Barbara Staniforth (currently University of Auckland)
- ▶ Australian initiatives - Thanks to ....
  - ▶ Nikki deBondt (KOPING - Brisbane, Australia),
  - ▶ Rose Cuff (FAPMI - Melbourne, Australia),
  - ▶ Dawn Foster (SCARF Geelong, Australia),
  - ▶ the Western Australian COPMI Project,
- ▶ An English initiative - Thank you...
  - ▶ Peter Anderson (The CAPE Project, United Kingdom)
  
- ▶ The existing literature as at 2008/9. We've tried to keep up but of course there is a proliferation

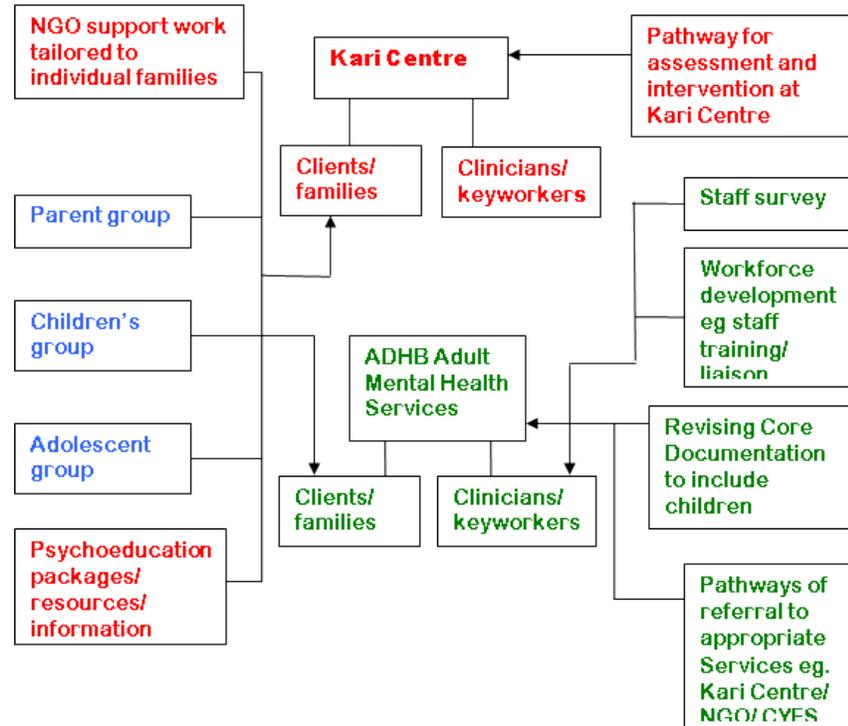
# Structuring our service

So...

- ▶ Concrete support for the families  
and
- ▶ Support and education for the Adult Mental Health clinicians who work with the families.

# Structuring our Service

## Client Interventions    Target Population    Service Interventions



# Working with families

- ▶ HOPE group
- ▶ Kidzone
- ▶ Youthzone
- ▶ Community Support work (via our NGO partner, Connect Supporting Recovery)
- ▶ Family work
- ▶ Referral to community services
- ▶ Referral to KC IY, Parenting Adolescents group

# Connect Supporting Recovery

- ▶ Part of our steering group
- ▶ Community Support work initially
- ▶ Now offering group work
  - ▶ HOPE group
  - ▶ Kidzone
  - ▶ Connecting Kids
  - ▶ (In future) Youthzone

# Supporting and Upskilling Adult Mental Health clinicians

## ► An evolutionary process

- Interest groups
- Working jointly on HOPE group facilitation
- Basing groups in the CMHCs (this didn't work when we were providing childcare!)
- Inservice presentations
  - about our service and related topics (e.g. Attachment)
- Training days (Working with Service Users who are parents and their children)
- Embedding our service in the Adult CMHCs, providing consultation and liaison and accepting referrals (encouraging working jointly)
- Professionals meetings and joint meetings with the client to agree a way forward together (double journey - "how can I put parenting on hold?"),
- Currently in flux but I believe it may involve Tu Tangata Tonu providing supervision, consultation and liaison with specific COPMIA champions and possibly some joint working whilst the clinicians become confident?

# Time for a change

- ▶ Adult Mental Health Clinicians have
  - ▶ The information needed to make the referrals
  - ▶ Best knowledge of and an existing relationship with the parents
  - ▶ Greatest awareness of the children
  - ▶ The ability to support our relationships with parents
  - ▶ At times, concerns about the children of their (parent) clients

And then came the guidelines...

# What is Supporting Parents Healthy Children work?

It is:

- ▶ Not a one time conversation
- ▶ Developmental;
  - ▶ because children develop and need different things at different ages and
  - ▶ because the recovery process is a journey so
  - ▶ both parent and children understand things differently at different times and benefit from different supports at different times.
- ▶ helping parents develop interpersonal skills that are so important to parenting, frustration tolerance, emotion management, relationship skills
- ▶ helping a parent access mental health or addiction supports for their children should they need them
- ▶ helping a parent attend parenting programmes or access specialist parenting supports such as Parent Child Interaction Therapy or Circle of Security

# What is Supporting Parents Healthy Children work?

Its about...

- ▶ about helping a parent to think about how their children are behaving when they are getting drunk around them....and what they could put in place to keep them safe (e.g. non drinking adult, or taking them to family to be baby sat before drinking).
- ▶ helping parents understand that although they are hiding their drug use/ mental health issues from their children, their children are more likely to be aware of what is going on than they think (depending on their age and individual personality)
- ▶ Noticing that the last three times you have visited a parent at home, one or both of their school-aged children have been off school and being able to have a conversation about why that is?
- ▶ About helping a parent notice that when they become silent during their depression one child becomes more obstructive and aggressive and the other more needy. It's about having a conversation about whether that is the same thing that happens at school and whether he wants to talk about this with the school and how to balance the potential benefits of this with the possible personal stigmatisation that may cause. Its about helping that parent decide what and how they want to say what they need to if they do go ahead and tell the school.
- ▶ About having conversations with parent about whether they want to tell their children about their mental health and or addiction difficulties

# What is Supporting Parents Healthy Children work?

- ▶ It is:
  - ▶ Helping a parent decide whether when and how to tell their children's school about their addiction and or mental health issues and weight the risk of stigma against the wellbeing of their children
  - ▶ Supporting a family and or a couple to have a conversation about how addiction and or mental health issues impact on the family
    - ▶ Psychoeducation
    - ▶ What impact it has
    - ▶ What meaning they make of it/ how it makes them feel
    - ▶ How to get through the hard times - make a plan
    - ▶ What extra supports they need
  - ▶ Making sure parents and children are registered with a GP
  - ▶ Agreeing on a Care Plan with the family should Mum or Dad have a relapse/ recurrence of their difficulties

# So what is your role in this?

- ▶ What are we asking Mental Health and Addiction clinicians/ workers to do?
  - Know whether their clients are a parents
  - Understand the level of parenting they do? Full time? shared care? Very little or loss of their children? To other family members
  - Understand how parenting impacts on their life and choices and what is the relation between parenting and their /mental health issues and help them understand this?
  - Provide them with an opportunity to discuss parenting concerns / concerns about the wellbeing of their children
  - Help them work out what, if any, support / help they need

# Broad Potential Population

## ▶ Parents

### ▶ Largely good parents:

- ▶ quality of parenting good when well / have positive parent skills that are reduced during MH / Addiction episodes and impacts on family (generally insightful and willing to engage - guilt), increased marital conflict during mental health episodes

### ▶ “Rough life” syndrome & MH-

- ▶ Impact of social isolation, single parenthood or marital conflict, financial restrictions
- ▶ Sometimes poor understanding of developmental expectations, not many skills in the parenting tool box (may use physical discipline)
- ▶ Often well intentioned and insightful

### ▶ Significant parenting struggles -

- ▶ Little insight into emotional and possibly physical needs of their children
- ▶ Poor developmental expectations

# Broad Potential Population

- ▶ Children and Young People
  - ▶ Largely unaffected
    - ▶ benefit from psychoeducation /information
  - ▶ “Tough life” syndrome -
    - ▶ psychoeducation
    - ▶ support needs (e.g. mentors, some brief individual therapy)
    - ▶ parentification (can lead to mental health problems due to young persons needs not being met).
  - ▶ Clinical Population -
    - ▶ emerging difficulties (definition of clinical?)
    - ▶ diagnosable mental health problems

# Issues

- ▶ Who is the client?
  - Client families (but how do you record that?) Open files for everyone? Just the parent?
- ▶ Confidentiality issues
  - Whose information is it anyway?
  - Working together
  - Issues of harm and risk
- ▶ Confidence, skills and willingness of mental health and or addiction clinicians to do this work
- ▶ Levels of vulnerability and needs of the parents make it hard at times to find the right time to have a conversation about the needs of the children

# Implementation exercises

- ▶ A clients journey through a service....

# Implementation exercises

- ▶ A clients journey through your service
  - Intake/triage
  - Assessment
  - Intervention
  - Case management
  - Crisis
  - Inpatient / Residential Rehab
  - Return to the community/ discharge from inpatient
  - Discharge from care

# Implementation exercises

- ▶ What increased skills/knowledge will your staff need?
  - Training
    - Impact of mental illness / Addiction on parenting
    - Impact of parenting on MI / Addiction
    - Parenting skills and some level of assessment (knowing enough to know when more is needed)
    - Child development (how can you tell with those behavioural difficulties are indicative of problems)
  
- ▶ What support will they need to obtain these skills this knowledge?
  - Training
  - Supervision?
  - Consultation / Liaison?

# Implementing the guidelines

Some resources that might be helpful

- ▶ Websites

- ▶ [www.copmi.net.au](http://www.copmi.net.au)

- ▶ Articles

- ▶ Children of Parents with Mental Illness. (Karen Ramsay, 2014)
  - ▶ When is it bad enough? (Carolyn Cousins, 2004)
  - ▶ How can I put parenting on hold? (Bev George, 2014)
  - ▶ Goal setting in Recovery: families where a parent has a mental illness or dual diagnosis. (Maybery, Reupert and Goodyear, 2015)
  - ▶ Unresolved trauma in mothers: intergenerational effects and role of reorganisation. (Iyengar, Kim, Martinez, Fonagy & Strathearn, 2014)

- ▶ Resources for family (some examples)

- ▶ Ruby's Dad
  - ▶ Why are you so sad?
  - ▶ My Happy Sad Mummy