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# **Talking to parents about talking to their children about parental mental distress**

**Rachael Lippett and Lizette Nolte**

*We need to do more to support parents who are Adult Mental Health services-users in helping their children make sense of their mental distress.*

Many parents who are users of mental health services feel ambivalent about talking to practitioners from these services about the effects of their mental health difficulties on their children (Falcov, 1998; Gopfert and Mahoney, 2000). They fear that they might be judged, found to be ‘bad’ parents or, at worst, that their children will be removed from their care (Cardwell & Britten, 2002). These fears can interfere with the relationship between parents and services.

Furthermore, mental health services often continue to see individuals in a de-contextualised medicalized way that takes the focus away from the family and relationships. Also, the lack of co-ordination between adult and child mental health services within the United Kingdom makes it particularly challenging to meet the needs of whole families (Falcov, 1998). It is often left to parents themselves to deal with the effects of their mental distress on their children.

These parents are frequently acutely aware of the stigma attached to mental health difficulties in society, in the media, and in their communities. These negative attitudes

and stigmatising reactions towards their mental health difficulties can powerfully discourage open dialogue. The dilemma of helping their children make sense of what is going on can be highly confusing and distressing for parents (Focht & Beardslee, 1996). Parents need to make decisions about whether or not to talk to their children and if they do decide to talk to them, to decide at what age, what information to share, what words to use, when to do it, how to deal with awkward questions or negative reactions from their children, and so on. Also, the very nature of the mental health difficulties they experience might complicate this process.

Clinicians and researchers are now becoming more convinced of the importance of parents and children talking together about the mental health difficulties of the parent and the effects thereof on the family. Also, more is being written about the important role services can play in facilitating these conversations and in supporting parents to help their children make sense of their experiences (see e.g. Cooklin, 2004; Daniel & Wren, 2005, Focht & Beardslee, 1996; Fredman & Fruggie, 2000).

### **Talking to parents**

The authors decided to explore these issues further and the first author carried out a pilot study<sup>1</sup>, interviewing service-users of an Adult Community Mental Health Team (CMHT) where both authors were based at the time. The research aimed to explore service users' perceptions of the impact of their mental health difficulties on their children; the usefulness of providing an explanation of their difficulties to their children; and the utility of receiving help from services in this regard. Ten service-

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<sup>1</sup> For more detailed information about the study, including methodology, please contact the first author.

users (three male, seven female) were interviewed using a semi-structured interview. All participants were white, and British or Irish.

## **What parents said**

### Parental concern about potential impact of mental health difficulties on children

Most participants were clearly concerned about the potential effects of their difficulties on their children. For some participants this related to having grown up with a parent who experienced a mental health problem themselves.

*I want him to have a good quality of life which I didn't as a child...my mother had manic depression, it put the fear of God into me...she did some mad things...*

*That's why I feel frustrated now...because I was desperately trying to protect him from that, because I didn't want him to have a depressed mother like I did, I tried to be jolly all the time because I didn't want him to have that experience like I did...*

### Effect of having children on the parent

Four participants did not feel that becoming a parent had been a contributory factor in the development of their difficulties, and of those people, two of them said that having children was actually beneficial to their mental health. Two other participants said that the stresses of being a parent had contributed to their difficulties, but were not a

major factor. Four participants said that the stresses of being a parent had definitely contributed to their mental distress. These parents commented on not having any time to themselves and the seemingly never-ending demands of the parenting-role. This was particularly difficult for single parents.

*When you've got children and you're depressed...well, you can't just walk away from it like you can a job, and have a complete break...you can't go home at the end of the day, it's twenty-four hours a day ...no matter what they do you've got to keep going...*

#### Effect of mental health difficulties on parenting capacity

Eight of the ten participants stated that they felt that their mental health difficulties had made it difficult at times to look after their children.

*I remember one day (my child) was crying...all the shopping needed unpacking and all the breakfast dishes were lying around, and I couldn't think what to do first...I just sat on the floor and cried...and I was doing that all the time, everything was too much...*

#### Parents' attempts to protect children

It seemed that most participants had reflected on the impact of their problems on their children and had tried to take steps to hide the symptoms of their difficulties. Seven of the participants said that they made a concerted effort to hide the way that they felt. A

number of participants reflected though that despite their best efforts, their feelings were likely to have been picked up by their children.

*I tried to be jolly all the time because I didn't want him to have an experience like I did...but unfortunately it spilled over because I was getting so angry...I think he picked up on that...*

#### Impact on children – now and in the future

Seven out of ten participants said that they felt that their problems had had an impact on their children and for many this was clearly a great source of concern.

*They've had to grow up quicker, they've had their childhood cut short I suppose...when I'm ill I've talked about things I shouldn't, you know what I mean? That's not right... (my son) is very protective of me, (my daughter)'s way of dealing with it is to just shut herself away in her room...*

*The kids schooling, it's really brought them down, because they was concerned about me...they went through a bad patch as well as I did...*

Participants worried not only about the immediate effects of their difficulties on their children but also about the long term implications. Eight out of ten said that they worried about their children developing the same kinds of problems as they had.

The authors were struck by how many participants brought up the subject of their marital/relationship difficulties, and voiced their concerns about the impact that these problems were having on their children. It may well be just as important for services to consider the needs of children in relation to relationship discord, as to mental health difficulties.

#### Parents talking to their children about their mental health difficulties

Three of the respondents had not provided their children with an explanation as to what was going on. In one case this was because the child was only aged two, and it was not felt to be appropriate. Other participants questioned the appropriateness of adults talking to children about problems, saying ‘children have got a right to their childhood’.

However, seven respondents had made attempts to provide an explanation of sorts and felt that it had been important to do this.

*I think you have to tell a child something, you can't leave them to fantasise about what's gone wrong...without giving too much detail I think you can be clear about what's gone on...I told him how I felt and that I got very tired, just used simple words...*

*They know Daddy's been ill, and it's a mental illness, and I've had to go away...I think it's given them the reassurance that Dad does still love them,*

*that I was ill but things can get better, ...that its nothing to do with them or anything they've done...*

### Services for parents and children where there is parental mental health difficulties

When the idea of services supporting parents in providing explanations and addressing the impact on family life were discussed, all ten participants said that they felt it was a good idea, and a number of participants said that they would have been interested in taking up such a service, had it been available to them.

*I think anything that makes a child feel more 'in the know' is a good thing...it's better than them wandering around creating all sorts of strange stories in their own mind, and nobody saying anything like they did years ago...they need to know the real facts...to be honest is the best thing...so long as it's age appropriate...*

Two parents voiced some concerns about such a service. They worried that practitioners would take control of such meetings and force them to reveal information that they would rather not. These participants both stated that they would only be happy to participate if they could retain the freedom to veto discussion of topics that they felt would be too difficult for their child to accept. For example one participant said that she would not like her child to engage in a discussion of what would happen if she became unwell again:

*With my son, that may be too frightening for him at the moment, to look at what would happen if I got unwell again...because now he's home again (from a foster placement) that would touch on all his insecurities and worries...*

When asked what other types of help might be useful, four participants said that they would welcome the opportunity to meet other parents in the same situation, in order to feel less isolated, and to learn about how other people cope. One person said that they would like to see groups set up to support parents whose children are in care, in order to manage the sense of stigma and isolation. Three participants said that practical help would be most useful to them, such as the provision of respite care, so that they could spend as little as an hour being free from the demands of parenting.

#### The other side of the story – resilience and hope

It is important not to paint a picture that is too bleak. A number of families gave examples of their children doing very well. The first author saw glowing school reports and pictures of children on holiday, obviously having a great time. Some participants reflected that the outcome of their problem was not only negative, and said that the knowledge that there were problems had made them work extra hard to be a good parent and build a strong relationship with their child.

*I'm trying to give him a different sort of life...I can see he's got a different outlook, I've tried very hard to enjoy him, and my mother never did that, she never enjoyed me at all, and he's bloomed with that...and he's enjoying school*

*now, I never did... because we are so close I think he's had a different experience to me...*

### **What does this mean for our practice?**

All children with a parent with mental health difficulties will construct some form of understanding of the changes they see in their parent. Cooklin (2004) highlights that in the absence of being given information, children continue to develop their own stories and these stories may well be more frightening than the reality around them. Several authors have highlighted how the nature and extent of children's understanding of parental mental health problems can have an important impact on how well the child adapts to their circumstances (e.g. Daniel & Wren, 2005; Falcov, 1998; Focht & Beardslee, 1996; Fredman & Frugge, 2000). Therefore, conversations with children about parental mental distress could have a crucial preventative function in the lives of these children.

Services can play a meaningful role in facilitating such conversations between parents and their children. These conversations could take different shapes. From a Narrative Therapy position it could involve a close exploration of the complex and evolving stories that family members tell about their experiences of the mental health difficulties of the parent and the meanings children attach to their experiences and the behaviour they observe (Fredman & Frugge, 2000) or, from a psycho-educational perspective, it could involve providing families with factual information and clear explanations of the parent's difficulties (Focht & Beardslee, 1996). This study indicates that parents would value such services and that they would want these to be

collaborative interventions, valuing their role as parents and knowledge of their children.

In our view it is important for mental health practitioners to be aware of the needs of families as a whole. Parents should be asked about their children and the impact their mental distress might be having on their children. There should be space to discuss how services can be helpful in addressing these impacts and the required input should be available for families. Children should have access to conversations that facilitate the development of coherent narratives of their experiences. Most importantly, practitioners should make these safe conversation for parents and children to have.

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### **Affiliation**

Rachael Lippett - Hertfordshire Partnership Trust

Lizette Nolte - East London and City Mental Health Trust

**Address for correspondence:**

Rachael Lippett,

Cranborne Centre CMHT, Mutton Lane, Potters Bar, Hertfordshire, EN6 3AA

Email: Rachael.lippett@hpt.nhs.uk

Lizette Nolte

Family Mental Health Team, Lower Clapton Health Centre, 36 Lower Clapton Road,

London, E5 0PQ

Email: Lizette.nolte@elcmht.nhs.uk