

Enhancing impact and reach with vulnerable families

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Parenting and serious mental illness (SMI)

- 50-66% of people with SMI live with one or more child under 18
- Parental SMI is associated with increased risk of adverse outcomes for children
 - Poorer mental and physical health
 - Behavioural, social and emotional difficulties
 - Longer term, social/occupational dysfunction, lower self esteem, increased risk of mental health difficulties, alcohol and substance misuse

Current approaches

- Existing approaches focus on parental mental health
- There is evidence that SMI can be significantly improved using psychologically-based approaches
- Adult and child services are often separate
- Children's needs often go unrecognised
- Some research on parenting and depression, but rarely bipolar disorder or schizophrenia/psychosis

Considerations

- To what extent do we need to tailor interventions?
- What additional information or support may parents need?
- User involvement key to identifying changes that may help uptake and engagement

**FAMILIES WITH A
PARENT WITH BIPOLAR
DISORDER**

Reaching a Balance

Families with a parent with bipolar disorder

Survey and RCT using web based and self-directed resources

- Advertised via self-help networks
- 19 intervention, 28 comparison
- 92% participants were mothers
- Mood Disorder Questionnaire mean scores for parent 12.5 (cut-off =9)

Calam, Jones, Sanders, Dempsey & Sadhnani (2012)) *Behavioural and Cognitive Psychotherapy*

Jones, Calam, Sanders, Diggle, Dempsey & Sadhnani (2013) *Behavioural and Cognitive Psychotherapy*

Percentage in contact with health professionals in the last 6 months, each parent

	Self	Partner
Psychologist	66	18
Psychiatrist	20	20
Counsellor	66	28
Social worker	76	18
Other	46	24

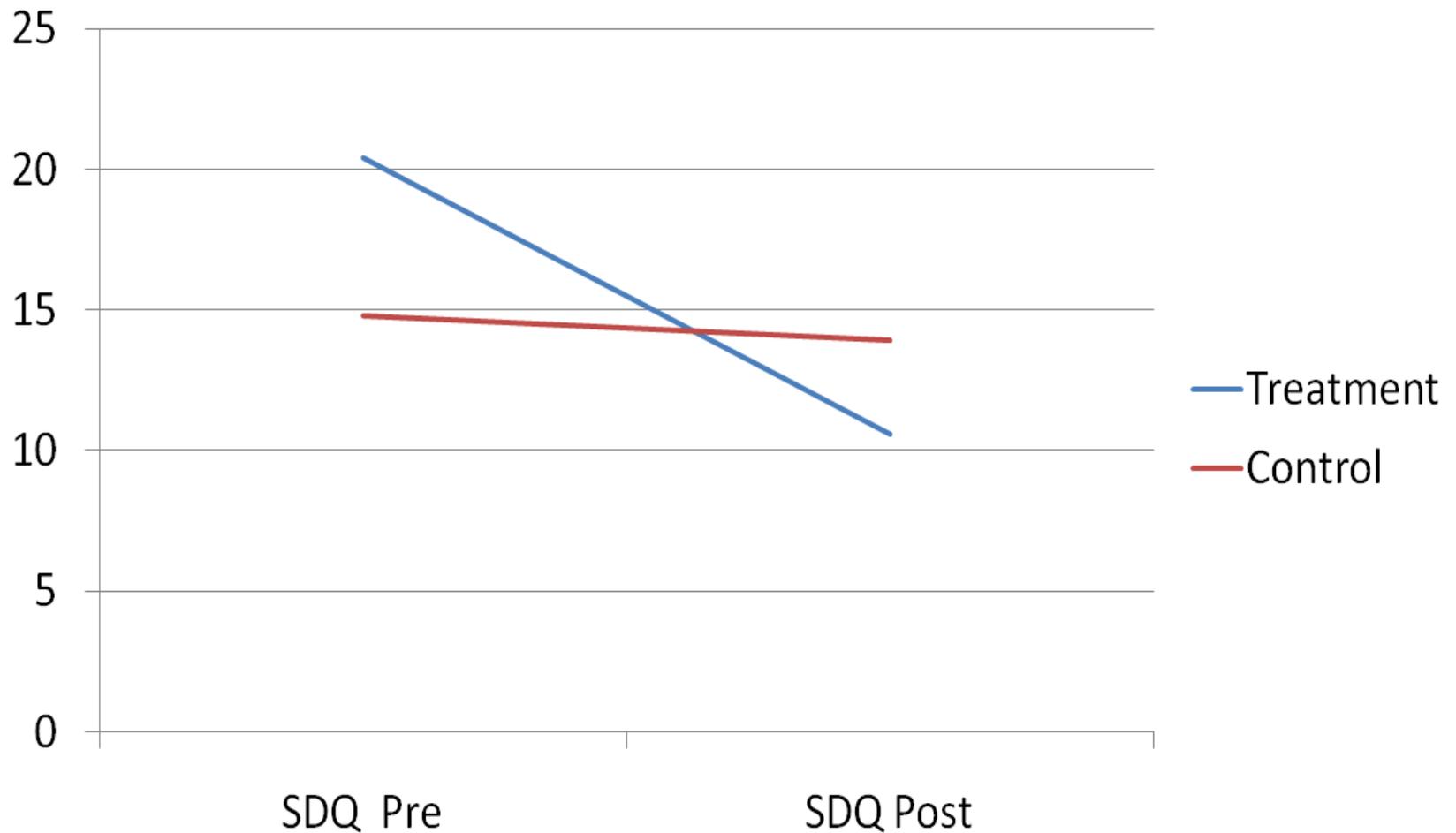
16.7%(8) seeing, or waiting to see, someone on
child's behalf

Reaching an Balance:

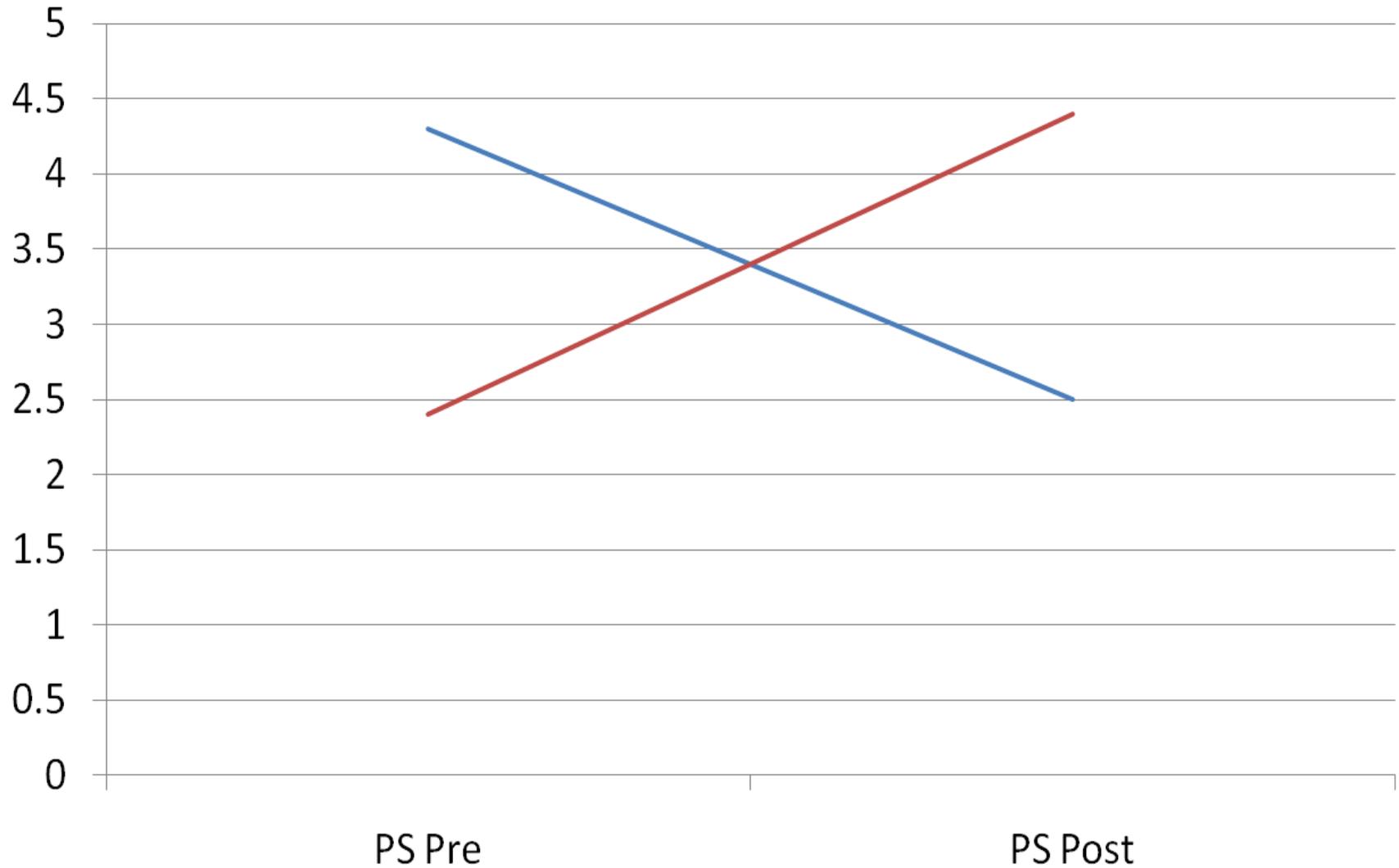
Parent ratings; Strengths and Difficulties Questionnaire (SDQ)

SDQ	Mean (SD)	Cut-off (border -line)	Percent borderline/ clinical range
Emotional symptoms	4.0 (2.5)	4	58%
Conduct problems	4.4 (2.6)	3	61%
Hyperactivity	5.8 (2.4)	6	56%
Peer problems	3.0 (1.9)	3	59%
Prosocial behaviours	6.0 (2.2)	5	45%
SDQ total	17.2 (6.1)	14	73%

SDQ Total difficulties mean scores, pre and post



Parenting Scale mean scores, pre and post



Children's experiences of living with a parent with bipolar disorder

- Qualitative interviews with children aged 4-10 using the "In My Shoes " computer-assisted interview
- Thematic analysis

Backer et al (submitted)

Well when he's erm sad and depressed he erm tells us...but when he's giddy I don't think he can really tell... We can, but he can't (Thomas, aged 9)

It's the same when she's unwell she gets she sleeps for the whole day...and then she gets more sleep at night (Connor, aged 6)

Err she's [sic] tell off she'd tell off [brother's name] but she wouldn't entire entirely be too comforting to me, she'd still comfort, but not as much as maybe another mother would. I don't mind that cos I don't like too much comforting, it makes me feel uncomfortable (Jake, aged 9)

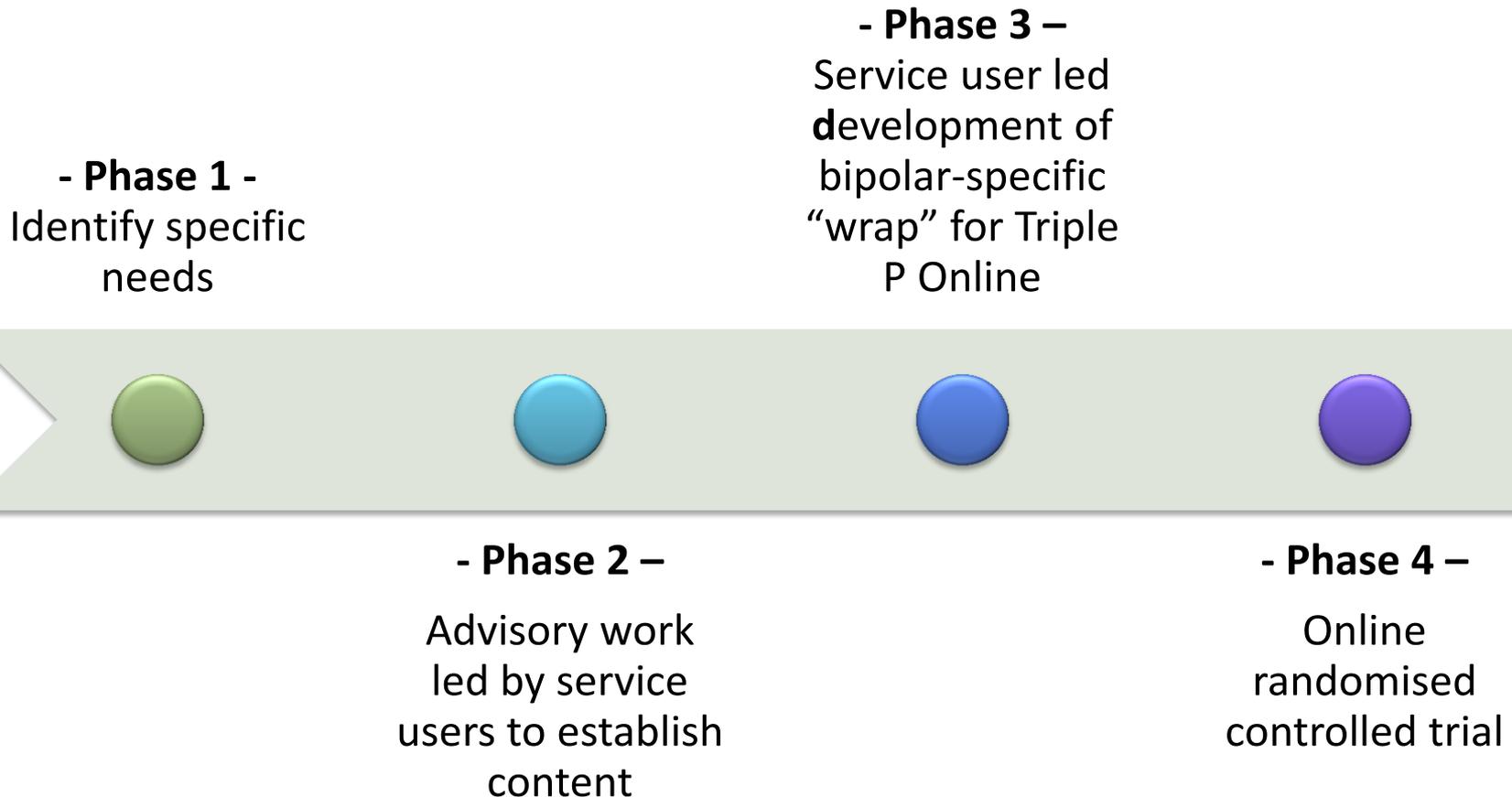
Erm daddy's normally erm with us looking after us by his self...especially when she went in hospital (Michael, aged 7)

Well erm he thought I had it...Cos I was getting more and more... I was having more and more things to do with Bipolar and he's told me that I might have it...And that's when he told me about what it does (Thomas, aged 9)

Web-based integrated bipolar parenting intervention for bipolar parents of young children

- Jones, Calam et al MRC Experimental Medicine for Mental Health
- Based at Spectrum Centre, Lancaster University
- Currently recruiting (target, 100 families)

Parenting and bipolar disorder





Username * Password *
[Input fields]

Request new password Log in

Participant Information About giving consent Register now! Contact us

Information
• The IBPI team
• Contact us

The Spectrum Centre for Mental Health Research
• Spectrum website
• Other research projects
• Spectrum on Twitter
• Spectrum on Facebook

Helping Parents with Bipolar

Want to know more?

WHAT IS THE STUDY **WHY** DO THE STUDY **WHO** CAN TAKE PART **HOW** DOES IT WORK **JOIN** THE STUDY **ABOUT** THE TEAM

What do we offer?

People with bipolar disorder may find that their changes in mood make the delivery of consistent parenting more difficult than for parents without bipolar disorder. This online parenting support programme combines self-management strategies for bipolar disorder.

Parenting Support

Parenting can be extremely rewarding and enjoyable but also frustrating and exhausting. This site addresses a range of situations and techniques for helping you to support your children's growth and manage difficult behaviour with positive parenting approaches.

[Find out more...](#)

Bipolar Self Management

Bipolar can bring positives to parenting but large mood fluctuations can make parenting more challenging. This site looks at the impact of extremes of mood on parenting and how to maintain consistency in your parenting.

[Find out more...](#)

WELCOME TO IBPI
AN OVERVIEW
AND AIMS OF
THE WEBSITE



Contacting us about the study

If you have any questions or comments regarding this study, please contact: -

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Email: h.vincent@lancaster.ac.uk

FAMILIES WITH A PARENT WITH SYMPTOMS OF SCHIZOPHRENIA AND PSYCHOSIS

Issues for families and services

- Sz conditions affect 0.4-1.4% of adults
- UK Department of Health recommends family interventions for all families living in close contact with someone with schizophrenia
- 2012, DH notes that family interventions overlook the needs of families with children
- At present fewer than 3% of service users access an evidence-based family intervention

Current provision

- Bee et al 2014 commissioned systematic review of parenting and QoL in SMI: Only 3 randomised controlled trials of parenting intervention, none recent
- Schizophrenia Commission 2013: Services fragmented and service users and families insufficiently central; need family friendly care

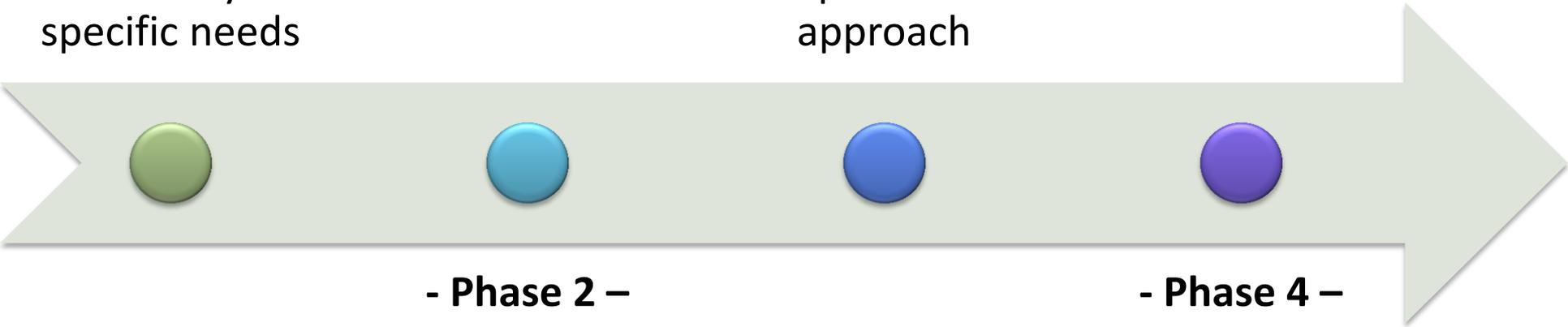
Parenting and psychosis

- **Phase 1** -
Identify
specific needs

- **Phase 3** –
Case study
pilot of
approach

- **Phase 2** –
Advisory
groups to
establish
content

- **Phase 4** –
Trial feasibility
of recruitment



1. Identifying specific needs

- Consultations via:
- Individual meetings with service users diagnosed with schizophrenia (Sz) who are parents
- Work with Rethink Carer's Forum (the major charity championing the perspectives of people diagnosed with Sz)
- Collaborative events for service users, clinicians and academics, parents diagnosed with Sz and their family members and/or others helping to support them to discuss the proposal

Identifying key questions:

- Parents would have liked to have input on parenting
- Hard to reach families
- Fear
- Need to take time and allow for pauses in the programme
- Identifying who in the family can take the lead with the programme

2. Planned service user involvement to aid design and implementation:

- i) interview schedules and intervention manuals
- ii) family-centred participant information sheets, consent forms and publicity materials
- iii) recruitment approaches to identify challenges and maximise study entry
- iv) child safeguarding issues
- v) length of the intervention and maintaining engagement

3. Case study pilot

- FI approach with identification of parenting needs as stressors in context of Sz
- Baseline
- Every Parent's Self-Help Workbook
- Individual encouragement and support for the family
- Review of process and outcome

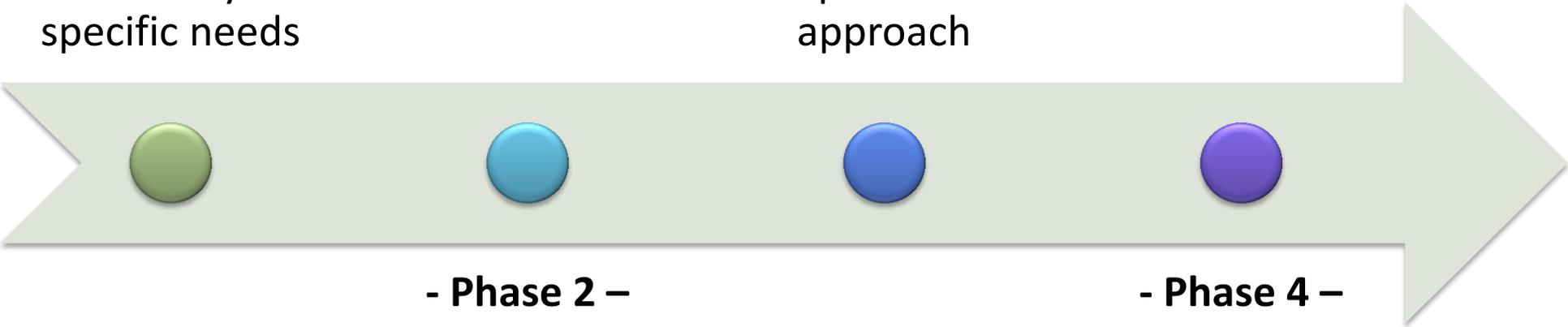
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- Different conditions, different questions and approaches
- Significant differences in engagement with service user involvement invitations
- Consequences of inaction are profound

Freefalling...[Dad]'s not a care in the world he's, he enjoys what's happening now and doesn't worry about the future...which is what me and mummy do

(Jake, aged 9)

Thank you to:

Steve Jones and all at the Spectrum Centre; Yvonne Awenat and all the community members who have helped; Clare Backer; Penny Bee; Kim Cartwright; Rob Dempsey; John Fox; Gill Haddock; Rebecca Murphy; Vaneeta Sadhnani; Matt Sanders; Chris Taylor; Fiona Ulph; Helen Vincent; Anja Wittkowski; all the charities, self-help groups and families who have participated

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