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Bridging the gap

Supporting families where parents have a mental health problem

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Presentation outline

- About SCIE
- The parental mental health network
www.scie.org.uk/mhnetwork
- Supporting families and children: the issues
- Discussion.

About SCIE

- Launched in 2001, SCIE develops and promotes knowledge about good practice in social care.
- SCIE works with people and organisations to identify useful information, research and examples of good practice.
- SCIE produces free paper- and web-based publications and Social Care Online
- www.scie.org.uk

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Fact file

- 5.7 million adults have a mental illness at any one time.
- 1.7 million adults, with 2.5 million, children experience mental illness.
- 10,000 children and young people are caring for a mentally ill adult
- 33% of children who have emotional problems have a mentally ill parent
- Of the children 'known' to childcare services, one-third to three-quarters have a mentally ill parent.

What children want

- To be safe.
- To be taken seriously, to get information.
- Help in emergencies.
- Practical and flexible help.
- Someone to talk to.
- Someone who listens.
- Help for their parents.
- To relax, have fun.

What parents want

- Help to keep children safe.
- Help with parenting, respect for their parenting role.
- Holistic responses.
- Practical, flexible help.
- Care for children when necessary.
- Not to be separated from their children.
- Better hospital visiting provision.

What professionals want

- Better training:
 - Childcare workers want training about mental health.
 - Mental health workers want training about child care.
- To be able to respond early.
- Partnership working and joint approach.
- Guidelines and protocols.
- A family approach: 'think family'.

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The Parental Mental Health and Child Welfare Network

- **Who is it for?** Social care and health workers working with parents with a mental health problem and their children.
- **What's the aim?** To share and disseminate research and practice examples and promote joint working between adult mental health and children's services.
- **Tell me about the website.** It's part of the SCIE website and includes information, links, and information about the network and related events.
www.scie.org.uk/mhnetwork

www.scie.org.uk/mhnetwork

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Network menu

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Parental Mental Health and Child Welfare Network

Welcome to the Parental Mental Health and Child Welfare Network website. The network is for social care and health workers who work with parents with a mental health problem or their children. It has been set up to promote joint working between adult mental health and children's services.

This sub site of the Social Care Institute for Excellence (SCIE) website includes information about the network, links to key resources in adult mental health and children's services, and information about network and related events.

You can contribute to the site by submitting practice examples, links and key messages from your own research.

You can also fill out the [online form to join the network](#).

If you've joined the network already, we hope that you received your copy of SCIEDrive in the post.

Questionnaire

You may like to participate in an interesting study by completing this brief questionnaire. It relates to the case of a psychiatrist, Dr Daksha Emson, who killed herself and her daughter while experiencing severe mental illness. This case raised important issues about how parents who have mental health problems, and their children, are treated when the parent belongs to the same, or a closely related, professional group.

- [Download questionnaire](#) (17kb PDF file)



Join the network

Join the network using our online [membership form](#).

Submit your practice examples

Contribute to guidance for SCIE's [Parental Mental Health and Child Welfare Network](#).

Have your say

SCIE has launched a

Network newsletter

sciedrive

February 2005

Newsletter for the Parental Mental Health and Child Welfare Network



NETWORK NEWS

Since the Parental Mental Health and Child Welfare Network was launched in summer 2004, nearly 500 individuals and agencies have joined it to share information, debate and learn from others.

The outstanding response to the network, which is the first of its kind, demonstrates the growing level of national interest and awareness in this area.

Practice Development Manager at SQE Marie Diggins, said she was overwhelmed by the response. "As a practitioner in adult mental health, I knew there was a desperate need for a network such as this, but even so, the response has been outstanding."

Over the next two years, SCIE will hold a series of study days to enable network members to get together to share their knowledge. In collaboration with the National Institute for Clinical Excellence (NICE), SCIE will also undertake a systematic review which aims to find out how to offer effective services to families with an adult

with a mental health problem, including families from a black and minority ethnic background. The review aims to discover what can reliably be said to be good practice. On the basis of the review we will produce national practice guidance, including practice examples and useful tools to aid implementation.

This work will draw on the important contribution of network members. We want to learn what you are doing locally and about your experience of working in or receiving services. You can share your practice examples by emailing mhnetwork@scie.org.uk.

We hope that the network will continue to grow and that our knowledge will develop. SCIE has established a website, www.scie.org.uk/mhnetwork, to enable network members to share information such as events and topical issues and to access useful resources, websites and organisations.

You can join the network for free online at scie.org.uk/mhnetwork.

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IT COULD HAPPEN TO ANYONE

BY DORIAN COLE

When Janice's grandmother died, Janice lost one of the most important people in her life. She started to become depressed, scared that other people in her life would also die. With a son of 18 months, Stephen, Janice's husband Brian had to give up his job to care for him.

Like many people, Janice didn't realise that she had a mental health problem—she was convinced that she had a serious physical illness and that she was going to die. It is only now when I look back that I can see that was awful. I still find it hard to believe that being upset emotionally could have such a dramatic effect on how I felt physically."

Janice tried to get help for her self by taking her to the GP, who only spent about two minutes with her. "We wanted space to be listened to and it wasn't available," Janice said. They then went to a hospital where Janice was prescribed antibiotics— they didn't work.

As her illness worsened, Janice and Brian sought the help of their local mental health services. They first met a GP who said, "You've got a physical problem, nothing is wrong with you, either there's a mental illness. Depending, they went to six hospitals and eleven doctors, each of whom came up with a different diagnosis.

Finally, without an answer, Brian begged the mental hospital to admit Janice, which they did. However, after just two days, Janice was so worried about her son Stephen that she left. It was a long up and night every day and she had to work to the point to tell them, all they did was go back to sleep or we'd have to separate."

After she left the hospital, Janice's GP prescribed anti-depressants and took by her to the mental health centre but no one explained her illness to her and how her physical

illness may have been caused by her mental state. However, a few weeks later when Janice wasn't working, Stephen decided on to a bookcase and pulled it down on himself. He was badly hurt and required hospital admission. Janice often, a child protection investigation was arranged.

"The fact that I had mental health difficulties made these points clearly apparent. It's not surprising, looking back, that these services struggled to get their heads around what was going on for me—the mental health services couldn't even agree with each other but now I can't help but think that if I'd been mentally well, everyone would have said 'It was an tragic accident' and child protection wouldn't have even felt the need to investigate."

"What makes me most angry about the child protection investigation is at the time, effort and resources that were used at the time—of only we could have had some resources when we asked for it," Janice said.

"When the child protection staff started it so much—people looked at us like we were crazy... maybe that was because people thought I was a police photographer came to record Stephen's injuries. I wanted to be reassured as to the ground," Janice said.

"When I was married, my husband's opening, I had just lost my grandmother, and it all hit me. Then on top of the care the accident and the investigation, which added to my distress and made things worse. The tapes kept being

added and added... my god, my mental illness, Stephen's injury, being in hospital, the investigation, being constantly under the spotlight... "Wherever started at the time was help, having our son in hospital with broken bones and in pain every day. Our lives were turned upside down by loss of different professionals coming in and out of our home. We had to attend numerous meetings, court, and several solicitor appointments almost every day. Our lives were under constant scrutiny."

"The whole process, including Janice's mental health difficulties, Stephen's accident, and the investigation left us feeling like we must have been bad parents, even though we knew that wasn't true. It felt so weird about how we would be seen and what services we would receive if we needed help. We were never asked to go to the hospital, to our doctor, or to other professionals. In fact they thought we'd had a breakdown or psychosis."

"It's now over a year since Stephen was in hospital. He's made a good recovery from his accident and has just started nursery. The child protection investigation was dropped. To be honest, I think he's had people believe us and help us as if only we could have had that when we needed it most."

Names and identifiable information have been changed. The article is produced with Janice and Brian's permission.

"The fact that I had mental health difficulties made them particularly suspicious."

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Children Act 2004: Cooperation to improve well-being

- Each children's services authority in England must make arrangements to promote cooperation between:
 - the authority
 - each of the authority's relevant partners
 - such other persons or bodies as the authority considers appropriate, being persons or bodies of any nature who exercise functions or are engaged in activities in relation to children in the authority's area.

Mental health and social exclusion

“The Department of Health will commission SCIE to conduct a systematic review of evidence and existing practice by health and social care services in parenting needs, including meeting the needs of ethnic minority parents; and to publish new guidelines. In developing these guidelines, SCIE will, if appropriate, collaborate with the National Institute for Clinical Excellence”

(Mental Health and Social Exclusion Report - SEU (2004))

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What SCIE is doing

- A systematic review of evidence and health and social care practice.
- Developing national guidelines.
- Promoting evidence based practice.
- Work on supporting disabled parents.

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