



Information sheet 13

Parental Mental Illness can be a Child Protection issue

Mental illness is common with one in five Australians - many of whom will be parents of dependent children - experiencing it in any given year¹.

It has been estimated that between 21% and 23% of children living in an Australian household have at least one parent with a mental illness, and that between a third and two thirds of these children will experience difficulties. For instance, children who have a parent with a mental illness have been identified as having a greater chance of having mental health issues themselves². Being the child of a parent with a mental illness does not automatically lead to emotional disturbance, nor does it mean that the parents will not be able to care adequately for their child or that they will abuse or neglect that child.

However, mental illness, especially when not adequately managed, inevitably causes problems across a range of domains, including parenting capacity. There is significant potential for parental mental illness to adversely affect children and several studies have indicated that there is a greater incidence of mood disorders – particularly depression and anxiety, ADHD and substance abuse amongst children with a parent with a mental health disorder³. However, there is other research which highlights that the direct effects of parental mental illness are less detrimental to children than the poverty, homelessness, social ostracism and unemployment often associated with adult mental illness.

Children whose parent(s) have mental health issues are also at heightened risk of other adverse consequences including; perinatal complications and other health problems in infancy, social and behavioural problems in childhood and adolescence and stress associated with caring for a parent. There is also strong evidence of a link between parental mental illness and child maltreatment with 'parental mental health issues' cited as a significant reason for the reporting of children to child protection services⁴. There is also substantial evidence that the co-occurrence of other complex problems alongside mental illness; substance misuse, domestic violence, social deprivation and prior abuse as a child (itself associated with elevated mental illness) is linked to a significantly heightened risk of child maltreatment.

¹ MJA Open. 16 April 2012.

² <http://www.health.gov.au/internet/mentalhealth/publishing.nsf/content/copmi-1>

³ MJA Open 16 April 2012 p 7-10

⁴ NSW Dept of Community Services: Parental mental health and its impact on children 2008.

⁵ Keeping the children in mind; child protection practice and parental mental health. June 2011.

Specific abuse and neglect risks to children.

A recent South Australian Department for Families and Communities research project⁵ with families with parental mental health issues engaged in statutory child protection services noted that:

Child neglect (63.6%) and emotional abuse (56.8%) were the most common forms of abuse experienced by the children; physical (10.8%) and sexual abuse (4.3%) were less common. This is consistent with previous studies which suggest that the symptoms of mental illness can impair a parent's ability to perform basic tasks such as feeding and clothing, nurturing, and maintaining adequate discipline and supervision.

Caseworkers reported that parents often had difficulties in being able to meet or focus on their child's emotional and developmental needs, lacked empathy and insight and held unrealistic expectations of their child's behaviour, responsibility and independence. (pg 3)

Perinatal mental health

The developmental vulnerability of infants, including their total dependence on the adult to meet all their physical, emotional and social requirements makes the issue of postnatal depression a significant risk factor for healthy childhood development. In particular, the impact that post natal depression has on interfering with the establishment of the secure attachment relationship between mother and infant essential for healthy psychological development needs to be considered within the context of emotional neglect.

Paternal mental health

Although the impact on a child of their father's mental illness may be lower than that of a mother, especially if the mother is the primary carer, the potential for the child suffering abuse or neglect remains; and is heightened significantly if both parents have a mental illness, especially if it is untreated. As with maternal mental illness, the co-occurrence of other risk factors in fathers experiencing mental illness; specifically substance misuse, domestic violence and harsh parenting, increases the risk to children of being abused or neglected.

Protective factors

There are several factors that can mitigate against adverse child protection outcomes for the children of a parent with a mental illness, with the most significant factor being parental ability and willingness to seek help and treatment compliance. Other factors include:

- parental ability to manage stress
- motivation and acceptance of responsibility
- the quality of support available to the family
- the child's developmental status
- parental ability to meet the child's needs and
- the nature of the relationship between parent and child.

The intent of a caregiver with a mental health issue to do their best as a parent can still result in negative child protection outcomes. Alongside supporting parents with mental health issues to manage their mental health issues, the focus of all health workers needs to be on assessing the impact on the child, rather than on focussing on the parent(s) attempts to parent adequately.

Whenever a health professional has clear concerns of physical, emotional, sexual abuse and/or neglect happening to the child they are seeing, or any other child in the family, they have a responsibility to take action to ensure that protective measures are put in place.

Refer to *Guidelines for Protecting Children 2015* for further information and guidance.