HOW YOUR DISABILITY AFFECTS YOUR CHILD

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Psychiatric disabilities come with many unique challenges. When you couple having a psychiatric disability with being a parent, there can be even more concerns — those that have to do solely with the psychiatric disability, those that have to do solely with parenting and those that involve the intersection of both. In these instances, arming yourself with knowledge about your psychiatric disability and its effects on your children and your family can be incredibly helpful. In this module, we will discuss how to educate yourself, your supporters and potentially your child about your psychiatric disability, and we will discuss prejudice, recovery and empowerment for you. We will examine the impact of mental health issues on your family, including how to recognize whether your child has a mental health issue. As a result of completing this module and doing the work that accompanies it, you should have a better understanding of your mental health and its effects on your child. This has the potential for making you a better parent.
IN ORDER TO KNOW HOW YOUR PSYCHIATRIC DISABILITY WILL AFFECT YOUR FAMILY, YOU FIRST NEED TO UNDERSTAND HOW IT AFFECTS YOU. Learn as much as possible about your psychiatric disability by talking to peers, reading books and trusted websites, participating in Internet peer support, and talking to your treatment providers. When you talk to your treatment providers, bring a list of questions you have from your research. Do not be afraid to ask about alternative therapies or medications that you have heard of but not tried. Be sure to know the side effects of the medications you are taking and their effects on your ability to function and parent. If you are not satisfied with your treatment providers, consider seeking second opinions or trying new providers. In all these ways, you are being proactive about your mental health, and this is an important step to having a better quality of life.

In addition to educating yourself about your psychiatric disability, you should teach your supporters about some of the signs and symptoms of your condition and how your supporters can best assist you. Your supporters are the people you rely on for help and comfort in times of need. They may be your parents, siblings, other relatives or friends. They can also be your peers who have psychiatric disabilities. It is important for your supporters to understand your psychiatric disability in order to best support you. For instance, if you are feeling depressed, they should know what that looks like for you. You may be unable to articulate what you need when you are depressed, so it is helpful for your supporters to know ahead of time that you would like them to take care of your children for the afternoon or bring a meal over to your house for dinner. Often, the best time to let your supporters know what you might need in the future is when you are experiencing a relatively stable period with your psychiatric disability.
One reason people aren’t always proactive about their psychiatric disabilities is that sometimes they don’t want to face the fact that they have psychiatric disabilities. Family members and friends also may misinterpret the symptoms they see. Most likely, these people are experiencing negative beliefs about psychiatric disabilities, although lack of insight is a symptom of some disabilities. In any case, negative beliefs can complicate accepting a psychiatric disability in oneself or others.

Prejudice is a negative judgment of people based on a personal trait. It exists because of stereotypes and years of ingrained myths and misconceptions. It was once presumed that psychiatric disabilities were due to personal weakness. For many years, it was also presumed that family members were the cause of a person’s psychiatric disability. There are still common myths that people with psychiatric disabilities are more dangerous or less intelligent than people without psychiatric disabilities.

Why do these misconceptions persist? Certainly, the media have played a role in distorting the images we have of people with psychiatric disabilities. Newspapers and television news programs will often point out if a person who commits a violent crime has a psychiatric disability. Jokes about people with psychiatric disabilities, the use of discriminatory language and even labels such as “a schizophrenic” rather than “a person with schizophrenia” all reinforce prejudice. While progress is being made in combating some of the barriers that prejudice about psychiatric disabilities causes, there is much more work to be done. And while combating prejudice in society is important, it is also important that you recognize it in your own life and not let it interfere with your treatment and your family.

How can you cope with prejudice and negative beliefs?

• Make sure you get treatment, even if you fear being labeled with a psychiatric disability. This will help you feel better and allow you to be a better parent.

• Seek support from others, particularly people who have psychiatric disabilities. While it may be difficult to share with others that you have a psychiatric disability, peers are bound to respond with compassion and assistance because they have been there themselves. Do not let your psychiatric disability lead you to feel isolated. You are not alone! In fact, one in four people have psychiatric disability.

• Use person-first language. Do not call yourself by your disability or equate yourself with your disability. Instead of “I’m bipolar,” say, “I have bipolar disorder.” Better still, avoid labeling yourself altogether. Remember that you are not an illness; you are so much more than just your psychiatric disability.

• If you find that you are feeling a lot of shame or self-doubt regarding your psychiatric disability, get help for these issues as well. Talking to peers may help improve your feelings about having a psychiatric disability. Counseling or psychotherapy with the right person may also improve your self-esteem. For some, counselors and psychotherapists can be really helpful. However, it is important to recognize that some therapists directly or inadvertently contribute to lowered self-esteem. Give yourself permission to seek another therapist if you find yourself feeling worse about yourself as a result of how your therapist treats you.

• Be sure to learn the truth about psychiatric disabilities. Do not be swayed by old myths and misconceptions.
Recovery is absolutely possible for every person who has been diagnosed with a psychiatric disability. Recovery is a concept that has been researched and written about since the mid-1980s. William Anthony, the director of the Boston Center for Psychiatric Rehabilitation, has developed a definition for recovery that is often quoted by researchers and writers in the mental health field. Recovery is “a deeply personal, unique process of changing one’s attitudes, values, feelings, goals, skills and/or roles,” according to Anthony’s definition. “It is a way of living a satisfying, hopeful, and contributing life even with limitations caused by the illness. Recovery involves the development of new meaning and purpose in one’s life as one grows beyond the catastrophic effects of mental illness.”

Another definition of recovery comes from Pat Deegan at the Boston University Institute for the Study of Human Resilience: “Recovery does not mean that one is ‘cured’ nor does it mean that one is simply stabilized or maintained in the community. Recovery often involves a transformation of the self wherein one both accepts one’s limitation and discovers a new world of possibility.” Thus, recovery is not seen as having a cure for a psychiatric disability, but rather as having the ability to live a meaningful and productive life despite one’s disability.

Many components further define recovery from psychiatric disabilities. Empowerment is often seen as one of these components. With empowerment comes the ability to choose from a range of options and to participate in all decisions that will affect one’s own life. Another part of empowerment is the ability to join with other people who have psychiatric disabilities to collectively speak about desires. Most of all, it is having the ability to voice one’s own needs, wants and aspirations so that a person is in control of her or his own destiny.

As a parent with a psychiatric disability, you may face many challenges. Life stressors and parenting tasks may sometimes get in the way of obtaining treatment and supports. For example, you may not seek out certain supports because no child care is available. When you do not get the supports or treatment you need, you may sometimes feel like you don’t have as much control over your life as you would like. Despite these parenting challenges, it is important to arm yourself with as much knowledge about your condition as you can and to seek appropriate services and treatment for you and your children whenever possible. This will help you be more empowered and, ultimately, help you experience recovery.
Just as it is important for those people who support you to understand your psychiatric disability, it is also helpful to your children to have some understanding of your psychiatric disability. While it is up to you when and how much you share about your psychiatric disability with your children, it is important to note that when children have a better understanding of parental psychiatric disabilities, they often do better or are more resilient. This means they can bounce back from difficult situations more easily. One quality of resilient children is an accurate understanding of their parents’ psychiatric disabilities combined with the ability to view their parents’ psychiatric disabilities realistically. Resilient children also do not take symptoms personally, blame themselves, or feel responsible for causing or curing their parents’ psychiatric disabilities.

For example, research shows that when parents and children discuss depression and its effects on the family, children begin to see that they are not to blame for the problems in their families and they are also less afraid. Allowing your child to openly express feelings and making him or her feel understood will go a long way toward helping your child learn to cope not only with issues in the family, but also with many of life’s other challenges. In the next module, Helping Your Child Cope, we will discuss more specifically how to talk to your child about your psychiatric disability.
Parents with psychiatric disabilities face all of the challenges that other parents face in balancing work and home life, but in addition, these parents need to continuously manage the symptoms of their psychiatric disabilities. These symptoms may sometimes impair parenting capacity. In fact, one study showed that 80% of parents with psychiatric disabilities who were surveyed felt that their psychiatric disabilities interfered with their relationships with their children. An example of this interference might be a parent who is experiencing the symptoms of depression and has a difficult time communicating with his or her child or is not able to get out of bed to attend the child’s sporting events or other activities. As a result, the bond between the parent and the child may suffer.

It is important to note, however, that the most important predictors of parenting success are the severity and extent of the parent’s psychiatric disability, not the parent’s diagnostic label. In addition, labels are not always accurate. People with psychiatric disabilities are often diagnosed incorrectly on multiple occasions. Whatever the diagnostic label, if your capacity to parent is significantly impaired, professional interventions may help. Intervention programs should provide support for the entire family and should be offered until the needs of the family are adequately addressed.
The impact of your psychiatric disability on your family is almost always significant. Having a psychiatric disability can be a painful experience, and it can be difficult for your family members to watch you go through that pain. Having a psychiatric disability often affects where you live and work, whether you can work, and ultimately your financial situation. Loss of income can be stressful for you and your family members.

Family members may feel guilty or ashamed about your psychiatric disability either because they think they are to blame or because they do not know how to deal with your psychiatric disability. This is also the case for children. Children can feel guilty or blame themselves for their parents’ difficulty. This eventually leads to low self-esteem, isolation and loneliness. Children affected this way are called “invisible children” because they often do not receive information, treatment or support. Instead, families and professionals pay most attention to the parents at the expense of providing attention to the children.

As a parent with a psychiatric disability, you can do a variety of things to help your family members, and primarily your children. You can encourage family members to talk to other people in similar situations, in support groups, for instance. As stated previously, you can encourage your child to openly express feelings, and you can make him or her feel understood. (This and other aspects of helping your children will be discussed in greater detail in the next module, Helping Your Child Cope.) Most importantly, you can concentrate your efforts on getting well and staying well. When you are in recovery from a psychiatric disability and you feel empowered, this feeling will undoubtedly pass on to your children and other family members. You and your family will feel less anxiety and more hopefulness about the future.
will your child have a psychiatric disability as well?

Many studies have shown that children of parents with psychiatric disabilities are at greater risk for developing psychiatric disabilities themselves as compared with children of parents who do not have psychiatric disabilities. This risk increases when both parents have psychiatric disabilities.28

Where does this risk come from? Researchers believe that factors in this increased risk include both the parents’ genes and the fact that the family living environment may be more inconsistent or unstable.29 Other indicators of risk for parents of all children, but especially those whose parents have psychiatric disabilities, include poverty, marital or occupational difficulties, poor parent-child communication, parents’ co-occurring substance abuse disorders, aggressive behavior from parents, and single-parent families.30 Many of these risk factors can be reduced through preventive interventions. For example, couples therapy can help reduce marital tension.31 Co-parenting counseling for divorced or separated couples can also improve children’s sense of well-being.

Keep in mind, however, that no matter how many risk factors your child is exposed to, your child will NOT necessarily develop a psychiatric disability. Children are remarkably resilient. Resilience allows them to move forward despite the challenges they face. Many factors protect your children and make them more resilient. Examples of these protective factors are:32

- A sense of being loved by a parent.
- Positive self-esteem.
- Good coping skills.
- Positive peer relationships.
- Interest in and success at school.
- Healthy engagement with adults outside the home.
- Ability to articulate feelings.
- Parents who are functioning well at home, at work and in relationships.
- Parental employment.
- A warm and supportive relationship with a parent.
- Help and support from immediate and extended family members.

If you increase those protective factors for your children, you will be taking action to prevent psychiatric disabilities.
how can you recognize psychiatric disabilities in children?

IF YOUR CHILD BEGINS TO SHOW SIGNS OF A PSYCHIATRIC DISABILITY, IT IS BEST TO ACT QUICKLY AND INTERVENE EARLY. Talk to your child’s pediatrician and ask questions about the symptoms you are seeing. Talk to your child’s teacher and perhaps the school counselor to determine whether the concerning behavior is also going on in school. Ask the doctor or school counselor if your child needs to be seen by a specialist, which can include a psychiatrist, a psychologist, a social worker or a psychiatric nurse. You may also want to consider a family therapist who will work with you, other involved family members and your child at the same time.

It is important to recognize that not every problem is so serious that it requires intervention. Many problems that children face are part of their normal development or are reactions to everyday stressors. What should you look out for to know if your child’s problem is more serious? You should watch for behaviors that include:

- Problems across a variety of settings — home, school and community.
- Changes in appetite and sleep.
- Withdrawal from social activities or increase in fear.
- Regressive behaviors — patterns of behavior common in younger children.
- Sadness or tearfulness.
- Self-destructive behavior.
- Thoughts of death.
n conclusion, understanding your psychiatric disability and its effects is important to helping you and your children. As we have seen, the more information you and your supporters have about your psychiatric disability, and the greater understanding you have about the stigma surrounding psychiatric disabilities, the better ability you will have to cope with your psychiatric disability, advocate for yourself in getting effective treatment, and move toward recovery and empowerment. Being open with your children about your psychiatric disability and your experience with it will likely help prevent psychiatric disabilities from developing in your child. Because your child has increased risk, it is helpful to watch for the signs of behavioral health difficulties listed above. If your child does develop a psychiatric disability, you can be a positive role model for resilience and recovery. By taking an active role in understanding your psychiatric disability and its effects on your family, you are helping yourself, your family and, most especially, your children.
homework

1. Identify three supporters and let them know how best to support you when you are feeling the effects of your psychiatric disability.

2. Develop your own definition of recovery and write this down. Review it when you are feeling the effects of your psychiatric disability.

3. Think about how your child is resilient. What protective factors does she or he have?
endnotes


