Family Members with Overlapping Mental Health Needs Require the Transformation of Systems and Services

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Why are we committed to this topic?
- Parenthood is prevalent among adults with mental illness.
  - Many millions of adults with mental illness are parents, including those
    with all diagnostic categories.
  - Prevalence, incidence and risk factor study (Nicholson et al., 2004)
  - Secondary analyses of the SOC National Evaluation Data collected
    from June 2003 to March 2005
  - Caregivers were only asked about parent hospitalization and
    family risk factors at 12 months.
  - Data from SAMHSA/ORC Macro, National Evaluation of Systems of Care, April 2004;  Phase III overall sample (number of respondents varied from 2,311 to 4,357)

Common Core Program Components Identified:
- Family-centered, strengths-based practices require a paradigm shift in the way administrators and providers
  view and manage families.
  - True “family-centered” care that recognizes the strengths, needs & goals of both parents & children.
  - Bridges the needs of both parents & children.
  - Typically view the child as part of a family.
  - Emphasizes collaboration with a wide array of partners, including traditional and non-traditional partners.

UMMS Site Visit Project (2001)
- Children with Serious Emotional Disturbance (SED) receiving services in Systems of Care (SOCs) programs may have multiple family risk factors.
- Children with SED in SOCs with more family risk factors function less well at enrollment and, though they do make improvements, do not achieve the levels of functioning of children with fewer risk factors at 12 months.

Within the group of children with SED whose parents have co-occurring psychiatric and substance use disorders:
- 50% report child physical abuse
- 10% report child sexual abuse
- 3% report domestic violence
- 13% of parents have been found guilty of a crime

Effective treatment & rehabilitation strategies exist for mental illness.
- Within the group of children with SED whose parents have co-occurring psychiatric and substance use disorders:
  -・ 50% report child physical abuse
  -・ 10% report child sexual abuse
  -・ 3% report domestic violence
  -・ 13% of parents have been found guilty of a crime

The majority of adults in all diagnostic categories are parents, including those meeting criteria for affective and anxiety disorders, PTSD, and non-ffective psychoses.
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What contributes to change?
Key Program Ingredients:
- Funding mechanisms consistent with family needs & co-occurring disorders.
  - Technical assistance to programs & providers regarding state-of-the-science models for addressing
    family-centered, strengths-based practices.
  - Support prevention efforts & the development of resiliency, i.e., mental health over the life span.
  - Review routine policies & practices.

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What Administrators & Policy Makers Can Do:
- Advocate for children & families.
  - Promote adequate & appropriate treatment.
  - Provide adequate funding & support.

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