Parallel Session: Managing the risk to children of mentally ill parents: experiences of preventive action across Europe

Strand: Prevention and promotion for children and adolescents
Slot: Friday 14th September, 17:00h-18:30h
Location: NH Constanza, Room: Berlin

1. Prevention program for children of mentally ill in the Netherlands

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Abstract
Short introduction about the impact on the development of children with a mentally ill parent, risk and protective factors and focus for preventive interventions. The presentation will give an overview of the development in the Netherlands of the preventive interventions for children of mentally ill, the so-called KOPP-programme. The KOPP programme is aimed at parents with various kinds of mental disorders, their families and children between the ages of 0 and 21 years. The programme includes various interventions aimed at children of different age groups, their mentally ill parents and other key persons in their social network. The interventions comprise multiple methods such as support groups for the children, psycho-educational courses for the parents, family intervention and education, intervention for mentally ill mothers and their baby's, training mental health workers and educating the public. Currently, this programme is being implemented in all Dutch community mental health centres. It is theory-based and focuses on reducing risk factors that threaten the mental health and development of this particular group of children, and on strengthening the protective factors that are beneficial to mental health and development of the children.
Some issues concerning the implementation will be discussed:
- How did we start, what was successful in the implementation, what were obstacles?
  What have learned so far?
- How can we raise awareness for this risk group and develop and implement interventions in close and inter-disciplinary co-operation of professionals in mental health.
- The important role in the national collaborative network of prevention experts, focusing on children of mentally ill parents.
- Cooperation with research institutes to improve effect studies
- The need for (Inter-)national availability of standardized interventions.

2. Implementation of preventive child mental health methods in adult psychiatric services: Experiences and research results from Finland

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Abstract
The Effective Family Programme. Parental mental disorder presents a serious risk for child mental health. The Effective Family Programme aims to provide evidence based means for health and social services to support families with parental mental illness and to prevent children's problems. It is a research, training and implementation programme aiming at nationwide dissemination of preventive interventions. The preventive methods include The Preventive Family Intervention, developed by Beardslee in the USA and a parent focused Let's Talk about Children Discussion developed by Solantaus. They are implemented in services treating mentally ill adults. The Programme started in 2001.

Training and implementation. A group of pioneering clinicians were trained in STAKES. They were trained to be agents of change in their own organizations and regions. By 2007, 19 out of 21 health districts have started training their psychiatric staff to respond to the needs of the patients' children. A study was carried out concerning the clinicians' experiences of the preventive child mental health methods; results will be presented and discussed.

Preventive Intervention trial. Safety, feasibility and the effectiveness of the interventions are crucial for large scale implementation and a randomized trial was conducted comparing the two interventions. The study is carried out in normal clinical settings. Patients with affective disorder and their families were invited to participate. The sample is 119 families randomized 1:1 to either the Let's Talk About It” intervention or the Preventive Family Intervention.

Discussion. Family members' as well as practitioners' experiences of the interventions will be presented and discussed. The training and implementation strategy turned out to be successful. The success factors will be discussed.

3. Development in Norway: Advocacy and competence raising
Abstract
The presentation will address the development of work for children of mentally ill parents in Norway. Further outlining ways to raise the awareness for children of mentally ill parents or having parents with substance abuse. In the presentation we also will describe how we can systematically listen to children and adolescents and voicing their own experiences.

All countries in Europe has acknowledged United Nation as Human Rights Convention and Children’s Rights. This means that each country has a commitment to detect, support and help children at risk. Some experiences from Norway about how to raise the pressure on the decision makers, in politics and in the services, will be presented.

Focus will be out from the rationale why we have to act to help the children and their families, who are responsible for what and how do we manage to develop and implement routines, standards and interventions in the different services – both for adults, children and families. It is necessary to develop an understanding for competence raising, training etc. of professionals and within the educational systems.

It is needed to have an advocacy concerning children of mentally ill/children at risk for
- children’s legal rights
- a child and family focus when parents are mentally ill
- responsibility to services about routines, standards and interventions – who should do what and what outcome do we expect

All this is with the aim to change practice. The presentation will outline how we can manage to raise the awareness, develop and establish a practice so we can prevent mental illness in the next generation.

4. The prevention of postpartum depression in the project of home visiting in women daily life

Abstract
Annually in Sicily postpartum depression affects about 15 per cent of all women and is among the most common health problem after childbirth. In the territory of Palermo, this translates into more than hundreds of women who experience postpartum depression every year. Depression is not just feeling sad. Most mothers with postpartum depression are happy to be new mothers but experience symptoms such as moodiness, anxiety, lack of energy, poor memory, irritability and confusion that affects their ability to look after themselves or their baby. In an effort to support new mothers and gain further insight into
treatment options, a new Home Visiting program is being offered to mothers with postpartum depression. The program was developed by researchers of University of Palermo and is being funded by the Sicily Regional Government. Mothers who participate in the program, will be offered home visits from psychologists. They will also be given helpful advice for care giving and mother-infant bonding. This program was developed as a result of research looking into the support needs, resources, barriers to support, and preferences for support of women suffering from postpartum depression. With the definition of “Home Visiting”, there is intended the program of precocious prevention of postpartum depression, the sustenance of parenthood and the care of the risk factors in child development. This project calls for screening of the risk of depression in pregnant women who visit the 17 gynaecological services in the territory of Palermo. In the case of depression diagnosed, there will be prescribed a series of home visits for the last 2 months of the pregnancy. Two weeks after the birth, if another assessment makes a diagnosis of postpartum depression, the mother and child will be helped during the first year of the infant’s life. The project of Home Visiting has the purpose of improving the relationship of mother and child and to help the parenthood when factors of vulnerability exist. The research has brought to life that precocious assessment of postpartum depression and the intervention of Home Visiting lessens notably the risks of future psychopathologies. *PreSam, Prevenzione e salute mentale associazione onlus, Rome and Palermo, Italy.*