

INACTIVE INVOLVEMENT IN CHILD-CARING IN PATIENTS WITH SEVERE MENTAL ILLNESS: IS THERE ANY DIFFERENCE IN THEIR CHILDREN'S TRAUMA EXPERIENCE AND SOCIAL-EMOTIONAL OUTCOMES?

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BACKGROUND & OBJECTIVES

- Children of parents with mental illness (COPMI) are at an increased risk of developing psychiatric disorders, adverse health outcomes and social difficulties
- Little is known about the questions in relating to better caregiving patterns:
 - (1) Do children cared for by their parents with severe mental illness (SMIs) experience more abuse and neglect than those cared for by other caregivers in the family?
 - (2) Do they have more emotional and behavioral problems?

METHODS

- A cross-sectional, community-based study was conducted based on “the 686 program”. Children aged 7-18 years of one parent with SMIs were enrolled from Sichuan, China.
- Demographic characteristics, parental mental illness, childcaring patterns of the families were collected. The Childhood Trauma Questionnaire (CTQ) and Strengths and Difficulties Questionnaire (SDQ) were used.
- Participants were divided into two groups based on whether their parent with SMIs was involved in their caregiving (caring group N = 433 vs. non-caring group N = 399)
- Differences in demographic features, parental mental illness, the current disease severity assessed by CGI-S, and abnormality detection rates of CTQ and SDQ were compared.
- Multivariable logistic regression were conducted to identify independent factors associated with the abnormality rate of CTQ subscales.

RESULTS

- The parent of SMI in the caring group showed lower CGI-severity scores (3.23 vs. 3.71, $P < 0.001$) and lower unemployment rate (24.9% vs. 34.6%, $P = 0.002$).
- More families lived in urban areas (17.8% vs. 9.8%, $P = 0.001$) in the caring group than in the non-caring group.
- The caring group showed less emotional and physical neglect ($P = 0.001$ and 0.029) assessed by the CTQ than the non-caring group.
- Differences in children above the borderlines of the SDQ subscales were not statistically significant between groups.
- Patients' involvement in child caregiving was an independent protective factor for children's experience of emotional neglect (odds ratio [OR] = 0.507, $P = 0.002$).
- Higher severity of the SMIs was risk factor for childhood physical neglect; unemployed and unmarried status of the parents were risk factors for childhood abuse.

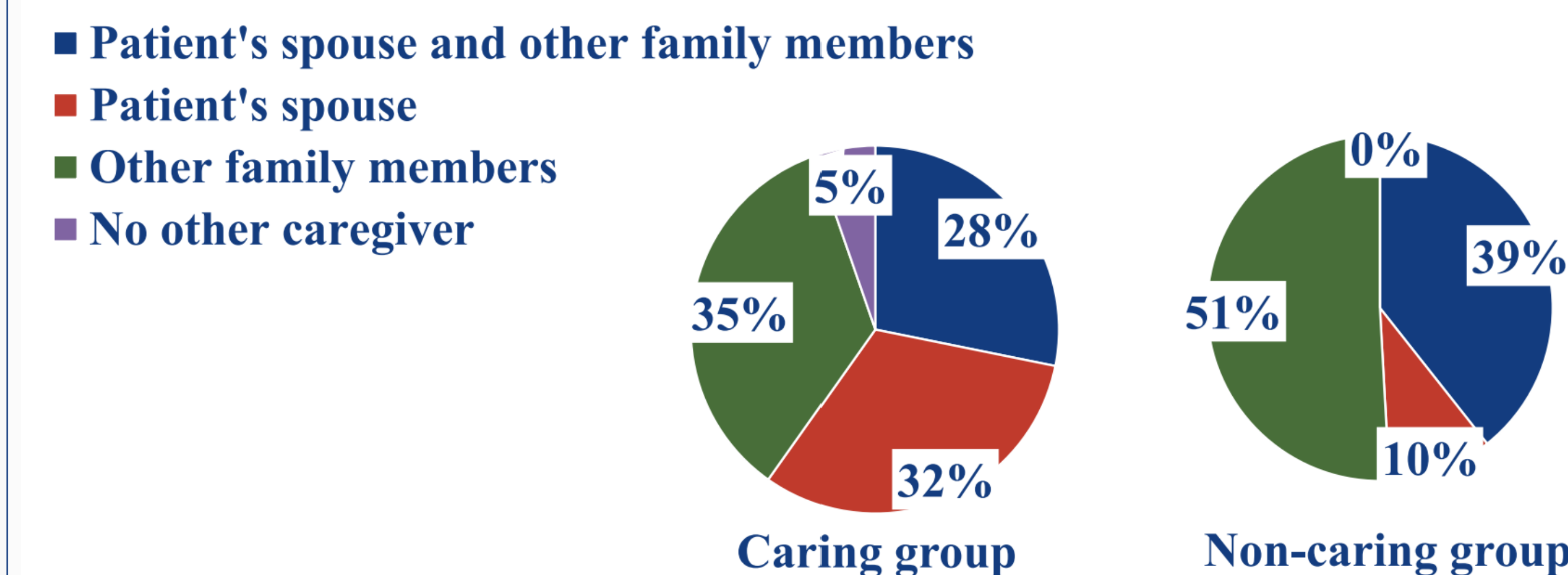


Figure 1: Different Caring Patterns Between Groups.

CONCLUSIONS

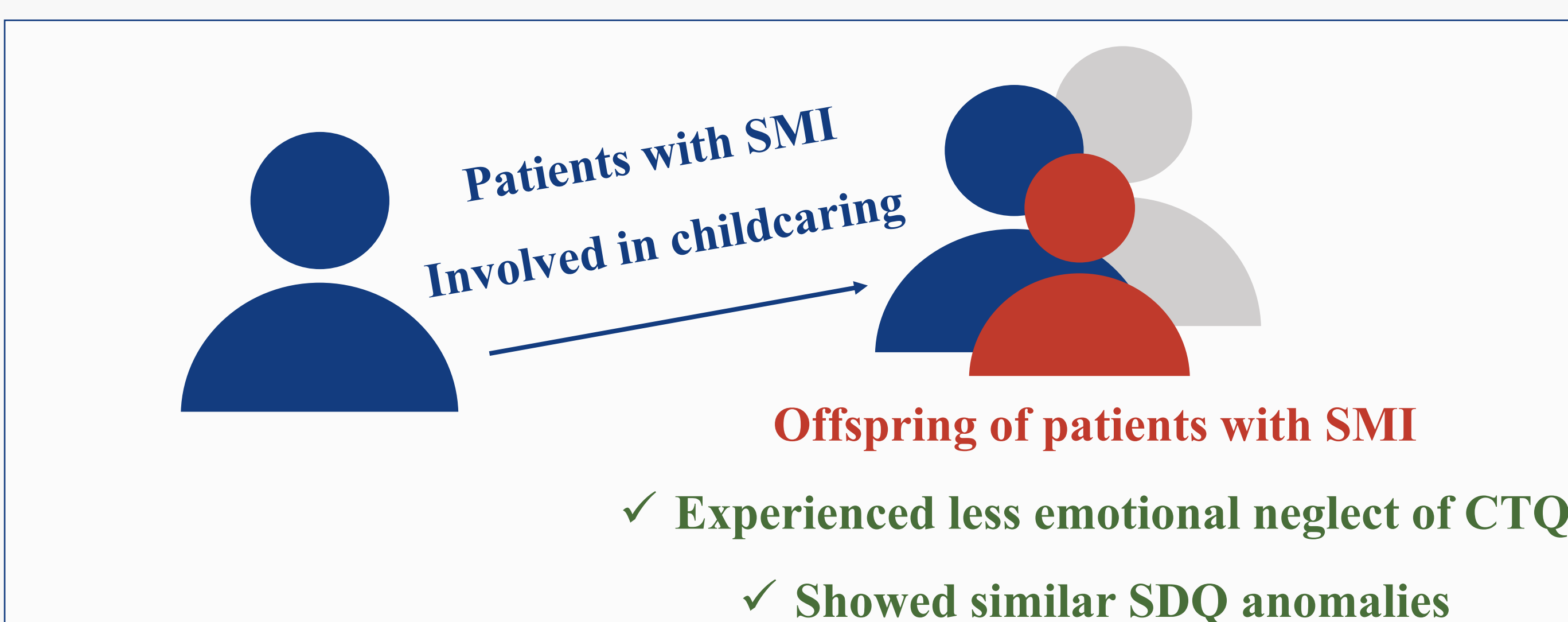


Figure 2: Main Findings of the Study.

- Better parental functioning and family support were suggested by characteristics of the caring group.
- It's important to encourage patients with SMIs to actively involve in childcare whenever they have such competence.
- Family-focused services should be applied to these families in enhancing the confidence and competence of parenting.