



# Mental Health and early childhood: young children, families and communities

---

TEYF Infant Mental Health Conference  
Hobart, November 8 -9

**Dr Nick Kowalenko**

Perinatal & Infant Mental Health, NSWIOP  
Deputy Chair, AICAFMHA



# Acknowledgements

---

- The e-learning resource from which these video clips are taken is being developed by AICAFMHA with funding from the Australian Government Dept of Health and Aging
- NSWIOP

# Fathers:

---

- scientific background
- fathers talking about their experiences
- follow a father in a family intervention
- display common clinical dilemmas
- focus on the young child and fathering in the family
- the future



# Father's Role: Background (1)

---

- natural, adoptive, step or foster
- roles vary greatly, as does involvement
- early thirties: median age for fatherhood



## Father's roles (2)

---

- sociocultural influences vary over time
- in intact families fathers are more overtly involved in child care than before
- absence of fathers from childrens' lives has increased
- more influence on child development than previously thought



## Fathering specific role (3) in:

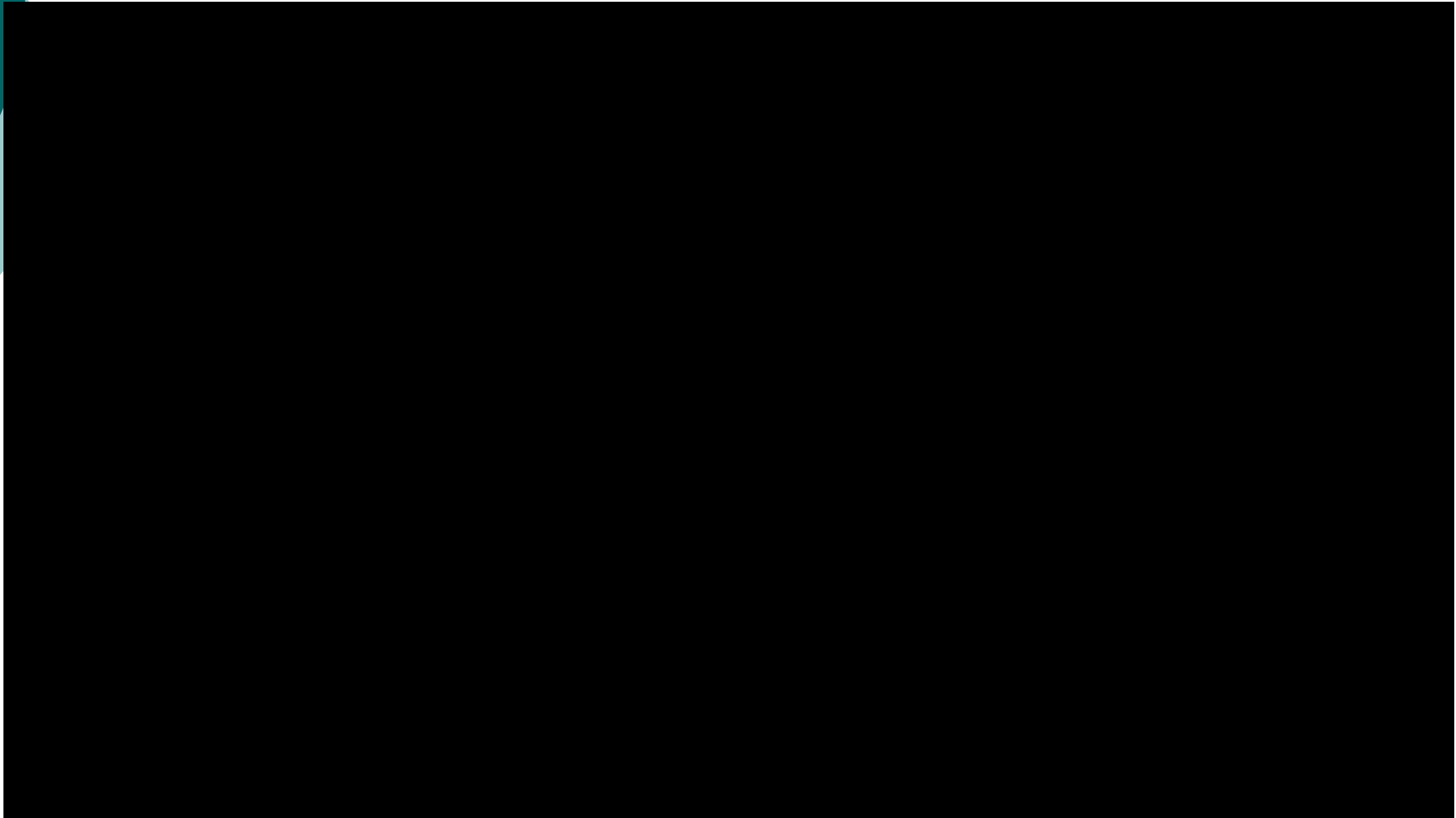
---

- risk taking
- school attainment
- anger management
- problem-solving
- coping with unexpected
- externalizing problems
- Teasing and frightening behaviour (with sensitivity)
- gender differentiation



# VIDEO: Fathers experience

---





# Fathers mental illness affects

---

- parent-child relationship e.g. withdrawal/hostility
- the parenting couple e.g. increased conflict
- the family e.g. changing parenting roles
- community and social life e.g. stigma, social isolation
- genetics and possibly epigenetics



# Fathers and mental illness (25- 54 yrs) in Australia 2007

---

- anxiety: 13%
- depression and/or substance: 7%
- psychosis: 0.5%

One million Australian children live with a parent with a mental illness



# Fathers Serious Mental Illness (SMI)

---

- ↑ childhood mortality (1.6 neonates, 2.7 toddlers)
- for inpatients, ↑ risk of young child homicide
- increased rates LD, behaviour and emotional problems, physical illness, emotional disorders

# Fathers' depression results in increased...

---

- emotional and behaviour problems (↑ 2-3 x)
- later suicide risk (continuity of risk)
- difficulties if mother also depressed
- rates of emotional and behaviour problems ↑ x 2 at age 3.5yrs, if father depressed 8 wks postnatally &
- behavioural problems (x3) for boys (n=8700)
- AN Pat depression predicts PPND

# Risks for Paternal Depression

---

## Specific

- family History of depression
- PHx or current depression
- negative cognitive style
- bereavement and loss
- stressors and life events

## Psycho-social

- poverty
- exposure to trauma/abuse
- unemployment
- social isolation
- separation (couple and/or family)
- immigration/dislocation
- historical trauma

# Fathers anxiety disorders result in increased...

---

- rates of childhood anxiety disorders (x 2 SAD)
- impacts on socialisation and social phobia in toddlerhood not clear
- PTSD in young children

# Fathers' Substance Abuse (alcohol and other drugs)

---

- behavioural disorders (esp boys)
- more difficulties with other drugs vs alcohol
- more psychosocial disadvantage with other drugs
- fathers (with dependence) report drinking more after interacting with young children with difficult temperament (non-prod coping)

## If both parents affected generally

---

- ↑ risk of early childhood problems
- ↑ impact of chronicity and severity
- problems only present IF paternal mental health problems also present (inconsistent finding)
- maternal depression and father alcohol (+/- hostility, causes most ↑ in disruptive behaviour (boys)

# Fathers mediate impact of maternal mental health problems

---

1. community based survey (2007) of 6500 mo-infant dyads (US)
  - findings were that adverse effects of maternal depressive symptoms on child behaviour trajectories were inversely associated with fathers positive involvement

# Fathers mediate impact of maternal psychological distress

---

1. UK: Millennium Cohort Study of 4, 700 families (2009)
  - 4 – 5 yr olds had lower attainment in communication, language, literacy, maths, personal, social and emotional development in families with parents scoring highly for psychological distress
  - independent effects of mothers mental health remain
  - effects of fathers mental health don't remain after education/ qualifications/ socio-ec controlled

# VIDEO: Not Talking

---





# Fathers involvement and children's development

---

- positive influence of father engagement on social, behavioural and developmental outcomes (meta-analysis of 24 studies)
- type of engagement unclear
- professionals and policy makers should improve circumstances for involved fathering (Oberklaid et al)

# Mental health problems and early childhood practice

---

- common mental health problems (anxiety, depression, alcohol: 1 in 5)
- complex mental health problems (above plus violence and drugs: 1 in 20)
- persistent, disabling, complex and /or recurrent severe mental health problems (1 in 100)
- Socially, behaviourally or developmentally affected infants and young children (1 in 5, 1 in 10)
- whose role, which partners, whose service, whose practice?

# VIDEO: Jason Involvement

---



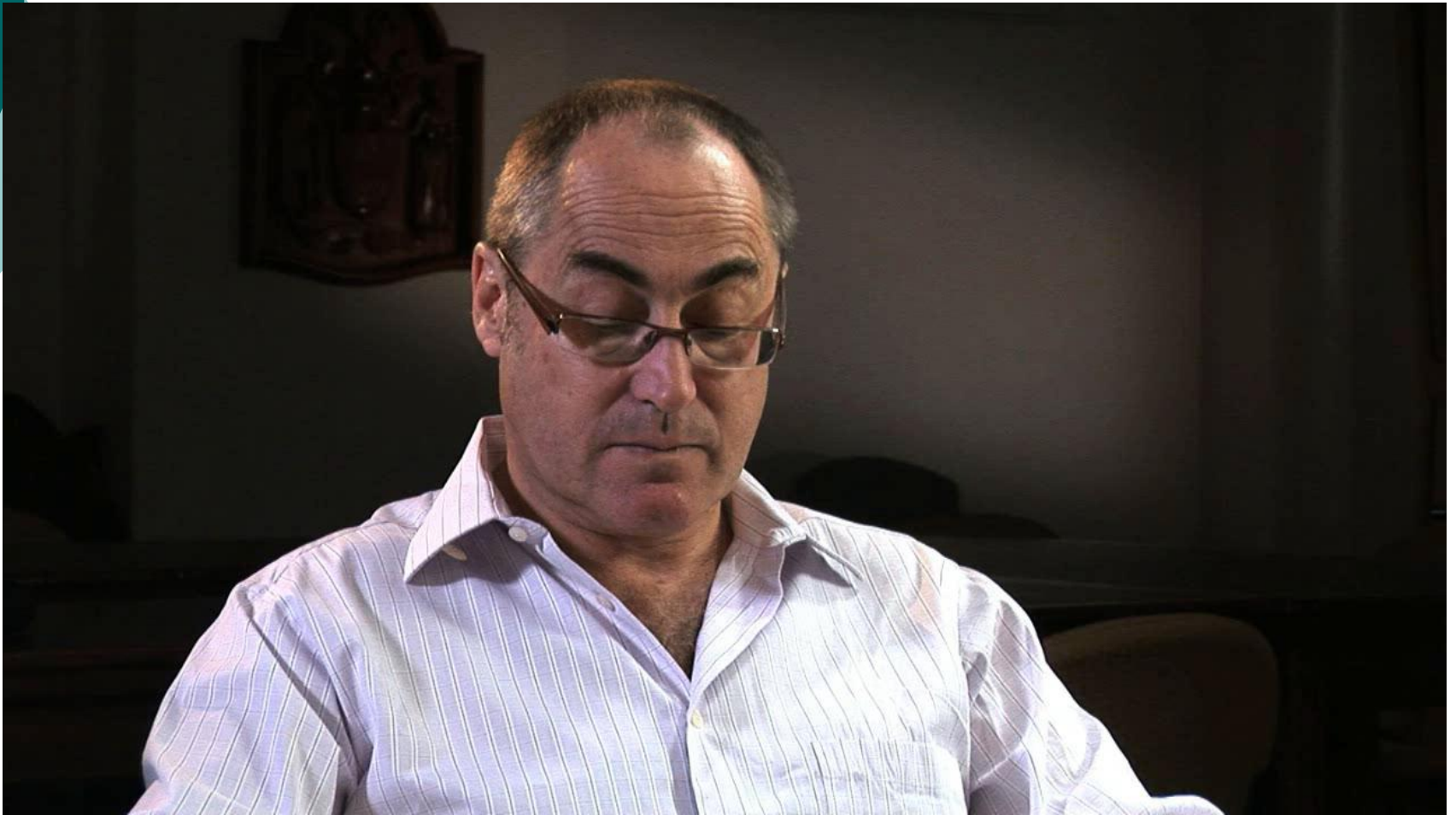
# VIDEO: Jason comes to Ella

---



# VIDEO: Ring around family

---



# VIDEO: Family comes together

---



# VIDEO: Jason's Story

---





# Fathers: practice and policy Gaps

---

father involvement is generally of benefit and improves child outcomes  
family assessment and intervention is a core professional activity to optimise wellbeing of infant and mother

NPDI – fathers get a mention but no routine assessment: its a beginning



# Fathers: practice and policy Gaps

---

- assessment of strengths and involvement
- each parent may need involvement/engagement
- provide father support to maintain co-parenting and lessen couple conflict
- Conjoint parenting support
- Routine practice
- single parent families support in additional networks (e.g. mat. uncles, pop)



# Future

---

- paternal disorders and intergenerational transmission
- understand mechanisms of transmission of risk to better develop fathering interventions
- co-parenting and couple conflict when one (or both) parent is affected
- social and cross-cultural research and understanding
- attachment theory: caregiving and activation (fathers' stimulation and risk taking)

# References

---

[www.nswiop.nsw.edu.au](http://www.nswiop.nsw.edu.au)

[www.copmi.net.au](http://www.copmi.net.au)

[www.fampod.org](http://www.fampod.org)

Ramchandani P, Psychogiou L. *Paternal psychiatric disorders and children's psychological development*. Lancet 2009; 374:646-53

Kowalenko, N. *Children aged 0-5 with a parent who has a mental illness: the need for early intervention*. Aust e-J Adv Ment Health 2009; 8:215-221



## Emerging service integration:

---

- SHV with add-on mental health funding (NSW pilot)
- NPDI – PIMH funding and state pilots (systems)
- piecing the puzzle and other parent resources: COPMI
- in home CBT (IH-CBT) for mothers with depression in HV programs (clinical integration)
- family connections (systems approach: child care)



## Family Connections provides:

---

- Staff with an array of strategies to address the multiple kinds of mental health problems they encounter in families, especially parents, with a focus on parental depression



# Family Connections

---

- 4 yr program with facility leadership
- staff training (12 sessions)
- consultation
- self-care and crisis care
- parent workshops
- groups
- infant mental health, Head Start Partnership and other systems partnerships