Support for Children and Families
Living with a Family Member with
Mental Illness

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Thesis submitted in total fulfilment of the requirements for the degree of Doctor of Philosophy (PhD)

March 2016
Declaration

This thesis contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. I give consent to the final version of my thesis being made available worldwide when deposited in the University’s Digital Repository, subject to the provisions of the Copyright Act 1968.

Signed: Vicki Cowling

Date: 7 July, 2016
Acknowledgements and thanks

I am indebted to the parents, grandparents, foster carer, partner, and young people who participated in this study; they invited me into their homes and contributed their ideas and experiences to improving our understanding of the access to, and influences on, the support they receive, or do not receive. I cannot thank you by name, but learned so much from you.

Meeting with the participants from the families involved was made possible thanks to the commitment and cooperation of Family Support Newcastle Committee of Management, Managers, and the Headin’ Up program team leader, and family workers, who participated in focus groups for the study. My very sincere thanks and gratitude to you all.

To my Supervisors, Professor Mel Gray, Dr Graeme Stuart, and Dr Kylie Agllias (2012-2013) – I acknowledge and thank you most sincerely for your generous guidance, advice, and encouragement throughout my PhD journey.

I also acknowledge and thank staff members from the School of Mathematics and Physical Sciences, The University of Newcastle, for statistical advice.

My family and friends have contributed with their support, interest, and enthusiasm to see me finish, which helped to achieve that goal – thank you so very much!!
This thesis is dedicated to all children, young people, parents, partners, siblings, grandparents, relatives, and foster carers who themselves live with a mental illness, or live with a family member with mental illness; and to all those who advocate for greater understanding of mental illness, and for services and supports that are responsive to individual and family needs, and respect culture and country of origin.
# Table of Contents

Declaration ......................................................................................................................... ii
Acknowledgements and thanks ........................................................................................ iii
Dedication ............................................................................................................................ iv
Table of Contents .............................................................................................................. v
List of Tables ..................................................................................................................... xii
List of Figures ................................................................................................................... xiv
List of Appendices ............................................................................................................ xv
Publication and conference presentations arising from the thesis ................................... xvi
Notes and Abbreviations ................................................................................................. xvii
  Notes ............................................................................................................................... xvii
  Abbreviations ................................................................................................................. xvii
Abstract ............................................................................................................................ xix

Chapter 1 .......................................................................................................................... 1
  Introduction ..................................................................................................................... 1
    Significance of the study ............................................................................................... 4
    Definitions of key terms ............................................................................................. 5
    Overview of the thesis ................................................................................................. 8

Chapter 2 .......................................................................................................................... 9
  Children and adults living with a family member with mental illness ....................... 9
    Prevalence of mental illness ....................................................................................... 10
      Number of family members of people with a mental illness ................................ 11
    Research on families living with a mental illness ..................................................... 13
      Parents with a mental illness who have dependent children ................................. 13
      Partners of parents with mental illness ................................................................. 15
      Children and young people of parents with mental illness ................................. 17
    Parents caring for children with mental illness ...................................................... 20
    Siblings of children with mental illness ...................................................................... 21
    Grandparents parenting grandchildren of parents with a mental illness ............... 23

v
Foster carers of children with mental illness ........................................25
Aboriginal families living with a family member with mental illness ........27
Conclusion ........................................................................................................31
Chapter 3 .........................................................................................................32
Theoretical framework ..................................................................................32
Ecological systems – ecosystems – theory .................................................33
Theory of stigma ...........................................................................................36
  Stigma related to mental illness .................................................................39
    Internalised or self-stigma ......................................................................39
  Stigma and attitudes to mental illness.......................................................40
    Community attitudes ..............................................................................40
    Attitudes of children ..............................................................................41
    Attitudes of professionals ....................................................................42
Impact of stigma related to mental illness on families, parents, and children..44
  Impact of stigma on families ....................................................................44
  Impact of stigma on parents who have a mental illness .........................46
  Impact of stigma on children and young people who have a parent
  with mental illness ....................................................................................48
Role of mental health consumers and carers in combating stigma..............50
Theory of recognition ..................................................................................51
  Application of the theory of recognition framework ...............................54
  Differing approaches and perceived limitations to the theory of recognition ..59
Conclusion ........................................................................................................60
Chapter 4 .........................................................................................................61
Social support .................................................................................................61
  Defining social support ............................................................................61
  Theories of social support ........................................................................63
    Stress and coping theory: Support as a buffer .......................................63
    Relational theory ...................................................................................64
    Theory of social capital ..........................................................................66
  Research and measurement of social support .............................................70
Chapter 5 ........................................................................................................87

Mental health policy and services in Australia ........................................87

History of family care for family members with mental illness ..........88
Mental health policy reform in Australia ....................................................90
  1960s: Deinstitutionalisation .................................................................90
  1970s: Community care and rise of the consumer movement ..........90
  1980s: Calls for a national approach to mental health .......................90
  1990s: National Mental Health Strategy .............................................91
  2000s: Further embedding mental health reform ..............................96
  2010-present: Where to from here? ..................................................100

Focus on carers ....................................................................................104
  Recognition of families and carers of people with mental illness ....104
  Support for carers .............................................................................105
  Participation of consumers and carers ..............................................106
  Recovery-oriented approach ............................................................107

Analysis of mental health reform to date ..............................................109
Mental health services in Australia .......................................................112
Mental health policy in New South Wales ..........................................118
Mental health services in New South Wales ......................................122
Conclusion ..........................................................................................125
Chapter 6 ................................................................. 127

Family support: Policy and service context ........................................... 127

Family support services in Australia ..................................................... 128
Australian Government family support program ................................... 132
Family and Children’s Services ........................................................... 132
Family Mental Health Support Service (FMHSS) .................................. 135
New South Wales family support system ............................................. 136
Child protection .................................................................................. 137
Early intervention ............................................................................... 137
Family support ................................................................................... 139
Mental health family support services for families in New South Wales ..... 140
Government services ........................................................................ 141

NSW Department of Family and Community Services ....................... 141
Department of Health .......................................................................... 141
Nongovernment services .................................................................... 142

Family Support Newcastle ................................................................. 142

Conclusion ......................................................................................... 145

Chapter 7 .......................................................................................... 146

Methodology ....................................................................................... 146

Purpose of the study ........................................................................... 146
Research questions ............................................................................. 148
Research aims .................................................................................... 148
Context of the study ........................................................................... 148
Research strategy: Case study approach ............................................. 149

Case study: Definitions and features .................................................. 151
Limitations of case study research ....................................................... 154
Research process and approach .......................................................... 155

Case selected for study ...................................................................... 155
Recruitment of participants ................................................................ 159

Families .............................................................................................. 159
Family workers .................................................................................. 160
Data collection measures ................................................................. 160
  Quantitative measures ................................................................. 160
  Qualitative measures ................................................................... 163
    Interviews with families ............................................................ 165
    Focus groups with family workers ............................................ 168
Data analysis .................................................................................. 169
  Quantitative data analysis ............................................................ 170
  Qualitative data analysis .............................................................. 170
Validity and trustworthiness of findings ........................................... 172
Ethical issues and how they were managed ....................................... 177
  Definition of ‘family’ .................................................................... 178
  Recruitment and retention of participants ..................................... 179
  Financial compensation for participants ....................................... 180
  Role of ‘gatekeepers’ and other obstacles to referrals to the research ... 180
  Confidentiality and anonymity ................................................... 181
Capacity of research participants to provide informed consent .......... 182
Research involving special groups ................................................... 182
  Research involving children and young people ............................ 182
  Research involving Aboriginal people ......................................... 183
  Research involving people with mental illness ............................. 184
Vulnerability and psychological risk ................................................ 185
Interviewing families in their own homes ........................................ 186
Disclosure of child abuse or neglect ............................................. 187
Safety concerns ............................................................................ 187
Communication about the research ............................................... 188
  Communication of findings to families ....................................... 188
  Communication to Family Support Newcastle (FSN) .................... 188
  Communication to professionals ............................................... 189
Potential benefits of the study to participants and others ................ 189
Limitations of the study .................................................................. 190
Conclusion ..................................................................................... 192
Chapter 8 .............................................................................................. 193

Findings: Living with mental illness .................................................. 193

Participants’ demographic and household information ..................... 193
Family workers demographic and employment information .............. 197
Lived experience of mental illness ..................................................... 198
‘It’s with me but it’s not me’ ............................................................ 198
‘It hurts, it really hurts when people use language like that’ ............... 199
‘It can be exhausting trying to get yourself respected’ ......................... 201
‘I don’t know who I am any more’ ................................................ 202
‘I’ve talked to her about it right from the word go’ ............................. 203
‘I just thought I was a really bad mum’ ......................................... 208
‘Chin up, you’ll be right’ ............................................................. 210
‘I needed help…I was honest’ ..................................................... 211
‘I’m with it now and I’m actually being a mum’ ................................. 213
Conclusion ....................................................................................... 215

Chapter 9 .............................................................................................. 216

Findings: Experiences of family support .......................................... 216

Source of support: Families first .................................................... 216
Family experiences of support from Headin’ Up: Relationships first .... 221
Referrals and access to other services ........................................... 226
Family support workers’ perceptions of the support provided to families ... 228
Family worker experiences with other agencies .............................. 234
Factors facilitating access to support .............................................. 239
‘Getting the help sometimes is just as hard as not getting it’ ........... 239
Parents’ confidence and assertiveness .......................................... 240
Relationships with others ............................................................. 240
Culturally sensitive activities – ‘good medicine’ ............................... 241
Barriers and setbacks to seeking and receiving support ................. 242
Worry about being judged as a parent ........................................ 242
Inflexible approaches to respite care for children ......................... 244
Setbacks to receiving support, and service provision issues ............ 245

x
Conclusion .......................................................................................................................... 249

Chapter 10 ......................................................................................................................... 250
Findings: Family functioning and service involvement ............................................... 250
Family relationships and coping ...................................................................................... 251
Family functioning ........................................................................................................... 251
Family’s coping ability ...................................................................................................... 253
Service involvement ......................................................................................................... 257
Service coordination ......................................................................................................... 257
Family Participation in Planning (FPP) ........................................................................... 258
Conclusion .......................................................................................................................... 260

Chapter 11 ......................................................................................................................... 261
Discussion ........................................................................................................................... 261
Families called on families and friends for support ......................................................... 264
Parent and carer relationships with family workers were based on mutual respect and trust .................................................................................................................................................................................................................................................. 266
Parents and children were supported by family workers’ home visits ...................... 267
Parents and carers valued being involved in planning services ................................... 268
Inadequate coordination among agencies may lead to confusion for families .... 269
Access to support for families was facilitated by parents and carers and practitioners .................................................................................................................................................................................................................................................. 270
Families experienced barriers to support at the family, service, and organisational levels .................................................................................................................................................................................................................................................. 271
Adults and children need to understand the mental illness experienced by themselves, or by a family member .................................................................................................................................................................................................................................................. 274
Families experienced stigma, with their responses reflecting individual choices and assertiveness .................................................................................................................................................................................................................................................. 275
Conclusion .......................................................................................................................... 281

Chapter 12 ......................................................................................................................... 282
Conclusions and recommendations ............................................................................... 282
References ......................................................................................................................... 289
Appendices ......................................................................................................................... 332
List of Tables

Table 2.1: 12-month prevalence of mental disorders in people aged 16-85 years.............. 11
Table 2.2: Family members of people with mental illness............................................. 12
Table 3.1: Theoretical framework.................................................................................. 33
Table 3.2: Ecosystems framework related to the families in this study............................ 35
Table 3.3: The structure of relations of recognition....................................................... 55
Table 4.1: Forms of social support.................................................................................. 65
Table 4.2: Levels within natural support systems.......................................................... 68
Table 4.3: Categories of social support and approaches to measurement ..................... 72
Table 4.4: Barriers to social support............................................................................... 76
Table 5.1: National mental health policies and provisions for carers and families of people with mental illness 1990s ................................................................. 95
Table 5.2: National mental health policies and provisions for carers and families of people with mental illness 2000s ................................................................. 101
Table 5.3: National mental health policies and provisions for carers and families of people with mental illness 2010s ................................................................. 111
Table 5.4: Mental health reform policies and reviews.................................................... 115
Table 5.5: NSW policy provisions for carers and families of people with mental illness ................................................................. 124
Table 5.6: Spending on Australian mental health services, 2010-2011.......................... 125
Table 6.1: Policy changes in mental health and family support (1940s-present) .......... 133
Table 6.2: Australian Government support programs for families ......................... 136
Table 6.3: NSW family support system......................................................................... 139
Table 6.4: NSW family support services and mental health services for families ...... 140
Table 7.1: Protective factors......................................................................................... 147
Table 7.2: Categorising case studies............................................................................. 153
Table 7.3: Comparison of the defining features of a case study with the present study ......................................................................................................................... 154
Table 7.4: Stages in implementation of the case study.................................................... 156
Table 7.5: Interpretive frameworks.................................................................................. 157
Table 7.6: Procedure for data collection and analysis.................................................... 165
Table 7.7: Number of participants, and interviews and questionnaires completed ..... 169
Table 7.8: Data analysis plan......................................................................................... 170
Table 7.9: Techniques for demonstrating validity .............................................174
Table 7.10: Assessment of primary and secondary criteria of validity ...............176
Table 8.1: Brief description of families participating in the study ......................194
Table 8.2: Participant demographic and household information (n=13) .............195
Table 8.3: Mental illnesses experienced by children and adults .......................196
Table 8.4: Family workers demographic and employment information (n=9) .......197
Table 9.1: Involvement with support practitioners and agencies .......................236
Table 10.1: Respondents who strongly agreed or agreed with FAD-GF statements ....252
Table 10.2: Mean family functioning (FAD-GF) scores ..................................252
Table 10.3: Respondents who strongly agreed or agreed with the F-COPES Social Support sub-scale statements .................................................254
Table 10.4: Respondents who strongly agreed or agreed with F-COPES Reframe sub-scale statements .........................................................254
Table 10.5: Respondents who strongly agreed or agreed with F-COPES Mobilise Family sub-scale statements .....................................................255
Table 10.6: Respondents who strongly agreed or agreed with F-COPES Passive Appraisal sub-scale statements ...............................................256
Table 10.7: Respondents who strongly agreed or agreed with F-COPES Spiritual Support sub-scale statements ...............................................256
Table 10.8: F-COPES sub-scales mean scores compared with scale norms ..........257
Table 10.9: Respondents who responded very true or mostly true to the Service Coordination scale statements ...............................................258
Table 10.10: Respondents who felt involved (rating 3 or 4) with the Family Participation in Planning scale statements .........................................259
Table 11.1: Findings in the context of ecosystems, and theories of recognition and stigma.................................................................265
List of Figures

Figure 3.1: Honneth’s (1995) schema of Hegel’s stage theory of recognition ...............53

Figure 6.1: An ecosystem representation of the families in this study .....................128

Figure 7.1: The case study ..........................................................................................149

Figure 7.2: Sources of complementary lines of evidence ........................................152
List of Appendices

Appendix I: Literature search strategies ..............................................................331
Appendix II: Role of NFSS Headin’ Up Family Workers in research project: ..........334
Appendix III: Invitation to families to participate ..................................................335
Appendix IV: Semi-structured interviews .............................................................336
Appendix V: Information statement for family workers, and consent form ...........340
Appendix VI: Questionnaires .............................................................................344
Appendix VII: Information statement for adult participants, and consent form ....354
Appendix VIII: Information statement for young people, and consent form ........361
Appendix IX: Information statement for children, and consent form ..................368
Publication and conference presentations arising from the thesis

Publication


Conference Presentations


Notes and Abbreviations

Notes

Use of first names only, or pseudonyms - when contributing as authors some parents have chosen to use either their first name only, or a pseudonym, to protect their privacy.

Abbreviations

ABS  Australian Bureau of Statistics.
ACT  Australian Capital Territory
AFCA  Australian Foster Care Association.
AIHW  Australian Institute of Health and Welfare
AASW  Australian Association of Social Workers
COAG  Council of Australian Governments
DOCS  Department of Community Services
FACS  Family and Community Services
FAHCSIA  Families, Housing, Community Services, and Indigenous Affairs
FSN  Family Support Newcastle
LHD  Local Health District
HREC  Human Research Ethics Committee
HREOC  Human Rights and Equal Opportunity Commission
MHCA  Mental Health Council of Australia (now Mental Health Australia)
NAMI  National Alliance for the Mentally Ill
NGO  Nongovernment organisation
<table>
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<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>NHMSESC</td>
<td>National Mental Health Strategy Evaluation Steering Committee</td>
</tr>
<tr>
<td>NHWPRC</td>
<td>National Health Workforce Planning and Research Collaboration</td>
</tr>
<tr>
<td>NSW</td>
<td>New South Wales (one of the six states in Australia)</td>
</tr>
<tr>
<td>SEWB</td>
<td>Social and emotional wellbeing</td>
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Abstract

The prevalence of mental illness means that many children and adults may be affected at some point in their lives, which, in turn, means that many people may live with a family member who has a mental illness. This case study investigated the support available to, and accessed by, children and families living with a family member with mental illness, in the context of related mental health and family support policies. The thesis was informed by theories of social support, stigma, and recognition, within an ecosystems framework. This exploratory study aimed to understand the lived experience of parents, carers, and family members concerning the sources of the support they received, and their perceptions of factors that facilitated or impeded access to support. The perceptions of family workers were also investigated. Data was gathered from four sources: documents setting out policies concerning mental health and family support; in-depth interviews with family members; focus groups with family workers; and responses by parents and carers to standardised questionnaires. The qualitative nature of the study involved prolonged engagement with parent and carer participants, with two interviews being conducted with them over time.

Analysis of the mental health policies and family support policies at the federal and state (New South Wales) levels highlighted the shift to economic rationalist approaches which have placed increasing responsibility on those who live with someone with mental illness. Analysis also highlighted the complex bureaucracy that families and practitioners needed to negotiate.

Analysis of interviews showed that participants turned first to their family for support, with family workers and other professionals also perceived as supportive. Participants who were mothers wanted to be seen, and strived to seen, as ‘good’ parents but worried about the child protection service taking their children. Family workers focused on strengths within families, and were perceived to be significant in the support they provided.
This study contributes to an increased understanding of the influences of mental health and family support policies on service providers, and on families with children when a family member has a mental illness. It has also documented the lived experiences of mental illness of mothers, grandmothers and a foster carer, demonstrating their reliance on family, and friends, and awareness of their family needs. The study demonstrates the need for local, accessible community-based services with practitioners who can undertake home visits in a flexible and ongoing way that promotes family strengths and confidence. The methodology and findings of this study contribute to the fields of social work, family services, and mental health.