

Children of Parents with Psychiatric Illness Affective Disorder

- General rates of depression in youth include
 - By age 18, 20-25% of all youths will have experienced an episode of affective illness
 - Point prevalence
 - 0.4 – 2.5 % for children
 - 0.4 – 8.3% for adolescents

Children of Parents with Psychiatric Illness Affective Disorder

- Children of parents with mood disorders are at greater risk
 - Up to 74% of children with depression get depressed
 - Up to 92% bipolar offspring experience BPAD
 - Meta analysis reveals 61% of children of an affected parent will develop a psychiatric disorder, 4 times more likely than children of non-affected parents
- Children whose parents developed an illness before age 20 are at greater risk

Children of Parents with Psychiatric Illness Affective Disorder

- Children of parents with unipolar depression fare worse than children of bipolar mothers or those with a medical illness
 - Increased number of diagnoses, 2.6

Children of Parents with Psychiatric Illness Affective Disorder

- Mechanisms of risk
 - Genetic factors
 - Marital problems
 - Parenting problems
 - Chronicity and severity of parental illness

Children of Parents with Psychiatric Illness Affective Disorder

- Genetics
 - One affected parent, 10% risk
 - If that parent had onset before age 20, 30% risk
 - If both parents are affected, 40% risk
 - Monozygotic twins
 - 50% for depression
 - 70% for bipolar

Children of Parents with Psychiatric Illness Affective Disorder

- Marital Difficulties
 - Interactions of couples with one affected parent more negative than controls
- Parenting problems
 - Less positive attitudes and behaviors between mother and child
 - Less secure attachment
 - Impaired capacity for nurturing at all ages

Children of Parents with Psychiatric Illness
Affective Disorder

- Chronicity of illness
 - Chronicity and severity related to child's risk

Children of Parents with Psychiatric Illness
Affective Disorder

- Children's responses to low parental mood
 - Beardslee et al 2002
 - Assessing the mechanisms of intergenerational transmission of depression by looking at children's responses to parents balancing
 - Active empathy
 - Overinvolvement
 - Indifference
 - avoidance

Children of Parents with Psychiatric Illness
Affective Disorder

- Indifference
 - Less likely to perceive parental depression
 - Less likely to try to cheer them up (fathers and mothers)
 - Try not to worry
 - Less likely to feel guilty when fathers were depressed
 - Low empathy scores
 - Low scores on their own depression

Children of Parents with Psychiatric Illness
Affective Disorder

- Active empathy
 - Higher scores on cheering up both parents
 - Higher scores on feeling empathy for fathers
 - Middle scores on feeling down when mothers were unhappy
 - Middle scores on seeking help for unhappy fathers
 - High empathy scores

Children of Parents with Psychiatric Illness
Affective Disorder

- Emotional Overinvolved
 - With depressed mothers, more likely to be
 - Scared
 - Angry
 - Guilty
 - Feeling down themselves
 - With depressed fathers
 - Scared
 - angry

Children of Parents with Psychiatric Illness
Affective Disorder

- Emotional Overinvolved
 - More likely to seek help for a parent
 - Not more likely to experience empathy

Children of Parents with Psychiatric Illness
Affective Disorder

- Avoidance group
 - Highly unable to report what they felt or did
 - Not getting involved
 - Remaining unaffected
 - Not cheering up unhappy fathers

Children of Parents with Psychiatric Illness
Affective Disorder

- Gender differences in patterned responses
 - More girls were Emotionally Overinvolved
 - More boys were Avoidant
 - Girls more prosocial in attitude and behavior
 - Boys more suppressive
 - 25% of all children become 'down' when mother is unhappy, less so if father is affected
 - Boys and girls equally alarmed but responses vary

Children of Parents with Psychiatric Illness
Affective Disorder

- Response patterns
 - Emotionally overinvolved
 - Strong emotional and behavioral involvement
 - Strong identification with parental mood
 - Higher rates of both externalizing and internalizing symptoms including depression
 - Active empathy
 - More able to discriminate their own experiences from parents

Children of Parents with Psychiatric Illness
Affective Disorder

- Indifference and Avoidance groups present nonsymptomatic and symptomatic detachment patterns
- Indifferent children had little awareness of parent's mood, but were able to detect their own responses
- Avoidant children were aware but unable to recognize - ↓ metacognitive skills

Children of Parents with Psychiatric Illness
Affective Disorder

- Parental contribution to the response patterns likely to stem from irritability and negativity
- However, it is the relationship not the symptoms that support the manifest problems

Children of Parents with Psychiatric Illness
Psychotic Spectrum Disorders

- Population risk 1%
- Grandchildren 5%
- Child of one affected parent 13%
- Child of two affected parents 46%
- DZ twins 17%
- MS twins 48%

Children of Parents with Psychiatric Illness Psychotic Spectrum Disorders

- Risks for offspring
 - Neurological dysfunctions with motor incoordination as most common
 - Neurocognitive differences including: inattention; poor social competence; poor global adjustment skills; anhedonia; memory problems
 - Smooth pursuit eye movement changes
 - Some changes on imaging studies

Children of Parents with Psychiatric Illness Psychotic Spectrum Disorders

- Verbal short term memory as measured on the digit-span task, plus a complex attention span task impairment predicted 83% of offspring that went on to develop adult psychotic spectrum disorders

– Erlenmeyer-Kimling 2000

Children of Parents with Psychiatric Illness Psychotic Spectrum Disorders

- Five emotional themes of children of persons with schizophrenia
 - Abuse and neglect at the hand of their mothers
 - Isolation, denial, silence
 - Guilt and Loyalty
 - Grievances with the mental health system
 - Sensitivity to the support of others

Children of Parents with Psychiatric Illness Anxiety Disorders

- Presence of anxiety disorders is approximately 10% - the most common of all psychiatric disorders
- General heritability of anxiety disorders is 25-30%
- Environmental factors appear to out weigh genetic factors

Children of Parents with Psychiatric Illness Anxiety Disorders

- Offspring of anxious parents 7 times more likely to develop anxiety – but only if the anxious parent is the mother
- Children of parents with panic disorder are more likely to develop panic
- Children of parents with specific phobias are likely to develop the same phobias

Children of Parents with Psychiatric Illness Anxiety Disorders

- Children of parents with panic are more likely to have multiple diagnoses
- Parents with panic have children with more severe disorders
- Separation anxiety most common childhood manifestation
- The symptomatology of the parent is more related to the outcome for the child

Children of Parents with Psychiatric Illness
Anxiety Disorders

- Somatization is more likely in the child of an anxious parent
- Catastrophic reactions more common as well
- These add to produce a greater likelihood of general impairment

Children of Parents with Psychiatric Illness
ADHD

- Population risk for ADHD is 5%
- 50% of all ADHD adults will have an affected child
- 25% children with ADHD will have an affected parent

Children of Parents with Psychiatric Illness
ADHD

- Impact on parenting
 - Children may enjoy the enthusiasm, energy and playfulness of the affected parent
 - Parent may, however, get distracted or be unable to sustain vigilance in parenting
 - Difficulty in helping child (directly or by modeling) learn to regulate affect or feelings
 - Shared oppositionality and/or reactivity

Children of Parents with Psychiatric Illness
ADHD

- Failure at the organizational task of parenting
- Anxiety about this failure producing comorbid problems
- Social skill deficit replication
- Over identification with child's difficulty and not being able to assist in resolution of problems
- Logistical instability (divorce, job loss, moves)

Children of Parents with Psychiatric Illness
Interventions

- Early diagnosis and treatment
- Attention to the relationships as well as the symptoms
- Mindful of counterintuitive outcomes
- Focus on child's adaptive skills, self regulation and capacity for relationship building

Children of Parents with Psychiatric Illness
Interventions

- Resilience
 - A dynamic process encompassing positive adaptation within the context of significant adversity

Children of Parents with Psychiatric Illness Interventions

- Masten et al 1999
 - Development of competence is related to psychosocial resources
 - Good resources are less common among children growing up in the context of adversity

Children of Parents with Psychiatric Illness Interventions

- if reasonably good resources are present, competence outcomes are generally good even in the context of chronic, severe stressors
- Maladaptive adolescents tend to be stress-reactive and have a history of adversity, low resources and broad-based competence problems