It's a Family Affair: Parents with Mental Health Needs

Mercedes Barn-Klug, PhD, MSW
Assistant Professor
School of Social Work

Overview

- Older adults and families
- Families as resources and barriers to care
  - Ageism
  - Stigma
  - Changing attitudes toward mental health services

Older Adulthood: The changing American Family

- Migration
- Communications technology
- Care setting options “cruise ship care”
- Health status (better and worse)
- Marriage/widowhood SSA data
- Trends in # children
- Life expectancy trends

Bean Pole Family

- Fewer horizontal
- More vertical

The role of social support

- Being loved
- Being cared about
- Esteemed
- Valued
- Belongs to a network
  - (Maulik, Eaton, & Bradshaw, 2009)
Mental Health Concerns From Mild to Major
- Depression
- Dementia
- Bi-polar
- Schizophrenia

Aging and Dependency
- "To examine dependency in old age, it is necessary to make a distinction between aging and illness" (Charach et al.)
- Excess dependency

Family as Support
- Recognize changes
- Encouragement and hope for better
- Help connect to resources
- Reinforce - role expectations
- Validate as a person; belonging

Anderson Behavioral Model

![Anderson Behavioral Model Diagram]

Family Members Can Influence Older Adult with Mental Health Challenges
- The primary caregiver may influence care received recipients’ use of services both directly and indirectly
  - Directly - contacting agencies for services
  - Indirectly - influence care recipients’ perceptions of illness or need
Indirect Influences

- Indirectly - influence care recipients' perceptions of illness or need
  AND likely:

  What is a “normal” part of aging
  What is the normal course of the illness
  What can be treated, what must be endured
  What the cause is; available treatments; worth of treatments.

What is Ageism?

- Term coined by Dr. Robert Butler in 1969:
  “A process of systemic stereotyping and discrimination against a particular age group, and especially the elderly.”
  Another form of bigotry, similar to racism and sexism.

Ageism

- "Thinking or believing in a negative manner about the process of becoming old or about old people" (pp. 93, 94, p. 2223) A question to address (see pp. 2224-2225) regarding the need.
- Kelchner article includes Schonfield’s opinion that the claims for ageism are overblown (p. 94-95).

Ageism Unique

- Similar but also very different:
  If we live long enough, we will be old.
  Self-despised
  Lack of self-acceptance

Mental Illness Stigma

- Origins - Greek word - physical brand or mark applied to social outcasts to indicate socially devalued status.

- Currently, “stigma” carries a far more psychological connotation — majority’s tendency to distance from and limit the rights of those being stigmatized.
Stigma

• "...the pain engendered by mental illness is searing enough, but the devastation of being invisible, shamefurl, and toxic can make the situation practically unbearable" (Hinshaw, 2007)

Stigma

• At the societal and individual levels
• Negative social consequences
  — Loss of status
  — Loss of opportunities
  — Negative qualities assumed of persons with mental illness (Incompetence, dangerous, blame)
  — Strong emotional responses such as
    — On the person with mental illness: Shame & Fear
    — On the stigmatizer: pity, fear, anger

Aged and with Mental Illness

• Stigma associated with getting older and with having a mental illness can interact and result in unique challenges:
  — Caregiver role
    • Parent
    • Spouse
    • Sibling
    • Adult child
  — How long has the MI been an issue for this family? (new or decades dealing)
  — Is this "off-time" family care giving?
  — Is the family member concerned about inheriting the MI? (Depression, Alz)
  — Is the family member being supported by family and community?

Interaction of Ageism and MI

Stigma

• Financial concerns
  • Social Security payments
    — Affected by employment record & marriage record
  • Employment
    — As a means to income and to socialization
• Communication & Socialization
  • Internet (75% of 18-29 in last 24 hours vs 16% of 75+)
  • Cell phones (72% 18-29 receive most calls on cell y 5% of 65+)

Interactions of Ageism and MI

— Other health conditions & treatments
  • Way symptoms are experienced, expressed and attended to.
    — "Vain, I can't make a silk purse from a pig's ear"
— Living arrangements
  • Changes in arrangements related to death of partner
  • Adjusting to new surroundings
  • Even in age-segregated setting, stigma of M.I.
  • Even in M.I. support group, ageism.

Changing Attitudes

• Attitudes are changing - cohort
• Professionals can help speed that change along in an individual family
  — Normalizing the frustration that can accompany mental health concerns
  — Helping families cope with unpredictability, ambiguity, sense of loss, and envisioning a hopeful future.