

Early childhood workers can make an enormous difference to children and their families by:

- providing stability for the child if the child usually visits their centre regularly
- providing a source of useful information in order to help the parent connect with services that can assist them
- helping the parent to access the help they need
- helping children to develop social skills and learn to manage their emotions.

Some ways in which you, as an early childhood worker, can best support young children and families affected by a parent's mental illness are listed below. We also encourage you to:

- discuss the ideas with your colleagues
- seek more information and other resources about this topic from the COPMI website page for early childhood workers (www.copmi.net.au/earlych/index.html). Some services have found it helpful for one staff member to go to the website and download information that may be shared with all as a staff development activity
- add tips online for your colleagues about strategies that you've personally found to be useful
- connect and discuss issues with other workers via the COPMI e-discussion list.

Helping parents feel comfortable in talking about their mental health

- Assure parents in your early contact with them that it's best for the child if you/your service is informed about any important issues at home that may affect the child (e.g. health issues or parental chronic illness). Don't be afraid to use the words 'mental illness' or 'mental health problems' when talking to parents about the type of thing that may affect a child.
- Parents will not always divulge information about their mental illness. They may need to feel safe to do so and to feel that the information will not be abused in any way. Ideally it will be easier for the parent if they can see that if they shared their concerns with the centre, 'extra support' may be provided to assist their child.
- Be careful not to suggest that the parent has a mental illness if they have not disclosed this information to you.
- Add a brief article to your parent newsletters or notices about mental health issues (see the COPMI website early childhood page for examples www.copmi.net.au/earlych/index.html) or include general announcements about possible supports (e.g. 'if your family has extra needs because of a parent's illness or chronic health condition, talk to us about it, we might be able to arrange help or additional subsidised hours or extra support').
- Pamphlets or posters that promote mental health and recovery from mental illness in your centre/service may help a parent feel that it is ok to talk about their mental health issues. Parents may feel that the resources indicate that mental health is not a 'taboo' topic at the centre. You can obtain posters and pamphlets from organisations such as beyondblue (www.beyondblue.org.au), SANE Australia (www.sane.org), the Mental Health Council of Australia (www.mhca.org.au) and/or your state mental health service.

- Welcome friends and family of parents to your centre or service and acknowledge to all parents that it 'takes a village to raise a child'. Friends or family may accompany a parent to the childcare centre or kindergarten:
 - to help establish smoother transition between home and care/education setting
 - as the parent may feel too intimidated on their own to declare their mental illness to the centre
 - to assist the parent in resuming full care for the child, for example, after they've been unwell or in hospital.

The benefit of a support person for the parent may be that the parent doesn't feel they have to bear the burden of managing any negotiation about their illness and their child's care on their own. Encourage all parents to have more than one contact person on their list at the centre/service.

- Friends and family (especially partners and those providing extra care for the child if the parent is unwell) may also be feeling overwhelmed, isolated, angry or confused and you may be one of very few caring adults they see regularly who can assist them to seek supports (e.g. through carers associations).

Your observational skills, knowledge and experience

- Your skills, knowledge and experience may help in noting the following signs of risk* that are sometimes displayed by children of parents with mental illness:
 - language delay due to poor language stimulation or limited verbal interaction
 - failure to thrive
 - no sign of distress or protest when the young child is separated from their parent, or excessive clinginess
 - poor attendance and/or interaction with others at your early childhood program
 - regression of development and/or emotional immaturity
 - taking on adult caring responsibilities for their parent
 - worrying excessively about their parent's welfare
 - overly shy or aggressive behaviour
 - disturbed or self-destructive behaviour
 - unkempt or very changeable physical presentation of the child or
 - transitions may become very difficult.

You may also note high levels of hostility and resentment on the part of the parent towards their young child if their relationship with their child is poor (e.g. 'He just wants to wind me up to get cross' and 'She's so demanding').

(*Note: 'Risk' does not mean 'destiny' and many children of parents with a mental illness do not experience adverse outcomes. This can be due to 'health protective' factors in their lives such as a strong relationship with another adult, a violence-free home environment, the child's sense of autonomy and the child's own temperament.)

- Express your observations to the child's parent/s sensitively and ask open-ended questions; 'I've noticed you seem (or Sally seems) quiet lately. How are things going?'. Use active listening techniques and reflect back what they tell you, to be sure you understand. Be calm, open and non-judgemental.

Offer to help them find support or information. If you feel uncomfortable about talking with the parent, seek help from your centre/service director or regional support staff or refer the parent to local community health services.

Ways you can assist the child

You can assist children to develop resilience by:

- encouraging and supporting them to have positive expectations of themselves
- enhancing their social and communication skills
- assisting them to develop competency in an area of their choice in which they have an interest
- assisting children to regulate their emotions (i.e. 'hold it together') in normal play activities
- creating a warm and predictable environment in your setting
- enhancing each child's sense of responsibility and belonging
- having a key worker assigned to each child to enhance their capacity to have a strong and positive relationship with an adult
- helping children learn to use a trusted adult to assist them.

Be vigilant about not allowing children to become very disorganised or highly distressed or very confused when they are under stress. Keep them close and allow them to use you to help regulate their emotions at this time.

Ways to assist the parent-child relationship

You may be able to assist the parent to develop, enhance or regain a secure and confident relationship with their child by:

- modelling appropriate interactions and predictable behaviour with the child (e.g. use a consistent positive way of greeting and farewelling the child each day)
- supporting the parent to access other services to assist them to develop their relationship with their child if necessary
- helping the parent learn how to use the adults in your setting to assist them with their child's feelings and problems
- reassuring the parent that re-connection after illness or hospitalisation may take a little while
- assisting the parent to reconnect with their child in enjoyable ways, for example by encouraging the parent to try enjoying simple play activities with their child. (*Note: you may also be able to help the parent identify play activities that the child enjoys.*)
- demonstrate to the parent that their child is delighted in and adored.

The *Piecing the Puzzle Together* booklet also encourages parents to develop a care plan for their child

- Your skills in observing behaviours of the child may provide a means of opening up conversation with the parent but may also lead to concerns or questions about what is going on at home (e.g. possible neglect or abuse). **Talk about your concerns with the parents (or caregivers connected to the child) in ways that will help establish trust, will allow a care plan to be instituted if necessary, and will provide reassurance that you wish to work with them for the benefit of the child.**

- Encourage all parents to complete crisis care plans (revised annually) on intake. There is a tear off care plan cover attached to the *Piecing the Puzzle Together* booklet and other examples can be found at www.copmi.net.au/common/download.html. This will encourage all parents to consider what they might do in emergencies and help to normalise the completion of care plans for parents with a mental illness. A universal '7 Steps to Safety' plan used in the Northern Territory can be found at http://childrenandfamilies.nt.gov.au/families/7_steps_to_Keeping_Children_Safe/index.aspx
- You may need to explore with the parent if there is a need for a plan about their health problem. For example, what steps need to be taken if a parent is having particular difficulties (e.g. anxiety attacks) to avoid situations that might scare the children. The parent may wish to develop this plan with their mental health worker.
- Ask about safety (e.g. does the parent ever feel that their child has felt unsafe/scared because of their parent's illness). If so, do they have a plan now for what to do if it happens again or to prevent it re-occurring? (See the reference to care planning above.) Reinforce protection planning with the child if able to comprehend simple safety measures their parent may have put in place (e.g. go to a neighbour's house or direct dial to relatives' phone numbers or Kids Helpline).
- Reporting of child protection concerns is mandatory in most states and your obligations under relevant legislation should be discussed at the outset of your relationship with any parent who visits your centre. In discussing any concerns with parents consider highlighting that reporting of your concerns can often assist the family to access extra services or hours of subsidised care.

A tip from a parent:

'I was extremely anxious about my children and afraid that my mental illness was a major negative factor in their lives. It was a relief to receive photos from the childcare centre staff of them interacting happily with other kids at the centre.'

If, in fact, the child is well settled and happy it may help the parent if you give them some proof of this (e.g. the photos mentioned above).

Some things to remember:

- Childcare can be a secure base or 'safe haven' for both children and parents, particularly as a parent explores his/her relationship with their young child (see Robyn Dolby's literature listed below for more information about this concept).
- Parents recovering from mental illness may appear to be capable of doing a lot but progress may be slow and changes may take time.
- Medication for mental health may interfere with a parent's functioning and this may be more evident at certain times of the day (e.g. it may slow them down in the mornings).
- Some parents may say that they are coping because they could be worried about what will happen to them or their children if others make assumptions about their ability to care for their children, or they might worry that others will think less of them as a parent.
- Supporting a parent who experiences mental health problems can be emotionally draining and/or may trigger emotional responses to your own experience of mental health problems – either your own problems in this area or of people close to you. Your peer networks and supervisory structures are important for you in order that you might help others (e.g. for support, to be involved in reflective practice, to reassure you that you are not alone in dealing with some difficult issues for some families). However, you need also to respect confidentiality by not sharing details of the situation with anyone who does not need to know.
- Primary care givers, centre directors or family day care providers need to keep up-to-date with their local referral network regarding mental health (e.g. GPs, other mental health services, community support services) in order to assist the parent with appropriate referrals.
- The COPMI website (www.copmi.net.au) includes relevant information about resources (books, website, fastsheets) and about programs, services and helplines around Australia.

Books that may be useful to read with young children about mental illness

Big and Me Miller, D. (2008)

Can I Catch it like a Cold? Kelbough, G. (2002)

Jake's Dinosaur Sved-Williams, A. (1996)

Making Mummy Better Scott, D. (2001)

Robby Rose and Monkey Lewis, A. (1995)

The Blue Polar Bear Tidy, S. and Forss, I. (2005)

Further reading

Dolby, R. (2007). *The Circle of Security: Roadmap to building supportive relationships*. Canberra, Early Childhood Australia

Dolby, R., Ebert, C. & Watson S. (2008). *Childcare: A 'Holding Environment' Supporting Infants and Their Parents With Mental Illness and Emotional Difficulties* in Sved-Williams, A. and Cowling V. (eds) *Infants of Parents with Mental Illness*, Chapter 19 pp. 249-261, Bowen Hills Qld, Australian Academic Press

Farrell, P. & Travers, T. (2005). *A Healthy Start: Mental health promotion in early childhood settings*. Australian e-Journal for the Advancement of Mental Health 4 no. 2.

Sorin, R. (2004). *Understanding children's feelings: Emotional literacy in early childhood*. Canberra, Early Childhood Australia

Weinreb, M.L. (1997). *Be a Resiliency Mentor: You May Be a Lifesaver for a High-Risk Child*. *Young Children* 52, no. 2, pp. 14-20

For further details, other books and links to downloadable fact sheets and tip sheets –

www.copmi.net.au/jsp/resources/resource_view_all_type.jsp

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