

The family and the patient: An investigation of mental health problems, risk factors, and support for the members of the families of psychiatric patients

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Avhandlingen för avläggande av filosofie doktorsexamen i psykologi, som med vederbörligt tillstånd av samhällsvetenskapliga fakultetsstyrelsen vid Göteborgs universitet kommer att offentligens försvaras måndagen den 29 maj 2023, klockan 13.00 i sal F1, Psykologiska institutionen, Haraldsgatan 1, Göteborg.

Fakultetsopponent: Professor Darryl Maybery, Department of Rural and Indigenous Health, Monash University

Föreliggande avhandling grundar sig på följande artiklar:

- I. Nordh, E.-L. W., Priebe, G., Grip, K., Afzelius, M., & Axberg, U. (2022). Mental health in children of parents being treated by specialised psychiatric services. *Scandinavian Journal of Public Health*, 50(8), 1113–1123. <https://doi:10.1177/14034948221076208>
- II. Wirehag Nordh, E.-L., Grip, K., Thorvaldsson, V., Priebe, G., Afzelius, M., & Axberg, U. (2023). Preventive interventions for children of parents with depression, anxiety, or bipolar disorder: A quasi-experimental clinical trial. *ACTA Paediatrica*, 112(1), 132–142. <https://doi.org/10.1111/apa.16555>
- III. Nordh, E.-L. W., Grip, K., & Axberg, U. The patient and the family: Investigating parental and child mental health problems, family functioning, and parent involvement in child and adolescent mental health services. *Unpublished manuscript*.



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Abstract

North, E.-L. W. (2023). The family and the patient: An investigation of mental health problems, risk factors, and support for members of the families of psychiatric patients. Department of Psychology, University of Gothenburg, PO Box 500, SE-405 30 Gothenburg, Sweden.

The aim of this thesis was to improve knowledge of the members of the families of patients in contact with psychiatry by investigating mental health problems, risk factors, and support received. The thesis is based on three studies from two clinical research projects, one in adult psychiatry and one in child and adolescent mental health services (CAMHS). Parent-rated questionnaire data were used in all three studies. **Study I** was cross-sectional and investigated mental health problems and risk factors experienced by 8–17-year-old children ($N = 87$) of parents in treatment for depression, anxiety, or bipolar disorder in adult psychiatry. Findings indicate more mental health problems in these children than children in the general population, and that one third had symptoms at clinical levels. Risk factors associated with more children's symptoms were younger child age and exposure to multiple risk factors, as well as parents reporting low perceived parental control relating to how they can handle their child's behaviour. In **Study II**, data from three waves of measurement (baseline, 6, and 12 months) were used to evaluate the effectiveness of preventive interventions used in routine care in adult psychiatry to support 8–17-year-old children of parents in treatment for depression, anxiety, or bipolar disorder. Families ($N = 62$), including 89 children, received the intervention available at the patient's psychiatry unit: Family Talk Intervention (FTI), $n = 35$; Let's Talk about Children (LTC), $n = 16$; or intervention as usual (IAU), $n = 38$. Findings indicate that the development of child mental health problems over time differed significantly between groups. Mental health problems did not increase in children receiving the FTI and LTC interventions but did increase in children in the IAU group. Furthermore, parents receiving the FTI and LTC reported strengthened perceived parental control in relation to handling rearing situations with their children, compared with the IAU group. **Study III** investigated mental health problems in parents ($N = 111$) of 5–17-year-old children ($N = 98$) referred to CAMHS. Findings indicate that many parents (41%) experienced elevated levels of mental health problems at the time of the child's first appointment and that, in these families, children were reported to have more symptoms and the proportion of families experiencing problematic family functioning was higher. Parents with elevated mental health problems reported having received group-based parent training/education to a greater extent during the first year of contact with CAMHS, and they rated participation in treatment planning significantly lower, than did parents below the cut-off for their own mental health problems. Taken together, the studies show that mental health problems in the members of the families of psychiatric patients are common, which underscore the importance of identifying the needs of the whole family when a patient is seen in psychiatry, to ensure that appropriate support is initiated. In adult psychiatry, investigating multiple relevant risk factors relating to the child, parent, and family can provide information about the child's and family's needs. Findings support the continued use of two preventive interventions to support the children of patients with depression, anxiety, or bipolar disorder. In child psychiatry, findings underscore the importance of addressing co-occurring parental mental health problems and that families experiencing co-occurring problems could need more extensive support, as the children were reported to have higher levels of mental health problems and more families were reported to have problematic family functioning. To meet the varying needs of families of psychiatric patients, findings indicate that interventions are needed at different levels of prevention and treatment.

Keywords: children, parents, family members, psychiatry, child and adolescent mental health services, mental health problems, risk factors, preventive interventions, support

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