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Repository Citation

Nicholson J, Aaker EA, Agar M, Albert K, Banks SM, Biebel K, Gershenson B, Seligowski A, Williams V, Warren B, Williams S, Woolsey K. (2008). Mothers with Mental Health Disorders: Mental Health Promotion in the Context of Parenting. Implementation Science and Practice Advances Research Center Publications. Retrieved from https://escholarship.umassmed.edu/psych_cmhsr/231

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Mothers with Mental Health Disorders: Mental Health Promotion in the Context of Parenting

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September 2008
From Margins to Mainstream
Melbourne, Australia

Fulfilling valued social roles is a key element in the recovery model.

The U.S. Substance Abuse and Mental Health Services Administration defines “recovery” as “[A] journey of healing and transformation enabling a person with a mental health problem to live a meaningful life in a community of his or her choice while striving to achieve his or her full potential” (National Council on Disability, 2008; SAMHSA, 2005).

Family roles are valued social roles.

Parenting is a meaningful role for the majority of American women, including those with mental health disorders (Mowbray, Oyserman, & Ross, 1995; Nicholson, Biebel, Williams, & Katz-Leavy, 2004). Success in this role, particularly for women with mental health disorders, would seem to be intimately related to mental health promotion, the recovery process, and successful functioning in other major life domains (e.g., employment, community living, and personal health and well-being). The achievement of maximum social participation for women with mental health disorders may hinge on addressing the challenges they face as parents.

“Parent” is a more valued social role than “patient.”

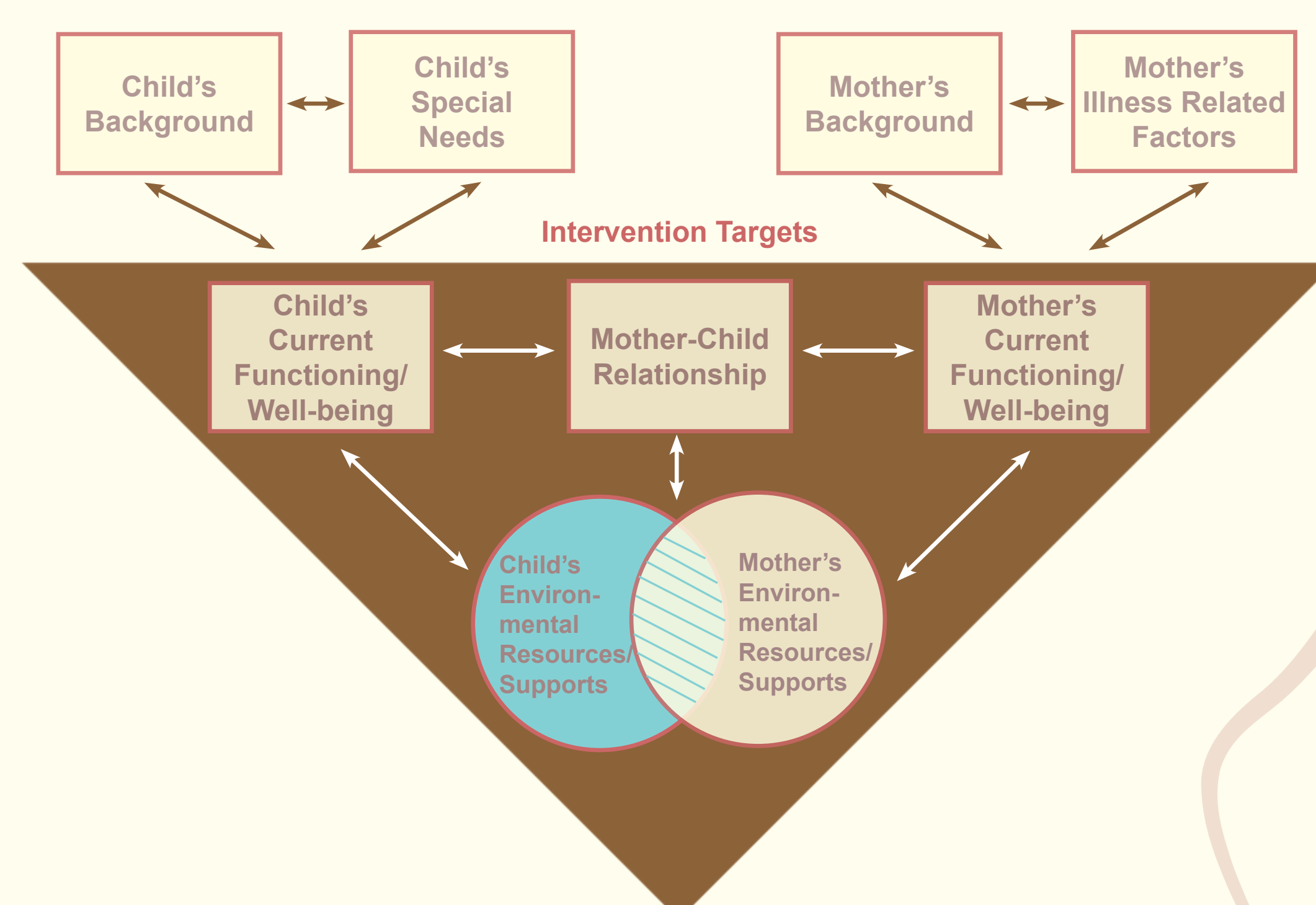
“...In reality I don't want to go [to the hospital]. I want to be home. I want to be the mother. I want to be in charge of the house...cooking, cleaning, taking care of everybody, changing diapers.”

—a mother with mental illness

The Value of an Ecological Model of Parenting, Mental Health Promotion and Recovery

The relationship between parenthood and other aspects of the lives of women with mental health disorders is complex. For example, a woman's status and functioning as a parent may influence the goals she sets for employment and her capacity to achieve them. Parenting may contribute positively to women's lives in the community by providing opportunities for meaningful activity, valued by society, in relationships with others, including family, friends, and neighbors. Mothers' personal health and well-being are deeply intertwined with that of their children. An ecological model of recovery provides the framework for exploring the relationships between individual adult characteristics, characteristics of the parent-child environment, and the interactions and transactions between the two.

Ecological Model of Parenting



Family is a key consideration in treatment and rehabilitation.

Parenting experiences provide opportunities for mental health promotion and recovery.

The Family Options study is an observational, longitudinal, mixed methods study of the experiences of parents with serious mental illness, their families, and children. Data are obtained in interviews with parents and children (ages 8 to 17) at baseline, 3, 6, 9, 12, 15, and 18 months. Mothers with mental illness provide evidence of person-centered elements of recovery in interviews about their experiences (Onken et al, 2007).

Hope

“I love my children. I don't think I could go on without my children. I do everything to encourage them, nurture them, and I think that I'm a better person...the kids were like the best thing.”

—a mother with mental illness

Sense of Agency

“Without services in place for them (children) I do have to kind of decide, ok, what is going on?...get the books and try to figure out for myself the best approach.”

—a mother with mental illness

Meaning and Purpose

“So you know...life comes full circle. And our faith has definitely, um, grown, solidified, and the children are participatory in that.”

—a mother with mental illness

Self-determination

“I've learned my limits. I can establish boundaries. I can forgive myself for being human and for having the illness, and try to teach them (children), educate them on mental illness in those teachable moments.”

—a mother with mental illness

Awareness and Potentiality

“I also try to learn from the traumatic and violent things that have happened in my life so that they don't repeat in their (children's) lives. I'm constantly making sure that they're safe, they're ok, they think for themselves and think the correct way on a situation (rather) than just going with the crowd.”

—a mother with mental illness

Recommendations

Family-informed policy and practice require a paradigm shift in the way policy-makers and providers view individuals and work together with them.

1. Ask women about their parenting status and children.
2. Support women in understanding the impact of their mental health on their children and families.
3. Emphasize the importance of mental health promotion and self-care.
4. Modify interventions and service settings, taking the role and responsibilities of parenthood into account.
5. Review policies and practices, taking the family context of women's lives into consideration, so that barriers and disincentives to success in the parenting role are overcome.

Disclosures: Dr. Nicholson and her colleagues receive support from AstraZeneca for non-pharmaceutical research. Dr. Nicholson receives support for this work from the National Institute on Disability and Rehabilitation Research as a Mary E. Switzer Distinguished Research Fellow.