

About a quarter of children grow up with a mentally ill parent

The offer of family-oriented support programmes in Austria is very limited, especially when the children are older than three years: "Targeted support for affected families exists only sporadically," says Ingrid Zechmeister-Koss of the Austrian Institute for Health Technology Assessment (AIHTA). One exception is the "Village" project financed by the Ludwig Boltzmann Society and the Medical University of Innsbruck, in which a family-oriented support programme is implemented for families with a mentally distressed parent. As part of the project, the AIHTA analysed societal and health economic dimensions of mental illness in families. The results show the importance of preventive measures.

According to epidemiological data, at least 250,000 mentally distressed parents have underage children in Austria. Approximately every fourth child grows up with a mentally ill parent on an occasional or long-term basis. The short- and long-term societal effects of these mostly precarious family situations can be researched with the method of the impact model, which presents causal and interrelationships in graphic and descriptive form. Even if affected children and adolescents do not necessarily develop health problems on their way to adulthood, the review by the Austrian Institute for Health Technology Assessment (AIHTA) including 39 studies nevertheless showed that the probability of mental disorders such as depression or behavioural problems in the form of aggressive behaviour is significantly increased. In addition, negative effects on physical health - such as unhealthy eating habits or poor dental health - were also found. Furthermore, the stressful conditions can have an impact on social life. For example, parental mental illness is likely to have a negative impact on some children's attendance at school and overall academic performance. This, in turn, can lead to an increased risk of unemployment or precarious employment situations later in adult life. "In some cases, increased criminal offences have also been observed," the AIHTA report continues.

"Even if not all children are affected, these potential effects lead to comprehensive societal costs, such as an increased need for psychosocial and psychiatric care or other medical services," says study leader Christoph Strohmaier. According to the expert, it should also be taken into account that the resulting costs do not only arise in the health sector, but also in other public sectors, possibly only at a later point in time, for example in an increased need for minimum income benefits.

One way to break the intergenerational cycle of mental illness and mitigate or even prevent negative consequences is through family-oriented intervention programmes with social support systems. These programmes follow a preventive approach and go beyond classical forms of therapy such as psychotherapeutic behavioural therapy, as they involve people from different professions and offer a broader variety of measures (e.g. peer support, psycho-education, etc.).



"Village Project: Simply being a child again

The offer of family-oriented support programmes in Austria is very limited, especially when the children are older than three years: "Targeted support for affected families exists only sporadically. The children and their needs are often not noticed - attention is only paid when the problems become acute," criticises Ingrid Zechmeister-Koss, who heads the area of health economics and health services research at AIHTA. Comprehensive scientific accompanying research is even rarer. One exception is the "Village Project" - an international research project of the Ludwig Boltzmann Society and the Medical University of Innsbruck, in which the AIHTA has been a partner since 2018. For this, a screening and support programme developed on the basis of international best practice approaches was implemented in Tyrol from November 2019, in which a total of 30 families participated.

In order to identify children from psychologically stressed families at an early stage, psychiatrists from hospitals and private practices or general practitioners carried out a short standardised screening of their patients. Afterwards, the parents were offered a further support programme that was individually tailored to the needs of the respective families. The programme activates various forms of social and primarily informal support for affected children and their families, such as voluntary tutoring, childcare, psychoeducation and neighbourhood help. If needed, professional help - if available - is also organised. "The aim is to build a sustainable and self-organised network around the children so that everyday family life is relieved. The children should be able to experience simply being a child again," explains study director Jean Paul from the Medical University of Innsbruck.

Overall, the researchers expect positive effects for parents and children on three levels: First, knowledge about the parent's mental illness should be increased and the ability to make use of various support services should the need arise should be improved. "The children often have only very limited knowledge about the parental illness, and in many families it is not discussed. This leads to uncertainty and feelings of guilt," reports the AIHTA expert. Another goal is to bring about a change in behaviour, for example by teaching the children and especially the parents to actively ask for help. Finally, there should also be changes on the emotional level and the children's self-esteem should be strengthened.

Promising results

Although the data evaluation for the "Village Project" is still at the beginning, the first results are promising: After participating in the family-oriented support programme, the children mainly reported changes on the communication level. Specifically, the children's knowledge about the mental illness of "mum or dad" increased significantly - not least because taboos were addressed by the parents for the first time.

The children's everyday life also changed positively for some, for example by having to take on less responsibility in the household. In addition, an increase in self-esteem was observed.

The parents primarily report a process of attitude change, which also led to a change in behaviour. Specifically, some mothers and fathers were subsequently able to admit their need for support and therefore actively ask for help. This led to an emotional relief in the whole family. "Some mothers have even started working again, although they had ruled this out at the beginning of the programme," adds Ingrid Zechmeister-Koss.

The "Village Project" ends in August 2022. The scientists involved are still looking for funding to continue the programme and the accompanying research. "Our data show that we can support another 50 families with around 150,000 euros. Compared to 'high-tech medicine', in which millions of euros of public money are invested every year, the amount we need is extremely small," Zechmeister-Koss emphasises.

Good cost-benefit ratio



In a second part of the systematic review, the AIHTA also examined the health economic effect of such family-oriented support programmes. A total of three programmes from other European countries were analysed in more detail to determine the cost-benefit ratio of interdisciplinary interventions for mentally stressed families.

All three studies aimed to support parenting and thus promote the positive development of the child. Families who only received standard care (Usual Care) served as a comparison group. The report provides evidence that family-oriented intervention programmes tend to have a good cost-benefit ratio in addition to preventive and therapeutic successes. "Every euro is well invested, so to speak. The significance of the analysed studies is limited, however, because the current health economic methods do not sufficiently capture the overall benefit of family-oriented programmes. For example, long-term societal effects are not taken into account, so that the actual benefit may be greater than was measured in the studies," summarises Christoph Strohmaier.

Contact for content-related questions and interviews:

Austrian Institute for Health Technology Assessment Garnisongasse 7/20 1090 Vienna

Web: http://www.aihta.at; http://www.village.lbg.ac.at

For questions about the Village Project

Dr. Jean Paul, PhD, BASc, BSc (project lead) p +43 / 676 5800490 e-mail: Jean.Paul@lbg.ac.at Ingrid Zechmeister-Koss, Dr. rer. soc. oec., MA p +43 / 1 / 2368119-19 e-mail: ingrid.zechmeister@aihta.at

For questions about the AIHTA study:

Christoph Strohmaier, MSc e-mail: christoph.strohmaier@aihta.at p +43 / 1 / 2368119-17

Link to study: https://eprints.aihta.at/1351/

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Contact for questions about the publication:

Mag. Günther Brandstetter; T +43 / 660 / 3126348 e-mail: guenther.brandstetter@aihta.at