THE EXPERIENCE OF A PARENT RECEIVING A DIAGNOSIS OF MENTAL ILLNESS FOR HIS YOUNG CHILD: HOW DO PERCEPTIONS OF MENTAL HEALTH CHANGE?

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Purpose: Young children (under age 10) are being diagnosed with and treated for mental illness with increasing frequency. There is a great deal of research and controversy regarding quantitative aspects of diagnosing and treating children with mental illness, yet relatively little qualitative study of the experience for the child and parents involved. The early life experience of receiving a mental illness diagnosis shapes a child’s and parent’s perceptions of mental health and illness and mental health status for the rest of their lives. Preventing mental illness means having an understanding of how receiving a diagnosis of mental illness helps or hinders that person and his or her family and community, and shapes our societal understanding of mental health and illness. The main question for this study was “How do you conceive of mental health after having your child receive a mental illness diagnosis?”

Methods: The goal of this study was to gain a greater understanding of how a child’s receiving a diagnosis of mental illness affects that parent’s perception of mental health and illness, using the Denzin’s interpretive interactionism (1989) for the qualitative research design. First cycle exploratory and affective coding methods as described in Saldana (2009) were employed for Denzin’s process of capture, bracketing and re-contextualization of the data. Potential participants were parents of children under age 10 diagnosed with a mental illness within the last 2 years, within a 1 to 2-hour range of driving for the author, and able to meet up to 3 times for a 1 to 2-hour interview. One of three screened parents who contacted the author met the criteria and was interviewed twice in Fall 2011.

Findings: This parent’s epiphany occurred while experiencing firsthand his son’s experience of kindergarten. The following themes emerged: experiencing alienation from peers; educational staff’s stigmatizing his situation and conflicting with advice from mental health care providers; shifting perspective on and orientation to mental illness; cobbling together social support structures and a coherent picture of mental health and illness for himself; and networking with mental health care specialists and new peers.

Conclusions: Perceptions of mental health and illness are influenced greatly by peers, by education and mental health care systems, and by the current biomedical conventional wisdom of mental illness as neurochemical imbalance. Future research should focus on strengthening knowledge in the health care provider and general population of epigenetics, early life origins of mental illness, and capacities for mental health promotion and disease prevention.

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