Myth That Parents with Mental Illnesses Commonly Maltreat Children Wreaks Havoc on Families

A loving and concerned young mother lost her parental rights to her two youngest children after a psychologist testified that she had a personality disorder, a diagnosis that she had never before received. The psychologist, whom the 29-year-old mother of three had never met prior to their two-hour interview, had ignored her request that he interview the people whom she had offered as references; these included her employer as well as the mental health professionals who had been successfully treating her depression. Although she has retained joint custody of her 9-year-old son, “my heart is broken,” she says. She vows to continue fighting until she is reunited with her 4-year-old son and her 8-year-old daughter, who was returned to foster care by the family that had planned to adopt both her and the young boy, apparently because the little girl developed emotional problems when she was no longer allowed to see her mother. “My attorney says that I was a victim of the system,” she says. The children are also victims, since they were wrenched from their mother’s arms, separated from all the people they love, and thrust into a system that cannot provide the care they need.

This young mother fell victim to the myth that parents with mental illnesses tend to maltreat their children. In reality, a mental illness is only one of many potential risk factors for child maltreatment, which includes all types of abuse and neglect that occur among children under age 18. The four common types are physical, sexual and emotional abuse, as well as neglect.

Experts agree that determining who is at increased risk of child abuse and neglect is a complex task, and a parental mental illness alone does not indicate an increased likelihood of child maltreatment. Poverty and unemployment are two major factors that have been repeatedly linked with greater rates of abuse and neglect [1-3]. Additional risk factors include a lack of decent, affordable housing; inaccessible healthcare; community violence; social isolation; substance abuse; parental illness; and criminal involvement [1, 3-5]. Risk factors should be assessed across multiple domains, which include risks within the family and in the community [4]. The presence of multiple risk factors should raise a red flag.

At the same time, it is unclear how many parents with mental illnesses are raising their children without incident [6]. While known abusers are studied to determine how many have a mental illness, research has failed to focus on the rates of abuse and neglect by parents with mental illnesses, considered as a group.

Furthermore, researchers have reported mixed results overall on the causes of child maltreatment. Typically, such studies lack a rigorous research design, as they employ
retrospective self-reports and rarely draw on multiple sources of data [2]. For example, Brown, et al. (1998) found that state records and self-reports contradicted each other in many cases of reported maltreatment.

Selection bias must also be considered: It may be that poorer families, who are more likely to receive social services – which tend to be intrusive – are also more likely to be identified as abusive or neglectful than wealthier families [1]. This could account for the fact that mothers with mental illnesses are hesitant to seek public mental health services, for fear that their parenting abilities will be under increased scrutiny and they will lose custody [7].

While research indicates that mothers with serious mental illnesses are almost three times as likely to be involved with the child welfare system, or to have children who were placed outside the home, as mothers with no psychiatric diagnosis, the few studies in this area indicate that mothers who have psychiatric disabilities “are no more likely to abuse their children” [7].

Research indicates that parents who have gained insight into their mental illnesses may be less likely to abuse or neglect their children [8]. In addition, the same kinds of services that have prevented child maltreatment in families where there is no mental illness – such as respite care, home visitor programs and/or aides who can provide practical help in the home – may also be helpful in families with parental mental illness [9].

Meanwhile, it is critically important to note that child abuse is determined by many risk factors, and mental illnesses are likely only a small part of the picture [10]. If this were understood by the child-serving systems, including the courts, and by legislators and policy-makers, a little boy and girl might now be safe at home instead of adrift in a system that cannot love or properly care for them.

References
