

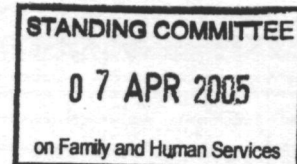


AICAFMHA:

promoting mental health for young Australians

Australian Infant, Child, Adolescent and Family Mental Health Association Ltd ABN 87 093 479 022

Committee Secretary
Standing Committee on Family and Human Services
House of Representatives
Parliament House
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Re: Family and Human Services Inquiry into Balancing Work and Family.

Thankyou for the opportunity to submit information to the Standing Committee on Family and Human Services Inquiry into Balancing Work and Family.

AICAFMHA's work in the area of children of parents with a mental illness (COPMI) has highlighted the following issues which we believe are of relevance to the Committee;

1. People with mental health problems (including those who are parents or are contemplating parenthood) face discrimination in gaining and retaining employment¹. The additional adversity for children growing up in families affected not only by parental mental illness but also poverty and social isolation resulting from parental unemployment can have major negative implications for the children's health and well-being².
2. Young carers (of their parent/s with a mental illness) have reported that their caring role is a barrier to their participation in training, education and employment³. This is more often the case where the child/ren live in a sole-parent situation but studies have shown that even in two parent homes where a parent has a mental illness, the well parent often needs to take on extra responsibilities as a 'provider' for the family, leaving children to assume the majority of care duties¹. Financial and practical support is vital for young carers to participate fully in education and employment and to pursue any dreams of parenthood they may have for themselves.
3. The very biological attributes that make early childhood a time of great opportunity for development also make children very vulnerable to negative experiences and poor attachment.⁴ Pre-school-aged children of the most isolated and at-risk parents with a mental illness remain a group that is receiving little attention from service providers despite the extensive evidence about the value of early intervention, prevention and health promotion for them. It is therefore vital

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that parents be given the opportunity to stay at home with their children if they wish to during the child's early years and that they should receive financial and practical support to do so.

4. Parents with mental health problems who choose to participate in the workforce often need support to remain in the workforce if it is to benefit them both financially and socially. Work also plays an important role in people's mental health. The role of social factors (such as unemployment) in some mental disorders can exacerbate existing problems (eg lone parenthood plus unemployment can be significant factors in women's susceptibility to depression and continued unemployment can become an enduring factor in the chronicity of mental illness).

We would welcome the opportunity to meet with your Committee to further expand upon these points.

Yours Sincerely,

Philip Robinson, PSM

REFERENCES

1. Aldridge J, Becker S. *Children Caring For Parents With Mental Illness*. Bristol: The Policy Press, 2003.
2. Falkov A, editor. *Crossing bridges: Training resources for working with mentally ill parents and their children. Reader for managers, practitioners and trainers*. Brighton, East Sussex: Pavilion Publishing for Department of Health, U.K., 1998.
3. Carers Australia. Young Carers Research Project - Final Report. Canberra: Commonwealth Department of Family and Community Services, 2001.
4. Perry B. *Maltreated Children: Experience, Brain Development and the Next Generation*. New York: W.W. Norton, 2004.

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