

The forgotten caregivers: How training parents can help treat kids with mental illness

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PUBLISHED DECEMBER 17, 2020



Michael Menu and Lynn Courey look at a photo of their late daughter, Sasha Menu Courey, at their Toronto home. Sasha killed herself in 2011 while she was a student at the University of Missouri. A few of her friends and Sasha's sister Kayla helped lay the groundwork for the SashBear Foundation, a suicide-prevention group that raises awareness of borderline personality disorder.

FRED LUM/THE GLOBE AND MAIL

They call it the speed validation game. On one side of the table, a parent playing a teenager reads a statement from a stack of cards: You owe me a new phone. I wish you were dead. I wish I were dead.

Another parent, sitting opposite, tries to answer wisely and without judgment. “I can see how upsetting it is not to have your phone.” Or, “I want to understand. Can you tell me why you’re feeling this way?”

The role-playing exercise is part of a parent-training program called Family Connections that hosts workshops across the country. It's designed for families with children who have complex mental health symptoms, such as extreme emotions, or self-harming or suicidal behaviour.

The program is evidence of a long-overdue recognition, families and experts say, that parents with the right skills and support can improve outcomes for their vulnerable kids, and reduce the risk of suicide.

The concept is simple: train the parents, treat the patient.

At Yale, clinical trials for a new 12-week individual-therapy program exclusively for parents has produced positive results for children and teenagers diagnosed with anxiety. A small-scale study in Europe is testing whether parent training can prevent mental health issues in children. In B.C., a new mental health program includes weekly calls from counsellors to help parents respond better to their child's complex symptoms.

What makes these programs unique is that the children themselves don't need to be receiving mental health care, an issue that has often prevented parents from qualifying for workshops and programs. This problem drew Eli Lebowitz, the developer of the Yale project, to work solely with parents – he was frustrated that families who needed help most were often excluded from support programs because their kids refused treatment or were too sick to attend therapy.

It's an issue that also needs to be addressed in Canada, says Ashley Miller, a clinical assistant professor of psychiatry at the University of British Columbia, since hospital-based supports for parents are sometimes extended only to those whose children are already in care.

Parents have traditionally felt blamed – or have blamed themselves – for their children's mental illness, says Lynn Courey, president of the SashBear Foundation, which organizes the free Family Connections workshops with volunteer facilitators. (Since the lockdown in March, Ms. Courey said that virtual workshops have been delivered to about 1,000 family members, with some now able to log in from remote locations.) She and her husband, Mike Menu, started the foundation after losing their own daughter, Sasha, to suicide in 2011.

"I lost my daughter to a wait list," says Ms. Courey, referring to the family's efforts to get the right care. In the space between appointments, Sasha's parents struggled to support her, not sure what she needed – a sense of helplessness they now hope to spare other parents.



Ms. Courey shows an impression of one of Sasha's fingerprints taken before she was buried.

FRED LUM/THE GLOBE AND MAIL

New research shows that skilled and supportive parents can dramatically improve mental health outcomes. A 2018 American study found that training and providing regular advice to a trusted adult chosen by the young patient – in many cases, a parent – significantly reduced suicides in high-risk teens over 10 years. A study published in March by Dr. Lebowitz found that the parent-only training was comparable to child-based cognitive behavioural therapy in reducing both anxiety in young patients and parental stress.

In Kitimat, B.C., Florence Slanina and her husband weren't sure how to ease the anxiety of their six-year-old son, Oliver, who would be in tears at the thought of going less than a block to baseball practice. For about two months, they participated in a free B.C. program called Confident Parents, Thriving Kids, watching videos and taking weekly phone calls from a coach supplied by the provincial branch of the Canadian Mental Health Association. Ms. Slanina says they learned both science and strategies. They taught Oliver to give his anxiety a name so he had control over it – he chose “Gang of Zombies.” They designed bravery ladders to break activities into steps, so that even just leaving the house was a success. Ms. Slanina learned not to accommodate every anxious moment and to take time for herself. As a family, she says, the experience “has brought us so much closer together.” Oliver still has anxious moments, but he's sleeping on his own and attending tae kwon do. And now Ms. Slanina says she has the skills for her other three children, as well.

At Family Connections, explains Doreen Hyndman, who originally took the course to help her son and is now a facilitator for other parents, participants are coached to accept their child's condition, given skills to stay calm when symptoms escalate, and learn how

to practise self-care. “Parents come in wanting solutions,” Ms. Hyndman says. But in cases of complex mental illness, the parent’s goal is bigger than figuring out how to get their daughter to stop skipping school. “You want your child to live,” she says, “and you want a relationship with them.”

Jennifer Thomson, another parent who took the course, says it dramatically improved her relationship with her daughter. She learned to listen more, respond more carefully and see her daughter’s point of view so she could offer support instead of judgment. “The first thing you have to do is pay attention,” Ms. Thomson says. Worrying about school, appointments and the future sometimes made her “miss the small moments when she was reaching out to me.”

Parent training doesn’t replace timely mental health treatment, of course, and not every parent wants training or is capable of accepting it, especially if they have mental health issues themselves. Fathers, according to the research, participate at lower rates than mothers. Some research suggests that, like other skills-based training, the benefits may be shorter-term and require booster courses.

But parents also point out that they’re often the one constant presence for their children’s care, so training and supporting families only makes sense. There were times when Ms. Thomson’s daughter refused to go to therapy, or her doctors moved on. “I am one person she can’t get rid of – her mom,” Ms. Thomson says. “I will never give up on her.”