INFLUENCE OF PSYCHOPATHOLOGICAL DISORDERS OF CHILDREN IN FAMILY STRUCTURE AND FUNCTIONING

Adrián Cano Prous
Baras Pastor et al.
Dpto. Psiquiatría y Psicología Médica
University Hospital of Navarra
www.cun.es
MARITAL AND FAMILY THERAPY FRAME
CURRENT SITUATION

1. MARITAL FUNCTIONING
More than 1 million annual divorces

One marital breakdown every 30 seconds

Over 10 million marital breakdowns in 10 years, that have affected over 15 million children
Family breakdown has increased by far the most in Spain in the last 10 years.

In Spain, family breakdown has increased by 268% in 10 years...

Germany, UK, France and Spain are the UE27 countries with the highest number of divorces.

Source: Institute for Family Policies
In Europe, marriages that fail last a mean of 13 years.

Italy is the country where marriage lasts longest (16.8), and Austria the one where it lasts least (10.6).

In Spain, marriage lasts a mean of 14 years.

Source: Institute for Family Policies
CURRENT SITUATION

2. FAMILY FUNCTIONING
Only 2.4 members per household

1.5 persons per household have been ‘lost’ since 1980

Malta, Cyprus, Romania and Spain are the countries with the highest number of members per household

Source: Institute for Family Policies
Households have fewer children.

2 out of 3 households have no children

Only 17% of households have 2 or more children

Fuente: Instituto de Política Familiar
CURRENT SITUATION

3. ADULT PSYCHOPATHOLOGY
HOSPITAL ADMISSIONS IN 2007

35 – 44 years old: 1,037,803 days admitted to hospital

Source: Spanish National Institute of Statistics
HOSPITAL DISCHARGES IN 2007

35 – 44 years old: 27,376 mental illness discharges

Source: Spanish National Institute of Statistics
CURRENT SITUATION

4. CHILDREN PSYCHOPATHOLOGY
EVOLUTION OF CHILDREN AND ADOLESCENT PSYCHIATRY CONSULTATIONS
CHILDREN AND ADOLESCENT PROGRAM

This program includes all patients under 17 years attended at Mental Health Centres in our community.
HOSPITAL ADMISSIONS

15 - 24 years old: 10,329 mental illness discharges

Source: Spanish National Institute of Statistics
ADHD
CONSEQUENCES OF UNTREATED ADHD

HEALTH
- 50% ↑ bike accidents 1
- 33% ↑ emergency room visits2
- 2–4 x other vehicle accidents 3-5

PATIENT

FAMILY
- 3-5 x ↑ divorce or separation11,12
- 2-4 x ↑ fights among siblings 13
- Depression in parents

SCHOOL/WORK
- 46% expelled
- 35% leaving 6
- Lower occupational level7

SOCIETY
- 2x risk of Substance abuse 8
- Early onset 9
- More likelihood of consumption in adulthood10

WORK (PARENTS)
- ↑ Work absence
- Lower productivity14

3 NHTSA, 1997.
4-5 Barkley et al, 1993, 1996.
13 Mash & Johnston, 1983.
IMPACT ON THE FAMILY

- Stress
- Self-guilt
- Social isolation
- Depression
- Marital disruption

Mash EJ, Johnston C. J Child Psychol. 1990; 19
PROFESSIONAL IMPACT ON PARENTS OF UNTREATED ADHD CHILDREN

Note. American Academy of Family Physicians Annual Scientific Assembly, Dallas, September, 2000
HYPOTHESIS AND OBJECTIVES

MARITAL/FAMILY DYSFUNCTION ➔ DIVORCES/SEPARATIONS

CHILDREN PSYCHOPATHOLOGY

PSYCHIATRY CONSULTATION
Family of children going for follow-up to GENERAL PEDIATRICS

Family of children first-time going to CHILDREN AND ADOLESCENT PSYCHIATRY

Family of children going to SPECIALIZED PEDIATRICS

SOCIODEMOGRAPHIC DATA

CHILDREN
- Gender
- Age
- Biologic/adopted
- Number of siblings
- Position among siblings
- Academic year

PARENTS
- Civil status
- Years of marriage
- Socioeconomic level
- Place or residence
- Educational level
- Occupation
Family of children going for follow-up to GENERAL PEDIATRICS

Family of children first-time going to CHILDREN AND ADOLESCENT PSYCHIATRY

SOCIODEMOGRAPHIC DATA

DAS: Dyadic Adjustment Scale: measures quality in family relations

FACES III: Family Adaptability and Cohesion Evaluation Scale: measures adaptability and family cohesion

FAD: McMaster Family Assessment Device: assesses family functioning

Family of children going to SPECIALIZED PEDIATRICS
<table>
<thead>
<tr>
<th></th>
<th>FAMILIES PATIENT (N 121)</th>
<th>FAMILY HEALTHY (N 44)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of father</td>
<td>45,1</td>
<td>37,4</td>
</tr>
<tr>
<td>Age of mother</td>
<td>42,1</td>
<td>34,8</td>
</tr>
<tr>
<td>Age of child</td>
<td>10,9</td>
<td>4,7</td>
</tr>
<tr>
<td>Years of marriage</td>
<td>15,6</td>
<td>9,6</td>
</tr>
<tr>
<td>Household members</td>
<td>4,3</td>
<td>4,4</td>
</tr>
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</table>
SOCIODEMOGRAPHIC DATA

Ages of family members

<table>
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<tr>
<th>Ages of Family Members</th>
<th>Families Healthy</th>
<th>Families Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fathers</td>
<td>37.4</td>
<td>45.1</td>
</tr>
<tr>
<td>Mothers</td>
<td>34.8</td>
<td>42.1</td>
</tr>
<tr>
<td>Children</td>
<td>10.9</td>
<td></td>
</tr>
</tbody>
</table>
SOCIODEMOGRAPHIC DATA

- Years of marriage:
  - Families healthy: 9.6
  - Families illness: 15.6

- Household members:
  - Families healthy: 4.4
  - Families illness: 4.3

(Families healthy vs. Families illness)
NATURE OF CHILDREN

6.6% Adopted
93.4% Biologic

2.6% Adopted
97.4% Biologic

Patients

Healthy
CHILDREN GENDER

Patients

Healthy

37,2% Male
62,8% Male

42,1% Male
57,9% Male
SOCIOECONOMIC STATUS

- Patients
  - 38.0% Medium-Low
  - 5.8% Medium
  - 5.8% Medium-High
  - 50.4% High

- Healthy
  - 31.9%
  - 2.3%
  - 63.5%
PSYCHIATRIC DIAGNOSIS OF CHILDREN

- ADHD: 74.0%
- Behavior D.: 13.0%
- ED: 5.6%
- Development D.: 3.7%
- Anxiety D.: 3.6%
AGE – ACADEMIC YEAR

- Patients
  - Matches: 85.9%
  - Doesn't match: 11.6%
  - Doesn't answer: 2.5%

- Healthy
  - Matches: 97.4%
  - Doesn't answer: 2.6%
DAS: Dyadic Adjustment Scale: measures the quality of dyadic relationships

• FORMAT:
  – 32 items.
  – Different response formats (Likert scales from 2 to 7 points)

• SCALES:
  – Dyadic Consensus
  – Dyadic Satisfaction
  – Affectional Expression
  – Dyadic Cohesion
  – Dyadic Adjustment (global scale)
DAS - PARENTS OF ILL CHILDREN
DYADIC CONSENSUS
DYADIC SATISFACTION
AFFECTION EXPRESSION
DYADIC COHESION
TOTAL

Patients

Healthy

DAS - FATHERS OF BOTH SAMPLES

*
DAS - MOTHERS OF BOTH SAMPLES
**FAD**: McMaster Family Assessment Device: measures family functioning

- **FORMAT**: 60 items.
- **SCALES**:
  - Problem solving
  - Communication
  - Roles
  - Affective responsiveness
  - Affective involvement
  - Behaviour control
FAD - PARENTS OF HEALTHY CHILDREN

![Graph showing the comparison between fathers and mothers on various domains]

- Dysfunctional
- Functional

- Problem solving
- Communication
- Roles
- Affective response
- Affective involvement
- Behav. Control
- Total

- Fathers
- Mothers
FAD - FATHERS OF BOTH SAMPLES
FAD - MOTHERS OF BOTH SAMPLES

Dysfunctional

Functional

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<tr>
<th>Problem solving</th>
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* Indicates significant difference.
**FACES III:** Family Adaptability and Cohesion Evaluation Scale: measures adaptability and family cohesion

- **FORMAT:** 20 items.
- **SCALES:**
  - **Cohesion:** assesses emotional bonds between family members
  - **Adaptability:** assesses family ability to vary its structure when needed
  - Both scales are represented with the Olson Circumplex Model
FACES - PARENTS OF PATIENTS

- Father patients
- Mother patients
FACES – PARENTS OF HEALTHY CHILDREN

High Chaotic
Flexibility
Rigidity
Structured
Flexible
Separated
Connected
Enmeshed
Dissengaged
FACES III PADRES

Diagram showing the relationship between father health and patient condition with circles representing different levels of cohesion and structure.
FACES III MADRES

Mother healthy

Mother patient