THE TOUGHEST JOB YOU’LL EVER LOVE: BEING A YOUNG ADULT PARENT WITH A SERIOUS MENTAL HEALTH CONDITION

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Systems and Psychosocial Advances Research Center (SPARC)
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University of Massachusetts Medical School

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Acknowledgements

The Learning & Working Center at Transitions RTC is a national effort that aims to improve the supports for youth and young adults, ages 14-30, with serious mental health conditions to successfully complete their schooling and training and move into rewarding work lives. We are located at the University of Massachusetts Medical School, Worcester, MA, Department of Psychiatry, Systems & Psychosocial Advances Research Center. Visit us at:

http://www.umassmed.edu/TransitionsRTC

The Transitions RTC incorporates Participatory Action Research with young adults with lived experience in the design, conduct and interpretation of research and knowledge translation activities.

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Contributors

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BACKGROUND
Why Young Adult Parents?

• Young adulthood is a time of significant life transitions (e.g., career development)

• People with serious mental health conditions (SMHC) tend to parent at an earlier age than general population

<table>
<thead>
<tr>
<th>Average Age Becoming a Parent</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Population</td>
</tr>
<tr>
<td>Women 24 years old</td>
</tr>
<tr>
<td>Men 27 years old</td>
</tr>
</tbody>
</table>

A Vulnerable Yet Understudied Population

- Compared to parents without SMHC, parents living with SMHC in the U.S. are more likely to be:
  - Unemployed
  - Living below poverty threshold
  - Dependent on government assistance
  - Have lower educational attainment

- Despite the outcomes, little is known about the first-hand experiences of young parents with SMHC as they navigate multiple roles and transitions.

Presentation Objectives

1. Present themes from qualitative interviews with young adult parents living with SMHC

2. Share Jennifer’s personal story about her journey as a young adult parent
THE CHEER STUDY

Collecting Histories of Education and Employment during Recovery
Methods

- One-time, 90 minute qualitative interviews (Total N=61)
  - Mental health experiences
  - School and work history
  - Other life events (e.g., incarceration, homelessness)

- Young adult parent sample (N=19) were asked additional questions about being a parent including:
  - Changes in activities after having children
  - Custody and living arrangements with children
  - Challenges of parenting
  - Supports for parenting responsibilities
Eligibility Criteria for Parents

• 22-30 years old

• Have been diagnosed with at least one of the following:
  • Major Depression
  • Anxiety Disorder
  • Post-Traumatic Stress Disorder
  • Schizophrenia or Schizoaffective Disorder
  • Bipolar Disorder
  • Eating Disorder
  • Borderline Personality Disorder

• Reported significant treatment or disruption due to SMHC
  • Inpatient hospitalization
  • Partial hospitalization
  • Client of DMH
  • Received Special Education Services
  • Formal Leave of Absence

• Some school and work history
SAMPLE DESCRIPTION

Young Adult Parent Sample (N=19)
Demographics

Gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>16</td>
<td>84%</td>
</tr>
<tr>
<td>Male</td>
<td>3</td>
<td>16%</td>
</tr>
</tbody>
</table>

Race

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>63%</td>
</tr>
<tr>
<td>Bi/Multiracial</td>
<td>11%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>16%</td>
</tr>
<tr>
<td>Other</td>
<td>11%</td>
</tr>
</tbody>
</table>

Ethnicity

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Hispanic or Latino/a</td>
<td>79%</td>
</tr>
<tr>
<td>Hispanic or Latino/a</td>
<td>21%</td>
</tr>
</tbody>
</table>

Age

<table>
<thead>
<tr>
<th>Age</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Range</td>
<td>22-30</td>
<td></td>
</tr>
<tr>
<td>Average</td>
<td>26</td>
<td></td>
</tr>
</tbody>
</table>
### Parenthood

#### Age of Children

<table>
<thead>
<tr>
<th>Range</th>
<th>2 weeks – 12 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
<td>5 years</td>
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</tbody>
</table>

#### Number of Children

<table>
<thead>
<tr>
<th>Number</th>
<th>Count (Percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>10 (53%)</td>
</tr>
<tr>
<td>2</td>
<td>7 (37%)</td>
</tr>
<tr>
<td>3</td>
<td>1 (5%)</td>
</tr>
<tr>
<td>4</td>
<td>1 (5%)</td>
</tr>
</tbody>
</table>

#### Pie Chart

- **Under 20 years old**: 53%
- **20-25 years old**: 42%
- **Over 25 years old**: 5%

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The Transitions to Adulthood Center for Research
Highest Level of Education

- Some high school: 5%
- HS grad/GED: 42%
- Some college: 37%
- Associate's degree: 11%
- Bachelor's degree: 0%
- Master's degree: 5%
Annual Income

- <$10,000: 53%
- $10K-$20K: 32%
- $20-$30K: 11%
- >$30K: 5%

*Not including financial assistance (e.g., SSI, SSDI)*
QUALITATIVE FINDINGS

First-person narratives from young parents
Custody Arrangements

- 14 moms had primary custody
  - 4 living with biological father
  - 10 were single mothers (over ½ of sample)

“I am mom and I am dad. So I have to look out for her safety and her well-being all the time, and cook dinner and laundry and everything.”

- Only 1 of the 3 dads had partial custody

“I haven’t seen my son in 8 years. It’s been very, very difficult.”

“Even though there’s no restriction on my visitation, [the mother] refuses to let me see [my son]. And the fact that I’m not there really hurts him.”
Parenting Challenges

• Co-parenting
  • Many navigating complex relationships with other parent

• Childcare
  • Daycare is expensive (vouchers were helpful but hard to acquire)
  • Grandparents often helped with childcare
  • Lack of childcare was a barrier to work (especially for single moms)

• Homelessness and Housing Instability
  • Some experienced homelessness while living with children
  • Separated from child for periods of time due to unstable housing
Children as Motivators

Caring for children can be a motivating force that helps young parents:

- Keep moving through depressive episodes
  “I refuse to not be able to provide for my son. I’ve been super determined. Even though I have my depression and my anxiety, I still go forward.”

- Maintain sobriety

- Avoid risky behaviors (e.g., to ensure custody of child)

- Develop career ambitions
  “I knew I wanted to be a role model for her. So that’s why I went to school.”

- Feel a sense of purpose and meaning
Parenting while Living with SMHC

• Stigma is a reality for parents with SMHC

• 1 dad experienced discrimination in court

“Having a mental illness and being a parent is possible. If you have PTSD, it doesn’t mean your child is going to go through that with you. It doesn’t mean you’re bad. You can still be a great parent regardless of your mental illness.”
PERSONAL STORY
My Journey as a Young Mom

- I became a parent at age 21
  - single parent for past 4 years
- My daughter, Emily, is 6 years old
- Main support is my mom (Emily’s “Mimi”)
- Emily is my motivation every day
- We make a great team!
Stigma and Disclosure as a Young Parent

- Being a parent with a mental health condition can be very stigmatizing
- Difficulty trusting and opening up to service providers
- Investigated by DCF because of mental health condition
  - Very traumatic experience
  - Feeling judged and discriminated against
  - Fear of losing my child
- However, these challenges have only made me stronger
Hi Jennifer.
I just wanted to send you a quick email about Emily. I am very proud of how much progress she is making and she has been working very hard with her reading and writing. She’s been a great helper, too! She’s doing great!

Ms. O
RTA Coach
P.S. 291 Elementary School

Emily received an award at school for reading.
Parenting and Recovery

• #1 Priority: Make sure I take care of myself so I can be the best role model for my daughter

• Throughout the years of caring for Emily…
  • I continue to sustain a job for over 8 years
  • I am going to therapy consistently
  • Maintaining relationships with friends and family
CONCLUSIONS
Starting the Conversation...

- Personal narratives can provide important insight on the lives of parents with SMHC
  - Parenting presents an opportunity for motivation and recovery
  - Often poverty and housing instability are the greater challenges

- Future research is needed to untangle the relationship between economic status, SMHC, and parenting challenges

- Implications to support young parents with SMHC
  - Employment, education, and housing supports
  - Providers should be aware of clients who are parents and integrate this meaningful life role into their care
Thank You!

Contact us at Emma.PiciDOttavio@umassmed.edu, Jennifer.Whitney@umassmed.edu, or Kathryn.Sabella@umassmed.edu

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