

Depression Among Primary Caregivers of Children with Mental Health Needs

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Health Crisis in USA

- Distress experienced by children with mental health needs and their families has created a health crisis in our country associated with many unmet needs

U.S. Public Health Service. *Report of the Surgeon General's Conference on Children's Mental Health: A National Agenda*. Washington, D.C.: U.S. Government Printing office, 2000.

Parents Face Tremendous Challenges

- **12 – 20% of nation's children have mental health problems meriting treatment**
- **Less than 1/3 are thought to receive services**
- **About half are thought to be receiving inappropriate services**

June, W. & Thompson, A.H. (1999). Self-regulating service delivery systems. *Journal of Behavioral Health Services & Research*, 26(1), 67-79.
SAMHSA. (1996) *Mental Health United States*. Rockwell, MD: CMHS.

Parents are Usually

- Primary caregivers (before, during, and after services end)
- Responsible for obtaining services
- Best source of information about effects of caregiving

Parents Face Challenges

Yet, we know little about:

- The extent and nature of the challenges they face
- What factors mediate or moderate the effect of caregiving on parents' well-being.





What We Know

- The association of maternal depression with child mental health problems (usually causally described)



What We Know

Increasing literature about the effects of caring for a child with:

- A chronic physical health problem
- Intellectual disabilities
- Traumatic brain injuries



Limited Research

Limited, though growing, research about the effects on parents of caring for a child with mental health needs




Limited Research

When comparison groups were used, parents caring for children with ADHD, Autism, Depression, or Behavioral Disorders were not functioning as well as parents of children with normal development, mental retardation, Down syndrome, learning disabilities, or in a pediatric clinic [non psych])



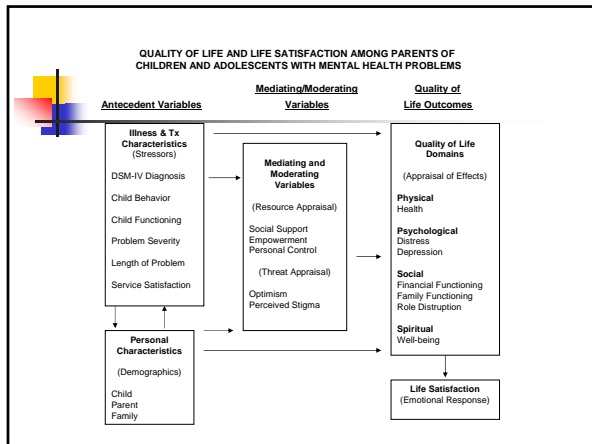
This Study

A part of a larger study examining the quality of life and life satisfaction of parents caring for children with mental health problems



Purpose of This Study

To explore the association of antecedent, moderating, and mediating variables with parents' depression in order to identify potential strategies to decrease their depression



- ## Depression: Selected Outcome
- Antecedent Variables: Internalizing & Externalizing raw scores from CBCL
 - Mediators & Moderators: variables significantly associated with depression
 - Quality of Life Outcome: Depression

- ## Instruments
- See Handout

Research Design

A cross-sectional design with a convenience sample of parents who were the primary caregivers of a child with mental health problems living at home at least 20 out of the past 24 months.

Sample

100 parents who were the primary caregiver of a 2-19 year old child receiving community mental health services

- ## Sample
- Primary caregivers included:
- Biological or adoptive parents
 - Relatives
 - Foster parents
 - Guardians

Sample: Primary Caregivers

- Average age: 37.8 years (SD=8.2)
- 98% female
- 84% biological mothers
- 85% Caucasian & 12% African American
- 24% employed full-time, 16% part-time
- Average household income ranged from \$20,000 to \$29,999.

Sample: Children

- 66% males
- Average age: 10 years (SD=3.9)
- 76% Caucasian & 14% African American
- Average Length of Mental Health Problem: 5.38 years (SD=3.5)
- Seriousness of Problem: 4.05 on a 5-point scale

Data Analysis

Means, standard deviations, and ranges were calculated for all continuous variables and frequencies for all categorical variables. Internal reliability for scales was assessed using Cronbach alpha. Factor analysis was conducted for distress, social support, empowerment, and attributions.

Data Analysis:

*Bivariate correlations were used to examine the association among antecedent, mediating & moderating (MM) variables, and Depression using Pearson correlations.

*Regression methods were used to examine MM effects on Depression & to identify predictors of Depression.

Data Analysis

The mediating and moderating effects of variables were examined using the regression methods of Baron and Kenney.

Baron, R.M. & Kenny, D.A. The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical consideration. *Journal of Personality and Social Psychology*, 1986;51:1173-1182.

Findings

- 38% of participants had a CES-D score of 22 or greater indicating they might have a major depression
- 56% had a score of 16 or greater indicating that they might have a mild to major depression.

Findings

- Depression was found to be highly and significantly correlated with many variables
- See Correlation Table (handout)

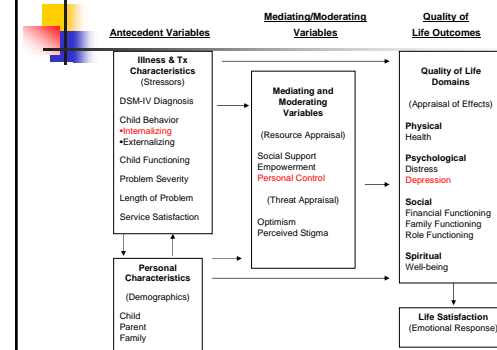
Mediators

- Personal Control was a mediator of the association between Internalizing CBCL score and Depression

Mediator of Depression

Antecedent Variable	Mediator	Level of Significance of Mediator to Depression	Decreased Significance of CBCL-Internalizing to Depression
CBCL Internalizing	Personal Control	$p < .0001$	$p < .089$

QUALITY OF LIFE AND LIFE SATISFACTION AMONG PARENTS OF CHILDREN AND ADOLESCENTS WITH MENTAL HEALTH PROBLEMS

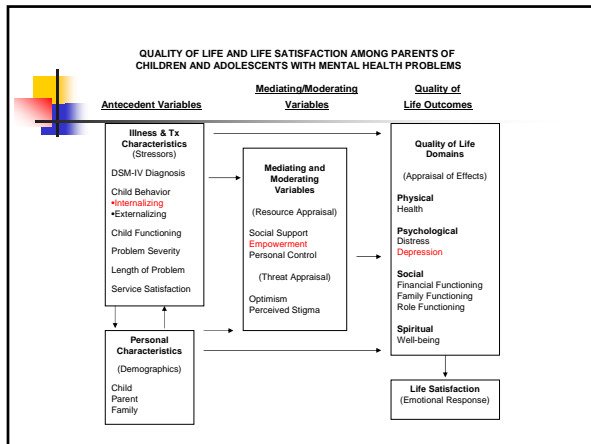


Moderators

- The Family Empowerment Scale, Family Factor, was a moderator of association between Internalizing CBCL score and Depression

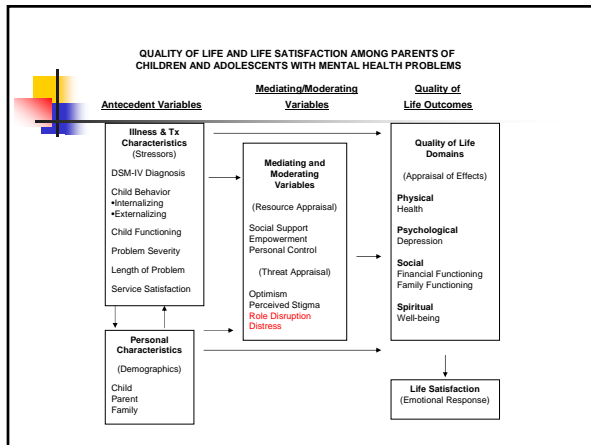
Moderator: FES Family Factor Antecedent: CBCL Internalizing

Moderator	Significance of Interaction of Antecedent & Moderator	Outcome Variable
FES Family Factor	$p < .043$	Depression



Revised Model

- Adding Role Disruption and Distress as mediators or moderators under Threat Appraisal



Mediators

- Role Disruption was a mediator of the association between the Internalizing CBCL score and Depression

Mediator of Depression

Antecedent Variable	Mediator	Level of Significance	Decreased Significance of CBCL-Internal. to Depression
CBCL Internalizing	Role Disruption	$p < .0001$	$p < .116$

Moderators

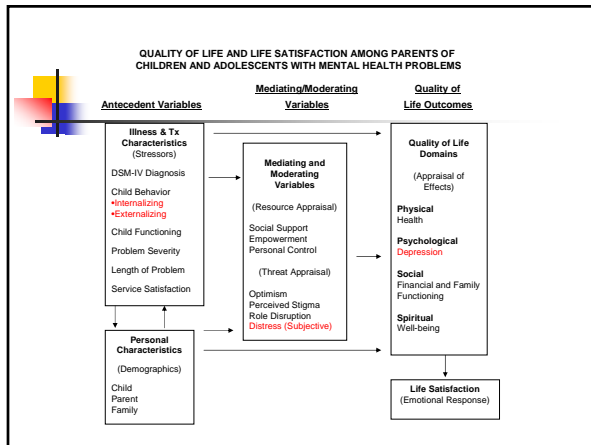
- Subjective Distress was a moderator between both Internalizing & Externalizing CBCL scores and Depression

**Moderator: Subjective Distress
Antecedent: CBCL Internalizing**

Significance of Interaction of Antecedent & Moderator			Outcome Variable
Moderator	Moderator		
Subjective Distress	$p < .008$		Depression

**Moderator: Subjective Distress
Antecedent: CBCL Externalizing**

Significance of Interaction of Antecedent & Moderator			Outcome Variable
Moderator	Moderator		
Subjective Distress	$p < .033$		Depression



Data Analysis

Stepwise multiple regression was used to examine which variables contributed to explaining the variance in Depression.

- Findings: Stepwise Multiple Regression**
- Participants whose child scored 60 or more on the CBCL Internalizing T-score or Externalizing T-score were included in two separate analyses.
 - Variables significantly correlated with Parents' Depression at $p < .001$ were entered.

Predictors of Depression: Stepwise Multiple Regression Analysis

Final Model: Internalizing CBCL T-Score \Rightarrow 60

	Beta	SE (n=84)
Role Disruption	.79***	.18
Personal Control	-7.34***	2.04
Family Functioning	-.56***	.17

$R^2 = .53$, *** $p < .001$

Predictors of Depression: Stepwise Multiple Regression Analysis

- Final Model: Externalizing CBCL T-Score => 60

	Beta	SE	(n=84)
Personal Control	-7.05**	2.16	
Family Functioning	-.65***	.18	
Role Disruption	.70***	.20	

R² = .50, ** p < .01, *** p < .001

Discussion

- High prevalence of depression among these parents
- Personal Control & Role Disruption mediated effect of CBCL internalizing disorders on parents' depression, guiding future targets for interventions

Discussion

- Subjective Distress was a Moderator between Internalizing and Externalizing CBCL scores and Parents' Depression
- Clues for risk and resiliency factors related to Parents' Depression

Practice Implications

- Need to routinely assess for depression in caregivers & address their needs
- With increased reliance on families to care for a child with mental health needs at home, resources & services are needed to support their efforts

Research Implications

Further examine factors associated with parents' depression

Examine effectiveness of interventions to decrease parents' depression by efforts targeted at decreasing role disruption and/or increasing parents' perceptions of personal control (with CBCL Internalizing)