

Parents with Serious Mental Illnesses May Face More Scrutiny from Child Protective Services

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People with serious mental illnesses (SMI) have conditions like depression, bipolar disorder, or schizophrenia. Like many people without SMI, many people with SMI become parents. Past research has found that parents with SMI may be more likely than parents without SMI to have Child Protective Services (CPS) get involved with their families. CPS may contact a family if they receive a report suggesting that a child could be experiencing abuse or neglect. After investigating the family, CPS may decide either to end the contact or to provide services meant to protect the children, including separating children and parent. In a recent NIDILRR-funded study, researchers looked at data on the frequency of CPS involvement for parents with and without SMI. The researchers wanted to find out the percentages of parents with and without SMI who report being contacted by CPS. They also wanted to find out the percentage of parents with and without SMI who received services or had a change in their children's living arrangements after being contacted by CPS. Finally, the researchers wanted to find out if mothers and fathers with SMI had different experiences with CPS.

Researchers at the Rehabilitation [Research and Training Center on Community Integration and Participation of Individuals with Psychiatric Disabilities](#) looked at data from the PULSE Healthcare Survey, a large national survey of adults ages 18-65 conducted annually by Truven Health Analytics. The data for this study came from 42,761 respondents who answered questions about their mental health and parenting status. The respondents were classified as having SMI if they answered positively to three questions: whether they had been diagnosed at any point in their lives with either depression, bipolar disorder, or schizophrenia; whether they had been hospitalized at least once due to this condition; and whether the condition had interfered with their participation in major life activities such as work, school, or social activities. The respondents were classified as being parents if they answered that they had children at any point in their lives, including grown children or children no longer in their custody.

The respondents with and without SMI who reported being parents were asked if they had ever been contacted by CPS. The parents who answered “yes” to this question were then asked whether their families received any services from CPS, including in-home or out-of-home services, or a change in their children’s living arrangements as a result of the contact.

The researchers found that 69% of the respondents with SMI and 71% of the respondents without SMI were parents. When the researchers looked at experiences with CPS among the respondents who were parents, they found that:

- The parents with SMI had much higher rates of CPS contact than the parents without SMI: More than a third (36%) of the parents with SMI had been contacted by CPS, compared with only 5% of the parents without SMI.
- Of the parents who had been contacted by CPS, the parents with SMI had much higher rates of receiving CPS services or reporting a change in their children’s living arrangements, compared to the parents without SMI. Approximately 80% of the parents with SMI who had been contacted by CPS received in-home or out-of-home services, and three out of four of these parents had their children’s living arrangements change as a result of the CPS contact. In contrast, for the parents without SMI who were contacted by CPS, only about 20% received services and only one out of four of those parents had their children’s living arrangements change.
- Overall, the parents with SMI were 26 times more likely than the parents without SMI to have their children’s living arrangements impacted by CPS.
- The fathers with SMI were more likely to be contacted by CPS and to receive CPS services or report a change in their children’s living arrangements, compared to the mothers with SMI. Among parents without SMI, however, fathers reported the same level of CPS contact as mothers.

The authors noted that these findings indicate a need to pay attention to the parenting issues experienced by people with SMI and to provide resources to support their specific needs. However, the authors also noted that the fact that parents with SMI were more likely to have contact with CPS did not necessarily mean they were more likely to

abuse or neglect their children than parents without SMI, and that parents with SMI may become involved with CPS more often than parents without SMI for several reasons beyond their mental illness. First, studies show that parents with SMI may experience challenges such as poverty, housing or food insecurity, or less access to healthcare. Generally, families who experience these challenges are likely to come into contact with CPS. Second, parents with SMI may have more contact with professionals who are required to report family concerns to CPS, such as mental health professionals, than parents without SMI. While this contact may increase the reporting of actual abuse or neglect, it could also place parents with SMI at a higher risk of being reported unnecessarily. Third, some CPS workers may have misperception that people with SMI cannot take good care of their children. This may explain why, after being contacted by CPS, the parents with SMI were more likely than the parents without SMI to report a change in their children's living situations.

According to the authors, parents with SMI may not seek mental health services or supports if they are worried about having CPS contacted by their service providers. Mental health professionals may wish to develop specific parenting-related supports for parents with SMI, which may help to prevent issues that could lead to CPS involvement. Fathers with SMI may especially benefit from parenting supports. In addition, there may be benefit in training child welfare workers to better understand the positive impact of parenting, the resources available to parents with SMI, and the potential that people with SMI have to be good parents for their children.

To Learn More

The Rehabilitation Research and Training Center on Community Integration and Participation of Individuals with Psychiatric Disabilities offers many resources for parents including a parenting resources worksheet to identify local supports, a family leisure toolkit, and more. <http://www.tucollaborative.org/parenting/>.

The National Research Center for Parents with Disabilities offers resources for parents and professionals to understand their rights and responsibilities <http://heller.brandeis.edu/parents-with-disabilities/>.

The Disabled Parenting Project, part of the NRCPD, is an online space for sharing experiences, advice, and conversations among disabled parents as well as those considering parenthood <https://www.disabledparenting.com/>.

To Learn More About this Study

Kaplan, K., Brusilovskiy, E., O'Shea, A., and Salzer, M. (2019) [Child protective service disparities and serious mental illnesses: results from a national survey](#). Psychiatric Services, 2019. This article is available from the NARIC Collection under Accession Number J80785. [This study is also discussed in the From Pages to Practice podcast from the American Psychiatric Association](#).