



## Navigating Bipolar Parenthood: Understanding the Bio-Psychosocial Impact on Children - An In-depth Exploration through Interpretative Phenomenological Analysis in Pakistan

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### ABSTRACT

This study is an attempt to explore the complex problems faced by children of bipolar disorder diagnosed parents in Pakistan. By employing qualitative approach, it was aimed to gain a deeper understanding of psycho, social and biological aspects of wellbeing of such children. Interpretative analysis of in-depth interviews of participants was carried out for exploring uniqueness of their experiences Through purposive sampling a sample of five individuals between the ages of 15-20 years was selected, and in-depth, semi-structured interviews were conducted for of data collection. Analysis of interviews showed that effects of bipolar disorder on children go beyond just psychological, social, and biological impacts. This research emphasized the significant effects of gender and birth in shaping their experiences. It was also found that diagnosis of bipolar disorder does not only affects patient but it also influences their families. This accentuates the need for comprehensive interventions and support that identifies the complex dynamics within the family unit.

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## 1. Introduction

There has been a surge in the diagnosis of mental health issues in Pakistan as a study done in 2019 states that mental illness affects 10%-16% of the population in general, and about 40% of the population suffers from common mental issues (Ali, Maqsood, Jalil, Shoukat, & Shakeel, 2019). In South Asia the prevalence rate of bipolar disorder in the last 10 years is approximately around 0.6%. The combined prevalence of bipolar disorder in the Eastern Mediterranean region given by the World Health Organization is approximately 0.7% (Neuroscience Research Australia, 2021). Bipolar disorder affects about one in four people, and the more prevalent problems are depression and anxiety, and the less prevalent problems are schizophrenia and bipolar disorder. Schizophrenia and bipolar mood disorder are severe mental illnesses that are stressful not only for the patients but for their children as well (Seddon, Abdel-Baki, Feige, & Thomassin, 2020). According to American Psychiatric Association (1987) bipolar disorder signifies a group of symptoms including features of elation, euphoric or irritable mood, spoiled relationships, poor job, or school performance, added with mania featuring increased activity or energy levels. Bipolar disorder has two types: bipolar 1 and bipolar II. Bipolar disorder occurs with a lifetime prevalence of approximately 0.6 % and 0.4% for bipolar disorder-I and Bipolar disorder II, respectively, with slightly higher rates reported in developed countries (Merikangas et al., 2007). A survey shows that 2.4 percent of the overall population suffers from bipolar disorder. Research worldwide shows that half of all cases start before age 25, with some people showing primary symptoms during childhood and others raising

symptoms later in life. Studies now indicate that there is ten times more risk of emerging bipolar if a first-degree relative, such as a family member or parent, adds an overall 8.7% risk of having it (Fawad, 2016). Behavioral and emotional problems are the possible predictors of mood disorders in children with bipolar parents. Children of parents with bipolar disorders are at high risk for a wide variety of psychiatric disorders like attention-deficit hyperactivity disorder, disruptive behavior disorders, and adjustment problems. In addition to psychological issues, they also face social and educational difficulties and poor overall functioning (Christiansen & Paul, 2020). There is huge evidence of research supporting the role of family processes and parental depression in making children vulnerable to adjustment problems (Greve et al., 2021).

Bipolar disorder is a heterogeneous and genetically complex illness that does not usually onset with a manic or hypomanic episode but rather years of unwell psychopathological state that vary over genetics and developmental levels. Bipolar disorder starts appearing in childhood in form of anxiety, internalization of symptoms and depressive disorder under stress before manifestation of bipolar disorder in full blown first episode (Duffy, Vandeleur, Heffer, & Preisig, 2017). Children with bipolar parents become more vulnerable to psychosocial problems like suicidal ideation or attempts, substance abuse, risky sexual behaviors, familial issues and aggressive behaviors (Peay, Rosenstein, & Biesecker, 2014). Sanchez-Gistau et al found children with bipolar and schizophrenic parents showed higher rates of attention deficit hyperactivity disorder as compared to children having normal healthy parents. Moreover, such children showed higher rates of depression than the children of healthy parents (Sanchez-Gistau et al., 2015). Some predispositions for development of bipolar disorder at later stage may include by birth temperamental characteristics like high motor activity, low frustration tolerance, and emotional sensitivity. Behavioral disorders like ADHD may be an early indicator of later changes in mood disorders (Chang, Blasey, Ketter, & Steiner, 2003). In 2015, Axelson and his colleagues found out the risks of an array of psychological illnesses in the children of parents with bipolar disorder. For instance, attention deficit hyperactivity disorder, disruptive behavior disorder, anxiety disorder, substance use disorder mania, hypomania, or mixed episodes. So, the study clearly states that hypomanic episodes, major depressive episodes, and disruptive behavior disorder should be closely monitored in children as they can emerge from bipolarity (Axelson et al., 2015). Another longitudinal study conducted in 2016 revealed that earlier parental age for the onset of bipolar disorder was associated with a risk of conversion, and the presence of an affective component at baseline predicted the onset of bipolar. Anxiety, depression, affective lability, and subthreshold manic symptoms are strong predictors of bipolar disorder in youth (Hafeman et al., 2016). Maternal mood disorders are also meaningfully linked to other adverse psychological and behavioral consequences in children such as oppositional defiant disorder and unipolar depression (Du Rocher Schudlich, Youngstrom, Calabrese, & Findling, 2008).

Comparative studies found that mental health problems in parents can deeply root behavioral problems in children because of the genetic influence of their illness and then their questionable parenting competencies due to their illness. Other than the genetic influence, psychological illness in the mother or father can disturb their role as parents in the family. Weak competency in bringing up their children can further increase the risk of mental damage (Firoozkouhi Moghaddam, Mohammad Bakhshani, Hossein Heidaripoor, Assareh, & Alian Najafabadi, 2014). Having a bipolar parent affects normal family functioning, causing less unity and organization and more conflict (Chang, Steiner, & Ketter, 2000). The children with bipolar parents find it challenging to communicate with one another (Romero, DelBello, Soutullo, Stanford, & Strakowski, 2005). Temperamental comparative studies have suggested that the offspring of parents with bipolar disorder have increased Activity Level-General scores along with the trend for decreased Task Orientation which suggests that these characteristics of temperament should be further investigated (Singh, DelBello, & Strakowski, 2008). Bipolar disorder is a main reason of distress for patients, very frequently producing severe functional sorrow and impairment, because the impaired patients are often forced to depend on others for assistance, usually their family members (Miklowitz, 2007). While a huge chunk of research has been done on the extent of bipolar disorder and its manifestation in those suffering from it. Research on its effects on children is limited (Shepard & Dickstein, 2009).

### 1.1. Objective of the Study

The objective of this study is to contribute valuable insights to existing literature by examining the influence of parents with bipolar disorder on their children, focusing social, psychological, and biological effects. The findings from this research could be instrumental for national mental health institutes and rehabilitation centers, aiding in developing comprehensive awareness programs at a broader scale. By shedding light on the multifaceted impact of parents diagnosed with bipolar disorder, this study aims to provide actionable knowledge that can improve and enhance public awareness initiatives and support mechanisms.

### 1.2. Research Questions

- What are the biological impacts of bipolar parents on their children?
- What are the social impacts of bipolar parents on their children?
- What are the psychological impacts of bipolar parents' children?
- How do bipolar mothers affect their children?
- How do bipolar fathers affect their children?

## 2. Conceptual Framework

1980, George and Engel introduced the bio-psychosocial model, a holistic view of health and illness. This model acknowledges the significance of biological, social, and psychological elements in assessing an individual's wellbeing. Proper health extends beyond the absence of physical ailments and is achieved when all three domains are flourishing. It is essential to recognize the interconnectedness of these factors, as a modification in one sphere can profoundly impact the others (Ross & Devereil, 2010). Building upon this framework, the biopsychosocial approach recognizes the importance of the family system in achieving overall wellness. It considers the diverse facets of a family's functioning, including physical, emotional, social, economic, cultural, and spiritual dimensions. By taking a holistic perspective, this comprehensive approach acknowledges the interconnectedness of various factors in shaping an individual's and a family's wellbeing. This highlights the interplay of biological, psychological, social, and familial elements in comprehensively understanding and promoting health.

**Figure 1: Psychological problems faced by children**



Indeed, the bio-psychosocial model, which posits that health and illness result from the intricate interplay of biological, psychological, and social factors, aligns seamlessly with the objectives of the present study. By adopting this comprehensive framework, the study aims to discern and comprehend the bio-psychosocial impacts of parents with bipolar disorder on their children. This approach recognizes the interconnected nature of these influences, allowing for a more nuanced understanding of the complexities involved in the wellbeing of individuals within a family context affected by bipolar disorder. By applying the bio-psychosocial lens, the study seeks to contribute to a holistic understanding of the challenges and dynamics faced by these children, embracing the multifaceted nature of their experiences.

## 3. Method

### 3.1. Participants

A purposive sampling strategy was used to collect data from a teaching hospital in Faisalabad, Pakistan, using semi-structured interviews with five participants aged 15-20 years old. All the participants were children of parents diagnosed with bipolar disorder.

### 3.2. Procedure

Informed consent and permission were taken from the participants, and they were debriefed about the purpose of the study. Participation was voluntary, and anonymity of the data was ensured. Participants were told that their identity and the study results would be confidential, and the results would be used for academic purposes. Semi-structured interviews were conducted to explore the experience of participants.

### 3.3. Analysis

The semi-structured interviews were transcribed, and thematic analysis was done using Interpretative Phenomenological Analysis (IPA) to find out the participants' experience. Major and sub-major themes were derived from semi-structured interviews of children.

## 4. Results and Discussion

Major and sub-themes were drawn from the data. Major themes, including birth order, psychological, and social aspects, are presented in the figure (see Figures 1 and 2). By using qualitative research methods, we tried to uncover the impacts of bipolar parents on their children within the framework of the Bio-psycho-social model. The current research described different perspectives and perceptions as well as beliefs regarding the bipolar parents' impact on their children. By inquiry, some major themes were exposed, including biological, psychological, and social impacts. All these significant themes have sub-themes that are also supported by relevant research. All the participants described their experiences of family relationships after the onset of parental illness. Participants with unwell fathers tended to like the role of their mothers, but those participants with unwell mothers tended to perceive their fathers as distant. All participants discussed the relationship between themselves and their ill parents. All participants described getting up with a parent with bipolar disorder and starting the day with them as a problematic experience. The level to which it was experienced seemed to differ between participants. The first major and most significant theme is biological impact, which includes physical symptoms as well. Its sub-themes include sweating, headache, numbness, muscle stiffness, increased heartbeat, nausea, abdominal cramps, and hot flashes. Similar findings were reported by Rupert and colleagues in 2022 on the biological and psychosocial aspects that affect children's life who have bipolar parents (Reupert et al., 2022). One of the Participants reported,

*"I get fearful when my father gets angry without any reason. I fear that he will start hitting someone. I become mentally upset. My hands and feet become cold, and my heart starts pounding. I have had diarrhea many times due to stress/tension."*

Many participants reported their ill parents' aggressive behavior that always led to the manic phase. A participant reported that her heartbeat increased, and she suffered from increased abdominal cramps and numbness when her father behaved aggressively. A second major theme is the psychological impact, which includes sub-themes like emotional insecurity, sadness, suicidal thoughts, irritability, anger, disturbed daily routine, loss of appetite, poor judgment, depression, urge to cry, restlessness, worthlessness, loss of interest in social interaction, isolation, agitation, and spending too much money.

*"I am unable to understand my father's behavior sometimes. He suddenly becomes too kind, buy, and provide items without the need. I get worried by his such behavior that maybe he is double faced. I often get confused by his behavior."*

A pronounced feature of the manic episode that stands out in the recalls of all respondents is their parents' "spending sprees" during manic episodes. Excessive or overspending sprees and irrational behavior with money are characteristic of mania (Barroilhet & Ghaemi, 2020). Many participants described that their unwell parents suddenly began to overspend on the items they would have otherwise never bought. They did not care about the monthly expenditure before overspending. During the manic episode, the parents would devote a lot of money without thinking, ordering many unnecessary items.

*"Often, when my mother is in a depressed mood, she starts saying that she cannot make anyone happy. She leaves all her activities and very often sits alone and cries. When I see her like this I get upset and feel helpless that I am unable to do anything for her. When*

she is in such condition, she is not concerned about us, nor our eating routine, and sleeps all the time."

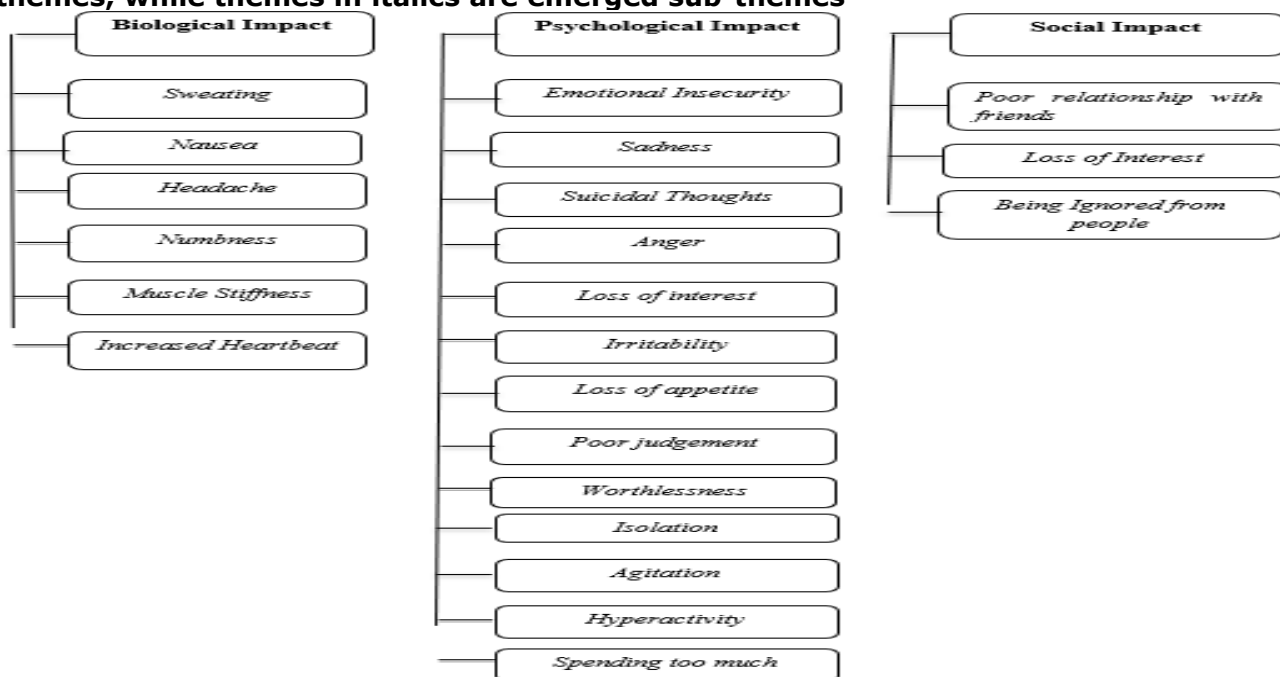
Many participants identified that their parents slept excessively during depressive episodes and sometimes did not even get out of bed for days. These symptoms are considered the basis of major depressive episodes (Miklowitz, 2007). A participant described how emotional peaks would lead to crying episodes, where her mother would claim that she was hopeless and would do nothing. In such a situation, she felt upset and helpless; her school routine was disturbed because her mother was unable to pay attention to her needs during this phase.

*"Very often, I feel like committing suicide due to my mother's negative behavior."*

Many participants said that their problematic parents' negative behavior had a significant effect on their mental health. One participant said that this type of behavior pushed her to think about committing suicide. The third central theme is social impacts that constitute sub-themes; Poor relationship with friends and loss of interest in social interaction. Participants felt socially ignored due to their rude behavior towards the people around them.

*"I don't feel like studying due to my home environment. There is always something happening at home. I also start getting angry at little things due to which I also behave badly with my friends, and then I feel guilty about it."*

**Figure 2: Themes about the experiences of participants. The themes in bold are major themes, while themes in italics are emerged sub-themes**

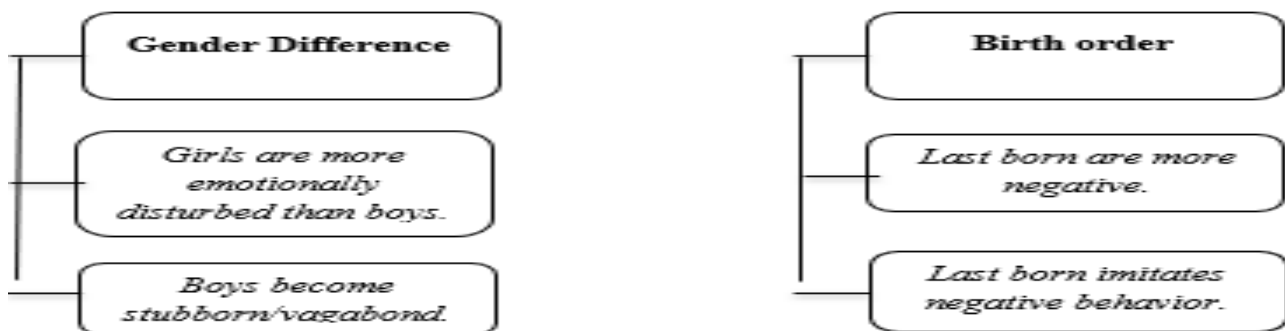


The consensus among almost all the participants underscores the pervasive disruption experienced within their family environments due to their mother's illness. One participant vividly expressed how this challenging family dynamic has manifested in heightened irritability, a declining interest in academic pursuits, and a shift towards rudeness in interactions with friends. This resonates with existing research findings that emphasize the social ramifications of bipolar disorder. Notably, a study by Hofer et al. (2017), has consistently highlighted more significant social challenges faced by individuals with bipolar disorder compared to their counterparts without the condition. Another salient theme from participants' accounts revolves around school performance, encompassing sub-themes such as poor study attention, disruption in school co-curricular activities (such as speech competitions), and a decline in academic grades. Participants conveyed the profound impact of their mothers' illness on their educational endeavors, citing disturbances in study-related matters, an inability of their mothers to engage in school meetings, and a lack of support or recognition in their extracurricular pursuits. These findings underscore the multifaceted nature of the challenges faced by children of parents with

bipolar disorder, shedding light on both the social and academic dimensions of their experiences. Studies have shown that it dramatically affects the relationship between parents and children. The parents may not show interest in school activities and co-curricular activities that their child may be involved in. They may spend a great deal of time separate from daily activities such as meals spent together or helping with homework. This general loss of interest by parents can harm a child during this stage. Another major theme is the gender of the child, including sub-themes. Girls are more emotionally disturbed than boys, and boys become stubborn and vagabond.

*"At home, I get extremely worried when my father creates a scene. One time my father hit my mother on her head with a glass. I got anxious in this situation and my brother went outside after watching this situation. He did not come home that day till late at night. I helped my mom."*

**Figure 3: Themes about the experiences of participants. Themes in bold are significant themes, while themes in italics are sub-themes**



Female participants were more emotionally worried due to their parents' illness because they were more attached to their parents than boys. Boys find a way to escape from the problematic home environment as they go outside the home and spend much time outside instead of home. This study explores the tasks and difficulties confronted by children raised by a parent with bipolar disorder, with a detailed emphasis on the experiences of daughters of these individuals (Valli, 2012). During the exploration, a new central theme, birth order, emerged, containing sub-themes: last-born children more negatively perceive events, and last-born children imitate the negative behavior of their parents. The last-born participant explained their parent's illness in an extremely negative way as compared to the other participants. She had such a negative thought process that she thought her parents were not good. She even wished that she would not be a part of her family. She expressed these emotions behaviorally by being aggressive towards her siblings. Adler claimed that birth order can permanently impact a person's lifestyle, which is one's habitual mode of dealing with friendship, love, and work (Arranz-Freijo & Barreto-Zarza, 2022). The cumulative findings of this study unequivocally affirm that bipolar disorder exerts a profound impact not only on the individuals grappling with the condition but also significantly on their families, particularly their children. The unanimous consensus among all participants underscores a shared narrative of adverse experiences associated with having a parent diagnosed with bipolar disorder. The pervasive nature of these adverse effects emphasizes the need for heightened awareness, understanding, and support mechanisms to address the complex challenges faced by families affected by bipolar disorder.

#### **4.1. Limitations and Suggestions**

Despite contributing valuable insights, this study recognizes certain limitations which require further research for more in depth knowledge.

##### **4.1.1. Social Barriers in Data Collection**

One of the notable drawbacks was that children were sample of the study. A lot of hesitation and thoughtfulness from them during the data collection process impeded the detection of certain issues. To cover it up, future studies could adopt measures for creation of a safe as well as warm environment that may encourage participants to share and describe their experiences more effectively and extensively.

#### 4.1.2. Limited Data in Qualitative Approach

Because of the qualitative nature of the study a limited amount of data was collected. To address this limitation, it is suggested that studies in future integrate qualitative methods with the quantitative ones. This combination of diverse methods will have better potential to offer a more comprehensive and detailed view of the issue, providing more in-depth investigation and analysis capturing more data.

#### 4.1.3. Scope for Further Research in Pakistan

As this is a qualitative study, the scope for further research in Pakistan is remarkable. Subsequent research may focus specific factors that are addressed in this study, expanding the scope of work for provision of a foundation for future researchers to build upon. This may contribute a lot in existing knowledge as well as develop a detailed understanding and analysis of the how bipolar disorder among parents impacts their children in the social background and cultural context of Pakistan. By covering upon these limitations, future research can rise the scope of knowledge in this area, eventually providing an in-depth information about the challenges faced by parents suffering from bipolar disorder and its impact on the lives of their children.

#### 4.1.4. Implications

The findings of the study evidently establish a substantial impact of parental depression on their children. Providing a valuable knowledge for professionals including psychologists, psychiatrists and physicians about many problems faced by children of parents suffering from bipolar disorder. These findings can provide critical as well as crucial insight for multidisciplinary treatment programs. Practitioners can make useful interventions by interrelating the psychological, social, and physical factors mentioned in the study, eventually improving the overall welfare of families affected by bipolar disorder.

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