



The Challenges of Being Parents With Bipolar Disorder

by ERIC PATTERSON

Tips for Parents With Bipolar Disorder

Whether it's changing diapers, helping with math homework, practicing parallel parking, or saying goodbye on the first day of college, parenting is a lot of work.

The work comes at you from all directions. You will be physically, mentally, emotionally fatigued and drained at different points of your parenting journey. You do your best to keep up and maintain a positive outlook because you know your child is worth the effort.

Now, imagine doing all the work as a parent with one hand tied behind your back. All the tasks become much more challenging and stressful. The diapers, homework, parking and college become that much more difficult.

For fathers and mothers with bipolar disorder, this scenario is a reality.

Bipolar disorder is not compartmentalized. It does not only enact its will on certain aspects or segments of your life.

Instead, it impacts everything with a powerful force that can be very negative and damaging. Since you treasure your child and want to ensure they are given the chance at the best possible life, you must actively confront bipolar disorder rather than hoping its damage is limited.

Know Your Symptoms

For many people living with bipolar disorder, it is not a question of *if* symptoms of bipolar will return — it is a question of *when* they will return.

The best starting point for you and your child is to gather useful information related to your disorder. If you do not know what you are fighting against, there is little chance of your prevailing.

Bipolar disorder presents differently for different people. These individual expressions of the same diagnosis require extra work to understand your unique situation. Consider these questions about your disorder:

- How do your symptoms present?
- Are there signs or triggers that precede symptom changes?
- Are you more likely to experience manic or depressive episodes?
- Which are more damaging to you and your children?
- How do situational stressors like changing seasons influence your condition?

Collecting information from your own history can be tricky since your perceptions and memories might be flawed from the condition. If this is the case, consult with trusted voices in your life to gain more data. People with older

children can benefit from their points-of-view while establishing a collaborative effort against bipolar.

Discuss the Diagnosis

In the majority of situations, making your child aware of your condition is an appropriate decision. Giving them the facts about your condition in an age-appropriate manner helps give them a better understanding of you, and strengthen the relationship.

Plan to have the discussion during periods of calm to avoid overly subjective and emotional content. Keeping your diagnosis a secret or misdirecting your child helps neither of you.

Choosing to have your child as an active member of your treatment team can be immensely helpful and rewarding for each of you, but it will not always be appropriate. This can put too much pressure and responsibility on your child to manage your symptoms, which will ultimately damage the relationship.

Whatever the decision, strong boundaries and limitations must exist between you and anyone on your treatment team, including doctors, nurses, therapists, friends and family members.

Bring in Backup

There will be times where your bipolar symptoms will make parenting at your desired level impossible; but, your child still needs parenting.

Because of this, you will do well to employ parenting backups consisting of friends or family members who can provide short-term child care, so you can focus on recovery while your child is getting the attention and stimulation required. Just because your child is older does not mean they can function independently.

Meet with your backups in a group to plan for likely situations and create action plans to address your needs and the needs of your child. Use the information gathered in the "Know Your Symptoms" section to know when backup is needed and at what level.

Backup can help by:

- Coming into the home to clean, prepare meals, address the needs of the child, and address the needs of the parent.
- Spending time with the child outside of the home to give short-term separation to the child and parent.
- Taking the parent out of the home to maintain treatment compliance and provide a child of environment.

By knowing what measures to take based on the current symptoms, the guesswork will be removed from the situation. This will lead to better results and less burnout from you and your team.

Utilize the Demands

Parenting is a demanding endeavor with its need for schedules and structure. Instead of seeing this as a barrier, you will be well-served to view this need for consistency as an opportunity to manage your bipolar disorder.

As you build routines that benefit your child surrounding meals, bath time, homework, and out-of-home activities, you will build routines that benefit you.

Work with your child and treatment team to create schedules that are reasonable and practical. Creating structure and consistency can:

- Increase your focus on preparing healthy meals that will aid in mood regulation.
 - Ensure you are receiving desirable amounts of restful sleep.
 - Integrate your treatment into your life by taking medications and attending appointments at regular
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intervals.

- Bolster the relationship with you and your child as you engage in tasks together.
- Create enough positive momentum to carry you through periods with higher symptoms.

Sure, structure and consistency are not the most glamorous or exciting undertakings, but they will result in a more stable household, which leads to stable moods and relationships.

Bipolar disorder has a tendency to damage all that it contacts. For you, your parenting skills and your relationship with your child are too valuable to be harmed.

Avoid this trend by knowing and discussing your symptoms, using backup when needed, and making the demands motivating. In doing so, you can be proud to say you are a parent with bipolar.