

**“THE IMPACT OF PARENTAL
SUBSTANCE MISUSE FROM
CHILD/PARENT/PRACTITIONER
PERSPECTIVES – TRYING TO GET IT
RIGHT”**

CONFERENCE REPORT

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Scottish Association
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“THE IMPACT OF PARENTAL SUBSTANCE MISUSE FROM CHILD/PARENT/PRACTITIONER PERSPECTIVES – TRYING TO GET IT RIGHT”

REPORT ON A PRESENTATION BY JOY BARLOW OF STRADA (SCOTTISH TRAINING – DRUGS & ALCOHOL) SASO MEETING, 13 FEBRUARY 2007, PERTH

This report followed on from research done by the above group which looked closely at the impact of parental substance misuse. It included messages from research, the voices of children and parents, the implications for policy and practice and then raised the question, ‘where do we go now?’

Parental misuse of drugs and alcohol has a great impact on child welfare and protection. Estimated figures taken during research have shown that there are 250,000 to 350,000 dependent children living with a parent who suffers from drug misuse whilst the figure rises dramatically for alcohol misuse – 920,000. Children of substance misusers are at risk from emotional and physical neglect and have a high chance of developing serious emotional and social problems themselves later in life.

STRADA’s research showed that the impact on a child of a parent’s problem drug use was:-

- Impaired parenting capacity
- Emotional distance
- Risk of abuse and neglect
- Lack of parental attachment – children not bonded particularly to the mother figure (mother bonded to the substance)
- Disruption of household routines
- Lack of attention to medical needs
- Parented by negative commands
- Unpredictability of parental response – not knowing how things will be from one moment to another
- Repeated separation
- Role reversal
- Social isolation – stigma
- Disrupted schooling
- Early exposure to socialisation into illegal drug use & criminal activities that accompany it.

The effects of parental problematic alcohol use on children was shown as:-

- Effects of heavy drinking in pregnancy
- Poor school achievement
- Behavioural difficulties
- Low self-esteem and emotional problems
- Family disruption – violence
- Dealing with denial – one of the biggest problems

However, despite the above, there were or could be protective factors such as:-

- A non substance-using parent
- Lack of violence – perhaps an alternate safe residence
- Good coping strategies
- Core parenting skills
- Sufficient income & good physical standards in the home
- Consistent caring adults
- Regular monitoring by, e.g., health & social work professionals
- Regular attendance at nursery and school
- Empathetic and vigilant teachers
- Socialising activities
- Resilience

There was a need to know more, but there are significant factors such as the ‘taken for granted’ aspect of life, understanding the risk, disruption and damage, a growing awareness of parental substance misuse and a felt or potential stigma. A major factor to be taken into account was the management of information and that of complex relationships within the family and beyond – who do you tell/not and how do you tell without betraying? Further significant factors shown by the research included controlling the environment, covertly or otherwise, respite, symbolic caring, even rejection of the parent (“had enough”) and active planning for the future – “I’m not going to do that”

A study by Barnard & Barlow in 2002 highlighted the practitioners’ perspectives. These looked at the balance between support and surveillance, the responses from different agency perspectives or a co-ordinated response, the thresholds of vulnerability and the privacy of relationships with service users.

Taking all of the above into account, the question of “Where now?” was then posed. What are the implications for Policy and Practice? The research identified:-

- Thresholds of assessment
- Comprehensive, timeous, ongoing assessment
- Effective treatment for parents
- Recognition of a chronic, relapsing condition – one has to recognise this – incredibly resource-intensive
- Contracts with service users? SEED have talked a lot about this, but will this help alone?

There are issues for implementation of policy:-

- Ownership by both 'systems'
- Collaborative working
- Understanding of common thresholds of vulnerability
- Professional tensions
- Client loyalty
- Parental behaviour – anxiety about punitive responses
- Substance misuse – beliefs and feelings
- Interagency dynamics must be taken into account
- Child-centred practice in family assessment – becoming much better in Scotland
- Action after assessment – this is particularly needed

The speaker concluded with highlighting the action needed, but commented that Scotland was working towards this:-

- Working together/protocol development
- Ethical decision-making
- Multi-disciplinary training
- Support and supervision of staff
- Resource-intensive interventions – already some in place but more require to be decided/created
- Partnership with parents
- Child at the centre of practice – this needs to be done much more.

This presentation highlighted the major problems facing children and young people within their home environments, their ways of coping or not, and the further problems which could ensue if help and support is not provided sooner rather than later. However, the speaker and her organisation's research raised many viable suggestions for improving the situation and it is hoped that some or all of these will be taken on board by the agencies concerned.

Angela McGroarty, for the Scottish Association of Children's Panels, February 2007