

Parental Substance Misuse

Parental substance misuse has a significant impact upon the development, happiness and welfare of children. Children living in homes where substance misuse is common experience are more likely to experience abuse and neglect and have to cope with a chaotic and volatile home life. Many children in these situations assume a role as carer to their parent and/or siblings. Moreover, children whose parents misuse substances often have a fundamental sense that the drugs or alcohol are more important than they are.

Working with children young people and families affected by substance misuse is a key theme to much of the work undertaken by CHILDREN 1ST in its 41 local and six national services. Several services have highlighted a marked increase in referrals due to issues relating to parental substance abuse.

Drawing on the experience of its services and service users, CHILDREN 1ST believes that work to tackle the impact of parental substance misuse must focus both on preventing the harm caused by substance misuse, and on putting the child's needs, concerns and safety at the heart of decisions about support and services for a family.

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What is parental substance misuse?

Parental substance misuse refers to the use of drugs and/or alcohol to a level that adversely impact both on the health and behaviour of parents, and on the lives of their children.

Children affected by substance misuse in Scotland

- *Hidden Harm* estimates that there are between 41,000 and 59,000 children in Scotland with a problem drug using parent¹
- The Scottish Executive estimates that around 80,000 to 100,000 children are affected by parental alcohol misuse²
- Children of parents who misuse substances make up a significant proportion of the children placed on the child protection register for abuse or neglect
- Of the 2,288 children on the child protection register in Scotland in March 2006, 45% of these were categorised as having been neglected

How can we prevent the harm caused by parental substance misuse in Scotland?

¹ Advisory Council on the Misuse of Drugs (2003), Hidden Harm – Responding to the needs of children of problem drug users, p10

² Scottish Executive (2003) Getting Our Priorities Right, p12

There have been a number of policy developments in recent years aimed to attempt to tackle the problem of parental substance abuse, and the problems caused by drugs and alcohol more generally. Documents such as the Scottish Executive's guidance, *Getting Our Priorities Right*, and the Action Plan on Alcohol Misuse (2002) have attempted to provide a framework for working with parents and others who misuse substances.

However, CHILDREN 1ST remains concerned that alcohol or drug misuse has pervaded Scottish culture and that this acts as a barrier to real change. More effort is needed to focus on preventing people from becoming embroiled in this culture, and helping those who are at risk of substance abuse refocus on supporting their families.

Prevention

CHILDREN 1ST firmly believes that working with vulnerable parents at the very early stages of a child's life and before birth is vital to improving the child's welfare in the future. Research from the USA on early years suggest that early intervention can help parents deal with their substance misuse as well as preventing their children from entering the cycle of misuse³.

A 2006 CHILDREN 1ST study, undertaken by practitioner Fiona Herriot, looked at support available to substance misusing parents-to-be and their perceptions of this support. All parents in the study reported that they found direct support beneficial to help them understand their child's development, ease isolation, give them confidence and to show to those concerned that they could keep their children safe.⁴

Scotland's futures forum is currently examining the use of early intervention in halving Scotland's drugs and alcohol problem by 2025. CHILDREN 1ST welcomes this work and looks forward to the results being published.

Support

Helping parents to stop misusing drugs or alcohol is the best solution for children, the best solution for communities and the best solution for individuals themselves. However, in CHILDREN 1ST's experience support and treatment is not always readily available when parents want to get help to deal with their problems. People often have to wait weeks or even months to get the help that they need. This is especially regrettable given that we know that pregnancy or parenthood can often be the trigger to encourage someone to end their drug or alcohol misuse.

Real measures to improve the lives of vulnerable children and young people must include real provision of help and treatment for their parents. It is important that the Scottish Executive does not adopt new measures or contracts for parents, without serious commitment to improve the availability of this help. Anything less will be to impose conditions that will not be effective in helping parents, and will therefore not be effective in helping their children.

According to Fiona Herriot's research into parents' views of support, fathers were statistically much less likely to seek support in mitigating or alleviating their

³ <http://www.scie.org.uk/publications/briefings/briefing06/index.asp>

⁴ Fiona Herriot (2007) Parents who Misuse Substances: Views of Support, CHILDREN 1ST

substance misuse. While pregnancy can be a strong incentive for mothers to make a positive change to substance-misusing behaviour, fathers often become isolated without targeted support. CHILDREN 1ST therefore believes that more support services are needed for substance misusing fathers.

Education

Key to tackling parental substance misuse is educating both parents and children about the impact of use, and its consequences.

As part of targeted support work with parents who misuse substances, CHILDREN 1ST believes that education in parenting can be invaluable. As with family support, CHILDREN 1ST would also wish to see education focused on fathers.

Educating young people about drugs and alcohol already takes place in schools, and a recent evaluation for the Scottish Executive found that most schools were meeting their targets on this. However, CHILDREN 1ST believes that such formal education should be accompanied by informal models, such as peer education and peer mentoring, which can be very successful in engaging children on difficult issues and would be extremely effective in reinforcing this dialogue.

Caring for children affected by parental substance misuse

When parental substance misuse compromises a child's safety and welfare, decisions may need to be made over the future care of the child. Recent research has found that parental substance misuse accounted for 62% of children subject to care proceedings.⁵ CHILDREN 1ST remains concerned that, while public care is the best place for some children, the public care system continues to fail children and young people in Scotland, and believes that family based decision making should be utilised more in deciding where or how a child should be placed.

Public Care

Where a child's safety is at risk, a lack of alternative care is not acceptable as a factor in deciding whether or not to remove the child from their parents' care. But it is important for us to ask if the public care system is able to meet the needs of the thousands of children who are adversely affected by drug use.

The reality of our public care system is that it fails many of our young people, with outcomes such as low educational attainment, increased risk of drug use, mental illness, homelessness and offending, and a lack of identity and self-esteem. Before we can be confident of giving Scotland's most vulnerable children a safer, happier and more secure childhood, much more needs to be done to address the failings of our public care system.

Family Group Conferencing

CHILDREN 1ST believes that every family affected by substance misuse is different, and that the welfare of the children affected by parental substance misuse must be the primary concern. Focus must remain on what works for children who live with

⁵ Donald Forrester and Judith Harwin, *Parental substance misuse and child care social work* Child and Family Social Work, Vol 11:4, November 2006 p325

parents who have substance misuse problems, and involving the family in decision making through family group conferencing (FGC) is a useful means to achieve this.

FGCs bring the wider family group together at the point of decision making and ask the family to come up with a working plan for the safe care of the children. Currently just under half of all local authorities are working with CHILDREN 1ST to use FGCs to improve decision making and outcomes for children and young people who need help.

CHILDREN 1ST believes that an FGC should be available to every child when decisions over their future care are being made.

Conclusions: working with parents who misuse substances

Making decisions about the best interests and future well-being of a child is complex. Each child and their circumstances are very different. Some children of substance misusing parents have strong support networks. Some are protected and cared for whilst many others are not.

CHILDREN 1ST believes that policies to tackle parental substance abuse should not be concerned solely with parents' adherence to drug or alcohol treatment programmes, but concerned with the whole picture of a child's safety and happiness.

CHILDREN 1ST therefore makes the following recommendations:

1. **Investment in early years** to prevent children becoming at risk due to substance misuse
2. **Targeted family support services** for substance misusing parents and parents to be, with a new emphasis on fathers
3. **Greater use of peer education** to help children and young people avoid becoming dependent on substances
4. **Mainstreaming FGCs across Scotland**, to enable every child faced with a life changing decision to have their wider family involved in decision making
5. **Improvement of the public care system** so that children at risk of harm from the effects of parental substance misuse are given a safe and secure childhood



Giving Scotland's vulnerable and disadvantaged children a brighter future