

The Impact of SUD on Parenting and Children

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Topics for discussion

How Substance Use Disorder effects parenting behavior, children and family functioning - both in times of active substance use and in recovery.

Ways to help to families impacted by Substance Use Disorder.

Active substance use affects parenting

Forgetting or neglecting to attend to parenting responsibilities, children's appointments, and school functions.

Leaving children alone or unsupervised in order to get or use substance.

Doing "whatever is necessary" to get/use drug.

Use during pregnancy can cause harm to fetus.

Sleep/wake cycles disrupted - parents fall asleep or become overly active under the influence.

See handout "The Effect of Substance of Abuse on Behavior and Parenting"



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Active substance use affects parenting



- Exposing children to unsafe or dangerous situations.
- Driving with children while under the influence.
- Using resources to get drugs instead of providing for children's needs - no food, clothes, furniture etc.
- Impaired thinking and over-reactions to child's behavior.

Children are affected by parental Substance Use Disorder

Children are likely to witness use or aftermath of use.

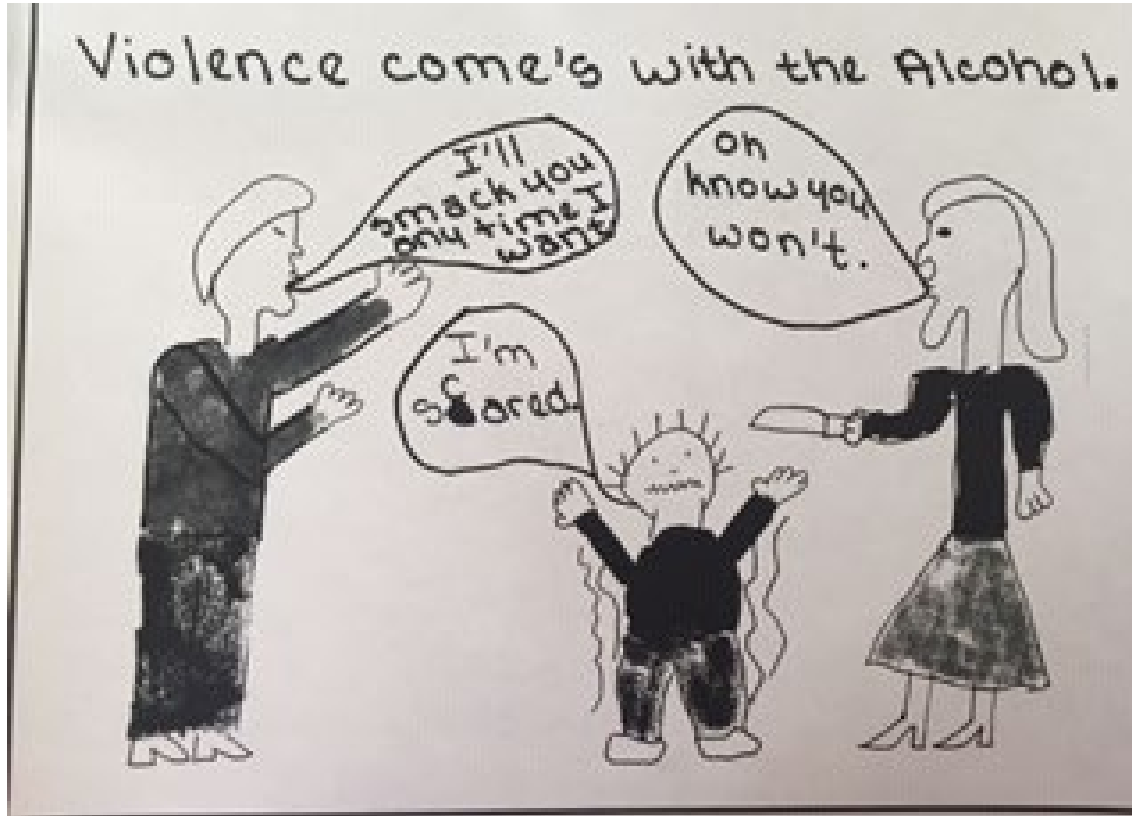
Poor home management = chaotic environment.

Parental absence and decrease in bonding with child.

Denial of reality impacts children's trust and sense of "normal".

Children often care for parents or siblings.

Children are affected by parental Substance Use Disorder



- High levels of family conflict - fighting, arguing.
- Possible increase in violence, aggression and paranoia.
- Family rituals not developed or are disrupted.
- Increased family isolation.

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Substance Use Disorder creates inconsistent parenting and broken promises.

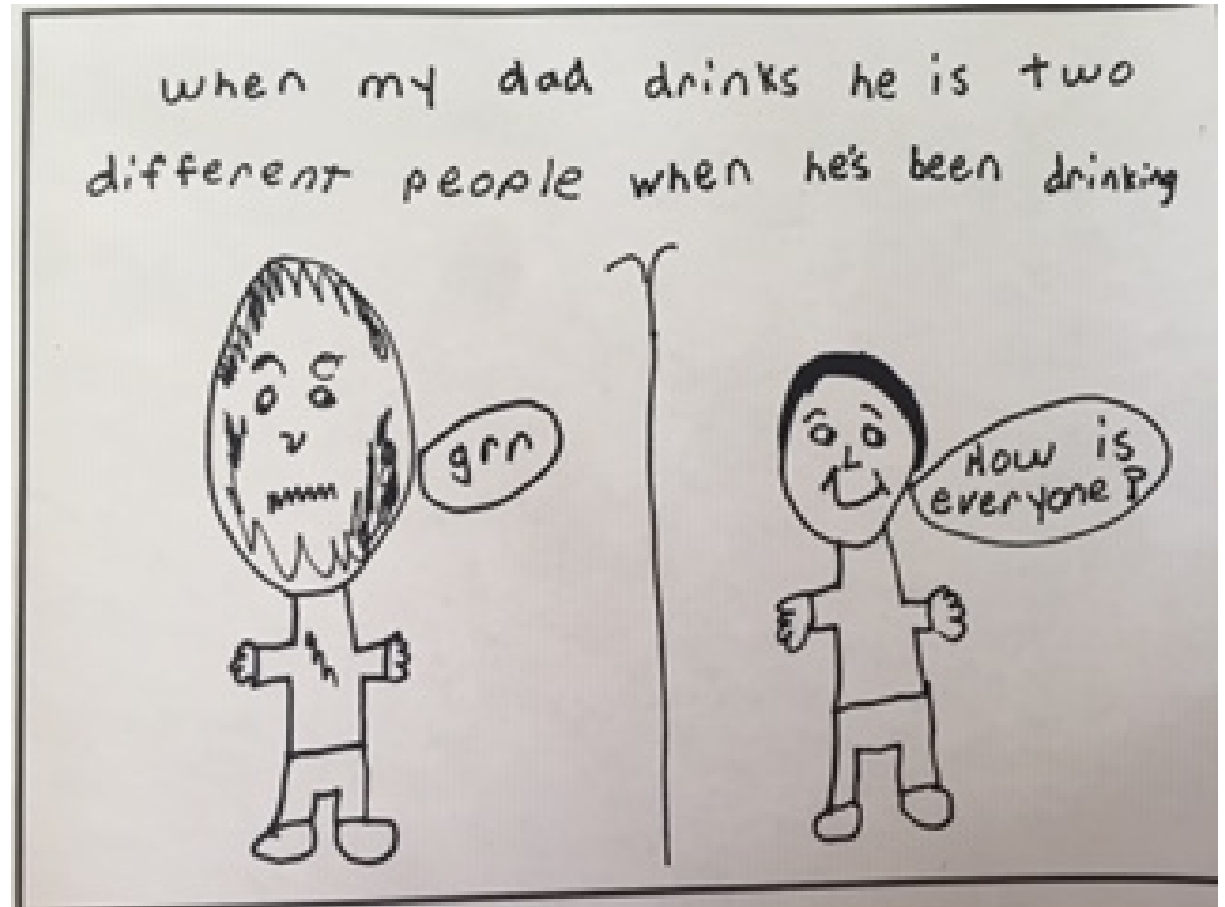
Children find it difficult to trust their parents.



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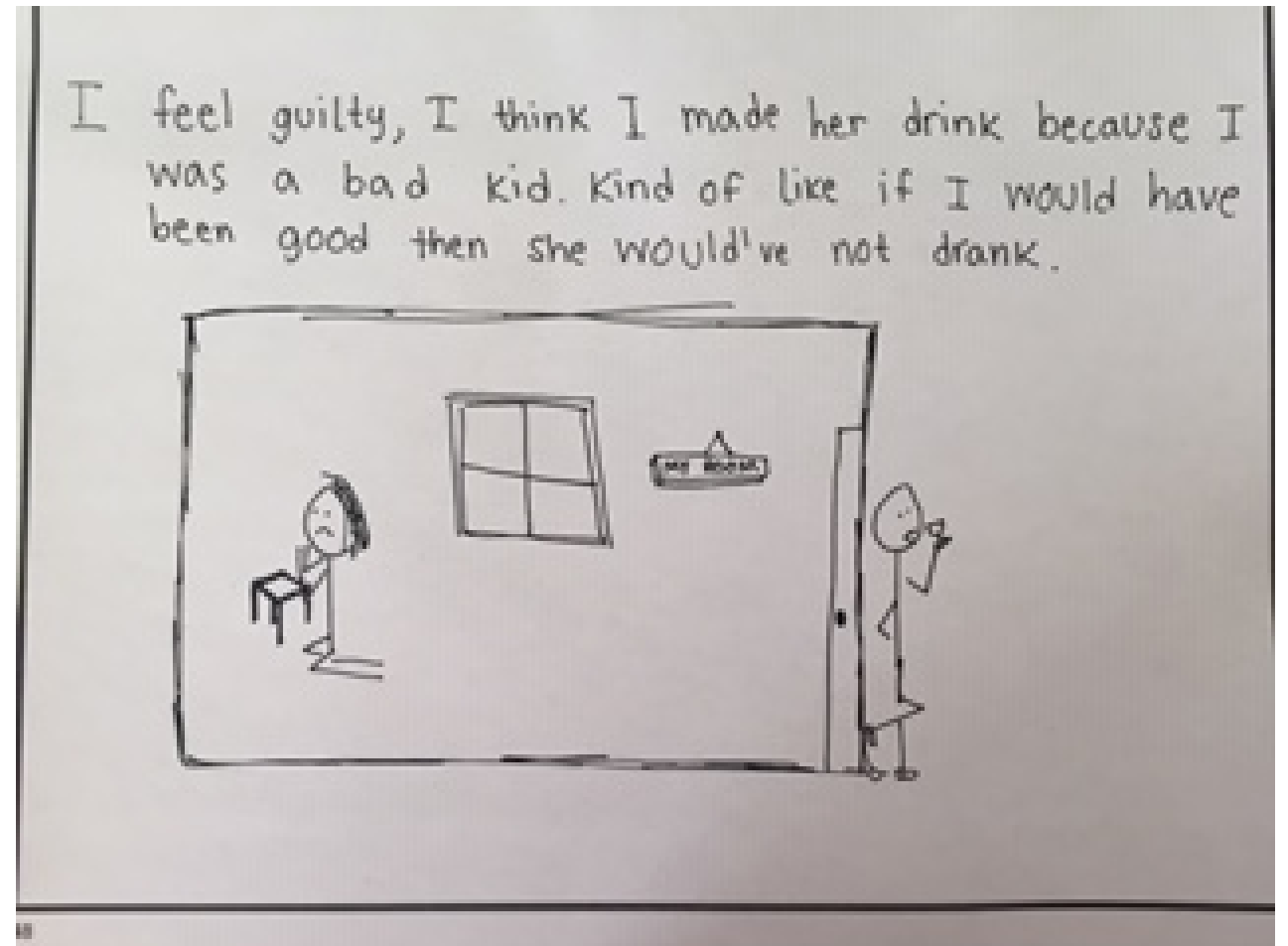
Drugs and alcohol change mood and personality.

Children do not know what to expect. They learn to adapt their feelings and behavior to coincide with the parent's mood.



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Children often blame themselves for their parent's substance use.



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The impact on children varies, based on:

- The age of the child when the parent's SUD progressed
- When and whether the parent engaged in recovery
- The presence of siblings who served as caretakers or role models
- The presence of a parent or caregiver who does not use substances
- Availability of caring adults, both in the family and in the community
- The child's understanding of the disease and treatment
- The child's knowledge of coping skills and safety plans
- The availability of school and community activities and supports

Factors in continued use for parents whose children are in placement due to child welfare involvement

- Overwhelming guilt and shame over harm done to children and family.
- Painful child/adult abuse issues bring pain when not using.
- To kill pain after seeing their children; using helps them “manage” their emotions.
- Fear - living life on life’s terms, rejection of children, not knowing any sober people, being honest and the consequences of honesty.
- Lack of structure and support.
- Lack of treatment options.



The 7 Cs

- ▶ You didn't **Cause** the problem.
- ▶ You can't **Control** it.
- ▶ You can't **Cure** it. But...
- ▶ You can help take **Care** of yourself.
- ▶ You can **Communicate** your feelings.
- ▶ You can make healthy **Choices**.
- ▶ You can **Celebrate** yourself

What Do Children Need?

- To know who they can be attached to, who they can trust, and who cares about them.
- Adults to whom they can look for a sense of security and safety.
- The reminder that addiction is a grown-up problem and that only grown-ups can figure out how make it better; children's only job should be to "just be a kid."
- To feel seen and heard, and to have a voice. Children need grown-ups to say things such as, "Tell me what you're thinking/feeling." "I see that you're feeling _____." "I'm listening to you." "You can ask me for help." "I'm proud of you for _____." "What was the best/worst part of your day?"
- A sense of being acknowledged when they have questions, and to get age-appropriate answers.
- Reminders that no matter how bad things get, there are reasons to stay hopeful and optimistic. For instance, adults might say, "We can always hope that things will get better." "Lots of people get better from addiction."

Families in recovery

Family is calmer, quieter, less chaotic.

Children experience “trauma of recovery”.

Young children can be hyper-vigilant, worry.

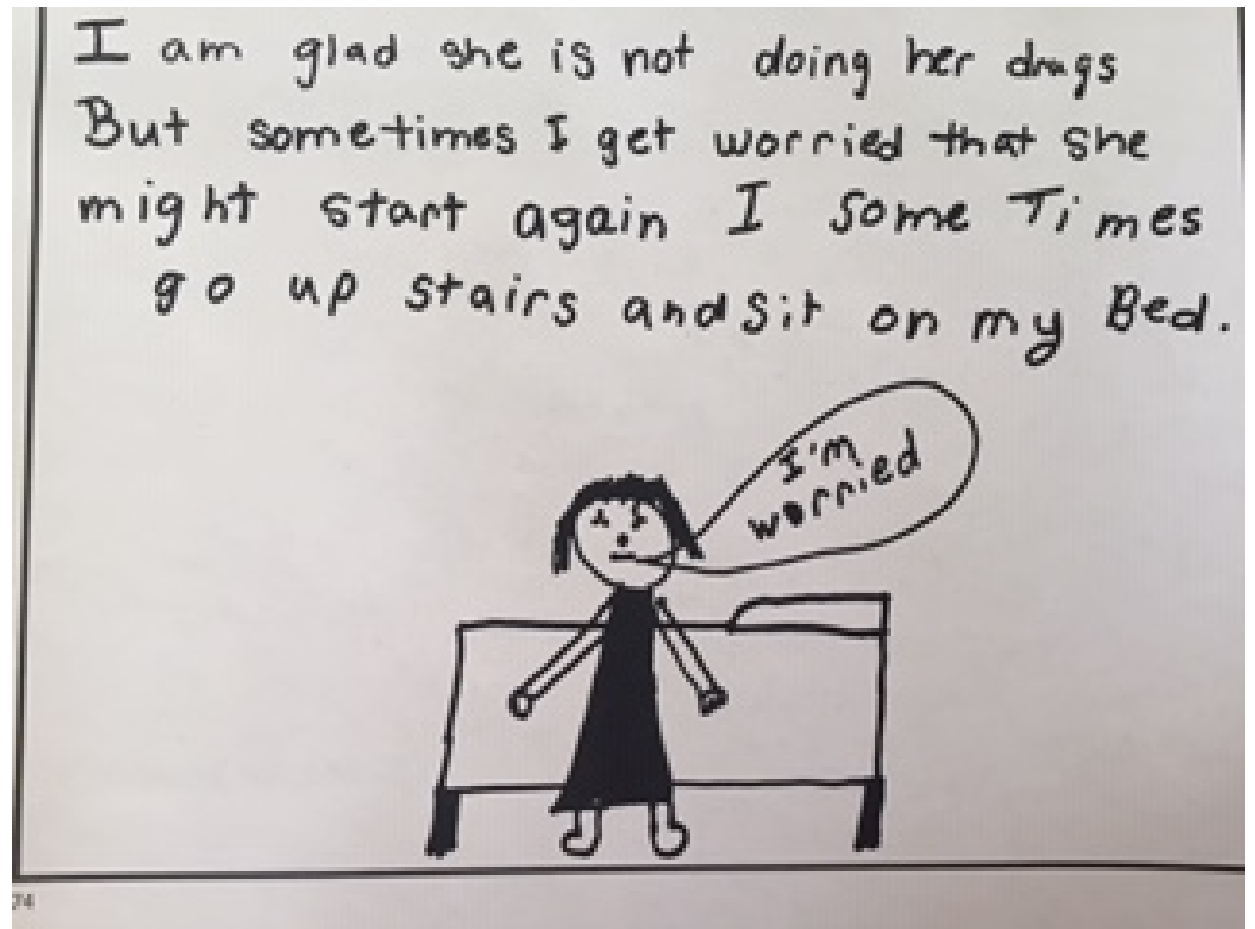
Parents focus on recovery -meetings, counseling and social relationships; children can be neglected.

Children can react by “acting out,” resisting parent’s attempts to regain parental role.

Children often worry about reoccurrence of active use.

They respond with hyper-vigilance and caretaking behavior.

Like adults, children can have ambivalent feelings about recovery.



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Ways to help children

- Let children know it's OK to talk.
- Be a consistent nurturing adult in a child's life.
- Provide information about SUD and recovery in age-appropriate language.
- Validate their experiences.
- Help them identify supports, and make sure safety plans are in place.

Challenges for recovering parents

- Preventing return to use is recovering person's first priority.
- Lack of role models for parenting - intergenerational parenting skills not positive.
- Overindulgence - “spoiling” to make up for past.
- Family roles and dynamics change.
- Balancing parenting and recovery needs.
- Maintaining realistic expectations.
- Overcoming stigma and judgments.
- Establishing trust.

What Do Adults Need to Hear?

- This is really hard, what you're going through.
- You can learn ways to cope and heal, and children can learn coping strategies too. You can model them.
- There are ways to reestablish trust.
- You are not alone.
- Addiction is a sickness, and you can get better.
- It's brave to ask for help.
- This can make you and your family stronger.
- Children often have the inner strength to help them through this. They can be resilient and can heal from their experiences. You can be an effective caregiver to your children.

What works

- Understanding substance use disorder, treatment and recovery.
- Avoiding adding shame and guilt to parents. Validating feelings.
- Encouraging new skills and activities. Focusing on positives.
- Maintaining accountability.
- Cooperating with treatment and drug-free activities.



Harm reduction strategies



- Helping children identify safe people that they can turn to if a parent is in crisis, does not come home or is in trouble. Make sure they have access to a phone and can reach these people when needed.
- Teaching children emergency procedures – for example, dialing 9-1-1, having naloxone in the home (and older children know how and when to use it), going to a neighbor for help.
- Educating children about substances (including MAT) and to avoid areas where drugs may be kept in the home by parents.

The person really Isn't bad,
The person is really good. inside



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Always remember...

- Parents love their children and children love their parents. We must honor their relationship.
- Parenting behavior is culturally and socially influenced, and each family is different.
- Extended family, past generations and the surrounding community all impact parenting.
- Parenting is a skill that can be learned. Nobody is born knowing everything.
- We're planting seeds, the fruit of which we may never see.



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