

Around a quarter of a million children in the UK are affected by their parents' drug use. But are drug-using parents bad parents?

Diane Taylor on a new piece of research that highlights how the right kind of support can enable them to raise happy and secure children

EXPERIMENTING with drugs is seen by many people as a teenage rite of passage, something to try out before growing up, moving on to a steady job, a mortgage and a couple of kids.

But what about those who end up developing a habit which lingers in the post-teenage years and into adulthood? Becoming a parent does not always lead to a sudden vow of abstinence. Although many users who are considering becoming parents or are already parents would like to stop using class A drugs like heroin and crack, they may not succeed. Female drug users may not always plan their pregnancies, but nonetheless, when they discover they are pregnant many are keen to have their baby despite their drug use.

Sandra and her partner Paul are long-term heroin users and have a grown up son who does not use drugs. "As a drug-using parent you're always frightened of social services coming and taking away your child. I think you're always over-compensating and over-protecting your child. When our son was at school we would try and get our appointments at drug clinics in the morning so we would be finished in time to collect him from school. But the staff weren't always accommodating. They don't believe that your child can be that important to you if you're a drug user."

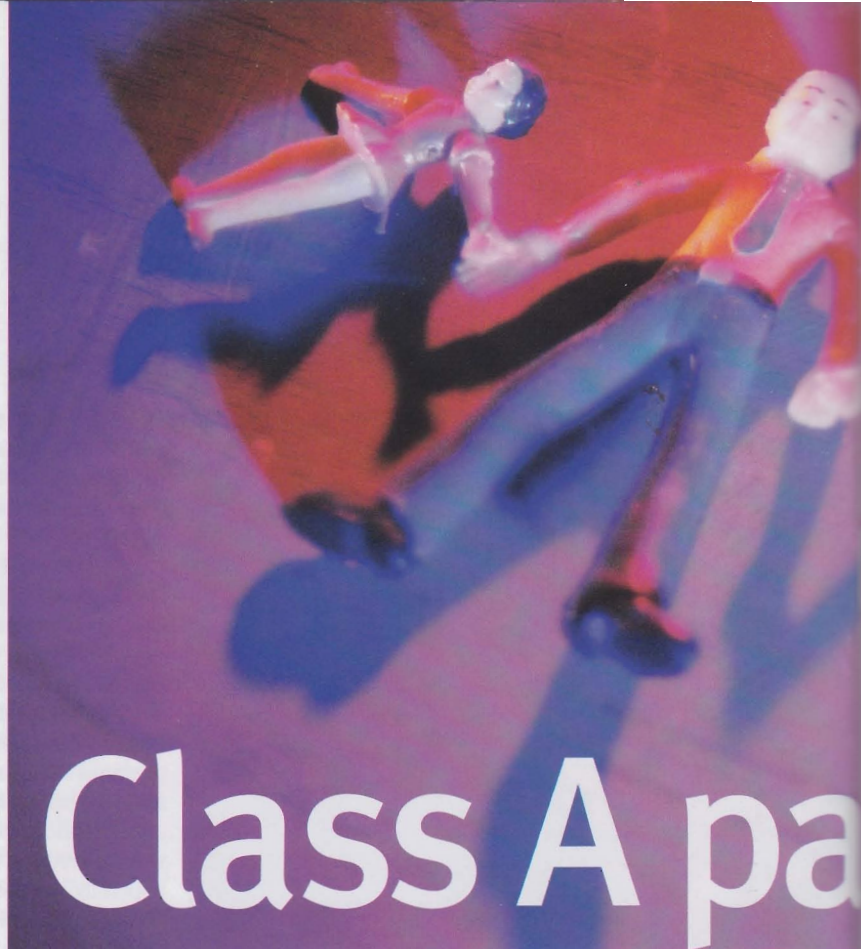
NEW RESEARCH

A new piece of research from Welsh social worker Rhian Cash looks at the needs of parents with a substance misuse problem in one borough in the Welsh valleys.

Cash conducted in-depth interviews with eight parents who were using a range of substances including alcohol, heroin and benzodiazepines, to investigate what their needs were in relation to treatment and support for their substance misuse problems.

The research revealed many and complex problems related to substance misuse. Often addiction was not taking place in isolation, but was a symptom of problems such as domestic violence, bereavement, mental health problems or low self-esteem. In some cases interviewees were self-medicating with drugs or alcohol as a way of coping with their lives.

Seven of the eight parents interviewed acknowledged that their substance use impacted on their ability to parent, causing problems such as lack of money, accidents, arguments with their partner and problems sleeping. However there were also protective



Class A pa

factors in the lives of their children such as the presence of a consistent and caring adult like a grandparent, regular attendance at school and nursery and sufficient income.

PROBLEM SOLVING

The research found that a range of interventions could be helpful to this group of parents. However two factors prevent this. The first is a lack of resources to provide appropriate services and the second is the reluctance of some drug-using parents to come forward and seek help because they fear being judged negatively by professionals, or worse, having their children taken away from them.

Both abstinence and harm reduction models should be on offer to parents, says Cash, as an approach that works for one parent might not work for another. She recommends that services for drug- and alcohol-using parents are discreet to protect their privacy.

The research identified school holidays as a time when parents find it more difficult to cope with the needs of their children. The provision of things like outings for children could be a treat for them and provide a welcome break for their parents. A fast-tracking into treatment would also be helpful. Long waiting lists for detox and rehab can dishearten even the most motivated parents.

Giving parents ultimatums about becoming drug and alcohol-free can be very unhelpful and can set them up to fail. More effective, says Cash, is working in partnership with parents and offering them a flexible range of services.

"Parents need support as well as children," says Cash. "These parents are criticised all the time and told 'you have to do this and this'. It's very useful to have someone advocating for them as well as for their children. Often what's required is a long-term lifestyle change. It's not realistic to expect change in a couple of weeks or months. Just listening to what a parent has to say can be empowering for them and can build up their self-esteem."

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She said it was also important to find replacement activities for parents who stop using alcohol or drugs. If their substance use is replaced by a black hole the chances of relapse become much greater. "We should be supporting parents to look after their own children. Removing them from the family should be the final option."

Not all professionals take the view that everything possible should be done to keep children and drug-using parents together. Neil McKeganey, Professor of Drug Misuse Research at the University of Glasgow, argues in an article entitled 'Thinking The Unthinkable and Saying The Unsayable', that the effects of drug-using parents on children are so damaging that drug-using women should be given financial incentives to use long-term contraception so that they don't have children at all. His views have generated a storm of protest from others working in the drugs field and some have argued that his views represent a form of eugenics or social engineering.

ONE SIZE FITS ALL?

Some drug-using parents manage to hold things together and don't allow their drug use to escalate to levels where they can't care for their children. Their love and sense of responsibility towards their children is what keeps their drug use at a level where they can still continue to function as parents.

For Jodie, who had experienced an abusive childhood followed by abusive relationships with men, her children were the only things that kept her crack habit in check.

“**Parents who do not use drugs are not automatically guaranteed entry into The Perfect Parents Club**”

When she walked out on her violent husband with their two young children he called social services and told them she was using crack.

"They investigated but could find no evidence that I was neglecting my children. They always looked immaculate. My kitchen cupboards were always full of food and I got on well with staff at the nursery they both attended," she says.

Then her husband looked after the children for a week, successfully applied for a residency order and took the children away permanently.

"He raided my house and took everything including all the things that were precious to me like the children's first teeth, first locks of hair and all their baby pictures. When I lost my children I gave up hope and gave myself up to drugs. My house was repossessed so I started sleeping in my car, then I lost that."

For Kate her 15-year-old son Ben played a large part in her successful battle to stop using heroin and crack. The two are very close and Kate has been open with her son about her drug use. While there is evidence that parental drug use can increase the chances of children using drugs, it can sometimes have the opposite effect.

Ben assures his mother that he has no plans to experiment with drugs. "Seeing the way you are with all those scars from injecting and stuff has definitely put me off drugs. I really don't want to end up like you," he told her.

If a parent is using drugs habitually it is generally not the best foundation for a child. But, as with any other issue which can impact on the ability to parent such as domestic violence, extreme poverty or mental health problems, there is a spectrum. The effect on a child of a parent who has a £20 a day heroin habit which is completely concealed from their child and is secondary to the need to keep the child clean, fed and at school on time every day is very different from the effect on a child of a parent who has a £500 a day crack and heroin habit, who is perpetually absent, engaged in the cycle of scoring and working, often illegally, to fund that habit.

It is also important to put drug use amongst parents into context. Parents who do not use drugs are not automatically guaranteed entry into The Perfect Parents Club. Non-drug using parents may be physically and/or emotionally cruel to their children, or perpetually absent from the home for other reasons than scoring drugs. Every parent and every child is an individual and one size fits all stereotypes around drug use are unhelpful for both.

The government's 2003 report *Hidden Harm* estimated that between 250,000 and 350,000 children were affected by their parents' drug use - approximately two to three per cent of children under-16 in England and Wales. Various studies have shown that neglect is the most common type of abuse associated with parental substance misuse, along with being emotionally 'unavailable' for children. However there is also evidence that some drug using parents over-compensate by being extra-vigilant about the welfare of their children.

The majority of drug using parents want to do their best for their children. Some will not manage this. But with the right kind of tailored support many others will succeed in raising happy, secure children. ■