

**“Call it a clan, call it a network, call it a tribe call it a family. Whatever you call it whoever you are, you need one.”**

**Jane Howard**

### The Impact of Illicit Substance use on Families

Presented by: PEPISU Women and Children's Program  
Jo-Anne Hodson & Fiona Reid

Thank you so much for the opportunity to come here today and share some of our experiences working with families affected by illicit substance use in the PEPISU Women and Children's Program. It is very timely too in that I have spent the last two days taking part in a Ministerial Round Table on Child Protection where this issue was very present in many of the discussions that took place. It was also deeply gratifying that many of the solutions to improving child protection practice in this state mirrored many of the strategies that the PEPISU program already employs in our work.

When Fiona and I were invited here moving beyond the initial response of sheer terror it also presented as an opportunity to once again be reflective about the impact of illicit substance use on the families we work with. Certainly our interventions -or most of them – are often underpinned by the much bandied about evidence based practice, some of which we have proudly contributed too. Nevertheless our presentation today is fundamentally informed by the parents and children we work with.

One of the first things needs to be understood is that it is very difficult to isolate the impact of substance use alone on the women and children we see. In fact we struggled to identify any of our families that 'only' had illicit drug issues. Many of them are also severely impacted by issues of poverty, inadequate/unsafe or no housing, domestic violence, mental health problems, chronic illness and social isolation; which also in themselves present significant risk of harm and negative outcomes for families.

Within this context the research, which is supported by our experiences these families, tells us that some of these impacts include:

- Poor early parent-child attachment and poor family relationships<sup>1</sup>.
- A strong lack of connectedness to the communities in which they live and the wider community. Such as school, early childhood services, health services, physical/recreational activities and participation in community life.
- Isolation and social exclusion.

But perhaps the best way to illustrate the impact of illicit drug use on families is through the children we work with and what they have to say. It should be noted that many of the children, particularly the young children don't name the families problems as 'mums drug problem', in fact many don't know that they or their mums come to the 'little pink house' because of their parents' drug use.

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<sup>1</sup> Scott, D. (2007). Ministerial Community Roundtable on Child Protection, presented Perth Western Australia, 12<sup>th</sup> March 2007.

In a small but elegant study by Fiona Reid (*Growing Up with Harm Minimised Mums: A qualitative analysis of how harm reduction impacts on the relationship between women who use illicit substances and their children, and the children's wellbeing overall* conducted in 2005 and presented at the 16<sup>th</sup> International Conference on the Reduction of Drug Related Harm, Belfast, Northern Ireland, March, 2005) the children themselves identified some of the problems they have experienced.

*"It was pretty hard for my brother because we'd have like sports carnivals and stuff and mum never came ... It was the good stuff, not when we needed her ... she was always there when we were in trouble or needed her but not in the good times"* Bridgette, 15yo.

*"She was depressed. She was sleeping most of the time. She took these antidepressants which made her sleep. Not very organised most of the time."* ... *"I thought of her as a bad parent"* Theo, 15yo.

Overall the children that knew about their mothers drug use believed that their mum's were less emotionally available to them when she was using drugs and/or alcohol. But encouragingly none of the participants believed their mother's drug use was a reflection of how much their mothers loved them.

The mum's too are deeply concerned and affected by the impact of their drug use on their children and families during pregnancy and parenting. The belief that they are uncaring or indifferent to their families' well being in our experience is simply not supported.

In terms of specific financial, social and personal costs some of our observations have been:

- Our families usually come from impoverished circumstances and even if they successfully free themselves from drug use many continue to struggle financially. For example one of the single mothers we have worked with for a number of years has made amazing changes in her life and that of her children. She has given up drug use for a long period of time, returned to study, works part time, and has worked hard to repair her relationships with her family and her community. Nevertheless she finds it very difficult to meet her children's needs financially.
- As a result of the stigma and secrecy surrounding illicit substance use (particularly for women) the social costs to these families can be very high. For example one of our clients who is on the MMTP has often discussed her fears of 'being found out' by her sons school community and him being ostracized by his peers. As result his friends don't visit his house. Children, particularly adolescents, share this fear.
- There is commonly a deep sense of unworthiness, guilt and shame by all family members. Many believe they have very little say or control over their lives and lack any sense of self efficacy.

- The impact of ongoing fears about children being removed because of parental substance use should not be underestimated. It can get in the way of families accessing services they need and further marginalises them.

It is important to note here that many of the families involved in the PEPISU program do not experience such serious problems.

*Especially when:*

- *Only 1 parent has problematic drug use*
- *They are attached to at least one other adult*
- *They have good communication & social skills*
- *Consistent routines & family rituals (control)*
- *More resources & mental stimulation*

**The Nobody's Clients Project: Children with Substance Dependent Parents  
Drugs in the Family Summit (Canberra, July 2005)  
Dr. Stefan Gruenert MAPS**

### **The impact of harm minimisation programs on families**

The PEPISU and PEPISU's children's program operates within a Harm Minimisation framework and employs a number of harm reduction strategies in our work with families. Some easy examples include that some of our adult clients are involved with Pharmacotherapy treatment programs, some are a part of Diversion programs like Drug Court, and we continue to engage with women and their children regardless of the presence or absence of parental drug use, whilst maintaining a drug free centre. In fact the reduction of psychological and physical effects to children of parental substance use is a key objective of the children's program.

Quotes from the Evaluation of the Pregnancy, Early Parenting, Illicit Substance Use (PEPISU) Children's Program (Final Draft Only, December 2006).

*"The whole process is good, in that you can stay – you're not sent away when you get over the crisis period or get clean, but can keep coming and continue your involvement and counselling". "There's no discrimination here – you can tell them anything and not be made to feel bad". She thinks it's so good she has referred others to come for counselling and they have. "It's different to other services in this way – it's awesome – they will even come and see you at home if you can't get yourself together to come to the centre." S.*

*"She said she had been to a residential rehabilitation centre where she was allowed to take the kids, "but the focus was on treating the parent, and the kids were not involved and catered for like here. It's important, as there's a lot of guilt about your life choices and how they affect the kids. Unlike other services, the kids are integral to their planning." P.*

Unfortunately there seems to be still a public misunderstanding that harm reduction strategies somehow do not hold people adequately responsible enough for the negative impacts of their drug use. Instead we at PEPISU and in many other agencies see such

strategies as a more helpful response to the many problems these families face including the lived reality of problematic drug use. They can provide an opportunities and encouragement for women to act upon their concerns about their families' well being even if they haven't completely freed themselves from drug use. You are always in a better position to achieve desired outcomes if you can keep families engaged in the programs you offer.

Most importantly the PEPISU program and its workers are committed to reducing the harm attached to stigmatising families who are affected by illicit substance use. We know the stigma goes well beyond the user and deeply affects every family member, from newborns to family elders.

*'When considering treatment and rehabilitation it must be recognised that many problem drug users have had such limited options in life, that they lack personal resources (confidence, social skills and life skills) and have limited positive life experiences to lean upon or return to. This client group need social integration not social reintegration, they need habilitation not re-habilitation – it seems that many have never really been able to get started in life in the first place. This makes living without drugs a very tough option indeed.'*

Buchanan, J. (2004). 'Missing links? Problem drug use and social exclusion' Probation Journal, Special Issue: Rethinking Drugs & Crime, Vol 51(4): 421–431

### **Ways to strengthen families impacted by illicit drug use**

"If we value our children, we must cherish their parents" - John Bowlby, M.D

The most important way that we can help to strengthen families is first and foremost to recognise that they are marginalised and suspicious of service providers. We've found that this is not based on paranoia but is grounded in past negative experiences these families have had. This is why the PEPISU program takes an 'active engagement' approach to case work which is unusual in many traditional services. By this we mean that we actively – through phone calls, outreach and off site services, letters, invitations etc- try and get the women and thus their children involved in our services. In other words we make it as hard as possible for the clients to 'fail' and as easy as possible to engage or reengage with services. We also address the very real barriers that stand in the way of mothers accessing drug and alcohol services and services in general. Foremost of these are transportation, childcare and financial barriers to community participation.

The PEPISU program strongly agrees with the findings in Dr Stefan Gruenert's study: **The Nobody's Clients Project: Children with Substance Dependent Parents Drugs in the Family Summit** (Canberra, July 2005). That the "*Best way to support children is to work with their parents*"

- *All children need opportunities to be "normal" children.*
- *Play, recreation, supervision, guidance, praise, predictable routines, material needs, stimulation, school, support from family & friends etc*
- *Suggest that young children be protected from parental problems and concerns*
- *Older or traumatised children may need their own support and counseling".*

The theme that rose again and again in the Ministerial Round Table from researchers and front line workers alike is the importance of any strategies that connect these families to each other and to the larger community.

Again using the words of the children we work with the importance of these strategies becomes clearer:

*"I think it's been good for me. I don't know if its helped mum, because I can't tell, but it's been good for me. We got to go on trips to Rottnest and Yanchep" ... "I got to meet lots of new people" ... "It's easier knowing that their mums have the same problem and that I'm not the only one" Madison, 11yo.*

*"She's been getting out more and we have more fun over the holidays" ... "Keeps us active and helps us do other things" David 13yo.*

*"I'm happy she comes here. Because she gets to see all her friends ... and I like being in the kids room which is not very far away from her" Tim, 9yo.*

*"A lots changed. Not necessarily with me and mum, but with my younger {siblings}... She puts them first and thinks about them before other stuff. I don't know, she thinks about us all more... She has people to talk to and support her instead of hiding her problems away" Bridgette 15yo*

*"I really respect my mum for what she's done for us and what she's done for herself." I think mum is happier ... I respect mum a lot more." Anne 14yo.*

#### Some Recommendations

Lots more AOD family focused programs

More shared care relationships between services

Housing, housing, housing

Inclusion not exclusion

Brokerage arrangements

More regional and Indigenous services

More services and support to grandparents and carers. These are our often our families most valuable resource to successful outcomes ...