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**UnitingCare Burnside Submission
to the House of Representatives Standing Committee
on Family and Human Services**

**Inquiry into the impact of illicit drug use
on families**

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Executive Summary

UnitingCare Burnside is a member of the Children, Young People and Families Services Group of UnitingCare NSW.ACT and part of the Uniting Church in Australia. As a leading non-government child and family welfare agency in New South Wales, Burnside works with over 5,000 disadvantaged children, young people and families each year.

Moving Forward, located in Sydney's south west, is one of Burnside's many programs that work closely with families affected by drug use. Moving Forward tailors its services to cater for families from culturally and linguistically diverse (CALD) backgrounds and focuses on providing support not only to a drug-using family member but to the family unit as a whole.

This submission is based on the experience of Moving Forward workers and some of the families they assist.

This submission details the extensive financial, personal and social cost for families who have a member using illicit drugs. In particular, it identifies social isolation, relationship breakdown, and an increased risk of abuse and violence between family members as the most serious consequences of illicit drug use.

Based on the success of Moving Forward, this submission also highlights effective ways of working with families who have a member using illicit drugs. The submission recommends funding and support for increased provision of service delivery that includes a comprehensive, holistic and strengths-based approach, where workers work with both the drug-using member and other family members to strengthen the family unit as a whole. To be effective, services must be both accessible and sustainable, while emphasising the importance of family relationships and community engagement and networking.

Introduction

UnitingCare Burnside is a member of the Children, Young People and Families Services Group of UnitingCare NSW.ACT and part of the Uniting Church in Australia. As a leading non-government child and family welfare agency in New South Wales, Burnside works with over 5,000 disadvantaged children, young people and families each year in the regions of Western Sydney, South West Sydney, Central, Mid-North and South Coasts and Orana Far West. We aim to protect children from abuse and neglect by breaking cycles of disadvantage and building on family strengths. We achieve this by providing direct service across a continuum of care from early intervention, family support and child protection, to out-of-home care and after care. Our work with individual children and young people, families and communities is informed by research and evaluation, and we actively advocate with our service users with the aim of making positive social change and influencing public and social policy.

Many of Burnside's services work with families affected by drug use. This submission is based on experience of Burnside's Moving Forward program, a unique program located in the south-western Sydney suburb of Cabramatta. Testimonials from Moving Forward service users are also included in this submission.

Moving Forward operates from Burnside's Cabramatta Multicultural Family Centre, and is part of the Cabramatta Anti-Drug Strategy to address drug and alcohol problems in Fairfield and Liverpool Local Government Areas. Funded by the Department of Community Services, Moving Forward has been in operation since 2001. It provides counselling, including drug/alcohol counselling, as well as intensive support to drug-affected people and their families. It assists drug/alcohol users to access treatment and/or to achieve a drug-free lifestyle. One of the unique features of Moving Forward is its dual focus supporting both the drug-using family member, and non-using family members, especially parents. It also works to improve the safety and general welfare of children living with drug-affected parents.

Moving Forward actively engages with culturally and linguistically diverse (CALD) communities and has a number of bilingual workers to support this work with CALD families. This focus has strongly informed our submission.

Moving Forward uses three inter-related components including case work, group work (eg relapse prevention courses for drug users and parenting skills for drug using parents who have children in their care) and community drug education. Please refer to Appendix 1 for more detailed information about Moving Forward.

Terms of reference

The financial, social and personal cost to families who have a member(s) using illicit drugs, including the impact of drug-induced psychoses or other mental disorders.

There are significant financial, social and personal costs for individuals, families and communities as a result of illicit drug use. It can lead to family dysfunction, relationship breakdown and can increase the risk of abuse and neglect of children. It is of particular concern to Burnside that failure to support drug-users effectively with appropriate treatment also has lasting effects on a family's ability to engage with education, employment and the community in general.

Financial costs

There are heavy financial costs for families who have a member using illicit drugs. Illicit drug use impacts upon the day-to-day experience of families, as well as their long term financial capacity. For example, money that would otherwise be required to meet the needs of a child may be used by a drug-using parent to support his/her habit. For the same reason, a drug-using child may steal from his/her parents, siblings or extended family. As a result of the chaotic lifestyle that can be part of addiction, families are often burdened by extra costs incurred by the drug-user, including fines, debts and medical treatment.

There are some financial costs that seem specific to communities with whom Moving Forward works. A significant proportion of our Vietnamese and Khmer clients report that some parents from Vietnamese and Khmer backgrounds send their drug-using child to live in their home country, in the hope that a different environment will improve the management of their child's addictive behaviours. This places financial stress on the parents, as they are required to stop work and take extra holidays in order to spend time with their child. This situation also places financial stress on the extended family members, often grandparents, who are required to support the drug-using child while he/she is overseas. As well as being a costly exercise, the community reports that this approach is not satisfactory. Rather than addressing the behaviour of young people, families comment that often their addiction worsens due to the availability of heroin and other drugs in their country of origin. Further, some young people develop diseases such as Hepatitis C due to the poor hygiene, risky sexual practices and the lack of syringes and syringe exchange programs in overseas countries.

In Australia, services users report that parents and spouses from Vietnamese and Khmer backgrounds may spend thousands of dollars on treatments such as rapid detoxification and naltrexone implants, without sufficient knowledge of the treatments and how they work. As a result, the treatment fails and further exacerbates the family's financial situation.

Generally, a great deal of a family's financial resources are spent on the drug-using member, which affects their capacity to save or care for other family members. The financial cost to families is often referred to as "a sacrifice for a member in need."

Social costs

The social stigma surrounding people who use illicit drugs, including their families, is well entrenched in both the local and wider community. The experience of Moving Forward workers in Cabramatta suggests that this stigma is particularly strong in some CALD communities. Families with a member using illicit drugs often talk about taking steps to isolate themselves from their neighbours, relatives and the larger community. As a result, many non-using members feel and become socially isolated and may be at risk of or experiencing depression. Older parents often turn to their faith to cope with their "unfortunate fate", while younger family members may break out on their own to cope with the situation.

As a result of this stigma, many families try to resolve their problems internally rather than seek help. This process, which is often slow and protracted, is generally very emotionally draining for family members.

Personal costs

Relationships between a drug using family member and the rest of his/her family are often characterised by tension and conflict.

Moving Forward staff report that:

We had cases in which a spouse had to take her children into a women's refuge because the drug-using husband abused her and her children.

The relationship between the parents of a drug-using child may also suffer. In our experience, parents often feel hopeless, guilty and frequently blame one another – either for the reasons behind their child's illicit drug use, or for the failure of a child to be treated successfully.

Moving Forward team members identify couple relationship breakdown as an area of concern:

In a number of cases, when we arrived at the house, the father had left the home, leaving the mother to cope with the family's stressful situation. Our program often receives phone calls for help from mothers.

Sibling relationships can also be damaged when non-using members blame the drug-using member for family stress.

Normal family functioning is almost always disrupted when there is a family member using illicit drugs. Families may begin to fight, and at times violence and abuse may start to characterise relationships. Relapse can erode the trust between parents and the drug-user. This environment may significantly reduce the capacity of families to nurture younger members and care for older members.

Parental drug use can have a detrimental effect on children's safety and wellbeing. Child protection issues may become a concern and, as research has shown, can be particularly significant for young children when they are dependent on parents or caregivers whose main priority is their drug habit. As families experience dysfunction and stress, family breakdown becomes a risk.

Moving Forward staff also highlight the impact of the constant drama and distress that families experience:

We had parents, mothers in particular, talk about their suicidal thoughts as an escape from family drama. More often, we witness their confusion and depression.

For some CALD families using our program, seeking help and using resources to support their family is not a strongly rooted concept. Some families report that they or people in their community are more likely to tolerate stress as a matter of personal sacrifice for their drug-affected children. This belief may be supported by religious or cultural beliefs. This can hinder professional and effective family intervention.

2 *The impact of harm minimisation programs on families*

In our experience, the importance of harm minimisation is generally not well understood by CALD communities. However, families are concerned about the safety and health of their drug-using family members and harm minimisation strategies are a critical part of working with people who use illicit drugs.

In working with drug-affected families and drug users in particular, Moving Forward workers take the time to explain the significance of harm minimisation practices, such as prevention of overdose, awareness of suicidal thoughts, dangers of sharing needles and syringes, safe sex, and diseases such as Hepatitis C and HIV. Harm minimisation messages are a critical part of a holistic approach to addressing the illicit drug use.

3 Ways to strengthen families who are coping with a member(s) using illicit drugs.

The Moving Forward Program uses a holistic approach in working with families with a drug-using member. The following characteristics are critical to the program's success:

- A strengths-based approach
- A comprehensive, holistic approach
- Working with the family unit
- Building trust
- Accessibility
- Sustainability
- Networking and community engagement

A strengths-based approach

Like all Burnside programs, Moving Forward follows a strengths-based approach to working with families. Rather than focus on a service user's problems, workers actively identify and build upon service user's strengths. Moving Forward finds this approach an effective way of promoting collaboration and developing trusting relationships with families.

One Vietnamese mother experiencing problems with her son reflects on the strengths-based approach taken by Moving Forward and other services:

After a number of meetings with the program worker, I felt that my thoughts and feelings were fully acknowledged. Further I was also assisted to take appropriate steps in raising my teenage son....I would like to take this opportunity to thank the worker of Burnside, the Juvenile Justice Officer and the worker of Cabramatta Street Team who have helped me to raise my son in a way that he will have more chance to become a good citizen in our society

A comprehensive, holistic approach

Moving Forward provides a comprehensive and holistic service which incorporates three inter-related components:

- case work
- group work, and
- community drug education.

Non-using family members not only receive counselling and emotional support, but also practical assistance with developing effective communication and coping strategies. Boundaries are set between the parents and drug-using member, and

behavioural contracts may be devised. Families are educated about drug use and drug behaviour, and are linked with other community services that can help meet their needs. Workers also work directly with the drug-using member, connecting him/her with treatment programs, or relapse programs should the need arise.

The story of one mother, a drug-user with no family support who was living on the street with her boyfriend, indicates the success of the comprehensive, holistic approach of Moving Forward:

The worker's visits are always regular. On a few occasions, I had no transport or money for a fare, the caseworker took me to the clinic.... He also provided emotional and practical support when my dearly beloved brother died recently. My caseworker helped me be able to attend his funeral as my brother is my only sibling and we were the best of friends....He too helped me cope with my parents as they had a been a big issue in my life.... I am now about to sign a long term lease with Hume Housing thanks to my case worker. He has taught me to be strong and independent. I will never forget Burnside, the Cabramatta Community Centre and DoCS for guiding me back to a normal life. I have no dependency any more! Only methadone which I will dispose of soon. This is my goal.

Working with the family unit

By working with the family as a whole, especially in the area of communication, workers are able to help rebuild a normal family environment, which not only promotes hope, trust, and respect, but improves the welfare of every family member, including the drug-user.

One 16 year-old who ran away from home and became involved in drug use explains the importance of this family based intervention:

Before I had my daughter, I was rebelling against my parents. It was like World War Three. The fighting and arguments got so bad, I decided to move out of home and went to live with my boyfriend. My parents then went to see a counsellor and went to parenting classes and learnt how to communicate better with me without arguing. That was the best thing that they did because it brought me back home and made us a family again. Now we can talk about anything and concentrate on the future.

Through its home-visiting component, Moving Forward is able to engage both the concerned family members, and in most cases the drug-user as well. A case worker enters the home and provides support and assistance to the family members which may include:

- “Normalising” the situation
- Developing a better understanding of the drug user's addictive behaviours
- Devising coping strategies
- Establishing clear boundaries between parents and the drug user
- Reinforcing the importance of having a unified approach
- Strengthening the relationships between parents, which has often become damaged
- Reinforcing the importance of maintaining good physical and mental health
- Reminding parents of their responsibility towards other family members, especially children.

At the same time, the case worker is able to provide direct support to the drug using member which involves help in accessing comprehensive treatment such as pharmacotherapy, drug counselling and relapse prevention

Building trust

Establishing and building trust and hope with families is a significant component of Moving Forward. For many families with a drug-using member, Moving Forward is the first service they encounter.

The coordinator of Moving Forward reports:

Families would come out with their own ways to ask for help once they could trust the service both in terms of its caring and professional skills. It is also important that families have good hope of getting their drug addicted members into proper treatment and recovery and the family as a whole to regain normal functioning.

Accessibility

As mentioned previously, one of the strengths of Moving Forward is its ability to provide a service that is accessible and culturally appropriate to the different CALD communities that make up the local area. Moving Forward employs bilingual and bicultural family workers to cater for needs of Arabic, Vietnamese, Khmer and Lao-speaking families. Workers are also able to bring attention to the services offered by Moving Forward, and raise awareness about drug issues via ethnic media. This not only raises awareness of the Moving Forward program but provides a valuable educational opportunity in which Moving Forward workers can increase understanding of drug prevention amongst CALD communities.

One Khmer-speaking mother using the service reported that this had been her pathway into the program:

By listening to the Khmer program on SBS radio this year about your program, I went to Burnside Cabramatta. You had the ability to explain me clearly how to prevent the children from drug use, and how to improve our family relationships, etc. It was an advantage for me that you speak our own language. Therefore, I could talk to you easily and this built up my confidence.

Sustainability

Another successful key feature of Moving Forward is its sustainability. Workers commit to families for periods of nine to 15 months. During this time, they equip family members with the skills needed to continue supporting the drug user well after the family no longer requires assistance from Moving Forward. In some cases this may be years, as the drug user experiences relapse.

The Moving Forward Coordinator notes:

Once concerned family members can cope positively with the drug-using member, not only their sufferance is much lessened but they often turn out to be a more effective supporter of the drug user's recovery process. In our program, families can then convince drug user to get into treatment and are better resourced to support the drug-user to maintain a lifestyle free of illicit drugs.

Networking & community engagement

By connecting families who have a drug-using member to the community, Moving Forward ensures that families have access to a range of appropriate services. Moving Forward may assist families with children to utilise local children's services, or they may inform families of local drug detoxification and treatment services. As well as linking the drug using member to specialised treatment, workers will also ensure family members have access to individual and family counselling.

A positive benefit of this approach is that through their local networks, families who have been assisted by Moving Forward are then able to help other families in the community who may be coping with drug-using family members.

APPENDIX 1

Moving Forward: Facts at a Glance

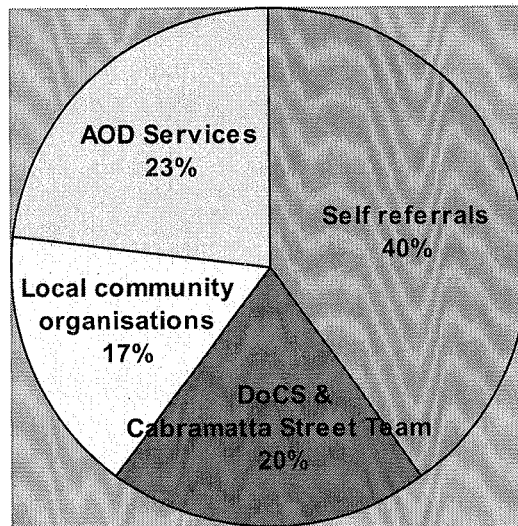
Aims

- to provide comprehensive support for drug/alcohol users so that they may receive treatment and counselling
- to provide support for drug/alcohol users in the recovery process
- to provide support to families of drug/alcohol users (including in areas of child protection and domestic violence)
- to equip families with the skills to support drug/alcohol using member(s) and maintain their recovery process
- to strengthen local Indochinese communities, by promoting prevention and early intervention approach to drug/alcohol misuse

Referrals

Between October 2001 and December 2006, Moving Forward received 388 referrals. Nearly half of all referrals were self referred.

Figure 1: Referral Source



From the total number of referrals, 315 cases became active, that is, services were provided to drug users and their families. Among them, Moving Forward worked with:

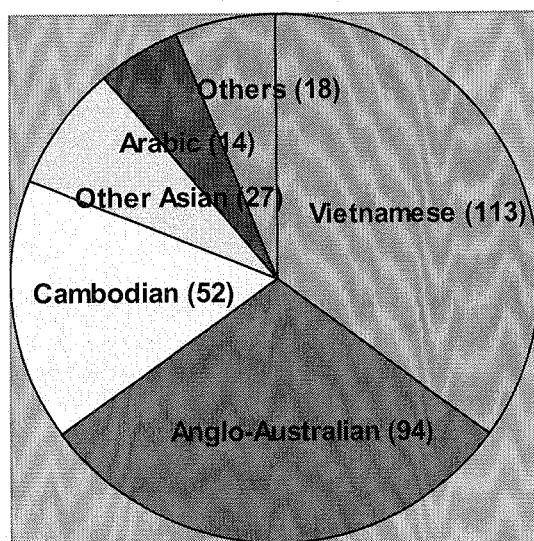
- 318 drug/alcohol-affected persons and at-risk young people

- 202 concerned (non-using) parents/partners
- 163 children within families

Cultural background

Moving Forward assists service users from culturally and linguistically diverse backgrounds. Over one third (35%) of the program's service users are Vietnamese.

Figure 2: Service users by language/cultural background



Age

The age of people assisted by Moving Forward varies from 12 to over 46 years. The majority of service users are aged between 12 and 35 years.

Family Structure

Moving Forward's service provision to clients and families varies according to each of the four sub-groups of family structure listed below.

Family structure	No.	%
Individual drug/alcohol-affected persons	67	21
Drug/alcohol-affected parents responsible for caring for their children	130	41
Drug-affected young people living with their families	69	22
Young people at risk living with their families	49	16
TOTAL	315	100

Outcomes & Achievements

October 2001 to December 2006

Service users	No. of cases	Outcomes
Individual drug/alcohol-affected persons	67 consisting of: <ul style="list-style-type: none"> • 75 drug/alcohol users 	<ul style="list-style-type: none"> • 33 achieved stable lifestyle (either on methadone/subutex programs or abstinent) • 9 relapsed & left program • 33 received short term support and/or referred to other services
Drug/alcohol-affected parents responsible for caring for their children	130 consisting of: <ul style="list-style-type: none"> • 157 children 	<ul style="list-style-type: none"> • 69 achieved stable lifestyle through abstinence, attending long term rehabilitation or continuing a methadone/subutex program. • 36 relapsed/did not change and left program • 23 received short term support and/or were referred to other service • 2 new cases to be followed
Drug-affected young people living with their families	69 consisting of: <ul style="list-style-type: none"> • 65 drug-using young people • 100 non-using parents/partners 	<ul style="list-style-type: none"> • 34 achieved stable lifestyle through methadone/subutex program, while 4 stayed abstinent • 3 participated in long term rehabilitation programs • 23 unchanged/relapsed and left program • 5 assisted in case conferences in other drug services
Young people at risk living with their families	49 consisting of: <ul style="list-style-type: none"> • 48 young people • 74 parents/other family members 	<ul style="list-style-type: none"> • 30 made positive lifestyle changes and were assessed as no longer at risk • 6 left home to live independently • 4 changed behaviour & left program • 5 referred to other services (1 still partly supported)
TOTAL	315	166 drug-affected/at risk persons achieved stability