

Date of Briefing – August 2004
Updated – August 2005

Parenting Capacity and Substance Misuse

The topic of this briefing is how parenting capacity can be affected by parental substance misuse (drugs and/or alcohol) and how this may be managed.

Key Messages

- The misuse of drugs and/or alcohol may adversely affect the ability of parents to attend to the emotional, physical and developmental needs of their children in both the short and long term
- A number of policy and practice documents are available governing the provision of services to support parents who misuse substances
- Research has tended to focus principally on substance misusing mothers rather than fathers, and drugs rather than alcohol. Residential programmes which include the children have been demonstrated to be effective
- Studies often fail to evaluate the impact of substance misuse on parenting capacity relative to other aspects of disadvantage, such as poverty, unemployment or depression
- Parents are worried about losing their children, so confidentiality is considered to be a requirement for support services
- Children often know more about their parents' misuse than parents realise, and feel the stigma and shame of this misuse, but also fear the possibility of being separated from their parents and taken into care

Introduction

This section introduces and defines the scope of the briefing and the topic.

A SCIE research briefing provides up-to-date information on a particular topic. It is a concise document summarising the knowledge base in a particular area and is intended as a 'launch pad' or signpost to more in-depth investigation or enquiry. It is not a definitive statement of all evidence on a particular issue. The briefing is divided into the different types of knowledge relevant to health and social care research and practice, as defined by the Social Care Institute for Excellence (SCIE).

Title link <http://www.scie.org.uk/publications/knowledge.asp>

It is intended to help health and social care practitioners and policy-makers in their decision-making and practice.

The topic of this particular briefing is parenting capacity and substance misuse. Parenting capacity is defined in a recent government framework document as “the ability of parents or caregivers to ensure that the child’s developmental needs are being appropriately and adequately responded to, and to [be able to] adapt to [the child’s] changing needs over time”. This includes providing for the child’s basic physical needs, ensuring their safety, “ensuring the child’s emotional needs are met and giving the child a sense of being specially valued”, promoting the child’s intellectual development through encouragement and stimulation, demonstrating and modelling appropriate behaviour and control of emotions, and providing a sufficiently stable family environment ⁽¹⁾.

The substance misuse covered by this briefing includes both drug and alcohol misuse. This involves drug misuse which is considered by professionals or family members to be having “an adverse impact, not just on the health and behaviour of parents, but on the lives of their children also” ^(2,3), and alcohol consumption which “warrants attention because it seriously and repeatedly affects the drinker’s behaviour” ⁽⁴⁾. There are important differences in the characteristics between drug and alcohol misuse, however. For example, the illegality and stigma of drug use makes concealment of use common ^(5,6).

Why this issue is important

This section summarises research findings relating to the impact or consequences of parental substance misuse on both parenting capacity and childhood development.

This issue is important because the problem is widespread. It is difficult to be precise about the numbers of parents and children affected by substance misuse, but it has been estimated that the number of children who may be exposed to the consequences of problem drug misuse in the UK is between 250,000 and 350,000 ⁽²⁾, while around two million children are affected by parents’ harmful drinking ⁽⁷⁾. Between 50% and 90% of families on social

workers' child care caseloads have parent(s) with drug, alcohol or mental health problems ⁽⁸⁾.

The research has indicated a number of ways in which parental substance misuse can have a negative effect on children in both the short and long term. Children of parents who misuse substances make up a substantial proportion of the children coming to the attention of the child protection authorities for abuse or neglect ^(8,9,10,11), although neglect rather than abuse is the most common reason for intervention by social services ⁽⁹⁾. However, it is believed that only a minority of such children come to the attention of social workers ⁽¹²⁾. Children of parents who misuse substances are also likely to enter the care of relatives, who themselves may require help and support in caring for the children ^(3,13).

Children of parents who misuse substances may also experience behavioural or psychiatric problems ^(6,9,14,47,48,53) and may themselves engage in substance misuse ^(15,16). They may also be vulnerable to physical, educational and emotional problems ⁽⁵⁰⁾. Parents who misuse substances may interact poorly or in an authoritarian manner with their children ^(5,17,18,19,20,53) and may also be inconsistent and emotionally unresponsive as a result of their substance misuse ^(21,55). The lifestyle of families with a substance-misusing parent can also be characterised by chaos and a lack of routine ^(7,10,22,23), as well as social isolation ^(10,24,25).

What do the different sources of knowledge show?

Organisational Knowledge

This section lists and briefly summarises documents that describe the standards that govern the conduct of statutory services, organisations and individuals working in the field of substance misuse by parents and its impact on their children.

Prime Minister's Strategy Unit (2004). Alcohol Harm Reduction Strategy.

<http://www.strategy.gov.uk/downloads/su/alcohol/pdf/CabOffice%20AlcoholHar.pdf>

This report sets out the government's strategy for tackling the harms and costs of alcohol misuse in England. The aim of this strategy is to prevent any further increase in alcohol-related harm.

Scottish Executive (2001). Getting Our Priorities Right. Good Practice Guidance for working with children and families affected by substance misuse. Tackling Drugs in Scotland.

Title link <http://www.scotland.gov.uk/library5/education/gopr.pdf>

This guidance provides information on substance misuse in Scotland and its effect on parenting, guidelines on inter-agency working, and guidance on confidentiality and the sharing of information between services. This document contains general information, as well as policies specific to Scotland.

Department of Health (1999). Working together to safeguard children: a guide to inter-agency working to safeguard and promote the welfare of children. London, Department of Health.

Title link <http://www.dh.gov.uk/assetRoot/04/07/58/24/04075824.pdf>

This document sets out how all agencies and professionals should work together to promote children's welfare and protect them from abuse and neglect. It is addressed to those who work in the health and education services, the police, social services, the probation service, and others whose work brings them into contact with children and families. It is relevant to those working in the statutory, voluntary and independent sectors.

HMSO (1998). Tackling Drugs to Build a Better Britain. The Government's Ten-Year Strategy for Tackling Drugs Misuse.⁽²⁶⁾

Title link

<http://www.archive.official-documents.co.uk/document/cm39/3945/3945.htm>

The updated (2002) strategy is also now available

Title link <http://www.drugs.gov.uk/NationalStrategy>

Children Act 1989 (c.41)

Title link http://www.hmso.gov.uk/acts/acts1989/Ukpga_19890041_en_1.htm

Under the Children Act 1989, local authorities have a duty to provide services to children 'in need'. Joint working arrangements are required to be agreed, implemented and reviewed through the mechanism of the Area Child Protection Committees.

Policy Community Knowledge

This section summarises documents describing proposed structural models for the delivery of policy and improved practice. These documents are published by public policy research bodies, lobby groups, think tanks and related organisations.

Advisory Council on the Misuse of Drugs (2003). Hidden Harm.

Title link

<http://www.drugs.gov.uk/ReportsandPublications/NationalStrategy/105473380>

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This is the report of an inquiry into the effect of "parental problem drug use and its actual and potential effects on children". This includes both alcohol and drug misuse. The document also makes practice recommendations.

Hogg C. (1997). Drug using parents: policy guidelines for inter-agency working. Department of Health.

Title link

http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT_ID=4006443&chk=PUKUdF

This report seeks to provide guidance and advice to people working with drug using parents. It focuses on policy and covers a range of services including drug services, maternity services and children's services. The importance of both access to services and interagency working is stressed. (Only available in hard copy).

National Children's Bureau (2003-). Children of Drug-Misusing Parents: Developing Good Practice in Assessment, Decision-making and Placement.

Title link http://www.ncb.org.uk/projects/project_detail.asp?ProjectNo=262

This is an ongoing project that aims to enhance social work decision-making and planning with families where parents/carers are drug misusers, in order to improve outcomes for children. It focuses on all stages of the process from assessment and decision-making to permanency planning. The lessons from the project will be made available to practitioners and social care trainers.

Social Care Institute for Excellence (2003). Families that have alcohol and mental health problems: a template for partnership working. SCIE Resource Guides No.1.

Title link <http://www.scie.org.uk/publications/resourceguides/rg01.pdf>

This report describes how to deliver high quality co-ordinated services to families where children live with parents who misuse alcohol or have mental health problems, in accordance with government policy.

The National Treatment Agency for Substance Misuse (2002). Models of care for the treatment of drug misusers.

Title link http://www.nta.nhs.uk/publications/mocpart2/chapter3_5.htm

This document offers information on the epidemiology and treatment of parental substance misuse within the current policy framework. See chapter 3 section 5.

National Society for the Prevention of Cruelty to Children (2003). Evaluation of the Pilot. Family Alcohol Service (FAS).

Title link <http://www.nspcc.org.uk/inform/downloads/familyalcoholservice.pdf>

This is a report evaluating the provision of a pilot family alcohol service in Camden and Islington.

The research literature also suggests services should be coordinated, integrated ⁽²⁷⁾ and interdisciplinary ^(13,28). Effective risk assessment and screening models ^(29,30), service evaluation ⁽²⁷⁾ and valid and reliable measures, ⁽¹²⁾ all need to be developed and applied.

Practitioner Knowledge

This section describes studies carried out by health and social care practitioners, documents relating their experiences regarding the topic, and resources produced by local practitioner bodies to support their work.

Newcastle Area Child Protection Team (2002). Parental substance misuse and the effects on children.

Title link

<http://www.newcastle.gov.uk/ssacpc.nsf/a/effectsonchildren?opendocument>

This guidance was developed for practitioners working with children and families and/or adults who have care of children where substance misuse is a factor. The guidance aims to provide practitioners with information about the issue of substance misuse and how this may impact upon an individual's ability to care for a child. It is intended as a risk management tool for professionals, directing them in their practice when assessing if or how a parent or carer's substance misuse is affecting a child.

Sheffield Area Child Protection Committee (2001). Child Protection Procedure Manual.

Title link

<http://www.sheffield.gov.uk/safe--sound/protection-from-abuse/child-protection/sheffield-area-child-protection-committee/procedure-manual>

This guidance provides details on how to assess the effect of parental substance misuse on a child.

Option 2. All Wales Unit. Supporting Social Services

Title link <http://www.allwalesunit.gov.uk/INDEX.CFM?ARTICLEID=313>

Option 2 is an intensive intervention programme aimed at keeping together families in which the parents have a problem with substance misuse and there is a possibility that the children may be taken into care.

Brighton Oasis Project

Title link <http://www.dca.gov.uk/family/marsup/marsdir/marsorg62.htm>

See also the following article in Community Care, An Oasis for Young People

Title link

[http://www.communitycare.co.uk/articles/article.asp?liarticleid=34732&liSectionID=22&sKeys="an+oasis+for+young+people"&liParentID=26](http://www.communitycare.co.uk/articles/article.asp?liarticleid=34732&liSectionID=22&sKeys=)

This project supports young people whose mothers misuse drugs and alcohol.

Research Knowledge

This section summarises the best available research literature. The focus is on studies undertaken in the United Kingdom, so that their findings are as relevant as possible to the intended audience of the briefing.

The scope of the research

Most of the available research was conducted in the United States ⁽⁹⁾. The research literature focuses principally on mothers ^(9,16,21,24,31,32,33,34,50,51,54) and, to a lesser extent, parents generally ^(3,13,35,36,37); very little research has been conducted specifically into the parenting capacity of substance-misusing fathers ^(38,39,47,48). There is no specific research relating to black or minority ethnic communities ⁽⁴⁾. Two recent research reviews have assessed the available research evidence for both parental drug misuse ⁽³⁾ and parental problem drinking ⁽⁴⁾. This research has pointed out how studies often fail to evaluate the impact of substance misuse on parenting capacity relative to other aspects of disadvantage, such as poverty, unemployment or depression ^(3,4). It has also been pointed out that research into interventions in this field tends to be localised, based on small samples, and lacking in rigorous and independent evaluations of its methods and findings ⁽²²⁾.

Interventions

The research suggests that potentially successful services to support substance-misusing parents might include education in parenting ^(34,40,51), specific support for substance-misusing fathers, ^(3,38,39) and residential programmes for parents and children ^(7,32). The supporting role of the extended family has also been identified as a vital means of supporting both parents and children ^(3,20,31,41).

A number of UK and other non-US studies have concluded that it may be appropriate to provide support to parents who have a controlled drug/alcohol habit, but only if their children's welfare is not adversely affected by their substance misuse. One research study has suggested that treatment offered to mothers to stabilize their habit is a potentially effective means of protecting children from the consequences of parental drug misuse ⁽³¹⁾. A number of studies have investigated the effectiveness of the provision of training in parenting skills. Residential, family-based parent training and therapy was found by a UK project to be effective for older parents and single-drug users, but ineffective for younger parents and poly-drug users ⁽⁴²⁾. An Australian study found parent-training to be a potentially effective intervention for parents receiving methadone maintenance therapy ⁽³⁵⁾, and a US study of parent-skills training as part of a treatment programme for substance-abusing new mothers found that their knowledge and competence in child care, feeding, and child development was significantly improved ⁽⁵⁴⁾. A US home-based education and support programme for substance-abusing mothers of newborns and infants to the age of 18 months found that the intervention had no discernible effect; level of maternal drug misuse was found to be the single most significant factor in mother-child interaction ⁽²¹⁾. Much of the US research has concentrated on women's substance misuse whilst pregnant and assumes that total abstinence is essential if any treatment programme is to be successful ^(30,32,41,51). A recent review also recognised that more research is needed on interventions to help parents with substance-misuse issues ⁽⁵¹⁾.

Sharing of information

The issue of what information is passed on to whom has also been identified as an important issue for in any treatment programme. This is because health and social care staff have child protection responsibilities. Parents therefore fear that they might lose their children, and children fear they may have to leave their parents ^(4,22,33).

Factors affecting parenting capacity

It has also been pointed out that factors other than substance misuse may affect the ability of a parent to interact with and support their child, for example, poverty ^(14,21), unemployment and depression ^(41,43), single parenthood ^(31,43), and if the parents themselves experienced poor parenting ⁽¹³⁾, abuse or neglect during their own childhood ^(10,14,44).

User & Carer Knowledge

This section summarises the issues raised by service users and carers in relation to this topic, both as described by the literature and as defined through local consultation.

A number of qualitative studies have explored the views of parents and children around parental substance misuse. Mothers have often been found to have low self-esteem ^(44,45), a lack of self-care ⁽³⁶⁾ and to be in poverty ⁽⁴⁵⁾. However, being a mother was of vital importance to them ^(16,44) and led them to try to conceal drug-taking from their children, usually unsuccessfully ^(5,6,22,31). They were also aware of the safety risks to children ^(31,36) and the effects on children of any depression, irritability and aggression associated with substance misuse ^(22,36). Confidentiality in any treatment programme has also been identified as vital because most parents fear that they might lose their children ^(4,22,33). Children often knew more about their parents' misuse than parents realised ^(5,46), felt the stigma and shame of this misuse ⁽⁵⁾ and feared the possibility of being separated from their parents and taken into care ⁽²²⁾. A recent review of the literature on children's views about parental substance misuse reported the following findings ⁽⁴⁶⁾. Children worry about their parents much more than may be recognised, particularly if they fear for their parents' safety due to violence, self-harm or difficulty in coping. Children frequently described close relationships with parents. They also often expressed a desire to help their parents overcome problems. However, some children also felt torn between love for parents and a dislike of parents' behaviour and the restrictions this placed on their own lives. Children also said that being involved in finding solutions to problems helped them to cope. Other reviews and research have added to these findings. Children have said that there can be confusion over their role because they sometimes have to look after their parent rather than being looked after by them ^(52,55). They also say that they can feel secondary to their parents' addiction, but still feel great loyalty to them and understand that their parents still care ^(52,55). They also believed that having a strong relationship with a support worker was extremely helpful to them ⁽⁵⁵⁾.

Recent consultation with parents who are substance misusers, undertaken in the Trent region for this briefing, highlighted a number of additional issues. These parents considered the support provided by both voluntary and mainstream services, such as parent support networks (play groups, family centres) and Surestart, to be extremely valuable. They also acknowledged the effectiveness of residential rehabilitation services, but they wanted to access these services accompanied by their children and believed services felt that this was a problem. By contrast, research from the US found that parents often did not want their children to be involved in their residential treatment⁽⁴⁹⁾.

The parents in the consultation exercise also pointed out that they were often reluctant to use social services because they feared losing their children if child protection was considered to be an issue. The support of social services was also often withdrawn or not offered if there were no child protection concerns. The parents in the group were all aware of their parenting responsibilities and responded most favourably to a sensitive approach by services. Finally, they also highlighted the need for support services for the children themselves, and the importance of continuing support after a programme of treatment had been completed.

Useful Links

This section lists sources of information relevant to professionals who work within this field:

Adfam (Families, drugs and alcohol)

<http://www.adfam.org.uk/html/index.cfm?CFID=1292695&CFTOKEN=11695394>

This organisation offers information about substance misuse within families.

Alcohol Misuse

<http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/AlcoholMisuse/fs/en>

This site is produced by the Department of Health. It contains information on alcohol misuse and links to publications and relevant web sites

Alcohol Concern

<http://www.alcoholconcern.org.uk/>

This organisation provides information and encourages debate on the wide range of public policy issues concerning alcohol, including its effect on children and families.

Area Child Protection Committees in England & Wales

<http://www.dfes.gov.uk/acpc/>

This website provides information about Area Child Protection Committees (ACPCs) and the inter-agency work they undertake to safeguard children in their area from abuse and neglect.

Children and Families, Department for Education and Skills

<http://www.dfes.gov.uk/childrenandfamilies/>

This document provides links to a range of government and non-government bodies and organisations. This was formerly Quality Protects.

DrugScope

<http://www.drugscope.org.uk/home.asp>

This organisation has a comprehensive information and contact service.

Every Child Matters

<http://www.everychildmatters.gov.uk/>

Every Child Matters sets out child protection principles and a framework for improving outcomes for all children and their families.

FRANK campaign

<http://www.drugs.gov.uk/Campaign>

The campaign targets 11-21 year olds, and parents of 11-18 year olds and focuses on class A drugs.

Sheffield Drug Action Team

<http://www.sdat.org.uk/>

This team has produced a comprehensive list of relevant links under “Related Services” on the left hand side menu.

Substance Misuse

<http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/SubstanceMisuse/fs/en>

This site is produced by the Department of Health. It contains information on substance misuse and links to guidance, publications and relevant web sites.

Acknowledgements

Thank you to the experts and service users for their contributions to this briefing.

Reference List

1. **Department of Health, Department for Education and Employment, and Home Office** (2000). Framework for the Assessment of Children in Need and Their Families [online]
<http://www.dh.gov.uk/assetRoot/04/01/44/30/04014430.pdf> [Accessed 12 July 2005]

This framework aims to provide a systematic way for analysing, understanding and recording what is happening to children and young people within their families and the community.

2. **Advisory Council on the Misuse of Drugs** (2003). Hidden Harm [online]
http://www.drugs.gov.uk/ReportsandPublications/NationalStrategy/1054733801?batch_start=1 [Accessed 12 July 2005]

This is the report from an inquiry focusing on children in the UK with a parent, parents or other guardian whose drug use has serious negative consequences for themselves and those around them.

3. **Tunnard J.** (2002a). Parental Drug Misuse – A Review of Impact and Intervention Studies. Research in Practice [online]
<http://www.rip.org.uk/publications/documents/researchreviews/Parental%20Drug%20Abuse.asp> [Accessed 12 July 2005]

This review examines the available research about both the impact of problem drug use and interventions designed to reduce that impact across important aspects of children's lives.

4. **Tunnard J.** (2002b). Parental Problem Drinking and its Impact on Children. Research in Practice [online]
<http://www.rip.org.uk/publications/documents/researchreviews/Parentalproblem drinking.asp> [Accessed 12 July 2005]

This review of the available research addresses the definition and extent of parental problem drinking and its impact across important dimensions of children's lives.

5. **Barnard M., Barlow J.** (2003). Discovering Parental Drug Dependence: Silence and Disclosure. Children & Society, 17 (1), 45-56.

This is a qualitative UK study examining children's opinions of drug-misusing parents.

6. **Hogan D.M.** (2003). Parenting beliefs and practices of opiate-addicted parents: concealment and taboo. European Addiction Research, 9 (3), 113-119.

This is a qualitative Irish study of the effect that parents' consider their substance misuse has on their children and what they try to do about it. Abstract available

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=12837989

7. **Velleman R.** (2001). Working with substance misusing parents as part of court proceedings. Representing Children, 14, 36-48.

This study examines effective means of working with parents who misuse drugs and alcohol in relation to judicial proceedings.

8. **Kearney P.** (2003). Alcohol, Drug and Mental Health Problems: Working with Families. London, Social Care Institute of Excellence.

This report is based on a project that looked at the interfaces within and between services for families where a parent has persistent mental health, alcohol or drug problems.

9. **Barnard M., McKeganey N.** (2004). The impact of parental problem drug use on children: what is the problem and what can be done to help. *Addiction*, 99 (5), 552-559.

This is a review of the research literature on interventions for parental drug use and its consequences. Abstract available http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=15078229

10. **Sloan M.** (1998). Substance Misuse and Child Maltreatment. Norwich, University of East Anglia.

This monograph explores the potential links between parental substance misuse and the maltreatment of children.

11. **Forrester D.** (2000). Parental Substance Misuse and Child Protection in a British Sample: A Survey of Children on the Child Protection Register in an Inner London District Office. *Child Abuse Review*, 9 (4), 235-246.

This UK study examines data on the possible association between parental substance misuse and child neglect.

12. **Kumpfer K.L.** (1999). Outcome measures of interventions in the study of children of substance-abusing parents. *Pediatrics*, 103 (S5), 1128-1144.

This US paper focuses on general and unique measurement methods and instrument problems in prevention interventions for children of substance-abusing parents. Abstract available http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=10224200

13. **Keen J., Alison L.H.** (2001). Drug misusing parents: key points for health professionals. *Archives of Disease in Childhood*, 85 (4), 296-299.

This is a UK review of the evidence concerning the effects of parental addiction on children, and the circumstances requiring intervention by health professionals.

14. **Dunn M.G., Tarter R.E., Mezzich A.C., Vanyukov M., Kirisci L., Kirillova G.** (2002). Origins and consequences of child neglect in

substance abuse families. *Clinical Psychology Review*, 22 (7), 1063-1090.

This is a review of the literature on the prevalence, origins, and consequences of neglectful parenting. Abstract available http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=12238246

15. **Christensen H.B., Bilenberg N.** (2000). Behavior and emotional problems in children of alcoholic mothers and fathers. *European Child and Adolescent Psychiatry*, 9 (3), 219-226.

This is a Danish study evaluating the impact of parental alcohol misuse on children's behaviour.

16. **Baker P.L.** (1999). "I Take Care of my Kids": Mothering Practices of Substance-Abusing Women. *Gender & society*, 13 (3), 347-363.

This is a US qualitative study of 17 substance-abusing women's perceptions of their mothering practices in the context of a residential substance-abuse treatment program.

17. **Johnson A.L., Morrow C.E., Accornero V.H., Xue L., Anthony J.C., Bandstra E.S.** (2002). Maternal cocaine use: Estimated effects on mother-child play interactions in the preschool period. *Developmental and Behavioral Pediatrics*, 23 (4), 191-202.

This US study aims to evaluate the quality of parent-child interactions in preschool-aged children who are exposed prenatally to cocaine.

Abstract available

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=12177564

18. **Nair P., Black M.M., Schuler M., Keane V., Snow L., Rigney B.A. et al** (1997). Risk factors for disruption in primary caregiving among infants of substance abusing women. *Child Abuse & Neglect*, 21 (11), 1039-1051.

This US study examines the impact of mothers' substance abuse on their role as the primary caregiver to newborn children. Abstract available

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=9422825

19. **Suchman N.E., Luthar S.S.** (2000). Maternal addiction, child maladjustment and socio-demographic risks: implications for parenting behaviors. *Addiction*, 95 (9), 1417-1428.

This US study examined the relationship between specific parenting problems and maternal addiction. Abstract available

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=11048359

20. **Vimpani G., Spooner C.** (2003). Minimizing substance misuse by strategies to strengthen families. *Drug and Alcohol Review*, 22 (3), 251-254.

This is an editorial reviewing the literature on strategies to counter substance misuse in families.

21. **Schuler M.E., Nair P., Black M.M.** (2002). Ongoing maternal drug use, parenting attitudes, and a home intervention: effects on mother-child interaction at 18 months. *Journal of Developmental & Behavioral Pediatrics*, 23 (2), 87-94.

This US prospective study examines the effects on mother-child interaction of a home-based intervention and continuing misuse of drugs by the mother. Abstract available
http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=11943970

22. **McKeganey N., Barnard M., McIntosh J.** (2002). Paying the price for their parents' addiction: meeting the needs of the children of drug-using parents. *Drugs: education, prevention and policy*, 9 (3), 233-246.

This is a qualitative UK study of the impact of parental drug use on children, and considers the possible responses that may be needed to reduce the risks being faced by the children of drug-using parents.

23. **Howland Thompson S.** (1998). Working with Children of Substance-Abusing Parents. *Young Children*, 53 (1), 34-37.

This article explains the effect a parent's substance abuse has on children and how early child professionals can help the children.

24. **Connors N.A., Bradley R.H., Whiteside M.L., Crone C.C.** (2001). A comprehensive substance abuse treatment program for women and their children: An initial evaluation. *Journal of Substance Abuse Treatment*, 21 (2), 67-75.

This is a US study examining the effectiveness of a residential substance abuse treatment programme.

25. **Coyer S.M.** (2001). Mothers recovering from cocaine addiction: factors affecting parenting skills. *Journal of Obstetric, Gynecologic & Neonatal Nursing*, 30 (1), 71-79.

This is a US study that aimed to identify factors that may influence parenting by mothers who are recovering from cocaine addiction. Abstract available

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=11277164

26. **Department of Health** (1998). Tackling drugs to build a better Britain. This document reflects Government policy for tackling drug dependence.

The aim of this strategy is to prevent any further increase in alcohol-related harms in England.

27. **Carter B.** (2002). An evaluation of a children's drug therapy service. *Journal of Substance Use*, 7 (4), 198-206.

This is a small-scale evaluation of an initiative to try to support the children of parents who are substance users.

28. **Dube S.R., Anda R.F., Felitti V.J., Croft J.B., Edwards V.J., Giles W.H.** (2001). Growing up with parental alcohol abuse: exposure to childhood abuse, neglect, and household dysfunction. *Child Abuse & Neglect*, 25 (12), 1627-1640.

This US study examines the association between parental alcohol abuse (mother only, father only, or both parents) and forms of childhood abuse and neglect. Abstract available http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=11814159

29. **Dore M.M., Doris J.M., Wright P.** (1995). Identifying substance abuse in maltreating families: a child welfare challenge. *Child Abuse & Neglect*, 19 (5), 531-543.

This US review explores standardised methods developed for screening for substance abuse among various populations, and suggest ways of adapting these screening devices for families reported for child maltreatment. Abstract available http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=7664134

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