Everyone Has a Story
Component 2
What Practitioners tell us

Survey Responses and Analysis

“There is not enough shared understanding between children and adult’s services. There needs to be better information sharing between different services.”

Survey Respondent
Often funders feel we should exit when parents are stable, however that is often when new focusses of work start and these are critical moments for positive futures for the whole family.

This is component 2 and forms part of the Everyone Has a Story action learning project.

All resources are available at www.ltsbfoundationforscotland.org.uk

Summary

Component 1  - What we hear from the stories and experiences - action learning set practitioners

Component 2 - What practitioners tell us - survey respondents

Component 3  - How young people could share their story - young people

Component 4  - What the evidence tells us - research

Appendices

Contents

Summary 4
Key Messages 4
Background 5
What We Did 6
What We Learnt 7
1. Living Arrangements 7
1a. Positive experiences - Living arrangements 8
1b. Negative experiences - Living arrangements 8
2. Supporting a child or young person 9
3. Understanding Recovery 10
3a. Recovery Status of Parents 11
3b. Child or Young Person’s Understanding of Recovery 13
4. Parenting and Recovery 16
5. The impact of recovery on children and young people 19
5a. Positive impact of recovery 21
6. Meeting the needs of children and young people affected by recovery 23
   Greater emphasis on partnership working and whole family approaches 23
   Improving our understanding of recovery and its impact 24
Conclusions 25
Reference List 26
Summary

In spring 2015 the Partnership Drugs Initiative (PDI) conducted a survey with practitioners from across Scotland; 207 responses were received. Responses were predominantly from the central belt and from practitioners working directly with children and young people. Although 25% of responses were from practitioners working directly with parents. From the responses it was apparent many of the children and young people supported were not living with their parents, particularly in the younger age group (0 –12).

The actual number of children and young people whose parents are in recovery in Scotland is unknown. In the survey, the practitioners were asked about children and young people’s awareness of their parent’s recovery status. Nearly all were aware of problematic use of drug and alcohol, but 62% of practitioners felt children and young people had limited understanding of recovery.

When asked about their own knowledge of parental drug or alcohol status practitioners generally had a good understanding, although it was concerning to note that 20% of practitioners were unaware of the current parental status. Change is the main factor in an individual’s recovery journey and these changes are important factors in a child or young person’s life. Observations from the practitioners noted many of the physical changes in the parent/home as well as parents being more available. These changes can still impact on a child/young person’s own needs and well-being, with a significant proportion of young people across all age groups concerned about relapse.

Key Messages:

• The themes and messages coming from what practitioners tell us are the same as from children and young people themselves. However, there is at times disconnection between what children and young people want and what practitioners feel is needed.

• There is a wide diversity in feelings and a need to recognise that the changes for children and young people are as important as they are for parents in recovery. Changes in a parent’s life can have a long-lasting impact.

• Better understanding of recovery for all, sensitive communication, improved integrated working and whole family approaches are what practitioners tell us is needed.
Background

This component, 'What Practitioners tell us', provides insight into the views of practitioners from a range of disciplines but primarily working with children and young people whose parents have a problem with drugs or alcohol or are in the early stages of recovery. The survey analysis aims to help provide an increased understanding of support and gather practitioner’s views of the needs of the child or young person that could help create a better understanding of the support needs for children and young people whose parents are in recovery from problematic drug and alcohol use.

The Scottish Government currently estimates that around 40,000-60,000 children in Scotland may be affected by parental problematic drug use and that, of these, 10,000 -20,000 may be living with that parent. Analysis from the Scottish Health Survey (SHeS) 2008 –2010 give the current estimates that between 36,000 and 51,000 children and young people are living with parents (or guardians) whose alcohol use is potentially problematic. There are no estimations of the number of children and young people whose parents are in early stages or recovery, although from the Scottish Drugs Misuse Report (2010) we are aware that at that time 10,000 adults received treatment who were known to have dependent children.
What We Did

The Practitioner Story takes the form of an online survey. The aim was to:

• explore current practice across Scotland.

• identify practitioner views of the impact parental recovery from problematic drug or alcohol use has on a child or young person.

• highlight current methods of support for children and young people affected by parental recovery from substance issues.

The survey was open to practitioners working across Scotland. The majority of responses were from the central belt (45% Glasgow and the west of Scotland, 23% Edinburgh and Lothians). 79% of these were practitioners working in children or family services, 25% were working in adult services and the remainder responded that they worked across both adult and children’s services.

The survey was circulated to practitioners with a specific remit of working with children and young people or with adults who are affected by problematic use of drugs and/or alcohol. The views from the survey’s analysis have been interpreted to reflect this group. We appreciate that there may be wider views from other practitioners, including health visitors, teachers and social work staff.

The data collated through this survey did not capture the wider contextual factors that may shape a child or young person’s experiences or the complexity of family relationships. Although there is an awareness of the complexity of family relationships and is acknowledged as a gap in the evidence within component 4 of this overall resource. Greater depth of investigation is needed to research young people’s experience of change, living arrangements and the implications this has on them.
What We Learnt

1. Living Arrangements

This survey sought to shed light on the diverse living arrangements of children affected by parental problematic drug or alcohol use and recovery as well exploring the impact this may have on children’s well-being. Practitioners were asked who the primary carers of the children and young people they being supported were.

The analysis revealed that practitioners stated:

- 33% of practitioners stated children and young people aged between 0-8 years old were looked after by local authorities.
- 40% of children aged between 9-12 years old were looked after by local authorities.
- 36% of responses stated that children and young people remained in the care of their parents.

Graph 1a: Living Arrangements of Children and Young People

The social work statistics for 2014 tell us that 39% of child protection concerns were in relation to parental drug and alcohol problems.

The survey data did not explore the relationship between a child or young person and their carer; however, we undertook an analysis of the experiences shared by children and young people with practitioners and correlated this against living arrangements. This provided us with some interesting perspectives of both protective and risk factors some of which are detailed in section 1a and 1b.

The survey did not specifically ask details of length of engagement, or the amount of changes in the living arrangements both of which could have implications to the positive and negative experiences. Nonetheless, these findings are an indication of the changes children and young people may experience during their parent’s recovery from problem drug or alcohol use.

1a. Positive experiences – Living arrangements

There were several key themes emerging from practitioner responses. Firstly, the findings demonstrated that 46% of practitioners had observed an improved parent and child relationship for children and young people who remain living with their parents during their recovery from problematic drug or alcohol use. In addition, 33% of practitioners claimed children or young people living with their parent during recovery may experience a decrease in care responsibilities during their parent’s recovery.

Furthermore, 32% of practitioners said self-esteem increased for children and young people living in formal kinship care and according to 33% of practitioners, formal kinship care allowed children to feel safer in the home. This resonates with the wider evidence that suggests kinship care arrangements can offer a child or young person stability and positive family relationships (See Aldgate and McIntosh, 2006).

These important indicators of well-being further emphasise Getting It Right For Every Child (GIRFEC, 2008) and the GOPR (2013: 80) strategies that assert the importance of understanding the home environment and availability of positive nurturing relationships.

1b. Negative experiences – Living arrangements

The analysis also focused on the ways different living arrangements may negatively impact on children and young people. The survey findings are a good reflection of the existing research that suggest recovery from problematic substance use may prompt difficult changes for a family (See: Kroll and Taylor, 2003; Barnard, 2007: 101; Bancroft et al, 2004: 10). A total of 43% of practitioners said adjusting to new routines and lifestyles can be difficult for children and young people living with their parents during parental recovery.

Adapting to new lifestyles and routines for children living in kinship care arrangements was also cited by 24% of practitioners as a negative experience. A finding that supports studies of children’s
experiences of kinship care, e.g. Aldgate and McIntosh found the transition into a new family home came with the challenge of adapting to new dynamics and boundaries (Aldgate and McIntosh, 2006).

Exploring these experiences of adjustment will be an important consideration in understanding the support needs of children and young people whose parents are in recovery. The findings resonate well with academic evidence that suggests negative emotions and anxiety may intensify for children and young people during recovery.

2. Supporting a child or young person

This section looks at the different methods and approaches used by practitioners working in children and young people's services. Graph 2a illustrates the different types of activities and methods according to the age range of children and young people supported. There was a number of responses that specifically mentioned therapeutic support for young people both in a group and 1:1 settings. Family support was also indicated as a core activity for children and young people including the reference of evidence based programmes. The findings demonstrate that services working with older young people focus on individual centred methods of engagement, whereas the practitioners working with younger children appeared to use more group or educational activities. This highlights the need that there is no one method that fits all and good evidence supports the benefits of child-centred approaches.
3. Understanding Recovery

Throughout the action learning set there has still been a difficulty in defining and conceptualising recovery. For the purposes of the overall project we have defined recovery as *“A person in recovery is one who is progressing towards a substance free life and looking to make positive changes in all areas of their life; family, health, work and community.”* In reality from the discussions with the action learning set practitioners involved in component one of this work this will often mean that parents are known to services, will be engaging with some form of support, and making attempts to change things in their life.
3a. Recovery Status of Parents

Practitioners responding were asked to identify the stage of recovery from drug or alcohol use for the parents of the young people they support. The findings are illustrated in graph 3a.

It is worth noting the level of responses relating to ‘unsure of parents recovery status’, as this could have implications for the well-being and safety of the child and resonates with some of the open-ended responses.

20% of practitioners claimed they were unaware of parental recovery status.

This is an important finding and raises questions around practitioner knowledge of the well-being and support needs for children and young people. It is also highlights if there is a desire for effective family support then an understanding of the child’s family background and needs are imperative to offer the most appropriate support to children and their parents.

Better joined-up working between children and adult services

This is an illustration of the challenges practitioners working with children and young people may face when trying to understand the parent’s changing lifestyle, particularly around changes in drug or alcohol use. A common theme throughout the responses was the need for improved communication between adult and children/young people’s services as well as a heightened emphasis on partnership working. This resonates well with Scottish Government tools and good practices outlined in GIRFEC and GOPR that prioritise child at the centre, integrated services and whole family approaches. It does raise further questions in relation to the effectiveness of the dissemination of the practice guidance given the responses from practitioners.

There is not enough shared understanding between children and adult’s services. There needs to be better information sharing between different services.
Graph 3a: Recovery Status for Parents

Parents and children are often treated as a separate entity.
3b. Child or Young Person’s Understanding of Recovery

In the survey, we asked practitioners to describe what they perceive to be a child’s understanding of recovery. Graph 3b shows the data from age correlated with understandings of recovery.

The findings illustrated that 62% practitioners believed children had a ‘limited understanding of recovery’.

Important questions worthy of further exploration are:

• To what extent should we be aiming to enhance knowledge of recovery of problematic drug or alcohol use?

• To what extent are we fully exploring and discussing with young people the changes in home, parents and relationships that could assist with an improved understanding of recovery?

The qualitative responses illustrated that practitioners believe there is value in discussing recovery with children and young people. These accounts suggest some practitioners believe discussions around parental recovery can facilitate greater inclusion in the recovery process for children and young people.

Further exploration is needed here to identify the potential benefits or risks of enhancing a child or young person’s knowledge of parental recovery from problematic drug or alcohol.
Graph 3b. Child or Young Person's Understanding of Recovery

The evidence from the children young people’s own views through the story analysis in component one of Everyone Has a Story would suggest information is not always what children and young people want. This would indicate a disconnection between practitioners and young people. The most important consideration from the views of children and young people is that they are listened to.
As part of the survey practitioners were also asked how children and young people describe the changes they may observe in their parents during recovery from problematic drug or alcohol use. These reflections are useful as many of the responses from practitioners have been described from the child or young person’s point of view. Key themes include a parent’s physical appearance and increased availability are frequently mentioned by children and young people.

It is interesting to observe that both these accounts demonstrate a child’s desire for routine and normalcy in their family home. For instance, making reference to school and dinner times. Such accounts are important in bringing the findings around the impact of recovery on children and young people’s feelings to life. These are similar feelings as the stories shared in component one.

If children are old enough, I feel that having the parent explain their recovery and goals to their children and the reasons for the change it will help child to understand the process. The parents need to know the effects of alcohol by listening to their children’s criticism and words of encouragement. It should not be a taboo subject.

In my experience, children and young people aren’t given enough information about any stage of a parent’s addiction or recovery to be fully aware of what is happening in their home. In my opinion, it would help children to feel more confident in this process if they had the information, obviously given to them at an appropriate age and manner.
Mum looks better. She tells me off now. I have to go to school and mum does normal things like cooking. Dad is more interested in what I am doing at school. There is more money to do nice things as a family.

The changes are often described in relation to the young person: 'he (dad) can take care of us and make our dinner now' or 'mum isn't out or sleeping all the time so she can take...

4. Parenting and Recovery

Given that the recovery needs for children and young people sit in the context of the family, it was important that the survey could gain a perspective from practitioners working directly with the parents. The survey has not been designed to give an in-depth insight ensuring the emphasis remains on the child and young person’s perspective.

The findings were able to shed light on the way experiences of parenting may change during recovery, but recognises that there is an opportunity for further exploration of this. The survey asked if parents understood the impact their substance use may have on their children.

Graph 4a illustrates that 70% of practitioner’s did not believe parents had an understanding of the ways their problematic drug and alcohol use impacted on their children. This is worthy of note given that many of the practitioners working with the children stated the children knew of problematic drug or alcohol use within the family offering an insight into the disconnect between children and young people and parents awareness.

Do you think parents understand the impact of their substance use on their child?

- 70% No
- 22% Other
- 8% Yes

Graph 4a - Parental Awareness of Impact
It is well documented that parental problematic drug and alcohol use can severely interfere with normal family functioning, and a parent’s ability to meet the emotional and physical needs of their child (Howe, 2005; Thomas, 2011; ChildLine, 2009) and reflected in the survey analysis.

It is also worth considering the other factors that may hinder parenting ability during recovery, such as economic deprivation and social isolation (Bancroft et al, 2004; Templeton et al, 2006).

Several practitioners used the ‘other’ comment box to offer further reflections on the views of parents.

“Some parents worry about their children’s welfare whilst still not fully understanding the ways their substance use may cause their child harm.”

“Parents in recovery often lack parenting skills and the parenting they can offer is often very basic – keeping the kids fed and taking them back and forward to school is about all they can manage.”

“The needs of the child beyond the basic don’t seem to occur to these parents – in particular, the children don’t seem to get taken on any outings or activities and almost never go on a holiday.”
Graph 4b displays the ways practitioners report how experiences of parenting change during recovery. The results show that recovery can both benefit as well as aggravate parenting ability and the relationships with children. According to practitioners supporting parents in recovery, 15% of practitioners stated parents feel guilty and 12% of practitioners reported parents can feel unsure of their role and expectations. Furthermore, 14% of practitioners responded that parents can have difficulty enforcing new rules and boundaries. Many of the feelings mirrored here by practitioners are consistent with the reflections shared in other aspects of Everyone Has a Story.

Practitioners also responded to the positive consequences of recovery: 12% claimed recovery allowed parents to regain control in the home and 13% that the relationship with their child had improved.
It will be important to understand what broader contextual factors, such as financial security or access to support services, may allow a parent to be positively affected by recovery and thus better equipped to meet the needs of their child.

The analysis suggests both a parent and a child need to be supported to manage and cope with the changes brought by recovery from problematic drug or alcohol use. These findings are therefore helpful in informing a whole family support model. Emerging from the findings is that the individual needs of each family member, and specifically the child or young person, will differ, this should be recognised as part of the whole family approach.

5. The impact of recovery on children and young people

The overall aim of this action learning project is to understand the recovery needs of children and young people. This survey aimed to explore the ways children and young people can be both positively and negatively affected by their parent’s recovery from problematic drug and alcohol use.

Graph 5a – Indicators of Impact

It should be noted there was a lower level of responses for practitioners working with 18-24-year-olds.
Overall 21% of practitioner’s recognised ‘difficulty adapting to new routines and lifestyles’. Similarly ‘increased anxiety’ is seen across all age groups. Graph 5a also reveals the ways children’s worries recovery may be linked to their age, most prominent in the responses to the older age, with 40% of practitioners responding that increased anxiety was a key indicator for 18 – 24 year olds.

The findings here also illustrate that fear of relapse as a key concern across all age groups of children and young people, but particularly highest in the youngest age group. This is reiterated in the qualitative responses shared by practitioners.

All of the collective findings show fragility of the recovery process for children and young people.

Further exploration is needed to the extent trust between a child and their parent can be restored amongst the awareness of often complex living and family relationships. This can have a long-term impact on children, young people and parents. This means that there needs to more emphasis on support that is paced at the needs of child or young person beyond parent’s initial positive steps in recovery.

‘I have had experience of children wishing their parents would go back to using as that is familiar for them and the stress of a possibility of relapse causes the young person increased anxiety.’
5a. Positive impact of recovery

The survey also aimed to look at where children and young people have shown more positive experiences (see Graph 5b). The findings show the different ways children and young people may identify positive changes in their parent’s lifestyle, depending on the age of the child.

Graph 5b - Positive Indicators of Change

The analysis revealed that overall the main positive changes were around the parent-child relationship and increased self-esteem as well as:

- 42% of practitioner responded that in the ages 9 - 12 children and young people felt safer.
- 41% of practitioners stated that children aged 0 - 8 had improved behaviour.

It is also worth noting that while there was still a lower level of responses for the older age group and the feeling of improved self-esteem was higher than in other age groups.
The comments would suggest that many practitioners believe that positive changes in recovery could facilitate a safer more stable home life and family relationships for a young person.

It needs to be acknowledged that the story analysis in component one does highlight the concerns over relapse and often a loss of hope for older young people. There is therefore a need to emphasise that listening to the needs of these older young people even when there is a positive change in parents has to still be a vital element of a support package to ensure feelings of loss of hope or fear don't go unseen.

Young people I've worked with have talked of finding their parents more responsive to their needs, both emotional and physical. They have also talked about how there is less chaos around in their lives and more stability.

Children report feeling happier and more secure, less anxious and worried about their parent. There is also more established boundaries ensuring better school attendance, less chaos around in their lives and more stability.
6. Meeting the needs of children and young people affected by recovery

Finally, practitioners working in both children and adult services were asked to consider what could be developed or improved to better meet the needs of children and young people affected by parental recovery from problematic drug or alcohol use. From the responses there were several prominent themes emerging.

Greater emphasis on partnership working and whole family approaches

“Children and young people should have support from all agencies and if possible work should be done closely with parents. I think more group work and services that treat parents and children’s issues together – a family approach to substance use.”

“Support that improves communication within a family. The issues should be addressed collectively with the appropriate family members.”

“Genuine cross service collaboration. All partners should understand the complexities for both children and parents.”

“Whole family approaches rather than treating the parent as a single entity.”

Practitioners expressed the need for robust services that consider the needs of parents and children, through:

• whole family support methods and
• integrated adult and child services.

Further responses also suggested there are barriers that often prevent the effective communication between adult and child services, such as data protection concerns and different approaches to support.

Findings from this survey as previously referred to would suggest that more understanding of what a whole family approach looks like is required to ensure children and young people’s voices are heard.
Improving our understanding of recovery and its impact

“Within our establishment we try and educate the young people on the issues of alcohol and drug use. We tend to focus on the possible reasons parents may become involved in substance misuse and how it can affect their behaviour.”

“Children have more say in what they want and help to understand recovery. It should be made clear to parents the expectations of recovery in order to improve their children’s outcomes.”

“Increasing young people's awareness on the changes their parent may experience whilst recovering and the impact this may have for them. Discuss with young people what their expectations and fears are.”

“There needs to be a better appreciation of how recovery can adversely affect the child, young person and their parent.”

“Greater awareness among service users and workers of the impact this issue has on a child’s ability to succeed in life. A recovering parent is just as much of a worry for young people and that change no matter how positive it might seem, it can still be difficult to manage.”

Practitioners often discussed enhancing young people’s knowledge of recovery as a means of providing an avenue to voice their concerns and a mechanism to cope with the emotions or lifestyle changes recovery may bring about. However more active listening to the needs of children and young people will help to identify what their needs are.

More information may not necessarily be the answer and awareness and listening to the needs of children and young people is critical to ensure that any information on recovery is what they want or find useful in understanding the complexity of change.

Improved understanding of recovery experiences and impact was also discussed in the context of services. An increased awareness of the ways parental recovery can impact on families was described by practitioners as an important step towards better meeting the needs of children and young people.

It is important to connect with other parts of this resource that offer practical suggestions and support that will assist in hearing and reflecting on the stories shared by children and young people.
Conclusions

This survey analysis forms part of the PDI action learning project, Everyone Has a Story. The findings from this survey are an illustration of the experiences shared by practitioners. It reflects on the challenges as well as the possible positive outcomes of supporting children and young people affected by parental problematic substance use and recovery.

It offers a further illustration of the diverse living arrangements of children and young people affected by parental problematic drug and alcohol use and recovery. The practitioner responses described changes in living arrangements that can elicit both positive and negative experience for children and young people. These findings resonate well with existing studies and social policy that emphasise the importance of a stable home environment in facilitating positive child well-being and outcomes.

This project could be supported by further exploration on the complexity of family relationships and improved understanding of the views from children and young people to return home during parental recovery and the extent to which family relationships can be reconciled.

In addition to this, the findings reinforce assumptions that recovery may be an unfamiliar concept to children and young people. Several practitioner responses suggested recovery conversations can empower young people to feel included in their parent’s recovery journey. However, analysis of the stories from young people themselves suggest that information is not necessarily what children and young people want. If more or better information is what some young people desire more exploration of the methods and approaches to facilitate these discussions with young people is needed.

Finally, these findings reveal the multiple factors that are critical when supporting a child or young person. It is evident from the findings, that parental recovery can aid household stability and repair family relationships. However, we learn that recovery alone may not be enough to appease a child’s anxieties or restore trust and well-being. One size does not fit all; children and young people have had many traumatic experiences and changes in their lives and that recovery is yet another change. Thus, it is equally important to recognise the ongoing support needs of children, young people and their families.
Reference List


Childline Annual Review: Always there when I need you: What’s affected children in April 2014 - March 2015, NSPCC,


Scottish Government (2013) Getting our Priorities Right: Updated good practice guidance for all agencies and practitioners working with children, young people and families affected by problematic alcohol and/or drug use, Edinburgh


“There needs to be a better appreciation of how recovery can adversely affect the child, young person and their parent.”

Survey Respondent
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