

Practice Guidance

ASSESSING THE IMPACT OF PARENTS/CARERS WHO ARE INVOLVED IN THE MISUSE OF ALCOHOL AND/OR DRUGS

1. INTRODUCTION

- 1.1 It is important not to generalise or make assumptions about the impact on a child/young person of parental alcohol and/or drug misuse.
- 1.2 Alcohol and Drug misuse can affect a parent's practical caring skills (perceptions, attention to basic physical needs, control of emotion, judgement and separation from the child and attachment and bonding)
- 1.3 The effects of parental alcohol and/or drug misuse on children and young people are complex and require thorough assessment.

1. DEFINITIONS

1.1 Alcohol Misuse:

Any person whose misuse of alcohol as a primary substance has a harmful effect on their own or another's health and well being, including physical, psychosocial impact. This includes the individual, their unborn child, their children, family and wider community.

Risk categories of drinking:

World Health Organisation Term	Dept Health Term
Harmful	Higher Risk
Harzardous	Increasing Risk
Safe/ sensible	Lower Risk

1.2 Drug Misuse:

Is defined as the misuse of illegal substances, prescribed medication and/or over the counter medicines, which results in an individual experiencing social, psychological, physical and/or legal difficulties relating to intoxication and/or regular excessive consumption and/or dependence.

2. AGENCIES RESPONSIBILITIES

- 2.1 It is the responsibility of member agencies of the Peterborough Safeguarding Children Board to ensure that all agencies supporting parents/carers who are involved in the misuse of alcohol and/or drugs are aware of the local Core Inter-Agency Safeguarding Children Procedures and make a commitment to following the procedures.
- 2.2 In addition to 2.1, providers of services to adults and children should have a Safeguarding Children policy and a commitment to its implementation.
- 2.3 Agencies should adhere to their confidentiality policies in supporting parents/carers, whilst acknowledging that the welfare of the child remains paramount.

3. RISK FACTORS AND ASSESSMENT

- 3.1 Where an agency is supporting parents/carers who are involved in the misuse of alcohol and/or drugs, an assessment of the child/young person's vulnerability should be undertaken.
- 3.2 There should be ongoing recording, monitoring, assessment and review of the child/young person's vulnerability in accordance with the agency's procedures.
- 3.3 The identification of significant harm or the risk of significant harm via ongoing recording, monitoring, assessment and review, may result in a referral being made to Specialist Services.

4. REFERRAL

Identification that a parent is misusing alcohol and or drugs should lead to a referral and engagement into treatment services as a priority

- 4.1 Following the identification of significant harm or risk of significant harm to a child/young person, the procedures for that agency should be followed when making a referral to Children's Social Care Services.
- 4.2 All member agencies of the Peterborough Safeguarding Children Board have a responsibility to share appropriate and relevant information where there are concerns about the risk of significant harm to a child/young person.
- 4.3 Where a child/young person is subject to a child protection plan, all agencies involved in supporting the child/young person and/or their parents/carers have a continuing responsibility to work together to implement the plan.

APPENDIX 1. Assessing Impact of Parental/Carer's alcohol or drug misuse.

Aide Memoire

Focus on the following risk areas to identify harms and vulnerability factors for children:

1. Alcohol and drug factors
2. Individual/ Parental Risk factors
3. Situational/ Environmental Risk Factors
4. Impact on children

Indicators Chart

Impact	0-4years	5-9years	10-14	15+
Health Impact				
Education and Cognitive ability				
Relationships and identity				
Emotional and behavioural development				

CHILDS DEVELOPMENTAL NEEDS

1. Effect of parental exposure to drugs and impact of child's health before and after birth.
2. Subsequent special health needs as a result of the above.
3. Access or exposure to drugs/alcohol and related equipment.
4. Effect on school attendance and ability to learn?
5. Impact on quality of attachment and feeling valued.
6. Experience of loss/bereavement or separation.
7. Child's attitude to drug use and associated lifestyle/behaviour.
8. Sibling relationships and exposure to sibling drug use.
9. Are the children exposed to stigma, social exclusion and secrecy that may inhibit them from forming friendships and seeking social support?
10. Are the children engaged in age appropriate activities?
11. Are there indications that children are taking on a parental role? (Caring for siblings, excessive household responsibility or anxiety about parents?)
12. Are the child's emotional needs being adequately and consistently met?

PARENTING CAPACITY

Safety/ Risk Categories	Comments	Signs of Safety	Low Risk	Medium Risk	High Risk
Is there an alcohol/drug free parent/carer, supportive partner or relative?					
The Role of drugs in parental relationship and previous experience of parenting.					
Does the person move between alcohol and drug use?					
What is the nature and pattern of use and impact on parental health, behaviour and mood?					
If there is drug use, does it also involve the use of alcohol and/or other medications?					
Are levels of childcare different when a parent/carer is using alcohol and/or drugs?					
Consistency and reliability – Prioritise parenting and childcare over and above drug use.					
Is there any evidence of co-existence, of mental health problems and/or domestic violence alongside the alcohol or drug use?					
What is the parents physical and emotional availability to the child and is this impaired by their use of substances or are they being adequately and consistently met?					
Does the parent demonstrate strategies to protect the child from the impact of the drug/alcohol and its negative personal/social consequences?					
Is there adequate supervision of the children? Are they left alone whilst parents/carers secure their drugs or are children being taken or sent to places where they could be at risk?					
Do the parents or carers see their alcohol/drug use as harmful to themselves or their children?					
Are parents/carers aware of the potential consequences of their behaviour? (e.g. child safeguarding procedures, statutory powers)					

FAMILY & ENVIRONMENTAL FACTORS

1. Past and current history of treatment, engagement and motivation – Contact must be made with the treatment service, to establish frequency and chronology of contact.
2. Does the use of drugs and/or alcohol result in offending behaviour that impacts on the child through directly placing them in situations of risk or results in periods of separation.
3. Who knows about the drug and/or alcohol use? Are they supportive?
4. Will parent/carers accept help from friends, extended family, relatives and agencies?
5. Adequacy of material resources – Stability of money and housing – Is the housing shared? Does the family remain in one area or move frequently?
6. Is the home exposed to risky adult behaviour, activities or paraphernalia? Do they see drug taking/violence (e.g. conflict and exposure to criminal activity)
7. If parent/carers are using drugs illicit/prescribed and or injecting equipment are kept on the premises, are they kept securely away from children?
8. Is there evidence of social isolation and are parents excluded from family, friends and the community due to their drug/alcohol use or has it become normalised as a way of life within that group?
9. Are the children able to access a support network outside the home, from extended family, other adults, carers, professionals, school/community or support groups?
10. Is there adequate food, clothing and warmth for the children and are the household utilities being paid for.

Evidence of Protective factors

- Parent Engaged and attending treatment services
- Presence of stable adult figure (non- substance user)
- Close bond with at least one adult in caring role e.e: parents, older sibling, grandparents
- A family support network
- Engagement in activities
- Evidence of family cohesion and harmony
- Family involvement in the lives of their children
- Successful school experiences

See also process model attached to support planning effective interventions for families to minimise the impact of parental alcohol or drug misuse

Vulnerability and protective factors (1)

- **Inconsistency** – changing moods
- **Parental aggression or rejection**
- **Exposure to parental distress and suffering**
- **Role reversal** – child adopting parenting role- less time for themselves
- **Communication** – intoxicated parent is an emotionally unavailable one
- **Ritual** - unpredictable. Everyday routines hard to keep
- **Socialisation** - difficult to invite people home, family becomes socially isolated, options limited
- **Finance**

Vulnerability and Protective Factors (2)

- Problems are less entrenched
- Drugs or alcohol misuse doesn't cause chaos or conflict (particularly domestic violence)
- Children have good social networks
- Other responsible adults involved in child care
- Maintenance of rituals and other activities
- Drugs and paraphernalia out of reach of children
- Adequate financial resources
- Stable accommodation



Contacting Drink and DrugSense Children, Families and Young People's Services

Telephone: 01733 567998

Post: 79a Eastfield Road, Peterborough, PE1 4AS

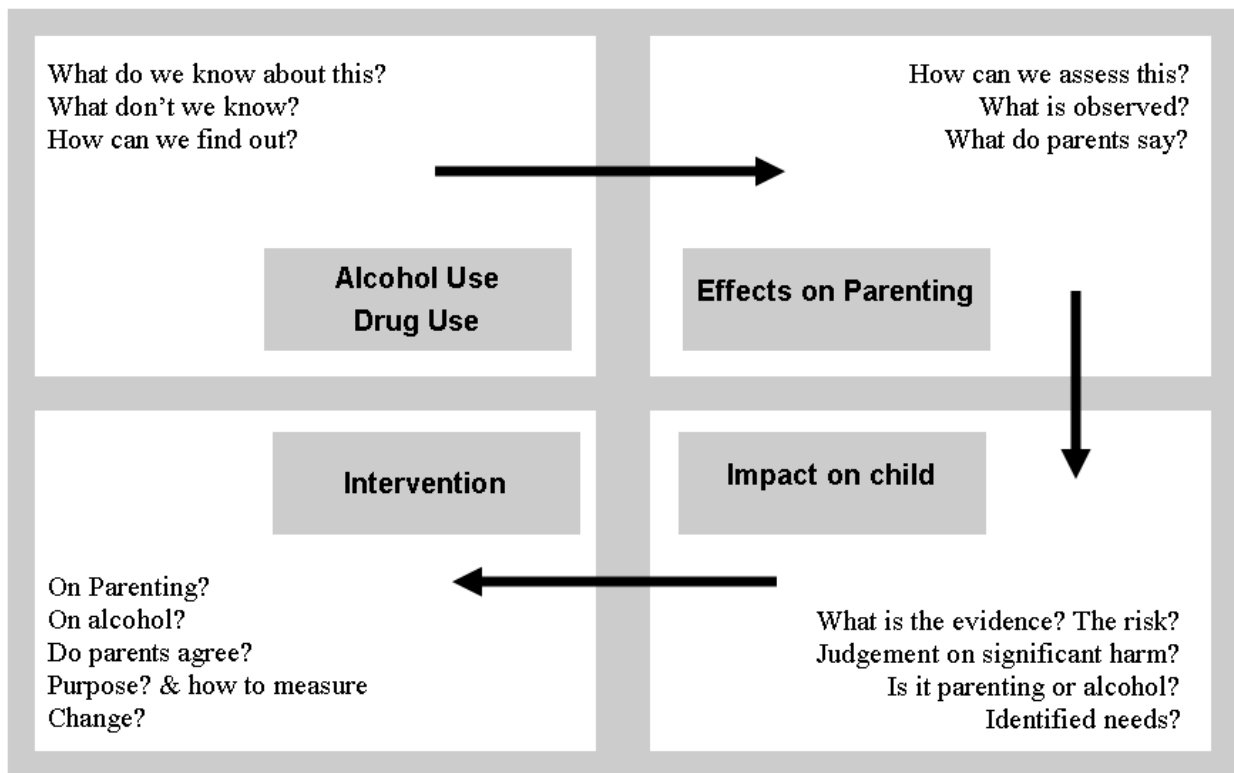
Email: DDYoungpeopleteam@drinksense.org

Adult Treatment Services:

Drinksense (Alcohol): 01733 551575

Aspire (Drugs): 01733 895624

Process Model



NSPCC
Alcohol , child Care & Parenting, A handbook for practitioners
By Wendy Robinson & Michael Dunne