Parents who misuse substances: learning from case reviews

Summary of risk factors and learning for improved practice around parents with substance misuse problems

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Case reviews highlight that professionals often focus on the issues faced by parents who misuse substances without considering the impact on their children. Substance misuse by a parent or carer is widely recognised as one of the factors that puts children more at risk of harm. The biggest risk posed to children is that parents, when under the influence of drugs or alcohol, are unable to keep their child safe (including overlay through co-sleeping and accidents caused through lack of supervision).

Many of the learning and recommendations contained in the serious case reviews repeat lessons from numerous other reviews. Reviews emphasise that professionals need to conduct child-centred assessments, and continue to reassess the potential risks that children in substance misusing households face.

Reasons case reviews were commissioned

This briefing is based on case reviews published since 2010, where substance misuse is a key factor. It pulls together and highlights the learning contained in the published reports.

In these serious case reviews, children died, or were seriously injured in a number of different ways:

- sudden infant death syndrome associated with co-sleeping
- accidental ingestion of drugs
- accidents (fire, drowning) due to inadequate adult supervision
- parents deliberately giving children drugs.

Key issues around parental substance misuse in case reviews

Assessments
There is a clear message about the importance of timely and thorough assessments with regards to all the children cared for by people who are misusing drugs or alcohol. The assessments need to be child-focused. They should contain a clear picture of the user’s drug and alcohol consumption, and carers’ usage and behaviour must be properly analysed to understand the risks that this poses to the children. This should include an assessment of parenting capacity. Where other risk factors are also present (parental mental ill health, domestic violence), the relationship between these factors and a parent’s substance misuse should be taken into account. Risk assessments should be a dynamic rather than a static (one-off) process, which are reviewed in the light of emerging evidence.

**Rule of optimism**

Professionals too often trusted the parents’ self-reporting of their drug and alcohol consumption. Their substance misuse was known about but not seen as excessive or problematic. Some reviews talk about tidy and clean homes and happy and healthy children.

**Communicating with parents**

It is important that information is delivered in such a way that parents are able to understand it. Professionals should regularly check that parents have understood the risks and are complying with the advice. Written leaflets are not suitable for functionally illiterate adults. Some parents said they did not feel that the risks of co-sleeping had been explained in such a way that they had fully understood them, or had been able to take them on board.

**Interventions**

Work with adults often focused on their individual needs rather than their role as parents. In other cases, the focus was on looking for a holistic family support package, which meant the immediate risks faced by the child were not prioritised, and the necessary safeguarding action was not taken.

**Learning for improved practice**

**Assessment and professional awareness and skills**

- A child-focused assessment must be carried out with regards to the needs, safety and welfare of every child who is looked after by adults who misuse drugs or alcohol.

- The assessment must look at parenting capacity and must analyse the adults’ substance misuse and behaviour to understand its impact on the children in their care.
Professionals should treat with caution the parent’s / carer’s account of how much and how often they drink / take drugs.

The assessment must consider whether safeguarding action is necessary. ‘

Professionals must be alert to and take note of new or increased risks and be prepared to take safeguarding action at any point, if and when it becomes necessary.

Professionals must remain alert to risks even if the parents seem to be complying at the moment.

Professionals must be aware of, and understand, the risks to children posed by parents’ substance misuse. They must be confident in challenging carers about the risks they are exposing their children to.

Professionals must be aware of, and understand, the risks to children posed by co-sleeping. They must be comfortable with discussing these risks with carers and crucially know how to give advice around safe sleeping arrangements

**Recommendations around working with the family**

- Drugs and alcohol in the home must be stored securely at all times, out of the reach of children.

- The risks of children ingesting drugs or alcohol must be explained to parents / carers, in a way they understand and are able to take this information on board.

- Children must be unable to get close to potential hazards in the home (eg ponds or heating appliances).

- The risks of co-sleeping must be explained to all adults who look after the children, in a way that they understand and are able to take this information on board.

- Professionals working with families who abuse drugs or alcohol should check compliance with the issues listed above on every visit / meeting.

**Reassessing risk as family circumstances change**

New and increased risks include:
- new partner (or previous partner coming back)
- involvement of extended family members in family life
- non-family visitors to the home
- missed appointments with any agency
- dropping out of treatment programme
- domestic violence or mental ill health problems
- criminal activity or anti-social behaviour incidents
- stress (which may impact upon substance misuse habits)
- moving home.