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Addiction and Family Impact: The View From the Floor Across Generations

Oklahoma Conference on Child Abuse and Neglect and National Alliance for Drug Endangered Children Oklahoma City - November, 2013

Competencies for Addressing Key Issues to Help the Chidlren (KSAs)

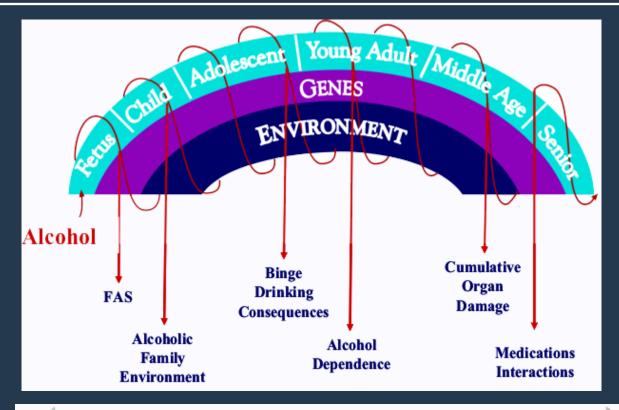
Competencies address critical capacities

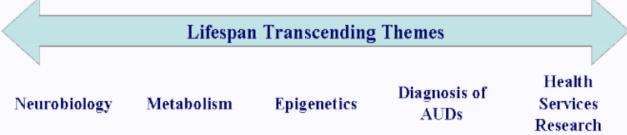
Consist of three categories:

- Knowledge
- Skills
- Abilities



Alcohol Across the Lifespan







Source: NIAAA

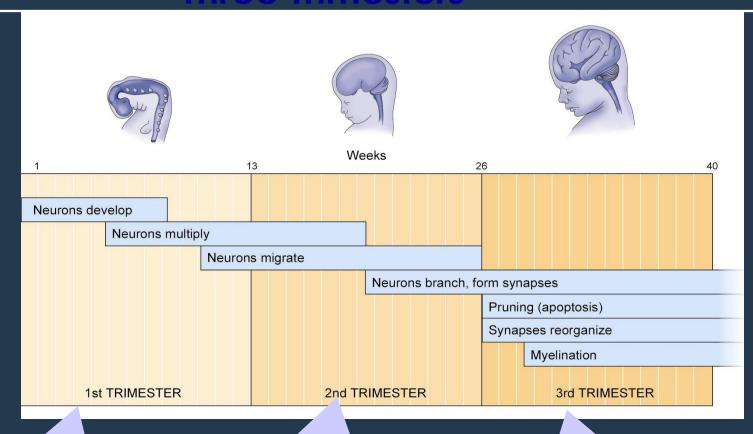
Clinical Diagnosis (DSM IV)

- Alcohol Abuse and Alcoholism (alcohol dependence) are collectively called Alcohol Use Disorders (AUDs)
- Alcohol use Disorder (Abuse and Dependence) is a single continuum of scalable severity
- There is a need to set cut points similar to those for hypertension, diabetes and other diseases; today that is getting attention.



 There is a need to establish cut points for the protection and nurturing of impacted children

Alcohol Damages Brain During All Three Trimesters





- CNS dysfunction
- Low IQ
- Facial dysmorphologies

- Disrupted learning and memory
- Disrupted cognition
- Disrupted executive functioning
- Emotional dysfunction

- Difficulties with timing tasks
- Lack of coordination
- Disrupted cognition, memory
- Emotional dysfunction



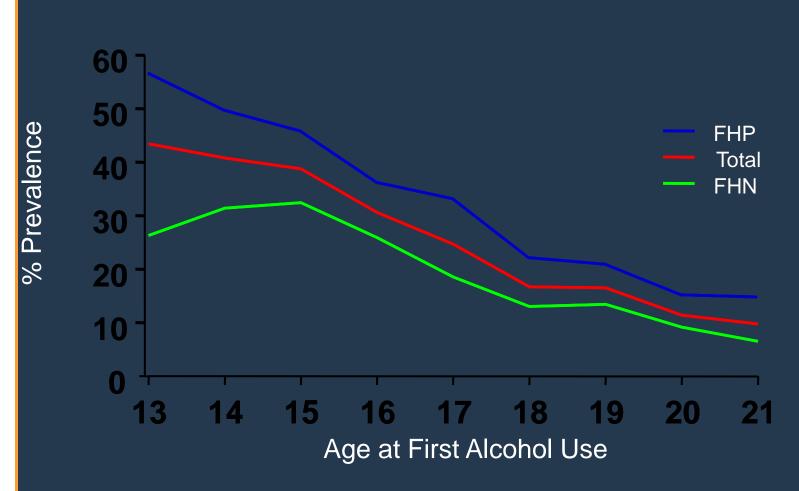
Source: NIAAA

Adolescent Alcohol Use: Effect on the Brain

- Impaired learning, memory, and problem solving; and smaller hippocampal volume in humans
- Binge-like episodes in animals produce long-lasting changes in learning/memory, persistence of insensitivity to motor impairment, and produce damage to frontal-anterior cortical brain region (who are you dealing with – how many are LD, and how do you help them comprehend?



Prevalence of Lifetime Alcohol Dependence by Age of First Alcohol Use and Family History of Alcoholism





Age of First Alcohol Use

Age of First Alcohol Use

Onset of Drinking	<=13	14	15	16	17	18	19	20	>=21
Risk of Alcohol Dependence									
Family history positive	46%	43%	35%	31%	27%	16%	19%	12%	8%
Total	38%	37%	31%	26%	22%	13%	14%	8%	5%
Family history negative	19%	23%	22%	18%	14%	9%	7%	4%	3%



Source: NIAAA

Genes and Environment

- Alcoholism is a common complex disease involving the interplay of genetic (60%) and environmental (40%) factors
- These interactions result in different sub-types of alcoholism with different characteristics and levels of severity.
- Environmental factors: childhood experiences, peer relationships, stress, availability of alcohol or drugs



Terminology Can Provide Hope or Deepen Misunderstanding and Shame

- Alcoholism
- Addiction
- Chemical Dependency
- Brain-Based Illness
- Substance Use Disorder
- "Substance Abuse"



Key Question

Why do some drink/drug despite negative consequences?

- relief from withdrawal
- long-term neuroadaptive changes
- emotional memory (post first experiment)



Treatment and Recovery (for the addicted individual)

- Many recover, or remit without professional interventions; many struggle from a first seductive use
- Early interventions are successful in reducing severity and chronicity
- Treatment success rates are 30%-60% depending on outcome measure (e.g., abstinence, decreased heavy drinking, social functioning)
- Medications are used for relapse prevention, to reduce heavy drinking days, to maintain abstinence

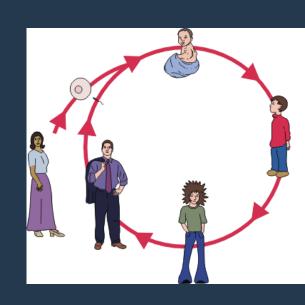


Impacts of Addiction on the Family System and Children

Addiction is NOT only about unhealthy substance use.

It's about emotional and psychological pain and trauma as well.

Living with addiction often results in cumulative trauma that deeply affects family members from the earliest stages of life throughout the life cycle.





Competencies By Role

- Each concerned participant has a role.
- All bring to their work
 - Their professional training
 - Their professional experience, including colleague on-the-job co-education
 - Their observations and judgments as adults
 - Their childhood experiences
- These all color reactions and actions.



Sample Core Competencies

- 1. Be aware of the:
 - Generally accepted definition of alcohol and other drug dependence
 - Societal stigma attached to alcohol and other drug dependence
- 2. Be knowledgeable about the:
 - Signs of alcohol and drug dependence
 - Characteristics of withdrawal
 - Effects on the individual and the family
 - Characteristics of the stages of recovery
- Be aware that possible indicators of the disease may include, among others: marital conflict, suicide, family violence (physical, emotional, and verbal), hospitalization, or encounters with criminal justice system.



(Clergy) Core Competencies

- 4. Understand that addiction erodes and blocks religious and spiritual development; and be able to effectively communicate the importance of spirituality and the practice of religion in recovery, using scripture, traditions, and rituals of the faith community.
- 5. Be aware of the potential benefits of early intervention to the:

Addicted person

Family system

Affected children

6. Be aware of appropriate interactions with the:

Addicted person

Family system

Affected children



(Clergy) Core Competencies

- 7. Be able to communicate and sustain:

 An appropriate level of concern

 Messages of hope and caring
- 8. Be familiar with and utilize available community resources to ensure continuum of care for the:

 Addicted person
 Family system
 Affected children
- Have a general knowledge of and, where possible, exposure to:
 - 12 Step Programs: AA, NA, Al-Anon, Nar-Anon, Alateen, ACOA, etc.
 Other groups



(Clergy) Core Competencies

10. Be able to acknowledge and address values, issues, and attitudes regarding alcohol and other drug use and dependence in:

Oneself

One's Own Family

- 11. Be able to shape, form, and educate a caring congregation that welcomes and supports persons and families affected by alcohol and drug dependence.
- 12. Be aware of how prevention strategies can benefit the larger community.



The Vision or Still the Same View from the Floor

A community environment where all members of a family affected by addiction know there are knowledgeable and caring people – child welfare workers, schools, community faith organizations, law enforcement, treatment programs, prisons, dependency courts, drug courts, foster care who:

- really understand what they are experiencing
- care about them and are available to them
- can help them find emotional and physical safety and
- can support their healing and spiritual growth

What is the Vision in Your System?
What is the Mission, and What are your Goals?
KSAs first!



Impacts of Addiction on the Family System and Children

Alcohol and/or drug abuse in the home can facilitate a spectrum of damaging childhood experiences.

- Can create an environment of confusion, fear, and hopelessness leading to chronic emotional stress.
 This is true for the professional who grew up in
- Can lead to a wide array of negative health and social consequences that affect relationships and productivity at home and in school and in the workplace.





Family Reaction to Progression

USE

Experimentation

 Feel good – enhance feeling works every time

Social Use

- Enhances an already good time
 - With fun & relaxation
 - anticipated / planned
 - Obey laws & own rules
 - Control amount / behavior appropriateUse to much?Never again



Family Reaction to Progression

Harmful use

- Interferes with or causes problems in any area
 - More often & increased importance
 - Expanded rules & rigidity about use
 - Withdrawal & secretive
 - More using friends / variety of drugs
 - Changing values & activities
 - Family disputes / variety of problems
 - Excuses / blame
 - Emotional costs



Family Reaction to Progression

Dependency

- Harmful dependency / Addiction
 - Continued use with repeated consequences
 - Loss of control / loss of choice
 - Increased emotional pain / increased defenses
 - Memory distortion / blackouts
 - Final result
 - Delusion, denial, minimizing, projection, rationalization
 - Death
 - Last to know



A Disease Affecting the Whole Family

An addictive family system is harmful to all members of the family and particularly damaging to children.

Alcohol and drug use are among the fuels that feed child abuse and other forms of family violence.

The addicted family environment is unpredictable, sometimes dangerous, often filled with chronic emotional stress.



It can facilitate the development of depression and anxiety disorders in the non-addicted family members and can have lifetime consequences.



Family Interaction is Defined by Alcoholism or Drug Addiction

Problems normally seen are frequently associated with addiction in the family:

Increased...

Family conflict

Decreased...

Family cohesion

Emotional or

physical violence

Family organization

Family isolation

Family stress



Impacts of Addiction on the Family System and Children

The economic and social costs of adult alcohol and drug use disorders seldom include the medical and social costs of being a family member living with addiction.

The costs to the educational system, the mental health system, and the judicial and penal systems that accrue from the impact of parental alcohol and drug use problems are enormous and – for many -- can span a lifetime.

(Source: NIAAA - http://pubs.niaaa.nih.gov/publications/ Social/Module10JFamilies/Module10J.html)



Changing the Trajectory

Harmful or hazardous drinking can have a profoundly negative impact on a family.

A First Step: Reduction in drinking to a low-risk pattern can positively affect the entire family.





Learning about Addiction Includes Learning about Its Children...

- 1 in 4 children under the age of 18 is impacted by a family member who abuses alcohol or has alcohol dependence. Countless others live with parental drug use.
- Crucial brain and social and emotional development are often altered or impeded by the toxic environment created when a parent uses alcohol or drugs abusively, and DEC has brought more focus and tenacity to the issue.
- And ... It doesn't have to be that way.



Rules that Make the Family Toxic

Don't talk

Don't feel

Don't trust





Family Defenses that "Follow the Rules"

- Delusion
- Denial
- **Minimizing**
- Projection
- Rationalization



Results of the Toxicity...

May be less attentive to the child while drunk or high

May be unable to fulfill their role as a parent, including providing medical treatment







A Parent Who is Abusing Substances...

May be chronically physically ill from using drugs or alcohol

- Spends time procuring, using, and recovering from the alcohol or drug use instead of parenting
- May be engaged in illegal activities
- Places financial stress on the family system





Children of Addicted Parents

 Often lack consistency, stability, and needed emotional support due to the chaotic family environment

 May be physically and emotionally traumatized by accidental injury or verbal, physical or sexual abuse due to parental drinking/drug use

 May encounter permissiveness, neglect, violence, poor communication, undersocialization, leading to feelings of abandonment



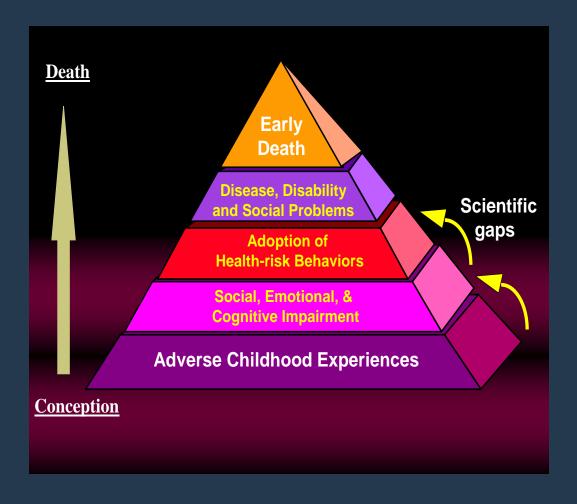


Consequences for Children of Addicted Parents

- Daughters more likely to connect to/marry addicted men
- More depression and suicide in adolescents
- More illness, injuries, poisonings, substance abuse, hospitalizations
- More absenteeism from school, less help with homework



Adverse Child Experiences Study





(Source: CDC and Kaiser Permanente study)

Consequences of Living with Addiction

There are many traumatic consequences and learned behaviors that are often associated with exposure to addiction in the family.

It is not uncommon for these symptoms to facilitate anxiety disorders and/or depression in adolescence or surface in adulthood as a post-traumatic stress reaction.



DISTORTED REASONING: Children may attach variously distorted meanings to chaotic behavior depending on their developmental level.

(Source: Dayton, T. (2000). Trauma and Addiction. New York: HCl.)



DEPRESSION: Children may attach variously distorted meanings to chaotic behavior depending on their developmental level. Anger, rage and sadness that remain unexpressed or not understood leads to a lack of resolution, creates hopelessness, and can be turned inward toward the self.

(Source: Dayton, T. (2000). Trauma and Addiction. New York: HCI.)



HYPER-VIGILANCE: This is the anxiety created by "waiting for the other shoe to drop" – constantly scanning the family environment for signs of potential danger or repeated rupture.

(Source: Dayton, T. (2000). Trauma and Addiction. New York: HCI.)



LOSS OF TRUST: Deep ruptures in primary, dependency relationships and breakdown of an orderly world can create significant problems in all relationships throughout the lifespan.

(Source: Dayton, T. (2000). Trauma and Addiction. New York: HCI.)



Break The Rules

BREAK THE RULES:

- 1) Deliver consistent messages that break the silence created by the "Don't Talk" rule.
 - In medical settings, in the classroom, in the faith communities, in our juvenile justice and foster care systems.
 - Talk <u>to</u> impacted children and teach <u>about</u> them.
 - Leave pamphlets on reception tables, in church information racks and in the school health office.



Break The Rules

BREAK THE RULES:

2) Be a consistent nurturing adult in a child's life – listen, support, encourage, be available. Help them see that there are safe people who can help and that they have choices





Break The Rules

BREAK THE RULES:

3) Help impacted children understand how to express feelings in safe and healthy ways, and that all their feelings are normal for the situations they face.





Social Work Core Competencies...

- For Working with Children and Families Affected by Parental Substance Use Disorders -- In Summary -
- Understand the effects of SUDs and their impact on children, families and communities.
- Knowledge of SUDs prevention strategies
- Knowledge of SUDs treatment strategies
- Knowledge of the impact of substance use on child and adult development.



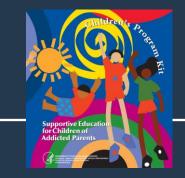
The Children's Program Kit



Goals:

- To assist treatment providers and community-based youth-serving systems to educate and support children affected by parental alcohol and drug addiction.
- To prevent substance abuse and promote resilience in the highest risk youth population.
- To bring the benefits of hope, healing, and recovery to children of addicted persons.





Addiction

- Help children realize that addiction is not their fault.
- 2. Help children realize that they are not alone; many young people live in families with addiction.
- 3. Help middle-school and high-school-age children understand that they are at increased risk for addiction because it tends to run in the family.
- 4. Help children understand the disease of alcoholism and drug addiction.





Feelings

- 1. Help children understand how feelings may affect them and how they can handle feelings in safe ways.
- 2. Help children understand that there are safe people with whom they can share feelings and get support.
- 3. Help children identify and express both comfortable and uncomfortable feelings.





Treatment & Recovery

- 1. Help children understand that people with addiction need help to recover.
- 2. Help children realize they can't fix their parents problems, but can work on their own self care.
- 3. Help children realize that treatment and aftercare assist addicted people to get better.



Additional Needs of the Parent/Caregiver

- Validation of efforts
- Understanding of enabling versus empowering and impact on children (and addicted parent)
- Understanding the development and attachments issues for children
- Effective communication techniques
- Language to talk with children



Break the Silence/Teach the 7 Cs

- I didn't Cause it
 - I can't Cure it
- I can't Control it
- I can help take better Care of myself:
 - by Communicating my feelings
 - making healthy Choices
 - and by Celebrating myself.



Children Need a Framework for What They are Experiencing

- Information about addiction as a family disease
- Validation of their experiences
- Information about how to find safe people to support them
- Information about the hope of treatment and the process of recovery
- Information on community-based supports such as Alateen
- Reassurance that they need and deserve support and help...whether or not their parents get well...and that they have choices and there is hope



Other Messages Children Need

- You're Not Alone.
- It's Not Your Fault.
- You deserve help, and there are safe people who can help you.
- Addiction is a health problem.
- It's OK to feel our feelings.
- It's important to talk.





Treatment helps, and recovery happens.

Parents & Caregivers Need

Many are adult children of addicted parents and need support, education on addiction, and skill building practice.

Common needs:

- Setting limits and reasonable consequences.
- Knowledge of what is "normal" development.
- Encouragement to have fun with children, share warmth, and build positive / noncritical relationships.



Many Message Delivery Systems

- Health Care Systems
- Treatment Systems
- Faith Communities
- Courts
- Community Coalitions
- Schools
- Workplace Programs
- Knowledgeable and caring family members



Addressing Family Addiction

- Interventions need to be comprehensive and continual – and include age-appropriate child services.
- Children benefit from educational support programs, including Alateen, whether they live in birth home or in foster care, and whether or not their parents get well.
- Spouses benefit from Al-Anon



Applying Principals of Family Intervention

Intervention engages the most significant people in the addicted person's life to:

- present a loving, structured, supportive and coherent message of concern to an addicted loved one;
- convince the person that alcohol/drug use is creating painful problems for all involved;
- request that the person get help so that all can recover and heal.



Family Intervention Is...

- Carefully pre-planned
- Facilitated by a professional interventionist
- ✓ Includes key family members spouses, children, and other significant persons
- Uses loving, supportive language
- ✓ Includes "What if...?" bottom lines
- Would seldom include active involvement of clergy or other pastoral ministers



Effective Help for the Children

There is great value in educational support group activities –

- Provide beneficial education for all children and youth
- Especially helpful for children living with alcoholism or drug dependence in the family



Group Work is the Preferred Strategy Because...

- Kids learn they are not alone.
- Group work increases the likelihood of breaking denial.
- Group work provides safety and protection.
- Kids experience healthy social interactions.
- Group work builds trust in social situations.
- Group work provides opportunities for group validation.
- Group work allows kids to try out new approaches to old problems.



COA Groups

- Let them know they are not alone!
- Validate their perceptions and interpretations
- Help them gain some perspective
- Absolve them of blame
- Help them separate parent from parental behavior
- Offer hope, self-care skills and help to cope
- Provide a safe outlet for anger
- Explain risks of behavior, and how to identify safe people in their lives
- Help build self-esteem



What Happens if Nothing Changes?

Children and families are at greater risk for:

- Physical, verbal or emotional abuse
- Poor school or work performance
- Lacking of trust in others
- Diminished spiritual life
- Truancy /absenteeism or trouble with the law
- Poor choice of life partners
- Diminished economic opportunities

The costs to human development and society are enormous.



Recovery is for Each Individual Family Member

All family members, including very young children, need and deserve to recover from the slings and arrows addiction in the family has thrown at them. The process of recovery, however, is complex and progressive.

"Research [shows] that the emotional turbulence within the family produced by addiction continues well into the first three to five years of recovery. Family recovery begins with what are, in essence, individual recoveries of its members. Without 'holding environments' to sustain these individual recoveries until couple and family relationships can be reconstructed, the risk of collapse and disintegration of the family is quite high." (Source: White & Savage, 2005)



Recovery is for Each Individual **Family Member**

Children need a "holding environment" -- the school (especially one with student assistance programs and support groups), a faith community, a grandmother, a friend's nurturing home, can all be one of these "holding environments" to help support the child while the other family members heal; foster care can also offer such an environment. A structured educational and supportive program that brings clarity and promise to the family members.

(Source: White & Savage, 2005)





Family Recovery

Since children are particularly vulnerable to the negative consequences of addiction in the family:

- Life for children of alcoholics or drug abusers does not automatically improve when the unhealthy family member stops drinking or when removed from the abusive or neglectful family, nor when they are placed in a loving foster home.
- As the member begins to devote time and energy on recovery, children may be somewhat neglected, left without guidance, and still feeling abandoned as the parental focus is still on the disease.
- ☑ The potential impacts on the child can be long lasting if no program or on-going supportive intervention is provided.





Safe People

- 1. Help children understand the characteristics that make people "safe people."
- 2. Help children realize that it's okay to ask safe people for help.
- 3. Help children understand the need for and importance of always staying safe.



Family Recovery is for the Children Too!

A person's progress in recovery includes attainment of, adjustment to and long-term maintenance of sobriety:

- Attainment of Sobriety The family system is unbalanced but healthy change is possible, for each person and often from different support sources.
- Adjustment to Sobriety The family works on developing and stabilizing a new system, with clear focus on the children as well as parents.
- Long-term Maintenance of Sobriety The family must rebalance and stabilize
 a new and healthier lifestyle; all
 members need to heal for this to
 happen and for the individuals to attain
 "emotional sobriety."



Back to the "View From the Floor" and The Vision

What are they Today?

Who Needs to Know What for the "Vision" to be attained?

What Can you Do Tomorrow?

Who else is Responsible ?



Who else can Partner with You?

The View Will Change When...

All members of a family affected by addiction know there are knowledgeable and caring people making decisions in the systems that are impacting their lives who:

- Understand what they are experiencing
- Recognize that pro-recovery strategies and programs can change lives permanently by changing their trajectories
- Care about them and ensure that supportive people are available to them
- Can help them find emotional and physical safety and can support their healing and spiritual growth



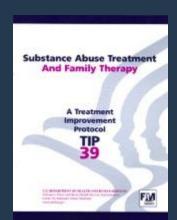
Vision: In other systems?

Family Recovery is for the Children Too!

SAMHSA's TIP 39 categorized a family's progress in recovery regarding attainment of, adjustment to and long-term maintenance of sobriety:

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A Few Resources

For Family Members

Pamphlets and booklets for parents to help children and for children to read alone

Kit for Kids

http://www.nacoa.org/pdfs/kkit_layout.pdf

Kit for Parents

http://www.nacoa.org/pdfs/kit4parent
s.pdf





Other Resources

To Help Youth

Student Assistance in schools – first line of prevention, intervention, educational support groups to facilitate healing for school-age children and youth

Help Is Down the Hall: A Handbook on Students Assistance http://www.nacoa.org/studenta.htm

Pamphlets

http://www.nacoa.org/pdfs/ondcpbro_rev.pdf

http://www.nacoa.org/pdfs/feelssobad.pdf



For Family Recovery Support



www.celebratingfamilies.net



A Look at Reactive Policy and Legislative Decisions

What happened after Columbine?

- Parent Fear
- Congress Acted Quickly
- Department of Justice Funded but Not Equipped
- \$\$\$ Passed Program to Center for Mental Health Services
- CMHS Not Equipped subbed to MHA and School Psychologists
- Program Designed to fit Adult Service System;
 evaluation showed improvement (Evidence-based??)

What Happened After Red Lake?

- After VA Tech?
- And after Sandy Hook?
- And last week?



Who Makes the Decisions that Fuel Federal Policy/Legislation

- Legislative role
- Bureaucracy's role
 - Designing
 - Targeting
 - Reacting to Protect "Turf"
 - Caution to Protect Position as Administrations Change
- Court's role



Who You Influence Matters

Who Surrounds the Identified Child In Need?

- Parents?
- Teachers?
- Neighbors?
- Child Welfare Worker?
- Early Childhood Professional?
- Faith Community?
- Physician or Health Clinic?

What do Each Need to Know to be Motivated to Intervene, Offer Help, and Be Effective?

How Will They Learn?



Whoever moulds public sentiment, goes deeper than he who enacts statutes, or pronounces judicial opinions. ... Abraham Lincoln

There are many "publics." Each of us must mould ours; who are they?



Potential Partners

Primary Care Providers

Teachers

Clergy and Other Pastoral Ministers

Social Worker

Early Childhood Professionals

Concerned Family and Friends

Legislators

Who else?



www.nacoa.org