Audience  Groups 2-6 (Working Together 2010)

Methods  Small group work

Preparation  
Trainer needs to ensure copies of the Henderson/Miller/Taylor family case studies are available for participants:

- F2.0 Henderson/Miller/Taylor family case study
- F2.1 Claire’s story
- F2.2 Darren’s story
- F2.3 Michelle’s story
- F2.4 Troy’s story
- F2.5 Susan’s story

You may want to use the audio-video of the stories:

- M2.1 Claire’s story
- M2.2 Darren’s story
- M2.3 Michelle’s story
- M2.4 Troy’s story
- M2.5 Susan’s story

Links to Common Core
Common Core 2  Child and young person development (knowledge: understand how young babies, children and young people develop). Know about the Child Health Promotion Programme and Common Assessment Framework for Children and Young People (CAF) and, where appropriate, how to use them.

Learning Outcomes
To assess parenting received by a child.

Process
Ask participants to work in groups of 3-5 (depending on the size of the group). Each participant should read the Henderson/Miller/Taylor family case study and address the six questions. Each group should feedback on different questions.

Below are notes relating to each question:

1. Can either of the adults in this household be described as addicted or dependent upon alcohol and drugs? What reasons/evidence do you have for your answers?

Both Claire and Darren have problems associated with their use of substances. Alexander (2008) describes ‘overwhelming’ involvement as a key focus. He uses the term ‘addiction’ to refer to any behaviour including alcohol and drugs that become an overwhelming part of an individual’s life. He argues that ‘overwhelming involvement’ is an adaptation to psychological distress created by social, cultural and economic circumstances but that adverse consequences follow for that individual or for others.

Time
Total: 45 minutes
In this family there are causes for concern, which will be exacerbated by misuse of drugs and alcohol. These are:

- Financial poverty – at least on a regular basis
- Criminality
- Threatening behaviour and violence
- Learning disability.

2. If either adult is addicted/dependent - what risks might the children experience?

The potential chaos of everyone's life in this household should be considered, and therefore how they might be ameliorated. The work of Vellerman and Templeton (2007) is instructive here, which would indicate the possibility of support for the child even if the parent/carer continues to misuse alcohol and drugs.

Evidence would suggest that even without addiction/dependence the parents/carers in this case study have significant problems. Claire may not have some insight into her situation and would need support, potentially with both the practical and psychological stresses of parenting five children. Darren's own childhood appears to be characterised by a lack of appropriate parenting. Both of these individuals may have deficits for which they would need support to overcome.

It is important to consider the potential strengths this family have, practical, psychological and emotional.

3. On the basis of the case study what elements of neglect are likely for each child, including Michelle?

A major factor in this case is the possible undiagnosed foetal alcohol syndrome in both Susan and Ryan. It would be important to ascertain Claire's drinking patters during the pregnancy with both of these children. It may well be a strength that she did not use alcohol as much in her latest pregnancy, though this should be established. The work of Plant (2010) is important here. Foetal alcohol spectrum disorder (FASD) is a condition that occurs in children born to women that have used alcohol during pregnancy. FASD can result in poor physical and psychological development, with the risk of life-long educational and social problems. Importantly FASD is not confined to infants born to women with alcohol use problems, but can affect the babies of women whose use would not otherwise be considered problematic.
4. Are these neglect factors related to the misuse of substances or would have been present within the family’s functioning?

Another significant factor is that of the relationships Claire has had, and her on-going relationship with Darren.

International research on wellbeing shows that relationships are vitally important not only to the quality of people’s lives but also to their mental and physical health. Lonely people fare much worse in life than those who have friends and family. Longitudinal research in the UK shows that being married is the single most important determinant of men’s physical and mental health - more important than jobs or income (Wilson and Oswald 2005). There is considerable emotional and relational insecurity. The fragility of relationships is likely to undermine resilience, contribute to depression and reduce motivation and purpose in life. Unstable or non-existent relationships make it even more likely that people will turn to alcohol and drugs to ease the stress and pain of everyday life, as well as undermining an individual’s resources towards recovery. Relationships are key.

Claire has had at least three significant relationships, at least they have resulted in pregnancy. Her vulnerabilities in this regard should be explored.

5. What makes the use/misuse of substances important in this case?

An exploration of the strengths and deficits within this family case study is vital in ascertaining the role of the use of alcohol and drugs by both parents, and therefore the impact of these on the neglect of the children.

Michelle must not be overlooked or forgotten in the possible concern about the welfare of the younger children. She, like her mother, is vulnerable in her relationship and would appear to be inducted into drug use by Jim, who is considerably older than her. The pregnancy at the age of 16 and her potential drug use in pregnancy should be significant features of assessment.
6. What interventions are possible to assist the adults in the case study and reduce the risks of neglect of the children’s needs?

Parents who misuse substances are likely to require help across many different areas of their family lives. This includes help in controlling their substance use, help with other psychological problems, help with external stressors, such as housing and financial strains, as well as help to increase the social engagement of the parents and their children in society more generally. Interventions should aim to create the conditions that allow the parents to create a safe, nurturing and stimulating environment - the ingredients of family life necessary to ensure the healthy development of children. While this is easy to state, responding effectively is far from straightforward.

For some women the difficulty in getting the help was often related to trust and understanding, as well as the child care social work role. They wanted support for themselves, particularly in accessing services; needs that the author suggests could be addressed through existing services (e.g. counselling for the parents, anger management, employment opportunities, care management in adult services) (Hayden 2004).

Parents valued the practical and emotional support that they had received. The advice about parenting, respite child care, specialist help to control alcohol or drug addiction, anger management and re-housing (Cleaver et al. 2011).

Collectively, studies on interventions used to support children and families affected by parental substance misuse point to the importance of intensive, family focused interventions that include a strong therapeutic alliance between practitioner and parent or child. The focus and nature of the interventions that have been developed, and the studies recommendations for services to address unmet needs, suggest that a range of services targeting child, parent and the family as a whole are likely to be needed.