

What Parents Say About... Using the Protective Factors to Understand Substance Abuse and Recovery

The National Alliance of Children's Trust and Prevention Funds (Alliance) joined with the Casey Family Programs Birth Parent Advisory Committee (BPAC) to spearhead the development of this issue brief in collaboration with the Birth Parent National Network (BPNN). For more information about these two important parent groups, please see the last page of this document. This issue brief includes the latest research findings and the perspectives of parents with life experiences related to both substance abuse and the child

welfare system. This is the first in a series of issue briefs that we will be completing on substance abuse issues. We hope this information will be used to improve practices and policies that affect families facing these challenges. One important goal is to safely reduce the number of children in foster care by helping children safely remain at home and by supporting earlier reunification of children with their families into safe, stable and caring homes.



As parents in recovery who have experience with the child welfare system because of substance abuse issues, we believe that given the right support and encouragement, many parents are capable of strengthening their family's protective factors to ensure their children's future safety, permanency and wellbeing. This issue brief includes our perspective on the intersection of addiction and child welfare involvement and uses the protective factors framework as our lens. Our goal is to raise awareness and increase knowledge in the field to further improve practice with families like us. Beginning on the next page, we address some of the key areas for consideration.

What Is a Protective Factor?

A protective factor is a characteristic that makes a parent, child or family more likely to thrive and less likely to experience a negative outcome. It may be helpful to think of protective factors as what will help children and families thrive despite whatever risk factors they might face.

The Alliance's *Bringing the Protective Factors to Life in Your Work* curriculum explains that the five Strengthening Families™ Protective Factors were identified by the Center for the Study of Social Policy (CSSP) after an extensive review of the research regarding family strengthening and child abuse and neglect prevention. The framework was introduced by the CSSP in 2003. By 2007, the Alliance was working with more than 30 states that were implementing this approach through its Early Childhood Initiative. Today, the Alliance and CSSP jointly support the Strengthening Families National Network.

In Strengthening Families™ **all families** are included because **all families** benefit from having strong protective factors. This is particularly important for families where substance abuse and child welfare involvement are issues.

The five protective factors are...

Parental Resilience

The ability to recover from difficult life experiences and often to be strengthened by and even transformed by those experiences.

Social Connections

Positive relationships that provide emotional, informational, instrumental and spiritual support.

Knowledge of Parenting and Child Development

Understanding child development and parenting strategies that support physical, cognitive, language, social and emotional development.

Concrete Support in Times of Need

Access to concrete support and services that address a family's needs and help minimize stress caused by challenges.

Social and Emotional Competence of Children

Family and child interactions that help children develop the ability to communicate clearly, recognize and regulate their emotions and establish and maintain relationships.

Challenges Faced by Survivors of Trauma

As survivors of **trauma**, we recognize there are common, yet not insurmountable, challenges that many parents like us experience. Trauma is often a major part of our lives (Farley, Golding, Young, Mulligan, & Minkoff, 2004). Some of us are faced with addiction because of events we were unprepared and unwilling to deal with, and because no matter how poor of a coping mechanism it is, using drugs or alcohol served our purpose. Some of us have lived with addiction for such a long time that we have by necessity developed a lifestyle that exposes our families to traumatic events. Often it is the ways and means of supporting an addiction that leads to trauma within our families and brings us to the attention of child welfare (Haight, Jacobsen, Black, Kingery, Sheridan, & Mulder, 2005; Haight, Carter-Black, & Sheridan, 2009). In addition, child welfare involvement in itself can be traumatic for families (Smith, 2008), especially for those of us with poor coping skills. We believe that by utilizing the protective factors framework and a strengths-based perspective, professionals can help families address issues such as trauma. For example, we believe that parental resilience is a protective factor that needs bolstering to help us sustain a safe and healthy environment for our families.

An Impaired Ability to Process Information

Child welfare involvement and addiction can be a tricky combination. Parents with addiction issues may have difficulties engaging with systems, groups and other individuals. Some parents may have an **impaired ability to process information** accurately due to their addiction (Jentsch & Taylor, 1999; Goldstein, Craig, Bechara, Garavan, Childress, Paulus & Volkow, 2009; Lundqvist, 2005). Parents with addiction issues can be impaired in their decision-making (Bechara, Noel, & Crone, 2006). Many addicts have developed isolation, deception and manipulation as essential skills for survival, and even the addict may not be aware of the impact these have on engagement, particularly in early treatment. Due to the impairments caused by active addiction, people may have difficulty in understanding that they are part of the problem (Goldstein, et al., 2009) and this may present as denial. Encountering a system that does not understand or have services to help those facing addiction means we may be less likely to acknowledge that there is a problem because this acknowledgement may mean we risk losing custody of our children. When depression, other mental health concerns or related challenges are present, it is even more important to understand how overwhelming a parent's encounter with the child welfare system may feel. There will be many times that we as parents involved with child welfare as substance abusers feel that the help we need is either not available, or only available after a certain level of engagement is achieved. Many times we feel as if we are viewed as "just another case" rather than as an individual needing help.

Hope: The Common Thread to Success

For parents in recovery, we see a common thread in those that succeed. That **common thread is hope**. Without it, we are more likely to fail. If others don't believe in us, it is harder to believe in ourselves. Most of us used our substance of choice to avoid shame, guilt and depression that accompanied our life choices. When we stopped using substances, we had to find a constructive way to maneuver through life while being bombarded with negativity due to our

"Once I began to understand the trauma caused by my addiction and resulting lifestyle, I could see how it had infiltrated every aspect of my life. Trauma not only dictated how I engaged with various services, but how I interacted with my children and loved ones. Fear, self-doubt and distrust had become the lens through which I viewed the world."

Timothy, Birth Parent, Oregon

"One of the most difficult parts of early recovery was the realization that my ability to process information had been seriously damaged by my abuse of methamphetamines. It took months to regain the ability to read and comprehend written language."

Sherry, Birth Parent, Kansas

past behaviors and our label as a substance abuser. Many of us have physical and psychological issues to deal with as a direct result of our addiction (Shetty, Mooney, Zigler, Belin, Murphy, & Rawson, 2010; D'Amore, Cheng, Kressin, Jones, Samet, Winter, ... & Saitz, 2011; Rosen, Smith, & Reynolds, 2008; Grella & Lovinger, 2012). We also may have criminal justice issues to overcome, as well as housing and employment issues (D'Andrade & Chambers, 2012).

Substance abusers often feel that the hurdles to overcome are too great and find themselves in total despair. **An additional factor is that many times we know our chances of successful recovery are slim.** We may not know anyone who has been successful in attaining long-term recovery. We find ourselves stuck in a cycle of denial and mistrust and hopelessness. It is those professionals who are able to meet us where we are, form partnerships with us to find solutions, and encourage us by showing compassion that will be the most valuable to us in obtaining and maintaining our recovery.

"I had an amazing caseworker who really believed in me. He saw something in me that I did not see in myself. He gave me hope and helped me begin to see my self-worth. I really believe he was the first step in my successful recovery."

Toni, Birth Parent, Colorado

Multiple Supports are Needed

When substance abuse and addiction are identified, our common experience shows us that there is a desperate need for more assessment and treatment services. Appropriate diagnostic and treatment services, as well as adequate access to those services, are lacking for many of us. We also acknowledge that accessing services can be complex and there is a skill in achieving a successful referral. It's important that caseworkers understand this and can ensure a more coordinated approach to access and delivery of services. For example, it may be more than appropriate to assist us in the development of a "safety plan" while on a waiting list for treatment. Another example would be that case plans and tasks may need to be more individualized for addicts due to the proceeding issues we have covered including trauma and information processing difficulties.

More treatment options are needed but that's not the only solution. These complex issues require multiple supports. For example, having someone with substance abuse expertise in child welfare agencies to offer guidance in assessment, engagement, and intervention is an invaluable tool that is often overlooked. We believe that the addition of substance abuse experts in the child welfare agency could be more than justified by the potential for prevention of out-of-home placements, earlier reunification, proper treatment and less recidivism. This expertise may come from parent partners in recovery or identified staff members who have received in-depth training on substance abuse. Parent partners are parents who have successfully navigated the child welfare system and who provide guidance and support to parents currently in the system. Some parent partners also have successfully recovered from their addiction while involved in the child welfare system. Their involvement improves the chances of success (Cohen & Canan, 2006; Berrick, Cohen, & Anthony, 2011). For example, in Iowa, families that had a parent partner were more likely to be reunified and less likely to come back into the system (Iowa's *Partnering with Parents for Systems Change*, Final Implementation Project Report, Midwest Child Welfare Implementation Center, April 4, 2014). In addition to parent partners, staff trained in substance abuse issues can also help us navigate the system while staying focused on our recovery (Center for Substance Abuse Treatment, 2010).

"Detoxification and treatment can be difficult to access for individuals who do not have financial resources or health insurance. We also need support from staff or parent partners who have knowledge about substance abuse issues and resources."

Edwin, Birth Parent, Iowa

Recovery Requires Support and Attention to Expectations

Recovery involves more than abstinence. As parents in recovery we need realistic expectations for sobriety from the system and our support network. Our support network needs to have information to understand how they can better support us to promote life-long recovery. Professionals working in the system need to understand how recovery works to ensure sufficient maintenance is in place to support our recovery. This lack of services coupled with a lack of system knowledge about what we need to maintain a successful recovery results in an inadequate response that presents unnecessary risks. We believe that change is within our reach which will allow for the underlying issues to be addressed, appropriate diagnostic and treatment services, prevention of out-of-home placements, greater rates of reunification, lower rates of recidivism and healthier families. There are protective factors that can help us achieve these goals.

Using the Strengthening Families™ Protective Factors to Achieve Recovery

We believe that the protective factors discussed on page one can be a framework to help those who abuse substances achieve long-term recovery and prevent recidivism. First, we need to understand how substance abuse can negatively impact a parent's protective factors. Substance abuse has a direct impact on **parental resilience** by contributing to physical, cognitive, and daily functioning impairments (Verdejo-Garcia & Perez-Garcia, 2007). In addition, the cycle of use, euphoria, depression, and use (Dackis & O'Brien, 2005) means that many parents find it difficult to exit, losing both hope and resilience. **Social connections** become weakened as isolation increases along with addiction. Addiction is about secrecy and denial, both of which thrive in isolation. **Knowledge of parent and child development** may be lacking due to parents' inability to put their child's development over their addiction. Parents may have difficulty understanding the extent to which their addiction has impacted their child's development until they've achieved prolonged recovery. A parent's ability to access **concrete supports in times of need** may be limited due to the parent's social connections being restricted to those who use or have access to substances. Treatment services are not visible in communities and parents, for reasons of impairment, denial, and addiction may not actively pursue these supports. The behaviors and experiences associated with addiction may negatively impact on the **social and emotional competence of children.**

Families that intersect the child welfare and substance abuse systems need a response from both systems that recognize their unique needs as parents in need and individuals with substance abuse issues. We believe the SAMHSA's (2012) *Ten Guiding Principles of Recovery* (<http://store.samhsa.gov/shin/content//PEP12-RECDEF/PEP12-RECDEF.pdf>) provides a family-friendly framework that recognizes parent and family strengths and recognizes hope as an essential ingredient to recovery success. The Strengthening Families™ Protective Factors Framework can help guide child welfare workers in focusing their efforts to help parents with substance abuse issues build their own protective factors. These two frameworks are compatible and provide a holistic and integrated approach to promoting the long-term success of families.

"About a year into sobriety, I realized that I knew very little about how to live and grow. Luckily for me, I began learning about the importance of creating protective factors in my life. I began to talk more to providers, uncover causes for issues and learn more about how addiction is a disease. Ultimately, I began to believe in myself and learn new skills. As I continue to grow, I better understand how important the protective factors are in supporting me in my recovery and maintaining sobriety. Working to strengthen my protective factors is part of my daily routine."

Corey, Birth Parent, Florida

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National Alliance of Children's Trust and Prevention Funds, *Bringing the Protective Factors to Life in Your Work*. Access the free online training here: <http://www.ctfalliance.org/onlinetraining.htm>

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About the Birth Parent Advisory Committee (BPAC)

The **Birth Parent Advisory Committee (BPAC)** is a select group of parents from across the country that have a range of expertise and personal experiences within the child welfare system. They serve as strategic partners with Casey Family Programs and the Alliance. The BPAC members serve in a variety of leadership roles such as parent

mentors, policy advocates, grassroots organizers and organizational administrators. They utilize their advocacy skills to ensure that the voices of parents are heard in the development of policies and practices that affect families.

About the Birth Parent National Network (BPNN)

The **Birth Parent National Network (BPNN)**, is a national platform for birth parents to work in partnership with organizations and policymakers to share their life experiences and make recommendations to improve policies and practices that impact children and families. The goal of the BPNN is to strengthen and support families and improve outcomes for families at risk or involved with the child welfare system. Our network currently includes about 170 parent and organizational members and we are continuing to grow. If you wish to make a difference locally, in your

state or at the national level, join the BPNN. To learn more about this dynamic national network visit the BPNN website:

bpnn.ctfalliance.org

To join the BPNN, submit your membership application to:

bpnn.ctfalliance.org/applications

For questions, please email us at info@ctfalliance.org



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