

The Impact of Parental Substance Use Disorder on Children: Understanding the Dynamics

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Substance Use Disorder has a detrimental effect on children growing up in that home. From decades of research and clinical observations, there are numerous ways in which parental substance use disorder can harm children's emotional and mental well-being. Parental sobriety benefits the children's overall health. There seems to be an expectation that parental recovery automatically transforms the lives of these children.

Therapists and researchers who work with families in recovery recognize that children do not passively recover. Early recovery often presents as a traumatic experience for everyone in the family. The parent with SUD typically seeks treatment and enters rehab in response to another crisis, sometimes even a catastrophic one. Whatever the catalyzing event, it is devastating not just for that person but for everyone in the family. The identified patient (and perhaps their spouse) receives attention and assistance as the children cope by themselves. Typical Family dynamics of active substance abuse disorder often involve an obsession with the substance-using loved one. Neglect, present during the progression of SUD, often persists into early recovery, where the focus remains on individual substance use disorder recovery.

Recovery represents a paradigm shift and significant changes throughout a system's balance, structure, and functioning. It shakes up the system entirely. Calm, stable, predictable routines replace chaotically disrupted family habits in early recovery. These changes are favorable for the overall recovery of the family, including the children, but are often insufficient for the emotional and psychological recovery of the children.

Children who have only known a chaotic, conflicted, and unpredictable family system suddenly find that everything they thought they knew about

life has changed. All family members are supposed to alter their interaction patterns and work on their recovery. Roles and responsibilities are often renegotiated and restructured within the system. The children are a part of all these changes and should be part of discussions about change.

Lack of communication and instruction is especially problematic for children who assume adult responsibilities during active substance use.

In recovery, these children are tasked with returning to being children, letting go of their worries about family finances, and relinquishing their parental roles. They now have an early bedtime instead of staying up as late as they want. They are expected to attend a "sit-down family meal" even though they still prefer a "happy meal" in front of the television. While these changes in family routines may represent parents' attempts to restore appropriate structure to family life to the children, they are simply changes that may take away something they enjoyed and just one more thing to deal with.

Individual parental recovery may also involve closer monitoring or supervision of the children and their activities. Resistance meets increased scrutiny. Children growing up with substance use disorder in the family often see themselves as more mature than their peers. They may not believe they need as much parental guidance as other kids. To further complicate the changing dynamics of parenting in recovery, many individuals with substance use disorder and their spouses grew up in addicted families and are generally ill-prepared to provide appropriate parenting to their children.

Recovery does not automatically grant life skills; instead, it offers an opportunity to learn them. The children are present throughout this learning process while their parents strive to lead healthy and responsible lives. Newly recovering parents can support their children's recovery by considering their needs at every step.

Sometimes, other non-drinking family members seek help before the person with SUD. When that happens, members with recovery experience

can be a beacon for obtainable individual recovery for the rest of the family -- regardless of whether the person with substance use disorder ever stops drinking or using.

Someone in the family has to be first in recovery. Their initial efforts may involve breaking all the old rules. The former rules of "don't talk," "don't trust," and "don't feel" are replaced with an open invitation to "talk to me about what you are thinking and feeling." Instead of making excuses for problematic behavior in the family, a recovering person can listen patiently and let others know that someone hears them.

Instead of treating a child who accurately identifies the problem (such as the parent's drinking) as a traitor, recovering family members can model openness and encourage risk-taking and sharing of feelings. Rather than denying the child's perceptions and emotions, a recovering person knows to acknowledge and affirm them.

People in recovery seek to be truthful and to admit their mistakes. Recovering parents educate their children about addiction based on each child's level of understanding. They prepare their children for the changes that will occur during recovery, informing them that everyone involved is uncertain about how these changes will unfold. Parents must reassure their children that they will be cared for and that the family's changes are for their well-being.

Individual and family dynamics of active substance misuse often involve suppression of feelings. Children who have not learned to recognize, acknowledge, and express their emotions may act out these pent-up feelings. During family recovery, the children may fight, rebel, and engage in other disruptive behaviors. To appropriately tackle such issues in recovery, parents must set aside their unresolved guilt long enough to address each incident adequately. Parents who attempt to problem-solve these issues from a place of guilt may struggle to hold their children accountable for their behavior or establish and maintain appropriate boundaries. Many parents who grew up in dysfunctional families have no idea what constitutes reasonable responses to these and many other parenting scenarios.

Recovering individuals and their spouses are often unfamiliar with responses that fall between two polar extremes. As a result, recovering parents may oscillate between complete absence of supervision and limits to extreme rigidity and strictness. This approach only confuses the children and sets the stage for more conflict within the family. Recovering parents must embrace learning new parenting skills and experimenting with unfamiliar techniques that may initially seem strange to them.

Pre-adolescent and adolescent children may experiment with alcohol or drugs. Recovering parents may resist addressing their children's substance use due to fears of appearing hypocritical, the belief that such behavior is "normal" for teenagers, or their reluctance to confront their issues. For some parents, adolescent substance abuse is considered normal within their family culture.

Healthy family systems discourage adolescent substance use. The age at which someone first uses alcohol or other drugs, genetic predisposition, observational learning, and other individual and family dynamics significantly influence the likelihood of developing addiction. Children growing up around problematic substance use face a heightened vulnerability to becoming addicted themselves.

Both parents should address the issue of trust. Just as the non-substance-using spouse may continue to doubt their loved one's ability to stay clean and sober, the children may also struggle with confidence regarding the drinking or the return of old behaviors from both parents. Parents should not punish children for expressing this lack of trust or other concerns. Parents can teach children the steps being used to maintain their recovery progress and permit their children to alert them if they observe any regression. Of course, parents themselves are responsible for monitoring their recovery and consistently demonstrating trustworthy behavior. Trust returns the same way it is lost — gradually, over time. Like the non-substance-using parent, children will observe reliable behavior over time, and trust returns in increments. Methods of addressing these issues should suit each child's specific needs.

Parents who lack knowledge of children's developmental stages should educate themselves on the subject and seek assistance with parenting challenges through couples counseling or continuing care in outpatient counseling. Treatment plans can target replacing old dysfunctional parenting behaviors with the development of new, healthy parenting skills. Family recovery takes a lot of work, but the rewards can extend across generations.

Family Feelings Meetings:

A Brief Lesson

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