

Identifying and supporting children affected by parental substance use

Resource for schools

How can schools identify and support pupils affected by parental substance misuse?

This resource has been developed for the Alcohol and Drug Education and Prevention Information Service (ADEPIS) by Adfam, the national umbrella organisation for those working with and for families affected by drugs and alcohol, and is intended to be a useful tool to help schools in safeguarding their pupils.

ADEPIS is a project funded by the Department for Education which aims to provide good practice and evidence-based examples, and useful resources for the delivery of effective drug and alcohol education in schools.

The purpose of this resource

When schools and teachers think about 'drugs', they may often initially focus on incidents on school grounds and how to respond to them, students at risk of using substances, or perhaps about drug education.

However, substance use can impact the lives of young people in many ways, especially if they are affected by problematic drug or alcohol use in their own homes. This resource aims to summarise the key issues for children affected by parental substance use, and how schools can consider supporting them.

It is aimed primarily at school governors and headteachers, but will also be relevant to members of staff with particular pastoral care duties, including school nurses, Education Welfare Officers, and anyone identified as a Designated Senior Person (DSP) for child protection in schools.

Key messages:

- Parental substance use is not a problem that schools can 'solve' alone, nor is it an issue they should turn a blind eye to
- Schools have both the responsibility and the ability to support children affected by parental substance use
- Safeguarding is a matter of child welfare, not drug and alcohol expertise
- Existing structures/policies cover most of this work already, but added focus is needed



Key Points

Governors

Schools have a duty of care to all pupils, and support for especially vulnerable children is a stated focus of Ofsted inspections.

- What is the school's policy on supporting vulnerable pupils?
- Is there a policy for identifying and supporting children who may be affected by parental substance use? How do you know this policy is working?



Headteachers

Schools can be a safe haven for children whose home lives are chaotic, and provide a structure they may lack elsewhere. Schools can identify children early and play a positive role in building their resilience and self-esteem.

- What arrangements are there in school to identify and safeguard the wellbeing of pupils who need help because of someone else's substance use?
- Is substance use covered in teacher training courses?
- What procedures are there in place for engaging the parents and carers of vulnerable children?
- Is there a named lead for issues relating to parental substance use in the school?

Teachers and other school staff

Teachers should be continually vigilant for signs of neglect and abuse in children, and background causes may relate to substance use in the household. Teachers may also be trusted by children in a way that other professionals are not.

- Do you know about the impacts of parental substance use, or the possible indicators?
- Would you know what to do if a child disclosed that their parents used drugs?

Resource for schools

Background

No school should assume that none of its children's parents have serious drug problems'

- Advisory Council on the Misuse of Drugs, Hidden Harm

The Advisory Council on the Misuse of Drugs report Hidden Harm estimated that 2-3% of children are affected by problematic parental substance use. This would suggest there may be half a dozen children in an average primary school whose parents use drugs, and nearly 30 in a typical secondary school – the equivalent of a whole class. These estimates only cover parents with serious dependencies on heroin and crack cocaine, and do not account for children affected by alcohol or other drug use in the household, so they underestimate the scale of the problem.

'Ofsted take particular interest in the experiences of more vulnerable children during inspections'

- Edward Timpson, Minister of State for Children and Families (speech)

The key message, therefore, is that this does apply to **every school, and every school has a responsibility to be aware of these children's needs.**

The experiences of children

Whilst some of the impacts of parental substance use on children may be drug-specific – safety issues in the home, for example – the majority are not. Most challenges will be shared by children with other vulnerabilities: teachers and other school staff will already be familiar with them, and there will likely be training, policies and procedures in place for managing them. Parental substance use and its impacts on children, therefore, fall well within the sphere of schools' existing pastoral care responsibilities, and should not be seen as threatening or as 'someone else's job'.

The impacts of parental substance use on children are quite well-documented, but also numerous and complex. Substance use does not exist in a vacuum and children suffering its effects are likely to be

subject to a number of other challenges and vulnerabilities in their home life, including:

- Neglect
- Disruption of household routines
- Inadequate supervision
- Physical and emotional abuse
- Impaired or inappropriate parenting practices
- Poverty
- Exposure to drugs and drug-taking equipment in the home
- Domestic violence.

Their experiences may also be marked by:

- Love and loyalty - being protective of parents
- Reluctance to disclose problems at home, and uncertainty of who to talk to
- Psychological distress
- Fear of intervention by 'officials'
- Guilt, shame, and stigma
- Sadness, isolation, and depression
- Anger and frustration
- Fear and anxiety (for their parents' safety, or that they will 'end up the same').

Children whose parents use drugs or alcohol may also have young caring responsibilities, either for their parents directly or for siblings.

'Many young carers come from hidden and marginalised groups, including children caring for family members with mental illness or a substance dependency'

- Children's Society, Hidden from View: the experiences of young carers in England

Age-specific impacts

Living with parents who use substances can have varying impacts depending on many factors, including age.

Age	Impacts			
	Health	Education and cognitive ability	Relationships	Emotional/ behavioural development
5-9	School medical checks missed	Poorer school attendance, preparation, and concentration due to parental problems and unstable home situation	Restricted friendships Excessive responsibility for parent(s) or siblings	More antisocial acts by boys; depression, anxiety, and withdrawal by girls
10-14	Little parental support in puberty Early smoking, drinking, and drug use more likely	Continued poor academic performance e.g. if looking after parents or siblings	Poor self-esteem and low self-image	Emotional disturbance, conduct disorders (eg bullying, sexual abuse) all more common Higher risk of offending and criminality
15+	Increased risk of problem alcohol and drug use, pregnancy or sexually transmitted diseases	Lack of educational attainment may affect long-term life chances	Lack of suitable role model	Greater risk of self-blame, guilt, increased suicide risk

(Source: Hidden Harm)

Not all of these impacts are necessarily drug-specific, so it should be possible to fit responses into existing policies and thresholds on child protection and safeguarding. As Hidden Harm notes, ‘the children of drug-using parents will not be unique among vulnerable young people at school’. Knowledge of parental substance use, therefore, should be seen as part of a school’s overall safeguarding responsibilities and not as something extra or separate. However, there is a need to recognise the implications for staff training, assessment and case management procedures, and for inter-agency liaison with other local services, including any which work specifically with this group of children.

It is also important to remember that not all children affected by parental substance use will obviously be suffering from problems like abuse and neglect. Similarly, not all children who show signs of disrupted home life will have a substance user in their family.

‘It is important to recognise that the most frequent issues and concerns regarding the family in relation to neglect relate to parental capability [which] can be a consequence of...substance misuse and addiction’

- NSPCC, The role of schools, academies and colleges in addressing neglect

Key questions:

Are teachers aware of the key impacts of parental substance use on children?

What is the school’s policy on supporting vulnerable pupils?

‘Schools should ensure teachers and practitioners are trained to identify and assess the early signs of anxiety, emotional distress and behavioural problems among primary school children. They should also be able to assess whether a specialist should be involved and make an appropriate request’

- National Institute for Health and Care Excellence, Social and emotional wellbeing in primary education

Impacts on school life: indicators for teachers and other staff

‘The children who are most vulnerable are those whose parents are violent, aggressive, neglectful or rejecting. These children can remain “invisible” from the services intended to support them unless their behaviour attracts attention at school, college or elsewhere outside the home.’

– Department for Education, Safeguarding Children and Safer Recruitment in Education

Schools and teachers often have a window into these children’s lives that other services do not. They are also in a good position to recognise the children’s needs and be led by them, rather than focusing on the specifics of the parents’ situation.

‘Schools are particularly well placed to notice children and young people in need of help and also to notice those where there are more serious concerns about their safety’

- Professor Eileen Munro, The Munro Review of Child Protection: Final Report

Many of the indicators discussed here will be exhibited by children experiencing other vulnerabilities, and teachers should already be on the lookout for signs of abuse or neglect in their everyday work. Schools and teachers should be especially vigilant around young children who are already known to be vulnerable, as they may not be aware that the background cause could be related to alcohol or drugs.

In a school setting, the impacts of parental substance use may be manifest in subtle and different ways, and are not always marked by serious individual incidents. Possible indicators include:

- Isolation – finding it hard to socialise, make friends or invite them home
- Difficulties completing homework on time
- Bullying (including due to poor physical appearance)
- Poor attendance or late arrival
- Tiredness or lack of concentration
- Lack of engagement or interest from parents (e.g. non-attendance at parents’ evenings)

- Unavailability for school clubs or trips
- Academic underachievement
- Behavioural difficulties.

There may also be risks of children mimicking their parents' behaviour and coping strategies, including the possibility of violence if there is domestic abuse in the house, or beginning to use substances themselves.

Whilst generalisations should be avoided, substance use may also be a factor in the lives of children who are cared for by other members of their family – especially grandparents – or those growing up in foster care. According to Grandparents Plus, almost half of grandparent carers took on the role because of substance use in the family.* Being cared for by people other than parents can also be a cause of bullying in itself.**

If children do not wish to disclose to school staff, information should still be available (in school libraries and other visible spaces) on other sources of support, including local young carer support services and any organisations working with children affected by parental substance use.

Key question:

What arrangements are there in school to identify and safeguard the wellbeing of pupils who need help because of someone else's substance use?

What these children need

Key question:

How can your school support children when there is known to be a problem with drugs or alcohol in their family?

Key question:

Do you know all the children in school who do not live with their birth parents?

As noted previously, young caring responsibilities can be a major factor in the lives of children affected by parental substance use. Some of the indicators above, such as poor attendance or late arrival at school, may be explained by inappropriate or time-consuming responsibilities in the home rather than poor behaviour or a lack of discipline.

There may be opportunities for children to self-identify if they feel comfortable doing so. This may be to a trusted teacher or other member of staff, and there may be specific opportunities for disclosure, for example following drug education lessons. It is important that teachers and other members of staff know the school's procedure for action or follow-up in such cases, and feel comfortable with how to respond to the child after such a disclosure – this should be set out in the school's drug policy.

'Primary schools should provide specific help for those children most at risk (or already showing signs) of social, emotional and behavioural problems'

- National Institute for Health and Care Excellence, *Social and Emotional Wellbeing for Children and Young People*

Whilst some support for children affected by parental substance use may require specialists who recognise the unique nature of the family situation and provide a more intensive service, it is important to demystify some of the issues to ensure that teachers and other school staff do not avoid engaging with the issue purely because drugs are a verified or suspected element of the child's home life. In most cases, support needs for children affected by parental substance use will mirror the needs of vulnerable children more generally.

Children affected by parental substance use value reassurance that:

* Grandparents Plus (2010) *What if we said no?*

** Buttle UK/University of Bristol (2013) *The Poor Relations? Children and Informal Kinship Carers Speak Out*

- they're not alone
- they aren't to blame
- they're not betraying anybody by talking about it.

They may also benefit from:

- somewhere quiet to relax
- extra support with school work
- identified special teachers to talk to
- knowing other children whose parents use drugs/ alcohol
- school nurses to check they're OK, do home visits, and meet their family
- access to existing programmes like breakfast/after school clubs, careers advice, and extra-curricular activities.

'School may represent a safe haven for these children, the only place where there is a pattern and a structure in their lives'
 - Advisory Council on the Misuse of Drugs, *Hidden Harm*

It is important to evaluate the success of support work undertaken with these children. A number of tools exist to measure wellbeing, such as Outcomes Stars or the Well-Being Measure; there are also more specific tools which examine the experiences of young carers, including the Multidimensional Assessment of Caring Activities (MACA) and Positive and Negative Outcomes of Caring (PANOC). It is up to schools to decide which are most appropriate in measuring the wellbeing of vulnerable pupils, but a variety of tools exist to examine issues like behaviour, anxiety and depression, coping skills and happiness in young people*, mostly in the form of simple questionnaires.

Engaging the family

Parents

Having a substance use problem does not mean that parents don't care about their children, or that they are automatically resistant to positive involvement with the child's education. If they are accessing treatment, for example, they may be attempting to re-take a positive parenting role and be receptive to support in undertaking this. Having a non-teaching family link worker can help in these cases.

*See, for example, Adi *et al*/University of Warwick (2007) *Systematic review of the effectiveness of interventions to promote mental wellbeing in children in primary education*

Engaging parents can fit into existing practice: if there is a parental liaison lead in school, they will already be working on engaging with families where the children's behaviour is a cause for concern. Similarly, there may be a Parent Support Adviser (PSA) working in the school or across the Local Authority, whose remit can cover some of this work.

Carers

Children may also be cared for by other people if their parents use drugs. This includes foster carers, but also means close family members, neighbours or friends; it can be a legal arrangement or it might be much more informal. Schools should be aware of the challenges that these carers face, and recognise the extra strain that substance use can place on families – especially if grandparents are dealing with the day-to-day challenges of their children's behaviour on top of taking a caring role for grandchildren.

Key question:

What procedures does the school have in place for engaging the parents and carers of vulnerable children?

The role of a school drug policy

As well as laying out responses to drug incidents in school and illustrating approaches to drug education, a school drug policy should also make reference to identifying and supporting children whose parents use drugs. If parental substance use is disclosed or discovered, it should be clear what action is to be taken next. Simple knowledge of the situation does not in itself improve outcomes for the child.

Key question:

Do you have a policy for identifying and supporting children who may be affected by parental substance use? How do you know this policy is working?

A school drug policy should:

- clarify the support available to pupils whose own drug or alcohol use, or that of a family member, is causing concern, including screening and referral or signposting to external agencies
- give clear procedures for handling disclosures of children relating to parental substance use
- include protocols for assessing pupils' welfare and support needs and when and how to involve other sources of support for the child such as Children's Services, services commissioned by the DAAT and, where appropriate, the family
- illustrate critical incident plans and clear arrangements for liaison with Social Services
- define significant harms in terms of child protection, and illustrate when to invoke child protection procedures
- set the boundaries of the schools' responsibilities, and show when and how to involve other agencies
- identify named members of staff to oversee and coordinate drug issues, and their roles and responsibilities
- define the learning that children receive on drug prevention, and how it meets quality standards
- Identify local support structures for children whose parents use drugs and alcohol.

There will also be crossovers with other policies, such as those for vulnerable children and young carers, where schools have them in place. Such policies should be backed up by teacher training to ensure that school staff fully understand the relevant procedures.

'Schools will be alert to behaviour which might indicate that the child is experiencing difficult home circumstances'

- Association of Chief Police Officers/Department for Education, *Drug Advice for Schools*

The role of school staff

'[Teachers] may be unaware that the child's parent or parents have drug problems. If they are aware, they may not realise the particular implications for the child. If they realise the implications, they may well not be aware of possible solutions or their role in these'

- Advisory Council on the Misuse of Drugs

Parental substance use is something which all teachers should have at least a basic understanding of, and it should be covered in teacher training and ongoing professional development. But different members of school staff will have varying responsibilities relating to safeguarding, including school nurses, counsellors, Education Welfare Officers and designated child protection leads. There will also be different relationships with other local services, including Children's Services, treatment agencies and, where available, specific support services for the children of drug or alcohol users. There should be at least one nominated member of staff able to deal with problems related to parental substance use. This role may or may not cross over with other named leads for drug issues or child protection.

Key question:

Is there a named lead for issues relating to parental substance use in the school?

Just as schools may provide a form of structure lacking from their home life, individual teachers may also represent a positive relationship the child is missing. A trusting, caring relationship with an adult can be a key protective factor for children, and this role can, where appropriate, be taken by a teacher or other member of school staff.

There should be an understanding within the school of issues relating to confidentiality and disclosure, and what does and does not need to be reported to outside agencies (including Children's Services) according to local thresholds. This is a complex area of practice, and the impact on the child is not directly proportional to the level of substance use by the parent. Focus should remain on the child's welfare and the child's needs, rather than on the extent of parental drug or alcohol use. Again, focusing on the needs of the *child* simplifies the process for professionals who may not be experienced or confident in assessing problems associated with substance use.

Summary of key questions

Whilst parental substance use is not a problem which schools alone can 'solve', nor is it an issue which they can ignore.

By addressing the key questions below, schools should put themselves in a strong position to identify and support children affected by drug and alcohol use in their family.

Do you have a policy for identifying and supporting children who may be affected by parental substance use? How do you know this policy is working?

Are teachers aware of the key impacts of parental substance use on children?

Is there a named lead for issues relating to parental substance use in the school?

What is your school's policy on supporting vulnerable pupils?

Do you know all the children in school who do not live with their birth parents?

What arrangements are there in school to identify and safeguard the wellbeing of pupils who need help because of someone else's substance use?

What procedures does the school have in place for engaging the parents and carers of vulnerable children?

Further resources

Sample questions for teachers

The following examples could provide a useful template for teacher training exercises with school staff, and can help to embed learning based around a school policy.

Please discuss your responses to the following situations:

- a parent comes to school to collect a child, and smells strongly of alcohol
- a pupil is worried about his older brother smoking cannabis and wants to find out whether this is dangerous without getting him into trouble
- a pupil has been coming into school pretending to drink alcohol and acting drunk
- a pupil asks a teacher about injecting drugs, giving the impression she has seen this at home
- a staff member overhears a pupil discussing a family member who smokes cannabis
- a parent is suspected of being under the influence of drugs on school premises
- a pupil discloses a parent, relative or friend is using drugs

Questionnaire to assess staff understanding of procedure

	Totally agree	Agree	Not sure	Disagree	Totally disagree
I would know what action to take if a pupil disclosed parental alcohol or drug misuse					
I understand the school's policy on confidentiality and know who to report child protection concerns to					
I know what the procedure would be if a parent was under the influence of drugs or alcohol on school premises or when collecting their child					



Local organisations

Parental substance use can be both a result and cause of a number of different vulnerabilities, and a range of local organisations have a stake in improving outcomes for children affected by it. School staff responsible for leading work in this area should be aware of the local make-up of services, and procedures for making referrals. Effective responses may often be multi-agency in nature, including (but not limited to):

- Social Services
- Drug and alcohol treatment agencies
- Young Carers services
- The police
- Local Safeguarding Children Boards
- Services specifically for children affected by parental substance use (where available).

National organisations

A number of national organisations can also provide information and guidance which schools would find useful, including:

- ADEPIS (Alcohol and Drug Education and Prevention Information Service) – www.mentor-adepis.org
- Alateen – www.al-anonuk.org.uk/alateen
- Carers Trust – www.carers.org
- COAP (Children of Addicted Parents and People) – www.coap.org.uk
- Grandparents plus – www.grandparentsplus.org.uk
- Mentor UK - www.mentoruk.org.uk
- The NSPCC – www.nspcc.org.uk
- NACOA (National Association for the Children of Alcoholics) – www.nacoa.org.uk
- The STARS National Initiative (managed by the Children's Society) – www.starsnationalinitiative.org.uk
- TES – www.tes.co.uk/teaching-resources

Interventions

Whilst there are other organisations and interventions aiming to work directly with children affected by parental substance use, this resource focuses on the

roles and responsibilities of schools themselves. However, for those in need of further information, training and interventions for this group of children can be provided by:

- Addaction and the Amy Winehouse Foundation: *Resilience Programme* – www.amywinehousefoundation.org/resilience-programme-for-schools
- Action on Addiction and Place2Be: *M-PACT Plus* – www.actiononaddiction.org.uk