



University  
of Glasgow

**‘The Gorilla in the Cupboard’**

**Pompidou Group Conference**

**‘Families, Lifestyles And Drugs – Reaching  
Families in Prevention**

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*Joy Barlow*

*MBE*

*STRADA (Scottish Training on Drugs and Alcohol)*

SCOTTISH TRAINING  
**STRADA**  
on DRUGS & ALCOHOL

# “We are Family”

*(Sister Sledge)*

- Importance of Family *(Merikangas, Dierker & Fenton (1998); (Kumpher et al 1998)*
- Other significant family members *(Stanton & Laudau Stanton (1990)*
  - Sources of support *(Barnard (2006)*
  - Role models for drug use *(Barnard (2006)*

- Inappropriate socialisation within families – pre-cursor to anti-social behaviour and predictor of later substance misuse (*NIDA – National Institution on Drug Abuse 1997*)
- Velleman et al – correlation not causation. Important to involve families in prevention.

**But how?**

- Successful retention of parents in programmes
  - use networks of schools and communities
- Information based
- Development of skills in listening and communication
- Parents reported more broad support including increase in self-confidence, parenting skills

*(Velleman et al 2000)*

- Behavioural parent training
- Family skills training
- Family therapy

*(Kumpher & Alvarado (2003))*

- 10 – 14 year olds
- Provision of guidance on:
  - Family management
  - Communication
  - Academic support
  - Parent – child relationships

*(Spoth et al 2002)*

- Delayed initiation of alcohol and cannabis use
- Youth resistance to peer pressure to use alcohol
- Reduced affiliation with anti-social peers
- Reduced levels of problem behaviours

Interactive approaches more effective

*(Kumpher & Alvarado 2003)*

- Development of positive family functioning
- Improved parent – child relationship
- Development of increasing family resilience
- Programmes which involve parents and children – both separately and together may work best

*(Velleman et al 2005)*

## “The Gorilla in the Cupboard”



“Far from being the basis of the good society, the family, with its narrow privacy and tawdry secrets is the source of all our discontents *(Leach 1967)*”

# Hidden Harm

## Responding to the Needs of Children of Problem Drug Misusers

Advisory Council on the Misuse of  
Drugs PWG Inquiry

- Increase in concern regarding children affected by problematic parental drug misuse
- Estimate numbers affected
- Examine the consequences for children from conception to adolescence
- Consider the involvement of relevant services
- Identify best policy and practice
- Make recommendations

- Estimated 200,000 - 300,000 children of problem drug users in the UK - about one for every problem drug user
- Parental problem drug use can and does cause serious harm to children at every age from conception to adolescence
- Reducing the harm to children from parental problem drug use should become a main objective of policy and practice
- Effective treatment of the parent can have major benefits for the child
- By working together, services can take many practical steps to protect and improve the health and well-being of affected children
- The number of affected children is only likely to decrease when the number of problem drug users decreases

## CONCLUSION OF REPORT

- The number of children and how they are affected may come as a surprise
- Many of the aspects of the harm to these children are hidden from view and consequences are often severe and long lasting
- Children deserve to be helped in their own right
- Many services have a part to play - need to be co-ordinated in approach
- Training and development of resources
- It is imperative to seize policy and practice opportunities

- Impaired parenting capacity- (*Kandel 1990*)
- Emotional distance- (*Barnard & Barlow 2003*)
- Risk of abuse and neglect- (*Forrester 2000*)
- Lack of parental attachment- (*Cleaver et al 1999*)
- Disruption of household routines- (*Tunnard 2002*)
- Lack of attention to medical needs- (*Shulman et al 2000*)
- Parent by negative commands- (*Hien & Honneyman 2000*)
- Unpredictability of parental response- (*Barnard 2006*)
- Parents' lives characterised by chronic adversity, troubled family history; co-morbidity (*Beckwith et al 1999*)

## Effects of parental problem drug use on children:

- repeated separation
- role reversal
- social isolation
- disrupted schooling
- early exposure to - socialisation into illegal drug use and criminal activity

*(Barlow 2001 Master's Degree Thesis)*

## DISTURBED HOUSEHOLDS

“IF she’s rattling...she’ll go out and she’ll buy something...I’m always in the house watching Liam (brother aged 3),...like she’ll say she’s just going to the shops but then she comes back 2 hours later and goes straight to the toilet...and she’ll be like out of her face in 15, 20 minutes”

*(Leonie, 13 years – Barnard & Barlow (2002))*

“I walked in on them once when I was a wee boy and I saw them (mum, aunt and uncle) takin’ stuff. Aye and other people that were in the house taking it...like on tinfoil...tooting. That’s the first time I caught them and they jus’ started doing it in front of me, didnae hide it then”

*(Dan 15 years – Barnard & Barlow (2002))*

“These guys who used to buy stuff off ma uncle, they all burst in and were holding knives up to our throats and that, asking for the drugs and the money and they were sayin’ they would cut our throats if they didnae give them it...They were holding the knife right up to my uncle’s neck as well, they were just screwy”

*(Dan, 15 years – Barnard & Barlow (2002))*

## ROLE REVERSAL

“I’d be left with Ian (4 years) and I had to take care of him but she (mother) didnae really know. She’d come round for a wee while and wake up and all that but then she’d go and take more stuff and she’d be sort of out of it and she couldnae even bloomin’ boil a kettle or something to make milk or something...and like ma pals, they’d come up for me and I jus’ wouldnae go out to play cos’ I was scared for ma wee brother...what would happen like if she dropped her fag or something cos’ she’s nearly set the house alight with her fag I don’t know how many times”

*(Leonie, 13 years – Barnard & Barlow (2002))*

“When she was taking drugs I did used to block it out, I used to get slagged at school...’cause I didnae have any good clothes and ...I was (called) a black-neck [laughs] ‘Cause yer neck wasn’t washed... They used to say like ma Ma was a junkie and all that to me as well”

*(Orla, 19 years – Barnard & Barlow (2002))*

“I just used to have this fear that she was gonnae die. There would be a rocking chair at the kitchen and I remember times when I could hear the rocking chair rocking and that’s when she’d be sat down injecting and she’d sit on the rocking chair”

*(Ruth, 17 years – Barnard & Barlow (2002))*

“I was looking about for them ‘cos they said they’d come but they never...I thought they must no’ care about me then...things like racing, yer school sports and they said they would come but they never...when I think about it now, it was like heartbreaking...it wasnae very nice”

*(Susan, 14 years – Barnard & Barlow (2002))*

- Discrimination and stigma
- Aetiology – risk factors facilitating addictive behaviours and effect on parenting
- Parents ‘not being there’
- Under-identified and unacknowledged
- Incipient concerns and potential for acute traumatic experiences
- Long term ‘hidden harm’

# Voices of Parents

*(Renfrewshire 'Getting Our Priorities Right' Training – Reference Group)*

“you’re in your own wee world ...you don’t care  
....you don’t think about the effect on your kids”

*(Diane 41, mum of 4 children)*

“You don’t realise its happening...my wee boy started missing school on Thursdays and Fridays – cause I had no money – I would have to sleep during the day ..... sleep the day away ...I didnae realise until a year later that this was happening”

*(Claire)*

“You’re telling them to sit in another room.... You think they don’t know but they do know – and we think we are hiding them away. They re havin’ a wee look anyway. You don’t think about it at the time”

*(Diane)*

“I’d went to see them when they were in care. I’d went to give ma wee girl a milky bar and my wee boy, who was 6 says ‘You’re not smoking that stuff again are you’ (because of the foil round the chocolate ) that’s when I realised he knew”

*(Claire)*

“It’s no’ bad people that become addicts and it’s no’ bad people that don’t care about their kids. It’s just people that an addiction has got a grip of and that is more powerful than anything, even the love that a parent has would have for their children. It just overrules even that”

*(Parent – Barnard & Barlow (2002))*

- Distortion of family roles
- Relationships between parents
- Mothers as mediators
- Siblings – the ties that break and bind

*(Barnard 2006)*

- Early identification and intervention
- Effective treatment for parents
- Working with young people and parents together and separately
- Specialist provision? –  
who/where/how/when
- Recognition of a range of vulnerabilities

- Treatment for adolescent high risk behaviour, substance misuse and delinquency
- Outpatient – family based drug misuse treatment

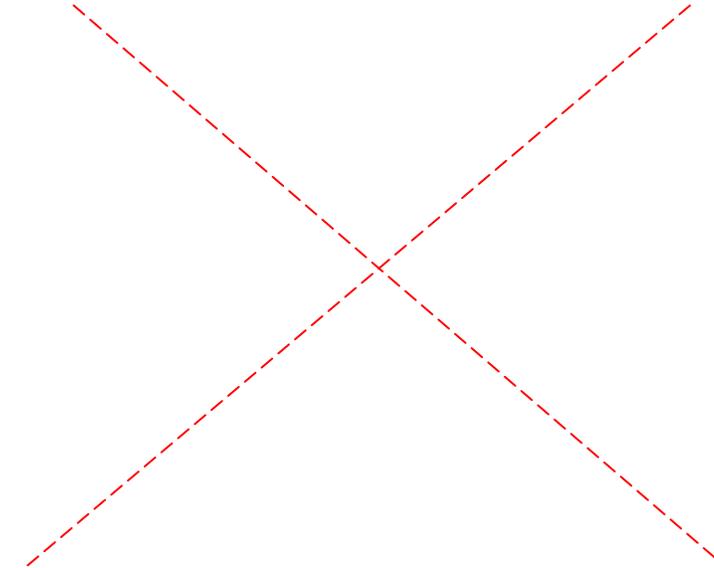
# Four Main Corners

Young People

Parents

Family

Extra familial



- Key actions
- Role of therapist
- Stages of treatment

# CONCLUSIONS

- Vulnerable young people often live in vulnerable families
- Few families actually wish cycle of substance misuse to continue – but feel powerless
- Support and challenge required during programmes
- Establish effective ways to problem solve – big problems!
- Acknowledge what is good
- ‘Rough around the edges’, outcomes
- Future ‘Bumps in the road’

## STRADA contact details are:

- **Email: [strada@gla.ac.uk](mailto:strada@gla.ac.uk)**
- **Phone: 0141 330 2335**
- **Web-site: [www.projectstrada.org](http://www.projectstrada.org)**