

Helping everyone affected by a parent's drinking



## Information for CAMHS Professionals

S FREE Helpline 0800 358 3456 helpline@nacoa.org.uk



Patient information awards Highly commended



Katy Stafford Head of Nursing, Acute Care at Sussex Partnership NHS Foundation Trust

As mental health services, it is important we understand what is happening for young people, not just in that moment, but more widely in their homes and lives. As you will read in this booklet, being

the child of an alcohol-dependent parent can be detrimental to a young person's mental health and increase the chances of the young person requiring your care.

It is important to understand what the mental health needs might be, why the needs are there, and might be different to someone who is not the child of an alcohol-dependent parent. This will help us to be best equipped to respond to those needs and care for children affected by their parent's drinking.



Hilary Henriques MBE CEO and Co-founder of Nacoa

Nacoa was set up in 1990 to provide information, advice and support to children affected by their parent's alcohol problems.

We've responded to hundreds of thousands of requests for help from children as young as five who find the courage to call or email the

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Nacoa Helpline. The vast majority of callers live with parents who do not acknowledge or seek help for their problems. They know they can remain anonymous, talk about what they want, in their own time, and without judgement or time limits.

Our work is all about planning for a more positive future. An opportunity for children and young people to see that the world can be different from the one they've always known and that they can, with help, go on to live happy and fulfilled lives and break the cycle of addiction.



## Alcohol problems do not only affect the person drinking, but everyone around them, including family and friends.

As the person drinking organises their life around alcohol, family members adapt to cope with both the drinking and associated behaviour. These problems are often a taboo subject and become the family secret as each member of the family—including extended family members—collude to keep the problem hidden from the outside world in an effort to keep the family together.

The family rules **don't talk**, **don't trust**, **don't feel** develop to protect the illusion of a 'normal' family.

The impact can be especially difficult for children, who are affected even if they are not living in the same house, or if the parent no longer drinks. The effects seldom disappear once children reach the age of 18 or move away from home and, if unaddressed, continue into adulthood.

Research consistently reports that children can be affected in all areas of their life. However, studies also show that the extent to which children and others around them are able to ameliorate the negative impact of parental alcohol problems plays a significant part in their growing up to be happy and fulfilled.

Our study with 4,000+ respondents found that following:

#### Compared to a control group, these children were:

6 x more likely to witness domestic violence

4 x more likely to develop an eating problem

3 x more likely to consider suicide

- 2 x more likely to experience difficulties at school
- 3 x more likely to develop alcohol dependency as adults
  - 2 x more likely to be in trouble with the police



# How might children affected by parental alcohol problems feel and behave?

A Nacoa study with 23,000 respondents found that there may be as many as 2.6 million children living in the UK with a parent who drinks too much. The following may help you to identify these children:

- The child may be more distressed around anniversaries, holidays, or key events.
- A want/need to escape from the family home and remain in hospital, but accompanied with this can be a sense of guilt.
   Possible attempts to abscond from hospital.
- A want/need to return home to care for a parent or sibling, and a sense of fear about what is happening at home while they are not there.
- A fear about how the parent will present at care meetings and in front of professionals.
- An over-commitment to therapy and structure of the ward, in order to please the nursing/therapy team.
- A disruptiveness to others on the ward and a chaotic way of behaving.
- A complete withdrawal from engaging in any relationship with the nurse/therapist.
- A confusion in the relationship with the nurse/therapy team, uncertain what to expect when they are used to a chaotic and sometimes abusive relationship.
- Show signs of addiction themselves.

Any child may present with one or more of these features at certain times. However, the appearance of some of the above in a consistent way could alert you that the child may be living with parental alcohol problems.



## How should I respond to a young person whose parents drink too much?

- Share the purpose of admission be clear with the young person that the time is to focus them and their health.
- Be clear of your expectations of them and consistent in communicating what they can expect from you.
- Give permission for them to not be in a caring role for anyone else (e.g. parents or siblings) at that time.
- Support them to learn and gain self-grounding techniques that they can use when at home: e.g. self soothe, reassuring statements.
- Remind them that they are not responsible for other people's upset or behaviour on the ward. They may be particularly sensitive to upset and discord.
- Discuss family roles using information on page 9.
- Set clear boundaries for behaviour on the ward. If broken, then respond with a gentle and consistent response, reminding them of the boundaries and the care they will receive.
- Support them to learn alternative ways of behaving and communicating their needs and distress. Remember that the young person may not recognise what the emotions are behind their behaviour.
- Assure them that your care and treatment is regardless of how their parent may present, and they do not need to be shy or worried about the parent meeting professionals.
- Be sensitive in remembering dates that may be more difficult e.g. father days, or national holidays.
- Support the young person to access relevant services.
- Explain the cycle of addiction.
- If you feel the young person is at risk of harm in their home, be sure to undertake a multi agency services hub referral.





### **Frequent Issues**

### Lack of money

Significant amounts of money are often spent on alcohol, which may take priority over everything else. This leaves the rest of the family, sometimes one of the children, to make sure that their basic needs such as food and clothing can be met.

'The only source of income she's got is by dad giving her money, and it's unfair on him because he works so hard, and all she uses the money for is alcohol. I've told him not to give her any money because he's feeding her addiction, but I know he's only doing it because otherwise she'll give him a hard time.' (Cathy, 15)

Shortage of money during childhoood					
Children of alcohol-dependent parents	Control group				
64%	15%				

## Unpredictable behaviour — lack of structure, wild mood swings — inconsistency.

Life can be very confusing for children living in an environment where alcohol affects the behaviour of one or both of their parents. It is difficult to predict what state mum or dad will be in when they get home from school—they might be in a good mood, and wanting to do something fun; but they might be violent or irrational.

What confuses things even further is that the whole family colludes to cover up for that person's drinking, and keep it secret from the outside world. As a result, many children feel unable to take friends home as they are embarrassed about their parent's behaviour.

'Everything revolves around mum's drinking. We pretend it's not happening. I can't stop thinking about what's happening at home when I'm not there. Sometimes I think I'm going mad.' (Paul, 15)



## Aggression and violence – arguments between parents

Many children may not experience obvious forms of abuse, but suffer from neglect or a chronic lack of little things which are so crucial to the wellbeing of us all. Some are exposed to rage, violence and abuse on a daily basis, which become part of the unpredictable and inconsistent environment in which they live. Our study shows that aggression within the family environment is six times more common where one or both parents suffer from alcohol problems.

'My strongest childhood memory is one of fear. My father was a huge man and always angry. He would sit up drinking late at night. My brother, sister and I were terrified of being beaten.' (Tim, 53)

Alcohol is a factor in 40% of violent crimes committed in the UK. Office for National Statistics, 2017.

## • Silent withdrawal — anxiety and depression

Children struggling with parental alcohol problems may grow up feeling anxious, depressed, emotionally detached and socially isolated without knowing why. They feel that there is no-one to turn to, as this would amount to the betrayal of their family. Some may take on responsibilities within the family, i.e. caring for younger siblings and parents, which means that they don't have time to spend with their friends.

'My mother's drinking remains a taboo subject within our fragmented and secretive family. I am haunted by the idea that telling these dark truths is an unwarranted betrayal of my mother.' (June, 25)

Children affected...

Feel their household was not a place to be proud of: **89%** Have at some point considered suicide: **42%** 





## Guessing at 'normality'

Children who grow up around alcohol and its effects often know no alternative. This may be the only state of 'normality' that they have experienced.

'If I asked what was wrong, why dad was lying in the middle of the kitchen floor with his eyes shut, I was told 'nothing, everything's fine'. I wondered if I could see something they couldn't or perhaps this was normal. I guessed at what normal was.' (Sam, 24)

Co-dependency, or adaptation to a dysfunctional family system, is a learned behaviour which, in the absence of any other model to follow, is often passed from one generation to the next. Later in life, many children find themselves drawn towards others who have grown up in similar situations, and sometimes become dependent on alcohol themselves.

### Guilt and shame — feeling to blame

It is common for these children to feel that they have somehow caused the problem, and are to blame. Children often harbour the mistaken belief that they are responsible for their parent's difficulties, and can therefore change them. Only the person drinking has the power to change their behaviour.

'I thought I was the reason he drank. I thought that if I tried harder, was nice enough or clever enough, he wouldn't need to drink. But however hard I tried, I was never good, nice or clever enough because he always drank.' (Alice, 31)

Our study found that these children are likely to feel 6 times more responsible for conflict in the home, and 7 times more likely to try to resolve arguments within the family.



## Family roles

As the family progressively adapts to the alcohol problem, thoughts, feelings and actions become prescribed and proscribed by alcohol and its effects. The family can cope by adopting roles for family members. These roles occur in most troubled families and occasionally in healthy families in times of stress. However, the need for denial and secrecy common in alcohol-related problems ensures the roles are rigidly fixed and played with greater intensity.

Role	Motivating Feeling	ldentifying Symptoms	Pay off		Possible Price		
			For Individual	For Family			
Alcohol Dependant	Guilt, Shame	Chemical use	Relief of pain	Known/familiar behaviour	Addiction		
Spouse	Anger, Despair	Powerlessness	Importance, Self- righteousness	Responsibility	lllness, 'Martyrdom'		
Child 1 Hero	Inadequacy, Guilt	Over- achievement	Attention (positive)	Self-worth	Compulsive drive		
Child 2 Scapegoat	Hurt	Delinquency	Attention (negative)	Focus away from parental alcoholism	Self- destruction, Addiction		
Child 3 Lost Child	Loneliness	Solitary, Shy	Escape	Relief—no attention demanded	Social isolation		
Child 4 Mascot	Fear	Clowning, Hyperactivity	Attention (amused)	Relief—fun	Immaturity, Emotional illness, Addiction		
*Adapted, with permission, from the work of Sharon Wegscheider Cruse.							

The extent to which children are able to shelter themselves from the negative impact of parental alcohol problems plays a significant part in their growing up to live happy and fulfilled lives.

Although many children go on to live successful lives, the study found that in many cases their problems continue into adulthood. Some suffer greatly and fail to cope. There are also those who, despite all the odds, develop into socialised, competent, and selfconfident individuals—the so-called resilient children. However, their resilience should not be a justification for ignoring their needs.



The key to helping is to be able to recognise the nature of the child's family life. Being able to listen, understand and support will make a huge difference.

#### Breaking the Silence

- Listen in a non-judgemental way. You may be the only person the child has approached.
- Try not to react negatively when a child asks you for help. A negative response may increase the sense of isolation.
- Be sensitive to possible cultural differences which may influence how you can most effectively help.
- Do not share the child's problems with others who do not need to know, but do pass on crucial information to their care team.
- Keep the focus on the child as an individual, encouraging them to talk about their own needs, rather than those of the family.
- There may be a sense of wanting the parent to address their addiction for the sake of their child. This is not your role. It can give the child the message that they are `not enough' to stop the addiction, which causes further harm.

### **Coping with Difficulties**

Nacoa

- Don't criticise the child's parents or be overly sympathetic.
  Children gain the greatest benefit from having someone to talk to with an understanding ear.
- Encourage the child to find positive ways to express themselves, such as calling or emailing the Nacoa helpline, writing a journal (which could be kept at school), or reading about other children's stories on Nacoa.org.uk. This may help them to feel less alone.
- Help the child to identify 'safe places' where they can be supported in learning grounding techniques and self assurance.
- Provide factual information about alcohol and associated problems—Nacoa.org.uk and AlcoholChange.org.uk are excellent resources for frequently asked questions and answers.
- Try to listen without judging the ways in which the child is coping. Helping the child to find positive ways to cope will be more effective than reacting negatively.

#### Important messages to pass on:

You are not alone. You are not responsible for your parent's drinking. You did not cause it and you can't control it. You are not responsible for your parent's behaviour. There are people who can help you.

#### Who Can Help

- Encourage the child to talk about their relationships with friends and family members.
- Be aware that for some children there is no-one else they can confide in.
- Be aware that some of the symptoms the young person presents are due to the situation they are living in as a child of an alcoholdependent, and may not be due to another recognised diagnosis.
- Help the child to contact the Nacoa Helpline: 0800 358 3456.
- Local clubs and sports teams may help the child to find outlets to have fun and build positive relationships.
- When children become accustomed to talking about their difficulties they are often more open to finding other avenues of support. Nacoa can research other agencies and services in your area.

#### **Ongoing Support**

- Ensure that, on discharge from your care, the child's community mental health worker is aware and can continue to provide a safe space for the child to talk.
- If possible, signpost the child to someone or an organisation with specialist skills. Nacoa keep an up-do-date database of regional support services across the UK.
- Remind the child that the Nacoa Helpline platforms provide ongoing support without time limits.





Nacoa (the National Association for Children Alcoholics) was founded in 1990 to address the problems faced by children growing up in families where one or more parents suffer from alcoholism or a similar addictive problem. This includes children of all ages, many of whose issues become apparent in adulthood.

#### Nacoa's aims

- To offer information, advice and support to children of alcohol-dependent parents.
- To reach professionals working with them.
- To raise their profile in public consciousness.
- To promote research into the problems they face and the prevention of alcoholism developing in this vulnerable group.

Our services are funded by voluntary donations. Please support this vital work by becoming a member, volunteering or making a donation. Together we are making a difference.

Visit Nacoa.org.uk to donate and become a member. To become a volunteer, go to nacoa.org.uk/get-involved.

'Finding someone who I felt comfortable talking to was the beginning of everything changing for me. Without your help and support, mum could have drunk herself to death and I could have spent the rest of my life watching her. Now I know there is help for mum and for me. Now I can get on with my life.' **Paul, 15** 

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#### **Contact us**

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## www.nacoa.org.uk

