

Barnardos trauma-informed approach for children and parents living with parental drug use

An evaluation of Lorient and Ballyogan services (South Dublin).

Executive Summary





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Introduction

A significant proportion of children worldwide live with problematic parental substance use (Cruden et al., 2021). Research has identified both long and short-term risks for children living with problematic parental substance use (ACMD, 2003; Shannon, 2017). These include poor developmental outcomes, child maltreatment, academic underachievement, domestic abuse, mental health problems, offending behaviour and intergenerational patterns of problematic substance use (Klein et al., 2015). A lack of available information on parental problematic drug use means that support services and interventions are not always informed by the needs of children and families (Roy, 2020).



Evaluation methods

An evaluation of Barnardos trauma-informed approach for children and parents experiencing substance use was carried out by the School of Applied Social and Policy Sciences, Ulster University. The research was conducted in Barnardos Lorient and Ballyogan services, South Dublin. The evaluation aimed to:

1. Map and evidence referral pathways and how they are working
2. Understand demographic characteristics of families
3. Understand how services respond to the individual needs of children and families with experience of problematic substance use, particularly the trauma-informed approach to service delivery
4. Explore impacts for children and parents
5. Capture the voice of children and parents and their experiences of engaging with the services
6. Capture the voice of Barnardos staff and their experiences of delivering services within the communities
7. Capture perspectives of key stakeholders and others responding to problematic substance use
8. Provide case examples reflecting the voice of participants and their experiences of the services.

A mixed-methods, but primarily qualitative study was conducted. The evaluation sought the perspectives of a range of stakeholders and services users. All research participants had direct experience of the services. In-depth interviews were carried with twenty-one participants including: children/young people (n=4), parents/carers (n=5), Barnardos practitioners (n=7) and TUSLA/external organisations (n=5). Qualitative data were analysed thematically enabling the identification of similarities and differences in the experiences and viewpoints of participants (Braun and Clarke, 2006). Routine administrative data collected by Barnardos between 2017-2021 on service user demographics and needs were also analysed.



Summary of key findings

The key findings from the in-depth semi-structured interviews and the analysis of the routine administrative data are outlined below.

Service statistics and demographic characteristics

- Between 2017 and 2022, Ballyogan and Lorient supported a combined total of 1,135 individuals – 610 children, 525 parents and 396 families
- Routine data from collected by Barnardos from 2021-2022 indicated that the primary needs of children (n=108) attending the service during this period were: improving the parent-child relationship; positive management of family stressors and; the ability to self-regulate and manage their behaviour.
- The primary needs for parents/carers (n=48) were: parenting difficulties; parental drug/alcohol use; poor parent-child relationship; children with behavioural difficulties; and positive management of family stressors.
- In-depth interviews with five parents/carers who were currently/recently attending the service indicated they needed help with supporting their child in understanding and controlling their emotions/feelings. Parents also expressed a desire to improve outcomes for their children and to break intergenerational cycles of trauma within their families.
- Parents/carers outlined a range of challenges and concerns including: parenting skills; parental drug use; parental/family separation; parental mental health and well-being; the impact of the COVID-19 pandemic; housing issues; financial difficulties; living in communities with high levels of poverty and deprivation; problematic drug use (e.g. heroin, crack cocaine) and anti-social behaviour in the wider community.



Referral pathways and how they are working

- Staff members in Barnardos, external stakeholders and parents/carers were generally satisfied with the referral process. Families could self-refer or be referred by professionals. Both staff members and external stakeholders perceived referral pathways to be straightforward and working well. Parents were also generally satisfied with the ease of access to the service and generally did not experience long waiting times. As a consequence, parents recommended the service to other family members which resulted in other children, co-parents, grandparents also accessing the service. Parents also reported very positive experiences during the first initial contact with the service reflecting good practice in the implementation of a trauma informed approach.



She was really nice on the phone and she was like 'this is for you- you need help. You need help coping and I hope you get what you need to get better.' So I found the conversation very soothing

– (Parent/Carer)

- Parents who self-referred were generally seeking parenting support. Professional referrals (e.g. GPs) were encouraged where possible as they generally included more detailed information. Those without professional support were assisted by Barnardos to complete the self-referral form (e.g.



identifying current needs and what they would like to achieve) which is a quick and easy process. Staff members highlighted the importance of being supportive from the outset and building a relationship during the referral process in line with trauma informed approaches. Self-referrals were particularly welcome as they may indicated the parent is ready to engage.



Self-referrals show that the parent is there and ready and engaging, and that TUSLA isn't asking them. The GP is not asking them

- Barnardos staff member

- Barnardos also receive professional referrals from any service/agency working with children and families. Professionals generally referred parents/families to Barnardos due to: limited support from family members; children in the care of others; and the parent requiring parenting support and guidance as part of their recovery plan.
- External stakeholders and Barnardos staff members felt that Barnardos were generally proactive in making the organisation/service known to others in order to establish interagency networks and collaboration (e.g. presentations at external meetings and inviting external agencies to Barnardos).



- External stakeholders felt that they had a strong relationship with Barnardos whereby they could highlight families that were in urgent need of intervention. External agencies also indicated that the reopening of cases by Barnardos was not problematic and did not require a lot of formalities.



If you highlight that family is really in crisis and they need it sooner rather than later- you know? They're willing to have those discussions

- (External Stakeholder)

- All referrals are screened and processed by the manager and administrator to ascertain if they meet the eligibility criteria (i.e. addiction in the family). Very few referrals are refused and all are placed on a waiting list (categorised by date of referred needs and current caseload) or allocated to a staff member. Families on waiting lists are contacted regularly to keep them up to date; to review changes in family circumstances; and to signpost to other services if necessary. Management of waiting lists was considered to be a sensitive undertaking and requiring consideration of the needs of families but also the needs of staff members (e.g. in order to avoid burnout / not overloading workers with more complex cases). There is also a requirement to prioritise the needs of high protection/welfare families while acknowledging that self-referral also provides an important window of opportunity for intervention. Barnardos staff also reported that inter-agency collaboration is important (i.e. vital for families to see that agencies



are working together).

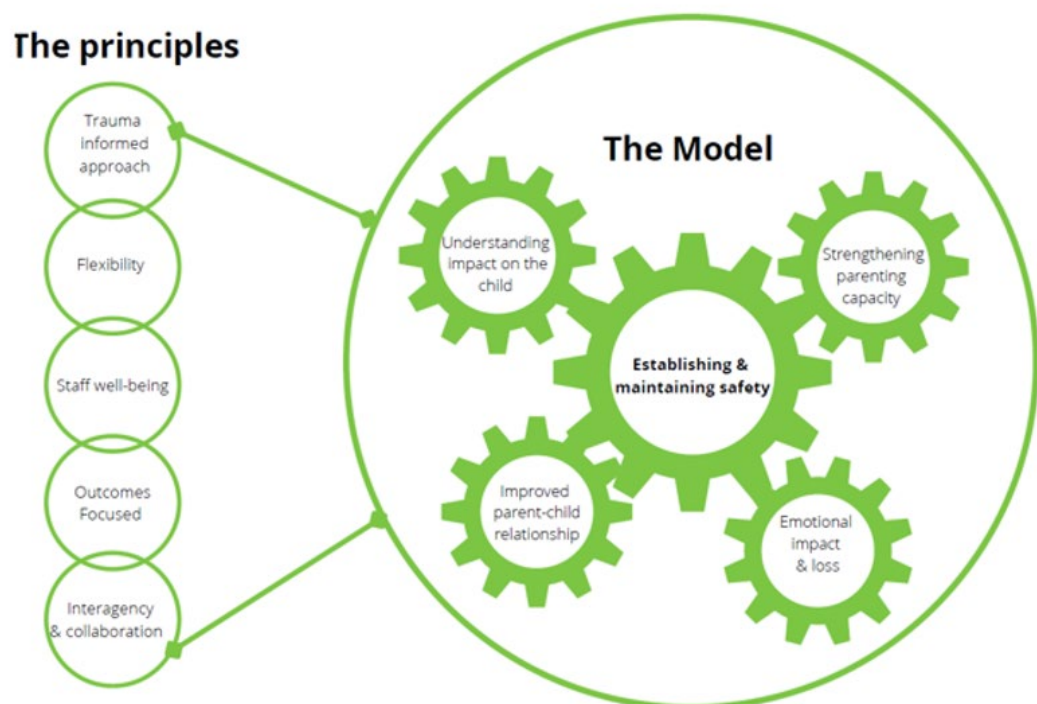
- External stakeholders, such as addictions teams, indicated they encouraged referrals to Barnardos if there were children in the family. The importance of the hidden harm strategy and exploring the impact addiction has on children and the wider family was highlighted.
- Other challenges included lengthy waiting lists which could be a deterrent to service referral for families and external stakeholders. Reasons for growing waiting lists may include: word spreading about the service; a greater number of parents self-referring; staff leaving and difficulties in recruiting new staff; and expectations of funders. Overall, waiting list management is complex. Staff were keen to promote and build awareness of the service but did not wish for families to be placed on lengthy waiting lists as it is not in line with a trauma informed approach. Greater clarity around the catchment area would also be welcome as working on a cross-county basis had led to some confusion for parents and staff members.
- Referrals pathways from Barnardos to external stakeholders were also perceived to be working well. Barnardos work closely with TUSLA, local addiction teams, youth services, etc, and refer families to these agencies when required, while continuing to work with families. In the event of waiting lists, Barnardos had the resources to find alternative services for parents (e.g. counselling).



Barnardos model for supporting families living with drug use

The following sections summarise the research findings in the context of Barnardos approach to supporting families living with parental drug use (see Figure 1).

Figure 1: Barnardos model for supporting parents and children living with parental substance use



Establishing and maintaining safety

- Initial steps in establishing and maintaining safety focused on crisis management and the welfare of the children and facilitating open conversations with parents and children. Barnardos monitor the needs of families and work in collaboration with a range of other services (as



previously outlined) to ensure that children are adequately cared for and to promote their safety and welfare.

- Staff members facilitate conversations with parents and children addressing the 'hidden' nature of parental drug use in the home, giving children a safe space to talk and to be heard. This is vital as parents may think their children are not aware of, or have not been impacted by their drug use, and staff members are clear with parents that they need to support the child to break the barrier. All conversations with children are age-appropriate to help them to understand their experiences.



Even our parents (who) are active and chaotic in their drug use. They don't want to harm – they love their kids. So often when they come out of it, they would kind of reason with themselves- 'Oh they didn't know, they didn't know anything was happening. I still had dinner. I still got them out to school,' or whatever it was. But of course the children know. Sure they're living it every day - it's their life. Even if it's not



being named, you know they're seeing it. They're hearing it. They know scary people are coming to door. They know sometimes Mam is harder to wake up or dad doesn't come home for a couple of days

- Barnardos staff members



We have real open and honest conversations with parents that are very nurturing and supportive, and but, open and honest as possible with children, which is age appropriate, and also with parents. But that's led by the parent

- Barnardos staff member

- A second priority in establishing and maintaining safety is the identification and development of safety networks. Staff members help children to identify who is in their network and any protective factors in their lives.



Barnardos provide children with at least one support adult (i.e. staff member) and help them to identify others (e.g. grandparents) to foster a sense of safety and security. Barnardos also aim to increase the visibility of children in the community/to other adults through membership of clubs and activities. Importantly, children provided positive reports of sharing problems and working with their staff members to develop their safety network.

- Support networks were also vital to parents. Staff members provided support on how to put in place support mechanisms which, in turn, helped parents to feel supported and heard. Staff members felt this was an impact in its own right and that when parents feel supported they may be more likely to engage with other services in the future. The positive relationship developed between parents and staff members was essential in achieving



these goals.

We will safety plan with the family and look at what's going well, what's not going well and what needs to happen and who can support that with the family. So everyone has a very clear role of what we expect

- Barnardos staff member



We can support families... involving children and families and supporting children to understand what has happened in their family. That provides emotional safety for the family and is supportive to the person in recovery. If there's somebody else, you know other adults in the family, it can really be a support

- Barnardos staff member

Supporting families with emotional impact & Loss

- A crucial component of the Barnardos model was helping parents to understand the impact of drug use on children and becoming more attuned to needs. This was supported by staff members by adopting a child-centred approach. Staff members reported that parents could often perceive that the child was having difficulties (e.g. behaviour problems at school) but struggled to link this to their experience of the parent's



substance use and parenting challenges. Staff members reflected that they often saw family issues being pushed aside without the parent considering the impact on the child.

- Many of the challenges experienced by children were related to parenting difficulties and/or challenges to parent-child communication. Overall, staff members helped parents to understand their children's needs and also helped children to understand their experiences (e.g. that it is ok to talk and share what is happening in the home) in addition to helping them to develop coping strategies.



It made me realise that the way I was reacting was a major cause to the way (child's name) was reacting- they were looking at me and it did teach me that the way I act, (child's name) does copy me. So kids are susceptible- they're almost like watching what you're doing and you're teaching. So that was the biggest, like not the only thing, but one of the biggest things that I've learned

- Parent/carer



- Interviews with children and young people, also indicated that a primary outcome was an increased awareness of their own behaviour and how to control their negative emotions (e.g. anger and anxiety) and to cope with stressors. Children and young people described how staff members encouraged them to control their breathing and induce feelings of calmness to mitigate anger and anxiety. They also recalled a range of activities which workers used to help increase awareness of emotions, how these are experienced in the body and how to cope with these feelings



Calm down and you count to ten in your head and you walk away [...] It's helped me control my behaviour [...] If I ever get angry I just try to calm myself down

– Child/Young Person

Strengthening parenting capacity

- Barnardos support parents to develop coping mechanisms to deal with stressful life events through therapeutic exploration of regulation techniques. Parents reported feeling calmer and more responsive to their child as a result of their involvement with services. For many, strengthening their ability to stay calm had helped to provide a foundation for positive parenting and improved parent-child relationships. Parents who reported



feeling calmer also reported greater parent-child communication, less conflict and a happier and calmer home environment.



Having that extra support for everything for myself from going through the breakdown of the marriage, for my own struggles ... there has been a lot of overwhelming times. That kind of eases that a lot. It was more benefitting me personally and because it benefitted me, reflected into parenting and having that space to be able to navigate - the headspace to be able to navigate your emotions and everything. Yeah, I found that brilliant

- Parent/carer



There's not as much conflict between myself and (daughter). When we've seen ourselves getting to that stage, I just go for a walk or just remove myself out of the situation. Up to about 2 or 3 years ago I wouldn't have been able to. I would be the one going full on with a roaring and screaming match

- Parent/Carer

- A number of parents reflected on a desire to break cycles of intergenerational trauma. Some parents felt they carried a lot of anger from their own childhoods; did not have calm environments growing up; and considered how children can observe and mirror their parent's own behaviours. The ability to manage their emotions was a key objective which parents wished to achieve for their children and all felt that Barnardos staff members had helped their children to achieve this goal. This was a clear and concise outcome drawing on a range of programmes to help children with regulation. The techniques helped children to talk about their feelings and emotions and to feel calmer at home and in school. The long-term aim is that children will carry these skills into adulthood and use them across the



lifespan. Children also learned about the importance of self-care and also using their skills to help others (e.g. parents).



It went from a relationship of being that dictator to a relationship of a lot more communication especially with my oldest daughter. We always had a kind of a good relationship but it definitely strengthened it. There's a lot more communication, there's a lot more give and take, a lot more understanding as well

- Parent/Carer

Improved parent-child relationships

- Barnardos also aimed to improve the parent-child relationship through programmes which focus on developing the parent-child attachment. Staff members encourage parents to establish warm and nurturing routines for their children which was considered to be an extremely important



outcome. Parents reported that the parent-child relationship had improved substantially as a result of engaging with Barnardos with less conflict with the child and greater respect for the parent. The staff member and the activities/resources provided were essential in strengthening the relationship as they provide opportunities for the parent and child to spend quality time together. Intergenerational patterns were also discussed (i.e. parents reported having poor relationships with their own parents when they were children). Children also reported improved relationships with their parents and that their parents had become good at listening to the child.



I can actually listen to the kids now cause if there's a problem, if the kids have a problem or if I've done something they don't agree with – we talk about it. Whereas in the past I wouldn't have. I'd have been screaming at them and shut up it's my house- I'll do what I want- that type of thing. (I) listen to their point of view and where they're coming from. Even that alone brings me closer to the kids because of the fact, the same thing-



**if I listen to them, they know they can
come to me**

- Parent/carer



**I done sessions with my mam more at the
end and it helped me and my ma's
relationship a lot**

- Child/Young Person

- Staff members also encouraged and supported parents to reflect on their style of parenting and communication with their child. New coping strategies and a calmer environment helped parents to adopt a more authoritative style of parenting. Parents reported that the establishment of routines and boundaries helped children to understand their role in the family. Staff members were vital in helping to instil these routines and parents highlighted the importance of consistency in parenting and the reinforcement of positive behaviours. Parents and children reported better communication and understanding; that children felt heard; and that parents could understand the reasons for their children's behaviours.
- Barnardos also aim to help parents to become active agents in supporting their child's education and development. Staff members aim to build confidence in making phone calls to official agencies and empowered parents to attend meetings with teachers in schools.



I would have seen parents empowered after having been supported in a meeting with the teacher- you know. Which is amazing. So that would be an outcome that parents, you know, feel more empowered around their role as a parent

- Barnardos staff member

Responding to individual needs of children and families living with drug use - the trauma informed approach

- The adoption of a person centred/individual approach was important in helping Barnardos to meet the needs of children and parents. Parents felt that staff members addressed their current needs and asked them how they could help/what they required from the service. Parents reported that staff members exceeded their expectations in providing support. Parents reported feeling comfortable and safe, and positive relationships with staff members were central to their experience. Personal touches (e.g.



refreshment, self-care packages) made families feel particularly welcome and staff members aimed to accommodate all members of the family (e.g. transport, family meals etc.). Staff members also provided additional practical support where required (e.g. housing, finances, social welfare etc; or referral to external agencies). Overall, staff members were viewed as non-judgemental.



She (staff member) was just so lovely and kind and understanding and non-judgemental cause there was things I shared with her that I was ashamed of, that every parent would be ashamed of. But she just held a safe space for me and made it OK, [...] I just felt really supported - the whole way through

- Parent/carer



Everyone in here makes you feel really comfortable

- Child/Young person

- The person-centred approach was also vital in meeting the needs of the child (i.e. child led sessions; sensory friendly rooms etc). The physical space and resources provided in the services were also praised. These were seen as helping to create a safe space, and welcoming and relaxing environment, which illustrates how a trauma-informed approach is implemented in Barnardos. Modelling and teaching of coping strategies in Barnardos services also helped children to learn and to implement more positive coping strategies in their own home environment.



I would view our service as one piece of the jigsaw puzzle and I suppose a cog in the wheel of support for families. So I'm very mindful that there's other services that can offer expertise and it's



important to collaborative work with other services in providing a holistic best support plan, I suppose, to families and also acknowledging the family's own strength as well. So the service focuses on strength based really and we would always focus on the strengths of the families. That's really important. What we offer families is - we do a variety of interventions based on what the families are presenting with and so we meet families where they're at

- Barnardos staff member



Recommendations for Service Enhancement

- Parents made a number of recommendations for additional services where feasible, including supports which may be beyond the remit of Barnardos including: facilities/programmes for adolescents; sports facilities for young people; parenting programmes for fathers; regular drop-in groups for parenting support; more opportunities for group work for children; counselling for children and outdoor activities.
- Staff members suggested pathways from addiction services to Barnardos could be strengthened. That is, drug users seeking support who are parents should also be referred to Barnardos for parenting support and support to the child/wider family.
- Lengthy waiting lists (due to staffing and other issues) could be a deterrent for parents who self-refer and professionals. Greater clarity around catchment areas would also aid efficient service delivery.



Conclusion

Problematic substance use by a parent/carer can have a significant and lifelong impact on child health and wellbeing. Trauma-informed services and supports which foster safety, strengthen parent-child relationships and parenting skills and promote healing are an increasing priority. The findings outlined here illustrate how Barnardos work with parents and children to reduce the negative impacts of parental substance use and prevent long-term substance use and intergenerational trauma. Positive perceptions of the services and Barnardos staff members were in evidence – external stakeholders highlighted that referral processes and collaborative practices were working well, whilst parents and children alike praised the supports they received and the impact of engagement with Barnardos on key outcomes. Indeed, parents and children described how their engagement with Barnardos helped to improve their home environment, including improved coping mechanisms, reduced conflict and enhanced parent-child relationships.