

GRAND RESOURCE

*Help for
Grandfamilies
Impacted by
Opioids and Other
Substance Use*



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Engaging with Birth Parents

// The most challenging part of managing my granddaughter's relationship with her father is dealing with the long periods of time he was unavailable to communicate due to actively using or being in a residential treatment program. I also struggle with the fact that I put much more effort into keeping him engaged with his daughter than he does"

Joanne Clough, Grandparent Caregiver

Engaging with the birth parents of the child you are raising can be complex especially when one or both parents have a substance use disorder and you are related to them. Whether they are currently using or not, it can be difficult to manage their relationship with the child for a variety of reasons. For example:

- As a relative to the child, you are also a relative to the child's parents. You may feel a sense of commitment or obligation to try to help the child's birth parents while also protecting the child. It may feel like managing these two priorities conflict with one another.
- There may be a history of broken trust between you and the child's parents because of issues related to substance use.
- If you do not have legal custody of the child, you may be fearful that the child's parent will come and take the child away if they are unhappy with the way you interact with them.
- You may struggle with how, when, where or whether to give the child opportunities to safely connect with their birth parents.
- Other family members may have strong opinions about how you should manage the relationships, which may be different than your opinion.



- You may find it difficult to both respect important traditions of the child's experience with their birth parents while also creating new healthy traditions as a grandfamily.
- You may find it difficult to separate your feelings about the birth parents treatment of their child and the child's desire to see them.

You are not alone. These challenges are common among grandfamilies. This tip sheet is designed to help you manage these challenges by helping you understand the impact of substance use disorders on someone's ability to care for their child and providing insights and resources for managing that relationship.

It is very important to note that you should always follow what you are required to do legally through any custody orders, placement orders, or guidance from any government agency or court. If you are unsure what you are required to do, you should seek legal advice. Most states have a free legal assistance hotline.

How does a substance use disorder impact someone's ability to care for their child?

Many people know substance use disorders by their stigmatized name, "addictions." Experts now know that substance use disorders are diseases. They change the way a person's brain functions and impact their decision making, impulse control, and basic survival instincts.¹ Substance use disorders can make it very difficult for someone to take care of their own basic needs, let alone the needs of their child.

Additionally, substance use disorders are a relapsing disease which means returning to use after a period of sobriety is common.² Rates of relapse are very similar to relapse rates for other chronic diseases like hypertension, asthma, or type I diabetes.³ This can be difficult for everyone who is involved in the life of the drug user, especially children. It is important to remember that a person with a substance use disorder is sick and not a bad person. In fact, many people with substance use disorders have histories of past trauma and/or co-occurring mental health disorders that need to be addressed in addition to their substance use disorders.

How do I best manage the relationship between the child I am raising and their birth parent?

Modeling efforts to have a healthy relationship with the child's parents is important for both the child and the parents. It is also important to let the parents know you want and seek to help them to have a healthy relationship with their child. At the end of a visit, ask the child if they want to give the parent a hug or kiss goodbye. Then talk with the child about the visit afterward.

Setting boundaries is a key part of managing the relationship between the child and their birth parents. This helps ensure the child is safe physically and emotionally and can help parents who are working on recovery. If there are legal boundaries set in relation to visits, follow them.



If there are no legal boundaries, seek to set firm but fair boundaries. Create a written agreement with the parent about what is appropriate and inappropriate behavior for visits. Have written consequences (for example a three-strike system) in case the parent does not abide by the agreement. If you cannot come to an agreement, consider talking with a mediator or neutral third party who can help you come to one.

If the child is in therapy or seeing a counselor, consider talking with the counselor at the end of the session about the best ways to conduct safe visits with the parents. The child should not be present for this conversation. The counselor should be able to factor in what the child is sharing and provide helpful ideas.

How do I talk to the birth parents about their behavior?

Be open and honest with the parents in a way that is respectful and supportive. Talk with them privately - not in front of the child or anyone else. Explain the reason behind your decisions. "I do not feel comfortable leaving Sarah alone with you because the last visit you upset her." Acknowledge the parents' successes and growth, "I am so proud of you for working on your recovery" and "I am so happy to see how patient you are becoming with Juan, I know that isn't always easy!" Let them know what you are doing to better support their relationships with their child, "I know it's upsetting you that I am having difficulties trusting you right now. I hope one day I will trust you more, and I have been seeing someone to work on that."

If you are present during a visit and see the parent having difficulty managing the child's behavior, model positive parenting with the child to the birth parent or share what you have found works for you. Try something like, "When he acts like this, I make cleaning up a game to make it fun."

How do I manage my own feelings and relationship to the child's birth parents?

Being aware of your own feelings about the birth parents will help you manage the relationship in a way that is more helpful to you, the child and the parents. Emotions may range from sadness, anger, and fear for their safety to joy in their successes.

Issues of trust also impact the relationship. It may be difficult to feel you can trust parents with a substance use disorder, especially if they have lied to you in the past. Try to be cautiously optimistic. Give parents the benefit of the doubt, while doing what you can to make sure the child is as safe as possible.

How do I prepare for visits?

Visits between the child and their birth parents are often stressful for everyone involved. Being aware of the emotions each family member may be experiencing, can help you prepare for and manage the visit. As a caregiver, you are concerned about managing the child's expectations and protecting their physical and emotional health. You may be concerned about the well-being of the parents and whether they are seeking or engaging in recovery. The child may be simultaneously managing feelings of excitement, anger, and sadness before, during and after the visit. Birth parents also come with a set of stressors related to their struggle with drug and alcohol use, their own feelings of inadequacy because they are not able to safely raise their child, and concern about how the child may react to them during the visit.



Depending on the child's age and maturity, consider seeking their input on planning the visit. Make sure to tell them that keeping them safe is your priority. If the child does not want to visit their parents but is legally required to, tell them you understand that they are upset or hurt and remain positive about the visit.

Let the child know when the visit is planned if they need time to emotionally prepare for the visit. Find out what the child would like to do on the visit. Try to arrange an activity if it is reasonable or work with the child to come up with a similar activity. Consider the impact of the location on the child and parents' visit.

If the parents have missed visits in the past and you are worried that they might not show up, hold the visit somewhere where you could do a fun activity with the child if the parents do not make it.

Provide extra emotional support before the visit. If the child is seeing a counselor, let the counselor know when a visit is planned so they can help you and the child prepare for the visit.

Many communities will have supervised visitation centers where these visits can take place. If you are having trouble finding them, consider asking your local child welfare agency, community nonprofit organizations or the court that ordered the visits.

How do I manage visits?

Try your best to help make visits between the child and their parents go smoothly. This is important even if you have concerns about whether the birth parents will be able to parent the child again. Do not talk about the parents negatively in front of the child, model appropriate parenting behavior to the birth parents, treat the birth parents with respect and talk positively about the visits.

As time progresses, have more flexibility with the visits. If the parents and child handle supervised visits well consistently, move to supervised visits where you are not in the same room. After they handle those well consistently, you can consider further types of visits including unsupervised ones.

What if I have concerns about parental behavior during a visit?

If you are worried that the parents may currently be using drugs, you may consider making arrangements for the parents to participate in a drug test before each visit or randomly. If parental visits are arranged through a child welfare agency, ask the agency about this option. If you are arranging the visits yourself, have a conversation beforehand with the birth parents about plans to start doing drug tests before the visits. If you are working with a therapist for yourself or the child, it may be helpful to talk with him or her in advance to plan for this conversation. Drug tests can be purchased at most pharmacies, online, and in grocery stores. They can be expensive especially if used before every visit. You may want to discuss who will cover the costs or set up an arrangement to share the costs. One example of sharing the costs could be you purchasing the tests and having the parent reimburse you if they test positive for drugs. Some medications can lead to false positives including certain antidepressants, antipsychotics, and decongestants, so it is good practice to ask if the parent is currently taking any medications. Drugs.com has an informative chart about this in the article "Can a Drug Test Lead to a False Positive?" Have firm guidelines in place for what to do if there is a positive result. This could be canceling the visit or changing the supervision level.



Establish beforehand that you have the right to end the visit if the child's safety (physically or emotionally) is called into question.

What do I do if the birth parents are using drugs?

First and foremost, try not to panic. Relapses can be scary and can change many aspects of your life, but panicking will not help the situation. Try your best to remain calm, it will help you and the child.

Make sure you are keeping yourself and the child safe. This may mean discontinuing or changing how you conduct visits or changing how you communicate with the birth parents. Safety should be your priority.

Connect with your support system so they know what is going on in your life and can find the best ways to support you.

Be prepared to talk to the child about their birth parents. For more information on this topic see Talking with a Child about their Birth Parent.

How do I manage the child's behavioral changes surrounding visits?

Some children react negatively to visits with their birth parents. These negative reactions can happen before, during, or after a visit. They can include things like nightmares, anxiety, acting out, sadness, crying, anger, and withdrawal from social interactions. To manage these changes, provide extra emotional support to the child before and after the visits. Consider creating special rituals for the child like a special hairdo, wearing a favorite outfit, or having a movie night after the visit.

On the other hand, some children may not want to leave the visit or may want to leave the visit with the birth parents. Visitation centers usually have established ways of dealing with this and can help if the visit is there. If the child is in counseling or seeing a therapist, talk with them about the child's reactions and how to best manage them. Before the visit, establish with the child what will happen after. Make a plan to do something special together or if they are older perhaps give them space to process their feelings on their own.

// You have to eventually decide whether to concentrate on blaming/feeling guilty about your adult child's addiction or showing your grandchild what a healthy family and personal life looks like"

Joan Callander Dingle, Grandparent Caregiver



Ask the child what the best and worst part about the visit was, letting them know that you are happy about the best part.

How do I manage the situation if the parents have canceled a visit?

Birth parents canceling visits can be extremely difficult for children to handle especially when they happen frequently. When telling the child about the canceled visit, reassure the child that they are not the reason the visit was canceled. Do not blame or talk negatively about the parents. Comfort the child and remind them that you love them. Ask if they want to talk about it and listen to how they feel. If possible do the activity with the child that was planned with the birth parents.

If it becomes a pattern, consider not telling the child about the visit far in advance or waiting to tell them until you are on the way.

What do I do if a parent threatens to take the child and I am concerned about the child's safety?

If you are the one managing visits between the child and their parent, you may want to consider switching to a professionally-supervised location, or a service that will come supervise at a location of your choosing. There are services available in many locations that will supervise visitation for a fee. You may also check local non-profit organizations serving grandfamilies to see if this is a free service they provide. A list of those programs is available at grandfactsheets.org.

It is also good practice to keep a recent photo of the child and the parents. Help the child memorize your legal name, phone number, and address. Have a password known only to the kids, you, and anyone who would pick them up in case of an emergency. Tell them not to go with people who do not know the password. Make sure their school knows who is and who is not allowed to pick the child up and any changes in any legal custody agreement.

Further Resources - Engaging with the Birth Parent

- Addiction Policy Forum "What is Addiction?"

Further Resources - Grandfamilies

- grandfactsheets.org
- grandfamilies.org
- gu.org
- brookdalefoundation.net/RAPP/rapp.html



1 What is Addiction? Addiction Policy Forum. Retrieved from: <https://www.addictionpolicy.org/what-is-addiction>.

2 What to do when someone you love relapses. The Collaborative Counseling Center. Retrieved from: <https://www.thecollaborativecounselingcenter.com/someone-love-relapses/>.

3 Ibid.



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