

PART TWO

GRAND RESOURCE

*Help for Grandparents
and Kinship Caregivers
Impacted by Opioids
or Other Substance
Use Disorders*



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When A Child Returns to the Care of Their Parent or the Parent is More Fully Integrated into the Child's Life

“ My goal was always for my daughter to raise her own children, and I told her that often.”

Grandmother Caregiver, Pennsylvania

A parent's opioid or other Substance Use Disorder (SUD) often results in the separation of the parent and their child. Although they hope to be a loving and reliable parent, a substance use disorder severely impacts their ability to provide the safe and supportive environment a child needs. Recovery provides the opportunity for a parent to resume their parental role and, when the time comes, there are important steps to follow to ensure a smooth transition to unification.

When a child is involved with child protection services, foster care or the child welfare system, there are legal guidelines that must be followed for a parent to unify and resume the responsibility of their child. However, many grandfamilies and kinship care situations are informal, meaning that caregivers simply stepped into the shoes of the parent to take over the caregiving role. When the parent has challenges of substance use and co-occurring risk factors, they are unable to provide the care their child needs. The following recommendations may serve as a guide for informal situations for which there are no established best practices and no court involvement.



Why is unification planning important?

Without proper planning, a child's transition to their parent may be a source of anxiety for the grandparent or kinship caregiver, the child, and the birth parent. A family member's SUD is a painful experience for the whole family. An opioid SUD damages family relationships by eroding trust, causing trauma, and negatively impacting the mental health of those around the individual with the addiction. A plan that supports the family members will strengthen the family.

“ I feel like I have a hole in my heart. After my grandchildren lived with me for years, I don't get to see them because they moved, and we don't have the chance to visit much. I was all in and that has been stripped away leaving an empty feeling.”

Grandfather Caregiver, Georgia

What is attachment?

Understanding attachment and bonding is critical. Young children need to develop at least one relationship with one primary caregiver for healthy social and emotional development to occur. Children become attached to the adults who are sensitive and responsive to them and remain constant early in their life. This person is their secure base. Children who experienced a parent's SUD may have felt abandoned due to their parent's absence or lack of attentiveness to their needs. Children who have been removed from their birth parent and go to live with their grandparent or kin caregiver develop an attachment to them. The total loss of that attachment person can cause anxiety and grief in the child. This is why it is critically important that unification planning for the child must include mechanisms to continue the bond with the grandparent or kinship caregiver, while at the same time strengthening the parental bond. This should not be a “them vs. us” situation.

What are some tips for pre-unification family time?

Consistent family time involving the parent and child builds the groundwork for a successful transition back to the parent's care by strengthening the bond between them. It is important to establish agreed upon ground rules for the family time/visits such as the date, time, and length. If the parent has other siblings of the returning child living with them, if possible begin the process with only the parent and returning child present. Make arrangements for the other children to be elsewhere during the initial visits. If the biological parent has a significant other, it is advised that they do not participate in the initial visits. This time is meant for the parent and child to begin repairing their relationship and strengthening their bond, so the fewer distractions the better.



During this period there can be indications that the parent is not ready to assume the responsibility of taking care of the child. These may include not showing up for scheduled family time, forgetting to attend an important event such as a doctor's visit, ignoring the child during family time and reading emails or social media, or having unreasonable expectations of the child. Some children can be distressed after family time with their parent(s). This can be due to several reasons including confusion about the family unification plan, feeling guilty about leaving the grandparent or kin caregiver at home, feeling guilty that they caused the separations, or not being old enough to understand the unification process. As a grandparent or kin caregiver you can explain as best you can what is happening. If the visits are at your home, the parent must understand that your rules must be followed in your house. Ask the parent to refrain from talking about unification with the child until there is a clear agreement on the timing. How things progress during the pre-unification phase will determine the future timing of unification.

As the parent is recovering, what criteria demonstrate the parent is ready to integrate into the child's life more fully?

Active signs of recovery include completing a treatment program, compliance with medications, attending support meetings or therapy sessions, establishing a new set of friends, and taking steps to find stable housing and employment. Criteria for unification may include the parent being able to financially support the child and provide the child with a safe place to live. The parent may need to be connected with supports and services available to help them with housing and financial support during their recovery.

How can we build a foundation for when the parent can resume their parenting role?

When the parent has been absent you can help to bridge the gap by keeping records that can be shared with the parent when they begin recovery. A life book binder is a collection of important information regarding your grandchild or kin child that tracks information a parent may need over time. It may contain several categories of documents:

- Vital papers including a birth certificate and Social Security card
- Health Records, including immunization records, telephone numbers for providers, such as physicians, dentist and therapists, dates of and notes about psychological or developmental screenings, and therapeutic treatment plans and progress notes
- School records, including contact numbers, teachers' names, class information, a copy of their Individualized Education Plan (IEP) if they have one, and notable classwork
- Other records and pictures, including developmental milestones, activities in which your grandchild or kin child participates, and friends' names and contact information
- Diary of daily life events, times and dates of family time with the parent and child, and any observations made during and after visits may be important information where unification planning is concerned



Family recovery and relationship building can establish a foundation for healthy communication and mutual respect that provides the child with a sense of security. The child will learn positive communication skills by observing how their parent and grandparent or kin caregiver talk with one another. A child may learn that adults can get through difficult situations by working together. Consistency in positive family relationships can heal the loss of trust that occurred during the active SUD when family interactions were difficult.

When the parent's physical presence is possible, the parent needs time to practice age-appropriate parenting skills. You can support the parent/child relationship by:

- Facilitating phone calls with the parent.
- Assisting with transportation to facilitate family time for the parent and child.
- Including the parent in school activities, conferences, parent's night, medical and dental appointments.
- Allowing interactions to take place in the home and encouraging the parent to perform normal parenting tasks such as bathing, feeding, reading stories, and bedtime routines.

How can I prepare the child for the change that is going to happen?

“I was heartbroken when my grandson said he thought that I didn't want him to live with me anymore. I talked with him to make sure he knew that the judge was making the rules and he is always going to be welcome in my home.”

Grandmother Caregiver, Oklahoma

The trauma children experience because of their parent's SUD and loss of custody must be considered when talking with them about changes in their living arrangements. A gradual transition over time and talking with the child honestly and openly gives them an opportunity to express their concerns or ask questions. Your confidence in the decision to unify the parent and child will help them to accept the changes that are planned. The child will read your cues and body language. If you seem worried or negative about the unification, the child will feel similarly.



What are some common concerns of grandparents or other kin who are planning for the transition of their grandchild or kin child?

The grandparent or other kin caregiver experiences several emotions when they think about the child's parent serving in the role the grandparent or kin caregiver has been in for some time. However, remember that continuing to support the child and their parent is critical. Some emotions may include:

- Feeling the loss of control over what happens with the child.
- Fear about the child being at risk should the parent relapse.
- Concern that the parent will struggle to meet the needs of the child.
- Worry that the added responsibility will cause the parent to relapse.
- Grief due to the child's absence from their home.

Specific plans and expectations for the continued involvement of the grandparent or kin caregiver are important to the family. Family therapy can be helpful in developing strategies, healing relationships, and maintaining healthy communication around plans for the child and those who love them.

What is family recovery and why is it necessary?

A parent who has completed treatment and is living a sober life will be supported in recovery when they reconnect with and rebuild relationships with their family. This won't be easy because family members may still be holding onto the hurt and lack of trust that has built up. It is important to seek professional help. Family therapy and working with a counselor will help all who are involved to use strategies to improve their relationship, so that they all can heal.

Although the transition of a child to unification with the parent can be stressful, the grandparent or kin caregiver may view this opportunity as a new beginning. Time previously spent raising a child can now be enjoyed by focusing on their own health and well-being.

Palgroup.org offers support and meetings to parents of addicted loved ones. Additional support groups for grandfamilies can be found at www.grandfactsheets.org. Participation in a support group such as this can help a grandparent recover and refocus by providing information on how to establish healthy boundaries and be a "healthy helper" to their adult child. Learning to live in the moment and identifying triggers that previously sent the grandparent into a tailspin moves the family into healthier dynamics.

// As far as I am concerned, the more people who love the child the better."

Grandmother Caregiver, Oklahoma



What are aspects of recovery that influence preparation for this transition?

With prolonged abstinence, the possibility of relapse lessens, and the family can re-build their routines and adopt new family traditions such as family dinners and outings. The parent may begin to develop a healthy relationship with their child by gaining an understanding of how their SUD affected their child. As the parent learns about the pain their children experienced through talking with their child, the healing begins.

Some SUD treatment programs significantly help parents to build parenting skills and others have limited resources and do not. Relationship issues can lead a person to relapse, so it is important to support the healthy relationship between parent and child by taking advantage of additional resources available in your community.

What are some common challenges for parents who are stepping into the parenting role while in recovery?

Parenting is hard work and can be more challenging for a parent recovering from an SUD that interfered with developing their parenting skills. Participation in parenting classes can be an important step toward building confidence and establishing a healthy relationship with the child.

Sustained recovery requires time and effort. A child may resent the time that a parent spends in therapy, going to meetings, or other activities that are important to maintain sobriety. Other common challenges include:

- The parent in recovery may have difficulty holding a child responsible for inappropriate behavior. Rule-setting and positive discipline are important guardrails for their child's development. Information on parenting strategies is available in the library and online. [cdc.gov/ncbddd/childdevelopment/positiveparenting/index.html](https://www.cdc.gov/ncbddd/childdevelopment/positiveparenting/index.html)
- A parent in recovery may overindulge the child to cope with their feelings of guilt and shame. The parent should be encouraged to set limits, monitor the child's activities and friends, and provide a structured environment that encourages responsible behavior. Praise and positive support to their child is often referred to as 'catch them being good'.
- Employment challenges due to an unstable work history, criminal record or lack of marketable skills may cause a parent to work odd hours or multiple jobs to compensate for the lack of opportunity. Erratic schedules can cause disruption to routines and be stressful for the child.

How can a parent rebuild their child's trust?

A child may remember when their parent was neglectful or unreliable. The parent and the caregiver can reassure the child that this behavior was linked to the parent's SUD by showing up on time and taking an active role in the child's education or extra-curricular activities. Rebuilding trust takes time and energy on everyone's part and requires consistent effort of the parent and the encouragement of other family members.



How can the parent overcome stigma?

The stigma of a SUD can affect the parent and the child. There are no clear or proven strategies for handling stigma. The workplace, neighborhood or child's school may be a source of judgmental behavior. Still, it is important to remain focused on the positive aspects of recovery and continuing to establish new behavior patterns. Positive attention that begins with the family is the best start.

What are some unique challenges for a parent in recovery after unification as they return to the responsibility of parenting.

The parent's absence due to the effort required to sustain recovery and employment can limit their ability to monitor homework, participate in the child's extracurricular activities, and monitor peer networks or social activities. It will be important to strike a balance between the parent's needs and the child's needs.

A child may rebel by resisting rules and structure because they know their parent's behavior was inappropriate during substance use. A parent can use their journey as the greatest gift of wisdom by discussing the importance of making healthy choices.

Teenagers require more complex parenting than younger children when it comes to the need for parental supervision and monitoring. The parent can seek support from their community networks when they must be separate from their child.

“When my daughter did not show up for the day care meeting they requested, I was upset because that triggered my memory of the disappointing times she didn't show up because she was using. She had a good reason for not going to this meeting, but at times I find it hard not to fall into my old way of thinking instead of managing my expectations and keeping healthy boundaries.”

Grandmother Caregiver, Pennsylvania

How can we best support the family after unification?

When a child returns to the care of their parent, it is important for everyone involved to feel supported. In divorce, due to the legal involvement there are often guidelines to follow for custody arrangements on behalf of the child to keep the relationship with their parents intact. In the case of informal unifications, there are no written procedures, but it is important to consider the emotional well-being of the grandparent or kin caregiver and child and the importance of their relationship with each other. Children of parents with a SUD often experience trauma. Separation from their grandparent or kin caregiver can also be traumatic if their relationship and emotional tie is not maintained.



As a grandparent or kin caregiver steps away from the day-to-day care of their grandchild or kin child and new family dynamics emerge, the following can support them in their new role in the life of the child and parent:

- Manage expectations regarding their new role in the life of the child.
- Be aware that feelings of grief and loss, and feelings triggered by the parenting style of the parent, can be helped with the support of a counselor or therapist.
- Work to establish healthy boundaries that come with your new role.
- Learn to live in the moment, and to be a “healthy helper” to your grandchild’s or kin child’s parent.

A grandparent or kin caregiver who steps into the shoes of the child’s parent because of a substance use disorder is often the best possible lifeline. They are the unsung heroes of today, saving the child from loneliness, instability, and loss of connection to their family that often accompanies the experience of foster care. When the time comes to resume their role as grandparent or kin, it’s time to celebrate their loved one’s recovery from addiction and the family’s recovery.

Further Resources: When A Child Returns to the Care of a Parent or the Parent is More Fully Integrated Into the Child’s Life

- [Center for Disease Control and Prevention, Positive Parenting tips](#)
- [National Library of Medicine, The Impact of Substance Use Disorders on Families and Children: From Theory to Practice](#)
- [American Addiction Centers, Reconnecting with Family After Recovery](#)
- [Addiction in Family, Stages of Recovery & Impact on Parenting](#)
- [NACAC, Co-Parenting or Shared Parenting](#)
- [Parents of Addicted Loved Ones](#)

Further Resources: Grandfamilies

- [grandfactsheets.org](#)
- [grandfamilies.org](#)
- [GKSNetwork.org](#)
- [gu.org](#)
- [brookdalefoundation.net/RAPP/rapp.html](#)



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About Generations United's National Center on Grandfamilies

Founded in 1986, Generations United's mission is to improve the lives of children, youth, and older adults through intergenerational collaboration, public policies and programs for the enduring benefit for all. Generations United's National Center on Grandfamilies is a leading voice for families headed by grandparents, other relatives, and close family friends. The Center's work is guided by an advisory group of caregivers, known as GRAND Voices, and organizations that set the national agenda to advance public interest in support of these families. Center staff conduct federal advocacy and provide training to grandfamily practitioners, advocates and caregivers to elevate their voices to improve policies and practices. The Center raises awareness about the grandfamilies' strengths and needs through media outreach, weekly communications, and awareness-raising events. It offers an annual State of Grandfamilies report and a broad range of guides, fact sheets and tools for grandfamilies, which cover issues from educational and health care access to financial and legal supports (gu.org and grandfamilies.org). Generations United is also home to the Grandfamilies & Kinship Support Network, the first-ever national technical assistance center for those who serve grandfamilies and kinship families (gksnetwork.org.)