

Understanding the situation of mothers who misuse substances

ANNE-MARIE LASLETT

Marja Homila, Kirsimarja Raitasalo and Mikko Kosola describe why it is critical that there is understanding of the mother's life situation, as well as the child's, painting a picture of the dramatically worse outcomes for mothers who misuse alcohol and other drugs. These mothers are more likely to die, have concomitant mental health problems and have their children removed. The disadvantage apparent in the lives of these mothers and their children is also palpable; the mothers are much more likely than those who do not misuse substances to be single parents without support, and to have less education and lower incomes.

However, while this paper draws attention to the relative risk of a range of problems associated with maternal substance misuse in a greatly disadvantaged population, the absolute risk for Finnish women (and their children) of problems in the cohorts studied is much less. Only a small proportion of mothers subsequently end up in contact with the health, social, welfare and substance abuse treatment registers. However, whether this group is the tip of the iceberg in relation to problematic substance misuse and parenting problems is uncertain. Little is known about less severe problems that mothers who misuse substances experience, and whether the problems they and their children are affected by are ongoing or spo-

radic. Whether more advantaged families also experience problems but are less focussed upon by government systems than more disadvantaged mothers is unknown. In Australia there is evidence that alcohol-related harms to children are more widespread than is apparent just from child protection cases (Laslett, et al., 2012). The size and nature of substance misuse problems among more advantaged mothers is uncertain; they may be less common and less severe, or better hidden (or both).

The authors note that the majority of women moderate their use of alcohol (and attenuate their risk of problems for themselves and their children) when they become pregnant and have children, and there is evidence that this occurs in many different parts of the world (e.g., Raitasalo, 2011; Maloney et al., 2010; Callinan & Room, 2013). How and why mothers (and fathers) make, or do not make, these behavioural changes should be studied, as should other harm minimisation techniques that parents adopt if they choose to drink around their children. Mothers (and fathers) that are more marginalised, particularly those who misuse illicit drugs in combination with alcohol, may be less well supported to make such changes. Perhaps better understanding of the risk perceptions and risk management strategies of mothers who misuse alcohol and other substances should be the focus of future

research. This may inform interventions by which the lives of these mothers and their children could become safer.

Holmila, Raitasalo and Kosola suggest that the key to addressing some of the problems of this vulnerable substance misusing group may be in providing better identification, referral and support services for these mothers. The mothers are commonly in contact with a range of government services and this should be helpful, although others have found that many substance using women may be alienated by the way they are treated (Leppo, 2010). If better relationships were developed, for example between alcohol and drug treatment services workers and young women, and this resulted in better outcomes for the mothers and their children, this may prevent later entry of parent-child dyads into the child protection system.

It is also plausible that increased public alcohol and other drug policy interventions may decelerate the problems experienced by women misusing substances, although whether population-based strategies also act to decrease the problems of those most seriously affected should be tested. Such population-based strategies may be important for the longer term.

Indirectly the paper also highlights the plight of the children involved. Previous work by the authors has described the outcomes for children of mothers who misuse substances and found increased injury and illness rates (Raitasalo and Holmila, 2013). It seems that in recent decades, removal of children in such circumstances has been increasingly resorted to in Finland. In the

UK, Forrester and Harwin (2008) report that children who were removed from their families where substance misuse was present appeared to do better. There is ongoing tension between child and parent advocates about whether authorities are too quick or too slow to intervene. The impact on mothers and their children of the removal of children from their mothers should be closely examined, in comparison with alternatives. In individual cases these are the difficult decisions that social workers must make.

Mothers do have an integral role in bringing up their children, but their role is not isolated from the environment within which they care for their children. Mothers operate in an ecological context where their friends and families, local communities, community services including the health and treatment services and schools, and societies and governments enable (and disable) their capacity to cope and succeed as parents (Bronfenbrenner, 1979; Scott & Arney, 2010). More work, such as found in this paper, is needed to understand the problems of those who are most vulnerable and how they can best be assisted, for their own sake, as well as for the sake of their dependents.

Declaration of interest None.

Anne-Marie Laslett, Research Fellow
Centre for Alcohol Policy Research, Turning
Point Alcohol and Drug Centre
School of Global and Population Health,
University of Melbourne
Eastern Health Clinical School, Monash University
E-mail: Anne-MarieL@turningpoint.org.au

REFERENCES

- Bronfenbrenner, U. (1979). *The Ecology of Human Development*. Cambridge, MA: Harvard University Press.
- Callinan, S., & Room, R. (2012). *Alcohol consumption during pregnancy: Results from the 2010 National Drug Strategy Household Survey*. Canberra: Foundation for Alcohol Research and Education.
- Forrester, D., & Harwin, J. (2006). Parental substance misuse and child care social work: Findings from the first stage of a study of 100 families. *Child and Family Social Work, 11*(4), 325–335.
- Forrester, D., & Harwin, J. (2008). Parental substance misuse and child welfare: Outcomes for children two years after referral. *British Journal of Social Work, 38*, 1518–1535.
- Laslett, A., Room, R., Ferris, J., Wilkinson, C., Livingston, M., & Mugavin, J. (2011). Surveying the range and magnitude of alcohol's harm to others in Australia. *Addiction, 106*(9), 1603–1611.
- Leppo, A. (2012) *Precarious Pregnancies: Alcohol, Drugs and the Regulation of Risks*. Academic dissertation. Helsinki: Department of Social Research, University of Helsinki.
- Maloney, E., Hutchinson, D., Burns, L., & Mattick, R. (2010). Prevalence and patterns of problematic alcohol use among Australian parents. *Australian and New Zealand Journal of Public Health, 34*(5), 495–501.
- O'Donnell, M., Scott, D., & Stanley, F. (2008). Child abuse and neglect — is it time for a public health approach? *Australian and New Zealand Journal of Public Health, 32*(4), 325–330.
- Raitasalo, K. (2011). Drinking in the presence of underage children: Attitudes and behaviour. *Addiction Research and Theory, 19*(5), 394–401.
- Scott, D. & Arney, F. (2010). *Working with Vulnerable Families: A Partnership Approach*. Cambridge University Press.



