

## Introduction

Most adults in or seeking recovery are parents, and many of them identify caring for their children or strengthening their relationships with them as primary recovery goals (Nicholson, Biebel, Katz-Leavy, & Williams, 2004; Reupert, Price-Robertson, & Maybery, 2017). Supporting individuals in managing challenges related to their parenting roles supports their overall recovery. In two randomized trials of a parenting intervention for mothers with opiate use disorders called *Mothering from the Inside Out*, mothers participating in the intervention showed a decline in opiate use (Suchman et al., 2017; Suchman, DeCoste, McMahan, Rounsaville, & Mayes, 2011). A recent systematic review found promising early indications that recovery-oriented parenting supports may improve people's quality of life and progress toward individual treatment and recovery goals (Reupert et al., 2017).

This issue brief explores the complex and multidirectional connections between parenting, treatment, and recovery, and examines how provider or treatment agencies and recovery support organizations can increase their capacity to assist individuals in recovery with achieving their goals for parenting and recovery.<sup>1</sup> For ease of reading, we will use the term "parent" as shorthand for individuals in recovery from substance use disorders or serious mental illness who are parents. Finally, recognizing that parenting relationships, with all their associated rewards and challenges, continue long after children become adults, we will use the term "child" to describe individuals receiving parenting, regardless of their age.

## Parenting and Recovery

Parenting provides a context for recovery that may be both rewarding and stressful (Rutherford, Potenza, & Mayes, 2013). Parenting can be one of life's most meaningful experiences and may be a common goal for adults living with serious mental illness or substance use disorders. For those who feel different or set apart from others because of a diagnosis, parenting may provide an opportunity to achieve life goals viewed positively and shared by others. Having children provides entry into diverse natural supports, for example, in relationships among extended family, in the neighborhood, or on a playground. Parenting also facilitates access to support from additional professionals such as pediatricians, daycare providers, or school counselors. These positive parenting experiences may provide hope that life can be different and that a person can achieve their goals.

At the same time, parents in or seeking recovery often find that coping with challenges in caring for and relating to their children alongside a serious mental illness or substance use disorder may be especially difficult, particularly if combined with a history of trauma.

Many parents face challenges related to money, housing, time, lack of childcare, and the physical exhaustion that can come with caring for children around the clock. Parents in recovery may also experience criminal justice or child welfare involvement, concerns about how others may assess their ability to parent, strained relationships due to extended separation from their children, and challenges balancing their own recovery needs with their children's needs. These stressors are in addition to the many emotional challenges experienced by most parents. Without support, the pressure of these cascading stressors may trap a parent in a vicious, escalating cycle that can trigger a fight or flight response and threaten recovery.

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<sup>1</sup> BRSS TACS and this technical assistance resource align with the priorities of the SAMHSA FY2019-2023 Strategic Plan to reduce the impact of serious mental illness and serious emotional disturbance and improve treatment and recovery support services through implementation of the comprehensive set of recommendations put forward by the Interdepartmental Serious Mental Illness Coordinating Committee. These priorities include improving treatment and recovery by closing the gap between what works and what is offered and expanding the use of community recovery support systems such as clubhouses and other peer-to-peer focused support services.

## How Peers Can Support Parents

Parenting is complicated, and parents may need support in a variety of areas, including meeting their family's basic needs, learning to navigate systems, building a network of support, developing plans for keeping children safe, and balancing competing demands on their time and energy.

Peers with training, support, and their own experience of parenting in recovery are uniquely qualified to offer recovery-oriented parenting supports. Because peer relationships are based on mutuality and respect with careful attention to the relationship's power dynamic, parents in recovery may be more willing to engage in peer-provided recovery support services than in parenting-related programming delivered by non-peers. For many parents in recovery, a bureaucratic focus on the assessment of risk, power differentials, and fear of losing custody of their children may have marred relationships with other child and family service providers (Dumbrill, 2006). Peer support workers offer a different kind of relationship. At the same time, many peers may be hesitant to explore parenting experiences with the individuals whom they support.

Because of their past experiences and life lessons learned, peers have a unique capacity to understand and support parents in recovery. A peer who understands the motivation of a parent who chooses to purchase a new school backpack for a child rather than buy medication or attend a treatment session may be well positioned to serve as a bridge between that parent and other providers, supporting engagement in treatment or recovery support services and providing practical, hands-on assistance with problem solving. It is in achieving a balance between caring for one's self and caring for one's children where the peer may be most skilled. While many different types of workers can encourage parents living with a serious mental illness or substance use disorder to seek effective treatment, peers are particularly well prepared to help parents navigate the practical challenges of balancing daily life and parenting with active engagement in treatment and recovery. Peers may have knowledge and experiential guidance to model and they can provide feedback to parents as they master the challenges of daily living, such as household management and creating a safe home environment; time management and getting children to school and the pediatrician; organizational skills and helping children finish homework while getting dinner on the table.

Working with families may be emotionally laden, and existing peer training programs do not typically address this area of support. Peer support workers, like all people, have their own beliefs and feelings about parenting, usually based on their own lived experiences. In order to support parents, peers need training on the systems and resources that are important for individuals in their parenting roles, in addition to more general peer or recovery coach training. Many

## Challenges for parents

(Tchernegovski, Hine, Reupert, & Maybery, 2018)

1. Serious mental illness, substance use disorder, and trauma exposure may trigger an imbalance in neurobiological systems. This may cause parents to experience more emotional stress and less pleasure during everyday activities with their children of all ages (Goodyear, et al., 2015; Jutchenko, 2018). Insight into these feelings and the development of skills to manage stressful situations may contribute to positive parenting experiences and support recovery (Biebel, Nicholson, & Woolsey, 2014; Hasson-Ohayon, Malka, Goldzweig, & Roe, 2018).
2. Past experiences may influence how parents understand the world and relate to others, including their children. Past traumatic experiences may heighten or dull parents' emotional reactions to everyday events (Moges & Weber, 2014; Zalewski, Cyranowski, Cheng, & Swartz, 2013). Previous experiences with their own parents may affect how parents respond to their children in the present or how they react to difficulties that arise. Cultural expectations and values shape parenting behavior as well (Carpenter-Song et al. 2014; Lacey et al., 2015). An understanding of an adult's past experiences, cultural background, expectations, and values may help to shape a successful approach to supporting them in their treatment and recovery and in their relationships with their children.
3. Experiences of psychiatric distress, substance use, and trauma may overlap with and escalate one another (Suchman, Ordway, de las Heras, & McMahon, 2016; Tchernegovski et al., 2018). An adult who experienced physical or emotional maltreatment as a child is more likely to be diagnosed with a mental or substance use disorder, or both as an adult that, in turn, may lead to new traumatic events, which may further intensify symptoms of mental illness, substance use disorder, or both (Cashmore & Shackel, 2013; Perera, Short, & Fernbacher, 2014). Many parents with these experiences hope to break this cycle with their children and seek ways not to repeat the past. Mothers and fathers often say that they want to be "different" and "better" parents than their parents were. These beliefs may provide motivation to pursue recovery and engage in parenting services and supports to improve relationships with their children (Maybery, Reupert, & Goodyear, 2013; Power et al., 2016).

peers may need training on child development and parenting challenges as well. Ongoing supervision that includes teaching and modeling of parenting support and opportunities to reflect and discuss the emotional complexities of working with people in their parenting roles is also essential. With needed information and support, peers may be invaluable resources for parents in or seeking recovery by engaging in a range of supportive activities. Table 1 suggests activities for peers that are supportive of parents in recovery. We categorize these activities across four domains: engaging, supporting, coaching, and sharing lived experiences.

## Implementing Recovery-Oriented Parenting Supports

At many recovery centers, community members can access activities, workshops, assistance navigating systems, and a full range of social, informational, and practical supports. Most centers offer a variety of groups, including several that are age- or gender-specific or focus on topics such as trauma, wellness, coping with hearing voices, compulsive behaviors, or alternatives to suicide. Centers may also offer services focusing on skills needed for specific roles, such as worker, tenant, and student.

Parenting support groups and services focused on parenting roles may be absent in these settings, as are opportunities for individuals to share their experiences as parents. Here are a few reasons these opportunities may be missing:

- Historically, many components of systems serving individuals with mental or substance use disorders, including treatment and rehabilitation services, have not attended to the parenting role despite the role’s importance to people in recovery. Peer-run organizations may have inherited this pattern of overlooking the role of parenting in the lives and recovery of adults. The good news is that many treatment and recovery support providers are committing themselves to improving their capacity to support people in their parenting roles. Innovators are finding new and promising ways to integrate parenting supports within evidence-based interventions, such as Assertive Community Treatment (ACT Institute for Recovery-Based Practice, 2018; White et al., 2014).
- Leaders of peer-run and recovery community organizations may feel ill-equipped to support individuals in parenting roles.
- Existing peer specialist and recovery coach training models do not address parenting support.
- Stakeholders in peer-run organizations may fear that talking about parenting may alienate or trigger members who have lost custody of their children or who never had the opportunity to start families.

While these concerns and challenges are significant, they are not insurmountable, particularly given the resilience and innovation of peer-run organizations and the growing recognition of the importance of holistic, person-driven recovery supports. Whether a peer-run organization seeks to implement a formal parenting peer support program or simply to make small changes that honor the connections between parenting, treatment, and recovery and better meet the needs

<b>Engaging</b>	Engaging encompasses being fully present with parents; listening with interest and without judgment; and honoring and respecting parents’ experience, abilities, and expertise regarding their own lives and families (McShin Foundation, 2017; Substance Abuse and Mental Health Services Administration, 2015).
<b>Supporting</b>	Peers may learn and use a variety of support strategies, including validating feelings, mirroring experiences, being transparent, and acknowledging limits. Each of these strategies may advance peers’ effectiveness in helping parents cope with parenting challenges. Peers may use role modeling and feedback to support parents’ development of skills in advocating for, accessing, and coordinating essential family resources and meeting children’s needs (McShin Foundation, 2017; Substance Abuse and Mental Health Services Administration, 2015).
<b>Coaching</b>	With training, peers may be able to coach parents in learning how to recognize and understand their children’s cues and establish developmentally appropriate expectations. Learning to follow children’s cues and to recognize developmentally normal behaviors may help parents feel less stressed or overwhelmed and better equipped to manage parenting challenges. Offering information and assistance in navigating child and family service systems is another key peer role (McShin Foundation, 2017; Substance Abuse and Mental Health Services Administration, 2015).
<b>Sharing lived experience</b>	By sharing their own experiences as parents in recovery, peers may inspire hope and help parents feel less alone (McShin Foundation, 2017; Substance Abuse and Mental Health Services Administration, 2015).

of individuals served by existing programming, recognizing the extent to which peer supporters need training and support in this area is critical. Although most existing peer specialist and recovery coach training programs provide information about partnering, supporting, and relating, few offer practice or examples of how to do this work in ways specific to parenting. None, for example, provide information about child development or responding to children's cues. Organizations seeking to implement recovery-oriented parenting supports need to connect peers with training that can support skill development in these areas. Peers providing parenting supports may also need ongoing support in maintaining their own recovery and coping with the emotional stressors of their role.

In addition to preparing peer supporters to support individuals in their parenting roles, organizations can do much to increase their ability to effectively serve parents.

## Recognize and respond to people's roles as parents



Asking about individuals' parenting experience and goals and creating safe spaces, such as support groups, for individuals to talk about their lives as parents are two key steps virtually any organization can take.

Groups may focus on parents living with their children *and* parents living apart from them—in this way they honor the central role of parenting in the lives of both custodial and noncustodial parents and communicate explicit respect and support for parents experiencing separation from their children.

## Accommodate parents



Many parents struggle with balancing their own needs for recovery supports with hectic schedules of childcare, appointments, and other related responsibilities. Offering programming at a variety of times and making online and telephonic support available are important aspects of accommodating parents' needs.

## Offer workshops and programming focused on parents' concerns



*Families Facing the Future* has evidence to support its effectiveness in increasing parenting skills and problem solving ability (Catalano, 1999; Gaaney et al., 2007). Other programs with emerging best practices, including the Pennsylvania Family Support Alliance's *Families in Recovery Program*, the *National Organization on Fetal Alcohol Syndrome's Circle of Hope*, and the Copeland Center's *Family Wellness Recovery Action Plan* offer models of group-based parent support and education. Organizations may choose to implement groups and workshops in parenting topics or partner with other organizations already doing so.

## Learn about resources that matter to parents in your community



Many organizations offer helpful information about community resources and have strong partnerships with organizations that specialize in housing, employment, legal services, or other essential services. By gathering credible information and developing partnerships with organizations focused on parenting, child, and family-related services—including childcare, family court advocacy, children's mental health, and other important service areas—peer-run organizations may be able to more fully meet the needs of their community members. Family-run organizations may be another great source of information and support for parents in recovery who have concerns about their children's mental health needs or substance use.

## Offer childcare and a family-friendly environment



Not every organization will elect to welcome children. In some cases, organizations do not have adequate space to do so. In others, they may choose not to out of concern for their community members who find being around other people's children emotionally difficult. As so many adults with mental and substance use disorders grieve the loss of their own children or the opportunity to become parents, this dynamic is important to explore.



## Tips for establishing a family-friendly environment

- Providing childcare to parents while they engage with recovery support services may be enormously helpful. Organizations may collaborate with other community resources that have child guidance expertise to find a qualified person (or intern) to provide childcare and consult about developmental concerns parents may have about their children. The childcare provider may also serve as a liaison to local child guidance agencies and help parents connect to child guidance services when there is a need for further support or assessment for their children.
- The setting should be welcoming for parents who have children in tow. There should be supplies such as extra diapers and wipes, healthy snacks for children, child-friendly bathrooms, safe play areas, furniture at toddler level, child-size furniture, toys, and distance from high traffic areas and potentially dangerous objects or substances.
- You should provide enough training and support to all staff in the setting so that they are confident about maintaining a physically and emotionally safe environment for children while the parents are meeting with peer supporters.
- The physical space should have flexibility for use as a childcare facility. You can store appropriate toys (that are cleanable and safe for child age) in a bin with a lid, for example. In addition, mats, books and puzzles, interactive toys allowing for different kinds of play, plus a supply of books, adult coloring books, and games suitable for older children and teens go a long way toward communicating that your organization is family-friendly.
- A child life specialist may be able to help organizations create atmospheres that are sensitive to children and parents and supportive of their needs within the context of a setting where adults are coming and going both with and without children. They may help families cope with in-the-moment challenges; provide age-appropriate preparation for being with the parent in the clinic; and provide information and support to parents, family members, and peers that can include developmental guidance, parenting strategies, supportive services, and other resources. While many organizations may not have the resources to hire a child life specialist, it may be possible to connect with a child life specialist training program to explore the possibility of becoming an internship site. ZERO TO THREE offers a range of free resources, practical tools, technical assistance, and policies for parents, professionals, and policymakers to ensure that critical connections for babies and toddlers are supported (ZERO TO THREE, 2019). Collaboration with this program may advance an organization's capacity to support younger children and their parents.

## Conclusion

Although implementing recovery-oriented parenting supports is not easy, it is an essential part of assisting adults in recovery to achieve their recovery goals. A central part of life for many adults, parenting may both inspire and challenge recovery. Peers have great potential to offer recovery-oriented parenting supports, and peer-run organizations are uniquely positioned to help those they serve to achieve their parenting and recovery goals.

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