

Mental Minutes

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Effects of Parental Substance Abuse on Children and Families

Children of Alcoholics (COA) and Children of Other Substance Abusers (COSA) are a population without a clear definition. Because the concept of COA/COSA is focused on the child rather than the parent, the definition of a COA/COSA is any child whose parent (or parental caregiver) uses alcohol or other drugs in such a way that it causes problems in the child's life. The child may no longer be living with the substance abusing parent because of separation, divorce, abandonment, incarceration or death. And the parent does not have to be still actively drinking or using for the child to continue to feel the impact of the abuse.

In families where alcohol or other drugs are being abused, behavior is frequently unpredictable and communication is unclear. Family life is characterized by chaos and unpredictability. Behavior can range from loving to withdrawn to crazy. Structure and rules may be either nonexistent or inconsistent. Children, who may not understand that their parent's behavior and mood is determined by the amount of alcohol or other drugs in their bloodstream, can feel confused and insecure. They love their parents and worry about them, and yet feel angry and hurt that their parents do not love them enough to stop using.

Despite the suffering these children endure, many blame themselves for their parent's substance abuse. They believe it when their parents scream that they wouldn't drink so much or use other drugs if the children didn't fight, or rooms were kept clean or grades were better. Some children try to control the drinking or drug use by getting all A's, or keeping the house spic and span, or getting along perfectly with their siblings. Others withdraw, hoping not to create any disturbance that might cause a parent to drink or use. Few realize that children cannot cause a parent to drink or use drugs, nor can they cure a parent's substance problem.

Many times, children of substance abusers are frightened. They may be the victims of physical violence or incest. They may also witness violence – frequently alcohol and other drug abuse goes hand in hand with domestic violence. And as a result, these youngsters may suffer from post-traumatic stress syndrome, with the same kinds of sleep disturbances, flashbacks, anxiety, and depression that are associated with victims of war crimes. These children are not only frightened for their own well-being – they also harbor the all-too-real concern that their parent may get sick or die as a result of the drinking or drug use. They know that their parent may drive intoxicated, or get into fights on the street.

Despite the fact that friends can be a buffer for the problems at home, some COAs/ COSAs have a limited social life. They may avoid bringing home friends, or going out in public with their parents. They may even shy away from making friends, because they lack basic social skills or out of a profound fear that someone will find out the truth. They may also find it difficult to make friends because other parents have warned their children to stay away from these youngsters from troubled families. On the other hand, some young people use friends as buffers, relying on their leadership skills to take on key positions in school and extracurricular activities. These young people are often among the most difficult to identify as COAs/ COSAs because their achievements make them seem so "well-adjusted."

Source: <http://www.coaf.org/professionals/effects%20.htm>

Did you know???

A child in an alcoholic family may have a variety of problems:

Guilt. Children may view themselves as the main cause of the mothers' or fathers' drinking.

Anxiety. Children may worry constantly about the situation at home. They are afraid the alcoholic parent will become sick or injured, and may also fear fights and violence between the parents.

Embarrassment. Parents may give the message that there is a terrible secret at home. The ashamed child does not invite friends home and is afraid to ask anyone for help.

Inability to have close relationships. Because children have been disappointed by the drinking parent many times, they often do not trust others.

Confusion. The alcoholic parent will change suddenly from being loving to angry, regardless of the child's behavior. A regular daily schedule, which is very important for a child, does not exist because bedtimes and mealtimes are constantly changing.

Anger. The child feels anger at the alcoholic parent for drinking, and may be angry at the non-alcoholic parent for lack of support and protection.

Depression. The child feels lonely and helpless to change the Situation.

Source: http://www.baptistonline.org/health/healthieryou/family/alcohol_ChildrenAtRisk.asp



UPCOMING WORKSHOP

ATTACHMENT 101: THE BASICS AND BEYOND

On March 25, 2010, ABC University will host Attachment 101: The Basics and Beyond, an intensive, interactive full day session delving into understanding "Attachment" - one of the fundamental biological processes necessary for survival.* This training will highlight the importance of attachment in the developmental process of a child and how it shapes the behavior and personality of an individual. Participants will gain a working knowledge of brain differences in children affected by early childhood trauma and its' linkage to the continuum of attachment difficulties that lead to Reactive Attachment Disorder (RAD). Additionally, participants will acquire cutting edge techniques for responding to children and adolescents with attachment disorders as they are introduced to multiple treatment models used by different attachment-focused clinicians from around the world. Attachment 101 will be co-led by clinicians Jeffrey Atkinson, LPC NCC and Cassandra Johnson-Landry, LPC NCC. Jeff and Cassandra are specially trained to treat attachment resistant children and are the Lead Therapists and Founders of the Attachment and Bonding Center of Atlanta, LLC, also known as ABC. The Attachment and Bonding Center of Atlanta has used the latest interventions to treat thousands of children with attachment disorders and has contributed to research done by UCLA related to brain functions of children with early childhood trauma. This training is designed for clinicians, medical professionals, nurses, early childhood and child development specialists, child welfare professionals and caretakers.

*Log on to www.mentalhealthgeorgia.com for more information and registration form!!!

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HEALING ALCOHOLICS: IMPORTANT FACTS

Alcohol and Drug Abuse Hurts Everyone in the Family

Dependence on alcohol and drugs is our most serious national public health problem. It is prevalent among rich and poor, in all regions of the country, and all ethnic and social groups. Millions of Americans misuse or are dependent on alcohol or drugs. Most of them have families who suffer the consequences, often serious, of living with this illness. If there is alcohol or drug dependence in your family, remember you are not alone. Most individuals who abuse alcohol or drugs have jobs and are productive members of society creating a false hope in the family that “it’s not that bad.” The problem is that addiction tends to worsen over time, hurting both the addicted person and all the family members. It is especially damaging to young children and adolescents. People with this illness really may believe that they drink normally or that “everyone” takes drugs. These false beliefs are called denial; this denial is a part of the illness.

It Doesn’t Have to be That Way

Drug or alcohol dependence disorders are medical conditions that can be effectively treated. Millions of Americans and their families are in healthy recovery from this disease. If someone close to you misuses alcohol or drugs, the first step is to be honest about the problem and to seek help for yourself, your family, and your loved one. Treatment can occur in a variety of settings, in many different forms, and for different lengths of time. Stopping the alcohol or drug use is the first step to recovery, and most people need help to stop. Often a person with alcohol or drug dependence will need treatment provided by professionals just as with other diseases. Your doctor may be able to guide you.

Family Intervention Can Start the Healing

Getting a loved one to agree to accept help, and finding support services for all family members are the first steps toward healing for the addicted person and the entire family. When an addicted person is reluctant to seek help, sometimes family members, friends, and associates come together out of concern and love, to confront the problem drinker. They strongly urge the person to enter treatment and list the serious consequences of not doing so, such as family breakup or job loss. This is called “intervention.” When carefully prepared and done with the guidance of a competent, trained specialist, the family, friends and associates are usually able to convince their loved one – in a firm and loving manner – that the only choice is to accept help and begin the road to recovery. People with alcohol or drug dependence problems can and do recover. Intervention is often the first step.

Children Need Help Too!

Children in families experiencing alcohol or drug abuse need attention, guidance and support. They may be growing up in homes in which the problems are either denied or covered up. These children need to have their experiences validated. They also need safe, reliable adults in whom to confide and who will support them, reassure them, and provide them with appropriate help for their age. They need to have fun and just be kids. Families with alcohol and drug problems usually have high levels of stress and confusion. High stress family environments are a risk factor for early and dangerous substance use, as well as mental and physical health problems. It is important to talk honestly with children about what is happening in the family and to help them express their concerns and feelings. Children need to trust the adults in their lives and to believe they will support them. Children living with alcohol or drug abuse in the family can benefit from participating in educational support groups in their school student assistance programs. Those age 11 and older can join Alateen groups, which meet in community settings and provide healthy connections with others coping with similar issues. Being associated with the activities of a faith community can also help.

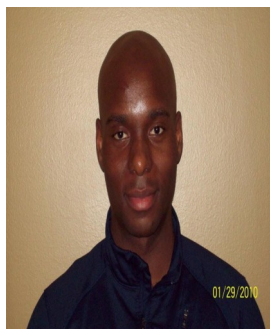
Source: <http://csat.samhsa.gov/NACOA/family.aspx>



I am awakened from my sleep by sounds of breaking glass and screams
 It’s happening again; happens every night now, it seems
 Mommy is threatening, saying she will call the police
 She’s begging him to just leave; she’s saying “please don’t hurt me”
 I am gasping for air now, as I crawl to the floor
 It is getting harder and harder to breathe as I peak underneath the door
 I hear him coming toward my room and Mommy says “not my baby”!
 I roll toward my bed, hoping going under will save me
 Before he even gets there I can smell the liquor on his breath
 It has become all too familiar, it smells more and more like death
 And as he snatches my little body and I scream out “no, please”
 Mommy says she’s had enough, and continues to beg him to leave
 And as he chokes me, for reasons I do not know
 All I can smell is the alcohol, the smell of death so slow
 Fade to black as his yelling and cursing becomes silent
 This can’t be my life, why is he so violent?
 Mommy has stopped him; yet again she has saved my life
 I wake up in her arms, protecting me with a knife
 And now he’s gone again to return tomorrow like it was a dream
 He knows not what he does to us...he’ll never know until he’s clean.
 By: Nafiyisa Simmonds



Staff Star



Let's all celebrate Dwight Willis as our Staff Star for the month of February! Dwight comes to us from Georgia State University with a Bachelor's degree in Human Resources (HR) Management/ Training and Development. Dwight has been employed in the HR field for 6 years and has worked with both the Social Security Administration and New Birth Missionary Baptist Church. He has been the Human Resources Manager for ABC/ACT for ten months now and notes that he has seen the most change and progression within the contractual staff at the agency. Dwight noted "they are the ones that keep this party going and to see changes in the maturity, perseverance, and team work of the contract staff makes all the difference. There have been numerous staff changes that have created a wonderful array of people who are committed to their job duties and their clients." Although the agency has undergone much positive growth, there is always room for improvement and Dwight envisions an increase in size and functions, which will necessitate more support staff members. Additionally, he sees ABC/ACT expanding to serve a more dynamic population with services such as resi-

dential treatment and GED programs, and an expansion of our benefits package which will include an employee assistance program. When asked about his biggest contribution to the organization, Dwight pointed out that he "presents a kind heart" and despite all his "hard work or screw-ups at times", being able to give a listening ear to all those that he speaks with daily means more than anything else. Dwight acknowledges that he has changed a few forms and processes within HR, but "representing the agency in a positive way is a huge contribution in itself." Dwight revealed that he is "definitely driven by a higher power [and] it takes diligence, wisdom, and patience to [meet the needs] of almost 80 people." Dwight's colleagues describe him as being "very helpful and a pleasure to work with," "having a great attitude and assisting no matter what the need is," "listening to everyone's concerns without complaining," and "putting up with everyone's issues at any time of the day while remaining calm, centered, and flexible." Dwight asserts that he keeps such a positive attitude and outlook by focusing on his future goals such as teaching or running for a political office. Further, he declares that "thoughts bring about actions, and actions bring on habits that eventually create a lifestyle; therefore, it is a necessity for me to maintain integrity, respect, and a positive outlook in order to pursue and achieve every single one of my heart's desires. There are a lot of things that I plan to achieve and in order for me to do so I have to start where I am – at ABC/ACT!"

Congratulations Dwight! Your optimism is contagious to us all and your dedication to the ABC/ACT staff is honorably noted!!!

"Mental-Minute"

Black History Quiz

Can you name these 10 famous Black Americans?

1. American "scat" singer who became one of the most popular recording artists in history.
2. Tennis player who in 1975 was ranked number one in world tennis.
3. Famous black baseball player who played in the U.S. major leagues.
4. Famous black poet and writer who published his first two books before graduating college.
5. First American woman to win three track-and-field gold medals in a single Olympics.
6. Choreographer who started a world-famous dancing company that was mostly made up of black dancers.
7. American singer known as the "Queen of Gospel."
8. Best known for the athletic records that he broke at the 1936 Olympic Games.
9. The first black congresswoman to come from the Deep South. She was later elected to represent Texas in the U.S. House of Representatives.
10. Invented the railway telegraph system. He has been called the "Black Edison" for his 200 inventions and innovations.

Source: <http://www.afro.com/CHILDREN/children.html>

Recipe Round-Up

Wake-Up Smoothie

Ingredients

- 1 1/4 cups orange juice, preferably calcium-fortified
- 1 banana
- 1 1/4 cups frozen berries, such as raspberries, blackberries, blueberries and/or strawberries
- 1/2 cup low-fat silken tofu, or low-fat plain yogurt
- 1 tablespoon sugar, or Splenda Granular (optional)

Preparation

Combine orange juice, banana, berries, tofu (or yogurt) and sugar (or Splenda), if using, in a blender; cover and blend until creamy. Serve immediately.

Nutrition

Per serving: 157 calories; 2 g fat (0 g sat, 0 g mono); 0 mg cholesterol; 33 g carbohydrates; 4 g protein; 4 g fiber; 19 mg sodium; 430 mg potassium.

Nutrition Bonus: Vitamin C (110% daily value), Fiber (16% dv).

2 Carbohydrate Serving

Exchanges: 2 fruit, 1/2 low-fat milk

Source: http://www.eatingwell.com/recipes/wake_up_smoothie.html



Mental Health Georgia provides an extensive array of mental health services for both children and adults. "Our mission is to provide high-quality, easily accessible services for Georgians, focused on promoting mental and emotional well-being through personal and professional development, family preservation, resource coordination, and individualized treatment.



Resource Readiness

Here are some great resources for families in need of more information about Alcoholism and Children of Alcoholics.

Al-Anon Family Groups

www.al-anon.org

Alateen

www.alateen.org

Alcoholics Anonymous

www.aa.org

Adult Children of Alcoholics

www.adultchildren.org

SAMHSA's National Helpline

1-800-662-HELP

www.findtreatment.samhsa.gov

National Association for Children of Alcoholics

www.nacoa.org

National Council on Alcoholism and Drug Dependence

www.ncadd.org

Center on Addiction and the Family

<http://www.coaf.org/default.htm>

Clinical Corner ~ Children of Alcoholics: Important Facts

1. **Alcoholism affects the entire family.** Living with a non-recovering alcoholic in the family can contribute to stress for all members of the family. Each member may be affected differently. Not all alcoholic families experience or react to this stress in the same way. The level of dysfunction or resiliency of the non-alcoholic spouse is a key factor in the effects of problems impacting children.
2. **Many people report being exposed to alcoholism in their families.** Seventy six million Americans, about 43% of the U.S. adult population, have been exposed to alcoholism in the family.
3. **There is strong, scientific evidence that alcoholism tends to run in families. Children of alcoholics are more at risk for alcoholism and other drug abuse than children of non-alcoholics.** Children of alcoholics are four times more likely than non-COAs to develop alcoholism.
4. **Alcoholism usually has strong negative effects on marital relationships.** Separated and divorced men and women were three times as likely as married men and women to say they had been married to an alcoholic or problem drinker.
5. **Alcohol is associated with a substantial proportion of human violence, and perpetrators are often under the influence of alcohol.** Alcohol is a key factor in 68% of manslaughters, 62% of assaults, 54% of murders and attempted murders, 48% of robberies, and 44% of burglaries.
6. **Based on clinical observations and preliminary research, a relationship between parental alcoholism and child abuse is indicated in a large proportion of child abuse cases.** A significant number of children in this country are being raised by addicted parents. With more than one million children confirmed each year as victims of child abuse and neglect by state child protective service agencies, state welfare records have indicated that substance abuse is one of the top two problems exhibited by families in 81% of the reported cases.
7. **Children of alcoholics exhibit symptoms of depression and anxiety more than children of non-alcoholics.** In general, COAs appear to have lower self-esteem than non-COAs in childhood, adolescence and young adulthood.
8. **Children of alcoholics experience greater physical and mental health problems and higher health care costs than children from non-alcoholic families.** The rate of total health care costs for children of alcoholics is 32% greater than children from non-alcoholic families.
9. **Children of alcoholics score lower on tests measuring verbal ability.** COAs tend to score lower on tests that measure cognitive and verbal skills.
10. **Children of alcoholics often have difficulties in school.** COAs often believe that they will be failures even if they do well academically. They often do not view themselves as successful.
11. **Children of alcoholics have greater difficulty with abstraction and conceptual reasoning.** Abstraction and conceptual reasoning play an important role in problem solving, whether the problems are academic or are situation related to the problems of life. Therefore, children of alcoholics might require very concrete explanations and instructions.

See full article at: <http://www.nacoa.net/impfacts.htm>

"Mental-Minute Solution"

1. Ella Fitzgerald
2. Arthur Ashe
3. Jackie Robinson
4. Langston Hughes
5. Wilma Rudolph
6. Alvin Ailey
7. Mahalia Jackson
8. Jesse Owens
9. Barbara C. Jordan
10. Granville T. Woods

Source: <http://www.afro.com/CHILDREN/children.html>

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