

## Impact of Parental Substance Abuse on Children Later in Life

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Parental substance abuse in the home may negatively affect the health of their children. The purpose of this study is to better understand whether the impact of parental substance abuse on children persist into their adult lives. This study is a cross-sectional, exploratory study with quantitative methodology. Data was collected by SurveyMonkey, a web-based online survey tool. A total of 243 participants responded for the survey and the data was analyzed with the SPSS statistical software. Multivariate analysis (ANOVA) showed that regardless of age of children, there are significant main effects of mental and/or physical health issues in later life of children who experienced parental substance abuse. In addition, the young adult (18-30) group is more likely to have mental health issues than the middle-aged and older adult groups. The research findings indicate that those who have experienced family substance abuse are considerably likely to have mental health issues regardless of age.

**Keywords:** parental substance abuse, children, mental health, foster care

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### Introduction

Just like smoking in the home affects children's lungs, parental substance abuse and addiction may affect the children's living in the home as well, often negatively. Children require a loving, caring environment to grow and develop properly. However, with a parent who has a substance addiction, the child may be deprived of an environment essential for them to prosper, leading to emotional, developmental, and health issues. Hindered due to a toxic environment related to drugs, children may grow up with a skewed idea of family and may also have difficulty in school and other relationships down the line, frequently socially isolated. Furthermore, the impacts of a drug or alcohol addicted parent on their children can be evident when these children reach adulthood.

The purpose of this study is to identify whether the impact of parental substance abuse on children extends into their adult lives. In the context of human services (e.g., social work), it is important to understand clients growing up in a home with parents having an addiction issue and to serve them to meet their individual diverse needs when they reach adulthoods.

### Literature Review

There is a multitude of literature on the issue of children growing up with substance abusing parents indicating how parental substance abuse interferes with family functioning and have negative effects on children's health and welfare (Akin et al. 2017; Felitti et al., 1998; Hussong et al. 2007; Leichtling, Gabriel, Lewis, & Vander Ley, 2006). Children who experience substance abuse in the home "are known to experience higher rates of maltreatment, neglect, physical and sexual abuse, behavioral and socio-emotional problems" (Lewis, Holmes & Mathers, 2015, p.2398). Lots of cases of child abuse so frequently stem from parents who abuse substances. Children are incredibly more likely to be abused when their parents are substance abusers (Taylor, 2011). A frequent issue that many children face from witnessing parental substance abuse is domestic violence. Many children experience violence first hand within their own homes from a young age. Conners-Burrow et al. (2013) indicated that there's a connection to exposure to violence and a child's psychological well-being in the future. Constant confrontation

can lead to negative emotions (e.g., guilt and shame) and conduct disorders as they grow (Velleman & Templeton, 2007).

The families who are struggling with substance abuse are more likely to have conflicts with each other as well as legal conflicts, financial difficulties, and inconsistent housing, resulting in the child having social and behavioral problems (Ashrafioun, Dambra & Blondell, 2011). Children who grew up in a drug-filled environment may be more likely to experience problems in personal and social functioning, such as aggression, impulsivity, and disruptive behavior disorders (Puttler, Zucker, Fitzgerald, & Bingham, 1998). Socially isolated children often have problems getting along those in the classroom as well as getting good grades (Conners-Burrow et al., 2013). It has also been proven that parental drug abuse is closely related to declining performances on achievement tests, truancy, suspensions, and other school-related problems (Ashrafioun et al., 2011).

Children's psychological health is also vulnerable to parental substance abuse. Children with parents who abuse substances were more likely to show depressive symptoms and high rates of any psychiatric disorder (Johnson et al. 1991; Weissman et al. 1999). Parental substance use and related factors, including the psychological distress and co-occurring disorders often experienced by these same parents, contribute to the ongoing risk (Whitaker, Orzol, & Kahn, 2006). Furthermore, living in a violent environment and being introduced to maltreatment and neglect often leads to children being placed into the foster care system. Parental substance abuse is one of most common reasons for children being placed into the foster care system (Akin et al. 2017; Testa & Smith, 2009). Up to 80% of children in foster care have significant mental health issues (Kerker & Dore, 2006). Many children are waiting to be adopted, many are waiting to return home, and some foster homes are unsuitable for the children which result in more movement and instability (Taylor, 2011), and being more likely to develop internalizing symptoms, such as depression and anxiety (Kelly, Bravo & Braitman, 2016). This would result in an increase of stress on the children's lives, leading to challenges later in life (Felitti et al., 1998).

Social isolation is a main characteristic in the lives of families with parental substance abuse. Parents who abuse

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substances often lack warmth and communication with their children (Lewis et al., 2015). If communication skills become hindered due to a toxic environment related to drugs, children will grow up with a skewed idea of family and may also become socially isolated. They may also have difficulty in school and other relationships down the line and become more violent as they age. In addition, alcohol and drug use can affect family members and children by forcing them to feel that they have to isolate themselves from others out of fear of the repercussions of having to explain their parent's drug use (Velleman & Templeton, 2007). Because of the constant fear and negative stigma towards those with a substance abuse problem, children may fear for themselves and their families and not report any maltreatment—or lie about it.

The impact of parental substance abuse on children may be evident when they reach early adulthood or persist into their late lives. However, most studies for parental substance abuse are focused on their young children, not adult children. There needs to be more research for adult children who were impacted by parental substance abuse because these children may be at greater risk of substance abuse with mental health problems in their adult lives. The purpose of this study is to better understand whether the impact of parental substance abuse on children persist into their late lives. The research question includes “How will children with parents who had a substance abuse problem be impacted by their parents’ behaviors on their mental and/or physical health in their adult lives?” We hypothesize that individuals who experienced parental substance abuse are more likely to have mental and/or physical health problems than their counterparts in their late lives.

**Methods of Research**

This study is a cross-sectional, exploratory study with quantitative methodology. The Bowling Green State University Institutional Review Board has determined this project is exempt from IRB review according to federal regulations and that the proposed research has met the principles outlined in the Belmont Report. Data was collected by SurveyMonkey, a web-based online survey tool. The survey consisted of nine questions that relate to having a parent or parents who have or had some type of addiction and its effects on children in the home, their physical and emotional wellbeing. The first few questions asked whether or not the individual lived in a home as a child with a family member who used alcohol, drugs, or other illegal substances, and also if they partake in that as well. The next topic is whether or not the individual has any mental or physical illnesses. The final question asks how well the individual feels they can cope with everyday life stressors.

The survey data was exported into SPSS programs for more analysis. The participants were categorized into three groups; the young adult (18-30), the middle-aged (31-50), and older adult (51 and older) groups. To find significant main effects and interactions, 2 (parental substance abuse) x 3 (age groups) analyses of variance (ANOVA) were calculated on participants’ ratings of mental and/or physical health.

**Results**

After having the survey, we had 246 responses to analyze. 34.9% of the participants were between the ages of

eighteen and thirty, 39% were between the ages of thirty-one and fifty, and 26% were fifty-one and older. Almost 65% of participants had family members using substances when they were living in the home. Approximately 52.9% of our respondents lived at home when one or both parents were using alcohol, drugs, or other illegal substances. About 23.6% of respondents had more than one family member, siblings, or spouse use while they lived at home (see Table 1-1).

**Table 1-1. Age & Substance Abuse (N=236)**

Age (Participants)	%
18-30	34.9
31-50	39
51+	26
<b>Experiences of Family Members' Using Substances in the Home (Participants' Using Substances)</b>	
Yes	64.6 (65.5)
Often	65.2 (34.4)
Not often/rarely	9.8 (37.1)
No	35.4 (32.5)
Both parents	21.3
Dad only	21.8
Mom only	9.8
Siblings	7.5
Spouse	8.6
Other family members (grandparents, offspring, and cousins)	7.5

**Table 1-2. Correlations (Age & Participants' Substance Abuse)**

What is your age range?	Pearson Correlation	Do you use alcohol, drugs, or other illegal substances?
	Sig. (2-tailed)	-.188**
	N	.003
		246

\*\* Correlation is significant at the 0.01 level (2-tailed).

Interestingly among participants, age is negatively correlated with using alcohol, drugs, or other illegal substances (see Table 1-2). Some of the drugs that were listed that were used in the home were diverse, including alcohol, marijuana, cocaine, prescription pills, heroin, meth, OxyContin, opiates, steroids, and tobacco. One respondent also mentioned their father selling drugs during the time they lived there. Over a third of our respondents, 34%, said that their family member used one of these substances “very often.” The next highest response was “somewhat often” with 29.7% of the responses. “Not often” was selected 6% of the time and “rarely” closely behind with 3.7% (see Table 1-1). The next question asked whether or not the individual used drugs, alcohol, or other illegal substances and 65.5% responded yes and the remainder said no or not applicable. For the individuals who answered yes, 7% also chose “very often,” 27.4% chose “somewhat often,” 21.5% chose “not often,” and 15.6% chose “rarely.”

(see Table 1-1). In this study, 22.4% also said yes to the question of whether or not they have any physical or mental health issues. Out of them, 34.8% said they suffered from a mental illness, 8.7% said they suffered from a physical illness, and 2.6% said they suffered from both. Multivariate analysis (ANOVA) showed that age and experiences of family substance abuse are significantly related to physical or mental health issues in their later life (see Table 2-1).

**Table 2-1.** Tests of Between-Subjects Effects (Age & Family Substance Abuse)

Dependent Variable: Do you have any major physical or mental health issues?

Source	Type III Sum of		
	Squares	F	Sig.
Age	3.040	10.245	.000
Family substance abuse	.841	5.666	.018

In addition, the young adult (18-30) group is more likely to have mental health issues than the middle-aged and older adult groups (see Table 2-2).

**Table 2-2.** Multiple Comparisons (Among Age Groups)

Dependent Variable: Do you have any major physical or mental health issues?

(I) What is your age range?	(J) What is your age range?	Mean Difference (I-J)	Std. Error	Sig.	95% Confidence Interval	
					Lower Bound	Upper Bound
LSD 18-30	31-50	.29 <sup>*</sup>	.058	.000	.18	.41
	51 and older	.29 <sup>*</sup>	.065	.000	.17	.42

\* The mean difference is significant at the .05 level.

There were no interaction effects between age and family substance abuse. Finally, the respondents were asked how they feel they can cope with life stressors. The option “very well” was selected 24.2% of the time. “Moderately well” was the highest chosen option with 49.6% of the respondents selecting it. Some, 15.6%, were unsure and selected “neutral.” “Not very well” was selected 8.6% of the time, and “poorly” was selected 2.1% of the time (see Table 3).

**Table 3.** Life Stressors & Coping Strategy

How well do you feel like you can cope with life stressors?

	Frequency	Percent
Very well	59	24.0
Moderately well	121	49.2
Neutral	38	15.4
Not very well	21	8.5
Poorly	5	2.0
Total	246	100.0

**Discussion**

The purpose of this study is to identify how children are affected by their parental substance abuse in their adult lives. What we found specifically is that those who had experienced substance abuse in their family are more likely to have mental health issues in their adult lives. This result indicates that children who have a family member using substances and having mental illness are more risk for mental illnesses persisting throughout their life. Three age groups have the

same tendency in having mental health issues if they have family substance abuse experiences. Interestingly, however, the young adult (18-30) group is more likely to have mental health issues than the middle-aged and older adult groups regardless of experiences of family substance abuse. Our data aligns with other research that mental illnesses become more prevalent in this age range due to life transitions and stressors (Kessler et al., 2007). In present time, mental illness is still stigmatized, but it is more talked about than it used to be in previous generations. Individuals in the “young adult” category might be more likely to seek help for a mental illness and accept that they have one. Whereas an individual in an older generation might have been socialized to believe that admitting to having a mental illness means they are weak and will choose not to report.

The majority of participants in this study (about 75%) responded that they can deal with life stressors. Velleman & Templeton (2007) explained that children can grow up in an unhealthy condition, but create a completely different, positive outcome for themselves. While children who grow up in unhealthy environments may have some social and emotional problems, this is not true for all individuals who experience these negative environments. Substance abuse is very prevalent in the child welfare population (Young, Boles & Otero, 2008). However, there is little research how children are affected by their parental substance abuse in their adult lives. There needs to be more research done to help clients who are impacted by parental substance abuse because it creates lots of risks for their development.

**Conclusions and Implications**

The research findings indicate that those who have experienced family substance abuse are more likely to have mental health issues regardless of age. Based on the findings from the study we can conclude that witnessing substance use as a child has negative impacts on the person’s mental and/or physical well-being as they age. The findings suggest that social workers can help develop preventive programs to assist people who are suffering for caregivers with a substance abuse.

Knowing more about the cycle of growing up in a family where someone deals with substance abuse and the effects it can have on a person allows a social worker to be able to help in a more appropriate way. Delving deeper into the legal aspect of it could also help social workers and legal workers know how to decide what needs to happen when there is a child in a home where there are substances. In regards to the information found in this study, social workers can better understand the thought process of someone in this type of situation and hopefully be able to do more preventative work to keep them away from the choices they saw their family members making. Overall, learning more about this topic will help social workers be able to accommodate and properly assist people who are suffering because their parents or other family members are using substances, and hopefully help those using as well.

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