

April 1, 2021

How to Recognize SUD-Related Abuse and Neglect in Families

[Nikki Kean](#)



The following article is a part of conference coverage from [the National Association of Pediatric Nurse Practitioners \(NAPNAP\) 42nd National Conference on Pediatric Health Care](#), held virtually from March 24 to March 27, 2021. The team at the *Clinical Advisor* will be reporting on the latest news and research conducted by leading nurse practitioners in pediatrics. Check back for more from [NAPNAP 2021](#).

Approximately 8.7 million children in the United States (12.3%) live with at least 1 parent with a substance use disorder (SUD). The majority of these children, who range from newborns to 17 years of age, live with a parent with alcohol use disorder (7.5 million); but a significant number, 2.1 million children, live in a home with illicit drug use.¹

Substance use disorder affects people of all age, socioeconomic class, sex, and race. Unfortunately, the disease often becomes a family disease, with the non-SUD partner and children affected by the disorder. Therefore, it is important for health care providers to screen children for signs of abuse or neglect that may be related to SUD in the family, according to a virtual presentation at the National Association of Pediatric Nurse Practitioners Annual Meeting (NAPNAP 2021) by Angela Nash, PhD, APRN, CPNP-PC, PMHS, of the Cizik School of Nursing at UT Health in Houston, and Michelle

Recognizing the Signs of Abuse

Living in a family with untreated SUD places children at higher risk of a number of conditions compared with their peers from homes without SUDs, noted Dr Nash. These include physical or sexual abuse, inadequate medical or dental care, poorer educational functioning, and mental health and behavioral problems. In addition, because addiction has a genetic component, children of SUD-affected families are at greater risk for using alcohol or drugs at an earlier age and with a faster acceleration of use and have higher rates of SUDs.

Of particular concern for health care providers is the risk of abuse and neglect associated with SUD, noted both presenters. Children living in families affected by SUD are 4 times more likely to be neglected and 3 times more likely to be abused.¹ In addition, approximately half of all calls to Child Protective Services have substance misuse as a factor in the neglect or abuse.

How Can Practitioners Help?

The good news is that health care practitioners can help to identify children at risk of neglect and abuse (Table). Children who have suffered abuse often present with nonspecific physical complaints, mental or behavioral health challenges, and developmental issues.

Table. Pediatric Provider's Role in Identifying SUD in Families

• Be aware
• See beyond the chief complaint
• Engage families and children in a trusting relationship

- | |
|--|
| • Collaborate with other professionals |
| • Have handouts on local resources available |
| • Report if you suspect neglect or abuse |

SUD, substance use disorder

“Pediatric providers are uniquely positioned to identify children and assess risk while providing support, hope, and practical help. Clinicians can report if neglect or abuse is suspected, triggering events that will lead to improved well-being of the child and the family,” Dr Nash said.

When possible, clinicians can help screen parents for SUDs. Research shows that parents are accepting of pediatricians asking about their substance use.³ A clinician can initiate discussions about substance use and its effect on their child, give lists of resources (including 12-step programs), and refer parents for evaluation and treatment.

For pediatric nurse practitioners, routine screening questions may include:

1. How was the pregnancy?
 - o Any physical, mental health problems?
 - o Did you smoke, drink, or use any drugs before you knew you were pregnant or during the pregnancy?
2. Do you or anyone who lives with your child smoke?
3. Has drinking or drug use by anyone who lives with your child ever had a bad effect on your child?
4. In the past year have you drunk alcohol or used drugs more than you meant to?
5. In the past year have you ever felt like you needed or wanted to cut down on your drinking or drug use?

Supporting Affected Children/Teens

A supporting and empathetic clinician is especially helpful for older children and adolescents. “Clinicians can praise their strengths, help them express feelings and validate their concerns, and remind them it’s NOT their fault!” Ms Hansford said. In addition to a listening ear, clinicians can provide age-appropriate handouts about what addiction is and explain that addiction is a disease like diabetes and not a character defect.

Recovery is the Goal

Recovery is defined as a process of improved physical, psychological, and social wellbeing and health after having suffered from a substance-related condition. In the 2018 National Survey on Drug Use and Health, an estimated 1 in 10 Americans (27.5 million) reported ever having a SUD; among them,

expressiveness, and organization. In addition, children whose parents are in recovery have lower rates of physical, emotional, and psychological problems, noted Ms Nash.

Visit *Clinical Advisor's* [meetings section](#) for complete coverage of NAPNAP 2021.

References

1. SAMHSA. Children living with parents who have a substance use disorder. SAMSHA website. Accessed March 25, 2021.
https://www.samhsa.gov/data/sites/default/files/report_3223/ShortReport-3223.html
2. Nash A , Hansford M. Helping children & teens in families affected by substance use disorders. Virtual oral presentation at: NAPNAP 2021: March 24-27, 2021.
3. Wilson CR, Harris SK, Sherritt L, et al. Parental alcohol screening in pediatric practices. *Pediatrics.* 2008;122(5): e1022-e1029. doi:10.1542/peds.2008-1183
4. Jones CM, Noonan RK, Compton WM. Prevalance and correlates of ever having a substance use problem and substance use recovery status among adults in the United States, 2018. *Drug Alcohol Depend.* 2020;214:108169. doi:10.1016/j.drugalcdep.2020.108169

This article originally appeared on [Clinical Advisor](#)

TOPICS:

DOMESTIC VIOLENCE

PEDIATRICS

SUBSTANCE USE

[Back to Top](#) ↑

SECTIONS

Medicine

Lifestyle

Business

Finance

[MORE](#)

[The Fit MD](#)

[Medicine Abroad](#)

[Tech Talk](#)

[White Coat Chronicles](#)

[SITE INFORMATION](#)

[About Us](#)

[Advertise](#)

[Contact Us](#)

[Reprints/Permissions](#)

[OTHER HAYMARKET MEDICAL WEBSITES](#)

[Cancer Therapy Advisor](#)

[Clinical Advisor](#)

[Clinical Pain Advisor](#)

[Dermatology Advisor](#)

[Endocrinology Advisor](#)

[Gastroenterology Advisor](#)

[Hematology Advisor](#)

[Infectious Disease Advisor](#)

[McKnight's Senior Living](#)

[MPR](#)

myCME

Neurology Advisor

Oncology Nurse Advisor

Ophthalmology Advisor

Psychiatry Advisor

Pulmonology Advisor

Renal & Urology News

Rheumatology Advisor

The Cardiology Advisor

Copyright © 2021 Haymarket Media, Inc. All Rights Reserved

This material may not be published, broadcast, rewritten or redistributed in any form without prior authorization.

Your use of this website constitutes acceptance of Haymarket Media's [Privacy Policy](#) and [Terms & Conditions](#).