

# Therapeutic Groups for Children of Substance-Dependent Parents



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## 1. Why run therapeutic groups for children?

Despite the broad range of social, emotional and psychological issues resulting from parental substance-dependence, stigma, secrecy, trauma and social isolation often prevent children from speaking about their experiences.<sup>1,2</sup> Many children find it difficult to engage with 'talk-therapy'. Others do not meet the threshold for referral to a Child and Adolescent Mental Health Service (CAMHS). Through peer support, and the medium of play, therapeutic groups offer children the opportunity to express hitherto unspoken emotions.

Group work is an important component in the range of services required to meet the needs of the children of substance-dependent parents including individual counselling, family mediation and education.

Group work:

- allows a larger number of children to be targeted for intervention
- helps children break the frequently imposed parental code of silence
- helps children overcome dislocation and isolation
- enables children to learn from each other, and
- improves child safety by assisting children to identify caring, responsive adults<sup>3,4,5</sup>

## 2. Counting the Kids

This outreach program operates within Odyssey House Victoria and provides a range of child and family support services including: counselling and mediation for parents and extended family members, home-based parenting support, case-management, school holiday activities and camps for children and their parents, and brokerage funds specifically for children.

Professional development and training, secondary consultation and support with program design are available to workers.

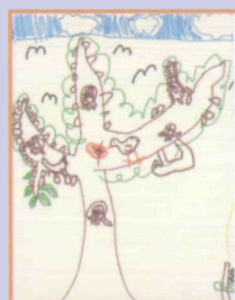
## 3. The children's groups

In partnership with diverse service providers, Counting the Kids, a specialist drug and alcohol parenting support program, has facilitated two children's therapeutic groups in metropolitan Melbourne.

Kids Time was developed with MacKillop Family Services, a child and family support service for children aged 7 to 12 years whose families were involved with the Substance-Abuse Family Support (SAFS) program.

The Mirabel Girls' Club is for girls aged 7 to 12 years whose families are engaged with The Mirabel Foundation, which provides continuing support to grandparents and other family members caring for children orphaned or separated from parents due to substance-dependence.

The Mirabel Foundation and MacKillop Family Services retain responsibility for program development, group-session content, evaluation and decisions affecting children from their respective agencies.



## 4. The activities undertaken

Both groups stress the importance of peer support, promote positive self-esteem and encourage children to have fun together through social and recreational opportunities.

Activities are democratically decided with the children and their perspectives are respected at all phases of the groups from planning to implementation and evaluation.

Groups begin with children determining rules for acceptable behaviour, which are formulated into a group agreement. A range of readily available tools such as St. Luke's Feeling Stones are used to help children practice social skills, understand their experiences and attend to their own and each others' feelings.

A typical activity is the creation of an individual Life Book which chronicles the child's life from birth with simple text, photographs, artworks and other items meaningful to the child<sup>6</sup>. At the end of the school day, children need nourishment. Food is also provided as a social activity. Groups close with goodbye exercises, for example, children share a fun activity they hope to do before the next session.

Any concerns are discussed with the child first and with the parent or other carers, as appropriate.

## 5. Worker roles and responsibilities

Groups are conducted by multidisciplinary teams combining the skills, training and expertise of drug treatment providers, social workers and/or psychologists and child development specialists.

All workers are facilitators, arbitrators and advocates for children. Workers listen to and respect children's perspectives, validate their experiences, educate them about drug use in an age-appropriate way and help them to understand they are not responsible for family problems. Workers also empower children by assisting them to identify caring, supportive adults they can turn to for ongoing support.

Secondary consultation is provided by a clinical child psychologist from a Child and Adolescent Mental Health Service (CAMHS).

## 6. Resources for implementation

All services are offered free of charge to children and families. Both groups are jointly funded by the respective agency and Counting the Kids.

Material goods:	venue hire, food, craft materials, sporting goods etc. Life Books for up to eight children=approximately \$500.00
Time:	planning and conducting groups, debriefing after each session and external supervision by a clinical child psychologist
Transport:	vehicle/s, petrol, cab charges or public transport
Other Costs:	entry to zoo, museum, aquarium, ice-skating etc

## 7. Case study: Jamie and The Mirabel Girls Club

Jamie, an 8 year old girl, found her mother dead from overdose 3 years ago. Since then, Jamie has resided with relatives. For the first seven sessions, Jamie remained separate from the other children. She sat in silence and watched the other children play, exchange their stories or engage in group activities. When asked questions or invited to take part, Jamie would shrug her shoulders and remain non-verbal.



## 9. References

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5. Harbin, F. (2000). Therapeutic Work with Children of Substance Misusing Parents, in Harbin, F. & Murphy, M., *Substance Misuse and Child Care: How to understand, assist and intervene when drugs affect parenting*, Russell House Publishing.
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During session eight, the children were asked to begin collecting photos, letters, objects, toys etc that told their personal history. Every child was provided with a Memory Box to store their memorabilia. Each week they were invited to share the contents of their individual box with the others if they felt safe to do so.

Jamie arrived at group the following week with her box packed full of items. As the other children discussed the meaning of their objects, Jamie became increasingly animated. With support from the group, Jamie discussed the items she had collected and the special meaning they held for her. The other children expressed excitement at hearing her voice for the first time and congratulated her on being brave.

Jamie is still attending the Girls Club. Upon arrival, she meets and greets all members and tugs at the facilitator's shirt asking if she can share first during group-time. Her confidence has grown to the extent that she now leads the group when new members join. Jamie enthusiastically welcomes new girls and informs them about the group using her own story of achievement as an example of what they can expect and what they will gain by being part of the group.

## 8. Quotes from children in Kids Time

"I hate it when mum's on the drugs. She doesn't have any energy and she yells more and doesn't like to go to the park but I still love her 'cause she tells me all the time she loves me. I hate all the people who take drugs. They always come over and won't go home. They sleep on the couch and I can't watch TV in the morning 'cause I wake them up." (Ruth, 8).

"You just go stupid and talk stupid things. Sometimes your parents hit each other." (Liam, 10).

"Drugs make you go crazy and you can go to jail. Anyway, it's better living with my nan. She takes care of me and drives me every where and stuff. Drugs are really bad for you. They make you go sick and sometimes you vomit after having them and you have to go to the chemist and get this drink to make you feel better." (Georgia, 10).

## Counting the Kids

supporting families affected by drugs or alcohol

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