

Reducing the Burden of Addiction on the Child Welfare System



Parental substance use and addiction increase the risk for maltreatment and involvement with the child welfare system.¹ This places children at immediate risk for developmental, emotional and behavioral harms and also increases the risk for intergenerational substance use and addiction because children who experience maltreatment and children who are placed in foster care are more likely to misuse substances as adults.² This cycle can be broken by effectively treating parents.

Unfortunately, few parents who need treatment receive it.³ The stigma around addiction is pronounced for parents, and particularly mothers, because the symptoms and manifestations of the disease are wholly inconsistent with societal perceptions of motherhood. This has led to the adoption of punitive approaches to address parental substance use instead of focusing on efforts to connect parents to effective treatment. Treatment programs are often unable to meet families' unique needs. Few adult treatment programs provide parenting supports or allow children to remain with their parents while in treatment. Comprehensive, family-centered treatment improves outcomes for both parents and their children.⁴

Many families with parental substance use end up in the child welfare system. More children have been removed from their homes due to parental substance use in recent years and particularly in certain states.⁵ Federal law requires reporting of prenatal exposure to addictive substances to child welfare agencies and development of a Plan of Safe Care.⁶ Higher rates of opioid use during pregnancy has led to increased reporting to child welfare⁷ and foster care placement.⁸

1 in 8 children live in a household with at least one parent with a substance use disorder¹

30-60% of foster care placements are due to parental substance use³

Opioid use disorder costs the child welfare system \$6 billion annually⁹

Child welfare systems are often overwhelmed, underfunded and not well trained in identifying and managing addiction. This creates a missed opportunity to engage parents in care and ensure families are kept together. **Providing effective training, emphasizing treatment, and providing appropriate supports to families can reduce the burden of addiction on the child welfare system and prevent substance use among future generations.**

Key recommendations for child welfare systems:

- Improve outcomes for mothers and babies by avoiding punitive responses to substance use during pregnancy to ensure women engage in prenatal care and addiction treatment and to reduce stigma
- Create better linkages between the child welfare system and addiction treatment
- Ensure that treatment is family-focused and evidence-based
- Establish a standardized process for Plans of Safe Care and ensure that they address the needs of both the parents and child (as required by the Comprehensive Addiction and Recovery Act (CARA))¹⁰
- Provide training on addiction prevention, screening and treatment to individuals working in the child welfare system
- Place addiction specialists within the child welfare system¹¹
- Provide screening and early intervention for at-risk families and youth in the child welfare system

Additional Resources:

- [Children and Family Futures](#)
- [National Center on Substance Abuse and Child Welfare](#)
- SAMHSA, [A Collaborative Approach to the Treatment of Pregnant Women with Opioid Use Disorders](#)
- Child Welfare Information Gateway, [Parental Substance Use and the Child Welfare System](#)
- Addiction Technology Transfer Center Network, [Tools for Treatment, Family-Centered Behavioral Health Support for Pregnant & Postpartum Women](#)

Sources:

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