

Research summary

What are our research questions?

How is parental opioid use **represented** and **understood**?

What **policies** and **practices** underpin care?

What are the **effects** on parents, families, professionals and services?

What methods did we use?



Participant observation



Interviews



Focus groups

We spoke to:

27 parents

- 26 on Opioid Substitution Therapy
- Single, co-habiting, or co-parenting
- Families with complex histories

10 health and social care services & **103** professionals

- 10 ethnography sites
- Health professionals, social workers, third sector, policy makers & commissioners

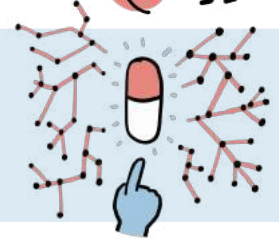


Here are our preliminary findings

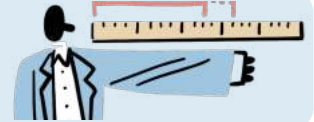
There's an **assumption** that drug use is incompatible with being a good parent.



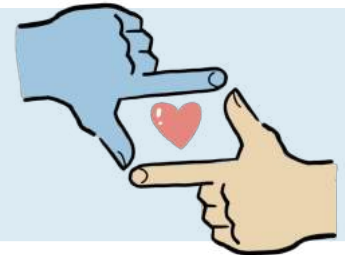
Solutions focus on **single problems**, and **overlook the complexities**.



Individualised **problems** need **individual solutions**.



We need to **reframe** the idea of good care, and come up with **alternative models of care**.



Here's how the parents we interviewed described good care



Meaningful therapeutic relationships

"She [Substance use nurse] gave me the confidence to say 'right, I can do this.'"

it made me work wi' other professionals better 'cause [the social worker] was always by my side."



A safe and non-judgmental space for parents and children.

"I've been working with a lot of 'em [social workers] ... a couple of them, they're brilliant [...] they listen to me, they talk to me."

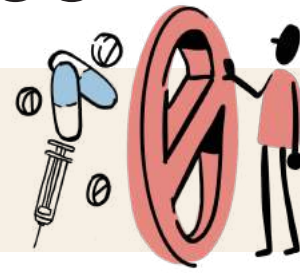
Key themes



Fighting against common beliefs and stereotypes



Assumptions lead to practice that is primarily focused on scrutiny and surveillance of parents.



Practitioners and parents **contested** the underlying assumption that drug use is incompatible with being a 'good' parent.



Is honesty always the best approach?



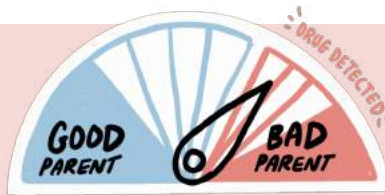
Honesty from the parent may invoke negative judgements, increased scrutiny or a **disproportionate response**.



Even practitioners are **guarded** in what they disclose to other practitioners. Someone with less experience might overreact to the truth.



Drug testing is seen as a measure of parenting capacity.



They aren't simply a tool to test the presence of a drug. **They are used to test honesty, compliance, and self-regulation.**



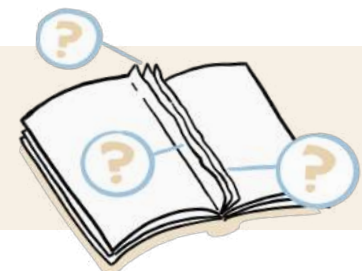
Professionals recognised the effects of drug testing as problematic, **particularly for parent-practitioner relationships.**



Assumptions and expectations based on gender.



Mothers carry more responsibility but are seen as more **vulnerable** than fathers, who are often seen as **absent** or even **dangerous**.



There is a missing narrative of **parents sharing the care, co-parenting, mothers and fathers helping each other.**

So what happens next?



Further results of the study, including presentations and publications can be found on the website:
relations.stir.ac.uk



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