Drugs, Alcohol and Mental Health

About Drugs and Alcohol

**Drugs** are chemicals that have an effect on the human body. They can be legal or illegal. Drugs include over-the-counter medications, prescription medications, cigarettes, alcohol, heroin, cocaine, marijuana, etc.

**Substance use** or **drug use** is the deliberate, non-medical use of drugs or alcohol by a person, to alter their own feelings or behaviour.

**Substance abuse** or **dependence** is the repeated use of drugs or alcohol to the extent that a person’s social functioning and behaviour are significantly affected. When this happens, the person may not be able to study, work effectively, or meet their parenting commitments.

Many situations are associated with a higher risk of substance abuse or dependence. These include: a family history of substance abuse, a history of mental illness such as anxiety or depression, and difficult life experiences (such as trauma, grief, losing a job etc).

**Why is this important for mental health and wellbeing?**

Drugs and alcohol can pose a number of risks for babies and young children, either directly or indirectly. Moderate and responsible use of alcohol or other legal substances within the family context is not a major risk. However, where there is drug or alcohol abuse, and the person’s wellbeing and their capacity to do things is affected, there can be high risks for the child’s immediate health and their longer term wellbeing.

If a woman uses alcohol, cigarettes or other drugs during pregnancy, there are risks to the health and development of the baby. Problems could include miscarriage or death of the baby, breathing problems, stunted growth, physical deformity, intellectual disability, and behavioural and mental health difficulties. These children may have additional needs for their whole lives.

Drugs and alcohol affect a person’s feelings, behaviour and sometimes their capacity to make decisions and take action. A parent or carer under the influence of drugs or alcohol may not pay attention to the needs of a baby or child, or may not be able to respond properly because of the effects of the drug. Some people become violent when they use drugs or alcohol.

The way a carer responds to the needs of a baby or young child influences the attachment style of that child. Substance abuse by parents or other primary carers might interfere with the development of secure attachment relationships. This can have implications for later mental health. Read the Attachment and Mental Health handout in this series for more information.

When a parent or carer has a pattern of drug or alcohol abuse, there is an increased risk of insecure or disorganised attachment, child abuse, neglect and violence. There can also be further problems through the child being separated from some family members. This may be as a result of the child being removed under child protection laws, or the parent or carer being hospitalised or imprisoned as a result of drug and alcohol abuse or related activities.

A situation involving substance abuse by a child’s family or primary carers significantly increases the risk of mental health problems or disorders for the child. Sometimes these problems or disorders may occur in childhood, or sometimes they may emerge later in life.
What should I look for?

People who have a substance abuse problem or disorder may show some of the following signs as a result of their drug use:

- Unable to meet their obligations at work, or when studying, or in the home
- Often call in sick, or perform poorly at work or study or in other life roles
- Neglect the care of their home, their own appearance, or care of their children
- Use drugs or alcohol in dangerous situations, such as driving or using machinery
- Have criminal or legal problems as a result of drug or alcohol abuse
- Have physical or mental health difficulties associated with substance abuse
- Become violent or get involved in arguments when abusing drugs or alcohol.

Children of parents with a substance abuse problem or disorder may show:

- Below average height or weight for their age
- Development that is out of step with peers at a similar age and stage
- Difficulties in attachment and relationships with family and carers
- Being withdrawn, fearful, anxious or upset much of the time
- Being frustrated, angry, defiant or aggressive much of the time
- Poor memory or attention, impulsive or disruptive behaviour
- Signs of neglect, such as being dirty or hungry, untidy appearance
- Signs of abuse, including physical, sexual or emotional abuse.

What should I do?

If you become concerned about the development or wellbeing of a child for any reason, write down your specific observations and concerns, along with anything you know about the child’s health or family situation. Then speak with your supervisor, coordinator or service director to develop a plan for supporting the child and arranging referral to other agencies if necessary.

You may not know if a parent or family member has a substance abuse problem. If a family member does ask for assistance for themselves or someone else, suggest that they speak with a general practitioner (GP) as a first step. Treatment is available for people who have a pattern of alcohol or drug abuse, including counselling, detoxification, support groups and medication.

If a child is at risk of abuse, neglect or violence, then you have a duty of care to take action. In some states and territories, children’s services staff are required by law to make a formal report to the government department responsible for child protection (mandatory reporting). For more information, read the handout in this series entitled Child Abuse, Neglect and Mental Health.

Where can I find out more?

The Response Ability website (www.responseability.org) has more detailed fact sheets on a range of issues affecting children and families, listed under Education and Children’s Services.

