



The Center on Parenting and Opioids

Improving Parenting Practices Among Fathers Who Misuse Opioids: Fathering Through Change Intervention

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INTRODUCTION

Quality father involvement is beneficial for all children regardless of how much money a dad makes, whether the dad lives in the same home, or whether the dad is using substances. In all of these circumstances, positive interactions between a father and their child are associated with improved child social, emotional, behavioral, and academic outcomes.^{1–6} Getting dads involved in the systems that their children might have to interact with because of substance use can also improve outcomes. For example, involving fathers early in processes related to child welfare improves the father-child relationship.³ This includes involvement in the child’s case plan and enrollment in parenting, mental health and behavioral health treatment, and other necessary supports to promote reunification and general father involvement.

Most research focuses on mothers and not fathers. There are opportunities for fathers who misuse opioids to support positive parenting practices, which may not only improve child outcomes but also reduce the likelihood of relapse.⁷ Rapid intervention is critical in the lives of fathers and children to reduce misuse and interrupt intergenerational cycles of substance misuse. Unfortunately, beneficial father-focused parenting interventions have been largely neglected both historically and during the current opioid epidemic. We provide suggestions about how to adapt existing parenting interventions for fathers who misuse opioids.

KEY TAKEAWAYS

- Existing parenting interventions can be adapted for fathers who misuse opioids to
 - Build recovery resources, including parenting skills
 - Build and re-build relationships between parent and child
- Nesting services within contexts where fathers already receive services may improve fathers’ ability to utilize services

PARENTING ADAPTATIONS FOR FATHERS WHO MISUSE OPIOIDS

Domain	Considerations	Potential Adaptations
Building Individual Capacity	<ul style="list-style-type: none"> • Co-morbid mental health challenges • Polysubstance use • Financial instability 	<ul style="list-style-type: none"> • Managing stress and emotions, therapeutic support • Managing intrusive thoughts related to substance use cravings • Leveraging peer support to connect fathers to resources, provide food and housing vouchers, case management, and service navigation support
Relationship Barriers	<ul style="list-style-type: none"> • Domestic violence • Possible separation or divorce • New, potentially unstable romantic relationships • Relationships with other people in recovery (e.g., mentor or sponsor, peers) • Father-child relationship marked by instability (e.g., removal, frequency of visits), changing norms or expectations, children at-risk for greater behavioral challenges 	<ul style="list-style-type: none"> • Therapeutic support to rebuild relationships • Managing conflict and communication with child's other parent • Protecting child and recovery in the context of new relationships • Peer support to facilitate intervention engagement • Making the most of short visits, managing transitions, importance of consistency in parent behavior
Barriers to Engagement	<ul style="list-style-type: none"> • Criminal justice involvement • Child welfare involvement • Substance use treatment (inpatient or outpatient) • Standalone medication-assisted treatment (MAT) 	<ul style="list-style-type: none"> • Balancing multiple commitments and communication • Integrating parenting skills into programming. Services delivered by counselor in-person, virtually, or on a mobile device outside of treatment hours • For MAT, short mobile-delivered sessions that can be delivered at the same time as a dose receipt

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