



NEWS RELEASE from the EU drugs agency in Lisbon

PREGNANCY, CHILDCARE AND THE FAMILY: KEY ISSUES FOR EUROPE'S RESPONSE TO DRUGS

Drugs and the family: 'room for improvement' in responding to problems, says EMCDDA

(31.10.2012, LISBON) Around one in 10 of all drug users entering treatment for their substance use lives with at least one child. And in the last five years, the number of those entering drug treatment who report living with children has been growing. Over and above the problems they face related to their consumption, drug-using parents deal with additional concerns, such as providing adequate care for their children during treatment and fear of losing their job or their family. In a new report out today, the **EU drugs agency (EMCDDA)** provides the first European overview of the programmes, laws and policies in place to assist pregnant drug users, drug-using parents and their children. Based on data from 23 countries, it concludes that, while an array of responses exists, there is still room for improvement.

According to the report, the variety, evidence base and coverage of interventions for pregnant drug users, drug-using parents and their children could be stepped up. National data show that coverage of programmes can be low or vary substantially between countries. This may be due to difficulties in reaching the target group or to lack of funding in times of financial crisis. The report states: 'As recovering from substance use and problems related to it may be lifelong processes, securing long-term government or other funding is an essential attribute of prevention efforts'.

'Not all pregnant women who use drugs have problems during or after their pregnancies and not all parents with drug problems have difficulty caring for their children', states the report. While there is no specific law in Europe applying to the children of drug users, legislation in Europe tends to strive to keep the family together rather than take the children into care. The report informs that: 'No country reported that drug use was a reason per se to remove the child from the parent'.

The report shows how drugs, including alcohol, tobacco and some prescribed medications, can have adverse effects on the pregnancy, unborn child and the newborn. Yet the true prevalence of drug use in pregnancy is difficult to gauge as drug-using women are harder to reach, being less likely to receive antenatal care than those who are drug-free.

Legislation applying to pregnant drug users or to children before birth is seen to facilitate eligibility for treatment in many countries. In addition to legislation, a variety of programmes has been developed in Europe with drug-using mothers-to-be in mind. Guidelines for services for pregnant drug users now exist in around a third of the reporting countries. These mainly focus on substitution treatment for opioid use in pregnancy, following the evidence that this type of treatment can stabilise the woman's lifestyle and encourage her into antenatal care.

'Parents' ability to rear, protect and care for their children, attend to their health, feed them and financially support them may be greatly diminished by their drug use', states the report, which presents findings from studies on the potential harms of drug use on families. 'Removing barriers to seeking treatment, including lack of childcare... might further help this target population', it adds.

Described in the report are some of the interventions available in Europe to respond to the needs of drug-using parents including addiction treatment, psychosocial support and building parenting skills. Internet-based prevention programmes are also available for young people with drug-using parents, as are resilience-strengthening initiatives to help prevent children of drug users from becoming drug users themselves.

Finally, the report highlights the importance of the family itself in drug prevention work. Evidence shows that involving the family can promote treatment entry and enhance treatment effects. One example of family-based prevention is the *Strengthening families* programme pioneered in the USA some 20 years ago. Eleven European countries report having implemented adapted versions of this programme which is considered to be effective over the long term in preventing substance use and other problem behaviour in children.

Notes

Pregnancy, childcare and the family: key issues for Europe's response to drugs

Available in English at www.emcdda.europa.eu/publications/selected-issues

This report is one of two 2012 EMCDDA Selected issues.

The other, focusing on ***Prisons and drugs in Europe — problems and responses*** will be released on 15 November alongside the ***Annual report 2012: the state of the drugs problem in Europe***
www.emcdda.europa.eu/events/2012/annual-report