

PART TWO

GRAND RESOURCE

*Help for Grandparents
and Kinship Caregivers
Impacted by Opioids
or Other Substance
Use Disorders*



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Understanding a Substance Use Disorder (SUD) and How to Support Your Loved One in Recovery

“ When I discovered that my daughter was addicted to opioids, I didn’t know what to do. Getting her into treatment was as difficult as keeping her there. Relapses and the destruction to our family was heart breaking and traumatic for everyone. I took custody of my grandson to protect him. When a car accident almost took her life, she found recovery. It seems like a miracle that she is clean today, but we never gave up hope that she could recover.”

Grandmother Caregiver

What is a substance use disorder?

A substance use disorder (SUD) is a mental disorder that affects a person’s brain and behavior, leading to a person’s inability to control their use of legal or illegal drugs or alcohol. Symptoms can range from moderate to severe, with addiction being the most severe form of SUD.¹ A person with a SUD continues their behavior despite serious health and social consequences and they often struggle with other mental health concerns such as depression, anxiety, or a history of trauma. Genetics may also play a



role. However, mental health support and education can greatly reduce the chances of developing a SUD despite a genetic predisposition. No one with a genetic tendency toward a SUD should believe they are “doomed” to develop one just because of their genetics.

It’s not always understood why or how people develop a substance use disorder. People are often misinformed and think that a person who cannot quit using substances lacks will power or that their behavior is a moral failing. A SUD is a complex disease. In most cases, quitting takes more than strong will because substances change the brain in a way that makes it hard to quit, even for those who want to. Fortunately, researchers have found treatments that can help people recover and lead productive lives.²

What causes the substance use disorder?

Like diseases such as diabetes or heart disease, a SUD is caused by a combination of factors. If a person chooses not to exercise or consume a healthy diet, they may develop heart disease. Genetic factors may also play some role in the likelihood of a person developing heart disease. The heart disease can be treated and not cured. A SUD also can be treated and not cured. This is why recovery from a SUD is a lifelong process. Although a SUD can happen at any time during a person’s life, it typically starts in adolescence when first signs of mental illness often appear.³

For many people, drug and alcohol problems begin as self-medication to cope with stress and pain or to avoid uncomfortable feelings. Today, the use of alcohol is accepted and more often, so is the use of marijuana. People may consume these mind-altering substances to feel relaxed and numb from emotional or physical pain. Some people who are prescribed pain killers, known as opioids, find that in addition to numbing pain, they enjoy a powerful sense of well-being or euphoria when they take them, so they continue to take them. However, with continued use, opioids change the brain. The person builds a tolerance to the substance and requires larger or stronger doses to avoid uncomfortable and often very painful symptoms of withdrawal. Symptoms of withdrawal may include vomiting, anxiety, sweating or seizures. A person in substance withdrawal lacks control because it is so painful and unpleasant that obtaining the substance takes precedence over other responsibilities or logical behavior.

“When my daughter was using opioids, it was like someone invaded her body. I didn’t recognize her anymore.”

Grandmother Caregiver, Louisiana



What kinds of behaviors does the person suffering with a SUD exhibit?

A parent with a SUD has difficulty with responsible daily living because they are focused on obtaining substances or feeling the aftereffects of using them. A person usually hides their dependency because they feel shame, guilt, and other negative emotions around their behavior. They also know there will be consequences if their SUD is discovered. As the SUD progresses, a person's life often spirals downward, and their behavior affects the family and friends around them. If they initially were using legally prescribed drugs, they may switch to buying street drugs when their prescription runs out. If you are noticing some of the following changes, your loved one may be struggling with a SUD:

- Paying less attention to personal hygiene
- Experiencing financial problems
- Changing sleep patterns
- Losing weight
- Exhibiting mood swings
- Stealing money, medications, or jewelry
- Isolating from others
- Losing relationships with friends or family

Once you recognize that your loved one cannot care for themselves due to a SUD, you may worry that they cannot care for their child. The SUD can be stopped if a person decides to get help. However, the power of the substance is so strong that more often, some other situation arises to force change. A person may be arrested for buying or selling illegal substances or driving while under the influence. They may have a car accident or overdose. A family may decide to force their loved one into treatment with the help of an interventionist. Usually, unless something changes the course, a person's disease will progress.

What are the risks to children in the care of a parent with a SUD?

Children are often at risk in the care of a parent suffering with a SUD. Inattentiveness to the child's needs for nutrition, structure, or routines can cause them harm. A child may be at risk of ingesting or contacting substances that are left in the open. Syringes or powders containing opioids such as heroin or fentanyl may be within reach of the child. The child may be exposed to violence or criminal behavior that comes along with a parent's altered state of mind or contact with people who are selling street drugs. If there is no intervention by authorities, you may decide to petition the court for emergency custody for your grandchild or kin child. Unless there is some intervention to protect the child, they may be traumatized or worse at some point.

With the rise in heroin and other opioid use, more relatives are raising children because the parents have died, are incarcerated, are using drugs, are in treatment or are otherwise unable to take care of their children.⁴



A decision to intervene on behalf of the child through the court is stressful. You may already be traumatized by the discovery of your loved one's SUD and the associated behaviors you may have witnessed. Requesting emergency custody of the child may cause personal conflict between your desire to protect the child and your compassion for their parent. It may also cause conflict between you and the parent. For grandparents raising grandchildren, this feeling of dual loyalty to the parent and child can be especially complicated when the parent struggling with the SUD is their own adult child. However, if emergency custody is granted, you will feel better knowing your grandchild or kin child is safely in your care.

Is "rock-bottom" necessary for a person to recover?

Far too often, the expectation is that someone must hit "rock bottom" before treatment can work. This is a myth that can have dire consequences. A SUD can cause a person to lose custody of their children, health, financial resources, employment, housing, friends, family and even their life. Earlier intervention can prevent the extreme consequences that make recovery more challenging later.

Today's hazardous drug landscape is dominated by fentanyl, a deadly opioid which is increasingly contaminating or being sold in non-opioid drugs. People who only use substances occasionally may not knowingly consume fentanyl. Substances purchased without a prescription such as Adderall, a medication used to treat ADHD, may contain fentanyl causing risk of a fatal overdose from only one dose. In these situations, there was no "rock-bottom". Once again, prevention or early intervention can greatly reduce the risk of a person suffering dire consequences of their substance use.

In addition to the "rock bottom" myth, often people may suggest taking action that is more harmful than helpful. It's not always clear how to help the person who is struggling. Your friends or family may offer you advice. For example, they may say to "kick them out of the house". Such blanket advice, although well-intended, is baseless. Supporting your loved one by giving them money and a place to live may not be helpful either. A rule of thumb to consider is to ask yourself if what you are doing is supporting the person's SUD or their recovery. Helping to locate a treatment facility is supporting recovery. Handing them money that will be spent buying substances is supporting their disease. There are no hard and fast rules, but asking yourself that simple question about whether what you are doing is supporting recovery or disease can provide clarity to your way forward.

Is there a "cure"?

Addiction is a progressive, relapsing disease. A person in recovery must work to maintain recovery by caring for their mental health. Attending support meetings and addressing underlying mental health conditions with therapy and, if needed, medications are necessary actions to take. Building a new community of friends who are solidly in recovery and maintaining stable employment are positive steps toward their substance free future.



How can I support my loved one in recovery?

The effects of a substance use disorder are felt by the entire family, especially the child. The family adjusts their behavior as one member's behavior changes due to the SUD. Family may compensate for the person's loss of control by taking on their responsibilities, covering up for them, giving them money when asked, or other unhealthy behaviors just to keep the family together. Recovery is needed for the entire family.

Parents of adult children with a SUD are encouraged to seek help such as through Al-Anon or Nar-Anon. Palgroup.org also offers support and meetings to parents of addicted loved ones. These programs for family members help them regain a focus on their own lives and mental health. Often parents blame themselves for their loved one's substance use and feel responsible for fixing the problem. In Al-Anon, Nar-Anon or Palgroup.org they learn that they did not cause the SUD, nor can they control it or cure it.

Individual and family therapy are important to build healthy family dynamics and a support system for the person in recovery. Damage to relationships caused by a loss of trust, anger, resentment, and sadness can heal. It is common for family members to resent the person with a SUD because of the time and resources that went into helping that member find recovery, and they may have felt ignored because of it. It's important to properly set your expectations about future family interactions. There may be emotional scars among family that make it difficult to participate in holiday celebrations or family vacations. You may need to adjust time spent with family to a new normal.

Supporting recovery may also mean helping with children so their loved one can attend recovery meetings, go to therapy appointments, or meet to talk with their friends in recovery. Solid recovery takes time and effort, and when your loved one knows you support their recovery it is easier for them to stay in it.

Relapse is often part of recovery. Use your resources to develop a plan in the event of relapse. Consider how you may react and what action, if any, you will take. Most of all, **never give up** on your loved one. Even when you may think your loved one will never recover, they can!

“ After painful years watching her struggle with relapses, I never dreamed that my daughter would find recovery, but she has almost six years clean. Recovery made it possible for her to complete a R.N. program and soon she will finish her B.S.N.. She now works in a medical detox hospital helping others who are struggling with addiction.”

Grandmother Caregiver, Pennsylvania



Further Resources: Understanding a Substance Use Disorder (SUD) and How to Support Your Loved One in Recovery

- [Generations United, Raising the Children of the Opioid Epidemic: Solutions and Support for Grandfamilies](#)
- [Center for Disease Control and Prevention, "Substance Use Disorders"](#)
- [National Institute on Drug Abuse, "Addiction Science"](#)
- [National Institute on Drug Abuse, "Addiction Often Goes Hand in Hand with Other Mental Illness. Both Must be Addressed"](#)
- [National Institute on Drug Abuse, "Time to Start Talking about Pre-Addiction"](#)
- [Partnership to End Addiction, "Catching it Early."](#)
- [National Library of Medicine, "The Impact of Substance use Disorders on Families and Children"](#)
- [Dr. Joseph Crumbly, The Annie E. Casey Foundation. "Engaging Kinship Caregivers: Loyalty Issues, Module 5."](#)

Further Resources: Grandfamilies

- [grandfactsheets.org](#)
- [grandfamilies.org](#)
- [GKSNetwork.org](#)
- [gu.org](#)
- [brookdalefoundation.net/RAPP/rapp.html](#)



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Endnotes

- 1 National Institute of Mental Health, “Substance Use and Co-occurring Mental Disorders.” <https://www.nimh.nih.gov/health/topics/substance-use-and-mental-health>
- 2 ibid
- 3 ibid
- 4 Generations United. *Raising the Children of the Opioid Epidemic: Solutions and Support for Grandfamilies*. Washington DC, 2018. <https://www.gu.org/app/uploads/2018/05/Grandfamilies-Report-SOGF-2016.pdf>, page 1





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About Generations United's National Center on Grandfamilies

Founded in 1986, Generations United's mission is to improve the lives of children, youth, and older adults through intergenerational collaboration, public policies and programs for the enduring benefit for all. Generations United's National Center on Grandfamilies is a leading voice for families headed by grandparents, other relatives, and close family friends. The Center's work is guided by an advisory group of caregivers, known as GRAND Voices, and organizations that set the national agenda to advance public interest in support of these families. Center staff conduct federal advocacy and provide training to grandfamily practitioners, advocates and caregivers to elevate their voices to improve policies and practices. The Center raises awareness about the grandfamilies' strengths and needs through media outreach, weekly communications, and awareness-raising events. It offers an annual State of Grandfamilies report and a broad range of guides, fact sheets and tools for grandfamilies, which cover issues from educational and health care access to financial and legal supports (gu.org and grandfamilies.org). Generations United is also home to the Grandfamilies & Kinship Support Network, the first-ever national technical assistance center for those who serve grandfamilies and kinship families (gksnetwork.org.)