Professionals do not invite children to disclose family problems: A comment

Elisabet Näsman
Uppsala University, Sweden

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The qualitative study with children, presented by Ilona Tamutienė and Birutė Jogaitė in the article “Disclosure of alcohol-related harm: Children’s experiences” (2019), is an important contribution to our increasing understanding of shortcomings in our welfare systems, when it comes to children who live with alcohol-abusing parents. These children were, in earlier research, labelled as the forgotten or invisible children. Based on interviews with children, whose families the social authorities registered as “social risk families”, the authors found complex circumstances behind the lack of support and protection given to the children.

A crucial issue is whether adults outside such families form a relationship with the children, which offers them an opportunity to disclose harm inflicted on them by their family members. The article confirms the findings in earlier research that some barriers to disclosure of the harm the children experience are located in the dynamics of their families. Both the parent who is abusing alcohol, the other parent and the children themselves may, in relationship to outsiders apply secrecy strategies such as to not tell, to lie and to hide the traces of the abuse as well as the harm done to the children.

Sometimes professionals interpret children’s roles in these face-keeping strategies as loyalty to the parents. Children, out of empathy, want to protect the addicted parent from eventual negative consequences of a disclosure (Alexanderson & Näsman, 2015; Christensen 1995a, 1995b). The article shows that this is just one of the reasons children may have. They may explain that they do not disclose the harm inflicted upon them due to obedience to their parents’ demands or because they fear being punished by one or both of their parents. Social workers often presuppose that children get enough support and protection if only one of their parents has addiction problems. What children tell shows that this is not always the case. The article further demonstrates that other close
relatives may or may not be supportive, but rarely intervene in the situation. Children may confide in and get comfort from their siblings, but other research shows that siblings also can be in conflict due to different views and social positions in relation to the substance-abusing parent (Alexanderson & Näsman, 2015; Haugland, 2006).

The article further shows that children choose secrecy strategies in their relationships to same-aged children because of fear of being stigmatised and mocked. As Christensen (1995a, 1995b) shows children as young as five years old can be aware that alcohol abuse is shameful. Children then fear losing their friends or believe that other children would not understand or are unable to cope with listening to such troubles. Still, some children choose to disclose to same-aged close friends, in some cases friends with the same kind of life experiences. Children can stress that school staff should work with the social climate among their pupils and raise awareness of this kind of family problem among pupils as well as their parents (Alexanderson & Näsman, 2015). In Sweden the information given to pupils and parents primarily addresses substance abuse as a problem among young people rather than of parents (Alexanderson & Näsman, 2015).

According to the children in the article, neighbours do not care about them, but in a Swedish study some neighbours play important roles rescuing, protecting and comforting children when their parents are intoxicated (Alexanderson & Näsman, 2015). In summary, however, children’s informal social networks do not often intervene enough to change their stressful situations. Children then need help from professionals, but describe barriers against telling them about the problems. It is a matter of trust. The qualities children look for in staff members in order to be able to turn to them for help are that they are kind, honest, straightforward and sincere. Further, that they believe what the child tells and genuinely care for the child (Alexanderson & Näsman, 2015). It seems to make a huge difference how adults approach these children, as illustrated by a psychologist in the article. It is also a matter of where and when. Privacy is crucial. Children’s fear of reactions from other children and of punishment from their parents is still a hindrance. Children may recommend that school staff should have patience and repeat their questions in order to overcome children’s reluctance to talk (Alexanderson & Näsman, 2015).

Schools do not always depend on children disclosing the family secret and disclosure may not lead to any support or positive change. The schools in the article had access to information about the families, but still did not talk about or offer help with the children’s situations at home. In line with other research the article shows that when the children showed signs of problems of their own at school, these were interpreted as being caused by something in the school situation or as individual shortcomings, and were not analysed in relation to the family context. Eventual measures taken by the schools that do not target the stressors behind the children’s problems at school run the risk of failure in helping the child. The dominant impression of schools in Sweden as well as in the study from Lithuania is neglect, in case where children have this kind of trouble at home (Alexanderson & Näsman, 2015).

These children may also encounter the police, sometimes under dramatic circumstances. In Sweden, children tell about varying experiences of the police: as sometimes comforting, caring and rescuing the child from danger, but the police do not always believe children who call them for help (Alexanderson & Näsman, 2015). The children in the study from Lithuania are themselves or their families well known to the police. These children describe the police in very much the same way as the school staff, when involved in their families, that is, as not taking responsibility for the children’s rights to protection and support. The police seem primarily to be aiming at surveilling and disciplining the children. This seems to be a comparatively darker picture of the police, which raises the question of whether there are
national differences in the regulation or in the attitudes of the police towards children at risk. It would be of interest to see a more differentiated analysis of the encounters between the police and children who are misbehaving and those with younger and/or well behaving children. Is there more of a caring attitude from the police when children are younger and/or have not yet developed norm-breaking behavioural patterns?

The social worker is the profession in this kind of situation who have helping to families as one of their main tasks. Earlier research has reported that children describe mixed experiences of contact with social workers and social welfare agencies. Some measures such as support groups for children whose parents have addiction problems may be highly appreciated, while other contacts may leave the children without the support and protection they need, since the social workers do not acknowledge how serious the problems are (Alexanderson & Näsmann, 2015). The Lithuanian article reports a remarkable finding: that the social workers, who are working actively with and in the families because of the addiction problem, do not address the harm done to the children, but focus mainly on the adults. This is an example of misleading usage of the phrase “to work with the family”, when in fact it is all about working with the adults while neglecting the children. The article points at the small sample of this qualitative study as a limitation. Considering the difficulties involved in reaching out to these children, the study is an important accomplishment. That qualitative research in several other countries finds largely the same examples among these children validates the results, which constitute an important contribution to the research field in spite of the limited sample.

One conclusion to be drawn is that there is an urgent need for an increasing awareness of how parental alcohol abuse can harm children. Professionals should further have the duty to invite children to tell about their situation and then to arrange for them to get the support, help and protection they need. The article’s few exceptions from the demonstrated pattern of neglect among professionals illustrate the importance of how adults approach the children. It is crucial that they develop a competence to form a relationship of trust with children, which allows children to disclose the harm they experience. Eventual comfort and support from same-aged friends, the other parent and other relatives, is not enough.

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