Grandparent Care in New Zealand and the impact of Parental Drug Addiction:

Insights from the largest study of social issues affecting grandparents raising grandchildren

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Overview

- About GRG
- Our Research
- Snapshot of key findings
- Drilling down into the data on drugs
- Impact on children and caregivers
GRG Trust NZ

Established as a support group in 1999
Charitable trust status since 2001
GRG Membership today:

- 3792 grandparent and whanau care families throughout NZ (16/07/17)
- 6400+ caregivers
- 12,000 + children

- 42% Maori
- 45% NZ Euro
- 3% Pasifika
- 5.5% Mixed
- 4.5% Other
GRG enables grandparent and whanau care families to achieve better life-long outcomes for the vulnerable children and young people in their care.
Our Objectives

to tatou whāinga

1. To provide quality support services, information and education:
   ❖ Enabling and empowering them to promote the wellbeing and best interests of children in their care; and to
   ❖ Reduce stress and maximise stability in their lives.
Our Services & Initiatives

0800 GRANDS Free Helpline
- Around 730 calls per month

New Member Resource Packs
- Avg 70 new families a month

Monthly Grands Report Newsletters
- 3600+ monthly subscribers

Local Support Groups
- 35 Support Groups from Kaitaia to Invercargill
- 9 informal coffee groups

Online Information Resources
- Website and Facebook

Community Outreach & Advocacy Services
- Income support
- Oranga Tamariki & FGCs
- Facilitating community support
- Approx 580 client’s supported each month

Caregiver Education Programmes
- Trauma informed care workshop modules

Respite and Holiday Camps
- Kidzacool and YMCA
Our Objectives

to tatou whāinga

2. To raise awareness of the needs of children, grandparent and whanau / kin caregivers
3. Lead change in law, policy and practice for the benefit of grandparent and whanau/kin care families.

through:
❤ Awareness and Appeal Campaigns
❤ Sector Summits and Conferences
❤ Submissions to Parliament on law and policy
❤ Partnerships with other community providers
Achieving better life-long outcomes through our services and initiatives

- Children and families are equipped to meet future challenges
- Caregivers feel empowered and confident in parenting
- Laws, policies & practices achieve outcomes promoting wellbeing of children
- Families receive lawful financial entitlements to meet their need
- Vulnerable children receive the support / help needed whatever their status
- Community Agencies partner and collaborate with GRG for the benefit of families

Caregivers feel empowered and confident in parenting.
Grandparent Care – is an International Trend

- **USA**
  - 70M grandparents
  - 2.7 million are full-time grandparent caregivers raising over 5 million children (2016)
  - 12% increase since 2000
  - 20% live below the poverty line

- **CANADA**
  - 7.1M grandparents
  - 60,000 full-time grandparent caregivers (2015)

- **AUSTRALIA**
  - No clear stats – est. somewhere over 16,000 caregivers (2011) and up to 65,000 (2014)

- **UK**
  - 14M grandparents
  - Around 200,000 are full-time caregivers of around 300,000 children (2016)

- **NZ**
  - 9543 grandparents in a parental role (Census 2013)
  - No stats on total number of grandparents in NZ
Our Research

- **2005** Grandparents and other Relatives Raising Kin Children in Aotearoa/New Zealand.
  - 324 participants. Largest quantitative and qualitative analysis undertaken in New Zealand or Australasia at that time.

- **2009** Grandparents and Whanau/Extended Families Raising Kin Children in Aotearoa / New Zealand “A view over time.”
  - 301 participants. Around a third participated in 2005 study

- **2016** The empty nest is refilled: the joys and tribulations of raising grandchildren in Aotearoa
  - **1100** participants raising 1750 children
  - Largest study of social, wellbeing and economic issues affecting grandparent caregivers in the world to date.
  - 152 questions + 40 questions on each child
  - Further in-depth reports on specific issues to follow
  - Funded by Lotteries grant.
Snapshot of what we learned from our 2016 research

- 55-59 years is average age of caregivers
- Raising an average 1.8 children each
- 48% are employed or self-employed, 16% retired and 37% unemployed
- 70% receive financial support from the Unsupported Child Benefit
- 43% of caregivers on National Super
- Median net family income around $40-$50,000

- 40% of sole grandparents have household income less than $30,000
- 36% of partnered caregivers and 63% of sole caregivers rent their homes
- 49% of partnered families own their home compared to 27% for sole caregivers.
- 54% of children in mother’s sole care prior to grandparent care
73% of caregivers have health problems affecting their lives
70% say they feel under stress
72% of children had some involvement with Child Youth and Family
41% of children had diagnosed psychological problems with an average 1.63 diagnoses per child
14% of caregivers have been physically assaulted by children in their care

64% experienced verbal abuse from the children’s families
Drug addiction (44%) cited as most prevalent reason for children going into grandparent or whanau care with alcohol abuse cited as cause in 25% of cases.
Methamphetamine drug use by parents overwhelmingly cited as reason children in grandparent care
Top six reasons for children coming to grandparents’ care

- Drug addiction: 44%
- Domestic violence: 40%
- Family breakdown: 39%
- Neglect: 39%
- Parent unable to cope: 38%
- Alcohol abuse: 25%

(multiple responses) % of total children
Other reasons

7. Mental illness of the parent
8. Child Abuse
9. Very young parent
10. Abandonment
11. Imprisonment of parent
12. Death of parent
13. Physical illness of the parent
14. Intellectual disability of the parent
15. Physical illness of the child
16. Intellectual disability of the child
17. Mental illness of the child
In-depth Look at Drugs Data

“My daughter is a drug addict”: grandparents caring for the children of addicted parents” (Gordon 2017)

❖ How parental drug addiction leads to children in grandparent care
❖ Short-term and long-term effects on grandparent caregivers
❖ Impact on children’s well-being, health and education
Parental drug use as a reason for grandparent care

- 44% of whole group cited drug use as a reason (578 out of 1324 children)
  - 578 children in 396 families (raising 1-5 children per family)
- 4 out of 5 citing alcohol abuse as a reason for grandparent care also cited drug abuse
- Multiple other factors also selected
- 6% of cases cited drug abuse only, as a cause, but qualitative comments in other questions suggested multiple factors involved.
  
  "Mother was in an abusive relationship…
  "Dysfunctional lifestyle…
  "Psychotic episode as a result of P…
  "Breakdown between parents…
  "Child being left with every Tom, Dick and Harry as parents went out smoking and boozing…
Mostly deterioration over time due to drug use and other factors => endangering the child(ren)

“Mother and boyfriend broke up, mother turned to drugs, father lost a few marbles sniffing propane gas. They left him with us while they did their stuff. Father did not want him and mother ended up in gang and then jail.”

“A parent who misuses alcohol or other drugs is not necessarily unfit to look after children. However, alcohol and drug misuse frequently conflicts with a child’s need for care. (Baldock, 2007)
Percent of co-morbidities relating to drug addiction among the parents of children in grandparent care (ranked in order)

- Domestic violence: 63%
- Neglect: 56%
- Alcohol addiction: 47%
- Family breakdown: 47%
- Parent unable to cope: 39%
- Mental illness of the parent: 24%
- Child abuse: 20%
- Abandonment: 17%
- Parental imprisonment: 17%
- Very young parent: 16%
- Physical illness of parent: 3%
- Death of parent: 3%
Compared to overall sample:

3 reasons over-represented as co-morbidities in the drug addiction group compared to whole group in study:
- Domestic violence 63% cf 40%
- Neglect 56% cf 39%
- Alcohol addiction 47% cf 25%

‘Drugs’ group => 4.5 co-morbidities compared to whole group in study=> 3.2

Parents and their children involved in drugs also had more complex issues.
Neglect – 56%

“Not attending to any of the child’s needs
“Never had food at school
“Put the child in unhealthy and dangerous situations
“Sick and covered in sores
“I turned up to see mokos and mother had just sold my grand-daughter to another person

“Mum was not coping with sending the twins to school. They were unwell and very skinny. Mum admitted in court to using “P”. The twins are both FAS. I applied by ‘without notice’ to the Family Court and after over a year they are now permanently with me.
Impact on Caregivers

- Most issues relate to financial, personal health, personal/relationship matters or needs of the children

- Grandparents raising children where parental drug abuse a factor => more likely than overall sample to be struggling
  
  “Children are the easier part – it is dealing with the parents that can be difficult”
  
  “Went through some really horrible times with his birth family”
  
  “It is hard not to feel resentful towards the children’s parents for putting us all in this position and that is not a healthy emotion to have”
The life I had planned has disappeared. The things I used to be able to do often I do very little now. The disposable income is gone; the retirement savings are gone; the middle income is now the low income. Our small house is now too small. What free time? what friends? The outcome - two children who were on their way to being broken are repaired, happy and doing extremely well.
Impact on Children

Many children arrive into grandparents care in a physically or emotionally damaged state.

Most common problem occurring all or most of the time is behavioural problems. Three-quarters have emotional problems

Some living in an alphabet soup of psychological problems

“His diagnoses are AS, they wrote this as 'features of' AS but he is definitely high functioning Autism Spectrum, ADHD, ODD, GDD and some FAS. He has other issues that are not diagnosed separately but are included as behaviour issues under the headings of the diagnosis he has. Conduct Disorder has not been formally diagnosed yet but it is obvious he has that, and in my… opinion, he will be a sexual threat to the community in the future.”
Parental contact/access for children with parents with drug issues more likely to be “random” and problematic

25% of mothers and 20% of fathers never see their child due to factors including prison, deceased, child choosing not to see them, mentally ill, orders preventing contact (abuse, violence, drugs), deny paternity, live far away or have started new families, ongoing addiction or lifestyle problems.

“Since mother’s release from prison the girls have not seen their mother.

“One mother had access rights every week on Saturdays, but she simply stopped attending and “she last saw or had contact in 2008”

“When she is drunk or drugged out of her mind she uses electronic media to contact him in the middle of the night and abuse my name and telling him to toughen up and go back to “The Bros.”
Participants were asked whether the children had any diagnosed psychological problems.

1162 responses

41% had diagnosed problems

On average 1.63% diagnoses per child (481 children shared 786 diagnoses)

The most common diagnoses arguably relate to trauma

Foetal alcohol – affected 10

Further 20% suspected of one of psychological illness/disability but undiagnosed due to age (too young) or lack of financial resources to get diagnosis
Drug Addiction and implications for Grandparent Care in NZ

- Methamphetamine at the top of a scale of both personal and social harm arising from use (New Zealand Drug Harm Index 2016 (McFadden 2016))
- Recent Trends in Illegal Drug Use in New Zealand (Wilkins et al 2016)
  - Reduction in supply of cannabis v increasing use of methamphetamine
    - Increased availability, growing gang involvement in drug sales, rise in ‘street-corner’ availability, growing international supply chain
- Why the meth epidemic is happening in NZ (Bradbury 2016)
  - Economics => quicker pay-out for meth versus 3 month growing for cannabis
GRG’s experience

- Drug addiction has always been a prevalent reason for children placed in grandparent care
  - ‘P’ use has been a predominant “drug” as a factor for GRG families since GRG started in 1999.
- Growth in numbers of families over past 3 years significant. 1800+ new families since January 2014.
- Research has shown more complex issues for families where drug abuse is a factor
- Greater need for support: not just for financial support for daily living but for professional help, treatment, therapy and in-classroom assistance for children affected by myriad of complex diagnoses and problems
- More effective services and support for these families now will reduce later harm.
References cited in this presentation from:
“My daughter is a drug addict": grandparents caring for the children of addicted parents” (Gordon 2017)


