
The Family Connections Center Newsletter

April 2015

No. 160

“We can let the circumstances of our lives harden us so that we become increasingly resentful and afraid, or we can let them soften us, and make us kinder.
You always have the choice.”
~Dalai Lama

April is Child Abuse Prevention Month!

Below are some articles and tips from www.preventchildabuse.org



Twelve Alternatives to Lashing Out at Your Child

The next time everyday pressures build up to the point where you feel like lashing out -- STOP!

Try any of these simple alternatives. You'll feel better... and so will your child.

- Take a deep breath... and another. Then remember you are the adult.
- Close your eyes and imagine you're hearing what your child is about to hear.
- Press your lips together and count to 10... or better yet, to 20.
- Put *your child* in a time-out chair (remember this rule: one time-out minute for each year of age).
- Put *yourself* in a time-out chair. Think about why you are angry: is it your child, or is your child simply a convenient target for your anger?
- Phone a friend.
- If someone can watch the children, go outside and take a walk.
- Take a hot bath or splash cold water on your face

- Hug a pillow.
- Turn on some music. Maybe even sing along.
- Pick up a pencil and write down as many helpful words as you can think of. Save the list.
- Call for prevention information: 1-800-CHILDREN



Teaching Children Discipline

- **Remember the purpose of discipline.** It is to teach your child socially acceptable ways of expressing natural desires and drives. Discipline guides your child into adulthood.
 - **Successful discipline is geared to the child's developmental stage.** Don't expect a child of any age to perform something he or she is not ready for.
 - **Children need positive reinforcement.** Reward your child for doing right with smiles, hugs, attention, praise and thanks. Rewards do not need to be toys or candy.
 - **Never hit or shake a child.** Hitting is **not** a useful discipline tool for your children. Hitting and other physical punishment are not effective because they teach a child that it is okay to hit people, make children much too angry to be sorry for what they've done and can hurt a child physically.
 - **Discipline is best taught by example.** The lessons you teach your child come from what your child sees you do – not what you say.
 - **If what you are doing is not working, change it!** Your best efforts, even those that worked in the past, may break down. Try to keep sight of your basic principles and always cherish your relationship with your child.
- The important thing is not whether your child behaves in the next few minutes or today or this week.** The really

important thing is how your child turns out 5, 10, or 20 years from now.



Ten Ways to Help Prevent Child Abuse

Be a nurturing parent.

Children need to know that they are special, loved and capable of following their dreams.

Help a friend, neighbor or relative.

Being a parent isn't easy. Offer a helping hand take care of the children, so the parent(s) can rest or spend time together.

Help yourself.

When the big and little problems of your everyday life pile up to the point you feel overwhelmed and out of control – take time out. Don't take it out on your kid.

If your baby cries....

It can be frustrating to hear your baby cry. Learn what to do if your baby won't stop crying. Never shake a baby – shaking a child may result in severe injury or death.

Get involved.

Ask your community leaders, clergy, library and schools to develop services to meet the needs of healthy children and families.

Help to develop parenting resources at your local library.

Find out whether your local library has parenting resources, and if it does not, offer to help obtain some.

Promote programs in school.

Teaching children, parents and teachers prevention strategies can help to keep children safe.

Monitor your child's television, video, and internet viewing/usage.

Watching violent films, TV programs, and videos can harm young children.

Volunteer at a local child abuse prevention program.

For information about volunteer opportunities, call 1.800.CHILDREN.

Report suspected abuse or neglect.

If you have reason to believe a child has been or may be harmed, call your local department of children and family services or your local police department.



Fact Sheet: The Relationship Between Parental Alcohol or Other Drug Problems and Child Maltreatment

The relationship between parental alcohol or other drug problems and child maltreatment is becoming increasingly evident. And the risk to the child increases in a single parent household where there is no supporting adult to diffuse parental stress and protect the child from the effects of the parent's problem. The following is a summary of what we know.

What is the scope of the problem?

Both alcohol and drug problems are widespread in this country. Almost 14 million adult Americans abuse alcohol. The number of illicit drug users exceeds 12 million. Illicit drugs include marijuana, cocaine, inhalants, hallucinogens, heroin, and non-medical use of psychotherapeutics. With more than 6.6 million children under the age of 18 living in alcoholic households, and an additional number of children living in households where parents have problems with illicit drugs, a significant number of children in this country are being raised by addicted parents.

Child maltreatment has become a national epidemic. More than one million children are confirmed each year as victims of child abuse and neglect by state child protective service agencies⁴. Every day at least three children die as a result of abuse and neglect. State child welfare records indicate that substance abuse is one of the top two problems exhibited by families in 81% of the reported cases.

Do parental alcohol or other drug problems cause child maltreatment?

Recent research on the connection between these problems and child maltreatment clearly indicates a connection between the two behaviors. Among confirmed cases of child maltreatment, 40% involve the use of alcohol or other drugs. This suggests that of the 1.2 million confirmed victims of child maltreatment, an estimated 480,000 children are mistreated each year by a caretaker with alcohol or other drug problems.

Additionally, research suggests that alcohol and other drug problems are factors in a majority of

cases of emotional abuse and neglect. In fact, neglect is the major reason that children are removed from a home in which parents have alcohol or other drug problems. Children in these homes suffer from a variety of physical, mental, and emotional health problems at a greater rate than do children in the general population.

Children of alcoholics suffer more injuries and poisonings than do children in the general population. Alcohol and other substances may act as disinhibitors, lessening impulse control and allowing parents to behave abusively. Children in this environment often demonstrate behavioral problems and are diagnosed as having conduct disorders. This may result in provocative behavior. Increased stress resulting from preoccupation with drugs on the part of the parent combined with behavioral problems exhibited by the child adds to the likelihood of maltreatment.

What characteristics do parents with alcohol and other drug problems and parents involved in child maltreatment share?

Histories of these parents reveal that typically both were reared with a lack of parental nurturing and appropriate modeling and often grew up in disruptive homes. Family life in these households also has similarities. The children involved often lack guidance, positive role modeling, and live in isolation. Frequently, they suffer from depression, anxiety, and low self-esteem.

They live in an atmosphere of stress and family conflict. Children raised in both households are themselves more likely to have problems with alcohol and other drugs.

Does the use of alcohol or other drugs by pregnant women affect their infants?

Pregnant women who use alcohol may bear children suffering from fetal alcohol syndrome (FAS). FAS is the leading known environmental cause of mental retardation in the western world. Each year 4,000 to 12,000 babies are born with the physical signs and intellectual disabilities associated with FAS, and thousands more experience the somewhat lesser disabilities of fetal alcohol effects.

How does a parent's alcohol or other drug problem affect children?

Children of alcoholics are more likely than children in the general population to suffer a variety of physical, mental, and emotional health problems. Similar to maltreatment victims who believe that the abuse is their fault, children of alcoholics feel guilty and responsible for their parent's drinking problem. Both groups of children often have feelings of low self-esteem and failure and suffer from depression and anxiety. It is thought that exposure to violence in both alcohol abusing and child maltreating households increases the likelihood that the children will commit and be recipients of acts of violence.

Additionally, the effects of child maltreatment and parental alcohol abuse don't end when the children reach adulthood. Both groups of children are likely to have difficulty with coping and establishing healthy relationships as adults. In addition to suffering from all the effects of living in a household where alcohol or child maltreatment problems exist, children whose parents abuse illicit drugs live with the knowledge that their parents' actions are illegal.

While research is in its infancy, clinical evidence shows that children of parents who have problems with illicit drug use may suffer from an inability to trust legitimate authority because of fear of discovery of a parent's illegal habits.

Are these patterns passed on from one generation to the next?

Some individuals can and do break the cycle of abuse. These resilient children share some characteristics that lead to their successful coping skills such as ability to obtain positive attention from other people, adequate communication skills, average intelligence, a caring attitude, a desire to achieve, a belief in self-help.

Additionally, the involvement of a caring adult can help children develop resiliency and break the cycle of abuse. However, a significant number of individuals fall victim to the same patterns exhibited by their parents. Those who have been severely physically abused often have symptoms of post-traumatic disorder and dissociation. Individuals suffering from mental health disorders may use alcohol and illicit drugs to decrease or mitigate their psychological distress. Research suggests that adults who were abused as children may be more likely to

abuse their own children than adults who were not abused as children.

Why are these patterns so hard to break?

One explanation for the continuing cycle is the secrecy, denial, and stigma involved in both problems. Many child maltreatment cases do not get reported and many children of alcoholics go unidentified. Within both populations, victims often are afraid to speak up because they do not think anyone will believe them. Often they do not realize that what seems to be normal behavior is indeed maltreatment, and learn to repeat these behaviors unconsciously. The lack of positive parental role modeling and lack of development of coping skills increases the difficulty of establishing healthy relationships as an adult. It may not be until they seek help as disturbed adults that they are made cognizant of the root of their emotional problems.

Can we treat child maltreatment when alcohol or other drugs are a problem?

Research has shown that when families exhibit both of these behaviors, the problems must be treated simultaneously in order to insure a child's safety. Although ending the drug dependency does not automatically end child maltreatment, very little can be done to improve parenting skills until this step is taken. It should be noted that the withdrawal experienced by parents who cease using alcohol or other drugs presents specific risks. The effects of withdrawal often cause a parent to experience intense emotions, which may increase the likelihood of child maltreatment. During this time, lasting as long as two years, it is especially important that resources be available to the family.

How can we prevent these problems?

Aside from promoting awareness of the link between parental alcohol or other drug problem and child maltreatment and cross-training professionals in the recognition and treatment of both problems, prevention services need to be available for all. Among the preventive efforts Prevent Child Abuse America believes to be most effective are:

- Prevention education for all children, adolescents, and young adults.
- Direct access to supportive services for all children of parents with alcohol or other drug problems before child maltreatment occurs, with an emphasis on validation of

feelings, supporting self-esteem, and intensive parenting and prevention education and support for all new parents.

- Access to self-help groups and other supportive services for all parents under stress and all victims and survivors of abuse.
- Education of all who work with children and families, including teachers, service providers, obstetricians, pediatricians, and emergency room personnel, regarding the interplay between a parent's alcohol or other drug problems and child maltreatment.



"Home Alone" Child Tips

Children are sometimes home alone while parents are working or away for some other reason. It is generally believed however that children under the age of 12 should not be left home alone.

Here are some suggestions to increase the safety of your older child and ease your mind while he or she is home alone:

- Agree on ground rules for those times when you are not home, for example, rules for cooking, leaving the house, having friends over, etc.
- Assign your children tasks to accomplish while you're gone. Try to keep them busy!
- Be sure to have telephone numbers posted where you can be reached. Also, make sure you list numbers for fire and police, neighbors, and relatives.
- If your children arrive home to an empty house, be sure to call and check in with them.
- Enroll your children in a course on safety procedures. Their safety is related to their knowledge of how to protect themselves. Check with the Girl Scouts, Boy Scouts, your local hospital, or the YMCA for courses.
- Talk to your children about their concerns when they are home alone. Make sure everyone understands each other.
- Remember, with the proper guidelines, being home for limited periods of time can increase independence, responsibility, and confidence in your children!



*Congratulations to the following participants for completing the FCC Parenting Class:
More grads to come in May!*

Support Groups:

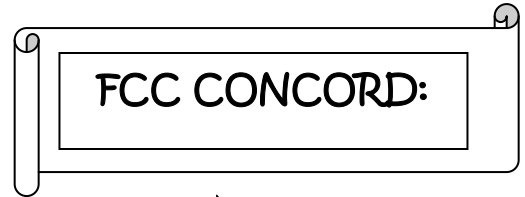
- Monday: 6:20pm – 7:20pm**
- Tuesdays: 4:20pm – 5:20pm**
- Wednesday: 9:20am – 10:20am
3:20pm – 4:20pm**
- Thursdays: 10:20am – 11:15am
2:20pm – 3:20pm**

If you are an FCC participant from Concord please submit a request slip to Ms. Arsenault.

Upcoming FCC-Berlin events:

- Reducing the Effects of Trauma on Families Exposed to Violence w/ Linda Douglas
Wed., April 15th 1:20 – 3:15
- Video Visit Play Seminar*
Wed., May 6th 4:20 – 6:20
***required if having or plan to have video visits!**

Please see the calendar for dates FCC Berlin will be closed, or opening late.



Congratulations to the seven newest participants for completing the FCC Parenting Class:

Support Groups:

C2: Wednesdays: 5:00pm - 6:00 pm, Downstairs Conference Rm. of Admin. Building

- C3: Mondays: 2:30 pm - 3:30 pm**
- Tuesdays: 1:00 pm - 2:00 pm**
- Wednesdays: 10:00 am - 11:00 am
1:00pm – 2:00pm**
- Thursdays: 2:30 pm – 3:30 pm**
- Fridays: 10:00am – 11:00am**

Upcoming FCC-Concord events:

- ❖ To see what's coming up see FCC staff at your next support group.

