

# WHEN SOMEONE A CHILD LOVES

## STRUGGLES WITH ADDICTION

A guide from the  
Fred Rogers Institute

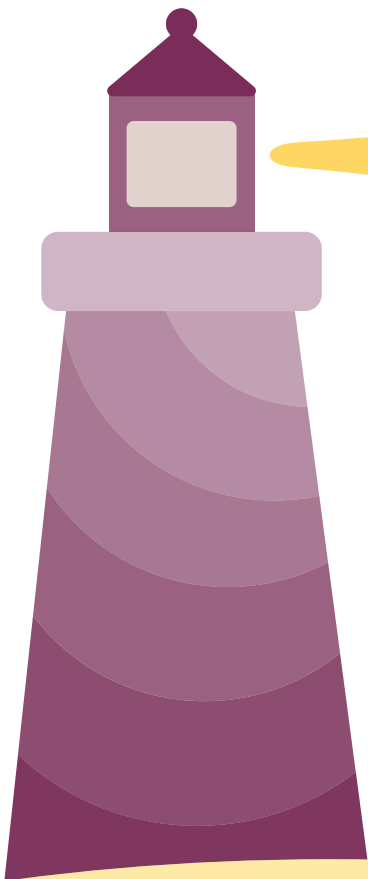


# TALKING WITH A CHILD

## About Their Loved One's Substance Use Disorder

Talking with a child about a loved one's substance use disorder may be challenging. Here are some ideas that may help.

- **Be honest.** If a child has questions about their loved one's substance use disorder, do your best to answer them honestly. You do not need to give unnecessary details. If you try to answer only the question the child asked, you will be building trust and easing fears without going beyond what the child is ready to hear. Keep in mind that if you don't know the answer to a question, you can simply let the child know "I don't know the answer to that, but I will let you know when I know" or "I wonder about that, too."
- **Focus on the whole person.** Use phrases like "Your brother has a problem with alcohol" or "Your mom struggles with addiction" rather than using terms like "alcoholic" or "addict." Be careful not to put the child's loved one down or call them names. Remember, to the child, their loved one is much more than the disorder that they struggle with. You can help the child know that it is okay to love someone and to not like some of the harmful things that they do.



- **Share your own feelings.** Sharing some of your own feelings with the child may show them that all feelings are okay and help them to learn ways to express their own feelings. You can help them see that hard feelings do not last forever, and that even when difficult things are happening it is okay to have happy feelings, too.
- **Be open to feelings.** It is hard to see a child you love experience hard feelings. And yet, one of the best things you can do is encourage the child to share those very feelings with you and be there without judgment as they express them. When you let a child feel their feelings, you are letting them know they are important.
- **Assure the child that their loved one's disorder is not their fault.** It can be easy for children to feel that something they did or did not do caused the problems in the lives of people they love. And, a child might feel that they can do or say something to "cure" their loved one. Remind the child frequently that they did not cause the disorder and they cannot make it go away.

# WHAT A CHILD MAY FEEL

Children may have all sorts of feelings about their loved one's addiction. The best thing you can do is be there for them through all of the feelings and let them know their feelings are safe with you. Here are a few feelings a child may have, and how you can support them:

## **Fear**

Children may feel afraid for: their security in the now, an uncertain future, and/or their loved ones' well-being. You may lessen some of the child's fears by being honest when you answer their questions and by assuring them that they are safe and taken care of. You can also let them know that while they are similar in some ways to their loved one, they are not an exact copy of that loved one. They can live a happier, more peaceful life.

## **Sadness**

It is common for children impacted by a loved one's addiction to have learned not to talk about the hard situations and hard feelings they have experienced. Let the child know that it is okay to feel sad when bad things happen and that you are proud of them for being brave enough to share their sadness with you.

## **Anger**

Anger is one of the most difficult emotions for all children to learn to manage and may be particularly difficult for a child impacted by a loved one's addiction. You can let the child know that it is okay to feel angry and that they can feel angry at someone and still love them. In a moment of intense anger, here are four steps that may be helpful to take:

1. Name the child's anger in a non-critical way.
2. Guide the child to a different physical space, such as outside or another room.
3. Guide them in taking long, slow breaths.
4. Remind the child that they are cared for and loved, even when they are angry.

## **A MESSAGE**

### **From Fred Rogers...**

"Anything that's human is mentionable, and anything that is mentionable can be more manageable. When we talk about our feelings, they become less overwhelming, less upsetting, and less scary. The people we trust with that important talk can help us know we're not alone."

# HOW YOU CAN HELP...

How lucky the child is to have someone who cares enough about them to read this brochure in hopes of learning something that may be helpful! Talking openly and honestly with the child is one of the most helpful things that you can do. Here are a few other things that may be helpful:

## **Allow time and space for the child to play**

Protecting and encouraging play time sends the message to the child that you are taking care of things so that the child can feel safe and secure enough to play. Play is an important way that children express their feelings and learn about themselves and the world around them.

## **Keep the conversation and responsibilities age-appropriate**

Many children who love someone with a disorder have experienced more adult conversations and situations than their peers and may have taken on adult responsibilities such as caring for younger siblings. Even if the child presents as very mature, it is important to allow them to be a child. Try not to discuss adult topics with them such as details of household finances or adult romantic relationships. By treating the child as a child, you are sending the message that they are safe, cared for, and that they are important and loved as they are.

## **Create regular opportunities to spend time together and have positive interactions, even small ones**

It is the small, out-of-spotlight moments that we have with children that matter the most. If you are able to protect even a small amount of time on a regular basis to be with the child without interruption, it can send the message to a child that they are just as important as the other aspects of your life. If something interferes with your regular time together you can acknowledge that to the child. This lets a child know that you value the time that you spend together and that you try your best to protect it.

## **Practice consistency**

Children who love someone with an addiction may have often experienced inconsistency, or even chaos, in their day to day life. To the extent that you can provide it, offer consistency in routines and plans. Talk with the child about what to expect in their days. If plans change, do your best to let them know ahead of time. Acknowledging a child's feelings of frustration, fear, or disappointment when things do not go according to plan can help them know they can rely on you.

## **Build a support network for the child**

No one person can be all things to another person, at all times. Consider reaching out to other safe, caring adults with whom the child regularly interacts. It may be helpful to make a list of names and numbers of safe, trusting adults whom the child can also contact when they need support. Even if the child never needs to reach out to one of these safe adults, the list may serve as a helpful reminder to the child that there are people who care about them and who can be there for them.

# Support for the Journey:

Remember that what the child needs more than anything is a supportive adult. Your being there is what matters most. You can always reach out to healthcare professionals for support if you see any signs that worry you, such as:

- Unexplained physical symptoms
- New onset of bed wetting
- Increased anger or irritability
- Increased difficulty in separating from caregivers
- Sudden decline in school performance
- Increased engagement in risky behaviors
- Signs that they may harm themselves or others
- Appearing sad or worried most of the time

If you would like to talk to a professional or be connected to resources in your area, the Alcohol and Drug Helpline at 833-301-HELP provides free and confidential support by trained counselors.



**FRED ROGERS**  
— INSTITUTE —

This material is based on work supported by The Jack Buncher Foundation. Any opinions, findings, conclusions, or recommendations expressed in this publication are those of the authors and do not necessarily reflect the views of the granting agency.