**Additional risks to consider for children and families affected by parental substance misuse during Covid-19**

**Consider changes to family routines and patterns of substance use (Children’s routines are likely to change especially if they are not attending school / nursery at present).**

 = With children at home more does this increase the risk of their exposure to parental substance misuse and its impact?

= has the pattern of substance misuse changed?

= When are the substances used? Where does the use take place? Where are the children at this time? (Also consider impact of ‘comedown’ / withdrawal on children)

= has the type of substances being used changed (availability may be affected by the current situation – alternative substances may be used)?

= if different substances are being used how does this impact the parent differently than their normal substance of choice?

**Consider how substances are acquired (this will likely be impacted by current situation)?**

= how are drugs being obtained at present? From where?

= are children being left alone?

= are children taken to risky places?

= do visitors to the home pose any risk to children?

**Also consider that opiate substitute prescriptions {methadone and Subutex} maybe affected by self-isolation?**

= if unable to leave the house to pick up prescriptions a nominated other can pick these up. However, this increases the risk of diversion / theft / loss of substances. Without substitute prescription there is a risk of a return to (or increase in) use of heroin / other substances.

**Consider how substance misuse is funded (this will likely have been affected by current situation)?**

= how is the substance misuse funded?

= has the cost of substance use increased (price rises are likely at this time)?

= has the parents’ ability to fund substance use been affected by ‘lockdown’ (sex work, or criminal activities such as shoplifting are likely to be significantly impacted by current situation)?

= What extra strain does this place on family finances?

= what is the likely impact on children?

= if parents are dealing drugs, has the pattern of how this is done changed? Are they now dealing from home? Does this increase the risk to children from visitors to the house?

= if debts (including to dealers) are increasing does this place children at any extra risk?

**Consider who lives/stays in the accommodation?**

= has this changed recently?

= are other residents using substances?

= does the risk to children from others in the house increase if their parents are unable to supervise them due to intoxication?

**Consider potential increase in health risks in the home (including from substances and paraphernalia)**

= are substances stored safely? (NB: changes to substitute prescription {Methadone and Subutex} patterns at this time will likely mean a larger amount of ‘script’ is kept at home {2 weeks supply provided as standard at current time}. Supervised consumption has mainly been suspended).

Lockable boxes are available from treatment services.

= does limited access to needle exchange services mean used needles are less likely to be disposed of safely?

**Consider if the risk of overdose has increased (quality of drugs is likely to be more variable and limited availability may lead to use of drugs not accustomed to)?**

= is the user taking smaller ‘test’ doses if they are not sure of the strength of the substance?

= what would the user do if their drug of choice was unavailable?

= has the type of drug being used changed?

= if an opiate user, is Naloxone available in the house and does someone know how to use it in an emergency {Naloxone is an emergency medication that can temporarily reverse the effects of an overdose}?

**Consider possible risk from alcohol withdrawal?**

People who are alcohol dependent will need to ensure they can still access alcohol regularly to avoid withdrawals. There is a risk of serious harm and even death from non-medically supervised alcohol withdrawal.

Never advise anyone to stop drinking suddenly! Engagement with appropriate support services (including consideration of medically assisted reduction, is always recommended)

**Consider if changes to substance misuse support provision is affecting stability of substance user (lots of support groups are not currently running and majority of support is via telephone only at present)?**

= how has engagement with support services been affected?

= how does the parent feel this has impacted them, if at all?

= how are they keeping themselves safe and managing cravings / avoiding (re)lapse?

**Consider the impact of a likely decrease in protective factors;**

= children may not be attending school / nursery at the current time.

= children may not have contact with protective / supportive family members at present.

= children will not be accessing positive activity provision at present (eg sport / drama / art etc).

**Consider the impact of substance use on domestic violence during ‘lockdown’?**

= Substance misuse can lead to an increase in the frequency and severity of domestic violence. This includes during periods of withdrawal, or unfulfilled cravings for substances which are likely to be increased at present due to impact on supply.

**Notable changes to service provision;**

* Most people who are on supervised consumption (opiate substitute prescription) will move to unsupervised and will get a two-week take-home supply.
* For those starting or re-starting substitute prescriptions Buprenorphine (Subutex) will be provided instead of methadone. Buprenorphine is a safer option than methadone for people who are starting a new prescription and can't visit the pharmacy regularly. The only exception to this is for women who are pregnant. Buprenorphine is less likely than methadone to harm people who aren't used to taking opioids. People are also less likely to steal or misuse it.
* Detoxifications and dose reductions are on hold for a while.
* Most treatment service support groups are currently not running. Individual support sessions are mainly taking place over the phone, only.
* All fellowship meetings (AA, NA, CA etc) are not currently open. A list of local fellowship groups currently being delivered online is available here; [https://www.alcoholics-anonymous.org.uk/Members/Regional-&-Local-Websites/south-east-region/brighton-area-intergroup/Brighton-Online-Meetings](https://www.alcoholics-anonymous.org.uk/Members/Regional-%26-Local-Websites/south-east-region/brighton-area-intergroup/Brighton-Online-Meetings)
* It is also worth noting that Oasis Creche is still open at present, although it is being very underused. Social Workers can still suggest to parents with substance misuse issues (including historic) that they can access this – for instance if they need to go shopping. Please be aware the decision for the creche remaining open maybe reviewed if it continues to be underused.