

# The Nurse's Role in Caring for Children of Parents With Opioid Use Disorder (OUD) Teaching Strategy

## Overview of Teaching Strategy

Nurses practicing in an array of settings encounter children who are experiencing adverse childhood experiences (ACEs). An estimated 2.3 million individuals in the United States have an opioid use disorder (OUD) (Substance Abuse and Mental Health Administration [SAMHSA], 2018), many of whom are parents. Growing up with a parent who has an OUD is an adverse childhood experience. Nurses are in an optimal position to assess the needs of and intervene with these children. Such interventions can range from educating the child about OUD to rallying for policy change for this population of children.

This teaching strategy centers on a case study of a 10-year-old boy named Camden. Students will conduct a biopsychosocial assessment of Camden, assess Camden for abuse, and develop a concept map identifying Camden's stressors.

## Download All Files for This Teaching Strategy

- [Instructor guidelines to Suggested Learning](#)
- [Sample concept map](#)

## Learning Objectives

Students will:

- Conduct a biopsychosocial assessment of a child who has a parent with opioid use disorder (OUD) in the home.
- Identify risk factors and protective factors for children growing up with a parent who has an OUD.
- Describe best nursing practices in working with children and families in which a parent has an OUD.

## Learner Prework

1. National Association for Children of Addiction website at: [www.nacoa.org](http://www.nacoa.org).
  - a. Note the mission statement. What is the overall goal of this organization?
  - b. Note the prompts at the top of the page:  
Families-Professional Resources-Programs-Training-Affiliations-Resources-About

Go to: [Alcohol and Drug Abuse Hurts Everyone in the Family](#) and review (this is a downloadable pamphlet/resource for nurses to share).

Go to Healthcare Professionals. There is a downloadable guide regarding working with families in which a parent has a substance use disorder (SUD). (This is a downloadable guide; the document is linked here for your convenience).

2. [Guide for Healthcare Professionals](#) (by the National Association for Children of Addiction [NACOA]). This guide offers information regarding the role of the provider; best practices on page 3; core competencies at the primary, secondary, and tertiary level when working with children whose family member has a SUD (pages 3-4; 8-9); and listings of resources at the local and national level (pages 14-15; 22-23).

## Suggested Learning Activities

Read the following case study and use that information to conduct a biopsychosocial assessment of Camden, communicate with him therapeutically, and offer age-appropriate education.

### Case Study: Camden West

Camden West is a 10 y/o male who has come into the school nurse's office today complaining that he "is tired, has a headache, and has an upset stomach." Camden's teacher has shared with the school nurse that he has exhibited recent inattentiveness in class, frequent absences, and subsequent falling grades (from As and Bs to Cs and Ds). Generally, Camden socialized with some of his peers inside and outside of class, but per the teacher's report, Camden has become isolated over the past few months.

The school nurse is aware that six months ago, Camden's parents divorced. His mother retained physical custody of him and his two younger siblings, a sister age 7 and a brother age 4. Camden's father moved out of the family home and into an apartment 45 minutes away. He sees Camden and the other children twice per month. Camden is 4' 5" and weighs 75 lbs. His eyes appear sunken in and his skin is dry. During the interview he is easily distracted and has intermittent eye contact with the nurse.

Camden is not currently taking any medications.

The nurse has just asked Camden about his home life: "Camden, I understand that this past year your parents divorced. Divorce is a major change in a family and can be hard for the children." The nurse asks, "What has it been like for you and your family?" Camden replies, "My mother is sad a lot. My brother and sister tell me that they miss our dad. Dad comes to get us

and takes us to Grandma’s and out to eat every couple of weeks.” The nurse responds, “I hear you talk about your mom and brother and sister and how they feel, how do you feel?”

Camden looks at the floor. The nurse senses that he is a bit guarded and sits silently for a few moments. Camden then tells the nurse that before his dad moved out, his mom and dad had a lot of fights. During one fight, his dad was yelling about his mom using too many of her pain pills for her back pain. Dad called mom “a junkie.”

Camden then explains that his mom “took those pain pills a lot” after his dad left the family home. She would sleep much of the day, leaving him to care for his younger brother and sister. “Mom gets upset when her pain medicine runs out. She yells and cries and sometimes she’ll run to the bathroom holding her stomach. Now mom has been going to a clinic to get her medicine to help her with her back pain. Sometimes we go with her to get her medicine. She still sleeps a lot or stays in her room.” The nurse nods at Camden and replies, “I see. It must be hard or even scary for you to see your mom in pain, crying and yelling like that.” Camden states, “Yes, it is. Now, our grandma comes over a few times a week to clean the house and cook dinner.” Camden adds, “I like it when grandma comes over. She really loves us.”

### **1. Biopsychological Assessment:**

After reading the [Guide for Healthcare Professionals](#) (by the National Association for Children of Addiction [NACOA]), respond to the following questions:

- a. What physical complaints/signs does Camden exhibit at this time?
- b. Ruling out signs of physical illness, the nurse should gently begin inquiring about Camden’s absences and behavior in class. How would you approach this with Camden? What questions would be most appropriate to ask him?” (Use the Algorithm/assessment tool that starts with the question: “Have you ever been concerned about [your mother] using drugs?” on page 6 of the NACoA Guide for Healthcare Professionals).
- c. The nurse should then ask more direct questions about Camden’s home life. (Given the school health setting, it is reasonable to expect that the school nurse is aware of Camden’s parents divorcing within the last year.) How would you begin this conversation with Camden?

### **2. Assessing for Abuse and Neglect**

- a. The number one priority is safety for Camden and his siblings. Identify any possible signs of abuse and neglect. What other questions should the nurse ask Camden?
- b. What is the nurse’s next action after assessing for abuse and neglect?
- c. Best practices call for the nurse to provide brief age-appropriate education at this time to Camden about OUD. What would you tell Camden?

**3. Using the template provided develop a [concept map for Camden](#).**

Identify the stressors Camden is experiencing and develop age-appropriate nursing interventions to assist Camden to cope with the stressors.

### Suggested Reading

Mechling, B., Ahern, N., & Palumbo, R. (2018). Applying ambiguous loss theory to children of parents with an opioid use disorder. *Journal of Child and Adolescent Psychiatric Nursing, 31*, 53-60. doi:10.1111/jcap.12209

Mirick, R. G., & Steenrod, S. A. (2016). Opioid use disorder, attachment, and parenting: Key concerns for practitioners. *Child Adolescent Social Work Journal, 33*(6), 547-557. doi:10.1007/s10560-016-0449-1

Spehr, M. K., Coddington, J., Ahmed, A. H., & Jones, E. (2017). Parental opioid abuse: Barriers to care, policy, and implications for primary care pediatric providers. *Journal of Pediatric Health Care, 31*(6), 695-702. doi:/10.1016/j.pedhc.2017.05.007

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