

Welcome!

We are so glad you are here!

We will get started shortly.
In the meantime, we invite you to intentionally enter this space.



Silence your cell phone



Stretch



Close the door



Take a few deep breaths



Close browser windows



Emotionally release your to-do list



Check your audio and video



Take a bio break

Fatherhood Talk Tuesday

Tuesday, April 11, 2023 || 3:00pm – 4:30pm ET

NICHQ
National Institute for
Children's Health Quality

HEALTHY
start
TA & SUPPORT CENTER

Fatherhood Talk Tuesday

TUESDAY, APRIL 11, 2023
3:00PM – 4:30PM ET

THE HEALTHY START TA & SUPPORT CENTER IS OPERATED BY THE NATIONAL INSTITUTE FOR CHILDREN'S HEALTH QUALITY (NICHQ). THIS PROJECT IS SUPPORTED BY THE HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA) OF THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS) UNDER GRANT NUMBER 1U5MC327500100 TITLED SUPPORTING HEALTHY START PERFORMANCE PROJECT.

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start
TA & SUPPORT CENTER



FATHERHOOD TALK TUESDAY

Agenda

**Housekeeping &
Welcome**

Danisha Charles
HEALTHY START TA & SUPPORT
CENTER (TASC)

Introduction

Kenn Harris
TASC

**Fatherhood
Matters: Father and
Children Safety**

Kathy Mitchell
FASD UNITED

Wrap-up

Danisha Charles
TASC





THIS SESSION IS BEING RECORDED.



ALL PARTICIPANTS ARE MUTED UPON ENTRY. WE ASK THAT YOU REMAIN MUTED TO LIMIT BACKGROUND NOISE.



PARTICIPANTS ARE ENCOURAGED TO SHARE COMMENTS AND ASK QUESTIONS USING THE CHAT BOX.



Welcome

Danisha Charles

HEALTHY START TA & SUPPORT CENTER

*FATHERHOOD TALK TUESDAY
HOSTED BY THE HEALTHY START TA & SUPPORT CENTER AT NICHQ*

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Checking In

A photograph of a man with a beard, wearing a grey t-shirt and a yellow sash, holding a baby in his arms. The man is looking at the baby with a smile. The baby is wearing a grey long-sleeved shirt and has a pacifier in its mouth. The background is a bright, slightly blurred indoor setting with a green plant in the bottom left corner. The right side of the image has a blue gradient overlay.

Introduction

Kenn Harris

HEALTHY START TA & SUPPORT CENTER

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Father and Children Safety

Kathy Mitchell

FASD UNITED



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Fatherhood Matters

Kathleen Tavenner Mitchell, MHS, LCADC

Lessons Learned from Working in Addiction and Behavioral Health Settings

- ▶ Children learn to LOVE themselves from having the experience of being loved, nurtured and valued by the adults that raise them
- ▶ Children that don't have the experience of being loved grow up and they suffer in many varied and complicated ways
- ▶ Girls/Women that end up in addiction treatment rarely have had the experience of growing up with a healthy father or father role model
- ▶ Boys/Men that end up in addiction treatment rarely have had the experience of growing up with a healthy father or father role model

I grew up with an alcoholic father that was violent towards my mom and my younger brother. At 12 years old I used to fantasize about killing myself by hanging myself in the old pine tree in our back yard. I am grateful that at age 21 I found treatment and support in AA. Mike M.

Fatherhood and Pride



Forces us to grow-up and show-up



Responsibility-We Have a Choice to Make

Will shut us down-Fright/Flight or
Can Empower us- Teaches us Self-Love



Self-Centeredness will Slip Away- Time Investment with great pay-off



You'll get what you put into it



Vision Board

Start to manifest a healthy and empowered lifestyle
You are in-charge of your own destiny
Start to envision the life your child will experience



Empowerment

The process of increasing the capacity of individuals to make choices into desired actions and outcomes.



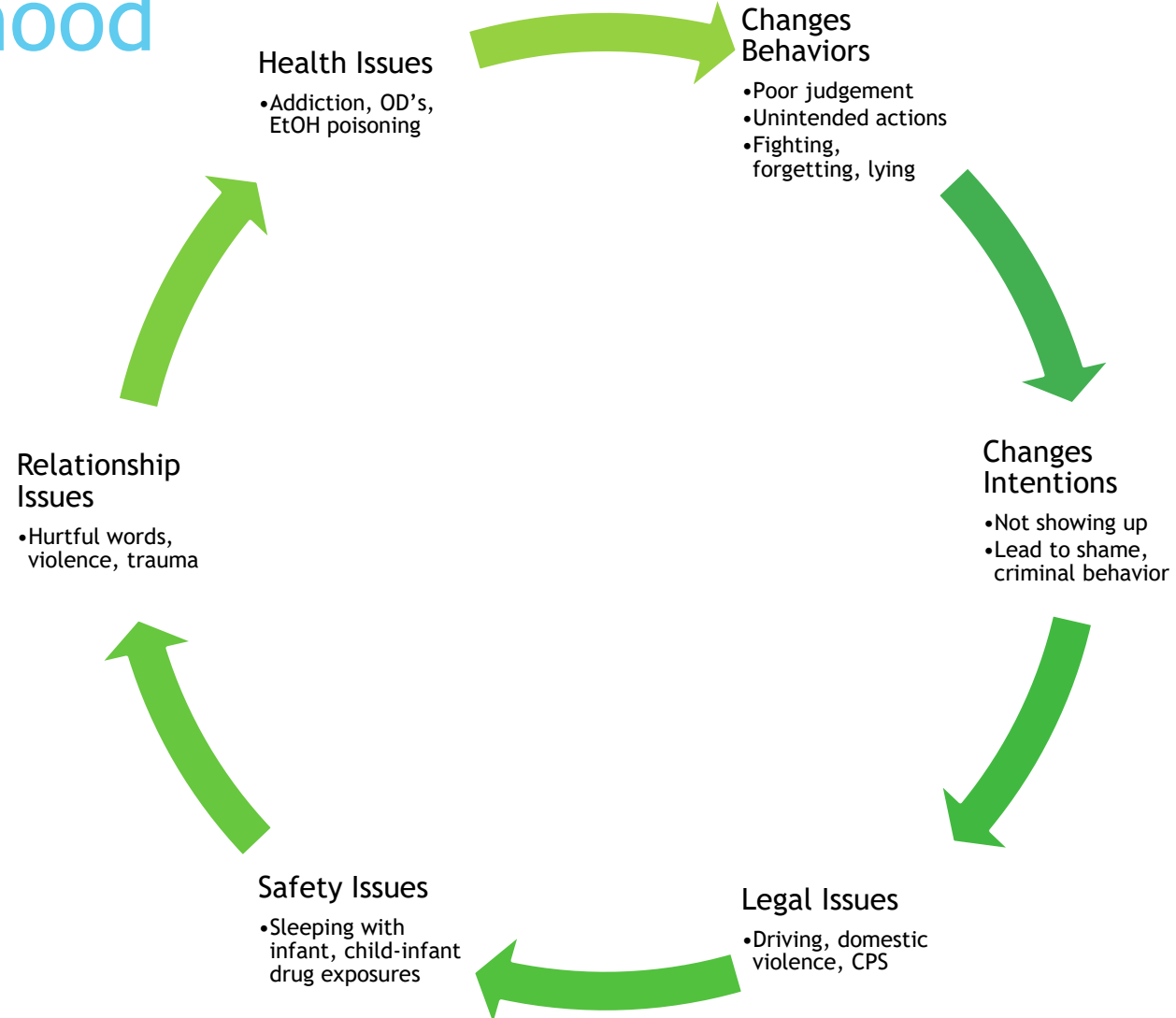
The Role of a Father:

- ▶ Not just a biological donor
- ▶ Fathers keep us safe
- ▶ Fatherhood is about RELATIONSHIP and CONNECTION: Building a daily relationship with child
- ▶ Fatherhood is *keeping it real*- being honest and authentic
 - ▶ Making mistakes and owning them
 - ▶ Admitting mistakes-I hope you can forgive me
- ▶ Fathers are our Teachers and a Role Models
 - ▶ How they treat their spouses
 - ▶ How they treat their mothers and fathers
 - ▶ How they treat a server or a worker in public
 - ▶ How they interact with other men (fair play, etc.)
 - ▶ Their beliefs and attitudes towards others

- ▶ Discipline is love
 - ▶ Screaming or whipping in rage is not discipline nor love
 - ▶ When discipline comes from a place of Love and connection and the message will be heard and will penetrate
- ▶ Strength comes from the Heart
- ▶ EGO comes from the Head
- ▶ A father in strength is a teacher and can critique his children
- ▶ A father in ego is reactive and scary- the lesson does not come through
- ▶ Fathers that can own a mistake teach integrity
- ▶ Children learn to be strong from gentleness, honesty and connection

EGO vs
STRENGTH

When Alcohol and Drugs Interfere with Fatherhood



Factors that May Increase Risk for Substance Use, Misuse, and Addiction

Pre-existing neurobiological differences in adolescents who progress from no or minimal drinking to heavy drinking

Genetic factors account for 40-70 % of individual differences in addiction risk

Early life stressors (abuse, neglect, household instability, and poverty) are risk factors

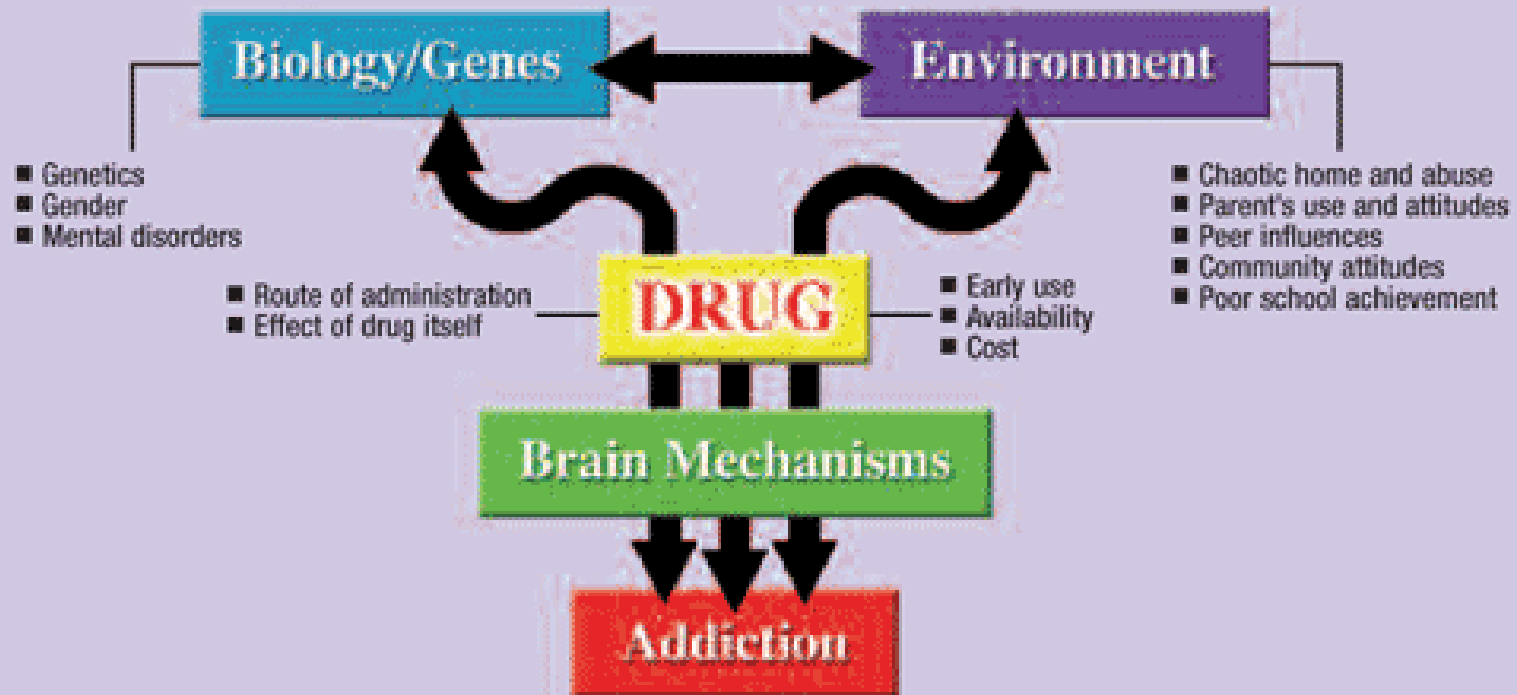
Adolescent substance use increases risk of developing SUDs; the earlier the exposure, the greater the risk

SUDs frequently co-occur with other mental health conditions—SUD may increase risk of mental illness and. mental illness may increase risk of SUD

Sex, race, and ethnicity also affect risk for SUD

(Koob 2017)

RISK FACTORS



Addiction Changes the Brain

Addiction is a chronic disease of brain reward. Its symptoms manifest itself as dysfunction in biological, psychological, social, and spiritual characteristics.

Enables substance-associated cues to trigger substance seeking

Reduces functioning of brain executive control systems, which are involved decision-making and regulating actions, emotions, and impulses

Adolescence is a critical “at-risk period” for substance use and addiction

All addictive drugs have especially harmful effects on the adolescent brain, which is still undergoing significant development

Brain changes persist long after substance use stops; it is not known how much these changes may be reversed or how long it takes

• (Koob 2017)

3 Laws in an Addicted Family

- Don't talk
- Don't Trust
- Don't Feel

Enforced by “triangling”

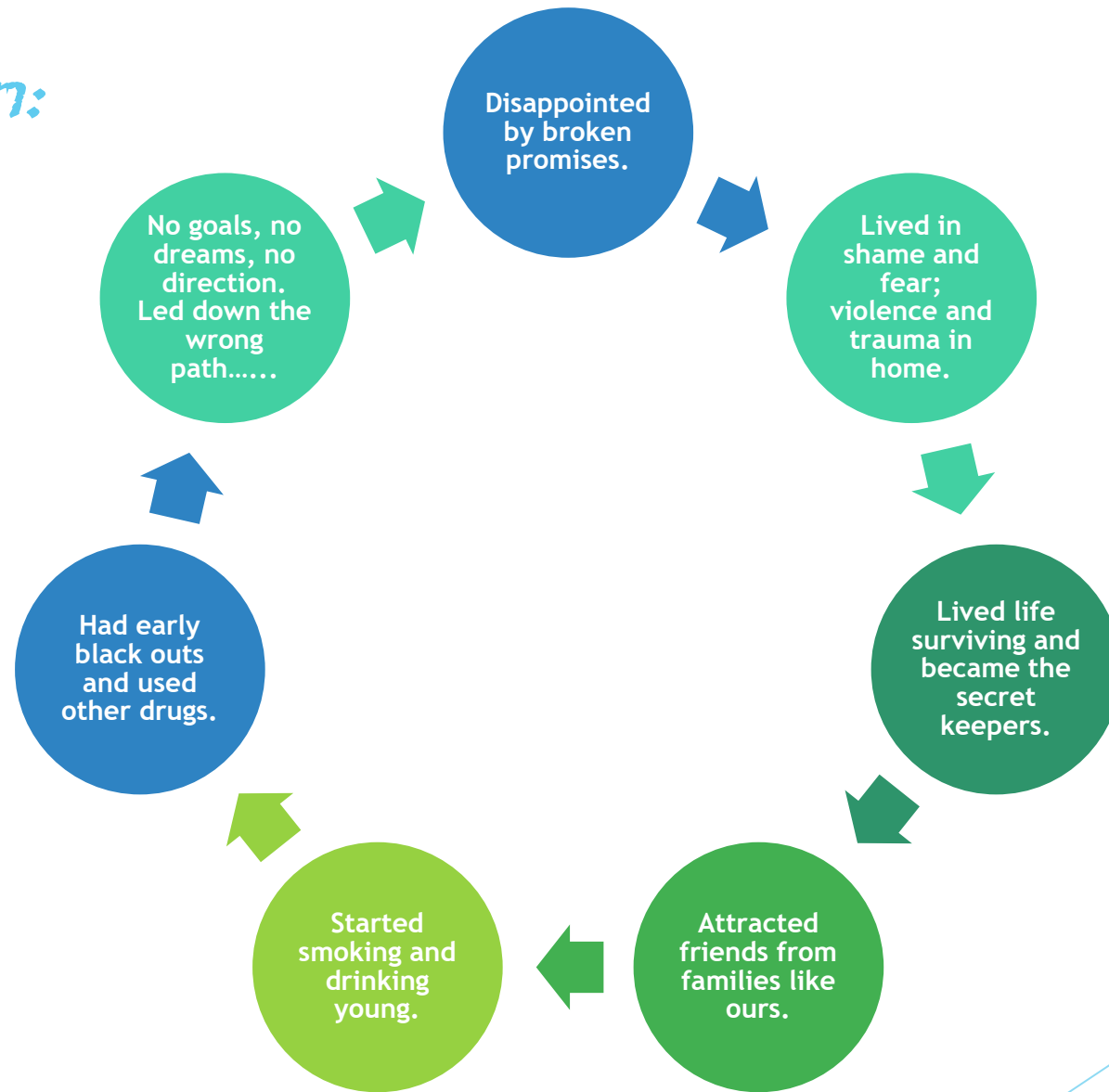


Families are emotionally disconnected but do not see it.

- Finger pointing and defensiveness
- Children acted as parents and parents acted as dependent children
- Isolation despite the appearance being close family
- Lack of intimacy or emotional connection (comparison, gossiping, no direct conversation, competition, envy)
- Feelings are not expressed openly or appropriately
- Pain, anger, sadness or hurt are discounted (weakness)
- The patterns have continued in new generations (in families with no recovery)



The children:



children in addicted households

Worry about the health of parents

Upset about the unpredictable and inconsistent behavior of the addicted parent

Angry about the lack of support of the non-alcoholic

Worry about the fights

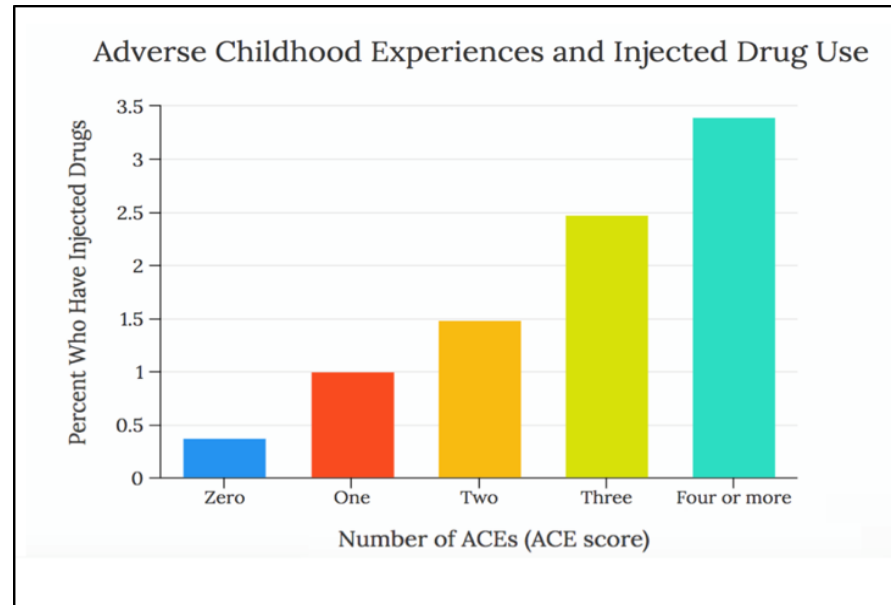
Scared and ashamed about the violence at home

Embarrassed by parent's inappropriate behavior

Experience trauma

Keep secrets

Impact of Adverse Childhood Experiences (ACEs)



- ACEs are linked to numerous negative health outcomes including cardiovascular disease, liver disease, and mental health disorders.
- Those with unresolved or untreated childhood trauma may be more likely to become habitual opioid users.

Source: Feuerstein-Simon, Rachel. A Vital Tactic for Fighting the Opioid Epidemic: Make Sure Kids Are Safe and Healthy. Children's Hospital of Philadelphia PolicyLab Blog. <https://policylab.chop.edu/blog/vital-tactic-fighting-opioid-epidemic-make-sure-kids-are-safe-and-healthy>. Accessed January 6, 2021. Reprinted from (Fig 3) Felitti V. The Relation Between Adverse Childhood Experiences and Adult Health: *Turning Gold into Lead*, Perm J. 2002;6:44-47, with permission from The Permanente Press. <http://www.thepermanentejournal.org/files/Winter2002/goldtolead.pdf>.

Profile of Adolescents and Adults that grew up with adults using substances (ACOA)

- ▶ Over developed sense of responsibility
- ▶ “Stuff” feelings from traumatic childhood
- ▶ No ability to express feelings
- ▶ Isolated/afraid people and authority figures
- ▶ Addicted to approval/excitement (crisis)
- ▶ Frightened by angry people or personal criticism
- ▶ See themselves as victims
- ▶ Judge themselves harshly

Profile of Adolescents and Adults that grew up with adults using substances (ACA)

- Personalize everything
- Take themselves very seriously
- Overreact to changes over which they have no control
- Judgmental and gossip (Tri-angling behaviors)
- Talk-don't listen
- Extreme defense mechanisms (rationalize, blame, minimize, excuses) "I'm different, my life is harder"
- Super responsible or super irresponsible
- Extremely loyal, even in disloyal situations (abuse)
- Impulsive
- Capacity for strong DENIAL
- Co-Dependent/Enablers
- Have partners with SUD/AUD
- May have lifelong effects from prenatal exposure (FASD)

Data from a national survey showed that **among pregnant women**

about **10%** had **at least one alcoholic drink** in the past 30 days



of those using alcohol, **40% also used other substances** (most often tobacco & marijuana)

Increased screening and interventions could improve the health of women and their children

The effects of Fetal Alcohol Spectrum Disorders) FASD last a lifetime

▶ FASD is the leading cause of preventable intellectual disability and a leading cause of birth defects and learning and behavioral disorders.

▶ Effect development and function more so than other drugs or teratogens.

“Of all the substances of abuse, including cocaine, heroin, and marijuana, alcohol produces by far the most serious neurobehavioral effects in the fetus.” Institute of Medicine, 1996

▶ Can an contribute to a range of growth deficits and structural anomalies (FASD)



Alcohol use during pregnancy can lead to lifelong effects.

Up to **1 in 20** US school children may have FASDs.



People with FASDs can experience a mix of the following problems:

Physical issues

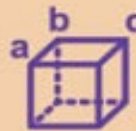
- low birth weight and growth
- problems with heart, kidneys, and other organs
- damage to parts of the brain



Which leads to...

Behavioral and intellectual disabilities

- learning disabilities and low IQ
- hyperactivity
- difficulty with attention
- poor ability to communicate in social situations
- poor reasoning and judgment skills



These can lead to...

Lifelong issues with

- school and social skills
- living independently
- mental health
- substance use
- keeping a job
- trouble with the law



Drinking while pregnant costs the US **\$5.5 billion** (2010).



UNC study: Even one-time marijuana use can cause birth defects - especially if used with alcohol

- * New preclinical research reported in animal models shows that exposure to compounds found in marijuana called cannabinoids (CBs), which includes cannabidiol (CBD) and tetrahydrocannabinol (THC), during early pregnancy can cause malformations in the developing embryo. Parnell and colleagues also found that when CBs and alcohol were used together, the likelihood of these birth defects more than doubled. They went on to show that these drugs may be causing defects by interacting on a basic cellular level and disrupting signaling between molecules and cells that control growth and development.

EW Fish, LB Murdaugh, C Zhang, KE Boschen, O Boa-Amponsem, HN Mendoza-Romero, M Tarpley, L Chdid, S Mukhopadhyay, GJ Cole, KP Williams, and SE Parnell. [Cannabinoids Exacerbate Alcohol Teratogenesis by a CB1-Hedgehog Interaction. \(link is external\)](#) Sci Rep 9, 16057 (2019) doi:10.1038/s41598-019-52336-w.

Alcohol: Infant Mortality & SIDS

“Alcohol use while pregnant is a leading causal factor in both fetal and infant death.”

Ken Warren, PhD, Acting Director,
NIAAA

NOFAS interview,
www.fasdunited.org

- ▶ Not all children with an FASD have exactly the same defects or deficits
 - ▶ A twin study found that nearly identical alcohol exposure in utero, such as between fraternal twins, can result in immensely different child outcomes (genetic influences).
- ▶ Many biological and environmental factors influence the effects of alcohol on the developing fetus
- ▶ Nutrition, other toxins or exposures, trauma, genetics all play a role, there is currently no way to predict which fetuses are more or less vulnerable.
- ▶ In order to protect all fetuses, there is no known safe amount of alcohol during pregnancy.

VARIABILITY OF
OUTCOMES
FASDs ARE
LIFELONG

Alcohol/Substance Use by Partner or Other Family Members

*Have lost their voice; have turned off their
"inner wisdom":*

- ▶ Majority have been physically, emotionally and/or sexually abused (trauma-PTSD)
- ▶ May not be able to “see” their disease (denial is reflective of family and HC providers)
- ▶ Have low self-esteem and little self-confidence
- ▶ Feel powerless and scared
- ▶ Are often codependent or engage unhealthy abusive relationships
- ▶ Need safety, support, vocational, educational support

**THEY ARE NOT THEIR DISEASE- TREATMENT WORKS
AND SAVES LIVES**

Mitchell, 1999

Family in Recovery

- **Learns that addiction is a disease**
- **Stops using words and behaviors that harm self and others in family**
- **Discovers hope for self & family**
- **Has peace of mind/serenity.**
- **Helps others**
- **Can discuss and work out problems.**
- **Can talk about feelings**
- **Supports treatment and attends 12 Step Recovery or other support system**
- **Has authentic communications and relationships**
- **Family members learn to say “I’m sorry”**
- **Assume prior family roles- adults are parents, children are children**



Setting Healthy Boundaries with Partner of Other Family Members

It's ALWAYS right to protect your child

- Car seats, drinking/drugging while driving, smoking in unventilated car or space, being around intoxicated or high family members, violence or abuse

Support treatment for family members/partner (in-patient, out-patient, MAT, AA/NA)- Supporting NOT enabling

It is NOT DISLOYAL to support an intervention, talk openly to case manager, or others about alcohol/substance use

What is Resilience?

“Capacity to rebound from adversity strengthened and more resourceful”

(Walsh, 1998)





The Blessing of Conflict - Be Grateful for the Rocky Path

Strength

Empowerment

Respect



Defining Strength-Based Family Approaches

“Strengths-based practice has been defined as seeing people as “having potential and power” rather than being “at risk.” It emphasizes opportunities, hopes, and solutions, with the home visitor as a partner to the family (*Hammond, 2010*).”

▶ Key features include:

- Nurturing Protective Factors
- Supporting Individuals or Families Navigating Multiple Challenges
- Connecting to the Stories of Families

Change Perception: linear to circular



One day at a time

Choosing a Positive Fatherhood Journey

Vocabulary Matters-

We manifest our thoughts
and words

- Change *I can't* to
I choose not to or *I won't*

Perfectionism

- 3 P's (perfectionism,
procrastination,
paralysis)

Choices

- Every action is a chosen
action



**SETTING
BOUNDARIES**

NO

ASSERTIVENESS

NOT PASSIVE

NOT AGGRESSIVE

HONESTY

I CAN'T TO I WON'T

Healthy
Communication Skills

Surround
yourself with
positive
people DAILY

Separate yourself from people feeding you negative messaging:

You should be angry

You should be afraid

You can't make it on your own

You'll never be able to....

Creating Abundance

I AM ALREADY
Experiencing
Good Things
in Life....

Discuss

Discuss, meditate, write on abundance daily:

Believe

Believe ~ the universe is endless...unlimited possibilities

Water

Water what you want to grow in your life garden.

Creating Resiliency

Family connectedness

Spiritual belief system- church, synagogue

Physical- sleep, health

Social-friendships/community

Emotional (counseling/support)

Intellectual- informed about addiction

12 Step Recovery (AA, NA, Alanon)

Recreational/Arts/Hobbies/leisure

Respite support

Support and resources



- ▶ Churches, synagogues, temple
- ▶ Sports clubs or gathering sites
- ▶ Community centers, clubs
- ▶ Neighborhood-elders
- ▶ Family members
- ▶ 12 Step or other healthy/recovery support network
- ▶ Schools

Role Models and Mentors

Fathers Need to Connections to Stay Balanced and Happy

- ▶ Enjoying outdoor spaces: Parks and wildlife
- ▶ Utilizing free community resources-Libraries, museums
- ▶ Participating in community/school events: sports, fairs, gatherings
- ▶ Staying keen to the needs of their children's daily needs: naps, healthy snacks, time together, quiet time
- ▶ Maintaining strong family relationships, help with childcare or other support
- ▶ Connections to religious, spiritual or other natural community support
- ▶ Connections with friends and community
- ▶ Supportive cultural traditions
- ▶ Ability to access concrete support in times of need



Thank You!

QUESTIONS ?????

Kathy Mitchell, MHS,
LCADC

ktmitchellconsulting@gmail.com



Satisfaction Survey

*YOUR FEEDBACK IS EXTREMELY VALUABLE AND WILL HELP
ENSURE OUR OFFERINGS MEET YOUR SUPPORT NEEDS!*

Next Fatherhood Talk Tuesday

TUESDAY, MAY 9

3:00PM — 4:30PM ET

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FATHERHOOD TALK TUESDAY
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Upcoming Events

Events

Thursday, April 20

3-4:30 pm ET

CO-PARENTING LEARNING
ACADEMY

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Thank you !

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