



CAPE COD TIMES

Kids from homes with substance abuse face an uphill battle

The opioid epidemic has dramatically increased the number of babies with neonatal abstinence syndrome. The rate in the U.S. has increased 300 percent from 1999 to 2013. [AP Photo/Toby Talbot, File]

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By [K.C. Myers](#)

MASHPEE — Lynette Perdiz-Cash has fostered 20 children since 2000, many of whom were removed from their homes because their parents were using drugs.

She's no scientist, but observation tells her that the trauma the children faced while living with their birth families damaged them as much if not more than any exposure to drugs in the womb.

Studies support what the longtime East Falmouth Elementary School teacher and foster mother has seen.

Researchers have found some evidence that babies exposed to opioids in the womb suffer higher rates of attention deficit hyperactivity disorder, as well as learning disabilities and smaller head circumference.

But research on trauma in early childhood is much more definitive: Children who grow up in homes where the caregivers abuse drugs or have mental illness suffer one of the most common forms of traumatic stress. And they are at a heightened risk for school failure, dropping out, criminal activity, dangerous sexual behaviors and addiction, said Joseph Spinazzola, executive director of the Trauma Center and vice president of Behavioral Health and Trauma Services at the Justice Resource Institute, a statewide nonprofit organization.

“It perpetuates intergenerational cycles of adversity,” Spinazzola said.

LIFELONG IMPAIRMENTS

The opioid epidemic has dramatically increased the number of babies with neonatal abstinence syndrome. NAS newborns are exposed to opioids in utero and at birth go through shakes, gastric distress and other withdrawal symptoms, which adult opioid users describe as the worst flu imaginable.

The national rate of neonatal abstinence syndrome increased 300 percent from 1999 to 2013, according to the U.S. Centers for Disease Control and Prevention.

As they did in the wake of the crack cocaine epidemic of the 1980s, researchers are tracking what will happen to this bubble of children exposed to opioids such as methadone, heroin, morphine and oxycodone in utero.

Thirty years after the crack cocaine scourge, it’s clear that “crack babies” were not as badly affected as those exposed to alcohol, said Dr. Leslie Rubin, director of developmental pediatrics at Emory University School of Medicine and a consultant at Berkshire Meadows, in

Massachusetts, which treats residents with severe intellectual disabilities and medical problems.

Alcohol proves to be most damaging to the fetus. A study in 2003 by Dr. Claudia Chiriboga, a neurologist at Columbia University, concluded that exposure to cocaine and opioids can be outgrown.

“The most adverse effects of prenatal drug exposure are self-limited, with catch-up growth and resolution of withdrawal and of prior neurobehavioral abnormalities noted over time,” Chiriboga wrote. “The exception is alcohol, which is linked to lifelong impairments (i.e., mental retardation and microcephaly).”

This all depends on the amount of the substance and the time during fetal development in which the baby is exposed, Rubin said.

These findings are also limited by the technology to examine brain disorders, he said.

“Do opiates per se cause brain damage?” Rubin said. “We’re still learning exactly what they do. But we do believe they cause some damage to the brain. It depends on the amount, the timing and the type.

“If you don’t see anything immediately, you can see ADHD and learning disabilities later on,” he added. “We do see that.”

But the homes these children are raised in also have a direct effect on the child.

“We know kids who have stressful upbringings are more likely to get involved in drugs and alcohol,” Rubin said. “It is indeed a cycle.”

BREAKING THE CYCLE

An often-cited study compared the development of opioid-exposed newborns who stayed with their drug-using parent with those who were taken out of those homes.

The study found that opioid-exposed newborns had higher rates of hyperactivity, inattention and behavioral problems, according to the 1996 study by Asher Ornoy of the Institute for Medical Research Israel-Canada.

But, Ornoy concluded, it mattered greatly if the child lived with drug-addicted parents. Developmental delay and behavioral disorders observed among children born to drug-dependent parents raised at home “may primarily result from severe environmental deprivation and the fact that one or both parents are addicted,” the study concluded. “The specific role of the in-utero heroin exposure in the determination of the developmental outcome of these children (if they do not have significant neurological damage), seems to be less important in comparison to the home environment.”

Perdiz-Cash could say, I told you so.

All but three of her foster children eventually went back to their birth families, she said. Frequently, they repeated their parents’ mistakes; some have had children who also went into the foster system, she said.

“It takes a lot to break the cycle,” she said.

Of the 278 children in placements by the Department of Children and Families on the Cape last year, 50 percent were returned to their homes, by far the most common outcome, according to the department’s quarterly profile. Other placements included adoption, care of a relative or guardianship.

FAMILY SOLUTIONS

The situation is sad but not hopeless, Spinazzola said.

Families can be healed through programs available at the Justice Resource Institute, which has a Hyannis office, and other human service organizations. The best programs focus on the entire family, he said.

Since these problems are often generational, a child's behavior problems may be a symptom of untreated trauma in the parents, he said.

Therapeutic foster care is an option offered through the institute and other organizations. Taking a child out of a dysfunctional household allows the parents who are struggling to focus on themselves, Spinazzola said.

Parents can reunite with their children once they get therapy, he said.

"We see it as a family solution for not just the child but the whole family," he added.

Therapeutic foster parents need 30 hours of training and plenty of follow-up, said Robert Costa, director of the institute's Comprehensive Foster Care program.

Currently the demand greatly outweighs the supply of therapeutic foster homes.

There are only three on Cape Cod, he said.

"We could use a few more."

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