SUBSTANCE ABUSE AND COMPROMISE OF FATHERING

A new report from the UK’s Health Development Agency on the health of boys and young men says that lack of awareness of their needs amounts almost to ‘gender blindness’ (Trevett 2002). Men are clearly coming in from the cold in public health.

McMahon & Rounsaville’s (2002) prescriptions for future research and action in this area are sensible, but there is always a wider matrix of issues which support the emergence of such claims. Their concerns about fathering are part of recent concern about ‘the trouble with boys’, a debate which informs educational discussions as well. There are echoes of the late nineteenth-century fear of ‘the hooligan’: that threatening working-class male so disruptive to regular society (Pearson 1983).

The gender gaze of public health interventions has been variable. Traditionally, however, it was women who were seen as responsible for the ‘health of the nation’. In the early 1900s the ‘social hygiene’ focus of public health and concern about national deterioration were embodied in the issue of maternal and child welfare (Lewis 1980; Marks 1996). Women as mothers were the guardians of the ‘future of the race’. It was their consumption of alcohol which was the problem. The inheritance of acquired characteristics was the scientific orthodoxy; the mother was the route to ruin.

Motherhood and its role remained the dominant orthodoxy, even as the nature of public health itself changed. In the 1950s, the UK Government was reluctant to take action on smoking after the initial scientific results. There were many reasons; but one was that smoking was a male habit, not a female one. Most public health campaigns, commented an official, were directed at women and children, not at men. That men, not women, smoked was a reason not to take action (Berridge 2001). In the language of epidemiology, the new scientific discourse of chronic disease, women were a ‘risk group’ but men were not. Saatchi and Saatchi’s ground-breaking advertisements for the British Health Education Council in the early 1970s pictured a smoking pregnant woman—naked, of course, to add to the impact. This gender tunnel vision extended into the era of AIDS. Many research hours were expended on prostitutes as ‘vectors of infection’—many fewer on the men who had infected them.

So the move to bring fathers in could be good; but there is a cautionary historical tale. Over the last 30 or so years fathers have come in spectacularly from the cold in preparation for childbirth and in involvement at the birth. A recent study of the literature on child-birth since the 1940s showed some interesting, but rather disturbing, tendencies. By the 1990s, it was the father’s needs and his bonding with the child which were paramount. The mother, prostrate after the birth, was sidelined (Zaccui 2001). Men’s role in substance abuse should be recognized, whether as risk group, fathers or vectors. But let us not write women out of the picture.

VIRGINIA BERRIDGE
Department of Public Health and Policy
London School of Hygiene and Tropical Medicine
Keppel Street
London WC1E 7HT
UK
E-mail: virginia.berridge@lshtm.ac.uk

References
Zaccui,J. (2001) How and why attitudes and practice changed towards the presence of fathers in the labour room in the later part of the 20th century. MSc Project. London School of Hygiene and Tropical Medicine.
SUBSTANCE-ABUSING FATHERS: DESCRIPTIVE, PROCESS AND METHODOLOGICAL PERSPECTIVES

Variations in fathering is now recognized as a given in this area of inquiry. This invitation by McMahon & Rounsaville (2002) to consider substance abuse is a welcome addition to the roster of factors that influence fathering. Just as research on typical fathers has undergone a series of intellectual stages, so will research in this area as well.

The need for better descriptive evidence

As these authors note correctly, the need for comprehensive descriptive data should clearly be at the top of the agenda. We need to know much more about the scope of the problem—what are the demographic correlates associated with substance abuse in terms of age, education, employment history and marital/relationship patterns and what kinds of substance abuse in terms of type, duration and treatability need to be specified? Not only is the quality of the relationship important, but the nature of the mother’s substance abuse history of usage is important to know as well. To what extent do substance abusers tend to partner with other abusers?

At this early stage, attention to the contextual factors that support or hinder father involvement is critical. Perhaps most central are the nature of the living arrangements and the quality of the father’s relationship with the child’s mother. Even in intact families, maternal gatekeeping is a significant factor in understanding father involvement (Bietel & Parke 1998; Allen & Hawkins 1999). In non-residential arrangements, gatekeeping not only by the mother but by the extended family is likely to play an even more central role in regulating the degree of access that fathers have to their offspring.

The need for a family systems perspective

A major advance in our understanding of fathering is the need to locate fathers as part of a family system (Parke & Buriel 1998). While it is useful to examine the direct effects of father involvement on children and fathers themselves, it is critical that we recognize that father effects are often indirect as well. In this case, father’s substance abuse may alter the mother–father relationship that, in turn, changes the mother’s enactment of her parental role. Mechanisms such as lack of partner social support, increased maternal depression, loss of income due to father abuse may contribute to diminished parenting competence by mothers. In this case, fathers are indirectly rather than directly altering the parenting context.

Beyond description: the need for process-based research

As research on fathering has matured, questions about process have assumed a more central role. Among non-substance-abusing fathers, research has suggested that fathers play a central role in the development of emotional regulation in their children (Parke 2002). However, this central process is important not only for understanding how well children learn this critical cluster of skills, but emotional regulation abilities of fathers themselves may be an important process to examine to better understand impediments to more adequate parenting among substance-abusing fathers.

Fathering as a protective factor

Another aspect of this issue that needs attention is the impact of becoming a father on men’s own development. As several writers (Snarey 1993; Palkovitz 2002) have argued, fathering is a socially generative experience that has the potential to transform individuals and increase their sense of responsibility. Examination of the protective role that fathering may play in the regulation of substance abusing patterns would be worthwhile in light of the evidence that recidivism rates are lower among parents than non-parents (Parke & Clarke-Stewart 2002).

The packaged variable problem

Perhaps the major obstacle to disentangling the effects of substance abuse is that it is associated with a cluster of other problems such as unemployment, low education, other psychological problems and, in some cases, incarceration. Great care needs to be taken not to attribute the problems of fathering to substance abuse per se rather than to the collection of associated problems.

Multiple methods, multiple reporters

To make progress on this issue multiple methods are necessary. Qualitative approaches such as focus groups are an important first step in order to gain understanding of father’s own thoughts, feelings and perspectives on the issues. This step will help ensure that the problem is framed in ways that are, indeed, relevant to the core issues of concern to substance abusing fathers (Parke 2002). Ethnographic studies (Sullivan 1993) are another useful approach that have been used successfully with young unwed fathers. To complement these qualitative strategies a variety of quantitative approaches are useful, including national surveys to help document the scope of the problem. Observational studies of father–child and father–partner interactions are needed to help discover the processes that characterize these dyads (Parke 2000).
Moreover, multiple perspectives are needed, especially maternal and extended family members attitudes toward substance-abusing fathers. The perspectives of social service providers also need to be better understood because these individuals often influence maternal attitudes about the appropriateness of father involvement. Only by casting a wide methodological net will we be able to make progress in understanding the benefits and barriers to involvement of substance-abusing fathers.

In closing, it is clear that this call for more recognition of the role of substance-abusing fathers in families is important and overdue. By focusing on this neglected group of fathers we will not only understand better the causes and consequences of fathering behaviors in this population but will increase our appreciation of the diverse array of factors that alter fathering behavior in non-substance-abusing groups as well. Children, partners and men themselves will benefit by this increased knowledge by directing us to better policies and treatments.

ROSS D. PARKE
Department of Psychology
University of California at Riverside
Riverside, CA 92521
USA
E-mail: parke@citrus.ucr.edu

References


FINDING POPPA IN SUBSTANCE ABUSE RESEARCH

As I was reading ‘Substance abuse and fathering: adding poppa to the research agenda’ (McMahon & Rounsaville 2002), I thought about just writing a commentary with the words ‘Right On!’ copied enough times to satisfy the word limits of this task. Although I decided against this strategy, the sentiments are the same.

The authors have identified an extremely important issue in empirical and clinical work in the substance abuse area. As they argue correctly, substance abuse research and clinical work with men has all but ignored the parenting status of these men. Ironically, when research on substance-abusing parents is reviewed (especially alcohol abuse), then it is mothers who are often ignored (Phares 1996). Specifically, the large majority of empirical studies on parents who abuse substances focus on the children of fathers who abuse substances. Thus, the focus of the research appears to be somewhat biased in favor of which research strategy is used (i.e. research on substance-abusing adults ignores fathers and research on substance-abusing parents ignores mothers). In research on parents with almost any other type of psychopathology (e.g. major depression, anxiety disorders, schizophrenia), fathers tend to be ignored and mothers tend to be over-represented (Phares 1997).

McMahon & Rounsaville point out the need to focus on the parental status of both mothers and fathers. In addition, it would be wise for researchers to consider that patterns of assortative mating often put children at risk for having multiple parents and/or caretaking adults (e.g. step-parents, the parent’s boyfriend or girlfriend) who abuse substances (Jacob & Bremer 1986; Leonard et al. 2000). In order to take assortative mating into account, researchers must clarify the functioning of both biological parents (as well as other parental figures). This issue points to the need for research that is sensitive to the context of family systems (even if the individuals within the system do not define themselves as a family).

Another contextual issue related to family systems is the possible reciprocal nature of parent–child relationships. Whether it is the mother or the father who is abusing substances, it may be that parental substance abuse behavior is at least somewhat influenced by children’s behavior. In samples of parents without substance abuse problems, fathers drank more alcohol after interacting with a difficult child if they thought they would interact with the child again soon (Lang et al. 1989; Pelham &
Lang 1999). Of course, this research in no way implies that children ‘cause’ substance abuse problems in their parents. It does, however, suggest that fathers (and perhaps mothers) may ingest substances differently in the context of children with challenging behavior. Given that children of substance abusing parents are at risk for increased levels of emotional/behavioral problems (Leonard et al. 2000), it is not unreasonable to assume that substance-abusing parents are faced with challenging behavior from their children on a relatively frequent basis. These research findings highlight the importance of context and family systems in substance abuse research.

One other layer of context within family systems that is relevant when discussing substance abusing parents is to consider that many grandmothers and grandfathers are the primary parental figures of children whose biological parents have severe substance abuse problems (Hayslip & Goldberg-Glen 2000). Thus, even when parental status is ascertained in research on substance abuse, it may be that other more well-functioning adults (such as grandmothers and grandfathers) are the ones who are actually raising the children. This factor could, in turn, influence the relationship between the non-custodial substance abusing parent and the caretaking grandparents.

As a researcher interested in the wellbeing of children, I am encouraged that McMahon & Rounsaville have highlighted the need to ascertain parental status in substance abusing men. I would argue that any clinician or researcher working with adults with psychopathology should ascertain parenting status and then consider referring children to preventive intervention programs or treatment programs when appropriate. By including fathers and mothers in the research and clinical agenda, we can move in the direction of what is really important—preventing substance abuse and other types of developmental psychopathology in the first place.

VICKY PHARES
University of South Florida
Department of Psychology
4202 E. Fowler Avenue
PCD 4118G
Tampa, FL 33620
USA
E-mail: phares@luna.cas.usf.edu

References

SUBSTANCE ABUSE AND FATHERING: SOME FINAL COMMENTS ON CONTEXT AND PROCESS

In ‘Substance abuse and fathering: adding poppa to the research agenda’ (McMahon & Rounsaville 2002), we call for the substance abuse research community to more readily acknowledge the parenting status of substance-abusing men, and we identify six issues involving substance-abusing fathers we would like to see explored across cultures. We thank the Editor for the opportunity to present our thoughts about this issue in Addiction, and we appreciate the encouragement offered by Berridge (2002), Parke (2002) and Phares (2002). They offer a number of helpful suggestions for researchers interested in pursuing this issue, and we would like to close this discussion by emphasizing some of the points they have made about the importance of both context and process.

In her comments, Berridge (2002) reminds us that nothing occurs in a historical vacuum, and she highlights the importance of acknowledging the historical context in which this research will be pursued. Within specific cultures, the history of substance use, public policy and family life will intersect to shape the nature of any research carried out in this area. Although historical analysis may not answer important questions about substance abuse and fathering, it will provide researchers with a better understanding of the context within which they are seeking them. As a place to begin, historical analysis may clarify the origins of conflicting social images of fathers, it may help clarify why the day-to-day behavior of men seems to lag behind social expectations, and it may help clarify why some men, more so than others, have been labelled incompetent fathers. It may...
also highlight historical bias in thinking about issues like this one, and it may identify perceptions, policies and practices that need to be corrected as data begin to emerge.

When exploring the context in which this research will occur, it will, as always, also be important for researchers to acknowledge that there is an existing database upon which to build. In their comments, Parke (2002) and Phares (2002) emphasize the importance of building upon the existing literature on fathering and that on risk for intergenerational transmission of substance abuse. Phares also mentions briefly the existing literatures on maternal psychopathology; in North America, scholars have already honored Berridge’s (2002) request, as there is a rapidly expanding literature on the parenting of drug-abusing women. Clearly, the results of this and other research are relevant, and they offer scholars an invaluable place to begin exploring the lives of substance-abusing men as parents.

In addition to the context in which the research will occur, Parke (2002) and Phares (2002) highlight the need for attention to the context in which both substance abuse and fathering occur. Regardless of the culture, fathering always occurs in the context of a family unit that is embedded in a broader social system, and there is agreement that it is not possible to consider paternal involvement without considering the potential influence of a broad array of social, economic and familial factors. Both Parke and Phares suggest that, consistent with the results of research being carried with other populations of fathers, familial influences will prove to be very important. Moreover, across cultures, chronic substance abuse almost always occurs in the context of other threats to the well-being of both parents and children. As Parke notes, chronic substance abuse may prove to be a proxy for these other threats and, although the substance abuse may have very specific direct effects, it may also influence fathering more broadly and more indirectly through its impact on other factors, such as the economic status of the family and the stability of coparenting relationships.

As much as it will be important to acknowledge the context, Parke (2002) also highlights the need for attention to process. Clearly, paternal substance abuse represents a threat to the integrity of family systems and the well-being of fathers, mothers and children. However, in the context of this threat, it is less clear who gets affected, how and why. More specifically, there is a need for information about the ways in which substance abuse contributes to compromise of fathering over time and directly and indirectly affects the well-being of fathers, mothers and children. There is also a need to know more about protective mechanisms. When thinking about process, researchers must, as Phares (2002) argues, also acknowledge the reciprocal nature of parent–child relationships. Just as substance use may affect the parenting of men, parenting responsibilities, quality of parent–child relationships and the well-being of children may affect substance use by men.

Parke (2002) also comments on the research process, arguing for the integration of qualitative and quantitative approaches and the importance of multiple perspectives. The existing literature on the parenting of drug-abusing women illustrates nicely how qualitative and quantitative approaches can contribute to a more comprehensive understanding of substance abuse and parenting. Consistent with this position, our preliminary work with fathers enrolled in methadone maintenance treatment has confirmed for us the importance of both approaches, and other researchers (e.g. Eiden, Edwards & Leonard 2002) have already documented the potential utility of observational methods. When commenting on the research process, Parke also mentions the importance of multiple perspectives. Casting the widest net possible will undoubtedly yield the best information, as long as researchers do not discount the perspective of fathers because of assumptions that they are not interested, not available or not likely to provide accurate accounting.

From our perspective, greater understanding of fathering in the context of chronic substance abuse must, first and foremost, be built on the perspective of fathers.

In addition to addressing the importance of historical context, Berridge (2002) also highlights the importance of the political context, and her comments emphasize the fact that no call for greater sensitivity to fathering can be issued without consideration of social values, family life and the politics of gender. As might be expected, this scholarship is provoking questions about social values in the social sciences, and there is already debate about the distortion of research results to further political agendas, particularly those agendas involving issues of gender. However, although scholars may be cautious about forging alliances across genders to explore social issues from the perspectives of both men and women, there appears to be an emerging consensus that new perspectives on the gendered nature of human behavior will ultimately benefit both men and women.

In keeping with this position, it is important to acknowledge that questions about fathering are emerging in the context of concern about the well-being of men, women and children. Concern about the family life of men within both modern and developing nations is, in most instances, being driven by interest in redefining roles for men, promoting social equality for women and supporting normative child development. Within the literature on parenting, psychopathology and substance abuse, there are, as Phares (2002) notes, gaps and biases when the literature is examined from the perspectives of
both mothers and fathers. However, fathers, mothers and, most importantly, children all stand to benefit from an examination of this issue, and a call for greater attention to fathering does not mean that mothering is being forgotten. Moreover, the study of substance abuse and fathering must begin with acknowledgement of the gains researchers have made in the study of female gender and substance abuse; it must be pursued in an egalitarian manner, and, as Phares suggests, there must be efforts to promote the comprehensive study of parenting by both substance-abusing men and women.

Together, Berridge (2002), Parke (2002) and Phares (2002) offer a number of useful observations for researchers interested in accepting our invitation to consider more seriously the parenting of substance-abusing men. Clearly, the historical context will prove to be important, the political context cannot be ignored and the nature of the research will vary across cultures. Existing literatures, particularly those on fathering under other circumstances and on the transmission of substance abuse across generations, will provide a scientific context. Moreover, researchers cannot begin this work without acknowledging that the substance abuse and fathering they will be studying will be determined by a broad array of social, economic and familial influences. As attention to this issue expands, it will also be important for researchers to clarify mechanisms of influence over time using information collected from multiple informants within a number of different research designs.

Finally, after considering these commentaries, we can only again conclude that substance-abusing men, their children and the mothers of their children can no longer afford to have fathering left off the research agenda. Across cultures, there needs to be better understanding of fathering as it occurs in the context of chronic substance abuse, and it is time to get the process underway.

Acknowledgements

Support for the preparation of this response was provided by the National Institute on Drug Abuse (grants P50 DA09241 and K05 DA00089).

THOMAS J. McMAHON & BRUCE J. ROUNSAVILLE
Yale University School of Medicine
Department of Psychiatry
Division of Substance Abuse
New Haven, CT
USA
E-mail: thomas.mcmahon@yale.edu

References