

# **The Effects of Children on the Process of Recovery in Oxford Houses**

**Ray Legler<sup>1</sup>, Danielle Chiamonte, Meaghan Patterson, Ashley Allis, Hilary Runion  
and Leonard Jason**

## **Abstract**

The effects of children on the process of substance use recovery for adults living in Oxford Houses is explored in two qualitative studies. Oxford Houses are self-run, community-based residential homes for small groups of adults who live together and support each other's efforts to recover from drug and/or alcohol addiction. In the first study, telephone interviews were conducted with 29 adults who were living in Oxford Houses that allowed children to live in the house with their parent. Results suggest that having children in the house supported a positive living environment for the recovery of house members. In the second study, telephone interviews were conducted with an additional 15 mothers who lived in Oxford Houses. These interviews focused on the effects of the mothers' addiction and recovery on their relationships with their children. This study found that most parents acknowledged the negative effects of their addiction on their relationship with their child and the effects of their recovery on improving those relationships.

**Keywords:** Oxford House; Children, Recovery, Mothers

## **1 Introduction**

It is a widely known fact that substance abuse is a problem in the United States. Substance abuse not only causes serious health, legal, and financial issues but can also have a major impact on familial relationships. Furthermore, there are issues that can arise within a parent child relationship due to parental substance abuse. National surveys and drug prevention organizations have found that more than six million minor children lived with substance abusing parents and in addition, around five million alcohol abusing adults had at least one minor child living in their home during their time of use [1-2]. These statistics,

---

<sup>1</sup>DePaul University, Center for Community Research, Chicago, USA

along with other studies, reiterate that parental substance abuse is serious concern. It is important to explore the role of children in the recovery process by examining the effect of the presence of children in recovery homes that are designed to support recovery from substance abuse, and by exploring the impact of addiction and recovery on the mother-child relationship.

The deteriorating effects due to parental substance abuse that can be seen in various aspects of parental responsibilities, such as parenting skills and child rearing practices, are not widely appreciated [3]. In addition to affecting parental responsibilities, findings show that there are numerous risks for children such as negative developmental outcomes, issues with attachment, abnormal family dynamics, and child maltreatment [4-5]. The abuse of substances by parents can have a direct impact on their child's lifestyle [6]. Previous research has targeted four main areas of a child's lifestyle impacted by their substance-abusing parent. These areas include negative behavior outcomes, lack of material needs, loss of stability, and lack of emotional availability [6-7].

In regard to children's behavioral outcomes, children's lives are dominated by their addicted parent's needs - often resulting in children assuming mature roles [8] [4]. Moreover, studies on material needs have shown that a child's basic necessities such as food and shelter may not be a priority for a parent suffering with an addiction and can lead to unstable living conditions, loss of confidence and self-esteem, and less parental attention [3] [9]. Previous research has found that a parent's drug dependence inhibited his or her ability to provide adequate emotional attention to their child, resulting in children that could not confide to their parents [6] [4]. Furthermore, feelings of shame, fear, and secrecy were reported in children with drug abusing parents [10] [11]. It is important to explore these parent/child relationships in the context of community-based recovery homes.

Parents going through recovery may choose to exclude their children from the recovery process in fear of the negative consequences on the child, while other parents may decide to include their children in the recovery process to heal together. Oxford Houses are recovery homes that offer a unique experience for parents going through the recovery process. Specially designated Oxford Houses throughout the United States and other countries allow parents and their children to go through the recovery process together. It is important to understand the effects of children on the Oxford House members living together, and then examine the effect of substance abuse and recovery on the relationship between parent and child.

Oxford Houses are democratically run, self-supported housing for individuals recovering from substance abuse addictions. Sober living houses like Oxford Houses offer many benefits to the individual. Self-governed and managed houses like Oxford Houses cost little to run. The residents are required to pay for their portion of the rent, utilities, and living necessities like food. Most Oxford Houses do not have outside financial assistance. If they do, it is through the fundraising efforts of individual houses. Residents in recovery who are living in these self-governed and self-managed settings may develop strong bonds with the other residents who are going through a similar recovery process as them. Receiving sober support and guidance from residents in similar situations may reduce the probability of relapse [12].

The houses are designated as men's, women's, men with children or women with children. The houses that allow children to live with them have certain age cut-off for the children to be living with their parents. These age cut-offs are different from chapter to chapter. Residents living within Oxford House have three simple rules they must abide

by, including paying rent and contributing to the maintenance of the house, abstinence from using alcohol and other drugs, and avoidance of disruptive behavior. If a resident breaks any of these rules, s/he may be evicted from the Oxford Houses. Each house may come up with their own set of separate rules regarding house curfew, chores, noise levels, overnight guests and other issues. A unique trait of Oxford House is that residents can stay in Oxford House as long as they wish if they follow the three simple nationwide rules [13]. Currently there are over 1,500 Oxford House establishments in operation. At the time of our study, there were 98 designated parent and child homes, 14 men/children, and 84 women/children homes throughout the United States.

One early study of Oxford Houses compared men and women with and without children and found that women without children reported that they were least likely to share in the communal living processes [14]. A study conducted by Reference [5] investigated the social networks of parents that are enrolled in substance abuse programs and their self-reported social networks. Some of the factors they looked at were the number of children that were reported in the social networks by mothers, the kinds of support given to the mothers by the children, and the possible differences of perceived support among parents and children. Most participants in the study reported children as being a part of their social network. Children were seen as giving as much social support as adults did in the women social network. Although the type of support varied, the results showed that the children did affect the women's social networks during treatment.

Research that has examined the role of children in the Oxford Houses has found encouraging results. A study of men in Oxford Houses found that only children had a positive effect on helping Oxford House residents with their substance use. However, parents, significant others, children, friends, and co-workers all had a positive effect on helping substance abusers' recovery [15]. In another study, researchers wanted to understand how living in the Oxford House and participating in Narcotics Anonymous affected whom African Americans counted on for support in their recovery. That study found that, among family members, children or parents were the biggest help for staying sober [16].

Reference [17] investigated the ways which women with children living in Oxford Houses might affect the household. The researchers found that there was a high sense of community among residents living with children and that living with children generally had a positive effect on the household and their own recovery process. Residents of the Oxford House reported that they were getting along with the children in the home, that mothers could count on babysitting help, and that the children had a positive effect on the household and their own recovery process. This effect did not differ between mothers and non-mothers, suggesting that non-mothers might view the children in the home with a sense of responsibility and sensitivity comparable to that of the mothers [17]. More recent research has found that men living with children report better outcomes than men and women living without children such that they have more abstinent social support and have fewer users in their social networks [18].

The two studies described here build on this research by examining further the role of children in the process of recovery. The first study involved the use of telephone interviews to explore more broadly the effect of the presence of children in an Oxford House on both parents and non-parents, as well as the over-all environment of the house. The second study also collected interview data via telephone interviews to look specifically at the effects of addiction and recovery on the relationships between mothers and their children.

## 2 Study 1

### 2.1 Method

**Participants:** The participants in the study were current Oxford House residents living within designated children's houses. Phone numbers were obtained from the Oxford House main webpage (Oxfordhouse.org). Participants were selected based on their availability and willingness to participate in the research and were asked several questions during a telephone interview. A total of 22 women and seven men were interviewed for a total of  $N = 29$  residents living in Oxford Houses designated for children. Most of the interviewees (24 of 29, 83%) had at least one child. Some of the participants (5; 17%) were living in houses designated for children, but did not have children of their own. On average, residents had lived in their Oxford House for about 10 months.

Most respondents (65%) had heard about Oxford House from a detoxification or treatment facility. Another 17% were criminal justice referrals, 10% were referred by an Oxford House resident or former resident and 3% were referred by someone in a self-help meeting. Parents interviewed had an average of two children; 79% of the sample had two or fewer children. Children of participants in the study were, on average, about 13 years old.

**Procedure:** The interview questions consisted of 14 questions total; 7 demographic and/or informative questions pertaining to the resident specifically. The final 7 questions pertained to inquiries about the resident's thoughts, opinions and feelings towards a parent designated Oxford House and children being a part of the recovery process. Following the completion of the telephone interviews, the recorded telephone conversations were transcribed.

The research team then collaborated to form a coding scheme. A codebook was created and independent coding was performed by the team members. All responses were coded by at least two people. The research team members then reviewed the coding to determine inter-rater reliability, and establish main finding and themes. Inter-rater reliability was calculated by dividing the number of coding agreements between research team members by the total number of possible agreements (agreements + disagreements) [19]. Codes were refined and data recoded until all coding reached at least 70% inter-rater reliability.

### 2.2 Results

**Living with children and recovery from substance abuse:** Participants were asked how they felt about children living in their Oxford House. All but one respondent (97%) responded positively. Participants also were asked how living in an Oxford House with children affected their recovery. The vast majority (83%) reported that children living in their house had a positive effect on their recovery, while a few (4, 14%) reported mixed feelings about the effect of children on their recovery. No one said it had a negative effect. When asked if they thought the children benefitted from living with their parents in the house, almost all respondents (97%) reported that they thought it was beneficial for the children. Substantive themes that emerged across the responses included the idea that the presence of children provided motivation to stay clean/sober (11; 38%), and that being around the children had led to personal growth (7; 24%).

Some of the comments from participants regarding the effects of children on their recovery included:

Honestly...it opened my eyes [laughs]...it did it opened my eyes a lot...I have learned a lot from the women here that you know...and the children...like the yesterday I had a little girl who lives here... she's 4 years old walk up to me...and she said...You're kids got taken away from you...and I said yea my kids got taken away from me...and she said it's ok you're going to get your kids back...a 4 year old! [laughs] It's just like...how could I have ever hurt my kids...and being around these kids every single day...it just...it strengthens me as a mother I think.

For me, myself, there's one individual child here that I'm really close to. I, I come home and he, he's happy to see me. He might, like when we haven't seen each other for a couple days, he'll like run up and yell my name, be like, just like, this really happy bright smile and it just makes me very happy when he does that and I, I, I just love children.

Oh, it's all to the positive, there's really nothing negative because being a single mom, living on your own you may have a hard time trying to get to meetings you know or something like that you know and doing things you know living here I've always been able to get a little bit of help.

---

(National Institute on Drug Abuse, R01DA019935)

**Living with children and their impact on the household:** Participants were asked "How do you feel children impact the dynamics of your home?" A large majority (76%) of respondents reported that they felt children had positive effects on the dynamics of the house, while a few (14%) felt that the presence of children had mixed effects on the dynamics of the house. More substantive themes that emerged across responses included references to children's involvement in or effect on tasks and behaviors (59%), including things like doing chores with children, conducting business meetings with children, or cleaning up after them. In addition, several respondents (31%) alluded to socio-emotional effects on the dynamics of the house such as the effect of children on the feelings of people in the house, how residents got along with each other, or how the children contributed to a pleasant living environment. Some examples of their responses include:

Well, I think they make everything more surreal. You know what I mean? Uh, it's just more... it's life, like I said, it's life on life's terms and having children there is like a perk, because this is even more than what you would look for just in your own personal recovery.

I can tell you definitely! Because my daughter just came here two years ago, so I was here for a year before she got here... And one of the biggest differences is actually the way we talk! You know we don't curse like we used to before she was here. Umm, there are...you know men are not allowed to be in bedrooms and stuff like that... you know so umm, it definitely changes the dynamic from...between being a regular women's house to being a women's and child house.

### 3 Study 2

This study went beyond examination of the effect of children on all the residents of an Oxford House to look specifically at how addiction and recovery have affected the mother-child relationships of the study participants.

#### 3.1 Method

**Sample:** Similar to the approach of the first study, the Oxford House web site was used to generate a list of houses, and phone calls were placed to Oxford Houses around the United States to identify women who were parents and were willing to discuss their addiction, recovery, the effects of these issues on their relationships with their children. We conducted 15 interviews. All participants were white. Their ages ranged from 29-58, with the average being 37.3. The respondents reported that they began using drugs or alcohol, on average, at age 17, so the average number of years of use was about 20. Six participants reported that there was one drug that they used primarily (3; 20% said methamphetamine, 2; 13% said “crack”, one reported using pain pills). The majority of respondents (8; 53%) reported problems with multiple substances including marijuana, alcohol, and cocaine. Almost all of the respondents (14/15; 93%) reported that they had tried to stop using drugs or alcohol at least once before entering the Oxford House. The women had, on average, 1.64 children. About half (7/15; 47%) reported that their children lived with them at the time of the interview.

**Procedure:** We asked participants several questions related to demographics, and then asked nine questions about their child (if they had more than one, they were asked to respond regarding their oldest) and the effect of their addiction on their relationship with their child. As discussed in Study I, the telephone interviews were recorded and then transcribed. Analysis involved initial reviews of the data and the identification of themes within the answers to each question across participants. Codes were generated based on these themes, and all of the data were then coded. Three researchers coded the data, and inter-rater reliability was at least .80 for all questions.

#### 3.2 Results

The first question after the demographics asked about the extent to which their child's needs were met during the time they were addicted to alcohol or drugs. Most respondents (13/15; 87%) said there were at least some needs that were not met at some time. One third of the respondents said that at least some of the time, other people (e.g., family, friends) were involved in helping meet their child's needs. In particular, parents mentioned that needs like food (6/15; 40%) and shelter (4/15 = 27%) were usually met but that other needs such as emotional needs/love/attention (7/15; 47%) and maternal care (5/15; 33%) sometimes were not met. We asked also about whether or not the child had to take on parenting responsibilities during the parent's substance use. Twenty-seven percent (4/15) said yes, child did take on a parenting role at least some of the time and 40% (6/15) referred specifically to children assuming parenting responsibilities for siblings at least some of the time. One-third (5/15) said no, children did not take on parenting responsibilities during the parent's substance use. The following quotes illustrate some of the findings related to children's needs and roles:

I fed her and kept her in daycare when I went to work and I held a job. I don't think they were met like they should have been, I mean she was fed but I don't know if I was really giving her the love and attention that she really needed...

Oh yeah, in fact you know he still has that role in some aspects. However now that I'm in recovery um, it is different, he is able to not have to care...for his younger siblings as much. Now he has a bigger brother role instead of a parent. Yea definitely he would make sure that you know, his younger siblings had breakfast and get them off to school that kind of stuff.

Next we asked some questions about their relationship with their child during their recovery. When asked about how they thought Oxford House had helped them meet their child's needs, 47% (7/15) said that being in recovery helped make them more available to their child. In particular, respondent mentioned several things that helped them form the relationships they had with their children at the time of the interview including staying clean/sober (8/15; 53%), twelve-step (AA)/recovery efforts (4/15; 27%), and open communication/honesty (4/15; 27%). When we asked the participants if they thought that there were women in the house whom their child/children would identify as a supportive parental figure, about half (7/15; 47%) said yes. We asked also whether they thought that during their addiction they looked to their son or daughter as a peer for his/her opinion; only one third (5/15; 33%) said yes they saw their child as a peer during their addiction. For example, two women spoke about the effects of their recovery efforts on their relationships with their children:

Well I think that, I think oxford helped, I've got two kids and it's really hard for me to answer it. They are both from the same dad, they both went through the same thing but they both are in two different spots with my recovery and with their life and what they saw and how they feel about me. My son knows that I am clean and oxford has helped me get a little of that relationship back because he knows that I'm doing what I need to do for him, but it's not 100% better. In terms of the younger child its helped immensely.

Well with my son, he knows that I'm in a clean and sober environment and he knows that I'm doing what I need to do, him knowing that has not changed him being upset and feeling like I chose drugs over him and he's definitely has some anger about that and I don't think me being in oxford is really going to change that, it's all about what I do. My daughter on the other hand it's changed everything, she's back, it's just liken nothing ever happened. She loves my house, she loves the girls here, and like I said I've been here ever since I've been clean so she knows that everything that I do and as much as I do for Oxford because I'm a chapter chair and I volunteer a lot that I do it because I want to give back to Oxford because it has given me my children back and my life back and it allows her to know that I'm stable and staying clean...

Finally, we asked two questions regarding the Oxford House they were living in. When asked how they thought the Oxford House was different compared to the household they were living in when they were using, about a quarter (4/15; 27%) said independence/I'm paying my own way, one-fifth (3/15; 20%) mentioned they were now more accountable to others, and one fifth discussed issues of structure, stability, or safety. Our last question inquired about the extent to which the respondents had learned any parenting skills from the other residents. About half of the respondents (7/15; 47%) said that they had learned parenting skills from the other residents.

## 4 Discussion

The two studies presented here explored the effects of and the effects on children of parents' substance abuse and recovery. The first study explored the role of children who lived in an Oxford House with their mothers during the mothers' efforts to recover from drug or alcohol addiction. The results presented above suggest that having children living with one of their parents in an Oxford House can contribute to a positive climate for recovery. Respondents had a positive view of children living in their house and felt that the presence of children had a positive effect on their recovery. Respondents also felt that the children benefitted from being with their parent during the parents' efforts to recover. More substantive analysis of the responses found that respondents felt that the presence of children in the house provided motivation to remain alcohol and drug free, and that the children contributed to the respondents' person growth.

In terms of the effects of the presence of children on the interactions of house members, most respondents felt the children positively affected the interpersonal dynamics of the house. Respondents mentioned the inclusion of children in daily tasks and behaviors when discussing the positive atmosphere of the house. In addition, some respondents felt that the presence of children had socio-emotional effects on the house members and contributed to positive living environment.

Given the challenges faced by those people struggling to recover from addiction, we were curious to see whether the presence of children in a recovery environment would be beneficial or detrimental to the climate of the houses in which they lived. The results presented here suggest that children living in Oxford Houses can contribute to a positive atmosphere for recovery. This is particularly important for the children and their parents, who generally benefit from living together while the child matures. In addition, it suggests that concerns about any negative consequences for other house members, or for the overall recovery environment due to the presence of children, may be unjustified.

The second study examined the effects of addiction and recovery on the parent-child relationship. We found that most respondents reported that their children's needs went unmet at least some of the time while they were using drugs or alcohol. This is consistent with the literature regarding the negative effects of substance use on parenting [3]. Also consistent with previous research was the finding that two-thirds of respondents reported that their children did take on a parenting role at least some of the time [8] [4]. The majority of respondents mentioned recovery or recovery efforts in helping to improve their relationship(s) with their child/children. Interestingly, most respondents did not think that other residents took on the role of parent for their children, and most reported that they did not learn parenting skills from other residents. Finally, only one-third reported looking to a child as a peer while they were using.

Most respondents spoke to the negative effects of their substance use on their relationships with their children, and to the importance of recovery on improving those relationships. About half the women provided reported their children forming child/parent relationship with other house members. As half the women in the house did not have their children living with them, it is possible that the mothers' responses reflected that fact that many did not currently have their children in the Oxford House. About half the parents indicated learning new parenting skills from other parents in the house. Those that did not learn new parenting skills might have felt that they did not need to learn new skills, or parents were busy with their own children and recovery efforts. It is also possible that as

only about half the mothers had children living with them in the houses, they might not have thought this question was relevant to them

This article contributes to our understanding of the role of children in the process of recovery. We observed that, in addition to being a motivating and supportive factor in parents' recovery efforts, children can provide social support for other adults in recovery to whom they are not related. One weakness of these studies is their small sample sizes. Future research efforts designed to further explore the role of children in the recovery process should work to obtain larger sample sizes so that the results are more generalizable. Regardless of this issue, the present research suggests that children can be a powerful part of the effort to support adults' recovery from substance abuse.

## References

- [1] Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2003). National Household Survey on Drug Abuse: Children living with substance-abusing or substance-dependent parents. Washington, DC: SAMHSA.
- [2] Office of Applied Studies. (2004). *Results from the 2003 National Survey on Drug Use and Health: National Findings*. Rockville, MD: Substance Abuse and Mental Health Services Administration (Publication No. SMA 04-3964, NSDUH Series H-25).
- [3] Magura, S., & Laudet, A. (1996). Parental substance abuse and child maltreatment: Review and implications for intervention. *Children and Youth Services Review*, **18**, 193-220.
- [4] Kroll, B. (2004). Living with an elephant: Growing up with parental substance misuse. *Child and Family Social Work*, **9**, 129-140.
- [5] Tracy, E., & Martin, T., (2007). Children's roles in the social networks of women in substance abuse treatment. *Journal of Substance Abuse Treatment*, **32**, 81-88.
- [6] Hogan, D. M. (2007). The impact of opiate dependence on parenting processes, contextual, physiological and psychological factors. *School of Psychology & The Children's Research Centre*, Trinity College, Dublin. 617-635.
- [7] Osborne, C., & Berger, L. M. (2009). Parental substance abuse and child well-being: A consideration of parents' gender and co-residence. *Journal of Family Issues*, **30** (3), 341-370. doi: 10.1177/0192513X08326225.
- [8] Hogan, D.M., Higgins, L., Cleary, A., Phadraig, M N Ghiolla and Quinn, S. (Eds.) (2001). *Children. Understanding children, Vol. 1, Changing Experiences and Family Forms*, pp. 119-143. Dublin: Oaktree Press.
- [9] Cork, M. (1996). *The forgotten Children: A study of Children with Alcoholic Parents*. Toronto: Alcoholism and Drug Research Foundation.
- [10] Hogan, D.M. (1997) *The Social and Psychological Needs of Children of Drug Users: Report on Exploratory Study*. Dublin: The Children's Research Centre.
- [11] Laybourn, A., Brown, J. & Hill, M. (1996). *Hurting on the Inside*. Avebury, UK: Aldershot.
- [12] Jason, L. A., Olson, B. D., & Foli, K. (2008). *Rescued lives: The Oxford House approach to substance abuse*. New York: Routledge.
- [13] Oxford House Inc. (2011). *Oxford House Manual*. Retrieved from <http://oxfordhouse.org>.

- [14] Ferrari, J.R., Jason, L.A., Nelson, R., Curtin-Davis, M., Marsh, P., & Smith, B. (1999). An exploratory analysis of women and men within a self-help, communal-living recovery setting: A new beginning in a new house. *American Journal of Drug and Alcohol Abuse*, **25**, 305-317.
- [15] Kim, K. L., Davis, M. I., Jason, L. A., & Ferrari, J. R. (2006). Structural social support: Impact on adult substance use and recovery attempts. *Journal of Prevention & Intervention in the Community*, **31**, 85-94.
- [16] Flynn, A. M., Alvarez, J., Jason, L. A., Olson, B. D., Ferrari, J. R., & Davis, M. I. (2006). African American Oxford Houses residents: Sources of abstinent social networks. *Journal of Prevention & Intervention in the Community*, *31*, 111-120.
- [17] d'Arlach, L., Olson, B., Jason, L., & Ferrari, J. (2006). Children, women, and substance abuse: A look at recovery in a communal setting. *Journal of Prevention & Intervention in the Community*, **31** (1-2), 121-131.
- [18] Ortiz, E., Alvarez, J., Jason, L.A., Ferrari, J.R., & Groh, D. (2009). Abstinence social support: The impact of children in Oxford House. In L.A. Jason, & J.R. Ferrari (Eds.), *Recovery from addiction in communal living settings: The Oxford House model [Special Issue]*. *Journal of Groups in Addiction & Recovery*, **4**, 71-81.
- [19] Miles, M., & Huberman, M. (1994). *Qualitative Data Analysis*. Thousand Oaks: Sage.