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## **Opinion**

**ELIZABETH BARTHOLET** 

## Parental custody? Not if they're addicts

By Elizabeth Bartholet | APRIL 17, 2014

A RECENT Globe story featured baby Mya, born addicted to heroin and sent home to die at the hands of her drug-addicted parents. <u>Mya's story</u> is sadly common. It is the result of Massachusetts policy favoring family preservation at almost all costs.

Several years ago, a Children's Hospital neonatologist specializing in the care of infants born drug-affected came to me out of concern that she was, as she put it, complicit in the child abuse perpetrated by Massachusetts policy. She said she regularly helped treat these fragile infants for six or more weeks in intensive care, only to hand them over to parents obviously suffering from drug addiction.

My research over three decades confirmed her concern. Drug use during pregnancy puts children at risk for future developmental problems, but the worst harm to the children comes from sending them home. These children require super parenting. They are needy and demanding, and find it hard to form loving bonds with the best of parents. They will likely have a range of special needs requiring special services if they are to have a fair chance at a good future. Sending them home with parents whose first love is their drug is a prescription for disaster. Drug-affected infants suffer high rates of abuse and neglect, which of course exacerbates the prenatal damage. Eventually they are removed at high rates to foster care, but by this time many have suffered irreparable damage.

The federal government is responding to the soaring number of drug-affected babies by now <u>requiring hospitals to report</u> infants affected by illegal drugs or alcohol to child protective agencies, and requiring those agencies to investigate with a view toward developing an appropriate protective plan. In addition, many states have revised their

laws and policies to define prenatal drug use as child maltreatment. Others have created family drug treatment courts designed to induce drug addicted parents who want to keep their children to engage in rehabilitative treatment. But not Massachusetts.

The state remains mired in traditional ways of thinking. Drug-affected infants go home with their drug-addicted parents because the state is committed to keeping children with their parents regardless of whether that serves the child's best interests. We know that sending these infants home with no guarantee that the parents engage in rehabilitative treatment creates an extreme risk of abuse and neglect. We know we could do better — far better — to give these fragile infants the chance to grow up with nurturing parents, parents who will help them recover from the damage suffered during pregnancy. Evidence shows that substance-affected infants placed at or near birth with adoptive parents do extremely well.

Massachusetts should test all children to assess whether there is prenatal drug or alcohol exposure. It should require substance-abusing parents to engage in rehabilitative treatment if they want to keep their children. It should place at-risk children in homes where they can be adopted if the birth parents can not comply with the treatment regimen.

But that would take a decision by Massachusetts officials to change direction, a decision to make children's interests the top priority. Candidates for governor are vying with each other to say how they will improve the Department of Children and Families. I'm waiting to hear one of them talk about a serious change in direction.

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