

The Family and Substance Use Disorders

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UCT – PGDIP in Addictions Care



Contents

- ◊ Why is the family important?

“Addiction is a family disease – one person may use, but the whole family suffers”

- ◊ Evidence-based approaches that empower family members of substance using individuals

In our addiction treatment settings, we often are approached by concerned family members who are impacted by, and worried about, a member with an SUD.

Families can ‘make or break’ addiction treatment/recovery (Faulty ideas, relational dynamics etc).

Types Of Family Structures

A family is a space where different individuals depend on each other thus, making each member the key source of relationship security or stress.



1. Nuclear Family

Consists of husband and wife along with children.



2. Single Parent Family

Consists of a single parent raising one or more children.



3. Extended Family

Consists of two or more people, either related by blood or marriage.



4. Childless Family

Consists of couples who do not have children.



5. Grandparent Family

Consists of grandparents raising children while parents stay busy.



6. Stepfamily

Consists of a new husband or wife and children from their previous relationships.

Why is the family important in the field of SUD treatment and recovery?

The family context holds very important information regarding the individual member's SUD (Lander, 2013)

- ◇ Aetiology (Development of the SUD)
- ◇ How the SUD is maintained (relational patterns)
- ◇ The family's influence on treatment (Positive or negative)



Family

- ❖ Individuals are embedded within a family. The family is the main source of attachment that socializes an individual into the workings of their current society
- ❖ Genetic, environmental and relational factors play a role in the development SUDs within the family
- ❖ Attitudes and beliefs about substances, treatment, and SUDs impact treatment outcomes:
(E.g. “Drug use is illegal – family member should be arrested!”; “It has been a long time now, you can have a drink. But only with me”)
- ❖ Family members also require support to facilitate recovery

Approaches to empowering families facing SUDs

- ◇ **CRAFT** – Community reinforcement and Family Training (Smith & Meyers, 2023)
- ◇ **Al-Anon/Nar-Anon** – Fellowship for family members of individuals struggling with addiction
- ◇ **ARISE** – Relational intervention Sequence for Engagement (Garrett et al., 1998)

CRAFT – Community Reinforcement And Family Training



- ◇ Designed for family and friends who would like to improve their relationship with the individual diagnosed with the SUD
- ◇ “Concerned significant others”
- ◇ The intervention encourages reduction or stopping substance use

Community reinforcement and Family Training – GOALS:



- 1) Promote continued abstinence.
- 2) Reduce the risk of family violence.
- 3) Minimize distress and increase positive lifestyles for all family members.
- 4) Prepare the CSO to support the substance abuser during his/her treatment.
- 5) Prepare the CSO to suggest re-engagement in treatment if relapse occurs.

CRAFT - Fundamental assumptions:

- ❖ Concerned family members can be a positive agent for change within the family: “A change in one part of the system can change other parts of the system”
- ❖ In the CRAFT intervention - Family members actively participate to develop skills to positively influence their family member's SUD
- ❖ The practitioner meets the family member where they are at. Working at the pace of the family member.

The CRAFT Treatment Manual for Substance Use Problems

WORKING WITH FAMILY
MEMBERS

Jane Ellen Smith | Robert J. Meyers

Foreword by William R. Miller

CRAFT - Strategies:

- ◆ Take domestic violence precautions (E.g. Empowered by protection orders).
- ◆ Develop an understanding of what leads to substance abuse episodes
(functional analysis): next slide
- ◆ Learn behavioural skills including communication skills.
- ◆ Use positive reinforcement for nondrinking/using behaviour.

Triggers

External	Internal	Behaviour	Short-Term Positive Consequences	Long-Term Negative Consequences
1. <u>Whom</u> are you usually with when you use?	1. What are you usually <u>thinking</u> about right before you use?	1. What do you usually use?	1. What do you like about using with _____? (whom)	1. What are the negative results of _____? (behaviour/activity) Regarding each of these areas:
2. Where do you usually use?	2. What are you usually <u>feeling</u> physically right before you use?	2. How much do you usually use?	2. What do you like about using _____? (where)	a. Family members b. Friends c. Physical feelings
3. <u>When</u> do you usually use?	3. What are you usually <u>feeling</u> <u>emotionally</u> right before you use?	3. Over <u>how long</u> a period do you usually use?	3. What you like about using _____? (when)	d. Emotional feelings e. Legal situations f. School situations g. Job situations h. Financial situations i. Other situations
			4. What are some of the pleasant <u>thoughts</u> you have while you are using?	
			5. What are some of the pleasant <u>physical feelings</u> you have while you are using?	
			6. What are some of the pleasant <u>emotional feelings</u> you have while you are using?	

CRAFT - Strategies:

- ◆ Use time out from positive reinforcement for drinking/using behaviour.
- ◆ Allow natural consequences for drinking/using.
- ◆ Develop reinforcers for themselves and their partners.
- ◆ Learn how to give effective suggestions of treatment/self-help group involvement for the drinker or drug user if he/she relapses!
- ◆ Cope with relapse by accessing rapid intake procedures when motivation for treatment emerges.

Based
on CRAFT,
the New Proven
Intervention
Program

Get Your Loved One **Sober**

ALTERNATIVES *to* NAGGING,
PLEADING, *and* THREATENING

Robert J. Meyers, Ph.D. /// Brenda L. Wolfe, Ph.D.

Al-Anon and Nar-Anon

(Timko et al. 2021)

- ◇ Mutual-help organisation intertwined history with the Alcoholics Anonymous fellowship
- ◇ “Concerned family members”; family members are ‘codependent’
- ◇ <https://www.alanon.org.za/find-a-meeting/>
- ◇ ‘New comers’ meeting – Zoom – Wednesday @ 5pm



Al-Anon Family Groups
Help and hope for families and friends of alcoholics

Al-Anon/Nar-Anon

- ◆ Family member becomes preoccupied with the family member. Even interfering with the natural consequences of the person's SUD (E.g. Debts, car accidents, and conflicts at work)
- ◆ Detachment is the main arm of the intervention (Focus on taking care of oneself; reach outside of the family for help).
- ◆ “Disease of addiction” is not the family member's responsibility.
- ◆ 12 Step fellowships to reduce controlling behaviours and resentments.

Al-Anon and Nar-Anon – Active ingredients (Timko et al. 2016)

- ◇ Sustained attendance for 6 months brought outcomes:
 - ◇ Practical ways to manage problems resulting from drinking family member
 - ◇ Increased wellbeing and functioning
 - ◇ Reduced verbal and physical abuse

Newcomers reported personal gains > drinker related gains



ARISE

- ◇ “Relational Intervention Sequence for Engagement”
- ◇ Refined from the Johnson Intervention
- ◇ <https://www.arise-network.com/arise-intervention/>

ARISE (Garrett et al. 1998)

- ◆ “Starts small” – least amount of therapeutic and familial/network resources (vs. Johnson intervention)
- ◆ Leans towards engaging clients into outpatient services first
- ◆ Three stage intervention sequence:
 1. Coaching of the first call from concerned other;
 2. Series of intervention network sessions;
 3. Arise intervention.

ARISE (Garrett et al. 1998)

ARISE intervention assumptions:

1. Involving person with SUD conveys respect
2. Intervention is a process on a continuum
3. Flexible options maximize potency; minimize resistance
4. Pressure to match resistance. Gradual pressure based on treatment availability
5. Families care about the individual with an SUD; vice versa
6. Working with strengths
7. Intervention viewed as a therapeutic process; not one time event