

Addiction and the Family International Network (AFINet) - First Webinar (the first of a new series)



In Their Own Right: Family Members Affected by Alcohol and other Drug Misuse / Gambling

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Addiction and the Family International Network (AFINet) - Webinar Series

- A recording of this Webinar is available for viewing here:
<https://youtu.be/dAg9SnNlyk4>
- The Webinar Serie can be viewed here:
<http://www.afinetwork.info/webinar-series>

Long-standing Research and Practice group

- Lots of people have been involved in the work I am going to talk about.
- Too many to mention, but main collaborators over the years have been Jim Orford and Lorna Templeton (both AFINet Trustees), Alex Copello, and then especially the Family Support Network in Rep of Ireland who were the first national organisation to adopt the 5-Step Method as their major intervention for affected family members – strong mention for Sadie Grace and Megan O’Leary.

What I'm going to do today

- Quickly go over what I mean by 'Affected Family Members'
- Clarify that this is an 'evidence-based' talk, not one based solely on 'expert opinion'
- Briefly discuss why we are concerned about AFMs
- Look at what AFMs tell us, if we ask them about their lives
- Show how we used this to develop a useful model for understanding how and why AFMs are affected
- And how we used that to develop the 5-Step Method, and the evidence we have that it is helpful.

Who are 'affected family members'



- Mothers, fathers
- Wives, husbands, partners
- Children, Adolescent offspring and Adult children
- Sisters, brothers
- Aunts, uncles, grandparents, in-laws
- Close friends
- People considered family e.g. “whanau” in New Zealand, “kin” in Australian aboriginal society

These are all AFMs of people with alcohol / drug / gambling problems.

An evidence-based talk



Talk today based on many years of **research**:

- First into impact on other family members of having an addicted relative (Australian Indigenous [Northern Territory], England, India, Iran, Italy, Mexico, Northern Ireland, etc);
- Then into effectiveness of interventions to help these family members (England, Italy, Mexico, Northern Ireland, etc);

Plus on a lot of **clinical experience** of working with and running services for such family members (many countries, many services).

Why are we concerned about AFMs?

- Because AFMs both need and deserve help!
- Most people with alcohol/other drug/gambling problems never seek 'treatment'; and even if they do, most countries have access issues
- Even if they do access help, their AFMs are usually excluded: services (and staff) still mainly use an 'individual model'.
- Yet very often, AFMs are very badly affected.
- The AFMs have had to deal with these (often longstanding) problems with no help or support.

A very large number of people are affected

- It is estimated that there are approximately 15 million people with drug use disorders globally and 75 million with alcohol use disorders. Perhaps 10 million with gambling disorders can be added.
- A cautious estimate of just one family member seriously affected in each case suggests a minimum of 100 million affected family members worldwide.
- Most people would use a greater multiplier and produce a higher figure.

Recent Research on the Impact of Alcohol and other Drug Use on New Zealanders

Commissioned by Family Drug Support Feb2020

Nearly **50%** New Zealanders 18 to 65+ are impacted by the alcohol use of someone they care about. Impact differs:

- **54%** **18 to 24 year olds say they are impacted**
- **53%** **Maori say they are impacted**
- **39%** **Pakeha say they are impacted**

and **30%** of New Zealanders are impacted by the other drug use of people they care about.

- **42%** **18 to 24 year olds say they are impacted**
- **55%** **Maori say they are impacted**
- **26%** **Pakeha say they are impacted**

Very similar impacts across the world

What do AFMs tell us?



They worry about their relative. They worry

- about the relative's physical health
- that the relative is neglecting himself or herself
- about the relative's mental health
- that the relative's education, work or sporting performance is failing
- about the relative's financial affairs
- about the frequency, quantity or form of the relative's addictive behaviour
- about the company the relative is keeping
- about the legal issues that will arise.

What do AFMs tell us?

They worry about the threats to their family –
common threats include the family's:

- Finances being depleted
- Relationships being spoiled
- Family Atmosphere being harmed
- People being physically harmed
- Social life being restricted

They worry about :

- the Children in the family and how they are affected
- Domestic and Inter-Personal Violence
- They worry about their home being invaded.

What do AFMs tell us?

And they **worry about how to cope** – are they doing *‘the right thing’*, should they be doing something else; what is the *‘right way’* to cope?

Most AFMs use one or more of three ways:

- **Withdrawing** from it, being **independent** of it
- **Engaged** in trying to change it, **standing up** to it
- **Accepting** it, **putting up with** it

But each way throws up its own coping dilemmas:

“should I withdraw / stand up to / accept”

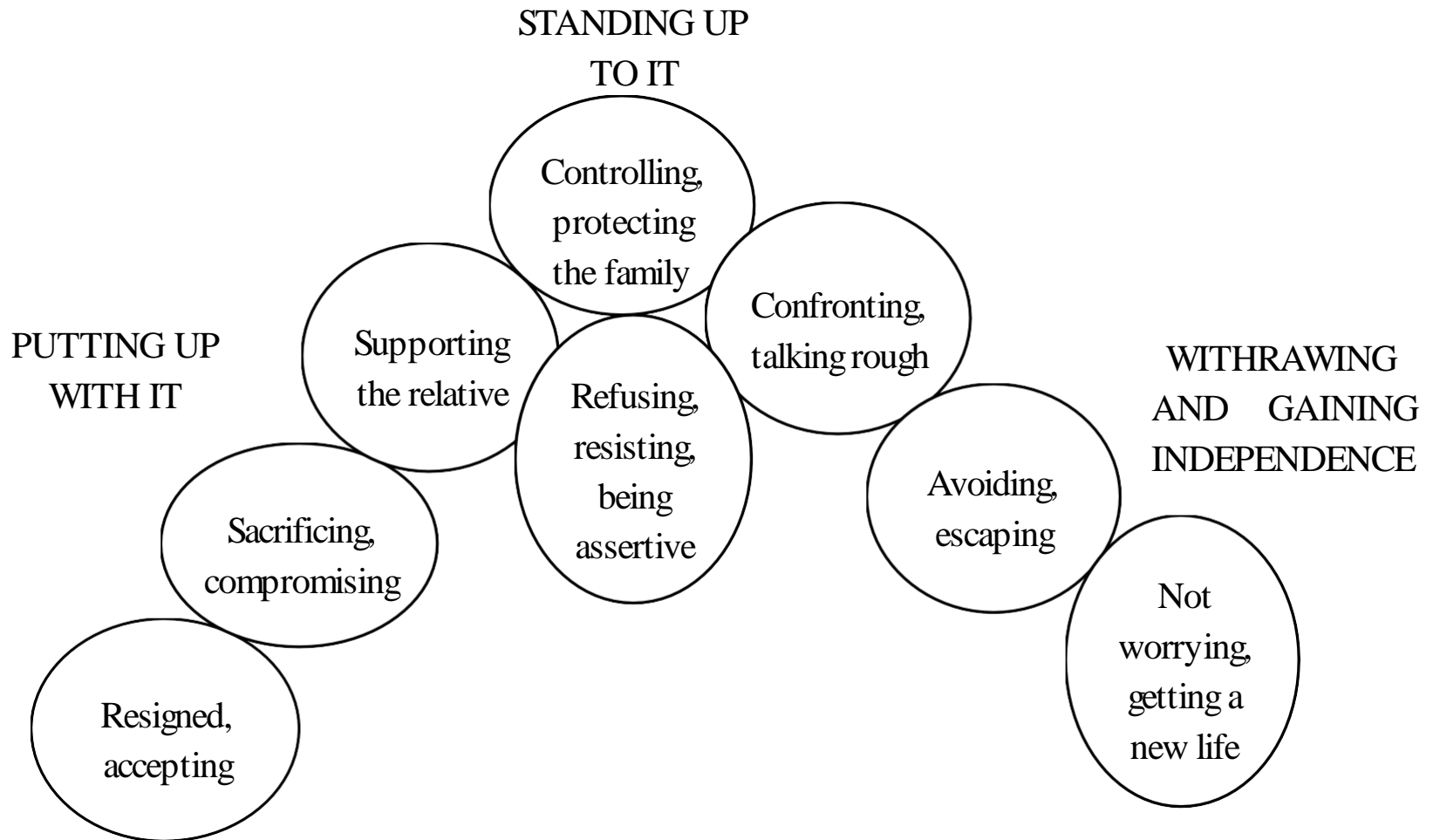
*“should I pay for... but if I don’t, what will happen”*¹²

What do AFMs tell us?

What we know for certain is that
there is no *'right way'*
that every person in every circumstance should
follow.

What is the best thing to do will vary, and is hugely
influenced by many issues. That is why it throws up
so many dilemmas for Affected Family Members!

Family Members' Ways of Coping



All this causes AFMs to experience symptoms

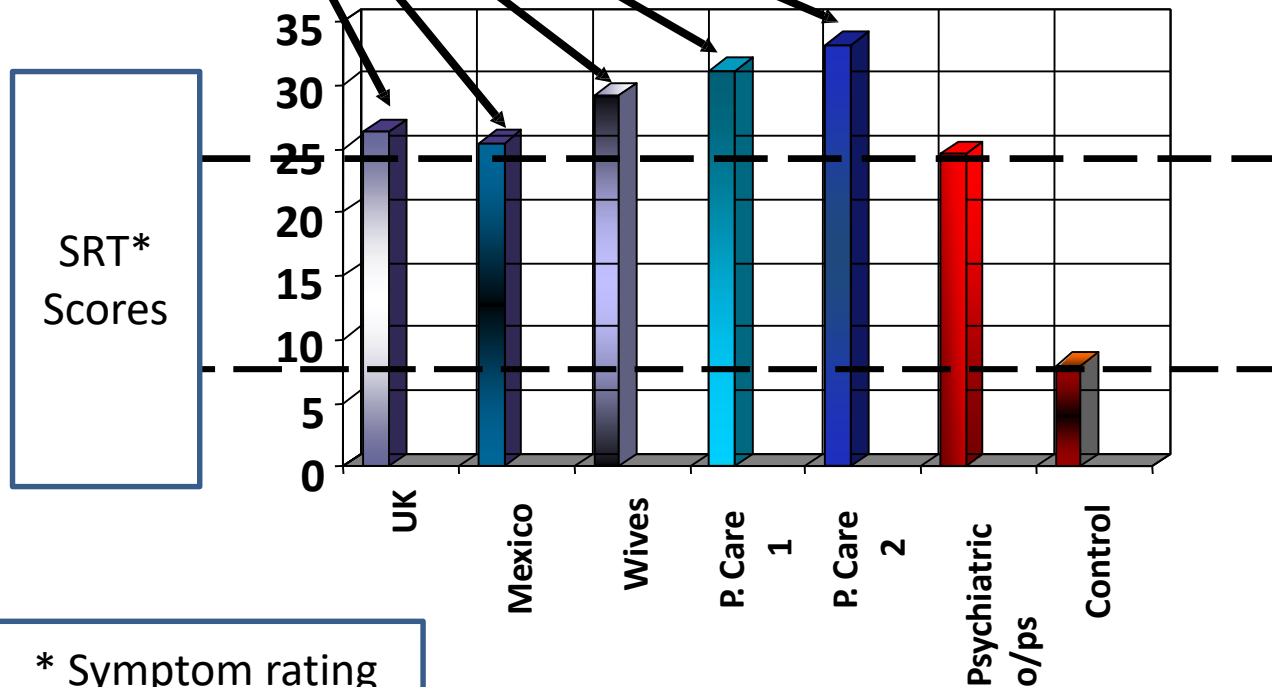
AFMs often feel

- Anxious, worried
- Helpless, despairing
- Low, depressed
- Guilty, devalued
- Angry, resentful, hatred
- Frightened
- Alone
- Sad

Symptoms of Ill Health

Family members

Family members (columns 1-5),
psychiatric outpatients (column 6) and
community controls (column 7)



* Symptom rating
test

And AFMs are usually ignored



This 'ignoring' can be passive, or active.

Passively: there is very little talk about AFMs – they are **largely invisible**.

Although AFMs are badly affected, there is **very little practical help** to minimise harm to them; and they are **only rarely offered any help or support**.

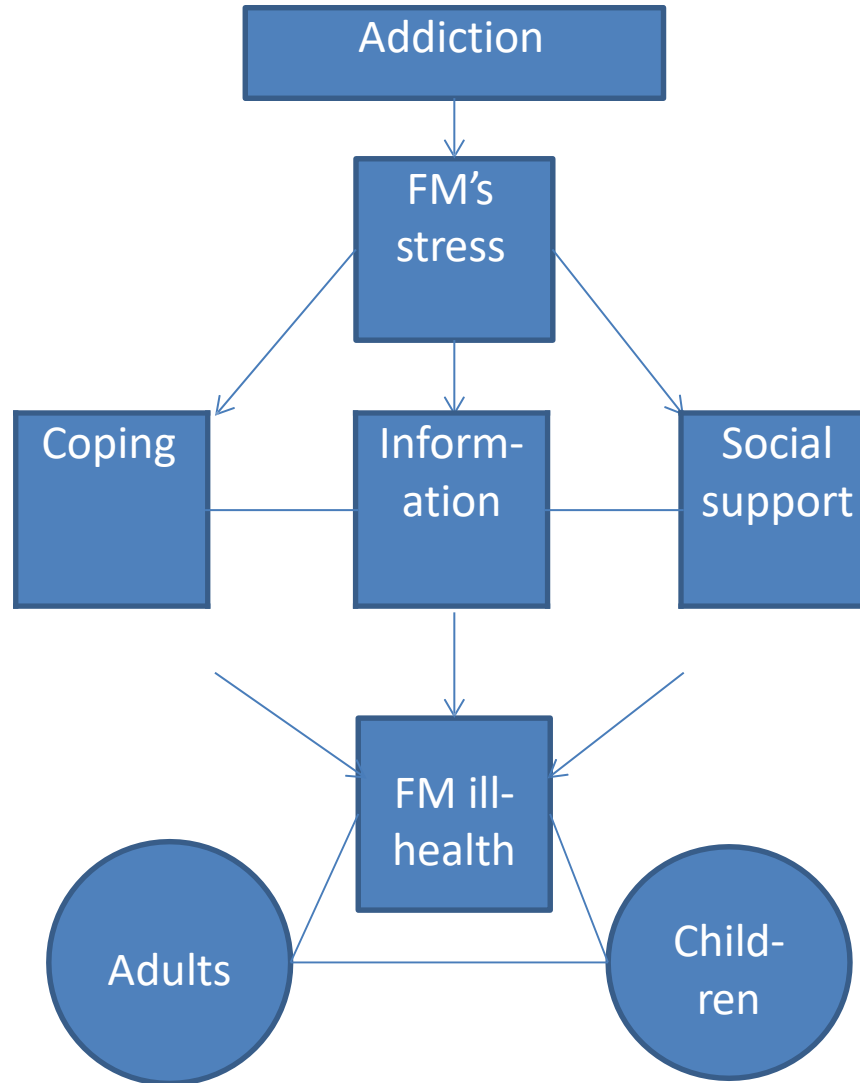
Actively: even if their addicted relative does get help, they are usually **excluded from services**.

And many people hold **blaming, pathologizing, critical models or theories** over family members.

Plus there is **Stigma,** **and fear of Stigma**

- AFMs are often too ashamed to seek help.
- AFMs are unable to access support that meets their needs in a confidential setting with practitioners who understand the needs of AFMs.
- AFMs feel they just have “to put up with” low self esteem and health concerns of having a person they care about with alcohol or other drug or gambling challenges.

The Stress-Strain-Coping-Support Model



The 5-STEP Method

Listen non-judgementally – understand their concerns

Provide information , empower AFM to seek more

Discuss ways of current and possible future coping

Explore sources of support and social network

Review and arrange further help as needed

Features of the Method

- ❑ Applicable whatever the relationship of family member to alcohol, other drug or gambling relative
- ❑ Applicable in a wide variety of settings, including primary and specialist healthcare
- ❑ Flexible in its application e.g., number of meetings; number of family members; individual / group; face-to-face / telephone/ videoconferencing; Self-Help Handbook and internet/web formats
- ❑ Can be extended to include joint work with family member(s) and alcohol, other drug or gambling relative

Details about the criteria

Criteria related to 5-Step Method Practice

- Competence in each Step is assessed against criteria for that step – there are 5 criteria for each step, and a further set of 5 criteria assessing general counselling skills.
- A summary of the criteria for Step 1 (the actual criteria are much more detailed):
 - Allow family member to describe situation and **tell their story**
 - Identify **relevant stresses** and how the **FM** has been affected
 - Identify relevant stresses and how **others** have been affected
 - **Normalise** the experience of FMs, giving the FM an indication that **they are not alone** with their experiences
 - Cover appropriately the Beginning (**introduction and purpose of the 5-Step Method, confidentiality**) and Ending of the session (**summarise main FM issues** from this session, use of SH **handbook, safety and risk, plan for next Step, practical issues** of contact and date of next session).

Short Questionnaire for Family Members Affected by Addiction – The SQFM(AA), aka the Family Member Questionnaire (FMQ)

(administered Pre / Post(Step 5) / and at 3 months F-U)

- **Impact on the family member/family**
 - Worrying behaviour
 - Active disturbance
- **Symptoms of strain**
 - Psychological
 - Physical
- **Ways of coping**
 - Engaged emotional
 - Engaged assertive
 - Tolerant/Accepting
 - Independent/Withdrawing
- **Social support**
 - Informal positive
 - Informal negative
 - Formal positive

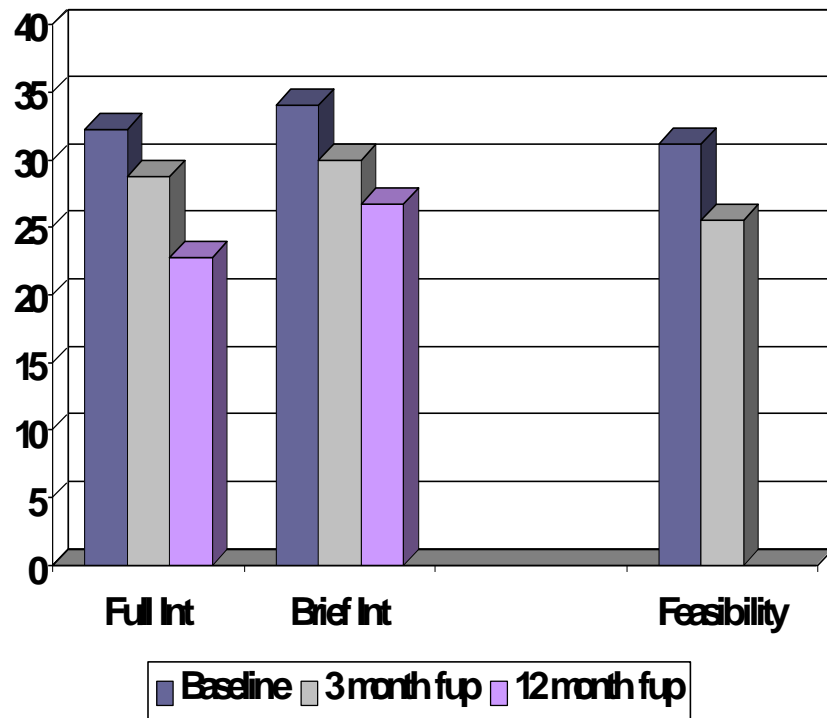
5-Step Method Intervention: Changes in symptoms and coping behaviour

Copello, Templeton, Krishnan, Orford, Velleman, *Addiction Research & Theory*, 2000 [Feasibility]

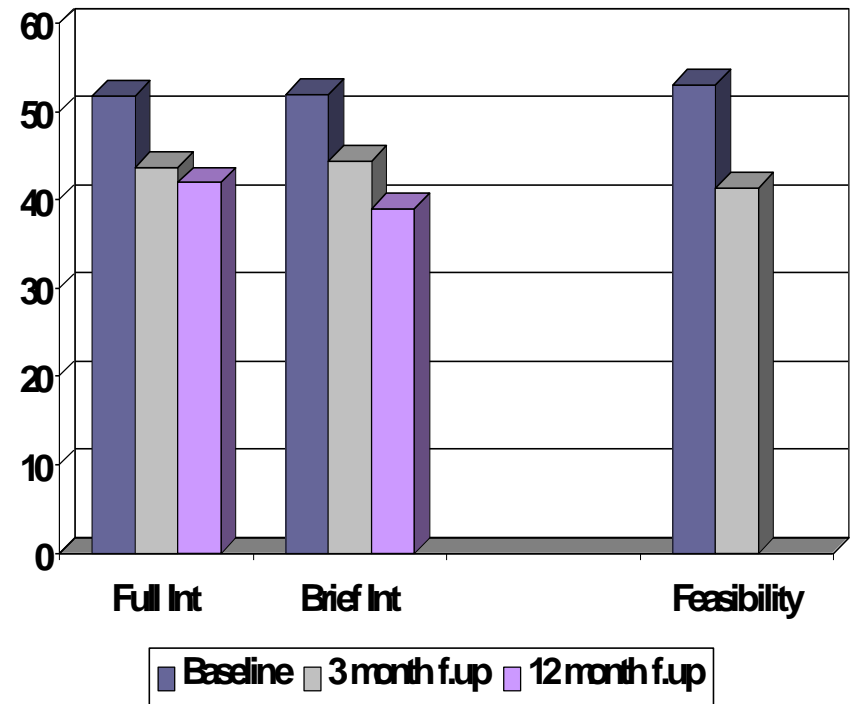
Copello, Templeton, Orford, Velleman et al., *Addiction*, 2009 [3-month]

Velleman, Orford, Templeton, Copello et al., *Addiction Research & Theory*, 2011 [12-month]

Symptoms



Coping



Some findings

- **For family members:**
 - A positive and significant change in coping behaviour.
 - Reduction in symptoms (physical and psychological).
 - Lessening of the impact of the problem.
- **For practitioners:**
 - Confidence in working with family members.
 - Awareness of the importance of working with family members.

Use of the 5-Step Method in practice

Used increasingly widely. So far approximately **138 courses** have been mounted training people in the 5-Step Method, and **over 1700 people** have been trained.

- National Schemes in Republic of Ireland, New Zealand, Holland
- 5-Step Method training has been run for, and is being used by, many individual services across Australia, Canada, England, Hong Kong, Ireland, Italy, Mexico, New Zealand, Northern Ireland, USA, etc.

Current Practitioner and Service experience: Very positive accounts from many practitioners, both about how it provides a clear structure for them to work with, and how it seems to help AFMs a great deal.

What do people say about the 5-Step Method?



Practitioners like it:
Focused, excellent practical model which is helpful to them

AFMs like it, less stressed, helps cope, social network valuable, focus is on them

Like the skills-based training & assessment – builds on counselling skills

AFMs like the handbook
– “I may be able to make things better for myself”

Both AFMs and Practitioners like that it is research-based, is a structured approach and focuses on empowering AFMs

Watch Services talk about their experiences

<https://www.youtube.com/watch?v=rKUDKyWOa-k&t=8s'>

5 Takeaway Messages

Family/whanau matter – they know best, their relative who has alcohol and other drug / gambling challenges.

Family/ whanau generally need help to develop coping and resilience - for what can be a long journey beside the person with alcohol and other drug / gambling challenges. When supported they can be a vital force for positive change and hope. The 5-Step Method can be a very effective way of providing that help.

Family /whanau benefit from having people who can provide non-judgemental support - support from people who will listen and understand the challenges is crucial.

Family/whanau need accurate information – e.g., about help available, lapsing, coping, support, alcohol and other drugs / gambling; and about a range of issues related to their OWN health and needs.

Family/whanau need to be able to access information and support no matter where they live - given by people who care and are very well trained to provide that support and information.

Some useful references

The Alcohol, Drugs and the Family Research Group (2010) **The 5- Step Method: A research based programme of work to help family members affected by a relative's alcohol or drug misuse.** *Drugs: Education, Prevention and Policy*, Volume 17, Supplement No. 1, December

Velleman, Orford *et al.*(2011) **12-month follow-up after brief interventions in primary care for family members affected by the substance misuse problem of a close relative.** *Addiction Research and Theory*, 19(4), 362-374.

Orford (2012) **Addiction Dilemmas: Family Experiences in Literature and Research and their Lessons for Practice.** *Wiley- Blackwell*

Orford, Velleman *et al.* (2013) **Addiction in the family is a major but neglected contributor to the global burden of adult ill-health.** *Social Science and Medicine*, 78, 70-77

Plus see last page for weblink for list of other papers on SSCS Model and 5-Step Method

Welcome to AFINet!
Addiction and the Family
International Network
www.afinetwork.info

<https://www.afinetwork.info/documents/documents-and-publications/category/17-publications-re-addiction-the-family?download=57:list-of-5-step-and-sscs-publications>



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members from 35
countries

Finally

Future Webinars:



1 st Dec 2020	BRASIL - Panorama atual e impacto das drogas no núcleo familiar	Ronaldo Luiz Risetto	Brazil - Current overview and impact of drugs on the family. This may be simultaneously translated.
Mid-Jan 2021	A Systematic Review on the efficacy of interventions for AFMs	Dr Gallus Bischof	Evidence and Implementation of family-based interventions in the addiction field [EVIFA]
Mid-Feb 2021	Motivational intervention for family members living with a relative with a substance-related disorder	Cassandra Borges Bortolon	This talk will be given in Portuguese (with possibly a simultaneous English translation) and will cover information about both research and clinical practice.
Mid-March	The findings from the PuP4Dads feasibility study	Professor Anne Whittaker NMAHP Research Unit, University of Stirling, Scotland, UK	The Parents under Pressure (PuP) programme is a parenting intervention for children and families with a parent dependent on alcohol or drugs. PuP4Dads focuses on involving fathers on opioid substitution therapy.