

Services for families affected by alcohol or other drugs

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Aim: To provide and discuss evidence about the needs, experiences, preferences and access to support services by family members in Australasia who are affected by a family, friend, or significant other's alcohol or other drug use.

Disclosure of Interest Statement: There are no conflicts of interest to declare.

PRESENTATION 1: Patterns and preferences in help-seeking among Australian families affected by a loved one's alcohol and other drug use: A cross-sectional study

Presenting Author: Clare Rushton

Introduction: Families, friends, and significant others (hereafter 'families') affected by a loved one's alcohol or other drug use experience distress and burden and have their own support needs. However, there is a scarcity of research exploring the experience of families as a population in their own right. This study aimed to describe affected families in Australia and understand their experience and attitudes around help-seeking.

Methods: A national cross-sectional survey was conducted online with a sample recruited via social media and existing family support organisations between September 2023-May 2024. Inclusion criteria were being an English-speaking Australian resident, aged >18 years, currently or previously affected by another's alcohol or drug use. Descriptive statistics were used to characterise participants and describe help-seeking behaviours and preferences.

Key Findings: Preliminary analysis conducted after the first round of recruitment included 1026 participants who provided demographic data. Participants primarily identified as significant others (36%, n=372), parents (27%, n=273), and adult children (14%, n=140), with 88% (n=906) females, aged M=53 years (SD=13.4). Alcohol was their loved one's primary drug of concern (74%, n=764), followed by methamphetamine (9%, n=98). Of the 772 participants who responded to support-related questions, 46% (n=357) reported using online resources, 28% (n=219) attended peer-support groups, and 12% (n=93) accessed helplines. Individually delivered support was the most endorsed preference for future help-seeking (54%, n=367), followed by group settings (32%, n=218), and self-directed resources (15%). Most preferred support provided in-person (70%, n=472).

Discussions and Conclusions: Families present with diverse needs and support preferences and require a choice of varied modalities and approaches. Further analysis will be conducted comparing specific sub-groups following conclusion of data collection to better understand families' needs.

Implications for Practice or Policy: Services should consider providing a range of varied support options for affected families, to ensure their specific needs are met.

PRESENTATION 2: The Five-Step Method and building workforce capacity

Presenting Authors: Pauline Stewart

Background: Over 1,000 peer reviewed articles from around the world attest to the impact on family/whanau, friends and significant others (hereafter 'family/whanau') of having loved ones with problematic alcohol and other drug use. Over 50 of these peer reviewed articles focus on the use of the 5-Step Method, a psycho-educational counselling programme, as a successful intervention to help family/whanau to build coping and resilience in their own right. In Aotearoa New Zealand, a nationwide NGO is providing the 5-Step Method across the country, via Telehealth, irrespective of whether the focal person is in any treatment or not. The presentation aims to describe how workforce capacity has been developed and to provide data on service delivery outcomes.

Description of Model of Care / Intervention: Research into the extent of AOD use in Aotearoa New Zealand will be provided along with a description of the delivery, via Telehealth, of the 5-Step Method. The development of evidence-based resources for 5-Step Method participants will be explored. The recent development of a 5-Step Youth programme for 16-24 year olds and Single Session Consultations, via Telehealth, will also be presented. Building AOD workforce capacity through continual organisational training of Accredited Practitioners, Trainers and Assessors of the accreditation procedure, will also be explored.

Effectiveness /Acceptability /Implementation: The effectiveness of the 5-Step Method for family/whanau will be presented. This will include cultural considerations, acceptability and implementation. Peer reviewed data will be presented.

Conclusions and Next Steps: The successful development of nationwide support for impacted family/whanau, friends and significant others will be examined in light of the positive results evident with the 5-Step Method. Significant expansion of the 5-Step Method in Aotearoa New Zealand will be discussed along with future developments in the use of AI to help impacted family members.

Implications for Practice or Policy: Services should consider providing support to impacted family/whanau so they are able to build coping and resilience, irrespective of whether the focal person is in any treatment service or is still using alcohol or other drugs. Families need support in their own right.

PRESENTATION 3: SMART Family and Friends barriers to service access, supports and recommendations

Presenting Authors: Sally Boardman

Background: SMART Family and Friends is a manualised, eight-module mutual-support group developed in 2009 by international non-profit organisation Self-Management and Recovery Training (SMART Recovery). The group is based on SMART Recovery's four-point program (understanding motivation, managing urges, problem solving, restoring lifestyle balance), and has been adapted to align with the Stress-Strain-Coping-Support model.

Description of Model of Care / Intervention: SMART Family & Friends is run by trained facilitators and offered either as an 8-week course or drop-in meetings for anyone affected by a loved one's behaviour of concern. Attendance is always free for participants and offered face to face, online or as a hybrid model offering both.

Effectiveness /Acceptability /Implementation: Feedback from the programme indicates that SMART Recovery Family & Friends helps to reduce stigma and offer much needed support for an at risk and historically neglected population. Drop in and online meeting offerings fill a void in service provision enabling people to access immediate, free support. In addition to gaining tools and skills to enhance wellbeing and resilience, participants also report benefits of improved mental health as well as growing their support networks and additional support resources.

Conclusions and Next Steps: In response to community need we have expanded our Family & Friends Programme to include meetings for specific cohorts such as parents/carers of a young person struggling with behaviours of concern, and partners. This is providing interesting insights which we are turning into practice guides to enhance our continual commitment to providing free support to people in need.

Implications for Practice or Policy: The organic growth of our Family & Friends programme offers a unique insight into the need for support specifically for families and loved ones affected by another's behaviour of concern.

PRESENTATION 4: The effectiveness of online counselling for rural family members of people struggling with substance use

Presenting Authors: Heidi Gray

Background: Rural Australians experience a disproportionate level of physical and psychological harm related to AOD use than their urban counterparts. However, few drug and alcohol services provide support to family members and friends (hereafter 'family'). Community Reinforcement and Family Training (CRAFT) is an evidence-based talking therapy which works with the family of people struggling with AOD use. Despite extensive use of CRAFT in the United States of America, this program is not routinely offered in Australia. This study aimed to determine whether the provision of CRAFT was associated with improvements in family and friends' mental health. Factors associated with successful implementation of CRAFT as perceived by participants were identified.

Method: A randomized control trial of CRAFT was conducted in rural Australia involving self-selected family of someone using AOD. Intervention participants received 6 sessions of CRAFT over 6 weeks. Waitlist participants received reading resources from the Centre for Motivation and Change. Pre and post outcome measures assessed DASS -21, SWLS, FS and Brief-Cope. Purposive sampling was used to select CRAFT participants to complete semi-structured interviews about the program. A thematic analysis was applied to the data.

Key Findings: Preliminary analysis of respondents thus far shows participants primarily identified as female (88%), with most between the age of 50-64 (50%) and 35-49 (28.6%). Participants primarily identified as the mother/father (41%) or partner/spouse (33%). Alcohol was the main drug of concern (57%), followed by non-medical use of methamphetamine (20%) and marijuana/cannabis (15%). The final results, available October 2024, will include pre and post outcome measures. Emerging key findings from participant experience include the lack of structured support for family of someone using AOD, and ways that CRAFT has benefited participants.

Discussions and Conclusions: Family of someone using AOD require recognition and support. Implications for service delivery are discussed.

Implications for Practice or Policy: The study demonstrated a strong demand for family focused services in rural Australia. Services should consider providing CRAFT as a support option for families affected by alcohol and other drugs.

Discussion Section: The aim of this symposia is to provide and discuss evidence about the needs, experiences, preferences and access to support services by family members in Australasia who are affected by a family, friend, or significant other's alcohol or other drug use. A possible focus for discussion could be on the needs to be considered when providing support to families and the barriers for services to support families in their own right. The desired outcomes are to increase awareness of the interventions discussed for researchers and service providers in the AOD field and to highlight the importance of considering family members in policy, research, workforce development, and practice.

Discussant: The discussant for this symposium will be Julie Perrin
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