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There are no actual or potential conflicts of interest to disclose; this presentation was created without any commercial support.

#### **Learning Objectives**

- 1. Review continuum of family involvement in treatment.
- 2. Learn evidence-supported strategies to engage families through psychoeducation.
- 3. Become familiar with the basic components of CRAFT Therapy.

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#### What makes up a family?

How we define family is rooted in culture.

Guideline: family is defined by the person seeking services.

How do you elicit the person's self-defined family? How do you assess for chosen family?

#### Think of a person you are serving...

Does their family influence their substance use?

ols there a family history of substance use?

- How do family relationships and/or dynamics act as cues for use (*people, places, things…*)?
- How does family build (or reduce) their motivation for recovery?

How have you addressed these issues in the individual's recovery plan?

# Family Systems

Change in part of a system affects the entire system

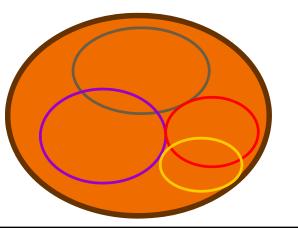
- Developmental change of individual
- Loss of member (death, divorce, runaway, incarceration, cut offs)
- Gain new members
- Shift in a relationship

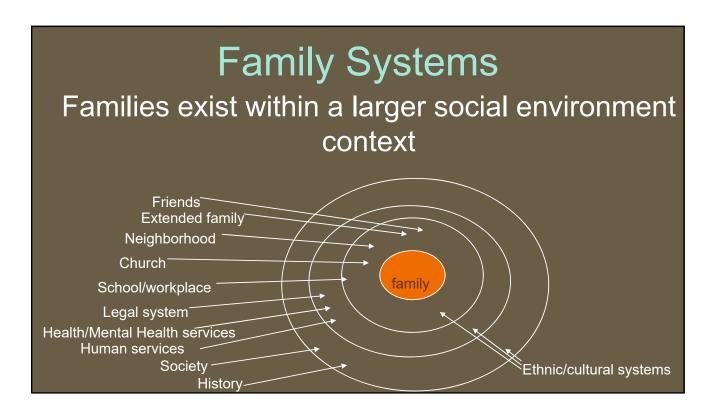


# Family Systems

Subsystems are embedded and operate in larger system

- Couple
- Parent-child
- Sibling
- Extended family
- Gender dynamics, etc.
- Chosen family





#### Frameworks as Barriers to Integration

#### **Family Therapy**

- Family System is the "client".
- Views Substance Use Disorder (SUD) as a manifestation of family dysfunction.
- Puts family's recovery at center, individuals will recover as a result.
- Attends to process of family interactions

(SAMHSA TIP 39, 2004

#### **Substance Use Treatment**

- Puts individual's recovery above all other needs/goals.
- Often disregards the needs or experiences of family.
- Views family as impacted by individual's SUD.
- Seeks to support family members via psychoeducation



From individual to family-based treatment



Image source: Laurel Harvey. Flickr Creative Commons

#### **Continuum of Family Involvement in Treatment**

Level 1: Counselor has little or no involvement with family

 Counselor may contact family for practical reasons; no services are provided to family members.
Counselor views individual as the only client, and may even feel protective towards them.

(SAMHSA TIP 39, 2004)



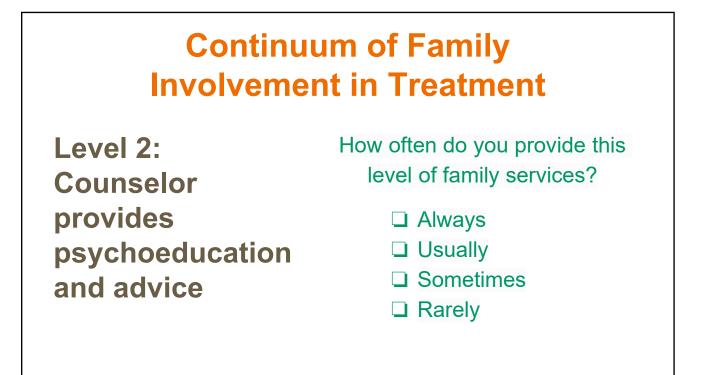
Level 1: **Counselor has little** or no involvement with family

How often do you provide this level of family services?

- Always
- Usually
- □ Sometimes
- □ Rarely

#### **Continuum of Family Involvement in Treatment**

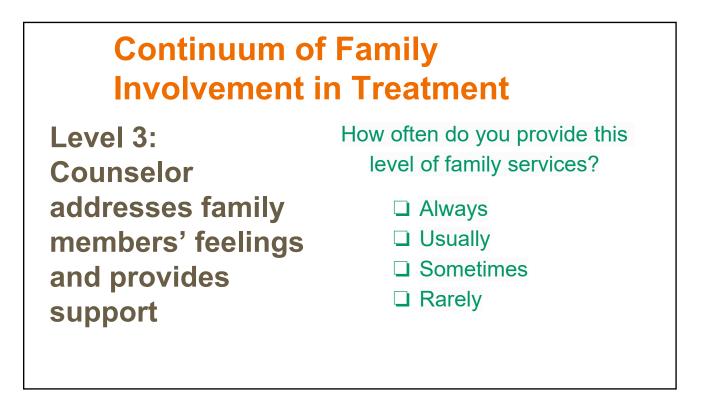
 Primary focus is the individual's Level 2: substance use, but counselor is **Counselor** aware that it affects family provides relationships and that counseling will psychoeducation change family dynamics. and advice The counselor is open to collaboratively engaging and advising families. May refer to specialized family therapy.

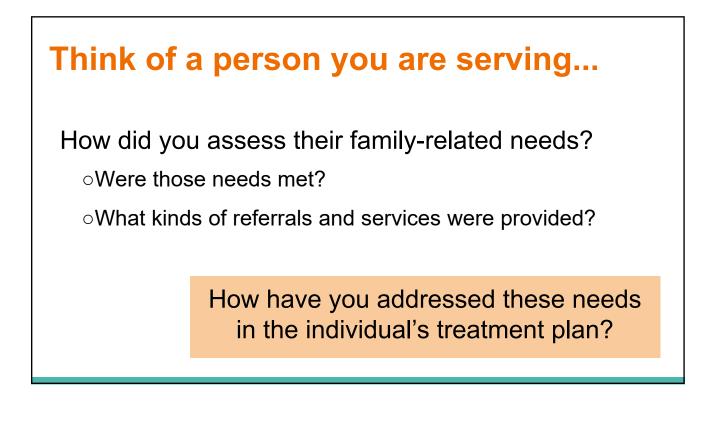


#### Continuum of Family Involvement in Treatment

Counselor addresses family members' feelings	The counselor empathically elicits and responds to client and family feelings, and provides tailored psychoeducation.
	Counselor assesses family functioning as it relates to individual's use, and refers to specialized services if needed to address family's unique needs.

(SAMHSA TIP 39, 2004)





Continuum of Family Involvement in Treatment	
Level 4:	Counselor understands family systems theory, and applies to
Counselor provides systematic	family within greater community systems. Effectively engages and
assessment and planned intervention	intervenes with families (including reluctant ones), enhancing
•	communication and coping. Actively links to specialized family
(SAMHSA TIP 39, 2004)	therapy referral when needed.

## Continuum of Family Involvement in Treatment

Level 4:

**Counselor provides** 

systematic

assessment and

planned intervention

How often do you provide this level of family services?

- Always
- Usually
- Sometimes
- Rarely

#### 2

#### Think of a person you are serving...

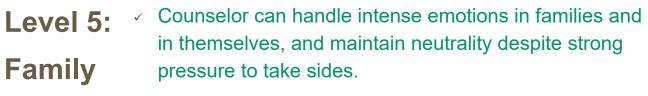
How did you assess their family's unique strengths and abilities?

•What were those unique qualities and strengths?

•How did you build upon these strengths?

How have you leveraged the family's strengths in the individual's recovery plan?

#### Continuum of Family Involvement in Treatment

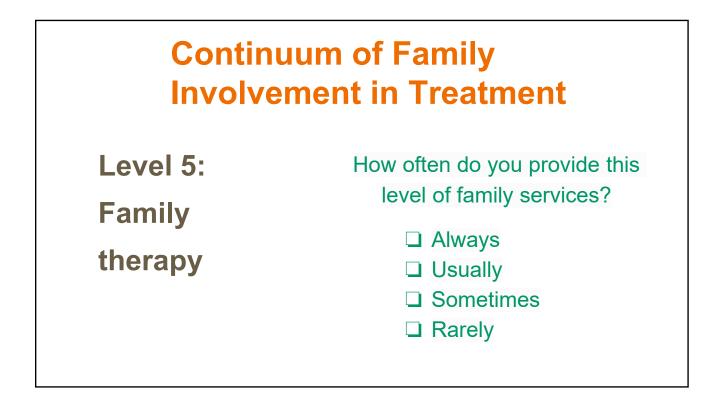


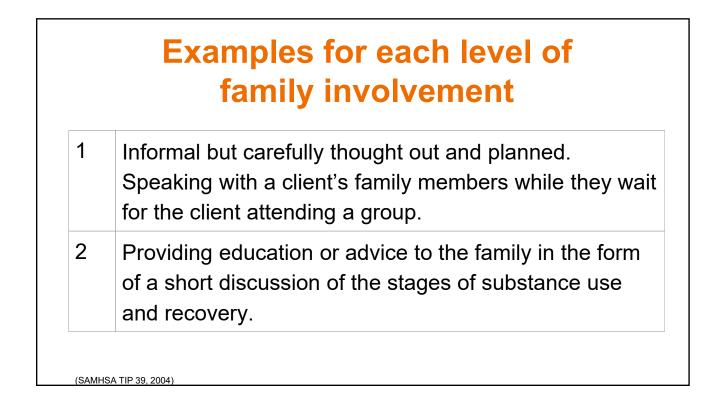
- **therapy** Counselor assesses, engages, and intervenes with family, including family members who are difficult to engage and exhibit poor communication skills.
  - Counselor negotiates collaborative relationships with professionals involved with family across systems, even when goals may be in conflict.

(SAMHSA TIP 39, 2004)

Slide 21

2 do we have the ability to do word clouds? Gabriela Zapata-Alma, 3/13/2018





	Examples for each level of family involvement
3	Educate the family on how substance use affects parenting, discussing how each parent could improve their parenting skills and supporting them as they make changes.
4	Intervene to define and change the interactional patterns and behavioral sequences around substance use or determine the exact behavioral sequence associated with using substances, and establish ways to interrupt that sequence.

# Examples for each level of family involvement

Help the family define specific goals for change goals that might or might not focus on substance use—and then help the family make those changes. The focus at Level 5 is broader than that at Level 4, and the counselor is apt to draw on wider skills and approaches to help the family meet its goals.

(SAMHSA TIP 39, 2004)

#### What level should we provide?

#### **Consider two main factors:**

- 1. Counselor's level of experience and comfort.
- 2. Family's needs and readiness to change.

Both family circumstances and counselor abilities must be taken into account.

(SAMHSA TIP 39, 2004)

#### Stages of Family Treatment: matching interventions to stage

- 1. Recovery Attainment: family system is unbalanced but healthy change is possible.
- 2. Recovery Adjustment: family works on developing and stabilizing a new system.
- 3. Recovery Maintenance: family must rebalance and stabilize a new and healthier pattern.

(SAMHSA TIP 39, 2004)



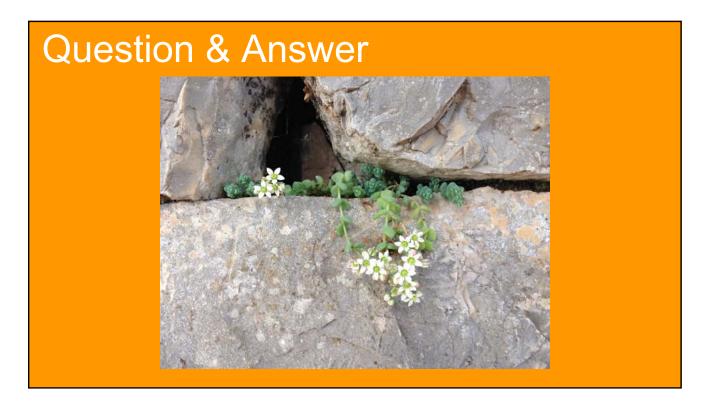
# **Family-centered Recovery Supports**

Considers whole family needs:

- Health
- Home
- Purpose
- Community
- Family-focused recreational activities help with healthy relationships and parenting.
  (Werner et al., 2007)

What are some resources and interventions to support whole family:

- Health?
- Home?
- Purpose?
- Community?



# Break – 5 minutes

# Pause

Please return in 10 minutes



# Effectively Engaging Families

**Barriers and Strategies** 



Image source: David Kessler. Flickr Creative Commons

# Luisa

Luisa calls your agency to ask about treatment services. She explains that she recently lost her job, and asks about the costs of treatment and whether there is any financial assistance since she also lost her medical coverage. She asks about privacy and confidentiality. While you are explaining that her services would be confidential, she abruptly says, "I don't have anyone to watch my children, and I need to get another job. I can't start treatment right now, I have to go" and hangs up.



# Kevin

Kevin is a 22 year-old veteran who recently returned home from his 2nd tour of duty in Iraq. He presents with alcohol and opioid use disorder, and PTSD-related symptoms. He is living in his parent's basement, and plans to enroll in college. His parents have a history of alcohol use and depression. He has a large social support network made up of both friends and family.

What strengths can you identify?

What needs?

How might you engage this family?

## **Family Engagement: Start Early**

Begin engaging the family in treatment from the beginning.

Actively elicit family information during assessment phase.

- "How would you like your family and friends to be involved in your treatment?"
- "How could your family and friends assist in your recovery?"
- "What would be helpful for your loved ones to know about your treatment and recovery?"

## **Psychoeducation as Engagement**

Encourage person to attend with social supports.

Balance information with support and resources.

Be ready to schedule follow up session(s).



#### Sample Family/Friends Info Session Outline

- 1. Intro/Welcome
- 2. Program description
- 3. General info on SUD/MH
- 4. Overdose awareness
- 5. How to support your loved one in recovery
- 6. Closing



Image: 'Platte mit frischem Gemļse' /www.flickr.com/photos/149561324@N03/27247987489 Found on flickrcc.net



#### **Case Management**

Critical intervention in assisting families overcome barriers to treatment, as well as address their basic needs.

May be necessary from the very first contact.

Case Management often enhances early engagement and works towards building relationship and trust throughout early recovery.

Those with children often need assistance in navigating educational system.

# **Care Coordination**

Women are more likely to experience co-occurring mental and/or physical health conditions, as well as be responsible for the care of family (including children).

This presents unique needs and opportunities for care coordination, including effective collaboration with other professionals, such as child welfare.

Collaboration and effective communication with other providers are vital to individuals' and families' recovery.

# Life Skills Training

- Some have not had the opportunity or positive role modeling to develop important life skills, including money management, home management, and parenting.
- Addressing daily life needs can seem simple, yet have a large impact.
- Increasing parenting skills and support can reduce parental stress, and increase child outcomes.

What are some fun ways you've incorporated life skill development?

#### **Recovery Coaches**

An essential element of Recovery Oriented Systems of Care (ROSC), Recovery Coaches are an important resource in helping individuals and families engage long-term recovery.

The Recovery Coach supports overall engagement, works to expand recovery social supports, as well as helps to generalize treatment gains to other spheres (home, community, work).

#### **Peer Supports & Mutual Aid**

- What are some of the benefits of peer support?
- How do you facilitate peer support for families in your organizations?

# Effectively Engaging Families: Starts With Us

- Families are dynamic, treatment must also be dynamic and tailored to wrap around the family.
- Conflict is inevitable, but resolvable.
- Requires diverse multidisciplinary teams who create a collaborative environment of mutual respect and crosstraining.



# CRAFT

Empowers concerned social support(s) to address the substance use issues of their loved one without using classic approaches that are detachment-based (al-anon) or confrontationbased interventions.

Found significantly more effective in engaging loved ones in treatment.

http://motivationandchange.com/outpatient-treatment/for-families/craft-overview/

# CRAFT

CRAFT works with the concerned social support of a person with substance use issues, not the individual who is using substances.

It is a brief therapy, consisting of 12 to 14, 60-min sessions:

- twice weekly for the initial 4 weeks;
- once weekly for the following 6 weeks.

# **CRAFT: 3 Main Goals**

- 1. Help concerned social support(s) move their loved one toward treatment.
- 2. Help reduce the loved one's alcohol and drug use, whether or not the loved one has engaged in treatment yet.
- 3. Improve the lives of concerned family and friends.

http://motivationandchange.com/outpatient-treatment/for-families/craft-overview/

# **CRAFT: Core Strategies**

- 1. Screen for the presence of violence, including emotional abuse.
  - a. Safety plan if possible. If violence is present, CRAFT is not the right intervention to use.



Image: 'here lays, here lies' Found on flickrcc.net www.flickr.com/photos/40441865@N08/33776361734

# **CRAFT: Core Strategies**

- 2. Collect information from the loved one on the person's pattern of use, including:
  - a. antecedents, behaviors related to use (frequency, duration, amount, drug, set, setting, etc.), and consequences of use;
  - b. what the person likes about use;
  - c. what the person does not like about use;
  - d. hypothesize motivations for use.

# **CRAFT: Core Strategies**

- 3. Increase non-use and decrease use behaviors:
  - a. learn how to encourage non-use behavior (or lessened use), and
  - b. how to effectively discourage use behavior (without using ineffective measures, such as attempts to control, shame, blame, etc.)

# **CRAFT: Core Strategies**

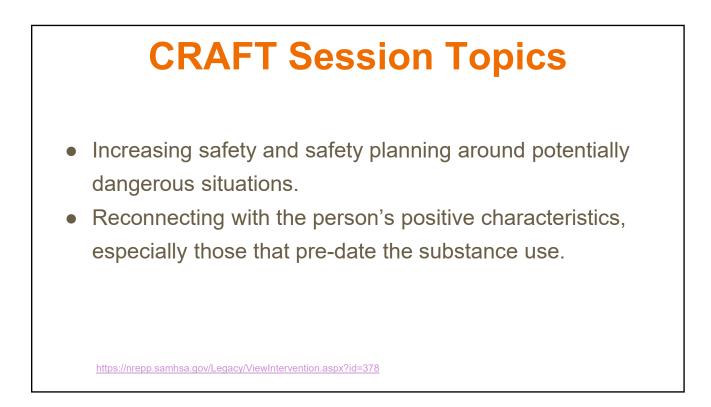
- 4. Increase self-care and self-nurturing behavior.
  - a. Learn to have fun again.
  - b. Don't lose sight of relationships, nurture connection.
  - c. Refill one's reservoirs, very needed in order to keep supporting loved ones (including the person who is using).

# CRAFT

Behavioral & motivational based, teaches family:

- Understanding a loved one's triggers to use
- Positive communication strategies
- Positive reinforcement strategies rewarding non-using behavior
- Problem-solving
- Self-care
- Domestic violence precautions
- Getting a loved one to accept help

http://motivationandchange.com/outpatient-treatment/for-families/craft-overview/



# **CRAFT Session Topics**

- Positively reinforcing activities that do not involve use (or have lessened use) and increasing positive interactions.
- Non-confrontational nonreinforcement of substance use, largely by ignoring or avoiding the person when they are using substances.

https://nrepp.samhsa.gov/Legacy/ViewIntervention.aspx?id=378

# **CRAFT Session Topics**

 Using nonjudgmental, non-shaming/blaming communication with the person who is using substances.
Discontinuing communication that does not have a positive impact on the person. Expressing negative thoughts and feelings with therapist, rather than at the person who is using substances.

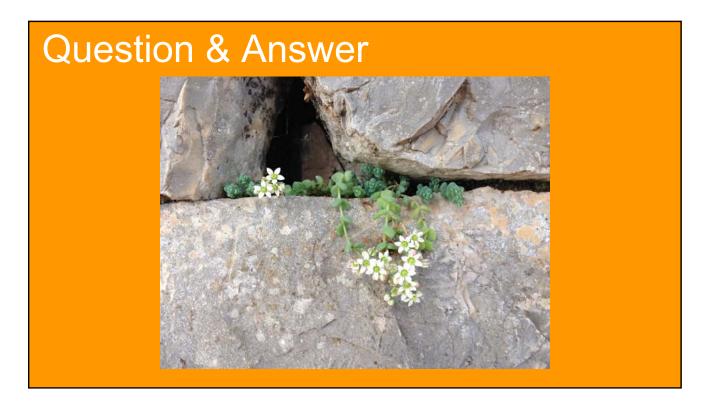
https://nrepp.samhsa.gov/Legacy/ViewIntervention.aspx?id=378

# **CRAFT Session Topics**

- Developing interests and social supports independent of the family member who uses substances (self-care).
- Engaging the person in substance treatment during windows of opportunity.

Sessions also include discussion of problems related to substance use as they come up week-to-week. Sessions can be added to include additional family members, or can include the person who uses substances in offering support and linkage to their own treatment.

https://nrepp.samhsa.gov/Legacy/ViewIntervention.aspx?id=378



# **Presenter Contact Information**



# Thank you!

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