



# 2014-2018 Data Trends: Family Involvement in Mental Health and Drug & Alcohol Treatment/Recovery

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# **Data Regarding Family Involvement in Bucks County Mental Health and Drug & Alcohol Treatment/Recovery 2014-2018**

As the Consumer and Family Satisfaction Team (CFST) in Bucks County, Voice and Vision, Inc. interviewed hundreds of people over the years regarding their experience with their mental health and/or drug & alcohol treatment.

In 2012, we reviewed what we had heard over the years from individuals and families. One of the salient findings was that family members wished it hadn't taken them so long to learn about available services and supports and how to best help their family member. Research literature also confirmed that individuals experience more healing and greater success through relationships in their own community and families.

As a result of these findings, in the last few years we have been asking people who they turn to for help and support besides the professional staff providing their services. In every survey project, a large percentage of people (69% to 88%, depending on the project) say they reach out to family. At the same time, we hear from individuals and family members that families are often only marginally included, if at all, in a person's treatment experience.

We offer this summary of data gathered over the last five years from individuals and families as a catalyst for conversations about family involvement in treatment and recovery. Following is a summary of four question areas about which individuals and families were asked. These are reviewed on the following pages:

- Is there a need for family involvement in mental health and/or drug & alcohol treatment/recovery?
- How have mental health and drug & alcohol providers been involving families in an individual's treatment and recovery (from the perspective of people we interviewed)?
- What do people in mental health and/or drug & alcohol treatment (and their families) want others to know?
- How do providers educate family members (or others important to people) to better understand challenges they face (from perspective of people interviewed)?

Because these question areas comprise a compilation from various surveys, not all questions were posed to all respondents represented in this report.



➤ **Where did Voice and Vision find this data?**

We reviewed surveys from 2014-2018, and compiled data regarding family involvement from the following surveys:

Survey type	Year of survey	# of adults surveyed
Adult Inpatient	2016	21
ACT/FACT/CTT	2016	80
D&A Transition Age Youth (ages 14-26)	2015	74
D&A Family Engagement	2017	44
Recovery Surveys	2014/15, 2015/16, 2016/17, 2017/18	183 82 65 65
Total		614

➤ **Is there a need for family involvement in mental health and/or drug & alcohol treatment/recovery?**

- Of the 496 people we interviewed over the past five years who were asked “Who do you turn to for support?”, 367 (74%) reported that they turn to family for support.
- During the 14/15 Recovery survey, people were asked what helps them prevent crisis/relapse. The top responses were “family, friends, other relationships”; 40% of those who had experienced a recent Inpatient stay gave this response. In the 2015/16 survey, over 40% of all respondents indicated that family/friends helped prevent crisis/relapse. During 2017/18 survey, when people were asked what is helping them to prevent crisis or relapse, over 80% replied “contact family or friends”.



- When youth/young adults in treatment for drug & alcohol use were asked if it is important to include family members (or other people important to them) in their treatment, 75% said “yes”. The youth/young adults gave the following reasons for including family members/others in a person’s treatment:
  - It helps to have visits, call, and support of family (when in an inpatient setting)
  - Including family helps the family better understand what it’s like to be an addict
  - Having family involved provides motivation
  - Family can learn to support recovery in positive ways
  - Including families enables therapist to understand the family history
  - It’s important to heal relationships and rebuild trust
  - Being separated from family is traumatic
  - If there is no family to include, then it would be important to identify another person able to support the person in treatment
- Families interviewed about their engagement in their family member’s D&A treatment shared the following insights about the positive contribution engaging families offers to a person’s recovery:
  - Maintains connection to family so that they realize that people care about them
  - Increases awareness of how their addiction impacts others
  - Provides motivation to remain in treatment
  - Sharing of family insight and knowledge of history enhances the therapeutic interventions
  - Family members can be effective advocates and assist with practical tasks difficult for their family member during the early stages of recovery
  - Family involvement ensures the family and therapist are “on the same page” to minimize manipulation by person in treatment

➤ **How have mental health and drug & alcohol providers been involving families in an individual’s treatment and recovery (from the perspective of people we interviewed)?**

As part of several survey projects, we sought to learn how an individual’s provider supported their family or other important relationships. We asked several different questions on various surveys. Generally, few people reported family involvement in their treatment.

Inpatient Survey:

- Four people (29%) interviewed for the Inpatient survey said that their family was involved in developing their aftercare plan. Another three people (21%) told us that they would have liked to have their family involved. They shared a few ways family involvement was helpful to them:
  - Their parent was able to hold medications and administer them allowing the individual to remain at home.



- Husband gained a greater understanding of the challenges the individual was dealing with, learned the signs of suicidality and how to handle them, and also learned how to get help when needed.
- One person ended up living with his mother after three months in a difficult aftercare situation. He felt having family involved in discharge planning would have been helpful as he's "burned a lot of bridges".

ACT/FACT/CTT survey:

- When asked how their team involved family and other significant people they reached out to, 44% said that the team doesn't involve them. Of those who did report family involvement, they indicated the following ways the team involved them:
  - Keep family informed about "what's going on" (41%)
  - Provide recommendations and encouragement for relating to family (9%)
  - Work with family regarding bill paying or medication administration (3%)

Recovery Surveys (This is a survey of randomly selected individuals who have received mental health and/or substance use related services)

- Forty-nine respondents to the 2014/15 Recovery survey (29%) and fifteen respondents to the 2015/16 Recovery survey (33%) indicated that services helped them to connect to other people in their life.
- Sixty of the 65 respondents to 2016/17 Recovery Survey (92%) shared comments about how services helped them connect to supports other than professionals. Of those 60, fourteen (23%) indicated that they didn't need help connecting to other supports; 29 people (48%) said that their services don't help in this area.
- ⊖ In the 2017/18 Recovery survey, 56 people (89%) indicated that, besides professionals, they turn to immediate/extended family or their significant other for support. Of those 56, 43 shared comments on a follow-up question about how their provider helps them; 36 of the 43 (84%) indicated that their provider helps them develop, foster or support relationships with people they turn to for support. Following is a summary of how their provider helped:
  - Provided educational groups for families regarding diagnosis and symptoms of relapse
  - Taught skills to improve relationships
  - Brought family into therapy sessions
  - Gave advice regarding relationships



### D&A Family Engagement Survey

- We asked family members of people receiving treatment for drug/alcohol addiction about their involvement in various aspects of treatment. The following indicates the percentage of respondents who had never been involved in that aspect of their family member's treatment:
  - 48% -- Assessment
  - 33% -- Therapy
  - 31% -- Family Education
  - 33% -- Discharge Planning
- When family were involved in the above phases of treatment, they reported the following as helpful:
  - Assessment: Being listened to, given an opportunity to share history and concerns, and being treated with respect and compassion were most helpful.
  - Family therapy sessions: Family members reported talking to the counsellor prior to therapy regarding their questions and concerns and being kept informed by the therapist helped the therapy. Maintaining a structure to the therapy session was also reported as helpful
  - Family Education: Providing quality speakers and media in education groups was important. Learning about the addiction process and what drugs do to the brain helped to build empathy and separate the person from their addiction. Family members also appreciated learning how to be supportive while allowing the person with an addiction to make their own decisions.
  - Discharge: Being kept informed and provided assistance "step by step" along with aftercare referrals was reported as helpful. Families expressed a desire for more planning with family when the person in treatment is returning home to live. Discussing options with the family and helping the family make decisions regarding the discharge plan were also helpful.

## ➤ **What do people in mental health and/or drug & alcohol treatment (and their families) want others to know?**

### ACT/FACT/CTT survey

- When asked what they would like people to know about mental illness and the process of recovery, 39% of ACT/FACT/CTT recipients indicated "to understand how difficult it is"; 15% indicated "to not judge/stereotype"; and 13% indicated "people need support". A few comments are particularly poignant:
  - "I have mental health problems, but I'm not crazy." (She wanted people to know what various diagnoses entail.)
  - "Don't be so judgmental. Don't immediately attribute everything to mental illness."



- “There can be too little help but there can also be too much help. If people are too involved in what you need to do for yourself, you become helpless. But if you get too little help, you get sicker.”

#### D&A TAY survey

- Youth/young adults were also asked what they’d like people close to them to know about addiction and recovery to better understand the challenges they face. Over 30% of respondents gave responses that reflected the following themes:
  - They need more understanding/knowledge/support
  - Addiction is hard; it controls them, and they are powerless
  - Addiction is a disease, not a choice

#### D&A Family Engagement survey

- Families shared what they have learned to help them better support their family member’s recovery:
  - It’s important to connect with others experiencing a similar situation
  - Be involved in treatment; learn about treatment options and seek well-trained and compassionate providers
  - Set boundaries, don’t enable, maintain empathy for the person with the addiction
  - Learn about the disease of addiction
  - Don’t give up

### ➤ **How do providers educate family members (or others important to people) to better understand challenges they face (from perspective of people interviewed)?**

- We asked ACT/FACT/CTT recipients how their team educates people in their life to better understand the challenges they face. Over half (54%) indicated that the team doesn’t do this. Others (30%) indicated that the team helps by talking to their family; the remaining 16% indicated either that the team didn’t need to talk to them, that the family didn’t want involvement with the ACT team, or that they provided education to people who weren’t family.
- Family members interviewed in the D&A Family survey reported a wide range of practices. While most Inpatient facilities required family attendance at some sort of orientation, that sometimes consisted only of outlining rules and procedures. Families reported that family education programs that incorporated quality education about the brain and the process of addiction and recovery with peer support from other families were the most helpful.



## ➤ Recommendations

Based on our interactions with people we interviewed over the last five years as well as current research, we suggest that greater involvement of families in all phases of a person's treatment can have a positive impact on both mental health and substance use recovery. We also heard from providers about the barriers they encounter in including families in treatment. The top three were resistance from the individual, unhealthy or stressful family interactions, and lack of interest of families. However, feedback from professionals seems to indicate that they often see family "involvement" as the same as family "therapy". We suggest that family "involvement" exists on a continuum with family "therapy" being one aspect of the continuum.

We therefore offer the following recommendations for consideration as ways to overcome barriers and increase family involvement in treatment and recovery:

- Help families to feel welcome at all stages of a person's treatment experience through compassionate and respectful interaction and by listening to their concerns.
- Connect people and their families at the first point of contact to other people & families who have faced similar challenges.
- Continue to build more opportunities for peer support, both for individuals and for families. This can be either formal peer support through a Certified Peer/Recovery Support individual (CPS or CRS) or informal peer support through encouragement of participation in peer-run community groups and informal relationships.
- Educate people in treatment about the benefits of involving families and give them options regarding the level of involvement. Periodically revisit to assess the appropriate level of involvement.
- Provide ways for families to be involved even when the person in treatment does not sign releases:
  - Enable families to share their observations and concerns
  - Offer opportunities for family support and education
  - Provide designated contacts where families can get general information about the treatment program and receive advice based on general principles
  - Inform families about treatment options and resources
- Engage families, and/or other people important to the individual in treatment, whenever possible, in crisis prevention planning and discharge planning, especially with individuals who report turning to family and other supports in times of stress.