

Partnering with Families Affected by Addiction & Mental Health Problems

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Acknowledgements

- Family members who participated
- Caroline Hebblethwaite
- Carol Parker
- Elaine Mason
- Sukhi Bubra
- Christine Bois
- Monique Bouvier
- And many others at CAMH and across Ontario

Goals

- **To explore the ways families are affected by and respond to addiction and mental health problems**
- **To describe the Partnering With Families Project, including initial research findings and materials and tools that were produced**
- **To promote the application of resources and services for families affected by addiction and mental health problems**

Why Involve Families?

- Families **ARE** involved
- Family members may need help
- Family can be a resource in the helping process
- Research supports family involvement being associated with improved treatment retention and outcome

Journey Into Illness

- Becoming ill is a process: it consists of events that occur in time and over time
- Some illness declares itself gradually
- Some illness declares itself dramatically
- Illness by its very nature is something that impinges on our capacities and/or possibly on our potentials

The Impact Of Illness On The Family

Enormous challenges in caring for a loved with addiction & mental health problems may include:

- Emotional, mental and physical exhaustion
- Feelings of extreme sadness, hopelessness and and helplessness
- Feelings of guilt, anger, bitterness and resentment
- Overwhelming preoccupation with ill loved one's health and safety

Illness in Someone You Care About ...

- In some ways it is harder to suffer the illness of someone else than it is to suffer our own illness
- The illness of someone we care about will likely impinge on how our own lives are lived
- In some ways, illness can challenge us to get in touch with what is really important in life
- But just as likely, illness can threaten and undermine life as we had previously known it, making us feel more afraid, more alone

Understanding Complex Problems

- It can be at least as difficult for family members to understand the complex ways addiction and mental health problems affect one another as it can be for health care professionals
- How to understand what is going on is one of the abiding challenges in the journey into and out of illness

Impact of Addictions & Mental Health on Caregivers & Other Family Members

- People with concurrent disorders more likely to seek help for a variety of health problems, but less likely to stay in treatment or to achieve good outcomes
- Have complex problems that are difficult to understand, let alone treat
- Experience acute distress (psychiatric and psycho-social crises such as suicide and interpersonal conflict)
- Experience chronic distress (persistent negative and positive symptoms, failed interpersonal relationships, loss of social support, lack of financial management, demoralization, homelessness;
- Often have reduced: nutrition status, self-care, emotional regulation (employment)
- Associated with increased mortality

Impact of Addiction & Mental Health Problems

- Negative impact felt not just by the person with the diagnosis, but also by people whose lives are involved with and affected by that person
- May adversely affect household functioning in many ways
- Social activities may be curtailed, routines upset, family life disrupted under the stress of the unpredictability of concurrent disorders.
- Increased family conflict
- More problems with community over ill person's behavior
Significant family financial stresses
- Increased guilt, shame, exhaustion
- Increased 'caregiver burden', anxiety and depression, hopelessness, disempowerment and stigma

Impact of Concurrent Disorders on Family Members: Summary

- Worry / Anxiety
- Guilt / Shame
- Secrecy / Isolation
- Stress of Living with Mental Health & Substance Use Disorders
- Conflict
- Frustration / Anger
- Sadness / Depression
- Loss
- Hopelessness
- Grief
- Demoralization
- Preoccupation
- Fear of Stigma (Enacted & Internalized)

How do we (helpers) see families and family members?

- Dysfunctional
- Pathogenic - schizophrenogenic
- Pathological
- "Sick"
- Enabling
- Co-dependent
- Interfering
- Conflicted
- Nuisance
- Blame-worthy
- Trouble

Why don't we work with families?

- Confidentiality
- Mandate
- Attitude & belief
- Time
- Experience
- Lack of knowledge
- Lack of skill

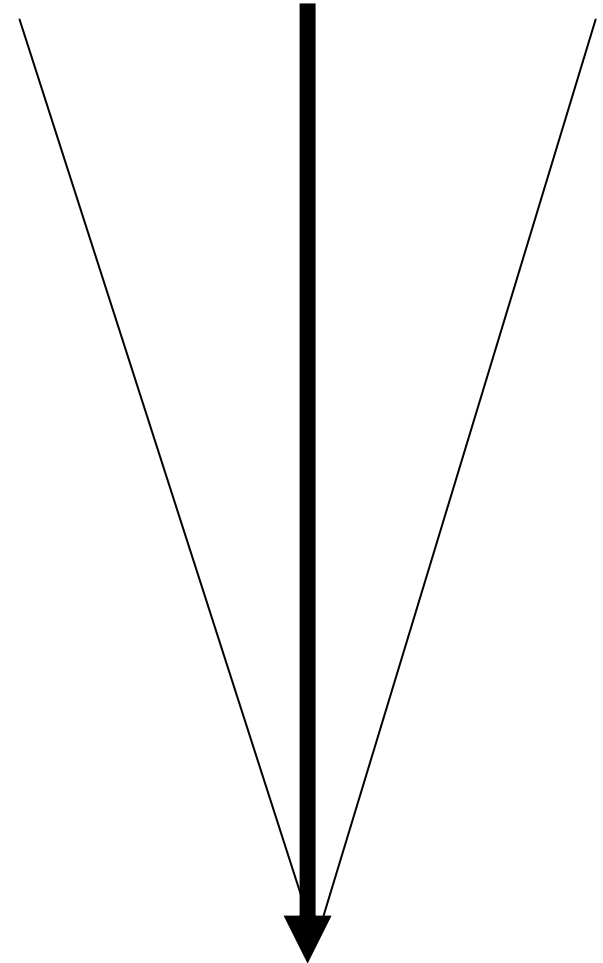
How do we involve families

Exercise: identify what happens in your agency to:

- Welcome
- Include
- Involve
-

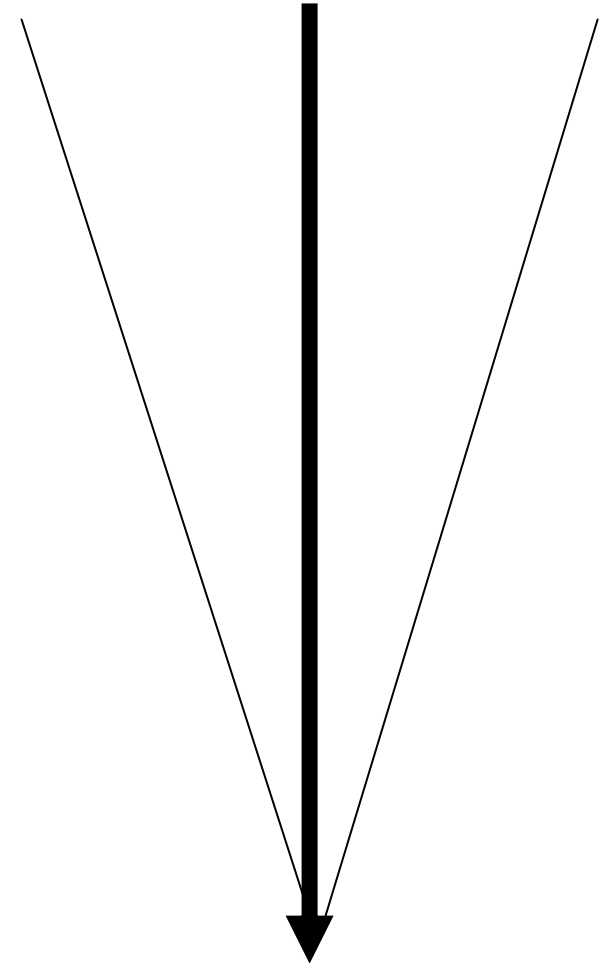
How do we involve families?

- Welcome
- Include
- Involve
- Adjunctive/collateral
- Family support & care
- Information
- Psycho-education
- Social & Peer support
- Consultation
- Counselling
- Therapy



How could we involve families?

- Welcome
- Include
- Involve
- Adjunctive/Collateral
- Family support & care
- Information
- Psycho-education
- Social & Peer Support
- Consultation
- Counselling
- Therapy



Support & Education for Family Members

- Family education models differ in format, duration, consumer participation, location, degree of emphasis on instructive components and techniques
- Impressive research base
- Considered an evidence-based practice

Support & Education for Family Members

- Research mainly conducted on *longer term* family groups (9 months or greater) with positive results
- Less research conducted on *shorter-term* family groups or interventions based on different models
- Very little research on family CD interventions

Support & Education for Family Members

Essential components of these interventions(?)

- More intensive or less intensive?
- Single- or multiple-family groups?
- Consumer included or family members only?
- Many gaps in knowledge have yet to be filled - however, research shows that *any* type of family program far surpasses usual services

Partnering With Families (PWF)

- Focus:
 - Psychoeducation
 - Facilitating Peer Support
- Family Input and Feedback:
 - Focus group & pilot group
- Literature

What did we do?

- How we set up the study

Manual Only N=18	Family Support Group N=20
<ul style="list-style-type: none">•CAMH, Toronto •Elmgrove, Brockville	<ul style="list-style-type: none">•CAMH, Toronto •Elmgrove, Brockville

INCLUSION CRITERIA

- Adult family member (self-defined e.g. relative, friend, partner, significant other, etc.) of someone with both a mental health and a substance use disorder
- Ill person may or may not have official diagnoses
- Ill person may or may not be in treatment currently or may or may not have been in treatment in the past.

What did we find?

Results for

(a) family CD support / educational group and

(b) manual-only intervention

showed significant improvements

from baseline assessment

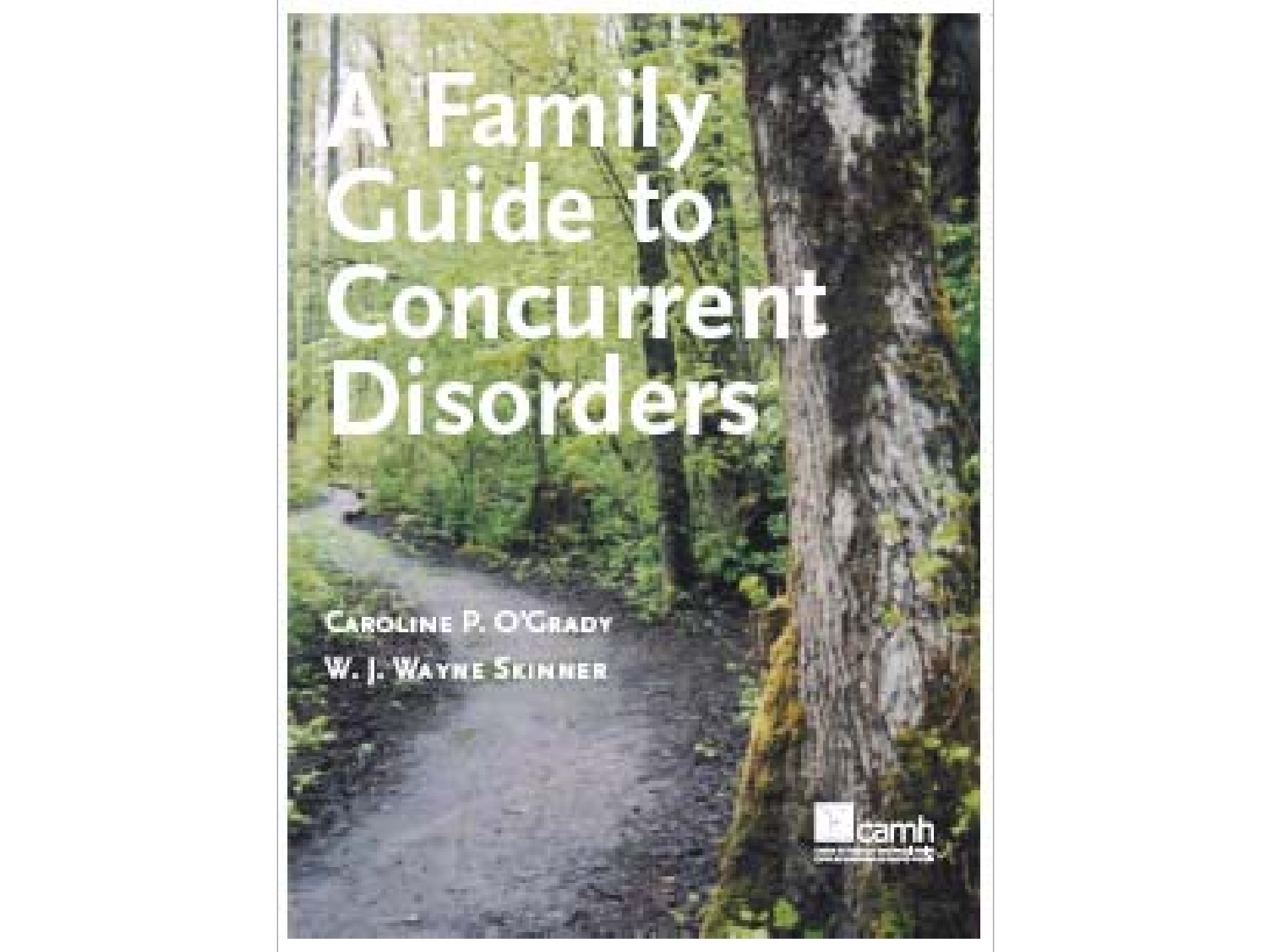
to completion of the intervention

Results continued

- Although results from manual-only intervention did not show as much improvement across the variables studied, there were no significant differences between interventions.
- Cannot conclude that one was superior to the other.
- Both interventions produced positive effects for participants

Resource Development

*A Family Guide to
Concurrent Disorders
&
Companion
Facilitators' Guide*

The background of the cover is a photograph of a forest. A dirt path winds through the trees, leading towards a small stream in the distance. In the foreground on the right, a large, moss-covered tree trunk is visible. The overall scene is lush and green, suggesting a natural, serene environment.

A Family Guide to Concurrent Disorders

CAROLINE P. O'GRADY

W. J. WAYNE SKINNER

 camh
CENTRE FOR ADDICTION
AND MENTAL HEALTH

Contents

1. Introduction to Concurrent Disorders

- » Concurrent disorders: terminology and definitions
- » Concurrent substance use and mental health problems
- » An Introduction to treatment

2. Substance use problems

- » The biopsychosocial approach
- » Why do people develop substance use problems?
- » Substance use disorders
- » Types of substances

3. Mental health problems

- » Why do people develop mental health problems?
- » Mental health disorders
- » Co-occurring substance use and mental health problems

Contents (continued)

4. The Impact of Concurrent Disorders on Family Members

- » Concurrent disorders and family life
- » Behaviour problems
- » Preoccupation effect
- » The positive aspects of caregiving

5. Family Members and the Importance of Self-care

- » Practicing self-care
- » Long-term self-care goals
- » Building a self-care plan of action

6. Treatment Issues and Approaches

- » Traditional approaches to treating concurrent mental health and substance use problems
- » Integrated treatment
- » Motivational approaches to treatment
- » What does treatment involve?
- » Navigating the treatment system

Contents (continued)

7. Medication

- » Drug therapy and mental health problems
- » Medication management
- » Drug therapy and substance use problems
- » Drug interactions

8. Crisis Management

- » Being ready for a crisis
- » Treatment in a crisis
- » Developing an emergency action plan
- » Issues for families

9. Stigma

- » Experiencing stigma
- » Understanding stigma
- » Suffering stigma
- » Combating stigma
- » Burnout

Contents (continued)

10. Relapse Prevention

- » What is a relapse?
- » Relapse prevention: substance use
- » Relapse prevention: mental health

11. Recovery

- » The role of hope in recovery
- » Establishing and sustaining recovery
- » Family members' role in recovery

12. Resources

Group 1

Introduction to Concurrent Disorders

- Session Goals
 - Welcome and engage participants.
 - Ice breaker exercise
 - Provide overview of support group process.
 - Agenda
 - Identify and address participants' concerns and issues.
 - Begin discussion of interaction of substance use and mental health problems.

Group 1.

Introduction to Concurrent Disorders

- Content Outline
 - Understanding the terminology.
 - The relationship between substance use and mental health problems.
 - The impact of concurrent disorders.
 - The biopsychosocial approach to understanding concurrent disorders.
 - An introduction to treatment.

Group 2

Substance Use Problems

- **Session Goals**

- Provide overview of substance use problems.
- Enhance concern and regard for people with substance use and other addictions.
- Help participants understand how substance use problems affect their families.
- Encourage identification of practical concerns and goals that members have for their families.

Group 2

Substance Use Problems

- Content Outline
 - DSM criteria for substance related disorders.
 - Risk of becoming substance dependent.
 - Why people become substance dependent.
 - Types of substances and their effects.
- Group Activity
 - Canvas group about problems resulting from SU/gambling
 - Explore possible benefits from using substances/gambling

Group 3

Mental Health Problems

- **Session Goals**

- Provide an overview of mental health problems.
- Help participants understand mental health issues affecting their family.
- Enhance awareness of what it is like to have mental health issues and the resulting increased susceptibility to substance use/other addictions.
- Encourage identification of practical approaches to addressing issues of daily living.

Group 3

Mental Health Problems

- Content Outline
 - Why do people develop mental health problems
 - Mental health disorders.
 - Personality disorders.
- Activities
 - Identifying Mental Health Problems

Group 4

The Impact on Families

- Session Goals
 - Provide overview of ways families are affected by concurrent disorders.
 - Help participants identify specific areas in which their lives have been affected by concurrent disorders.
 - Highlight the importance of sharing experiences with peers and trusted health professionals.

Group 4

The Impact on Families

- Content Outline
 - Behaviour changes.
 - Relationship changes.
 - Increased responsibility.
 - Impact on caregivers.

Group 4

The Impact on Families

- Activities
 - Personal Impact Log
 - Preoccupation and Impact Quiz
 - Family Index of Concern Quiz

Activity 4-1: Personal impact log

This log will help you think about the effects of your loved one's mental illness and substance use problems on your own physical, emotional, social and spiritual health.

PERSONAL IMPACT LOG

Physical Health

Emotional Health

Social Life

Spiritual Life

Financial Health

Group 5

Self-Care

- Session Goals
 - Explore the benefits of taking care of oneself.
 - Explore self-care strategies across all domains of participants' lives(physical, emotional, social, spiritual, financial).
 - Encourage and help participants as they develop their own self care plans.

Group 5

Self-Care

- Content Outline
 - Short-term self-care strategies.
 - Dealing with difficult feelings.
 - Long-term self-care goals.
 - Building a self-care plan.

Group 5

Self-Care

- Activities
 - Identifying the Quick Wins
 - Stop-Start-Continue
 - Self-Care Plan
 - Assessing Resilience

Is It Okay to Take Care of Myself?

"Unfortunately, most people react to the illness of a loved one as if it were a fifty-yard dash, when in fact it's more like a marathon. You need to pace yourself and get sustenance or you will collapse long before the finish line. You need to look closely at the support and nourishment you will require to stay healthy ... over the long haul."

(Felder, L. , 1990)

Self-Care: Why Is This Difficult for Family Members?

- "I'm too busy to have lunch with a friend"
- "If I'm not there to take care of my son all the time, he won't get better."
- "It's self-indulgent for me to be out enjoying myself when my sister can't come with me."
- "I'll be okay – just help my husband get treatment and I won't have any problems"
- "I'm too anxious worrying about my partner – and I just don't have the time or energy to think about myself"

Self-Care

- Family members who find themselves in the role of caregiver of a loved one with concurrent disorders must continually determine how to balance the many demands of their lives
- Most often, it is the needs of the caregiver that are neglected
- But if you think of the caring work you do for your loved one as pouring nourishing energy out of a pitcher filled with love, imagine what would happen if the pitcher ran dry. Taking time to replenish inner resources can give you the strength to keep going over the long haul.

BIO-PSYCHO-SOCIAL-SPIRITUAL SELF-CARE PLAN



Financial Health

Group 6

Stigma

- Session Goals

- Enhance the awareness of the impact of stigma on families affected by concurrent disorders.
- Help participants identify the way in which their families have suffered the effects of stigma.
- Identify strategies to fight against stigma on a personal, family, community and broader social level.

Group 6

Stigma

- Content Outline
 - Understanding stigma.
 - Experiencing stigma.
 - Surviving stigma.
 - Combating stigma.

Group 7

Navigating the Treatment System

- Session Goals

- Review experiences family members have had with the treatment system.
- Identify barriers to getting treatment and support services to work together and to include family members.
- Imagine an ideal system of care and support.
- Discuss ways that family members can be effective advocates for the needs of people with concurrent disorders and their families.

Group 7

Navigating the Treatment System

- Content Outline
 - Is there a treatment system?
 - What should happen: integrated treatment.
 - Sequential or parallel treatment.
 - Finding treatment.
 - Screening and assessment.
 - Treatment planning.
 - Treatment.

Group 7

Navigating the Treatment System

- Activities
 - Exploring Ambivalence About Change
 - Family Concurrent Disorders Readiness to Change Ruler

Group 8

Medication

- Session Goals
 - Provide an overview of the major classifications of psychiatric medications.
 - Facilitate discussion about the ways that drugs/alcohol may interact with prescribed medications.
 - Raise awareness of the importance of keeping up-to-date records of prescribed medications.

Group 8

Medication

- Content Outline
 - Drug therapy for mental health problems.
 - Drug therapy for substance use problems.
 - Medication management.
 - Medication abuse/dependence.
 - Drug interactions.
 - Ongoing treatment.
 - Stopping medication.
- Activities
 - Tracking Side Effects

Group 9

Relapse Prevention

- Session Goals
 - Orient participants to addiction and mental health problems as chronic relapsing conditions.
 - Discuss some of the common features of relapse as a process.
 - Explore the ways that relapses can be used as learning experiences that enhance the prospect of long-term recovery.
 - Discuss practical issues that participants face and how relapse prevention approaches have/can help them deal with relapsing nature of co-occurring addiction and mental health problems.

Group 9

Relapse Prevention

- Content Outline
 - Relapse prevention:substance use.
 - Relapse prevention:mental health.
- Activities
 - Identifying Risk factors
 - Relapse Prevention Plan
 - Caregiver Relapse Prevention Plan

Group 10

Crisis and Emergency

- Session Goals
 - Help participants identify potential crisis and emergency risks that might apply to their situation.
 - Encourage the development of crisis and emergency plans that allow quick, effective action when needed.
 - Increase confidence that if families are prepared, crises and emergencies can be better managed

Group 10

Crisis and Emergency

- Content Outline
 - Crisis.
 - When a crisis becomes an emergency.
 - Getting treatment in an emergency situation.
 - Creating an emergency plan.
 - The forensic mental health system.
- Activities
 - Reflecting on an Escalating Crisis
 - Creating a Crisis Card

Group 11

Recovery

- Session Goals
 - Facilitate discussion about the “journey of recovery” metaphor and how it applies to families.
 - Help participants describe their personal journeys of recovery and think about where they are on this journey.
 - Help participants to identify factors that can help move them forward in a positive direction.

Group 11

Recovery

- Content Outline
 - The role of hope in recovery.
 - Establishing and sustaining recovery.
 - Family members' role in recovery

Group 11

Recovery

- **Activities**
 - What does Recovery Mean to Me?
 - What does Recovery Mean to my Relative?
 - Your Recovery Journey
 - Recovery Attitudes and Questionnaire

A Note on 'Compassion Fatigue'

- 'Caregiver Burden' or 'Compassion Fatigue'?
- Is there a difference?
- What do you think of when one or the other is used?
- Does language matter?

The Preoccupation & Impact Scale (PAIS)

-- O'Grady & Skinner, 2004

- Early version of a new 'tool'
- Aim:
 - to help you think about how absorbed you are with thoughts, fears and worries about your ill family member.
 - to encourage you to consider the degree to which the preoccupation effect has infiltrated your life

The Preoccupation & Impact Scale (PAIS)

-- O'Grady & Skinner, 2007

- On the other hand, completing this scale may help you realize that you have moved beyond a constant state of preoccupation to an emotionally healthier, more balanced and serene life style.

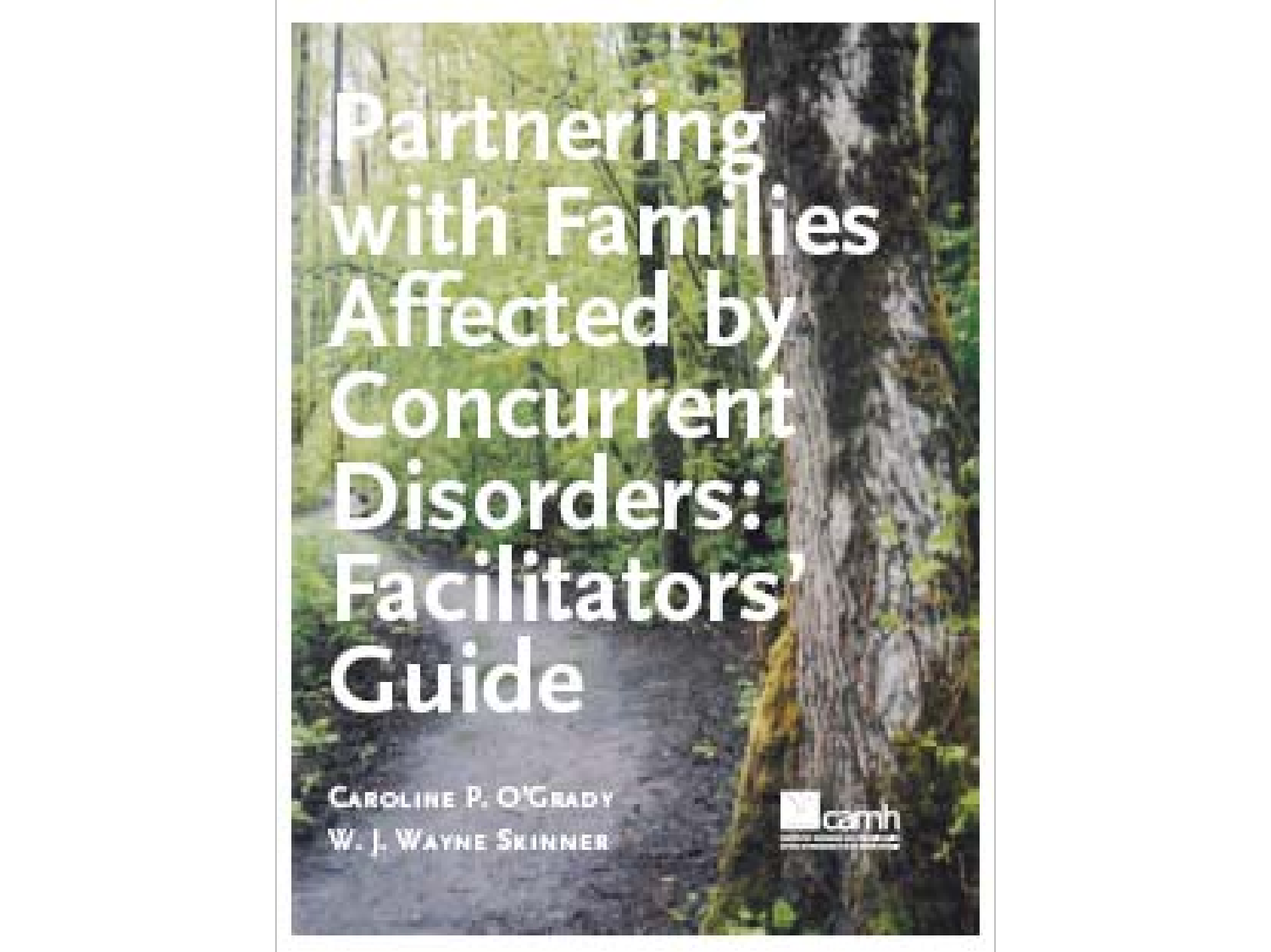
The Family Concurrent Disorders Index Of Concerns Scale

(O'Grady & Skinner, 2007)

- The items included in this tool may also help you pinpoint the areas about which you are most concerned and to think about if and how you would like to work towards resolving some of these concerns. It is worth giving some thought to how you might take small steps in effecting some change in particular areas.
- Completing this scale may also help you to (a) identify any personal areas of concern over which you have little (if any) control and (b) consider how you might learn to accept what you cannot change.

The Family Concurrent Disorders Index Of Concerns Scale (Quiz)

- For each item, circle the number that best corresponds with *how you are feeling right now*. Once you have completed all of the questions, add them up to get your total score. The higher your total score, the more uneasy, worried, or alarmed you are overall about your situation and the more you need to focus on your own emotional, social and physical health and well-being.

A photograph of a dirt path winding through a forest. The path is in the foreground, leading into the distance. On the right side of the path, a large tree trunk is visible, covered in moss. The background is filled with green foliage and trees, creating a sense of depth and a natural setting.

Partnering with Families Affected by Concurrent Disorders: Facilitators' Guide

CAROLINE P. O'GRADY
W. J. WAYNE SKINNER



Facilitators' Guide

I: Overview

II: Evidence base

The case for working with families

The case for psychoeducation

The case for family education and support programs

Supporting Families Affected by Concurrent Disorders

III: Working with families

IV: Preparation

Getting organizational support for family programs

Choosing a delivery method

Adapting the program

Structure

Recruitment

Follow-up

O'Grady & Skinner 2007

...continued

Facilitators' Guide (continued)

V: Implementation

- Checklists and guidelines

- Role of facilitators

- Challenges

V1: Evaluation

- Tools for measuring impact

- Qualitative measures

VII: Session outlines

- Session goals

- Content outline

- Activities

- Facilitators' notes

Glossary

References

Resources

Facilitating Family Support & Educational Groups

- Task vs process approach
 - PP example
- Instructing vs facilitating
- Self care - shifting the focus
- Examples:
 - grapefruit
 - letting go & getting back (mother & son)
- Exercises

Where Do We Go From Here?

'A little knowledge that acts is worth infinitely more than much knowledge that is idle'

Next Steps

- Where do we go from here?
- Building a community of practice

A Community of Practice

- C'est what?
- *A group of like-minded clinicians who are committed to developing skills in a specific practice area...*
- *...working with families affected by concurrent disorders...*
- What skills do we want to develop?
- How important is it to contribute to and be supported by a community of colleagues sharing the same work?
- What elements would you want to build in a COP for Partnering With Families?

CD Family Community of Practice

- 19 communities across Ontario
- Addiction and Mental Health Agencies
- Providing Peer Support and Education Groups for family members
- Evaluation of process and impact using participant feedback and facilitator observations

Research: Current & Future Directions ...

1. Pilot study – *Online Peer Support and Education*
– **Recruiting Family Members Now!**
{** For more information about this new research study, see next slide!}
2. Evaluating Community of Practice (Process + Outcome)
3. Replication & extension studies

Pilot Study of a Family Concurrent Disorders Internet-Delivered Support / Educational Group

- This new research study involves an online, 12-week, peer support, professionally facilitated support educational group for family members of persons with co-occurring mental health and addiction problems. For the educational material, the groups will use “A Family Guide to Concurrent Disorders” (O’Grady & Skinner, 2007).
- Participants will be able to access these online groups at any time of the day, 7 days a week, from any location where they have access to a computer and to the internet.
- Every research participant will use an **anonymous Username and a confidential password** to access these groups. The family CD research study website has been professionally developed and any link to the participants’ real identities or real names is **STRICTLY CONFIDENTIAL** and remains SOLELY with the Principal Investigator of this research study, Dr. Caroline O’Grady.
- Are you over 18 years of age? Do you have a family member (blood relative, close friend, significant other, partner, etc.) who has *both* a mental health problem and a problem with drugs and / or alcohol? Do you have access to a computer and to the Internet? Are you interested in joining this study? **Contact Dr. Caroline O’Grady** at:
 - (Tel): **(416) 535-8501 ext. 6084**
 - (Email): **caroline_o'grady@camh.net**

Partnering with Families:

Our vision

- Families are recognized for their knowledge & wisdom based on first-hand experience
- In the spirit of collaboration and mutual respect, families are accorded the status of experts in their own right and valued as partners in finding solutions for co-occurring addiction and mental health problems

Thank you!

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*From time to time
the State has made
strenuous efforts
to mould the Family
according to its needs;
but ultimately the
State itself must
always be moulded by
the Family, since it is
in the Family that the
citizen is made.*

*Quote by Helen Bosanquet (1860–1925)
introducing the debut issue of The Family in 1920.*