NATURAL SUPPORTS FOR FAMILY CRISIS MANAGEMENT

Presented By:
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At the conclusion of training participants will be able to:

- Define the term natural supports as it pertains to crisis planning and management
- Differentiate between the various natural supports and identify ways to engage those natural supports in the treatment and recovery process
- List 4 critical clinical reasons natural supports need to be included in the treatment process
- Understand how family-based approaches and family-centered recovery supports help foster resilience and boost protective factors
- List 2 reasons on how treatment outcomes are increased by enhanced family involvement
WHEN YOU THINK OF THE WORD “FAMILY”, WHAT DO YOU THINK OF?
FAMILY AS A NATURAL SUPPORT

Families are...

• Households in which we live
• A primary way we pass on cultural traditions and teach how to interact with other people.
• The basis for child rearing and the establishment of rules
• Complex in their definitions, roles, responsibilities, and interaction
• Intertwined in the recovery process: either supportive or chaotically

In treatment family is “whoever has your back”
WHO CAN BE A NATURAL SUPPORT?

- Spouses, parents, and other relatives
- Old or newly formed friendships
- Community connections and resources
- Peers met in treatment or support groups

Crisis related issues often have a disruptive, stressful, and challenging impact on the person seeking care, their family members and significant others.
FAMILY INVOLVEMENT

Those who have family involvement more often seek and remain in treatment (NIDA)

"Addiction is a family disease."
"One person may use, but the whole family suffers."

Source: https://weheartit.com/entry/326953069
Addiction is a disease of isolation, and the healing of this disease is through the connection to others and themselves so involving others outside of treatment becomes a critical element to supporting long term recovery.
Mental illness, substance abuse, and other complex issues are not experienced in a vacuum; family and friends are also impacted. Even in recovery, families feel the effects that have moved them, separately and as a unit. For a system that is used to crisis, without getting treatment themselves, families may engage in old behaviors perpetuating the crisis. When someone is hospitalized for substance use or mental health concerns; Both separation and reunification can be stressful for the family.
SUPPORTIVE DEMOGRAPHICS

• Most family members being cared for are under age 40, while the median age is 46.3
• Almost half live in same household (45%) or within 20 miles (27%) as their caregiver
• 30% of the individuals also have an alcohol or substance abuse issue
• Almost half are financially dependent on family and friends

Caregiving in the U.S. 2015, National Alliance for Caregiving and AARP Public Policy Institute
THE ROLE OF SOCIAL SUPPORT

- Lack of social support and frequent feelings of loneliness increase infection, illness, and death rates, as well as cognitive decline.

- This highlights the importance of natural supports in the road to recovery.

Source: https://sbcsurf.com/logan-landry-isolation/
2014-2018 Data Trends: Family Involvement in Mental Health and Drug & Alcohol Treatment/Recovery

How to evaluate and grow from the findings

Voice and Visions Family Involvement Project 2014-2018
Of the 496 people interviewed over the past five years who were asked “Who do you turn to for support?”, 74% reported that they turn to family for support.

During the 2014/15 Recovery survey and 2015/16, people were asked: “What helps them prevent crisis/relapse?” 40% reported “family, friends, other relationships.”

During 2017/18 survey, when people were asked what is helping them to prevent crisis or relapse, over 80% replied, “contact family or friends.”
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.

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.
ENGAGING IN MEANINGFUL AND SUSTAINABLE TREATMENT

By understanding the needs of the community and the potential barriers families may face, we as providers can assess how to best help them engage in the treatment of their loved one while also helping to empower the families in ways, they can become engaged and reiterate the importance of their participation.

Understanding the risks and vulnerabilities of a how mental illness and trauma increase the likelihood of a Substance Use Disorder.

Understand and identify key factors needed to engage them in treatment.

Families are often not engaged in the treatment of their loved one, and as providers and families we need to explore and better understand how we can engage the family in ways that help promote recovery.
WHY ARE FAMILIES NOT OFTEN INVOLVED?

• Families often do not know what treatment is all about and are “left in the dark.”

• Often the focus is on the patient's behaviors as isolated rather than in the context of the system.

• We, as clinicians, may minimize the importance of the family-projecting the notion “they don’t want to participate.”
WHAT ARE THE BARRIERS TO ENGAGING NATURAL SUPPORTS?

• Shame
• Fear
• Anger
• Overwhelmed
• Learned helplessness
• ....
OTHER FACTORS IMPACTING FAMILY INVOLVEMENT

- Financial barriers
- Work related issues: difficulty taking off work
- Transportation
- Distance
HOW DOES TRAUMA IMPACT ENGAGEMENT?
Do we as providers treat the family trauma differently than the patient’s?

- What would PTSD look like in a family?
- What behaviors might we see?
FAMILY SYSTEMS APPROACH TO TRAUMA

Trauma overwhelms the system

• How can we tell what system the family is in?
• How do we approach the family in each system?
TRAUMATIC FAMILY EVENTS

- Witnessing an Overdose
- Domestic violence
- Homelessness
- Crisis management of mental health
- Behaviors associated with substance use seeking
- Police at the home
- Daily life and death threats

All of these events begin to shape the circuitry of the family- chronic repeated stress impacts the nervous system.
• Toxic stress, the most threatening, is associated with strong and prolonged activation of the body’s stress management systems in the absence of the buffering protection of support.

• Toxic stress emerges in the face of loss—conditions of continuous family chaos; persistent emotional, physical and or sexual abuse; chronic parental depression; persistent parental substance abuse or other manifestations of addiction; and ongoing emotional or physical neglect.

(Black, 2018)
• Understand what behaviors of the family are traumatic responses—“enabling” or “codependency.”

• Families need help recognizing and then validating their traumatic responses.

• Families need help seeing the changes made in their family system.

• Families should learn to regulate skills that will empower them to be able to support themselves and their loved one in recovery.

(Black, 2018)
HOW DO FAMILIES ORGANIZE AROUND THE DISEASE?

• Begin to love in a shroud of fear and negativity.

• Develop a misplacement and imbalance of duties within the system.

• Children may also develop elaborate systems of denial to protect themselves against the reality of a parent’s addiction.

• Inconsistencies of parenting may impact attachment.
THE “FAMILY BRAIN” AND DEVELOPMENT OF BEHAVIORS

• “Codependency” is when the loved one adapts to the unacceptable substance misuse behaviors in order to cope (and in some cases survive).

• New brain research suggests the “codependent” loved one has developed the fight or flight stress response neural network reactions and coping patterns (Frederiksen).

Source: CBTandfeelinggood.com
• Our understanding of the brain helps to explain addiction as a “family disease” because all members in the family develop unhealthy neural networks they would not have wired if it were not for substance use affecting their family.

• Families impacted with physical illness also develop similar kinds of emotional responses and behaviors.

• When we place the health, welfare, and safety of others before our own needs, we can lose contact with our individual needs and sense of self.

• This codependency is what impacts our relationships and our ability to have healthy relationships with family, friends, etc.
• What are barriers that our profession creates?
• What fears or concerns in engaging families do we have?
• What are we doing that perpetuates the lack of involvement?
COMING TOGETHER & EMPOWERING FAMILIES

Source: mylittleblackbook.com.uk
• Consider the family from the patient’s point of view- how would the patient describe the family members and vise versa?

• “Assess” the family’s effectiveness of communication, boundary setting, supportiveness or negativity, parenting skills, conflict management, and understanding of addiction.

• Many families reject participation in the treatment process. But after a period of time often become willing to participate. Don’t give up! Try… Try again!

• Family Therapy is working on the family system with the focus on education, support, and communication skills to improve family functioning, interactional patterns, and re-establish family boundaries.
WHY DO FAMILIES NEED TO BE INVOLVED?

- Explore normative family roles
- Develop and explore their strengths
- Problem solve their own issues
- Address their own issues surrounding the addiction
- Be a part of the recovery not the addiction
WHY DOES THE CLINICIAN NEED THE FAMILIES TO BE INVOLVED?

- Understand behaviors
- Identify resources
- Collateral information
- Full assessment
- Increase compliance and decrease drop out rate
HOW TO ESTABLISH A WORKING RELATIONSHIP WITH THE FAMILIES
DON’T BE THE BILL COLLECTOR
# STRATEGIES FOR ENGAGING FAMILIES

## Dignity
- Initial contact!!
- Strong therapeutic alliance
- Demonstrating respect and dignity: don’t push families when they are not ready, this will increase resistance
- Validate their fears and frustrations
- Interpret their reason for resistance and work with your hypothesis

## Education
- Education: parent training, education on addiction, mental health, brain development…
- Identify the FAMILIES goals
- Learn to understand and respect the resistance
- Strategize ways to keep loved one in treatment
RECOGNIZE THE THERAPEUTIC REASONS FOR FAMILIES’ RESISTANCE

Shame/Guilt

Secrets

Learned helplessness (trauma)

Fear

Anger
CREATE A STRONG THERAPEUTIC ALLIANCE

• Their struggles and courage

• Every family has its own unique story

• Their experiences and expertise as parents

• Create a mutual conversation based on the family’s concerns

Validate

Honor

Respect

Listen
Goal of treatment is to meet the needs of all family members, not just the individual.

Address the interdependent nature of family relationships and how these relationships serve the individual.
GOAL OF INVOLVING NATURAL SUPPORTS IN CRISIS

Seeks to use the family’s strengths and resources to help find ways to live without substances of abuse, manage the crisis and encourage support resources for all.
• Explore the impact of the crisis(es) on both the individual and the family, recognizing the roles within the family, and the trauma.
• Help the family make interpersonal, intrapersonal, and environmental changes by exploring anger, guilt, forgiveness, “enabling.”
• Help all family members understand, process, and support the changes that are occurring.
• Identify triggers for the family and individual.
• Help the family create a language of recovery.
• Recognize the complexity of the relational patterns and alter them to bring about productive change for the entire family.

• Understand that a change in any part of the system will bring about changes in all other areas.

• Case examples…
PROMOTING RECOVERY FOR THE FAMILY

• Help families see that it is OK for the person to accept the consequences of their own behaviors.

• Encourage families to find their happiness- take the wheel back

Be a part of the Recovery not the addiction

• “You can’t save them from themselves”

• Learn how to set boundaries for yourself- not to control the crisis

• Help families regain their lives! Legally, financially and emotionally
Support

• Encourage families to get educated about addiction: this sets up realistic expectations and hope.

• Encourage families to get involved in their own support groups and their own treatment.

• Support the progress, even small steps. It’s OK to be happy TODAY! Families are often afraid to enjoy the progress for fear of the old behaviors.
Help families be consistent

- Create a stable and dependable foundation. “Help them onto your boat.”

- Say what you mean and mean what you say- throw out unrealistic expectations as bargaining tools in the relationship.

- Don’t ask a question to which you already know the answer.

Emotional Regulation

- Help families diminish the criticizing, control, shame or rejection.

- Help families process their own emotions and how this has affected them and the system.

- Help families detach from the crisis yet heal together.

- Ownership of recovery must be the individuals.

“when people do things because we told them to, we deprive them of the satisfaction of solving a problem on their own”
HOPE TO FAMILIES

• Out with the old and in with the new

• New Science shows how kindness, positive reinforcement, and motivational and behavioral strategies can help families support their loved one through recovery

• Using the transformative power of relationships for positive change to remind us that although no one can change another person we can help in inspiring change

(Foote et al, 2014)
STRENGTH OF FAMILY ENGAGEMENT

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 TO HELP THE NATURAL SUPPORT TO EMPOWER THEIR LOVED ONE

**Provide**
- Provide educational groups for families regarding diagnosis and symptoms of relapse

**Teach**
- Teach skills to improve relationships

**Bring**
- Bring family into therapy sessions to help with communication and boundary setting

**Offer**
- Offer advice regarding relationships and how to support recovery behaviors as opposed to addictive or crisis-oriented behaviors
ADDRESSING THE BARRIERS

Lack of healthcare

Transportation

Childcare

Others??

How do we as a community support the system while acknowledging the potential for real-life barriers?
THE TAKE AWAY FOR FAMILIES AND TREATMENT PROVIDERS

- Families want to be involved but may lack the support
- Providers need support in how to engage families in ways that are supportive and meaningful
- Fear on both sides can be one of the greatest barriers
- Invite family members to present experiences at provider meetings
- Ensure family members are present as critical updates are shared
- Provide family education and support resources and referrals

HOPE sits in the ability to get additional resources to know how to support recovery but also to feel empowered to be a part of the journey

Families are resilient and with the support from providers and the community they can make powerful changes


• Substance Abuse and Mental Health Services Administration. SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.


• Voice and Visions Family Involvement Project 2014-2018 Data Trends: Family Involvement in Mental Health and Drug & Alcohol Treatment/Recovery


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