

Effective Interventions Unit

Support for the families of drug users: A review of the literature

Summary

This research summary provides an overview of the findings from a review of the literature on the needs of, and services for, families of drug users. The full report is available from the EIU.

The literature review was commissioned from the Drugs Misuse Research Programme as part of a wider review by the EIU of the evidence in this area. The report of this wider work, 'Supporting families and carers of drug users: a review', is available separately from the EIU.

Introduction

A literature search and review was conducted using standard bibliographic search procedures in order to:

- establish what is known about the support needs of families of drug users
- establish what is known about effective ways of addressing those needs
- examine whether, and how, family support groups/ services link with other services
- examine whether involving families within the treatment or service offered to the drug user has beneficial effects upon the family and the drug user

Studies were typified as focussing on *needs* or experiences of families of drug users; *descriptive* studies outlining particular interventions or services; *evaluative* studies that assessed the impact of interventions or services; *policy/professional guidance* literature aimed at improving professional practice; and *grey* literature. 104 articles were reviewed but few directly related to the needs of families of drug users or how those needs might best be met. There were few evaluation studies; of those, most were small scale and with results that could not be generalised.

Findings

Needs of families

Effects of drug use on family members include:

- depression;
- adjustment and behavioural disorder;
- deterioration in family relationships;
- increased likelihood of domestic violence;
- criminal behaviour;
- isolation;
- withdrawal;
- stigma; and
- concealment.

Although some of these effects are reported in research on alcohol misuse, there may be important differences in experiences and needs relating to different substances as well as to poly-substance use.

The review identified that 'the family' is often treated as a single unit in the literature. However, studies have shown that different family members have different experiences

The review is at <http://www.drugmisuse.isdscotland.org/eiu/eiu.htm>
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and perceptions depending on their relationship to the drug user. A concern for the child is prominent, and the emotional and behavioural effects of parental drug use on children are documented. Some children play a caring role in their families. Other research focuses on parenting, although this is almost exclusively on mothers, whether or not they are drug users themselves. Isolation may be a barrier to seeking support and the families of drug users, especially grandparents, are a hidden population.

Ways of coping with the impact drug use has on families have been identified. These include toleration, engagement, withdrawal and concealment. No one style emerges from the literature as most appropriate. They may relate to different family members and coping styles can change over time. However, these coping styles may influence support sought or the nature of the service provided. Most interventions with families aim to change family dynamics, but there is little reflection in the studies reviewed about what family characteristics or types are considered as important.

Support for families

A range of forms of support is described in different studies, although evaluations of these can seldom be generalised. An exception is an evaluation of family skills training where parenting outcomes were improved amongst drug users themselves; however, no benefit was identified for children. Although some research identified significant improvement in a person's substance abuse problem and in other measures relating to the family, most improvement was small, and sometimes there was none at all. However, support for parenting seemed to be rated highly by service users, and wraparound services (providing a range of care and support tailored to an individual family) similarly had some positive outcomes. Many services described support for family caregivers, though these were most commonly aimed at mothers or partners. Group or individual interventions may have beneficial effects in different areas of a caregiver's life.

There is almost a complete absence of documentation and research into family support groups. What there is suggests they might be effective in addressing some family issues, but research is descriptive rather than evaluative. Such issues relate to families being able to express their own needs and not having to be influenced by a professional discourse. The family focus of such groups balances out the priorities of intensive interventions, which tend to emphasise the needs of the user rather than the family. However, they may enable referral to other agencies as appropriate. The support needs of grandparents are little documented, although there may often continue to be a parenting role for both their children and grandchildren. Research identifies that their financial needs are not met.

Services

The involvement of family members in treatment programmes has been shown, in some cases, to improve their effectiveness as regards positive outcomes for the substance user, sometimes even when the user is not directly involved in treatment, such as in Unilateral Family Therapy. Here improvements in drug abstinence and social functioning have been reported. There is less research on possible improvement in families themselves. Interventions where the primary focus was on support of the families per se were less common. This reflects the service based focus of many of the studies; it is possible that interventions which develop from family support groups may be oriented more around the family as a whole and less around the behaviour of the drug users, but they are not reported in the literature.

Evaluations of unilateral interventions are rare, although such interventions do not directly involve the drug user. Al-Anon and Nar-Anon are both examples of such interventions; particular strengths may be the improvement of the well being of the family member. Community Reinforcement Training may also demonstrate a positive effect on family members.

Conclusions

The review suggests that although there is a wide diversity of literature, most are descriptive pieces about service provision and development; most of the evaluation studies reviewed fall short of the established methodological criteria for establishing rigour. There was seldom a direct link between assessment of need and service provision, although that may have taken place at an informal level as part of service delivery.

- In terms of establishing what is known about the support needs of families of drug users, the review suggests that the diverse needs of all family members are not well documented, especially those of wide kin such as grandparents but also of siblings.
- In trying to establish what is known about effective ways of addressing those needs, this review suggests that the match between service provision and need is not always explicitly derived from a needs assessment that prioritises users' own views.
- The review could shed only limited light on whether or how family support groups and services link with other services. Few articles reported on the work of family support groups, neither did they take a holistic view of the range of services an individual or family may be accessing. However, some partnership working has been noted in the UK.
- The review suggests that involving families within the treatment or service offered to the drug user has some beneficial effects upon the user and to a more limited extent upon the family.