



Northwest (HHS Region 10)

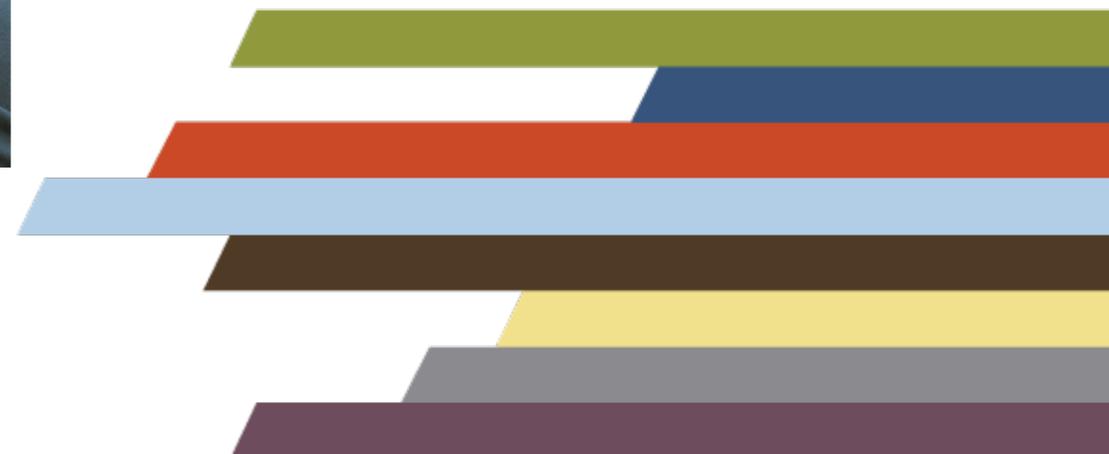
ATTC Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



Northwest ATTC presents:

Digital Health Services to Address Addiction in Families and Patients: Allies in Recovery

Presenter: Dominique Simon-Levin, PhD, MPH



Today's Presenter



Dominique Simon-Levine, PhD, MPH is an addiction expert with over 25 years of experience evaluating innovative projects addressing addiction. Allies in Recovery was the first comprehensive center in the country to use CRAFT to serve the needs of families dealing with a loved one's SUD. In 2015, the confidential platform, AlliesinRecovery.net, went live, offering a CRAFT-based eLearning program to families everywhere. Also in 2015, the State of Massachusetts contracted Allies in Recovery as a statewide resource, available to all residents.





When Love isn't enough

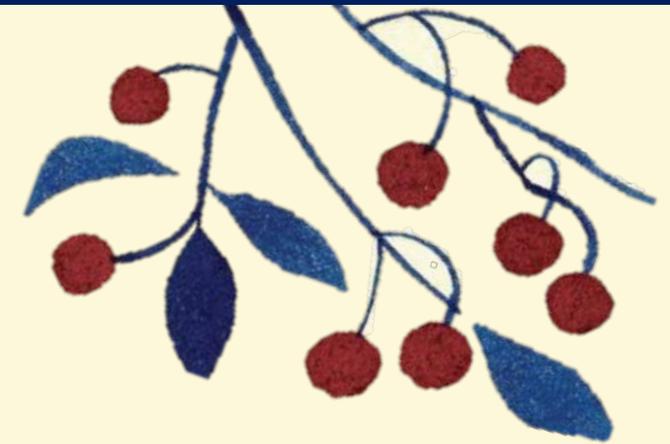
Allies in Recovery

Dominique Simon-Levine, PhD, MPH

Family Support



- * Learn about addiction
- * Share and unload
- * Connect with others
- * Find local resources



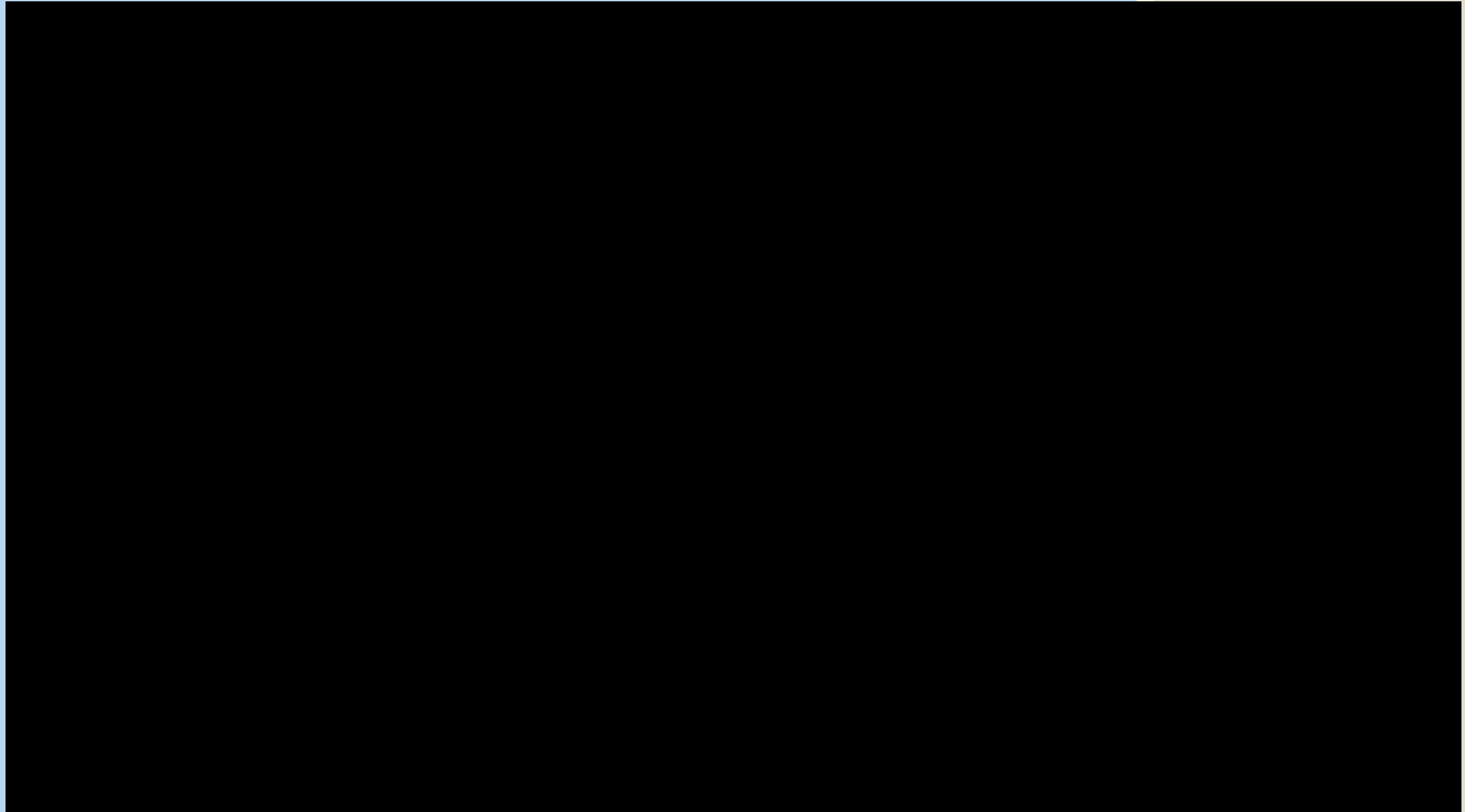


Family Training

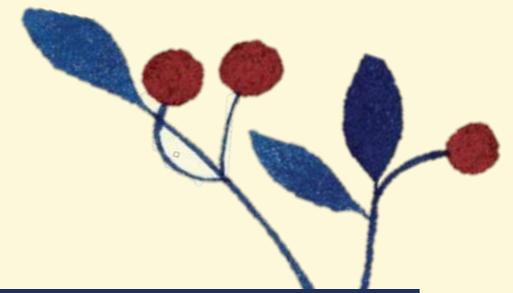
- * Educate about addiction and how to find treatment
- * Teach and practice new skills to improve family functioning and encourage recovery



... The science of what works in a family affected by addiction



How you can use the AlliesinRecovery.net site



- Private kiosk in wait room
- Videos run on loop in wait room TV
- Instant family program: download, print, use as group exercises, or homework. Watch a video in group and run a discussion afterwards.
- Instant curriculum for you and your clients who are family members.
- REST Groups: Resources Education and Support Together

<https://www.resthelps.org/>

CRAFT

Community Reinforcement And Family Training



Robert J. Meyers
Jane Ellen Smith
William Miller

What is CRAFT?

Teach about addiction, including harm reduction, moderation, recovery

Practice new skills:

- ABC – learn a practiced eye
- How to communicate
- How to de-escalate conflict
- How to stay safe
- How to respond and behave
- Cognitive Behavioral Therapy (CBT lite)
- How to recognize motivation to change (Change talk)
- How to intervene and engage into treatment



Controlled Trial

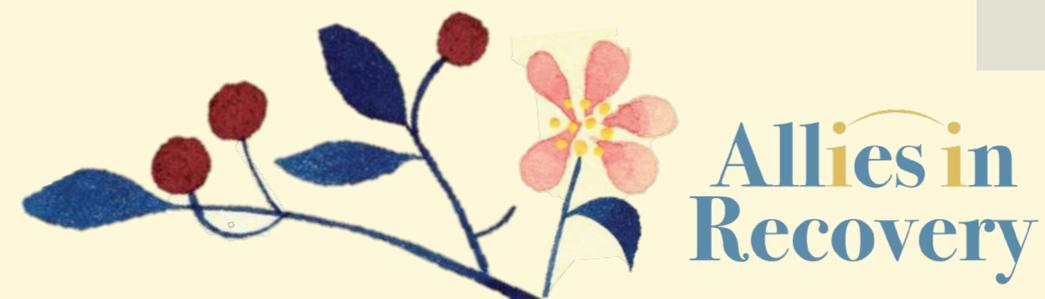
130 family members assigned to 1 of 3 interventions (1999)

*Al-Anon Facilitation therapy

*Johnson Institute Intervention

*CRAFT

Loved Ones are all alcoholic

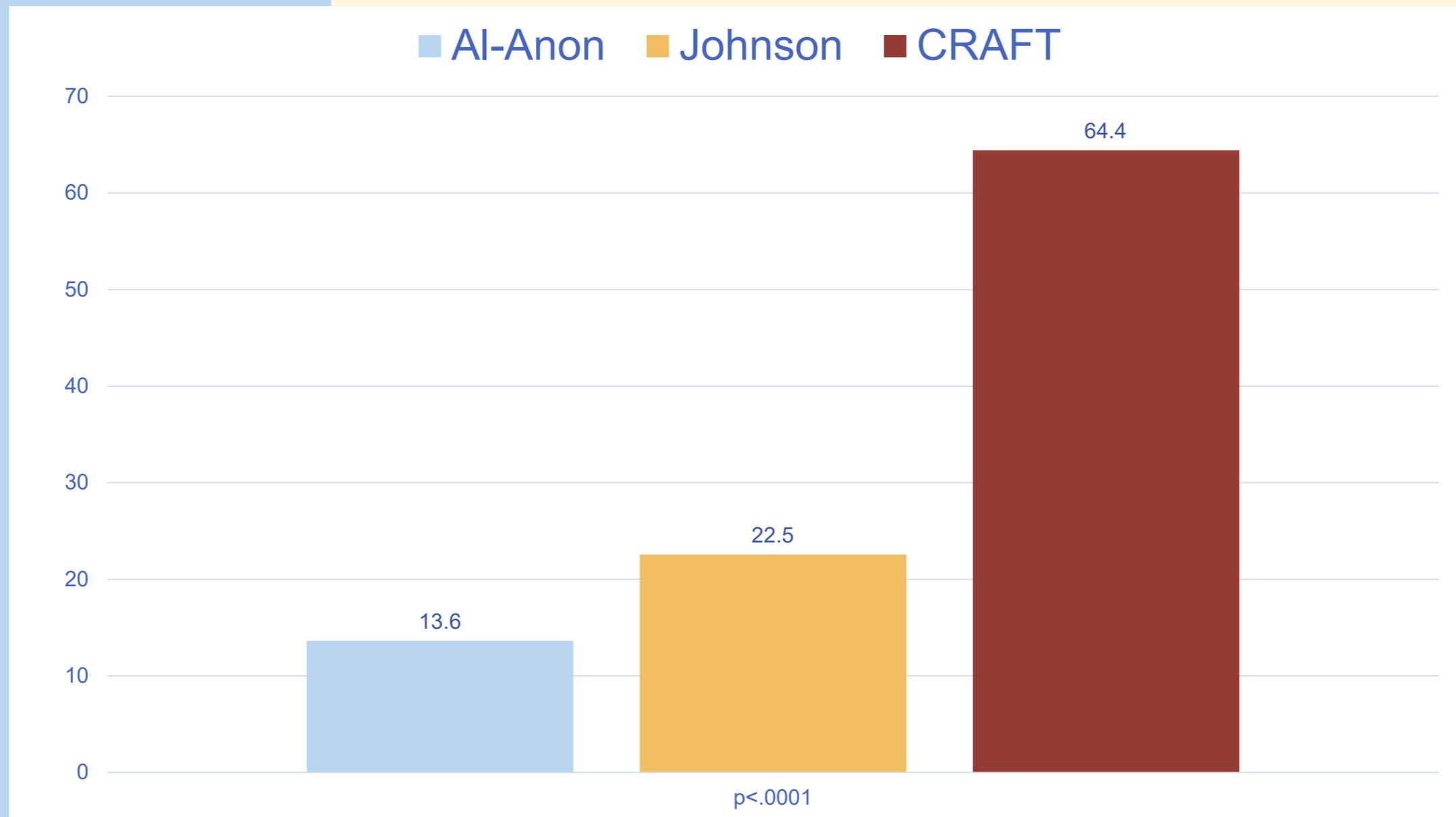


Family Characteristics

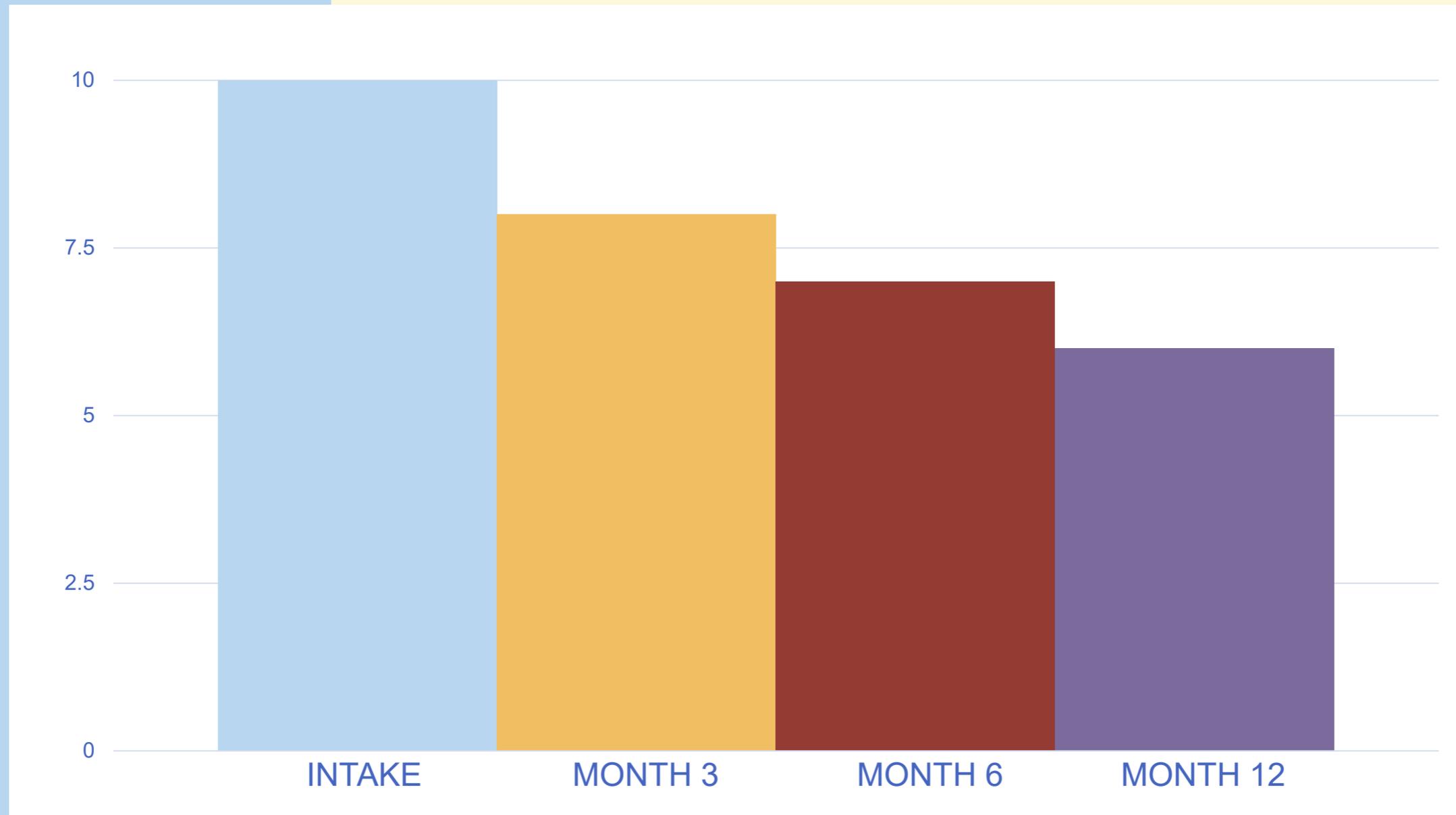


* Mean Age	47
* Education	14
* Females (%)	91
* Caucasian (%)	52
* Latino (%)	39

Treatment Engagement Rates



Family Member Depression (Becks)



CRAFT Studies

Sisson & Azrin 1986	Miller, Meyers, et al., 1999	Kirby, et al., 1999	Meyers, Miller, et al., 1999	Meyers, Miller, et al., 2002	Waldron, et. al., 2007 adolescent	Dutcher, et al., 1999	Manual, et al., 2011 Group vs Self-Directed
14 Family	130 Family	32 Family 75% Anglo 23% AA	62 Family 80% Hispanic	90 Family 49% Hispanic	42 Family 48% Hispanic	99 Family 59% Hispanic	40 Family 60% Anglo
Alcohol	Alcohol	55% Cocaine 22% opiates	37% Coca 35% MJ 16% Stim 8% opiate	MJ Cocaine Stimulants	MJ Alcohol	Alcohol 90% Cocaine 7%	Drugs / Alcohol
Randomized (CRAFT vs 12 Step)	Randomized (CRAFT/JI /12-step)	Randomized (CRAFT vs 12-step)	Non- Randomized	Randomized	Non- Randomized	Non- Randomized	Craft in Group vs Self- Directed
86% vs 0% Family Better	64% vs 23% vs 13% Family Better	74% vs 17% Family Better	74% Family Better	65.5% vs 29% Family Better	71% Family Better	55%-65% Family Better	70% vs 40% Family Better



Other Outcomes from Clinical Trials



- *CRAFT-engaged Loved Ones most often attend 6 sessions of outpatient treatment as compared to NM state modal of 1
- *Loved Ones reduce their use by 50% while family member is in CRAFT

How Great is the Need: The Family

- * Increased Depression
- * Increased Anxiety
- * Increased risk of harm at work
- * Absenteeism
- * Sleep and other stress-related illness
- * Family problems
- * Defacto untrained caregiver in fragmented system



Families Marginalized



- * Family seen as part of the problem: enabler, codependent, victim.
- * Limited contact in treatment
- * Not consulted
- * Can't make referral
- * Seen as peripheral to care
- * Evidence-based care not reimbursed by insurance
- * Evidence-based care hard to find





Families Care Deeply

- * Marshal the energy, the loyalty, the power of love these individuals have and channel it towards ending addiction.
- * Provide skills, the language, the information and resources to create the very best environment around the loved one with addiction.
- * The family as an untapped but crucial resource -- is right in front of us.
- * The behavioral science of what to do as a family member -- is also right in front of us.

Family Health



- Family medical and psychiatric conditions are significantly greater than controls (Kaiser Permanente 2010, Weisner et al).
- The correlation is high: the more severe the addiction the more severe the medical conditions of the family.
- Family ill-health worse than families with other chronic conditions, such as asthma and diabetes.
- Depression in 2nd place as compared to controls in 5th.



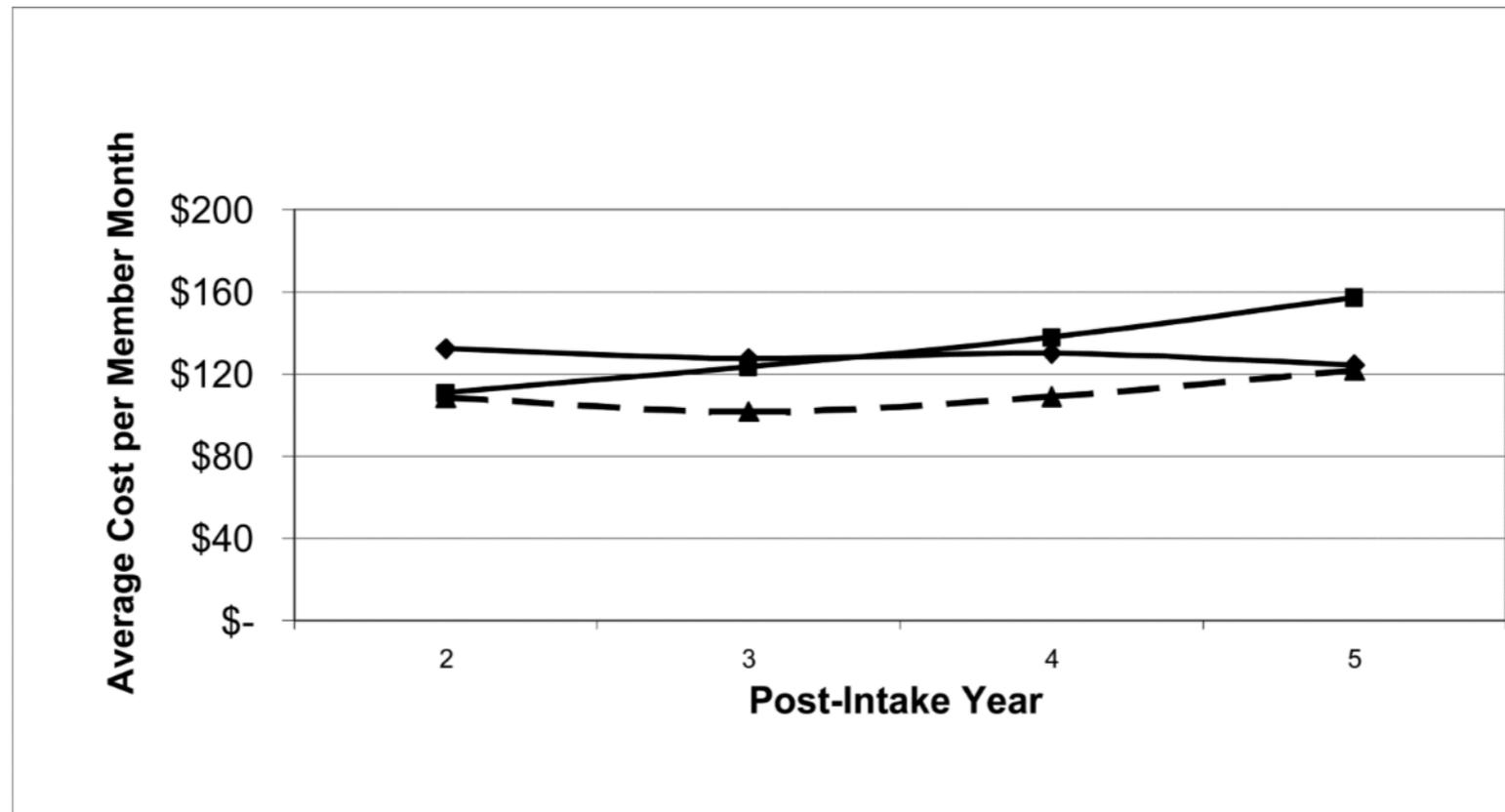


Figure 1.

Adjusted Average Medical Cost per Member Month (Excluding AOD and Psychiatry costs)

- ◆— Family members of abstinent AOD patients
- Family members of non-abstinent AOD patients
- ▲— Family members of Controls

How do I stay safe?



- * Safety Plan
- * Red flags
- * De-escalation talk

Video (Arnaldo and Jeanine)

How do I know what's really going on?

- 
- * What is LO using?
 - * Why is LO using (external and internal triggers)?
 - * Consequences of use
 - * How does family member react to use (what do they think, say, do? What do they get out of it?)
 - * When does LO not use
 - * How does family member react when there is no use?

How do I talk to my LO?

- * Negative Talk
- * Positive Talk
- * Show compassion and let them know you heard them
- * Admit your part
- * Be specific. Be brief. Be positive.
- * Use I statements instead of You statements.
- * Offer to Help
- * Reflective Listening



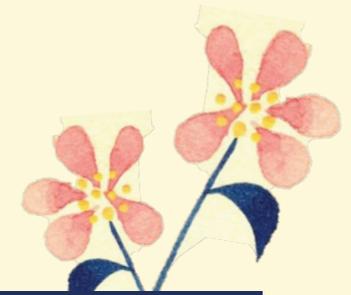
My LO is not using right now, now what?



- Reward



My LO is using right now, now what?



- Remove rewards
- Disengage yourself
- Allow natural consequences



What do I do when negative feelings get in the way?

Cognitive Behavior Therapy Lite...



- *Step 1. What am I feeling?
- *Step 2. What caused my feeling?
- *Step 3. How am I adding weight to that thought?
- *Step 4. How am I pushing down that feeling?
- *Step 5. What can I do to shift a hard emotion?

How do I get my LO to go into treatment?

* Windows of Opportunity



* Change talk: a wish or a dip

* A planned conversation

* Make a request



Applying Allies in Recovery to your situation:

I'm afraid to write this for fear of "jinxing" our situation, but **this site helped spark monumental changes in my family, and we are all so thankful to Allies in Recovery.** I have been seeking help for over a decade. My son simply could not function in the outside world with his pot addiction and binge drinking. I know people who function well on perpetual pot, but it had a huge effect on my adult son.

Here's how our lives transpired when I found this website. I followed the videos and cut down on my negative talk and waited for a "wish" or a "dip." I prepared what I would say when it came using the suggested template. I found a treatment center that I thought would resonate with him. I called them and let them know we were interested. I also asked them for tips on how to talk to my son. I knew it would not take long because he already had a lot of wishful thinking, though I was prepared to go 6-8 weeks. When the dip came in one week, I took a deep breath, followed my template, and my son agreed to look at the recovery center's website. Within 2 minutes my son said that he wanted to go.

My son is now in his 5th week of outpatient treatment. He loves the treatment center and said it is the most meaningful thing that has ever happened to him. He is helping others. I am filled with optimism.

Your Allies in Recovery website gave us strength, a plethora of guidance and, most of all, an understanding of what our loved ones truly need.



Thank you for this post. I came to Allies in Recovery almost 2 years ago as the second stop (SAMHSA was first) on my journey as a parent of someone struggling with their SUD. How fortunate that my early learning took place here. I learned much of the language early on and the tone of conversations here were full of hope and compassion for our LOs. My daughter is skittish by nature so the language I use is especially important. I don't get the full honesty from her that I would like but I understand that honest communication is too revealing for her at times. I am responsible for me and my choices, including the language I carefully choose. Finding CRAFT has helped build a foundation built on love and hope. Thanks again for this thoughtful post.”

“I read the response Dominique gave me in her blog about my question. I would like to thank her so much! I feel so helped and supported! Thank her so much! I do do my exercises and modules and I find it inspiring and very helpful. It gives me joy to think what I can do to reward him being sober. It also helps me feeling much better, even joyful. It gives a very good sense of direction. —

Evidence that Allies in Recovery works: Member Survey n=49

80% found the site extremely/very helpful in improving interactions with their Loved One.

45% found the site extremely/very helpful in improving how their Loved One responds to them.

68% found the site extremely/very helpful in reducing worry, stress, or anger.

(Research on CRAFT found significant reductions in anxiety and depression.)

35% found the site extremely/very helpful in reducing how much their Loved One used drugs or alcohol.

(Research on CRAFT found that 50% of Loved Ones reduced their use.)

58% found the site extremely/very helpful in engaging their Loved One into treatment (formal treatment, self-help, recovery supports).

(Research on CRAFT found that 66% of families successful engaged their Loved One into treatment.)

51% found the site extremely/very helpful in supporting their Loved One to stay in treatment (formal treatment, self-help, recovery supports).

(Research on CRAFT found length of stay for the Loved One increased to 6 sessions as compared to the state (of New Mexico) modal of 1 with CRAFT training.)

Cost Savings

Time Period/Delivery Method)	CRAFT Training	Cost per Family member
In research/face-to-face, MA level clinician	12 hours	\$2,000
February 2018	AiR member	\$51
May 2018	AiR member	\$44
Estimate December 2020	AiR-member	\$21
Estimate 2025	AiR member	\$6

“Thank you again. Your support is like a lifeboat to me.” —Fireweed3”, Allies in Recovery Member

COVID encourages virtual help

AlliesinRecovery.net is free through the COVID period

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gracias cảm ơn bạn धन्यवाद 고맙습니다
 شڪرا جزىلا salamat благодарю вас 谢谢
 Dziękuję Ci **Thank** ευχαριστώ
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 ありがとうございます спасибі mahalo

