



FAMILY DRUG HELP EVALUATION - SUMMARY OF FINDINGS

Family Drug Help (FDH) is a program of SHARC. SHARC engaged Turning Point to undertake a process and outcome evaluation of the four programs sitting within FDH from September 2012 to January 2015. The evaluation was funded by the federal Non-Government Organisation Treatment Grants Program (NGOTGP) as part of SHARC's service development work.

The evaluation¹ found that:

- Family Drug Help services fill an important community need, ensuring that the families of those with substance misuse problems have access to professional and peer support.
- FDH programs form a pathway of support for families of those with substance misuse problems, and a vital peer network that enables participants to both gain and provide support at the level that best suits their needs.

1. Action for Recovery Course (ARC): a facilitated education course for family and friends on how to best cope with a family member's addiction.

ARC facilitators are well informed by research evidence and good practice. The course aligns with best practice for peer-based support programs, providing relevant information, exploring ways of coping, discussing social support and establishing the need for further help.

Outcomes for family members completing the program

- Improved overall personal wellbeing; hope for the future, better self-care through setting boundaries and reduced worry, and improved relationships.
- Fewer negative physical and psychological symptoms.
- Acceptance of new coping behaviours.

Key strengths identified:

- Participants' experiences of ARC were overwhelmingly positive.
- Facilitators with lived experience central.
- Focus on participants' wellbeing provided opportunity to reflect on their own experiences, needs and lives.
- Ability to implement the practical coping strategies.
- Contribution to legacy of ongoing peer support through the influence and leadership of ARC graduates in other FDH programs such as FDH Support Groups and Helpline.

2. Family Drug Help Support Groups - monthly/fortnightly mutual aid groups, facilitated by trained volunteers and supported by group co-ordinators (FDH staff).

Outcomes for group members

- Positive impact on overall family dynamic and a calmer, more settled home environment.
- Spouses reported their relationships were stronger, more supportive and less conflicted.
- Better communication, more honesty and less conflict.

Key strengths identified:

- Members' experiences were overwhelmingly positive.
- Cultivation of a supportive, safe and non-judgemental environment.
- Sharing experiences and strategies for coping amongst people going through similar issues
- Ability to give back to the group by sharing, providing advice or by becoming a facilitator.
- Availability of a range of guest speakers and learning materials.

3. Family Drug Helpline: available 24 hours a day, 7 days a week. Staffed primarily by trained volunteers who have a personal experience of family substance misuse.

Profile of activity:

- On average 14 calls per day.
- 85% by family members.
- 79% of callers were female.
- 58% of callers were parents; 14% were partners.
- 70% of 'substance using relatives' were male and aged under 40.
- Top three primary drugs of concern were methamphetamine (39%), cannabis (23%) and alcohol (20%).
- 42% of callers were referred to other FDH services; 23% referred to external services.
- 39% of callers were sent resources and 47% were offered information.

Key strengths identified:

- The program is informed by best practice.
- High level of training, monitoring, development and support for the volunteers.
- Volunteer retention rate of 80%.
- The volunteers gave evidence of reduced harm, and improved health, well-being and connectedness for both themselves and the callers they helped.
- Legacy of ongoing and sustained peer support family members, as many volunteers are former clients of the services and several staff members previously worked on the Helpline.

4. Family Counselling Service: face-to-face counselling for individuals and family groups, offered as a single session or up to twelve sessions and delivered by a qualified family counsellor.

Outcomes for clients:

- Better able to cope with their situation,
- Greater self-awareness and confidence to deal with their substance using relative and
- More productive communication within their family unit.

Key strengths identified:

- Experience of the service was resoundingly positive.
- Particularly supportive of the counselling framework and engagement approach.

Opportunity: Current policy and practice for AOD treatment highlights the importance of the involvement of families in that treatment. There is an increased awareness of the need for specific family counselling and support services. The FDH program is ideally placed to capitalise on this increased focus on the role of the family in substance use treatment, and in addressing the needs of the family members of a substance using individual.

FDH has the potential to inform the evidence base in family support practice in such areas as:

- the place of mutual aid services as a social network replacement;
- the impact of the provision of support to families on treatment outcomes; and
- the impact of funding family support independently from treatment on family functioning, social functioning, social connectedness and treatment outcomes.

Note: the full copy of this report can be accessed via SHARC's website www.sharc.org.au.

ⁱ Mackenzie, J., Best, D., Savic, M. & Hunter, B. (2015) Evaluating the effectiveness of support programs for family members affected by a relative's substance use. Turning Point, Eastern Health, Fitzroy.