Family Therapy and Treatment of Substance Use Disorders

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What we will cover in this workshop:
- History of Treatment
- Family Systems view of SUDs
- Family Matters Program

Three Trajectories
- Necessity and Conviviality
- Medicinal
- Religious Ritual
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- How do we define addiction?
  - Inability to consistently abstain
  - Impairment in behavioral control
  - Diminished recognition of the problem
  - Tolerance and withdrawal
  - Cycles of relapse and remission
  - Progressive disease

Treatment in the United States

- Dr. Benjamin Rush
  - Signer of the constitution
  - Alcoholism as a disease
  - Abstinence model
  - Religious
  - Metaphysical
  - Medical

1864 first treatment facility

- Isolation from the stresses and temptations of normal life
- Detox regimen
- Religious/holier practice
- Social support from other patients
- Work and recreation
- Music therapy
- Self-reflection or self-inventory
- Acts of service to newly arrived patients by existing patients
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- Minnesota Model
- Most common current treatment
- 12-step philosophy
- Inpatient treatment
- Education

Comparison of Relapse Rates Between Substance Use Disorders and Other Chronic Illnesses

- 40-60% Substance Use
- 50-70% Mental Illness
- 50-70% Other Chronic Illnesses

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Family Systems Therapy seeks to change the emotional environment to a higher level of functioning.
That which is created in a relationship can be fixed in a relationship.
-- Murray Bowen, MD

Bowen Family Systems Theory (BFST)
Overview
• Systems view of the family
• Multigenerational
• One person in a position to make change can change the system

Basic Assumptions
1. Members of a family system are interconnected, and this is not dependent upon the quality of the relationship or the proximity of family members.
2. A change in one area of functioning in a family system will result in a change in other areas.

3. It only takes one motivated family member who is in a position of influence or is interested in holding an influential position within the family, to change the family system.

4. This is accomplished by thoughtful and strategic responses to relationship patterns that are typical in each family system. Specifically, the focus is identifying and changing the part one usually plays in these relationship patterns.
5. Since an individual's brain is formed within the family, lasting change is best accomplished by rewiring the brain within the context of that family system.

6. A shift in thinking about the family allows for ongoing improvement of functioning as it allows the individual to step back, or detach, from the family forces.

Initial Research: On-ground Pilot Program

- 6-week group program
- Participants found via social media, MFT email blasts, psychotherapists and treatment centers
- Participants were given:
  - Informed Consent
  - Demographic Survey
  - Differentiation of Self Survey (pre and post)
  - Program Evaluation
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Hypotheses

- Research reveals that families are resistant to treatment in the same way that addicts/alcoholics are.
- Delivery model – traditional, brick and mortar may be a deterrent.

10 participants

• Each were given a workbook
• 2 participants dropped after the 1st week
• Those who stayed were parents whose children had SUD

Revised Program

- 6 module online workshop format
- 2-hour weekly video Consultation group
- Psychoeducation
- Based on the ideas of Bowen Family Systems
- 12-step philosophy
- One or more family members
- Desired Outcome: finding serenity and peace even if the family member does not get sober

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- Online format – address barriers to participation
- Weekly consultation group sessions via a web-based format to strategize change and for participants to interact
- Closed Facebook group
- Administration of the Family Environment Survey (pre and post) which evaluates levels of conflict and cohesion.
Module 1
Wherever you go, there they are
• Togetherness-separateness forces
• Differentiation of self
• Emotional processes in the family
• Fusion and cutoff
• Overfunctioning and underfunctioning

Module 2
• Choosing life
• Families end up organizing around the addiction
• "Normal" reactions maintain the behavior
• Change comes about when someone takes a position

Module 3
A wide angle lens
• Looking at the family system
• Emotional triangles exacerbate patterns
• Pursuer-Distancer
• Overfunctioner-Underfunctioner
• Conflict-cutoff
**Module 4: Shifting Focus**

- Make a list of the most challenging situations
  1. Examine your reactions, emotional, physiological, psychological
  2. Develop some practices to lower reactivity
     - Mindfulness meditation
  3. Approach loved one with curiosity
     - Asking good questions without an agenda
     - Doing this will represent an important change in the family member and the system.

**Module 5: Investing in Sobriety – Learning to think about decisions**

- Ask yourself: Am I investing in addiction or am I investing in sobriety?
  - This includes time, energy,
- Take time to evaluate your options
- Decisions based on values take time

**Module 6: Moving Forward**

- Strategies for maintaining gains
  - Al-Anon, Nar-Anon or family support groups
  - Mindfulness practices
  - Keeping focus off the loved one and onto what yourself
  - Family Therapy
Strategies for working with family members

1. Identify the part they have been playing
   - Family Diagram
   - Triangles

2. Create strategies to shift the focus off the loved one with SUD
   - What has worked? What hasn’t worked?

Strategies (cont’d)

3. Identify typical decisions that cause anxiety
   - Investing in addiction or investing in sobriety?

4. Identify ways in which the addiction has taken center stage
   - Focus on other areas of life

5. Assist the client in making a long-term commitment to personal growth
   - Suggest resources