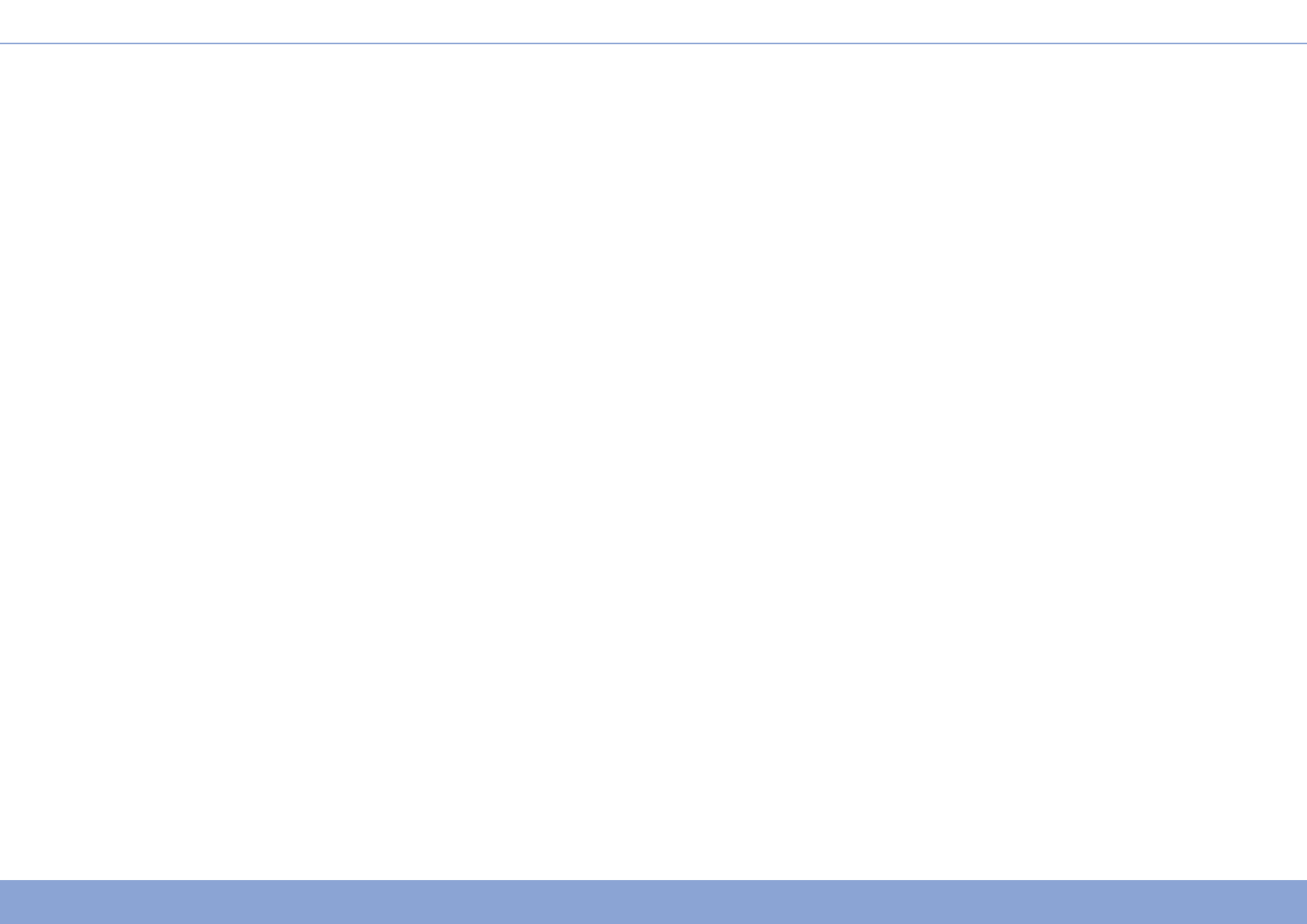




## Family and Friends Strategy

Improving the lives of those who are affected by the substance misuse of others

Reducing the harms caused by the misuse of drugs and alcohol in Norfolk



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# 1. Introduction

- 1.1 The term 'family and friends' refers to anyone affected directly by someone else's substance misuse who is aiming to support and help that person or who has been bereaved by substance misuse.
- 1.2 The N-DAP Family and Friends Strategy does not address the specific needs of the children of parental substance misusers. These will be addressed at a later date and within a separate strategy document.
- 1.3 Substance misuse has the potential to negatively impact on the family and friends of substance misusers as well as the individuals themselves. N-DAP recognises this and the vital role that family and friends can play in its work.
- 1.4 The N-DAP Family and Friends Strategy sets out the way in which N-DAP will address the needs of the family and friends of substance misusers. This will involve a combined effort from a wide range of partners to: increase awareness and recognition of the roles and needs of family and friends; provide information and learning opportunities for family and friends; provide services for family and friends that are effective and of good quality; involve family and friends in substance misuse treatment where appropriate; promote harm reduction to family and friends; and involve family and friends in the planning and commissioning of substance misuse services and services for family and friends.
- 1.5 The N-DAP Family and Friends Strategy has been developed by the N-DAP Substance Misuse Carers' Partnership. The overall aim of the partnership is to develop and implement a coordinated strategic approach to the provision of services for the family and friends of substance misusers. The partnership informs, and is accountable to the Adult Joint Commissioning Group within the structure of N-DAP and is represented at the Norfolk Carers' Council.

- 1.6 The N-DAP Family and Friends Strategy is one of a number of N-DAP strategies and does not stand alone. For a list of current strategies and a description of the way in which they relate to each other please see the N-DAP Outcome Strategy<sup>1</sup>. All strategies are available to download at **[www.nordat.org.uk](http://www.nordat.org.uk)**.



<sup>1</sup> N-DAP (2007) Norfolk Drug and Alcohol Partnership (N-DAP) Outcome Strategy 2008-2011 (Norwich: N-DAP)

## 2. What we aim to achieve

2.1 N-DAP has one overarching aim: to reduce the harm caused by the misuse of drugs and alcohol in Norfolk. To achieve this aim, we have six clear local outcomes to work towards all of which are supported by the N-DAP Family and Friends Strategy.

- A reduction in drug-related ill health
- A reduction in drug-related offending
- A reduction in alcohol-related harms
- A reduction in drug-related deaths
- A reduction in the supply of illegal drugs
- Today's young people prevented from becoming tomorrow's problematic substance misusers

2.2 The N-DAP Family and Friends Strategy is aligned to and will contribute to the following Public Service Agreement:

- PSA 25 – Reduce the harm caused by alcohol and drugs

2.3 The N-DAP Family and Friends Strategy is aligned to and will contribute to the following national indicators which have been prioritised by Norfolk's Local Area Agreement:

- NI 40 – Drug users in effective treatment
- NI 135 – Carers receiving needs assessment or review and a specific carer's service, or advice and information



## 3. National Context

### 3.1 Drugs: Protecting Families and Communities. The 2008 Drug Strategy<sup>2</sup>

3.1.1 The latest national drug strategy increases the focus on the needs of families affected by substance misuse. The strategy outlines the government's intent to address the needs of parents and children as individuals, as well as working with whole families to prevent drug use, reduce risk, and get people into treatment.

3.1.2 Key actions for delivery within the strategy are to:

- Establish a cross-government working group to drive forward work on families and substance misuse across the drug strategy
- Publish guidance to help the commissioning and delivery of treatment services with a greater focus on the needs of parents and families
- Publish guidance to improve the involvement of family and carers, including in the shaping and delivery of treatment/support, and the development of family intervention skills of drug misuse workers
- Support family self-help groups through work with the third sector to provide improved advice and guidance
- Implement measures in the Youth Alcohol Action Plan to reduce the impact of alcohol on young people and their families

- Examine recommendations relating to families of drug-misusing offenders in Around Arrest, Beyond Release fieldwork visits and national seminars. Disseminate a final report highlighting practical solutions to planning and delivery for this group
- Provide support and monitor the implementation of guidance on the provision of personalised and outcome-focussed treatment through user and carer involvement
- Use the FRANK campaign to provide advice and information to parents
- Bring together a partnership of leading young people's and parents organisations to provide parents with the confidence and knowledge to help their children resist drugs

3.1.3 This greater emphasis on the importance of involving and supporting family and friends reflects the growing recognition of the impact of drug use on families and the evidence that through supporting these family members the potential for positive outcomes for substance misusers themselves is increased.

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<sup>2</sup> Home Office (2008) Drugs: Protecting Families and Communities. The 2008 Drug Strategy (London: Home Office)

### **3.2 Carers at the Heart of 21st Century Families and Communities: A Caring System on Your Side. A life of Your Own<sup>3</sup>**

3.2.1 The national carers' strategy recognises the crucial caring that is undertaken by many family and friends. The strategy defines a carer as someone who 'spends a significant proportion of their life providing unpaid support to family or potentially friends. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems'.

3.2.2 The strategy outlines the vision that by 2018:

- Carers will be respected as expert care partners and will have access to integrated and personalised services they need to support them in their carer role
- Carers will be able to have a life of their own alongside their caring role
- Carers will be supported so that they are not forced into financial hardship by their caring role
- Carers will be supported to stay mentally and physically well and treated with dignity
- Children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve all the Every Child Matters outcomes

### **3.3 National Carers legislation**

3.3.1 Family and friends are entitled to know their rights and to receive support from agencies and services under national carers legislation. The Carers and Disabled Children Act 2000 gives carers aged 16 and over who provide a regular and substantial amount of care for someone aged 18 or over the right to an assessment of their needs as a carer. The Carers (Equal Opportunities) Act came into force in April 2005 and places a duty on local authorities to ensure that all carers know that they are entitled to an assessment of their needs, and to consider a carer's outside interests - work, study or leisure - when carrying out these assessments.

### **3.4 Supporting and Involving Carers A Guide for Commissioners and Providers<sup>4</sup>**

3.4.1 This best practice guide has been developed by the National Treatment Agency for Substance Misuse (NTA) to support improvement in the availability and quality of services for family and friends, as well as improving the involvement of family and friends in drug users' treatment.

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<sup>3</sup>Department of Health (2008) Carers at the Heart of 21st-Century Families and Communities: A Caring System on Your Side. A Life of Your Own. (London: HM Government)

<sup>4</sup>National Treatment Agency (2008) Supporting and Involving Carers A Guide for Commissioners and Providers. (London: National Treatment Agency)

### 3.5 'We Count Too' Good Practice Guide and Quality Standards for Work with Family Members Affected by Someone Else's Drug Use<sup>5</sup>

3.5.1 This good practice guide is aimed at commissioners and providers of services for family and friends and sets out five essential requirements and seven basic quality standards for services for family and friends:

#### 3.5.1.1 The five essential requirements

- Active involvement of family members affected by drug use
- Working in partnership with other relevant local organisations and services
- Clarity of principles, aims and focus and how these will be achieved and monitored
- Policies, procedures and protocols covering confidentiality and its legal responsibilities.
- Appropriate training and support for all service staff

#### 3.5.1.2 The seven basic quality standards

- Confidentiality and safety
- Offering choices
- Accessibility

- Supporting family members to look after themselves
- Non-judgemental and caring
- Clear boundaries
- Being informed and informing



<sup>5</sup> Adfam, Famfed, PADA (2005) 'We Count Too' Good Practice Guide and Quality Standards for Work with Family Members Affected by Someone Else's Drug Use (London: Adfam)

## 4. Local Context

### 4.1 The N-DAP Research and Development Project<sup>6</sup>

4.1.1 N-DAP's research and development project gave considerable insight into the roles and needs of family and friends in Norfolk. Researchers employed survey, focus group and interview techniques to gain information from agencies providing services for family and friends, and from family and friends themselves. Recommendations from the research can be grouped into five key areas: recognition and awareness; information and learning opportunities; services; involvement in treatment; and involvement in planning and commissioning. These recommendations have informed N-DAP's work with family and friends to date and inform the N-DAP Family and Friends strategy.

#### 4.1.2 Recognition and Awareness

The research finds that family and friends often do not identify themselves as 'carers' and that this could be a barrier to recognition and awareness of their roles and needs. The term 'family and friends' should be used to refer to anyone affected directly by someone else's substance misuse who is aiming to support and help them. Professionals including GPs should be encouraged to recognise and be aware of the roles and needs of family and friends.

#### 4.1.3 Information and Learning Opportunities

The research highlights the importance of authoritative and accessible information for family and friends. This should include information on:

drugs and their effects; substance misuse treatment; and drugs and the law. Learning opportunities should support family and friends through increases in knowledge, skills and confidence.

#### 4.1.4 Services for Family and Friends

The research recommends a range of generic and substance misuse specific services that should be accessible to all family and friends. These include one to one support services, telephone helplines, support groups, bereavement counselling and services that provide a break (respite). Outreach services should work to improve access for hard to reach family and friends. These may include Black and Minority Ethnic family and friends, Travellers, Lesbian, Gay and Bisexual (LGB) family and friends, family and friends with disabilities, male family and friends and those who live in rural areas.

#### 4.1.5 Involvement of Family and Friends in Substance Misuse Treatment

The research points to the crucial role that family and friends can play in substance misuse treatment. It is suggested that the extent to which this is appropriate should be explored routinely through specialist substance misuse assessment. There should be clear agreement around the level of information that will be shared with family and friends.

#### 4.1.6 Involvement of family and friends in planning and commissioning

The research highlights the importance of involving family and friends in the planning and commissioning of services.

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<sup>6</sup> Kerrigan, L. (2005) Developing Services for Carers of People with Substance Misuse Problems (Norwich: N-DAP); Research Plus (2005) Parents/Carers of Substance Misusers Research and Development Project Findings From The Research (Norwich: N-DAP)

## 5. Implementing the N-DAP Family and Friends Strategy

- 5.1 It will be the responsibility of the N-DAP Substance Misuse Carers' Partnership to coordinate the delivery of the strategic objectives contained within the N-DAP Family and Friends Strategy. N-DAP's Adult and Young People's Joint Commissioning Groups, Norfolk Drug and Alcohol Action Team (DAAT)'s Young People's Joint Commissioning Officer and other members of the DAAT will provide support as required. N-DAP's Chief Officers Group will oversee the strategy's implementation.
- 5.2 The actions required to implement the N-DAP Family and Friends Strategy will be integrated within N-DAP's Adult, Young People's Specialist Substance Misuse and Integrated Drug Treatment System (IDTS) Treatment Plans. Progress against these will be monitored by the Substance Misuse Carers' Partnership and the Adult and Young People's Joint Commissioning Groups and through quarterly progress reports to the National Treatment Agency.
- 5.3 It is important that the N-DAP Family and Friends Strategy develops in response to local need and national guidance. For this reason, the strategy will be evaluated and reviewed on an annual basis by the N-DAP Substance Misuse Carers' Partnership.



## Strategic Objective 1 – To increase awareness and recognition of the roles and needs and rights of family and friends

<b>Why are we doing this?</b>	The crucial role played by family and friends in supporting those with substance misuse problems often goes unrecognised. National guidance <sup>7</sup> and local research <sup>8</sup> tell us that supporting a substance misuser can impact negatively on physical health, psychological wellbeing, finances, social lives, and relationships. Family and friends often need help in their own right but may not recognise this, or may be too angry, ashamed or embarrassed to seek it <sup>9</sup> . A lack of awareness amongst professionals can act as a further barrier to family and friends getting the support that they need.
<b>How will we do this?</b>	<ul style="list-style-type: none"> <li>• Through information and training aimed at substance misuse services, and wider partners including GPs</li> <li>• Through ensuring that the needs of family and friends are addressed in the development and implementation of the Norfolk Carers Strategy</li> </ul>
<b>What do we hope to achieve?</b>	Increased awareness and recognition of the roles and needs and rights of family and friends leading to increased numbers of family and friends having these needs met.
<b>Who will this affect?</b>	Family and friends, those who misuse substances, substance misuse services, wider partners including GPs.

## Strategic Objective 2 – To provide information and learning opportunities for family and friends

<b>Why are we doing this?</b>	National guidance <sup>7</sup> and local research <sup>8</sup> tell us that family and friend need access to authoritative information on: drugs and their effects; substance misuse treatment; and drugs and the law. Learning opportunities should support family and friends through increases in knowledge, skills and confidence.
<b>How will we do this?</b>	<ul style="list-style-type: none"> <li>• Through ensuring that authoritative information on substance misuse and substance misuse services is accessible to family and friends</li> <li>• Through the provision of appropriate learning opportunities for family and friends</li> <li>• Through the provision of Do Your Children Know More About Drugs Than You Do?, an information resource about drugs and their effects aimed at parents and carers</li> </ul>
<b>What do we hope to achieve?</b>	Family and friends feel better informed, skilled, confident and able to cope with their situations.
<b>Who will this affect?</b>	Family and Friends, those with substance misuse problems.

<sup>7</sup> Adfam, Famfed, PADA (2005) 'We Count Too' Good Practice Guide and Quality Standards for Work with Family Members Affected by Someone Else's Drug Use (London: Adfam); National Treatment Agency (2008) Supporting and Involving Carers A Guide for Commissioners and Providers. (London: National Treatment Agency)

<sup>8</sup> Kerrigan, L. (2005) Developing Services for Carers of People with Substance Misuse Problems (Norwich: N-DAP); Research Plus (2005) Parents/Carers of Substance Misusers Research and Development Project Findings From The Research (Norwich: N-DAP)

<sup>9</sup> Copello A, Velleman R and Templeton L (2005). Family Interventions in the Treatment of Alcohol and Drug Problems. Drug and Alcohol Review 24:369–385

### Strategic Objective 3 – To provide services for family and friends that are effective and of good quality

<b>Why are we doing this?</b>	National guidance <sup>10</sup> and local research <sup>11</sup> tell us that supporting a substance misuser can impact negatively on physical health, psychological wellbeing, finances, social lives, and relationships and that family and friends need help in their own right.
<b>How will we do this?</b>	<ul style="list-style-type: none"> <li>• Through the use of a common family and friends referral and assessment form</li> <li>• Through the provision of a 24/7 helpline that is accessible by family and friends</li> <li>• Through the provision of one to one support services and support groups</li> <li>• Through signposting family and friends to 12 step support groups where appropriate e.g. Al-Anon, Families Anonymous</li> <li>• Through ensuring that the needs of family and friends are addressed in the development and implementation of the Norfolk Carers Strategy</li> <li>• Through the provision of training for those working with family and friends</li> </ul>
<b>What do we hope to achieve?</b>	Family and friends feel supported and better able to cope with their situations.
<b>Who will this affect?</b>	Family and friends, those who misuse substances, Norfolk Carers' Council.

### Strategic Objective 4 – To involve family and friends in substance misuse treatment where appropriate

<b>Why are we doing this?</b>	Evidence shows that effectively involving family and friends in substance misuse treatment helps those with substance misuse problems increase their chances of: entering treatment; reducing or stopping their drug misuse; engaging with treatment if they do enter; being retained in treatment; completing treatment; and avoiding major relapses <sup>12</sup> . Local research <sup>11</sup> tells us that this is supported by family and friends.
<b>How will we do this?</b>	<ul style="list-style-type: none"> <li>• Through the provision of training for substance misuse staff that addresses appropriate involvement of family and friends</li> <li>• Through the provision of family interventions that use evidence based psychosocial methods to support family members to manage the impact of a young person's substance misuse, and enable them to better support the young person in their family</li> <li>• Through the inclusion of clauses around the appropriate involvement of family and friends in care planning in service specifications for substance misuse treatment services</li> </ul>
<b>What do we hope to achieve?</b>	Family and friends are empowered to better support those who misuse substances through substance misuse treatment leading to increased effectiveness of substance misuse treatment.
<b>Who will this affect?</b>	Family and friends, those who misuse substances, substance misuse services.

<sup>10</sup> Adfam, Famfed, PADA (2005) 'We Count Too' Good Practice Guide and Quality Standards for Work with Family Members Affected by Someone Else's Drug Use (London: Adfam); National Treatment Agency (2008) Supporting and Involving Carers A Guide for Commissioners and Providers. (London: National Treatment Agency)

<sup>11</sup> Kerrigan, L. (2005) Developing Services for Carers of People with Substance Misuse Problems (Norwich: N-DAP); Research Plus (2005) Parents/Carers of Substance Misusers Research and Development Project Findings From The Research (Norwich: N-DAP)

<sup>12</sup> National Treatment Agency (2008) Supporting and Involving Carers A Guide for Commissioners and Providers. (London: National Treatment Agency)

## Strategic Objective 5 - To promote harm reduction to substance users and their carers, families and friends

**N.B. This strategic objective is shared with the N-DAP Harm Reduction Strategy 2008-2011<sup>13</sup>**

<b>Why are we doing this?</b>	The NTA recognise the importance of harm reduction. N-DAP believes this is an essential element of a local treatment system and services for substance misusers and family and friends that leads to better treatment outcomes.
<b>How will we do this?</b>	<ul style="list-style-type: none"> <li>• Through the promotion and development of a wide range of agreed approaches and initiatives, which are shared and monitored across N-DAP with support, advice and guidance available for non-specialist agencies.</li> </ul>
<b>What do we hope to achieve?</b>	Better health for those who misuse substances, better outcomes from drug treatment interventions and fewer drug related deaths.
<b>Who will this affect?</b>	Family and friends, those who misuse substances, substance misuse services, the broader community.

## Strategic Objective 6 – To involve family and friends in the planning and commissioning of substance misuse services and services for family and friends

<b>Why are we doing this?</b>	National guidance <sup>14</sup> and local research <sup>15</sup> highlight the importance of ensuring the views of family and friends are considered in the planning and commissioning of substance misuse services and services for family and friends.
<b>How will we do this?</b>	<ul style="list-style-type: none"> <li>• Through representation of family and friends on the N-DAP Substance Misuse Carers Partnership</li> <li>• Through representation of the N-DAP Substance Misuse Carers Partnership on Norfolk Carers' Council</li> <li>• Through the development of processes for consultation of family and friends</li> </ul>
<b>What do we hope to achieve?</b>	The needs of family and friends and those who misuse substances are considered in the planning and commissioning of substance misuse services and services for family and friends leading to increased effectiveness of substance misuse treatment and services for family and friends.
<b>Who will this affect?</b>	Family and friends, those who misuse substances, N-DAP Substance Misuse Carers Partnership, N-DAP Adult and Young People's Joint Commissioning Groups, Norfolk Carers Council.

<sup>13</sup> N-DAP (2008) Norfolk Drug and Alcohol Partnership (N-DAP) Harm Reduction Strategy 2008-2011 (Norwich: N-DAP)

<sup>14</sup> Adfam, Famfed, PADA (2005) 'We Count Too' Good Practice Guide and Quality Standards for Work with Family Members Affected by Someone Else's Drug Use (London: Adfam); National Treatment Agency (2008) Supporting and Involving Carers A Guide for Commissioners and Providers. (London: National Treatment Agency)

<sup>15</sup> Kerrigan, L. (2005) Developing Services for Carers of People with Substance Misuse Problems (Norwich: N-DAP); Research Plus (2005) Parents/Carers of Substance Misusers Research and Development Project Findings From The Research (Norwich: N-DAP)

## Glossary of the Terms We Use

**Carer.** Someone who 'spends a significant proportion of their life providing unpaid support to family or potentially friends. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems'<sup>16</sup>.

**DAAT.** See Drug and Alcohol Action Team

**Drug and Alcohol Action Team.** The Norfolk DAAT is one of 149 across the country. DAATs coordinate the drug-related elements of the service plans of the main public sector delivery agencies at a local level.

**Family and Friends.** Anyone affected directly by someone else's substance misuse who is aiming to support and help that person or who has been bereaved by substance misuse.

**Harm Reduction.** The prevention of diseases passed on by contaminated blood (particularly HIV and hepatitis infections), and the prevention of overdose and drug related death.

**IDTS.** See Integrated Substance Misuse Treatment System

**Integrated Substance Misuse Treatment System.** A system designed to expand and improve the provision of drug treatment within prisons.

**Local Area Agreement.** Introduced across England and Wales in 2006. This is a three-year agreement between national and local government, which has the aim of delivering a series of improved outcomes for Norfolk.

**National Indicator.** A national measure by which central government manages performance.

**National Treatment Agency for Substance Misuse.** A special health authority within the NHS, established by Government in 2001 to improve the availability, capacity and effectiveness of treatment for drug misuse in England.

**N-DAP.** See Norfolk Drug and Alcohol Partnership.

**Norfolk Drug and Alcohol Partnership.** One of the biggest partnerships in Norfolk, N-DAP brings together a wide range of agencies from the public, voluntary, community and private sectors with specific interests in criminal justice, drug and alcohol treatment, health, community safety, regeneration and the needs of young people in order to achieve one overarching aim - to reduce the harm caused by the misuse of drugs and alcohol in Norfolk.

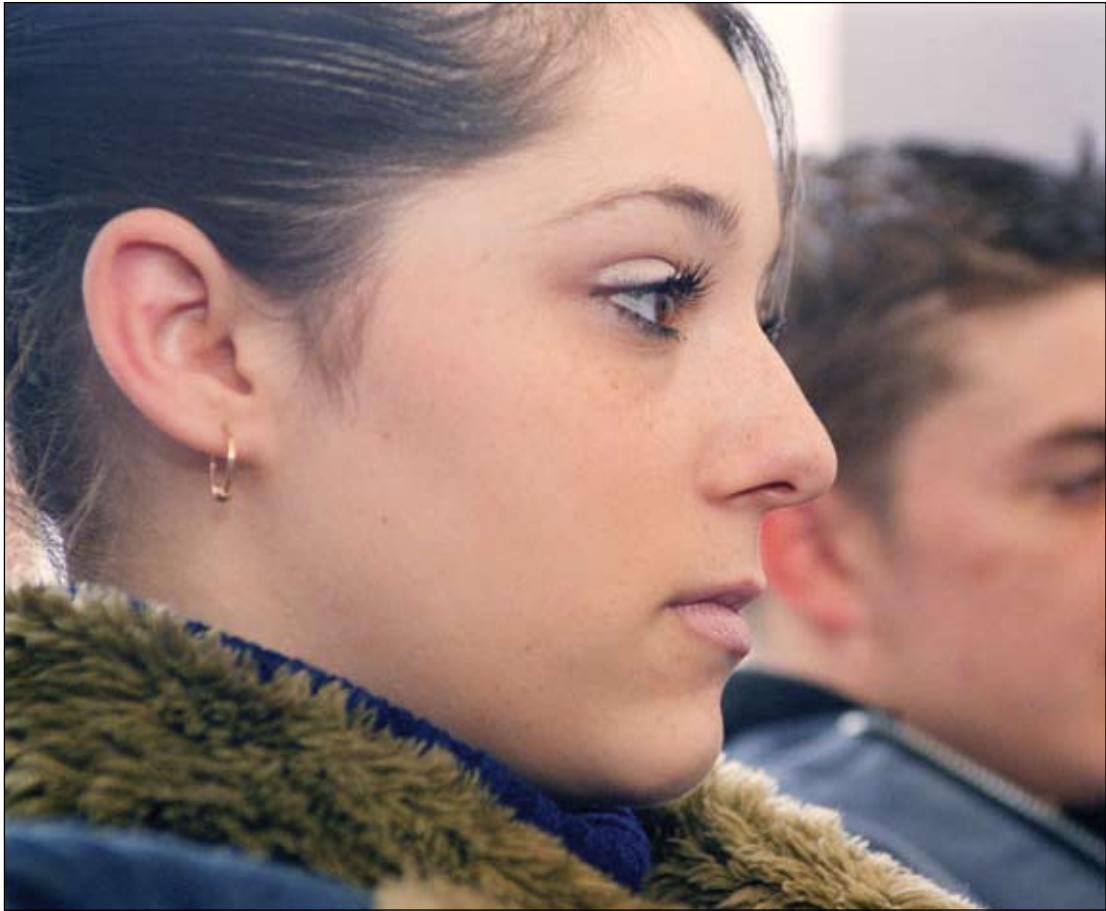
**NTA.** See National Treatment Agency for Substance Misuse

**PSA.** See Public Service Agreement

**Public Service Agreement.** Agreements around the aims and objectives of government department for a three year period. Information about Public Service Agreements (PSAs) is available at <http://www.cabinetoffice.gov.uk>

**Substance Misuse -** The NTA define 'substance misuse' as, 'use of a substance, or combination of substances, that harms health or social functioning – either dependent use (physical or psychological) or use that is part of a wider spectrum of problematic or harmful behaviour.'

<sup>16</sup> Department of Health (2008) Carers at the Heart of 21st–Century Families and Communities: A Caring System on Your Side. A Life of Your Own. (London: HM Government)



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**TACKLING  
DRUGS  
CHANGING  
LIVES**

**This logo represents all the partner agencies of N-DAP:**

Norfolk Constabulary, Norfolk's 7 Crime & Disorder Reduction Partnerships (CDRPs), Norfolk County Council, Norfolk Health, HM Prisons (Norwich & Wayland), Norfolk Probation Area, Norfolk's 8 Local Strategic Partnerships (LSPs), Norfolk Youth Offending Team, Connexions, Norfolk Healthy Schools, Norfolk's District/City/Borough Councils, Norfolk drug & alcohol treatment providers, National Treatment Agency, Government Office for the East of England (Crime & Drugs Team).

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