



Alcohol  
and Drug  
Foundation

# Family and friends of people with substance use issues.

## Survey Report

April 2022

Alcohol and Drug Foundation

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# Background – summary of key issues

An estimated 1 in 20 Australians have an addiction or substance use issue.<sup>1</sup>

Addiction is when someone's not able to control or stop using alcohol or another drug, even though it's causing harm.<sup>2</sup>

Most people who use alcohol and other drugs (AOD) won't experience any problems from their use, but for others it can have a significant effect on their health or personal life – even if the person isn't experiencing an addiction.

The relationship between someone's substance use issues and the impact on family and friends deserves attention.

Family and friends can play an important role in a person's recovery, but often their contribution is hidden and there is little formal recognition of their role.<sup>1</sup> Here our definition of 'family and friends' ranges from a person's partner, their parent or carer, their child/children or extended family and friends.

In exploring the role of family and friends supporting people with substance use issues or dependence, it's important to acknowledge that not everyone is supported by, or has relationships with, family and friends.

We know substance use issues can lead to isolation, social withdrawal and abandonment from family and friends'.<sup>3-5</sup> For others it's their experiences with family or friends that has contributed to their substance use.<sup>6</sup> For example, a person who grows up in a family environment where they experienced abuse or neglect may use AOD as a coping strategy for trauma.<sup>6</sup>

While substance use issues can have a devastating impact on the individual, on average it also has a harmful effect on two other people in that person's life.<sup>1</sup>

Substance use issues can prevent someone from meeting work, family, and social commitments, which can create tensions and conflicts.<sup>7,8</sup> Further harms might include disruption to, or ending of, personal relationships, education or work; loss of income; physical and emotional abuse, violence, stigma and trauma; relationship distress, financial problems, aggression and interpersonal violence.<sup>1,9-12</sup>

Family members supporting someone with an alcohol or drug issue may experience mental health issues of their own, including depression, anxiety, and post-traumatic stress disorder.<sup>1,8,10</sup> The mental and physical strain on affected friends and family members can undermine their own health if they don't have appropriate support networks or coping strategies.<sup>7,13,14</sup>

Many families and friends will need support to maintain their own wellbeing as well as to assist their loved one.

We know lack of support for friends and family can in turn impact on treatment access for the person experiencing substance use issues.<sup>7,15</sup> As such, supporting families and friends to have the confidence and skills to assist their loved one to pursue help early and help them recover is likely to have a positive impact for themselves as well as their family member or friend.<sup>8,16</sup>

In recognition of this many AOD treatment services now provide family inclusive support and services.



# What we don't know and why we need to fill this gap

Family and friends that are close to a person who has a substance use issue are in a prime position to understand and support that person. They are likely to observe the early signs, such as increasingly frequent or heavier use, and emotional, social and physical impacts. Early help-seeking can lessen the development of a chronic problem and reduce harm experienced.<sup>15</sup>

To better understand the support needs and barriers for family and friends of those who use alcohol and other drugs (AOD), we need to:

- identify their information and support needs; and,
- analyse how information and support services can communicate with friends and family members.

To explore these issues the Alcohol and Drug Foundation (ADF) commissioned a needs assessment survey. This report highlights the survey findings.

## Research questions

### The key research questions for this project were:

- What are the information and support needs of family and friends of people who use alcohol and other drugs?
- Where do family and friends go for information and support when a loved one has a substance related problem?
- How helpful do family and friends find the information and support they access?
- What are the gaps evident in information and support services?



# Method

In September 2020, social research organisation Kantar Public conducted a nationwide online survey of people concerned about the alcohol and drug use of a family member or friend.

The sample (n=510) was recruited through the Online Research Unit's social research panels and participation was voluntary. Participants were representative of the national population by gender, age, and location (Table 1). The survey was commissioned by the ADF and Family Drug Support. Ethical clearance was provided by the ADF's internal ethics committee.

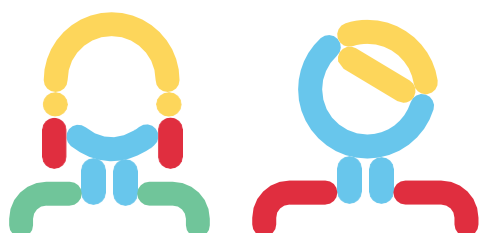
**Table 1**

## Demographic details of survey respondents

	Number	Per cent
<b>Gender</b>		
Male	n= 252	49%
Female	n= 258	51%
<b>Age</b>		
18-35 years	n= 155	30%
36-55 years	n= 174	34%
56+ years	n= 181	35%
<b>Location</b>		
Metropolitan	n= 342	67%
Regional	n= 168	33%
<b>Background</b>		
Language other than English spoken at home	n= 75	15%
Aboriginal and Torres Strait Islander	n= 9	2%

The survey collected the following information:

- demographic details of the family member/friend and the person they were concerned about
- the person of concern's level and type of drug use
- whether the person of concern received treatment for alcohol or drug use
- family and friends' help-seeking behaviour
- family and friends' sources of information and support, and their assessment of these
- family and friends' preferred sources of information and support.



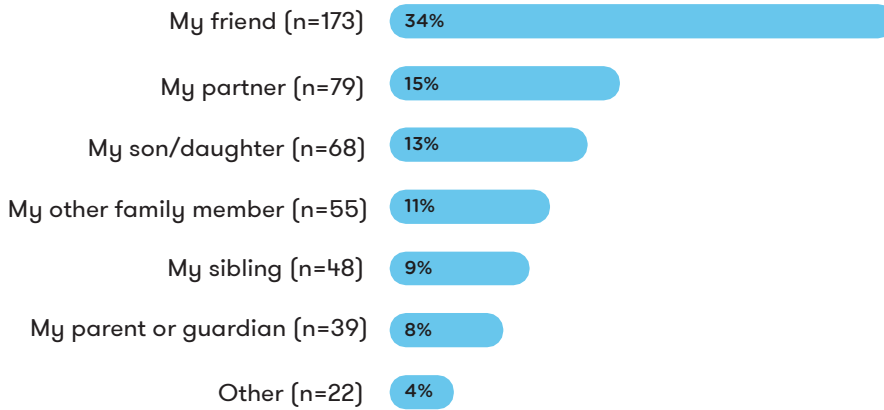
# Results

## Details of person of concern

Respondents identified their ‘person of concern’ as a family member (56%) or a friend (34%) (Figure 1). Half (49%) of the sample expressed they were very or extremely concerned for their loved one. Most people who were the subject of concern were male (67%) and more likely to be between the ages of 35 and 54 years (38%) or 55 years or older (28%). The majority had been concerned about their family member or friend for 12 months or more (66%), with 30% having been concerned for at least 5 years.

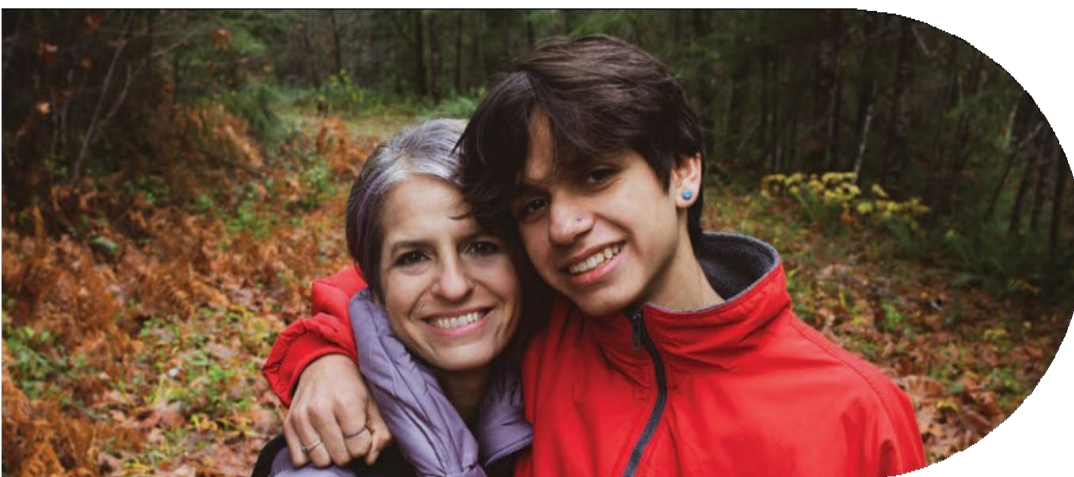
Figure 1

### Relationship with the person of concern (n=510)



Respondents were asked: “What is your relationship with the person you are concerned about?”

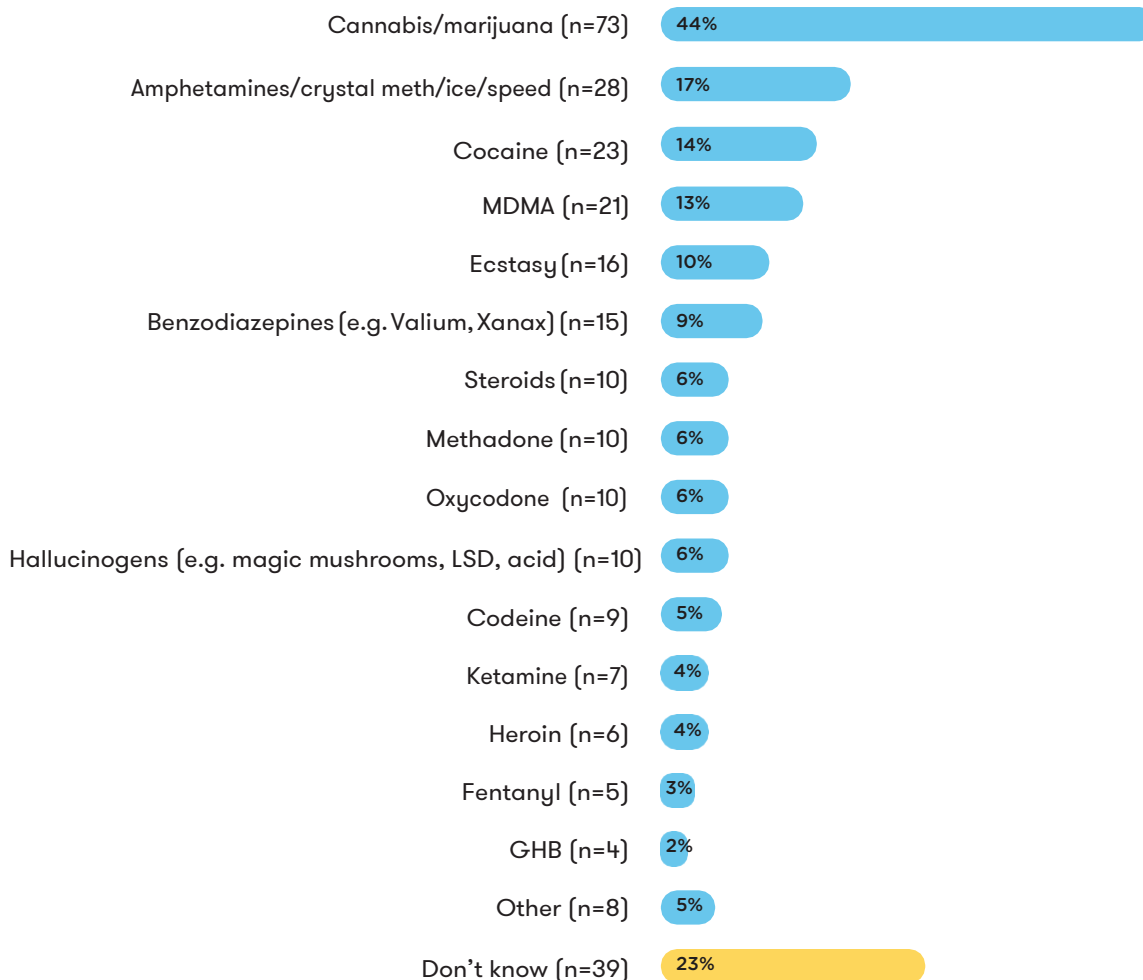
Note: 6% of respondents preferred not to identify their relationship to the person they are concerned about



Two-thirds of respondents were concerned by their relative or friend's alcohol use (67%), 12% were concerned about use of drugs, and 21% were worried about use of both alcohol and other drugs. The most common drug used by people of concern was cannabis (44%) (Figure 2). Nearly half (46%) of those who used drugs did so at least twice per week.

**Figure 2**

**Type of drugs typically used by person of concern (n=166)**



Respondents who were concerned about their friend/family member's drug use were asked: "What type of drug(s) does the person you are concerned about typically use?"

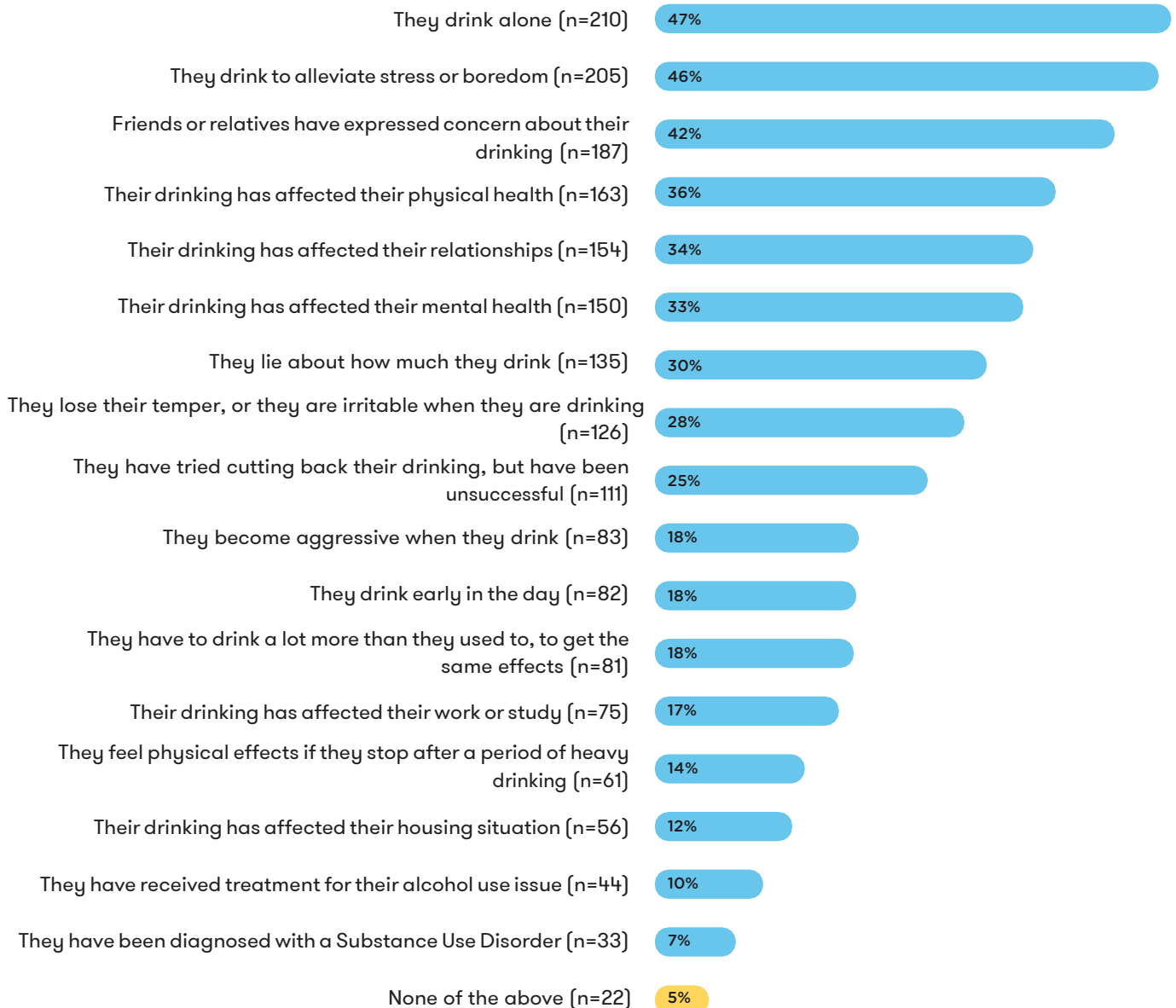


## Person of concern's alcohol use and help seeking (n= 450)

Of the people of concern who drink alcohol, 80% drink alcohol on at least two days per week; 56% drink five or more standard drinks per session and 12% drink ten or more standard drinks per session. Respondents most frequently noted their family member or friend drinks alone (47%) and to relieve stress or boredom (46%). Two-fifths reported that friends and family have expressed concern about the person's drinking. In addition, approximately a third of respondents had observed alcohol had affected the person's physical health (36%), relationships (34%) and mental health (33%) (Figure 3).

**Figure 3**

### Alcohol use risk characteristics of the person of concern



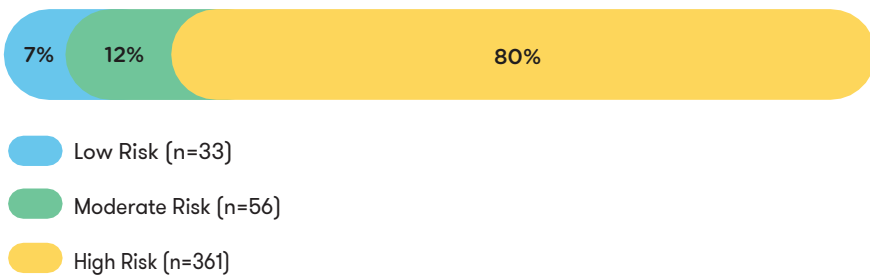
Respondents who were concerned about their friend/family member's alcohol use were asked: "Which of the following is true of the person you are concerned about?"

One-third (35%) of respondents indicated their loved one had difficulty coping with their work or other responsibilities due to daily or weekly drinking. A calculation based on the Alcohol Use Disorders Identification Test (AUDIT) indicated 80% were at high risk for an alcohol use disorder, 12% were at moderate risk, and 7% were low risk (Figure 4).

One in ten people of concern had received treatment for alcohol use.

**Figure 4**

**Person of concern alcohol use risk category according to their score on the Alcohol Use Disorders Identification Test (AUDIT)**





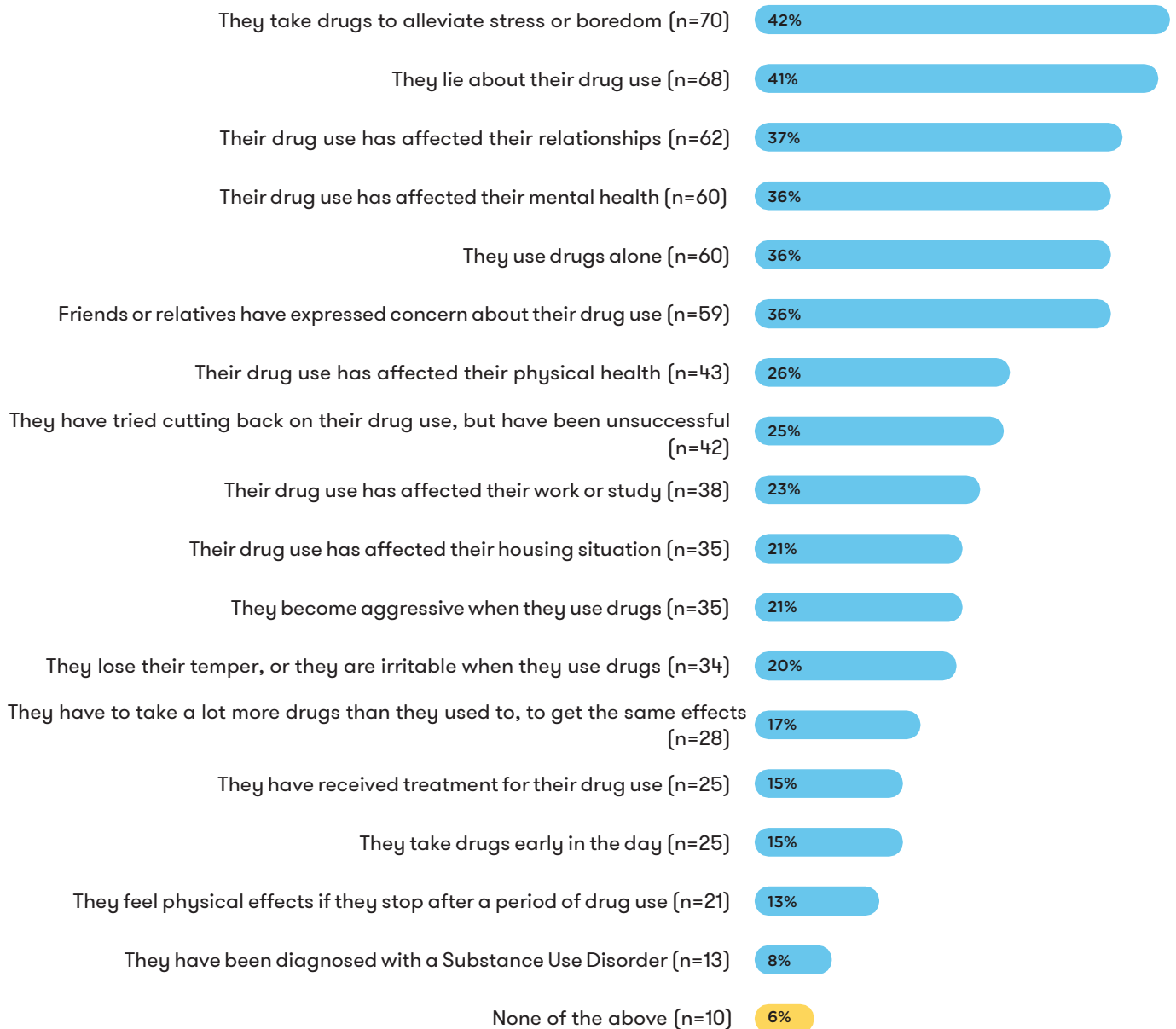
## Person of concern's drug use and help seeking (n= 166)

Respondents who reported their loved one's drug use was of concern most frequently said they take drugs to relieve stress or boredom (42%) and they lie about their drug use (41%). Their drug use had adversely affected the person's relationships (37%) and their mental health (36%) (Figure 5).

Fifteen per cent had received treatment for their drug use and 8% had been diagnosed with a substance use disorder.

**Figure 5**

### Drug use risk characteristics of the person of concern



Respondents who were concerned about their friend/family member's drug use were asked: "Which of the following is true of the person you are concerned about?"

## Family and friends' help seeking behaviour (n= 147)

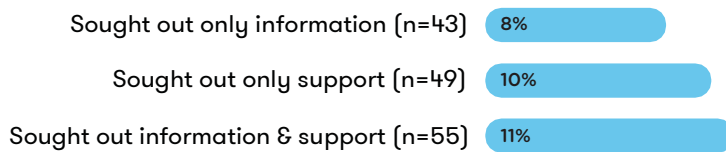
Many family members and friends of people with substance related problems have not sought information and support for themselves or the people they are concerned about. Only 29% (n= 147) have sought information, support, or information and support (Figure 6).

Seeking information or support was affected by the substance type, with 75% of family or friends waiting less than a year to seek help if they were concerned about drug use. However, 51% and 35% of family and friends concerned about alcohol and drug use or alcohol use only, sought help in this timeframe. In addition, the perceived severity of the problem impacted family and friends' help seeking behaviour.

Respondents who perceived their loved one was at high risk had sought help (89%), compared to 11% of those who perceived a low to moderate risk.

**Figure 6**

### Friends and family who have sought out information or support



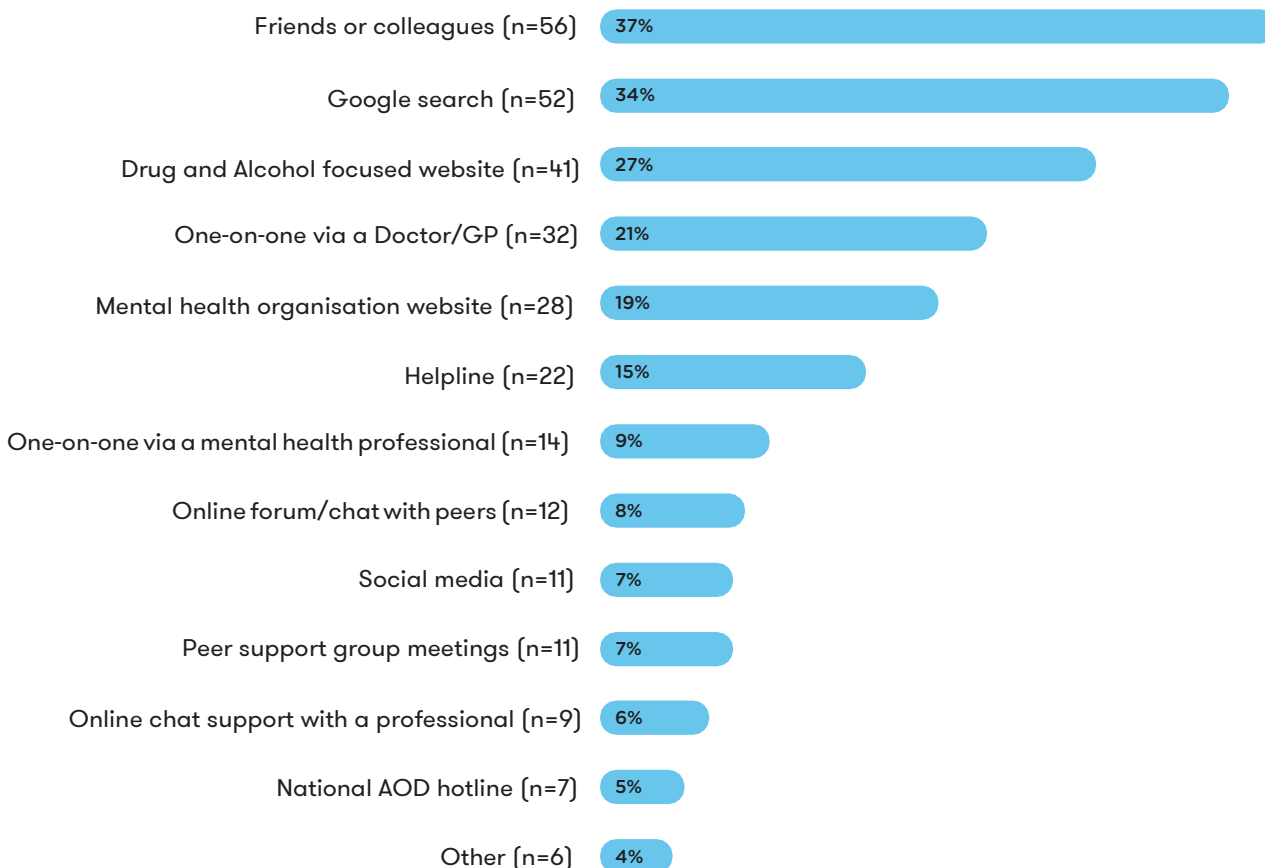
Respondents were asked: "Have you ever sought information or support regarding your friend/family member's alcohol or drug use?"



The majority of respondents (71%) had not tried to obtain information and support, and 30% of those do not intend to seek assistance in the future. Thirty per cent (30%) had considered doing so but were prevented from acting on their concern for a range of reasons: not knowing the right questions to ask (28%), worrying about what people would think (27%), and not knowing where to seek help or who to talk with (20%). Those who haven't yet tried to get help would ask a friend or colleague (37%) or try a Google search (34%) followed by an alcohol and drug website (27%) and a general practitioner (GP) (21%) (Figure 7).

**Figure 7**

**Sources of information/support considered by those who have not yet sought out information or support**



Respondents who have considered seeking out information or support regarding a friend/family member's alcohol or drug use were asked: "Where did you consider seeking information/support?"

Most enquiries for information and support related to alcohol (64%), while 22% related to both alcohol and drugs and 14% related to drugs alone. Of respondents who had sought information, the questions they sought answers to were primarily about the effects of alcohol (50%), signs of addiction (44%), where the loved one could find support services (33%) or drug treatment (33%), and illegal drugs and their effects (33%).

The major topics of support obtained included how to support their family member or friend (38%), how to access mental health services if their loved one required it (32%), how they could set boundaries between themselves and their loved one (30%), how they could talk with their loved one about substance use (30%), and how to manage conflict with that person (29%).

## Family and friends' motivation for seeking help (n= 147)

Family members and friends were motivated to seek information and support for various reasons: concern about their loved one's physical and mental health, the effect substance use was having on other family members and on their own mental health, their worry over not knowing how to help their loved one, by the loved one asking for help, and concern over the effects of the substance use, including aggression, lying, memory loss.

## Information sources used by friends and family (n= 98)

Overwhelmingly, friends and family members favoured online means of finding information (Figure 8).

The two most common sources were Google (visited by 41%) and drug and alcohol focused websites (32%). While both sources were used for information about alcohol, drugs and addiction, information about services and how to support the person was obtained from alcohol and drug focused websites. In contrast, mental health organisation websites and social media were used much less, with only 16% and 14% of respondents respectively accessing these sources for information. Mental health websites were used to access mental health support for the loved one, find out about alcohol effects, direction to support services, and direction to help for self. Social media was primarily used to find information on alcohol, drugs and addiction.

Despite their lower levels of access, social media and mental health organisation websites were considered most helpful, with 65% and 61% of those users respectively finding them to be very and extremely helpful for information obtainment (Figure 9). Half of those who accessed drug and alcohol focused websites found them to be helpful, and less than half (44%) found Google searches to be helpful.



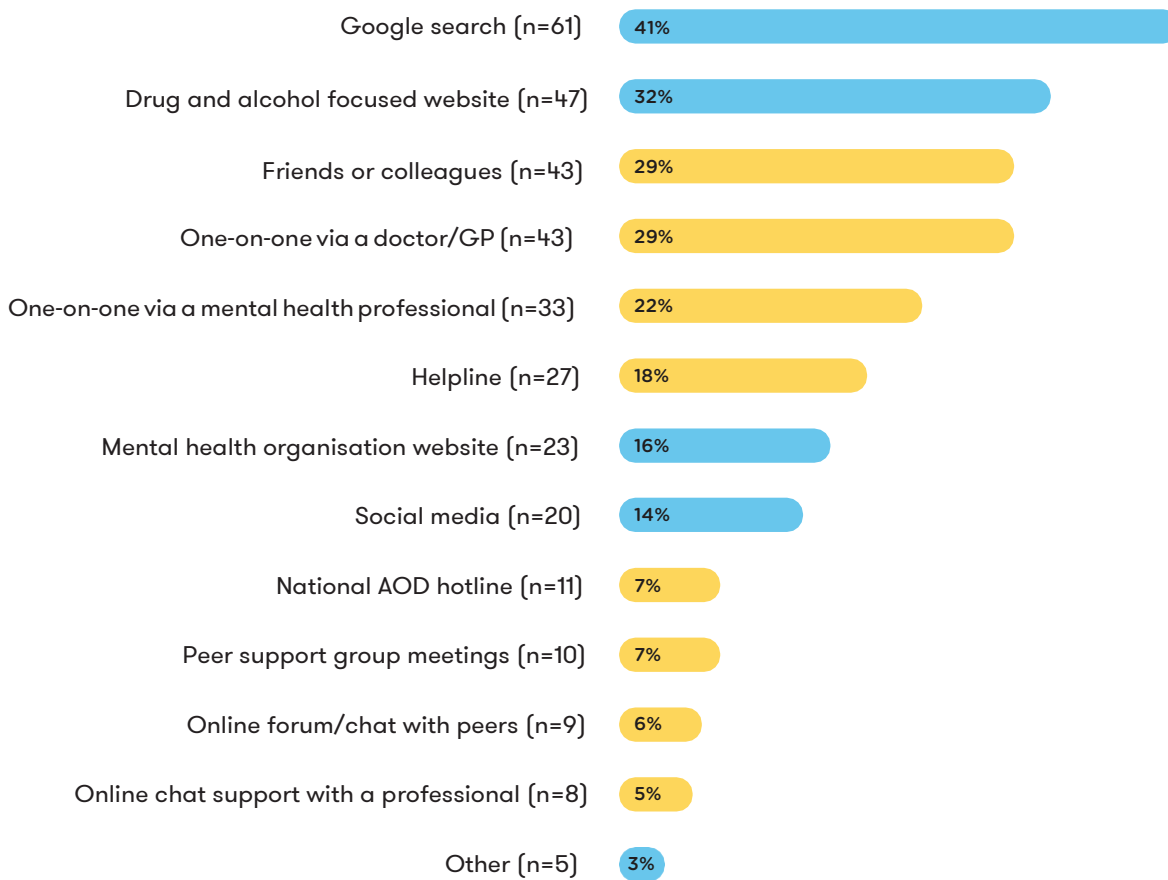
## Support services used by friends and family (n= 104)

The four main sources friends and family members turned to when seeking support were friends and colleagues (29%), GPs (29%), mental health professionals (22%) and helplines (18%) (Figure 8). Friends and colleagues provided support in having conversations about AOD use with the person of concern and how to access practical support for their mental health. GPs were sought to learn how to provide support to the person of concern. Both friends and colleagues and GPs provided information on alcohol and signs of addiction.

Friends and colleagues were only considered helpful to half of respondents (49%), whilst GPs were judged as the most helpful source of support (67%) (Figure 9). Respondents also assessed mental health professionals as more helpful than friends and colleagues (58% vs. 49%), with the mental health professional's content comprising alcohol and drug treatment options, setting boundaries, managing conflict, and accessing mental health services.

**Figure 8**

### Sources of information among family and friends of those who use alcohol or other drugs

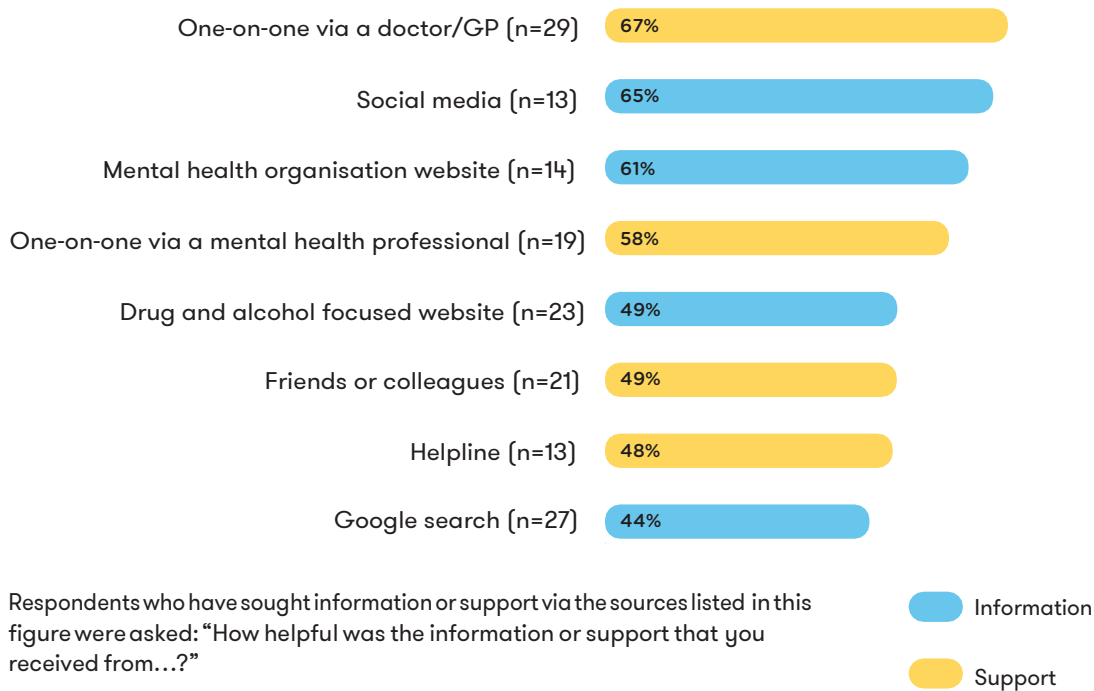


Respondents who have sought information or support regarding a friend/family member's alcohol or drug use were asked: "Where did you obtain this information/support?"

Information  
Support

**Figure 9**

**Helpfulness of each source of information/support (rated as very or extremely helpful)**



Note: sources with a base size of less than n=20 are not reported.

Some age differences were apparent in help-seeking, with those in early and middle adulthood (18 to 55 years old) more likely than older adults to seek information from Google and mental health websites, and those in middle and later adulthood (36 years and older) more likely to seek information and support from their GP.

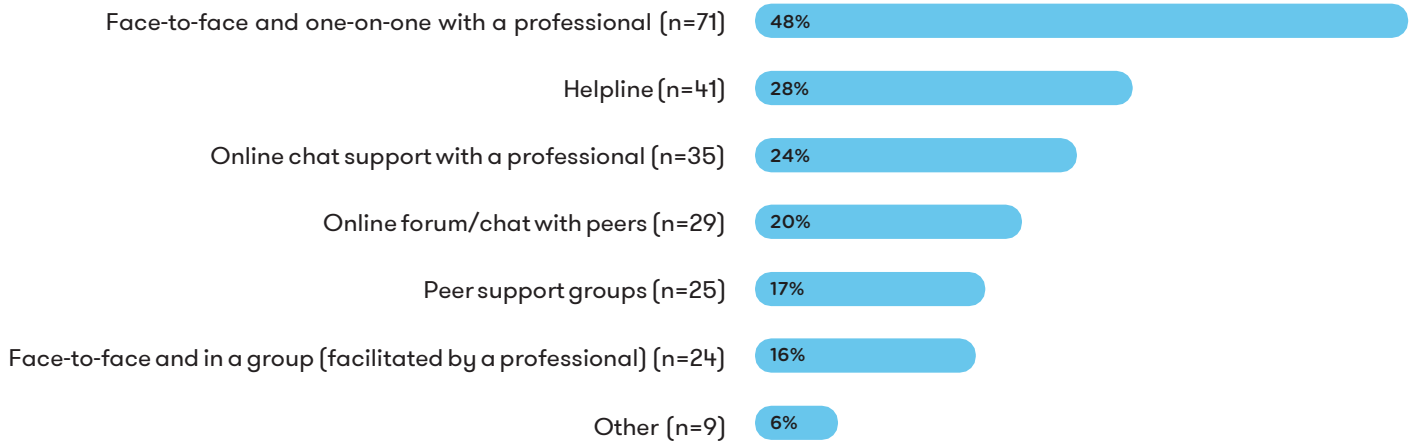


## Family and friends' preferred sources of information and support (n= 147)

Nearly half (48%) of those who had sought information and support preferred to receive services face-to-face in a personal session with a professional. More than a quarter of respondents favoured phone support or a helpline (28%), and 24% preferred an online chat with a professional (Figure 10).

**Figure 10**

### Preferred channel to access information or support among those who have sought out support



Respondents who have sought information or support regarding a friend/family member's alcohol or drug use were asked: "How would you prefer to receive information or support related to your family member/friend's alcohol or drug use?"

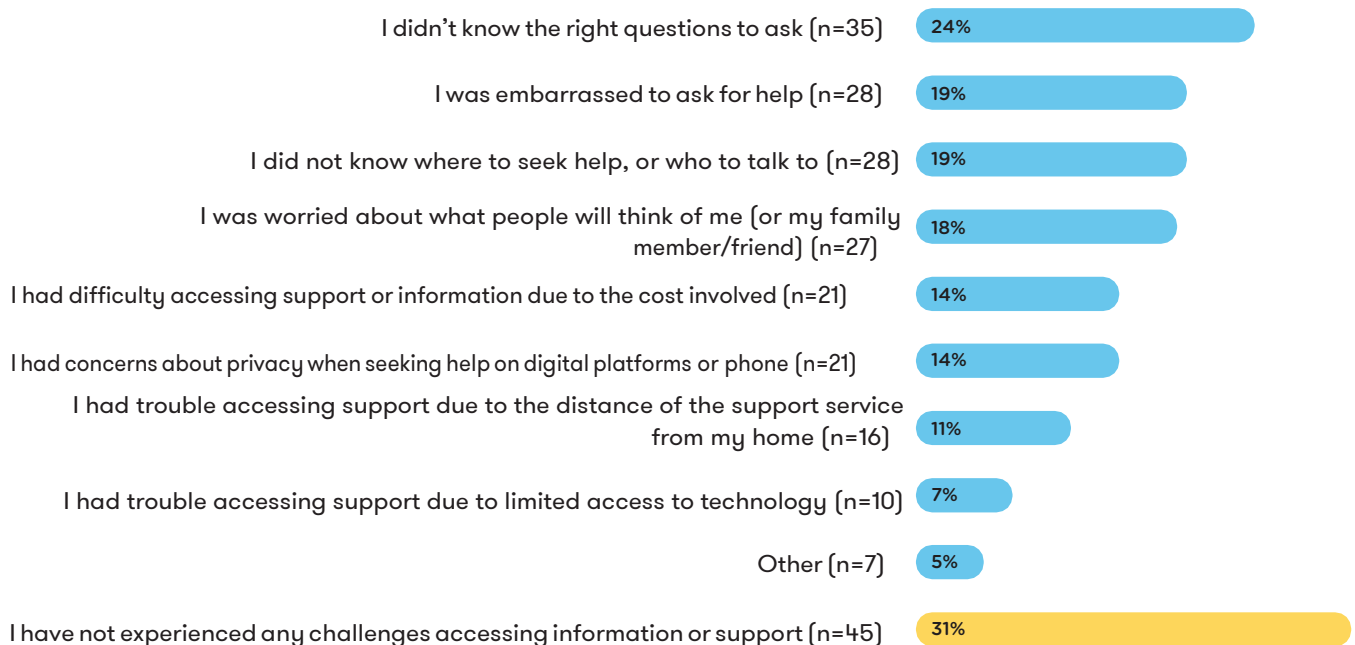


## Difficulties and obstacles that impact family and friends' help-seeking (n=147)

Among respondents who sought information or support, 69% experienced some difficulty. Obstacles included not knowing the right questions to ask (24%), being embarrassed to ask for help (19%), not knowing where to seek help or who to ask (19%) and worrying what people would think of them or their family (18%) (Figure 11).

Figure 11

### Barriers to accessing information and support among those who have sought out support



Respondents who have sought information or support regarding a friend/family member's alcohol or drug use were asked: "Have you experienced any of the following challenges when trying to access information or support related to your family member/friend's alcohol or drug use?"

## Gaps in information and support services (n= 147)

Around a quarter of respondents who had sought information and support concluded some information they needed was missing or an important need was not addressed (28%). Most of the missing information and support concerned health issues that might compromise a person with substance use problems and difficulties in communicating with the person of concern. Specific information needs included:

- the effect substances can have on comorbid physical and mental health conditions
- how to get a person to recognise they have a substance problem
- how to help a loved one who does not comply with substance treatment or refuses to attend treatment
- how to support a loved one with memory loss due to substance use
- how to support a loved one after detoxification
- how to deal with domestic abuse.

Barriers to services cited by respondents included:

- a lack of resources printed in languages other than English
- a lack of information regarding access to other services such as housing
- a lack of information on how to access mental health services
- the high cost of services.



# Discussion

These survey results indicate family and friends often do not seek help for themselves or the person they are worried about.

The majority of respondents in this survey reported being concerned about their loved one's substance use for a year or more. Of the respondents 29% had sought information or support from external sources. Assistance was more often sought by those who believed their loved one was at high-risk of harm, and it was more likely to be sought earlier if someone was concerned about their loved one's drug use. Seventy one per cent (71%) of respondents had not sought help and 30% did not plan to seek assistance. Similarly, few individuals with substance use related issues had sought assistance or treatment.

A number of issues can arise from not seeking help and support.

The literature suggests the mental and physical health and wellbeing of family and friends may be negatively impacted without effective support.<sup>7, 8, 14</sup> Conversely, without any form of brief or extended treatment, individuals with a substance-related problem face a protracted period of chronic substance dependence, and a greater risk of morbidity and mortality.<sup>7, 15</sup>

A better understanding of the ambivalence and barriers to help seeking by this group is needed.

These barriers include fear of stigma, not knowing who to approach for help and not knowing how to ask for help. Investigating how to best provide family and friends with the knowledge and confidence to navigate these barriers is essential for encouraging help seeking behaviours.

General practitioners (GPs) were considered the most helpful source of information or support while other useful sources included social media, mental health organisation websites and mental health professionals. These results suggest professional training and tailored information is valuable to friends and family (via GPs and mental health professionals), as is the ability to access information and support anonymously (via social media and mental health websites). By contrast, alcohol and drug websites were not considered among the most helpful sources.

A clear priority for friends and family members was improving their interpersonal skills so that they could form a more effective relationship with the person they were concerned about.

Their overwhelming needs were being able to talk to their loved one about their substance use, knowing how to negotiate conflict, set boundaries, gain information and provide their loved one with support.

Finding help for themselves to cope and manage their own mental health is also important, and their preference for getting this information is face-to-face with a professional, followed by a helpline, or an online chat with a professional.

This survey also highlighted a key gap in the existing literature, which nearly exclusively focusses on families and doesn't include friends as a group of interest. The survey results found a third (34%) of respondents were worried about a friend rather than a relative.

Similarly, a second survey for the ADF by Kantar Public of a broader sample (n=2,112) that included a similar number of concerned friends and family members (n=519), found the same proportion of respondents were friends (33%).

This deserves further investigation as both surveys highlight a group of people whose role and impact is unknown and less recognised than that of family members. This raises questions not only about their role in supporting people with substance use issues, but also their own psychosocial needs and how services can provide them with information, support and advice.

# Implications and future recommendations

Family and friends' concern for, and care of, people with substance use issues is a hidden problem. This survey reveals help seeking among family members and friends is low — most have not sought help and one-third do not intend to seek help.

## Practice

At present there are many barriers for those needing help and support for family and friends navigating AOD issues.

Alcohol and drug services can use the insights and data generated by this project to amplify the valuable work many are already doing with family and friends, especially those who are reluctant to seek help.

While this survey focused on the information and support needs and behaviours for friends and family members, the impact of the services and programs they access also needs to be better understood. There is limited knowledge around which programs and services are most effective in supporting family and friends, and a greater focus on evaluation of consumer experience and outcomes is required.

Forms of public advocacy may be helpful to reassure family and friends that help is available to them and their loved one. Their fear of stigmatisation might be allayed by a publicity campaign and/or by websites promoting pages dedicated to their specific needs.

Family and friends have sought material on how they can support themselves and their loved one. They want to know how to contact and talk to healthcare staff about treatment services and programs, how to talk with their loved one about substance use, how to set boundaries, negotiate conflict and care for themselves.

Illustrating examples of effective communication via short videos might be useful for those who lack confidence. Advice and materials need to be provided in languages other than English, possibly via community websites, to reassure and provide access to services for people of all cultures.

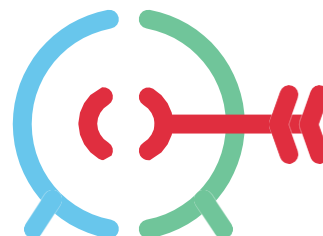
Information services can:

- promote higher levels of health literacy and use of treatment services
- inform friends and family that people with a substance use issue often respond well to brief interventions by primary care practitioners who advise on how to reduce risks, and how to modify or cease consumption.<sup>17</sup>

Other low intensity forms of help include telephone information helplines, and internet-based counselling services which offer anonymous and stigma-free assistance regardless of location and time.<sup>17, 18</sup>

General practitioners, helplines and online chats with a professional were the three preferred channels of information for friends and family members. It could be beneficial to:

- establish these channels and/or connect and refer people to reputable helplines and counselling
- leverage social medial channels to reach people who may be reluctant to seek assistance in person.
- provide targeted health promotion
- promote early intervention for high-risk populations via social media to encourage people to seek assistance sooner.



## Policy

The position of family members and friends who are affected by substance use deserves to be recognised by formal policy frameworks and receive additional funding.

Family and friends who are well informed and caring/supportive towards a loved one with substance use issues can help reduce the level of harm experienced and also assist them to engage in treatment and sustain the recovery process.

A focus is required at the policy level to help address some of the gaps in the healthcare system, which information and support may be able to ease.

Specifically, additional funding is needed at the systems level to:

1. assist people to more easily access help and navigate the healthcare system when seeking specialist support
2. increase the knowledge around what services and programs are most effective in supporting family and friends
3. increase awareness of the importance of taking action early to access support for themselves and the person they are concerned about
4. build capacity and quality of the healthcare system to promote access through enhancing tailored assistance for people seeking help, advice and support, especially in primary care
5. address the barriers to people seeking help for themselves and others by reducing stigma.

In Europe, the issue of families affected by substance use is addressed by national policy. The European Monitoring Centre for Drugs and Drug Addiction recommends that the family's contribution to the effectiveness of drug treatment should be recognised in both policy and practice guidelines.<sup>19</sup> The UK Drug Strategy (p21) states: "We will encourage local areas to promote a whole family approach to the delivery of recovery services, and to consider the provision of support services for families and carers in their own right."<sup>20</sup>

Those who work with concerned others in the UK argue policy must consider how substance use issues affect all members of the family and provide for treatment and support for all family members and carers, alongside treatment for the client.

By comparison, Australia's national drug strategy gives little references to families, fails to address the needs of families or how they could be addressed, and does not list families among priority populations.<sup>20</sup> Similarly, the national alcohol strategy acknowledges the impact of alcohol within families and on children of parents who have alcohol issues, but families do not appear among the priority populations.

Neither strategy recognises the issues that arise for wider family members of substance dependent people as European policies are beginning to do.<sup>21</sup>

There is scope for a nationally recognised public advocate to raise issues relating to family members and friends with policy makers as well as the wider public. Public advocacy and publicity should also help to dispel shame and associated stigma and increase people's willingness to seek assistance for their loved one and themselves.<sup>16</sup>

## Research

Very little is known about family and friends who are concerned about a person with a substance use issue.

More research is needed to understand their needs and some of the barriers they experience to accessing advice or support. Several areas are of interest:

- How are family members or friends impacted by a loved ones' substance-related problem, and to what extent does this influence their relationship?
- How do family or friends respond when they realise their loved one is experiencing substance use issues, and what specific information and/or support enables them to cope better, seek help, and engage their loved one in treatment?
- What strategies are effective at generating family and friends' interest in information and support?
- How can the barriers that hinder family and friends from accessing information and support be addressed?
- What strategies and approaches effectively encourage family and friends to seek out information and support earlier?

- What is the role of information and support in addressing stigma to increase help seeking for AOD?
- What about situations where the person is isolated from family and friends and lacks any form of social support?
- What about situations where family or friends are responsible for the trauma experienced by the person with substance use issues?

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