

Understanding recovery from a family perspective:

A survey of life in recovery for families

February 2018

Key findings

- Family members are both a resource to support recovery, and people whose own lives can be transformed through recovery, and who will benefit from their family member's recovery journey.
- Heavy and dependent drinking is associated with a range of secondary problems within families, including financial problems, mental health issues, problems at work and interpersonal violence.
- 'Recovery' journeys are experienced by families as a period of positive change, but also emotional challenge, and starting on this journey does not mean full or immediate reversal of the damage done.
- Where recovery is successful, family members can experience significant improvements to quality of life and wellbeing, including reduced domestic conflict, less use of healthcare, and improved personal finances.
- By comparison to successful recovery, relapse can lead to poorer physical and psychological health, and poorer quality of life for family members.

Researchers

Dr Catrin Andersson, Professor David Best, Dr Jamie Irving, Michael Edwards, Dr James Banks, Adam Mama-Rudd, Rebecca Hamer (all Sheffield Hallam University, Department of Law and Criminology)

Background

A growing body of research describes how the lives of dependent drinkers (and drug users) can change as they move from active addiction to recovery. The Life in Recovery surveys in the US, UK, Australia, Canada and South Africa all reveal marked improvements in physical and psychological health, family functioning, employment and education, reductions in crime and improvements in community engagement. However, no surveys have, until now, assessed the experience of recovery from the perspective of family members.

For family members, recovery is experienced in two senses. They observe the journey of the recovering drinker; however, they also embark on their own journey of change as a consequence of their experiences. The work presented here attempts to describe both aspects.

Methods

The Life in Recovery survey asks substance users about their life experiences during active addiction and, subsequently, in recovery. This project adapted the Life in Recovery survey to capture the experiences of family members around recovering drinkers. During the design phase, half-day public involvement workshops were held in Sheffield and London, each attended by 30-40 people. Two key issues emerged:

• For many participants, their family member had relapsed and could not be regarded as being in recovery, but they felt that they still had something important to contribute.



• The standard Life in Recovery survey needed significant amendment to become relevant to the needs and experiences of family members.

The draft survey was extensively amended in the light of the workshops. It was further refined, and then piloted, following comments from a project advisory group containing academics, practitioners and experts by experience.

The survey ran for three months, and was circulated nationally via Adfam support groups, social media, and other partner agencies. It was also circulated internationally with the support of Faces and Voices of Recovery (FAVOR) and William L. White.

The surveys were completed by individuals who had a family member in, or attempting, recovery from dependent drinking. All findings, therefore, reflect the experiences of the survey respondents rather than the drinker in, or seeking, recovery.

Findings

There were 1,565 valid completions of the online survey.

- 48.1% of respondents were parents
- 23.6% spouses or ex-spouses
- 10.3 were children
- 8.7% were siblings
- 1.3% were friends

The majority of participants were women (87.7%) and the average age was 52. The majority (81.6%) described their ethnicity as White British or White. Around two-thirds of the sample were married or living with a partner. Just over half (51.4%) were in regular employment, and a similar number had a degree or postgraduate qualification. The sample, therefore, had higher qualifications than the national average, which suggests a skew towards people with higher levels of 'cultural capital' among respondents. This should be borne in mind when interpreting the results.

Over one-third of the sample (36.9%) were receiving help or treatment for emotional or mental health problems at the time of survey completion, with 71.9% having received help at some point for emotional or mental health issues.

Respondents reported family members with a number of dependencies, often multiple:

- 62.6% alcohol
- 67.7% illicit drugs
- 34.8% prescription drugs
- 7.3% 'legal highs' or Novel Psychoactive Substances

The average length of the substance-using career was 14.1 years. 78.8% had attended a treatment programme at some point for their addiction problems.

Although the survey was initially targeted at those in recovery, 33.2% of former users had relapsed at the time of the survey, according to the responding family member. The family members of those who had relapsed reported poorer physical and psychological health, and poorer quality of life than those whose family members were still in recovery¹.



Changes experienced by respondents during the recovery journey

- 55.1% of respondents reported having debts during their family member's active addiction, compared to 44.0% during recovery²
- 27.7% of respondents reported that they couldn't pay their bills during their family member's active addiction, compared to 17.6% during recovery
- 31.7% were victims of family violence during their family member's active addiction, compared to 10.5% during recovery
- 4.7% were perpetrators of family violence during their family member's active addiction, compared to 0.9% during recovery
- 46.1% had untreated emotional or mental health problems during their family member's active addiction
- 8.7% had frequent use of healthcare services during their family member's active addiction period, compared to 2.7% during recovery
- 5.0% of respondents were arrested while their family member was in active addiction, compared to 2.0% during recovery
- 12.9% of respondents drove under the influence of alcohol or drugs while their family member was in active use, compared to 3.9% when they were in recovery
- 3.4% of respondents served prison time while their family member was in active use, compared to 1.2% when they were in recovery
- 8.7% of respondents were fired or suspended from work while their family member was in active use, compared to 4.0% when they were in recovery
- 59.2% of respondents got positive work appraisals while their family member was in active addiction, compared to 89.9% during recovery

These effects were even more dramatic when the drinkers or substance users who had relapsed were considered separately. Respondents also reported high rates of grief in relation to the perceived loss of the person drinking heavily (even though they had not died in most cases) and elevated rates of stress, although these tended to diminish as their loved one started their recovery journey.

Changes experienced by the individual in recovery

The proportion of drinkers who were victims of family violence fell from 26.3% to 9.0% when they entered recovery. The proportion who were perpetrators of family violence fell from 33.4% to 11.3%.

Implications

This report highlights the toll that addiction exerts not only on individual drinkers but on those around them, and it clearly establishes the importance of recovery in mitigating some of these adverse effects. At the same time, it shows that while families as a whole experience significant benefits through the recovery journey of loved ones, not all of the emotional damage is reversed, and relapse undermines at least some of the positive gains.

It is clear that family members need support not only to assist loved ones dealing with addiction but in their own rights.



The challenges faced by many of our participants in finding the right kinds of support suggests that such services are both needed and inadequately provided, with too great a reliance on voluntary community groups run by committed peers.

This report confirms the need for a focus on families, as well as individual substance users, when planning treatment and recovery interventions. It shows that family members are both a resource to support recovery, and people whose own lives can be transformed through recovery. Supporting families is essential to developing an integrated approach to reducing alcohol harms, and understanding the experiences of family members plays a key role in achieving this goal.

Conclusion

Family members of people in addiction and recovery have important things to say, and yet their voices are rarely heard. While there is a well-established research evidence base showing the impact of addiction on the lives of drinkers (and other substance users) themselves, this is the first piece of work that illustrates the impact - across multiple domains - on family members around dependent drinkers. The effect of living with a family member who is dependent on alcohol or other substances is substantial and long-lasting: over 70% of participating family members reporting lifetime emotional or mental health problems, and over one-third suffered from those problems at the time of the survey.

Whether the person with substance use issue is currently using clearly affects the wellbeing of family members. Those family members who reported that a loved one was in recovery showed markedly better functioning across all of the areas of physical and psychological health, and quality of life than when the loved one had relapsed. In other words, family members are not only positively influenced by the recovery of the dependent drinker, they are also susceptible to reversals if these gains are lost. This is critical given the finding that the impact of recovery crosses so many domains of the family members' lives.

References

1'Recovery' is used here to describe the period when a dependent drinker seeks actively to change their drinking. For most, but not all, respondents this implied abstinence. The term is not used prescriptively (i.e. to imply a singular model for recovery), nor does 'relapse' imply that recovery ends completely if an individual returns to drinking'

2 The term 'active addiction' is used here to describe the period of heavy drinking prior to embarking on the recovery journey. This term is used pragmatically and does not imply a particular model of addiction or dependence

Download the Final Report

Alcohol Research UK, which recently merged with Alcohol Concern, works across the UK to reduce alcohol-related harm by ensuring that policy and practice can always be developed on the basis of high quality research..

Read more reports at www.alcoholresearchuk.org

Alcohol Research UK, 27 Swinton Street, London WC1X 9NW Registered charity 1140287 Registered as a Company Limited by Guarantee Number 7462605

