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Peer Family Support Services (PFSS) as envisioned through the PRO-A Family Focus Groups

Forward:

As part of an effort to more fully understand the need for family focused support services grounded in lived experience, the Pennsylvania Recovery Organizations – Alliance conducted three focus groups over the course of the last year with 28 family members. As background, lived experience is considered as interacting with a loved one engaged in unhealthy substance use and undergoing a process of growth as a result of this experience. Many of the participants have obtained or are in the process of obtaining certification as a Certified Family Recovery Specialist (CFRS). Through this process, we also shared our results from these focus groups with six content experts as we worked to organize and focus this document. It was noted during the process by several who participated that this was groundbreaking work that may be of interest well beyond Pennsylvania.

The development of Pennsylvania’s Certified Family Recovery Specialist (CFRS) credential in 2018 has led to a broader dialogue on the importance of informed, supportive family to the recovery process. The family process of change and healing can run parallel to, yet also independent of the substance use recovery of the loved one with a substance use condition. This document is intended as a starting point to inform the policy discussion on enhancing and expanding family focused services relating to substance use and recovery across Pennsylvania.

It would be hard to overstate the passion and invested interest of those who attended the focus groups with the vision of developing family supports as an integral and parallel process of recovery nestled within our existing substance use treatment and recovery care system. It was abundantly clear this effort was well received within the family community and that family centered resources are an important element of our care system deserving a dedicated and expanded focus. We are grateful for the time, energy and talents of those involved.

Role and function of the family support care work in a family recovery focused care process:

The role and function of CFRS is to engage and support families impacted by a substance use condition through the provision of Peer Family Support Services (PFSS) within a peer to peer lived experience-based family focused model. Developing capacity and access to such services is critical to empowering families to navigate the complex dynamics of addiction and recovery from a family perspective. A systemic focus on family, central to the overall recovery continuum has historically been absent within our substance use system of care. The focus of peer family work is to instill hope, engage, support and educate families in order that they may be restored to wellness. We also strongly believe that family constellations have the intrinsic right to define their own membership. We must strengthen focus on the family as a fundamental element of our larger care system. It is also true that family wellness is not only possible, it is probable if given the support and resources needed to augment healing.

It was widely agreed within our discussions that families experiencing addiction often have little understanding of what is going on or how to get help. The experience can be isolative and deeply steeped in shame. In this context, acknowledging a problem and reaching out for help can be tremendously difficult. This slows access to care for all involved, which can result in dire consequences. Engagement with a CFRS with lived recovery experience with substance use conditions and recovery can make it easier to ask for and to access help and expedite healing. The CFRS supports and assists family members to develop family focused recovery capital.

Recovery capital is generally defined as the breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery from a substance use condition, and we believe this extends to families. Family recovery capital develops in a way that strengthens internal and external coping capacity, empathy and facilitates connectivity to healing resources.

The roles of the CFRS are varied, from resource coordinator, to mentor, to aligning families with treatment and support programs, as well as other needs like housing and social services. We believe that CFRS's should focus on efforts to reduce negative public perception about substance use conditions and the families that experience them. We think family peer services are fundamental to reducing stigma so that over time, we will create more favorable conditions within our communities to openly talk about addiction and recovery and change how society deals with one of our most devastating public health concerns.

To be authentic, there needs to be an emphasis on family inclusion at all levels of our service system. We believe that it is vital that the conceptualization, development, implementation and evaluation of PFSS be done in close collaboration with persons with lived family experience. PFSS occur in a non-clinical manner of engagement that empowers and provides a full range of individualized options and emphasizes self-care and healing. Care is to be conducted in a supportive, non-directive manner and be focused on engagement with empathy, warmth and positive regard. CFRS providing PFSS meet families where they are on their journey and support them through the healing process in parallel yet closely coordinated with the recovery process of the person with a substance use condition.

Establishment of a supportive, healing recovery environment through a family recovery service plan:

The family recovery plan is a vital tool to focus healing efforts as part of this process. It focuses family members goals and objectives. The family recovery service plan focuses on self-care for individual members, family crisis management, establishing healthy boundaries and individualized goals and objectives. The service plan should serve to assist families in setting their own boundaries and goals while supporting healing for all family members.

It is critically important that family recovery service plan be developed in collaboration with participants, focus on their individualized goals and are geared to support the family in understanding how and where to engage resources to help themselves and their loved one with a substance use condition. It is a tool of empowerment. The family service plan can be used to support education about addiction and recovery from a family perspective and to reduce stigma both within the family and the broader community through community engagement efforts.

Community engagement and services provided by the CFRS:

Addiction is corrosive to all of our social institutions including families. Roughly one in three families are impacted by substance use conditions. Family is the primary lens through which we experience much of our lives and addressing recovery at the level of family influences community healing and vice versa. Engagement at the community level is fundamental to support restorative processes and support healing across our entire society. The development of family centered services are critical to these efforts. They include family centered recovery friendly resources lists and access points as well as a deeper understanding of relevant care systems, regulatory bodies and legislative protections for those seeking help. A role of the family recovery specialists is to advocate for and assist in developing family focused care across all of our communities.

Family support services can strengthen recovery at the individual, family and community levels, but it is difficult to locate care that is focused on the needs of the family. Connectivity to family focused care should be readily available through a hotline or family focused web site in order to support the needs of our families, including

service providers primarily oriented to family centered processes. Strengthening these resources can further assist in the development of accessible care appropriate to the needs of our families.

By offering family recovery support services as a cornerstone of our system, families will be more able to engage with CFRS and PFSS grounded in lived experience and oriented towards non-judgmental, supportive care. Family recovery support workers field and answer questions about substance use conditions to help families understand what their loved ones may be experiencing while supporting broader recovery efforts. PFSS should be available as early as possible at point of recognition of problematic substance use, through the continuum of care of the individual and family and into long term recovery as determined by each family member.

Family recovery specialists work to educate the public on how to access care and what to look for in respect to ethical, family-oriented services. They support families in understanding what to anticipate in respect to care, what to look for in good quality treatment and how to engage in services with a loved one. Education at the community level includes an emphasis on self-care and the importance of connecting with support networks and isolation avoidance. There is a focus on autonomous functioning and the provision of care with integrity, not to exceed the intended role and function of the family peer role by engaging in clinical work. CFRSs educate the public on the types of substances loved ones may be using, common substance use behaviors and information on resources such as naloxone and its administration in the event of an overdose.

Family recovery engagement can foster the development of recovery capital, educate and empower families and improve adherence to care. Family recovery specialist can support recovery in settings such as drug court, family court, in healthcare settings, across human service organizations, within the faith communities as well as for families of justice involved individuals experiencing community reintegration from our jail and prison systems.

CFRS operating across our social service, medical care and government institutions:

We envision a family-focused care system that includes access to family recovery support services across all of our service agencies and intuitions. These include addressing trauma and providing lived family experience on healing from grief and loss common to the family experience. PFSS should be readily accessible within our schools, courts, hospitals, correctional systems, churches, community centers, human service organizations, as part of children and youth services, as part of our behavioral health care system and as a central focus of our family agencies. They should interface with all institutions in which families interact with. One of the areas of focus will be to engage families in ways that reduce negative public perception about substance use disorders and to provide additional resources for families grappling with an SUD.

Development of a peer family support service system:

There is strong consensus that PFSS need to be widely accessible. This will require equitable compensated workforce positions at living wage rates. The system of care should be a fully developed care system that includes volunteer opportunities as part of a flexible care system. Family care services, provided in part by family recovery specialists need to be accessible in every community as an integral element of our larger substance use care system model. Family focused services should be offered in parallel and collaboratively within our current substance use care system. Care should be designed to support healing as part of a five-year recovery care paradigm that support healing of the entire family constellation.

Supervision of family recovery specialists:

Supervision is important for workforce retention and to improve the quality of family focused care. All professionals and para-professionals require supervision and it is vitally important to provide good quality supervision for our CFRSs recognized by funding entities. The unique perspective of a CFRS would be best

supported through supervision by an individual with a lived family experience. This would align a recovery-oriented system of care and augment growth for both the CFRS workforce and the families that they serve. Supervision needs to be incorporated into our service system in a meaningful way in order to ensure that this work is done properly to sustain family recovery efforts. We believe it is important for supervisors to have a deep understanding of the lived family experience and how these services differ from clinical care.

There is consensus that supervision at both the individual and group practice level is critically important. A statewide family recovery specialist group should be formed to help develop and sustain the vision of family recovery support services in a coordinated manner. In order to maintain the authenticity of a lived family perspective, work needs to be done on foundational processes and procedures, such as codes of ethics, family service protocols, scope of service descriptions, etc.

Integrating family support systems into our existing system of treatment and recovery support programs:

A focus on family with respect to an individual's substance use and recovery efforts have historically taken a "back seat" to care focused on the loved one with a substance use condition. This is true even though we know that family can be fundamental to the healing of the individual with an active substance use condition as well as other members of the family system. As noted throughout this document, there was universal consensus that PFSS need to be integrated across the care system as a critical component and not simply as an ancillary service.

CFRS providing PFSS should be available in treatment programs across the treatment continuum and across recovery support services in the community to engage families in the care process. We need to embrace the family as an essential element of the treatment and recover process for all members of the family. Family Education Programs are an invaluable and integral part of the process for families; with the assistance of a CFRS, families can begin to apply that knowledge in a myriad of ways. Two significant ways may be in learning how to better communicate with a loved one, and in helping families to create their own individualized recovery plans.

Looking into the Future:

Pennsylvania was an early leader in the development of peer services in both the mental health care arena and the substance use recovery arena. We were one of the very first states in the nation to develop a certification for persons in substance use recovery. This process was led by the recovery community, as was the completion of a White Paper on Recovery Oriented System of Care, both of which occurred over a decade ago. We continue to advocate for well-defined substance use peer services, funded in a stable manner in every community.

We also have one of the strongest developed mental health peer service models in the nation. For well over a decade, Mental health peer workers have been funded in a stable and consistent manner through our state plan and include specialty focuses in such areas as older adults in connection with the Certified Older Adult Peer Specialist program, and include criminal justice populations with the Forensic Peer Specialist Training.

Over the last 18 months, we have observed an overwhelming interest in the CFRS training as well as conceptual work to develop a system of family peer support to augment and parallel our existing care system. We look forward to working in this vitally important area of focus and believe that family centered services must be elevated as a standard integral element of our substance use care system moving forward.

Thank you,



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