

Dadansoddi ar gyfer Polisi



Analysis for Policy

Ymchwil gymdeithasol
Social research

Number: 05/2011



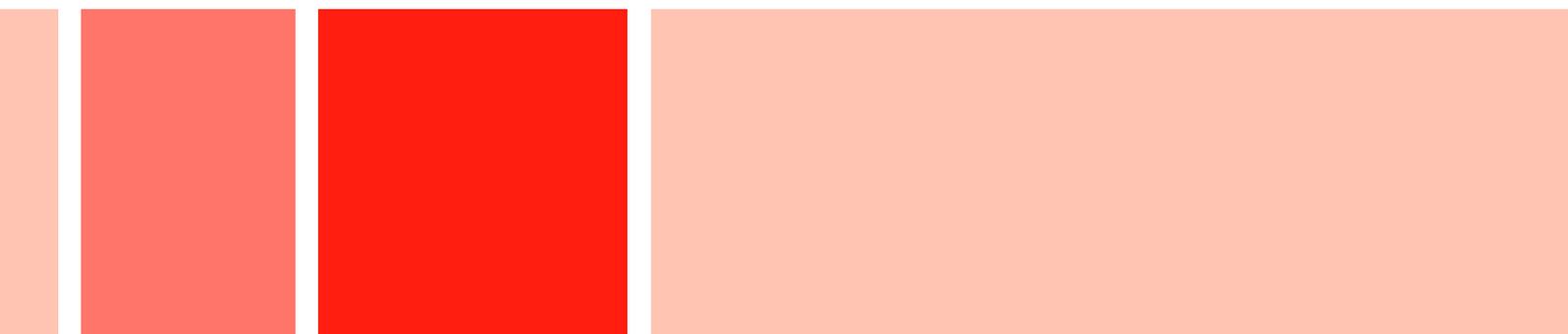
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Evaluation of the CRAFT Pilot Project

January 2011

Executive Summary



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Submitted to the Welsh Assembly Government

by

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Views expressed in this report are those of the researcher and not necessarily those of the Welsh Assembly Government

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Welsh Assembly Government Social Research, 2011

ISBN 978 0 7504 6041 5

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EXECUTIVE SUMMARY

The CRAFT programme is designed for families and carers (*Concerned Significant Others* - CSOs) of substance misusers. It aims to help them to: improve the quality of their own lives; interact with the substance misuser (*Loved One*) in a way that minimises the consumption of alcohol/drugs; and ultimately, encourage the substance misuser to seek treatment.

A CRAFT service has been operating in Cardiff since 2007, funded originally under the Drug Interventions Programme, and since July 2008 as a Welsh Assembly Government pilot project. The CRAFT project now operates across Cardiff and the Vale of Glamorgan – the sole CRAFT project in Wales, and one of only two in the UK.

This research combined quantitative and qualitative methods, including:

- A rapid review of background literature;
- Collection and analysis of project documentation and data;
- Interviews with all CRAFT staff (n=5) and seven external stakeholders;
- Interviews with seven CSOs (six past participants and one current CSO, comprising 13% of those who engaged with the full CRAFT programme);
- Analysis of written CSO feedback (n=18, comprising 19% of the total client group, 58% of those recorded as completing the programme).

Process findings

Between the 15th June 2008 and 8th December 2009, 141 people were referred to the CRAFT service: two thirds accessing the Cardiff service and a third the service in the Vale. Just under half of those referred to CRAFT had a *loved one* who was already accessing support for their substance misuse¹ - commonly from the local Alcohol and Drug Team². A tenth of CSOs were recorded as misusing substances themselves - mainly alcohol³.

Three quarters of those referred to CRAFT attended an initial assessment. In the main, the rest refused the offer of the service. Eighty per cent of those attending assessment were considered to be suitable to participate in CRAFT. Lack of suitability mainly arose due to insufficient contact between the CSO and the substance misuser.

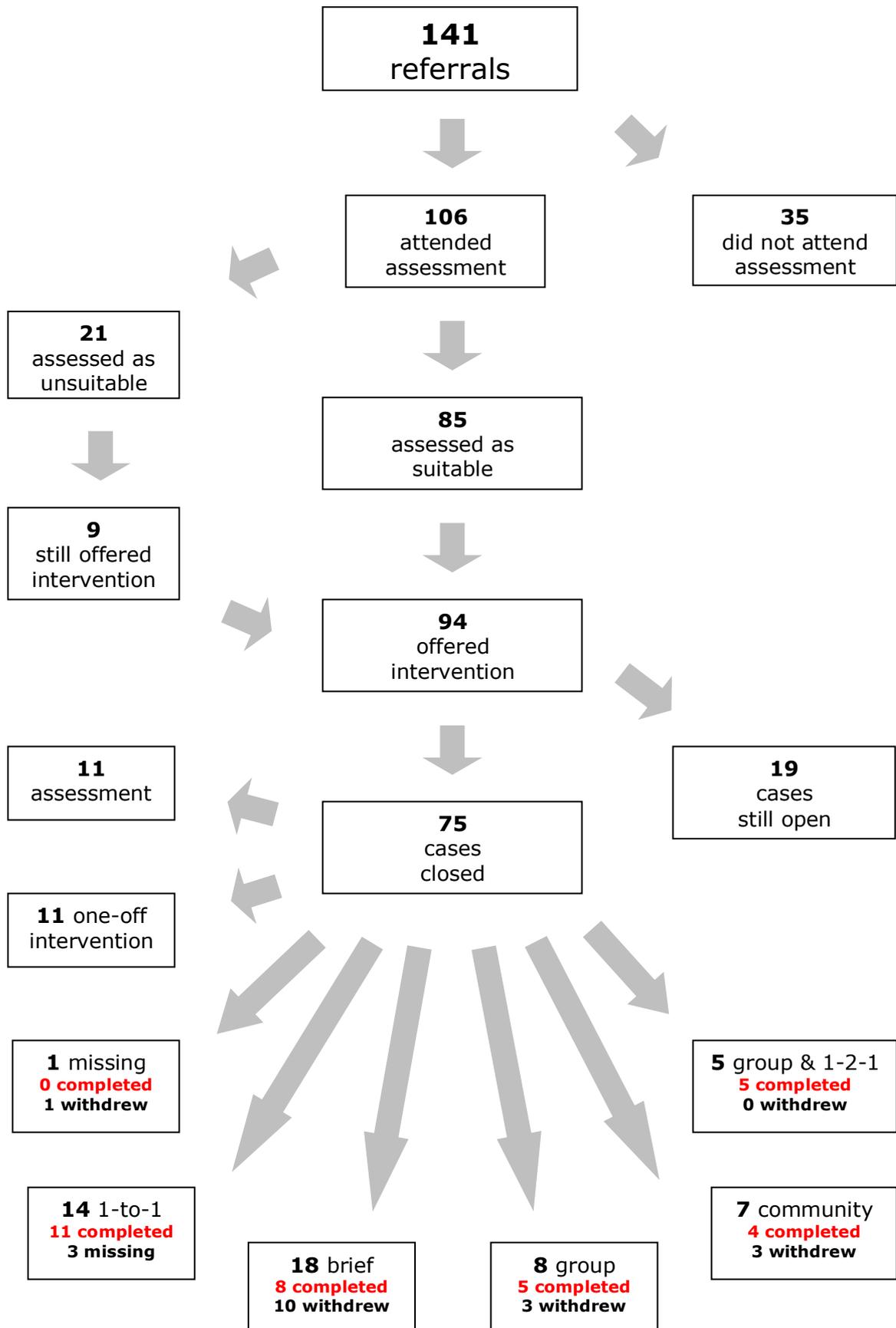
A total of 94 individuals engaged with the CRAFT programme. At the time of this evaluation, 19 cases were still open and there were 75 closed cases. The following flowchart summarises key pathways through the CRAFT pilot:

¹ Where data was recorded: n=128 cases.

² Cardiff Alcohol and Drug Team (CADT) (40 per cent) or Vale Alcohol and Drug Team (VADT) (24 per cent).

³ 86% of those CSOs recorded as misusing substances.

Flowchart of client referral, assessment, intervention and exit



Of the 75 closed cases recorded in the CRAFT database:

- Three quarters completed their intervention. Just under a quarter withdrew before their intervention was complete, but a small proportion of them had received over six hours of training.
- Just over half of CSOs received an assessment, a one-off intervention or brief intervention. Half of CSOs had one or two hours of face-to-face contact, and just under a third had six or more hours.
- A third of CSOs attended a single appointment with the service, 39 per cent attended between two and four appointments, and 28 per cent attended at least six sessions.

Outcome findings

CRAFT offers a structured method of helping families to deal in a more constructive way with their relational issues - increasing communication skills, giving them the opportunity to explore what choices they have, enabling them to develop more positive attitudes and also addressing their personal safety. However, with very little quantitative impact data collected by the CRAFT project, this evaluation has mainly had to draw on qualitative evidence. This qualitative research shows the positive impacts that CRAFT can make upon CSO psychological health and general wellbeing - helping them to make changes that improved their quality of life very quickly. CSOs reported feeling that their own health, personal relationships and working lives had all improved as a result of engaging with CRAFT.

The issue of CRAFT's impact upon loved ones (in terms of reducing substance misuse and accessing support) is not straightforward. Just under a half of CSOs engaging with the CRAFT project had loved ones who were already in some form of treatment. So, whilst just under two thirds of those CSOs participating in CRAFT⁴ reported a reduction in their loved one's substance misuse, approximately three quarters of those loved ones were already in treatment when contact with CRAFT was made.

Whilst one of the main aims of CRAFT in the USA is to help CSOs to encourage, facilitate and support their *Loved One's* entry into treatment, this reflects the context of the American treatment system which is highly medicalised and abstention-orientated – creating relatively high barriers to service access. In contrast, the treatment system within Wales (and indeed, the UK) takes a much broader harm-reduction focus and incorporates a range of approaches that seek to maximise client engagement – resulting in lower barriers to service entry for substance misusers in the UK.

These contextual differences are crucial to an understanding of the implementation of CRAFT in Wales. The Cardiff and the Vale of Glamorgan pilot developed in such a way as to allow it (at least in part) to support the families and carers of existing counselling clients - and consequently placed

⁴ CSOs who engaged with the CRAFT programme for more than one session.

less emphasis on engaging substance misusers outside the treatment system. Nevertheless, despite limited opportunities for the pilot to *initiate* treatment entry, just over half of participating CSOs reported that subsequent to their contact with CRAFT, their *loved one* had entered either a new or another separate treatment⁵. However, the true extent to which CRAFT could be developed as a referral mechanism for those substance misusers who have never accessed treatment remains unknown.

The potential for any CRAFT project to facilitate a *loved one's* access to treatment depends upon the degree to which those services can be accessed rapidly for substance misusers – whilst their motivation to change is maximised. In Cardiff and the Vale (as is generally the case across Wales and indeed, the UK), there are waiting lists to access substance misuse treatment – particularly clinical services such as substitute prescribing; detoxification and residential rehabilitation. These access barriers limit and mould the way that a CRAFT project can operate. Thus, CRAFT's ability to (1) improve the quality of life for the CSO, and (2) get substance misusers into treatment is dependent upon the specific local treatment context and its capacity to respond to any increase in referrals.

Analysis of CSO participation in CRAFT suggests that it might be particularly helpful for families where the loved one is already in treatment – perhaps benefiting them by providing support during the difficult and stressful period when a loved one is seeking to change their substance misuse patterns. This combined therapeutic approach (of a substance misuser engaged in treatment and their CSO working with CRAFT) could enhance the effectiveness of existing substance misuse interventions. Removing or decreasing the domestic triggers for substance misuse, improving family communication and reducing relationship conflict all help substance misusers to take responsibility for their behaviour and keep them motivated to change. With few other services available for families with a loved one in treatment, the provision of CRAFT to all families of substance misusers could address an important aspect of unmet support need. With one tenth of the CSOs referred to CRAFT disclosing that they misuse substances themselves, the CRAFT programme can also deliver early intervention approaches to them.

The overlap in incidence of substance misuse and domestic violence gives CRAFT the potential to develop a role in identifying and responding to domestic violence – and also a range of other problems which commonly co-exist in families where substance misuse is an issue (for example: mental health problems, financial difficulties, unemployment, deprivation and social exclusion).

⁵ In addition to the one they were in when their CSO started with the service. Sixteen per cent did not enter treatment and sixteen per cent were already in treatment when their CSO started with the service (but did not enter another separate treatment).

Conclusions and emergent research questions

There is increasing recognition of the scale, breadth and severity of support need among the families of substance misusers – at both national (WAG) and local (CSP) level. Indeed, the current Substance Misuse Treatment Framework⁶ recommends that work with substance misusers' families should be viewed as *standard practice*.

This pilot CRAFT project was implemented with less emphasis on encouraging reluctant substance misusers to enter treatment than is the case in the USA – reflecting the very different treatment and social contexts between the two locations. Moreover, with few support services available to families of substance misusers, allowing CSOs whose *loved one* is already accessing treatment to benefit from CRAFT may be valuable in its own right. Indeed, given the lack of capacity within clinical substance misuse services to respond to any increase in referrals, it may be unrealistic to include this as an expectation of CRAFT within Wales.

The local service delivery context has numerous implications for the implementation of CRAFT, including:

- The scope to which referral levels into CRAFT could be increased by more active marketing of the CRAFT service is unknown. However, a substantial amount of inter-agency networking and promotion of the service is required in order to maximise its 'reach';
- There is a need to address clinical waiting times for clients outside of the criminal justice system, if CRAFT is desired to fully develop its role in increasing the uptake of treatment;
- CRAFT could support families where the *loved one* is on a waiting list for treatment or indeed divert substance misusers from clinical services - if family support is sufficient to help them address their substance misuse;
- CRAFT could develop an early intervention role - working with CSOs who are getting drawn into substance misuse as a result of their *loved one's* drug/alcohol use;
- CRAFT could have a role in developing early intervention / low threshold access to services - not only in relation to substance misuse but also in relation to a whole host of (inter-connected) family problems. In particular, given the relatively common overlap between domestic violence and substance misuse (Galvani, 2007), CRAFT could develop a critical role in identifying and responding to domestic violence and the other problems which are commonly associated with these issues (for example: mental health problems, financial difficulties, unemployment, deprivation and social exclusion);

⁶ Welsh Assembly Government 2008 Substance Misuse Treatment Framework. Carers and Families of Substance Misusers A Framework for the Provision of Support and Involvement. Cardiff.

- CRAFT could have a role in providing a 'wraparound service' - engaging families and instituting long-term abstinence support;
- CRAFT could also develop an early intervention role in communities where substance misuse is beginning to take hold: helping to address substance misuse-related antisocial behaviour by teaching family members how to deal with it in a way that minimises its impact upon themselves and their community.

Gauging the correct balance of activity between (1) improving the quality of life for the CSO, and (2) getting the substance misuser into treatment requires detailed understanding of the immediate and long-term plans for developing both the substance misuse treatment system and the family support system. Given the huge variety in terms of different patterns of service delivery and strategic coordination across the 22 Community Safety Partnerships within Wales, methods of CRAFT implementation (and the realistic expectations in relation to its impact) vary enormously.

Looking to the future however, CRAFT could have huge potential as a foundation for the development of Integrated Family Support Services across Wales. Investing in one training post as a catalyst for developing CRAFT skills and management/supervision structures could therefore potentially achieve enormous change. Building such capacity within existing services, particularly if accompanied by an integration of clinical (health) and (psycho-) social care services – could help to develop much more effective care pathways for both substance misusers and their families.