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SMART Family & Friends

Feasibility of an intervention for family & friends
impacted by methamphetamine

A/Prof Peter Kelly
University of Wollongong



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We acknowledge the traditional custodians of the lands on which UOW is situated.

We pay our respects to Aboriginal Elders past and present, who are the knowledge holders and teachers.

We acknowledge their continued spiritual and cultural connection to Country. As we share knowledge, teaching, learning and research within their University, we also pay respect to the knowledge embedded forever within Aboriginal Custodianship of Country.



NCCRED

National Centre for Clinical
Research on Emerging Drugs

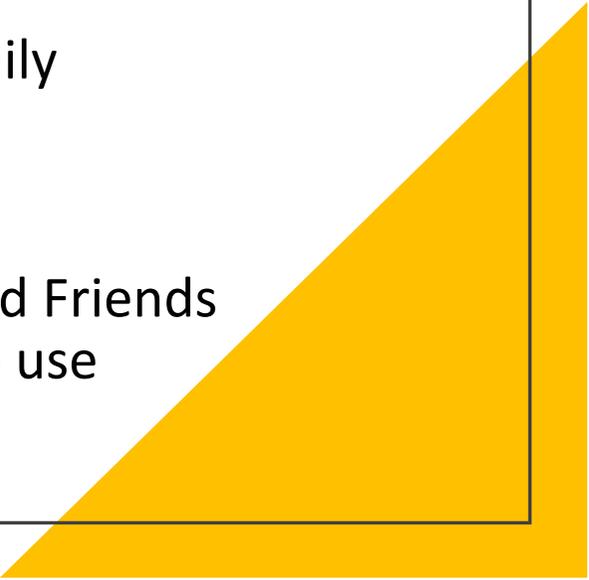
Acknowledgements



Research Team

- Dr Angela Argent (SMART Recovery Australia)
- Dr Briony Larance (University of Wollongong)
- Prof Amanda Baker (University of Newcastle)
- A/Prof Victoria Manning (Monash University)
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- Prof Leanne Hides (Queensland University)
- Prof Anthony Shakeshaft (University of NSW)
- Prof Richard Velleman (University of Bath, UK)
- Prof Gill Velleman (Bath Spa University, UK)
- Camilla Townsend (University of Wollongong)
- Tamsin Thomas (University of Wollongong)

Background

- Harms related to methamphetamine use are increasing in Australia
 - Methamphetamine has an enormous impact on family members, friends and supporters
 - Aim: Examine the feasibility of the SMART Family and Friends program for people impacted by methamphetamine use
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SMART Family and Friends

- SMART Family and Friends draws influence from Jim Orford, Richard Velleman, Alex Copello and Lorna Templeton's *Stress - Strain - Coping Support Model of Addiction and Family* and was adapted for SMART in consultation with Richard and Gill Velleman.
- SMART Family and Friends is a strengths-based group intervention offering a new approach to supporting family and friends in Australia to manage their diverse, complex and challenging needs in relation to the person they support.
- The sole aim of SMART Family and Friends is to improve the quality of life, coping skills, and support system of the supporter of the person with the behaviour of concern.
- The program provides practical strategies to help supporters cope, stay safe, seek support, problem solve and increase their own strengths and resilience.

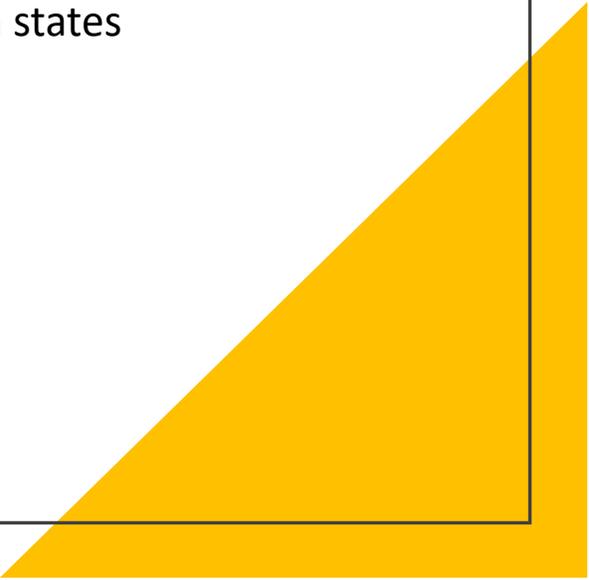
Design: Feasibility and preliminary effectiveness of SMART Family and Friends program for people impacted by methamphetamine use

Assessment: Pre/post assessment and 1-month follow-up

Target: deliver 5 community-based groups across multiple Australian states

Disclaimer: Impacted by COVID-19 – all groups delivered online

Methods

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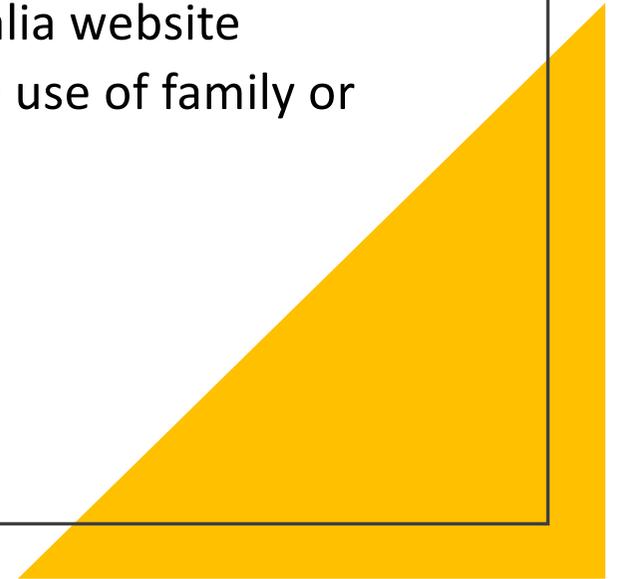
Results

Recruitment

- We have successfully completed five groups (N = 45)
- Recruitment all through the SMART Recovery Australia website
- 89% of participants impacted by methamphetamine use of family or friend

Fidelity

- High fidelity in the delivery of the groups



Results

Participant engagement

- 44 people commenced the groups
 - 6 people didn't engage (13%, attended 2 or less groups)
 - 39 people regularly attended (87%, average groups = 6.8 sessions)
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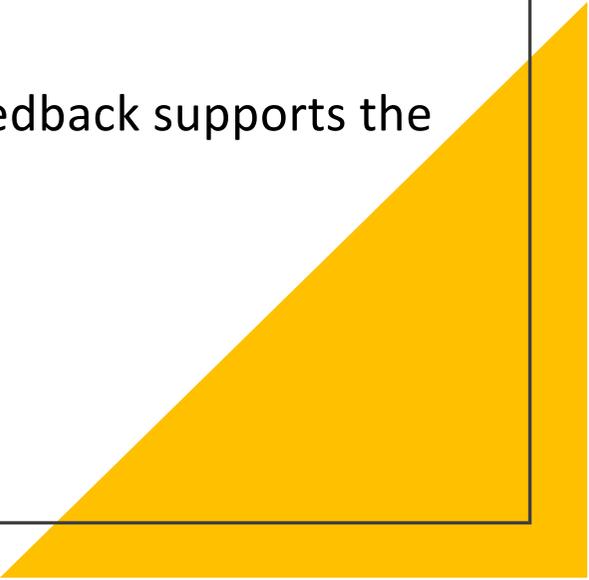
Results: participant feedback

Theme	Domain	Examples and/or quotes
Development of strategies to cope with Family Members use	Setting boundaries	<ul style="list-style-type: none"> • No longer lending FM money. • “Now I just lock the door and won’t let him into the house until the time I told him he could come back”.
	Compromising to help set boundaries	<ul style="list-style-type: none"> • Not lending FM car but driving them to where they need to go. • Not giving FM money but buying them groceries instead. • “I don’t give her money anymore, but I’ll pay for her petrol”.
	Coping with conflict	<ul style="list-style-type: none"> • Leaving when FM gets angry instead of having a fight. • “I told him we should wait until we were both calm before we talked so we didn’t have a fight”.
Changing attitudes towards Family Member	Attitudes toward dependence	<ul style="list-style-type: none"> • “I’ve now accepted that his drug use will be something we deal with our whole life”. • “Drug use is a behaviour that he does, but he is so much more than that”.
	Attitudes toward FM	<ul style="list-style-type: none"> • “learning that I can’t control his behaviour. Our relationship is better if I don’t”. • “Using drugs or alcohol is just their way of trying to cope”.

Results: participant feedback (cont.)

Theme	Domain	Examples and/or quotes
Decreased loneliness and social isolation	Making connections in the groups	<ul style="list-style-type: none">• Participants were extremely supportive of each other, calling each other things like strong, brave, and resilient.• “I realised I’m not the only person going through this”.• “It’s been wonderful making friends in the group... people who can understand and validate my experience”.
Group format and content	Difficult content	<ul style="list-style-type: none">• Participants stated the groups were exhausting and triggering. However they said: “it has to be that way if you’re talking about these things”.• The reported it was hard or impossible to go back to work after the group sessions.
	Online groups	<ul style="list-style-type: none">• “Doing it on Zoom means you feel more comfortable and secure as you’re in your own home. Plus it’s easy as you don’t have to travel”.

Conclusions

- Feasible to deliver **online**, group based SMART Family & Friends program
 - Able to recruit family members impacted by methamphetamines
 - Participants report valuing the groups and qualitative feedback supports the underlying philosophy of the program
 - We will continue our analysis
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Questions

A/Prof Peter Kelly
School of Psychology
pkelly@uow.edu.au

Angela Argent
SMART Recovery Australia
aargent@srau.org.au



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