

CRAFT

Helping Parents Handle Substance Abusing Teens

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If punishment worked, there would be few, if any, alcoholics or drug addicts...



What is CRAFT?

A-CRA= Adolescent Community Reinforcement Approach

A-CRA is a way of treating substance abuse that tries to help the substance abuser to change his/her environment (*community*) in such a way that sobriety is more rewarding (*reinforcing*) than using.

A-CRA's General Goals

- Goals: Sessions with clients
 - Abstinence
 - Participation in pro-social activities
 - Positive relationships with family
 - Positive relationships with peers
- Goals: Sessions with caregivers
 - Motivate their participation
 - Promote the client's abstinence
 - Provide information about effective caregiving



What is CRAFT?

FT=Family Training

CRAFT then is to train family members how to be A-CRA counselors in their own homes.

What is CRAFT?

CSO=Concerned Family Member

IP=Identified Patient (Substance Abuser)

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The Basics of CRAFT

- Elimination of positive reinforcement for drinking and/or using behavior
- Enhancement of positive reinforcement for non-drinking (sober) and non-using behavior

CRAFT'S 3 MAJOR GOALS

- Reduce loved one's harmful substance use
- Engage loved one into treatment
- Improve the functioning of CSO
(no matter what happens to their loved one)

Why focus on CSOs?

- Substance abusers often report that family pressure prompted treatment seeking
- CSOs can influence substance abusers' behavior due to extensive contact
- CSOs are the true experts on an abuser's behavior
- CSOs also need help (victims of violence, verbal assaults, \$ problems, marital conflict, etc. etc. etc.)

Traditional Interventions for CSOs

12-Step Programs

Johnson Institute Intervention

Mental Health Counseling

Nothing (told to wait until the IP “hits bottom”)

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Al-Anon Family Groups

Strength and hope for friends and families of problem drinkers

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INTERVENTION

IT'S LIFE OR DEATH.



Mondays @ 9PM/8C



Center on Alcoholism Substance Abuse and Addictions

NIAAA

Funded in part by a grant from
the National Institute on
Alcohol Abuse and Alcoholism

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CRAFT Randomized Alcohol Study

Miller, Meyers, & Tonigan (1999)

130 CSOs randomly assigned:

- Al-Anon Facilitation Therapy (AFT)
- Johnson Institute Therapy (JIT)
- Community Reinforcement and Family Training (CRAFT)

Al-Anon Facilitation Therapy

- 12 sessions (1 hr each)
- Purpose:
 - get CSO to attend Al-Anon mtgs
 - help CSO accept powerlessness
 - emphasize detachment & self-care

Supervisor: Joseph Nowinski, Ph.D.

Johnson Institute Intervention

- 6 sessions (2 hrs each)
- 4 sessions of preparation and training
- 1 family confrontation meeting
- 1 post-intervention evaluation

Supervisor: A. Lane Leekman, M.D.



"It's some new thing called an intervention."

CRAFT

- 12-sessions (1 hr each)
- Purpose:
 - Empower CSO to influence change
 - Train CSO in behavior change skills
 - Improve CSO's quality of life
 - Prepare CSO for treatment engagement

Supervisor: Robert J. Meyers, Ph.D.

Is Someone You Love In Trouble With Alcohol?

Do you live with a relative or partner who has an alcohol problem but won't get help? Would you like help in dealing with this problem? You may be eligible

for a free, confidential program through a federally-funded study at the University of New Mexico.

For information call

768-0260



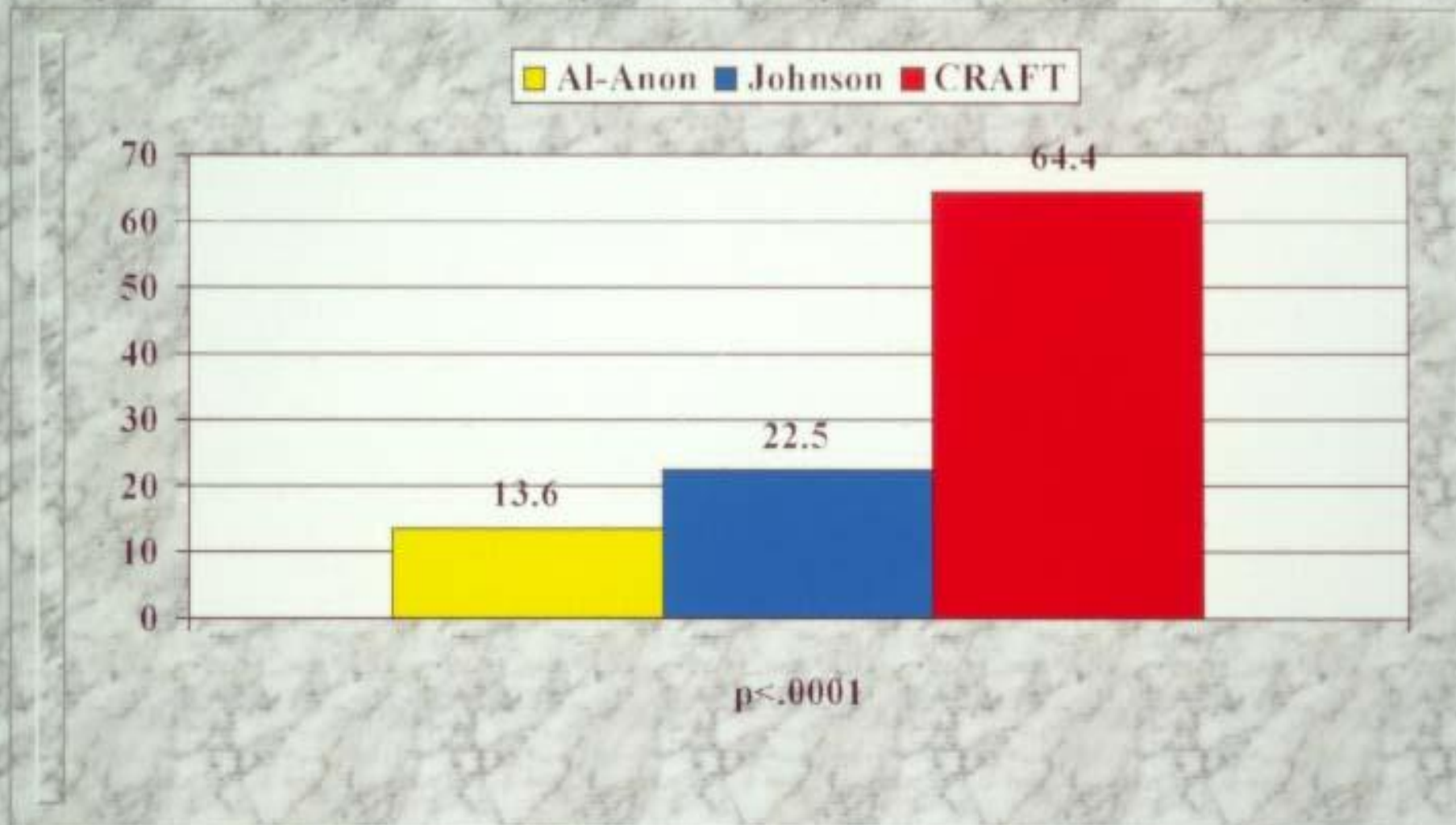
The University of New Mexico

CSO Demographics

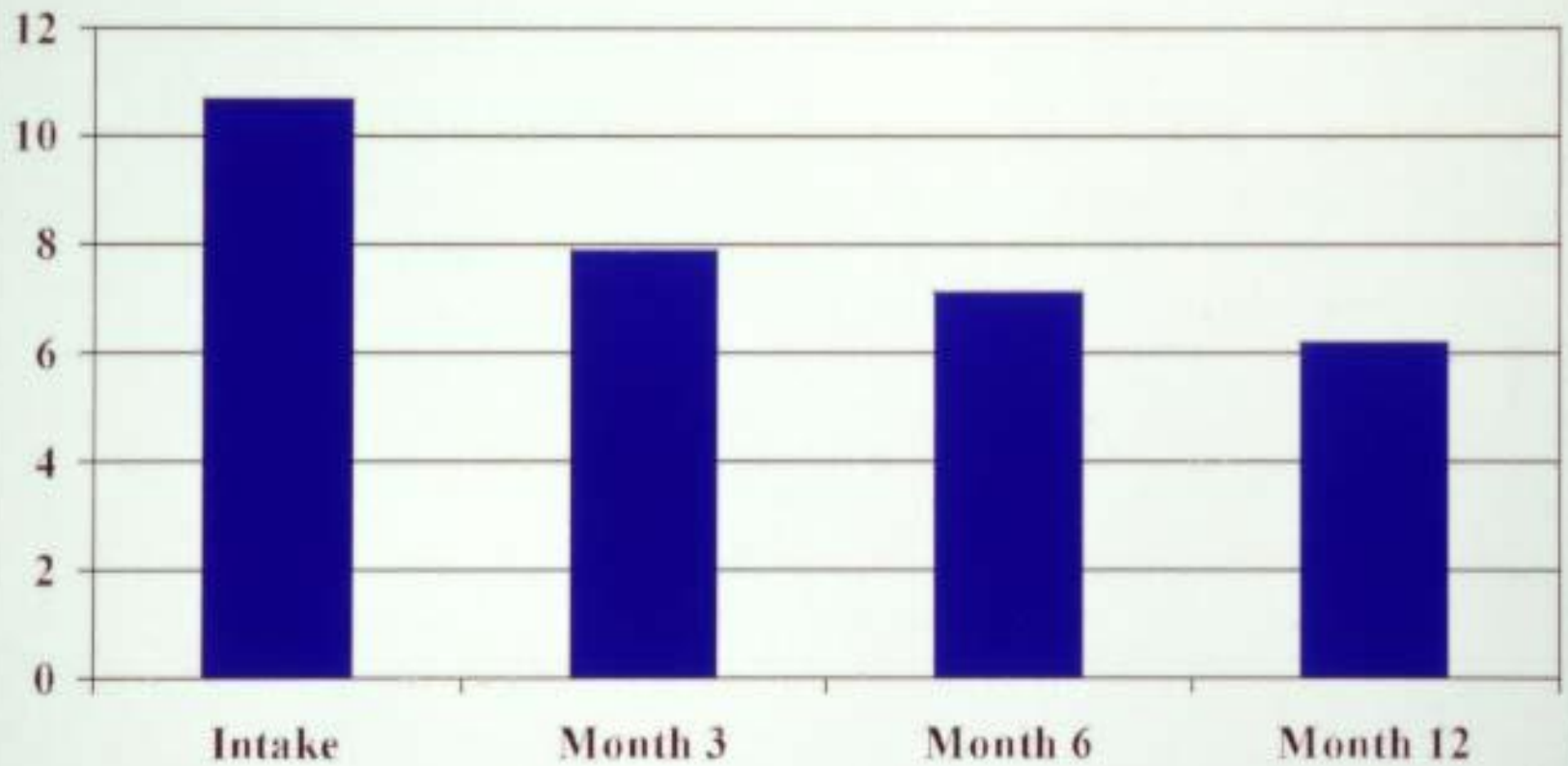
Mean age	47
Years of education	14
Females (%)	91
Anglos (%)	52
Hispanic (%)	39
Prior Al-Anon (%)	58

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Treatment Engagement Rates



CSO Depression Scores (Beck)



CRAFT (alcohol) Conclusions

- Problem drinkers who are initially unmotivated for change can be engaged in treatment through “unilateral family therapy” with CSOs
- Parents of adult children are particularly effective (An overlooked resource for engaging problem drinkers?)

NIDA

Funded by grants from the
National Institute on Drug
Abuse

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CRAFT Demonstration Project

Meyers, Miller, Hill, & Tonigan (1999)

CSOs: family/friends of 62 treatment -
refusing illicit drug users

IP Drug of Choice (CSO report)

- Cocaine = 37%
- Marijuana = 35%
- Stimulants = 16%
- Opiates = 8%
- Sedatives/
Tranquilizers = 3%

CSO Demographics

Gender:

Females = 97%

Males = 3%

Ethnicity:

White = 47%

Hispanic = 48%

Other = 5%

Age:

Range = 18 to 73

Mean = 44.7

Relationship to IP:

Spouse = 34%

Parent = 56%

Sibling = 6%

Child = 4%

Engagement

74% (46/62) of the *resistant* drug abusers entered treatment

CRAFT Randomized Drug Study

Meyers, Miller, Smith, & Tonigan (2002)

90 CSOs randomly assigned:

- CRAFT
- CRAFT + Aftercare
- AI-Nar/FT

CSO Demographics

- 88% female
- 49% Hispanic
- Mean Age: 46 yrs.
- Relationship to IPs:
 - 53% parents
 - 29% spouses
 - 18% other (sister, grandfather)

Treatment Engagement

CRAFT 59%

CRAFT + aftercare 77% [combined 67%]

AI-Nar/FT 29%

3 group comparison $p < .0006$

– no difference between 2 CRAFT conditions

More CRAFT Studies

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Kirby et al., (1999)

- 32 CSOs
- CRAFT or 12-step program
- 56% spouses of IPs, 38% parents of IPs
- 75% Anglo, 23% African American
- IP's drug of choice: 56% cocaine, 22% heroin
- CRAFT engaged 64%, 12-step 17%
- CSOs improved functioning overall

Waldron et al. (2007)

- CSOs = 42 parents/caregivers of drug abusing adolescents
- 2 parent households = 49%
- IPs: 79% Male
- 74% used cannabis
- Engagement rate = 71%

Dutcher et al. (2009)

- Study conducted in a Santa Fe, NM community agency
- Few exclusionary criteria
- 99 CSOs
- 59% Hispanic
- IPs' Drug of choice: 90% alcohol; 7% cocaine
- Engagement rates: 55-65%

CRAFT STUDIES

Sisson & Azrin 1986	Miller, Meyers, et al., 1999	Kirby et al., 1999	Meyers, Miller, et al., 1999	Meyers, Miller, et al., 2002	Waldron et. al., 2007 adolescent	Dutcher et al., 1999
14 CSOs	130 CSOs	32 CSOs 75% Anglo 23% AA	62 CSOs 80% Hispanic	90 CSOs 49% Hispanic	42 CSOs 48% Hispanic	99 CSOs 59% Hispanic
Alcohol	Alcohol	55% Cocaine 22% opiates	37% Coca 35% MJ 16% Stim 8% opiate	MJ Cocaine Stimulants	MJ Alcohol	Alcohol 90% Cocaine 7%
Randomized (CRAFT vs 12 Step)	Randomized (CRAFT/JI /12-step)	Randomized (CRAFT vs 12-step)	Non- Randomized	Randomized	Non- Randomized	Non- Randomized
86% vs 0% CSOs Better	64% vs23% vs13% CSOs Better	74% vs 17% CSOs Better	74% CSOs Better	65.5% vs 29% CSOs Better	71% CSOs Better	55%-65% CSOs Better

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New CRAFT Adaptations

- CRAFT in Groups
- CRAFT with Gambling Problems
- CRAFT with family member who is already in treatment
- CRAFT with returning war veterans with PTSD & SUD
- CRAFT groups on the internet (Smart Recovery)

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Group CRAFT vs Self-Directed CRAFT

Knapp-Manuel (unpublished dissertation)

- 40 CSOs of treatment-refusing alcohol or drug users
- CSOs were randomized to:
 - Group CRAFT: 12 sessions of group therapy
 - Self-Directed CRAFT: CSOs received a copy of *Get Your Loved One Sober: Alternatives to Nagging, Pleading and Threatening* (Meyers & Wolfe 2004)

CSO Demographics

- 85% Female
- Mean age: 51
- Relationship to IP:
 - 60% parents
 - 15% spouses
 - 7.5% siblings
 - 7.5% boyfriend/girlfriend
 - 10% other (child, friend, etc.)

CRAFT Groups

- 2 co-therapists
- 4-6 CSOs per group
- Mean number of sessions attended:
6.9

Engagement Rates

- Self-Directed:
 - 40% engaged (8 out of 20) (better than rates for JI or Al-Anon in previous studies)
- Group CRAFT (attended at least 1 group therapy session):
 - 70% engaged (12 out of 17)

HBO CRAFT Film

- CRAFT - one of the 14 segments from the Emmy Award winning Addiction Series

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Getting Started with the CRAFT Process

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CRAFT Induction

- Stay client focused
- Let CSO express frustration
- Begin to identify problem areas
- Use positive reinforcement
- Describe CRAFT's goals, procedures
- Describe expected role of CSO
- Begin to establish “reinforcers”

Drinking/Using Road Map: The Functional Analysis

- CSO's wealth of information
- CSO's behavior is worth examining

Functional Analysis: Procedure

- Get description of common drinking/using episode
- Identify triggers for the drinking/using
- Describe the drinking/using behavior
- List the consequences the IP experiences for alcohol/drug use
- Together w/ CSO: summarize the pattern
- Offer ideas regarding how this information will be used in treatment

CRAFT Functional Analysis for Loved One's Drinking/Using Behavior

External Triggers	Internal Triggers	Behavior	Short-Term Positive Consequences	Long-Term Negative Consequences
<p>1. <u>Who</u> is your loved one usually with when drinking/using?</p> <p>2. <u>Where</u> does he/she usually drink/use?</p> <p>3. <u>When</u> does he/she usually drink/use?</p>	<p>1. What do you think your loved one is <u>thinking</u> about right before drinking/using?</p> <p>2. What do you think he/she is <u>feeling</u> right before drinking/using?</p>	<p>1. <u>What</u> does your loved one usually drink/use?</p> <p><u>How</u> much does he/she usually drink/use?</p> <p>3. Over <u>how long</u> a period of time does he/she usually drink/use?</p>	<p>1. What do you think your loved one likes about drinking/using with _____? (who)</p> <p>2. What do you think he/she likes about drinking /using _____? (where)</p> <p>3. What do you think he/she likes about drinking /using _____? (when)</p> <p>4. What do you think are some of the pleasant <u>thoughts</u> he/she has while drinking/using?</p> <p>5. What do you think are some of the pleasant <u>feelings</u> he/she has while drinking/using?</p>	<p>1. What do you think are the negative results of your loved one's drinking/using in each of these areas (and which of these would he/she agree with):</p> <p>A. Interpersonal</p> <p>B. Physical</p> <p>C. Emotional</p> <p>D. Legal</p> <p>E. Job</p> <p>F. Financial</p> <p>G. Other</p>

Case Example

- CSO = 48 yr. old single mother
- IP = 19 yr. old son
- IP's drug of choice: alcohol
- IP lives w/ mom; works part-time

Common Drinking Episode?

- Drinks all evening while driving around in a car with 2 friends, Nick and Oliver

Drinking Behavior (3rd column)

1. What does your loved one [son] usually drink?

Beer

2. How much does he usually drink?

Anywhere from 6-20 cans

3. Over how long a period of time does he usually drink?

About 4 hrs.

External Triggers (1st column)

1. Who is your loved one [son] usually with when drinking?

Two younger kids from high school; Nick & Oliver

2. Where does he usually drink?

In Nick's car

3. When does he usually drink?

Every night, from about 7-11

Internal Triggers (2nd column)

1. What do you think your loved one [son] is thinking about right before drinking?

I'm not sure, but he's always saying, "There's nothing to do around here.."

Maybe he's thinking about looking to stir up some trouble.

2. What do you think he is feeling right before drinking?

Bored, restless

Short-Term Positive Consequences (4th column)

1. What do you think your loved one [son] likes about drinking with [Nick & Oliver]?

I imagine he thinks they look up to him because he's older; & he likes the fact that they're always available...and have a car.

2. What do you think he likes about drinking [in Nick's car]?

He likes driving around...and he doesn't have a car. And Nick's car has a really nice sound system supposedly. My son is really into music.

Positive Consequences (cont'd)

3. What do you think he likes about drinking [each evening]?

He says it gives him something to do at night; it's a way to socialize.

4. What do you think are some pleasant thoughts he has while drinking?

He's probably just thinking about how much fun he's having with those 2 knuckle-heads; how it's better than sitting at home. And he says he gets into the music better when he's been drinking.

5. What do you think are some pleasant feelings he has while drinking?

He says he likes feeling “high”; he doesn’t care about much of anything when he drinks. He describes it as feeling “at peace”

Long-Term Negative Consequences (5th column)

1. What do you think are the negative results of your loved one's [son's] drinking in each of these areas:

a) Interpersonal:

He's pissed off all of his friends –except for Nick and Oliver. They've all outgrown him. And it sure hasn't helped our relationship. We argue with each other all the time.

b) Physical:

He doesn't eat right; he looks bad.

Negative Consequences (cont'd)

c) Emotional:

He's moody

d) Legal:

2 DWIs

e) Job:

He only works part-time, & he lost his last 2 jobs from drinking.

f) Financial:

Spends all of his money on alcohol & fast food. He talks a lot about getting his own place, but he can't afford it.

Finishing the Functional Analysis

- Summarize along w/ the CSO
- How will this information be used in the CSO's treatment?

Communication Training

Why work on communication?

- More likely to get what you want
- Positive communication is “contagious”
- Will open door to more CSO satisfaction in other life areas as well (social support)
- Positive communication is the foundation for other CRAFT procedures

Things that Don't Work

- Nagging
- Pleading
- Threatening
- Yelling
- Lecturing
- Pouring alcohol down the drain
- Getting drunk (to show the drinker what it's like)

Positive Communication Components

- Be brief
- Be positive
- Be specific and clear
- Label your feeling: “I feel _____”
- Offer an understanding statement
- Accept partial responsibility
- Offer to help

Positive Communication: Practice Makes Sort of Perfect

- *First attempt:*

“That’s it! I can’t take it anymore. Get help or get out!”

- *Second attempt:*

“Your drinking is stressing me out. I know your job is extra tough these days, but isn’t there another way to handle it?”

- *Third attempt:*

“Your drinking really upsets me. And I miss talking to you. I know work is tough. How about I help you figure out another way to handle the stress? I have some ideas.”

Reverse Role-Play

- Advantages:
 - Serves as a good starting point for a CSO who is reluctant to do a role-play
 - Allows therapist to model good positive communication
 - Helps CSO develop empathy for IP

Role-Playing Guidelines

- Use less difficult scenarios first
- Get adequate description of the scene
- Start it for them
- Keep it brief (2-3 minutes)
- Reinforce any effort
- Get client's reactions
- Offer supportive, specific feedback
- Repeat

Timing Is Everything

- It's not enough for CSOs to know what to say; they must also know when to say it
- Help CSO identify an ideal time to have the positive communication with the IP
- Discuss how CSOs often find it difficult to have the conversation when things are going well.... (and so it ends up happening when they're upset)

Positive Reinforcement vs Enabling

- Enabling: something the CSO does that unintentionally increases drinking/drug using behavior or allows it to continue
- CRAFT's Positive Reinforcement: something the CSO does that increases *non-drinking/non-drug* using (pro-social) behavior

Use of Positive Reinforcement (Rewards)

- You can catch more flies with honey than with vinegar
- A reward is only a reward if the person for whom it is intended really wants it

Use of Positive Reinforcement

- Discuss CSO's current responses to substance use (and *non-use*)
- Get information from the Functional Analysis (consequences)
- Is it working? Willing to try something different?
- Explain a positive reinforcer

Selecting Positive Reinforcers & IP Behaviors to Reinforce

- Identify a few inexpensive positive reinforcers for the IP
- Discuss non-using IP behaviors to reinforce
- Settle on one reward and one IP behavior
- Develop a plan for implementing the reward
- Ideal situation (but not absolutely necessary): it directly competes with a typical substance using occasion

Examples of Reinforcers and Behaviors to Reward?

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Time Out from Positive Reinforcement: The Big Chill

- Withdrawing of positive reinforcement when IP resumes drinking/using
- Identify reinforcers (rewards) to withdraw
- Will IP miss the withheld reinforcer?
- Teach CSO to communicate the rationale for withholding the reward

Examples of Reinforcers to Withdraw

- Parents (CSOs) have a teenager (IP) who comes home smelling like pot each day. Withdraw _____?
- Wife (CSO) has an alcoholic husband (IP) who always wants her to accompany him to company functions. Withdraw _____?
- Older brother (CSO) has younger brother (IP) who shows up high to assist w/ Little League coaching. Withdraw _____?

Identifying the Natural Consequences for Using

- Explore CSO's unintentional support of the drinking/using.
- Refer to F.A. (consequences) if necessary
- Offer common examples:
 - Reheating dinner for late, intoxicated IP
 - Calling in sick for hung-over IP
 - Making excuses to family/friends about IP

Allowing the Natural Consequences for Using

- Select one situation
- Consider the natural consequences (neg?)
- Explore potential problems in allowing them (safe? reasonable?)
- Use problem-solving if necessary
- Role-play the communication

Examples: Allowing Natural Consequences

- After a long night of using substances the IP has parked his car in the neighbors driveway making it impossible for him to get out of his driveway, the CSO moves the car.
- Daughter (CSO) picks up her drunk dad at midnight after his Sat. night card games.
- Give me an example of a case you have dealt with or one you believe you will have to deal with.

The CSO's Struggle

- Difficulties experienced by CSOs when attempting to withdraw positive reinforcers or allow for natural (negative) consequences

Examples:

- CSO's fear of verbally linking use with consequences
- When natural consequence is highly aversive to CSO as well

Increasing the CSO's Quality of Life: Finding CSO Reinforcers

- Assess CSO's satisfaction in various areas (Happiness Scale)
- Select one area needing more reinforcers
- Identify goals and steps to obtain them (Goals of Counseling)
- Problem-solve if necessary

...get by with a little help from my friends...

- Create or re-create a social circle
- Find a confidant
- Ask for help
- Join a self-help group?

Happiness Scale

- Substance use
- Job/education
- Money management
- Social life
- Personal habits
- Romantic relat.
- Family relat.
- Emotional life
- Communication
- Spirituality
- General happiness
- [*add your own*]

Guidelines for Goal Setting

Goals should be:

- Brief (uncomplicated)
- Positive (what *will* be done)
- Specific behaviors (measurable)
- Reasonable
- Under the CSO's control
- Based on skills the CSO has

Examples of CSO Goals & Interventions

- In Social Life category? (has few friends)
- In Personal Habits category? (wants to lose weight)
- In Emotional Life category? (stressed all the time)

Suggestion of Treatment: Overview

- Prepare for Rapid Intake (for IP to be seen within 24-48 hrs.)
- Role-play the conversation (use positive communication)
- Include important motivational “hooks” (examples follow)
- Discuss windows of opportunity

Motivational “Hooks” for CSO to Use

The IP can:

- informally meet the CSO’s therapist
- have his/her own (*a different*) therapist
- “sample” treatment (try 1 session...?)
- be sure there will be no confrontation/judgment
- focus on topics besides just alcohol/drugs (e.g., job, depression)
- [tie in other IP reinforcers for attending]

Windows of Opportunity

- Is IP approachable when feeling remorseful for a drug-related “crisis”?
- Is IP asking about what’s happening in the CSO’s therapy?
- Is IP inquiring about *why* the CSO’s behavior has changed lately?

IP Treatment Considerations

- Evidence-based treatment
- Program that's compatible with CRAFT (A-CRA, CBT or another EBP)
- Therapist able and willing to work with CSOs too?
- Waiting list?
- Cost, insurance, length, frequency?

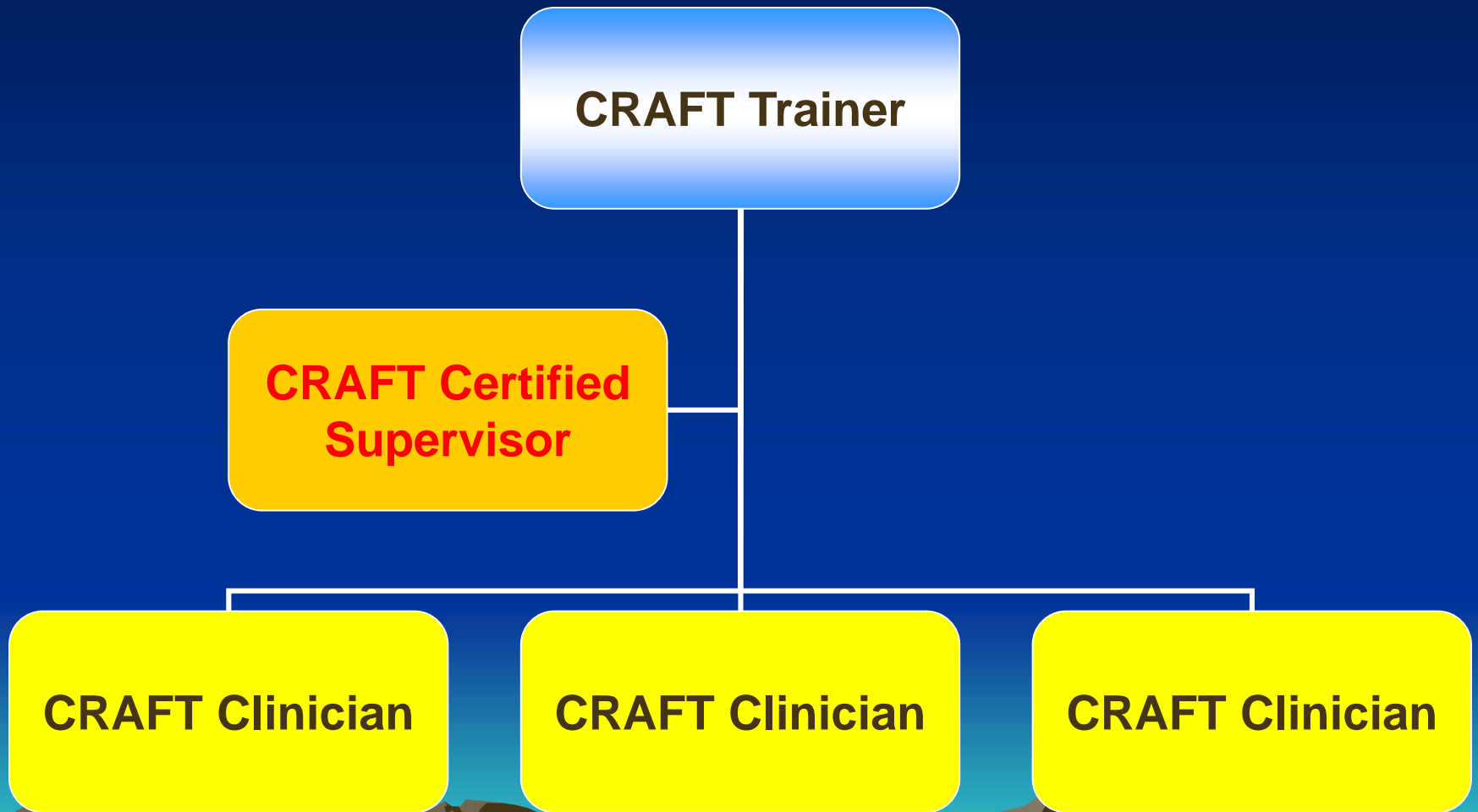
The work isn't over.....

- Prepare CSO for a treatment refusal, or a treatment dropout
- Encourage CSO to get involved in IP's treatment
- Open door policy

CRAFT IS A WIN / WIN APPROACH

- CSOs improve their psychosocial functioning whether the substance user enters treatment or not
- In 7 out of 10 cases the substance user **VOLUNTARILY** enters treatment

Training and Certification in CRAFT



Benefits of Training and Certification in CRAFT

- Cost Effective
- Prevents Drift
- Can leverage additional funding for programs
- Sustainability



Sustainability



CRAFT Certification

- Certification for Therapists
- Certification for Supervisors in CRAFT
- Certification for Trainers in CRAFT
- Contact: www.robertjmeyersphd.com

Conclusions

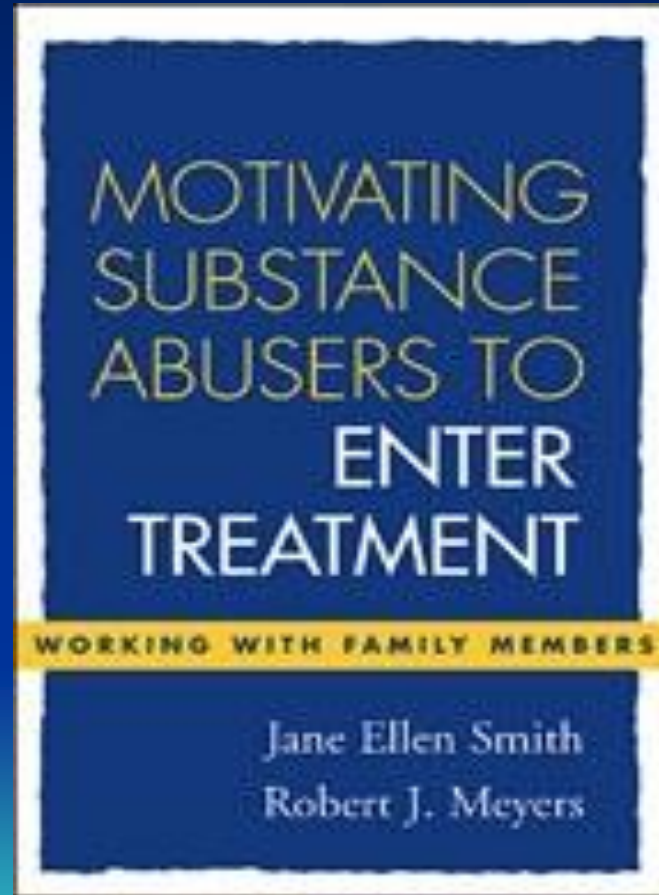
- Initially unmotivated/resistant problem drinkers/drug users can be engaged in treatment through CRAFT-trained CSOs
- CSO functioning improves regardless of engagement status

CRAFT BOOKS

Get your loved one sober: Alternatives to nagging, pleading and threatening. Meyers, R. J. & Wolfe, B. L. (2004). A self help book published by Hazelden Publications.

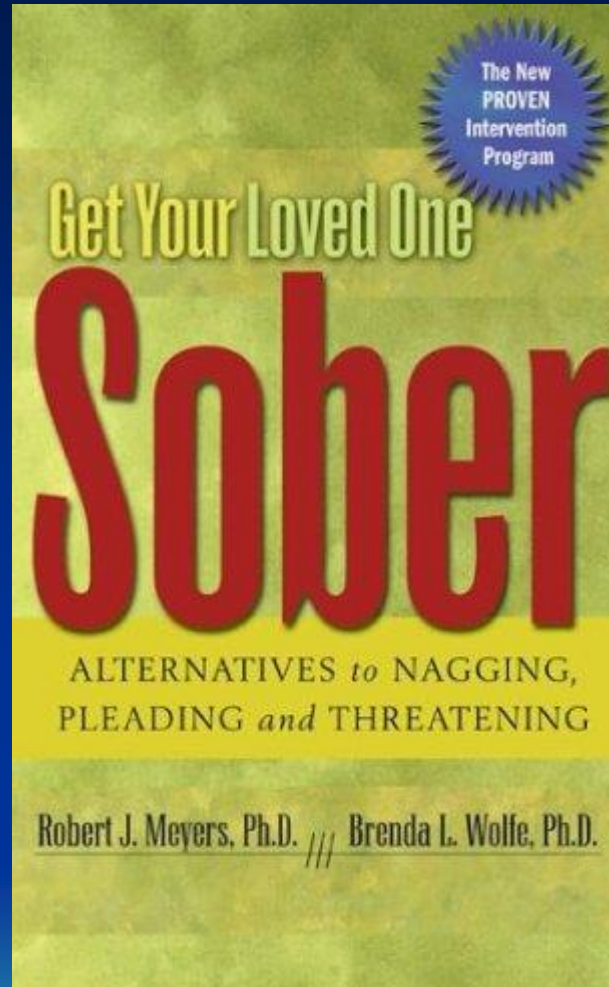
Motivating substance abusers to enter treatment: Working with family members. Smith, J.E. & Meyers, R.J. (2004). Guilford Press: New York NY.

Therapist Book from Guilford Press



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Consumer book



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Moving Toward the Finish Line

- Some things I learned
- Something I liked ...
- Something that surprised me ...
- The first thing I am going to do to use what I learned in my job is
- I can become more competent in using CRAFT after this training by.....



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