

Setting up a family support group



Adfam

Families, drugs and alcohol

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Introduction

Adfam is the national umbrella organisation for families affected by someone else's drug or alcohol use, and the leading national charity working with and for these families and the services which support them. We provide information, training and frontline services in prisons; our work also concentrates on piloting and disseminating good practice, representing the views of families to opinion formers and influencing national policy.

This is the fourth edition of this guide, which explores the issues involved in setting up and running a support/self-help group for families affected by someone else's drug or alcohol use.

★ NOTE

Whenever the term 'family' has been used, this includes partners, friends and anyone else involved with, or affected by, someone else's use of alcohol or drugs

It is designed as a reference resource containing guidelines and ideas, and enables people to be aware of the issues to be addressed when setting up or running a support group for families affected by drug and alcohol use in the family.

Requests for help in this area of our work come from a wide variety of people: parents, partners and grandparents experiencing drug or alcohol problems, drug/alcohol agency staff, faith groups, social workers, GPs, local community groups, and many more. This guide has been written with all of these audiences in mind.

1

Working out what's needed

Are you sure it is a group that is needed?

The first stage in setting up a successful group is making sure that it's a group that's needed. Thorough research into the demand for a group in your area is vital.

★ GETTING STARTED

It's important to be clear at all stages what you're planning to do, or else you'll get lost and set yourself back. Your proposals and ideas should be grounded in a proper assessment of needs in your local area.

Going through the process of checking this out will also give you information about what sort of group is most suitable and how best to go about setting it up.

Working out what's needed

If you are reading this, presumably you are aware of families affected by someone else's drug or alcohol use in your local area - you might even be a family member yourself.

How can you help these families? What do they need? What should you be doing?

In order to offer relevant support and do anything that is really effective, it is important to ask the people experiencing the problems a series of questions, organised in a structured way.

The following process gives a simple, logical structure that will lead you through from your awareness of the problems to an idea of a relevant and effective way of meeting the needs of the families.

It will help you to work out your aims and objectives for the work you want to do, which is a crucial stage in setting up anything new.

It is vital to become clear about those aims so that you can check out whether they will really address the problems. Also, a group of people who do not declare their individual aims cannot reach a satisfactory joint aim, and this might cause conflict as the group develops.



Note: *In Adfam's experience, some support groups can feel they are just as isolated as families themselves and struggle to become well known. Before you go ahead with setting up a new group, check that this service isn't already offered by someone else; if it is, consider working alongside them. See Adfam's website for details of services in different areas of the country – and even if there isn't a service in your own town, you might be able to find an organisation in your county who could have some useful tips.*

Questions to be asked and answered

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- What is actually happening to people that makes you think they need some sort of support?

Be specific about what you are seeing and what you are hearing about, for example, you know several family members who have been unable to find any support or information to help them.

- What problems are being experienced in those situations?
- What effects are the situations having on people?
- What difficulties are they causing?

Try contacting a range of audiences to answer your questions.

- Can you organise a survey to be carried out in the area, or arrange for a questionnaire through, for example, school PTAs (Parent-Teacher Associations) or the local community centre?
- Talk to other agencies, including the local drug and alcohol treatment agencies and local GPs – what are they hearing and seeing, and what problems are being brought to them? Do the specialist treatment agencies recognise a need for support for families?
- Find out if there are services in your area for families with different problems, such as generic carers' services. Do they perceive a need for a service for families with drug or alcohol problems?
- Find out what kind of support families need, for example a helpline, a self-help group, information or something else.

Prioritising needs

It could be that your needs assessment throws up ideas which are too ambitious or just not feasible at the current time. You will need to prioritise and decide how best to meet the majority of those needs.



Note: *This guide assumes you decide to set up a support group so families can meet each other, share experiences and provide mutual support. For information on other types of support such as one-to-one counselling, respite breaks, helplines and outreach services, please see Adfam's guide We Count Too.*

3

Setting the aims and objectives

Overall aim

This is what you see as necessary to be provided overall, in response to local needs. For example:

'To provide confidential support for family members who are concerned about someone else's actual or possible drug or alcohol use, so that they can deal with the situation confidently and constructively in their family life.'

Objectives

These are the things you will need to provide or do in order to achieve the overall aim. They are ways of addressing the needs of families, and could include:

- To provide clear information on drugs and alcohol, their effects and the risks involved in using them
- To provide information on drug and alcohol treatment
- To provide a situation where family members can talk in confidence about their fears and problems
- To provide mutual support and self-help
- To befriend, and to reduce isolation and stigma
- To develop an individual's confidence in dealing with the situation in their relationships with their family member
- To provide ways of enabling family members to reflect on and develop their family relationships so that they are in a better position to cope in a crisis.

Summary points

- 1 Work out the problems in your area
- 2 Work out what needs are underlying the problems
- 3 Set your overall aims and objectives
- 4 Prioritise your needs

Once you've set out your aims and objectives, you can start the next stage:
planning the details



What sort of group?

There are two main types of group:

- **self-help group** led by members of the group themselves
- **support group** led by a facilitator who is not a member of the group

Note: These definitions of 'self-help group' and 'support group' are for the purposes of this guide only.

Each type of group has its own advantages and disadvantages, but some are common to both. If you have worked out the needs, aims and objectives of the group, then you should have a good idea of the sort of group to set up.

Self-help group

The term 'self-help group' is used here to indicate a group that is led by members of the group themselves.

- A self-help group is normally made up of people who share a similar problem – in this case we're talking about drug-related family problems
- The other factor specific to a self-help group is that members are taking a particular initiative in forming or joining the group to help themselves, and to do so by sharing their experiences and the responsibility for running the support group with peers
- Members join to get their own needs met, but the very life generated within and by the group means that members inevitably give to, and receive from, each other.

Advantages of a self-help group

- It can be empowering to be part of a group that depends on peer cooperation, rather than any institutions or 'professionals'
- Because they are involved in running it, people develop their skills and abilities – often developing skills they were unaware of
- Some people are very nervous of institutions or 'professionals', so self-help groups provide an invaluable alternative.

Disadvantages of a self-help group

- It can heighten anxiety to hear of drug problems that are worse than those in one's own family, particularly when members are at different stages in experiencing the problem
- Some self-help groups can lack structure – if too much time is spent sharing negative experiences, the group members can become even more anxious or depressed than they were originally.

Support (or facilitator-led) groups

The term **support group** is used here to indicate a group that is led by a facilitator – as opposed to a self-help group.

The term **facilitator** is used to describe someone who undertakes the role of thinking about the needs and development of the group, is not a member of the group, provides the structure for the group's meetings and terms of existence, and 'leads' group meetings.

Depending on the specific make-up and nature of the group, and the contract with the group, the facilitator will involve members in determining activities and structure to a greater or lesser degree.

As with a self-help group, a support group will be made up of people with a common, personal problem which, in this case, is a family drugs problem.

A major factor in this type of group is that the facilitator is playing a role that sets them, in some sense, apart from the group. This allows a more consistently detached leadership than the shared, roving leadership of a self-help group.

The facilitator can be someone working either on a voluntary or paid basis. They may have experienced the particular problem and have facilitating skills, or they may not have personal experience but have facilitating skills that can enable the group to do the work necessary for their development and mutual support. Whether a facilitator has personal experience of a drug problem in their family or not, both positions bring their own range of advantages and disadvantages and are probably of equal value to a group. Local organisations, the British Association for Counselling and Psychotherapy (www.bacp.co.uk), the UK Council for Psychotherapy (www.psychotherapy.org.uk) and the Counselling Directory (www.counselling-directory.org.uk) will all have useful information on qualified counsellors who may be able to help.



Note *The facilitator should not currently be undergoing the type of difficulties that have brought the group together for support. Most of us find it too difficult to remain detached in a supporting situation if we are experiencing difficulties and distress similar to those in the group.*

Advantages of a facilitator-led group

- The facilitator can maintain a more detached position, enabling the group to work in a positive, constructive way that keeps things moving forward
- The facilitator can help the group to keep the balance between sharing difficulties and dwelling too much on them. Too much emphasis on negative experience can create a 'downward spiral' or a sense of hopelessness because things are awful for everyone
- Some people prefer such a structure with a designated and flexible leader
- It can leave the group free from organisational and administrative concerns. They can then deal with their own personal material with a high level of concentration
- Good facilitators can enable individuals to discover their personal strengths, recognise their own needs and enable them to work out how to meet them
- The mood and the levels of motivation within a self-help group can fluctuate considerably, depending on many factors. This can affect the size of the group negatively, with the result that the fall in numbers renders the group unviable. This means in effect that the life expectancy of a group is determined by the mood and motivation swings of the group itself. A designated leader/facilitator provides a positive focus and a source of motivation that can act as a stabiliser when these fluctuations occur, thus affecting the group's life expectancy in a positive way.

Disadvantages of a facilitator-led group

- Poor facilitators can de-skill and 'disempower' both individuals and a group
- Using a facilitator from outside the group may arouse anxieties around confidentiality
- Not getting off on the right foot with a facilitator can be a big setback and put people off returning.

Advantages common to both types of group

Reassurance can be gained by:

- Hearing that other people are experiencing similar problems
- Realising that you're not alone
- Recognising that your family is not 'odd' or 'abnormal'
- Realising that you're not a failure.

Friendship can be developed:

- With people who are accepting of you whilst knowing about the problems you are facing
- At a deeper level because of the depth of trust and sharing within the group.

Positive action:

- Joining a group requires conscious effort and commitment which can generate a new sense of motivation, hope and a sense of power to deal with the situation
- Being part of a group requires commitment to the other members which can help diminish the sense of isolation.

Disadvantages common to both types of group

- Members may be at different stages of experiencing the problem, so it can be difficult to meet everyone's needs
- Some people find group situations very threatening
- When experiencing shock or severe distress, individuals may be unable to contribute to the supportive aspect of the group, being in need of more focused attention for themselves
- The loss of anonymity may feel too daunting
- The support that families require fluctuates depending on the circumstances of the drug misuse. This affects attendance at group meetings, causing fluctuations in membership and the need for continuous recruitment.

Who is the group for?

If you've worked initially on your aims and objectives, the answer to this should be fairly clear. Answer the following questions to help you determine your target audience.

If the group is publicised as being for families and friends of people with a drug or alcohol problem:

- What do you mean by the term 'family'?
- Does the term include grandparents, aunts and uncles?
- Will you include step-parents, single parents and partners in same sex relationships?
- Will you focus on adults?
- Will you cater for the needs of children?
- Who are 'friends'?
- Will you include boyfriends and girlfriends?
- What do you mean by drugs and drug users?
- What do you mean by alcohol use/misuse?
- Will you take in HIV/AIDS and blood-borne virus issues?
- How will you ensure you are inclusive, for example, do not exclude people from different cultures/ethnicities?
- How can you be generous in catering for people needing support without losing all sense of direction and purpose?

Working out your answers to the above questions early on is a very important part of setting up the group. As the group develops and you become clearer about the needs of people in the area, the group itself can review its membership and its role and make any necessary decisions in light of new information and awareness.

It is natural for a group's members to change to meet new needs of the area. This indicates evolution and is healthy, but making clear who the group is for, and why, as part of your aims and objectives, is important.

'We were all carers and knew the service we needed'

Dot Inger, SPODA
Project Coordinator

CASE STUDY

SPODA, Chesterfield

SPODA has now been running for over a decade and was set up by the mother of a drug user. Starting out as a simple self-help group, SPODA now delivers free support, a helpline, educational sessions, specialist help for bereaved families, a grandparent/kin carer key worker, alternative therapies and respite. SPODA was named East Midlands Drug Team of the Year by the Home Office in 2006.



Funding SPODA's increasing recognition led to it being approached by the local DAAT with an interest in commissioning the service. The SPODA team had to produce a detailed business plan for the funding to go ahead. SPODA worked with partner agencies from the outset and received further funding from district councils, the local authority (through the Carers Grant) and Local Area Agreements.



Publicity The first posters were simple and put up locally. People were asked to call a dedicated number for further information, and at first no information on venues was given as this could put people off.

Dot Inger, Project Coordinator and a trustee of Adfam, says that there were few real difficulties in setting up the group: *'We were all carers and knew the service we needed'*.

Adfam's *Including Diverse Families* project is a specially funded programme exploring diversity in drug and alcohol family support services. The work focused on identifying the needs of diverse communities and finding ways to better respond to these particular needs and remove barriers preventing some communities from accessing support. Based on the findings from this, it is useful to remember a number of points to ensure that your group has widespread appeal, is inclusive and reflects your local community.

Men

Services and support groups are usually run and attended by women, and men often feel less encouraged to seek and access support.

Approaches to counter this include:

- Providing expert speakers to come and talk to the group – this takes the emphasis off the 'tea and sympathy' image and makes meetings seem less intimate and more informative
- Providing occasional knowledge-based training or workshops – this approach focuses on a learning outcome and moves away from talking about people's experiences, emotions and feelings
- Developing IT services like websites and email communication systems – this means that the first contact doesn't have to be made face-to-face and people can be 'eased in' and better welcomed to meetings
- Attention to atmosphere and feel. Try to make the physical environment comfortable by displaying positive images of men, for example in fatherly roles
- Make sure that if you have literature it has male-inclusive language and illustrations
- Advertise your group widely to include men's magazines or places often frequented by men
- If demand is high enough, make allowances for men-only sessions where they can express anxieties particularly related to their role in the family and also perhaps recruit a male worker/volunteer to facilitate the group
- Make sure you address and respond to key issues for men
- Be prepared to operate the group out of working hours and at weekends.

Grandparents

The existence of grandparent carers – people caring full time for their grandchildren due to parental substance misuse – is an often overlooked phenomenon and must be a major consideration for any family support group. Numbers of grandparent carers are significant and yet they often feel neglected and forgotten by 'the system'.

As well as being the parents of drug users, these individuals assume the role of full-time parents for the next generation too. Grandparent carers have their own specific concerns and their own set of conditions. Remember that age is not the only issue that makes things different for them: the average age of a first-time grandparent is under 50 nowadays, and one in twenty 37-39 year-olds are grandparents. But for other grandparents, age and ill health can be a factor as with any other group.

Grandparents:

- **Often feel ashamed and stigmatised** – ashamed of the fact they have brought up children who cannot cope with their role as parents, and stigmatised as they are not included in more mainstream parenting and family support. Normally simple or pleasurable tasks like picking up a child from school can become quite stressful experiences
- **Have financial problems** – caring for a child is expensive, and grandparent carers are not usually entitled to the support that foster carers are able to access
- **Experience a lack of emotional and practical support** – grandparents can often feel at their voice is not heard by Social Services and ignored by the drug and alcohol agencies who are treating their children (if they are in treatment).

Lesbian, Gay, Bisexual and Transgender (LGBT) people

When it comes to LGBT people, it is not enough to say that your group membership is open to all members of the community. LGBT people's experiences of bullying and homophobia mean that you have to be proactive in promoting the fact that your services are inclusive of them. It also means that you have to be aware of the language you and others might use and be proactive in challenging homophobia.

Some of the things that might help:

- The assumption that everyone present is heterosexual should be avoided, as should the assumption that the relatives of the group members are heterosexual – ensure the language is not gender-specific
- Establish ground rules which enable homophobic behaviour and language to be challenged
- Adopt an inclusive and diverse definition of family to include same sex families, relationships and parents
- Provide a welcoming environment to LGBT people – display resources and information specific to them
- If there is a need, you might want to consider providing information-based sessions with LGBT speakers or topics

- The confidentiality of the group is very important for people to feel enabled to 'come out'. Never 'out' someone in a group situation – respect people's rights to determine whether and when to 'come out' to others.

BME (Black and Minority Ethnic) communities

Some minority communities are particularly underrepresented in support structures. Some communities have particular experiences, traditions and needs which may not be fully recognised and addressed by self-help and support groups. It would be useful to explore links with local community organisations with experience in the relevant area.

Rural communities

The feeling of isolation – from others and from society – is a key factor in the experiences of families with substance misuse problems. However, in some cases this isolation can also be geographical, bringing another specific set of issues.

Access to centrally-based services is difficult at best for people living a long way out of town: public transport links can be poor.

This is another situation in which the provision of outreach services such as telephone and email can pay dividends both to your group and to the people you try to help. For example, setting up a dedicated email address just for your group would only take a couple of minutes (something like yoursupportgroup@hotmail.com) and would extend your reach. Making the first contact in these circumstances can be a very daunting prospect and having email or telephone contact can make things easier.

Specific groups

Inclusivity is something you should keep in mind, but depending on the target audience of your group it is not always appropriate. For example, some groups cater for the needs of one specific group such as men only, women only, or just grandparents, and are thus better able to meet the specific needs of these people without getting confused and losing direction. Partners can feel excluded in a group made up predominantly of parents, and regret seeking support. It is important to be clear about this from the start and during the running of the group, in order to avoid confusion. Remember – your group should be based on demand, and if there is a sudden unexpected surge at a later date (for example, of partners of drug users) you can always think about expanding your service.

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How often should a group meet?

The short answer is – it depends on what the members want from the group. What are your aims and objectives?

There is no 'should', or external rule, to determine it. Different groups meet at different times – it's as simple as that. Whether the group meets weekly, fortnightly or monthly depends on the level and type of support that people need.

Other factors may come into it, for example how far people have to travel, availability/cost of a facilitator, problems with work or childminding, and so on.

If group members are clear about what they need, and can look openly together at circumstances that affect their attendance, then they will be able to work out a frequency that suits everyone.

You can determine the frequency of meetings according to the needs of the majority of group members – it's likely you won't be able to meet at everyone's ideal time, but that can't be helped and you should just go with the best overall fit.

For how long should a group meet?

Whilst being a separate question from ‘how often should a group meet?’ the answer to this one is partly dependent on the previous answer.

Once again, the short answer is – it depends on what the members want from the group. There is no ‘should’ about it.

Two possibilities are:

Continuous regular meetings – weekly, fortnightly or monthly

This seems to be the most common pattern for self-help groups: providing a regular, ongoing pattern of meetings that people always know is there. Some people attend every time and others attend more spasmodically, because that’s what they find supportive or that’s what they can manage. But the regular, ongoing meeting provides members with a constant resource that can act as a lifeline.

Other people may need another sort of meeting pattern. Perhaps they simply don’t want, or need, or can’t attend frequent meetings. Or perhaps their crisis time is over and their needs are different, so they don’t need that intensity of support.

Meetings in ‘terms’ for a set number of times

Another common pattern of meeting, perhaps more popular with facilitated support groups, is to have a set number of meetings (say 6–8) and then a break before another ‘term’ starts. Some groups run a set course of meetings followed by a ‘review’ several weeks later, bringing group members back together to discuss how they are getting on.

This pattern can allow for working through a planned programme of issues that the group wants to address. It can allow for a welcome break after which people may return for the next ‘term’ feeling refreshed.

Some people find this sort of commitment easier to manage. It also gives clear breaks where people might more easily leave or join the group, having got what they need for the present or been drawn in by what’s in the programme.

Now you have a good idea of what your group will look like, you are much better equipped to prepare a more complete strategy, start canvassing support and get down to the **practicalities and groundwork**



Publicity

You know several people who have expressed a need or an interest in a group. You also know that there are other people out there experiencing anxiety, anger, a sense of isolation and helplessness. How can you attract them to a group meeting? How can you let them know that you're there in a way that makes them feel safe to approach you?

There is a variety of ways to publicise your group.

Word of mouth

Whatever network is putting you in touch with potential group members is the obvious starting point. Use that network. Pass on the word – talk about what you're planning to do.

Some people feel safer with personal recommendations, with being able to talk about the possibility and knowing other people who may be involved. Word of mouth gives a degree of familiarity to potential members.

Your contact with professionals (GPs, drug workers, probation officers, social services etc.) can be an important factor in making your group known to the community.

Printed materials

Back this verbal information up with a small leaflet containing clear information on the aims of the group, the way it will work and practical details such as meeting times, contact person's phone number and address.

People forget practical details when they're under any pressure. Having things written out in a clear, simple way can be reassuring when you're trying something new.

How much do people need to know to attract them to the group without giving them too much information, or putting them off with 'heavy' thinking?

Printed materials can also be passed on by professionals. It can be useful to have your poster/leaflet available in various community organisations such as libraries, citizen's advice bureaux, health clinics, community centres and so on – try to reach as many people as possible.

Media

Publicity through the media can sometimes produce an overwhelming response. Think carefully about this and scale of publicity that is suitable for you. Obviously if you want to publicise a fundraising event, you'll want all the publicity you can get!

Local radio and newspapers (including the free ones) can be a very useful way of making yourselves known. Think imaginatively – a letter to the editor of your local paper or a listing in the weekly 'what's on' section of your local paper/radio programme can be just as effective as trying to get a feature or interview in about your group.

It's worthwhile bearing in mind that the media is in the business of selling papers and raising viewing/listening figures, so information you give out can sometimes be sensationalised and reported in an irresponsible or inaccurate way. Be careful not to give out any details of people's experiences without their express permission.

You could check the effectiveness of your publicity by doing a 'mystery shopper' exercise with the agencies who promised publicity. Contact them as a potential group member to check you get the appropriate referral.

Targeting professionals

The support of other local agencies can be a huge asset, but they can only offer support if they know what you are about. You need to introduce yourselves to people and convey a clear idea of your project.

Try holding an open evening – have one before you start the group to let people know what's going to happen. It can be excellent publicity. Invite people who you specifically want to know about your group – for example GPs, drug agencies, social services, the probation service, the police and anyone else you can think of. If you are an existing professional looking to start/expand family support provision, use your existing network of professional contacts to raise awareness and discuss referral procedures.

In order to foster working relationships, you could also make personal visits and calls to other relevant people and agencies (see pages 22–23 for further information on working with professionals).

'Ensure your facilitators get the relevant training and, overall, listen to your members: they will tell you what's needed.'

Christine Tebano,
co-founder of Parent
Support Link

CASE STUDY

Parent Support Link, Southampton

PSL has been running for over 15 years and started around a kitchen table, and the first service offered was a telephone contact number for people just wanting to talk. After starting as a simple telephone number, PSL now provides face-to-face work, training, support groups and an innovative respite project. Group leaders have used their experience and expertise to become active in the wider field of advocacy and policy discussion. PSL does work alongside other organisations, but values its independence so is not explicitly linked with other agencies.



Funding PSL is now commissioned by local government to provide services to families in Hampshire, Southampton and Portsmouth.



Publicity PSL uses the 'community development' model and started off targeting the first places people think of going: GP surgeries, community centres, Churches, libraries, leisure facilities, and so on. PSL also targets treatment services and other health centres.

Christine Tebano, co-founder of Parent Support Link, says: *'Be sure there is an identified need in your area. Ensure your facilitators get the relevant training and, overall, listen to your members: they will tell you what's needed.'*

It may not be necessary for you to fundraise for your group but, if it is, the following basic points may be of use.

Fundraising shouldn't put you off getting started and many groups start off on a shoestring. Main costs might include:

- Publicity
- Phone and postage
- Venue hire
- Group refreshments
- Expenses for visiting speakers
- Training.

Payment of a *small membership fee* from group members could cover some expenses such as refreshments, but might having a subscription restrict access to the group for some? Even if the fee is small, the principle of paying for membership of a support group might not be palatable to some people.

You may find that you are able to get some things *donated* (such as free use of a room for your meetings at a local community centre) but, if you have to pay for anything, always ask for a discount where possible.

If you decide that you need to raise funds for your group:

- Use who you know locally
- Companies sometimes prefer to give 'gifts in kind' rather than money – for example, some have in-house print facilities you may be able to use or they might be able to donate stationery or refreshments. It might be worth trying a local supermarket, as they sometimes award vouchers to good causes
- Make contact with local organisations that support charities and community groups, e.g. Rotary, Lions, Local College RAG (Raise and Give) groups, and so on
- Liaise with your local drug/alcohol agencies (this is vital for a number of reasons) – they may be able to help with the use of a room, advice on 'friendly' local printers etc
- Contact your local Council for Voluntary Service for information on funding. You can also see www.navca.org.uk for a useful list of local contacts
- Your regional Drug (and Alcohol) Action Team is responsible for reducing drug-related harms in your local area. They fund various projects and may be worth contacting to discuss your proposals
- Some local Health Authorities have small discretionary grants available for local voluntary organisations and self-help groups

- Apply to local community/charity trusts, companies, telethons e.g. *Comic Relief* or *BBC Children in Need*. However, to be considered for funding by most of these organisations, you need to be a registered charity – or affiliated to a registered charity. For information on how to do this see www.charitycommission.gov.uk.

Becoming a registered charity may not be a process that's necessary for your group, so more informal methods of fundraising may be more appropriate, such as:

- Coffee mornings
- Jumble sales
- Sponsored events.

It can sometimes be useful to team up with another community group to run fundraising events – it can pool resources. It can also be helpful if you're concerned that an event to raise funds for a drug-related cause may not be seen as particularly 'attractive' by the public.

Handling funds

As much (if not more) than your other records, it's important if you're handling funds to have an accounting system, which should include:

- Keeping all receipts
- Having a clear system of how people can claim back on expenses incurred
- Two cheque signatories
- Appointing a Treasurer to look after the finances.

If you're asking someone for money, you should be able to break down exactly what that money will be used for. It would be useful to investigate a few key expenses and get the going rates for things like a print run on leaflets or posters, hiring a room or setting up a freephone number.

Just remember that, if you choose to take the funding route, you won't know if you don't try!

CASE STUDY

Hetty's, Nottinghamshire

Hetty's has been running since 1996, and was set up by a group of parents. It now provides one-to-one and group support, prison sessions, complementary therapies and a national helpline.



Funding For startup costs, Hetty's received money from the Drugs Challenge Fund and private businesses. Founder members also received help from the North Nottinghamshire DAAT, as well as working in partnership with the local Citizens Advice Bureau and the Probation Service.



Publicity Word of mouth was key to Hetty's, and founder members did various presentations and speeches at events to publicise its work.

Pam North at Hetty's says that *'it was difficult finding agencies that could understand the needs of the families of drug and alcohol users – but keep banging on doors, use the media and local press if you can, and keep soldiering on until someone listens'*.

'Keep banging on doors, use the media and local press if you can, and keep soldiering on until someone listens'

Pam North, Hetty's

Working with professionals

If your group is formed on a purely voluntary basis, you may find it highly valuable to develop contacts with other existing agencies whose work is related to yours. For example, setting up links with a local drug treatment agency or GP clinic could result in a productive working relationship.

The agencies may be voluntary or professional, and your contact may be designed to seek more active involvement from them in your work, or simply to keep people informed about what you're doing.

Such contacts can bring many benefits. Other agencies and professionals can:

- Refer people to you
- Publicise you through their work/in their centre
- Provide you with speakers and training in specialised areas
- Give you access to their resources e.g. photocopying, rooms etc. at low cost
- Let you pick their brains i.e. tap into their expertise, skills and experience
- Give you time to check out ideas
- Point you to sources of funding and practical support.

Agencies are often glad to know of your existence and to have somewhere to refer people to, and people are often pleased to offer support and encouragement. However, there can be resistance so be prepared for this. When a new group forms to meet a need that has hitherto been unmet, the existing local agencies can feel criticised, think that you're trespassing on their field of responsibility, or see you as 'do-gooders' with insufficient experience.

Many such reactions arise from a misunderstanding of your purpose, and a misunderstanding of what you're actually trying to do and who you are. You may be able to prevent this by making yourselves known in the area and liaising wherever possible or appropriate with existing agencies.

If you want to involve representatives from other agencies in your work, be clear about your aims and objectives in involving them. Making contact without a clear idea of what you have in mind could result in people doubting your professionalism and being less likely to work with you in the future.

- What do they have to offer you?
- How much time are you asking of them?
- What role do you want them to play?

People can respond much better and play a role much more effectively if they are clear about what you are asking and expecting from them. They can offer clear and open responses as to exactly how much time and energy they can give.

Building your credibility

Developing such contacts and being open to giving and receiving ideas, information and expertise can develop your credibility with all agencies concerned.

Professionals may not be familiar with self-help groups, they may have incorrect assumptions about them, or they may feel that 'amateurs' don't have the skills to run them. They may have as much to learn from you about the nature and role of self-help groups as you have to learn from them about other things.

Developing your credibility has also, then, a strong element of being educational. So don't undersell yourselves and don't apologise for being 'amateurs'. Any 'amateur' can reach a so-called 'professional' level of competence and skill.

Benefits to group members

Enlisting the support of agencies working in related fields can be of great benefit to potential members of your group for all of the reasons given in this section.

In addition, individual members of the group may develop greater confidence in outside agencies, feeling more able to use them for their own support and more able to recommend other people to use them as well.

The venue

The choice of venue or meeting place can significantly affect the success of the group, and it needs to be somewhere that people can enjoy coming to.

Ideally, it needs to be:

- Accessible
- With parking facilities nearby
- Near public transport links
- Accessible for disabled group members
- Inconspicuous to help with anonymity and confidentiality
- Pleasant and welcoming
- Safe and secure
- Large enough to hold your group size comfortably
- With facilities for making tea and coffee
- With toilet facilities
- With comfortable seating and adequate lighting.

If you can't meet all of these criteria, which is highly possible, decide on the most important ones. If you can meet those, you will find ways of coping with the rest.

Bear in mind that some venues might discourage some people, for example:

- Specialised drug agency premises
- Church premises
- GPs or Health Centres.

Setting a group agreement

It is really important that you prepare a list of guidelines which will set the tone for the group and, at the first meeting, get members to discuss these and add your own ideas. Negotiate until everyone agrees. New members joining the group in the future will need to consider whether they want to work in this way too. It is helpful to revisit the group agreement every few months or after any problems occur.

A confidentiality agreement forms part of the group agreement and it is absolutely key. Members will need reassurance that everyone is signed up to this before they discuss their personal life and problems. Members must be assured that all information is kept within the group.

The following wording should help:

- Confidentiality – what is said in the room stays in the room. It's important to foster an atmosphere of trust and make people feel comfortable sharing experiences
- Not gossiping about others
- Speaking one at a time
- Willingness to listen to others
- Willingness to share our own experiences
- Arriving on time, coming back from breaks on time and ending on time
- Respecting people's differences
- Willingness to challenge what others say with respect and without attacking them as a person
- Taking care of yourself and taking care of each other
- Recognising that everyone is on their own journey and there is no one right way
- Being committed to coming regularly
- Switching phones off.

These should give you a useful starting point but, as ever, make sure that your group is happy with the ground rules.

Monitoring and evaluation

Though evaluation is an ongoing process which informs the continuous development of the group, thinking about your monitoring procedures before your first meeting should keep you a step ahead – the referee shouldn't turn up after the game has already started!

Whatever the outcome of your labours, whatever service or group you decide to set up, it's important to keep a constant check to see if it really is achieving what you set out to do, and how you need to develop it. For example, a low turnout at the group might suggest that publicity needs reworking or that the venue is a problem.

In order to carry out any monitoring and evaluation, it is essential to keep records of the response your service is receiving. It is good to evaluate at the end of each meeting to see how well the group's needs are being met. Some people find a flipchart is useful with headings such as 'good' and 'could be better.' You could ask the following questions:

- Is the meeting place, day and time convenient?
- Do you feel welcome?
- Do you have the opportunity to say what you wish?
- Do you find the meeting(s) helpful?
- Do you think new members are made to feel welcome?
- How can we improve the group?
- What topics would you like to see addressed?
- Is the group a good size?

What helps in record keeping?

- A signing-in book to keep track of members and numbers
- A 'how was it for you?' at the end of each meeting, or at least once every three or four meetings
- A suggestion box, with new ideas discussed every month
- Individual meetings between the group leader and members who have raised concerns
- A chat with someone leaving the group to find out why, and asking what would help if they are unhappy in the group
- Evaluations of guest speakers.

Sample record keeping form

It might not be appropriate to fill in all the sections and you will probably want to add others that could be useful; but it is a good idea to have a consistent structure, as this makes it easier to assess the progress of the group over time and gives you a bank of information which is easy to call upon as required.

Self-help group meeting record

Date

Number of attendees

Chair/facilitator

Secretary

Money collected

Family relations present

Drugs mentioned

Key issues/points of discussion

Speaker

Topic for next week

Announcements/any other business

The task of record keeping can be split between different members to share the workload; this kind of responsibility also helps people feel invested in the life and development of the group. Once the group gets going you can talk about sharing other responsibilities like leading group activities, setting up/tidying the room and making sure there's enough tea and coffee.

As well as notes from individual meetings, it is useful to keep track of longer term issues like the numbers of enquiries you receive about the group, how people heard about your service and any ideas put forward for group development.

With your long-term goals and procedures set, you are ready to move on to the next section, which tackles the issues surrounding the everyday **running of the group** and how to deal with changes over time



Being an effective facilitator

This section contains guidance not only for facilitators but also for those organising or leading a self-help group.

There are a range of styles of facilitation. Whatever style you find appropriate, it is important that in your role of group facilitator you respect the authority that comes with that role.

The styles include:

Being '**directive**' means telling people what to do in a respectful way. It is useful when people don't know what to do, such as at the beginning of the group. However, if people are working fine on their own it is inappropriate to intervene and tell them what to do!

Being '**democratic**' or '**facilitative**' means offering the group choices and helping them achieve a sense of direction for themselves. It is useful to ask people if the room is too hot or if they need a break. It means enabling people to steer discussions for themselves, thereby helping them to have a meaningful group experience. However, you need to be aware of staying with the purpose of the group and not deviating from it.

Being '**laissez-faire**' means letting people get on with the group discussion without you. It is useful to be this way with an established group who know what to do and trust each other. However, you are still responsible for the time frame, ensuring people work within the group agreement, (see page 25) and for any material you present. Using this style too soon provokes anxiety, as people don't know what to do or how to be.

FACILITATING SKILLS

Communication

Listening skills, ability to interpret non-verbal communication or body language, and the ability to say things in a way that can be easily heard and understood.

Presentation

Ability to talk clearly, to demonstrate effectively, and to present complex information by breaking it down into smaller parts and presenting it in a logical sequence.

Leading and facilitating

Being able to set up and run different kinds of activity, helping people to talk about and learn from their experiences, and keeping to the time frame.

Analytical skills

Includes the abilities to identify needs, evaluate the effectiveness of what is being presented for people and understand what is happening in the group.

Flexibility and adaptability

As much an attitude as a skill. This includes the ability to respond to what is actually happening rather than rigidly following the planned structure, whilst still keeping within the group agreement.

Motivating

Includes conveying energy, enthusiasm, interest and warmth, whilst ensuring the group work is relevant to people's needs.

Respecting and knowing about people's differences

Be aware that we are all different and that people can believe they are 'less than' others because of their imprisonment, substance use, a family member's substance use, their race or culture, their social class, their poor schooling, etc. It is important to know how these beliefs can lead someone to feel ashamed, which they may show as hostility, withdrawal or anxiety.

Knowledge of the subject

This includes being able to say when you don't know something, then asking people what they think or researching in a break and coming back with information. Remember you don't have to know it all, and that the people present have knowledge they can share too.

Supervision

Supervision is the name given to the help and support that a facilitator gets to enable them to facilitate the group. This help takes place outside the group, usually at the supervisor's place of work. Adfam strongly encourages all facilitators of support groups, whether trained and experienced or an untrained family member, to have regular supervision.

Supervisors can be found through the British Association for Counselling and Psychotherapy (www.bacp.co.uk), UK Council for Psychotherapy (www.psychotherapy.org.uk), the Counselling Directory (www.counselling-directory.org.uk), or through Adfam.

Choose someone with extensive experience of group work, who you feel comfortable with and who ideally has an understanding of issues surrounding drug and alcohol use. Supervision enables the facilitator to explore any difficulties or concerns they have about the running of the group; examine any concerns about particular group members; revitalise themselves; and learn more about groups and how to facilitate them. Good supervision is quite expensive and needs to be budgeted for.

Welcoming new members

Joining a group can be a very intimidating experience. People vary tremendously in the ease or difficulty they experience in meeting a new group of people. For some, joining a group can be doubly difficult: on top of what they and their family are going through, there is the added tension of being in a vulnerable position – of having to ask for help. There may be feelings of shame, embarrassment, failure, anger or bereavement.

If a group is in the habit of thinking about the needs of new members and taking steps to help them settle in and contribute, an open, accepting atmosphere will develop and communicate an almost unconscious acceptance of new people. This will then reap benefits for the developing life of the group.

It's important to be aware, too, that groups can gel into cliques, and members may find the 'intrusion' of new people difficult. After all, it can disturb the level of safety that has so carefully been built up – and that safety is important. It can also disturb the friendships that have developed – we tend to be more protective of friendships when life is feeling tough.

Sometimes a group can get stuck – happy in a kind of comfort zone. New members can be the lifeblood of a group, and revitalise it so that members work together to move on.

All of this makes the initial welcome of paramount importance. If it's not done well, people may go away feeling unwanted and not come back – this does happen!

Practical suggestions:

- **Allocate a group member to look after the new person/couple** for the first two or three weeks. You might even want to arrange a talk or meeting beforehand to ensure that the new member will be comfortable coming into the group, rather than putting them straight into a group environment.
- **Always do a group introduction** – for example a name round – when new people come. It can be scary, but it gets the initial 'speaking in front of the group' over with quickly and gives the new people a brief introduction to everyone. Putting names to faces immediately makes people seem human somehow, as does hearing them introduce themselves.
- **Use group warm-ups regularly** – people don't settle in immediately, so the welcome needs to be ongoing. This is another valuable reason for using group warm-ups as a regular beginning to a group meeting: they provide a way of encountering the whole group in a pleasant, enjoyable and sometimes fun way. They also act as a group's welcome to itself each week.

- **Structure and formality** can be inhibiting and intimidating when taken to extremes, but just the right amount can be invaluable: it gives people permission and encouragement to take part when they might otherwise hold back out of lack of confidence. This can be just as important for well-established members too – again, people vary tremendously in the ease or difficulty they experience in contributing to a group.

Structuring the meeting

To assist the flow of the meeting, it may be helpful to set aside a specific amount of time for each task or activity. It will be up to the leader and group to determine the order and the timing.

The group leader may wish to begin with agenda items that include:

- Welcoming all members, with new members greeted in a friendly way and made to feel comfortable and welcome
- Stating (or restating) the purpose of the group
- Reviewing the group agreement
- Helping people to learn from the experiences of others
- Sharing information about events that may be of interest to the group
- Asking members to share information that may be of interest to the group.

This usually flows easily to the point where people can be invited to talk about themselves – perhaps via specific discussion points.

Beginning the discussions

The group leader may begin a discussion by talking about a topic and asking members for their reaction or to share similar experiences. Depending upon the topic and the response, this may be all that is needed. The facilitator needs to follow the energy and interest of the group, rather than imposing their own thoughts about what is discussed. They can also note with the group when there are issues that are consistently avoided or not addressed. The leader may also be prepared to ask such questions as:

Have you any financial, medical or legal problems that you would like some information on, or some suggestions for dealing with them?

Where have you found support? Within your family? The local community?

How has your life changed since you were faced with a family member's substance misuse?

Summing up

When it is time for the meeting to end, the leader may ask one, two or several members to share their thoughts regarding the meeting. The leader may also wish to summarise the discussion and ask the members if they agree with his/her impressions. The date and time of the next meeting should be decided upon or announced.

Guest speakers and group activities

Inviting guest speakers

If you do consider having guest speakers, you need to make sure that all the group members have signed up to the idea. They should be involved in what the invitation says and what they want the speaker to discuss.

Be clear about your aims and objectives in involving guest speakers:

- What do they have to offer you?
- How much time are you asking of them, and when?
- What role do you want them to play?

As with contacting professionals who might support your work, people are more likely to provide an honest answer if they know exactly what you're looking for.

Days out and other group attractions

A day out or a fun event gets the group and acts as respite for what can often be gruelling sessions as people share their problems and worries. It is a time when other family members can benefit – bringing children to a summer picnic has been a great hit for some groups. Some of the ideas include:

- Plan a **barbecue or picnic**. Get donations from the community and local businesses
- Make a **day trip** to a tourist attraction like a theme park or stately home
- Have an **equipment share**, e.g. swapping toys and games
- Arrange a **seasonal event** such as a summer picnic, Christmas party or an Easter egg hunt and gear it around fun for any younger children of group members
- Have a fun evening or **night out** – what about karaoke?
- **Visit** the local newspaper, radio station or TV station
- **Volunteer** at the school, nursery, learning centre, college, hospital or anywhere else you want. This is a great chance to 'job shadow'
- Go to lectures, **workshops and films**.

When things go wrong

Problems with members

Though meeting other people who've been through the same experiences is extremely valuable to many family members, drugs and alcohol affect people regardless of personal background and you shouldn't assume that, just because they have this problem in common, they'll automatically get on. As is the case with any group of people coming together, problems can occur.

'Awkward' and 'difficult' are sometimes labels that we attach to people who disturb our, or our group's, calm. Yet we can all be seen as 'difficult' in the eyes of others. All of us might be surprised to find that this is so.

If a group wants to be truly supportive of all its members, it is important that such difficulties are explored and dealt with.

It may be that someone:

- Dominates the group by talking too much
- Constantly interrupts other people's contributions
- Puts down other people's points
- Is aggressive to group members and/or the leader or facilitator
- Rambles into long stories off the point
- Avoids the personal and emotional, constantly intellectualising and so preventing the rest of the group from dealing with personal and emotional concerns
- Is virtually silent, hardly contributes, no-one knows what they're thinking, and they won't be drawn in.

This can affect the group in different ways. Some might feel attacked and become afraid of being open with the group. This can lead to members feeling frustrated or angry, and aggression can develop within the group. When silence is the issue, some people feel judged or threatened by this. Remember that it takes courage to attend the group in the first place and clearly a 'quiet' person has made that first big step; it should be a case of making them feel comfortable enough to contribute fully, as that's why they've come.

A group can find it surprisingly difficult to tackle a problem created by a member's behaviour. This is where the importance of a strong and confident group facilitator/leader comes in as they may have to take the initiative and tackle the issues. This is when supervision really helps.

However, if people are appearing to be 'difficult', they themselves are experiencing some difficulty. Bear in mind why they've joined the group in the first place. The way in which we deal with the problem can help them to resolve their issues, or it can make it harder for them to do so. It is important to deal with situations like these: they won't go away and will continue to have a detrimental effect on the group.

So it is worth thinking about what is behind problematic behaviour. For instance:

- Perhaps they cope with fear and anxiety by talking a lot and filling silences
- Anxiety may produce aggression, defensiveness or competitiveness
- They may feel threatened and vulnerable in a group situation
- Someone used to formality might find informality difficult
- Perhaps they're used to a position of authority and management
- Do they want something that the group doesn't set out to provide?
- They may be verbalising/acting out tensions or dissatisfaction being experienced by other group members who are too shy to speak up
- Is the problem in the family feeling too much to cope with? Is more professional help needed, such as one-to-one counselling?

To summarise: anxiety usually lies behind someone's difficult behaviour.

EFFECTIVE RESPONSES TO PROBLEMATIC BEHAVIOUR

ASK the group what is happening and invite the individual and other group members to talk about what is happening to them. An attitude of curiosity, interest and support is better than confrontation and criticism.

GIVE all of the group planned thinking and sharing time to **reflect** on how each individual feels in the group situation.

GIVE space and some structure to enable people to voice dissatisfactions, expectations and fears. People must be given the opportunity to **voice concerns** so the group can evolve and improve – don't take it personally.

INTERRUPT the consistently long contributions gently and courteously, **inviting other people to contribute** – people often know they talk too much and are actually glad to be stopped (politely of course) when they can't control themselves.

STRUCTURE the meeting so everyone has the opportunity to speak for a given and **equal time**: that makes interrupting the contributions much easier for everyone, and the expectation that everyone will speak can help the quieter members to contribute.

ENCOURAGE clear, **non-judgmental feedback**, e.g. 'I feel put down when you speak to me with irritation in your voice' or 'I find it difficult to think when you interrupt my contribution', and so on.

Constructive problem solving

To make problem-solving possible, some fundamental attitudes need to be adopted.

- People's feelings need to be admitted, recognised and accepted
- People must accept full responsibility for their own feelings
- People need to know that they are going to be listened to.

Also, it's invaluable to do two practical things:

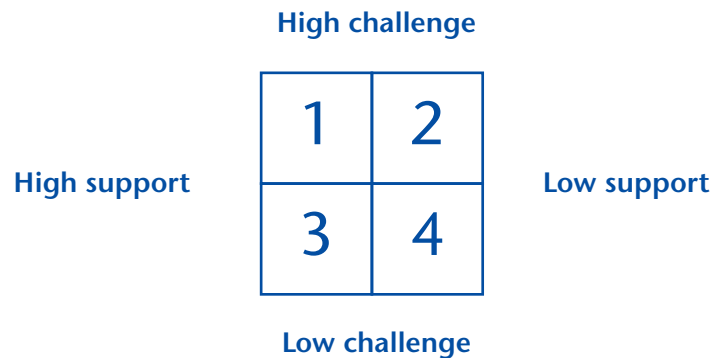
- 1 **Appoint one person to chair or facilitate the sorting out.** This can either be the group facilitator/leader or another member willing to become more involved. Encourage someone to act as a referee, keep everyone to the group agreement and ensure they keep their own feelings out of the discussion.
- 2 **Structure the sorting-out session** so that people are enabled to work in a constructive way – one that avoids the pitfalls already mentioned.

With both of these practical measures in place, people will already feel more confident that they will get a fair hearing.

Challenge and support

A support group has to provide both support and challenges. The support provides safety and makes change seem manageable; the challenge provides the spur to change and a sense of achievement.

There are four combinations of challenge and support, and each one has its own consequences for the group.



Position 1: High support and high challenge

People usually feel motivated and safe, so this is the place to aim for. What high support and high challenge means will vary for each person.

Position 2: Low support and high challenge

People may become anxious, hostile and defensive. Avoid being here!

Position 3: High support and low challenge

People may feel cosy, warm, but not much change occurs. This is a good place to start from though.

Position 4: Low support and low challenge

People may become bored, apathetic and depressed. Usually not much happens. Again, avoid being here.

Using the challenge and support model

The model provides facilitators with an understanding of what might be happening in the group at a particular moment. It can shed light on the reason for group members' feelings. However it does not cover the whole experience of people, so has its limits.

For example, if the group is discussing an issue that seems overwhelmingly difficult, then people are probably at position 2 – high challenge and low support. The model would suggest three choices:

- Providing more support
- Lowering the level of challenge
- Both raising support and lowering the challenge.

Though it doesn't provide golden rules, this model provides a useful way of framing and understanding the status of the group.

The stages a group goes through

Another way of thinking about the group is in 'life stages'. These stages are Forming, Storming, Norming, Performing and Mourning. In reality there are aspects of all five stages taking place most of the time – a group's life doesn't unfold in five neat steps. Still, knowing about the stages can help you to understand what is happening.

Forming

This is what happens when the group first meets. There is usually fear and suspicion about the unknown. The stage is like childhood, so there is a need for guidance and direction. Cliques may form as a way of coping. People are concerned about whether they will be 'in' or 'out' of the group. All the practical suggestions on running the group (introductions and so on) will help with effective 'forming' and you will be like a parent to the group.

Storming

People are unsure what is acceptable or where the boundaries are. They will test these out, including testing the group agreement. It is a stage of rebelliousness through action or inaction, and equates to being adolescent. Your suggestions may be rejected and criticised. There may be competition or conflict between people or with you. A hierarchy is established. At worst there is sabotage and hostility. People are anxious about status, power, authority and influence. Most groups grow out of this stage, but some get stuck here.

What helps?

- Ignoring it and see if it passes
- Allowing people to express their concerns and listening to them
- Protecting and supporting people who are quiet or passive
- Finding out and exploring the problem with members of the group, then involving them and negotiating to try and resolve it
- Claiming your authority to lead the group in an assertive, not passive or aggressive, way
- Through the above, modelling how to be in a group.

Norming

Having tested the boundaries of what is possible and acceptable, 'norms' or unwritten rules are established. Co-operation tends to take over from competition and conflict. People begin to get into the tasks and show commitment. Trust is being built. This stage is like being a young adult.

What helps?

- Allowing people more choice and decisions now they are more 'adult'
- Increasing the difficulty of exercises
- Encouraging more participation, openness and honesty.

Performing

The group 'performs' the purpose it met up to do. There is enough trust and acceptance in the group to allow this to happen. This stage is like being a mature adult. People will take more risks and experiment. There is a developing sense of 'we', tolerance of differences and co-operation. Conflict is handled in a more open and mature way.

What helps?

- Helping the group to do the tasks for themselves, rather than doing it for them
- Providing the group with help and support as they need it
- Helping resolve any conflicts and problems
- Encouraging people to talk with each other and not just through you
- Giving responsibility to people.

Mourning

This stage equates to death. The group's life has ended and people will have thoughts and feelings about that or want to avoid facing it. Other endings can be re-stimulated for people. People may leave early, be angry, sad, or want to stay on.

What helps?

- Being explicit that the end has come
- Allowing people time and space to 'mourn'
- Acknowledging people's feelings
- Acknowledging what was not finished
- Encouraging people to consider what they are taking away
- Saying how you feel (if it is helpful to the group!)
- Ending on time and not elongating the process



Remember *A group's end can be part of the plan – it means people have got the support they need and are ready to move on, and this is something to be celebrated. Friendships between members can continue outside the support group setting.*

Tips for group leaders or facilitators

These notes are equally relevant to inexperienced group leaders and fully trained facilitators.

Do

- Be yourself, be welcoming and friendly
- Say you're feeling nervous (if you are) as this will probably help you feel more at ease
- Speak clearly and loudly enough for everyone to hear you
- Face people when speaking to them
- Hold group members' attention by making eye contact with them, moving your attention around the whole group
- Allow enough time at the beginning to build trust, through introducing yourself, setting a 'group agreement', asking people to introduce themselves, saying what will happen, etc.
- Hold the focus of the group on the themes of discussion
- Check if participants are understanding and are following you and each other
- Be engaged in what people say, encourage their participation and value their contribution
- Recognise individual participants' needs
- Keep to the timetable that's been set out
- Keep it light-hearted as it helps people to open up
- Notice your own reactions to what happens and then use it to help you. For example, if you are too hot, ask the group if they are and adjust the temperature accordingly
- Make sure everyone can see clearly any resources you are using, such as flipcharts.

Don't

- Be threatened by other people's knowledge or believe you have to know it all. Use their knowledge to add to the group and allow members to feed off each other's strengths
- Have drug users and parents of drug users in the same group – this could be very difficult to manage
- Lose the focus by letting people ramble on, or deviate unhelpfully from what is being discussed
- Rush and risk group members not having enough time to digest what has been said
- Struggle on in an environment that is noisy, cold, stuffy, uncomfortable, etc.
- Convey boredom, frustration or indifference to what people say
- Criticise or judge people, even if you feel like doing it!

Lastly, remember... we all make mistakes. We can choose to see them as a chance to learn how to develop as a facilitator and be different next time, rather than being critical with ourselves about the past, which we cannot change.

What Adfam can do for you

Adfam is the national umbrella body for families affected by someone else's drug and alcohol use, and the leading national organisation providing support, information and services for these families.

Adfam publications

We provide a range of publications for both families and professionals, including:

We Count Too

A good practice and quality standards guide for work with families, described as 'invaluable' by the National Treatment Agency. This contains a wealth of information on what makes a good service for families – including issues specific to different family members and how to provide a full menu of services including outreach, respite, helplines and counselling.

Bouncing Back!

A creative learning pack for work with families, particularly substance misusing parents and their children.

Living with a Drug User – for parents or for partners

Booklets full of useful information and practical tips for dealing with a problem drug user in the family.

Journeys

A range of case study-based booklets for parents, partners, children, siblings and grandparents; also tackles issues like drug-related bereavement and what happens when someone is coming off drugs.

Prisons, Drugs and You

Booklets for prisoners and their families with information on the impact of drug use, visiting procedures, coping methods and practical advice.



For more information, a complete list of publications and DVDs and further information, please contact publications@adfam.org.uk or call the Adfam head office on 020 7553 7640.

Adfam training

A variety of training courses for families and professionals is available, with courses including:

Assertive Families

Coping with Conflict

Families, Arrest and Imprisonment

Families' Influence on Treatment

Families, Treatment and Release

Parenting, Children, Drugs and Alcohol

Supporting a Drug/Alcohol User

Setting and Keeping Boundaries

Understanding Drug and Alcohol Use

Understanding Family Dynamics



For further information on learning outcomes, mappings to DANOS (Drug and Alcohol National Occupational Standards) and pricing, please contact training@adfam.org.uk or call the Adfam head office on 020 7553 7640.

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Adfam

the voice of families affected
by someone else's drug or
alcohol use

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