Should families do more to help with addiction?

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Sajid Javid, the UK’s health secretary, recently spoke at the Royal College of Physicians to outline his plans for healthcare reform. He covered a lot of ground, including his vision for the part that families should play in facilitating disease prevention and interventions for their relatives, helping them to recover from illnesses like depression and drug addiction. Sajid Javid shared a personal story of how his mother had helped his father quit smoking by reminding him that his sons could lose their father unless he stopped. It seems that this was enough for Javid’s father to abstain there and then.

The clear inference from the speech was that families should take greater responsibility for intervening with relatives who are dependent on drugs. All that’s required to cure people of addiction, this line of thought seems to say, is for families to appeal to their loved ones to stop using drugs in order to improve their health. If only it were so simple, we could easily reduce the harm and misery that so many families and individuals experience as a result of problem drug use. The reality, however, is much more nuanced and complex.

For many people who are dependent on drugs, their family is a contributing factor to their illness, rather than a source of support. Specialist drug treatment services are populated with thousands of patients who have survived psychological, sexual, and emotional trauma that their relatives were responsible for or turned a blind eye to.

Equally, there will be families tearing their hair out with frustration on hearing Sajid Javid advise them to take a more active role in persuading their affected family members to become abstinent. They will have already spent substantial amounts of time and money trying to help their loved ones out of addiction. They are not short of advice but lack support for their own health and those they are caring for.

In some families, problems with drugs can go back generations and this intergenerational pattern of drug use and problems can be very difficult to disrupt. Although drugs are embedded in these relationships, they are often a symptom of wider social problems. Poverty, mental health struggles, unemployment, and inadequate housing are all causes and effects of problem drug use—risks which constellate in the most disadvantaged communities and postcodes. These same areas have experienced disproportionate cuts to their drug treatment services.

A particularly cruel consequence of the axe the government has taken to public health budgets over the past decade is that the areas with the greatest need for services have ended up shouldering the deepest cuts.

Specialist drug treatment services and the skills of the staff who work in them are vital. Unlike families, they provide objective support but, crucially, have the experience to manage patients’ withdrawal from drugs. Even the most well intentioned family managed detox can be dangerous and, in extreme cases, life threatening. A mishandled detox will do little to enhance a patient’s chances of recovery as, apart from the physical risks, it has the potential to dent an individual’s confidence, reducing their often already fragile belief in their ability to recover from addiction.

Part of Sajid Javid’s suggestion that families should have a greater role in patients’ recovery from addiction may be prompted by the need to alleviate pressure on scarce NHS resources. Yet this assumption that families could save the NHS money and time if they played a greater part in their relatives’ route to abstinence is short sighted and risks adding to the guilt, stigma, and frustration that families already experience.

While some of us might have personal stories or experience of family members who have given up cigarettes, alcohol, and other drugs, our influence is minimal. It is worrying that someone with as much say over national policy as Sajid Javid might be basing their perception and decisions on personal experience rather than evidence and the firsthand testimonies of multiple families. The health secretary has lots of organisations to choose from that could share insights based on the thousands of families they help navigating the pain and chaos addiction has exposed them to. They deserve our compassion and respect, not more blame and guilt.

Competing interests: None declared.

Provenance and peer review: Not commissioned; not peer reviewed.


