

# Psychosocial wellbeing of family members reached by NGOs in the field of addictions

Addiction & the Family International Network (AFINet):  
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# The Finnish legislation takes into account the family members and close others

## **Act on Welfare for Substance Abusers No. 41/1986 7 § Service needs**

Services have to be provided for people with substance use problems, and to his/her **family members and close others**. Help, support and services need to be provided according to the needs of the person and the close others.

## **Child Welfare Act No. 417/2007 Section 10 – Taking children into consideration in services for adults**

**The need for care and support for a child** must be investigated and adequate care and support safeguarded **when the child's parent, custodian or other person responsible for the care and upbringing of the child 1) is being provided with substance abuse and mental health services** or other social and health care services during which the person's capacity to give their fullest attention to the child's care and upbringing is deemed to have deteriorated; 2) is in pre-trial detention; or 3) is serving a prison service. (88/2010).

[https://www.finlex.fi/en/laki/kaannokset/2007/en20070417\\_20131292.pdf](https://www.finlex.fi/en/laki/kaannokset/2007/en20070417_20131292.pdf)

**See also** the paper in Session 5 by **Minna Ilva** (Finland) How much does your drinking affect close others?  
Session 5: Saturday at 15.30-17.00

# We had services for family members

- We aimed to build a welfare state
- Services were provided for parents, spouses and children.
- Outpatient counselling
- Inpatient services for the whole family: for example, Järvenpää Addiction Hospital <https://www.paihdesairaala.fi/eng>



The hospital had a school and a kindergarden; counselling programs for spouses [History shortly](#)

Our research sample includes 5197 patients, 56 spouses and 988 children. Hence, the electronic treatment records were not available before 1997. [https://keskuststo.a-klinikka.fi/tietopuu/follow\\_up](https://keskuststo.a-klinikka.fi/tietopuu/follow_up)

<p>RIPE data (N=12059)                  Year of birth 1909–2009, 7907 males (66%)                  29% inmates (n=3517)</p>		
<p><b>Patients</b>                  n= 10910; 67% males; 31% inmates (n=3409)</p>		
<p><b>Inpatients</b>                  n=4297; 61% males,                  30% inmates (n=1293)</p>	<p><b>As in- and outpatient</b>                  n=900; 66% males,                  48% inmates (n=429)</p>	<p><b>Outpatients</b>                  n=5713; 72% males,                  30% inmates (n=1687)</p>
<p><b>Family members</b></p>		
<p><b>Accompanying host (inpatients)</b>                  n=56; 21% males, 5% inmates (n=3)</p>	<p><b>Accompanying host (outpatients)</b>                  n=33; 9% males, 0% inmates (n=0)</p>	
<p><b>Children (inpatients)</b>                  Only as a child n=983 (total n=988); 50% males,                  3% inmates (n=3)</p>	<p><b>Beyond the bars® (BB)</b>                  Only as BB n=77 (total n=107); 74% males,                  100% inmates (n=77)</p>	



**Figure 1.** The number of inpatients, outpatients, and family members in the RIPE data as well as the proportion of persons that have been imprisoned.

# Current situation??

- Breaking down the welfare state
  - Raise of individualism
  - Worry about expences
  - Public services for family members are difficult to get
- Health care:
- The role of adult family members - to support the person with SUDs
  - Medicalization and stigmatization of family members? treated with medication when mental health problems emerge
  - Family members not getting treatment for themselves in time
- NGOs are left alone
- NGOs provide versatile services
  - NGOs do a good job, however, this is not enough

# Measuring the burden of psychosocial difficulties



- A research based questionnaire
- 24 questions – practical to use in clinical practise and in research
- Evaluates the range and severity of psychosocial difficulties affecting daily life
- Created in international collaboration (8 countries) by experts of nine neurological or psychiatric disorders
- A general measure that can be used in different contexts
- Linked to International Classification of Functioning, Disability and Health (ICF) by World Health Organization (WHO)

**Information and the questionnaire in English:** [www.a-klinikka.fi/paradise24fin](http://www.a-klinikka.fi/paradise24fin)

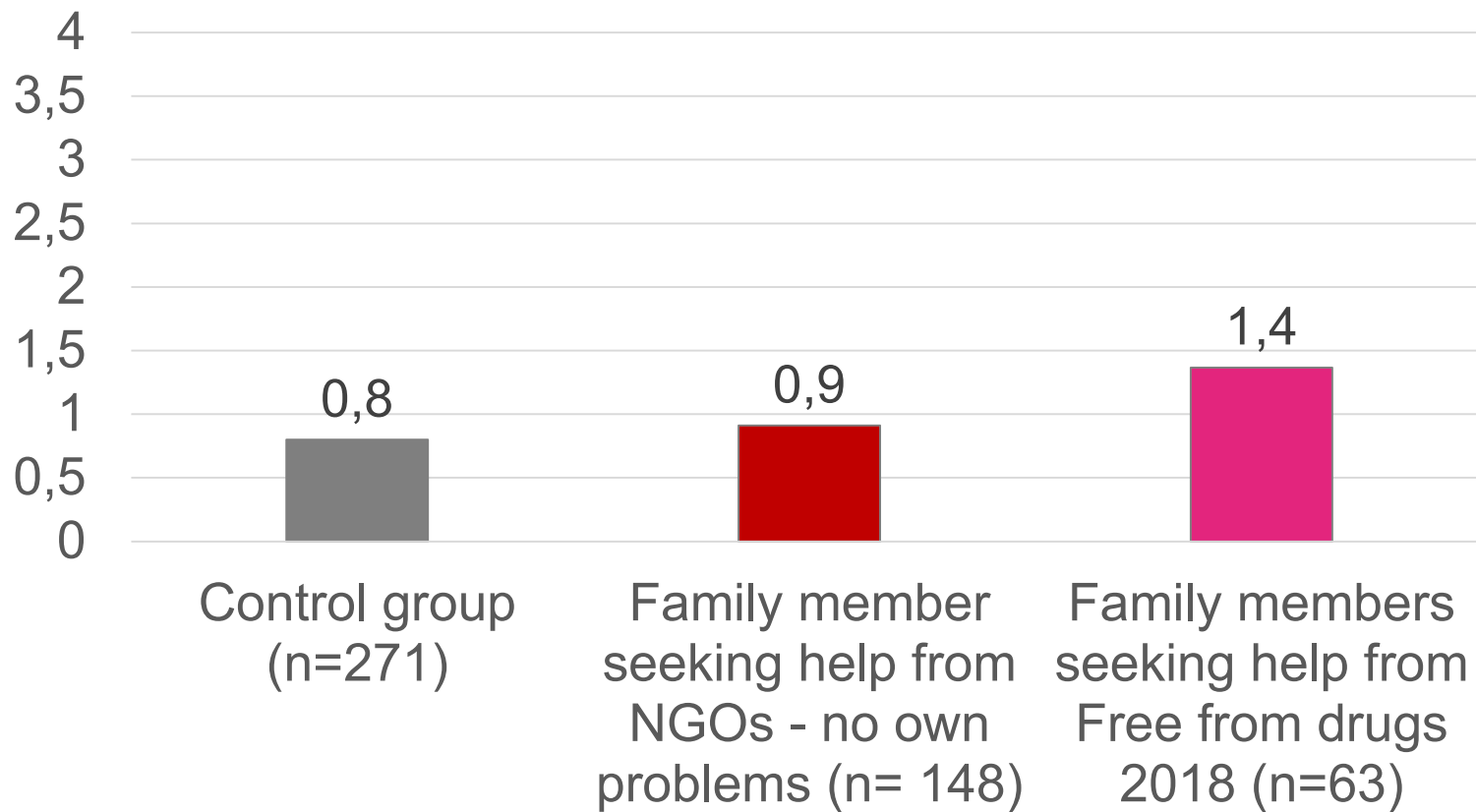
## Recent publications

Pitkänen, T., Levola, J., de la Fuente, J. & Cabello, M. (2018). [Identifying psychosocial difficulties of inpatients with substance use disorders: evaluation of the usefulness of the PARADISE24 for clinical practise](#). *Disability and Rehabilitation*. Published online 5.9.2018.

de la Fuente, J., Cabello, M., Levola, J., Caballero FF., Ayuso-Mateos, JL. & Pitkänen, T (2018). [Validity of the PARADISE24 questionnaire in people with substance use disorders: A measure to assess psychosocial difficulties](#). *Drug and Alcohol Dependence* 187:66-71.

# Psychosocial difficulties (PARADISE24fin) mean: 24 questions

0 = no difficulties; 4 = extreme difficulties/cannot do



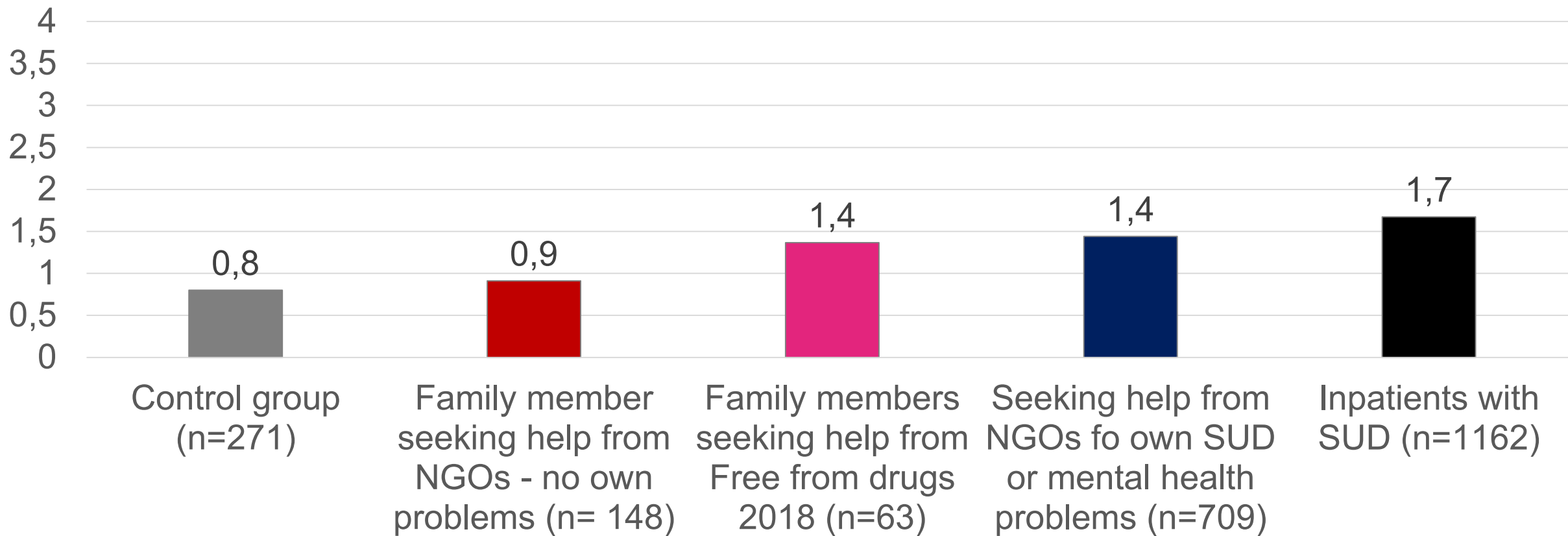
**FREE FROM DRUGS**

Mirka Vainikka and  
Mira Reponen

<https://irtihuumeista.fi/>

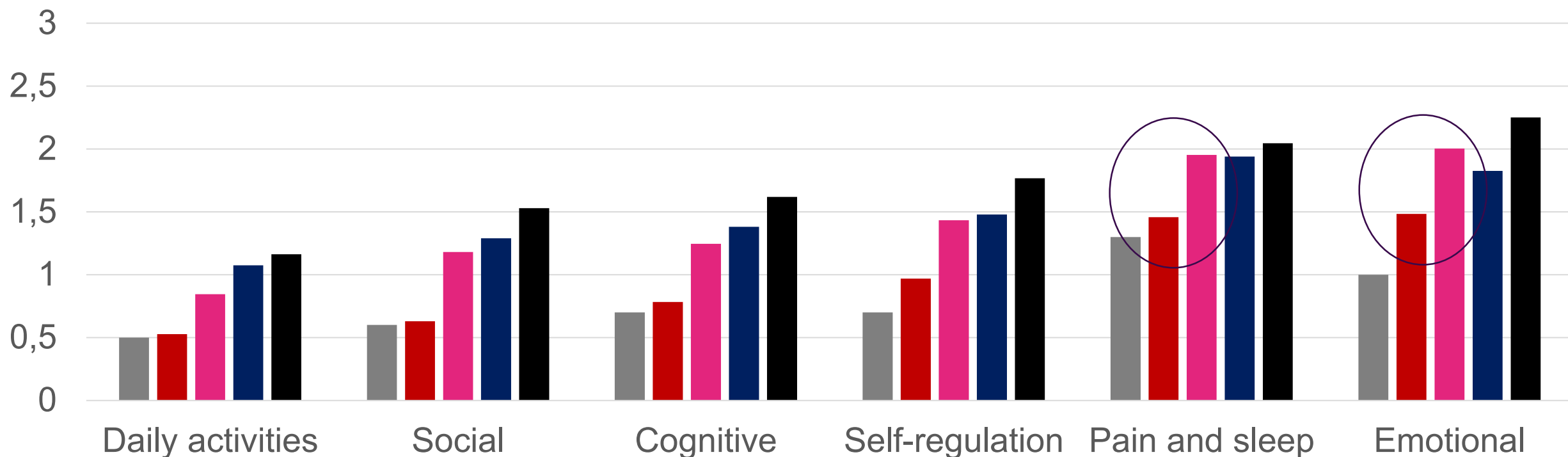
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## Psychosocial difficulties

0 = no difficulties; 4 = extreme/cannot do



- Control groups (n=271)
- Family member seeking help from NGOs - no own problems (n= 148)
- Family members seeking help from Free from drugs 2018 (n=63)
- Seeking help from NGOs for own SUD or mental health problems (n=709)
- Inpatients with SUD (n=1162)



# Conclusions

- Family members experience psychosocial difficulties, especially emotional difficulties, pain and problems with sleep
- We know that family members need help and support for their own wellbeing
- We need to work to increase awareness of this need among politicians, service producers and the family members themselves

We hope that we will find funding to translate the 5-step method in Finnish and to arrange the first 5-step training.

Meanwhile, we do what we can. Several NGOs are doing a very good job.

My current project aims to increase awareness of the difficulties and problems that people experience in their daily life, and to find ways to overcome and prevent suffering. We help different kinds of NGOs to collect data about functioning, wellbeing and feedback, and to use the collected data for developing the activities.



# Thank you!

**The following slides include additional background material**



## Non-Governmental Organizations (NGO) in Finland

- Long history of voluntary work around substance use issues
- More than 100 organizations that work on SUD **prevention**
- A big number of non-profit NGOs that provide **service** for problems caused by SUD for the users and their family
- A big number of organizations and peer groups arrange **activities**
- **Funding** from different sources, the most important source is through Ministry of Social Affairs and Health based on the revenues of Finnish gaming company (Veikkaus).
  - Funding is given on the bases of applications.
  - Follow-up of the use of the funding and the results of the work.

# A-Clinic Foundation

- **the largest Finnish NGO** in the addiction field.
- versatile professional **services** for adults, adolescents and families. Services are used annually by 30 000 clients.
- e-services reach over 300 000 monthly users.
- involved in **national and international activities** in the fields of prevention, information, development, training and research.
- **the research group**: Dr. Jouni Tourunen, Dr. Tuuli Pitkänen and doctoral student Teemu Kaskela

[www.a-klinikka.fi/in-english](http://www.a-klinikka.fi/in-english)

[www.a-klinikka.fi/research](http://www.a-klinikka.fi/research)

## MIPA 2015 - 2018

**A research programme of ten Finnish NGOs in the field of substance use and mental health**

Three main themes:

- 1) Organizational structures and leadership
- 2) **The people that are reached by these organizations: wellbeing and service needs**
- 3) Peer help



NGOs have good knowledge and direct contact to the field. The research questions raise from the need to know.

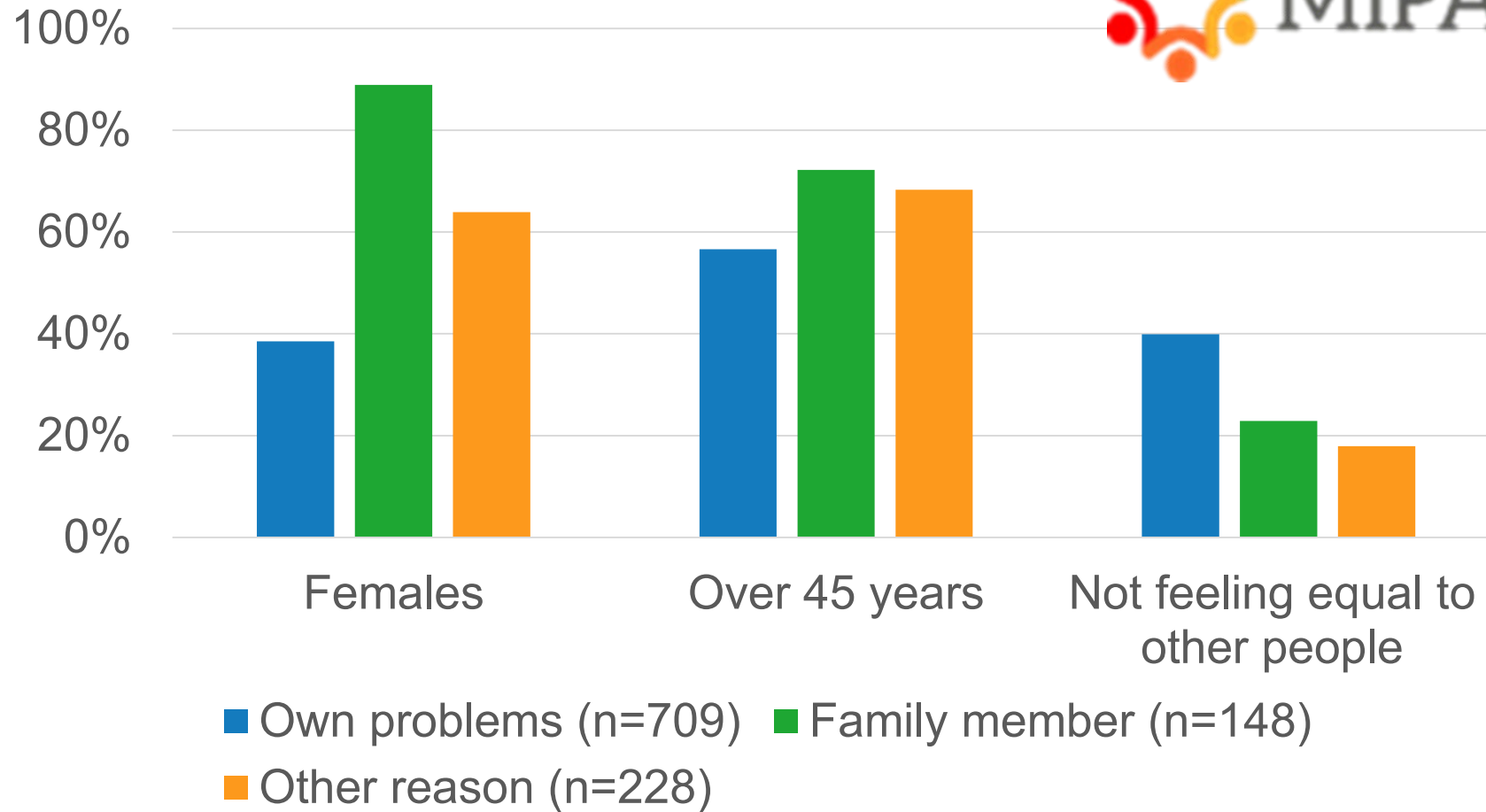
## Three groups



What are the differences between people that come to the NGOs due to

- a) own problems with substance use and/or mental health
- b) the problems of a family member, and
- c) those who took part because of other reasons (like to help, meet people, voluntary work etc.)

# Three groups of people at the NGOs



# Differences between the three groups: own problems, family, other

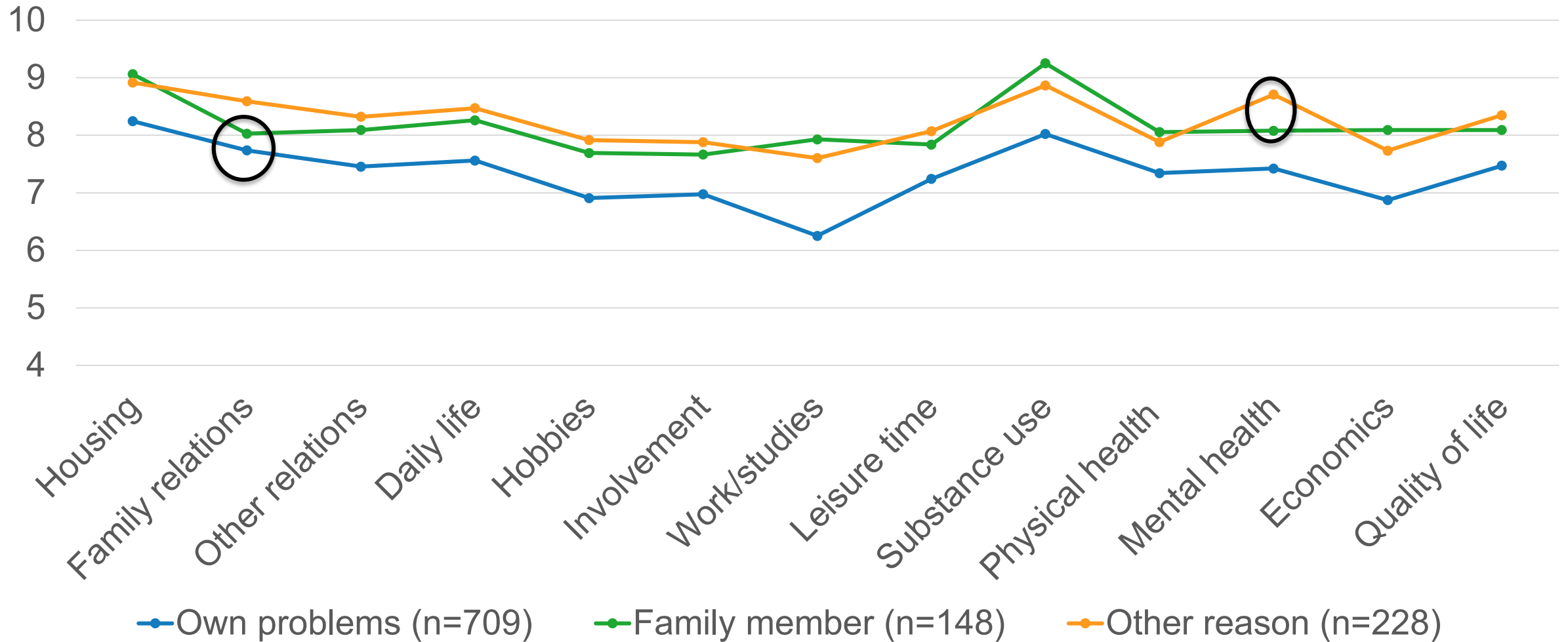
**1) Evaluating 13 areas of life.** Life-situation. 13 questions to evaluate different areas of life. Scale 4=very bad situation; 10= excellent

**2) Subjective experience of change.** Life-situation, same 13 questions **now - when starting at the treatment**. Retrospective.  
Calculated from two variables, possible variation from -6 to 6.



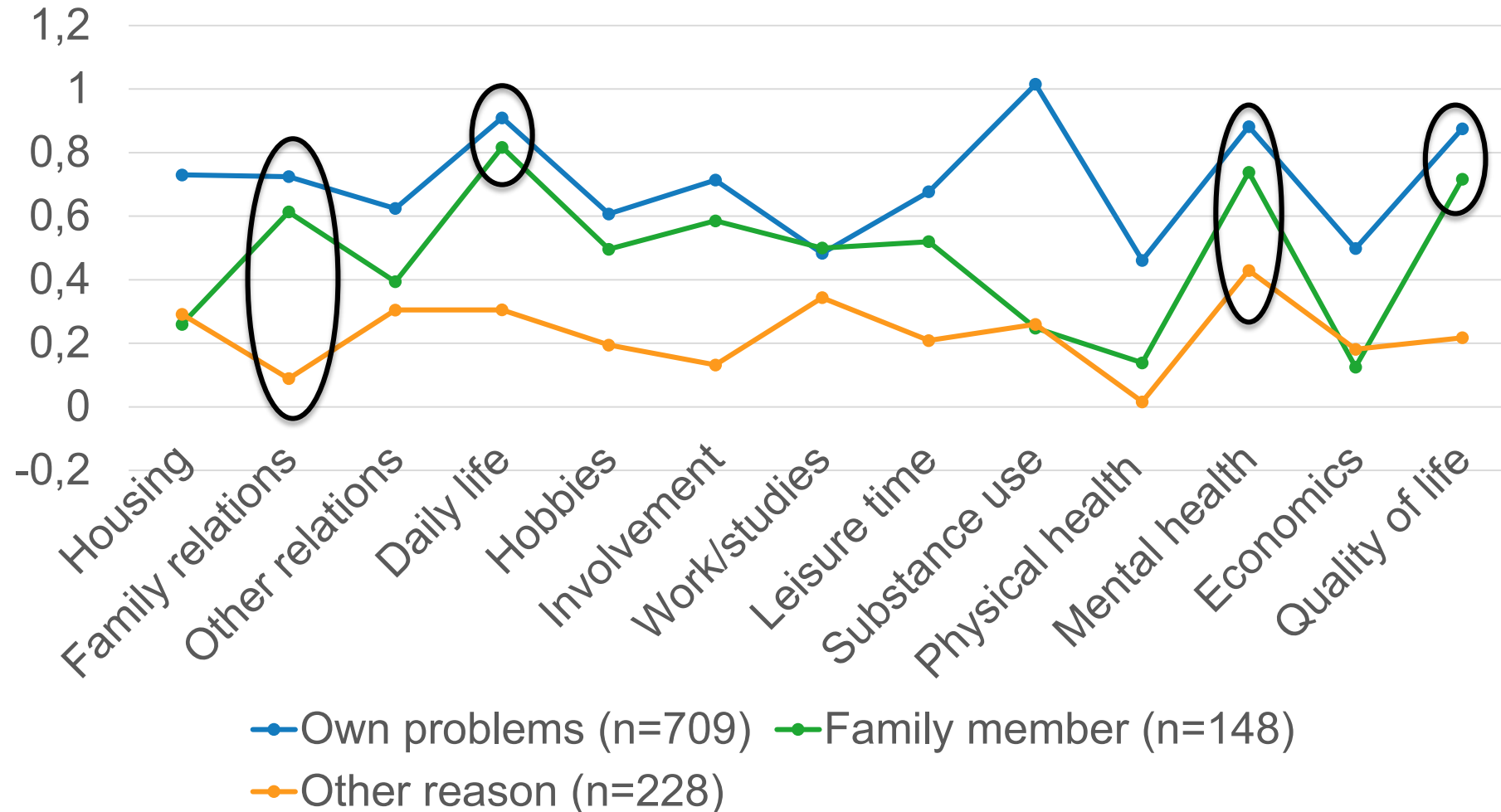


# Life-situation; group means; scale: 4=very bad situation; 10=excellent



# Experienced change after coming to the NGO

Current situation – starting situation using the scale from 4 bad to 10 excellent

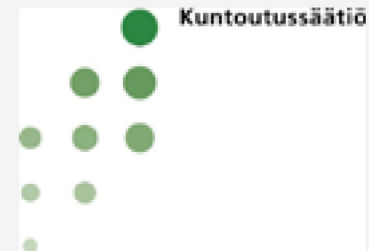


# Conclusions



- **NGOs in the field of addictions and mental health** reach and serve people that have own problems or problems in the family
- Three different kinds of groups according to the reason for taking part: own problems, family member, other reason
- Family members suffered mostly from emotional stress, pain and difficulties with sleep
- People experience positive changes in several areas of their life when they take part to the activities and services provided by the NGOs
- Family members reported that they had received help from NGOs to their daily life, family relations, emotional wellbeing and quality of life





[www.a-klinikka.fi/mipa](http://www.a-klinikka.fi/mipa)