

YOUR GOOD HEALTH

Opioid empathy

Families seek compassionate approach to treating addicted loved ones

By Martha Bebinger
Kaiser Health News/WBUR

It was Bea Duncan who answered the phone at 2 a.m. on a January morning. Her son Jeff had been caught using drugs in a New Hampshire sober home and was being kicked out.

Bea and her husband, Doug, drove north that night nine years ago to pick him up. On the ride back home, to Natick, Massachusetts, the parents delivered an ultimatum: Jeff had to go back to rehab, or leave home.

Jeff chose the latter, Bea said. She remembers a lot of yelling, cursing and tears as they stopped the car, in the dead of night, a few miles from the house.

"It was really, really difficult to actually just drop him off in a parking lot on our way home and say, you made the decision — no rehab — so we made the decision, no home," Bea said. "It was exquisitely difficult."

But it was not unexpected. Doug Duncan said many parents had told him to expect this moment. Your son, he remembered them saying, will have to "hit rock bottom; you're going to have to kick him out of the house."

Two torturous days later, Jeff Duncan came home. While he returned to rehab, the Duncans decided their approach wasn't working. They sought help, eventually connecting with a program that stresses empathy: CRAFT or Community Reinforcement and Family Training.

"There was more compassion and 'Wow, this is really difficult for you,' more open questions to him instead of dictating what he should and should not behave like," said Bea.

The Duncans said the training helped them shift from chaos to calm.

"I started to feel an immense sense of relief," Bea said. "I stopped feeling like I had to be a private investigator and controlling mom. I could kind of walk side to side with him on this journey, instead of feeling like I

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had to take charge of it."

For the Duncans, the approach meant they could switch from enforcing family consequences, like kicking Jeff out of the house, to supporting him as he faced others, like losing a job. It worked: Bea and Doug helped Jeff stick to his recovery. He's 28 now and has been sober for nine years.

Rock bottom can be deadly

Many drug users say, in hindsight, they appreciated being forced into treatment. But studies show that a compassionate approach and voluntary treatment are the more effective ways to engage drug users in recovery and keep them alive. That's a critical consideration for families in this era of fentanyl, which can shut down breathing in seconds.

"The concept of letting their children hit bottom is not the best strategy because in hitting bottom they may die," said Nora Volkow, director of the National Institute on Drug Abuse.

But desperate parents often don't know how to avoid hitting bottom with their children as the Duncans did on that dark, frigid January morning. They have found ways to help: Doug is a parent coach through the Partnership for Drug-Free Kids, which is now collaborating with the Grayken Center for Addiction at Boston Medical Center.

The collaboration will close a gap in services for families caught up in the opioid epidemic, said Grayken Center's director, Michael Botticelli, who served as drug czar in the Obama administration.

"They don't call this a family disease for no good reason," Botticelli said. "The whole design of these services [is] to promote tools and information for families so they know how to ap-



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proach a situation and can heal."

There is no uniform path to healing for the drug user or parents, and no widespread agreement on the best approach for families.

Joanne Peterson, who founded the parent support network Learn to Cope, said there are reasons why some parents ask older children to leave the house — if there are younger children at home or if the parents don't feel safe.

"So it depends on what tough love means," Peterson said.

She applauds the Grayken Center for expanding access to parent coaches, but "we also need more professional help," Peterson said she routinely hears from parents who can't find counselors and doctors who understand their daily traumas.

Compassion or enablement?

Some critics suggest the CRAFT model is too soft, that it enables drug use.

"That's a misconception," said Fred Muench, president of the Partnership for Drug-Free Kids. "CRAFT is authoritative parenting, creating a sense of responsibility in the child and at the same time saying 'I am here for you, I love you, I'm going to help you, but I can't help you avoid negative consequences if you're not looking to do that on your own.'"

The parent coaching extends beyond periods of crisis.

More compassion in the home fits the shift away from criminalizing addiction — toward accepting and treating it as a chronic medical condition.

If a child had cancer, parents "wouldn't disengage with them or be angry with them," said Botticelli. "So I do think it aligns our scientific understanding that addiction is a disease and not a moral failure."

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