

SAN FERNANDO VALLEY RECOVERY FOR FAMILIES SUPPORT GROUP

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Abstract:

The purpose of this project was to locate a potential funding source and write a grant intended to fund a community group for families in the San Fernando Valley (SFV), Los Angeles County who need support caring for a loved one with an active substance use disorder.

Research revealed that opioids were the number one leading cause of drug-related deaths in the United States. Minoritized communities are the number one groups impacted by substance use disorders and lack the resources to receive support. The location of the support group will be at Tarzana Treatment Center in Tarzana, California. Kaiser Permanente was identified as an appropriate potential funder because of their philanthropic perspective, which includes behavioral health initiatives and reducing racial, ethnic, and health disparities, aligning with the proposed program.

This program has a goal of reducing the number of opioid related deaths among racial minorities and increasing family involvement in the individuals with SUD using a harm reduction approach.

Introduction:

This brief review of the literature will address research on stigma associated with substance use disorders and the effect on family members, therapy modalities that have promise, and recovery capital, its importance, and the need for treatment providers to assess this element.

Research has shown that approximately 46% of Americans have a family member or someone close to them who is battling a substance use disorder (Friedrich et al., 2023). When efforts are created to address opioid use, it is primarily focused on the individual and not the family unit, who are also enduring great stress supporting their family members (Kelly et al., 2017).

After it was publicized that ethical abuse, criminalization of alcohol/drug problems and poor clinical therapies were being provided, inebriate homes and asylums were shut down. By 1925, inebriate homes and asylums all collapsed and were replaced with private hospitals, state-operated psychiatric hospitals, drunk tanks, and insane asylums (Talchekar et al., 2024).

Methods:

Identification of Potential Funding Source:

Potential funding sources were searched for using the internet on the student database library at California State University, Long Beach (CSULB) and Google for additional information. Keywords such as *grants/family support*, *grants/substance use*, *grants/minority communities*, and *grants/California* were used in Internet searches for funding sources.

Criteria Selection of Actual Grant:

The grant writer researched funders with a mission of providing resources and support to marginalized communities. Organizations that align with the proposed program's mission (i.e., reducing substance misuse by providing family support to minority communities) were selected as potential funding sources. Additionally, organizations were considered based on previous history of grants toward combatting substance misuse among marginalized communities within California.

Kaiser Permanente (2024) was chosen as the potential funder for this program. Since 1945, Kaiser Permanente has invested in community health with the inclusion of nonprofit, community-based organizations

Results:

The program will use psychoeducation, family support, and harm reduction approaches. Twelve-week, 2-hour group sessions, not including holidays, will be held weekly throughout the year, serving a total of 36 families in a 12-month period. A maximum of six groups of family members will be accommodated each session (12-week sessions). A QR code will be provided on the group's flyer to reserve a spot prior to the start of group sessions. The flyer will emphasize that the group will be first come, first served, and there will be limited seats. The flyer will be placed at the front of TTC for families to access, explaining that if their loved one is discharged from the program, the families still have resources. Employees at TTC will also be provided with copies to refer families who are attending family group sessions, and unexpectedly, their loved one leaves treatment prematurely.

The goal of this support group is to ensure that families in the San Fernando Valley have access to healing in their homes, although their loved ones may not be ready for recovery. This group will allow space for families in the community who need information on how to manage their relationships while their loved ones are actively using substances. Creating a strong support system increases the likelihood of the individual coming around to begin the process of recovery. This support group will educate families on supporting their loved ones while maintaining self-care practices.

The program aims to increase family involvement in their loved ones' lives. The final goal is to reduce overdose rates from substance misuse. The intervention's education portion will help families learn how to support their loved ones better. To reduce substance misuse within the community, a family conflict resolution approach will be provided in groups by the Licensed Clinical Social Worker (LCSW) to encourage healthy conversations between the family and the individual actively using substances. This will strengthen family bonds and create a safe space for processing everyone's feelings. For the reduction of overdose rates, a harm reduction approach will be used to (a) recognize drug use realities and (b) increase access to resources. Research shows that these interventions have been successful in other settings.

TABLE 1. Annual Line-Item Budget

Tarzana Treatment Center			
San Fernando Valley Recovery for Families Support Group			
Duration of Program (e.g., One Year)			
	Project Effort	Total Cost	In-Kind Requested Amount
PERSONNEL COSTS			
	% FTE		
LCSW	40%	\$ 25,773	\$ 25,773
MSW Intern, stipend	40.00%	\$ 15,000	\$ 15,000
Receptionist	10.00%	\$ 3,648	\$ 3,648
Benefits @ X%		\$ 9,056	\$ 9,056
CONSULTANTS			
Evaluator		\$ 5,000	\$ 5,000
PERSONNEL SUBTOTAL		\$ 58,477	\$ 58,477
DIRECT OPERATING COSTS			
Paper for copies, flyers		\$ 2,400	\$ 2,400
Pens, Highlighters		\$ 1,200	\$ 1,200
Phone		\$ 920	\$ 920
Snacks		\$ 1,600	\$ 1,600
Mileage		\$ 241	\$ 241
Utilities, group room, office space, electricity, internet access, and copiers			\$12,000
DIRECT OPERATING SUBTOTAL		\$ 6,361	\$ 12,000
			\$ 6,361
INDIRECT COSTS @ 10%			
		\$ 6,484	\$ 6,484
TOTAL COSTS		\$ 83,322	\$ 12,000
			\$ 71,322

Implications:

Recommendations for Social Work Practice, Policy, Research and Advocacy Practice
Social workers can incorporate the framework of family-centered group therapy with an emphasis on harm reduction when providing support to individuals with a substance use disorder. Acknowledging the NASW (2021) *Code of Ethics* value of the importance of human relationships, which expresses the importance of the social worker and client relationship, including families, can contribute to a positive working relationship that provides life-changing results.

Policy
Gaps in the justice system were identified in the research, and it was discovered that people of color have a higher chance of dying from substance misuse. Social workers have an ethical duty of advocating to ensure that vulnerable populations have the essential resources for their overall well-being, therefore working towards closing the systematic gaps (NASW, 2021).

Research
Future research can follow the journeys of the one actively using substances to examine if the individual sought treatment and for how long after families used the support provided in the group to encourage recovery. Future research is essential for the substance use population because they are shamed by society and are reluctant to ask for help due to feeling judged or stigmatized for their disorder. Normalizing substance use disorders can help this population reduce the number of deaths from substance misuse, and future research holds the potential to make significant strides in this direction.

Conclusions:

In researching the literature for the proposal, the grant writer learned that race and ethnicity has a critical role in the prognosis of substance use disorder (Gondré-Lewis et al., 2022).. The following information has implications for a healthcare system being created without the intention of supporting racially marginalized communities Family-centered treatment practices for substance users have been shown to have a positive impact on the recovery process (Kourgiantakis et al., 2021).

Reviewing the literature for this project highlighted the disparities that families are facing in the United States, as it is common to have a family member who has died from substance misuse or actively using substances (Friedrich et al., 2023). Some community groups that use a harm reduction approach for minoritized communities can make a significant difference in overdose rates (Chandler et al., 2023).

References:

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