

To use the skills outlined in this resource, a basic competence in behavioural approaches and a positive, motivational style of interaction are necessary. This issue complements *Community Reinforcement Approach* in *The Essentials of...* series.

What Is Community Reinforcement and Family Training?

It is widely recognized in the substance use field that addiction affects families and relationships. Inclusion of concerned others in treatment is often a goal, regardless of treatment orientation. Community Reinforcement and Family Training (CRAFT) is a therapeutic approach for concerned families and close friends of people with substance use problems. This approach is positive and motivational in its focus, and strategically helps families and friends (concerned significant others or CSOs) to work smarter, not harder, with their loved ones who are suffering from substance use problems.

CRAFT has three main goals:

1. To improve the quality of life and functioning of the CSO;
2. To reduce their loved one's substance use; and
3. To engage the loved one in treatment and support.

CRAFT has been developed as a variant of the Community Reinforcement Approach, one of the most successful, evidence-based behavioural approaches for substance use disorders.¹ "CRAFT grew out of the understanding that individuals who truly need help with substance use problems often are strongly opposed to treatment. On the other hand, the CSOs of the person using substances are commonly highly motivated to get help for them."²

What Does the Evidence Say?

CRAFT builds on principles of positive reinforcement to influence outcomes for people with substance use disorders and their CSOs. A systematic review and meta-analysis of four small, randomized controlled trials compared the efficacy of CRAFT to more traditional approaches. The CRAFT approach in working with CSOs significantly increased their loved one's engagement into treatment (67%) as compared to Alcoholics Anonymous or Narcotics Anonymous approaches (18%) (four studies), and the Johnson Institute intervention (30%) (one study).³⁻⁷ All three approaches also resulted in some degree of improved functioning of the CSO within a six-month follow-up. The outcomes measured were depression, anger, family cohesion, relation happiness and family conflicts.

The Essentials of... is a series that offers evidence-based guidance and practical information to enhance practice in the substance use field. The topics complement CCSA's *Competencies for Canada's Substance Abuse Workforce*.

CRAFT was effective independent of the substance involved, as shown in studies of CSOs supporting people with substance use conditions involving alcohol, cocaine, opiates, cannabis and other stimulants. CRAFT is also effective working with a range of CSOs including adults and adolescents, and spouses, partners, parents, siblings and family members.²⁻¹⁰

Emerging evidence also supports the use of CRAFT with family members to improve outcomes for people with opioid use disorder who are actively engaged in treatment. When used as parallel treatment for family members, a trial suggests that CRAFT improves treatment retention and lowers the rates of loved one's substance use in comparison to psychosocial treatment as usual.¹¹ CRAFT has also been used successfully in a group format and in self-directed care.¹² Through the use of the client-friendly book, *Get Your Loved Ones Sober: Alternatives to Nagging, Pleading, and Threatening*,¹³ CSOs in the self-directed care group engaged 40% of their loved ones into treatment. The treatment engagement rates for the clients in the group format were comparable to those reported for individual CRAFT studies.

How Does It Work?

The primary goals of CRAFT are:

- To improve the quality of life of the CSO;
- To reduce substance use in the loved one, and
- To engage the loved one in treatment.

The CRAFT approach uses structured techniques that work together to achieve these goals. These techniques include CSO engagement and assessment, behavioural skills training and preparing the CSO for setbacks. CRAFT also has a set of processes that weave their way through the approach to enhance motivation, assess for contextual information and build behavioural skills. A complete description of these techniques and procedures is in Smith and Meyers' book, *Motivating Substance Abusers to Enter Treatment: Working with Family Members*.¹⁴

CSO Engagement and Assessment

Enhancing the CSO's motivation to participate in their loved one's treatment is one of the first tasks of the CRAFT therapist. Initially, the majority of the work in therapy is done by the CSO. Using motivational enhancement helps to keep the CSO engaged during difficult points in therapy.

At the outset of therapy, the risk for relationship violence is assessed. CRAFT procedures involve changing the dynamic of the relationship between the CSO and their loved one. A specialized set of procedures is used to manage the risk of domestic violence with the safety of the CSO taking precedence over all other processes.

After measures are taken to enhance CSO motivation and assess risk, other assessment procedures are employed. These include assessment of the CSO's life satisfaction in a variety of areas using the CRAFT Happiness Scale. The CRAFT Functional Analysis of Loved Ones Use is then used to identify key patterns that maintain the substance use and targets of change.

Defining CSO Goals

After therapy is initiated with the CSO through the above techniques, the three main goals become treatment targets:

Goal 1: Increase quality of life for CSO

Although the most important goal of treatment identified by the CSO with CRAFT is typically to engage the substance-using loved one into treatment, the life satisfaction of the CSO is paramount in treatment. The Happiness Scale and Goal Setting forms are used to help the CSO enhance his or her self-care and quality of life, regardless of where the loved one is in the change process.

Goal 2: Reduce the substance use of the loved one

The functional analysis is used to identify the short-term positive function of the substance use. This allows the therapist and CSO to begin planning targeted rewards that “compete” for time and function of substance use. Rewards must be under the CSO’s control and be comfortable for the CSO to deliver. A functional analysis of the loved one’s non-using behaviour is also conducted to identify short-term negative consequences of healthy behaviour so that the CSO can begin to address some of the barriers to positive behaviour. In addition, CSOs are taught how to allow natural consequences for use and how to “time-out” positive reinforcement during times of substance use. In this way, the CSO can begin to steer his or her loved one in the direction of less harmful and reduced use by arranging the environment so that non-substance use becomes more rewarding than substance use. (See vignette below.)

Goal 3: Engage the substance-using loved one in treatment

CSOs are taught to create change in the dynamic of the relationship with their substance-using loved one. These changes are meant to invoke the curiosity of the loved one about where change is coming from. CSOs are taught a variety of methods to capitalize on these “windows of opportunity,” including positive communication skills and a variety of “motivational hooks” that they can use to make the idea of accessing treatment more palatable. They learn that “timing is everything” and much care is taken to ensure engagement approaches are delivered during optimal times in the treatment process. CSOs are also well prepared for a variety of responses on the part of the loved one, including treatment refusal.

Vignette (demonstrates some CRAFT techniques):

John is concerned about the substance use problem of his wife, Mary, and is ready to intervene. John learns through functional analysis that Mary tends to drink to relax after longer shifts at work. He learns to communicate positively when she gets home, to offer her a hot bath to unwind (a positive competing reinforcer) while he fixes dinner. He also learns not to call in sick for her the next day if she chooses to stay up all night drinking (allowing natural consequences). He changes his communication from nagging, threatening and pleading to stating his concerns and expressing how much he enjoys spending time with Mary when she is sober for the evening (positive communication skills). Finally, he learns to take a time-out from the situation and to care for himself if she does drink, until the next opportunity to engage arises (time-out from positive reinforcers and self-care).

Behavioural Skills Training

There are many opportunities for training in behavioural skills, such as positive communication and problem solving. CSOs learn these skills at specific points in the treatment process to optimize success in attaining the three goals of CRAFT. For example, positive communication skills are taught early on as a way of supporting the success of many other skills such as positive reinforcement, time out from reinforcing and allowing natural consequences. Problem solving is introduced during the session on allowing natural consequences because it is recognized that allowing consequences can initially cause problems for the CSO. Skills such as communication and problem solving are used in many other areas of the CRAFT protocol, such as enhancing the quality of life of the CSO.

Preparation by CSO for Setbacks

CSOs are prepared for a variety of outcomes, including setbacks, using the CRAFT protocol. For example, CSOs are prepared with contingent responses if their loved one refuses treatment after engagement attempts or if their loved one drops out of treatment prematurely once it has started.

Once the substance-using loved one is engaged in treatment, CRAFT prepares the CSO for active involvement in the treatment process. The Community Reinforcement Approach to substance use treatment advocates starting relationship therapy as soon as possible to ensure the best chance of success.¹⁵

Implications for Substance Use and Allied Professionals

The CRAFT approach offers clinicians a much-needed alternative to the traditional treatments that have been available to family members of individuals who use substances. The message that “you have to wait until they hit rock bottom” and “there is nothing you can do but detach and take care of yourself” have often been the only tools clinicians have had in working with families. Clinicians recognize that concerned family members seek help with a goal of engaging their loved ones in treatment. Thus far, the only other treatment that encompasses this goal, the Johnson Institute Intervention, has been found to be too confrontational, and family members often do not follow through.¹⁶ CRAFT offers more hopeful messages, such as “work smarter, not harder,” and “although it is not your responsibility, you can have much influence over your loved one’s substance using behaviour.” The approach is non-confrontational and positive, which is more appealing to family members.

CRAFT uses sound psychological principles grounded in rigorous scientific study. This grounding gives clinicians a sense of clinical integrity when choosing the CRAFT approach with their clients. The approach also offers clinicians a structure to work from that provides both guidance to the clinical application and flexibility in treatment planning. The structured nature of CRAFT provides a built-in capability for fidelity checks, treatment monitoring and supervision. CRAFT trainers offer basic training, fidelity supervision and certification opportunities to allow for consistent service delivery. Further training, which also encompasses a positive and motivational spirit, is available for managers and team leaders to become CRAFT clinical supervisors.

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Selected Resources

Smart Recovery (updated 2015)

A web-based self-help community that uses the CRAFT approach. Provincial chapters also available (e.g., [Smart Recovery® Ontario](#)).

Website: www.smartrecovery.org/

Robert J. Meyers, Ph.D. (last updated 2014)

Website created by the one of the pioneers of CRA and the creator of CRAFT. Website contains helpful and up-to-date links and publications for CRA, CRAFT and A-CRA.

Source: Robert J. Meyers

Website: www.robertjmeyersphd.com

CRAFT 20 Minute Guide (parent or partner versions) (updated 2016)

Source: U.S. Center for Motivation and Change (a private group practice)

Website: the20minuteguide.com/cm/craft/#.Vripd-8m6Uk

Aboriginal-specific Community Reinforcement and Family Training (CRAFT) Manual (2014)
CRA manual designed for Indigenous health and family workers in Australian Indigenous communities to support people who are at risk for alcohol-related harm. Developed by Miranda Rose, Bianca Calabria, Julaine Allan, Anton Clifford and Anthony Shakeshaft.

Source: National Drug and Alcohol Research Centre, University Of New South Wales, Sydney, Australia

Available at ndarc.med.unsw.edu.au/resource/aboriginal-specific-community-reinforcement-and-family-training-craft-manual

Les services à l'entourage des personnes dépendantes (2011)

Practice guide developed by Association des centres de réadaptation du Québec that has a section on CRAFT.

Source: Association des centres de réadaptation en dépendance du Québec

Available at aidq.org/wp-content/uploads/2013/06/Guide_Entourage.pdf

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