



Alcohol  
and Drug  
Foundation

# Help-seeking by family and friends of people who use alcohol and drugs.

## Survey Report

April 2024

Alcohol and Drug Foundation  
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# Executive Summary

The Alcohol and Drug Foundation (ADF) conducted a survey of 3,604 people, aged 18 and over, to understand information and support needs of people who use alcohol and other drugs (AOD) in Australia, including their support networks.

This report analyses the responses of 367 family and friends concerned about a loved one's AOD use to understand their knowledge strengths and gaps, as well as their help-seeking patterns. Findings identified the key barriers and opportunities to address these barriers and increase family and friends' capability to support their loved one's recovery.

## Summary of Findings

This report examines the information needs and help-seeking experiences of family and friends concerned about a loved one's AOD use.

It highlights issues faced by family and friends and points to clear opportunities to improve their knowledge, confidence and ability to support a loved one.

The most significant knowledge gaps for family and friends related to knowing how to talk to a loved one about their AOD use and how to support them. Information relating to these topics was also reported as being the most needed and helpful.

Despite over three quarters of participants indicating they knew the importance of accessing information and support early, only 42% had sought help. Approximately half these help-seekers waited a year or more before doing so.

While rates of help-seeking are low, they appear to be increasing over time.

In 2020, the ADF undertook an in-depth needs assessment survey to understand how, when and why concerned family and friends sought information and support. The 2020 survey found that 29% (n= 147) of family and friends had previously sought information and/or support.<sup>1</sup>

Key barriers that prevented family and friends from seeking help were related to: not knowing how, where, who or what to ask for information, advice or support; as well as a perceived lack of privacy, such as when accessing help over a phone or video call.

In addition, a notable proportion of concerned family and friends did not intend to seek information and/or support despite being concerned about a loved one.

## Key Opportunities for Action to Support Family and Friends

A multi-faceted approach is needed to reduce the barriers that prevent family and friends seeking information and/or support. These include:

1. Ensure family and friends can build their ability to help themselves and those they are concerned about by increasing access to education and information about supporting and talking with people experiencing AOD-related harm.
2. Foster family and friends' desire to access early help and support, particularly among those who are already aware of how this can benefit themselves and/or their loved one.
  - Promote the range of benefits associated with accessing information and support early.
  - Develop strategies to nudge people from knowing why early help-seeking is important to taking action. This includes investing in initiatives to reduce stigma to encourage greater rates of help-seeking by family and friends.
3. Boost family and friends' knowledge of how to access help by reducing barriers such as not knowing where to go, who to talk to and what to ask.
  - Create campaigns and tools to connect family and friends to information and support services, as well as a guide for where/how different questions can be answered.

# Introduction

A major source of support for people experiencing alcohol and other drug harms are their family and friends. Despite this, rates of access to family and friend support is low, and there is an opportunity to increase how often it is sought by those at risk of AOD harms to take pressure off support and treatment services.<sup>2</sup>

This may be because family and friends who are concerned about a loved one's AOD use commonly lack confidence and knowledge about how to provide support.<sup>3,4</sup> In addition, family and friends are often negatively impacted by their loved one's AOD use and related behaviour.<sup>3,5,6</sup>

Connecting family and friends to information and support to build their knowledge, confidence and ability to support their loved one's recovery is crucial in addressing this gap.

Ensuring family and friends have easy access to relevant information and support (either for their loved one, or themselves) is an important first step towards building their support capability and their own resilience.

## Our Research

To better understand how family and friends want and use information and support, the ADF conducts a regular survey.

This report provides insights from our 2023 research into the information needs and help-seeking experiences of family and friends concerned about a loved one's AOD use.

## Aims

- To understand family and friends' concerns – who they are concerned about, their level of concern and how long they have been concerned.
- To identify the knowledge strengths and gaps of family and friends, as well as the information topics they would find most helpful.
- To explore how common help seeking is among family and friends, and how long they wait before seeking information and/or support.
- To examine the barriers that deter family and friends from seeking information and/or support.



# Method

Social research organisation, Kantar Public, conducted an online, nationwide survey of the Alcohol and Drug Foundation’s community and professional audiences (see Table 1 for eligibility criteria). A total of 3,604 people completed the survey between May 4 and June 26, 2023. This survey was assessed as low-risk and eligible for review by the ADF’s internal ethics committee, which provided ethical clearance.

**Table 1.**

## Sample Eligibility

Community Sample	Professional Sample
<p><b>Family or friend:</b> Concerned about a family member or friend’s AOD use, and/or</p> <p><b>Regularly use alcohol:</b> Consume alcohol on at least a monthly basis, and/or</p> <p><b>Regularly use drugs:</b> Use drugs on at least a 3-monthly basis</p>	<p><b>Teachers:</b> Primary and secondary school teachers, and/or</p> <p><b>Researchers:</b> Academic and social researchers, and/or</p> <p><b>Health professionals:</b> Healthcare workers (doctors, allied health, nurses and community health), and/or</p> <p><b>AOD Workers:</b> Work in AOD sector (policy, treatment, prevention and/or health promotion)</p>

The sample comprised two main groups – a community sample and a professional sample (see Table 1). This report provides the results of analysis of the family and friends sample (n= 367), and investigates the knowledge strengths and gaps, as well as the help-seeking patterns of people concerned about a loved one’s AOD use. A demographic breakdown of participants can be found in Table 2.

**Table 2.**

## Sample demographics.

Family and Friends (N= 367)		
<b>Gender</b>	<b>Male</b>	124 (34%)
	<b>Female</b>	238 (65%)
<b>Age</b>	<b>18-25 years</b>	48 (13%)
	<b>26-54 years</b>	141 (38%)
	<b>55+ years</b>	178 (49%)
<b>State</b>	<b>NSW</b>	103 (28%)
	<b>VIC</b>	89 (24%)
	<b>QLD</b>	78 (21%)
	<b>WA</b>	45 (12%)
	<b>SA</b>	37 (10%)
	<b>TAS</b>	7 (2%)
	<b>NT</b>	3 (1%)
	<b>ACT</b>	5 (1%)
	<b>Region</b>	<b>Metro</b>
<b>Regional</b>		111 (30%)

# Key Findings

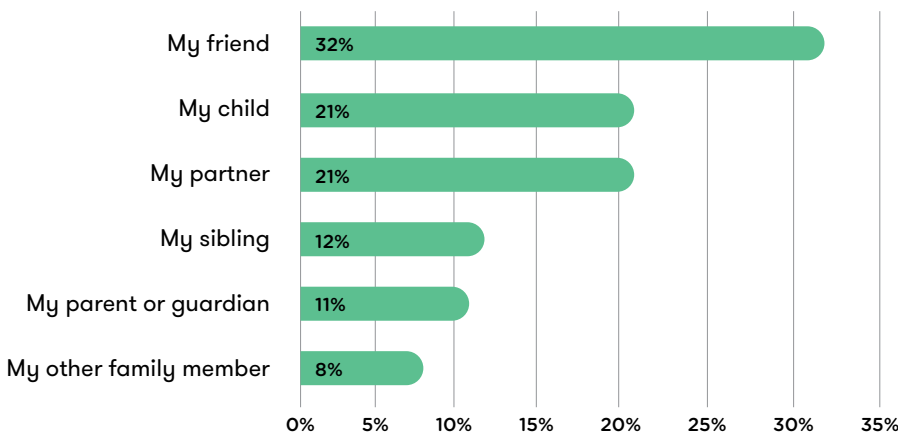
## Key Finding 1:

Participants were more likely to be concerned about a loved one's alcohol use (58%), compared to drug use (17%). A further 25% were concerned about both alcohol and drug use.

Family and friends were predominantly concerned about a friend, partner or child (Figure 1). Women were significantly more likely to be concerned about their partner, compared to male family and friends (26% vs. 13%). Over half were very or extremely concerned about their loved one (Figure 2), and the majority (70%) had been concerned for a year or more (Figure 3).

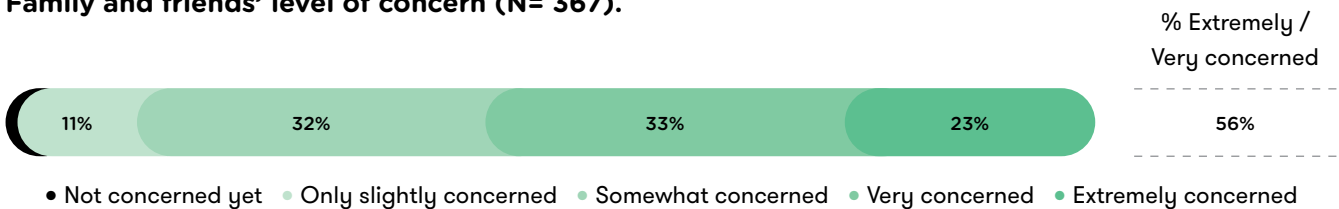
**Figure 1.**

### Who family and friends are concerned about (N= 367).



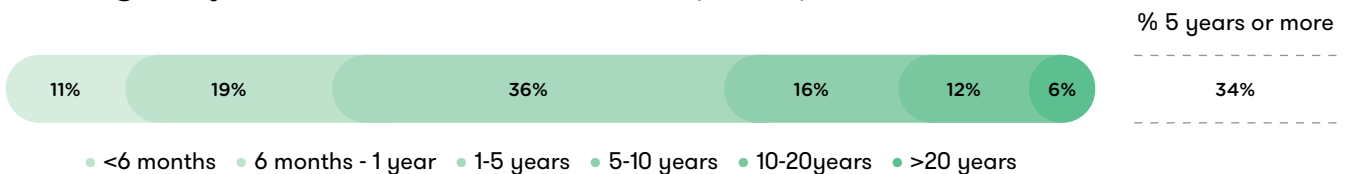
**Figure 2.**

### Family and friends' level of concern (N= 367).



**Figure 3.**

### How long family and friends have been concerned (N= 363).



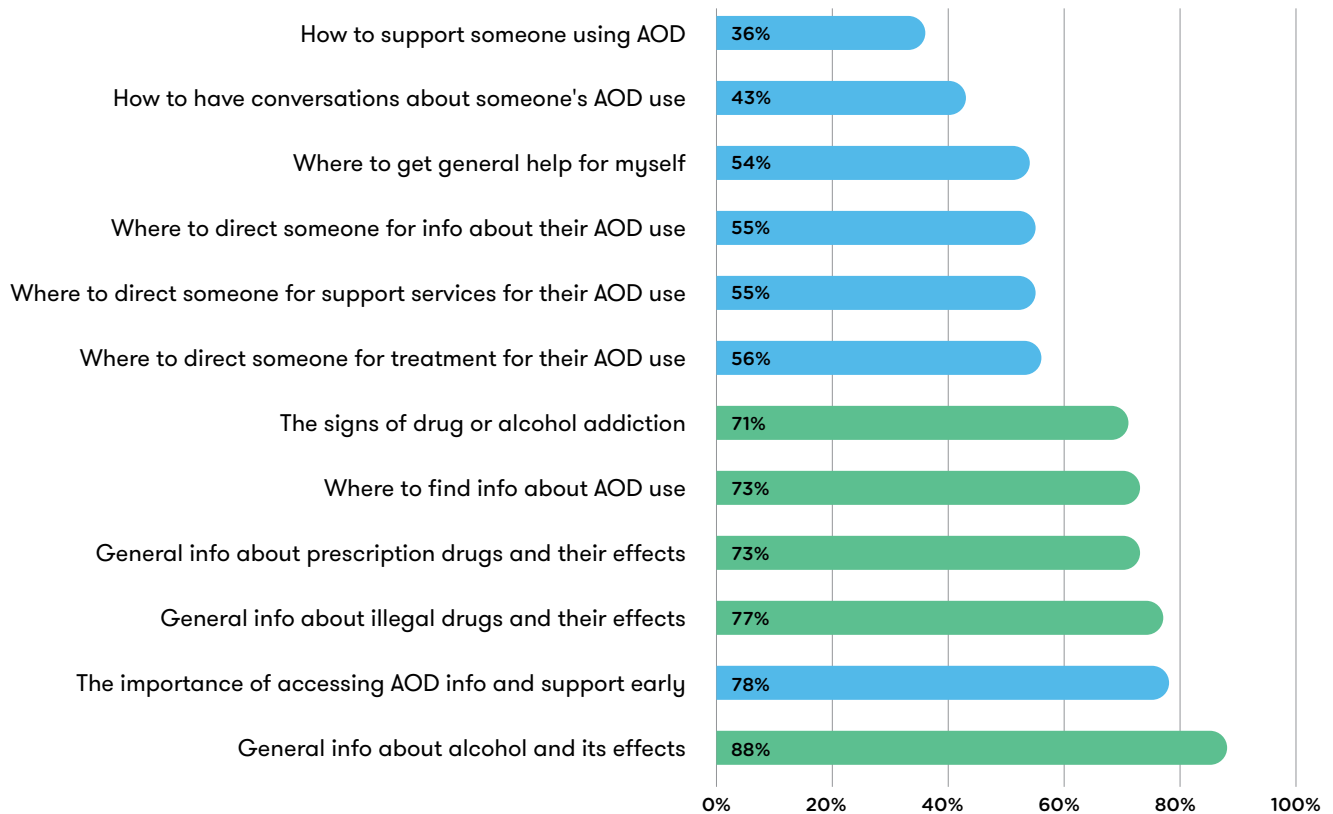
## Key Finding 2:

The majority of family and friends reported that they knew the importance of accessing information and support about AOD use early (Figure 4). However, there were significant knowledge gaps for family and friends, with only half knowing where to direct someone to information, support and/or treatment for their AOD use, or where to get help for themselves.

Furthermore, it was relatively uncommon for family and friends to have knowledge of how to have a conversation or how to support someone who uses AOD. These were the top two topics family and friends would find helpful (Figure 5).

**Figure 4.**

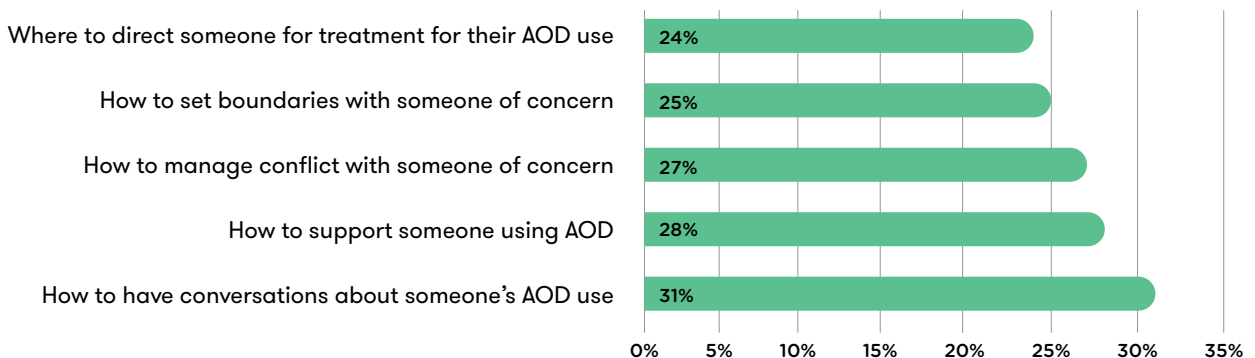
### Family and friends' self-reported knowledge (N= 367).



Note: blue represents topics directly related to a loved one's AOD use. Green represents topics related to AOD use generally.

**Figure 5.**

### Top five information and support topics wanted by family and friends (N= 367).

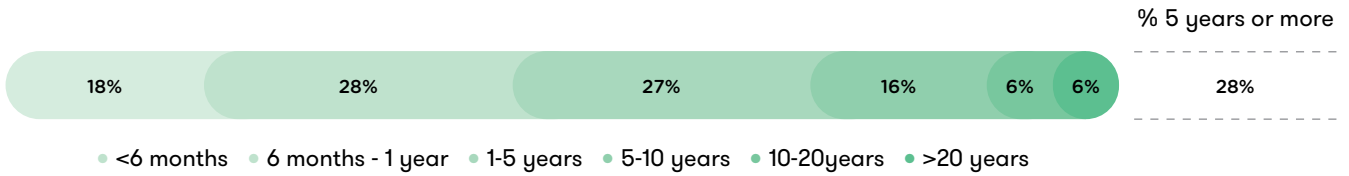


### Key Finding 3:

Less than half (42%) of concerned family and friends had previously sought information and/or support related to their loved one’s AOD use. Many waited at least a year before doing so (Figure 6).

**Figure 6.**

**How long family and friends are waiting before seeking information and/or support (N = 154).**



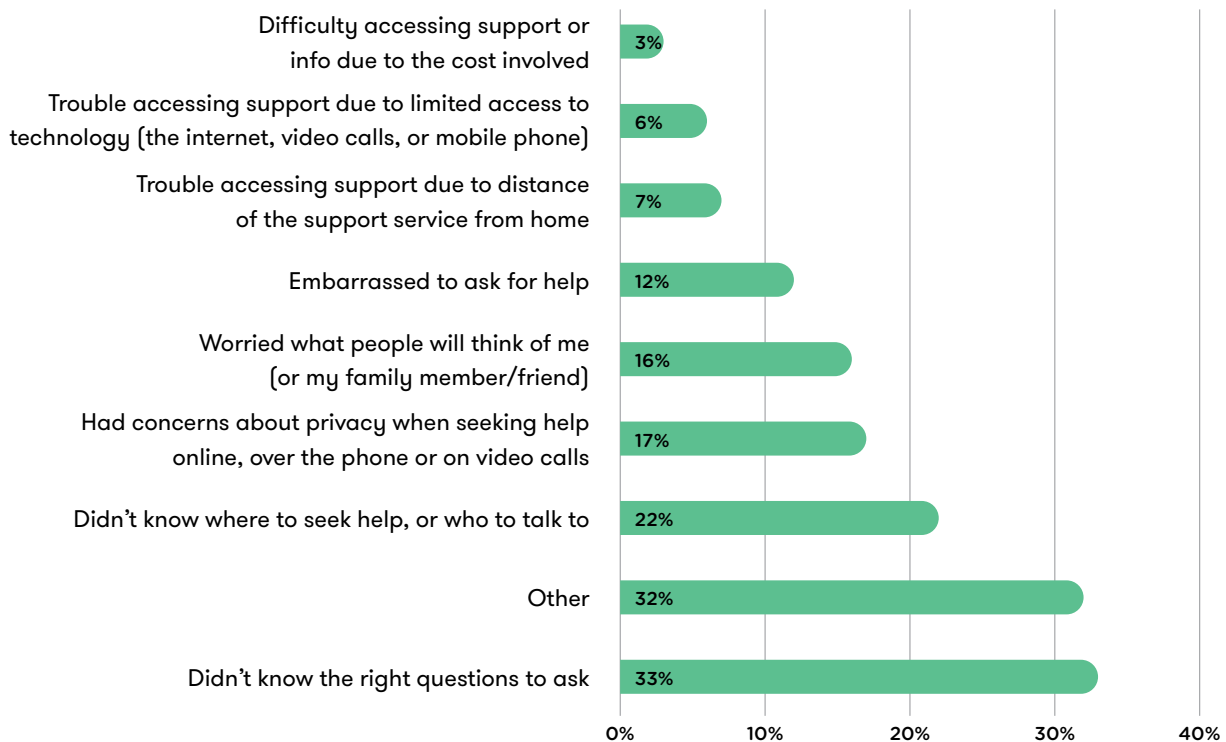
### Key Finding 4:

Only 32% of family and friends who had not sought information and/or support had considered doing so. The main barriers these family and friends faced were:

- not knowing the right questions to ask
- not knowing where to get help/who to talk to
- concerns about privacy when seeking help online, or via phone/video calls (Figure 7).

**Figure 7.**

**Barriers experienced by family and friends who had considered seeking information and/or support (N= 69)**



**Note:** the responses provided under ‘Other’ primarily included: 1) not wanting to upset their loved one / being concerned they would react negatively; 2) believing their loved one does not think their AOD use is a problem / doesn’t want to change their AOD use or help; 3) they did not need information/support (i.e. waiting to see what happens, not overly worried, lives elsewhere); 4) believing it is up to their loved one to act, if they wanted to.

# Limitations

This report provides valuable insights into how family and friends want - and use - AOD information and support.

However, these findings need to be interpreted within the context of the following limitations:

- Knowledge was self-reported. Self-reported knowledge may be prone to over-reporting.
- Results were not split by alcohol versus drug use. It is possible the information needs and help-seeking experiences of family and friends differ between those concerned about a loved one's alcohol use and those concerned about a loved one's drug use.
- For some results, the sample size is small (e.g. barriers experienced by family and friends who had considered seeking information and/or support).





## References:

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