



# Media Information Pack

## About Us

Scottish Families Affected by Alcohol and Drugs (Scottish Families) is a Scottish charity and was set up in 2003 as the Scottish Network for Families Affected by Drugs. We extended our remit to include alcohol in 2013 and became Scottish Families Affected by Alcohol and Drugs.

We were set up by families themselves, who came together to support each other and to create a united voice to raise awareness of the challenges they faced as family members. We are proud of this grassroots history as a supporting and campaigning organisation, created by families for families.

We receive our core funding from the Scottish Government as one of their National Commissioned Organisations (NCOs) – this accounts for around 20% of our income. We are also supported by a range of other government funds, commissioned work, grant funding and fundraising. We are grateful to all of our funders for supporting our work.

## Our Services

We provide a range of services across Scotland:

- Helpline
- Telehealth
- Bereavement Support Service
- Family Support Services
- Workforce Training and Development Support

### **Helpline**

Our free confidential helpline provides listening support and advice to anyone concerned about someone else's alcohol or drug use, including families and practitioners. Our helpline is led by staff and is supported by volunteers.

08080101011

[helpline@sfad.org.uk](mailto:helpline@sfad.org.uk)

webchat is available on our website [www.sfad.org.uk](http://www.sfad.org.uk)

Available Monday-Friday between 9am and 11pm and we run a weekend call-back service.

### **Telehealth**

Our Telehealth service provides a series of free one-to-one sessions over the phone, video chat or instant messaging over 6-8 weeks. Telehealth is available across Scotland.

### **Bereavement Support Service**

Our bereavement service offers listening support and advice to family members who have lost a loved one who used drugs. The service also has the opportunity for family members to

be referred to a professional counsellor in their own local area. The service is free, offers up to six individual counselling sessions and is available across Scotland.

## **Family Support Services**

We are commissioned to deliver local family support services by a number of Alcohol and Drug Partnerships. This includes the provision of one-to-one support, family support groups and collaboration with other local services. We are currently providing services in East Dunbartonshire and Forth Valley.

## **Workforce Training and Development Support**

We deliver training to organisations across Scotland, including alcohol and drug services and the wider workforce. This support is tailored to meet each organisation's needs, including short presentations or briefings.

Our other work includes working with communities, policy and campaigns, and fundraising.

**For full information on our services visit our website [www.sfad.org.uk](http://www.sfad.org.uk)**

## **Our outcomes**

Our plan for 2017-20 is built on a simple framework of five outcomes. These are the results we want to achieve in 2017-20. Families are:

**Supported  
Included  
Recognised  
Connected to Communities  
A Movement for Change**

Full information on our outcomes can be read in our strategic plan:

<https://www.sfad.org.uk/content/uploads/2018/03/Strategic-Plan-2017-20.pdf>

## **Statistics**

These statistics are sourced from our Impact Report 2016/17.

In 2016/17:

- We answered **629** helpline calls
- We supported **72** family members through Telehealth
- We had **109** new referrals to our Forth Valley support groups
- And **60** new referrals to our East Dunbartonshire support groups
- We helped **60** family members access counselling in our bereavement service
- We trained **732** workers to develop more family inclusive practice
- We worked with **7** localities to start conversations with communities on their role in recovery

## Our CEO

**Justina Murray**

**CEO**



Justina Murray is CEO of Scottish Families Affected by Alcohol and Drugs, a role she took up in June 2017. This followed seven years as Chief Officer of South West Scotland Community Justice Authority, a devolved public body tasked with working in partnership to reduce reoffending. Prior to this Justina was the Coordinator of North Ayrshire Community Planning Partnership, following on from roles in public policy, equal employment opportunities and research in Scotland and New Zealand.

She has a PhD in social policy from the University of Glasgow, based on an exploratory study of models of empowerment in eight Scottish community development projects.

Justina was brought up in the Scottish Borders, and following stints in Glasgow and Auckland, she now lives with her family on the North Ayrshire coast.

## What topics can we discuss with the media?

- Families affected by alcohol and drugs
- Family support
- Alcohol-related deaths
- Drug-related deaths
- Minimum unit pricing

We are regularly asked to comment on drug and alcohol policies, new drug trends, various alcohol-related illnesses, and a range of other topics concerning alcohol and drugs and service users/people in recovery. We work directly with family members and are therefore not best suited to answer questions on these topics.

The following organisations should be contacted instead:

### **Alcohol Focus Scotland**

0141 572 6700

[enquiries@alcohol-focus-scotland.org.uk](mailto:enquiries@alcohol-focus-scotland.org.uk)

### **Scottish Drugs Forum**

Contact: Austin Smith

Email: [Austin@sdf.org.uk](mailto:Austin@sdf.org.uk)

0141 221 1175

## **Scottish Recovery Consortium**

Contact: Kuladharini

0141 559 6933

### Family Stories

#### Scottish Families Support Service

‘This family member contacted the service initially seeking support for her 17-year-old daughter who had been using heroin for two years. Her daughter had recently had two non-fatal overdoses in short succession. She did not feel able to cope with her daughter’s drug taking and her behaviour. She was also concerned for her other three children who she felt were impacted greatly by their sister’s drug misuse. She felt she was supporting her in the wrong ways – providing her with money, buying her new clothes, etc.

‘The family member was aware she had no time of her own and felt she had become isolated from her friends. She had been off work for 6 months due to the stress of supporting her daughter.

‘Through emotional support and working through the CRAFT programme with Scottish Families, the family member became aware of alternative ways to support her daughter and the importance of allowing her daughter to experience the natural consequences of her decisions and actions. She felt communication improved between herself and her daughter due to her using more positive communication and avoiding arguments. She began feeling more confident with setting boundaries and sticking to these.

‘She also found dedicating more time to her other children improved their moods and gave her some ‘respite’ from her daughter. Through regular attendance at a family support group, she felt she reconnected with people and found it helpful to meet with other people going through similar things.

‘The family member returned to work 2 months after accessing support as she felt more able to cope and understand the importance of not always being available for her daughter.

‘Her daughter ceased her heroin use 4 months after she accessed support and while her other behavioural issues are still impacting the family, the family member felt more able to cope with this.’

#### For years I thought nobody knew my daughter was using drugs

‘For years I thought nobody knew my daughter was using drugs. She was addicted to heroin for 4 years before I found out and I was doing a great job in keeping her safe, how would other people know? Little did I know that everybody in our village knew.

‘When Karen started to use Valium things started to change. It was evident to the world that there was something wrong. Karen had a difficult upbringing.

'I will always see her as my daughter but she is in fact adopted. She had been neglected as a child and taken into care. Both her parents were in and out of prison for all sorts and she was a very quiet child. Looking back I guess she has always been hurting but putting a face on to the world that she was ok. I'm not making excuses for her behaviour, yes she has committed crimes to fund her addiction and yes she needs to pay. What people don't understand is she isn't well. Not one single human being would choose to put a needle in their arm and destroy their life if they weren't trying to escape from something. Whenever we discussed drugs it would end in a fight.

'Karen did not live with me but I would've preferred if she did. If she lived with me I could keep an eye on her and make sure she was safe. I wasn't coping, heart palpitations, sleepless nights, weight loss and constant headaches. I went to my GP who suggested that I see the local family support service. I didn't think it would help but what else could I do? I couldn't live the way I was or I would be dead before Karen.

'I arranged to go along to the local group but was just going to observe and see what was happening. When I arrived I received such a welcome from so many people, who just like me, had a loved one in the midst of chaos. For once I felt accepted and normal. Society shuns families of drug users as if we are a lesser class and for once I was seen as equal and accepted. I received ongoing support from the group for two years.

'I learned a lot about drugs that I never knew. I received training in Naloxone in case Karen ever overdosed in my company (thankfully she has never overdosed, well not to my knowledge). I regained some life back, made friends, learned to look after myself more and put myself first. My health improved as did my relationship with Karen. I was more informed about drugs, could tell when things were 'not quite right' and we could talk about it. We regularly discussed treatment without getting into a shouting match and Karen knew I was there to support when she was ready.

'Karen lost her best friend to a heroin overdose. She was in the house when she was found.

'I think this was the push that Karen needed. She told me she didn't want to die and we discussed her options. We made an appointment to go to the local drugs hub and see what her options were. Karen was placed on a methadone prescription and at first she was topping up as she didn't feel it helped her. Her prescription was raised until she felt she was coping. With the support of the local recovery community she made friends, got involved in local groups and activities to keep her busy.

'To cut a long story short, Karen has been on methadone for a while now and is stable, not using other drugs and on a reduction plan to manage her off methadone. She works part time in a local shop and volunteers three days a week in the local recovery community. For once I have seen a personality in my daughter that I never knew was there. It's good to hear her laugh and she has a wicked sense of humour.

'It's not the end of the road for us as a family but with the ongoing support of the family support group and the local recovery community we will get there.

'We wouldn't have gotten this far without them all and I don't think Karen would be here today. If I can give one piece of advice to anybody out there who is concerned about a family

member's drug or alcohol use is get help. Helping yourself keeps you well and it really does make a difference to your whole family.'

**We are regularly asked by journalists/media if we know any family members who would be interested in an interview on various topics mostly revolving around the death of a loved one who used substances. We are also frequently asked do we know a service user or a person in recovery.**

**Due to our confidentiality with the family members we support, we do not share contact details with the media. If we are asked do we know a family member, we may or may not contact a family member ourselves and ask if they are interested in speaking with the media.**

**For the majority of the time, we will not let a family member speak to the media alone. If a family member agrees to speak with the media a member of Scottish Families will be present.**

**Contact Rebecca Bradley [rebecca@sfad.org.uk](mailto:rebecca@sfad.org.uk) for further information.**

### Stock Images

We have full-size high resolution versions of the below stock images. Contact [rebecca@sfad.org.uk](mailto:rebecca@sfad.org.uk) for a copy.



## Contact Details

### **Working hours:**

Rebecca Bradley, Communications Officer 0141 465 7523 [rebecca@sfad.org.uk](mailto:rebecca@sfad.org.uk)

Justina Murray, CEO 0141 465 7550 [ceo@sfad.org.uk](mailto:ceo@sfad.org.uk)

### **Out of hours:**

Justina Murray, CEO 07904280669

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**Telephone number:** 0141 465 7523

**General enquiries:** [info@sfad.org.uk](mailto:info@sfad.org.uk)

**Website:** [www.sfad.org.uk](http://www.sfad.org.uk)

### **Social Media:**

Twitter: @ScotFamADrugs

Facebook: @ScottishFamiliesAffectedByDrugs

Instagram: @ScotFamADrugs

## Logo

