People Who Use Drugs Need Access to Treatment, But They Also Need Love and Support

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Love is a fundamental human need—and many people will go to great lengths to avoid losing love and support from others. I first saw the importance of social support on substance use recovery when I was a doctoral student. Working on a study aiming to improve the health outcomes of women involved in the criminal legal system in St Louis, I was shocked at how many basic needs the women were lacking. In that study, cocaine was the primary drug of choice, and thus, substance use treatment consisted of self-help groups and participation in the drug court system (Jones et al., 2019a). The vast majority of the women did not have a place of their own to live. Stable employment was rare.

Sex trading for food, clothing, or a place to stay was common (Jones et al., 2019b). Experiencing violence was prevalent (Cottler et al., 2014). For women with children, childcare was a major barrier to participating in drug court requirements. The drug court system had very few resources to assist these women with basic necessities, and many women were too overwhelmed with surviving the chaos of their lives to engage in drug treatment.

Simply put, a judge can order you into drug treatment and may even provide a list of available options. However, the judge likely cannot provide transportation, convince your employer to adjust your work hours, provide reliable child care, arrange safe housing away from other people who use drugs, or pay for therapy. Most importantly, the judge is completely unable to conjure up the support and love you will need to navigate life without drugs.

The human experience compels us to be interdependent on others. Family members and other social networks can serve as integral and healthy aspects of recovery by providing love and social support. Yet often these resources are lacking for the people who need them the most. As such, a deeper delve into the social networks of individuals with substance use disorders often reveals breakdowns in their family of origin and social networks that underlie their substance use and/or exacerbate their use.

It is not uncommon for individuals who have substance use disorders to have parents and grandparents, along with siblings, who use drugs and alcohol. The availability and normalization of drug use and associated consequences can influence the next generation's drug use, creating a generational pattern. Intergenerational substance use also influences nonfamilial social networks in a practical way. Individuals usually cluster by behavioral patterns—people who use drugs tend to associate with other people who use drugs. The behaviors of family and peers can normalize drug use as summed up in one woman's statement, "Where I grew up, everybody used, everybody's family used. My mom was an 'addict', so she hung around other 'addicts'... Everybody that I was around drank or did drugs of some kind, so that's just all we ever seen and knew. Of course, we just thought that's just like what everybody does. Everybody's parents pass out and stay asleep for days or weeks at a time. Everybody's dad drinks and drives and beats their mom up or their dad. That's just what I thought was normal" (Jones et al., 2024).

Families and peers not only influence initiation and perceptions of drug use, but they also influence recovery attempts. If others in the family use substances, one family member's attempts to abstain from drugs can mean a loss of family to avoid family members' drug use. These familial complexities implore researchers and clinicians to reframe our approach to understanding recovery and address the potential losses individuals face by choosing a drug-free life. In some cases, people lose their family, partners, and social support; in other cases, people

maintain recovery after a lengthy addiction battle, only to realize that the strain caused by their addiction with their loved ones is irreparable. The distress, grief, and guilt associated with relationship strain and an overall lack of support can fuel substance use and reduce the likelihood of recovery.

Clinicians and researchers should consider the social losses people may face in recovery. But equally important, they need to create opportunities for strong, healthy connections that may buffer the impact of these potentially significant losses. Research has shown the immense importance of social support from peers with lived experience in recovery, those who have navigated through similar challenges and losses, and can relate at levels that others who have not navigated addiction and recovery cannot. Some states, such as Pennsylvania and Maryland, have developed a program that certifies people in long-term recovery from drug and alcohol use for a career as a Certified Recovery Specialist (CRS). Adopting the CRS program and investing in full-time CRS to serve as intensive case management and social support, along with structured recovery-focused support groups, may facilitate better outcomes for people lacking family and social support.

In families where multiple generations use drugs and alcohol, a family member who maintains long-term recovery from drug use can support other members to strive toward recovery. This is particularly true of women who use drugs and have children—their recovery immediately benefits themselves and their dependent kids who have a mother with more capacity to care for them now in recovery. In addition, when children witness the growing resilience of their parents in treatment, they can see the potential for new beginnings. And, having a friend in recovery can serve as a healthy resource and promote treatment and harm reduction strategies among people who use drugs. Thus, there is the potential for families to experience intergenerational healing and for themes of recovery to permeate social support systems tied together by drug use.

Substance use and addiction have led to child welfare involvement, legal costs, incarceration, lost lives, and a host of other societal costs. And while we often resolve, correctly, to expand substance use treatment; we also need a strong resolve to establish opportunities and systems of healthy material and social support for people who use drugs.

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