

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Family-Focused Practices in Addictions: A Scoping Review Protocol
AUTHORS	Kourgiantakis, Toula; Ashcroft, Rachelle

VERSION 1 – REVIEW

REVIEWER	Dr Anil Rane Institute of Psychiatry & Human Behaviour, Goa, India
REVIEW RETURNED	25-Sep-2017

GENERAL COMMENTS	'Key Findings' in charting of data may need further elaboration.
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REVIEWER	Katherine van Wormer University of Northern Iowa USA
REVIEW RETURNED	25-Sep-2017

GENERAL COMMENTS	Families suffer considerably when one member gambles the family income away. Often there is little understanding that this behavior may be an addiction. Research in this area is important as treatment is in its infancy for gambling disorders.
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REVIEWER	Gallus Bischof University of Luebeck Germany
REVIEW RETURNED	06-Oct-2017

GENERAL COMMENTS	The authors aim to address an important topic with their planned scoping review and appropriately describe their planned procedures. However, as long as no data are presented, this appears to be more like a grant application than a paper in its own right. I don't see a compelling reason to publish the study protocol of a scoping review before the review process is completed. Furthermore, the literature appears partly out-dated and I missed up-to-date references quantifying health costs of family members (e.g., Ray et al 2009, Dawson et al 2007, Weisner et al 2010) or evidence-based interventions such as CRA/FT, multidimensional family therapy or the 5-step method.
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REVIEWER	Ed Day King's College London Birmingham & Solihull Mental Health NHS Foundation Trust
REVIEW RETURNED	27-Oct-2017

GENERAL COMMENTS	<p>This is an important and relevant topic.</p> <p>The authors summarise the background succinctly and clearly, and cite relevant literature.</p> <p>The methodology used is appropriate and reasonably well described. I have a few questions: Why choose 2000 onwards? Why choose the particular databases mentioned and not others? I would like more detail on the 'narrative synthesis' methods proposed, as it is unclear as it stands</p> <p>I am not clear if the review covers all three of the categories of family intervention referred to in the introduction. Number 2 (involving family members in the treatment of the individual with the addiction) is clearly included, but I am not sure that number 1 (working with family members to promote entry and engagement in the treatment of the individual with the addiction) is, despite reference to the low percentage of individuals who enter treatment. Area 3 (providing services to family members in their own right) appears to be excluded. If so, why?</p> <p>My main concern is why does this need to be done? There are existing reviews of treatment interventions in this area that the authors cite. The authors say they wish to highlight gaps in service provision, but does this mean that the authors have pre-conceived theoretical ideas about what should be there? There is already quite a lot written in this area, and although the authors make a virtue of the addition of studies focusing on gambling I am not sure that this will add much.</p> <p>Will the findings be used to design future research studies, or is it for policy makers? Or clinicians? Although it doesn't appear to be aimed at family members themselves, it would probably benefit from service user/care involvement in the process (as described by Arksey)</p> <p>Although there is a lot of literature in this area, there is very little about how it is implemented in practice. Copello and Orford's editorial from 2002 (ref 17) asks why services don't use the effective interventions that are available, but not much has changed in practice since then. Would it be useful to focus on barriers to implementation rather than focusing on the existing evidence base?</p>
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VERSION 1 – AUTHOR RESPONSE

REVIEWER: Dr Anil Rane, Institute of Psychiatry & Human Behaviour, Goa, India

GENERAL COMMENTS/QUESTIONS: 'Key Findings' in charting of data may need further elaboration.

RESPONSE: The following has been added to the methods section:

“For key findings, we are specifically searching for a study’s results on family involvement in addiction treatment.”

REVIEWER: Katherine Van Wormer, University of Northern Iowa, USA

GENERAL COMMENTS/QUESTIONS: Families suffer considerably when one member gambles the family income away. Often there is little understanding that this behavior may be an addiction. Research in this area is important as treatment is in its infancy for gambling disorders.

REVIEWER: Gallus Bischof, University of Luebeck, Germany

GENERAL COMMENTS/QUESTIONS: The authors aim to address an important topic with their planned scoping review and appropriately describe their planned procedures. However, as long as no data are presented, this appears to be more like a grant application than a paper in it’s own right. I don’t see a compelling reason to publish the study protocol of a scoping review before the review process is completed. Furthermore, the literature appears partly out-dated and i missed up-to-date references quantifying health costs of family members (e.g., Ray et al 2009, Dawson et al 2007, Weisner et al 2010) or evidence-based interventions such as CRA/FT, multidimensional family therapy or the 5-step method.

RESPONSE: The health costs were identified and the Ray et al (2009) reference was included in the original protocol, but the Weisner et al 2010 reference has been added to the background section. The CRAFT and 5-step method have been added to the background section, but the MDFT has not been added as we are focusing on adult addiction treatment.

The following statements from the background section have the Ray et al and Weisner et al reference and highlight the costs of addiction:

“Substance use disorders and problem gambling are linked with multifarious consequences including health concerns,⁴ financial difficulties...^{5, 6} The addiction of a family member has many adverse effects for families such as high levels of distress, health problems,^{5, 13} family conflict, domestic violence, child maltreatment,¹² and financial precarity.^{5, 6, 12} Studies also report that the health costs for family members coping with the addiction of a significant other are considerably higher than family members who do not have a family member with an addiction.^{5, 6}”

REVIEWER: Ed Day, King's College London, Birmingham & Solihull Mental Health

GENERAL COMMENTS/QUESTIONS: This is an important and relevant topic. The authors summarise the background succinctly and clearly, and cite relevant literature. The methodology used is appropriate and reasonably well described. I have a few questions: Why choose 2000 onwards?

RESPONSE: The following has been added to the methods section:

“The search will cover 2000 to present and this limited date range was selected as we are interested in recent addiction treatment approaches involving families in order for this to be most relevant for current treatment programs.”

GENERAL COMMENTS/QUESTIONS: Why choose the particular databases mentioned and not others?

RESPONSE: The following has been added to the methods section:

“The researchers selected a cross-section of databases that include the range of literature spanning health care, psychology, psychiatry, social work, and other social sciences. An initial scan of several

databases demonstrated that the databases selected were more likely to identify results that are related to the focus of this scoping review. Other databases were not included in this study because the initial scan resulted in thousands of results that were not relevant to the scope of this study.”

GENERAL COMMENTS/QUESTIONS: I would like more detail on the ‘narrative synthesis’ methods proposed, as it is unclear as it stands

RESPONSE: The researchers will only be using a thematic analysis approach. The following has been added to the methods section:

"Our data will be charted and sorted according to key themes using a qualitative thematic analysis approach.^{39, 40} This is a commonly used method for scoping reviews and it involves identifying themes across the literature and synthesising using summary tables with thematic headings.^{39, 40}"

GENERAL COMMENTS/QUESTIONS: I am not clear if the review covers all three of the categories of family intervention referred to in the introduction. Number 2 (involving family members in the treatment of the individual with the addiction) is clearly included, but I am not sure that number 1 (working with family members to promote entry and engagement in the treatment of the individual with the addiction) is, despite reference to the low percentage of individuals who enter treatment. Area 3 (providing services to family members in their own right) appears to be excluded. If so, why?

RESPONSE: The following statement has been added to the background section:

“This scoping review will focus on all three forms of family involvement in substance use and gambling treatment to elucidate our understanding of a range of programs that promote family-focused treatment.”

GENERAL COMMENTS/QUESTIONS: My main concern is why does this need to be done? There are existing reviews of treatment interventions in this area that the authors cite. The authors say they wish to highlight gaps in service provision, but does this mean that the authors have pre-conceived theoretical ideas about what should be there? There is already quite a lot written in this area, and although the authors make a virtue of the addition of studies focusing on gambling I am not sure that this will add much.

RESPONSE: The following has been added to the background section:

“Despite the fact that there has been some research (notably in the first two categories), this is still limited even though the benefits of family involvement and the adverse effects of addictions on families have been documented. In light of the low rates of treatment seeking and high rates of attrition from treatment for individuals with addictions, as well as the pervasive adverse effects of addictions on families, it is critical that family-focused services are available and accessible for all families. The robust research in mental health has demonstrated that the “Big Three” (psychoeducation, support, and coping skills) is an evidence-based practice.³² The SSCS model has similar tenets and practices, but requires more research and implementation in policy and practice. Researchers have attributed this neglect to “a consequence of the lack of a family orientation in professional training and practice, plus the existence of a number of models of family functioning that cast family members in a negative light.” ³³, p. 22 To our knowledge there have not been any reviews on family involvement in both substance use and problem gambling treatment for adults.³⁴ Disordered gambling is the only behavioural addiction in the DSM-5 and it is classified with substance use disorders due to their similarities in symptomatology.³⁵ This scoping review will focus on all three forms of family involvement in substance use and gambling treatment to elucidate our understanding of a range of programs that promote family-focused treatment. It will also identify any gaps in service provisions, as well as barriers to implementation of family-focused practices that have been identified in the literature.”

GENERAL COMMENTS/QUESTIONS: Will the findings be used to design future research studies, or is it for policy makers? Or clinicians? Although it doesn't appear to be aimed at family members themselves, it would probably benefit from service user/care involvement in the process (as described by Arksey)

RESPONSE: The following has been added to the background section:

"There are currently no clearly identified best practices and this scoping review can be used by both policy makers and clinical settings to provide best practices in family-focused interventions."

GENERAL COMMENTS/QUESTIONS: Although there is a lot of literature in this area, there is very little about how it is implemented in practice. Copello and Orford's editorial from 2002 (ref 17) asks why services don't use the effective interventions that are available, but not much has changed in practice since then. Would it be useful to focus on barriers to implementation rather than focusing on the existing evidence base?

RESPONSE: The following has been added to the background section:

"This scoping review will focus on all three forms of family involvement in substance use and gambling treatment to elucidate our understanding of a range of programs that promote family-focused treatment. It will also identify any gaps in service provisions, as well as barriers to implementation of family-focused practices that have been identified in the literature."

VERSION 2 – REVIEW

REVIEWER	Gallus Bischof University of Luebeck Dpt. of Psychiatry Germany
REVIEW RETURNED	07-Dec-2017
GENERAL COMMENTS	The paper has been significantly improved and the references have been extended and updated. All the reviewer's concerns that can be addressed within the revision of a study protocol have been adequately handled by the authors.