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New model of couple counselling helps with addictions

The demand for mental health services, including addiction treatment, spiked during the COVID-19 pandemic as people faced multiple stressors which have been linked to worsening mental health, an increase in substance use and couple conflict.

Given the increase in demand for services for addiction with the opioid crisis and the COVID fallout, Dr. Bonnie Lee, a University of Lethbridge professor in the Faculty of Health Sciences' Addictions Counselling Program, with her development of an innovative therapy model focusing on improving couple relationships is especially timely. Congruence Couple Therapy (CCT) has shown transformative effects in clinical settings with clients addicted to gambling and/or alcohol. The Couples Counselling team and program in Addiction Services Edmonton (Alberta Health Services) where CCT is used has been shortlisted for a Health Quality Council of Alberta 2023 Patient Experience Award. The awards recognize initiatives that improve health-care access and services. Recipients will be announced next spring.



“There is a long tradition of dealing with addiction as an individual problem that impacts family members,” says Lee. “Treatment typically focuses on that individual as the principal and identified patient. This Congruence Couple Therapy (CCT) model flipped a light switch from having the spotlight on the lone individual to making visible the larger, interactive relational context that contributes to addiction.”

Many factors contribute to the development of an addiction. Adverse childhood experiences (ACEs), which include emotional, physical and sexual abuse or neglect, can lead an individual to repeat dysfunctional patterns learned in childhood in their current relationship. These patterns produce chronic stress that can predispose an individual to addictive behaviours. CCT is unique in that it is integrative and brings to light past dysfunctional communication, coping and perceptions that are played out in close relationships in the present.

“What you do in the present is linked to what you learned in the past,” says Lee.

Another unique facet of CCT is that both partners are seen together as part of the recovery process, while the traditional treatment approach for addiction is for each partner to receive individual recovery supports.

CCT was used in a randomized trial at two outpatient addiction clinics in Alberta Health Services from 2016 to 2018. Counsellors first received intensive training in CCT and then participated in a randomized trial where some clients received CCT and others received treatment as usual. The majority of clients in the trial, 95 per cent, showed alcohol use disorder, with five per cent having a gambling disorder. For some clients, additional mental health concerns, such as depression, were involved.

“In CCT, gambling and alcohol use are not viewed as the primary problem in treatment, but as a symptom of an underlying system dysfunction,” says Lee. “The consequences of adverse childhood experiences are most exposed in intimate relationships, making it a prime site of intervention.”

The results of the trials showed CCT was very well-received by both clients and counsellors. Feedback from clients who received CCT mentioned their increased awareness and greater understanding of themselves, their addictions, their partners, family of origin and emotions. Clients also learned to express their feelings, needs and requests, with significantly improved couple adjustment. CCT reduced symptoms of alcohol use and gambling, as well as accompanying mental health issues such as depression, post-traumatic stress and reduced life stress. As well, the treatment-as-usual individual approach significantly reduced symptoms of alcohol and substance use and life stress, but other outcomes did not show significant improvement. Further research is needed to confirm these promising findings.

The impressive client results experienced by addiction counsellors using CCT led a counselling team to adopt the innovative model of therapy in their routine service:

“Prior to involvement with the CCT study, Addiction Services Edmonton (ASE) had separate programming for addiction clients and their partners, but as a result of the outstanding outcomes we have had with Dr. Lee's model, as well as the evidence based on Dr. Lee's research, we have continued to offer couples counselling as a core routine service as it is aligned with the goal of family centered care. Offering couples counselling has enhanced treatment plans for addicted clients and their partners, and the healthy waitlist for this service speaks to the overall effectiveness and transformative quality of this work, now increasingly recognized by other staff.”

Lee hopes to see the offering of a four-course graduate certificate program in couple and family counselling at the University of Lethbridge in the near future.

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