

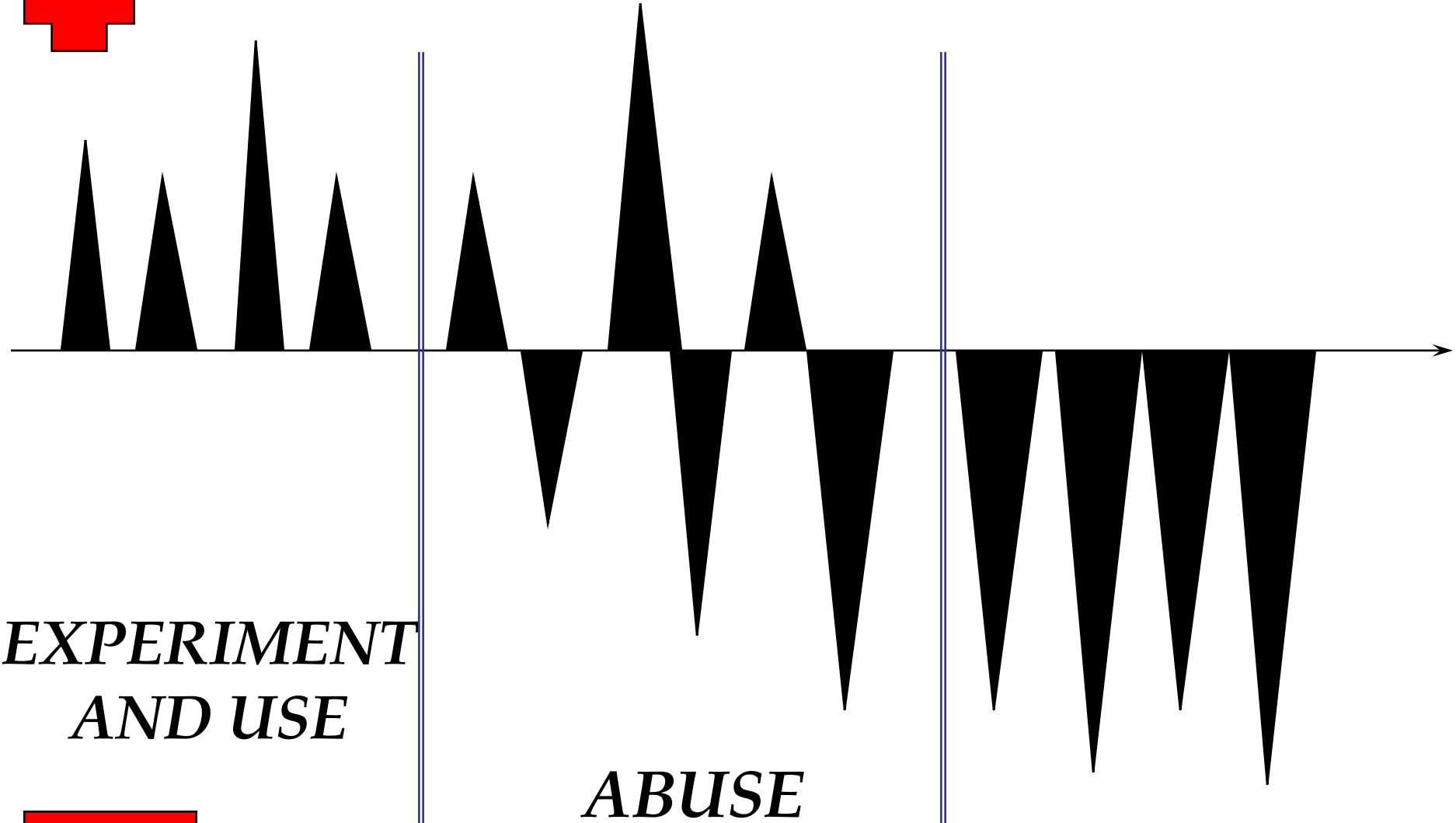
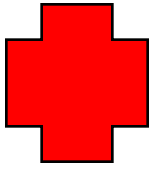
**Module 2**

**Understanding Substance Use  
Disorders, Treatment and Recovery**

# Why People Use Alcohol and Drugs

- Behavioral Factors
- Social Factors
- Environmental Factors
- Risk Factors vs. Protective Factors
- Biological Risk and Protective Factors
- Unique Combinations

# *SPECTRUM OF ADDICTION*



*EXPERIMENT  
AND USE*

*ABUSE*

*DEPENDENCE*



# Physical and Psychological Effects of Substance Use

- Alcohol
- Methamphetamine
- Cocaine
- Hallucinogens
- Marijuana

# Alcoholism and Alcohol Abuse - 1

- Key questions:
  - “How is the drinking affecting the parent’s ability to make sound judgments regarding the welfare of the child?”
  - “What behaviors are resulting or have resulted from the parent’s alcohol use that may put the child at risk?”

# Alcoholism and Alcohol Abuse - 2

- How much is too much?
  - Women: >7 drinks per week or 3 drinks at a time
  - Men: >14 drinks per week, or 4 drinks at a time
- Alcohol dependence or alcoholism symptoms:
  - Craving
  - Loss of control
  - Physical dependence
  - Tolerance

# Criteria for Substance Abuse

One or more of the following (within 12-months):

- Recurrent substance use that results in a failure to fulfill work, school, or home obligations;
- Recurrent substance use that is physically hazardous;
- Recurrent substance-related legal problems;
- Continued substance use despite problems caused or exacerbated by the use of the substance.

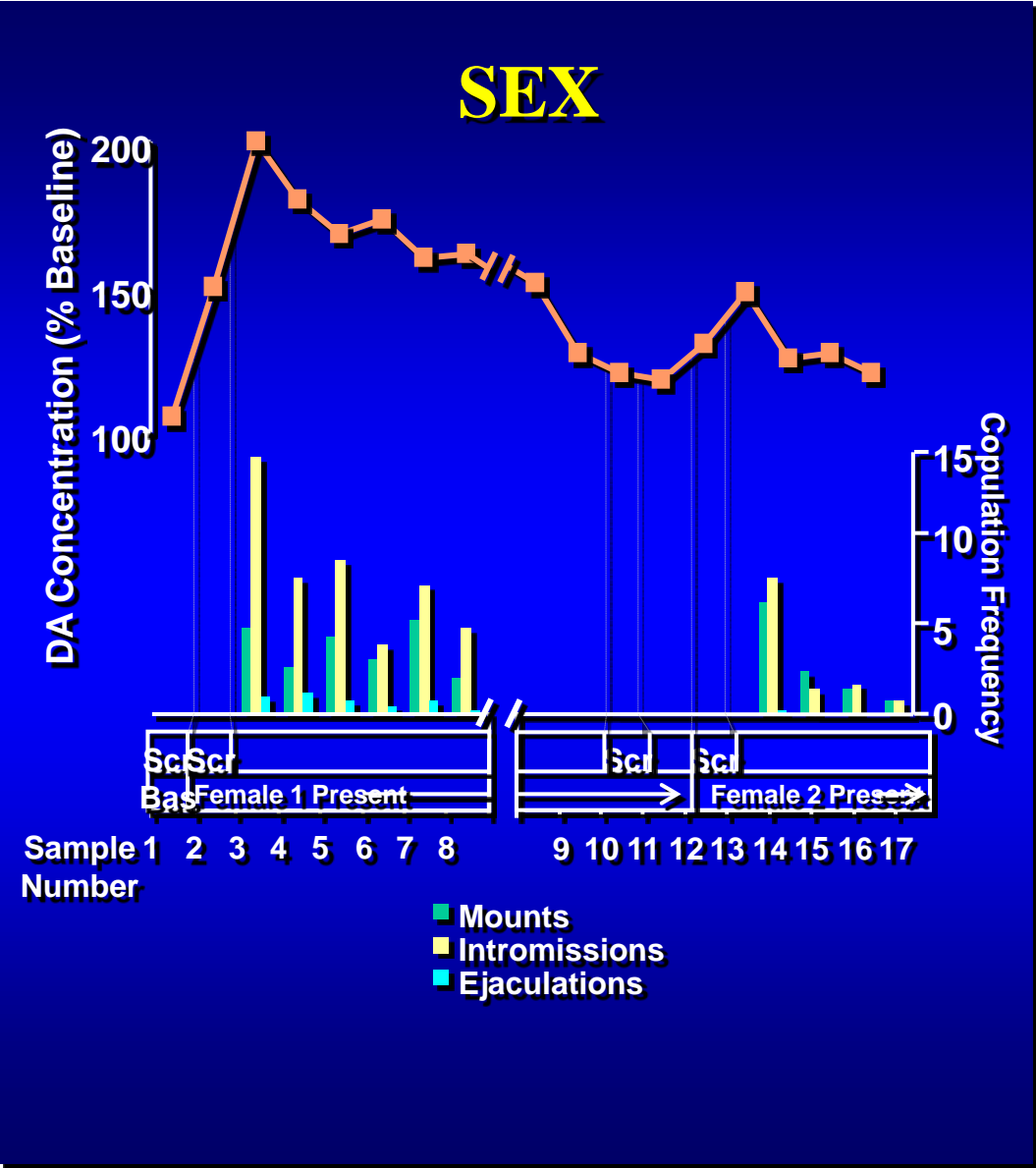
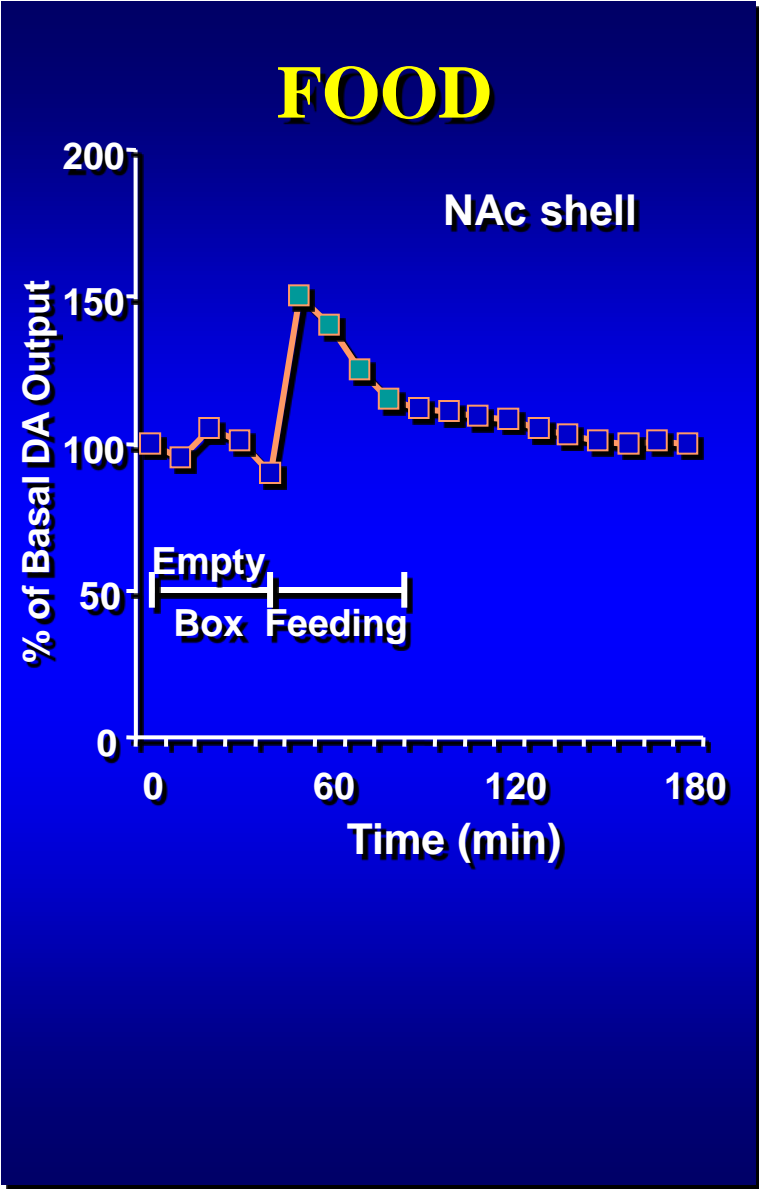
# Criteria for Substance Dependence

Three or more of the following (within 12 months):

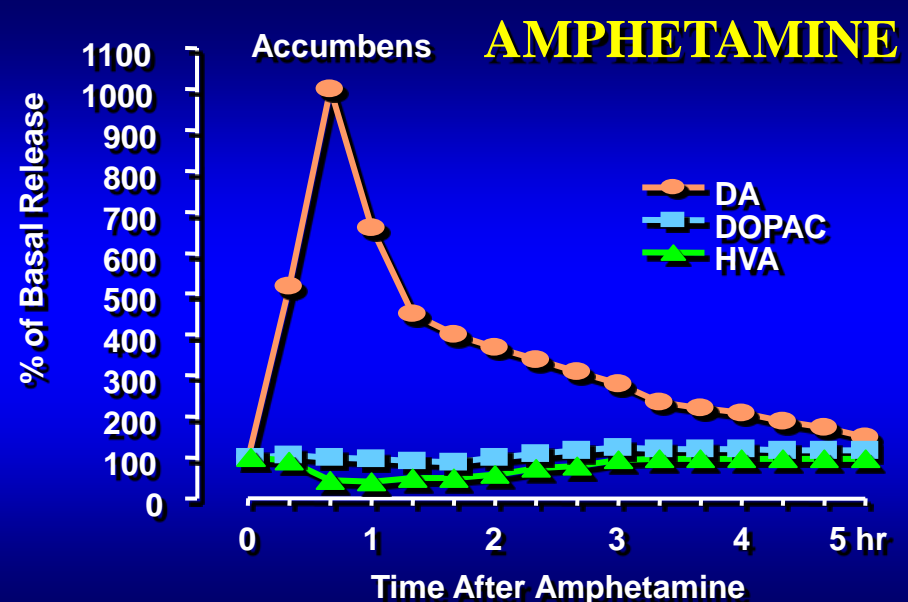
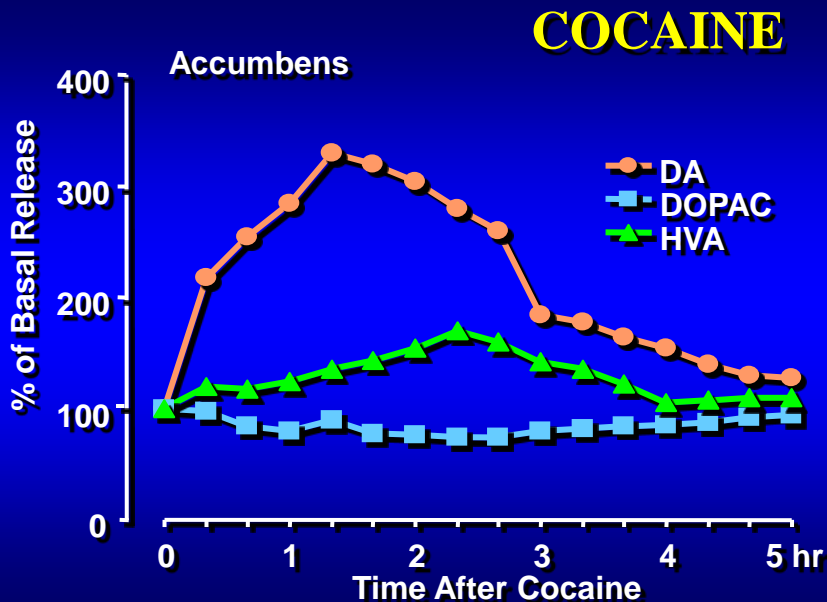
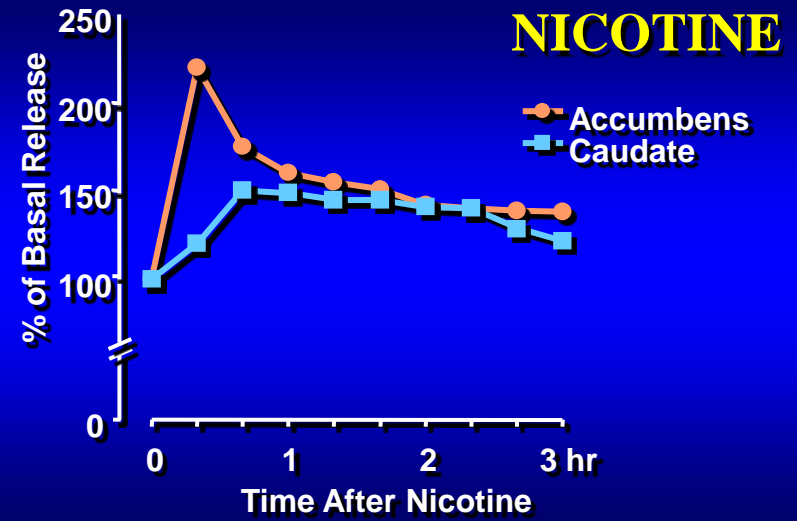
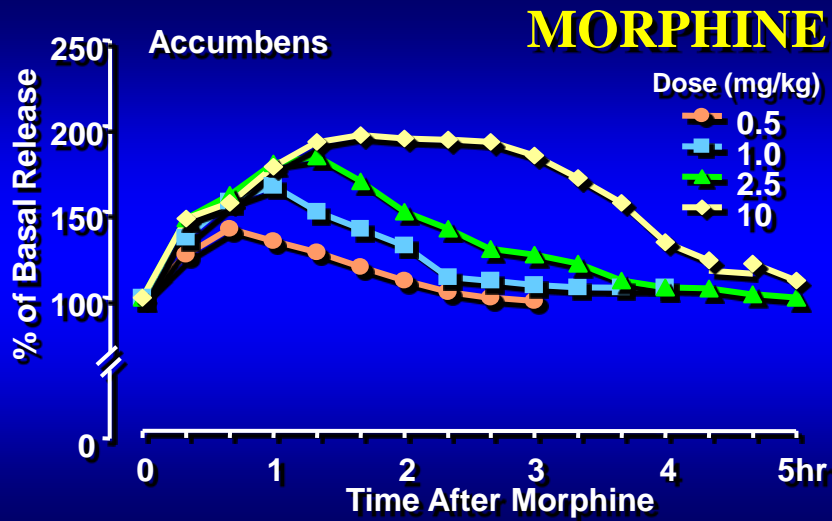
- Tolerance
- Withdrawal
- Using more over a longer period than intended
- Persistent desire or unsuccessful efforts to cut down
- Excessive time spent obtaining, using, or recovering from effects of the substance
- Giving up or reducing time on important activities
- Continued use despite knowledge of consequences



# Natural Rewards Elevate Dopamine Levels



# Effects of Drugs on Dopamine Levels



# Long-Term Effects on the Brain

## Your Brain After Drugs



Normal



Cocaine Abuser (10 days)

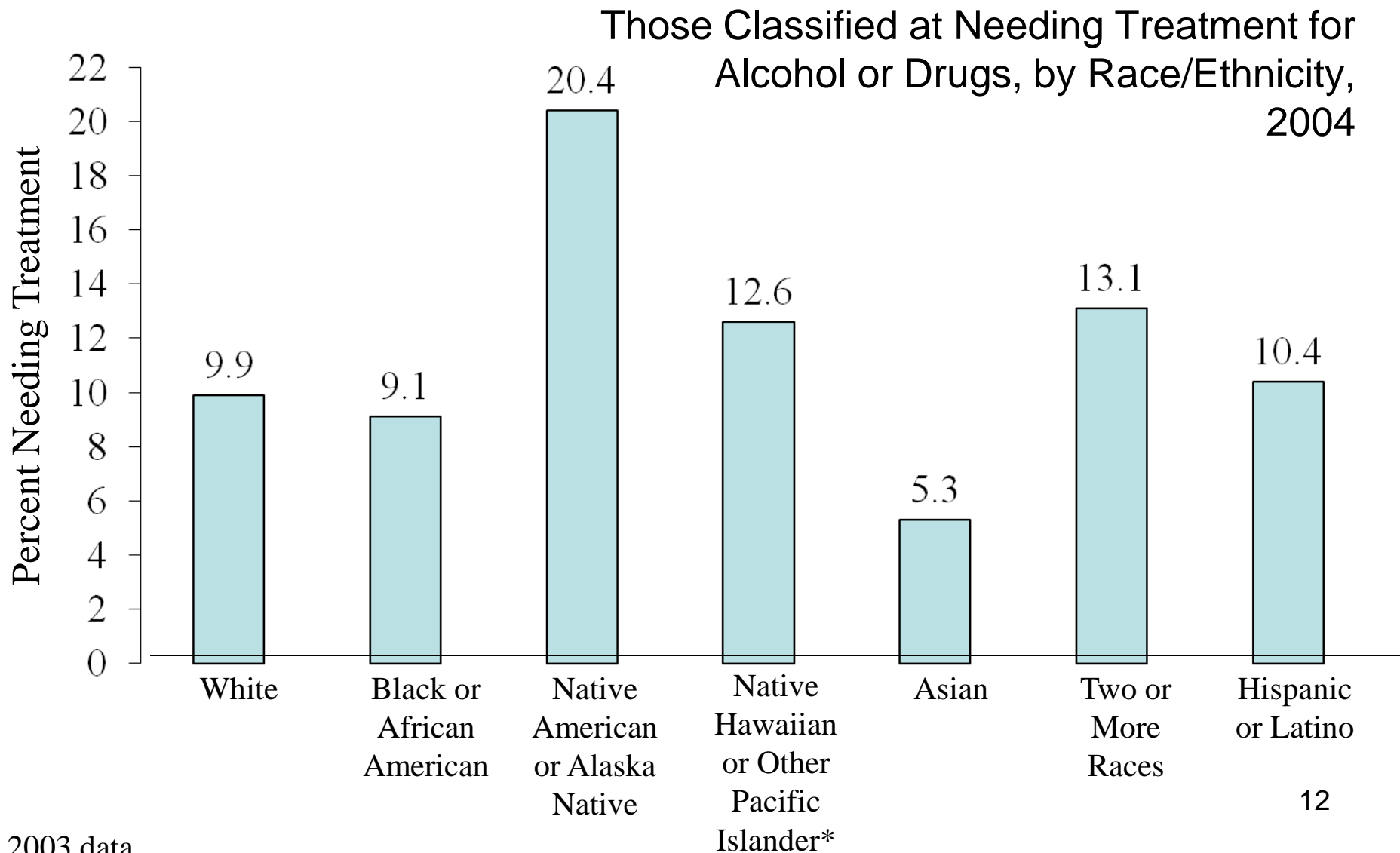


Cocaine Abuser (100 days)



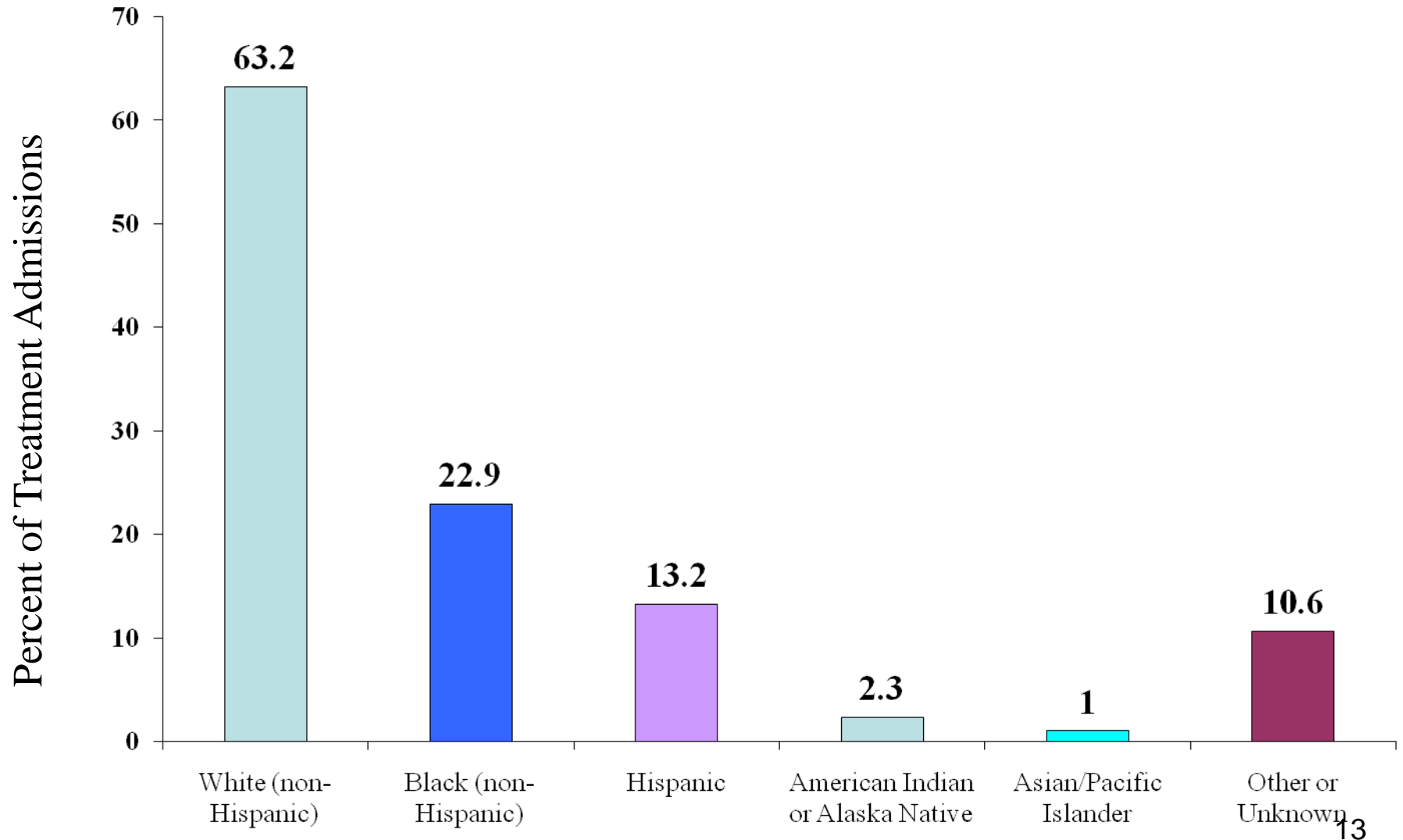
**YELLOW** and **RED**  
Indicate the level  
of brain function

# Prevalence of Substance Use Disorders by Race/Ethnicity



# 2004 Treatment Admissions by Race/Ethnicity

Total Admissions – 1.88 million



# Adverse Consequences of Substance Use Disorders

- Physical
- Cognitive
- Psychological
- Emotional
- Social
- Spiritual
- Parenting
- Family Abuse
- Financial
- Legal

# Relational World View

- Native American Teaching: Health depends on a balance of mind, body, spirit, and context.
- Substance abuse causes an unbalanced life.
- Family problems escalate with the progression of the disease.

# Effects of Substance Use on Parents and Families

- Different substances effect parenting differently
- Effects of Prenatal Exposure
  - Neurological and behavioral differences
  - Cognitive and communication/language difficulties



# In-Home Indicators of Potential Substance Abuse - 1

- A report of substance use in the child protective services call or report
- Paraphernalia observed or reported in the home
- The smell of alcohol, marijuana, or other drugs on the parent or in the home
- A child reports use by adults in the home

# In-Home Indicators of Potential Substance Abuse - 2

- Parent's behavior suggests intoxication
- Parent exhibits signs of addiction
- Parent admits to substance use
- Parent shows or reports experiencing physical effects of addiction and/or withdrawal

# Screening: The Role of Child Welfare Professionals

- Screening
  - Signs and symptoms during initial screening or assessment for child abuse and neglect
- Referral
  - Refer parent to a substance abuse treatment provider for further assessment.
  - The substance abuse treatment provider may refer parent to a treatment program

# The Purpose of Screening

- Who needs to be screened?
  - Those identified as high risk or
  - Assume everyone is high risk
- Best practice: Screen Everyone
- Why? To see if assessment by a treatment provider is needed

# Effective Screening Tools

- Fast, simple, easy to administer
- Can detect a problem with 3-6 key questions
- Inexpensive
- Requires little paperwork
- Designed for a broad range of individuals

# Addiction Treatment

## Treatment Modalities:

- Behavioral therapies and/or medications
- Case management and referral to critical services
- Mutual support (e.g., Alcoholics Anonymous and Narcotics Anonymous)

## Treatment Based On:

- Severity of the Disorder
- Age
- Race
- Culture
- Sexual orientation
- Gender
- Pregnancy
- Parenting
- Housing
- Employment
- History of physical or sexual abuse and other trauma

# Gender-Specific Components

- Unique Considerations for Women
  - Childhood abuse: physical, sexual, and/or emotional trauma
  - Co-occurring mental disorders, domestic violence
- Comprehensive Treatment Model for Women
  - Clinical treatment services
  - Clinical support services
  - Community support services

# Culturally Relevant Treatment

- Compatible with roles, values, and beliefs
- Identify and remove barriers to treatment
- Address language needs
- Geographically accessible
- Family-focused



# When Treatment Is Unavailable

- Be familiar with care and treatment options in the community.
- Provide contacts for 12-Step meetings and encourage parents to go.
- While waiting for optimal treatment:
  - Help develop safety plans.
  - Plan regular contact.
  - Suggest lower levels of care.

# The Treatment Process

- Screening
- Brief Substance Abuse Assessment
- Diagnosis
- Comprehensive Assessment
- Development of Treatment Plan

# Determining Treatment Placement

- *Continuum of Intensity*  
--from medically managed inpatient hospitalization (most intense) to outpatient sessions (least intense).
- *Treatment Approaches*  
--e.g., behavior modification or medication-assisted therapy.

# Treatment Placement

- Matching needs with services:
  - Level 0.5—Early Intervention
  - Level I—Outpatient
  - Level II—Intensive Outpatient/Partial Hospitalization
  - Level III—Residential/Inpatient
  - Level IV—Medically Managed Intensive Inpatient
- Opioid Maintenance Therapy

# Treatment Needs Change

- From more intensive to less intensive as needs are met.
- From less intensive to more intensive, based on severity of the substance use disorder.
- Financial resources and limitations
  - Can eliminate or postpone access

# Addiction Treatment: American Indian Communities

- Federal trust relationship between recognized Tribes and Federal Government.
- *Substance abuse treatment*: Through Indian Health Service (IHS) network or Indian nonprofit agency under contract with IHS.
- *Child welfare services*: Under Indian Child Welfare Act (ICWA), Tribes have jurisdiction over and operate child welfare services.
- Ask about a child's ethnicity to determine if ICWA or IHS should be used.

# Types of Treatment Approaches

- Any or a combination of the following, known as an "integrated" approach:
  - Pharmacotherapies
  - Psychosocial or Psychological Interventions
  - Behavioral Therapies
  - Mutual Support Groups

# Medications for Opiate Addiction: Methadone Maintenance

- An effective treatment for heroin dependence.
- Does not produce behaviors associated with addiction and compulsive use.
- Can only be dispensed by federally approved Opioid Treatment Programs .



# Other Medications for Opiate Addiction: LAAM and Buprenorphine

- 2000 Federal Law

Only qualified physicians who work in Opioid Treatment Programs or see patients in their private practices can prescribe and dispense LAAM and buprenorphine.

- Risks to children

# Goals of Treatment

- Improve biopsychosocial functioning;
- Reduce substance use and increase sobriety;
- Prevent or reduce frequency and severity of relapse.

# Treatment Effectiveness: National Treatment Improvement Evaluation Study (NTIES)

- Results:
  - Reduced alcohol and other drug use.
  - Lasting benefits

## After 1 year of treatment:

- Increases in employment and income,
- Improvements in mental and physical health,
- Decreases in criminal activity, homelessness, and behaviors that put them at risk for HIV infection

# Treatment Effectiveness:

## National Institute on Drug Abuse (NIDA)

- Minimum for effective outcome:
  - 90 days of residential or outpatient treatment
  - 12 months
- People may need more than one treatment episode to achieve success:
  - Possible cumulative effect
  - Importance of engagement, retention, length of stay

# Helping Parents Access Treatment

- SAMHSA Substance Abuse Treatment Facilitator Locator
  - [www.findtreatment.samhsa.gov/facilitylocator/doc.htm](http://www.findtreatment.samhsa.gov/facilitylocator/doc.htm)
  - Select "Detailed Search" or "List Search"
  - Check "sliding fee scale" and "other assistance"
  - Call facilities to determine policies
- Contact State Substance Abuse Agency
  - Most agencies have Websites with contact information
- Call a CSAT/SAMHSA Referral Helpline:
  - 1-800-662-HELP
  - 1-800-662-9832 (Spanish language)
  - 1-800-228-0427 (TDD)

# Identifying Treatment in Your Community

- Document information about each treatment provider
- Ask the key questions to consider in securing appropriate treatment programs
- Use this information as a ready reference to help you recommend appropriate treatment placements

# Services That Parents in Treatment Need

- Access to physical necessities;
- Medical care;
- Substance abuse prevention counseling;
- Parenting and child development training;
- Child care;
- Training in childcare techniques;
- Social services, social support, psychological assessment, and mental health care;
- Family therapy and health education;
- Family planning services;

# Services Parents in Treatment Need (Cont.)

- Life skills training;
- Language and literacy training;
- Planned, continuing care after program completion;
- Support in sustaining visitation with children;
- Case Management



# Contact with Children

- Parents in treatment may—or may not—see their children.
- Visitation is important to children and parents.
- Interventions to treat substance abuse, child neglect, and maltreatment are more effective if family centered.
- Prepare children for visits with a parent in in-patient treatment.

# Developmental Model of Recovery: Six Stages

- Transition
- Middle Recovery
- Stabilization
- Late Recovery
- Early Recovery
- Maintenance

# Monitoring Treatment and Assessing Progress

- Key factors in monitoring treatment progress:
  - Participation in treatment
  - Knowledge gained about substance abuse
  - Participation in support systems
  - Child welfare services plan compliance
  - Visitation with children (when appropriate)
  - Parental skills/parental functioning
  - Interpersonal relationships
  - Abstinence from substances

# Drug Testing

- Biological specimens: urine, hair, sweat, blood
- Limitations
  - Only detect recent use
  - Cannot measure frequency, patterns of use, or the route of administration
- Recommendations
  - Use as an adjunct to treatment
  - Agree on the type, frequency and duration of drug testing

# Discharge from Treatment - 1

- Progress on treatment goals
- Sobriety & evidence that parent can live a sober life
- Stabilization/resolution of medical or mental health problems
- Demonstration of appropriate parenting skills

# Discharge from Treatment - 2

- Parent demonstrates responsibility for self and children;
- Promotion through treatment phases to a specified level;
- Evidence of a well-developed support system:
- Employment or enrollment in a program for adult education, literacy, or vocational training;

# Discharge from Treatment - 3

- Legitimate and sufficient income source;
- Safe, affordable housing;
- A self-developed exit plan
- Evidence that the parent is linked with, or can find, needed family services

# Continuing Care or Aftercare: Strategies To Support Recovery - 1

- Alumni group meetings at the treatment facility
- Home visits from counselors
- Case management
- Parenting education and support services
- Employment services
- Safe and sober housing resources
- Legal aid clinics or services



# Continuing Care or Aftercare: Strategies To Support Recovery - 2

- Mental health services;
- Medical and healthcare referrals;
- Dental health care;
- Income supports;
- Self-help groups; and
- Individual and family counseling.

# Post-Treatment Expectations

- Recovery as “one day at a time” for the rest of a person's life
- Lapse vs. Relapse
- Ongoing support:
  - Economic, vocational, housing, parenting, medical, and social supports
  - Re-engagement in the recovery process, should relapse occur
  - Culture and recovery