



What Does Quality Treatment Look Like?
**Identifying Effective Substance Use Disorder
Treatment for Families**

**California Association of
Collaborative Courts Conference**

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Children and Family Futures

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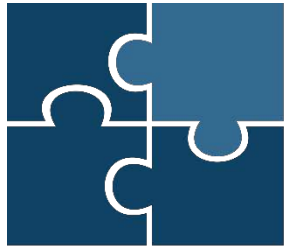
Acknowledgement

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Acknowledgement



National Center on
Substance Abuse
and Child Welfare

Bringing Systems Together for Family Recovery, Safety and Stability

A program funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Administration for Children and Families (ACF), Children's Bureau



www.ncsacw.samhsa.gov | ncsacw@cffutures.org

Learning Objectives

1. Identify key elements of quality substance use treatment for families affected by substance use disorder.
2. Learn about treatment and recovery processes, and how they impact family well-being and court cases.
3. Identify strategies and opportunities for judicial leaders to partner with substance use

All Treatment Courts are Family Courts...

*when their clients
include parents with
children*



Recovery Occurs in the Context of the Family



- **Substance use is a disease that affects the family**
- **Adults (who have children) primarily identify themselves as parents**
- **The parenting role and parent-child relationship cannot be separated from treatment**
- **Adult recovery should have a parent-child component including prevention for the child**

Source: ASPE Research Brief (2018). Substance use, the opioid epidemic, and the child welfare system: Key Findings from a mixed methods study. Retrieved from <https://aspe.hhs.gov/system/files/pdf/258836/SubstanceUseChildWelfareOverview.pdf>



Change is Good

The Families First Prevention Services Act

February 2018

Three specifics related to Substance Abuse and Mental Health Services Allowing Title IV-E funds to reimburse states for substance use and mental health prevention and treatment services

Foster Care Maintenance Funding can go directly to Family Residential Substance Use Disorder Treatment Effective October 1, 2018

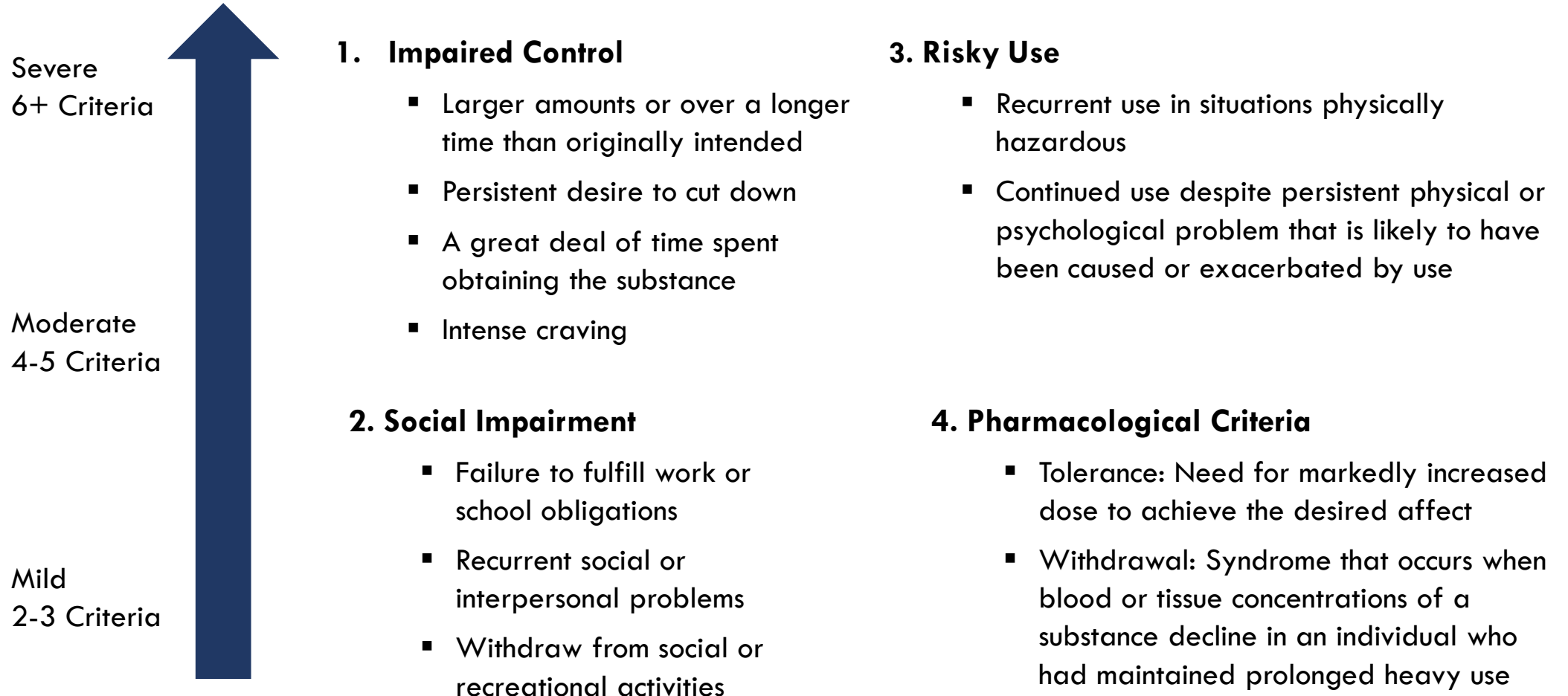
Use of Title IV-E Funds for substance abuse treatment, mental health services and parenting to prevent child placement in out-of-home care Effective October 1, 2019

Reauthorization of Regional Partnership Grants



We know more about
Brain Science of
Addiction

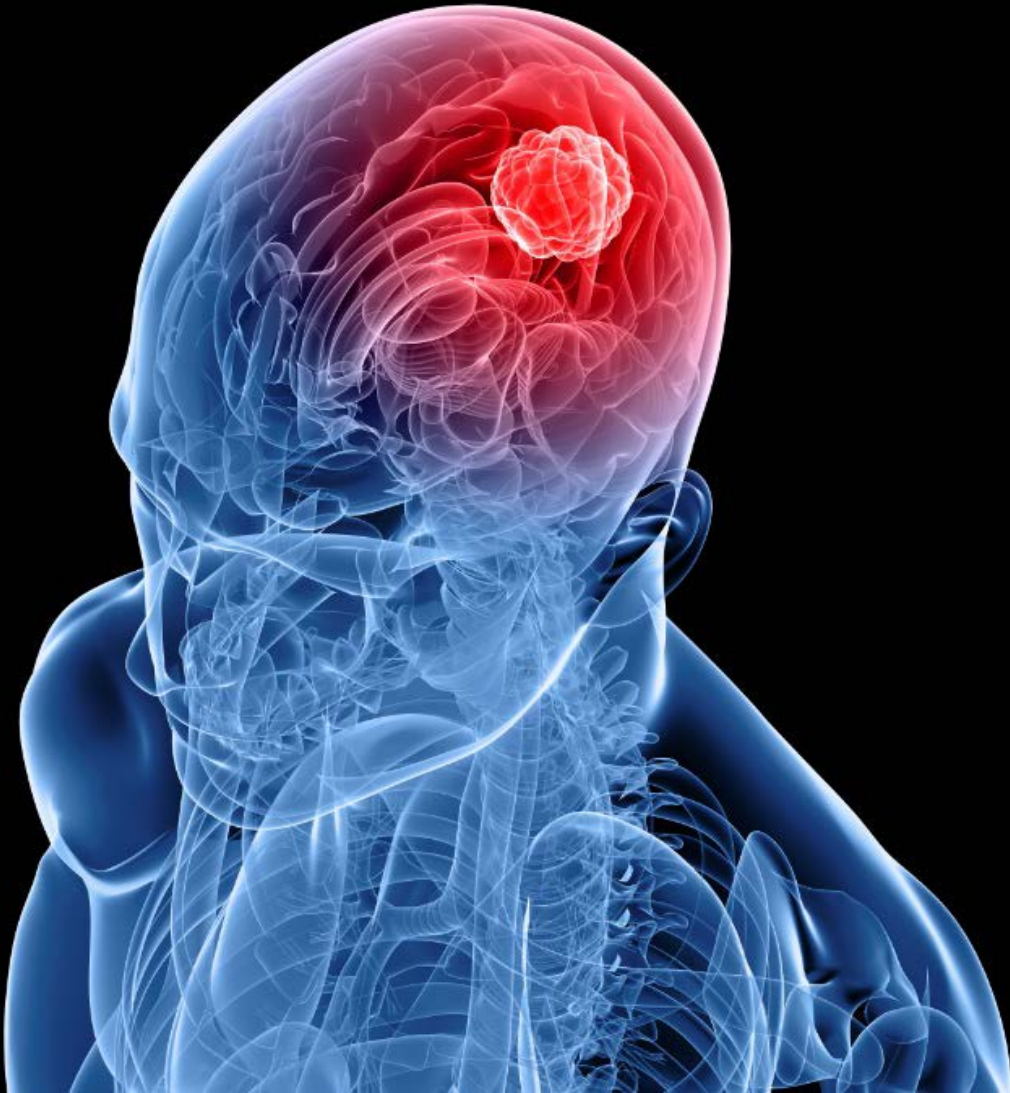
Diagnosing Substance Use Disorders: DSM 5 Criteria



ASAM Definition

“Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.”

Adopted by the ASAM Board of Directors 4/12/2011



A Chronic, Relapsing Brain Disease



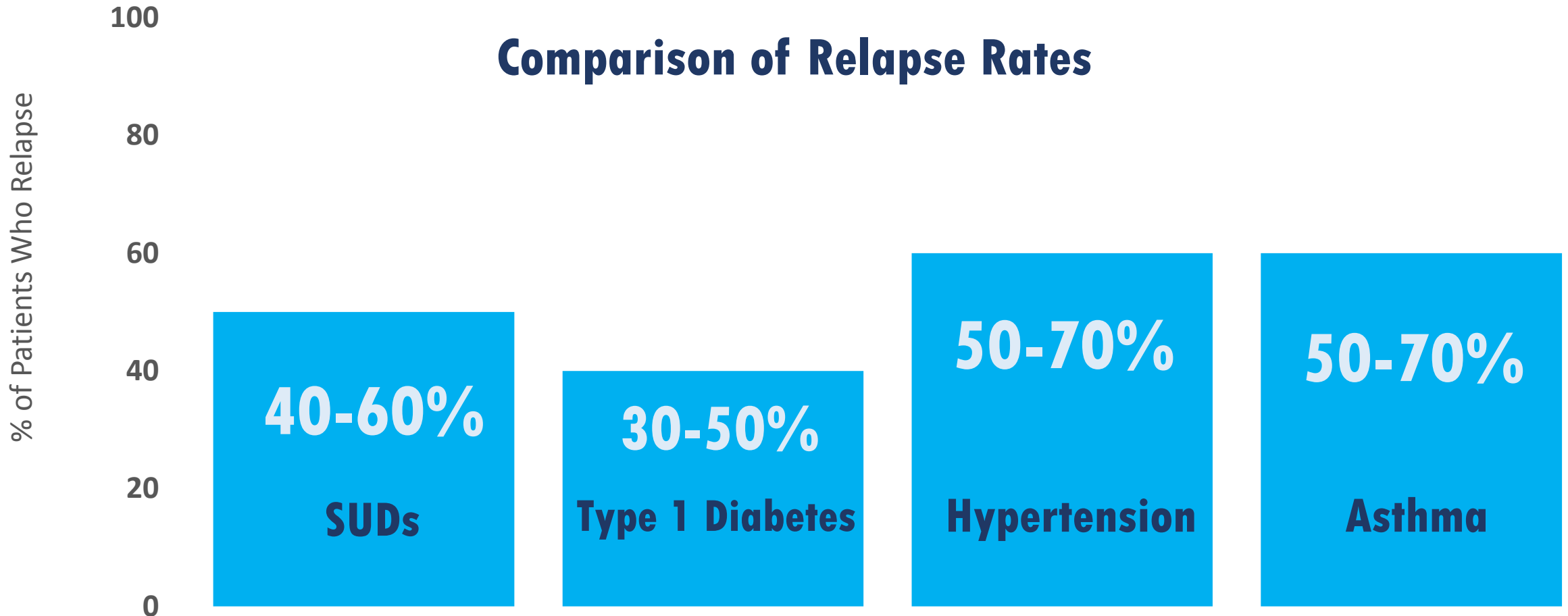
Brain imaging studies show physical changes in areas of the brain that are critical to:

- **Judgment**
- **Decision making**
- **Learning and memory**
- **Behavior control**

These changes alter the way the brain works and help explain the compulsion and continued use despite negative consequences

Substance Use Disorders and Other Chronic Conditions

Comparison of Relapse Rates



Brain Recovery with Prolonged Abstinence



These images of the dopamine transporter show the brain's remarkable potential to recover, at least partially, after a long abstinence from drugs - in this case, methamphetamine.⁹

A Treatable Disease

"Groundbreaking discoveries about the brain have revolutionized our understanding of addiction, enabling us to respond effectively to the problem"

- Dr. Nora Volkow, National Institute on Drug Abuse

- Substance use disorders are preventable and treatable
- Discoveries in the science of addiction have led to advances in substance use treatment that help people stop abusing drugs and resume productive lives
- Treatment enables people to counteract addiction's powerful disruptive effects on the brain circuitry and behavior and regain areas of life function
- Successful substance use treatment is highly individualized and entails:
 - Medication
 - Behavioral Interventions
 - Peer Support

Substance Use Disorders as a Family Disease

The impact on child development is well known: substance use disorders weaken relationships – which are critical to healthy development

Impact of substance use combined with added trauma



Child well-being is about relationships that ensure family well-being

Severe Family Disruption





**Developmental
impact**

**Generational
impact**

**Parental
substance
use affects
the whole
family**

**Psycho-social
impact**

**Impact on
parenting**

Questions to Ask

- **How do the collaborative partners view the disease of substance use disorders?**
- **How does your jurisdiction respond to continued use and relapse?**
- **Is there a coordinated, collaborative response to continued use for parents in treatment?**



Missed Opportunities



“Here’s a referral, let me know when you get into treatment.”

“They’ll get into treatment if they really want it.”

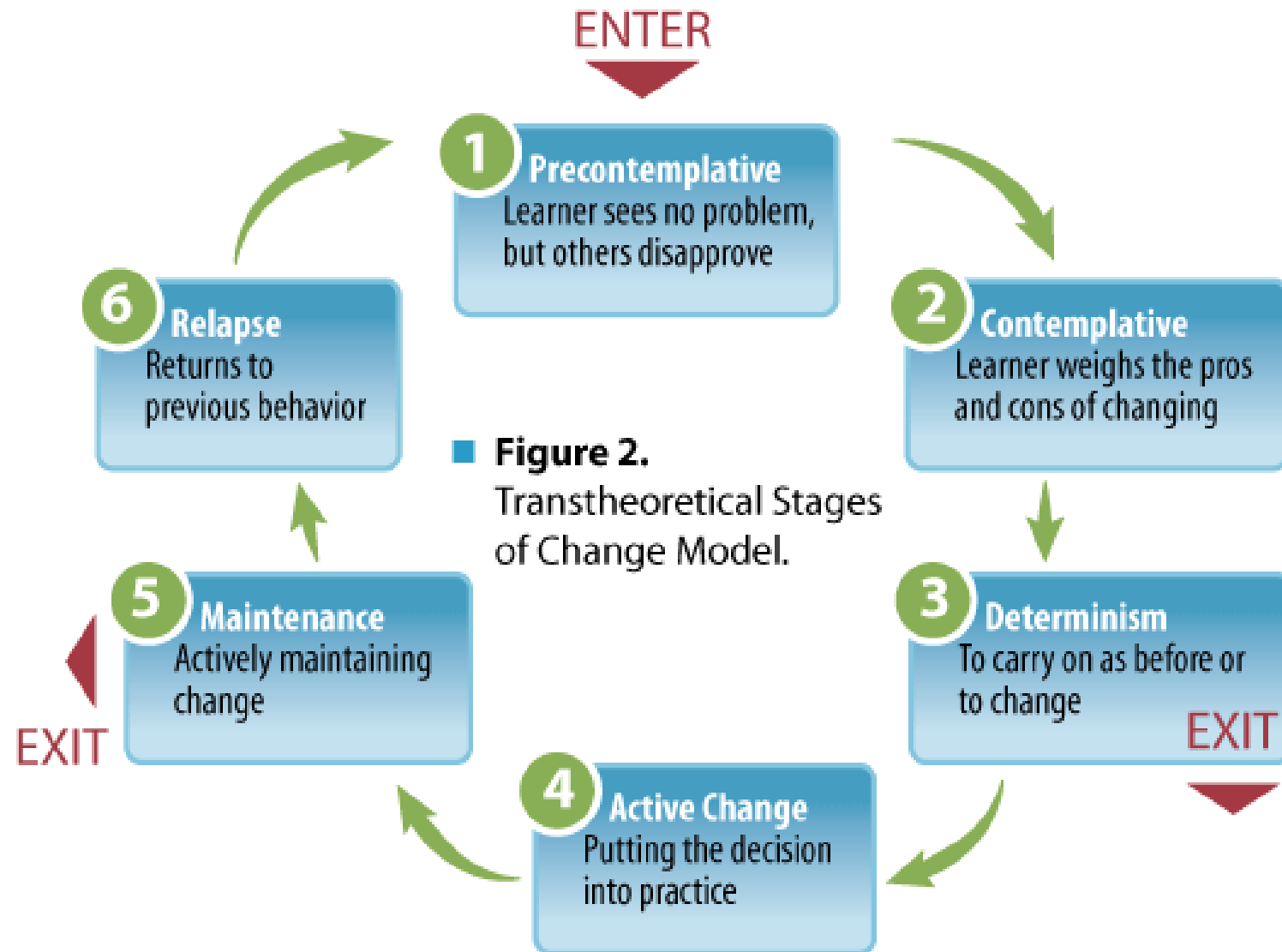
“Don’t work harder than the client.”

“Call me Tuesday.”

Substance Use Disorders

- **Once an addict, always an addict**
- **They don't really want to change**
- **They lie**
- **They must love their drug more than their child**
- **If they really wanted it they would just stop**
- **They need to get to rock bottom, before...**

Understanding How People Change

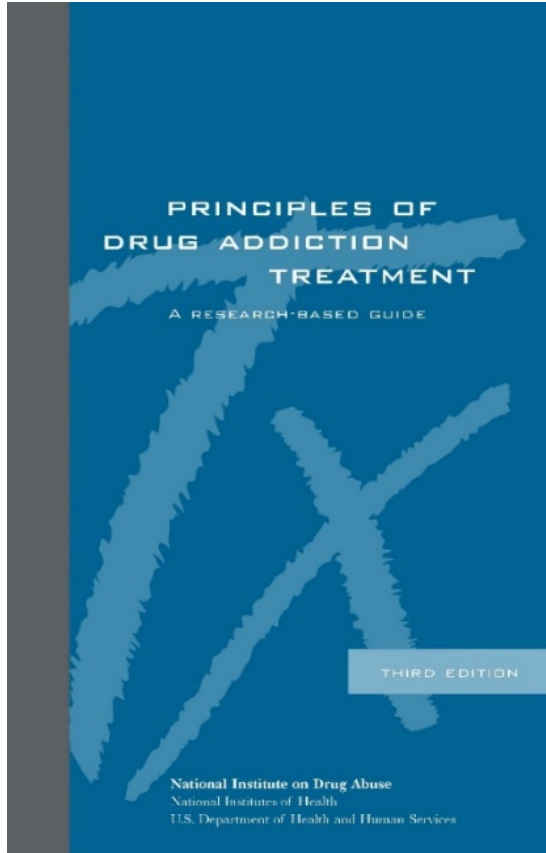


Effective Substance Use Disorder Treatment



- Is readily available
- Attends to multiple needs of the individual (vs. just the drug abuse)
- Uses engagement strategies to keep clients in treatment
- Uses counseling, behavioral therapies (in combination with medications if necessary)
- Addresses co-occurring conditions
- Uses continuous monitoring

Principles of Effective Drug Addiction Treatment: A Research Based Guide



- 1. Addiction is a chronic disease that requires long-term management**
- 2. Addiction is a complex but treatable disease that affects brain function and behavior**
- 3. No single treatment is appropriate for everyone**
- 4. Treatment needs to be readily available**
- 5. Effective treatment attends to multiple needs of the individual**
- 6. Remaining in treatment for an adequate period of time is critical**
- 7. Behavioral therapies are the most commonly used forms of drug abuse treatment**
- 8. Medications are an important element of treatment for many patients, especially when combined with counseling and other behavioral therapies**
- 9. An individual's treatment and services plan must be continually assessed and modified**
- 10. Many drug-addicted individuals also have other mental disorders**
- 11. Medically assisted detoxification is only the first stage of addiction treatment**
- 12. Treatment does not need to be voluntary to be effective**
- 13. Drug use during treatment must be monitored continuously as lapses do occur**
- 14. Treatment programs should test patients for infectious diseases**

Overview of the Treatment Processes



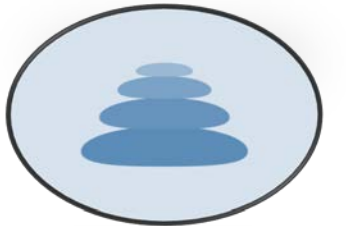
Early Identification, Screening, and Brief Intervention

Done at earliest point possible



Comprehensive Assessment

Determine extent and severity of disease



Stabilization

Via medically supervised detoxification, when necessary



Timely and Appropriate Substance Use Disorder Treatment

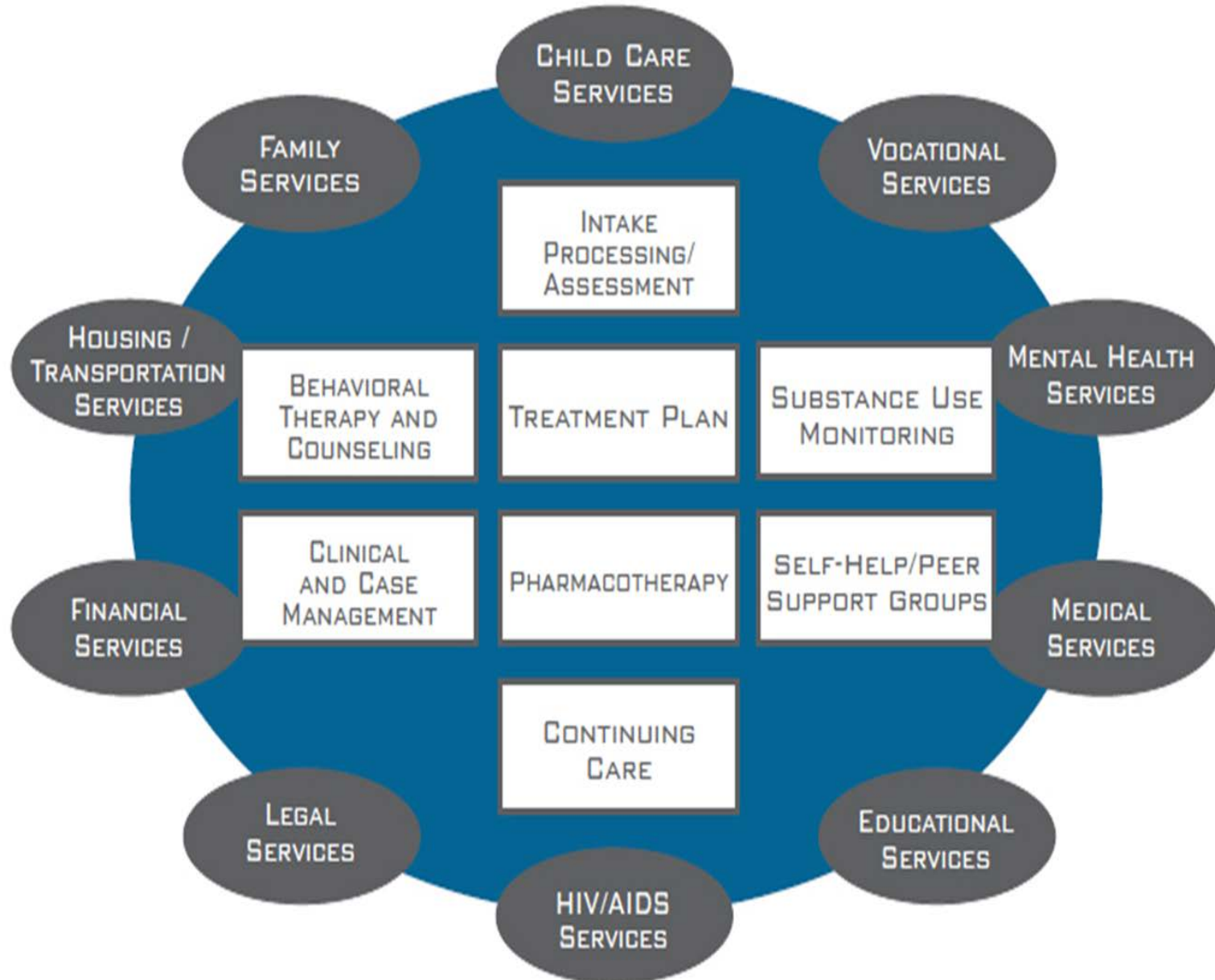
Address substance use disorder and co-occurring issues



Continuing Care and Recovery Support

Help parents sustain recovery, maintain family safety and stability

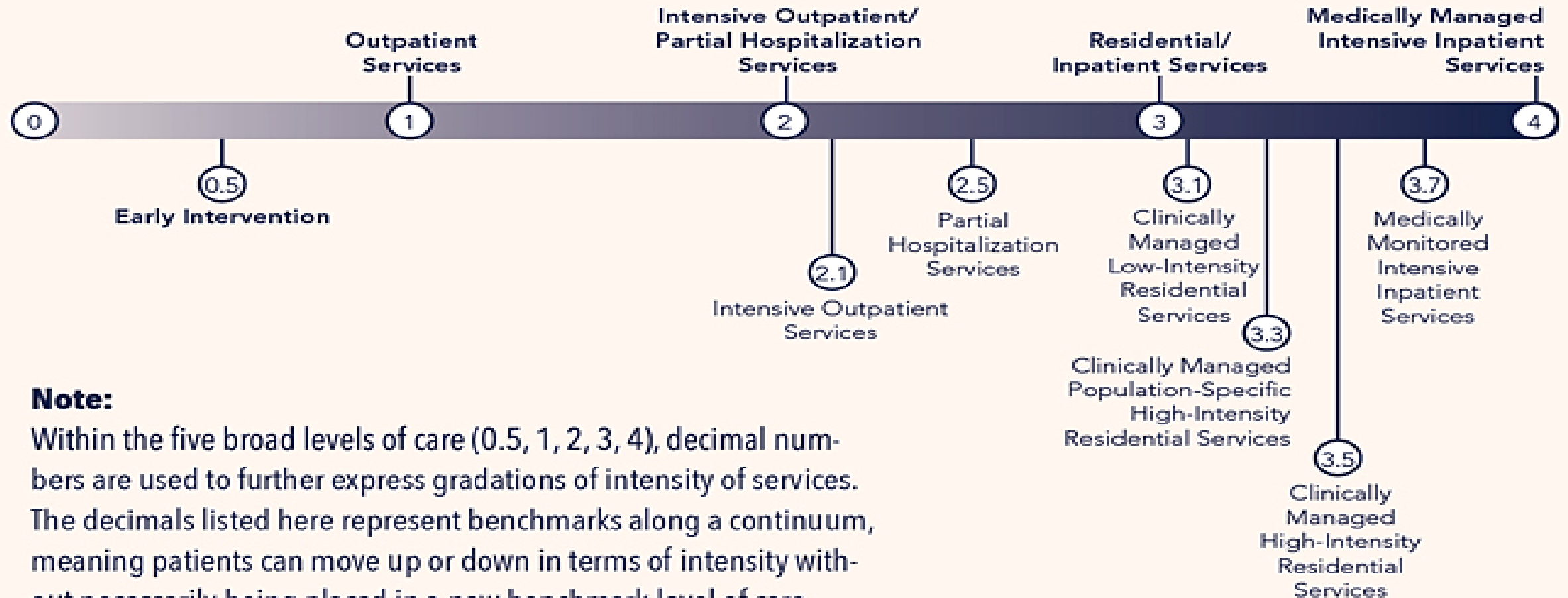
Full Spectrum of Treatment and Services



The best treatment programs provide a combination of therapies and other services to meet the needs of the individual patient.

ASAM Criteria & Continuum of Care

REFLECTING A CONTINUUM OF CARE



Note:

Within the five broad levels of care (0.5, 1, 2, 3, 4), decimal numbers are used to further express gradations of intensity of services. The decimals listed here represent benchmarks along a continuum, meaning patients can move up or down in terms of intensity without necessarily being placed in a new benchmark level of care.

Questions to Ask

- **Does the treatment program use a standardized, valid, and reliable substance use assessment tool?**
- **How are clients matched to the appropriate level of care?**
- **How often are clients reassessed to meet their changing treatment plan needs?**



Treatment Should be Evidence-Based

EBPs for trauma survivors:

- **Addiction and Trauma Recovery Integration Model (ATRIUM)**
- **Essence of Being Real**
- **Risking Connection**
- **Sanctuary Model**
- **Seeking Safety**
- **Trauma, Addictions, Mental Health, and Recovery (TAMAR) Model**
- **Trauma Affect Regulation: Guide for Education and Therapy (TARGET)**
- **Trauma Recovery and Empowerment Model (TREM and M-TREM)**

Medication Assisted Treatment (MAT)

A variety of medications are used to complement substance use treatment for different types of substance use disorders including:

- Tobacco
- Alcohol
- Opioids
 - Methadone, Buprenorphine, Naltrexone, Naloxone

Prescribers of medication determine the appropriate type of medication, dosage and duration based on each person's:

- Biological makeup
- Addiction history and severity
- Life circumstances and needs

MAT Cont.

As part of a comprehensive treatment program, MAT has been shown to:

- **Increase retention in treatment**
- **Decrease illicit opiate use**
- **Decrease criminal activities, re-arrest and re-incarceration**
- **Decrease drug-related HIV risk behavior**
- **Decrease pregnancy related complications**
- **Reduce maternal craving and fetal exposure to illicit drugs**

Fullerton, C.A., et al. November 18, 2013. Medication-Assisted Treatment with Methadone: Assessing the Evidence. *Psychiatric Services in Advance*; doi: 10.1176/appi.ps.201300235

The American College of Obstetricians and Gynecologists. (2012) Committee Opinion No. 524: Opioid Abuse, Dependence, and Addiction in Pregnancy. *Obstetrics & Gynecology*, 119(5), 1070–1076.

Dolan, K.A., Shearer, J., White, B., Zhou, J., Kaldor, J., & Wodak, A.D. (2005). Four-year follow-up of imprisoned male heroin users and methadone treatment: Mortality, reincarceration and hepatitis C infection. *Addiction*, 100(6), 820–828.

Gordon, M.S., Kinlock, T.W., Schwartz, R.P., & O'Grady, K.E. (2008). A randomized clinical trial of methadone maintenance for prisoners: Findings at 6 months post-release. *Addiction*, 103(8), 1333–1342.

Havnes, I., Bukten, A., Gossop, M., Waal, H., Stangeland, P., & Clausen, T. (2012). Reductions in convictions for violent crime during opioid maintenance treatment: A longitudinal national cohort study. *Drug and Alcohol Dependence*, 124(3), 307–310.

Kinlock, T.W., Gordon, M.S., Schwartz, R.P., & O'Grady, K.E. (2008). A study of methadone maintenance for male prisoners: Three-month post release outcomes. *Criminal Justice & Behavior*, 35(1), 34–47.

Combating Stigma



Affects the attitudes of...

- **Medical and healthcare professionals**
- **Social service agencies and workers**
- **Families and friends**



- **Creates barriers to treatment, and access to programs**
- **Influences criminal justice policies**

Barriers to MAT Treatment

- **Lack of coverage for medication**
- **Lack of availability**
- **Stigma**
- **MAT availability for justice-involved individuals**



Questions to Ask

- **Are there policies or practices in place that are barriers to accessing MAT?**
- **Is MAT available to an expectant mother? How does your jurisdiction respond to individuals on MAT?**



Principles of Family-Centered Treatment

- Treatment is **comprehensive** and inclusive of substance use disorder, clinical support services, and community supports for parents and their families
 - The **caretaker defines “family”** and treatment identifies and responds to the effect of substance use disorders on every family member
 - **Families are dynamic**, and thus treatment must be dynamic
 - **Conflict within families is resolvable**, and treatment builds on family strengths to improve management, well-being, and functioning
 - **Cross-system coordination** is necessary to meet complex family needs
- 

Principles of Family-Centered Treatment

- Services must be **gender- and culturally responsive**
- Family-centered treatment requires an array of **professionals** and an environment of mutual respect and shared training
- **Safety** of all family members comes first
- Treatment must support creation of **healthy family systems**



Family Engagement and Ongoing Support



Ensure family treatment and recovery success by:

- Understanding, changing and measuring the cross-system processes for referrals, engagement and retention in treatment
- Recruiting and training staff who specialize in outreach and motivational (i.e. Motivational Interviewing) approaches and who monitor processes of recovery and aftercare
- Jointly monitoring family progress through a combination of case management, coordinated case planning, information sharing, timely and ongoing communication
- Aftercare, Community and Family Supports, and Alumni Groups

5 Signs of Quality Treatment



1 Accreditation

- **The program is licensed or certified**
- **Is in good standing and**
- **staff are qualified and receive training**

5 Signs of Quality Treatment



2 Medication

The program offers FDA-approved medication or recovery from alcohol and opioid use disorders

5 Signs of Quality Treatment



3 Evidence-Based Practices

The program offers treatments that are proven to be effective

5 Signs of Quality Treatment

4 Families

The program includes family members in the treatment process



5 Signs of Quality Treatment



5 Supports

The program provides ongoing treatment and supports beyond the substance issues

Questions to Ask

- **Does the program conduct satisfaction surveys?**
- **Does the program offer FDA approved MAT?**
- **Does the program provide or help obtain medical care for physical health issues?**
- **Does the program include family members in the treatment process?**
- **Does the program provide ongoing treatment and supports beyond treatment for SUDs?**



Rethinking Treatment Readiness



Re-thinking “Rock Bottom”

- “Tough love”- in the hopes that they will hit rock bottom and wanting to change their life.
- Collective knowledge in the community is to “cut them off, kick them out, or stop talking to them.”
- Addiction as a disease of isolation



“Raising the bottom”

- Getting off on an earlier floor
- Has realistic expectations and understands both the neuro-chemical effects on people with substance related and addiction disorders and difficulties and challenges of early recovery
- Readiness
- Recovery occurring in the context of relationships

What is recovery?

SAMHSA's Working Definition

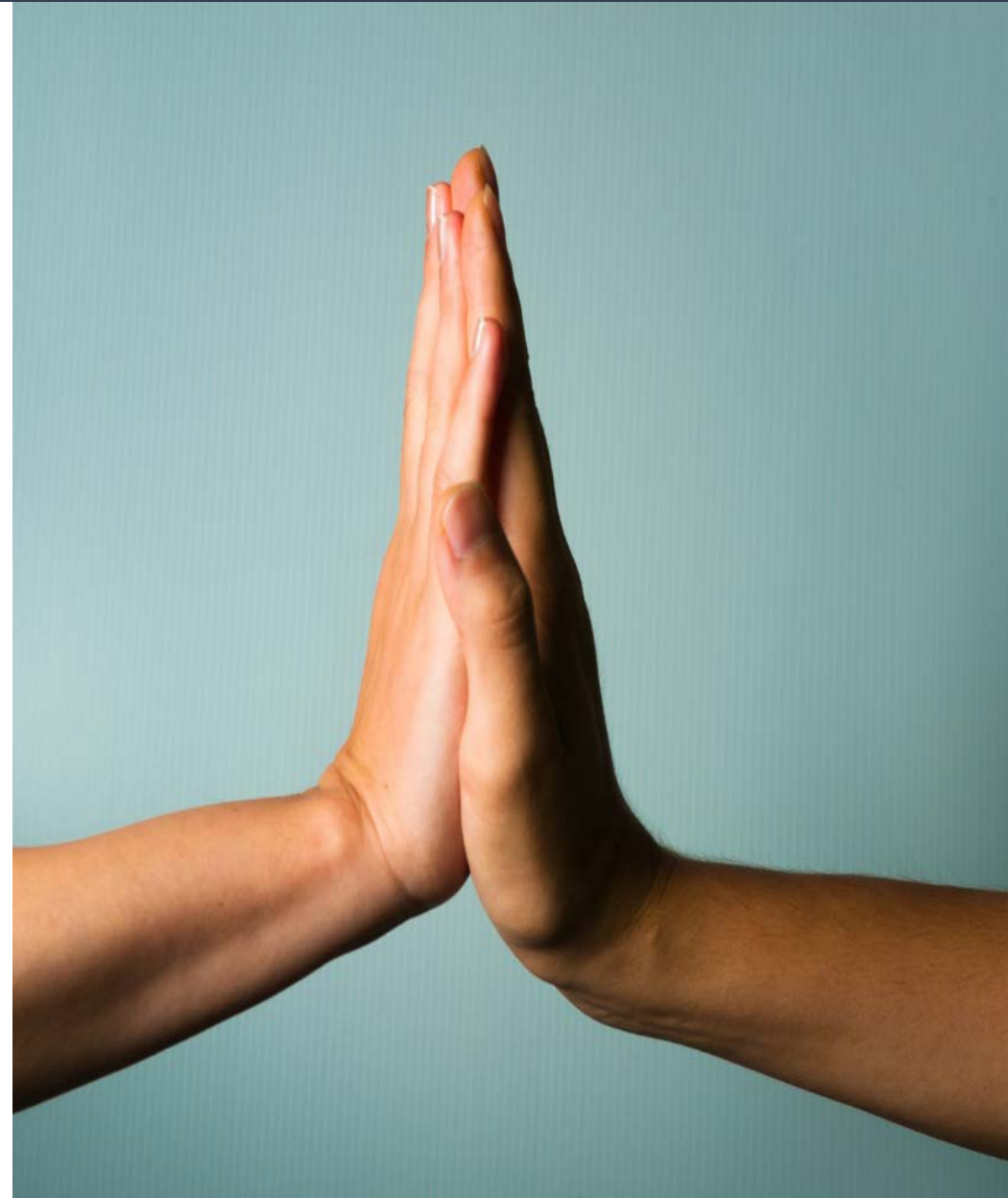
“Recovery is a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.”

Access to evidence-based substance use disorder treatment and recovery support services are important building blocks to recovery.



The Impact of Recovery Support

- **Recovery Support Specialists**
- **Family-Centered Services**
- **Evidence-Based Parenting**
- **Successful Visitation**
- **Evidence-Based Treatment**
- **Reunification Groups**
- **Ongoing Support**



Functions of Recovery Support Specialists



Liaison

- Links participants to ancillary supports; identifies service gaps

Treatment Broker

- Facilitates access to treatment by addressing barriers and identifies local resources
- Monitors participant progress and compliance
- Enters case data

Advisor

- Educates community; garners local support
- Communicates with FDC team, staff and service providers



Recovery Support Matters

A Randomized Control Trial - Cook County, IL (n=3440)

Comprehensive
Screening &
Assessment



Early Access to
Treatment



Positive
Outcomes

Aftercare and Ongoing Support



Ensure aftercare and recovery success beyond FDC and CWS participation:

- **Personal Recovery Plan – relapse prevention, relapse**
- **Peer-to-peer support – alumni groups, recovery groups**
- **Other relationships – family, friends, caregivers, significant others**
- **Community-based support and services – basic needs (childcare, housing, transportation), mental health, physical health and medical care, spiritual support**
- **Self-sufficiency – employment, educational and training opportunities**

Questions to Ask

- **Is there a formal aftercare phase as part of the treatment continuum?**
- **What type of continuing care (including relapse prevention and recovery supports) are provided during and after treatment. How long is involvement in continued care monitored?**
- **How long is continuing care available and required after treatment discharge?**




Focusing only on parent's recovery without addressing the needs of children...

can threaten parent's ability to achieve and sustain recovery and establish a healthy relationship with their children, thus risking:

- **Recurrence of maltreatment**
- **Re-entry into out-of-home care**
- **Relapse and sustained sobriety**
- **Additional substance-exposed infants**
- **Additional exposure to trauma for child/family**
- **Prolonged and recurring impact on child well-being**



Rethinking Family Recovery



Parents' recovery must occur in the context of family relationships

Services that strengthen families and support parent-child relationships helps keep children safe

Continuum of Family-Based Services

Parent's Treatment With Family Involvement

Services for parent(s) with substance use disorders. Treatment plan includes family issues, family involvement

Goal: improved outcomes for parent(s)

Parent's Treatment with Children Present

Children accompany parent(s) to treatment. Children participate in child care but receive no therapeutic services. Only parent(s) have treatment plans

Goal: improved outcomes for parent(s)

Parent's and Children's Services

Children accompany parent(s) to treatment. Parent(s) and attending children have treatment plans and receive appropriate services.

Goals: improved outcomes for parent(s) and children, better parenting

Family Services

Children accompany parent(s) to treatment; parent(s) and children have treatment plans. Some services provided to other family members

Goals: improved outcomes for parent(s) and children, better parenting

Family-Centered Treatment

Each family member has a treatment plan and receives individual and family services.

Goals: improved outcomes for parent(s), children, and other family members; better parenting and family functioning

Engagement of Fathers in Family-Based Services

- 
- A close-up photograph of a man with a beard and a young child smiling together. The man is on the left, looking down at the child on the right. The child is smiling and looking towards the man. The background is blurred, suggesting an indoor setting.
- **Make father engagement a priority**
 - **Identify and locate fathers as early as possible**
 - **Ensure quality father-child visits**
 - **Ensure fathers receive gender-responsive services**
 - **Ensure that treatment is gender-responsive**

A Family Focus

Parent Recovery

Parenting skills and competencies
Family connections and resources
Parental mental health
Medication management
Parental substance use
Domestic violence

Family Recovery and Well-being

Basic necessities
Employment
Housing
Child care
Transportation
Family counseling
Specialized Parenting

Child Well-being

Well-being/behavior
Developmental/health
School readiness
Trauma
Mental health
Adolescent substance abuse
At-risk youth prevention

A Family Focus: Parent and Child Service Components

Developmental & behavioral screenings and assessments

Quality and frequent visitation

Early and ongoing peer recovery support

Parent-child relationship-based interventions

Evidence-based parenting programs

Trauma-informed care

Community and auxiliary supports



Family-Centered Treatment and Completion

- **A study conducted in a residential treatment program for women and their children found that mothers who participated in the Celebrating Families! Program and received improved integrated case management system showed significant improvements in recovery, including reduced mental health symptoms, reduction in risk behaviors, and longer program retention (Zweben et al., 2015).**
- **Women who participated in programs that included a “high” level of family and children’s services and employment/education services were twice as likely to reunify with their children as those who participated in programs with a “low” level of these services. (Grella, Hser & Yang, 2006).**
- **Retention and completion of treatment have been found to be the strongest predictors of reunification with children for parents with substance use disorders. (Green, Rockhill, & Furrer, 2007; Marsh, Smith, & Bruni, 2010).**

Treatment Outcomes



- **Reduce the major symptoms of the illness**
- **Improve health and social functioning**
- **Teach and motivate individuals to monitor their condition and manage threats of relapse**

Questions to Ask

- **What services are provided to address the specific needs of children and other family members?**
- **Can children accompany their parent to treatment? If so, are there any restrictions on age and number of children?**
- **What evidence-based parenting or family strengthening programs are provided?**



A scenic landscape featuring a paved road that curves into the distance. The road is flanked by a gravel shoulder on the left and a concrete curb on the right. Beyond the curb is a vast field of bright yellow flowers, likely rapeseed, stretching to the horizon. The sky is a vibrant blue, filled with large, white, fluffy clouds. A bright sun is visible on the left side of the frame, creating a lens flare effect that illuminates the scene.

Q&A

**and
Discussion**

Resources



Download Resource: Substance Use Disorder Treatment



Understanding Substance Use Disorder
Treatment in Your Community

*A Draft Discussion Guide for Child Welfare and
Court Professionals to Identify the Best
Treatment Fit for Families*

Designed to help CWS and Court professionals increase their knowledge of effective treatment

- *Part 1: Overview of Effective Treatment*
- *Part 2: Discussion*

To download:

https://www.ncsacw.samhsa.gov/files/Quality_Treatment_Guiding_Questions_March2017_508.pdf

Download Resource: Finding Quality Treatment for Substance Use Disorders

This fact sheet provides a list of the five signs of a quality treatment center

To download:

<https://store.samhsa.gov/product/PEP18-TREATMENT-LOC>

FINDING QUALITY TREATMENT FOR SUBSTANCE USE DISORDERS

FOR A DRUG OR ALCOHOL USE EMERGENCY, CALL 911 OR GO TO THE NEAREST EMERGENCY ROOM

THREE STEPS TO ACCESSING CARE

- If you have insurance:** Contact your insurer. Ask about your coverage and whether they have a network of preferred providers for you to use.
If you don't have insurance: Each state has funding to provide treatment for people without insurance coverage. Find where to call for information about payment for services at:
<https://www.samhsa.gov/sites/default/files/ssa-directory.pdf>
- Review the websites of the providers and see if they have the **five signs of quality treatment** detailed below.
- Call for an appointment. If they can't see you or your family member **within 48 hours**, find another provider. One indicator of quality is the ability to get an appointment quickly. Many programs offer walk-in services. Look for programs that can get you or a family member into treatment quickly.

FIVE SIGNS OF QUALITY TREATMENT

You can use these questions to help decide about the quality of a treatment provider and the types of services offered. Quality programs should offer a full range of services accepted as effective in treatment and recovery from substance use disorders and should be matched to a person's needs.

- Accreditation:** Has the program been licensed or certified by the state? Is the program currently in good standing in the state? Are the staff qualified? Good quality programs will have a good inspection record and both the program and the staff should have received training in treatment of substance use and mental disorders and be licensed or registered in the state. Does the program conduct satisfaction surveys? Can they show you how people using their services have rated them?
- Medication:** Does the program offer FDA approved medication for recovery from alcohol and opioid use disorders? At this point in time, there are no FDA approved medications to help to prevent relapse from other problem substances.
- Evidence-Based Practices:** Does the program offer treatments that have been proven to be effective in treating substance use disorders including medication management therapies, such as motivational therapy, cognitive behavioral therapy, drug and alcohol counseling, education about the risks of drug and alcohol use, and peer support? Does the program either provide or help to obtain medical care for physical health issues?
- Families:** Does the program include family members in the treatment process? Family members have an important role in understanding the impact of addiction on families and providing support.
- Supports:** Does the program provide ongoing treatment and supports beyond just treating the substance issues? For many people addiction is a chronic condition and requires ongoing medication and supports. Quality programs provide treatment for the long term which may include ongoing counseling or recovery coaching and support, and helps in meeting other basic needs like sober housing, employment supports, and continued family involvement.

Treatment Locators
Substance Use and Mental Health
Treatment Locator:
<https://findtreatment.samhsa.gov/>
1-800-662-HELP (4357)
1-800-487-4899 (TTY)

Alcohol Treatment Navigator:
<https://alcoholtreatment.niaaa.nih.gov/>

SAMHSA
Substance Abuse and Mental Health Services Administration

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.
1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TDD) • www.samhsa.gov

PEP18-TREATMENT-LOC

View and Discuss FDC Learning Academy Webinars



Each presentation is 30 minutes long and includes a Team Discussion Guide

Screening & Assessment

How Effective FDCs Match Service to Need

Parent-Child Relationships

Supporting Families in Family Drug Courts for Recovery, Reunification and Permanency

Visit @ www.familydrugcourts.blogspot.com

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*Improving
Family
Outcomes*

*Strengthening
Partnerships*

