

The Importance of Using A Family Centered Approach in Substance Use Treatment

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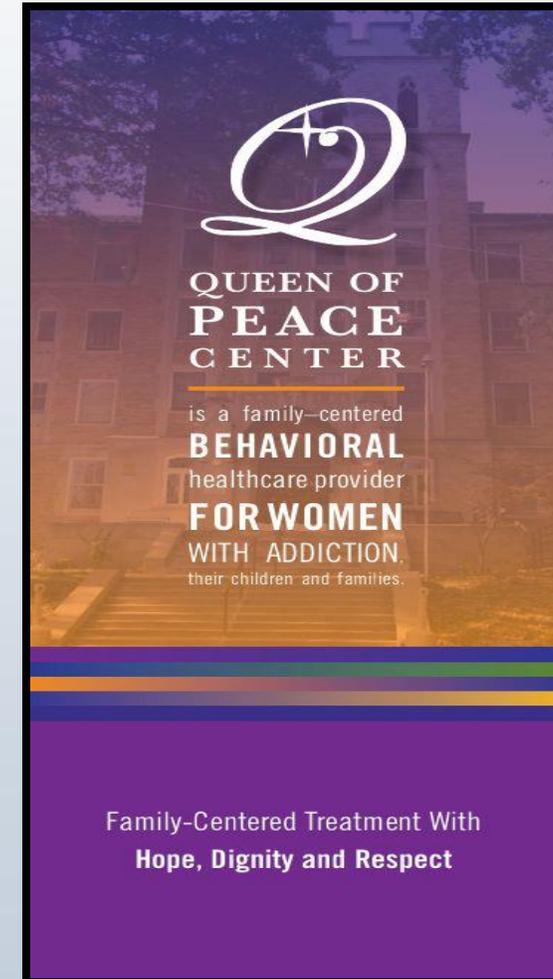
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Objectives

1. Identify the key elements of Family-Centered Treatment
2. Learn how the family unit is impacted by trauma and substance use
3. Learn at least 3 effective strategies in utilizing a Family Centered approach

Introduction

- Queen of Peace Center:
 - Serves women age 18 and older
 - Provide family centered treatment which includes individual counseling, therapy & psychoeducational groups, family therapy, child counseling, therapeutic child care and parenting education



Disease of Addiction

- Reward center of the brain
 - Motivation
 - Memory¹
- Those with substance use disorder are constantly seeking reward and/or relief from substances
- “Addiction occurs when repeated use of drugs changes how a person’s brain functions over time. The transition from voluntary to compulsive drug use reflects changes in the brain’s natural inhibition and reward centers that keep a person from exerting control over the impulse to use drugs even when there are negative consequences—the defining characteristic of addiction” – America Society of Addiction Medicine²

Heroin Epidemic

- “Opioids were involved in 33,091 deaths in 2015, and opioid overdoses have quadrupled since 1999.”⁵
- Heroin is the most dangerous substance actively being used
 - Increasing reports of it being mixed with Fentanyl
 - Fentanyl 50 to 100 times more powerful than morphine⁶
- As SUD research continues, it shows how heroin changes brain’s structure and activity
 - Reward system affected in the brain by SUD
- Medicated Assisted Treatments(MATs) in combination with counseling has been shown to be a successful route of treatment for those with opiate use disorder⁷

Multigenerational Factors

- Children with parents and family members with SUD have a significantly higher likelihood of developing substance use problems themselves⁸
- Adolescents at risk for future onset of substance use disorders show elevated response in the reward center of the brain⁹
- Risk taking behavior begins in adolescence.
 - Peer pressure, experimentation, family substance use
- “Approximately 6 million children younger than age 18 lived with at least one parent who was dependent on alcohol or an illicit drug during 2002”⁴

Risk Factor

- Adverse childhood experiences (ACE) predict possibilities of adult likelihood of substance use.
 - Examples include physical, sexual, emotional abuse, neglect, witnessing abuse in the home, substance misuse within the home, mental health illness in the home¹⁰
- These risk factors can be a contributing factor in underage drinking, alcohol use disorder and prescription drug use in adulthood

Protective Factors

- **Internal Protective Factors**

- Intelligence and easy temperament are factors that aid child in being able to adapt more to stressful home environments and inconsistencies from parental figures

- **External Protective Factors**

- Parenting that includes “warmth, consistency, age-appropriate expectations, praise for accomplishments & consistent routines and rules”¹⁰
- Interactions with peers
- Opportunity for physical exercise.

Impact of Maternal Substance Use on the Family

- Based on NSDUH data from 2011 and 2012, approximately 5.9 percent of pregnant women aged 15 to 44 were current illicit drug users
- Approximately 12% of children in this country live with a parent who is dependent on or abuses alcohol or other drugs (HHS, Substance Abuse and Mental Health Services Administration [SAMHSA], Office of Applied Studies, 2009)
- Research shows that children with parents who abuse alcohol or drugs are more likely to experience abuse or neglect than children in other households (Dube et al., 2001; Hanson et al., 2006)
- The National Survey of Child and Adolescent Well-Being (NSCAW) estimates that 61 percent of infants and 41 percent of older children in out-of-home care are from families with active alcohol or drug abuse (Wulczyn, Ernst, & Fisher, 2011)

Barriers to Accessing Substance Use Treatment for Mothers

- Lack of access to childcare
- Lack of family support
- Homelessness
- Services are not specific to pregnant or postpartum women

Family Centered Treatment

- Providing services for the whole family to make recovery possible; although the mother is the entry point, the family becomes the client
- Who defines family?

Core Principles of Family Centered Treatment

- Provides space for family healing
- Family members are actively engaged
- Respects individual and family choice
- Builds on family strengths
- Focus on prevention/early intervention for children
- Culturally responsive and trauma-informed
- Supported by peers/allies/recovery support services
- Recognizes family and community are essential sources of strength and support

ATTC Center of Excellence on Behavioral Health for Pregnant and Postpartum Women and Their Families. (2017)

Why Engage Children and Families in Substance Use Treatment?

- There is a focus on rebuilding life in the community
- Increased client and family engagement
- Promotion of recovery and well-being for the
- Address psychosocial and developmental needs of infant/children
- Increase client and family satisfaction
- Build family and community strengths (recovery capital)
- Clients are empowered to take responsibility for and guide their recovery

ATTC Center of Excellence on Behavioral Health for Pregnant and Postpartum Women and Their Families.
(2017)

Clinical Components of Family Centered Treatment

- Family Centered Assessment
- Parent Interventions
- Child Interventions
- Co-parenting interventions
- Family Interventions

Family Centered Assessments

- Who defines the family?

Parent Focused Interventions

- Parenting skills development
 - Harsh parenting effects
- Parental Stress
- Parenting with Love and Logic

Child-Focused Interventions

- Therapeutic services:
 - Early treatment supports
 - Assessments
 - Childcare
 - Child-centered therapeutic modalities
 - Play therapy
 - Art Therapy
 - Trauma-Focused Cognitive-Behavioral Therapy
 - Psychoeducation (developmentally appropriate!)
 - Case management



Family-Focused Interventions

- Parent/child attachment
- Staff modeling and support
 - Family Spirit
 - Love and Logic
- Family Therapy



(Burlew et al., 2013)

(Conners-Burrow et al., 2012)

(Werner, Young, Dennis, & Amatetti, 2007)

Engaging Fathers

- There are many stereotypes of fathers who need help parenting
- Men have often been viewed as dangerous to women in treatment
- Engaging men in Family Centered care is relatively new
- Engaging fathers is an essential component of new PPW SAMHSA grants
- According to ATTC, when men are absent or negatively involved, mother, father and child lose socially, psychologically and economically (2017)

Engaging Fathers

- Assess safety for mother and child
 - Active substance use of father
 - History of abuse
- Determine if group or individual format is most appropriate
- Develop co-parenting goals

Family-Centered Treatment: Barriers and Challenges

- Barriers and Challenges:
 - Physical space
 - Staff challenges
 - Parent attitudes
 - Rapport
 - Services needs
 - Children present during treatment
 - Family dynamics
 - Outcomes



(Werner, Young, Dennis, & Amatetti, 2007)

(Werner, Joffe, and Graham, 1999)

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