

Training for Effective Child Welfare Practice in Rural Communities



TECHNICAL ASSISTANCE SEMINAR COGNITIVE BEHAVIORAL THERAPY WITH SUBSTANCE ABUSING FAMILIES

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Adverse Childhood Experiences Study

Vincent J. Felitti, MD

The largest study of its kind ever done to
examine the health and social effects of
adverse childhood experiences
(n=17,000 adults; RR=70.5%)

ACE CATEGORIES AND OCCURRENCE RATE

1. RECURRENT AND SEVERE PHYSICAL
ABUSE (11%)
2. RECURRENT AND SEVERE
EMOTIONAL ABUSE (11%)
3. CONTACT SEXUAL ABUSE (22%)

**Cont-GROWING UP IN HOUSEHOLD
WITH:**

4. AN ALCOHOLIC OR DRUG-USER (25%)
5. A MEMBER BEING IMPRISONED (3%)
6. A MENTALLY ILL, CHRONICALLY DEPRESSED OR INSTITUTIONAL MEMBER (19%)
7. THE MOTHER BEING TREATED VIOLENTLY (12%)
8. BOTH BIOLOGICAL PARENTS NOT BEING PRESENT (22%)

ACE FINDINGS

- ACEs are common, although typically concealed and unrecognized
- ACEs still have a profound effect 50 years later
- ACEs are transformed from psychosocial experiences into organic disease, social malfunction and mental illness

ACE IMPACT

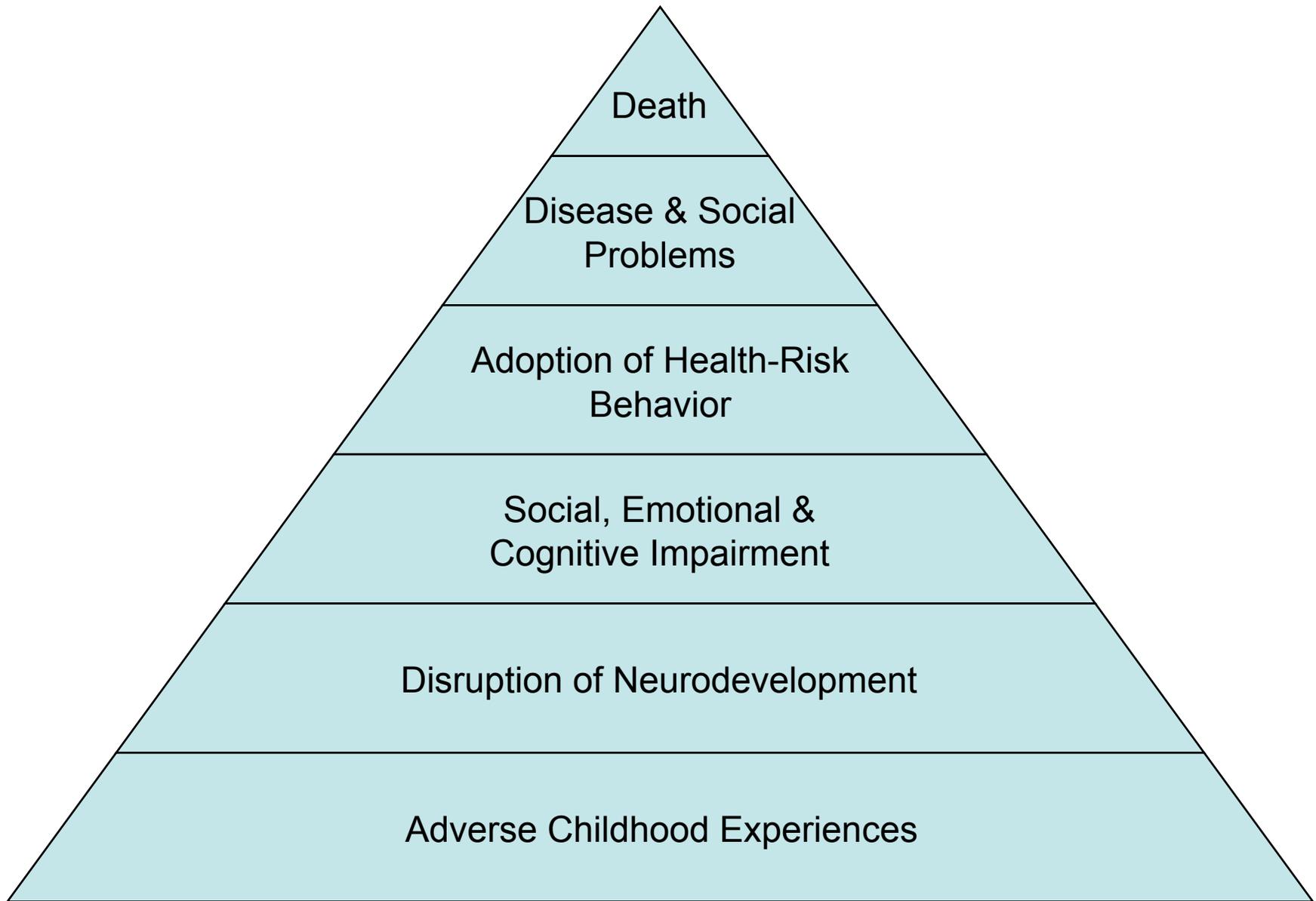
(One point for each category)

- 250% increased risk of an ACE 6 child being a current smoker
- 500% increased risk of an ACE 4 child being an alcoholic
- 460% increased risk of an ACE 4 child suffering from depression

POPULATION ATTRIBUTABLE RISK

(Per cent attributable to ACE)

- Alcoholism – 65%
- Drug Abuse – 50%
- IV Drug Abuse – 78%
- Current Depression – 54%
- Chronic Depression – 41%
- Sexual Assault – 62%
- Domestic Violence – 52%



THE ORIGINS OF ADDICTION

Vincent Felitte, MD

Kaiser Permanente Medical Care Program

“The major factor underlying addiction is adverse childhood experiences that have not healed with time and that are overwhelmingly concealed from awareness by shame, secrecy and social taboo.”

INTERVENTIONS

AND

TREATMENT

HARM REDUCTION



ASSESSMENT TOOLS

- ***Addiction Severity Index (ASI)***
- ***Trauma Symptom Checklist for Children (TSCC)(TSCYC)***
- ***Parent Stress Index (PSI)***





SUBSTANCE ABUSE TREATMENT

- Detox
- Neurotransmitter stabilization
- Treatment
 - Individual
 - Group
 - Family
- Aftercare
 - Support
 - Social skills
 - Employment skills



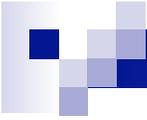
COGNITIVE-BEHAVIORAL THERAPY (CBT)

- Short-term
- Extensively evaluated
- Structured and goal-oriented
- Flexible
- Compatible with other treatments
- Encompasses common tools of substance abuse treatment



CRITICAL COMPONENTS OF CBT

- Functional analysis
- Skills training



CBT-FUNCTIONAL ANALYSIS

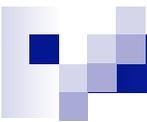
1. **Approaching Obstacles**

- ✓ *Reduce availability of drug*
- ✓ *Achieve brief periods of abstinence*
- ✓ *Recognize events that lead to relapse*
- ✓ *Tolerate periods of craving or emotional distress*
- ✓ *Recognize relationship between all substance use*
- ✓ *Recognize potential mental health issues*



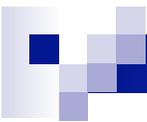
2. Skills and Strengths Assessment

- ✓ *Skills and strengths used during any period of abstinence*
- ✓ *Ability to maintain job or positive relationship during drug use*
- ✓ *Support system of non-drug users*
- ✓ *Use of time when not using or recovering from effects of use*
- ✓ *Highest level of functioning before use*
- ✓ *What brought them to treatment*
- ✓ *Level of motivation to reduce or stop use*



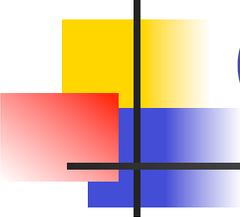
3. Determinants of Use

- *Use patterns*
- *Triggers*
- *Solo or social user*
- *Where do they obtain and use drugs*
- *How do they pay for drugs*
- *What circumstances were present when they began use and/or problematic use*
- *What roles, both positive and negative, does drug use play in their lives*



4. Relevant Domains

- ❑ **Social:** *with whom do they spend most of their time*
- ❑ **Environmental:** *cues for their drug use; i.e., time of day, alcohol, individuals*
- ❑ **Emotional:** *positive and negative affective states that precede use*
- ❑ **Cognitive:** *thoughts that precede use*
- ❑ **Physical:** *desires for relief from unpleasant physical states that precede use*

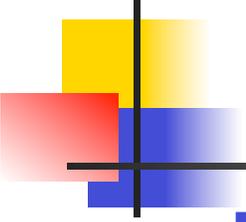


CBT – SKILLS TRAINING

Learning is a metaphor for treatment
Process:

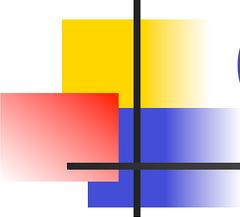
“Unlearn” old skills (you are very skilled)

“Learn” new skills (reframe their skills)



LEARNING STRATEGIES

- **MODELING** (*activity*)
 - Demonstrate new ways of responding
 - Role play new ways of responding
- **CONDITIONING**
 - Identify high risk situations and develop alternative response patterns
 - Practice positive reinforcers
 - Learn to recognize and avoid craving and use cues
- **PRACTICE**
 - Rehearsal
 - Homework
 - Repetition



CBT – TREATMENT TOOLS

- Trigger Chart
- Impulse Chart
- Responsibility Letters
- Contracting
- Autobiography
- Chaperone
- Rehearsal

RESOURCES

www.nida.nih.gov (National Institute on Drug Abuse)

www.brainmapping.org (UCLA)

www.uclaisap.org (UCLA)

nidanotes@masimax.com (NIDA newsletter)

www.zerotothree.com (Zero to Three)

www.childtrauma.org (Child Trauma Academy)

www.apsac.org (American Professional Society on the Abuse of Children)

www.safefromthestart.org (Safe from the Start)

<http://tfcbt.musc.edu/>