

Substance Use Disorders: Treatment, Recovery & Recommendations

Richmond Behavioral Health Authority

VIDEO CLIP

<https://youtu.be/HUngLgGRJpo>

Quiz on Drug Facts

- What is the most commonly abused drug?
- What are the most commonly abused prescription drugs?
- _____ and _____ is the deadliest combination of abused drugs.

Outline

- Introduction to Addiction
- Intervention & Treatment
- Recovery
- Personal Story
- Treatment & Recovery Support Programs

Drug Trends – Virginia

- **Cocaine:** Widely abused and available throughout Virginia. Powdered cocaine and crack cocaine are readily available in large urban population centers; crack continues to plague inner city settings.
- **Marijuana:** The most commonly abused drug in Virginia and widely prevalent throughout the entire Commonwealth.

Drug Trends – Virginia

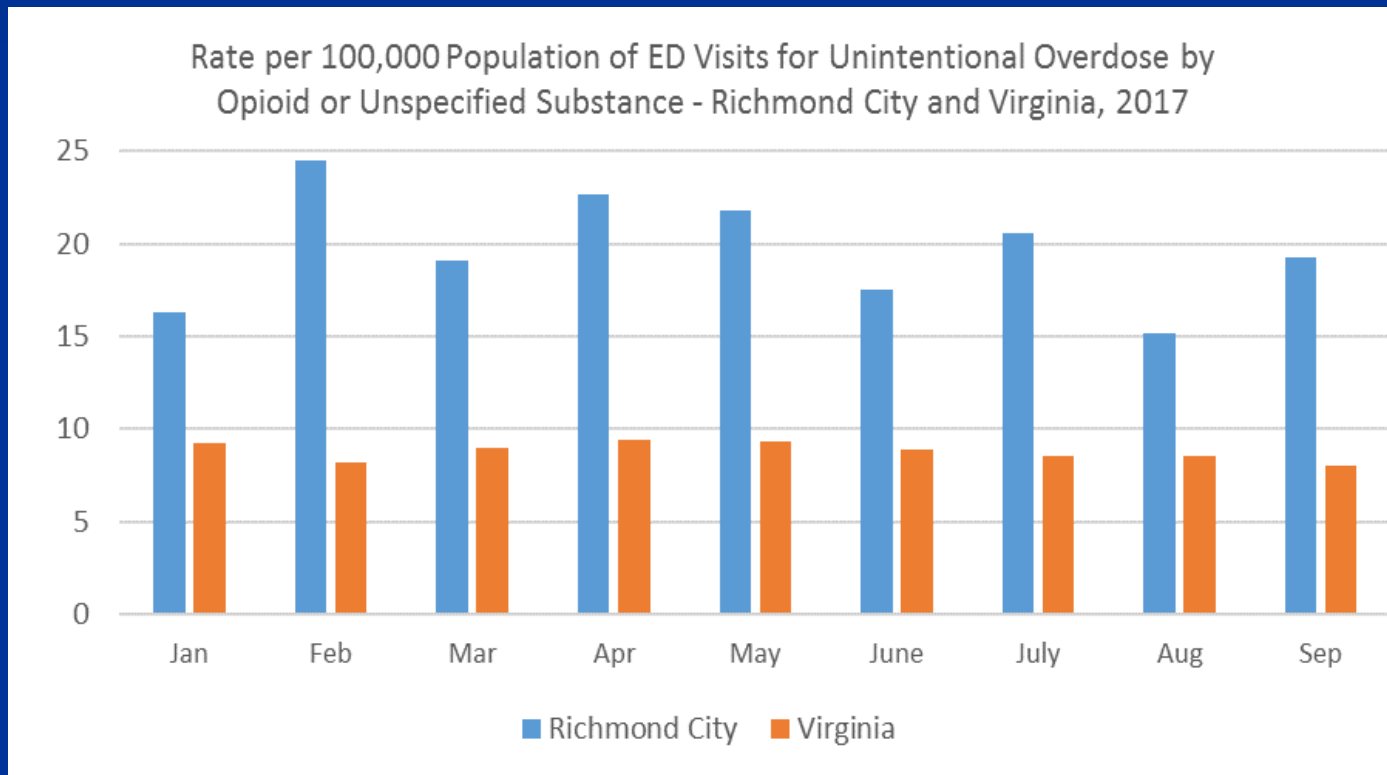
- **Heroin:** Heroin is widely available in Virginia. It is not only an inner city phenomenon, but has gained popularity among young, whites from upper middle class suburbs.
- **Prescription Drugs:** Use of OxyContin, and other prescription opiates, has been pervasive in Virginia's rural Southwestern counties for more than 10 years, and is the most commonly abused drug in the Western District of the Commonwealth. It's presence in Richmond as a drug of abuse is rapidly escalating .

Opioid Epidemic & Overdoses in Virginia & Richmond

- Since 2011, overdose deaths have increased dramatically. In 2016, the overdose mortality rate for fentanyl and prescription opioids was 30.4 and 9, respectively, up from 8.7 each in 2011.
- As of July 2017, among the 5 VDH health planning regions, Emergency Room (ER) visits for overdose by opioid or unspecified substance *decreased* in the Eastern, Southwest and Northern regions.
- ER visits *increased* in the Central region (by 32%) and Northwest region.
- By age group, the highest visit rate continues to be observed in those aged 25-34 years (3.9 per 100,000 population).

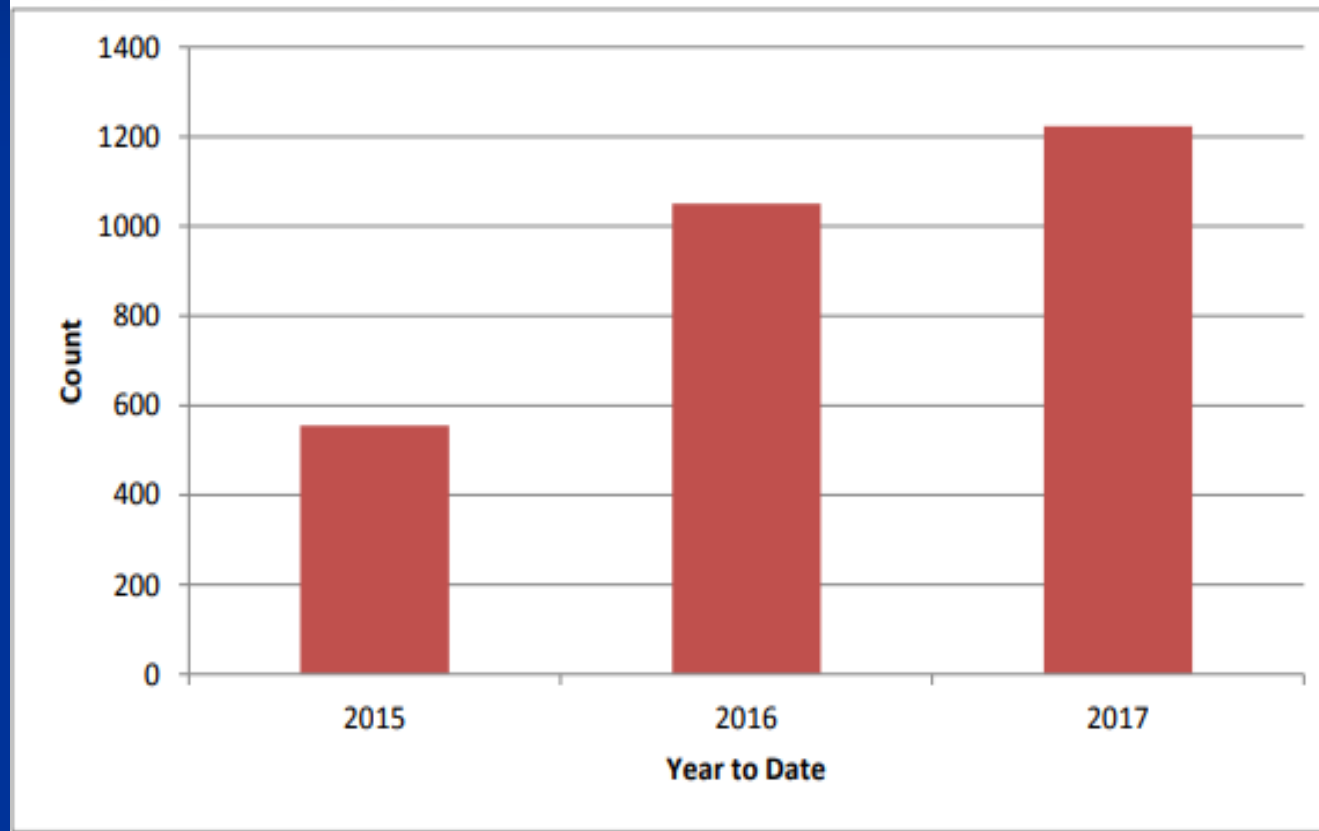
Opioid Epidemic & Overdoses in Virginia & Richmond

- The Central region observed the highest rate



Opioid Epidemic & Overdoses in Virginia & Richmond

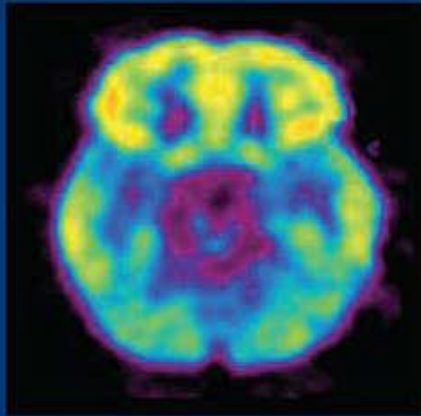
Figure 2B. Year-to-Date Count (January – September) of ED Visits for Unintentional Overdose by Heroin among Virginia Residents by Year.



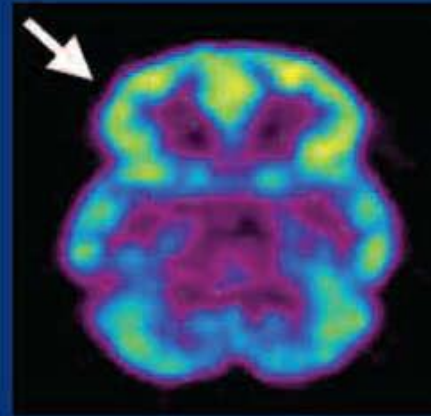
What is Addiction?

- National Institute on Drug Abuse (NIDA) defines addiction as a chronic, relapsing brain disease that is characterized by compulsive drug seeking and use, despite harmful consequences. It is considered a brain disease because drugs change the brain—they change its structure and how it works. These brain changes can be long-lasting, and can lead to the harmful behaviors seen in people who abuse drugs. Addiction is a lot like other diseases, such as heart disease. Both disrupt the normal, healthy functioning of the underlying organ, have serious harmful consequences, and are preventable and treatable, but if left untreated, can last a lifetime.

DECREASED BRAIN METABOLISM IN *PERSON WHO ABUSES DRUGS*



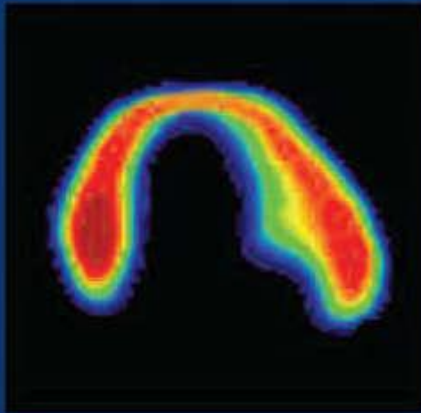
Healthy Brain



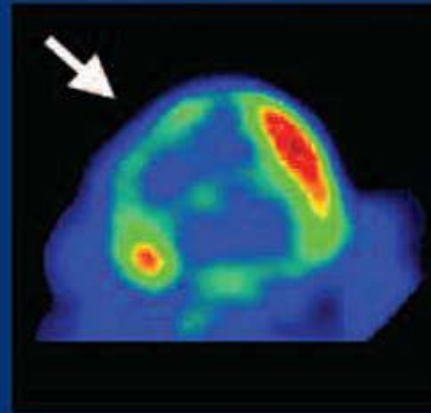
Diseased Brain/Cocaine Abuser



DECREASED HEART METABOLISM IN *HEART DISEASE PATIENT*



Healthy Heart



Diseased Heart

Myths About Addiction

1. Addicts are bad, crazy, or stupid.
2. Addiction is a willpower problem.
3. Addicts should be punished, not treated, for using drugs.
4. People addicted to one drug are addicted to all drugs.

** Adapted from Myths of Addiction. Carlton K. Erickson, Ph.D.,
University of Texas Addiction Science*

Myths About Addiction

5. Addicts cannot be treated with medications.
6. Addiction is treated behaviorally, so it must be a behavioral problem.
7. Alcoholics can stop drinking simply by attending AA meetings, so they can't have a brain disease.

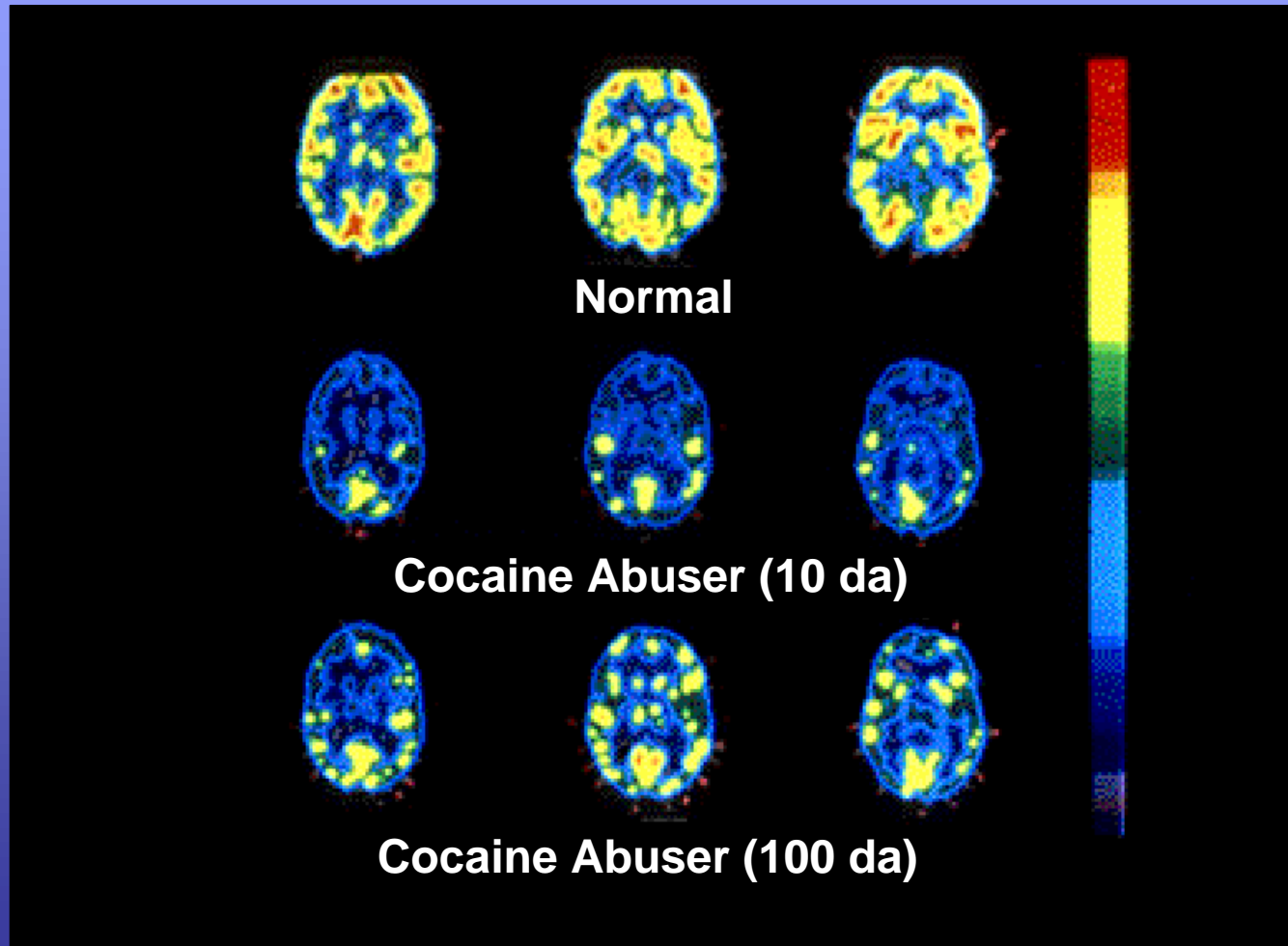
Why do people do drugs?

- To feel good
 - Intense feeling of pleasure
 - Initial euphoria
 - Feel powerful, self-confident
- To feel better
 - Self-medicate (depression, anxiety, stress management)
- To do better
 - Attempt to chemically enhance or improve cognitive or athletic performance
- Curiosity
 - Adolescents are particularly vulnerable to peer influence
 - Adolescents are more likely than adults to engage in risk behaviors to impress friends
 - Adolescents look for ways to express independence from parental and societal norms.
- With continued use, a person's ability to exert self-control can become seriously impaired.

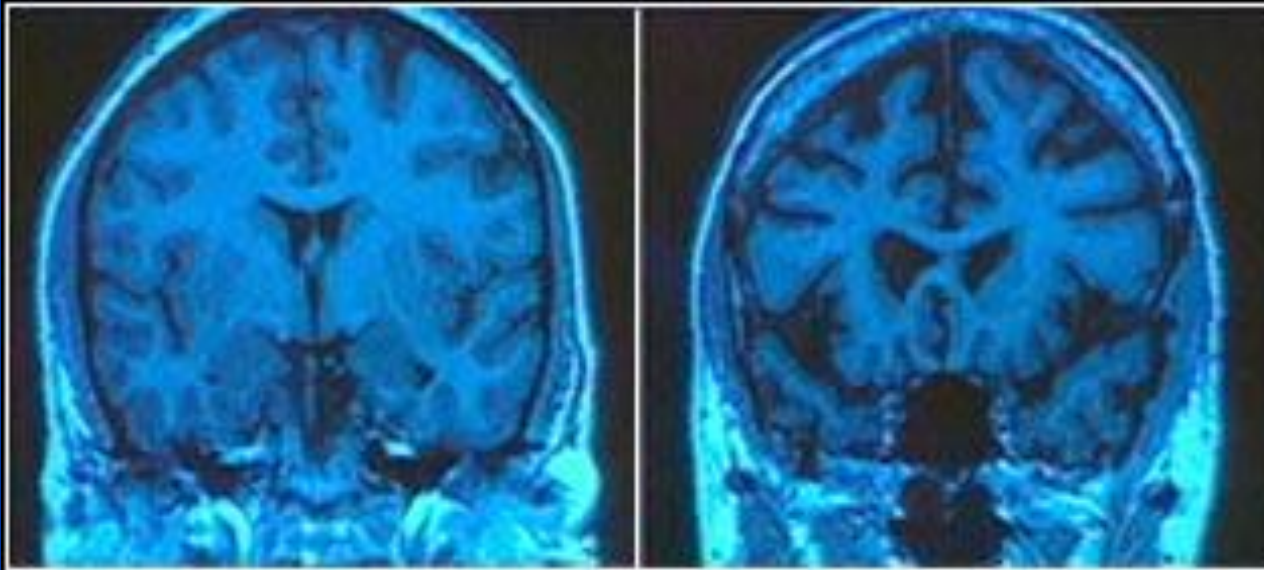
Why do people become addicted?

- Genetic predispositions
- Mental Illness
- Family Modeling
- Early Use of Drugs
- Method of Administration
- Social Environment
- Childhood Trauma

Your Brain After Drugs



Alcoholic Brain



Normal
43-year-old

Alcoholic
43-year-old

INTERVENTION

NIDA's Principles for Effective Drug Treatment

1. No single treatment is appropriate for all individuals.
2. Treatment needs to be **readily available**.
3. Effective treatment **attends to multiple needs** of the individual, not just his or her drug use.
4. An individual's treatment and **services plan must be assessed continually and modified as necessary** to ensure that the plan meets the person's changing needs.

NIDA's Principles for Effective Drug Treatment

5. Remaining in **treatment for an adequate period of time** is critical for treatment effectiveness.
6. **Individual or group counseling and other behavioral therapies are critical components** of effective treatment for addiction.
7. **Medications are an important element of treatment** for many patients, especially when combined with counseling and other behavioral therapies.

NIDA's Principles for Effective Drug Treatment

8. Addicted or drug-abusing **individuals with coexisting mental disorders should have both disorders treated** in an integrated way.
9. **Medical detoxification is only the first stage** of addiction treatment and by itself does little to change long-term drug use.
10. **Treatment does not need to be voluntary** to be effective.

NIDA's Principles for Effective Drug Treatment

11. Possible **drug use during treatment must be monitored** continuously.
12. Treatment programs should provide **assessment for HIV/AIDS, hepatitis B and C, tuberculosis and other infectious diseases**, and counseling to help patients modify or change behaviors that place themselves or others at risk of infection.
13. **Recovery from drug addiction can be a long-term process** and frequently requires multiple episodes of treatment.

Treatment & Recovery

- **Tailoring services to fit the needs of the individual** is an important part of effective drug treatment.
- Studies demonstrate that the **right mix of behavioral therapy, possible medication and personal support** can help an addicted person navigate the path to recovery.
- Long-term **recovery requires ongoing support and health maintenance strategies.**

Treatment & Recovery

Treatment is:

- **Targeted for acute episodes** of addiction that need to be interrupted
- **Generally geared toward immediate stabilization of functioning**
- **Teaching skills that will be required later** to maintain sobriety and achieve recovery
- **Multiple episodes of treatment are frequently required** before stable recovery is achieved

Treatment & Recovery

Recovery:

- Involves **significant *lifestyle changes across multiple areas* of one's life**; changes in people, places and things
- ***May begin* during treatment or after critical life events**
- Is generally **achieved over a long period of time** and may have a variable course
- **Support groups are readily available** in the community

What Leads to Relapse?

- Drug-related **“prompts”** or **“reminder”** cues (people, places, sights, sounds, smells, drug thoughts or drug dreams) also called **“triggers”**
- Elevated or prolonged **stress**
- **Negative affect** (mood) or situations eliciting strong negative affect
- **Positive mood** states or **celebrations**
- **“Sampling”** the drug itself, even in very small amounts, or **“testing”** oneself

‘In My Own Words’

Treatment & Recovery Support Resources in Richmond

- **Richmond Behavioral Health Authority (RBHA):** Case management; Outpatient substance use disorder treatment; Residential for men, women, and women with children; Withdrawal management; Primary Care; Referrals to other services; and mental health treatment services
- **Family Counseling Center for Recovery (FCCR):** Substance use disorder treatment services
- **Human Resources, Incorporated (HRI):** Outpatient medication-assisted treatment services for opiate addiction

Treatment & Recovery Support Resources in Richmond

- **Richmond Treatment Center (RTC):** Outpatient medication-assisted treatment services for opiate addiction
- **The Healing Place:** Social detoxification unit and residential, peer-based recovery services
- **SAARA:** Outpatient peer support; recovery services; and drop-in center
- **Alcoholics Anonymous (AA)**
- **Narcotics Anonymous (NA)**

How Can You Help?

- Unconditional Positive regard
 - Unconditional positive regard is not about liking someone. What it means is that you respect the person as a human being with agency to choose how to respond to their situation and that no matter how dangerous or dysfunctional they seem to be they are doing their best. (Steven Joseph, October 2012).

*When you criticise me,
I intuitively dig in
to defend myself,
however when
you accept me like I am,
I SUDDENLY AM WILLING TO CHANGE.*

-CARL ROGERS

When to Intervene

- Some users may be very clearly in need of help while others may be more subtle.
- It never hurts to offer the help, even if the individual denies that there is a problem
- Those who may be in need of help include:
 - Multiple DUI/DIP/DV
 - Possession/paraphernalia
 - Shoplifting, grand larceny, forgery, uttering, etc. may be more indirect indication that someone has substance use disorder

How to Help

- For some problem drug users, street encounters with policing personnel were frequent. While these could be a source of friction and antagonism, the regularity of this contact also represents an opportunity.
- At the most basic level, street ‘interventions’ could simply involve providing addresses or contact details of support agencies.

How to Help cont.

- Offer information, resources, and opportunities to get help
- Speak openly and without judgment
- Provide information without advice giving or lecturing

Do you think you or someone you know may have a problem?

- Have you ever **felt you should cut down** on your drinking or drug use?
- Have you **tried to cut back, but couldn't**?
- Do you **ever lie about how much or how often you drink** or use drugs?
- Have your **friends or family members expressed concern** about your alcohol or drug use?
- Do you ever **feel bad, guilty, or ashamed about your drinking** or drug use?

Do you think you or someone you know may have a problem?

- On **more than one occasion**, have you **done or said something** while drunk or high that you **later regret**?
- Have you **ever blacked out** from drinking or drug use?
- Has your **alcohol or drug use caused problems in your relationships**?
- Has your **alcohol or drug use gotten you into trouble at work or with the law**?

Thank You!

QUESTIONS?