



## Overview of Chemical Addictions Treatment

Psychology 470

Introduction to Chemical Addictions

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### Background

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- Treatment approaches have been around for many years
- Hippocrates
  - Used vegetarianism, sexual abstinence, meditation
  - Was not very successful
- Middle ages
  - Prayer
    - By the person
    - Others for the person
  - Blame witches

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### Other techniques

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- Abstinence
- Prohibition –ban the substance
  - Caused the Opium Wars in China
- Elixirs
  - Cocaine
  - Alcohol mixed with morphine (Laudanum)
    - One of the first real anesthetics
  - Others

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### Hospitals

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- Often alcoholics (later morphine addicts) were placed in mental hospitals
  - Was considered a mental disease
    - Withdrawal symptoms
    - Loss of control
    - Ignoring family responsibilities
    - others
  - Treat it like one
    - Focus – Get the person to stop drinking

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### Problem

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- No real formalized treatment
- No real addictions treatment counselors
- Nothing really worked from a treatment standpoint
- Alternative
  - Ban the substance
  - Harrison Narcotic Act 1914

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### Issue

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- Base line of comparison
- Some individuals having mental disorders recover on their own **WITHOUT TREATMENT**
- Called Spontaneous Remission
  - Occurs in medicine (cancer), mental illnesses (schizophrenia), and addictions
    - Wake up, see a flower or a sunrise, and your problem stops
  - Addictions – 30%

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### Consequently

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- For any treatment program to be called successful, they must get a significantly better success rate than spontaneous remission (30%).
- Treatment success also cannot be measured immediately following treatment
  - Need at least one year of follow-up to determine success
  - Need ongoing evaluation

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### Question – What is Success?

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- For some – Only abstinence
- Others – Reduction of use
- Still others – Social use (not experiencing bingeing or loss of control)
- And Others - Use but using harm reduction measures
  - Clean needles

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### Who Provides Treatment and Gets Paid

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- Anyone
- Only persons who have experienced the addiction
  - Only an addict can help an addict
- Persons with some basic training in addictions counseling
- Persons with a certification (CADC)
- Persons with a Bachelors Degree plus training
- Persons with a Master's Degree plus training
- Persons with a Doctoral Degree

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### Problems

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1. Currently, any of these groups can get payments and grants to work with addicts
  - Missions, churches, outreach centers
2. Many treatment centers do not follow up with their clients to determine success rates
  - The program model becomes more important than client success.
  - Do not deviate from the model
    - If so, you will not be working here
3. Result – Lots of programs out there that have success rates as good as spontaneous recovery

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### Degree

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- College degrees give you a base set of knowledge.
  - Teaches you how to think
  - Teaches you how to evaluate data
  - Teaches you how to understand research and read the data
  - Makes you question – Is this model a good model

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### Example – Primal Scream Therapy

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- Use for depression
- Feel depressed
  - Go outside and scream about the issues
  - Makes you feel better
- Problem
  - Does not solve the depression
  - Does not resolve the issues underlying the depression
  - Wakes up the neighborhood
  - Gets law enforcement involved for disturbing the peace

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### Need to Evaluate the Model You are Using

- Does it change behavior or some cognitive aspect
- Does the model have a good success rate for addictions treatment
- Do aspects of the model work, but other parts need improved
- CSAT – Use best practices models

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### Training

- Paraprofessional Training
  - Includes classes or workshops
  - Includes the development of basic skills
- Certification
  - Qualifies you to use the skills in a formalized setting

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### Bachelor's Training

- Still part of paraprofessional training
- Have more knowledge related to the theoretical models you will be using
- Have better knowledge of the strengths and weaknesses of each model
- Does not include formalized training in particular models of therapy
- Still need specific training in the area you will be working in – addictions, public health, social work.
- Certification - Allows you to work in a formalized setting
- Increases your marketability

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### Master's

- Is the professionalization degree of the counseling field
- Is more specialized than bachelor's degree persons
- Teaches you specific skill sets
- Teaches you how to use specific therapy models
  - Good programs also provide practice using those skills
- Allows you to become certified in using these counseling techniques
- Still need specific training (usually on the job)

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### Doctoral Counseling / Psychology Degrees

- Provides you with significantly more training in counseling techniques
- Know the theoretical aspects of the therapeutic models and how to use them appropriately
- Have been supervised using them for at least 1-2 years
- Have been on a year-long internship where you were supervised using the models and given feedback (maybe a post doctoral fellowship too)
- Need to practice additional hours under the supervision of another counselor for 1-2 years
- Need to take a national exam
- May still need additional training in the specific area

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### Point

- Bachelors level counselors (and less) have considerably less training, knowledge, and skill sets than masters level counselors
- Doctoral level counselors have significantly more training and knowledge than masters level students
- Both groups may not have specific knowledge about addictions than bachelors level counselors
  - But have more knowledge of using a variety of therapeutic techniques.

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### Experience Does NOT Equal Training

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- One could have been an addict for many years. However, that experience does not provide the training or knowledge in therapeutic techniques to help others
  - May help some, but may inhibit or even harm others

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### Treatment Models

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- Many types of Models
- Biological Models
  - Drug interventions
  - Drug therapies
- Psychological Models
  - Psychoanalytic Models
  - Classical Conditioning
    - Aversion
  - Operant Conditioning
    - Therapeutic communities
    - Contingency management

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### Psychological Models Cont.

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- Cognitive Models
  - Cognitive Behavioral Change Models
  - Motivational Interviewing

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### Other Models

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- Sociological Models
  - Economic Models
  - Enforcement Models
    - Drug Court
- Family Systems Models
- 12 Step Models

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### Misc. Variables

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- Cost
  - Managed care issues
- Quality of care
- Who provides treatment
  - Addictions counselors
  - DOC counselors
  - Physicians
  - Clergy

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### Components of Comprehensive Drug Addiction Treatment

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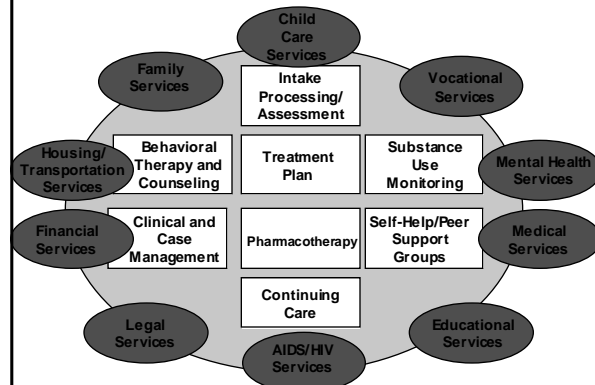
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### Must Match Treatment to Patient Needs

- No single treatment is appropriate for all individuals.
- Must attend to multiple needs of the user
  - Medical
  - Legal
  - Social
  - Vocational
  - Others

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### Treatment Choices



### Treatment Duration and Issues

- Treatment depends on
  - Patient needs
  - Level of abuse
  - Treatment models
- Use ASAM criteria to place clients
  - Treatment may be only educational
  - Treatment may require intensive care and around the clock monitoring

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### Duration of Treatment

- Depends on patient problems/needs
- Less than 90 days is of limited/no effectiveness for residential/outpatient setting
- A minimum of 12 months is required for methadone maintenance
- Longer treatment is often indicated

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### Motivation to Enter / Sustain Treatment

- Effective treatment need not be voluntary
- Sanctions/enticements (family, employer, criminal justice system) can increase treatment entry/retention
- Treatment outcomes are similar for those who enter treatment under legal pressure vs. voluntary

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### Medical Detoxification

- Detoxification safely manages the physical symptoms of withdrawal
- Only first stage of addiction treatment
- Alone, does little to change long-term drug use

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### Therapy Techniques

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- Motivational interviewing
- Confrontational techniques
- Cognitive-Behavioral techniques
- Rational Emotive Therapy
- Family Therapy
- Case management

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### May Involve Outside Groups

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- Probation / Parole
- Department of Health and Welfare
  - Child Services
  - Family Services
- Department of Public Health
- Job Services
- Other Counselors
- Others

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### Self Help Groups

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- Many types
  - AA, NA, RA
- Is not treatment
  - Can effectively help individuals stop using
- Is usually used in combination with treatment models
- Can be effective if done well
- Can be problematic if not done well

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### HIV/AIDS/TB/STDs

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- Major problem
- Often occurs in IDUs
  - Then spread it to spouse or other users
  - Is a major route of spread into the heterosexual population in the US
- Is becoming a crisis in the Far East Eastern Europe and Russia
- NO CURE FOR HIV
  - Many drugs are becoming ineffective
- Hepatitis C is also becoming a problem as well

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### HIV/AIDS, Hepatitis and Other Infectious Diseases

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- Drug treatment is disease prevention
- Drug treatment reduces likelihood of HIV infection by 6 fold in injecting drug users
- Drug treatment presents opportunities for screening, counseling, and referral

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### BBP Testing

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- Past, was optional
- Today, If an IDU, is not an option.
  - Over 40 percent of people with HIV do not know they have it
- If client is engaging in other high-risk behaviors, should also test.

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### ABPs

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- If suspect of TB or other ABPs, have them get tested

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### Effectiveness of Treatment

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- Goal of treatment is to return to productive functioning
- Treatment reduced drug use by 40-60%
- Treatment reduces crime by 40-60%
- Treatment increases employment prospects by 40%
- Drug treatment is as successful as treatment of diabetes, asthma, and hypertension
- Drug courts with active monitoring are also effective

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### Cost-Effectiveness of Drug Treatment

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- Treatment is less expensive than not treating or incarceration (1 yr methadone maintenance = \$4,700 vs. \$18,400 for imprisonment)
- Every \$1 invested in treatment yields up to \$7 in reduced crime-related costs
- Savings can exceed costs by 12:1 when health care costs are included
- Reduced interpersonal conflicts
- Improved workplace productivity
- Fewer drug-related accidents

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### Conclusion

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- Substance use, abuse, and dependence cause a lot of problems
- Treatment can be effective in stopping use

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### Conclusions

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- Many different types of models
- Lots of different variables to consider when choosing the model to use
- Also needs to be cost effective

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