

Addressing Barriers to Adolescents Seeking Substance Use Treatment

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Opioid
Response
Network



Working with communities. Contact the Opioid Response Network

✧ The SAMHSA-funded *Opioid Response Network (ORN)* assists states, organizations and individuals by providing the resources and technical assistance they need locally to address the opioid crisis and stimulant use.

✧ Technical assistance is available to support the evidence-based prevention, treatment and recovery of opioid use disorders and stimulant use disorders.

✧ The *ORN* provides local, experienced consultants in prevention, treatment and recovery to communities and organizations to help address this opioid crisis and stimulant use.

✧ *ORN* accepts requests for education and training.

✧ Each state/territory has a designated team, led by a regional Technology Transfer Specialist (TTS), who is an expert in implementing evidence-based practices.



Visit www.OpioidResponseNetwork.org



To ask questions or submit a request for technical assistance:



Email orn@aaap.org



Call 401-270-5900



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Disclosures

✦ I have no ACCME conflicts of interest



Learning Objective

- ✦ Describe strategies that providers can take to increase youth engagement in substance use treatment



Pre-Test Questions

1. What percentage of adolescents with a substance use disorder receive substance use treatment during adolescence?
 - a. 5%
 - b. 15%
 - c. 30%
 - d. 50%
2. The following term is an example of non-stigmatizing language
 - a. Addict
 - b. Substance abuser
 - c. Junkie
 - d. Person with a substance use disorder



Pre-Test Questions

3. In a study of primary care providers that compared the provider's clinical impression of an adolescent's substance use with structured interviews assessing adolescent substance use, primary care providers identified what percentage of adolescents with a substance use disorder mild?

- a. 10%
- b. 20%
- c. 50%
- d. 80%

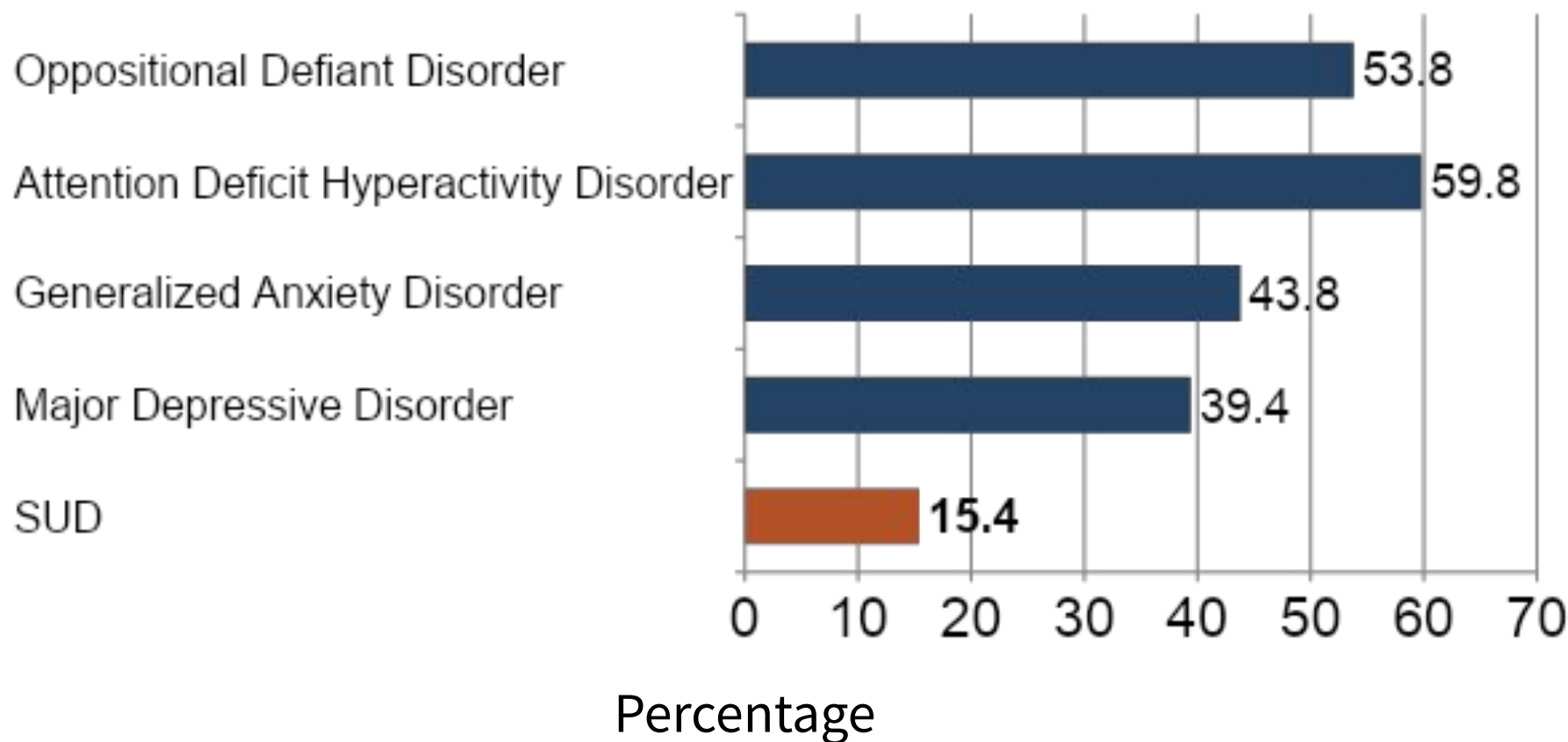
4. What percentage of adults with a substance use disorder have a history of 4 or more adverse childhood events?

- a. 23%
- b. 45%
- c. 64%
- d. 84%

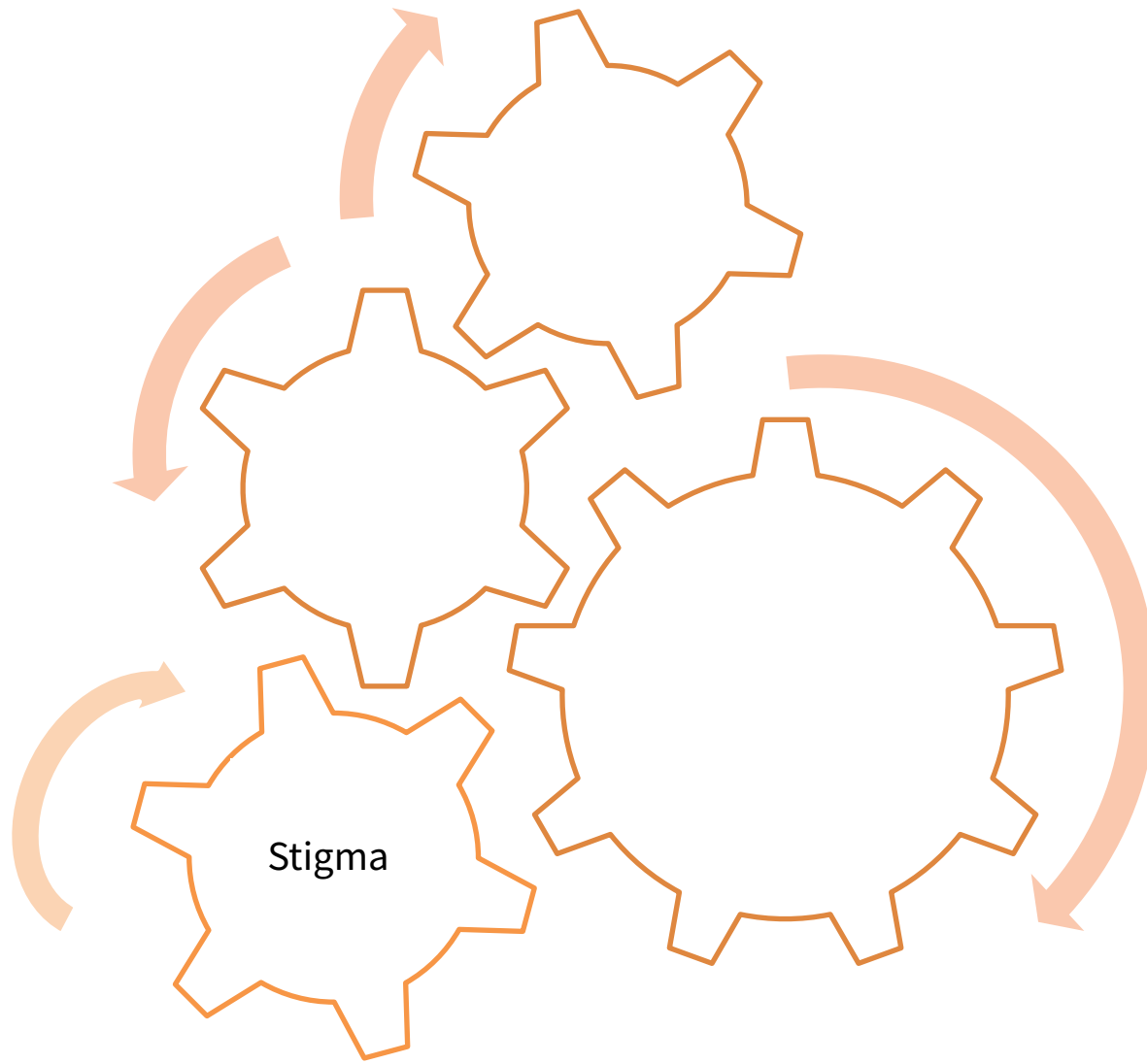


Most adolescents with a Substance Use Disorder (SUD) do not receive treatment

Lifetime Service Utilization



Barriers to Substance Use Treatment





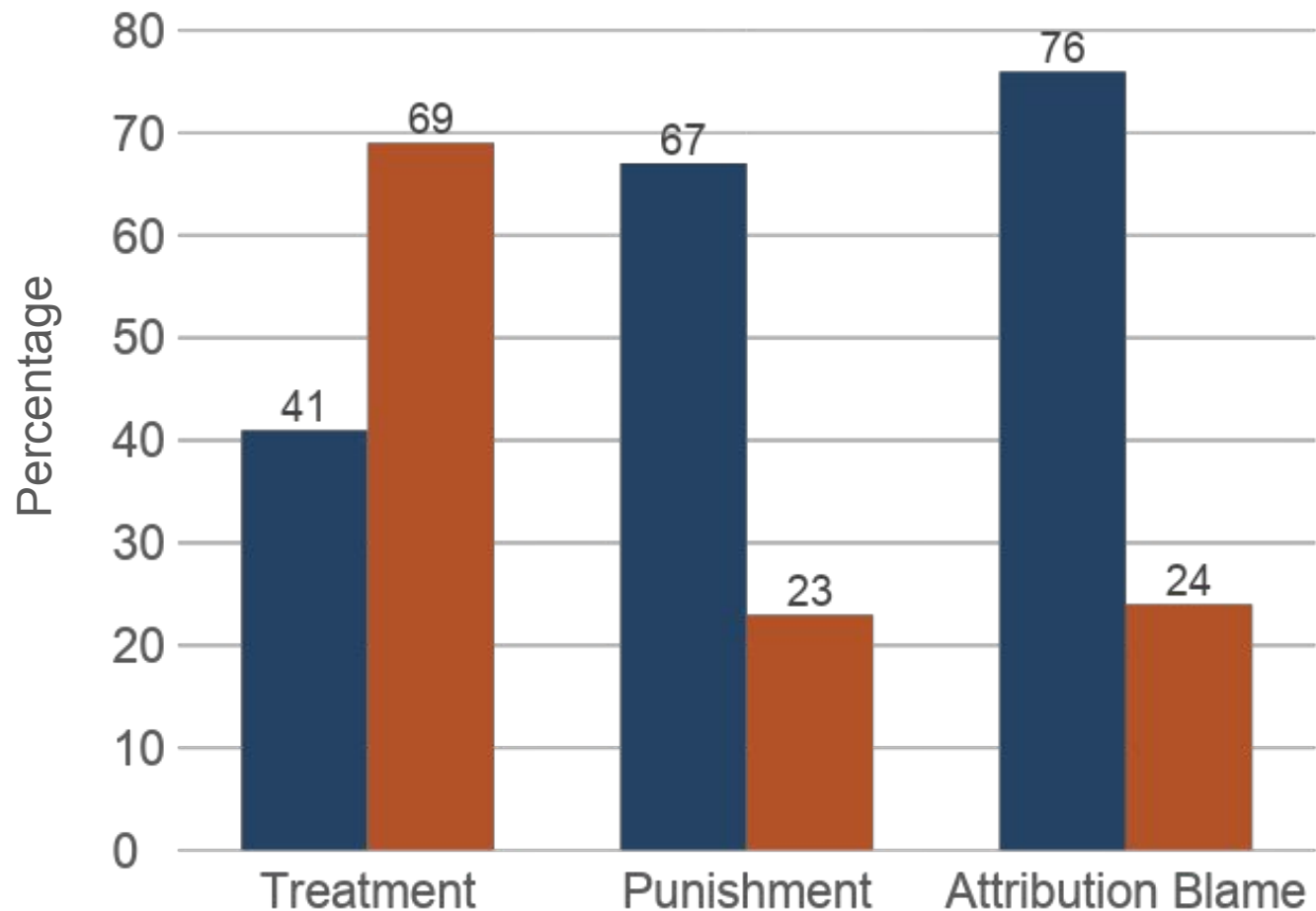
Stigma

Stigma associated with labels to describe an individual who is using drugs and alcohol

“Substance Abuser”

VS

“Having a substance use disorder”



Preferred Language— Words Matter

Use....	Instead of....	Because....
Person with a substance use disorder	Addict User Substance or drug abuser Junkie	Using person-first language shows that SUD is an illness Using these words shows that a person with a SUD “has” a problem/illness, rather than “is” the problem
Person in recovery or person who previously used drugs	Former addict Reformed addict	



Preferred Language— Words Matter

Use....	Instead of....	Because....
Substance use disorder Drug addiction	Habit	“Habit” implies that a person is choosing to use substances or can choose to stop. Describing SUD as a habit makes the illness seem less serious than it is
Medication for treatment for opioid use disorders (MOUD) Medications for OUD	Replacement therapy Medication assisted therapy (MAT)	MAT implies that medication should have a supplemental or temporary role in treatment when medication is a critical tool that is central to many patient’s treatment plans



Words Matter for Families Too

- ✦ When caring for a loved one with a substance use disorder, caregivers and/or partners are sometimes referred to as “codependent” or “enabling”
- ✦ These terms **pathologize a response to stress** and providers should be careful to not blame family members for an individual’s substance use/use disorder





Substance Use is Not Identified As a Problem

Systematic Screening for Substance Use is Necessary

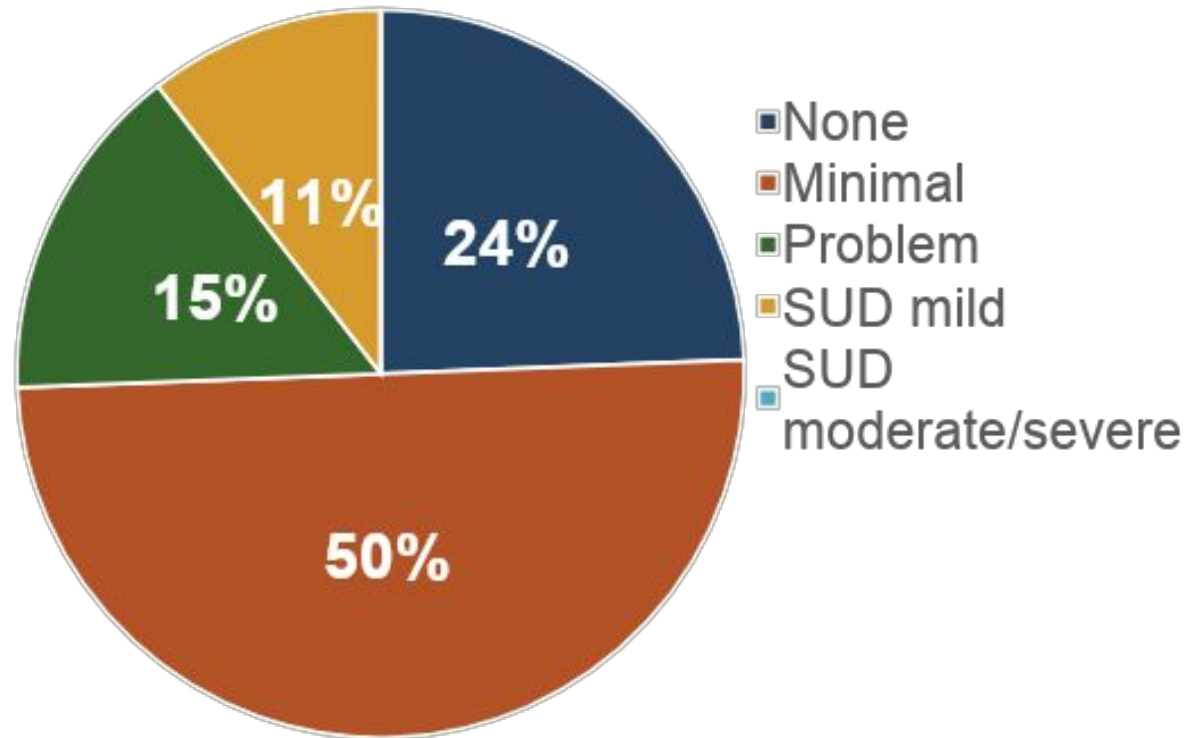


- ✦ Adolescents, and sometimes their parents, do not think their substance use is a problem, and therefore they don't bring it up as a concern



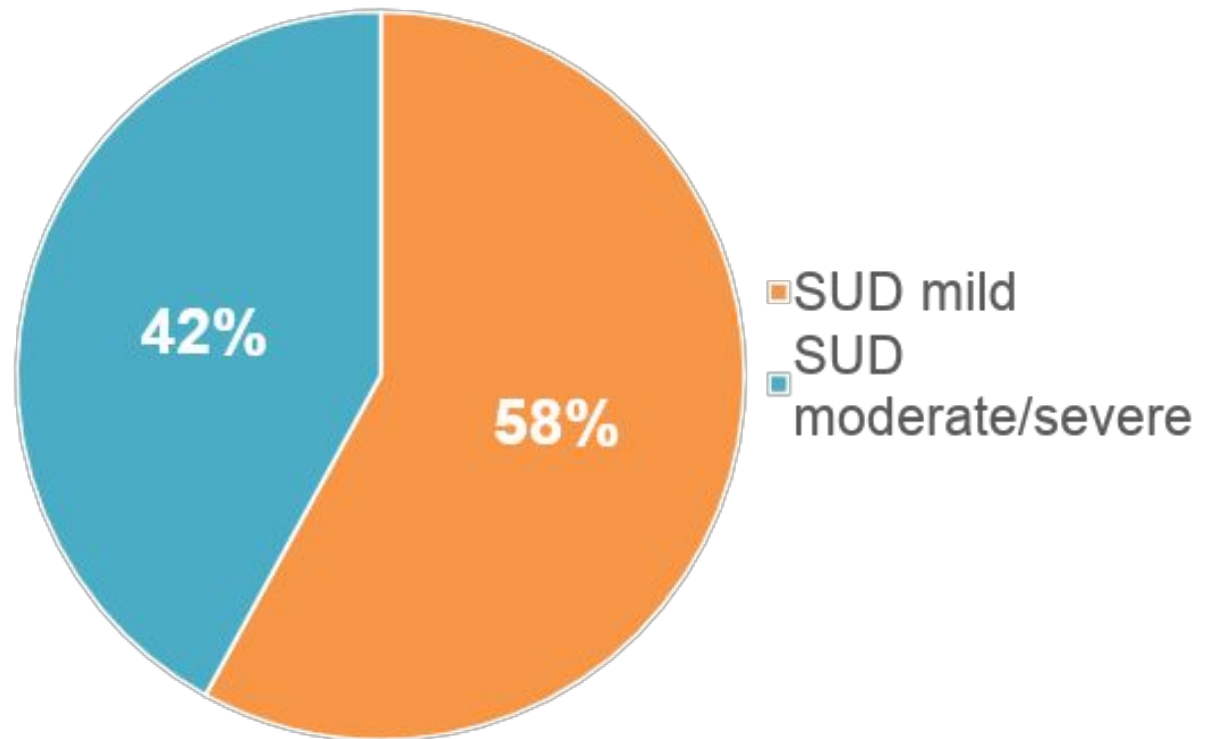
Systematic Screening for Substance Use is Necessary

**Primary
care
provider's
clinical
impression**



Systematic Screening for Substance Use is Necessary

Structured Interview with Adolescents



Systematic Screening for Substance Use is Necessary

- ✧ **Using their *clinical impression* primary care providers only identified:**
 - **20% of adolescents with a SUD mild**
 - **0% of the adolescents with a SUD moderate to severe**





**An adolescent
won't attend
treatment—*they
don't think they
have a problem
with substance use***

Stay Patient Centered



- ✧ The overall goal is to get the patient to come back!
- ✧ **Stay patient-centered and engage them around their concerns**
- ✧ Patients can have waxing/waning motivation to change



Caregiver Involvement

- ✧ Caregivers can play an active and important role in:
 - Encouraging treatment engagement
 - Monitoring youth over time
 - Helping youth define their recovery pathway and a recovery community
 - Engage in additional treatment if recurrence of symptoms occur



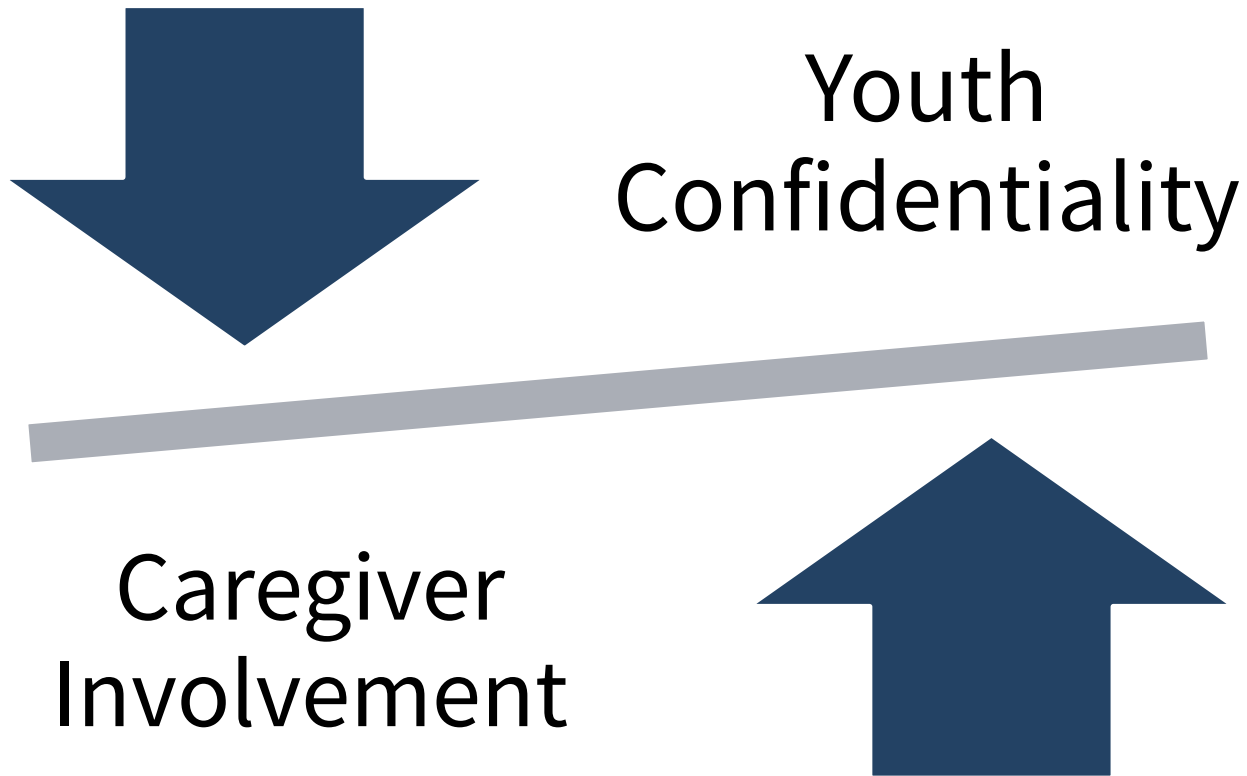
Caregiver Involvement

**Youth:
“This is
confidenti
al right?”**

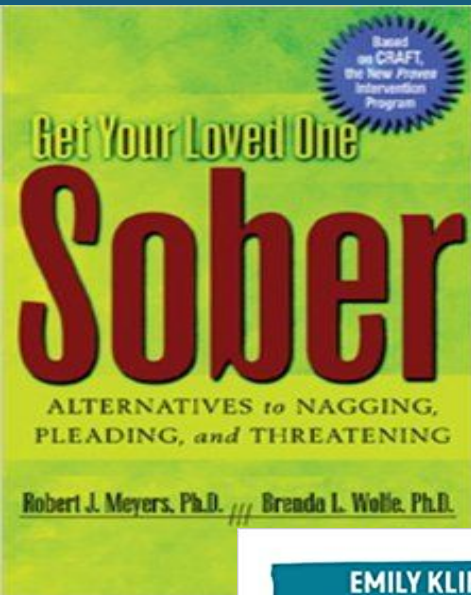
- ✦ ~~“What you say will remain confidential unless I am concerned that you are at risk to harm yourself or other people.”~~
- ✦ “If I am concerned about your safety, I will talk with you about involving other people, like your caregiver, who can help provide you with support. We would decide together how to do this.”



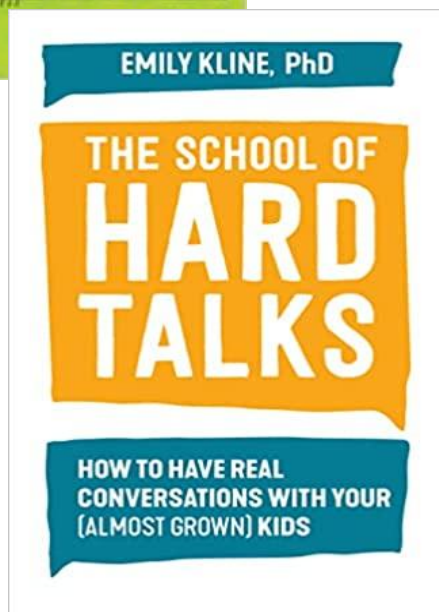
Caregiver Involvement



Caregiver Involvement



- ✧ Support specifically for caregivers
 - Community Reinforcement and Family Training
 - Motivational Interviewing for Loved Ones (MILO)
 - Partnership to End Addiction (drugfree.org)



- Caregivers can have waxing/waning motivation to change



If Caregiver Involvement is Contraindicated

✦ Youth can consent to SUD treatment

- Maine Revised Statutes, Title 22; Chapter 260: Consent of Minors for Health Services: “*a minor may consent to treatment for substance use disorder or for emotional or psychological problems*”
 - Minor is defined as <18 years of age
 - No lower age is defined.

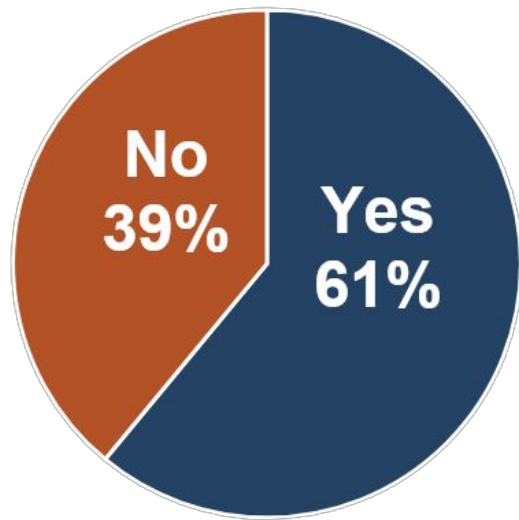




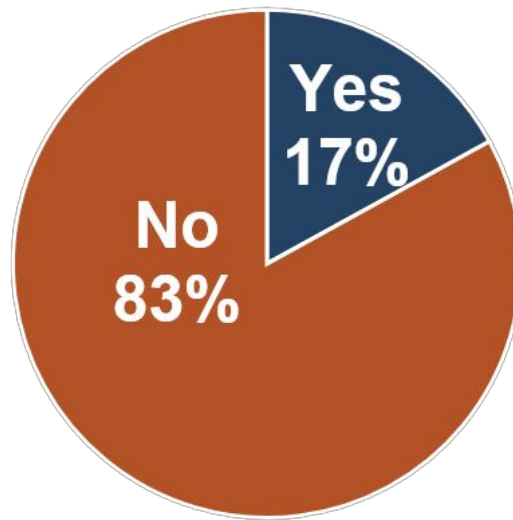
**An adolescent
won't attend
treatment—*they*
are/have
experienced
significant
*trauma***

Adverse childhood events (ACE) are common among adults with a SUD

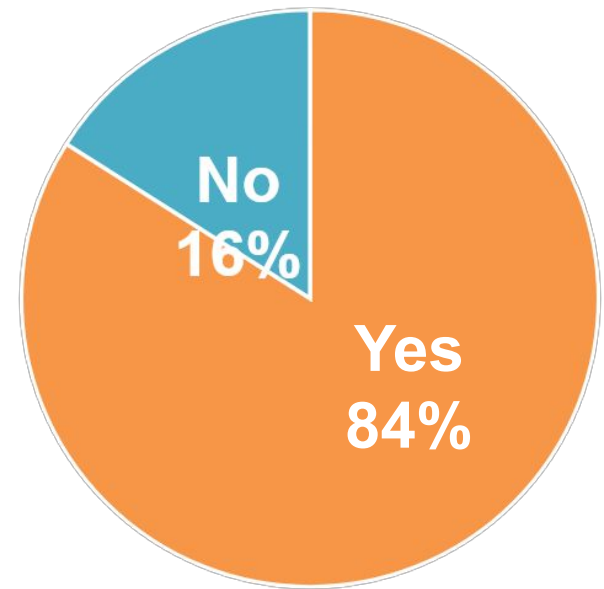
Adults with 1+ ACE



Adults with 4+ ACE



Adults with SUD with 4+ ACE



Trauma Informed Treatment

- ✦ Practice considerations to ↑ **engagement**:
 - Develop trust over time
 - Provide care in an unhurried fashion
 - Talk about procedures before doing them
 - Validate and normalize concerns
 - Provide choices, if possible, to help patients retain a sense of autonomy



Trauma Informed Treatment

- ✦ Practice considerations to ↓ **risk of additional trauma exposure:**
 - Be mindful when gathering collateral information and including supports in care
 - Address housing and financial circumstances that increase vulnerability to victimization
 - Psychoeducation on healthy relationships



Trauma Informed Treatment

- ✦ Practice considerations **YOU need to initiate an assessment for trauma history:**
 - The burden of trauma disclosure should not be placed on the youth
 - Brief upset may occur for some youth but this is not counterproductive



Addressing Barriers to Substance Use Treatment

Use non-stigmatizing language

Always screen for substance use

Involve caregivers in treatment

Provide trauma informed care for all



Post-Test Questions

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**Thank you!
Please fill out our
brief survey**

<https://tinyurl.com/TREAT-ME>

