



Children and Family
Research Center

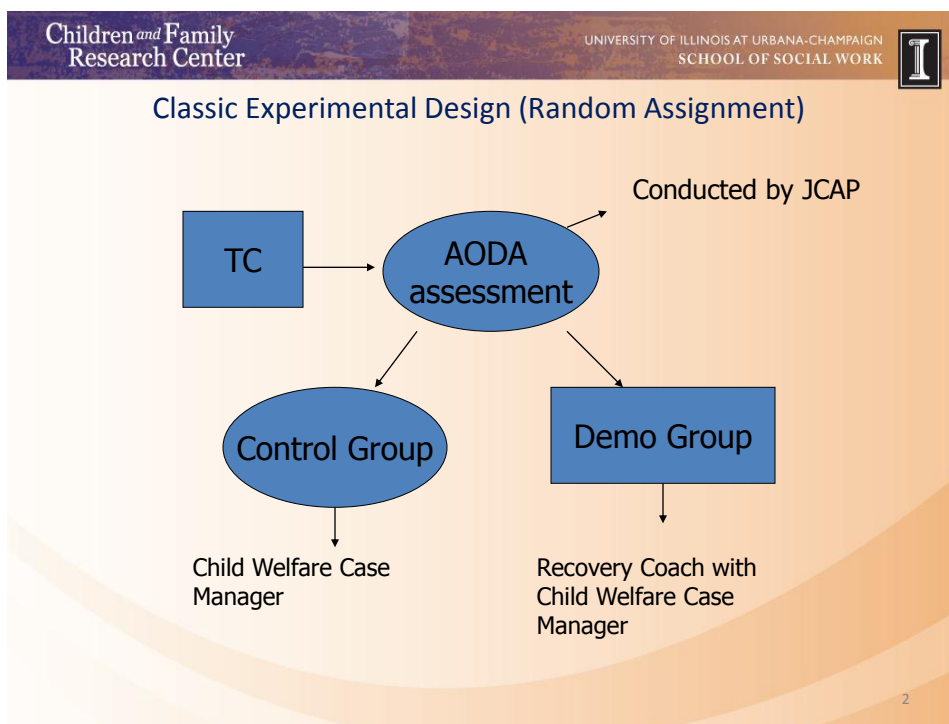
UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN
SCHOOL OF SOCIAL WORK

The Severity of Substance Abuse and the Effectiveness of Recovery Coaches
in Child Welfare

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AODA general outcomes

	Control	Demo
% Reunification	20	24
Average days to reunification	968	710
% Maltreatment recurrence	8	7

Overall, the project achieved modest success. Yet, current economic constraints are forcing systems to better target clients.

The purpose of the current study is to investigate how this particular model of intensive case management interacts with the severity of substance abuse. Hser and colleagues (2004) conducted a study with adult patients (primarily men) in community-based drug treatment programs. They found that patients with greater problem severity received more services and were, in turn, more likely to be satisfied with treatment. Furthermore, both service receipt and the resultant satisfaction were associated with better sobriety outcomes.

Accordingly, our **research question** is whether **AODA's effects on enhancing reunification varies with the severity and type of substance abuse.**

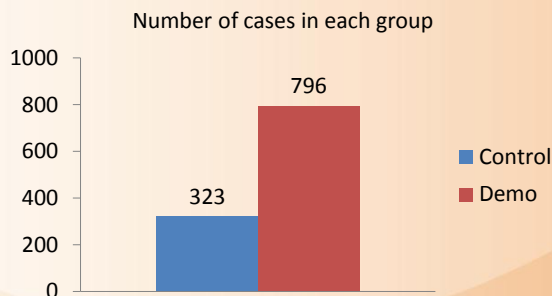
Hser, Y. I., Evans, E., Huang, D., & Anglin, D. M. (2004). Relationship between drug treatment services, retention, and outcomes. *Psychiatric Services*, 55, 767–774.

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Selected Sample of This Study

1. We only select female caregivers.
2. We limit to mothers whose are African American, White, or Hispanic.
3. Since the majority of the sample identifies alcohol, cocaine, marijuana, or heroin as primary drug of choice, we limit the sample to people who use one of the above four types of substance.



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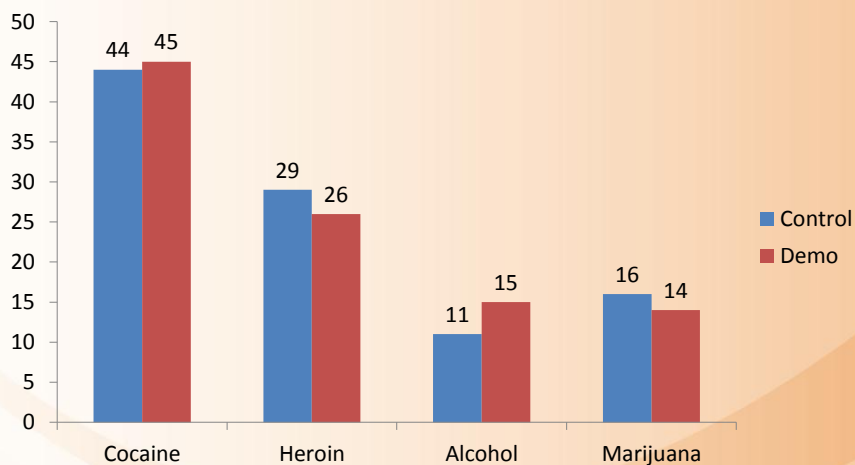
Demographics

Variables	Control	Demonstration
<i>Caregiver characteristics</i>	(N=323)	(N=796)
% African American	83	79
% White *	10	16
% Hispanic	7	6
Age at JCAP Assessment	31.9 (6.5)	32.7 (6.9)
% High School or Beyond	36	38
% Married	11	8
% Mental health problems	19	20
% Multiple substance use	71	71
<i>Child characteristics</i>		
% Allegation SEI	34	35
Age of child at JCAP Assessment	3.5 (4.7)	3.6 (4.8)

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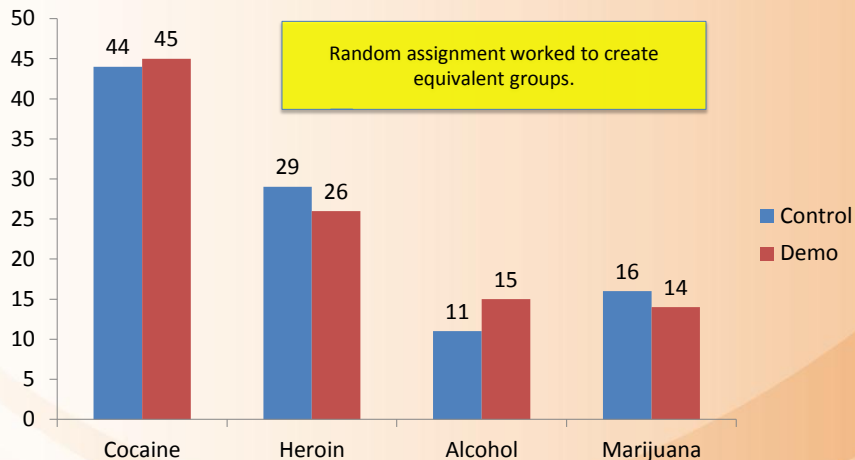
Primary Drug of Choice



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Primary Drug of Choice



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Severity measures

Dawson and colleagues (2010) compared three measures of alcohol use disorder severity, in relation to several external valuations:

Data source: National Epidemiologic Survey on Alcohol and Related Conditions (NESARC), designed by the National Institute on Alcohol Abuse and Alcoholism

- 1) Simply counts of substance use disorder criteria;
- 2) Count of diagnostic criteria with each criterion weighted by its relative severity derived from item response theory analysis;
- 3) Count of diagnostic criteria with each criterion weighted by its frequency of occurrence

The results show that un-weighted symptom counts of the diagnostic criteria appeared **equally effective, less time consuming, and similarly associated** with external correlates of disorder.

Dawson, D.A., Saha, T.D., Grant, B.F. (2010). A multidimensional assessment of the validity and utility of alcohol use disorder severity as determined by item response theory models. *Drug Alcohol Dependence*. 107(1):31-8.

Count of criteria	Severity level
< 2	Low severity
2-3	moderate severity
>= 4	severe severity

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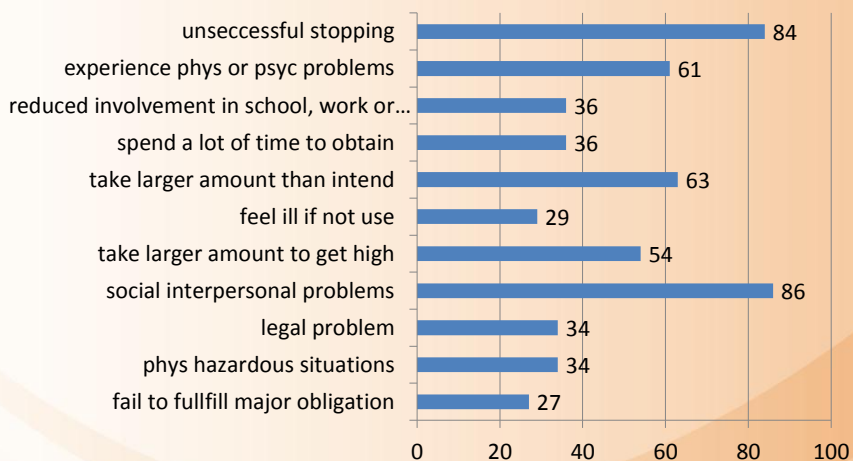
DSM-IV Criteria for substance abuse disorder

1. Experienced failure to fulfill major obligations at work, school, or home due to recurrent substance abuse
2. Recurrent substance use placed you in physically hazardous situations
3. Experienced legal problems because of repeated substance abuse
4. Substance use despite persistent social interpersonal problems caused or exacerbated by substance use
5. Experienced the need to take larger amounts of the substance in order to get high
6. Experienced feeling of being ill when not taking the substance or felt physically better after taking it
7. Taken larger amounts of the drug longer than intended
8. Spent a great deal of time obtaining the substance, using the substance or recovering from the effects
9. Given up or reduced involvement in important school, work or recreational activities
10. Experienced any physical or psychological problems due to substance use
11. Have experienced unsuccessful attempts at stopping abstaining or cutting back on use of substance

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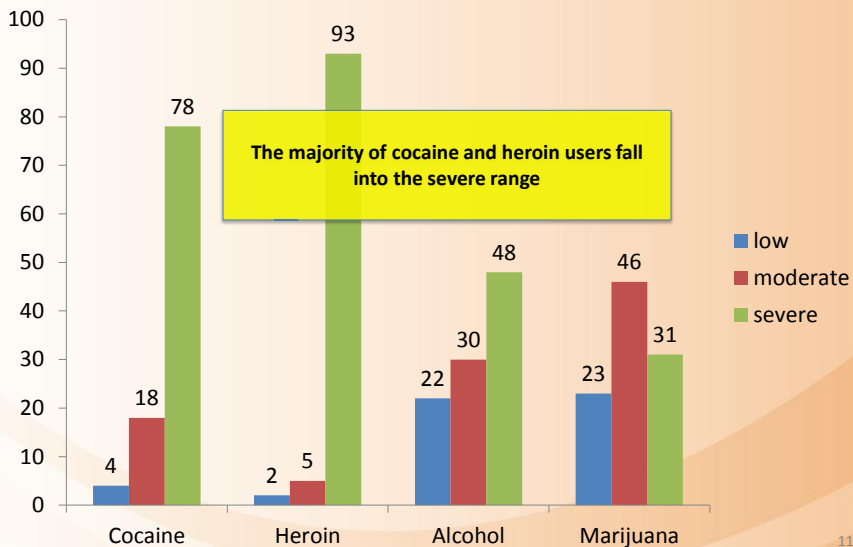
Percentage of meeting each criterion



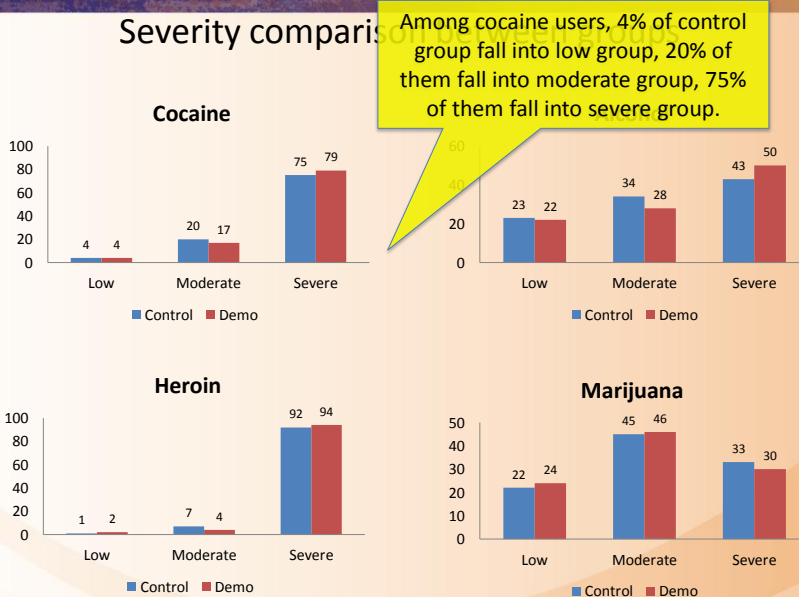
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Severity distribution within each substance group

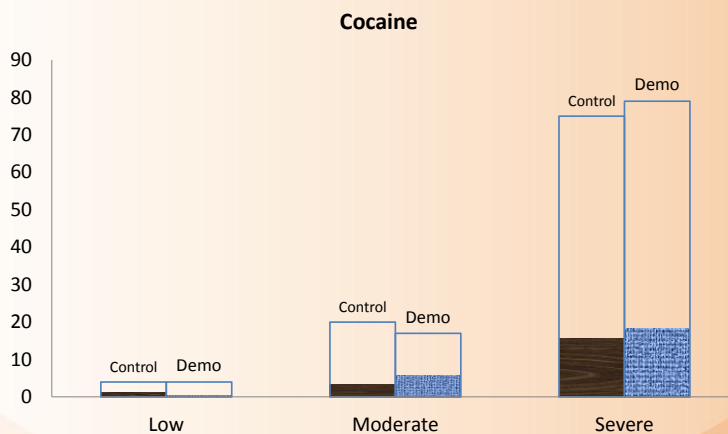


Severity comparison





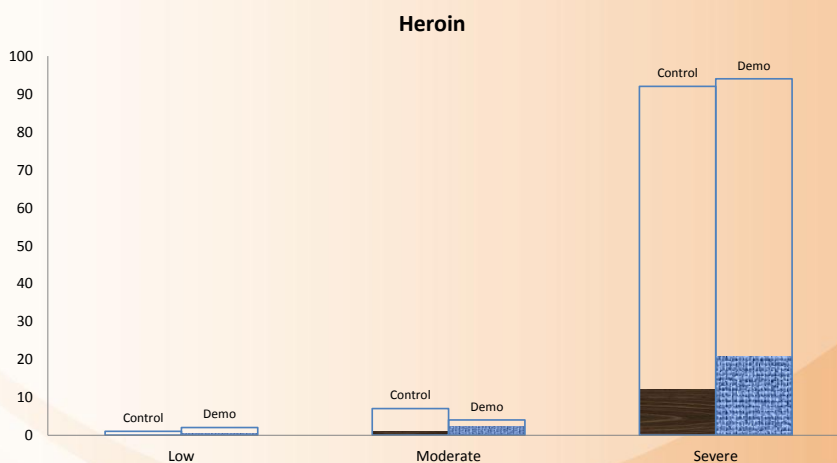
Reunification within each group



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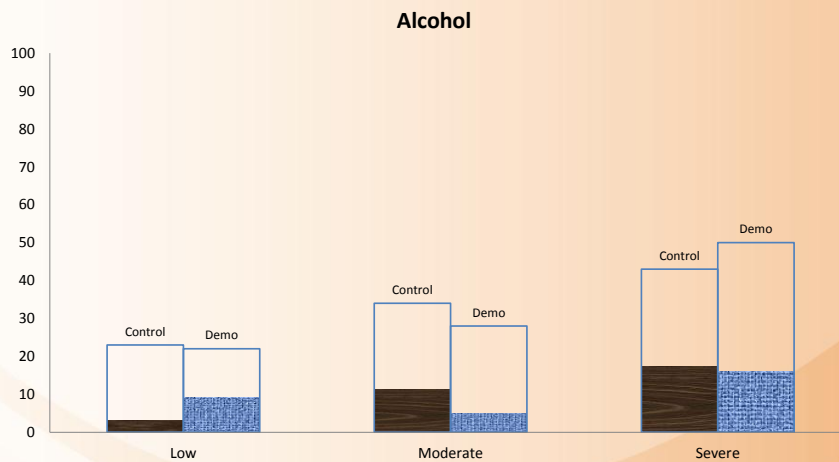
Reunification within each group



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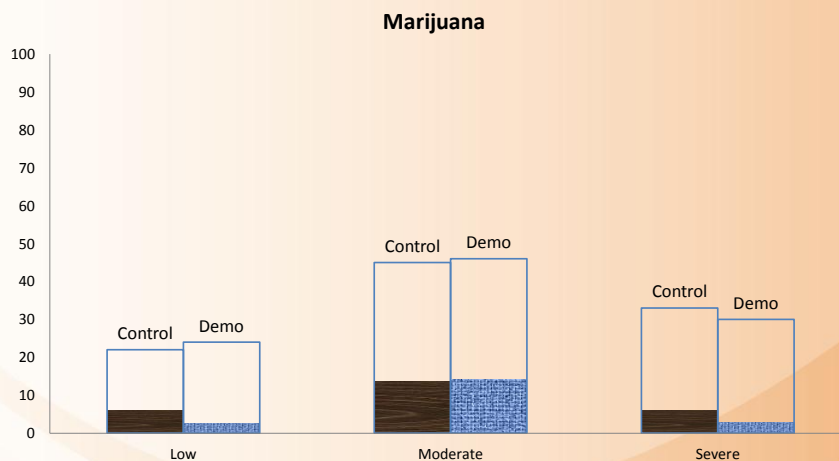
Reunification within each group



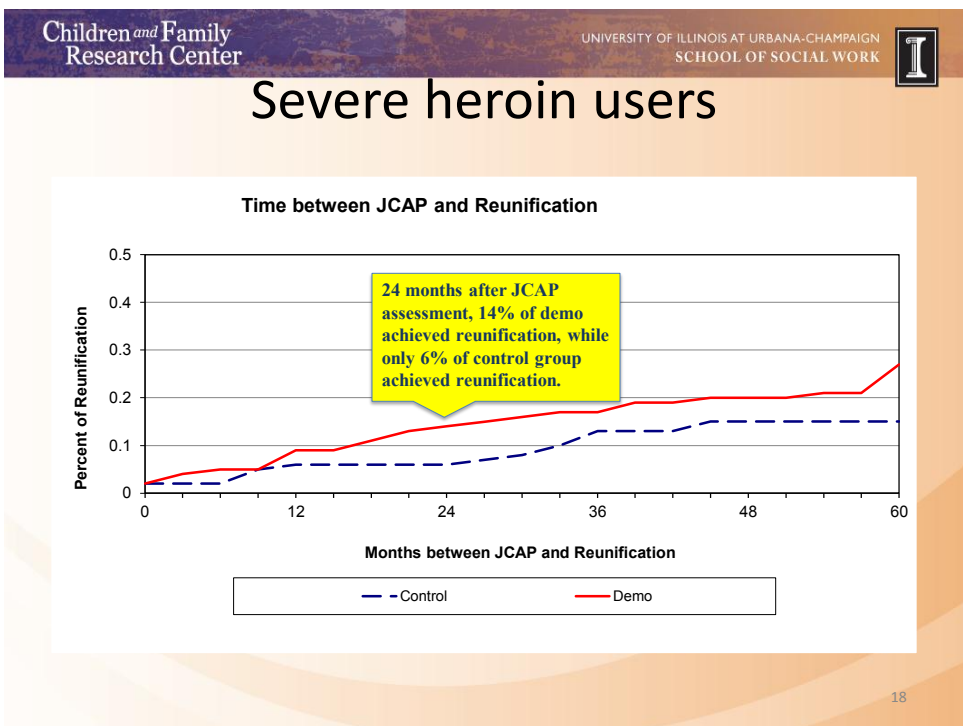
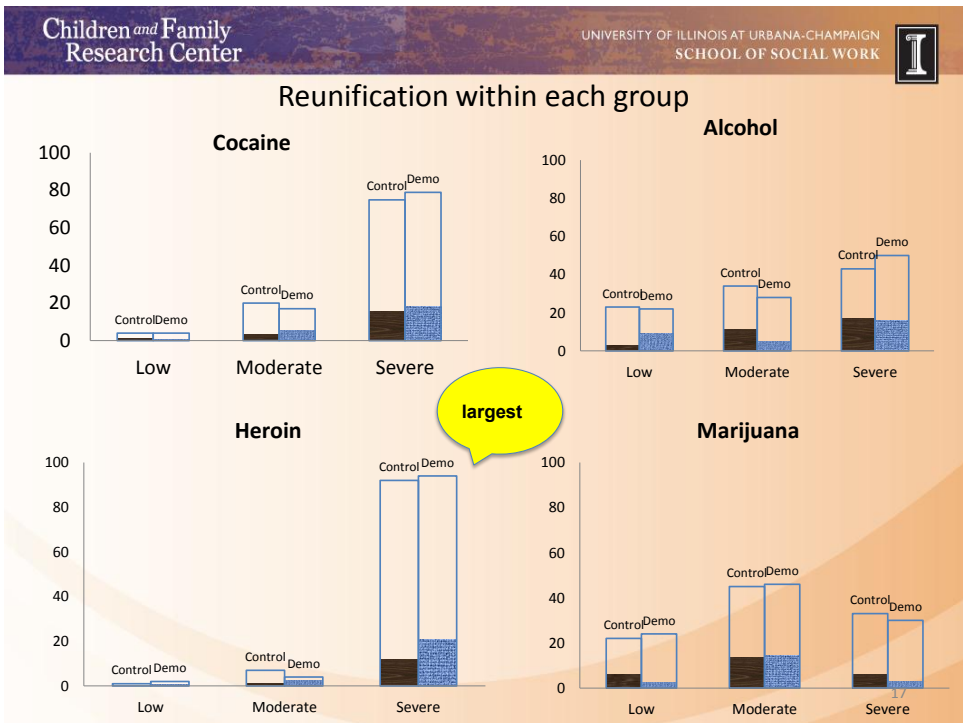
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Reunification within each group



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Cox Regression Modeling rate of reunification

The odds of achieving reunification for demo group is 2.151 times control group.

Variables	β	SE	Exp(β)
<i>Caregiver characteristics</i>			
Group assignment (1=Recovery coach)	.766*	.356	2.151
White	.478	.404	1.613
Hispanic	.518	.480	1.679
Age at JCAP Assessment	.000	.026	1.000
High School or Beyond	.318	.299	1.374
Married	.237	.424	1.267
Mental health problems	-.747	.494	.474
Multiple substance use	-.139	.359	.870
Assigned to Residential treatment	.398	.307	1.489
<i>Child characteristics</i>			
Allegation SEI	-.527	.351	.590
Age at JCAP Assessment	.048	.034	1.049

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SUMMARY OF FINDINGS AND IMPLICATIONS

- The benefits of intensive case management models (such as recovery coaches) limited to severe heroin users.
- The result is consistent with Hser and colleagues' finding (2004) that substance abuse treatment can be beneficial to the highest risk clients.
- It is possible that severe substance users have more service needs. Correspondingly, intensive case management models provide referrals to needed services, which benefit severe heroin users a lot.
- Targeting the most severe substance abusers in child welfare is likely a promising strategy from both an effectiveness and efficiency perspective.

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