

ASSISTING REFUGEE AND ACCESSING SUBSTANCE ABUSE CARE

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Nhat Nguyen, MSW
Fairfax-Falls Church
Community Services Board
Adult Behavioral Health Outpatient
and Case Management

Today's Overview

- 1 • Substance Misuse, Abuse and Dependence
- 2 • Engagement Barriers
- 3 • Motivational Interviewing and Stages of Change
- 4 • Access and Engage in Substance Abuse Care
- 5 • Continuing Care and Supports

SUBSTANCE MISUSE, ABUSE AND DEPENDENCE



Substance Use Disorder

- DSM-V combined Abuse and Dependence
- Continuum from mild to severe
- Overarching Criteria

Overarching Criteria

- Impaired Control (Criteria 1-4)
- Social Impairments (Criteria 5-7)
- Risky Use (Criteria 8-9)
- Pharmacological (Criteria 10-11)

Impaired Control

1. Take substance in larger amounts or over a longer period than intended
2. Persistent desire to cut down or regulate use, and multiple unsuccessful attempts
3. Spend great deal of time obtaining, using or recovering from the effects of substances
4. Craving as intense desire or urge for the drug

Social Impairments

5. Failure to fulfill major role obligations at work, school, or home
6. Continued use despite persistent or recurrent social or interpersonal problems
7. Social, occupational or recreational activities given up or reduced because of use

Risky Use

8. Recurrent use despite physically hazardous
9. Continued use despite knowledge of having a persistent or recurrent physical or psychological problem

Pharmacological

10. Tolerance: Increased dose of substance to achieve desired effect or a markedly reduced effect when taking usual dose
11. Withdrawal: Syndrome occurs when blood or tissue concentrations of a substance decline in an individual who has maintained prolonged heavy use

Severity Scale

- 0-1 criteria: **No diagnosis**
- 2-3 criteria: **Mild SUD**
- 4-5 criteria: **Moderate SUD**
- 6 or more criteria: **Severe SUD**

Alcohol and Other Drug Use Among Refugee Populations

- Alcohol
- Benzodiazepines
- Cannabis
- Cocaine
- Heroin
- Inhalants
- Khat ("cot" – stimulant)
- Opiates (Opium)

Substance Abuse Risk Factors

- Male Gender
- Exposure to war trauma
- Displacement
- Co-existing mental health problems
- Risk Environment (social, cultural, political and economic factors)



Barriers to Treatment

<p>Personal Constructs</p> <ul style="list-style-type: none"> • Language • Personal and Cultural Beliefs • Stigma • Mistrust • Traumatic experiences • Personal loss; loss of support • Cultural-Bound Syndromes 	<p>Social Constructs</p> <ul style="list-style-type: none"> • Acculturation stress • Language • Geographic • Criminal Justice system • Healthcare system • Treatment Approaches • Lack of Transportation • Lack of liked-health care providers • Lack of insurance
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MOTIVATE TO CHANGE

Which Way Works?

Motivational Interviewing

Miller and Rollnick

<p>Rationale</p> <ul style="list-style-type: none"> • Individuals have responsibility and capability for change • Supports intrinsic motivation for change • Leads to initiate, persist in, and comply with behavior change efforts 	<p>Basic Principles</p> <ul style="list-style-type: none"> • Express Empathy • Develop Discrepancy • Avoid Argumentation • Roll with Resistance • Support Self-Efficacy
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Becoming Addicted and Successful Recovery

Being Addicted

- Happens over time
- Has variable course
- Involves a Process of Change

Successful Recovery

- Happens over time
- Often involves multiple attempts and treatments
- Consists of self change and/or treatment
- Involves changes in other areas of psychosocial functioning

Motivation is Progressive

- Motivation is a personal process
- Can be enhanced or hindered by clinical interventions
- Motivation correlates to individual's readiness to change as represented by Stages of Change model

Motivation to Change

- Change occurs when
 - Interested and concerned about the need to change
 - Convinced the change is in their best interest
 - Plan of action is developed and implemented by self
 - Take actions necessary that are committed to implement

The Framework of Motivational Interviewing

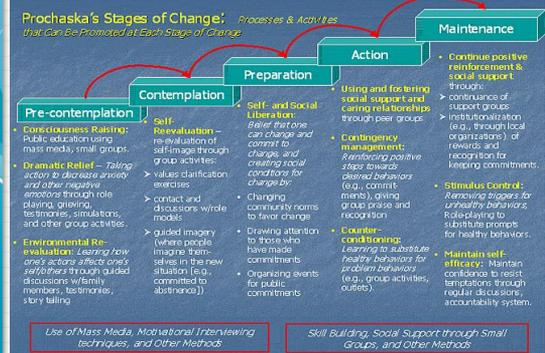


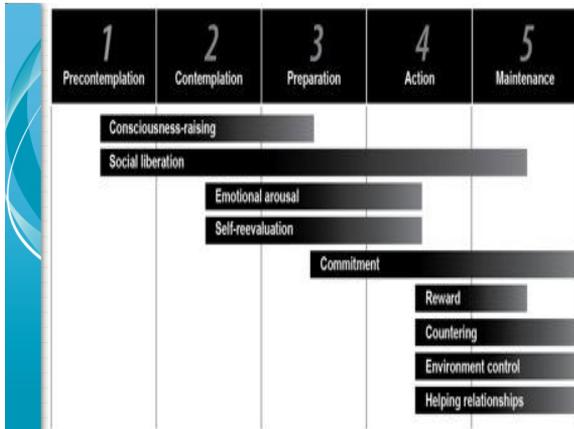
Source: MINT Training, Centre for Addiction and Mental Health.

Stages of Change



Stage of Change





Accessing Care

- Blue Ridge CSB (540-266-9200)
 - Walk-in Mondays-Fridays from 9:15 a.m. to 3:30
 - Treatment recommendation provided same day
 - IOP/DTX levels of care available
 - No CSB-operated residential treatment
 - Language Line interpreters

Accessing Care

- City of Alexandria CSB (703-746-3400)
 - Call Intake Line (703-746-3400) to be transferred to Intake Line
 - English/Spanish voicemail directions

Accessing Care

- Hampton-Newport News CSB (757-788-0300)
 - Intake appointment coordinated by single person of contact
 - Janice Wilks (757-788-0433)
 - Schedules assessment appointments
 - Language Line for interpreter services

Accessing Care

- Unable to confirm process:
 - Charlottesville CSB (434-972-1825)
 - Harrisonburg-Rockingham CSB (540-434-1941)

CONTINUING CARE AND SUPPORTS

- Incorporate Family Recovery programming
- Incorporate Natural supports
- Incorporate cultural healing practices
- Community education of recovery from addiction and/or mental illness
- Formalized case management or ongoing support/services

Resources

- DiClemente, Carlo, Addiction and Change: Understanding Initiation and Promoting Recovery presentation.
- Lim, Russell (2008), Cultural Issues in Substance Abuse Treatment presentation.
- Miller, William; Zweben, Allen; DiClemente, Carlo; and Rychtarik, Roberto (1995). Motivational Enhancement Therapy Manual: A Clinical Research Guide for Therapists Treating Individual's with Alcohol Abuse and Dependence. National Institute on Alcohol Abuse and Alcoholism.
- Prochaska's Stages of Change chart from http://barrieranalysis.fh.org/what_is/prochaskas_diagram.htm.
- Sobell and Sobell (2008). Motivational Interviewing Strategies and Techniques: Rationales and Examples (Handout).
- Teach Project. Is Motivational Interviewing a Culturally Safe Counseling Approach to Use with Indigenous Peoples? (YouTube video: <https://www.youtube.com/watch?v=yN2B68Z3uXg>).
- Virginia Department of Behavioral Health and Developmental Services (2014). Community Services Board (CSB) Address List.

QUESTIONS?