### Substance Use Disorders

INTELLECTUAL/DEVELOPMENTAL DISABILITIES
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### Disclosures

▶ No financial relationships relevant to this presentation to disclose

### Objectives

- To bring awareness to co-occurring mental health conditions, I/DD, and substance use
- To understand the framework when working/evaluating/treating I/DD individuals with substance use
- To highlight the importance of a holistic and team approach to working with I/DD individuals and substance use
- To promote self-determination and strength-based approach to providing care

### ASAM American Society of Addiction Medicine

- ► Founded in 1954 to address public health concerns and improve knowledge and practice of professionals to reduce societal impact of those struggling with substance use disorders (SUDs)
- Organization that includes physicians, RNs, NPs, PAs, professionals providing direct and indirect clinical care, those who conduct research, or educators in the field of SUDs
- This team of professionals aims to:
  - Inform best practice standards
  - Provide education and framework to those working with individual with SUDs
  - Improve public awareness and advocacy

#### Assessment

- Multidimensional Assessment is used (Biopsychosocial Model)
  - Addresses strengths, needs, protective factors
  - Determines Level of Care
- ► Includes 6 ASAM Dimensions
  - ▶ Dimension 1: Acute Intoxication/Withdrawal Potential
  - ▶ Dimension 2: Biomedical Conditions and Complications
  - Dimension 3: Emotional, Behavioral, Cognitive Conditions and Complications
  - Dimension 4: Readiness to Change
  - Dimension 5: Relapse, Continued Use, or Continued Problem Potential
  - ▶ Dimension 6: Recovery/Living Environment

### I/DD Considerations during assessment

- Assessments
  - ► Encourages sharing information
  - Reduces stigma/shame/embarrassment (privacy)
  - ► Collect collaborative information

### Dimension 1

- Intoxication/Withdrawal Potential
  - Are they presenting under the influence?
  - ► How frequently are they intoxicated?
  - Are there concerns about withdrawal symptoms?
  - Have they experienced withdrawal in the past and what was that experience like?
  - Are they receiving Medication Assisted Treatment?

## Dimension 2: Biomedical Conditions and Complications

- Current medical concerns/diagnosis
- Historical medical concerns
- Genetic concerns
- ▶ In utero exposure
- Stage of development/adolescence
- Does the client require equipment?
- Deaf or Hard of Hearing?
- Vision challenges?

# Dimension 3: Emotional, Behavioral, Cognitive Conditions and Complications

- Current emotional concerns
- Mental health concerns
- Behavioral concerns
- Cognitive considerations

### Dimension 4: Readiness to Change

- Transtheoretical Model of Change
  - Precontemplation Unaware of the problem
  - Contemplation Recognize that behavior is problematic
  - Preparation Ready to take action in the next 30 days
  - ► Action Active change in behavior
  - ► Maintenance Sustained change for more than 6 months

### Dimension 5: Relapse, Continued Use, or Continued Problem Potential

- What is the relationship the individual has with substances?
- What skills do we need to build to promote a healthy lifestyle?
- What is the safety plan to refrain from using substances?

### Dimension 6: Recovery/Living Environment

- ▶ Is the living environment conducive to recovery?
- Are there others in the home who use substances?
- Does the individual have a support system that promotes recovery?
- Are they engaged in school/work/volunteerism/community activities to promote connectedness and build esteem?
- Are their spiritual needs being met?

#### ASAM Levels of Care

- ▶ .5 Early Intervention
- ▶ 1.0 Outpatient Services
- 2.1 Intensive Outpatient Services
- 2.5 Partial Hospitalization
- ▶ 3.2 Clinically Managed Low Intensity Residential Services
- ▶ 3.3 Clinically Managed Population Specific High Intensity Residential Services
- ▶ 3.5 Clinically Managed Medium Intensity Residential Services
- 3.7 Medically Monitored High Intensity Inpatient Services
- ▶ 4.0 Medically Managed Intensive Inpatient Services

### Medication Assisted Treatment MAT

- Opioid Use
  - ► Naloxone (Narcan)
  - ► Buprenorphine (Subclade)
  - Naltrexone
  - Methadone
- Alcoholism
  - Disulfiram (Antabuse)
  - Acamprosate
  - Naltrexone

### Challenges with placement

- Voluntary
- Vulnerability
- Goodness of fit
- Accommodations
- Tailor the treatment to the individual
- Services available
- Providers unfamiliar with I/DD population

### Recovery Groups

- ► Alcoholics Anonymous (12 step): <a href="https://www.aa.orgLinks">https://www.aa.orgLinks</a>
- Cocaine Anonymous (12 step): <a href="https://ca.org/">https://ca.org/</a>
- Narcotics Anonymous (12 step): <a href="https://www.na.org/">https://www.na.org/</a>
- Refuge Recovery (Based on Buddhist Principles): <a href="https://refugerecovery.org/">https://refugerecovery.org/</a>
- Celebrate Recovery (Christ-centered 12 step): <a href="https://www.celebraterecovery.com/">https://www.celebraterecovery.com/</a>
- Smart Recovery (non-religious, non-12 step): <a href="https://www.smartrecovery.org/">https://www.smartrecovery.org/</a>
- Al-Anon (family members of AUD individuals): <a href="https://al-anon.org/">https://al-anon.org/</a>
- Co-Dependents Anonymous (healthy relationships, 12 step): <a href="http://coda.org/">http://coda.org/</a>
- Peer Seattle: <a href="https://www.peerseattle.org/">https://www.peerseattle.org/</a>
- Greater Seattle Intergroup: <a href="https://www.seattleoa.org/meetings/">https://www.seattleoa.org/meetings/</a>
- ▶ WECONNECT: <a href="https://www.weconnecthealth.io/free-online-support-meetingsLinks">https://www.weconnecthealth.io/free-online-support-meetingsLinks</a>
- Recovery Dharma Online (BIPOC only & Buddhist Inspired): https://recoverydharma.online/bipoc/

### Ricky's Law

- ► House Bill 1713
- ► Effective April 1, 2018
- Integrates mental health and substance use disorders
- Addresses: suicide, self-harm, threats or hurting others, loss or damage to property, history of violent acts over the last 10 years
- Evaluations: Community or Emergency Room, Designated Crisis Responder (DCR) referral
- Treatment: State-certified detoxification facility (withdrawal management)
- If there are no beds available, there are no other options for detention and treatment

#### What can we do?

- Connect individuals with SUDs/other service providers with experience treating I/DD
- Familiarize ourselves with the ASAM criteria
  - ► To provide robust support
  - Common objectives (Dimensions)
  - Structure to the care we are providing
- Participate in the treatment process to the extent the client is willing to allow
- ► Foster connectedness

### References

#### FindTreatment.gov

Mee-Lee D, Shulman GD, Fishman MJ, Gastfriend DR, Miller MM, eds. The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions. 3<sup>rd</sup> ed. Carson City, NV: The Change Companies; 2013

Washington State Hospital Association . (n.d.). Information about Ricky's law: Involuntary detention for substance use disorders. Washington State Hospital Association. <a href="https://www.wsha.org/policy-advocacy/issues/information-about-rickys-law-involuntary-detention-for-substance-use-disorders/">https://www.wsha.org/policy-advocacy/issues/information-about-rickys-law-involuntary-detention-for-substance-use-disorders/</a>