



National Center on
Substance Abuse
and Child Welfare

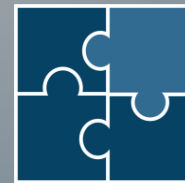
Engagement and Safety Decision-Making in Substance Use Disorder Cases

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Acknowledgement

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Learning Objectives

Following this presentation, participants will be able to:



Recognize how language can perpetuate stigma about substance use



Identify engagement strategies that build on family strengths for successful outcomes and family recovery

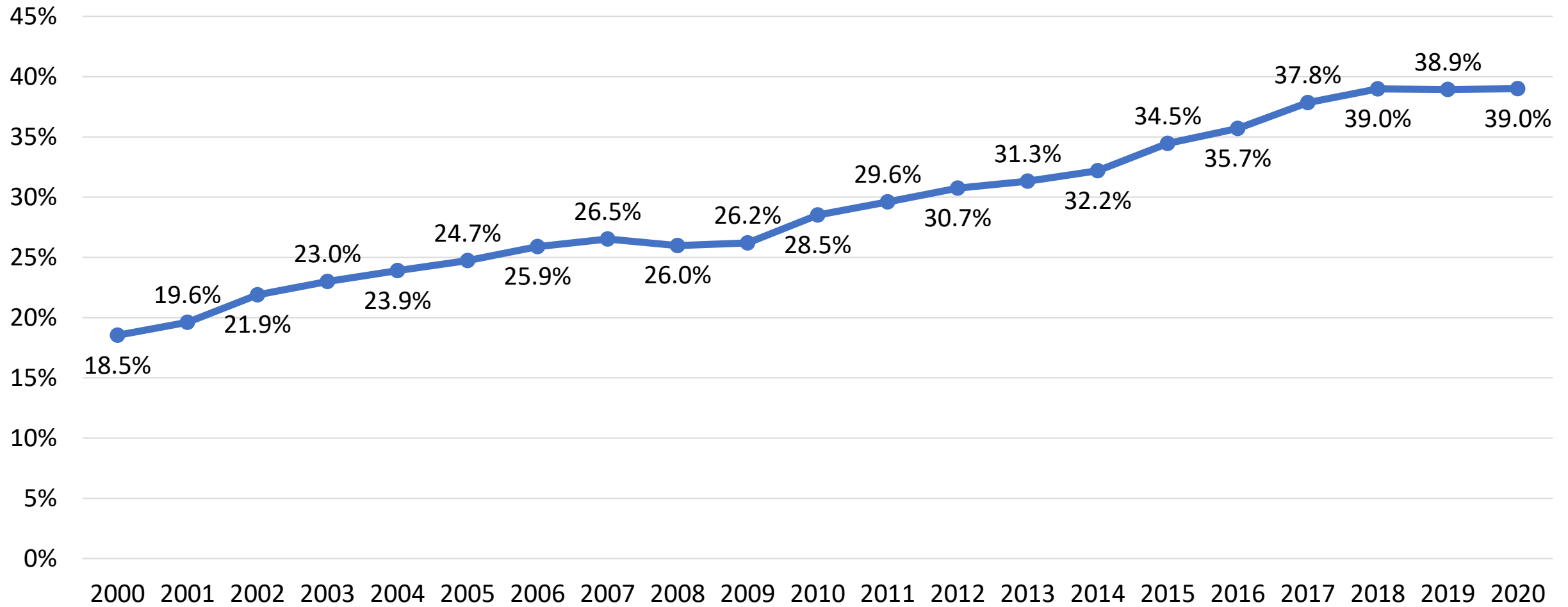


Understand the effect of parental substance use disorders on child safety and risk



Identify strategies to enhance collaborative partnerships that improve coordination of services for families

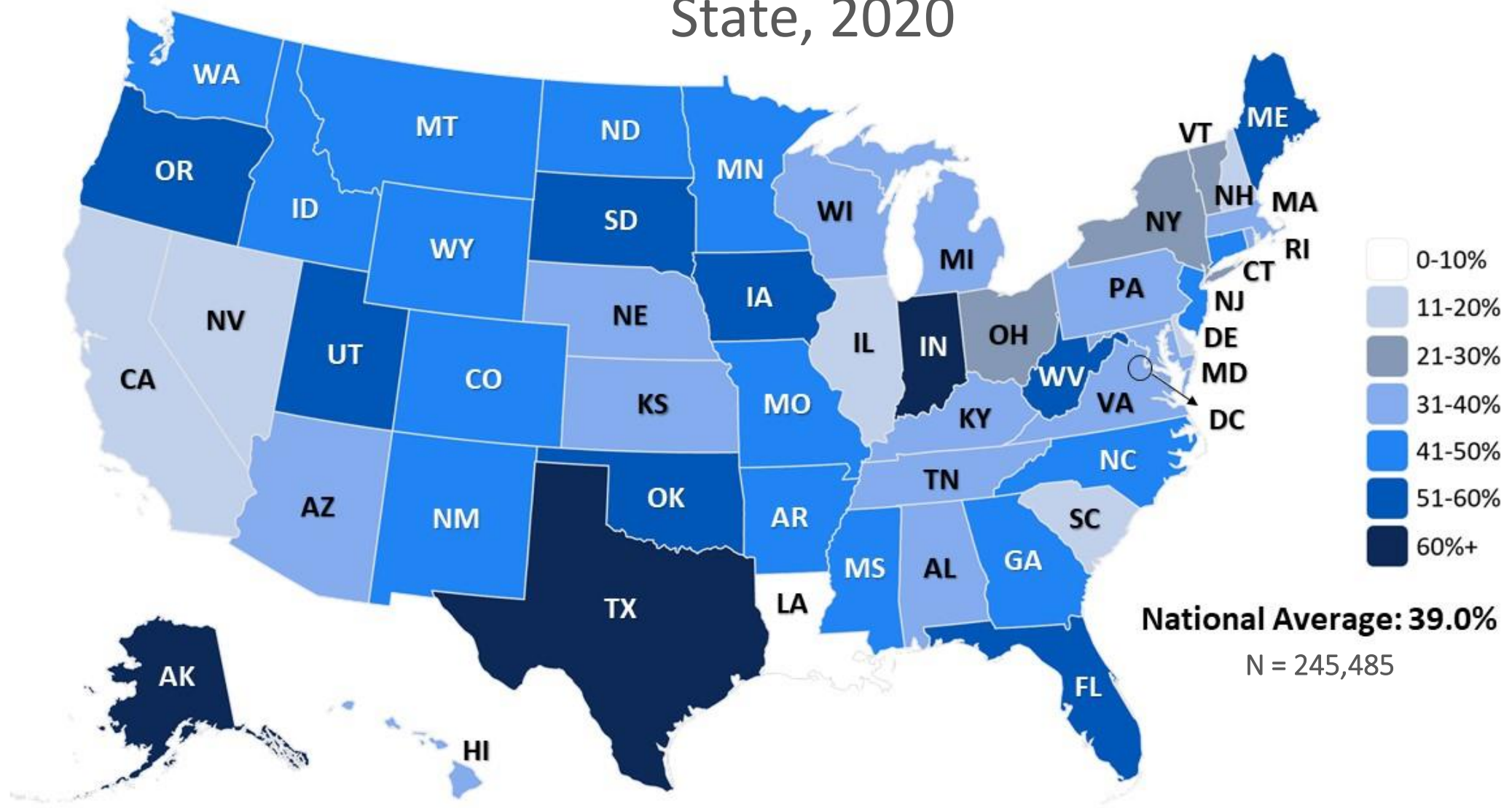
Prevalence of Parental Alcohol or Drug Abuse as an Identified Condition of Removal in the United States, 2000 to 2020



Note: Estimates based on all children in out of home care at some point during Fiscal Year

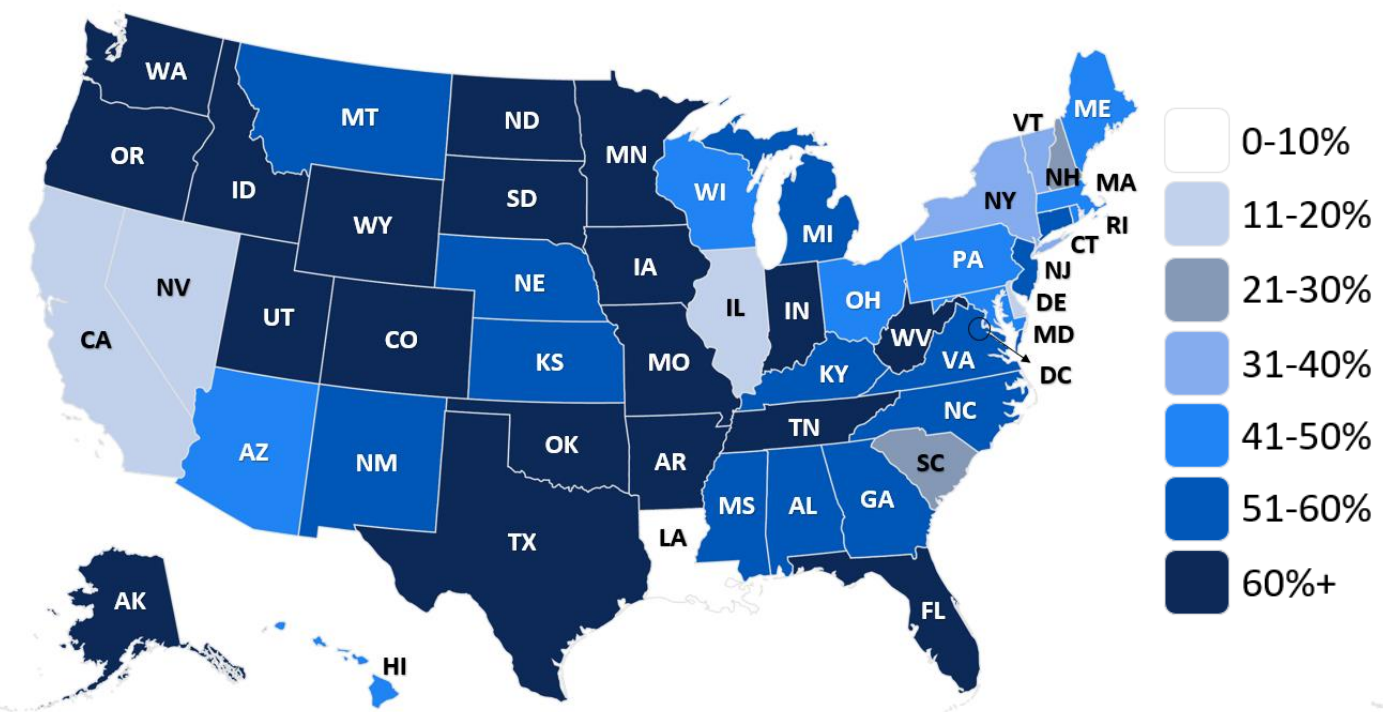
Source: AFCARS Data, 2000-2020

Parental Alcohol or Drug Abuse as an Identified Condition of Removal by State, 2020



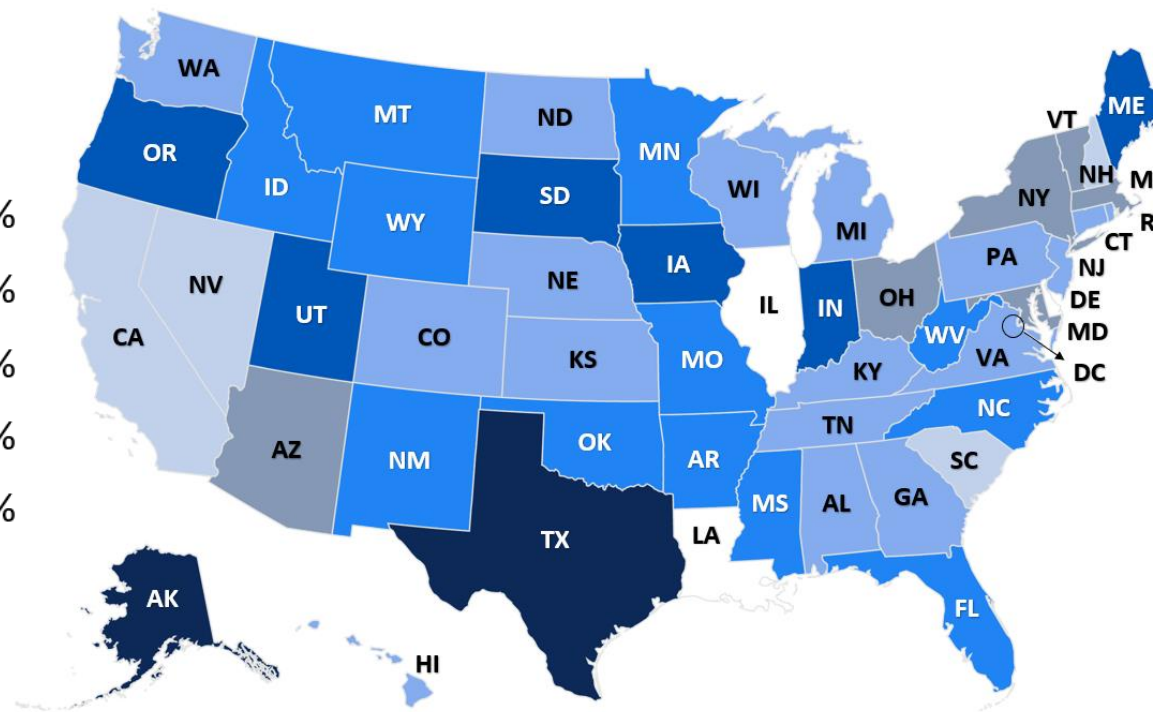
Parental Alcohol or Drug Abuse as an Identified Condition of Removal for Children by Age, 2020

N = 245,485



Under Age 1

National Average: 50.7%



Age 1 and Older

National Average: 36.2%

The Need to do Better for Families



Substance use disorders can negatively affect a parent's ability to provide a stable, nurturing home and environment. Of children in care, an estimated **61% of infants and 41% of older children** have at least one parent who **is using drugs or alcohol** (Wulczyn, Ernst, & Fisher, 2011)



Families affected by parental substance use disorders have a **lower likelihood of successful reunification** with their children, and their children tend to **stay in the foster care system longer** than children of parents without substance use disorders (Brook & McDonald, 2010)



The **lack of coordination and collaboration** between child welfare agencies, community partners, and substance use disorder treatment providers **undermines the effectiveness of agencies' response to families** (Radel et al., 2018)

“Groundbreaking discoveries about the brain have revolutionized our understanding of addiction, enabling us to respond effectively to the problem.”

*-Dr. Nora Volkow,
National Institute on
Drug Abuse*

- Substance use disorders (SUDs) are preventable and treatable
- Discoveries in the science of addiction have led to advances in SUD treatment that help people stop misusing drugs and resume productive lives
- Treatment enables people to counteract SUDs powerful disruptive effects on the brain circuitry and behavior and regain areas of life function
- Successful SUD treatment is highly individualized and can entail
 - Medication
 - Behavioral Interventions
 - Peer Support

Practice Strategies and Innovations



Early Identification
of Families in Need
of SUD Treatment



Timely Access to
Assessment and
Treatment Services



Recovery Support
Services



Family-Centered
Treatment
Services



Frequent Monitoring
and Responses to
Behaviors

Systems-Level Policy Efforts that Support to Practice Innovations



Commitment to
Shared Mission,
Vision, and Goals



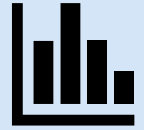
Efficient Cross-
Systems
Communication



Ongoing Cross-
Training and Staff
Development



Sustainability and
Institutionalization
of Practices



Measuring and
Monitoring
Outcomes

Shared Outcomes for all Families with a Focus on Equity – 5 Rs and an E

Recovery

Parents access treatment
more quickly; stay in
treatment longer; decrease
substance use

Remain at Home

More children remain
at home throughout
program participation

Reunification

Children stay less days in
foster care and reunify
within 12 months at a
higher rate

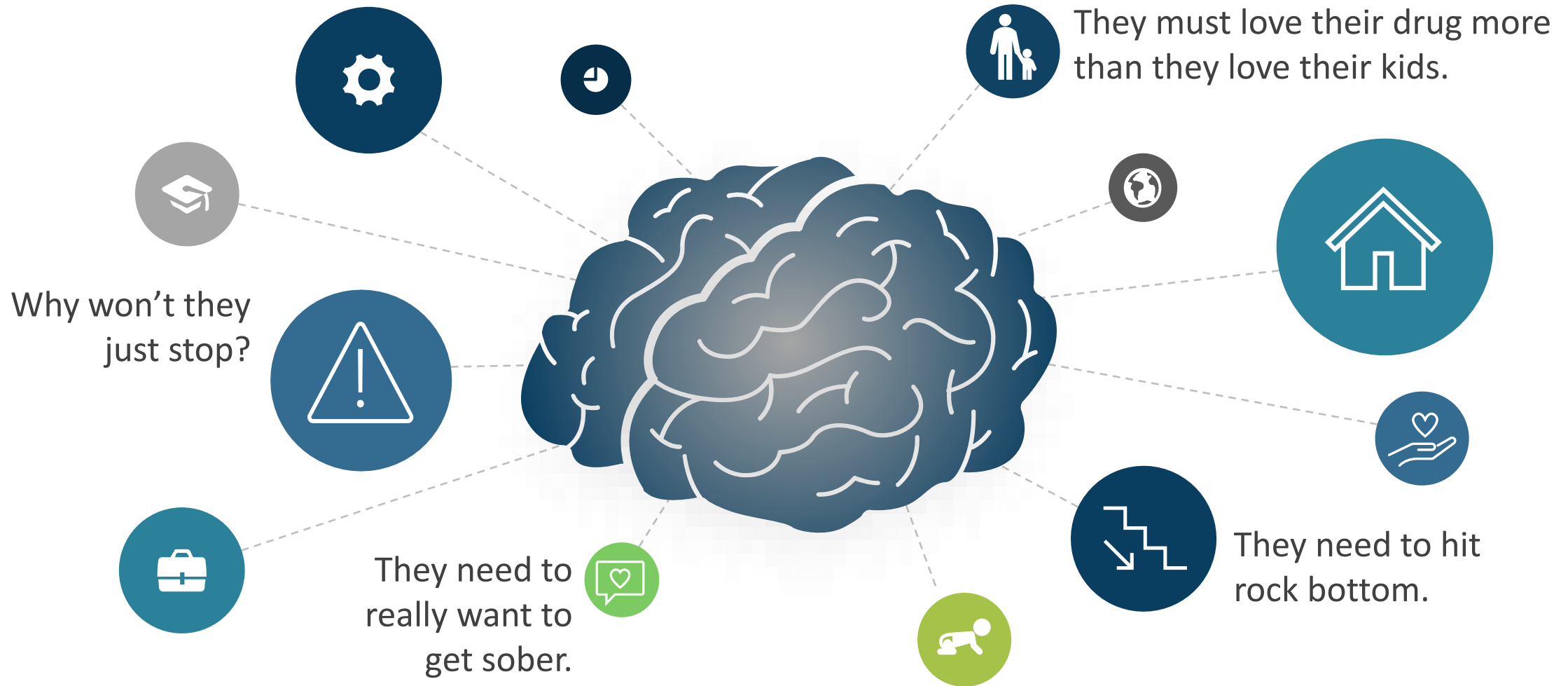
Repeat Maltreatment

Fewer children
experience subsequent
maltreatment

Re-entry

Fewer children who
reunify return back to
out-of-home care

Common Beliefs





"Don't work harder than the client."

*"Here's a referral—
Let me know
when you get into
treatment."*

*"They'll get into treatment
if they really want it."*

*"We will see you back
here in 90 days."*

Common Responses

Your Choice of Language Reflects Your Understanding of SUD as a Disease :

<i>Instead of...</i>	<i>Try...</i>
<input checked="" type="checkbox"/> Addict, Drug Abuser	<input checked="" type="checkbox"/> Person/Parent with a Substance Use Disorder
<input checked="" type="checkbox"/> Clean/Dirty Drug Screen	<input checked="" type="checkbox"/> Screen Tested Negative/Positive for Substances
<input checked="" type="checkbox"/> Former Addict	<input checked="" type="checkbox"/> Person in Recovery
<input checked="" type="checkbox"/> Hard to Place Kids	<input checked="" type="checkbox"/> Children Affected by Trauma
<input checked="" type="checkbox"/> Drug Addicted Baby	<input checked="" type="checkbox"/> Infant Prenatally Exposed to Substances
<input checked="" type="checkbox"/> Foster Child	<input checked="" type="checkbox"/> Child In-Care or Out-of-Home Placement

Values

Culture includes *beliefs, traditions, and values*

Communities


Culture lives at the family level but also exists in individuals, organizations, and communities

Solutions

Beliefs, traditions, and values must be the platform on which solutions are built



Culturally Competent Engagement

A photograph of a dark asphalt surface. In the center, a vibrant rainbow is drawn with chalk, arching from the left towards the right. Four pieces of chalk are scattered around the drawing: a green piece at the top left, a blue piece at the top right, a yellow piece at the bottom left, and a red piece at the bottom right. The chalk is slightly broken and dusty.

“Policies, resources, and sociocultural values that support positive and healthy parenting can help ensure that children get started early on a path of resilience instead of risk.”

-Partnership to End Addiction

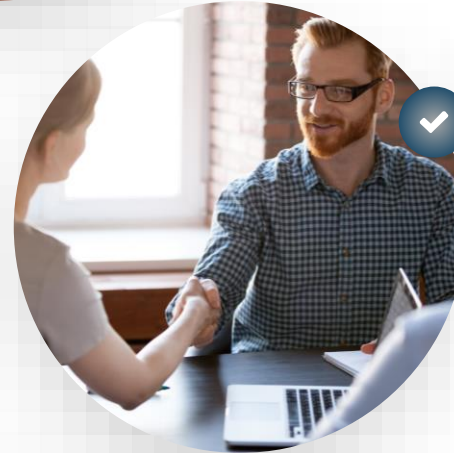
Engaging Families

“We want them to succeed!”



Assessment

Engagement starts at the initial assessment/contact with families



Partner

Seeing child welfare as their partner



Everyone

Everyone plays a role in engagement

Rethinking Treatment Readiness



“Tough love”- in the hopes that they will hit rock bottom and want to change their life



Collective knowledge in the community is to “cut them off, kick them out, or stop talking to them”



Addiction as a disease of isolation

Readiness



Has realistic expectations and understands the 1) neuro-chemical effects on people with substance use disorders, and 2) challenges of early recovery



Recovery occurring in the context of relationships



Early Identification of Families

Is substance use a factor? Yes, or no?

Screening



Referral



CHILD WELFARE SCREENING

CAGE:

https://www.hopkinsmedicine.org/johns_hopkins_healthcare/downloads/all_plans/CAGE%20Substance%20Screening%20Tool.pdf

GAIN:

<https://gaincc.org/instruments/>

UNCOPE:

<https://ncsacw.acf.hhs.gov/files/TrainingPackage/MOD2/ExampleScreenQuestionsUNCOPE.pdf>

Is there a substance use disorder? | DSM V TR Criteria

What level of treatment matches the identified need? | ASAM Continuum of Care

SUD/Mental Health
Assessment



Treatment



Timely Access to Assessment and Services



Parental Substance Use Disorders – Effect on Parenting

A parent's use of alcohol or other drugs can affect their ability to safely parent their children by

decreasing their ability to:

- Adequately supervise their children
- Meet their child's educational or medical needs
- Provide a daily structure and routine for a child
- Provide for a child's basic needs



Parental Strengths and Assessing Safety

- Early and continuous identification of parental strengths and resilience
- Cultural considerations
- Acknowledgment of improvements and what is going well during the life of the case
- Parent voice

DEFINING Safety, Risk, and Protective Factors

Safety Factor

A present or impending danger to a child or insufficient caregiver protective capacities to assure a child is protected from danger. A point in time when IMMEDIATE action is needed.

Risk Factor

The likelihood that a child will be maltreated in the future, on a continuum of low to high

Protective Capacities

Personal and parenting behavioral, cognitive, and emotional characteristics that can specifically and directly be associated with a person being protective of his or her child.

Protective Factors

Factors that strengthen families:

- Parental Resilience
- Nurturing and Attachment
- Social Connections
- Knowledge of Parenting & Child Development
- Concrete Support in Times of Need
- Social-Emotional Competencies of Children



Areas to Consider When Assessing **Safety Threats**

When you are concerned about a parent's substance use and assessing a child's safety, consider the following factors related to the child:

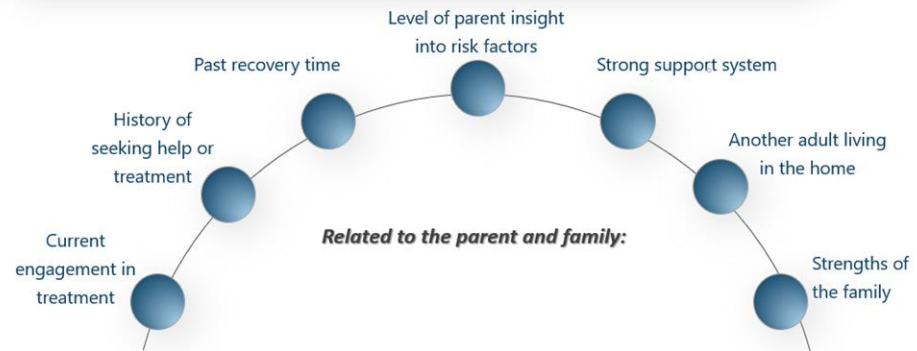
age
of the child

child is visible in the
community

special needs
of the child

parent/child
interaction

Areas to Consider When Assessing Safety Threats



Why do we talk about protective capacities in our definitions of safety and risk factors?

Because identifying and building on parental protective capacities helps us address child safety, reduce risk, celebrate successes, and improve family well-being.



Developing Protective Capacity for Parents with Substance Use Disorders

- Parent has insight into their behaviors and changes that need to be made to provide safety
- Parent understands the effect their substance use has had on their children and family
- Accessible and consistent childcare to support the parent attending treatment
- Consistent attendance at treatment sessions/recovery support meetings
- Family/friends that are willing to do check-ins/monitor child safety daily
- Parent is willing to attend SUD treatment and/or other services
- Active engagement with treatment provider
- Supportive caregiver in the home
- Priority/quick access to treatment



ENGAGEMENT MATTERS!

Evaluation and Observation of the Home Environment



Home conditions



Safe sleep space



Safe storage of
controlled substances



Safety hazards



Drug paraphernalia in
the home



Changes in home
conditions that
weren't there before

Keeping Children Safe from Substances

Items to be aware of include:



Nicotine

E-liquids with e-
cigarettes, nicotine gum
or patches



Alcoholic Beverages

Sweetened
mixed drinks



Prescription Medicines

Pain killers and patches,
sedatives, and tranquilizers



Illegal Drugs

Cocaine,
methamphetamine,
heroin, fentanyl



Marijuana

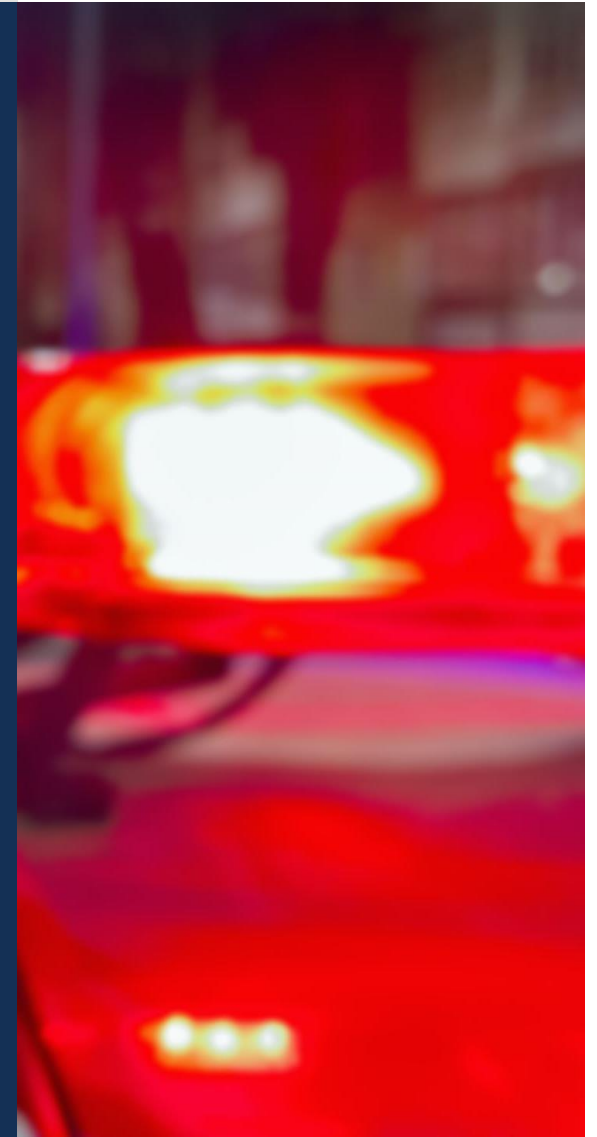
Edibles in the form
of baked goods,
candy and
beverages

**Encourage parents to be prepared by saving the phone number for the national Poison
Help Hotline in their phone*

Every 45 minutes poison control centers
set a call about children and teens exposed to opioids

Each year, opioid medication poisoning causes more
than **300 deaths in children**

Young children (ages 5 and younger)
account for **60%** of these calls





Policymakers' Guide to Keeping Children Safe



Get the facts out through population-wide public awareness campaigns targeted to parents, other caregivers, educators, and health care professionals



Fund improvements in data collection and surveillance techniques



Require legal addictive products, including prescription medications, nicotine, and marijuana to be packaged in small, nonfatal doses



Assure legal immunity for parents who report a child for exposure to an illegal substance to ensure honest and accurate reporting by parents

Keeping Parents and Young Adults Safe

Factors that can increase a person's risk of overdose include:

- Changes in tolerance from not using or using less
- Mixing opioids with respiratory depressants such as alcohol or benzodiazepines
- Mixing opioids with stimulants, such as cocaine and methamphetamine
- Having chronic health conditions
- History of past overdoses



[Working with Adolescents: Practice Tips and Resource Guide](#)



Strategies to Prevent Overdose

Encourage providers, persons at high risk, family members, and others to learn how to prevent and manage opioid overdose

Ensure access to treatment for individuals who are misusing opioids or who have a substance use disorder

Ensure ready access to naloxone

Encourage the public to call 911

SAMHSA Opioid Overdose Prevention TOOLKIT

Opioid Use Disorder Facts

Five Essential Steps for First Responders

Information for Prescribers

Safety Advice for Patients & Family Members

Recovering From Opioid Overdose



[Opioid Overdose Prevention Toolkit](#)



Drug Testing

What does it tell us?

Drug Testing

Drug Testing...

is just one tool used to guide case planning and permanency decisions with families affected by SUDs



Drug tests alone cannot provide information on the severity of an individual's substance use, progress in recovery, or the effects on parenting capacity



After potential substance misuse is identified, it is key to partner with SUD treatment providers to help engage the parent in an assessment and appropriate services



Child welfare workers must rely on other indicators



The Necessity of Collaboration

Substance use and child maltreatment are often multi-generational problems that can only be addressed through a coordinated approach across multiple systems to address needs of both parents and children.

(Boles, et al., 2012; Dennis, et al., 2015; Drabble, 2010)

Benefits of Collaboration

01. Collaboration contributes to better outcomes and efficiencies in the service delivery systems

02. The investment of time leads to better shared understanding, improved planning efficiency, and more effective monitoring of parental progress

03. Collaboration in case planning and information sharing can include child welfare workers, substance use treatment providers, mental health treatment providers, court professionals, and other related service professionals

Stages of Collaboration

A developmental process that requires patient urgency



- 1 **Information Exchange**
- 2 **Joint Projects**
- 3 **Changing the Rules**
 - Shared Data Systems
 - Shared Case Plans
 - Universal Protocols
- 4 **Changing the System**

Better Outcomes for Children and Families
- 5 **Changing the Narrative**

A New Way of Thinking and Talking

Systems-Level

**SUD Treatment
Providers**

Courts

Child Welfare

**Health Care
Professionals**



Collaboration

Case Level

**Family Team
Meetings**

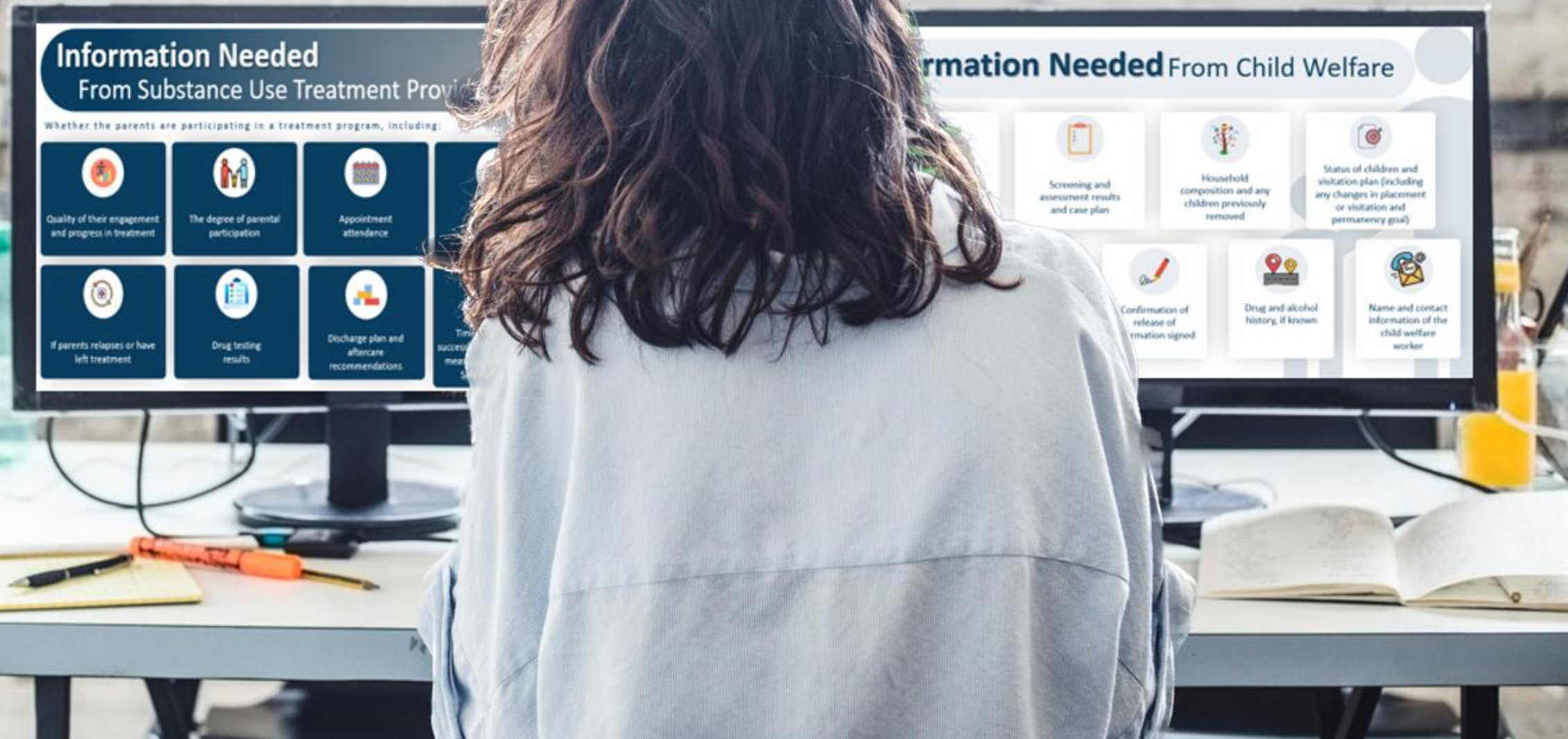
**Collateral
Contacts**

Staffing



- Building relationships with providers is essential and improves outcomes for families by increasing parent and child support and creating a shared understanding of the family.
- Collaboration, communication and reports from SUD and mental health treatment providers, therapists, etc.
- Inclusion in shared decision-making:
 - ☐ Providers
 - ☐ Schools
 - ☐ Medical providers
 - ☐ Family members and informal supports

Efficient Cross-Systems Communication



Systems-Level Policy Efforts that Support Practice Innovations



Shared Mission, Vision, and Goals



**Measuring and
Monitoring Outcomes**



**Sustainability and
Institutionalization of Practices**

Ongoing Cross-Training and Staff Development



Online Tutorials



Child Welfare
Training Toolkit



On Site &
Virtual Trainings



Webinars and
Prerecorded Trainings

Improved Outcomes for All Families with a Focus on Equity

Recovery

Increased engagement and retention of parents in substance use treatment

Remain at Home

Fewer children removed from parental custody

Reunification

Increased reunification post-removal

Repeat Maltreatment

Fewer children experience subsequent maltreatment

Re-entry

Fewer children re-entering the child welfare system and foster care

Five Rs



A woman wearing a light pink hijab and a matching long-sleeved top is gently kissing the forehead of a young child. The child, who has dark hair, is wearing a blue and white striped long-sleeved shirt and is focused on playing with a colorful, multi-colored plastic toy that has various shapes and textures. The background is a soft, out-of-focus green, suggesting an outdoor setting. A large, semi-transparent white circle is overlaid on the right side of the image, containing the text.

**What's Your Next
Step?**



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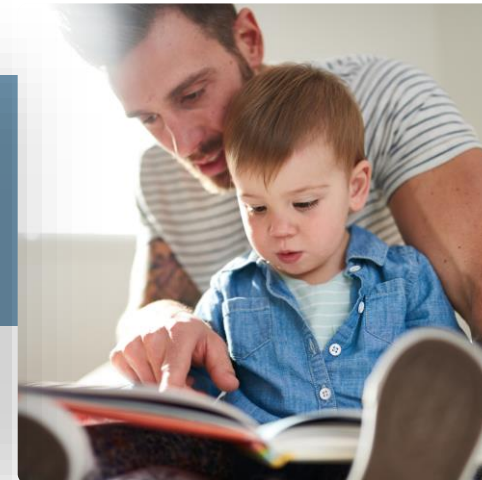
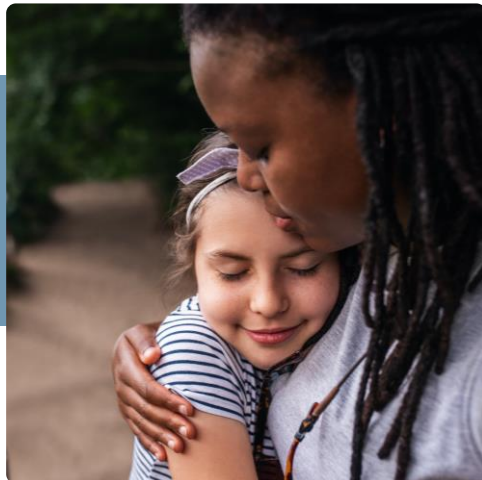
*A program of the Administration on Children and Families,
Children's Bureau, and the Substance Abuse and
Mental Health Services Administration*



<https://ncsacw.acf.hhs.gov/>



ncsacw@cffutures.org



Contact the NCSACW TTA Program

Connect with programs that are developing tools and implementing practices and protocols to support their collaborative training and technical assistance to support collaboration and systems change



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<https://ncsacw.acf.hhs.gov/>



ncsacw@cffutures.org

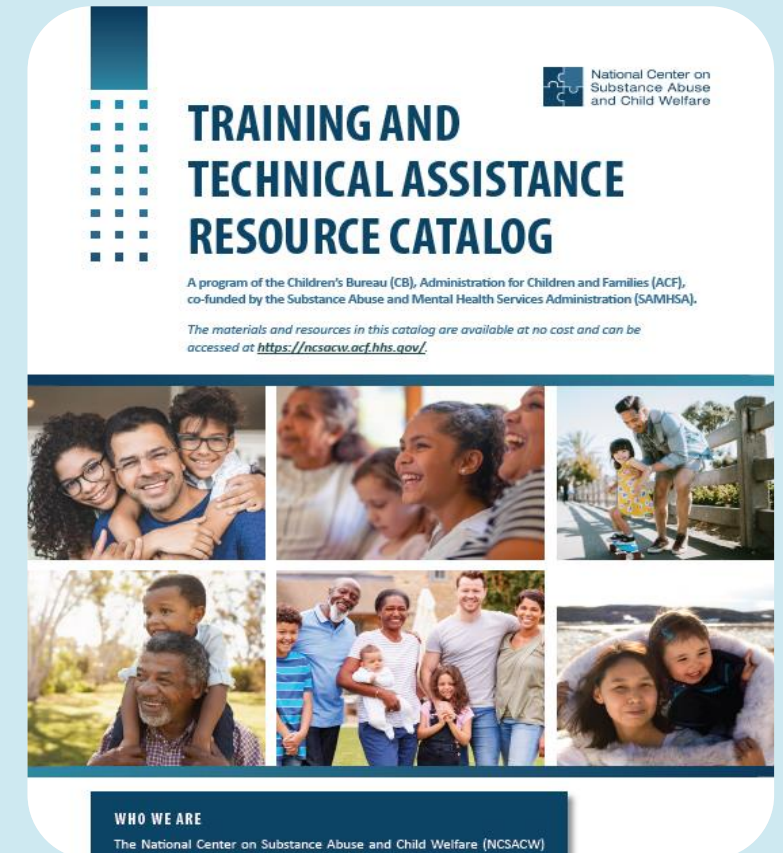


Toll-Free @ 1-866-493-2758

LEARN MORE ABOUT RESOURCES FROM NCSACW!



Use this QR code to access ***The Training and Technical Resource Catalog*** which includes all the most recent materials from NCSACW to help professionals best serve families.



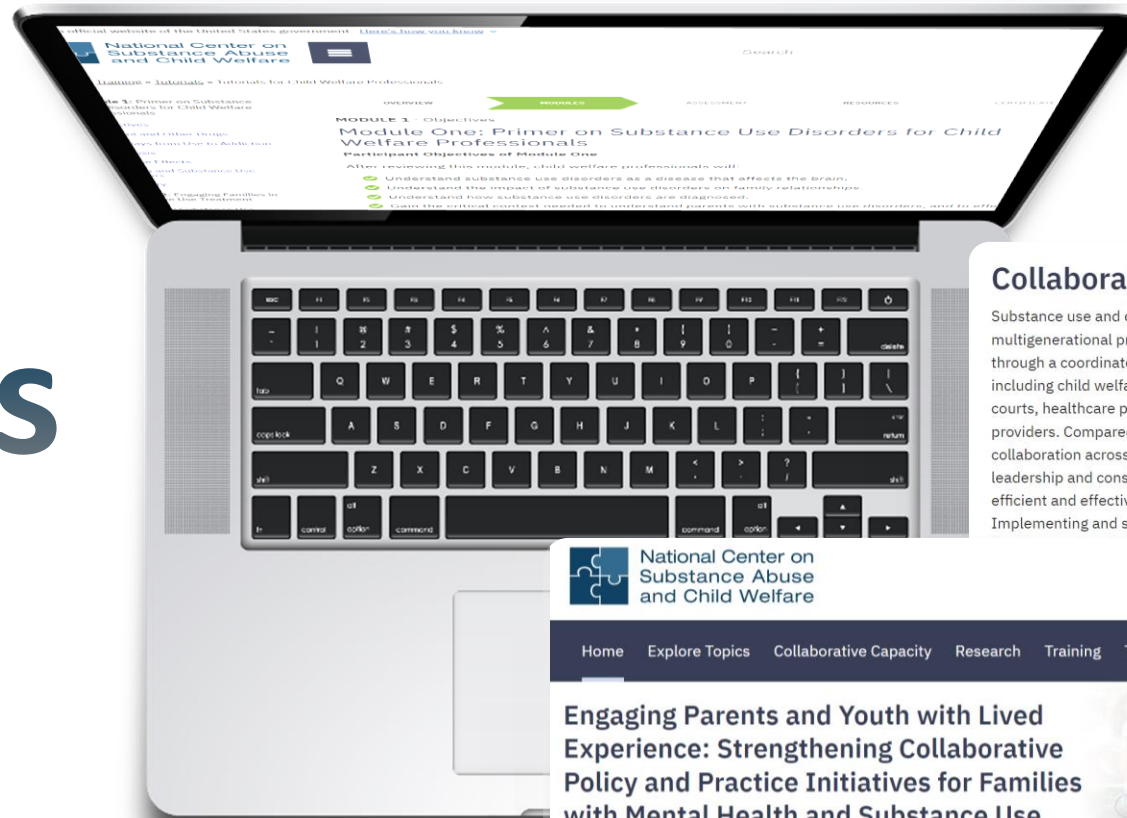
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tools, resources, and
webinars!*



Scan the QR code to subscribe to our newsletter!

Resources



Collaborative Capacity

Substance use and child maltreatment are often multigenerational problems that are best addressed through a coordinated approach across multiple systems, including child welfare services, substance use treatment, courts, healthcare providers, and other community providers. Compared to efforts by individual agencies, collaboration across multiple systems, coupled with strong leadership and consistent communication, offers a more efficient and effective approach that ultimately leads to better outcomes for families. Implementing and sustaining improved practice and policy changes on behalf of



[Home](#) [Explore Topics](#) [Collaborative Capacity](#) [Research](#) [Training](#) [Technical Assistance](#) [About Us](#)

Engaging Parents and Youth with Lived Experience: Strengthening Collaborative Policy and Practice Initiatives for Families with Mental Health and Substance Use Disorders

[VIEW DOCUMENT \(PDF 3.7 MB\)](#)



NCSACW Child Welfare Practice Tip Series



- *Understanding Substance Use Disorders: What Child Welfare Staff Need to Know*
- *Understanding Engagement of Families Affected by Substance Use Disorders-Child Welfare Practice Tips*
- *Understanding Screening and Assessment of Substance Use Disorders-Child Welfare Practice Tips*
- *Identifying Safety and Protective Capacity for Families with Parental Substance Use Disorders and Child Welfare Involvement*
- *Child Welfare & Planning for Safety: A Collaborative Approach for Families with Parental Substance Use Disorders and Child Welfare Involvement*

Download @ <https://ncsacw.acf.hhs.gov/topics/parental-substance-use-disorder.aspx>



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Safety & Risk Video Series



This video series provides child welfare professionals with details on child safety and risk factors related to parental substance use disorders (SUDs). The series highlights strategies to promote parent engagement and support a coordinated approach—across systems—that helps families mitigate child safety and improve family well-being. It includes considerations when planning for safety with families.

- *Engagement and Safety Decision-Making in Substance Use Disorder Cases*
- *Planning for Safety in Cases When Parental Substance Use Disorder is Present*



<https://ncsacw.acf.hhs.gov/training/videos-and-webinars/webinars.aspx>

Free Online Tutorials for Cross-Systems Learning



Understanding Substance Use Disorders and Facilitating Recovery: A Guide for Child Welfare Workers



Understanding Child Welfare and the Dependency Court: A Guide for Substance Use Treatment Professionals



Understanding Substance Use Disorders, Treatment and Family Recovery: A Guide for Legal Professionals

@ <https://ncsacw.acf.hhs.gov/training/default.aspx>

Disproportionalities and Disparities in Child Welfare

A resource for child welfare workers to help

- Understand the link between disproportionalities, disparities, and the child welfare system
- Recognize disproportionalities and disparities when working with families affected by SUD
- Implement strategies to increase engagement with families and reduce inequities.

Available @ <https://ncsacw.acf.hhs.gov/files/cw-tutorial-supplement-equity.pdf>

NCSACW Training Toolkit



National Center on
Substance Abuse
and Child Welfare

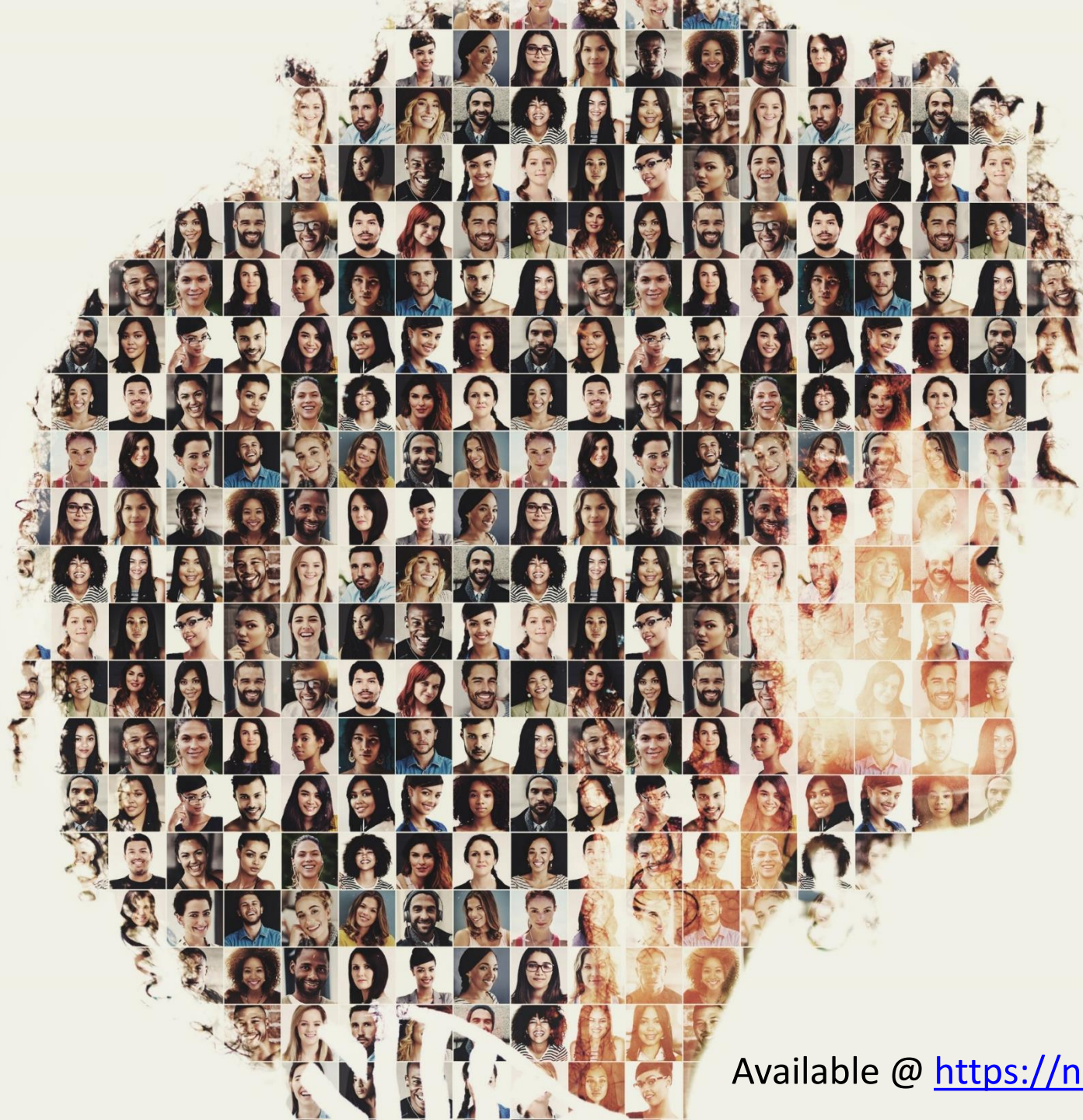
Module 1:

Understanding the Multiple Needs of Families
Involved with the Child Welfare System

The National Center on Substance Abuse and Child Welfare (NCSACW) developed the Child Welfare Training Toolkit to educate child welfare workers about substance use and co-occurring disorders among families involved in the child welfare system. The training is intended to provide foundational knowledge to help child welfare workers:

- Understand substance use and co-occurring disorders
- Identify when substance use is a factor in a child welfare case
- Learn strategies for engaging parents and families in services
- Understand potential effects for the parent, children, and caregivers
- Learn the importance of collaboration within a system of care. Through a deeper understanding of these topics, child welfare workers can apply knowledge gained to their casework and improve their own practice

Visit our website to download the training toolkit: <https://ncsacw.acf.hhs.gov/training/toolkit/default.aspx>



Disrupting Stigma

How Understanding, Empathy and Connection Can Improve Outcomes for Families Affected by Substance Use and Mental Disorders



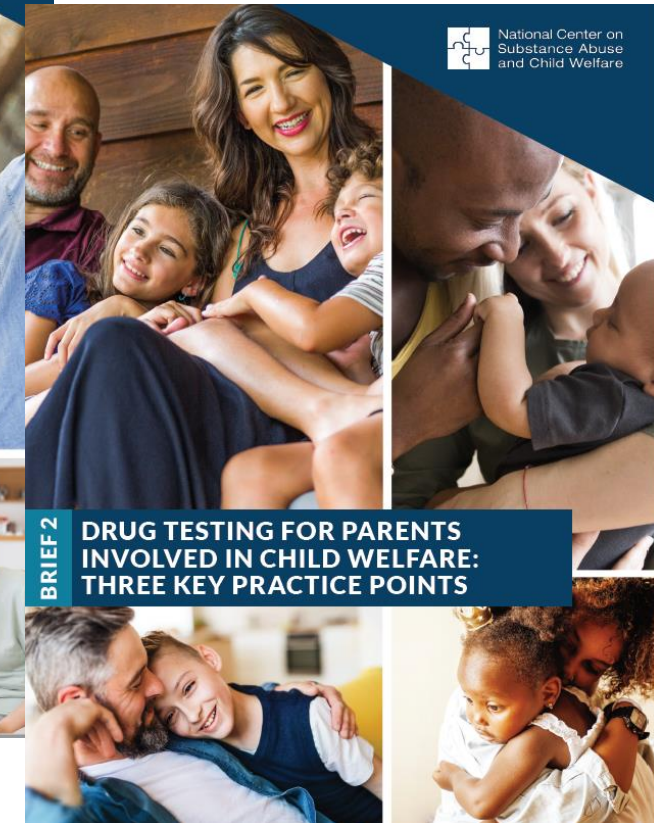
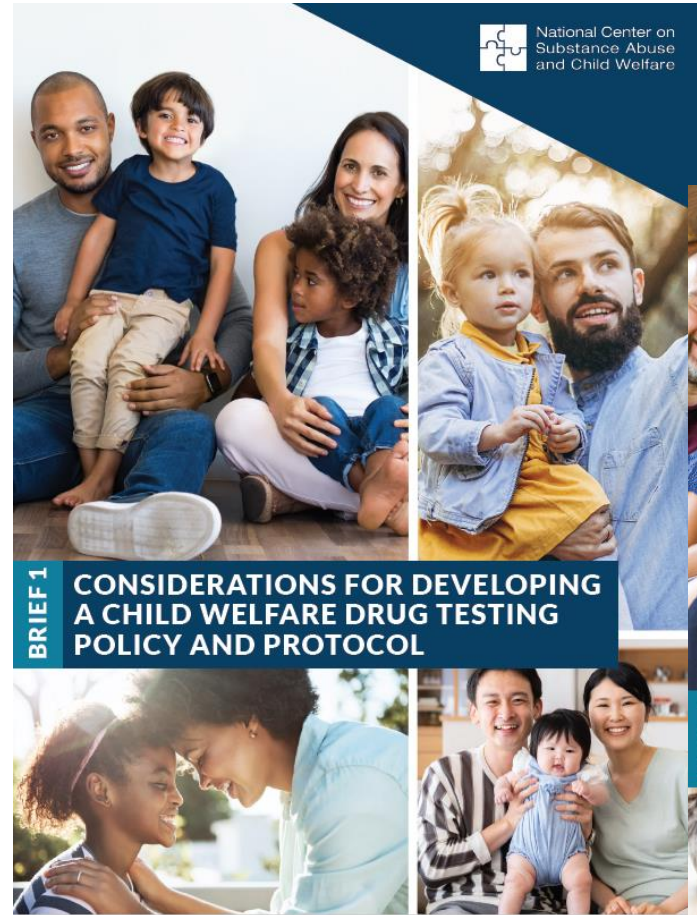
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Available @ <https://ncsacw.acf.hhs.gov/files/disrupting-stigma-brief.pdf>

Drug Testing in Child Welfare

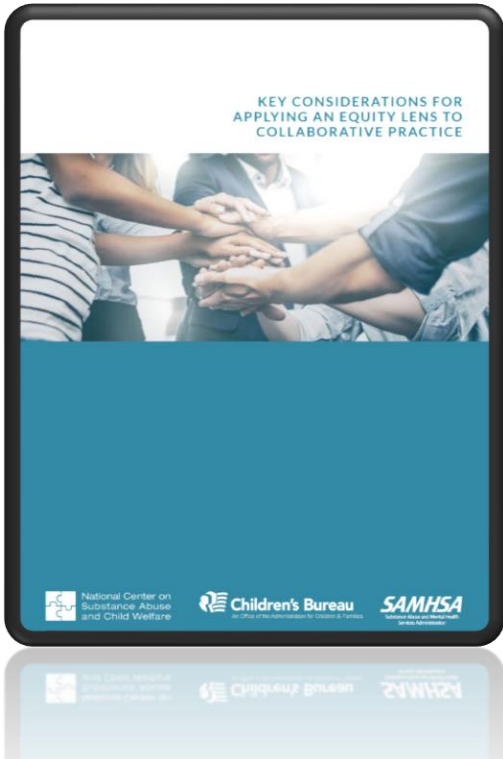
Brief 1: Considerations for Developing a Child Welfare Drug Testing Policy and Protocol

Brief 2: Drug Testing for Parents Involved in Child Welfare: Three Key Practice Points



Available @ <https://ncsacw.acf.hhs.gov/topics/drug-testing-child-welfare.aspx>

Key Considerations for Applying an Equity Lens to Collaborative Practice



This brief helps collaborative teams formally ***assess existing policies*** to determine if and how they ***contribute to disproportionate and disparate outcomes for families*** being served.

By working through the “Questions to Consider”, teams begin applying an ***equity lens*** to collaborative policies and practices.



BUILDING COLLABORATIVE CAPACITY SERIES

This seven-part series is organized into two clusters. The first cluster provides a *framework for establishing a collaborative team*. The second cluster highlights strategies to achieve *timely access* to treatment and support services for families.

AVAILABLE @ <https://ncsacw.acf.hhs.gov/collaborative/building-capacity.aspx>

Exploring Civil Rights Protections for Individuals in Recovery from an Opioid Use Disorder

Five-Part Video and Webinar Series

Civil Rights Protections for Individuals with a Disability: The Basics

Civil Rights Protections for Individuals with an Opioid Use Disorder

Medication-Assisted Treatment and Common Misconceptions

Child Welfare Case Staffing: Social Worker and Supervisor

Child Welfare Case Staffing: Child Welfare Court Case



Available @ <https://ncsacw.acf.hhs.gov/topics/medication-assisted-treatment.aspx>

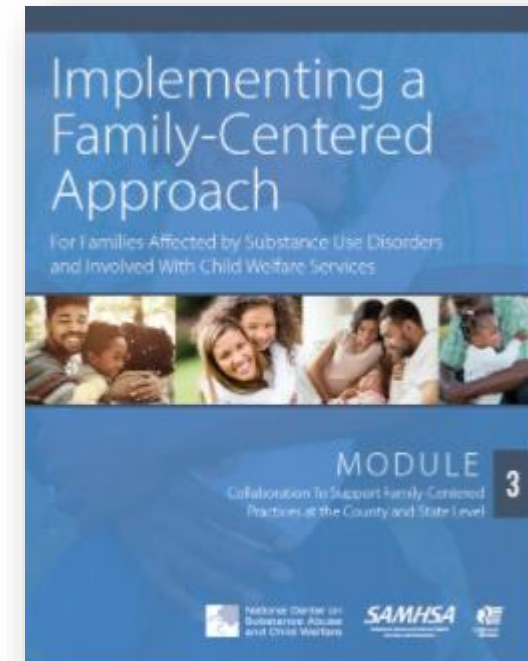
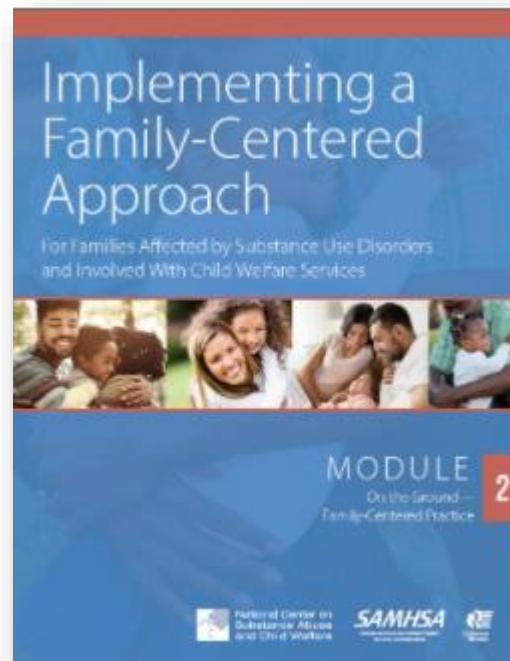
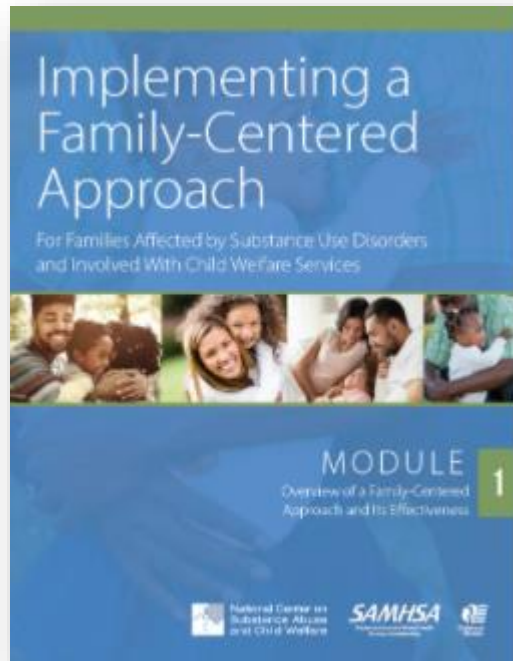
Working with Adolescents: Practice Tips and Resource Guide



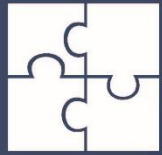
- Technical assistance tool provides information for child welfare, substance use treatment, healthcare, and other community agencies serving adolescents at risk of misusing or abusing substances.
- Highlights adolescence as a unique stage of development – one that requires professionals to take a tailored and collaborative approach.
- Guide includes:
 - Examples of services and interventions
 - Terminology
 - Policy considerations
 - Family-centered practice strategies

Available @ <https://ncsacw.acf.hhs.gov/topics/parental-substance-use-disorder.aspx>

Family Centered Approach Modules



<https://ncsacw.acf.hhs.gov/topics/family-centered-approach/fca-modules.aspx>



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THE USE OF PEERS AND RECOVERY SPECIALISTS IN CHILD WELFARE SETTINGS

Purpose: The brief offers implementation considerations that professionals can draw from when implementing peer or recovery specialist models in their communities.

Audience: Administrative and executive-level professionals from:

- Child Welfare
- Substance Use Disorder Treatment
- Courts

Key Informant Interviews: Representatives from four programs—2 peer support programs and 2 recovery specialist programs—that have demonstrated positive child welfare and recovery outcomes for families



Children and Family Futures
**COMPREHENSIVE FRAMEWORK
TO IMPROVE OUTCOMES FOR FAMILIES
AFFECTED BY SUBSTANCE USE
DISORDERS AND CHILD
WELFARE INVOLVEMENT**



Children and Family Futures
Strengthening Partnerships. Improving Family Outcomes

COMPREHENSIVE FRAMEWORK TO IMPROVE OUTCOMES FOR FAMILIES AFFECTED BY SUBSTANCE USE DISORDERS AND CHILD WELFARE INVOLVEMENT

- Offers a set of proven strategies for communities to implement to improve outcomes for families affected by SUDs.
- Informed by research and several decades of experience working with hundreds of collaborative partnerships

Available @

<https://ncsacw.acf.hhs.gov/collaborative/default.aspx>

ENGAGING PARENTS AND YOUTHS WITH LIVED EXPERIENCE

- Provides key considerations for collaboratives that are trying to engage parents who have been involved with the child welfare system due to substance use disorder or other mental health challenges.
- Highlights considerations for those collaboratives trying to engage youth who have been in the foster care system.

ENGAGING PARENTS AND YOUTHS WITH LIVED EXPERIENCE

Strengthening Collaborative Policy and Practice
Initiatives for Families with Mental Health and
Substance Use Disorders



Available @

<https://ncsacw.acf.hhs.gov/files/live-experience.pdf>



Additional Resources on Collaboration

Web-Based Resource Directory

- Includes research, training materials, webinars and videos, site examples and other resources
- Topics include substance use disorders and treatment, medication-assisted treatment, infants with prenatal substance exposure, and supporting families with opioid use disorders

Technical Assistance

- Identifying values and principles of collaborative practice to address differences and develop agency values', missions and mandates
- Examples of effective collaborative practice between substance use providers, child welfare and the courts

Collaborative Practice

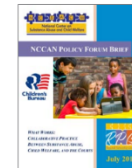


The goal of the professionals who work with children and families affected by substance use disorders and involved in the child welfare system is to facilitate positive outcomes for these families. Ideally, the parent will receive effective treatment for the substance use disorder so that the child can remain with the parent, while the well-being of the child is fully supported throughout the parent's recovery process. Achieving this outcome requires intensive collaboration by multiple agencies working with the family.

Collaboration among all three systems presents certain barriers that must be overcome. There is a shifting role for professionals as they develop and implement a new way of communicating with one another on policy issues. Differences in practice among stakeholders, from courtroom to courtroom, from agency to agency, and from provider to provider must be recognized and addressed.

Highlighted Resource

NCCAN Policy Forum Brief What Works: Collaborative Practice Between Substance Abuse, Child Welfare, and the Courts



(PDF 1.2MB)



Home Resources and Topics Collaboration Training Technical Assistance

Home > Resources & Topics > Underlying Values and Principles of Collaborative Practice

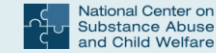
Underlying Values and Principles of Collaborative Practice

Underlying values should be addressed in developing collaborations because the partners are very likely to come to the table with different perspectives and assumptions about their agency's or the court's values and mission and mandates. Unless these differences are addressed, the partners will be unable to reach agreement on issues. The underlying values can be clarified and formalized in Memorandum of Understanding, Administrative Policy and Legislation.



- ▶ [Synthesis of Cross System Values and Principles: A National Perspective](#) (PDF 70 KB)
Reflects the shared values and principles of the NCSACW Consortium Member Organizations and forms the basis for developing collaborative solutions for identified cross-system issues in order to improve outcomes for children and families.
- ▶ [Colorado Overarching Statement of Values and Principles about Families and Colleague – Statement of Values and Principles](#) (PDF 84 KB)
- ▶ [Massachusetts Statement of Values and Principles](#) (PDF 70 KB)
- ▶ [Michigan Director's Statement of Support and Interdepartmental Commitment](#) (PDF 32 KB)
- ▶ [Minnesota Statement of Shared Values and Guiding Principles](#) (PDF 36 KB)

Understanding Substance Use Disorders – What Child Welfare Staff Need to Know



- 1** Substance use disorders (SUDs) are complex, progressive, and treatable diseases of the brain that profoundly affect how people act, think, and feel. SUDs affect an individual's social, emotional, and family life, resulting in emotional, psychological, and sometimes physiological dependence.
- 2** Be aware of common misperceptions and myths. Many people incorrectly believe that a parent with a SUD can stop using alcohol and/or illicit drugs with willpower alone or that if the parent loved their children they would be able to just stop using the drug.
- 3** Relapse rates for SUDs are similar to other chronic medical conditions such as diabetes or hypertension. Because SUDs are a chronic brain disease, a return to use or relapse, especially in early recovery, is possible. Therefore, SUDs should be treated like any other chronic illness. A recurrence or return to use is an opportunity to examine a parent's current treatment and recovery support needs, and adjust them as needed.
- 4** SUDs can be successfully treated and managed. Like other diseases, SUDs can be effectively treated. Successful substance use treatment is individualized and generally includes psychosocial therapies, recovery supports and, when clinically indicated, medications.
- 5** SUDs can affect each member of the family, relationships, and parenting. SUDs can contribute to a chaotic and unpredictable home life, inconsistent parenting, and lack of appropriate care for children. Treatment and recovery support must not focus solely on the parent's substance use, but take a more family-centered approach that addresses the needs of each affected family member.
- 6** Recognize co-occurrence of trauma. For many people, trauma is a common experience associated with their SUD. Substance use might be an individual's way to cope with their trauma experience. An effective practice integrates a trauma-informed approach that realizes the widespread impact of trauma, recognizes the signs and symptoms, and avoids causing further harm and retraumatization.

LEARN MORE

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