



Adolescent Substance Abuse
Treatment:
The ACRA Model

A Jennifer Gardner, LMSW Presentation
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Treatment Options

- Community Mental health and substance abuse agencies
- Schools
- Self- Help
- Arms Acres-Adolescents only detoxification/inpatient facility (Carmel N.Y.)
 - Call for insurances but has taken Husky



Treatment Options: Day style

- Inpatient Treatment: 24 hour care
 - Detox/inpatient treatment
 - Partial Hospitalization/IOP
 - Community Corrections/Jail-During and after
 - Residential treatment: 2 weeks - ? months
 - Community group sober housing
 - Outpatient treatment: individual and group
 - Payment by third party or state funded

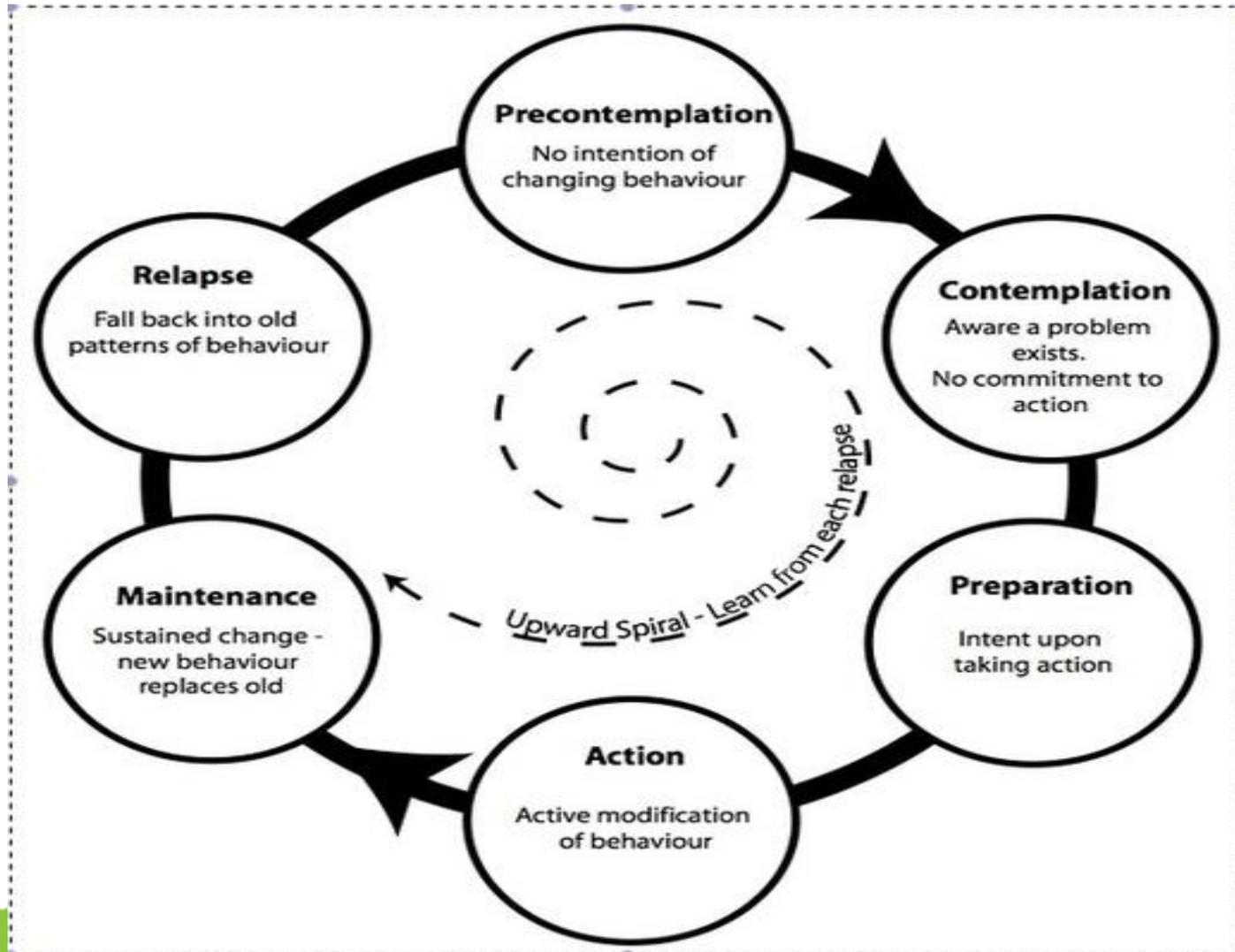


Evidence Based Treatment

- Motivational Interviewing-*Motivational interviewing is a directive, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence.* STAGES of CHANGE.
- Multi-Dimensional Family Therapy (MDFT)
- Certain Multi-Systemic Therapy Programs (MST)
- Children, Youth and Family Support Centers (CYFSC)
- Adolescent Community Reinforcement Approach



Stages of Change



Everything We Do Begins With Hope.

ACRA

Target Population

- Substance using or at risk for substance abusing, living at home with or returning home to a primary caregiver.
- Transition to outpatient level from an in-home program
- Use is interfering in at least one area of teen's life
- May have other co-occurring disorders (dual diagnosis).

- A-CRA is a comprehensive and flexible family program for ages 12- 18 (case by case at 18)
- Duration of treatment : 6 months per episode.
- A-CRA interventions targets the risk factors and process that that have created and continues substance use and related problems such as conduct disorders and delinquency.



Targets of ACRA

Works in four areas:

- The parent - self, parenting
- The adolescent - self, family, peer
- The family - healthy family functioning
- Extra familial - school, peer group, legal (juvenile justice), social service, medical



But how does it....

How A-CRA Works:

- The step after the intake
 - (GAIN) Global Assessment of Individual Needs Identifies strengths of the individual and family system. Forming of a strong initial working relationship with family, school, and legal system, if applicable.



Snacks, who doesn't love snacks?

- A-CRA Stage 2:
 - The working phase of treatment.
 - Uses 19 specific procedures to replace environmental contingencies that have supported alcohol or drug use with prosocial activities and behaviors that support recovery
 - 3 months; clinic based
 - Caregiver only sessions
 - Family sessions
 - Homework

I got mad skills...

- Daily reminders to be nice
- Drug refusal skills
- Happiness scales
- Problem solving
- Goal Setting
- Job searching
- Sobriety Sampling
- Functional Analysis of Substance Using behavior
- Leisure Questionnaire
- Increase Prosocial Skills
- Communication Skills
- Positive Parenting
- Relapse Prevention

Transition to ACC

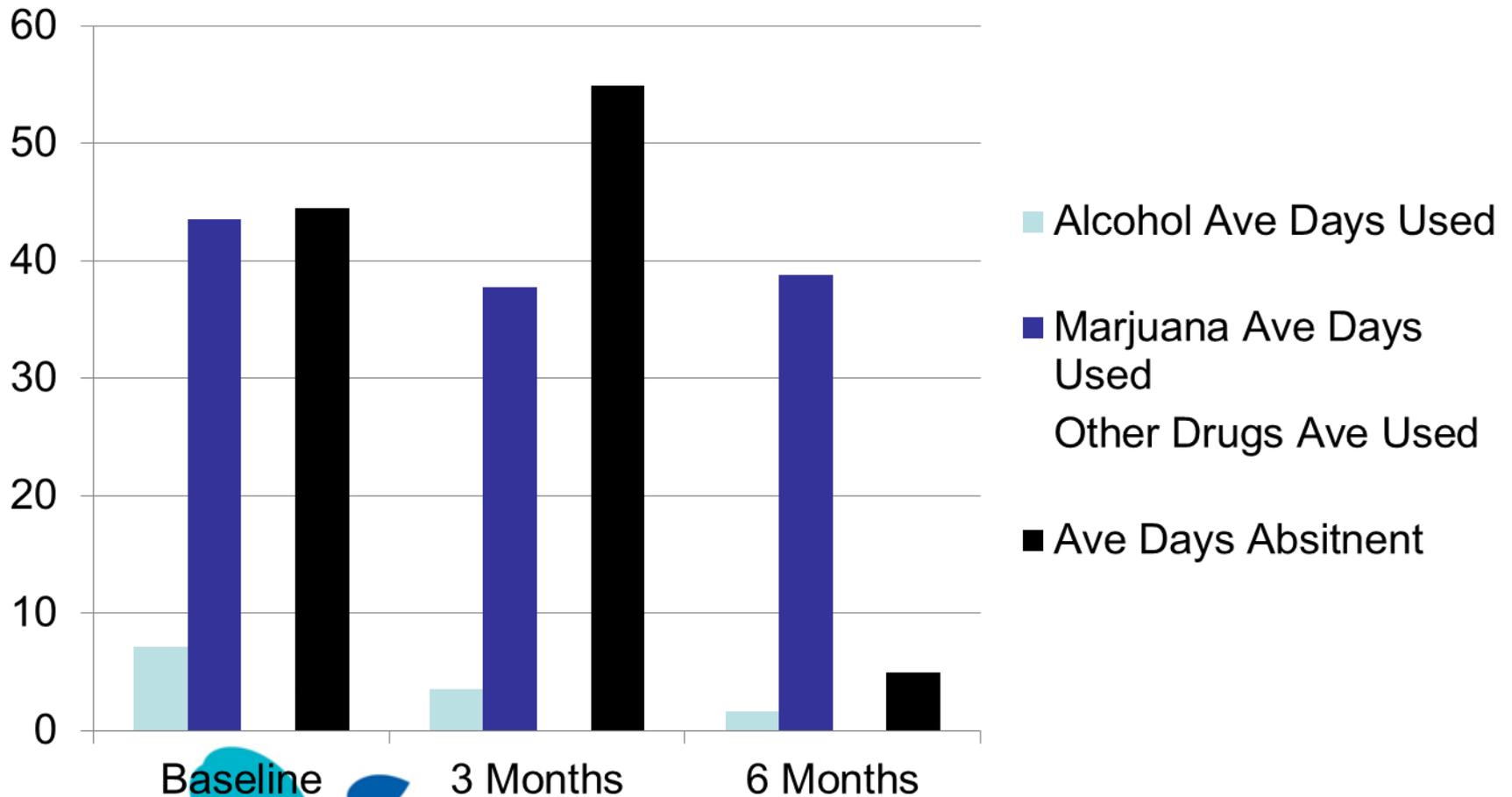
Stage 3-

- Prepares the youth and family for the next stage of development, using the knowledge and, experience and skill set learned in
- Re-examine discharge plan
- Step down to ACC-Assertive Community Care
 - 3 months, community based
 - Social Activities
 - Reinforcement of Skills
 - Weekly Texting Check in
 - Continued Family Support

Outcomes: Example Q3 Region 3

- **75%** of discharged youth met all or most treatment goals
- **25%** of discharged youth were abstinent or had reduced their substance use in the 30 days prior to discharge
- **63%** of discharged improved their school attendance or maintained good school attendance during A-CRA
- **100%** of discharged youth had no arrests during their enrollment in A-CRA, and youth involved in ACRA services for 3 months reported a **56%** reduction in the number of days they were involved in illegal activities.
- Youth involved in services for 3 months reported a **49%** reduction in the # of days they were bothered by emotional issues

Use Outcomes over CHR Regions



- Community Outcomes
 - Completion of JRB
 - Increased involvement in activities
- Caregiver Outcomes
 - Increased their involvement in their teens everyday life and improved relationships.
 - Repaired mistrust and improved communication
 - Improved their parenting skills and decreased their stress
 - Caregiver Involvement and Investment Important



Interventions by domain-ACRA

- **Individual** - these sessions focus on the youth's difficulty in school, in the family, legal problems, and relationship problems. Skills are taught and practiced.
- **Peer** - the youth is helped to address the non-adaptive nature of relationships with drug using and delinquent peers. (choosing the right peer group)
- **Family** - family session with parents focus on day to day events, improvement of family relationships, identifying strengths and weakness.
- **School** - therapist works with school as a mediator, advocate for the optimal learning environment for the student.
- **Community** - identifies community supports and resources and educates to the dangers that exist.

And now time for
Questions???

Handout Includes a quick fact sheet,
Regional Agencies, Contact People,
Referral Form and Agency Regional
Map