

Adolescent Track

Assessment and Treatment of Co-Occurring Mental Health and Substance Use Disorders in Adolescents

42nd Kentucky School of Alcohol and Other Drug
Studies (KSAODS)

August 17, 2015

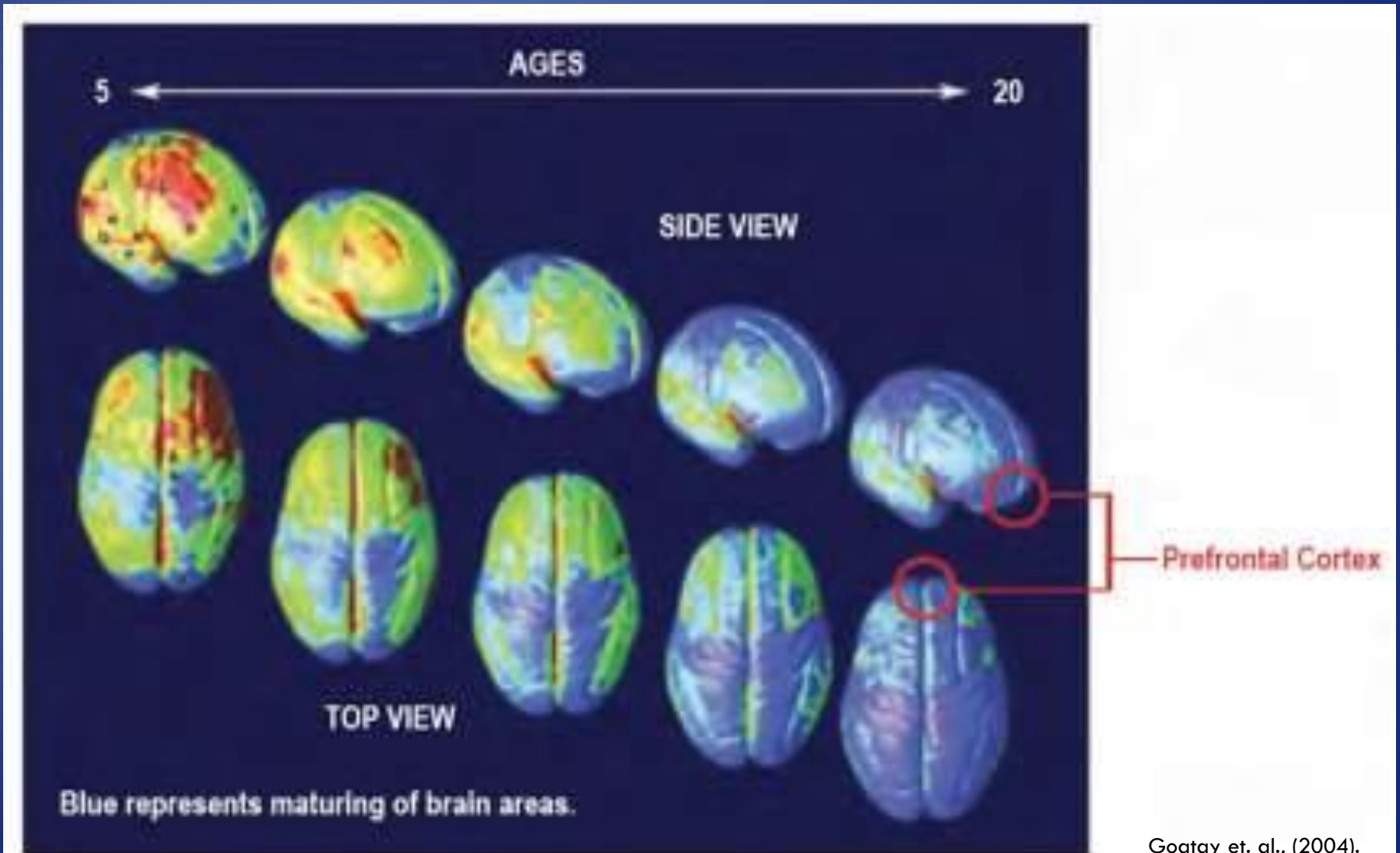
Learning Objectives

- Identify key elements of screening and assessment for adolescents
- Explore challenges in the assessment and treatment of adolescents with co-occurring disorders as well as strategies to reduce challenges
- Describe important components of treatment interventions for programs that provide co-occurring disorder services for adolescents
- Discuss the role of the provider, program and system in the development and delivery of comprehensive and integrated co-occurring disorder capable services for adolescents

Adolescent Development

- A time of opportunity
- Periodic rough patches
- Development of positive attributes
- Understanding the role of the community

Images of Brain Development in Healthy Children and Teens (Ages 5-20)



Developmental Considerations

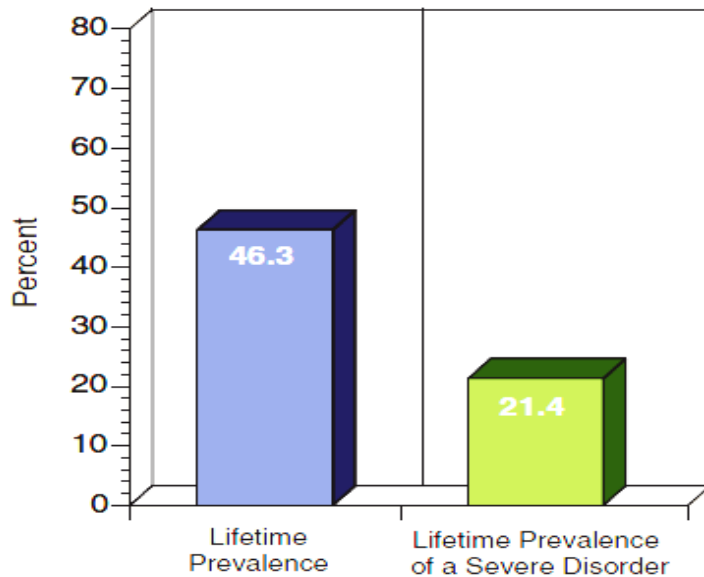
- Physical
- Cognitive
- Emotional & Social
- Forming an Identity
- Peer Group
- Spirituality & Religion

Mental Health

Any Disorder

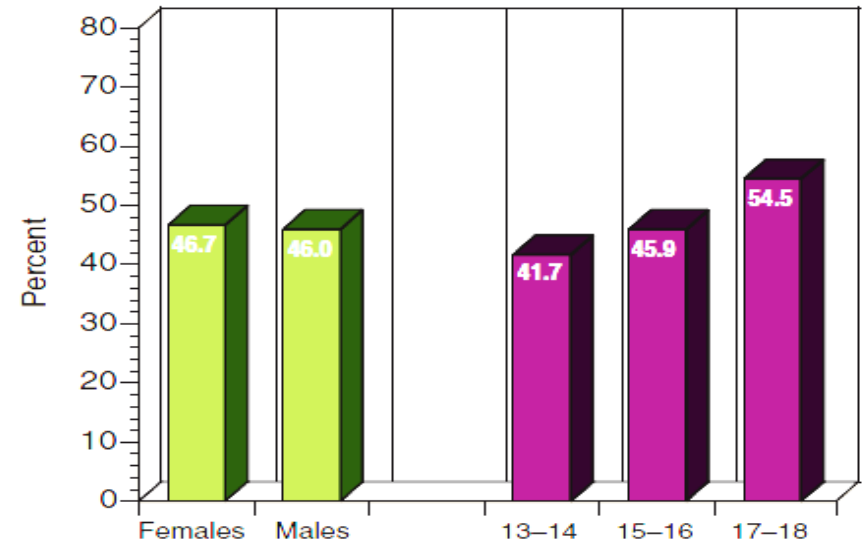
Lifetime Prevalence of 13 to 18 year olds

- **Lifetime Prevalence:** 46.3% of 13 to 18 year olds
- **Lifetime Prevalence of “Severe” Disorder:** 21.4% of 13 to 18 year olds have a “severe” disorder



Demographics (for lifetime prevalence)

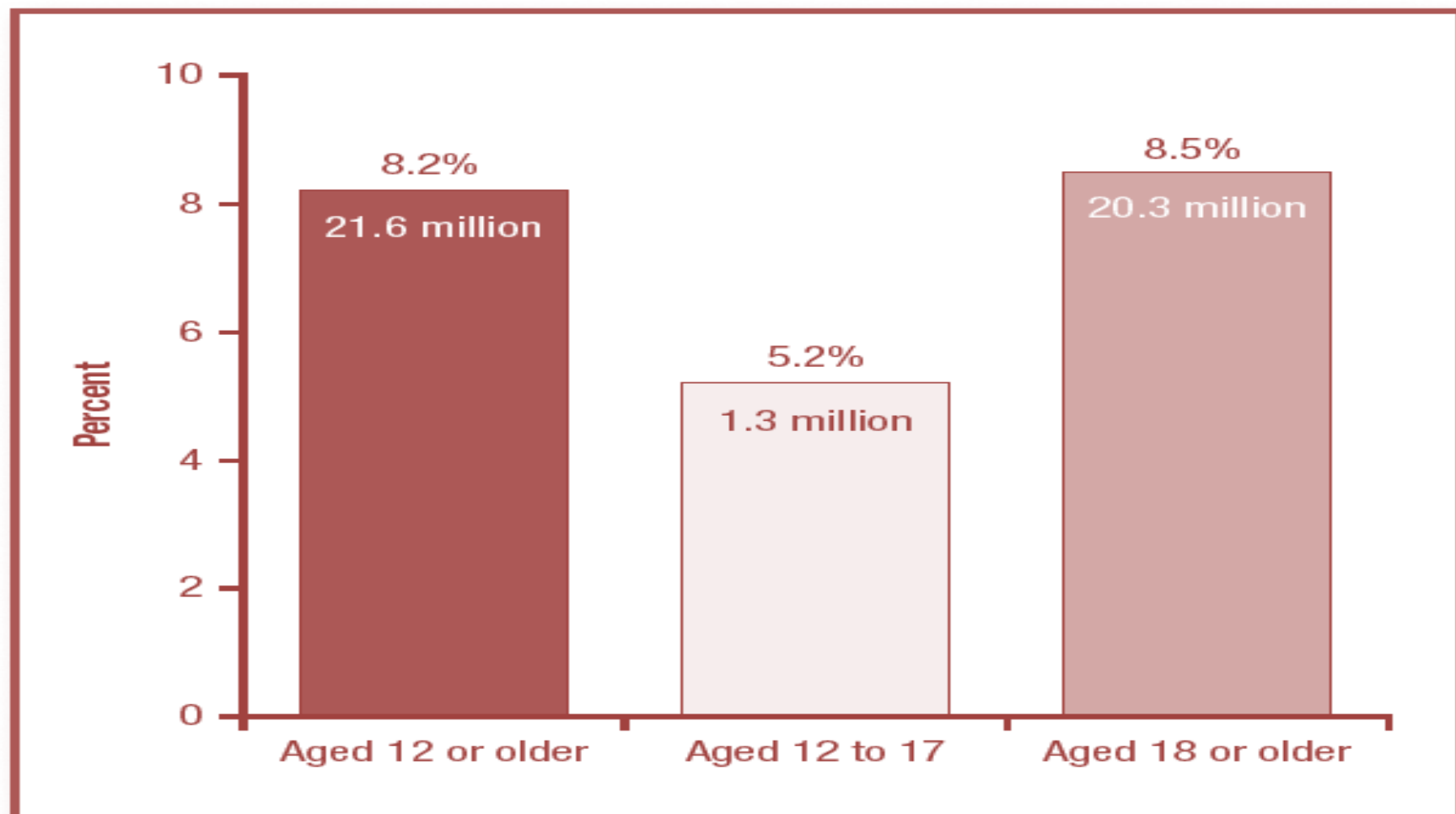
- **Sex:** Not statistically different
- **Age:** Statistically different



- **Race:** Statistically significant differences were found between non-Hispanic whites and other races

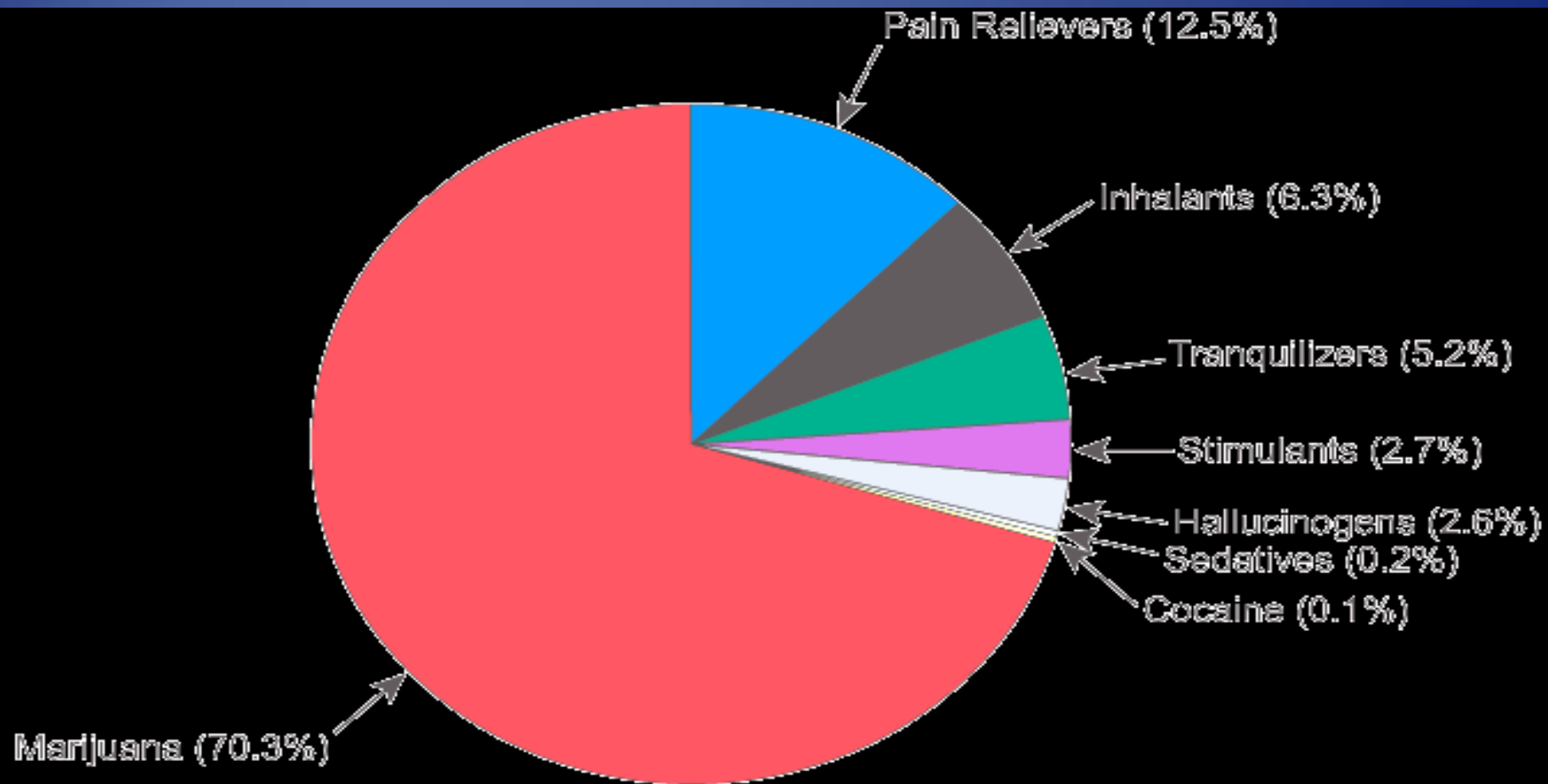
Substance Use

FIGURE 2. Substance use disorder (SUD) in the past year among individuals aged 12 or older: 2013



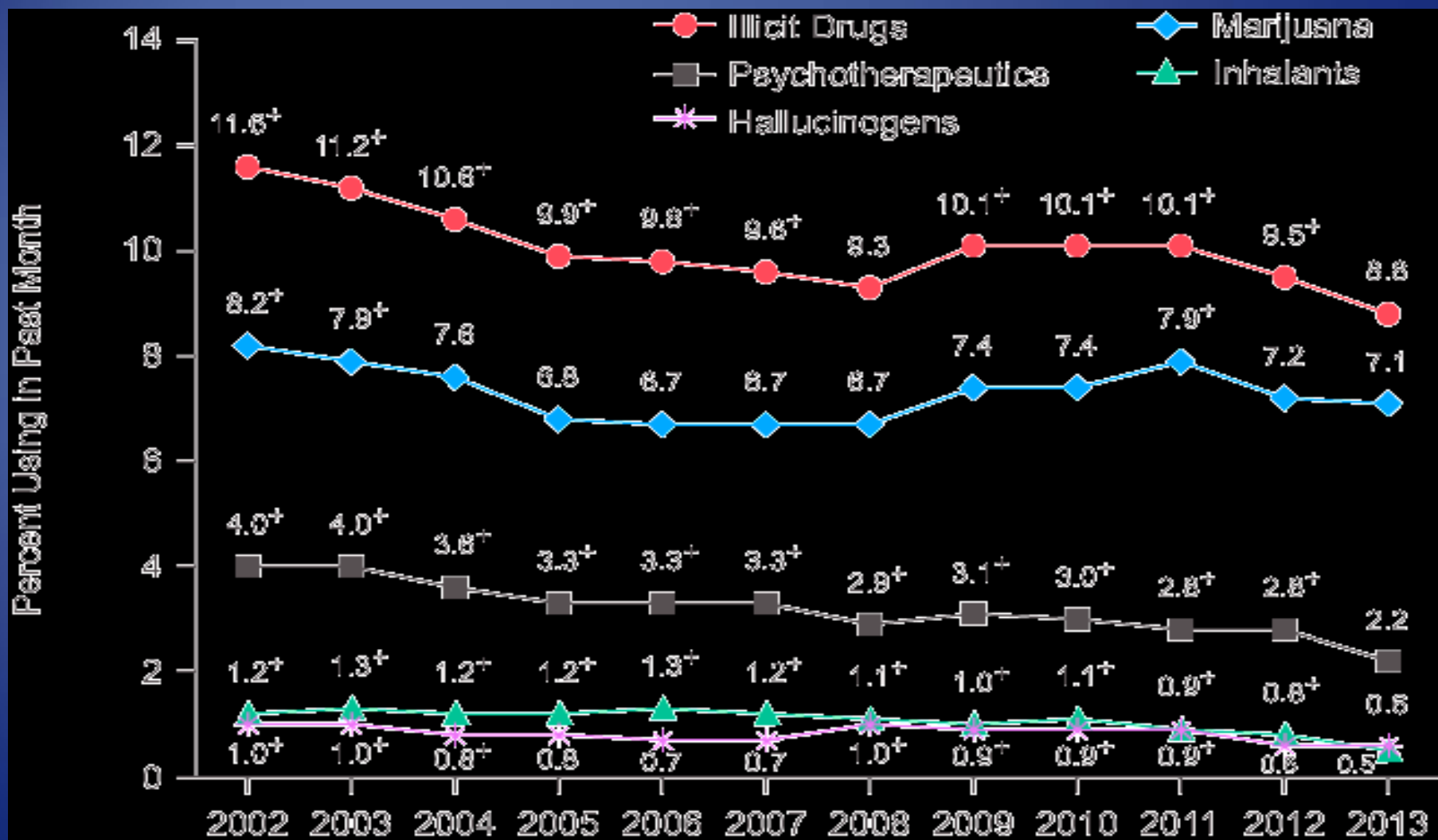
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2013.

First Specific Drug Associated with Initiation of Illicit Drug Use among Past Year Illicit Drug Initiates Aged 12 or Older: 2013

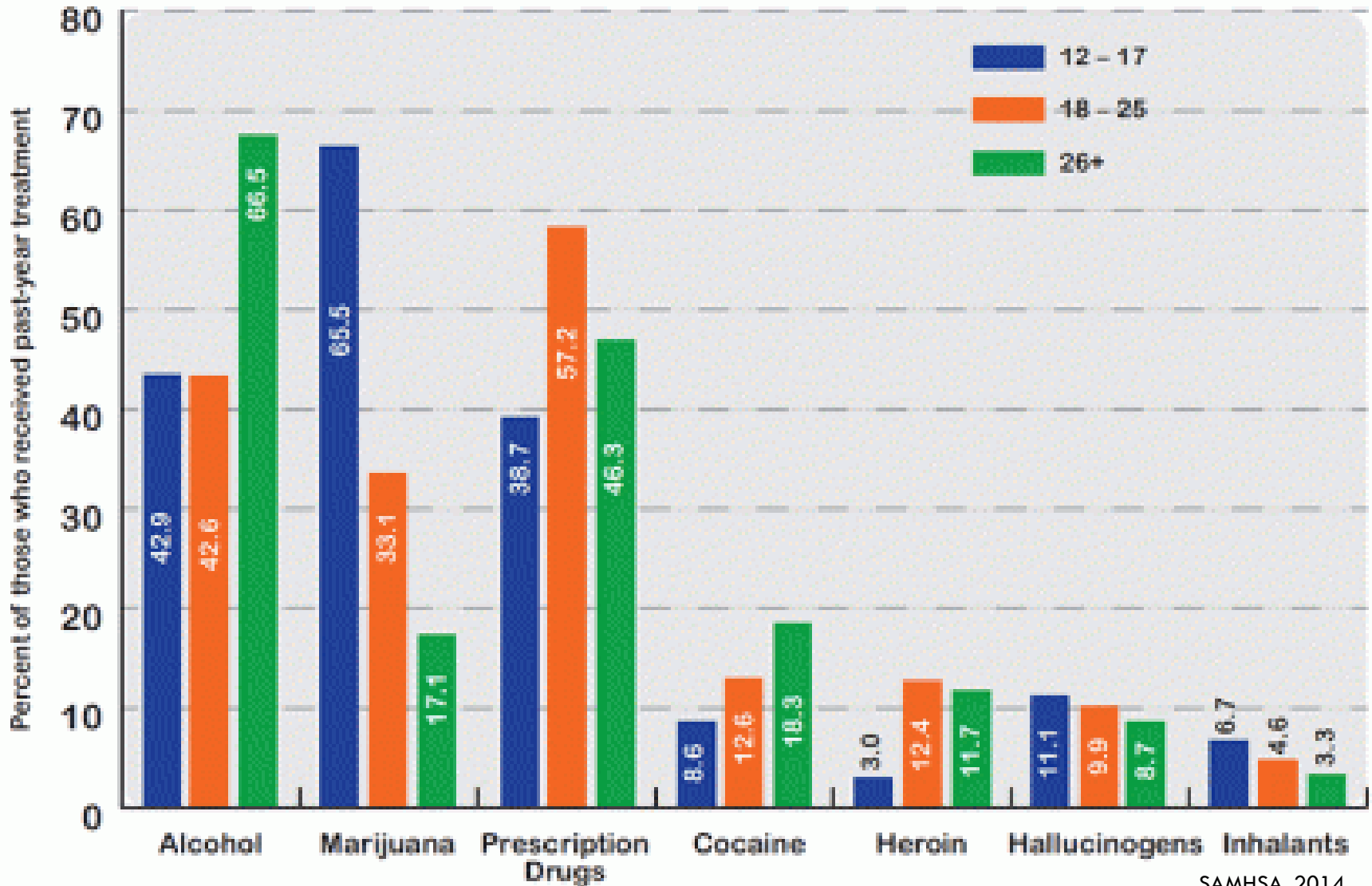


2.8 Million Initiates of Illicit Drugs

Past Month Use of Selected Illicit Drugs among Youths Aged 12 to 17: 2002-2013



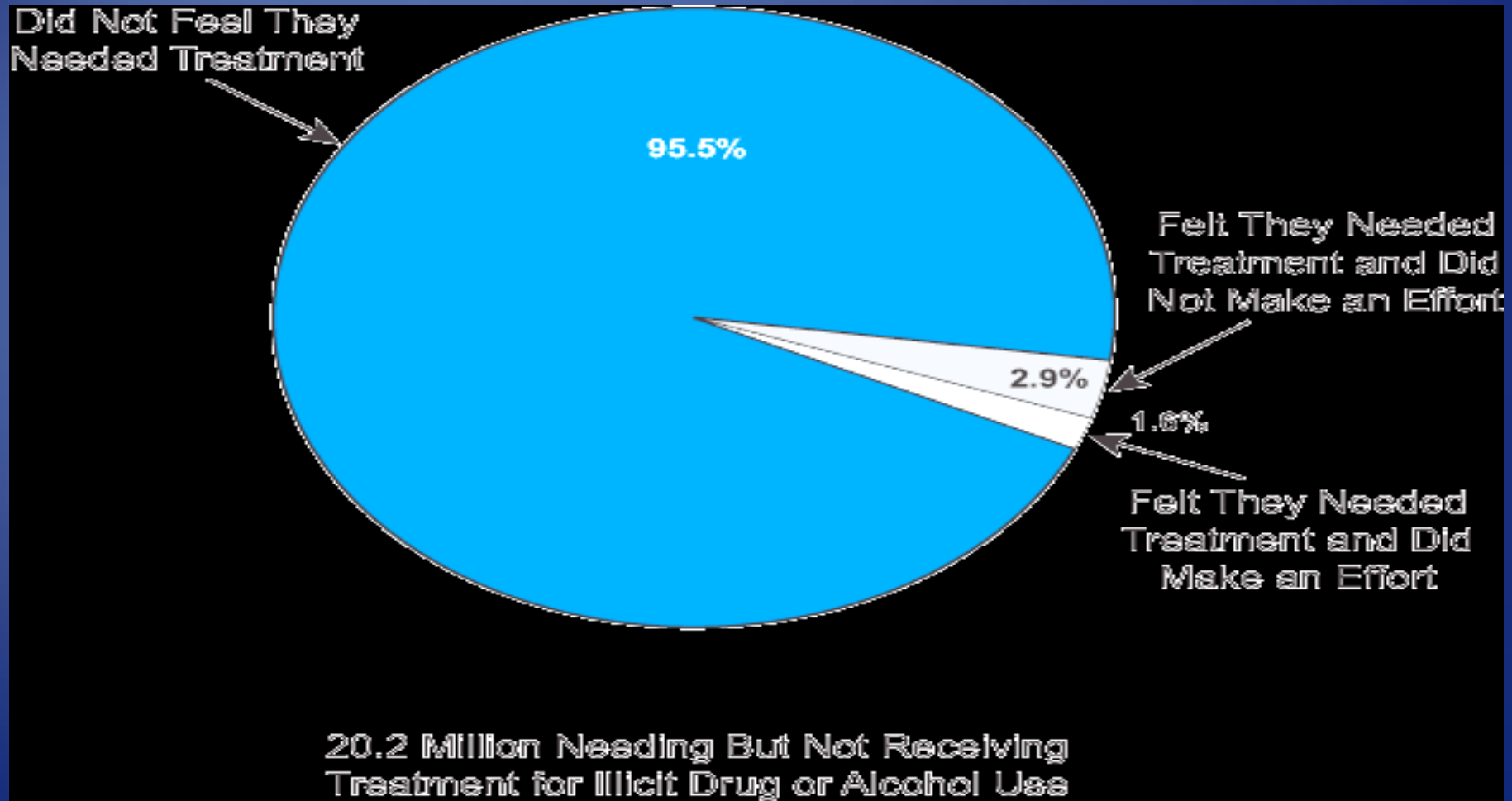
Adolescents Differ from Adults in Substances Most Abused



Defining Co-occurring Disorders

- “Individuals who have at least one mental disorder as well as an alcohol or drug use disorder. While these disorders may interact differently in any one person (e.g., an episode of depression may trigger a relapse into alcohol abuse, or cocaine use may exacerbate schizophrenic symptoms), at least one disorder of each type can be diagnosed independently of the other”

Past Year Perceived Need for and Effort Made to Receive Specialty Treatment among Persons Aged 12 or Older Needing But Not Receiving Treatment for Illicit Drug or Alcohol Use: 2013



Early Intervention Strategies

- Pre-School students
 - Elementary School students
 - Middle/High School students

Screening & Assessment Considerations

- Screens and assessments
- Reliability and validity
- Intended use
- Construct measured
- Age of client
- Administration time
- Who should administer the instrument
- Administration and scoring protocols
- Cost

Comprehensive Assessments

- Document in detail the presence, nature and complexity of presenting concerns reported during a screen
- Determine the specific treatment needs of the youth
- Permit the assessor to learn more about the nature, correlates and consequences of the youth's behavior
- Ensure that related problems not flagged in the screening process are identified

Comprehensive Assessments

- Examine the extent to which the youth's family can be involved in the assessment and interventions
- Identify specific strengths of the youth, family, and other social supports that can be used in developing an appropriate treatment plan
- Develop a comprehensive written report

The Multiple Assessment Approach

- Different content issues are measured with methods from several sources
 - History of substance use and mental health
 - Strengths and resources to build on
 - Medical health history
 - Developmental history
 - Family history
 - Sexual history
 - School history
 - Leisure time activities
 - Vocational history
 - Trauma history
 - Peer relationships, neighborhood environment
 - Juvenile justice involvement and delinquency
 - Social service agency program involvement

Options for Screens

- Adolescent Alcohol Involvement Scale
- Adolescent Drug Involvement Scale (ADIS)
- Global Appraisal of Individual Needs Short Version (GAIN-SS)*
- Massachusetts Youth Screening Instrument (MAYSI-2) Problem Oriented Screening Instrument for Teenagers (POSIT)*

Options for Assessments

- Adolescent Diagnostic Interview (ADI)*
- Child Behavior Checklist: Parent, Teacher, and Youth Self-Report forms
- Diagnostic Interview for Children and Adolescents (DICA-R)*
- Diagnostic Interview Schedule for Children – IV
- Global Appraisal of Individual Needs – Initial (GAIN-I)*
- Practical Adolescent Dual Diagnostic Interview
- Revised Behavior Problem Checklist
- Structured Interview for DSM-IV (SCID-I & II)*
- Symptom Checklist-90-Revised
- Trauma Symptom Checklist for Children

Emerging Measures

APA lists the following as “emerging measures” that should be used in research and evaluation as potentially useful tools to enhance clinical decision-making but not as the sole basis for making a clinical diagnosis.

- DSM-5 Self-Rated Level 1 Cross-Cutting Symptom Measure—Child Age 11–17
- LEVEL 2—Substance Use—Child Age 11–17
- DSM-5 Parent/Guardian-Rated Level 1 Cross-Cutting Symptom Measure—Child Age 6–17
- LEVEL 2—Substance Use—Parent/Guardian of Child Age 6–17 (adapted from the NIDA-Modified ASSIST)

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Screening and Assessment Challenges

- Confidentiality
- Consent to disclose
- Information from collaterals
- Other factors

Treatment Elements and Guiding Principles for the Delivery of Comprehensive and Integrated Co-occurring Disorder Services

- Strong relationships with and motivation of youth
- Effective screening
- Integrated, comprehensive assessment
- Integrated treatment
- Treatment plan with client-generated goals
- Developmental perspective

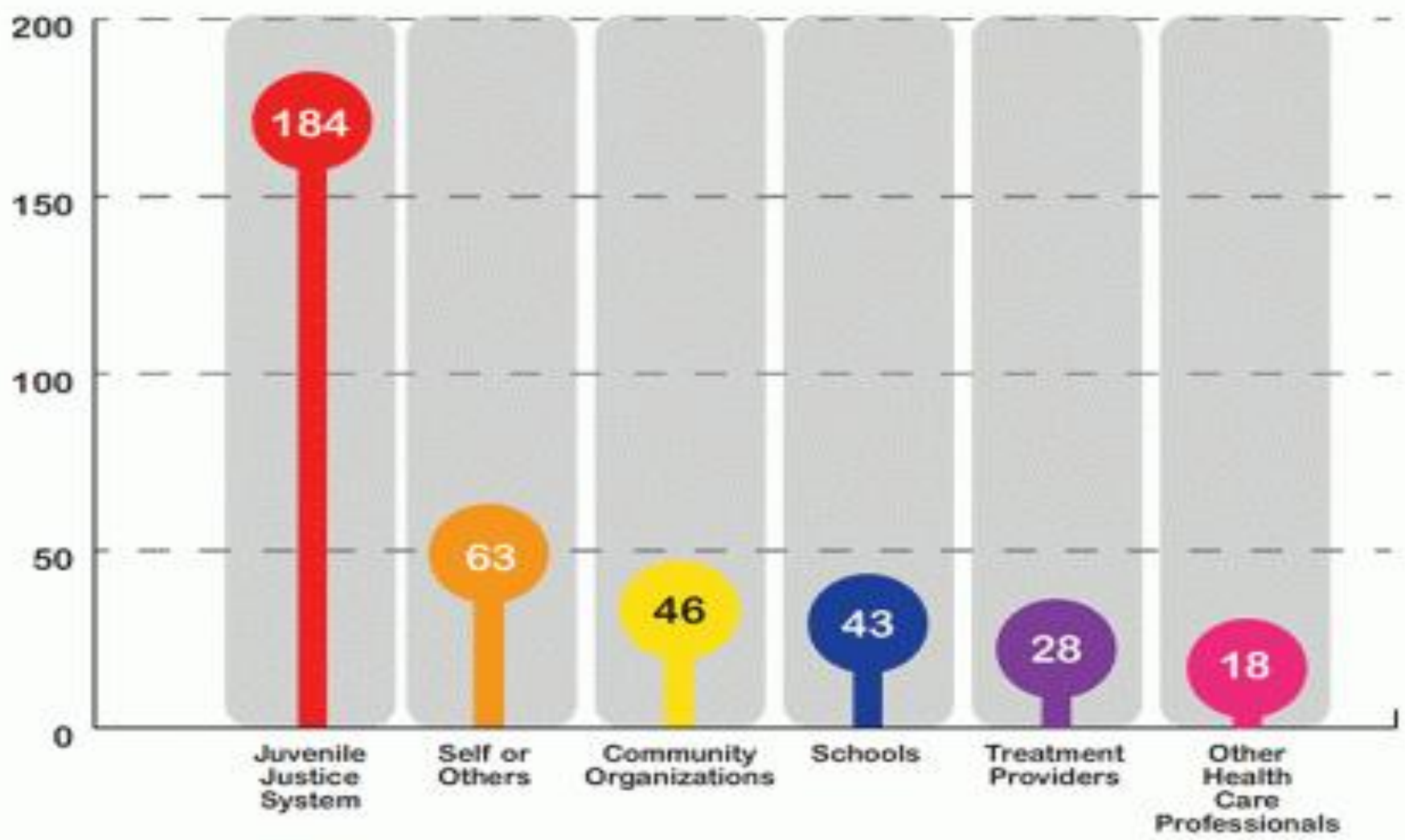
Treatment Elements and Guiding Principles

- Empirically supported treatments
- Youth focused services
- Focus on client strengths
- Family involvement
- Psychoeducation for families
- Cross trained staff
- Culturally sensitive content and environment
- Understanding of peer group influences
- Medication management, if needed

Examination of a Few Interventions

- Adolescent Community Reinforcement Approach (A-CRA)
- Family Behavior Therapy
- Seeking Safety
- Seven Challenges

Number of Adolescents (12–17) Admitted to Publicly Funded Substance Abuse Treatment Facilities on an Average Day, by Principal Source of Referral



What is your role in the development and delivery of comprehensive and integrated co-occurring disorder services for adolescents?

- Policy related issues
- Funding barriers
- Programmatic challenges
- Clinical needs
- Client concerns

Exploring Co-occurring Capability

- The Dual Diagnosis Capability Index for Youth
- The instrument is designed to explore co-occurring disorder capability of a program (e.g., outpatient, home-based, juvenile justice, residential, school behavioral healthcare) that was established to serve the needs of children and adolescents.

Exploring Co-occurring Capability

- Focus - delivery of evidence-based practices for children and adolescents with co-occurring concerns and disorders
- Emphasis on:
 - Developmentally appropriate services
 - Least restrictive setting
 - Family, peer, and school involvement
 - Multiple community based agencies and systems

Exploring Co-occurring Capability

- Goals
 - Child-centered
 - Youth-guided
 - Family-focused approach
 - Comprehensive array of effective-community-based, culturally and linguistically competent services and supports individualized according to the needs of each youth
 - Service system coordination and integration

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