

Presentation to the Senate Committee on Health and Welfare

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U.S.A. Context

"An estimated 70 to 80% of child welfare cases involve families affected by substance use."

Nancy K. Young, Director, National Center on Substance Abuse and Child Welfare



Key Barriers – Substance Abuse, Child Welfare and the Courts

- Beliefs and Values
- Competing Priorities
- Treatment Gap
- Information Systems
- Staff Knowledge and Skills
- Lack of Communication
- Different Mandates



Enhanced Capacity for Families to Provide for Children's Needs

- Improved Screening and Assessment Protocols and Effective Communication Paths Across Systems
 - Standardized Screening Tools
 - Partnering for Alcohol and Other Drug (AOD) Expertise
 - Standardized Monitoring & Reporting Tool
 - Joint Case Management



Substance-Abusing Parents Have Multiple Problems

- Co-occurring problems: poverty, mental health issues/past trauma, domestic violence, low educational achievement
- Access to treatment issues
- Difficulties with treatment enrollment and retention
- Relapse common



Impact of Alcohol and Other Drugs (AOD) on Children

- The two most significant risks to children of substance abusers¹:
 - Poorer developmental outcomes
 - High risk of substance abuse themselves
- Children of substance abusers exhibit depression and anxiety more often than children from non-addicted families².
 - 1. Department of Health and Human Services, Blending Perspectives and Building Common Ground, April 1999.
 - 2. National Association for Children of Alcoholics, Children of Addicted Parents: Important Facts, http://www.nacoa.org



Key Points

- Assessment of parents' for AOD issues as early as possible
- Immediate and ongoing contact with Recovery Specialist – gender specialist (if possible)
- Immediate access to treatment
- Supervised alcohol and drug screenings
- Ongoing recovery monitoring
- Support, encouragement and motivation
- Attendance at significant events

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Process for accessing treatment services in Vermont



Client is screened by a clinician or professional (i.e. physician, drug court case manager, AHS employee, etc.)

Client or provider contacts a treatment substance provider Provider assesses
client with
evidence based
tools to determine
level of care
needed using
ASAP placement
criteria

Provider refers client in the appropriate level of care Outpatient

Intensive Outpatient

Residential

Medication Assisted Treatment Recovery
Center
Referral
for
support



Screening vs. Assessment

Screening is intended to identify people at risk for or actually experiencing harm associated with their drinking and/or drug use.

Assessment is intended to gather detailed information about people's patterns of consumption and consequences to inform intervention.



Resources



http://healthvermont.gov/adap/treatment/treatment.aspx
http://healthvermont.gov/adap/treatment/treatment_county.aspx

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