



# Engaging Parents in Treatment, Recovery and Parenting: Effective Strategies

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# A Problem Exists

- Parents entering the child welfare system with substance abuse issues often fail, which leads to:
  - Decreased Reunification
  - Children raised in foster care
  - Increased fiscal demands



# Sometimes Child Welfare and Substance Abuse Treatment are Worlds Apart



# Purpose Of Utilizing Substance Abuse Recovery Specialists



Reduce costs of out-of-home placements and/or reduce time of children in foster care



Remove barriers and improve linkages between CWS and treatment to better serve clients



Improve the capacity of CWS to serve parents with substance use disorders



Increase collaboration between agencies



Ensure reasonable efforts

# Purpose Of Utilizing Substance Abuse Recovery Specialists



Decrease time to assess and enter treatment



Increase compliance with treatment



Increase 12 month permanent placements



Increase family reunification rates



Decrease time in foster care

# Primary Substance Abuse Specialist Function

Engaging Parents into entering treatment and supporting them through treatment completion

WHY?

Without treatment most parents with genuine substance abuse issues will most likely fail leading to increased time away from home, foster care etc.

# Models of Collaborative Practice

Paired Counselor and Child Welfare Worker

Counselor Out-stationed at Child Welfare Office or Court

Parent Mentors

Substance Abuse Specialists

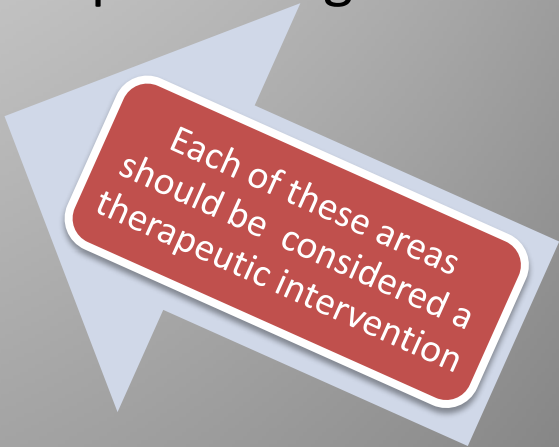
Multidisciplinary Teams for Joint Case Planning

Family Drug Treatment Courts

# Regardless of Model - Engagement Strategies are Universal

## Goals For Parents

- Attend all required group and individual alcohol and drug treatment sessions
- Attend all scheduled Recovery Specialist (mentor etc.) meetings
- Attend specific number of AOD support / 12-step meetings weekly
- Attend all required AOD activities
- Complete all AOD requirements of the court
- Drug Test Randomly
- Produce negative drug tests




Each of these areas should be considered a therapeutic intervention

# The Big Four




# Treatment Clinical

Primary  
purpose is to  
facilitate entry  
into treatment




Upon  
assessment  
help parent  
make phone  
call to  
treatment for  
initial appt




Provide  
treatment  
documents  
such as  
brochure or  
program rules

If known,  
provide parent  
with treatment  
days and times  
– written  
(pocket  
calendar is best)



If needed  
provide  
number,  
documentation  
etc. of public  
transportation



Supply a map to  
treatment  
facility (best  
practice take  
them to facility  
the first time)

# Treatment

## Programmatic

How will attendance be monitored - tracking sheets, phone calls. (Best practice, parents have facility sign treatment forms)

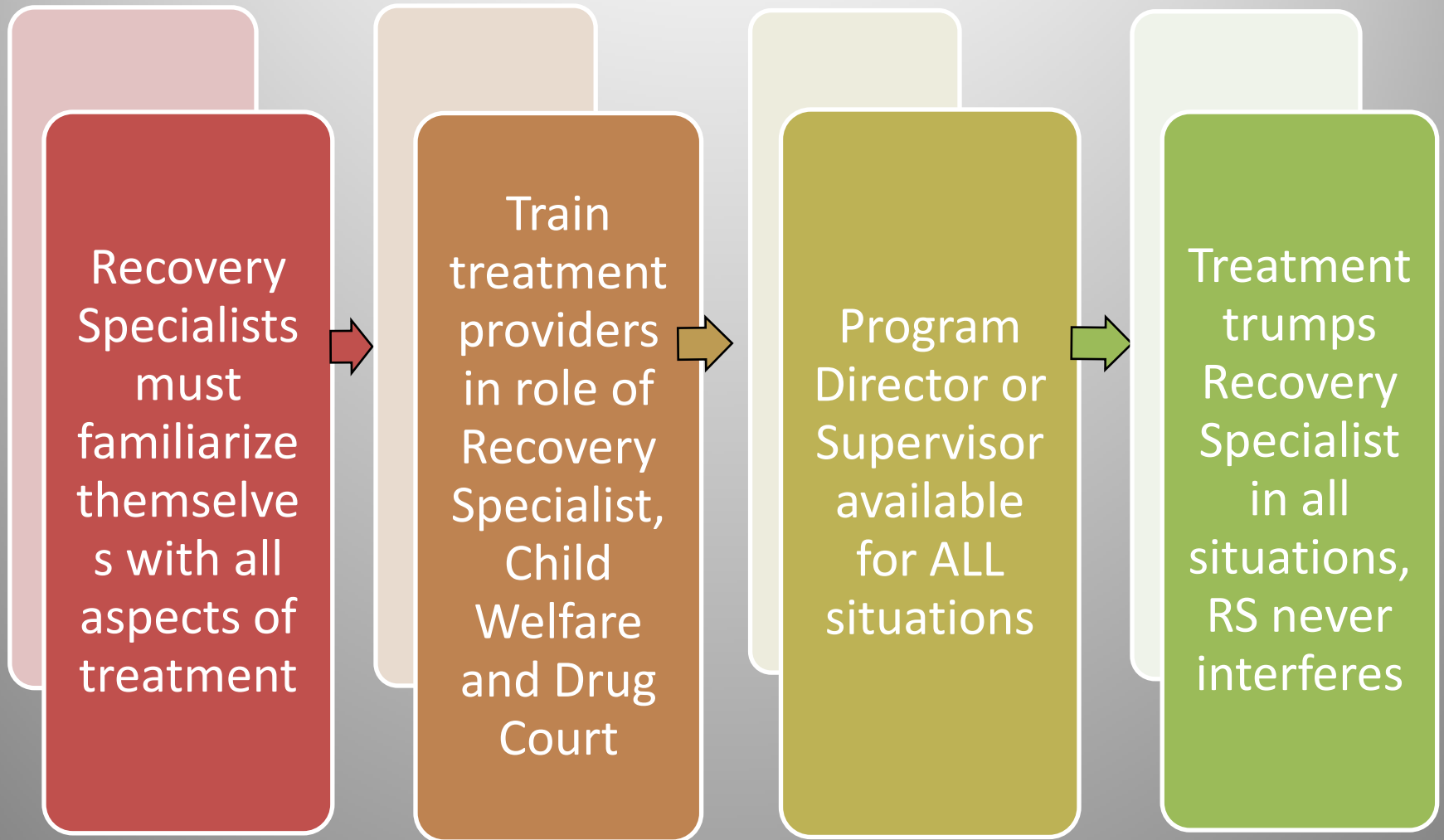
Case Conferences essential with treatment provider, Recovery Specialist, social worker

What occurs when treatment is missed?

What happens when treatment differs from Recovery Specialist

# Treatment

## Relationship Building



# Substance Abuse Specialist Contacts

## Clinical

These serve as the foundation for the relationship between parent and specialist



Should begin with intensity and frequency and taper down as case progresses (When possible, meetings should cater to parent needs – treatment, home, work etc.)



Utilize these contacts to collect paperwork and needed info – reduce impact



Unlike other requirements, allow for some deviation (only if testing would not have occurred)

# Substance Abuse Specialist Contacts

## Programmatic

Budget will dictate Specialist ability to travel

When possible arrange for contacts to occur at treatment (two birds with one stone)

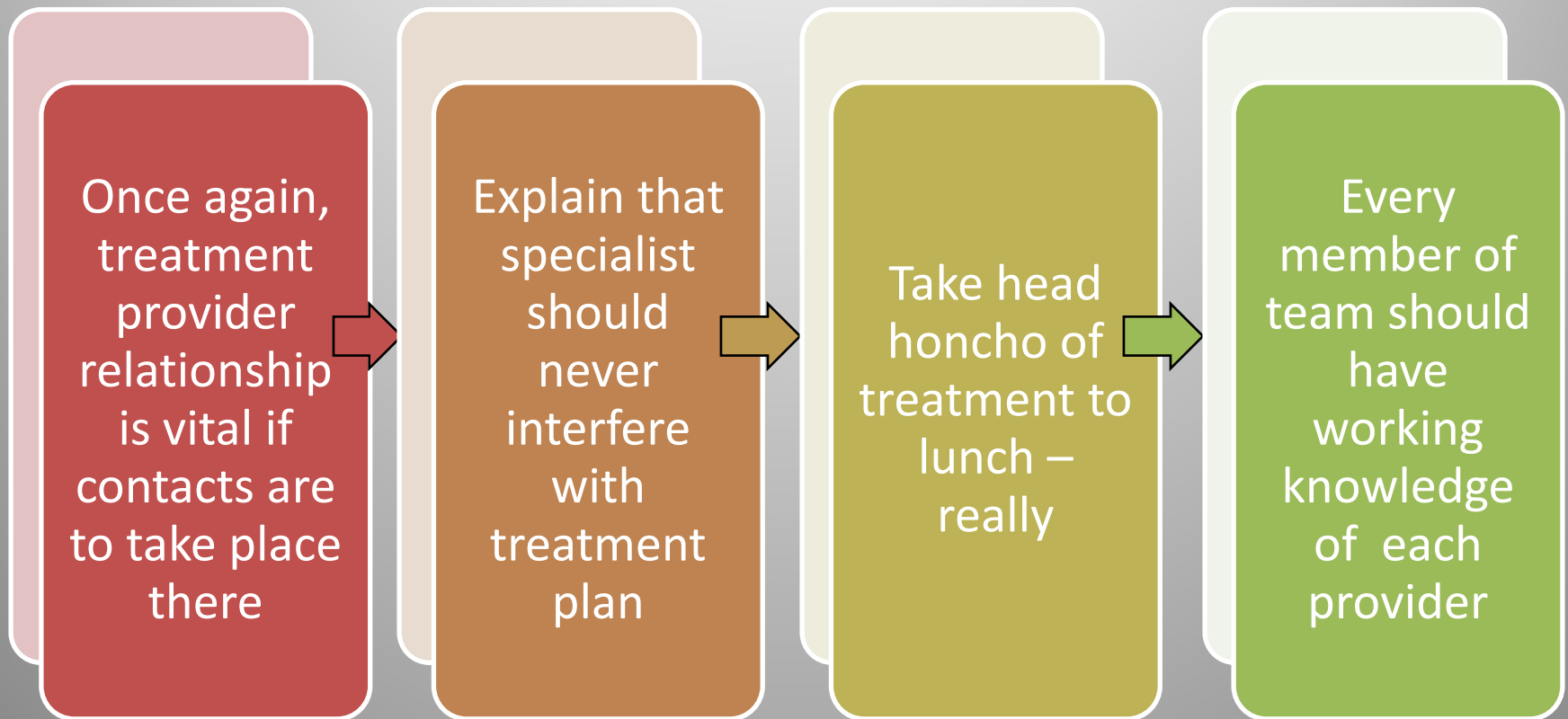
Although flexible, hold parent accountable

Use contact time wisely – listen, listen, listen

Be prepared to change your schedule

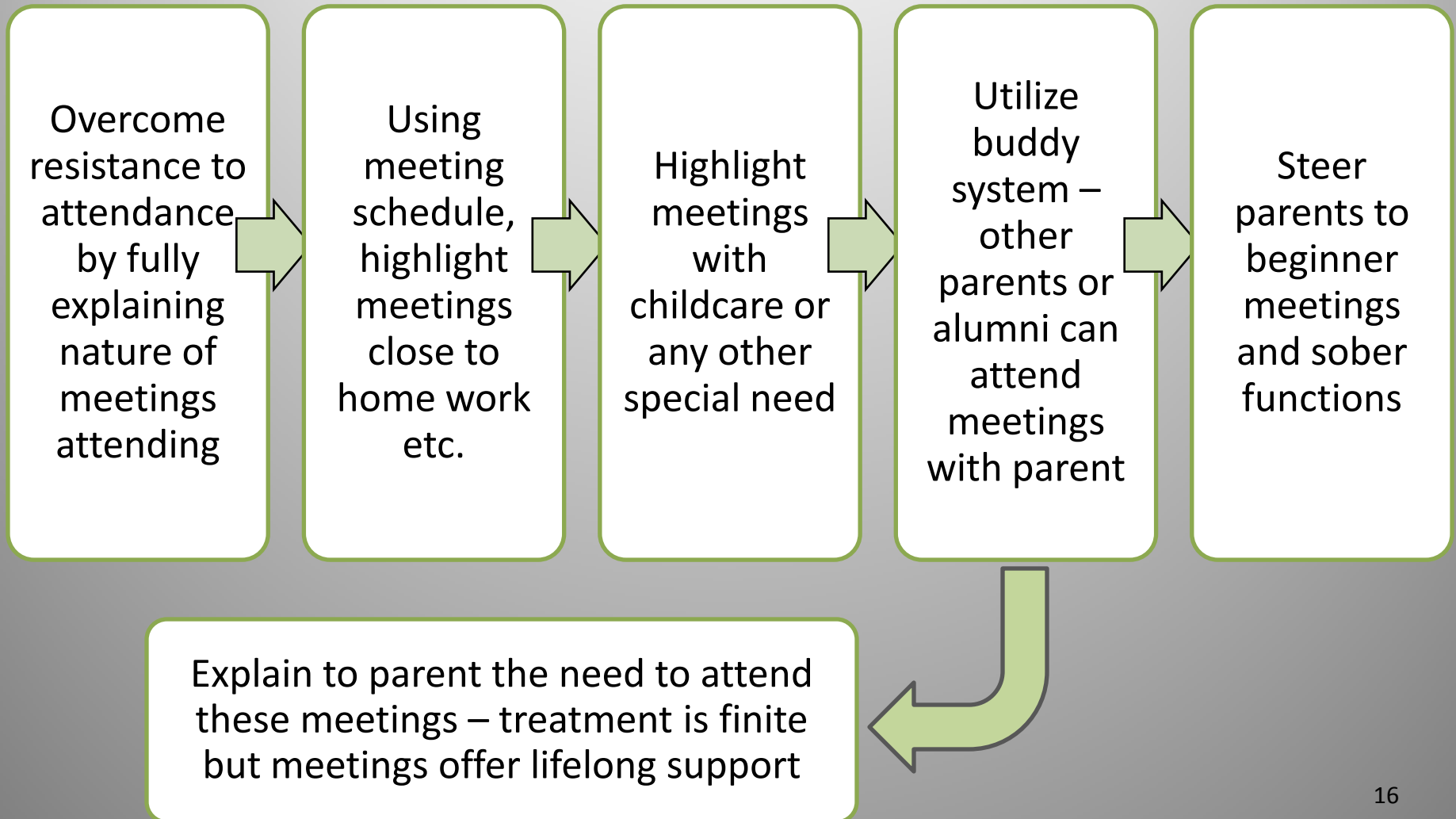
# Substance Abuse Specialist Contacts

## Relationship Building



# Attendance of Support Groups

## Clinical



# Attendance of Support Groups

## Programmatic

Specialist must be familiar with 12-step and any alternative support groups – not all meetings are equal

Define for your program what support groups are acceptable

Meeting signature forgery and how to address

Entire team must be together in holding parent accountable for attendance

Be flexible and lower meetings for some circumstance – children returned, work increases etc.

Create unique meeting attendance card

Stay current on law pertaining to 12-step attendance

# Attendance of Support Groups

## Relationship Building

Have training  
for child  
welfare and  
court on 12 -  
step and  
support  
groups

Supply actual  
12 steps to  
team,  
particularly  
bench officers

# Drug and Alcohol Testing

## Clinical

From the start, set parent mindset regarding testing. Tests are used to provide proof of compliance. System already knows about substance abuse problem

Demonstrate how honesty about use helps case. Social Worker and Court perception

Explain in detail the method of testing used. Help the parent understand what exactly they are being subjected to.

Remember – Always allow for honesty first!

Thoroughly explain consequences of deception – worse than positive test

# Drug and Alcohol Testing

## Programmatic

How does your system test?

If Specialist is testing parents -  
what is policy for admitting etc.?

First and foremost drug testing is a  
therapeutic intervention

If only by lab, make sure trainings are  
held with the lab

Set up main contact with lab to resolve  
conflicts (tardy/missing results etc.)

Testing should always be random & observed

For Drug Court and compliance purposes –  
initial test is not used

# Drug and Alcohol Testing

## Programmatic

Set policy for marijuana users – 3 negatives constitute clean – levels increase/decrease

If possible, test at treatment facility and or home

Always remember chain of custody

Employee policy is non-negotiable

Notify child welfare immediately of positive test when children are present

Train for falsification/dilution/stories (methods of deception)

# Drug and Alcohol Testing

## Relationship Building

- Training on testing must be completed with all stakeholders – court, treatment, child welfare & attorneys



- Take head honcho of lab to lunch - Really

# How Can You Make All Of This Work?

Cross training and training on how to use the specialist

Specialists' background and expertise

Location of specialist

Specialist works with client throughout length of case

Collaborative relationship and constant communication

Buy-in from different systems

Integrative practice

Sustainable funding

# Substance Abuse Specialists in Child Welfare Agencies and Dependency Courts: Considerations for Program Designers and Evaluators

