METHAMPHETAMINE
Child Welfare Impact and Response

Hyatt Regency Crystal City Hotel

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SHIELDS For Families, Inc.
Los Angeles, CA

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Executive Director

SHIELDS for Families, Inc

Shields is a non-profit agency serving the Compton and Watts communities of South Central Los Angeles. We have approximately 260 employees with an annual budget of $15 million. SHIELDS provides programs in multiple sites, including:

- 7 Substance Abuse Programs
- 9 Mental Health Programs
- Community Assessment Center
- 3 Youth Programs
- 4 Child Development Programs
- Family Preservation
- Family Support
- Vocational Services Center
- Adoption Support
- Federal Healthy Start Program
- Partnership for Families
- 126 Units of Low-income Housing
- Transportation
- Food Bank
The Exodus program is located at Keith Village, an 86 unit apartment complex in Compton, California. Services on-site include: treatment program, child development center, youth program, vocational services center. Facility also houses two play grounds, a community room and a Laundromat. Keith Village was purchased in 1994 and the Exodus program has been in operation for twelve years. A maximum of 45 families are enrolled in the program.
Exodus Program

Originally funded through the Federal Center for Substance Abuse Treatment’s (CSAT) perinatal initiatives in 1994, the Exodus Program provides comprehensive care for women and their children including: counseling, child development, vocational services, mental health, medical care, family support and family reunification. Annually, approximately 60 women and 250 children are served in these none programs with an average length of stay of 12-18 months.

Exodus Program

Currently, 45 moms with approximately 170 children are enrolled in the program.

Services are six days a week (Monday thru Saturday) from 8:30 a.m. to 5:00 p.m. Average length of stay is 18 to 24 months.

Families are allowed to remain in housing one year post completion in order to transition back to the community.

Completion rates have remained at 70% or higher since the program was implemented. Family reunification rates are 85%.
Client Demographics

The clients of the Exodus Program are 74% African American, 20% Latina and 6% Caucasian or other. The average age of the women is 36 years old and 82% are single.
Client Demographics

- 65% of the clients use cocaine
- 73% of the clients use marijuana
- 50% of the clients use alcohol
- 33% of the clients use amphetamines

Client Demographics

- 71% of the clients have had prior treatment attempts
- 80% of the clients have experienced serious depression
- 64% of the clients have experienced serious anxiety
- 45% of the clients have trouble controlling violent behavior
- 20% of the clients have previous suicide attempts
- 80% of the clients reported psychiatric problems within the last 30 days prior to treatment.
- 100% of the population is homeless
Client Demographics

55% of the clients have less than a high school education
57% of the clients have been sexually abused
71% of the clients have been physically abused in their lifetime
84% of the clients were previously incarcerated
86% of the clients reported serious family conflict
88% of the clients have a criminal justice history

Client Demographics

At admission, 83% have an open case with Child Protective Services
43% had custody of at least some of their children.
Exodus Program

Presenting issues include the following:

- Lack of effective parenting skills (100%)
- Substance Abuse/dependence: Moderate to severe (100%)
- Mental Health Disorders (85%)
- Family History of Substance Abuse (93%)
- Low Educational Skill Level: Avg. 3rd - 5th grade (70%)
- Abuse History: physical, sexual (rape & molestation), emotional; domestic violence (80%)
- Trauma (PTSD) (95%)
- Legal Issues (40%)
- Medical Problems (80%)
- Child Protective Services Involvement (80% - 90%)

Evidence Based Services
Specifically Defined Goals
**Specifically Defined Goals**

- Achieve positive perinatal outcomes
- Improve the well-being of children and families and promote family reunification
- Treat physical, psychological and addictive disorders
- Assist families to achieve economic and social self-sufficiency
- Assist families with stable and affordable housing
Types of Housing Models

Why is housing in combination with treatment an effective model for substance abusing women and their children? The advantages of using housing in combination with treatment are many:

**Therapeutic Reasons**
1. Families do not have to be separated.
2. They do not have to face transition once the 18 months are completed (They continue to live in their own quarters without disrupting the network support system already established).
3. The independent unit model leads towards a more normalizing social environment since participants are treated as nuclear families thus preserving privacy when needed.
4. An increase in participants' autonomy and control of their own environment.
5. Empowerment of families by providing a safe, affordable environment to raise their children.
6. Increases in the opportunities for a proper involvement of the father and extended family, if any, as part of the support system.
7. Participants are less likely to drop out since they remain unified with their families and do not have to relocate after treatment.
8. Participants can increase their skill development in both daily living and money management enhancing their ability to function in the community.
<table>
<thead>
<tr>
<th>Activity One:</th>
<th>Provide a complete intake and psychosocial assessment for all clients seeking services.</th>
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<td>Activity Two:</td>
<td>Provide treatment planning and case conferences for all clients entering treatment services to ensure the access to and provision of comprehensive services specific to individual/family needs based on psychosocial assessments.</td>
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<td>Activity Three:</td>
<td>Provide case management services to all families enrolled in program services to ensure the access to necessary supportive services.</td>
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<td>Activity Four:</td>
<td>Provide individual, family and group counseling for all clients for the purpose of developing alternative behaviors to drug abuse. Facilitation by mental health professionals will be available.</td>
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### Services Provided

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<th>Activity Five</th>
<th>Provide vocational services, job placement and educational services.</th>
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<td>Activity Six</td>
<td>Provide life skills training to help develop skills in the areas that will assist clients to cope with life problems and situations without the use of drugs.</td>
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<td>Activity Seven</td>
<td>Provide educational modules that present factual information to clients regarding health issues.</td>
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<td>Activity Eight</td>
<td>Provide child development and parenting education.</td>
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<td>Activity Nine</td>
<td>Provide on-site child care services to all children ages 0-5 enrolled in the program.</td>
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<td>Activity Ten</td>
<td>Ensure that all children ages 0-5 of women participating in the program receive complete developmental assessments and services.</td>
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| Activity Eleven | After school and support services will be offered for all children ages 6-18 enrolled in the program. |
| Activity Twelve | Provide family reunification services to women and their children. |
| Activity Thirteen| Provide supportive services to other family members/significant others. |
| Activity Fourteen| Provide physical fitness training and leisure time and recreational activities to encourage clients to utilize their leisure/free time in a more constructive drug free manner and increase social skills. |
| Activity Fifteen| Provide complete medical evaluations for all clients and their children enrolled in the program. |
Services Provided

Activity Sixteen: Implement relapse prevention and aftercare services.

Activity Seventeen: Provide initial and random urine screening for clients enrolled in the program.

Activity Eighteen: Provide for transportation services to ensure equal access to services.

Activity Nineteen: Maintain an active Client Council to assist with the development of programming and serve as a mechanism for empowerment and development of social skills.

Activity Twenty: Conduct in-home follow-up and maintenance services.

Activity Twenty-One: Provide community education on substance abuse, prevention, and related areas.

Services Provided

Activity Twenty-Two: Follow-up will be provided to all families leaving and/or completing program services.

Activity Twenty-Three: Provide housing for the family unit.
SHIELDS for Families, Inc.
Services/Strategies for Children

Services/Strategies
Children: Ages 0 – 5

- On Site Child Care Services
- Developmental Screenings and Assessments
- Individual Education Plans
- Developmental Activities Responsive to Needs
- Specialized Services to Children with Identified Developmental Needs
- Child Development and Parenting Education
- In-home and Individual Parenting Education
- Access to and Provision of Health Care
Services/Strategies

Children: Ages 6 – 18

Individual Domain Services
- Alcohol and Drug Education
- Problem Solving
- Decision Making/Goal Setting
- Communication Skills
- Self-Esteem Building
- Cultural Enrichment Activities
- Gender Based Activities
- Alternative Activities
- Case Management
- Linkage to Services
- Individual Counseling
- Mental Health Services

Family Domain Services
- Parenting Education
- Parent/Youth Interaction
- Communication Skills
- Family Counseling
- Family Reunification

School Domain Services
- Tutoring
- Computer Lab
- Academic Enrichment
- Parent/School Involvement
- Program/School Involvement
Services/Strategies

Children: Ages 6 – 18

**Peer Domain Services**
- Group Counseling
- Youth Advisory Council/Leadership Training
- Alternative Activities

**Community Domain Services**
- Mentoring
- Community Service
Outcomes

The Exodus program was part of a rigorous national evaluation and conducted a local evaluation:

Program completion rates average between 65%-75%.

An average of 80% of the women remain drug free at six and twelve months post treatment. Criminal justice involvement is significantly reduced by 90%.

Sixty-five percent (65%) are employed, enrolled in school or in job training at the time of discharge.

85% are reunified with their children who had been placed in foster or kinship care.

100% have their high school diploma.

Outcomes

Positive outcomes for children, as indicated by:

- Increased numbers of babies born drug-free (95% healthy births annually)
- Improved physical, mental and social health of children
- Improved gross and fine motor skills
- Improved language development and cognition
- Fewer behavioral problems
- Improved school performance
- Improved family bonding and social functioning
Discussion

The End

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