



Substance Abuse and the Family

Considerations for family educators, practitioners and researchers

Troubling new trends in substance abuse remind family professionals that the work to increase awareness is needed now more than ever. This publication is one of a series of Fact Sheets available from the National Council on Family Relations.

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), new data show that the number of adolescents ages 12 to 17 admitted to substance abuse treatment increased 65% between 1992 and 2002. The Centers for Disease Control and Prevention (CDC) also reports that due to budget cuts, teen smoking is on the rise in Minnesota after years of success with a "target market" anti-smoking campaign.¹

The pervasiveness of substance abuse is staggering. In a large national survey², it was revealed that 8.3% of the population age 12 and older was currently using illicit drugs. An estimated 23% reported binge drinking within the month of the survey. Almost 7% reported being "heavy drinkers." One in seven admits driving under the influence within the past year. These figures do not include tobacco users, which number 30%.

The cost to society in terms of criminality, accidents, lost productivity, family trauma, and the burden on the public health system is seemingly incalculable, although at least one estimate has been attempted; the combined cost of alcohol and drug abuse was assessed at \$294.2 billion in 1997.³ That's an annual cost of \$1,100 for each US resident.

DEFINING SUBSTANCE ABUSE

The Diagnostic and Statistical Manual, 4th Edition (DSM-IV)⁴ is the definition used most often in legal, healthcare, and insurance arenas. Substance use, abuse and dependency occur across a continuum from initial use to the point at which using the substance crowds out obligations at work, school or home.

PREVENTION AND INTERVENTION FOR FAMILY LIFE EDUCATORS

Family Professionals can weave awareness of substance abuse into programming, practice, and research. Family life educators begin the prevention process by introducing substance abuse education into classes and making resources and treatment information available. Although diagnoses can only be given by a qualified professional, screening tools can be helpful in raising awareness, beginning a dialog and facilitating the self-referral process. One tool in widespread use is the CAGE questionnaire. CAGE is an acronym and mnemonic device to recall four simple, non-confrontation questions to ask to evaluate one's relationship to a substance. See Figure 1.

Substance abuse prevention is a lifelong concern. Fetal Alcohol Syndrome (FAS) from gestational exposure can result in lifelong impairment. FAS is the number one cause of preventable mental retardation⁵. Impairments due to fetal alcohol exposure have been documented as early as week 3 of gestation⁶. At the other end of the lifespan, there is concern as well. Seniors can

DSM IV⁴ Diagnostic Criteria

A person is defined with abuse of a substance if he or she is not dependent on that substance and reports one or more of the following symptoms in the past year.

- 1 Recurrent use resulting in failure to fulfill major role obligations at work, school or home
- 2 Recurrent substance use in situations in which it is physically hazardous (e.g. driving)
- 3 Recurrent substance-related legal problems
- 4 Continued use despite having persistent or recurrent social or interpersonal problems

A person is defined as being dependent on a substance if he or she reports three or more of the following symptoms in the past year.

- 1 Tolerance-discovering less effect with same amount (needing more to become intoxicated)
- 2 Withdrawal (characteristic withdrawal associated with type of drug)
- 3 Using more or for longer periods than intended
- 4 Desire to or unsuccessful efforts to cut down or control substance use
- 5 Considerable time spend in obtaining or using the substance or recovering from its effects
- 6 Important social, work, or recreational activities given up or reduced because of use
- 7 Continued use despite knowledge of problems caused by or aggravated by use

suffer not only from alcoholism but from prejudice and ageism. The misperception that the aged are untreatable can result in premature disability or death⁷.

Figure 1

The CAGE Questionnaire¹³

- Have you ever felt you ought to Cut down on your drinking?
- Have you ever felt Annoyed by people criticizing your drinking?
- Have you ever felt bad or Guilty about drinking?
- Have you ever had a drink first thing in the morning, an "Eye-opener"?
- An answer of "yes" to one or more of these questions can be an indication of a problem.

NCFR FACT SHEET

The Substance Abuse and Mental Health Services Administration (SAMHSA) provides publications and referral tools on the SAMHSA and NCADI websites. Helpful publications (with a public domain copyright) are available for use in any classroom, faith community, or neighborhood organization. SAMHSA also operates a Toll-Free Referral Helpline at 1-800-662-HELP (1-800-662-4357). A web-based search engine is available at www.samhsa.gov that can identify treatment programs near any zip code.

For therapists and counselors

Two excellent guides; "Alcohol Problems in Intimate Relationships: Identification and Intervention" and "Substance Abuse Treatment and Family Therapy" (TIP #39) are both available⁸ free of charge from SAMHSA at (800) 729-6686 or at www.samhsa.gov.

For researchers

More research is needed in identifying antecedents and treatment outcomes for families, individuals, and special populations. For example, a recent finding⁹ has important implications for teen treatment. This new research indicates that for teens, treatment in groups with other teen users can actually increase problem behaviors. The researcher who designed the study reported that the peer group intervention resulted in group "deviancy training."

PUBLIC POLICY MATTERS

Good public policy can have an enormous impact. City officials in Helena, Montana, enacted legislation that resulted in saved lives and national attention. After six months as a smoke-free community, local hospital admissions for heart attacks dropped 60%. The CDC took note and issued a recommendation for patients with heart disease to be especially cautious about second-hand smoke¹⁰.

Family professionals as citizens

Family professionals are also neighbors, aunts, uncles and citizens. We can all make a difference as persons and professionals in our communities. One child in every four (28.6%) is exposed to alcohol problems in the family². Research consistently finds that these families are at increased risk of domestic violence, marital discord and other problems. From research on resilient children, researchers have identified several protective factors that buffer the effects of childhood trauma. The single most protective resource a child can have is a strong relationship with a competent, caring, prosocial adult¹¹. Exciting new research on brain development and the need for human attachment is beginning to uncover the intricacies of how "neighborhoods can build neurons"¹².

HELPFUL SUBSTANCE ABUSE WEBSITES

Substance Abuse and Mental Health Services Administration
www.samhsa.gov

National Clearinghouse for Alcohol and Drug Information
www.health.org or www.ncadi.samhsa.gov
Phone 301-468-2600 or toll-free 1-800-729-6686

Centers for Disease Control, Tobacco division www.cdc.gov/tobacco/

National Cancer Society www.cancer.org

NIH's National Institute on Drug Abuse www.drugabuse.gov
or www.nida.nih.gov

National Institute on Alcohol Abuse and Alcoholism www.niaaa.nih.gov/
Phone 301-468-2600 or toll-free 1-800-729-6686

National Organization for Fetal Alcohol Syndrome
www.nofas.org/main/index2.htm

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2. 2002 National Survey on Drug Use and Health, SAMHSA, available at oas.samhsa.gov/nhsda/2k2nsduh/overview/2k2Overview.htm
3. National Estimates of Expenditures for Substance Abuse Treatment, 1997, SAMHSA, available at csat.samhsa.gov/idbse/sa01ch4.asp
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5. National Organization for Fetal Alcohol Syndrome, www.nofas.org/
6. Centers for Disease Control fact sheet, Alcohol Use and Pregnancy, www.cdc.gov
7. The Impact of Substance Use and Abuse by the Elderly: The Next 20 - 30 Years, available at www.samhsa.gov/oas/aging/chap1.htm
[Smoke_Works_Fast.asp?sitearea=GI](http://www.samhsa.gov/oas/aging/chap1.htm)
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