SUBSTANCE USE DISORDER (SUD)

FACT SHEET

- **SUBSTANCE USE DISORDER** is a pattern of alcohol and/or drug use that leads to clinically and functionally significant impairment or distress.

- Any drug use by a child is cause for concern, as it exposes them to dangers from the drug and associated risky behaviors and may lead to more drug use in the future.

- In 2012, approximately 24% of eighth grade students and 64% of twelfth grade students reported using alcohol in the past year.

### CLINICAL SYMPTOMS

<table>
<thead>
<tr>
<th>Clinical Symptoms</th>
<th>What Does a Parent/Caregiver See?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recurrent and significant consequences related to repeated use of substances</td>
<td>Missing important social and recreational activities; impaired judgment; failure to complete chores or show up for work; poor grades; absences; suspensions; expulsion; mood swings; anxiety or irritability; legal trouble; health problems caused by use; appetite changes</td>
</tr>
<tr>
<td>Lack of control over substance use</td>
<td>Preoccupation with substance use; spending great deal of time anticipating, using and recovering; inability to quit or cut down; setting limits and going over limits; cravings or strong urges to use</td>
</tr>
<tr>
<td>Tolerance</td>
<td>Need to use more of substance to achieve same effect or less effect with same amount</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>Physical withdrawal symptoms or substance use to get rid of or prevent withdrawal symptoms</td>
</tr>
</tbody>
</table>

### EVIDENCE-BASED PRACTICES

**EVIDENCE-BASED PRACTICES** are treatments that have been shown through clinical research to produce positive outcomes for children and their families.

The most common effective treatment strategies for Substance Use Disorders are:

- Psychoeducation
- Communication Skills
- Motivational Enhancement
- Problem Solving
- Family Engagement
- Family Therapy

Updated May 27, 2015
Substance Use Disorder treatment strategy descriptions:

**Psychoeducation**
Psychoeducation is teaching children and their caretakers about their illness. The purpose is to help children and their families understand how the illness affects them, what kind of activities or treatment might help, and that there are others who have similar problems. This type of education helps them understand what will happen in the treatment sessions and how long the treatment might take. They will also learn what role the parent, the therapist, and the child will play in the treatment, and that they will be a team that will work on problems together.

**Communication Skills**
This is training for youth or caretakers in how to communicate more effectively with others to increase consistency and minimize stress. It can include a variety of specific communication strategies (e.g., active listening, "I" statements, constructive criticism).

**Motivational Enhancement**
Motivational enhancement is a set of exercises designed to increase readiness to participate in additional therapeutic activity or programs. These can involve cost-benefit analysis, persuasion, or Socratic questioning or a variety of other approaches, but the goal is to increase motivation for engagement in a therapeutic change process.

**Problem Solving**
Children with mental illnesses often think their problems are too big to handle. Problem solving is a strategy that teaches a child how to clearly identify a problem, look at all possible solutions, and choose a solution. They also learn to evaluate their choices, and, if necessary, come up with different solutions. This strategy teaches children how to use problem solving in their day-to-day activities.

**Family Engagement**
Family engagement is a set of strategies used to help families be actively involved, stay connected, feel empowered, and help their child progress through therapy. The parents’ desire to do what is good for the child is recognized. The strengths and positive aspects of the family are emphasized and built upon to help the child succeed in treatment.

**Family Therapy**
Family Therapy is a set of approaches designed to shift patterns of relationships and interactions within a family, typically involving interaction and exercises with the child, the caregivers, and sometimes siblings. Sometimes family therapy is performed with a single client, but uses the same approaches to shifting patterns of family interactions that are part of more traditional, multi-client family therapy.