

## Supporting treatment and recovery in human services programs

Barbara Ramlow and Carl G. Leukefeld

### TAKEAWAYS

A comprehensive assessment program that identifies all barriers to work and is coordinated with other systems offers promise in helping low-income women with substance use disorder and other issues become self-sufficient.



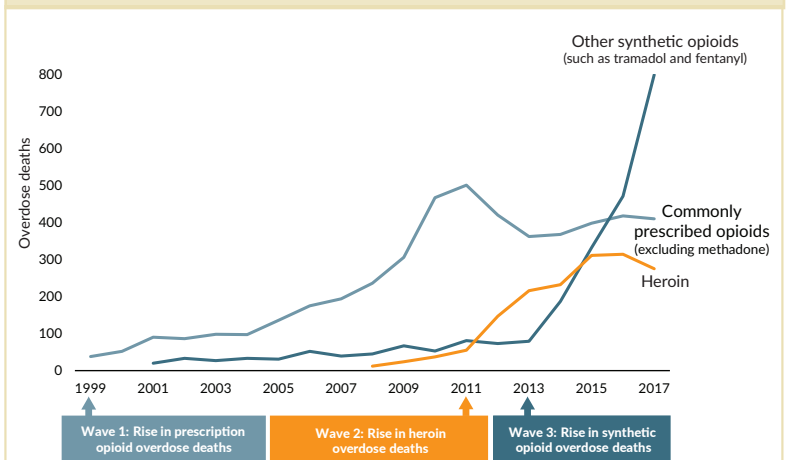
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In 2017, the rate of opioid-related overdose deaths in Kentucky was almost 28 per 100,000 people, nearly twice as high as the national average of 14.6 deaths per 100,000 people.<sup>1</sup> Trends in opioid-related overdose deaths in Kentucky, shown in Figure 1, largely mirror the patterns seen in the United States as a whole. As in Kentucky, the rise of opioid-related overdose deaths in the United States has occurred to date in three waves; first with prescription opioids, then with heroin, and most recently with synthetic opioids.<sup>2</sup>

**Figure 1. The rise of opioid-related overdose deaths in Kentucky has occurred in three waves; first with prescription opioids, then with heroin, and most recently with synthetic opioids.**



**Source:** Mortality data from the Centers for Disease Control and Prevention, National Center for Health Statistics, multiple cause of death data, 1999–2018 on CDC WONDER.

This article focuses on women struggling with opioid use disorder and describes how Kentucky officials have been working to identify and remove the barriers these women face on their path to recovery. In particular, we outline an innovative program that situates trained specialists in public assistance and child welfare offices in order to identify and address all barriers to self-sufficiency—including opioid use disorder—and help to integrate service delivery among multiple providers.

### Targeted Assessment Program (TAP)

Kentucky’s Targeted Assessment Program (TAP) evaluates and addresses barriers that could impede low-income mothers’ participation in the workforce or interfere with their parental responsibilities. These barriers could include substance use disorder, depression, anxiety, intimate partner violence, learning disabilities and deficits, and unmet basic needs such as housing, transportation, and childcare. Research suggests that women who receive public assistance such as Temporary Assistance for Needy Families (TANF) have significantly more barriers to self-sufficiency than women who are not on public assistance.<sup>3</sup> It is common for women with substance use disorder to experience multiple barriers.<sup>4</sup>

TAP places experienced staff in state child welfare and TANF agencies to work with participants, agency staff, and community

partners. TAP began as a pilot program in one county in 2000, near the onset of the opioid epidemic, and now operates in 35 of Kentucky's 120 counties.

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TAP specialists assess participants to identify barriers and strengths, then customize treatment plans aimed at reducing or eliminating barriers.

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TAP specialists assess participants to identify barriers and strengths, then customize treatment plans aimed at reducing or eliminating barriers. The goal of assessment is to identify the whole spectrum of barriers to self-sufficiency and determine how they interact. Specialists provide pretreatment services such as motivational interviewing, coordinate services in the community, provide case management, and assist participants in following through with treatment recommendations. Assessments and other services may be provided in the participant's home or in other convenient and safe settings in the community. Specialists use a trauma-informed approach that acknowledges and addresses the high incidence of adverse childhood experiences (ACEs) and adult trauma within the population.<sup>5</sup> Studies suggest that individuals who have experienced trauma are more likely to abuse opioids as a coping mechanism, which in turn increases their risk of experiencing additional trauma such as sexual violence, resulting in a continuing cycle of trauma and opioid misuse.<sup>6</sup>

Because TAP specialists are located in TANF and child welfare agencies, they are able to support agency staff by providing training and consulting on cases to help address barriers to participant progress. TAP is designed to be responsive to community needs. Community partners participate in establishing new TAP programs, and in providing ongoing program guidance.

A 2012 study of over 300 TANF-eligible TAP participants found that six months after initial assessment, the percentage of individuals assessed as having substance use as a barrier had declined from 48 percent to 38 percent.<sup>7</sup> Note that factors other than TAP could have contributed to this change. The percentage of individuals assessed with other barriers such as mental and physical health issues, intimate partner violence, and learning problems also decreased, and participants reported decreases in unmet basic needs such as transportation and childcare.<sup>8</sup> These findings suggest that an approach like TAP has potential for addressing substance abuse and other barriers to self-sufficiency. ■

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<sup>5</sup>National Institute on Drug Abuse, "Kentucky: Opioid-Involved Deaths and Related Harms," April 2019, available at <https://www.drugabuse.gov/opioid-summaries-by-state/kentucky-opioid-summary>

<sup>6</sup>S. W. Patrick, "Understanding the Needs of Families During the Opioid Crisis," *Focus* 36, No. 1 (2020): 7–14.

<sup>7</sup>See, for example, D. T. Lichter and R. Jayakody, "Welfare Reform: How Do We Measure Success?" *Annual Review of Sociology* 28, (2002):117–141.

<sup>4</sup>See, for example, A. T. McLellan, M. Gutman, K. Lynch, J. R. McKay, R. Ketterlinus, J. Morgenstern, and D. Woolis, "One-Year Outcomes from the CASAWORKS for Families Intervention for Substance-Abusing Women on Welfare," *Evaluation Review* 27, No. 6 (2003): 656–680.

<sup>5</sup>B. E. Ramlow, A. L. White, D. D. Watson, and C. G. Leukefeld, "The Needs of Women with Substance Abuse Problems: An Expanded Vision for Treatment," *Substance Use & Misuse* 32, No. 10 (1997): 1395–1404.

<sup>6</sup>See, for example, L. Khoury, Y. L. Tang, B. Bradley, J. F. Cubells, and K. J. Ressler, "Substance Use, Childhood Traumatic Experience, and Posttraumatic Stress Disorder in an Urban Civilian Population," *Depression and Anxiety* 27, No. 12 (2010): 1077–1086.

<sup>7</sup>C. Leukefeld, E. L. Carlton, M. S.-T. and M. Delaney, "Six-Month Follow-Up Changes for TANF-Eligible Clients Involved in Kentucky's Targeted Assessment Program," *Journal of Social Service Research* 38, No. 3 (2012): 366–381.

<sup>8</sup>Ramlow, White, Watson, and Leukefeld, "The Needs of Women with Substance Abuse Problems."

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