

# **The Chronicle**

A Paterson Counseling Center Newsletter

# **Special points of** interest:

- Drug abuse is rampant in our public and private schools
- · PCC examines family dynamics in pursuit of a stronger support system for clients
- New case management tools are being used to free counselors up to spend more time with clients
- For every \$1 states spend on substance misuse and addiction, 94 cents go to shovel up the consequences instead of for treatment and prevention.

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# Are TV Ads Driving Prescription Drug Abuse?

Amid a growing epidemic of prescription-drug abuse, some lawmakers are looking to stem the flood of television ads for prescription medications, the New York Times reported July 27.

The pharmaceutical industry spends billions of dollars annually advertising their products directly to consumers, but Rep. Jerrold Nadler's (D-N.Y.) Say No to Drug Ads Act would eliminate the tax

deductions for such ads. Meanwhile, Rep. James P. Roan (D-Va.) is seeking a ban on sexual aids like Viagra, citing decency standards for prime-time TV, and Rep. Henry Waxman (D-Calif.) wants to give the Food and Drug Administration (FDA) power to ban ads for new drugs for a period of time until the marketplace demonstrates that they are safe and effective.



"You should not be going to a doctor saying, 'I have restless leg syndrome' -- whatever the hell that is -- or going to a doctor saying, 'I have the mumps," said Nadler. "You should not be diagnosed by some pitchman on TV who doesn't know you whatsoever."

The Pharmaceutical Researchers and Manufacturers of America, an industry trade group, said previous attempts to ban such ads have foundered on free-speech concerns. The U.S. and New Zealand are the only nations in the world that allow direct-to-consumer ads for prescription drugs.

"On First Amendment grounds, I am not going to say we will ban" the ads, said Nadler. "But they should not be able to get taxpayers to subsidize it." Source: Jointogether.org

## **Moving Forward**

Have a motivational story about a challenge that you had to overcome? We want to hear it so send it in to PCC today. Sometimes the best motivational advice we can give our clients is built on the success that others have had on the program.

If your story is published you may be eligible to receive a prize in the form of a gift certificate or savings bond. Tell us what chal-

### **Treatment & Women**

A recent literature review on sub-

stance abuse, treatment entry, and outcome in women suggests that women with substance abuse disorders are less likely than men to enter treatment, but once they do, they have outcomes and success rates similar to men.



However, some specific predictors of outcome success do vary by gender, say the scientists who published the review. While treatment retention is important to both men and women, treatment retention and completion may have an even stronger association with outcome in women.

Other factors that can adversely affect substance abuse treatment outcomes in women include history of victimization and lower educational attainment. In addition. women have higher rates of certain co-occurring psychiatric disorders, such as depression, that may affect treatment success.

The researchers also found that gender-specific treatment and interventions enhance treatment entry, retention, and outcomes only among certain subgroups of women with substance abuse disorders.

For example, women-only settings often are beneficial for pregnant



#### **Women & Treatment Continued**

women and provide specialized services such as childcare needs, job training, life-skills training, transportation, and housing assistance.

WHAT IT MEANS: Evidence suggests that women who abuse drugs are less likely than men to seek alcohol and drug treatment. In the past, perceived social stigma and other issues such as childcare and pregnancy may have hindered women's help-seeking patterns into substance abuse treatment and contributed to their under-diagnosis, under detection, and lower rates of referral to treatment.

Research is needed in a variety of areas, such as the interaction between gender and ethnicity in treatment process and clinical outcomes; the cost-effectiveness of gender-specific versus mixed-group treatment; and identifying the characteristics of men and women who would benefit from single-gender treatment.

Source NIDA.NIH.gov

#### **Case Management Makes a Difference**

Results of a recent study suggest that case management improves retention of at-risk adolescent females in substance abuse treatment and that fidelity of case management implementation but not treatment intensity predicts decreased risk of dropping out of treatment.

In the model employed by the study, case managers fo-

cused on helping the clients to become aware of negative thoughts and their destructive impact; teaching the clients to replace such negative thoughts with positive and constructive ways of thinking about experiences; and teaching skills needed to change how the clients function and interact with others and environmental situations.



The study followed the progress of 90 adolescent females who underwent 16 weeks of substance abuse treatment. It compared the progress of 23 who received case management during treatment with that of 67 who did not receive case management during treatment.

All participated in learning sessions that covered adolescent health and development, sexual responsibility, and child development. Participants also received transportation to and from treatment and case management sessions, at least one meal or snack, and \$25. Those with

#### **Case Management Continued**

children were reimbursed for childcare expenses.

Case management services enhanced primary treatment through face-to-face, one-hour, weekly meetings. Case managers also helped their clients deal with issues that would have inhibited active participation in the treatment program.

Results showed that adolescent females who received case management attended an average of 12 treatment sessions, while those who did not receive case management attended an average of eight treatment sessions. In addition, the ability of the case manager to effectively perform his or her functions by adhering to a predetermined standard of care significantly increased treatment retention.

WHAT IT MEANS: This study shows that faithful implementation of a case management model may have a greater influence on reducing attrition among adolescent female substance abusers in therapy. This is important because people who remain in treatment for substance abuse have better outcomes than those who drop out prematurely, and attrition rates seem to be highest among adolescent populations.

Source: Nida.NIH.gov

# **Paterson Counseling Center**

## What We Do.....

Recovery Counseling
Methadone Maintenance
Family Therapy
Mental Health Assessment

Who Are We

Over 30 Years in the Field
Credential Counselors
Confidential Assessment & Screenings

## **Moving Forward Continued**

lenged you faced and the obstacles that stood in the way and how you overcame them to get to a better place.

Send your stories to glgarris@aol.com.