



# NHCBH Workforce Development Network

Foundational Competencies in Children's  
Behavioral Health

*Substance Use:  
Signs, Symptoms and Resources for  
New Hampshire Residents*



# Mission

The NH Children's Behavioral Health Workforce Development Network is to build a sustainable infrastructure for the professional development of the children's behavioral health workforce based upon the core competencies and infused with the system of care core values and guiding principles.



# NH Children's Behavioral Health Core Competencies

- System of Care Core Values and Principles
- 7 Key Domains
- Levels: Foundational  
Intermediary  
Advanced



# Foundational Competency Modules

*Substance Use:  
Signs, Symptoms and Resources for  
New Hampshire Residents*

Foundational Level



# ***Substance Use: Signs, Symptoms and Resources for New Hampshire Residents***

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and the New Hampshire Training Institute on Addictive Disorders

# **Substance Use: Signs, Symptoms and Resources for New Hampshire Residents**





Adolescents begin experimenting with drugs and alcohol at early ages. They may decide to experiment because of peer pressure, depression, low self-esteem and stress at home.

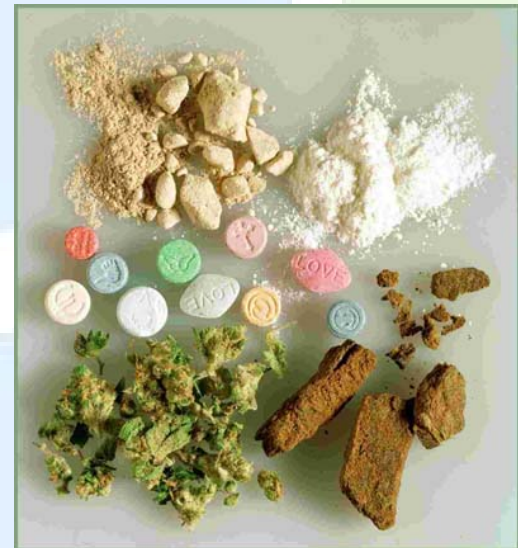
# Signs





The average age that a child will experiment with marijuana is 14 years old and some start experimenting with alcohol before 12 years old. Common drugs that are being used in New Hampshire are:

- Marijuana (synthetic and Non-synthetic)
- Alcohol
- Prescription medications
- Inhalants
- Cocaine, crack and speed
- Heroin, ecstasy, LSD and PCP



# Behavioral Signs

- Change in physical appearance
- Changes in sleep patterns
- Withdrawal from normal activities
- Unexplained need for money and secretive about spending habits



# Behavioral Signs

- Increased legal problems and/or increased problems at school
- Change in personality or attitude
- Increased use of perfumes, air fresheners and incense
- Higher demand for privacy
- Neglecting responsibilities.
- Engaging in suspicious and secretive behaviors



# Physical Signs



- Bloodshot eyes or pupils that are smaller or larger than normal
- Frequent nosebleeds that could be related to drugs that are snorted
- Changes in appetite and a sudden loss or weight gain
- Seizures
- Increase in injuries, accidents and bruises that are unexplained
- Unusual smells on breath, body or clothing
- Shakes, tremors, incoherent or slurred speech and impaired coordination.

# Psychological Signs



- Sudden mood changes
- Periods of unusual hyperactivity or agitation
- Lack of motivation, inability to focus or lethargic and spaced out
- Withdrawn, depressed, anxious, or paranoid with no apparent reason

# Physiological Dependence

- Tolerance
  - More substance for same effect
- Withdrawal
  - Anxiety
  - Trembling and shakiness
  - Sweating
  - Nausea and vomiting
  - Insomnia
  - Depression
  - Irritability
  - Fatigue
  - Loss of appetite
  - Diarrhea
  - Body aches
  - Headaches





# Physiological Dependence

- Loss of Control
- Continued use of drugs and alcohol even though it interferes with activities, relationships, exercise and social events and is damaging everyday life

# Impact on the Family





A black silhouette of a man and a woman in profile, facing each other as if in conversation. The woman is on the left, and the man is on the right. The background is white with a light blue and light green border.

# Impact on the Family

Alcohol and other drug misuse by any family member may impact the family by:

- Disintegrate the family structure
- Lead to loss of job or failure at school
- Introduce stressors into the family
- Lead to anxiety and depression in the family

# Drug and Alcohol Screening

## Screening options

- The Audit
- The ASSIST
- The NIAAA

## Brief screening options

- The Audit-C
- The Cage
- The CRAFFT





# Audit-C

Scored on a scale of 1-12 and each question has 5 answer choices. Points are allotted as follows:

A=0, B=1, C=2, D=3, E=4

A score is considered positive with:

4 points or more for men

3 points or more for women

# Audit-C Questions

1. How often do you have a drink containing alcohol?

- a. Never
- b. Monthly or less
- c. 2-4 times a month
- d. 2-3 times a week

2. How many standard drinks containing alcohol do you have on a typical day?

- a. 1 or 2
- b. 3 or 4
- c. 5 or 6
- d. 7 to 9
- e. 10 or more

3. How often do you have six or more drinks on one occasion?

- a. Never
- b. Less than monthly
- c. Monthly
- d. Weekly
- e. Daily or almost daily



# CRAFFT Screening

Recommended for use with adolescents

If the answer is yes to any of the three opening questions then all 6 follow up questions should be asked.

If the answer is no to all three opening questions than the provider only needs to ask the first follow up question regarding the “car”.



# CRAFFT Opening Questions

During the past 12 months, did you:

1. Drink any alcohol (more than a few sips)?
2. Smoke any marijuana or hashish?
3. Use anything else to get high?



# CRAFFT Follow up Questions

1. Have you ever ridden in a CAR driven by someone (including yourself) who was “high” or had been using alcohol or drugs?
2. Do you ever use alcohol or drugs to RELAX, feel better about yourself, or fit in?
3. Do you ever use alcohol or drugs while you are by yourself, or ALONE?
4. Do you ever FORGET things you did while using alcohol or drugs?
5. Do your family or FRIENDS ever tell you that you should cut down on your drinking or drug use?
6. Have you ever gotten into TROUBLE while you were using alcohol or drugs



# Scoring the CRAFFT

- Each yes response =1 point.
- A score of 2 or greater is a positive screen
- A positive screen indicates a high-risk for having an alcohol or drug-related disorder that may require further assessment.





# Resources and Treatment

## Self-help programs



NA, AA and Al-Anon/Alateen are free support groups for those whose lives have been or are currently affected by drugs and alcohol. You can find more information about each program as well as meeting times and places at:

- Alcoholics Anonymous, <http://www.nhaa.net> or 800-593-3330
- Narcotics Anonymous, <http://www.gsana.org> or 603-645-4777 (24 help and information)
- Al-Anon/Alateen, <http://www..mv.com/ipusers/anh-al-anon> or [877-825-2666](http://www..mv.com/ipusers/anh-al-anon)
- New Hampshire Assembly [www.nhaa.net](http://www.nhaa.net) or 603-622-6967
- Celebrate Recovery (A 12 Step Christian Recovery). Meets Thursdays at Manchester Christian Church
- Nar-Anon, Cocaine Anonymous, 603-645-4777 (24 hour help and information)
- Granite State Area Narcotics Anonymous, 12 Step Fellowship of Narcotics Anonymous, [www.gsana.org](http://www.gsana.org)

Resource information was retrieved from: New Hampshire Bureau of Drug and Alcohol Services, Resource guide for alcohol and drug prevention and treatment services at: <http://www.dhhs.nh.gov/dcbcs/bdas/guide.htm>



# Resources and Treatment

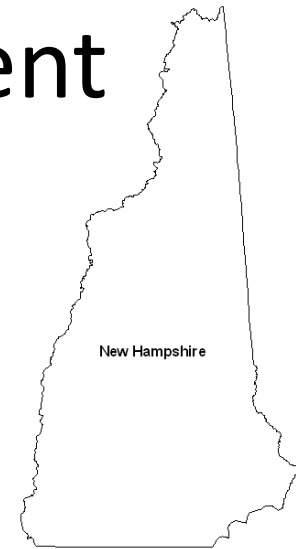
## Outpatient and Intensive Outpatient Treatment

- Outpatient services
  - Group or individual counseling, an average of 90 days or less
- Intensive outpatient services
  - 3 hours of services per day, at least 3 days a week
  - 4-6 weeks followed by less intense services

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Resource guide for alcohol and drug prevention and treatment services at:  
<http://www.dhhs.nh.gov/dcbcs/bdas/guide.htm>

# Resources and Treatment

## Residential Treatment



Short term:

- Designed to assist individuals who require a more intensive level of services in a structured setting and/or individuals that may be homeless. Voluntary admission with an average length of stay of 28 days or less.

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# Resources and Treatment

## Residential Treatment



Long term and extended care:

- Limited to pregnant and parenting women and their children.

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# Resources and Treatment

## Residential Treatment



### Halfway houses and transitional living

- Designed to support individuals in the early stages of recovery that need this residential level of care and/or are homeless. The goal of these programs is to prepare clients to become self-sufficient in the community.
  - Average length of stay is about 90 days or less.
  - Residents typically work in the community and may pay for a portion of their room and board.

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# Resources and Treatment

## Peer Recovery Support

- Peer recovery support services support an individual's recovery plan that prevents relapse and enhances or removes barriers to recovery
- Recovery support services include guidance in financial management, parenting, vocational training, life management and spiritual counseling as well as transportation and child-care



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# Resources and Treatment

## Access to Recovery (ATR)

- Eligible clients entered into ATR receive help with treatment at a contracted Bureau of Drug and Alcohol Services (BDAS) provider facility, outpatient/intensive outpatient counseling, recovery support services, and other life skill services.

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- Alcohol and other drugs make a big impact
  - There will be signs and symptoms
  - Using screening tools and knowing resources available will make a difference

Find more information at:

The NH Clearing House at the Bureau of Drug and Alcohol Services and

The New Hampshire Alcohol and Drug Abuse Counselors Association at [www.nhadaca.org](http://www.nhadaca.org)

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# Credits

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