Providing Support to Someone Struggling with Substance Use

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- Learn signs and symptoms of substance use
- 2. Learn 7 strategies for cutting down
- 3. Learn 7 tips to support someone who may be mis-using
- Learn the difference between supporting and enabling
- 5. Increase your knowledge of how to help someone you love access care

KEY TERMS

- Substance <u>Abuse</u> = excessive or inappropriate use of any substance
- Substance <u>Mis-Use=</u> generally refers to use of over-the-counter or prescribed medications in a way that they are not **meant** to be used; taking a medication that was not prescribed to you, taking an incorrect dose.

• Substance <u>Dependence</u> = Dependence is characterized by the symptoms of tolerance and withdrawal.









WHAT ARE THE
BEHAVIORAL
SIGNS OF
SUBSTANCE
USE?







BEHAVIORAL SIGNS OF SUBSTANCE USE

- Change in overall attitude/personality.
- Drop in performance at work; late for work or events
- Change in activities or hobbies.
- Chronic dishonesty.
- Sudden oversensitivity, temper tantrums, or resentful behavior.
- Difficulty in paying attention; forgetfulness.
- General lack of motivation, energy, self-esteem, "I don't care" attitude.
- Change in habits at home; loss of interest in family and family activities.
- Paranoia

- Silliness or giddiness.
- Moodiness, irritability, or nervousness.
- Excessive need for privacy; unreachable.
- Secretive or suspicious behavior.
- Change in personal grooming habits.
- Possession of drug paraphernalia.
- Changes in friends; friends are known drug users.
- Unexplained need for money, stealing money or items
- Missing prescription pills







PHYSICAL SIGNS OF SUBSTANCE USE

- Inability to sleep, awake at unusual times, unusual laziness.
- Loss of or increased in appetite, changes in eating habits
- Cold, sweaty palms;
- Red, watery eyes; pupils larger or smaller than usual
- Unusual smells on breath, body or clothes.

- Needle marks
- Extreme hyperactivity
- Nausea, vomiting or excessive sweating.
- Tremors or shakes of hands
- Runny nose; hacking cough
- Puffy face, blushing, or paleness
- Deterioration of hygiene







SIGNS OF INTOXICATION, BY SPECIFIC DRUG

Depressants (benzodiazepines, barbiturates and tranquilizers)

- Seems drunk as if from alcohol but without the associated odor of alcohol
- difficulty concentrating
- Clumsiness
- poor judgment
- slurred speech
- Sleepiness
- contracted pupils.

Inhalants (Glues, aerosols, and vapors)

- Watery eyes
- impaired vision, memory and thought
- secretions from the nose or rashes around the nose and mouth
- headaches and nausea
- appearance of intoxication
- Drowsiness
- poor muscle control
- Anxiety
- irritability

Hallucinogens (LSD, PCP)

- Dilated pupils
- bizarre and irrational behavior including paranoia, aggression, hallucinations
- mood swings
- detachment from people
- absorption with self or other.







SIGNS OF INTOXICATION, BY SPECIFIC DRUG

Marijuana

- Glassy, red eyes
- loud talking and inappropriate laughter followed by sleepiness
- a sweet burnt scent
- loss of interest, motivation
- weight gain or loss.

Cocaine, Crack, Meth, and Other Stimulants

- Hyperactivity
- Euphoria
- Irritability
- Anxiety
- excessive talking followed by depression or excessive sleeping at odd times
- go long periods of time without eating or sleeping
- dilated pupils
- weight loss
- dry mouth and nose.

Alcohol

- Clumsiness
- difficulty walking
- slurred speech
- Sleepiness
- poor judgment
- dilated pupils.

Heroin

- Needle marks
- sleeping at unusual times
- Sweating
- Vomiting
- coughing and sniffling
- twitching
- loss of appetite
- contracted pupils
- no response of pupils to light.





Poll Question: Of all the substances we discussed, which is the most widely used?













Americans Are Building Up Their Liquid Reserves

U.S. Alcohol Sales Spiked on March 13, 2020 vs. YOY Levels

BEER



Spending Increased

WINE



Increased

LIQUOR





WARNING SIGNS OF ALCOHOLISM

- A High Tolerance to Alcohol
- Binge Drinking
- An Emotional Dependence on Drinking
- An Attachment to Drinking
- The Inability to Stop or Even Cut Back
- Having a Family Member Inquire About Drinking Out of Concern
- Lying About Alcohol Consumption
- Neglecting Daily Tasks Due to Drinking

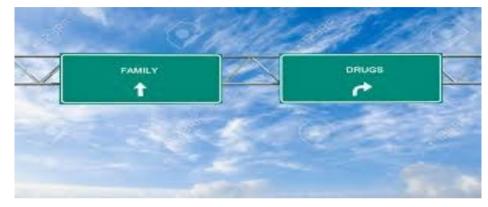






IT'S A FAMILY AFFAIR!

Addiction is a family disease that stresses the family to the breaking point, impacts the stability of the home, the family's unity, mental health, physical health, finances, and overall family dynamics.

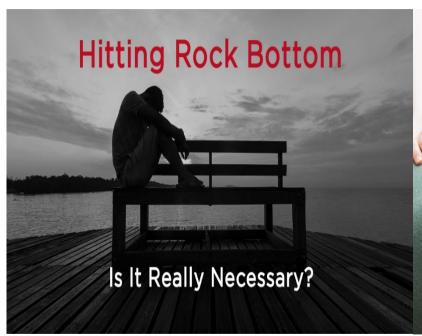


-- National Council on Alcoholism and Drug Dependence





THE CONCEPT OF ROCK BOTTOM











7 STRATEGIES FOR CUTTING BACK

- 1. Keep track
- 2. Count and measure
- 3. Set goals
- 4. Find alternatives
- 5. Avoid "triggers"
- 6. Plan to handle urges
- 7. Know your "no"

RETHINKING DRINKING Alcohol & your health

Research-based information from the National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, U.S. Department of Health and Human Services

www.rethinkingdrinking.niaaa.nih.gov







TOP 3 REASONS PEOPLE DON'T SEEK TREATMENT















POLL QUESTION: MYTH OR FACT?

- 1. Drug addiction is voluntary behavior.
- 2. More than anything else, drug addiction is mostly a character flaw.
- 3. You have to want drug treatment for it to be effective.
- 4. Treatment for drug addiction should be a one-shot deal.
- 5. Treatment just doesn't work. People who have addiction problems cannot maintain abstinence
- 6. You can't force someone into treatment.
- 7. Nobody will voluntarily seek treatment until they hit 'rock bottom'.





ENABLING BEHAVIORS

- Making Excuses
- Giving Them Money
- Bailing Them Out of Sticky Situations
- Taking Over Their Responsibilities
- Codependent Behavior
- Putting Their Needs Before Your Own
- Telling Lies to Cover Up Their Behavior

https://drugabuse.com/blog/are-you-helping-or-enabling/







RICKY'S STORY.....

Ricky started using alcohol around age 24. His use progressed over a period of 7 years. Once discharged from the military dishonorably, he moved back to his hometown. He would easily get a job. But he would lose each job after 3-6 months. Ricky was arrested and incarcerated for a DUI and driving on a suspended license. His family assisted with getting Ricky's vehicle out of impound. While incarcerated, his family agreed to pay his rent & utilities for two months to maintain Ricky's housing. After release from jail, Ricky found another job. He was fired for missing work; eventually evicted. Ricky complained of not being able to get to work. He relapsed and returned to treatment. His new housing arrangement was now a shared-living arrangement at an Oxford House- for men in recovery. Ricky began working longer hours, paid his rent on time & even in advance. He chose not to engage in therapy or support groups - except for a weekly 'house meeting' at the Oxford House'. Nine months later, Ricky relapsed, and his family discovered he had not paid his full rent for the past two months. He had only paid partial amounts. Ricky may be asked to leave the Oxford House. Ricky's family needs to decide if they will pay his rent.









How do you know if you're enabling a loved one?

https://youtu.be/nnEISUce1a4







7 TIPS TO PROVIDE SUPPORT

- 1. Listen
- 2. Validate (instead of highlighting their use, give praise for admitting their problem and seeking help)
- 3. Learn more about how they really feel by asking questions and letting them steer the conversation
- 4. Avoid pressuring them into making a promise they're not sure they can keep; rather, validate the value of their life
- 5. Educate yourself about substance use and known behaviors
- 6. Consider participating in Al-Anon or other support groups
- 7. Avoid Co-dependency

3 STEPS TO ACCESSING CARE (Inpatient or Outpatient)

Contact

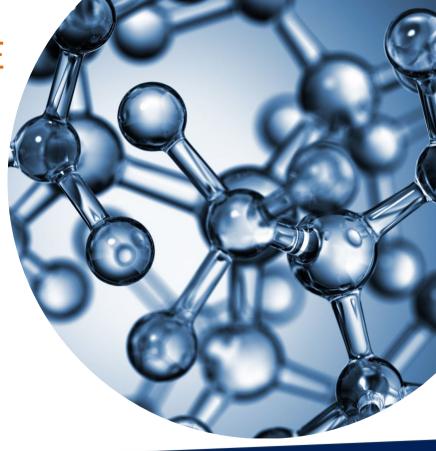
If you have insurance: Contact your insurer. Ask about your coverage and whether they of quality have a network of preferred providers.

Review

Review the websites of the providers and see if they have any or all of the five signs treatment.

Call

Call for an appointment. If they can't see you or your family member within 48 hours, try another provider. Programs may offer a virtual appointment for the assessment.









ADDITIONAL RESOURCES

- Substance Abuse and Mental Health Services Administration (SAMHSA)
 <u>National Helpline</u> with information on support and treatment facilities in your area: 1-800-662-HELP (4357)
- NIAA Alcohol Treatment Navigator: Identify treatment options in your area
- Recover Together (Google): Support, advocacy, resources, and recovery stories
- <u>Cover Virginia</u>: Help with applying for Medicaid, 1-855-242-8282 (Toll Free), 1-888-221-1590 (TDD)
- Region Ten Community Services Board 434-972-1800
- UVA Rethinking Your Drinking quiz





KEY TAKE-AWAYS

- ✓ Addiction is a disease, not moral failure
- ✓ Don't ignore the warning signs of substance abuse
- √ Family support is crucial in recovery
- ✓ Enabling doesn't allow natural consequences to happen
- ✓ Empathy, validation and regular support empowers change
- ✓ Community Resources and Supports are always available.
- ✓ Cutting back is progress
- ✓ Change looks different for each person







RECOVERY ALLY TRAINING

- Wednesday, November 18,
 3:30 4:30 pm
- Presented by Jennifer Cervi,
 LLMSW and Tia Mann, MS (Office of Health Promotion, UVA
 Department of Student Health)
- Registration:

 https://uvafeap.com/events/recovery-ally-training/









YOUR PARTICIPATION SHOWS THAT YOU CARE!







