1. Explain assessment of substance abuse.

**Ans:** Substance abuse and substance dependence are commonly seen in patients in medical practices and are frequently comorbid with other medical and psychiatric disorders. Considerable societal stigma exists toward patients with addictive disorders; healthcare providers frequently have negative attitudes toward these patients as well. The identification, assessment, and referral for treatment of patients are strongly influenced by physician attitudes and life experiences with personal, family, or prior patients’ substance use. Effective tools and strategies help clinicians recognize the physiologic and behavioral red flags of addiction and elicit a substance use history in a nonjudgmental manner, so you can make the appropriate diagnosis and develop a patient-specific plan for treatment and referral.

This educational module on the clinical assessment of substance abuse disorders presents written text and instructional videos that provide the knowledge, skills, and attitudes needed in the screening, evaluation, and referral of patients with substance abuse disorders.

Advice to Clinicians and Administrators: Culturally Responsive Screening and Assessment

For Clinicians:
- Foremost, instruments should be used that have been adapted and tested on women in specific cultural groups and special populations.
- Even though a woman may speak English well, she may have trouble understanding the subtleties of questions on standard assessment tools.
- Acculturation levels can affect screening and assessment results. A single question may need to be replaced with an in-depth discussion with the client or family members in order to understand substance use from the client’s point of view.
- Interviews should be conducted in a client’s preferred language by trained staff members or an interpreter from the woman’s culture.
- It is important to remember that many instruments have not been tested on women across cultural groups, and that caution should be taken in interpreting the results. Counselors need to discuss the limitations of instruments they use with clients.

For Administrators:
- Treatment programs can ask community members, professionals, and other treatment staff from culturally diverse communities to assist in tailoring assessment instruments and protocols for their clients. CSAT’s planned TIP Improving Cultural Competence in Substance Abuse Treatment (CSAT in development a) discusses these issues in greater detail.

2. Describe motivation enhancement therapy.

**Ans:** Motivational Enhancement Therapy (MET) is a counseling approach that helps individuals resolve their ambivalence about engaging in treatment and stopping their drug use. This approach aims to evoke rapid and internally motivated change, rather than guide the patient stepwise through the recovery process. This therapy consists of an initial assessment battery session, followed by two to four individual treatment sessions with a therapist. In the first treatment session, the therapist provides feedback to the initial assessment, stimulating discussion about personal substance use and eliciting self-motivational statements. Motivational interviewing principles are used to strengthen motivation and build a plan for change. Coping strategies for high-risk situations are suggested and discussed with the patient. In subsequent sessions, the therapist monitors change, reviews cessation strategies being used, and continues to encourage commitment to change or sustained abstinence. Patients sometimes are encouraged to bring a significant other to sessions. Research on MET suggests that its effects depend on the type of drug used by participants and on the goal of the intervention.

3. Discuss any two strategies for tobacco cessation.

**Ans:**

4. Outline psychosocial interventions for substance use.

**Ans:** Psychosocial Interventions for Mental and Substance Use Disorders can be used to chart a path toward the ultimate goal of improving the outcomes. The framework highlights the need to (1) support research to strengthen the evidence base on the efficacy and effectiveness of psychosocial interventions; (2) based on this evidence, identify the key elements that drive an intervention’s effect; (3) conduct systematic reviews to inform clinical guidelines that incorporate these key elements; (4) using the findings of these systematic reviews, develop quality measures - measures of the structure, process, and outcomes of interventions; and (5) establish methods for successfully implementing and sustaining these interventions in regular practice including the training of providers of these interventions.

The recommendations offered in this report are intended to assist policy makers, health care organizations, and payers that are organizing and overseeing the provision of care for mental health and substance use disorders while navigating a new health care landscape. The recommendations also target providers, professional societies, funding agencies, consumers, and researchers, all of whom have a stake in ensuring that evidence-based, high-quality care is provided to individuals receiving mental health and substance use services. Mental health and substance use disorders affect approximately 20 percent of Americans and are associated with significant morbidity and mortality. Although a wide range of evidence-based psychosocial interventions are currently in use, most consumers of mental health care find it difficult to know whether they are receiving high-quality care. Although the current evidence base for the effects of psychosocial interventions is sizable, subsequent steps in the process of bringing a psychosocial intervention into routine clinical care are less well defined. Psychosocial Interventions for Mental and Substance Use Disorders details the reasons for the gap between what is known to be effective and current practice and offers recommendations for how best to address this gap by applying a framework that can be used to establish standards for psychosocial interventions.