

Overview:

The CM treatment program includes a series of interventions that can be adapted to fit the unique needs of adolescents and their families. Factors such as caregiver engagement, severity of use, and presence of co-occurring disorders are all considered when determining the timing and duration of treatment and frequency of sessions.

This CM model is designed for adolescents ages 12-17. The typical course of treatment is 14 to 18 sessions. In the beginning of treatment sessions occur at least weekly. As treatment progresses sessions occur less frequently enabling the youth and family to practice skills between sessions as they work on long-term recovery.

Role of the Counselor:

CM certified counselors receive intensive and ongoing training and participate in the quality assurance system to manage fidelity to the CM treatment. The counselor works directly with the youth and caregivers using individual as well as family therapy sessions. The counselor assists the youth with understanding what is triggering and maintaining their substance use; assists the caregivers with implementing the reward system; provides parent training, and works with the whole family to address self-management and long-term recovery.

Role of the Caregiver:

The caregiver, or identified responsible adult, plays a key role in treatment by helping identify triggers, monitoring and supervising the youth outside of treatment, implementing the rewards plan and assisting the youth with their long-term recovery plan. The counselor works directly with the caregiver to help them develop the necessary skills to support the youth and manage the triggers.

Treatment Modules:

CM is comprised of 7 modules. Each module can be individualized to the adolescents' unique needs or developmental level.

1: Determining the Need for Treatment: Guidelines and well-validated instruments are used to determine if intervention is required and/or if the youth's substance abuse indicates use or dependence.

2: Introducing CM to the Family: The counselor uses tools to engage caregivers in treatment so that they can effectively support the youth's substance abuse treatment.

3: ABC Assessment of Drug Use: The counselor guides the youth and caregiver through an ABC assessment to determine the triggers for drug use and the people, places, thoughts and feelings that help a youth refuse drugs. The outcome of the ABC assessment helps guide the remainder of treatment.

4: Self-Management and Drug Refusal Skill Training: The counselor actively draws upon CBT and Behavioral strategies to help the youth develop skills to avoid high-risk situations and to cope with unavoidable risky situations. The caregiver plays an active role in helping support new skills and managing the environment to decrease access.

5: Point-and-Level Reward System: The youth and caregiver are guided through the development of a point-and-level system which outlines positive consequences for staying clean and negative consequences for drug use. This level system is revised throughout treatment.

6: Drug Testing: Drug screens are used as an objective assessment of drug use.

7: Planning for Discharge: Once the youth and caregiver have learned each stage of intervention the remainder of treatment focuses on reinforcing the skills and planning for future struggles.

For additional information:

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