National Institutes of Health | En español



Search

Principles of Adolescent Substance Use Disorder Treatment: A Research-Based Guide



Principles of Adolescent Substance Use Disorder Treatment: A Research-Based Guide

Treatment Settings

Treatment for substance use disorders is delivered at varying levels of care in many different settings. Because no single treatment is appropriate for every adolescent, treatments must be tailored for the individual. Based on the consensus of drug treatment experts, the American Society of Addiction Medicine (ASAM) has developed guidelines for determining the appropriate intensity and length of treatment for adolescents with substance abuse problems, based on an assessment involving six areas:⁴⁹

- 1. Level of intoxication and potential for withdrawal
- 2. Presence of other medical conditions
- 3. Presence of other emotional, behavioral, or cognitive conditions
- 4. Readiness or motivation to change
- 5. Risk of relapse or continued drug use
- 6. Recovery environment (e.g., family, peers, school, legal system)

With a substance use disorder—as with any other medical condition—treatment must be long enough and strong enough to be effective. Just as an antibiotic must be taken for sufficient time to kill a bacterial infection, even though symptoms may already have subsided, substance abuse treatment must continue for a sufficient length of time to treat the disease. Undertreating a substance use disorder—providing lower than the recommended level of care or a shorter length of treatment than recommended—will increase the risk of relapse and could cause the

patient, his or her family members, or the referring juvenile justice system to lose hope in the treatment because they will see it as ineffective.

This section will review the settings in which adolescent drug abuse treatment most often occurs.

Outpatient/Intensive Outpatient

Adolescent drug abuse treatment is most commonly offered in outpatient settings. When delivered by well-trained clinicians, this can be highly effective. Outpatient treatment is traditionally recommended for adolescents with less severe addictions, few additional mental health problems, and a supportive living environment, although evidence suggests that more severe cases can be treated in outpatient settings as well. Outpatient treatment varies in the type and intensity of services offered and may be delivered on an individual basis or in a group format (although research suggests group therapy can carry certain risks; see "Group Therapy for Adolescents"). Low- or moderate-intensity outpatient care is generally delivered once or twice a week. Intensive outpatient services are delivered more frequently, typically more than twice a week for at least 3 hours per day. Outpatient programs may offer drug abuse prevention programming (focused on deterring further drug use) or other behavioral and family interventions. ^{50,51}

Partial Hospitalization

Adolescents with more severe substance use disorders but who can still be safely managed in their home living environment may be referred to a higher level of care called partial hospitalization or "day treatment." This setting offers adolescents the opportunity to participate in treatment 4–6 hours a day at least 5 days a week while living at home. ⁵²

Residential/Inpatient Treatment

Residential treatment is a resource-intense high level of care, generally for adolescents with severe levels of addiction whose mental health and medical needs and addictive behaviors require a 24-hour structured environment to make recovery possible. These adolescents may have complex psychiatric or medical problems or family issues that interfere with their ability to avoid substance use. One well-known long-term residential treatment model is the therapeutic community (TC). TCs use a combination of techniques to "resocialize" the adolescent and enlist all the members of the community, including residents and staff, as active participants in

treatment. Treatment focuses on building personal and social responsibility and developing new coping skills. Such programs offer a range of family services and may require family participation if the TC is sufficiently close to where the family lives. Short-term residential programs also exist.⁵³



Next **⊕**

January 2014