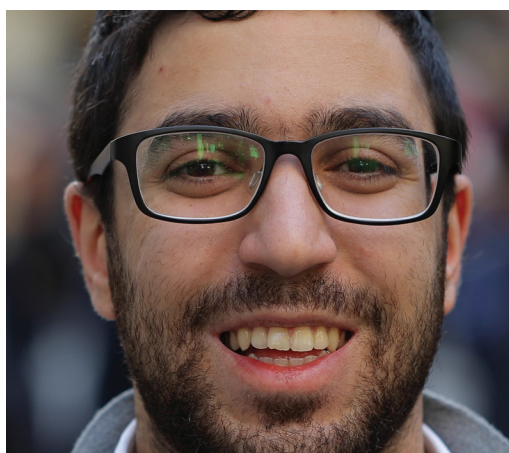




**Anyone Can
Make The Difference.
Anyone.**



Understanding Substance Use Disorder

PAStop.org
CPA Commonwealth
Prevention
Alliance

**Faith-Based
Organization Toolkit**

Paid for with Pennsylvania taxpayer dollars.

Faith-based organizations have a long-standing history in the community of providing support to people in need. They often are the first place to which people turn when facing life challenges — for themselves or for family members.



Because of their position at the heart of many communities, FBOs over time have developed unique and commonly recognized resources that strengthen the whole community's service delivery system.

The Commonwealth Prevention Alliance (CPA) has spearheaded the PA STOP Opiate Abuse Campaign in Pennsylvania for the last five years. The PA Stop web-site www.pastop.org serves as a valuable resource with information, media materials, and where to find help when dealing with issues regarding substance misuse.

CPA recognizes that drug and alcohol prevention programs have been working in collaboration with faith-based organizations (FBOS) effectively in many parts of Pennsylvania. The purpose of this tool kit is to provide faith-based leaders with consistent, accurate information to assist members of their congregations who may be dealing with substance misuse, treatment, and recovery.

The kit, set up in a Question and Answer format, is designed to complement the other two tool kits on the PA Stop web site; The Family Tool Kit and the Workplace Tool Kit. It also provides information on how to access drug and alcohol service systems in Pennsylvania and associated organizations.

There are far-reaching benefits of having faith-based organizations equipped to be active in the delivery of social services in general, and behavioral health and recovery support services in particular. The services offered by these groups not only address basic substance use and mental health needs but can also assist in shaping individuals' lifestyles in many ways.

FBOs are instrumental in promoting wellness and enhanced quality of life, in treating mental health and substance use disorders, and in preventing relapse. Many are excellent referral sources and key resource partners for accessing substance misuse and mental health programs.

In recent years, because of rising needs, limited resources, and a realization that holistic approaches increase successful outcomes, service providers are finding it essential to work together in unprecedented ways. For many secular community agencies, however, establishing valuable and sustainable partnerships with faith-based groups may pose significant challenges. Despite the challenges, though, faith groups bring a host of benefits to the community partnership table.

Faith based groups are:

- Trusted, credible, and have personal relationships within the communities they serve
- Cultural cornerstones within the community
- Responsive to emergent community needs (e.g., natural disasters, family emergencies, community trends) and can customize programs and services to address these conditions
- Located in the community and can reach underserved individuals whose needs might not be met

Working together FBOS and agencies can give families and individuals the support needed to not only reduce the stigma related to substance misuse, but to move toward healthier, productive lives.

There are far-reaching benefits of having faith-based organizations equipped to be active in the delivery of social services in general, and behavioral health and recovery support services in particular.

Drug and Alcohol Systems in Pennsylvania

Q: **Who is the lead department in Pennsylvania?**

A: The Pennsylvania Department of Drug and Alcohol Programs (DDAP) previously, a bureau within the Department of Health, DDAP gained cabinet level status in July of 2012. Headed by Secretary Jennifer Smith, it is tasked with overseeing all programs and efforts related to education, prevention, intervention, treatment, and recovery associated with drug and alcohol misuse and dependency for Pennsylvania citizens. DDAP provides training, monitoring, and funding for programs utilizing federal and state dollars.

<https://www.ddap.pa.gov/pages/default.aspx>

Q: **What is a Single County Authority (SCA)?**

A: In order to receive State and Federal administrative, treatment, and prevention funding, Pennsylvania counties are required to designate an agency to function as the Single County Authority and be responsible for program planning and the administration of state and federally funded grant agreements. This includes the delivery and oversight of prevention; intervention/treatment; and treatment-related services pertaining to substance use/misuse, and problem gambling disorders.

Some of the Commonwealth's 67 counties have opted to share administrative costs by creating multi-county administrative units, hereinafter referred to as "joinders." For example, Clearfield county and Jefferson county make up a joinder. On the PA Stop web site there is a section called, "Find Help." In this section every county SCA is listed for your reference.

The Pennsylvania Department of Drug and Alcohol Programs (DDAP) oversees this network of SCAs and performs central planning, management, and monitoring duties at the state level, while the SCA provides planning and administrative oversight for the provision of substance use and problem gambling disorders at the county/local level. DDAP provides State and Federal funding to SCAs through grant agreements. Services may be provided either directly or by contract.

Q: **What is an anti-drug coalition?**

A: An anti-drug coalition is a group of community members that works together to prevent problems related to drug and alcohol use/misuse. Membership can include a wide variety of people such as: mental health counselors, police, probation officers, drug and alcohol counselors, school district staff, clergy, elected officials, prevention practitioners, business leaders, hospital staff, individuals in recovery, treatment providers, members of the higher education community and other interested individuals.

An anti-drug coalition is a group of community members that works together to prevent problems related to drug and alcohol use/misuse.



Drug and Alcohol Systems in Pennsylvania (continued)

These coalitions utilize local data to assess the impact of risk and protective factors and then plan accordingly to raise awareness, educate, and inform the public to reduce drug and alcohol misuse.

One example of a community coalition is the *Communities That Care* Model that implements specific steps and strategies in a multi-year process that mobilizes the community and reduces drug and alcohol use/misuse.

<http://www.episcenter.psu.edu/ctc>

Q: What do I need to know about confidentiality regarding drug or alcohol use/misuse?

A: Drug and alcohol professionals have a very strict, ethical, responsibility regarding confidentiality and individuals with substance misuse or addiction. The reason for this is to assure individuals who are seeking help know their personal information cannot be shared, thus encouraging them to seek treatment without the concern of embarrassment or exposure.

Faith leaders, who are not licensed professional counselors, are not bound by this same requirement, but are urged to keep personal information as confidential as possible. When members of their faith communities' approach them with concerns about substance misuse, either for themselves or a family-member, they should proceed to offer support and provide accurate information.

Although there is no general statement regarding confidentiality that would cover *all* faiths and we are not promoting a particular religion, listed below is an example of one religion's directive to faith leaders.

The Presbyterian "Book of Order 2019-2021" includes among other items, the laws of governance of the Presbyterian Church USA denomination. In it is a section entitled, "G-4.03 Confidence and Privilege," with the following relevant summary points:

*G-4.03 CONFIDENCE AND PRIVILEGE G-4.0301 Trust and Confidentiality
In the exercise of pastoral care, ministers of the Word and Sacrament and ruling elders who have been commissioned by a presbytery to limited pastoral service (G-2.10), shall maintain a relationship of trust and confidentiality, and shall hold in confidence all information revealed to them in the course of providing care and all information relating to the exercise of such care.*

When the person whose confidences are at issue gives express consent to reveal confidential information, then a minister of the Word and Sacrament or a commissioned pastor (also known as commissioned ruling elder) may, but cannot be compelled to, reveal confidential information. A minister of the Word and Sacrament or a commissioned pastor (also known as commissioned ruling elder) may reveal confidential information when she or he reasonably believes that there is risk of imminent bodily harm to any person.



Drug and Alcohol Systems in Pennsylvania (continued)

Q: **How do I find out about drug and alcohol prevention and treatment services in my area?**

A: There are various prevention and treatment services throughout Pennsylvania. To learn what options are in your area, go to the “Find Help” section of the PA Stop web site where the lead agency (SCA) is listed by county. The SCA agency will be able to provide information about prevention, intervention, treatment, and recovery options that are available.



What You Need to Know About Drug and Alcohol Misuse

Q: **What is a substance use disorder (SUD)?**

A: A substance use disorder is a treatable, chronic medical disease involving complex interactions among brain circuits, genetics, the environment, and an individual’s life experiences. People with drug dependency use substances or engage in behaviors that become compulsive and often continue despite harmful consequences.

Prevention efforts and treatment approaches for an SUD are generally as successful as those for other chronic diseases. (American Society of Addiction Medicine)

Q: **What steps occur when an individual is referred because of substance misuse concerns?**

A: Typically, the person is screened by a drug and alcohol professional, then a more formal, comprehensive assessment occurs. After assessment a team of drug and alcohol professionals recommend treatment options that are indicated by the assessment results and the input of the client. It is important to note that there are many paths to recovery. Treatment options may vary depending on local area.



What You Need to Know About Drug and Alcohol Misuse
(continued)

Q: What are some of the treatment options?

A: You can refer to the information in the Family Tool Kit on the pastop.org site for a more detailed description of treatment options, but they can include and are not limited to: medication assisted treatment, one-to-one counseling, group counseling, in-patient treatment in a rehabilitation facility, out-patient treatment, support groups, such as AA, and any combination of the above. Some areas of the state may have more options than others.

Q: Do substance misuse problems vary by age level?

A: Yes, there is no age group immune to the problems caused by substance misuse. Some examples are listed below:

- **Young Children** can be subjected to substance misuse if they live in families where the misuse occurs. Drugs or alcohol in these homes are often more accessible and therefore dangerous to children.
- **Adolescents and Teens** can be exposed to tobacco, alcohol, marijuana, or other drugs either in the home, school, or neighborhood. Experimentation and peer pressure can lead to substance misuse.
- **Young Adults and Adults Over the Age of 21** can legally use alcohol, but misuse at these levels can lead to drug dependency, DUI, and other problem behaviors. There can also be misuse of prescription drugs whether legally prescribed or illegally obtained.
- **Senior Citizens** can also have issues with prescription medications. For example, they may not dose appropriately or might combine medications with alcohol. They are also at risk of being unwitting suppliers of medications stored in their homes. This can happen when visitors or family members take the medications from them without their knowledge. Seniors may also be raising grandchildren due to substance misuse problems of their parents. This can be an additional challenge for them.

It is important to note that there are many paths to recovery. Treatment options may vary depending on local area.

Programs That Can Help

Q: **What are evidence-based drug and alcohol prevention programs?**

A: Prevention programs that reduce risky behaviors in children are considered evidence-based if they are delivered over time, use clearly defined curriculum, are implemented with fidelity, and evaluated regarding how well they work. They are often delivered in the school classroom setting but can be delivered in other appropriate group settings in the community.

Go to samhsa.gov or episcenter.org to see comprehensive lists of these programs.

Q: **How do mentoring programs help?**

A: Mentoring programs such as Big Brothers Big Sisters or Goodwill's Good Guides can offer children and teens a stable, one-to-one relationship with an adult. Homes where substance misuse is occurring can be unpredictable and chaotic. A mentoring relationship can offer guidance, a listening ear, respite, and show options to mentees they otherwise might not know.

Q: **How do groups like Alcoholics Anonymous and Al-Anon help?**

A: Alcoholics Anonymous is an international fellowship of men and women who have/had a drinking problem. It is nonprofessional, self-supporting, multiracial, apolitical, and available almost everywhere. It is a support group that utilizes a 12-Step Program to help people change their destructive behaviors.

Al-Anon is for individuals who have been impacted by a friend or family member who has a drug dependency. In Al-Anon and Alateen members share their own experience, strength, and hope with each other. Through this sharing members learn coping skills and ways to move toward healthy lives.

Q: **What are other support groups that can help?**

A: Many areas have support groups that are specific to opiate dependency. It is often referred to as a family disease, as one family member's dependency will affect the entire family. When family members attend support groups, it inevitably affects the family as a whole. It can be highly beneficial for the family and it also increases the chances that their loved one will seek help and maintain long-term recovery. Local SCA's should be able to provide information on these groups.

<https://pastop.org/find-help>

What Faith-Based Communities Can Do

Q: **How do we educate our members and build capacity?**

A: Individuals in a faith-based setting can absolutely save lives by referring people to proper treatment and helping those in need navigate systems of continued care. Leaders in faith can be trained to respond to emergency situations, make referrals to treatment and recovery support providers, provide ongoing support for those in recovery, and even become peer-recovery coaches.

In order to better build community capacity:

- Train community members to recognize the symptoms of an overdose and how to administer naloxone, an opioid overdose reversal drug. GO.USA.gov/xE2EB
- Organize a Mental Health First Aid® training for your community.
- Offer training and certification for youth or adult peer-recovery coaches in your community.

Q: **How can we offer support?**

A: An SUD can leave the lives of individuals and their families drastically altered by the loss of jobs, homes, or damaged relationships. Faith-based organizations have a unique opportunity to provide the kinds of wrap-around services that can help to restore and rebuild lives and livelihoods.

Ways that faith-based organizations can rebuild and offer support include:

- Support individuals and families in rebuilding their lives by assisting with food, transportation or housing, computer skills, or help with securing their GEDs.
- Connect with workforce development efforts and certification programs that provide life skills, on-the-job-training, and internships. Consider partnering with the local business sector to facilitate job placement efforts (e.g., culinary arts, housekeeping, welding, etc.).
- Start a Community “Re-Entry” Backpack Drive and support the formerly incarcerated.
- Partner with the community to help support foster families through donating clothing and necessities, as well as other wrap-around services like babysitting.
- Offer a location for support groups to meet.
- Support efforts that celebrate recovery.

Faith-based organizations have a unique opportunity to provide the kinds of wrap-around services that can help to restore and rebuild lives and livelihoods.



What Faith-Based Communities Can Do (continued)

Q: How can we make a positive impact on children in our community?

A: Children who have been exposed to abuse, neglect, mental illness, substance-use in the household, or any other Adverse Childhood Experience (ACE), may experience worse health outcomes, learning difficulties, and an increased risk of developing a substance use disorder. In order to nurture the healthy development of future generations, it's vital to reduce known risk factors, elevate protective factors – such as the support of stable and caring relationships – and implement evidence-based programs that support families and empower youth.

Faith-based organizations can get ahead of the problem by:

- Finding ways to give teens the straight facts about brain development and substance use so they can make smart life choices. Teens.DrugAbuse.gov
- Hosting educational series on Adverse Childhood Experiences (ACEs) and trauma-informed approaches. GO.USA.gov/xE4WY
- Creating or volunteering for support mentoring programs to help strengthen the resilience of younger generations.
- Offer opportunities for fun, positive, social activities for the younger members

Q: What can we do to work with others?

A: With more people dealing with drug dependency every day, it's important to institute an 'all-hands-on-deck' approach. All across the country, treatment professionals, law enforcement, faith-based communities, service providers, drug courts, schools, recreation centers, media, businesses, policy-makers, families, and youth leaders are stepping forward to contribute their time, talent and resources to help coordinate and serve those struggling with an SUD.

In order to better connect and collaborate:

- Participate in local coalitions by contacting your county SCA to learn of those that may already be in existence in your area.
- Help prevent access and misuse of prescription drugs in your home and community.
- Partner with local pharmacies near you, as well as local law enforcement, and host a "Prescription Drug Take Back Day." TakeBackDay.DEA.gov

With more people dealing with drug dependency every day, it's important to institute an 'all-hands-on-deck' approach.

Additional sources used in the development of these materials:

Substance Abuse and Mental Health Services Administration (SAMHSA) www.samhsa.gov

Alcoholics Anonymous (AA) Support Group www.aa.org

Al-Anon and Ala-teen Support Groups www.al-anon.org

Notes:

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