The National Center on Addiction and Substance Abuse at Columbia University

2009
The National Center on Addiction and Substance Abuse (CASA) at Columbia University is the only organization that brings together under one roof all of the professional disciplines needed to study and combat abuse of all substances – alcohol, nicotine, illegal drugs, prescription drugs, performance enhancing drugs – in all sectors of society.
CASA Activities

- Demonstration programs at 239 sites in 92 cities & counties, and 35 states, plus Washington, DC and 2 Native American reservations
- 19 CASA Conferences
- 70 reports and white papers
- 4 manuals; 172 published articles/book chapters in professional and peer reviewed publications; 14 articles pending; 3 books
- 380 presentations at scientific and professional conferences.
Addiction is a chronic disease that is both preventable and treatable.

We have an obligation to do both, but most of our money for substance abuse goes into public systems that carry the burden for our failure to deal effectively with addiction.
Teen cigarette smoking has gone down dramatically in New York City.

In 2007 only 8.5% of the teenagers in New York City smoked cigarettes compared to a national average of 23%.
Use Trends Among 12th Graders

Copyright © 2009 by The National Center on Addiction and Substance Abuse at Columbia University. All rights reserved. May not be used or reproduced without the express written permission of The National Center on Addiction and Substance Abuse at Columbia University.
In 1989 the New York City Department of Juvenile Justice Refocused it’s Mission From “Custody and Care” to Concentrate on the Prevention of Delinquency
Problem analysis and strategic planning are important
Lessons Learned

Partnerships matter
Identify mutual interests
Prevention saves money
CASASTARTSM Overview

CASASTARTSM (Striving Together to Achieve Rewarding Tomorrows) - combines teachers, police, social service and health-care workers under one umbrella to provide comprehensive services to 8-13 year-old high-risk children and their families.
CASASTARTSM Aims to Improve the Lives of High-Risk Youth

- Increase participant attachment to school
- Improve grades
- Reduce substance use and abuse
- Reduce juvenile delinquency and violence
- Strengthen families
- Make communities safer
CASASTART℠ Values

- Treat children as children, not problems to be solved
- More of a process than a program
- Relationships are key to success
- All youth can be helped to achieve to the best of their abilities
CASASTART℠ Creates Partnerships

A Common Vision
A Common Mission
A Common Language
Theoretical Bases

• Social structural strain
• Social learning
• Social control
• Youth development framework
Reduce Risk Factors/Increase Protective Factors

- Intellectually reflective
- Prepared for meaningful work
- Prepared to be a good citizen
- Develop caring and ethics
- Attain and maintain good health
Risk and Protective Factors

Focuses on the relationship between risk and protective factors in a young person’s life
High-risk youth 8 – 13 years of age

- School Risk Factors
- Family Risk Factors
- Personal Risk Factors
- Environmental Factors
Who CASASTART<sup>SM</sup> Serves

- **Tertiary Prevention**: Specialized Systems for Students with High-Risk Behavior or Conditions
- **Secondary Prevention**: Specialized Responses for Youth presenting Risk Behavior or Conditions
- **Primary Prevention**: for the General Student Population
CASASTARTSM Model

• Targeted prevention for youth with multiple risk factors
• Intensive Case Management
• 1:15 ratio
• Key Partners
• 3 Meetings
• 8 Strategies
CASASTART℠ 3 Meetings

- **Case Conferences**
  **Youth Focus** - Case manager, key personnel in the school, and law enforcement meet twice a month to problem solve around issues that arise with youth participants.

- **Administrative Meetings**
  **Program Focus** - CASASTART℠ Program Manager meets with Principal and Police Lt. To discuss challenges and successes at the school level.

- **Advisory Council Meetings**
  **Policy Focus** - Key decision-makers in the community attend this meeting. They are charged with addressing broader community issues related to youth substance abuse, delinquency and other trends affecting youth as well as developing policies and securing funding to support the program.
• Academic support
• After school and summer programming
• Community Policing
• Juvenile Justice linkages
• Mentoring
• Family Support
• Incentives
• Intensive Case Management – Social Support
CASASTART™ Mantra

- Community-based
- School-centered
- All the youth get all the services
- Partners attend CASASTART™ meetings regularly

Copyright © 2009 by The National Center on Addiction and Substance Abuse at Columbia University. All rights reserved. May not be used or reproduced without the express written permission of The National Center on Addiction and Substance Abuse at Columbia University.
Urban Institute Evaluation


CASASTART<sup>SM</sup> Youth Were

- More likely to be promoted to next grade.
- More likely to have relationships with positive peers.
- Less likely to respond to negative peer pressure.
• **CASASTART℠** youth were approximately 20 percent less likely to use drugs in the past 30 days compared to youth in the control group.

• **CASASTART℠** youth were approximately 60 percent less likely to sell drugs.

• **CASASTART℠** youth were approximately 20 percent less likely to commit violent acts.
An Evidence-Based Program

Exemplary and Model Program

- Office of Juvenile Justice & Delinquency Prevention (ODJJ)
- U.S. Department of Education (DOE)
- Substance Abuse and Mental Health Services Administration (SAMSHA)
- National Dropout Prevention Center

Promising Program

- Blueprints Project at the University of Colorado
- Office of the U.S. Surgeon General and Centers for Disease Control and Prevention (CDC)
Lessons Learned

- Greater family participation
- Strengthen ties to the school
- Pays greater attention to the predictability and quality of communications
- Work with younger children
A “Tipping Point” is reached when seven percent (7%) of a school’s student population is involved in the program. Scores on standardized tests go up, and disciplinary incidents go down for the entire school.
Strengths of the CASA START™ Model

- Targeted population
- It reaches youth early
- It uses a risk and protective factor model
- It uses a comprehensive program design
- It engages families and builds a community support network
- It is designed by the local community
- It is flexible
- It works in urban, suburban, rural and frontier settings
DYS CASASTART℠ Locations:

• Metro Boston (Dorchester and Roxbury)

• West (Springfield and Holyoke)

• Northeast (Lawrence)
DYS CASASTART℠ Team

Clinical Coordinator

District Managers

Case Manager

Family Intervention Specialist

Substance Abuse Specialist

Resource Specialist

Site Support Specialist

Residential Care Provider

Copyright © 2009 by The National Center on Addiction and Substance Abuse at Columbia University. All rights reserved. May not be used or reproduced without the express written permission of The National Center on Addiction and Substance Abuse at Columbia University.
What is unique to the DYS CASA STARTSM

Models of Care
Residential
• Assessment: Prevention and treatment curriculum will NOT be provided in the assessment units.

Community
• Youth leaving residential on the treatment track will be sent to a treatment provider in the community for a substance abuse assessment and recommendation of treatment.

Substance Abuse Services
Treatment Track
• Committed youth in need of substance abuse treatment — based on assessment, history and committing offense — receive services that address the clients’ physical and/or psychological dependence on substances.

Prevention Track
• Committed youth not in need of substance abuse treatment receive educational classes on substance use/abuse issues, individual education, and other educational modalities as deemed necessary to enhance the clients’ knowledge of substance-related issues.
What is unique to the DYS CASA START®

• Assessment of Youth and Families

• Substance use screening tool
  - GAIN-SS - Global Appraisal of Individual Needs—Short Screen
  - GAIN-CORE
    Global Appraisal of Individual Needs—Core version
Pro-social Services

- Recreation
- Community Service
- Faith Based
- Civic Engagement
- Gender Specific
- Arts
- Mentoring

CLIENT

DYS CASASTART™
In 1995 KY DJJ Created a system of 8 Prevention Councils covering 11 counties of the state using a Community Juvenile Justice Community Partnership Grant (CJJCPG)

- The Department will develop eight councils which represent the eleven counties in the Commonwealth whose juvenile crime data represents 76% of all juvenile arrests (1995).

- CJJCPG funding council coordination and programs for delinquency prevention “at risk” youth and families.

- Formed for the purpose of: “Encouraging the initiation of, or supporting ongoing, interagency cooperation and collaboration in addressing juvenile crime and juvenile status offenses.”
Kentucky DJJ Prevention Council Membership

- Law Enforcement
- Cabinet for Health and Family Services
- Department of Community Based Services (DCBS)
- Court of Justice (Administrative Office of the Courts)
- Commonwealth’s Attorney
- County Attorney
- Juvenile Detention
- Department of Public Advocacy
- School System
Kentucky DJJ selected CASASTART<sup>SM</sup> as the evidence-based prevention model for the state

- CASA provided program orientation and training conducted with leadership from all councils
- DJJ developed and disseminated an RFP for CASASTART<sup>SM</sup> to be created as a diversion and prevention model in all PC counties
The Recession caused the department to pull back the RFP

- State prevention funding was rerouted to support detention and correctional beds
- Livingston County set up a CASA\textsuperscript{START}\textsuperscript{SM} program using federal funds
- DJJ plans to reissue the statewide CASA\textsuperscript{START}\textsuperscript{SM} solicitation when the economic picture brightens
The National Center on Addiction and Substance Abuse at Columbia University

2009