

THE RELATIONSHIP BETWEEN SUBSTANCE USE AND FOSTER CARE

Discussion Guide for Substance Use Administrators

Instructions for interviewer

The following semistructured discussion guide is designed to be tailored as appropriate to the professional perspective and knowledge of respondents. Each of the bolded discussion questions will be asked of the respondents, and possible probes for each will be used as needed to obtain additional information or clarification. Due to time constraints, researchers may prioritize and skip some questions.

Before beginning, interviewers will read the verbal consent script (see attachment) to provide information about the study and to ask consent questions for participation in the study and for audio-recording.

A. Work History/Experience

- 1. Can you please tell us about your position and role or responsibility with [employer name]?**

Possible probes:

- a. How long have you worked in this position?
- b. Including current and earlier experience, how many years have you worked with agencies/organizations that serve those struggling with substance use?
 - How long have you worked with families in the substance abuse field that are also involved in the child welfare system?

B. Context

- 1. We're seeing [fill in key findings regarding substance from data fact sheet specific to each site] in your data. Is that consistent with your experience? Please tell me about the size and scope of the substance abuse problem in this county.**

Possible probes:

- a. What are the most common types of substance use and use disorders in the county?
 - How has it changed over the past five years?
 - How does opioid use compare to the use of other substances in terms of impact on individual and family needs?
 - If opioid use is the primary problem, are individuals using primarily prescription opioids or heroin and other illegal forms of these drugs?
 - Is working with families struggling with opioid addictions qualitatively different than other drug addictions? How so?

- b. To what extent do the clients you see in your programs have other concurrent health or mental health problems?
 - What are the most common concurrent conditions?
- c. How has substance use, especially opioid use and use disorder, affected the county?
 - How has opioid misuse and use disorder influenced the county differently than other types of substance use and use disorder?
- d. What are the demographics among clients of substance abuse treatment programs in the county (e.g., age, gender, race, tribal communities)?
 - Is this different from the populations your programs have served in the past?
 - How is this affecting how you deliver services?
- e. Are there differences in substance use in your county by different contextual factors:
 - Geography (urban, rural)? How come?
 - Socioeconomic factors (income, poverty, unemployment)? How come?
 - Availability (or lack) of substance use treatment services? How come?
 - Availability of opioids (legal or illegal) and other substances? How come?
 - Other factors (uninsured, disability, occupational injuries, incarceration)? How come?

C. Substance Use Treatment

1. Please describe the substance use treatment services available in your county/region (and, if relevant, those provided by your agency/program).

Possible probes:

- a. Please describe substance use treatment services in your county.
 - What substance use treatment facilities are located in the county currently? Has this changed over the past ten years? Five years?
 - What services does your agency/program provide? Describe them.
 - Are these services inpatient or outpatient services?
 - Are there family-friendly treatment services (such as those that allow parents to stay connected with children)?
 - How has the nature of the services changed over time?
 - What other recovery supports are available in conjunction with treatment or as aftercare? For instance, 12-step programs, sober housing options, faith based programs, and/or peer support?
- b. What is the capacity of available substance use treatment providers (number of beds or number of people who can be treated monthly) in your county? What is the capacity of your agency/program?

- Is the capacity sufficient to meet the need? Are there enough providers?
Are there enough beds?
- c. Are there waitlists for substance use treatment services in your county? For your agency/program?
If yes,
 - Is this for certain treatment modalities?
 - Do certain individuals have priority status on waitlists?
 - If parents involved in the child welfare system receive priority status on waitlists, is this an effective way to get parents into treatment sooner?
- d. How has the increase in opioid use (if mentioned by respondent) influenced substance use treatment services in the county?
- e. What local policies or practices may contribute to how recent substance use, particularly opioid use, has influenced substance use treatment providers in the county?
- f. Has the media attention on the opioid epidemic impacted your service delivery system?
- g. What county factors may contribute to how recent substance use, particularly opioid use, has influenced substance use treatment providers in the county?
 - How do local demographics, socioeconomic conditions, urban status, or other factors influence substance use treatment providers in the county?
 - How, if at all, have these factors changed over time?

2. Please describe the work of your agency, particularly in addressing parental substance use and its effects on families and children.

Possible probes:

- a. How have substance use treatment providers been affected by and responded to the needs of families struggling with substance use, especially opioid use and use disorder?
 - How does opioid use affect substance use treatment providers compared to the use of other substances?
 - How has this changed over time?
- b. How do individuals end up in treatment services?
 - Do people voluntarily seek treatment? Are people referred for services? Do other agencies or the courts mandate treatment?
 - Do the means by which people seek treatment (voluntarily or otherwise) affect their engagement in treatment? Does it affect their treatment outcomes or likelihood of relapse?

- c. How successful are the available substance abuse treatment providers in addressing the opioid and other substance use problems of families in the county?
 - For instance, how frequently do clients successfully complete treatment?

D. Interaction with Child Welfare Agencies

1. In what ways does your substance use treatment agency/program interact with the local child welfare agency?

Possible probes:

- a. What substance abuse treatment services are typically available to child welfare clients?
 - Are these unique or different from other types of substance abuse treatment services?
 - Are they inpatient or outpatient services?
 - Are these services family-friendly? Do they address family/parenting issues as part of treatment?
 - Have you found that particular types of substance use treatment more/less appropriate for child welfare–involved families? Does the child welfare agency or the family/dependency court influence treatment decisions?
 - Is medically assisted treatment used with child welfare–involved parents? If so, how does it relate to the ability of families to reunify?
- b. How do families engaged in the child welfare system get referred to or come to the attention of substance use treatment providers?
 - Is this approach similar to how others in the general population get connected to treatment?
 - Is there often a mandate from child welfare agencies or other legal authorities for treatment?
 - If so, how does the mandate influence treatment and outcomes?
 - If there are waiting lists, do families with child welfare involvement receive priority for treatment?
- c. Do families involved in the child welfare system face struggles that are similar to or different from the struggles faced by those in the general population regarding treatment and recovery from substance use?
 - Are these struggles different for those battling opioid use versus use of other substances?
 - How have these struggles changed over time?
- d. How does child welfare agency involvement or the potential for child welfare agency involvement influence parents' motivation and ability to seek substance use treatment?

- e. How does parents' success in completing treatment generally correspond with decisions in the child welfare system?
 - How likely is it that a client who completes treatment will regain custody of a child in foster care? Conversely, when parents fail to complete treatment, to what extent does that failure have implications for child welfare decision making?
- f. How does child welfare-involved parents' health insurance coverage (or lack thereof) relate to parents' ability to access substance use treatment?
 - What funds are used to pay for substance use treatment services for parents who are involved with the child welfare system? Does the child welfare agency pay for these services? How often is Medicaid or other public funding used to support these services?
- g. Can you describe your current relationship with the local child welfare agency, and has it changed in recent years?

E. Other Partners

1. What other agencies or organizations are involved in responding to substance use issues among parents involved with the child welfare system?

Possible probes:

- a. Who are the substance abuse provider's key partners in responding to child welfare-involved families with substance use disorders (for example, law enforcement, medical or mental health providers, schools, etc.)?
 - What services do these agencies provide?
- b. How do the leaders of the various human and public health service systems work together to serve substance using families?
- c. Are there specific collaborative efforts at the systems level? What do those look like? What is the impetus behind these efforts? Is one agency the leader behind the effort?
- d. How is data shared between the agencies?
- e. Do you have data sharing agreements? What gets in the way of sharing data?
- f. Who pays for substance use treatment? Has the increase in the use of opioids in your county impacted the county's ability to pay for treatment?
- g. How does the substance abuse agency/program work with partners to get families the services they need?
 - How are referrals made with partner organizations?
 - How are partners' services coordinated?
 - What feedback or information is shared?

- h. Please describe the local court system(s) that would respond to substance use or child welfare cases in the county.
 - What court handles child welfare cases in your county?
 - Are there drug treatment courts and if so, do they deal with families involved in the child welfare system?
 - How do they work with child welfare cases that involve substance use?
- i. Are there any cross-system or targeted efforts being implemented in your state/county that focus on families struggling with substance use?

F. Success and Challenges

1. What aspects of the county's response have been successful with families struggling with substance use?

Possible probes:

- a. What strategies or aspects do you see as most successful in addressing the needs of these families? Why? What contributes to this success? How is success defined?
- b. What strategies have you found ineffective?
- c. How can the child welfare agency response be more successful?

2. In your opinion, what are the primary challenges to, or missing pieces in, your county's response to families struggling with substance use?

Possible probes:

- a. What is one thing that gets in the way (a barrier or challenge) that you most wish you could address?
- b. What suggestions would be most helpful to address these challenges?
- c. Does your substance use treatment program have enough resources and the types of resources needed to respond to these families' needs? If not, what resources are needed?
- d. How do these barriers/challenges differ because of opioid use compared to other substance use?
 - How have these barriers/challenges changed over time?
 - How common are these barriers/challenges?
 - Do other places share the same barriers/challenges, or are the barriers/challenges unique to your county?

3. Is there anything else that we haven't discussed that you think would help us understand your county's experience with these issues?

G. Recommendations for Other Respondents

1. Whom would you recommend that we speak with who can offer their perspective on the relationship between child welfare and substance use in the county?

Possible probes:

- a. These professionals might include administrators or practitioners in substance use treatment, public health, law enforcement, or judicial/legal matters.
- b. For those you would recommend, would you be able to provide us with their contact information (email and telephone number)?

The closing remarks will include the following: thank you for participating, providing reassurance about confidentiality, reminding participants how the audio recording will be used, soliciting any questions, and providing contact information.