

# *Examining the Role of Methamphetamine in Permanence: Issues that Impact Reunification, Guardianship, and Adoption*

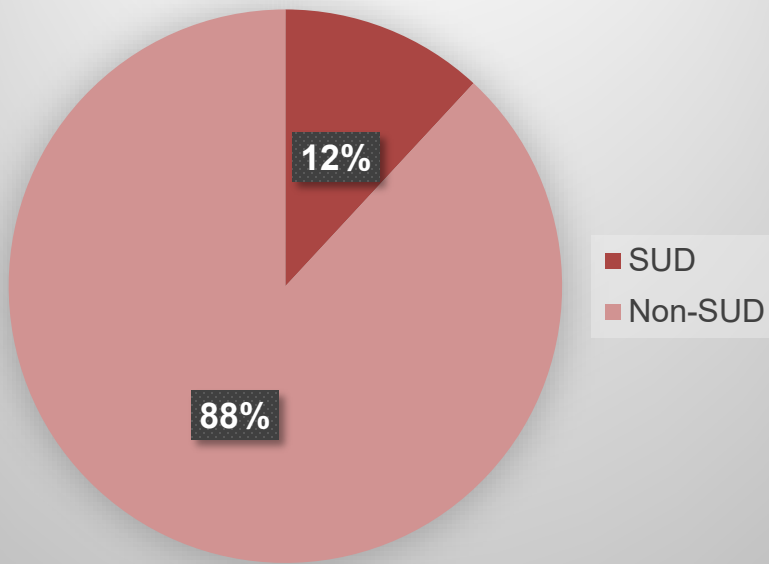
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# Today's Learning Outcomes

- National, regional, and state prevalence on drug removals
- Child, parent, and family risk factors associated with methamphetamine involvement & foster care
- Effect of methamphetamine on reunification & role of substance use treatment
- Effect of methamphetamine on guardianship & adoption
- Regional permanency outcomes by substance type
- Mechanisms for increasing guardianship & adoption

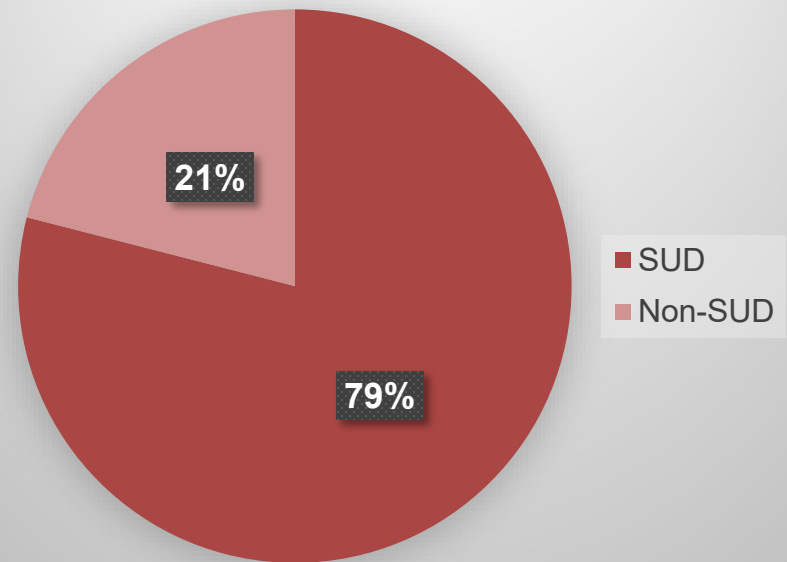
# Parental Substance Use Disorders in Child Welfare

**Parental SUD Affected Children in Gen. Pop.**



SAMHSA, 2009

**Parental SUD Affected Children in Foster Care**



Testa & Smith, 2009

# Substance Removals in Regions 7 & 8

## % Substance Use Removals in 2017

9 of 10 states above U.S. average

49%

UT ranks 3

IA ranks 6

WY ranks 9

MO ranks 11

SD ranks 12

KS ranks 18

CO ranks 19

ND ranks 21

MT ranks 22

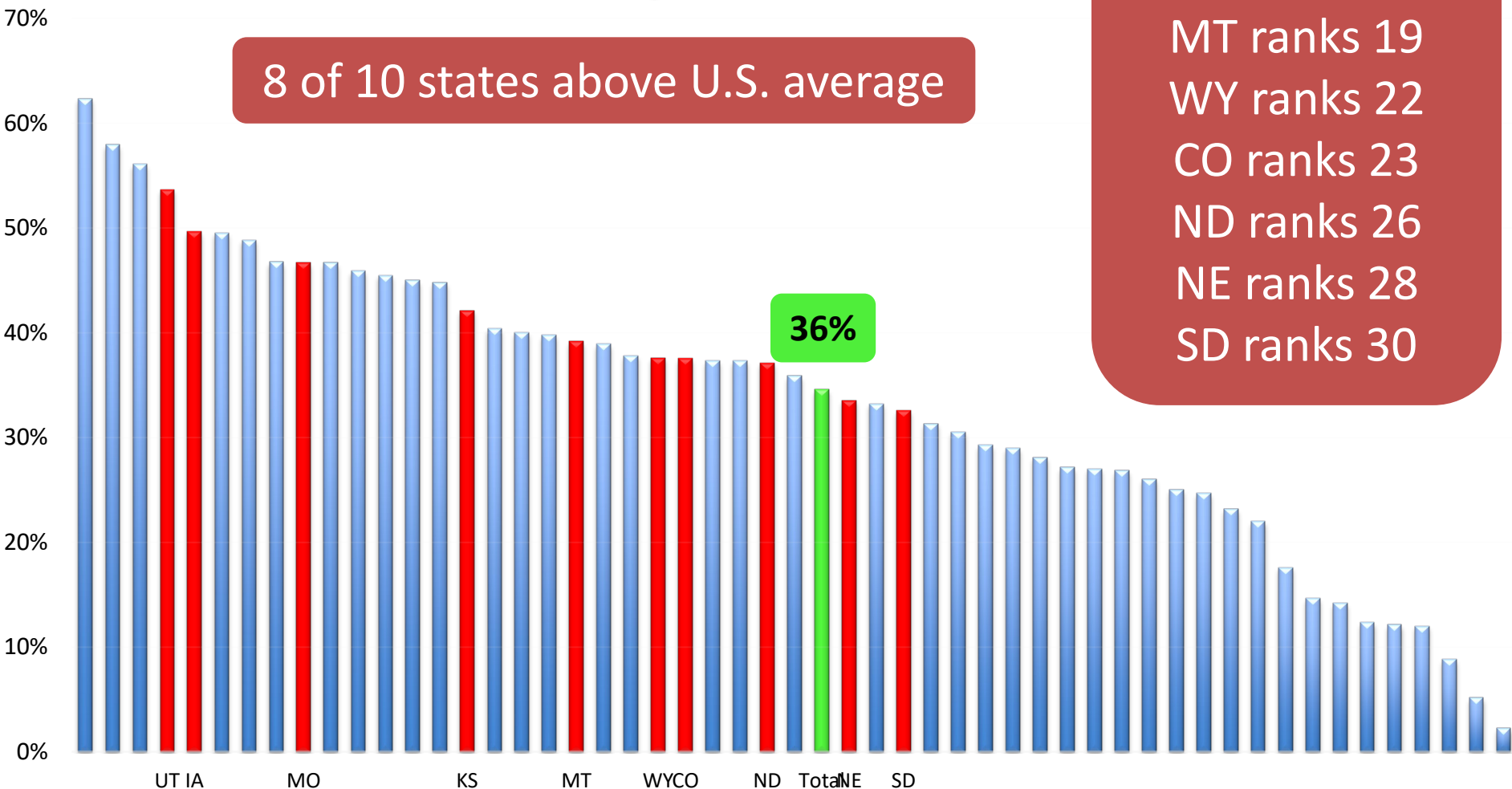
NE ranks 29



# Parent Drug Removals in Regions 7 & 8

## % Parent Drug Removals in 2017

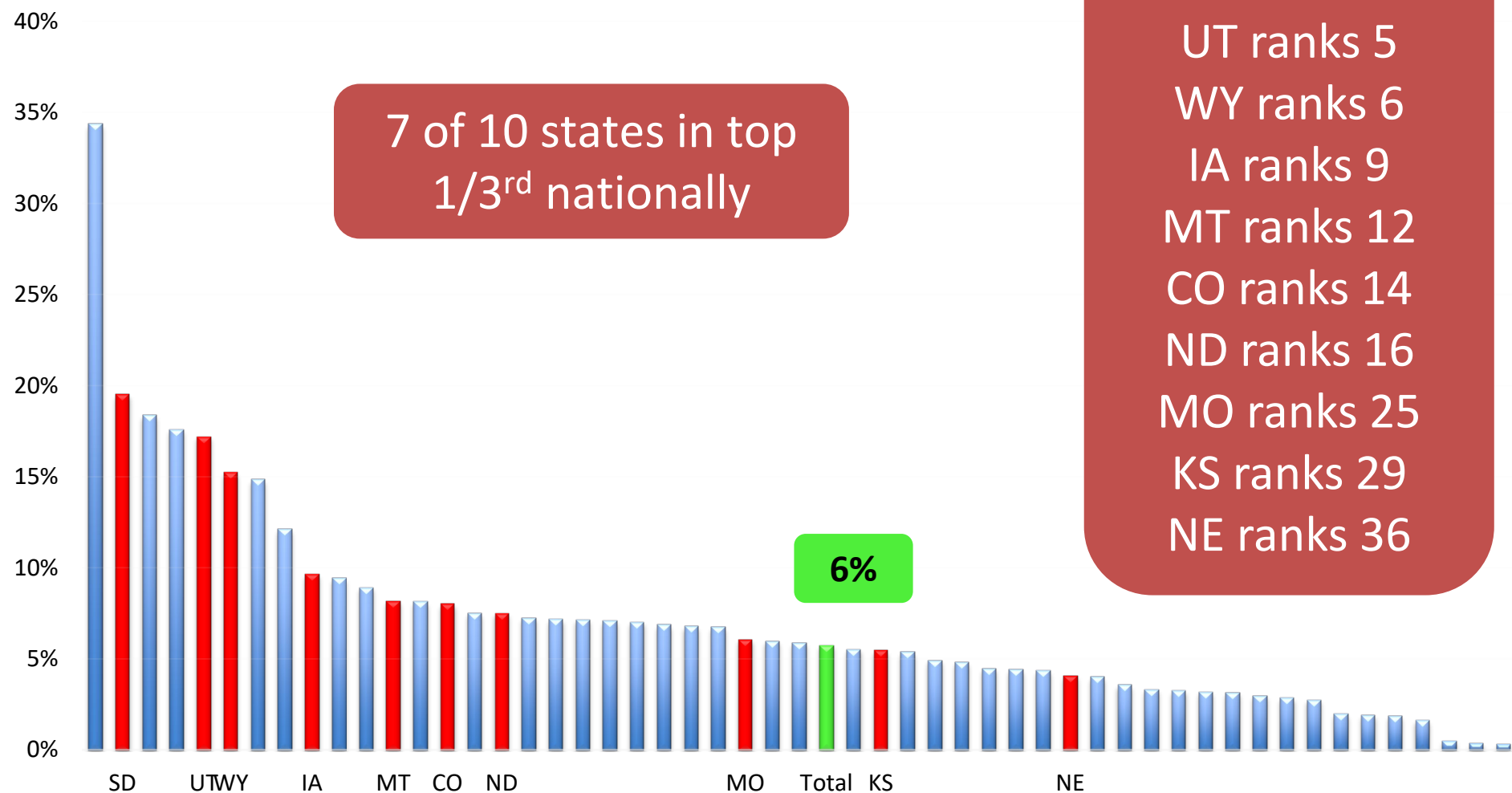
8 of 10 states above U.S. average



UT ranks 4  
IA ranks 5  
MO ranks 9  
KS ranks 15  
MT ranks 19  
WY ranks 22  
CO ranks 23  
ND ranks 26  
NE ranks 28  
SD ranks 30

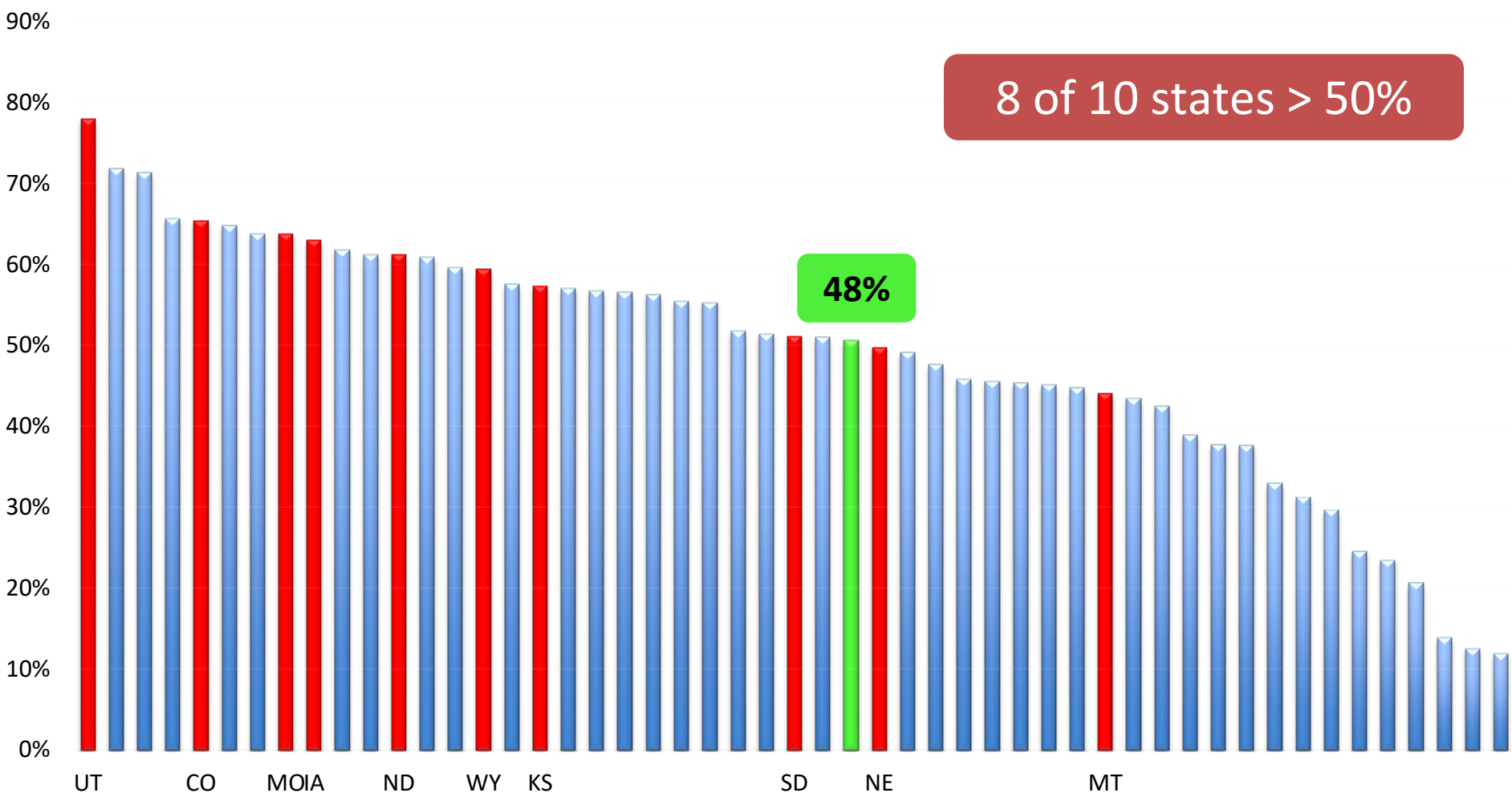
# Parent Alcohol Removals in Regions 7 & 8

## % Parent Alcohol Removals in 2017



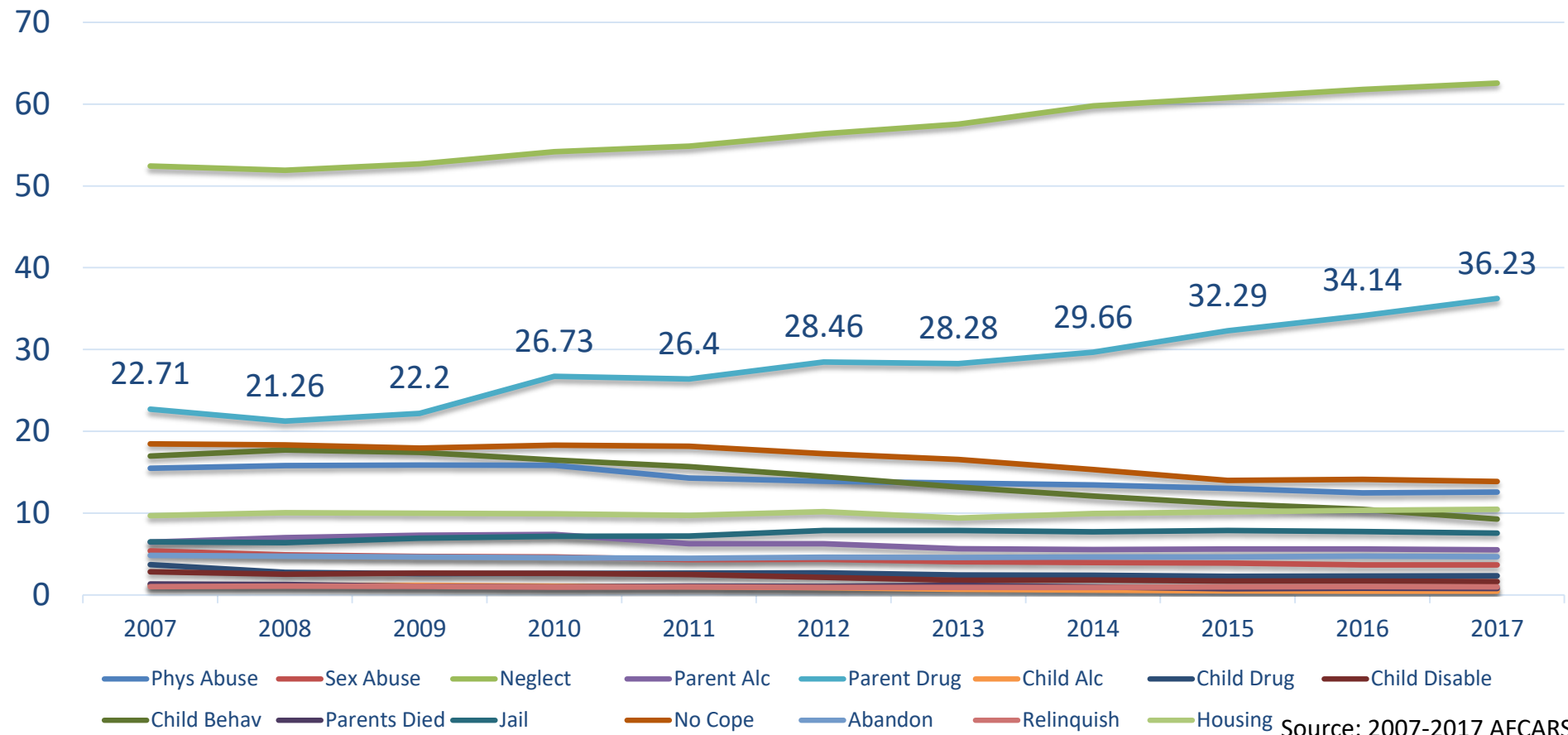
# Rates of Babies Removed Due to Drugs Even Higher

## % of Infants in Foster Care due to Drug Removals



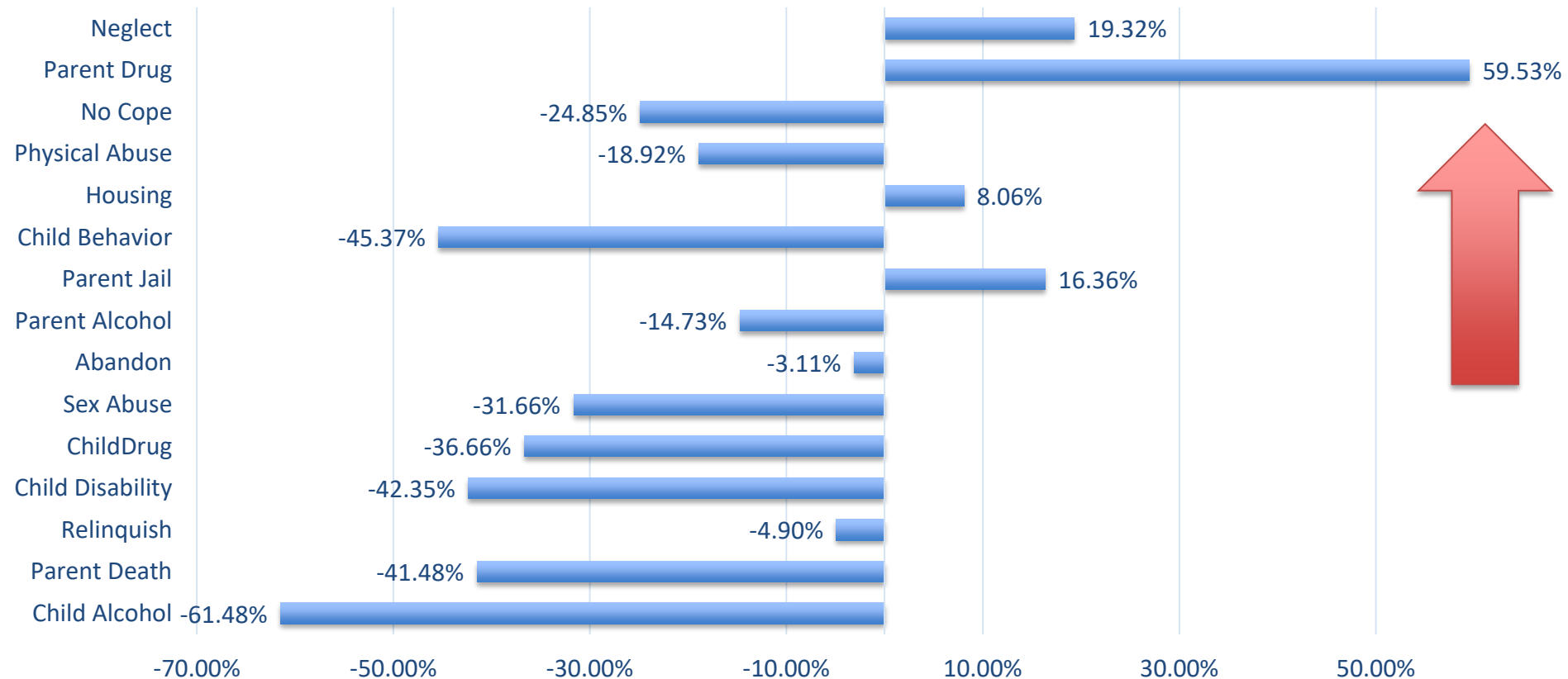
# Nationally, Drug Removals Rising the Fastest

% Removed x Removal Reason  
National Data



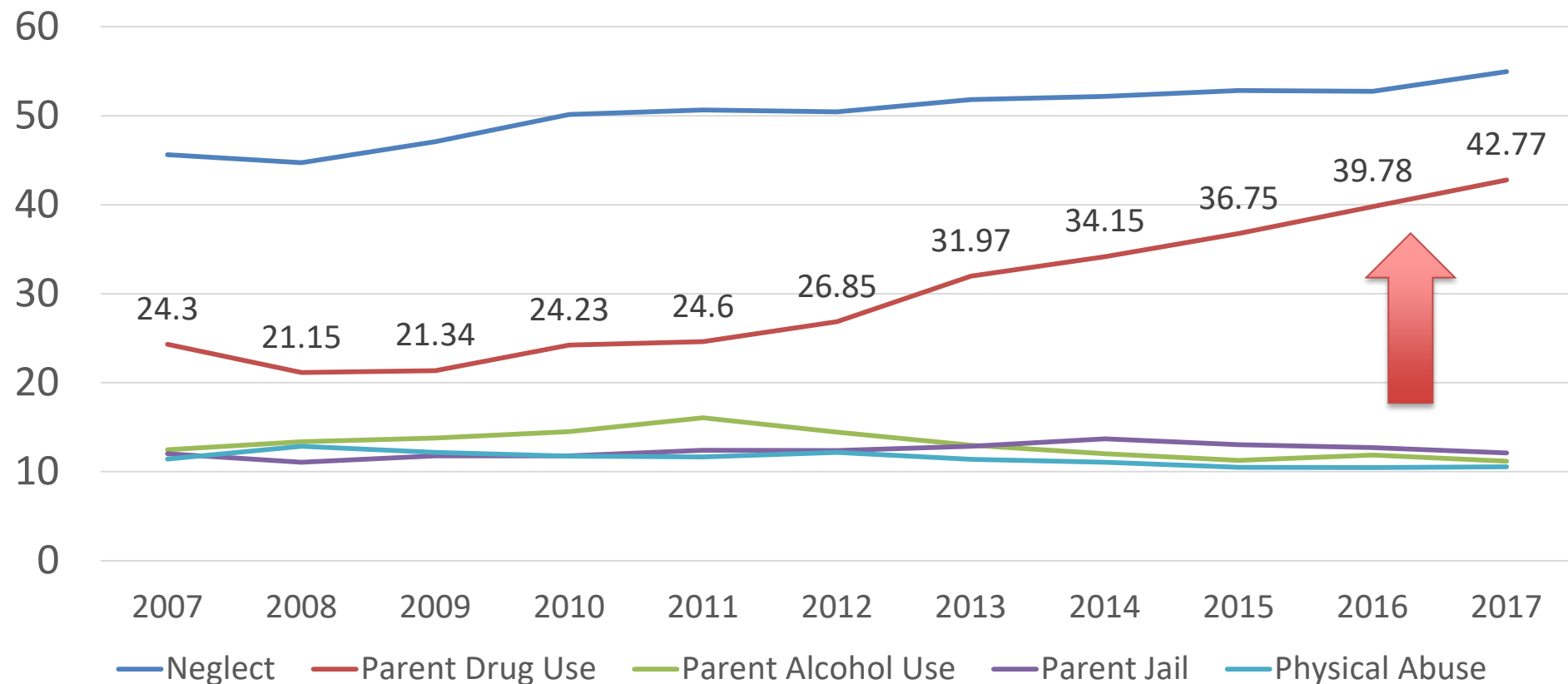
# Nationally, Largest Increase in Drug Removals

2007-2017 Change in % Removed x Removal Reason  
National Data

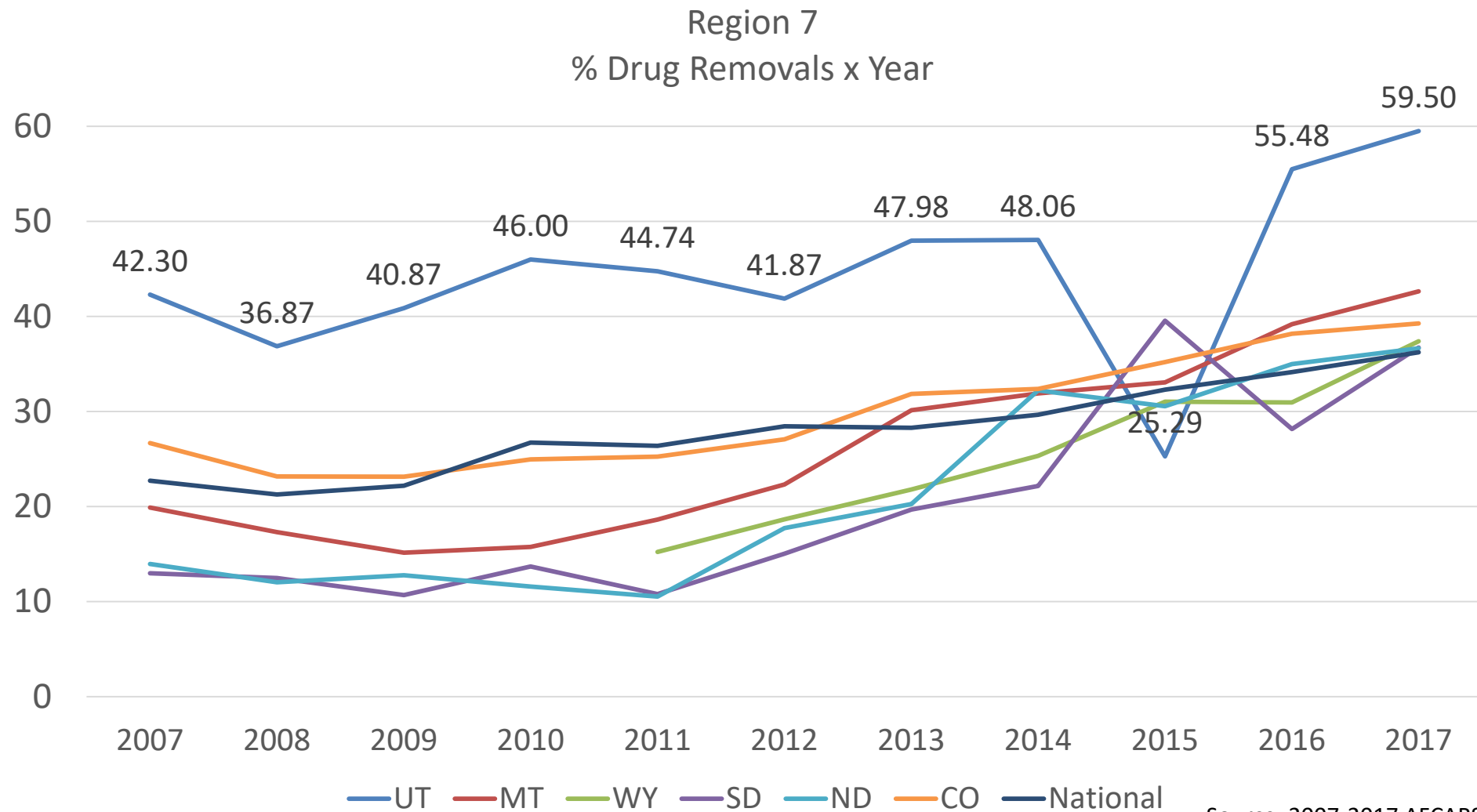


# Region 7: Parent Drug Removals Rising the Fastest

Region 7  
% Removed x Removal Reasons



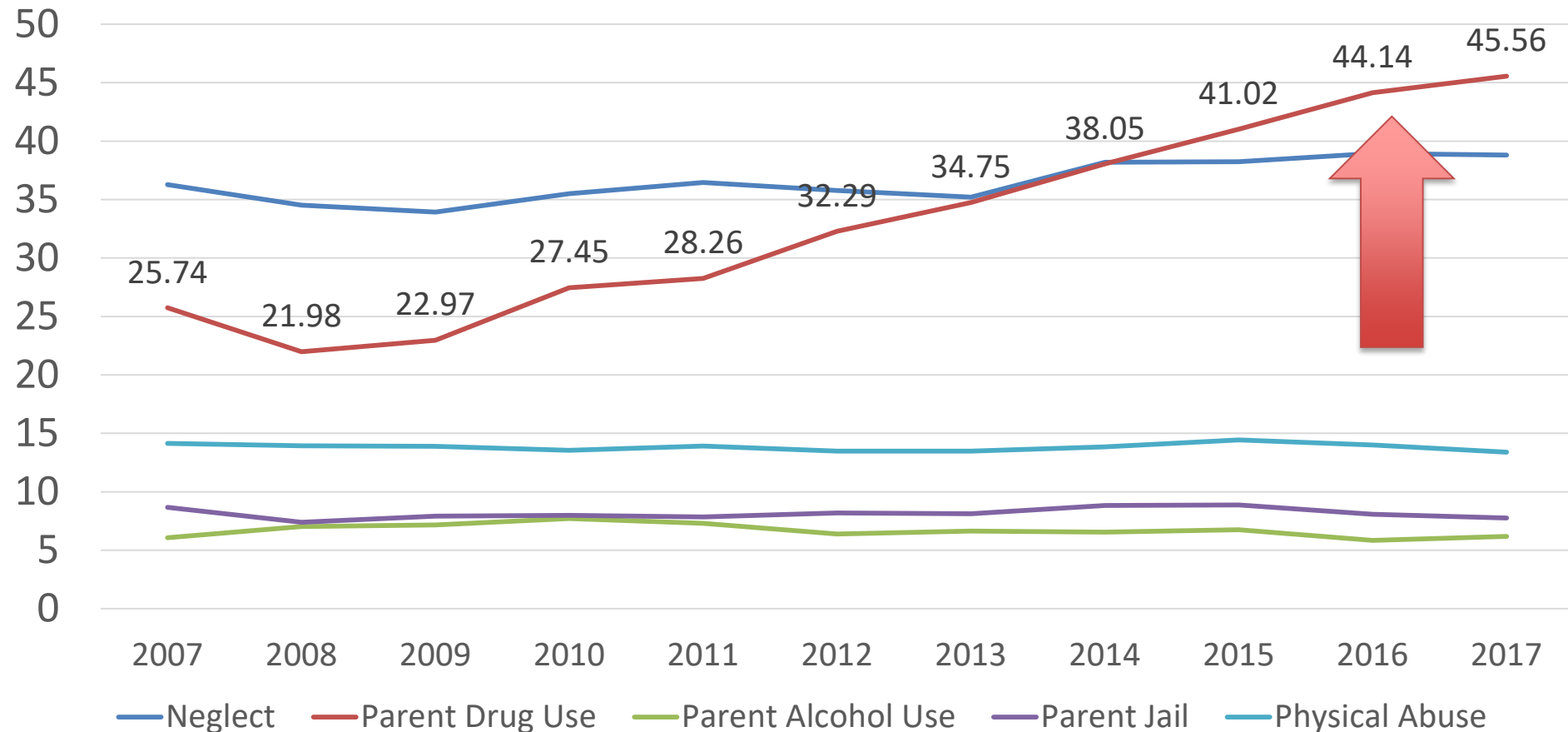
# Region 7: State Differences



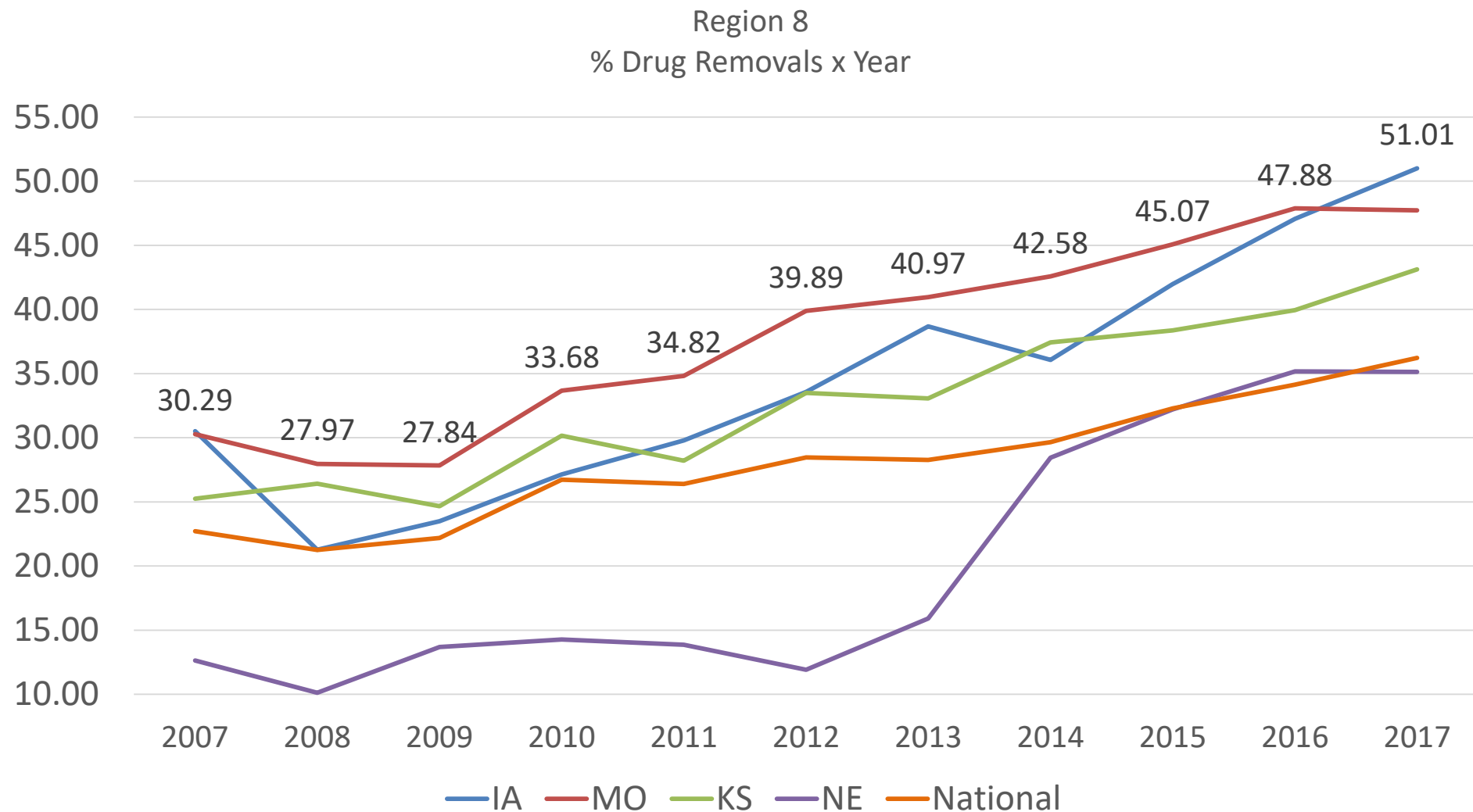
Source: 2007-2017 AFCARS

# Region 8: Drug Removals Now Most Common Removal Reason

Region 8  
% Removed x Removal Reasons

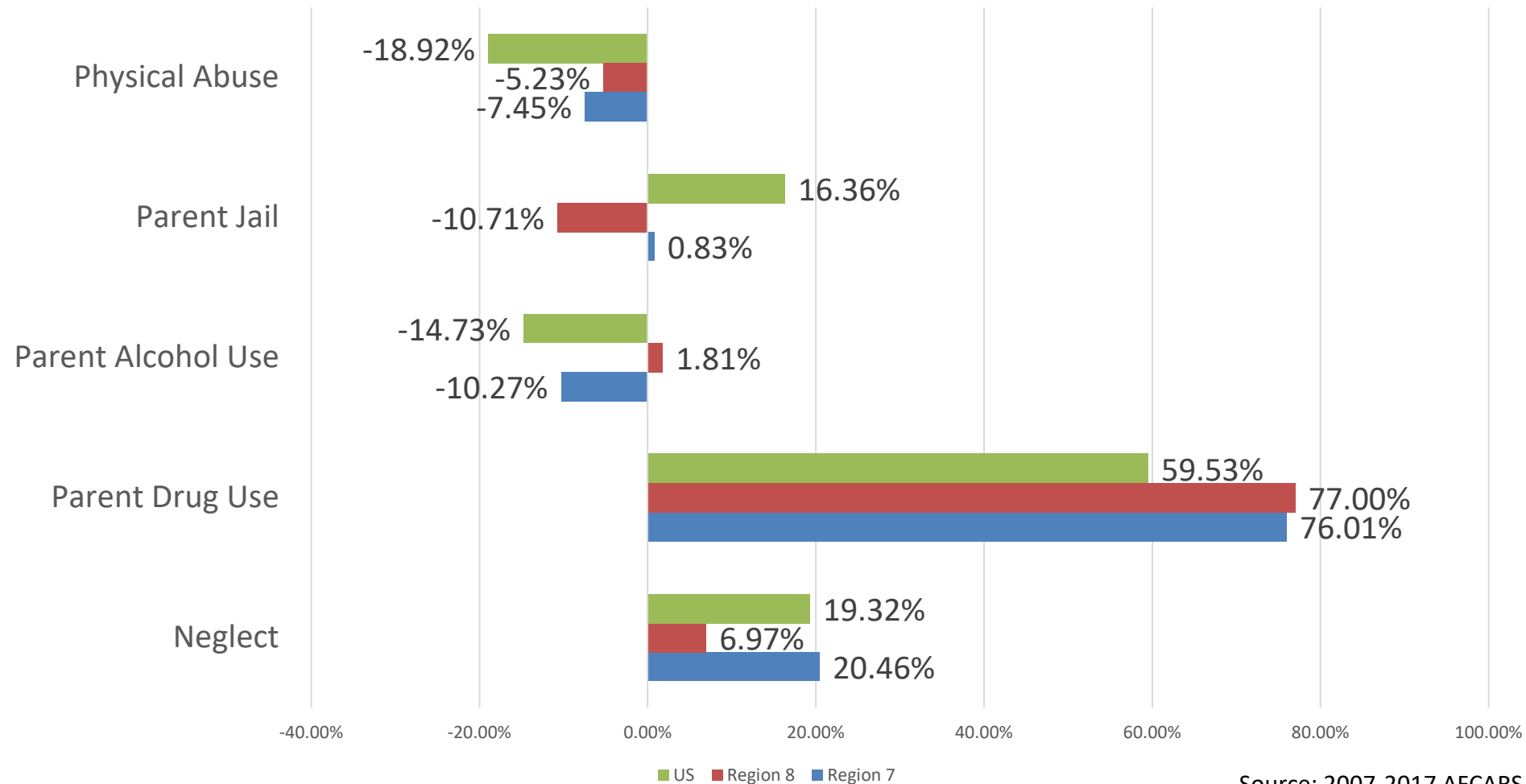


# Region 8: State Differences



# Parent Drug Removals Increasing in Regions 7 & 8 More than U.S.

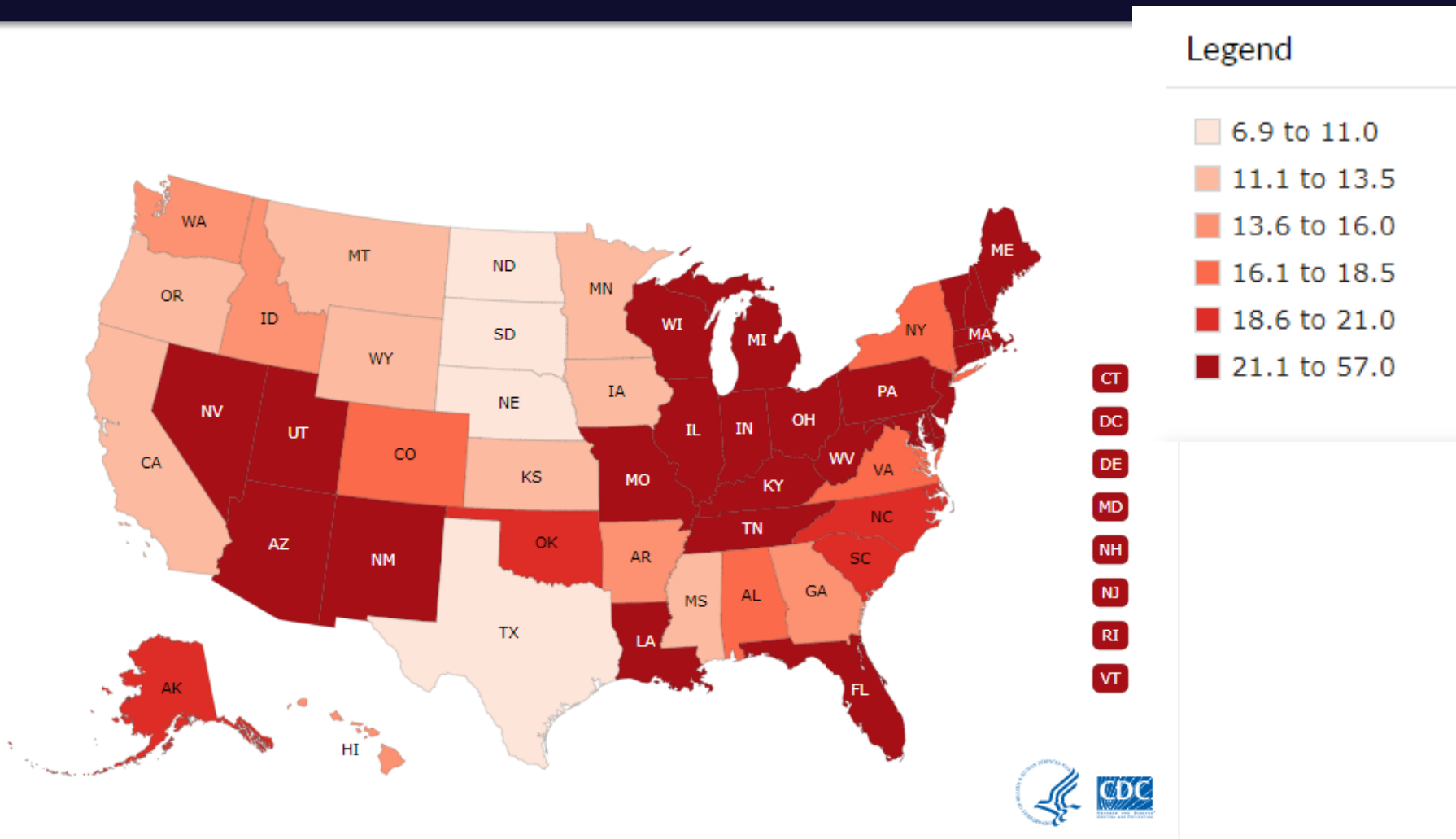
2007-2017 Change in % Removals x Removal Reasons



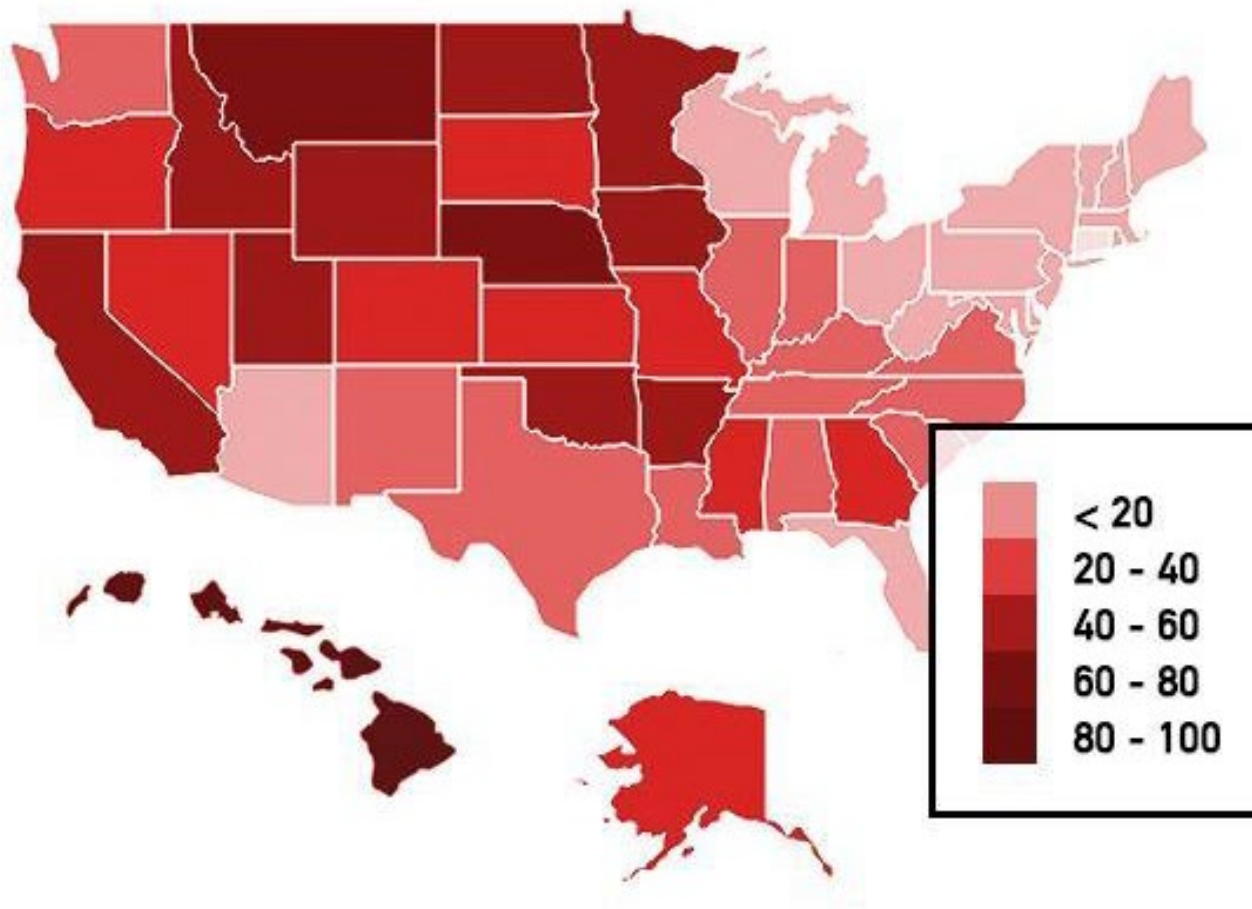
# **WHY THE INCREASE IN DRUG REMOVALS?**

Regional Variability According to  
Substance Type

# State Variability in Opioids Overdoses in 2017



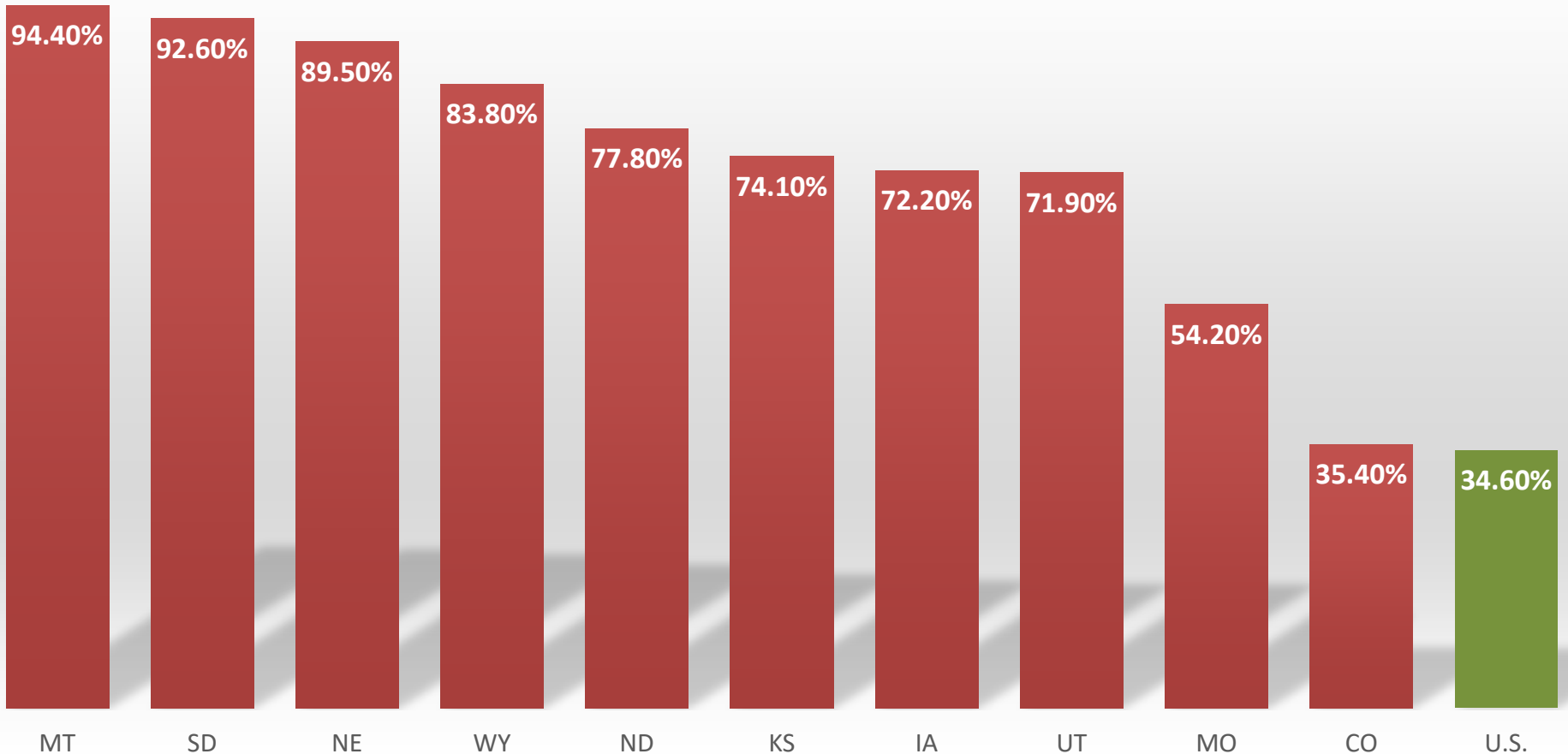
# State Variability in Federal Meth-Related Convictions in 2015



Source: U.S. Sentencing Commission, 2015

# High Rates of Drug Offenses Due to Meth in Regions 7 & 8

% of Drug Offenses due to Methamphetamines



Source: United States Sentencing Commission, 2017

# Methamphetamine Use is Most Common in Western States

- ~60% of meth-related hospitalizations occurred in the West region (Winkelman et al., 2018)
- Meth-related hospitalizations more likely:
  - Male
  - Ages 18-40
  - Native American
  - Hispanic
  - Lowest income bracket
  - Medicaid

# **HOW DO METH-INVOLVED FAMILIES END UP IN FOSTER CARE?**

Parent, Child, & Family Risk-Factors

# Gender Differences in Meth Use Experiences

## Trauma History

More likely to have childhood trauma & household dysfunction (Messina et al, 2007)

42% have childhood and adolescent sexual abuse (Messina et al., 2007)

## Co-Occurring Problems

More likely to be unemployed (Shannon et al, 2011) and have less education (Messina et al, 2008)

More current psychiatric problems (Simpson et al, 2016) and suicide attempts (Messina et al, 2008)

## Treatment Outcomes

Higher levels of co-morbid problems (Cohen et al, 2007)

Childhood abuse more predictive of poor treatment outcomes (Hyman et al., 2006)

Less likely to maintain abstinence post-Tx (Hillhouse et al., 2007)

# Direct Effects of Meth on Parenting

**Fighting &  
violent  
behavior**

(Brown & Hohman,  
2006)

**Failure to purchase food** (Haight  
et al, 2007)

**Unstable Housing** (Haight et al, 2005)

**Exposing  
children to  
manufacturing**  
(Hohman et al., 2004)

**Anger & Irritability**  
(Brown & Hohman, 2006)

**Apathy & Depression** (Murray, 1998)

**Neglect & Hiding use from Children**  
(Brown & Hohman, 2006)

# Effects of Parental Meth Use on Children

Behavior problems & personal maladjustment  
(Asanbe et al, 2008a)

Depression & Aggression  
(Asanbe et al, 2008b)

Fear, nightmares, and hopelessness (Haight et al, 2005)

Neglect, physical and sexual abuse (Haight et al, 2007)

Isolation, Intense worry, Self-mutilization (Haight et al., 2005)

Conduct & peer problems  
(Dyba et al, 2018)

Internalizing & Externalizing behaviors (Haight et al, 2010)

# Characteristics of Meth-Involved Families & Foster Care Risks

## *Characteristics of Meth-Involved Families*

- Generational substance use
- Unemployed parent
- Parent less educated
- Parent mental health problems
- Housing instability
- Interpersonal violence
- Child behavior problems
- Child neglect
- Child abuse (physical or sexual)

## *Risks for Foster Care Placement*

- Parental drug use
- Unemployed parent
- Parent less educated
- Parent mental health problems
- Housing instability
- Interpersonal violence
- Child behavior problems
- Child neglect
- Child abuse (physical or sexual)

### Substance Removals in KS 2007-2012

		%
<b>Total Sample</b>		100
<b>Alcohol only</b>		3.9
<b>Drug only</b>		18.4
<b>Meth only</b>		3.0
<b>Polysubstance with Meth</b>		4.8
<b>Polysubstance without Meth</b>		
<b>No Substance Removal</b>		

Any Meth Use  
N = 1,269  
7.8% of Sample

Source: Akin, Brook, & Lloyd, 2017

Methamphetamine use is 776% more common in child welfare-involved population vs. general population

# National Prevalence of Meth in Foster Care Unknown

- Methamphetamine removal is NOT a Federal child welfare data point

## Region 7 & 8 States Ranked Nationally

State	Gen. Pop. Meth Use Prevalence
North Dakota	3
Missouri	7
South Dakota	9
Colorado	10
Utah	13
Kansas	14
Wyoming	16
Montana	22
Iowa	30
Nebraska	33

**HOW DOES METH-  
INVOLVEMENT AFFECT  
REUNIFICATION?**

# Effect on Child Welfare Trajectory

Challenges At Every Stopping Point

Investigation

Substantiation

Placement

Reunification

Re-Entry

Termination  
of Parental  
Rights

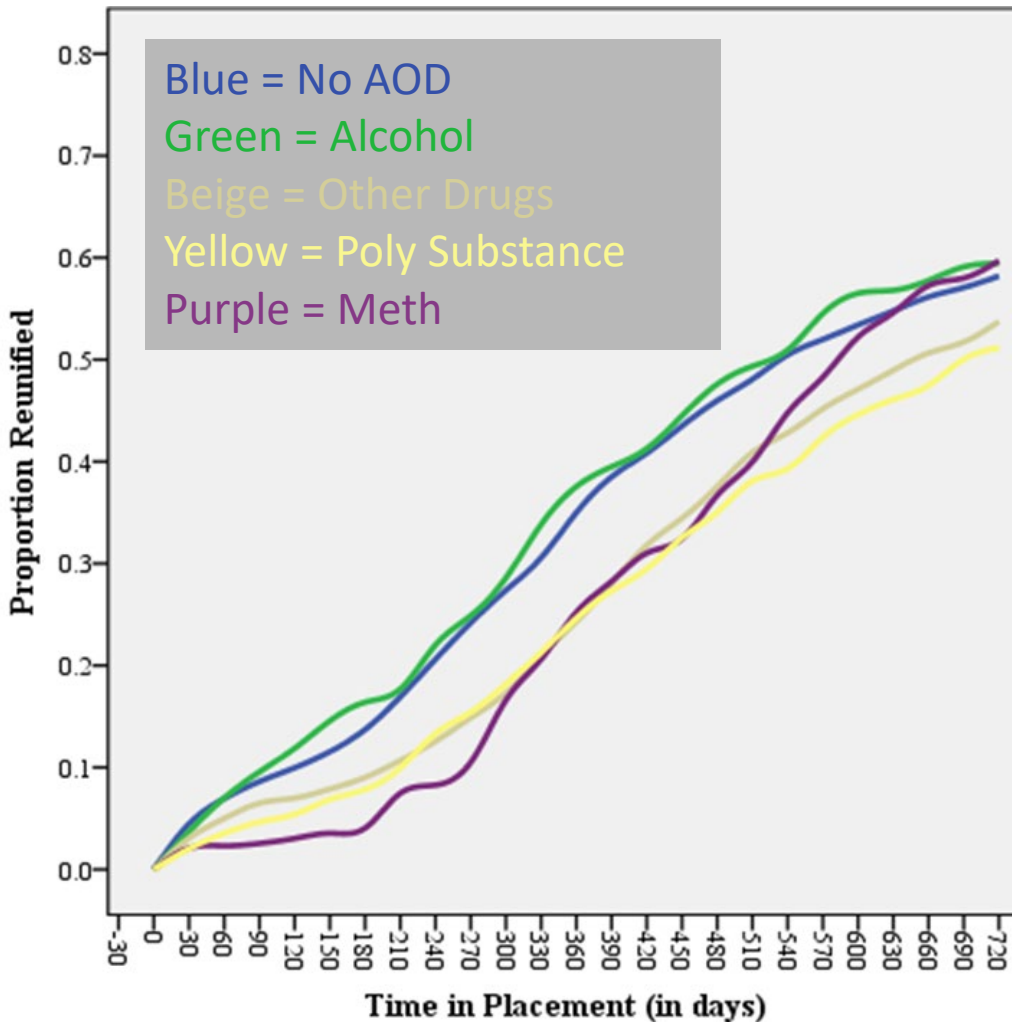
Prenatal  
Substance  
Exposure

Child  
Welfare  
System  
Involvement

# Meth & Reunification

- In 2013, no prior studies specifically examining the effect of parental meth use on reunification
- Entry cohort of children in foster care between 2007-2012 (n = 16,220) in Midwestern state
  - 489 (3%) removed due to meth only
  - 2,982 (18%) removed due to other drugs only
  - 631 (4%) removed due to alcohol only
  - 1,143 (7%) removed due to poly substance use

# Meth & Reunification



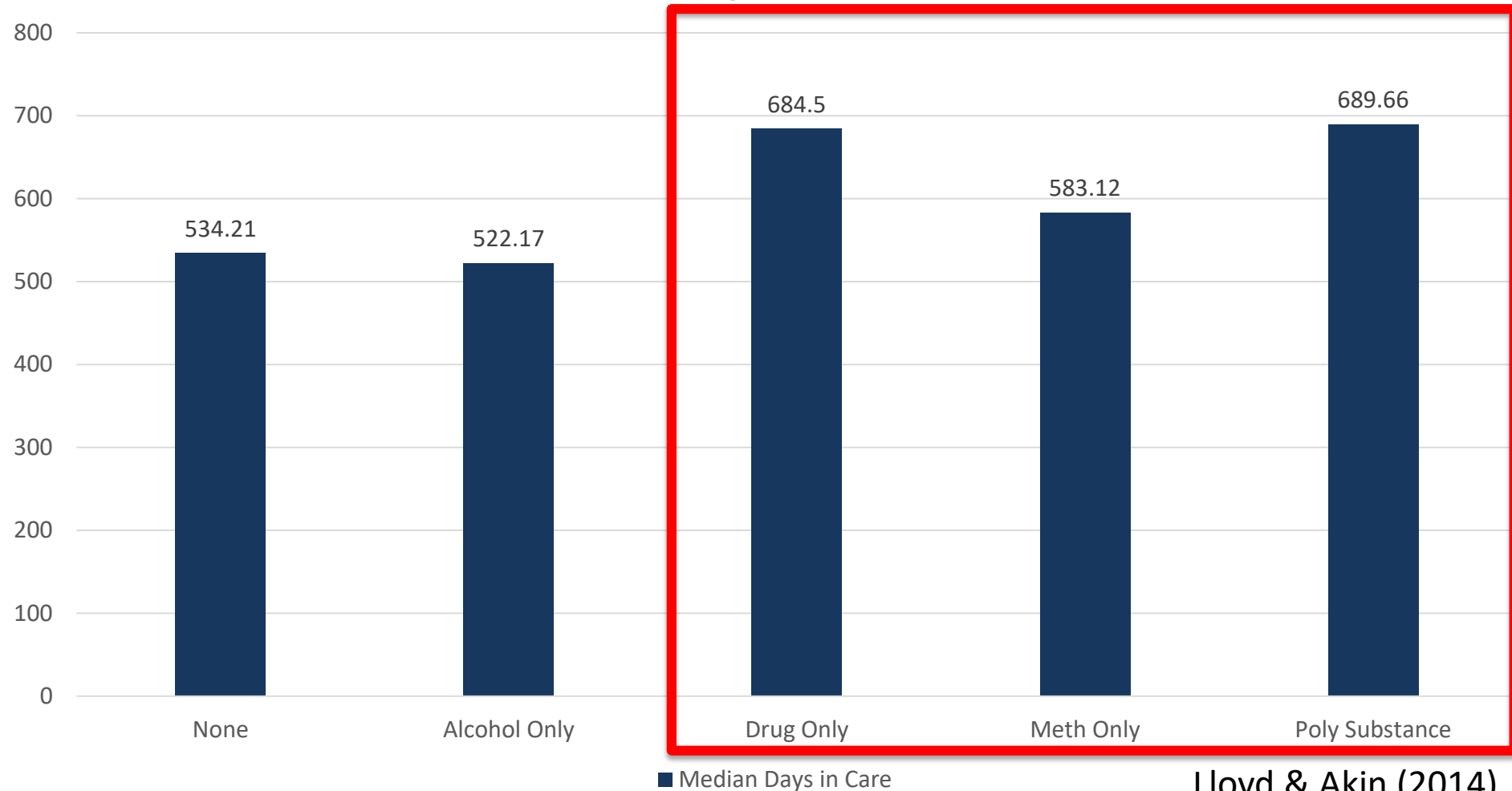
Compared to no AOD:

- Alcohol <1% less likely to reunify
- Other drug 12.8% less likely to reunify
- Poly substance 12.9% less likely to reunify
- Meth 21.5% less likely to reunify

Figure from Lloyd & Akin (2014)

# Meth & Reunification

Median Days in Foster Care

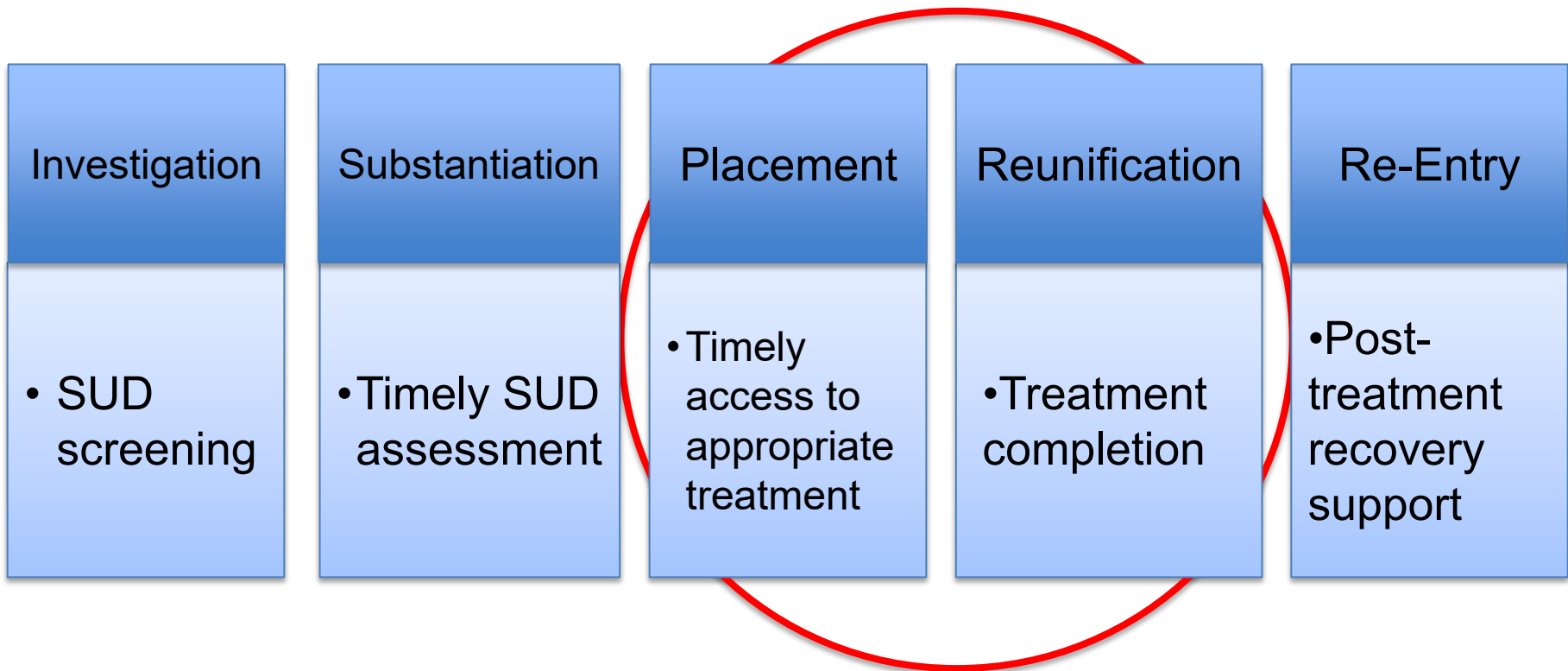


Lloyd & Akin (2014)

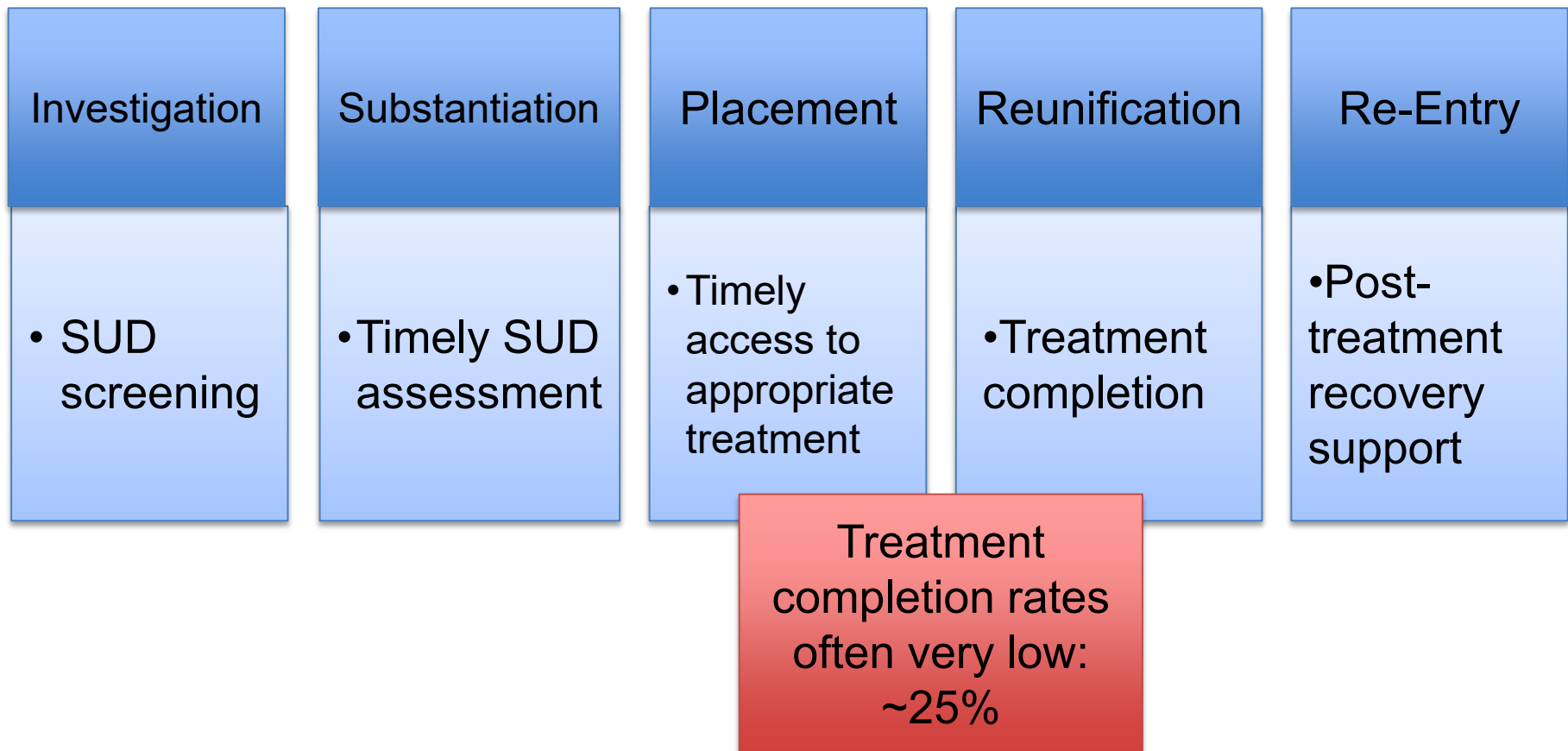
# Meth & Reunification

Author(s)	N	Sample	Findings
Grant et al (2011)	458 mothers	Mothers with SUD (pregnant or post-partum) in Washington State Parent-Child Assistance Program	MA Control Var. - Parental MA during pregnancy was not associated with “disrupted parenting” <b>Neutral impact.</b>
Grella et al (2009)	1,115 mothers 2,299 kids	Participants in the California Tx Outcome Project	MA Control Var. - Meth users were no different from alcohol users on rates of reunification <b>Neutral impact.</b>
Green, Rockhill & Furrer (2007)	1,911 mothers	Women with children in foster care in Oregon	MA Control Var. - Meth not significantly associated with increased length of stay or decreased reunification. - Tx completion was the strongest predictor of reunification (9x) <b>Neutral impact.</b>

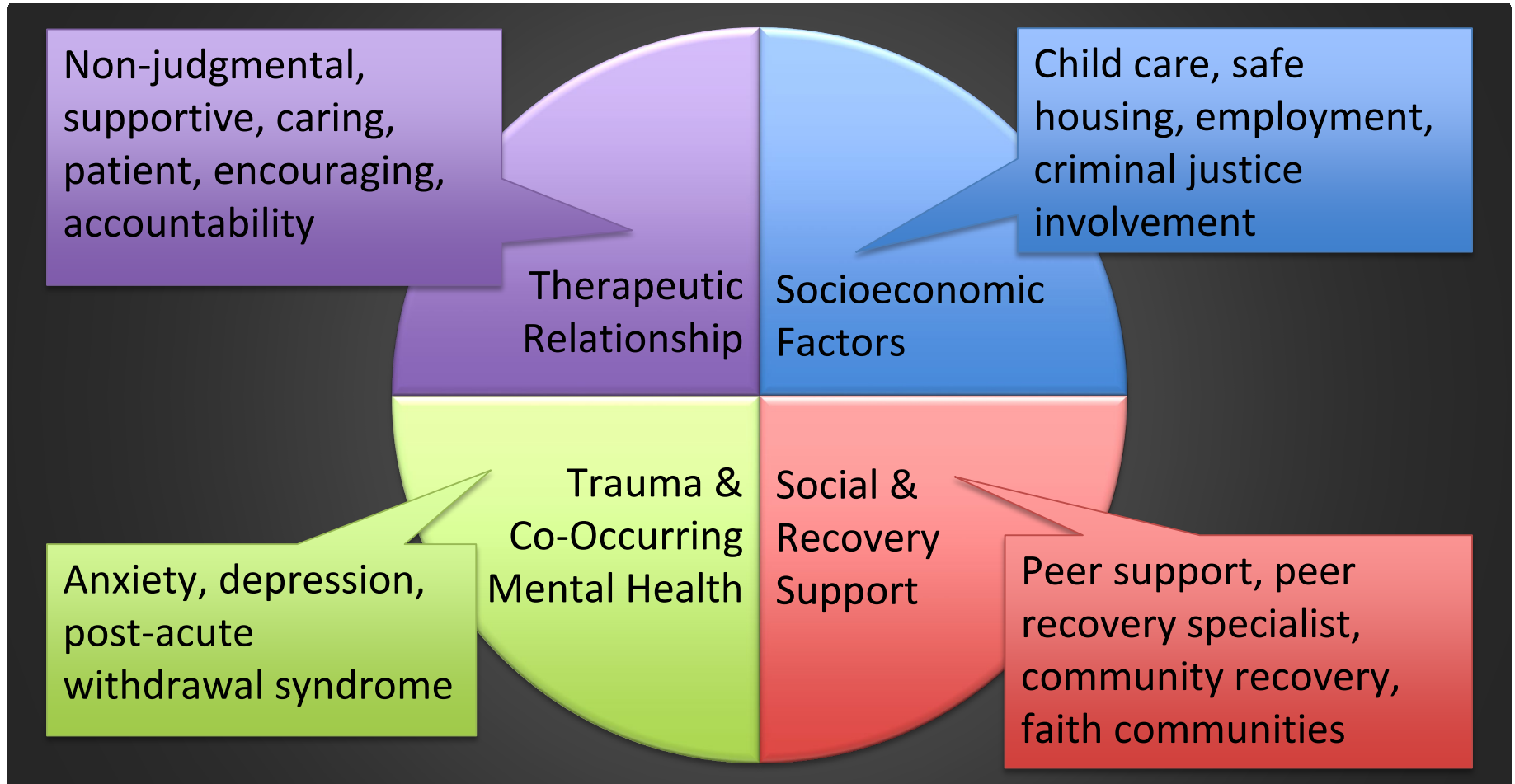
# What Works?



# What Works?



# Barriers to Treatment Completion



# Family Treatment Drug Courts

- FTDC aim to **increase reunification** and **treatment completion**
- Started in 1994 after the peak of the crack/cocaine epidemic
- Currently, ~500 FTDC across the U.S.
- Research and evaluation is a key component of drug court best practices
- ~40 research publications



# Meth & Reunification in FTDC

Author(s)	N	Sample	Findings
Boles & Young (2010)	FDC 2873 parents & 4567 kids vs. 311 parents & 173 kids	Sacramento	MA Control Var. <ul style="list-style-type: none"> <li>- Tx completion for meth higher than crack/cocaine and Rx; higher for male meth users than female</li> <li>- Parents with meth or marijuana as DOC had highest reunification rates at all time-points</li> </ul> <b>Positive impact.</b>
Carey et al (2010)	FDC 329 vs. 340	Jackson County, OR	MA Control Var. <ul style="list-style-type: none"> <li>- Meth involvement not associated with graduation</li> </ul> <b>Neutral impact.</b>
Carey et al (2010)		Marion County, OR	MA Control Var. <ul style="list-style-type: none"> <li>- More graduates were meth users (92% vs. 75%) but not SS</li> </ul> <b>Neutral impact.</b>
Boles et al (2007)		Sacramento	MA Control Var. <ul style="list-style-type: none"> <li>- No significant differences between meth and other drugs on reunification</li> <li>- Tx completion rates were similar too</li> </ul> <b>Neutral impact.</b>

# FTDC Meta-Analysis

- **Meta-analysis findings** (Zhang, Huang, Wu, Li, & Liu, 2019):
  - 17 studies sufficiently rigorous for inclusion
  - Pooled sample across studies is FTDC = 3402; Comparison = 3683
  - FDTC participants **75% more likely to reunify** without corresponding risk of re-entry or maltreatment re-report
  - Publications since 2011 showed more impact than earlier publications

## FDTC Study Locations Included in Meta-Analysis

State	N Studies
Arizona	1
California	2
Maryland	2
North Carolina	2
London	1
Washington	4
Oregon	2
Not Specified	3

# Best Practices for SUD in CWS

- Addictions education for child welfare, courts, foster parents
- Prompt assessment
- Quick entry into treatment at appropriate level of care
- Collaborate with treatment providers
- **Expect relapse in first 1-3 months of treatment**
- Truly random drug testing (2x per week, observed)
- No need for testing by child welfare if parent admits relapse or if parent gets tested at treatment
- **Do not use visitation with child as leverage**
- Positive reinforcement works better than negative sanction
- Attachment-focused parent/child evidence-based interventions
- Early intervention services for children
- Peer recovery specialists
- **Wraparound case management**
- Frequent supportive contact with parent

# **GUARDIANSHIP, ADOPTION & METHAMPHETAMINE**

When reunification is not possible

# Meth & Permanency

- Building on 2014 study
- Entry cohort of children in foster care between 2007-2012 (n = 16,220) in Midwestern state
  - 631 (4%) removed due to alcohol only
  - 2,982 (18%) removed due to other drugs only
  - 363 (2%) removed due to polysubstance without meth
  - 489 (3%) removed due to ***meth only***
  - 780 (5%) removed due to ***polysubstance with meth***

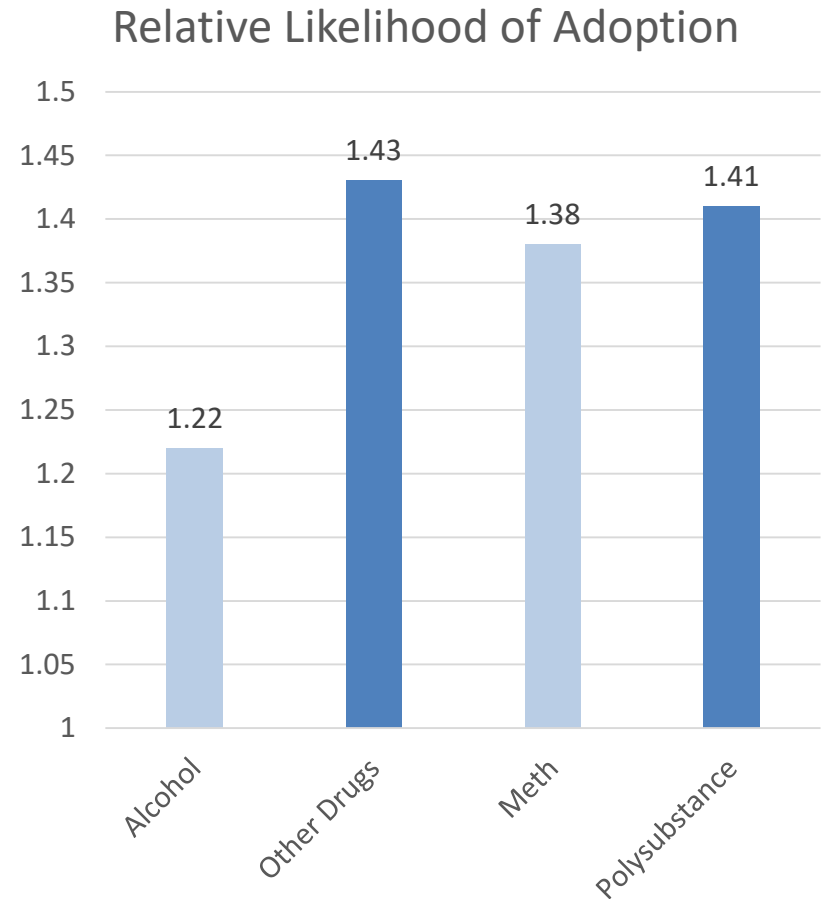
# Meth is Highest % Still in Care

	Still in Care		Reunification		Guardianship		Adoption	
	N	%	N	%	N	%	N	%
	6081	37.49%	7310	45.07%	952	5.87%	1877	11.57%
Alcohol only (n = 631)	218	34.55%	307	48.65%	46	7.29%	60	9.51%
Drug only (n = 2982)	1029	34.51%	1248	41.85%	177	5.94%	528	17.71%
Meth only (n = 489)	239	48.88%	171	34.97%	25	5.11%	54	11.04%
Polysubstance with meth (n = 780)	312	40.00%	321	41.15%	36	4.62%	111	14.23%
Polysubstance without meth (n = 363)	59	16.25%	142	39.12%	111	30.58%	51	14.05%
No AOD (n = 10975)	4248	38.71%	5121	46.66%	533	4.86%	1073	9.78%

# Likelihood of Adoption

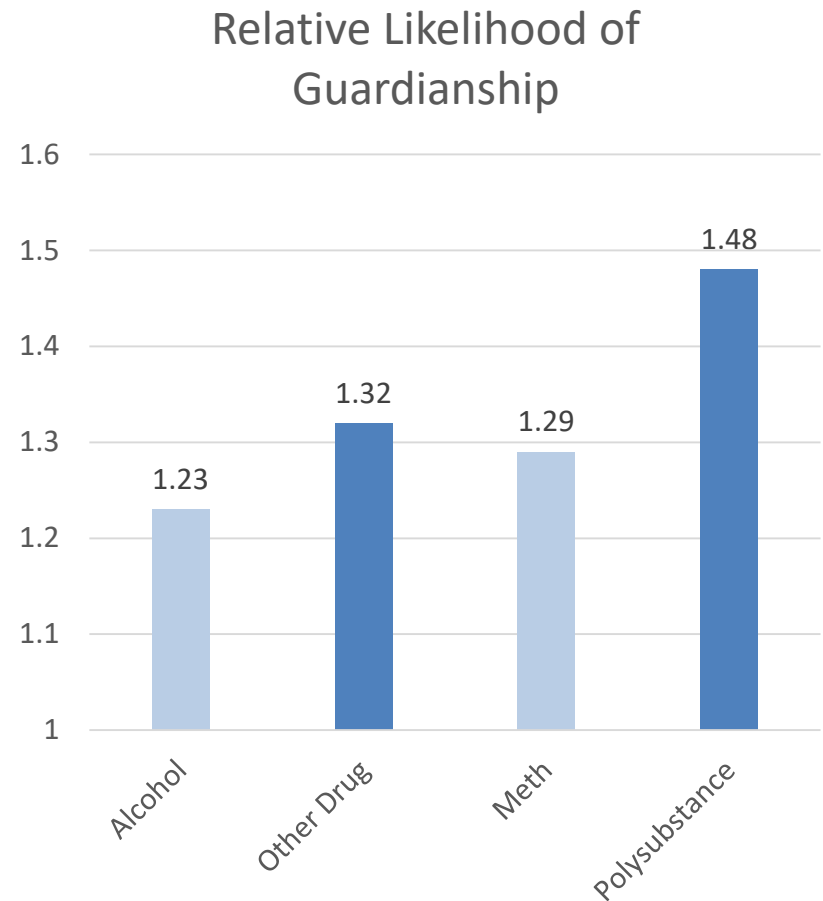
Compared to no AOD:

- Alcohol 22% more likely (not SS)
- Drug 43% more likely
- Meth 38% more likely (not SS)
- Polysubstance 41% more likely

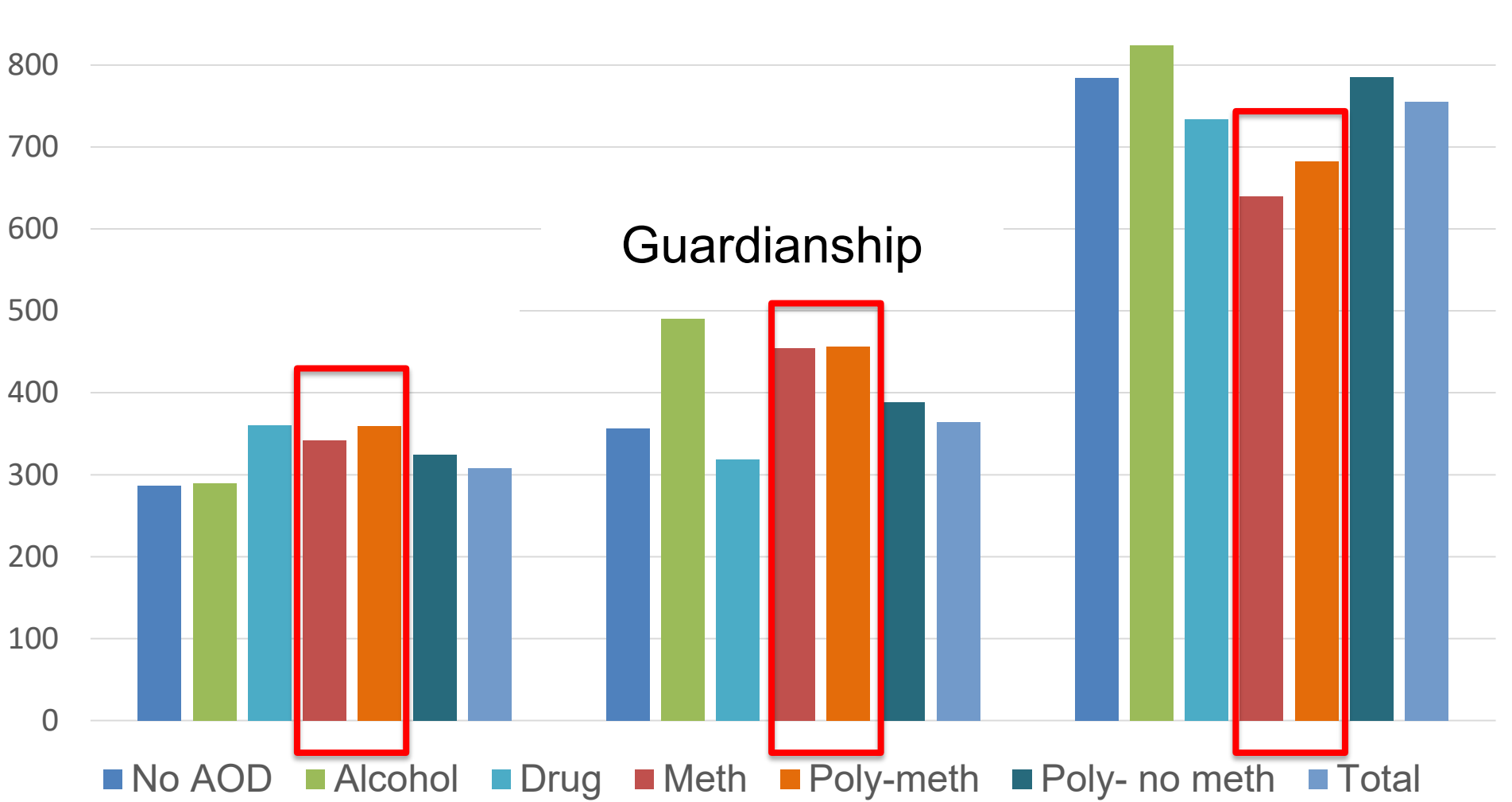


## Compared to no AOD:

- Alcohol 23% more likely (not SS)
- Drug 32% more likely
- Meth 29% more likely (not SS)
- Polysubstance 48% more likely



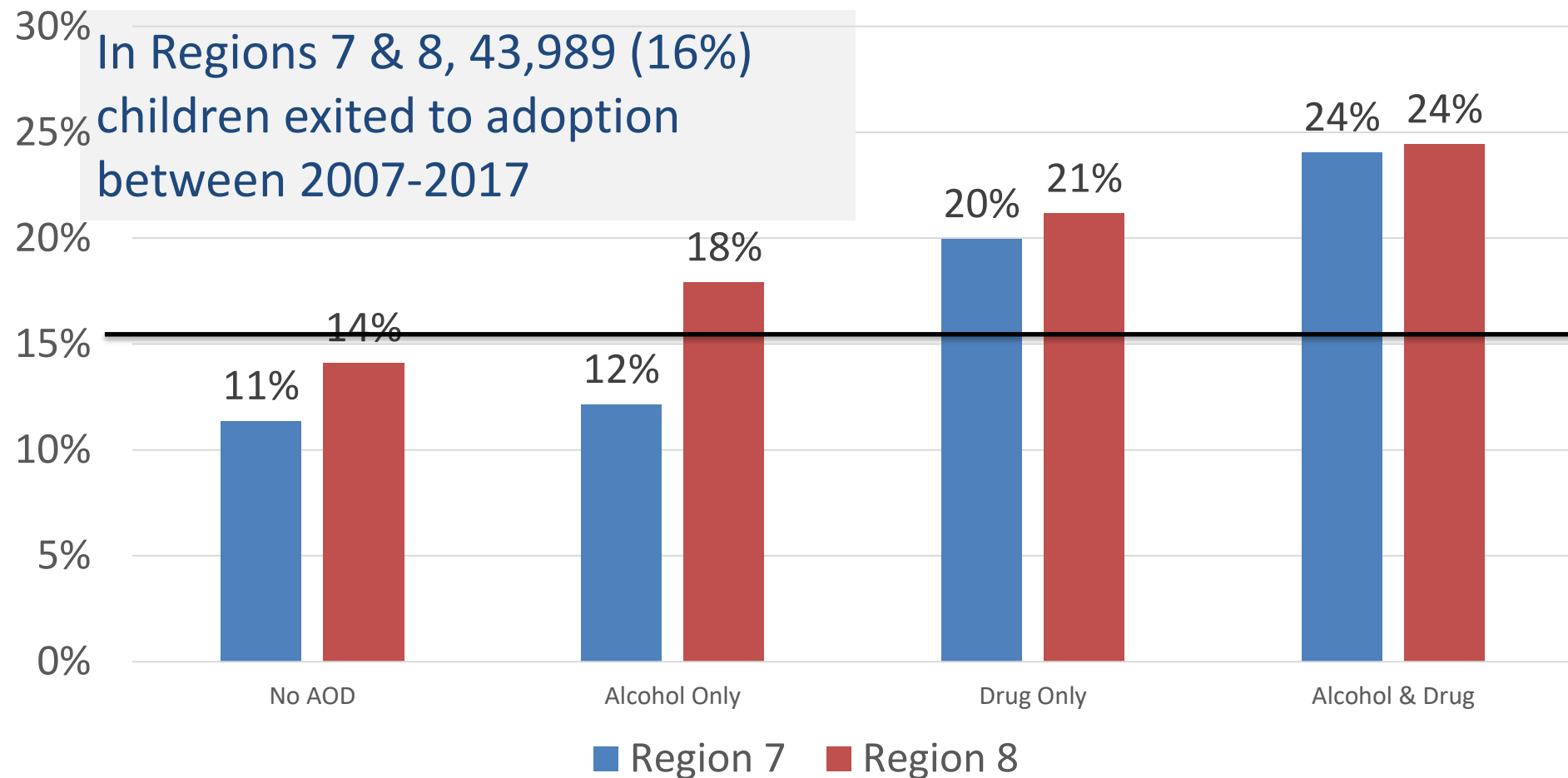
Akin, Brook, & Lloyd, 2015



# Regions 7 & 8: Adoption for AOD Removals

## Exit to Adoption

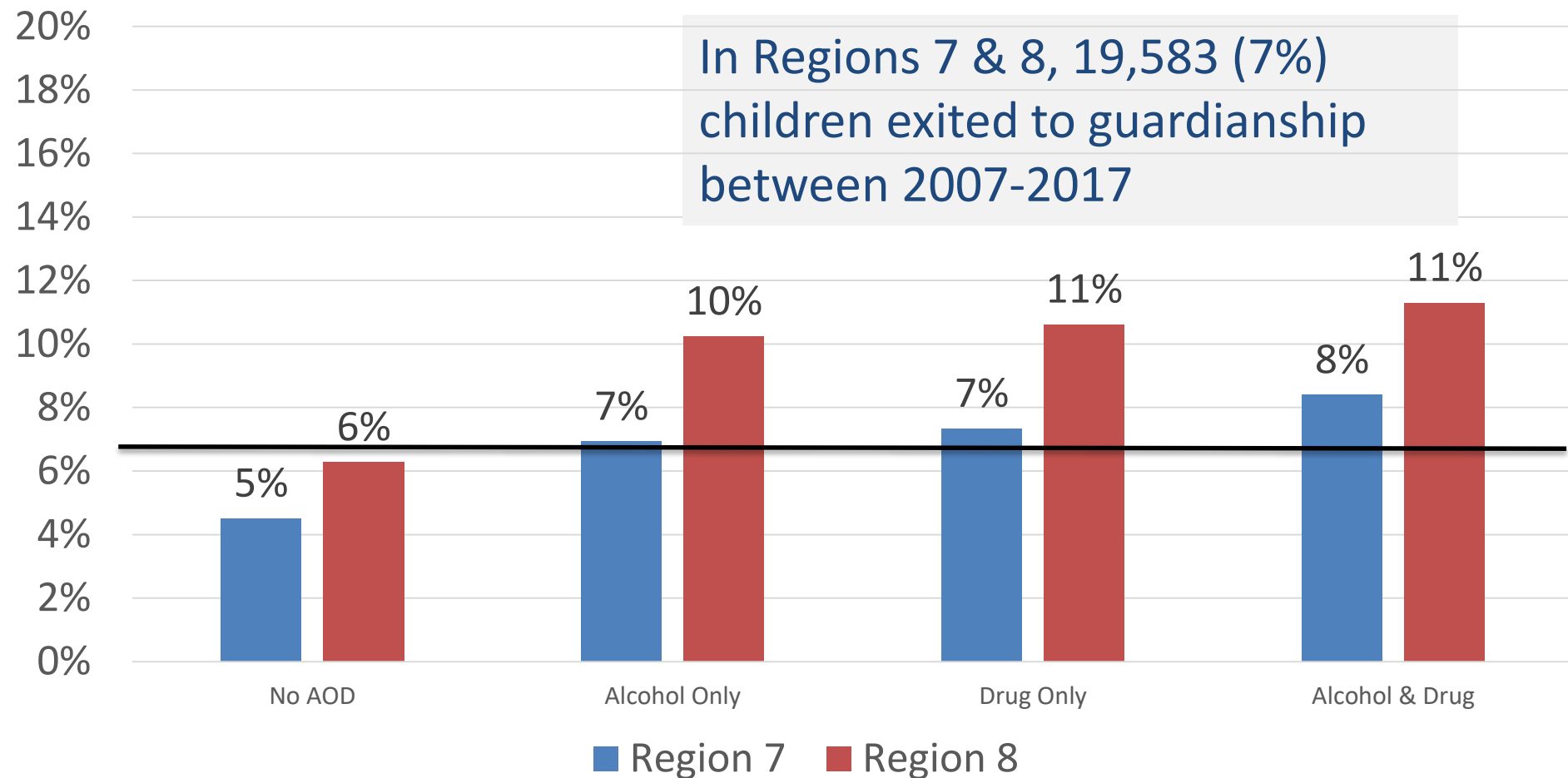
In Regions 7 & 8, 43,989 (16%) children exited to adoption between 2007-2017



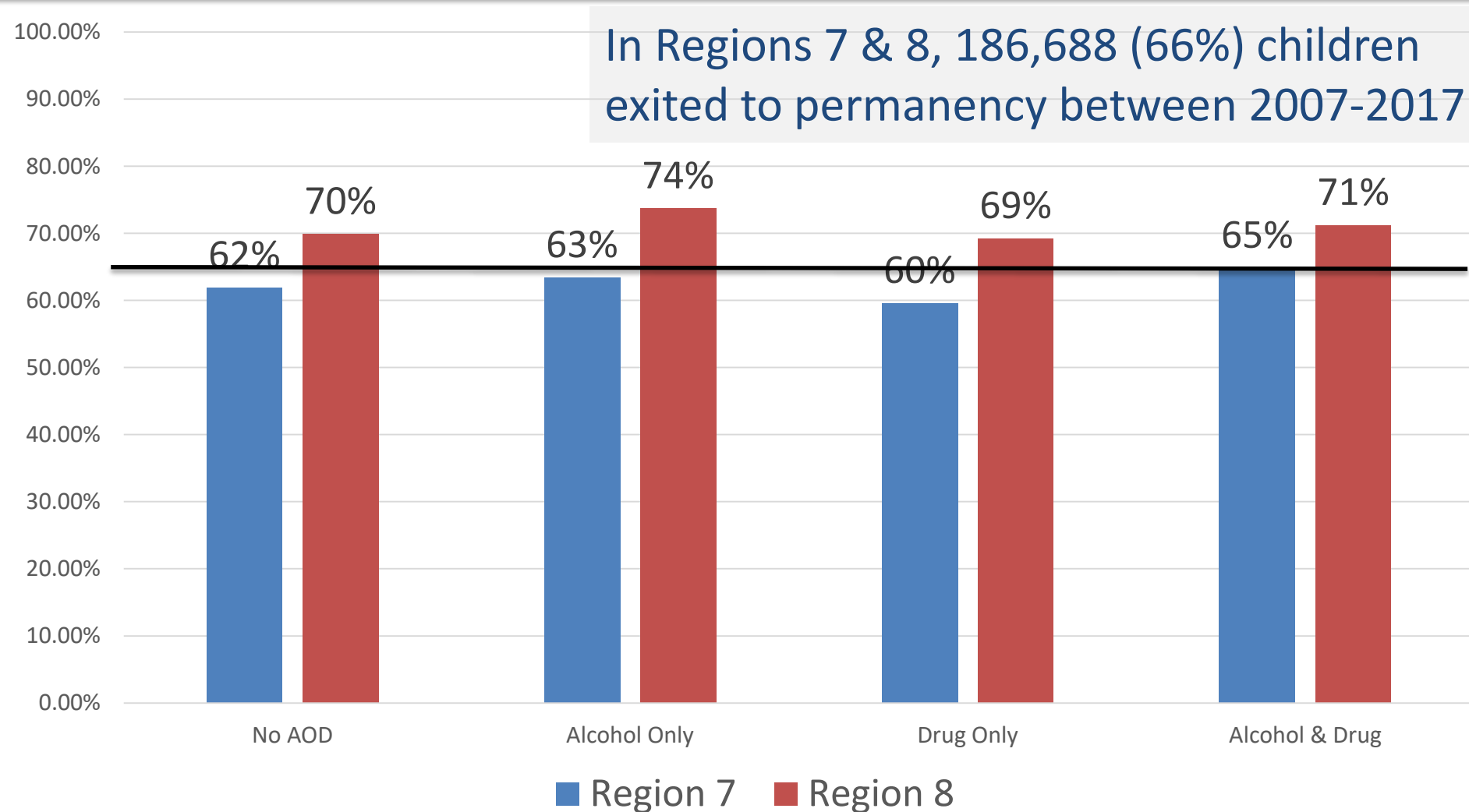
# Regions 7 & 8: Guardianship for AOD Removals

## Exit to Guardianship

In Regions 7 & 8, 19,583 (7%) children exited to guardianship between 2007-2017

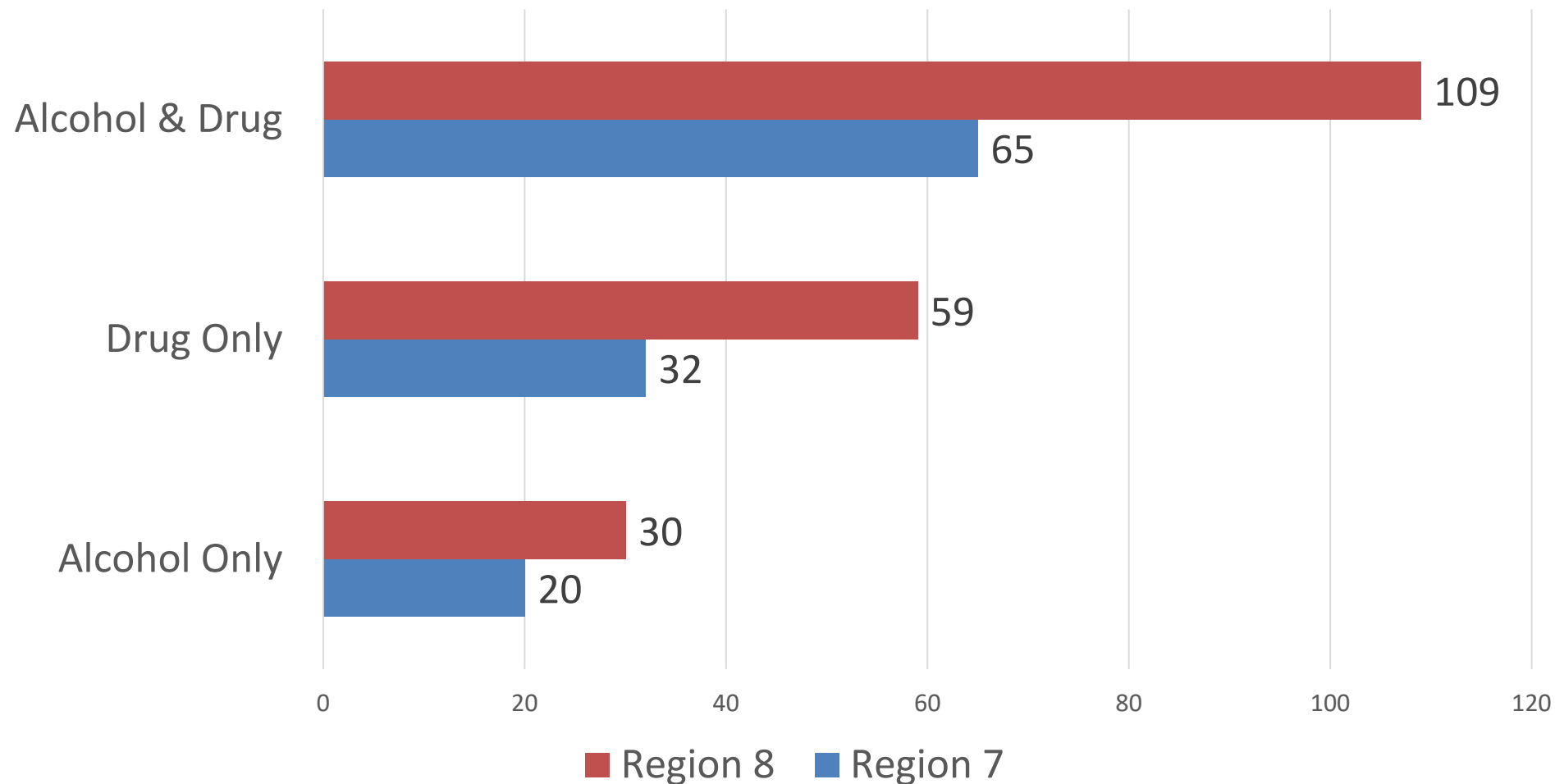


# Regions 7 & 8: Permanence for AOD Removals



# Regions 7 & 8: Time to Permanence for AOD Removals

Avg. Time in Care vs. to No AOD



# Factors Impacting Adoption in Region 7

Analyzed 112,574 children in Region 7 where 14% exited to adoption.

## Adoption less likely if:

- Children over age 3 (60% to 96% less likely)
- American Indian children (68% less likely)
- Black children (18% less likely)
- Multi-race children (23% less likely)
- N diagnosed disabilities (9% less likely)

**Any type of disability  
(physical or behavioral)**

## Adoption more likely if:

- Substance removal (12% to 80% more likely)
- Receipt of benefits (19% more likely)
- Prior foster care (16% more likely)

# Factors Impacting Adoption in Region 8

Analyzed 159,076 children in Region 8 where 17% exited to adoption.

## Adoption less likely if:

- Children over age 3 (60% to 94% less likely)
- American Indian children (42% less likely)
- Black children (18% less likely)
- Multi-race children (6% less likely)

## Adoption more likely if:

- Substance removal (21% to 23% more likely)
- Receipt of more benefits (12% more likely)
- Prior foster care (10% more likely)

# Factors Impacting Guardianship in Region 7

Analyzed 112,574 children in Region 7 where 6% exited to guardianship.

## Guardianship less likely if:

- Children under age 3 (37% less likely)
- Children over age 12 (63% less likely)
- Black children (26% less likely)
- Multi-race children (16% less likely)
- Receipt of benefits (5% less likely)
- Prior foster care (9% less likely)

**Receipt of benefits is a proxy  
for low-income status**

## Guardianship more likely if:

- Substance removal (54% to 78% more likely)
- American Indian children (8% more likely)
- Diagnosed disability (12% more likely)

# Factors Impacting Guardianship in Region 8

Analyzed 159,076 children in Region 8 where 8% exited to guardianship.

## Guardianship less likely if:

- Child under age 3 (35% less likely)
- Child over age 12 (18% less likely)
- Black children (27% less likely)
- Multi-race children (31% less likely)
- Receipt of benefits (50% less likely)

## Guardianship more likely if:

- Substance removal (46% to 70% more likely)
- American Indian children (61% more likely)
- Diagnosed disability (54% more likely)

# Increasing Adoption



- Prenatal substance exposure is a primary factor in drug-related foster care involvement
- Interventions to educate potential adoptive parents on addiction, recovery, and parenting strategies for children with PSE increases potential adoptive parents' willingness to adopt (Edelstein et al., 2016)

# Increasing Adoption

- Disabilities may be more common among children with drug removals
- Child disability may also interfere with adoption
- Adoption disruption among children with disabilities up to 20% (Lightburn & Pine, 1996)
- To avoid disruption, families adopting children with special needs require **financial support**, community services (most often **medical** or **educational**), **information about their child's history**, and collaboration with **helping professionals** (Lightburn & Pine, 1996)

# Increasing Guardianship



- Family and social networks often at similar SES levels
- May result in a lack of family members with sufficient economic supports to serve as legal guardians
- Work with potential guardians to secure community, state & federal economic supports

# Increasing Guardianship

- Social networks influence drug use (Bierut et al., 2008)
- May result in a lack of available family guardians who are not drug users as well
- Expanding search for legal guardians beyond intimate family members



# You Can Make a Difference

I'm grateful of the people I have in my life now. I'm grateful to [my treatment provider in the family drug court], because she's real patient and ***she's probably one of the only people that never gave up on me....*** You know, I never made a class. I never made a UA and you know, I watched them kick people out for not engaging and she never kicked me out. You know, and I only ever met the woman one time. But there was something that she was like, I made the courts, but I wouldn't make the classes. I wouldn't do what I needed to do. But I'm really grateful to her because she, ***in a lot of ways she probably saved my life before I would have saved my own.***

- Mom in recovery from meth on her way to reunification

# Thank you!

## Email me anytime!

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