

New England Addiction Technology Transfer Center
Brown University
School of Public Health



New England (HHS Region 1)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

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Disclosures

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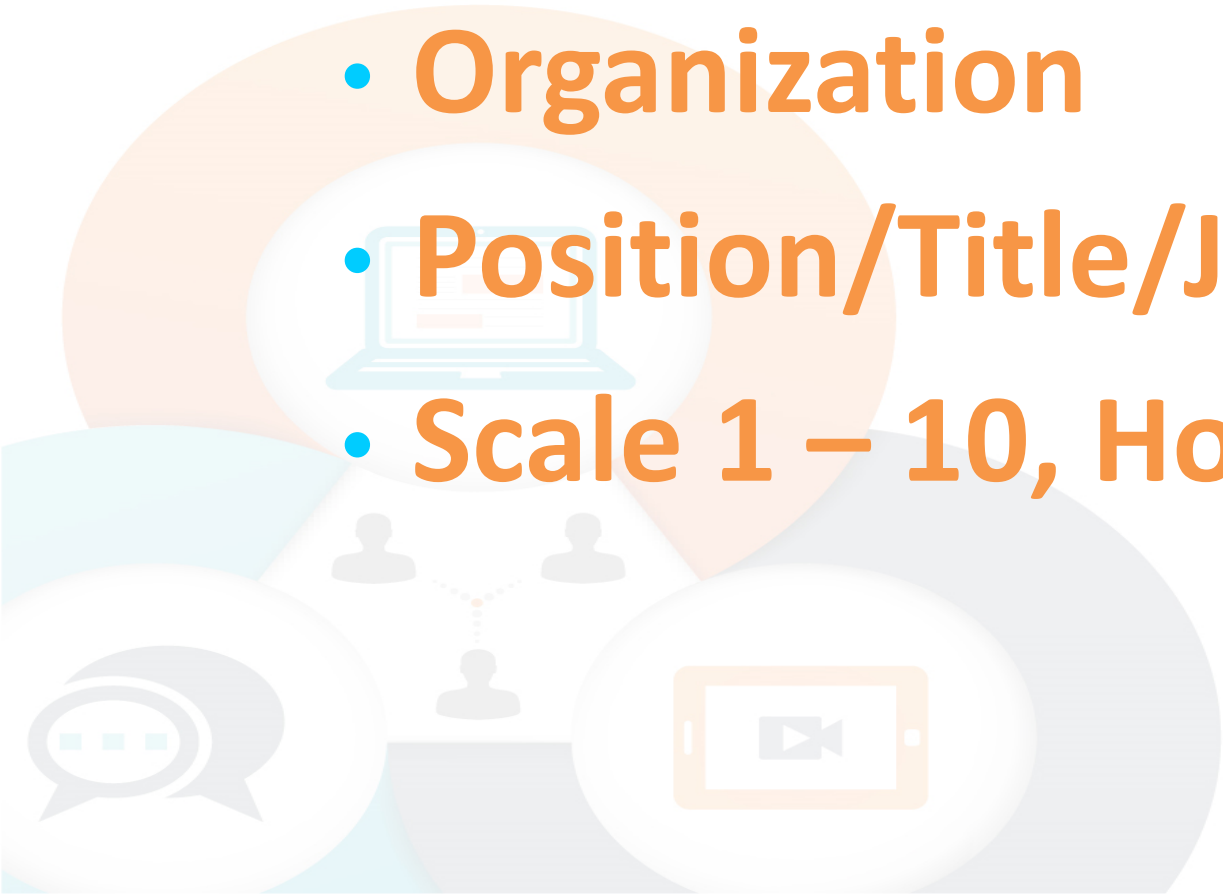
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Training Goals

- **Improve awareness of and receptivity to using Technology-Assisted Care (TAC) for the treatment of Substance Use Disorders (SUDs)**
- **Identify effective TAC interventions for SUDs**
- **Demonstrate exemplary TAC interventions**
- **Identify strategies/approaches for adoption and integration of TAC into routine clinical practice**
- **Explore implementation and integration challenges (e.g., cost, reimbursement, security)**

Introductions

- **Name**
- **Organization**
- **Position/Title/Job Responsibility**
- **Scale 1 – 10, How tech SMART?**



Have you ever ...

- **Booked travel arrangements online**
- **Purchased an item costing more than \$100 online**
- **Checked bank account information or moved money between accounts online**
- **Applied for a credit card online**
- **Signed up for insurance online**
- **Signed up for telephone, cable services, or utilities online**
- **Paid a bill online**
- **Owned a Kindle or iPad**
- **Owned access to an electronic book to read on your computer**
- **Purchased audio files (e.g., music, books) online**
- **Purchased/rented video media (e.g., movies, TV shows) online**
- **Owned a cell phone with a digital camera or smart phone with Internet access**
- **Owned a robotic cleaning device (e.g., Roomba)**
- **Filed your taxes online**
- **Used a bank that was online only (i.e., one with no physical structure)**
- **Owned or interested in owning a vehicle with voice activation technology for cell phone use and/or interfacing with stereo or comfort control systems**

Technology Adoption

- Adoption Research is concerned with identifying the factors that influence user acceptance of technological innovations



(Van Slyke et al., 2004; Corneille et al., 2014)

Contributing Factors towards Technology Adoption

(1) Optimism - How beneficial will this new technology be once I start using it?

(2) Proficiency - How difficult will it be for me to learn to use it properly?

(Van Slyke et al., 2004; Corneille et al., 2014)

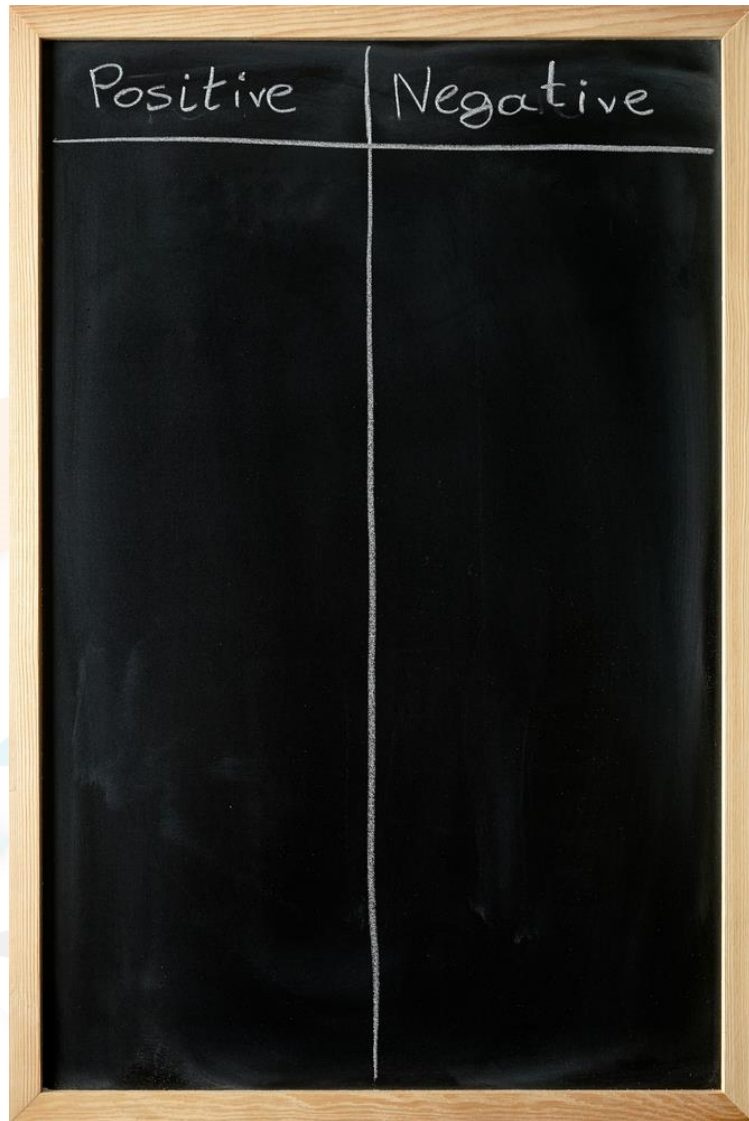
Inhibiting Factors towards Technology Adoption

(1) Dependence - How individuals might feel enslaved by technology


(2) Vulnerability - How technology may increase the chances of being victimized

OR

distrust of technology and its ability to work properly/function as intended



Any of these positive and negative factors may influence consumers' expectations of how much benefit (if any) they will gain from technology use, and thus their propensity to adopt new technologies.

A man in a light blue shirt, dark vest, and patterned tie stands with his arms outstretched in a questioning gesture. A grey speech bubble with a black outline is positioned to his right, containing the text "So, what's your point?". The background is a solid reddish-orange color. On the left side of the image, there are decorative elements: a large, semi-transparent orange circle and a smaller, semi-transparent light blue circle, both partially overlapping a white vertical bar. In the bottom left corner of the white bar, there is a small, semi-transparent icon of a speech bubble with three horizontal lines inside.

**So, what's
your point?**

This training is designed to introduce participants to two validated TAC interventions **in order to**

help participants understand the benefits, ease of use and clinical application to enhance treatment services



AND to be aware of the positive and negative factors that impact adoption



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Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4737)



National Institute
on Drug Abuse



blending initiative
NIDA • SAMHSA



Technology-Assisted Care for Substance Use Disorders

Module 1

Technology & Everyday Life



SUDtech.org

Technology use has invaded our lives





87% of Americans
use the Internet

(Fox & Rainie, Pew Report, 2014)



91% of American adults
have cell phones



58% have smart phones

(Pew Report, 2014)

No matter a person's salary... more people own cell phones than use the internet

(Fox, 2013)



29% of Americans own a tablet

The average American owns four technology devices

(Digital Consumer Report, 2013)



The internet as diagnostic tool...



1

59% of U.S. adults have looked online for health information in the past year.



2

35% of U.S. adults say they have used the internet to try to figure out what medical condition they or another may have. We call them "**online diagnosers.**"



3

53% of online diagnosers talked with a clinician about what they found online.



4

41% of online diagnosers had their condition confirmed by a clinician.



"I can recommend any number of medications,
but, no, there's no app for that."

Technology in the Workplace



Activity #1

Break into small groups:

Thinking of the technological innovations that you have used at work, please identify the ways in which these various tools have:

- **Facilitated your work/introduced efficiencies?**
- **Impeded your work/created challenges?**



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blending initiative
NIDA + SAMHSA



Technology-Assisted Care for Substance Use Disorders

Module 2

Technology & Treatment



SUDtech.org



**NIDA
SAMHSA
Blending
Initiative**

PURPOSE: This blending product will introduce two **Technology Assisted Care (TAC) interventions** that have demonstrated utility as an adjunct to treatment services in specialty drug treatments programs. Historically, TACs have been used in general health care settings to treat other chronic medical conditions (e.g., diabetes, heart disease, asthma, etc.)

Blending Team Members

SAMHSA CSAT-ATTC

Traci Rieckmann, Ph.D. – Northwest ATTC

Michael Chapple, Ph.D. – Northeast & Caribbean ATTC

Richard Spence, Ph.D. – South Southwest ATTC

Nancy Roget, M.S. – National Frontier and Rural ATTC

Michael Wilhelm – National Frontier and Rural ATTC

Paul Warren, LMSW – Northeast & Caribbean ATTC

Phillip Orrick – South Southwest ATTC

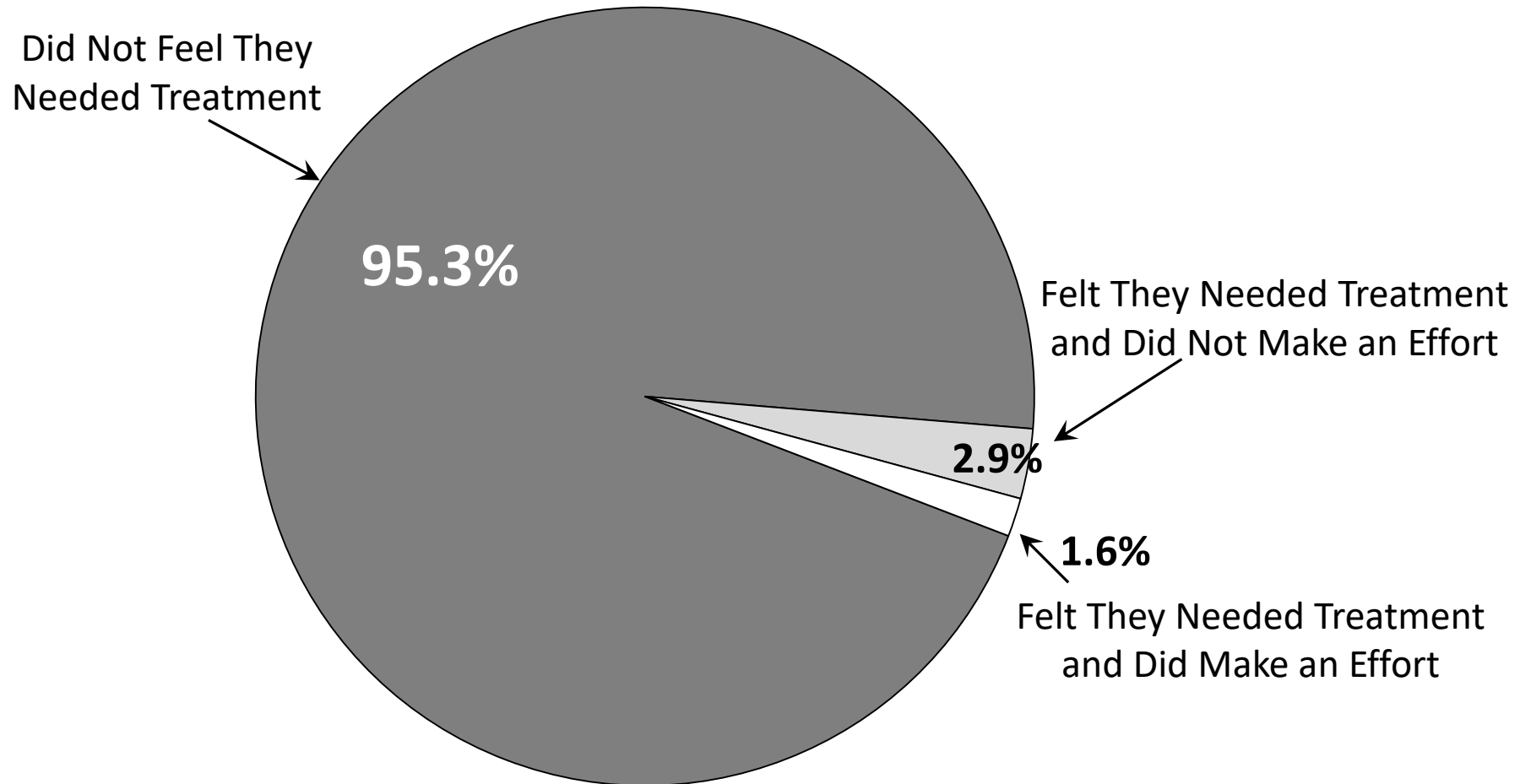
NIDA

**Edward Nunes, Ph.D. – Columbia University/NY State
Psychiatric Institute**

**Aimee Campbell, Ph.D. – Columbia University/NY State
Psychiatric Institute**

Gloria Miele, Ph.D. – Columbia University

In 2013, 22.7 million people aged 12 or older met the criteria for substance use disorders



20.2 million people needed but did not receive treatment for illicit drug or alcohol use

(NSDUH, 2011)

Common Beliefs among Users

- **treatment is only for “alcoholics” or “addicts”**
- **treatment is too expensive, I can’t afford it**
- **treatment doesn’t work (for me)**
- **treatment would be detrimental to my career**
- **this problem isn’t serious enough for treatment**
- **can handle this problem on my own**
- **like to drink/use drugs too much to quit**
- **treatment will be physically (i.e., withdrawals) and psychologically uncomfortable (i.e., traumatic)**
- **be embarrassed if others knew I had a problem**

Client Barriers to Accessing Treatment



- **Transportation**
- **Time away from home**
- **Child care**
- **Employment**
- **Lack of available services**
- **Stigma/confidentiality**
- **Other client barriers?**

Program Barriers to Delivering Care

- **Large caseloads**
- **Administration of EBPs with fidelity**
- **Lack of standardized practice in service delivery**
- **Limited resources (time/money)**
- **Limitations regarding clinical skill sets**
- **Burden of training/supervision**
- **Complex cases with multiple needs**
- **Other program barriers?**



What do we know about the use of technology among our clients?

- **Survey of 8 urban drug treatment clinics in Baltimore (266 patients)**
- **Clients had access to**
 - **Mobile Phone (91%)**
 - **Text Messaging (79%)**
 - **Internet/Email/Computer (39 - 45%)**

Another study found that 95% of teens receiving treatment at emergency rooms had access to mobile phones and participated in text messaging.



Text message-based behavioral interventions were shown to be acceptable, valid and reliable with teens on a variety of sensitive topics. (Ranney et al., 2012)