

TREATMENT AND RECOVERY

Emerging adults in Missouri between the ages of 18-25 with a **diagnosable SUD** **doubled** (14% to 28%) from 2019 to 2021, and those needing but not receiving treatment for it increased from 14% to 26%.⁵⁶ Knowing where to start for **substance use** treatment can be difficult without a **guiding star**. Common questions could center on:



What care looks like

How long will the emerging adult be at a residential rehabilitation (“rehab”) facility? Will they get to see their friends/family? Will they be put on medication to safely withdrawal?

While this varies person-to-person and substance(s) used, here are some common treatment options (from highest to lowest intensity):

Residential Treatment

A facility licensed under state laws to provide intensive **SUD** services, especially for individuals in need of **medication monitoring** for **safe withdrawal management**. Residential treatment often involves group therapy, individual therapy, and other activities to help an **emerging adult** become sober and learn methods to be successful in life-long recovery. Depending on a person’s need and the facility’s policies, an **emerging adult** can be medically and socially monitored and will stay anywhere from **two weeks to six months**. There are also specialized programs for women and children.^{57,58}

Intensive Outpatient (IOP) Rehabilitation

A form of **SUD** rehabilitation in which people visit a treatment center several days a week for a few hours at a time. An IOP is more **time-intensive** than most standard outpatient programs. However, unlike an inpatient program, it does **not** require participants to **live at the facility**.

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Outpatient Rehabilitation

A **non-residential**, therapy-based type of treatment for addiction. Outpatient centers for addiction usually include group and individual counseling and behavioral treatments for an array of conditions (mental health included). The **emerging adult lives at home** and attends outpatient regularly. Therapies can include talk therapy, but may also include art, nature, or music-based therapies.

Support Groups

A **gathering of people** facing common issues to share what is troubling them. Through sharing experiences, they can offer support, encouragement, and comfort to the other group members and receive the same in return. There are support groups for specific populations, such as parents/caregivers, teens, young adults, or siblings of people experiencing **SUD**.

Peer Support

One-on-one support from someone else who has lived experience with a **substance use** addiction and is in recovery. See **PEER SUPPORT** chapter for more details.

Aftercare

Ongoing or **follow-up treatment** for **SUD** that happens after an initial rehabilitation program. The goals of aftercare are to **maintain recovery** from **substance misuse**, find ways to prevent relapse, and to help the person create a life filled with rewarding relationships and happiness.

COMMON MEDICATIONS

Medical treatment for **SUD**, commonly referred to as **Medication-assisted treatment (MAT)**, is the use of medications in combination with counseling and behavioral therapy. MAT is often effective in the treatment of opioid use disorders (OUD) and/or alcohol use disorder (AUD), and can help some people to sustain recovery. Some of these medications are only approved for use for individuals **18 and older**.

Buprenorphine (byoo-pruh-nor-feen)

Also referred to as "Bupe," this is a drug used to help treat **OUD**. Buprenorphine works by helping to stop drug cravings, blocking withdrawal symptoms, and blocking the effects of other opioids a person might try to use to get high.

Naloxone/Narcan (nuh-laak-sown)/(naar-kan)

A medicine that **rapidly reverses an opioid overdose**. It attaches to opioid receptors and reverses and blocks the effects of other opioids. Naloxone (aka Narcan) can quickly restore normal breathing to a person if their breathing has slowed or stopped because of an opioid overdose. **Naloxone is available at pharmacies and is good to have around, just in case.**

Suboxone (suh-baak-sown)

Contains a combination of buprenorphine and naloxone. Buprenorphine is an **opioid medication**, sometimes called a narcotic. Naloxone blocks the effects of opioid medication, including pain relief or feelings of well-being that can lead to opioid misuse. The two medications are combined to make suboxone, which is **used long-term for maintenance treatment of opioid dependence**.

Vivitrol (vi-vuh-trowl)

A **long-acting injectable** form of naltrexone, which is a medication used to treat two substance use disorders - **OUD** and **AUD**. Vivitrol is used as part of a treatment program and helps prevent people who use alcohol or opiates due to a **SUD**. Vivitrol blocks the 'high' that alcohol and opioids cause.

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Cost

How much will care cost? Will they accept the **emerging adult's** or parents/caregivers health insurance?

When in doubt, start with finding a behavioral health non-profit such as a Certified Community Behavioral Health Clinic (CCBHC), Community Mental Health Center (CMHC), or a Federally Qualified Health Center (FQHC). These can be great starting points to help a person determine treatment and support options available, and can be low-cost and/or sliding-fee-scale. For inpatient treatment centers, though it does vary person-to-person, there are three main types of SUD treatment facilities:

- **State-funded or government-funded agencies** and rehab facilities receive money from the state to provide addiction treatment services to people who need them. The state's money to fund these programs comes from various sources, including federal grants, Medicaid reimbursement, and the state budget. The cost of some services is fully covered by the state; other services may require a sliding scale fee based on your income.
- **Private pay drug treatment** is exactly what it sounds like: you or your family pays the full amount for care without any assistance from insurance. Rates for private treatment can be quite costly.
- Many recovery centers also accept **private insurance**. If the **emerging adult** is covered by insurance, it is best to start by contacting your insurance provider to find out what services it covers and what resources are available in your network.



Location

Will the **emerging adult** have to travel across the state or country for treatment?

This will depend on a number of factors like where someone lives, their preferences for treatment, and their needs. However, there is usually a breadth of options to meet people "where they are," meaning a good treatment provider should ask patient preference and try and work with the emerging adult. There are even treatment providers that offer in-home care, telehealth, or offer to meet an **emerging adult** at their choice of location.

COMMON TERMS

The world of **SUD treatment** introduces new terminology and concepts. The following are words or phrases you can share with an **emerging adult** and their family/friends to help address any questions:

Behavioral Health

Refers to mental health and substance use disorders, life stressors, and stress-related physical symptoms. **Behavioral health care** refers to the prevention, diagnosis, and treatment of those conditions.

Dual Diagnosis or Co-Occurring

Let the **emerging adult** know that they may hear a medical provider or therapist say a person has a dual diagnosis or co-occurring disorders. These are terms for when **someone experiences a mental illness and a SUD at the same time**. About 60% of adolescents in a **SUD** treatment program also meet diagnostic criteria for a mental illness.⁵⁹

Recovery

The process in which people improve their health and wellness, live self-directed lives, and strive to reach their full potential. Being in recovery is when those **positive changes** and **values become part of a person's life** and includes handling negative feelings without using **substances**.

Medically Supervised Withdrawal

Another way of saying withdrawal management. Medically supervised withdrawal is the process of taking a person off a **substance** to which they are physically addicted. The process can be fast or slow and done under various levels of care and supervision. Withdrawal management works differently for everyone. When supervised by a physician, **medications are available** to help make this process both safer and more comfortable.