



## Substance Use Treatment and Recovery Resources

[Help Guide](#)

FirstLink

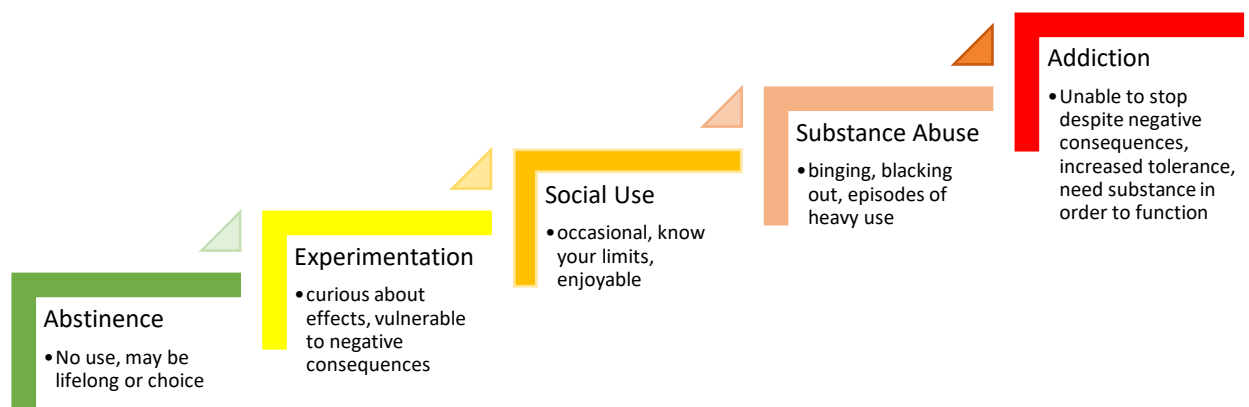
<https://myfirstlink.org>

Dial 2-1-1 or (701) 235-7335 (SEEK)

# Substance Abuse Help Guide

## What is Substance Abuse?

Both legal and illegal substances have chemicals that affect the mind and body. Substance abuse is the misuse of alcohol, prescription or OTC medicines, inhalants or other legal or illegal drugs. When you first start using any substance, you may be able to control how much you use. Over time, some people use drugs or alcohol compulsively and become dependent on them. Someone is considered addicted or physically dependent on a substance when they feel a strong urge to continue despite harm or negative personal or social consequences of their use.



adapted from continuum of use defined by Stanford Office of Alcohol Policy & Education

## Warning Signs of a Substance Use Problem

Signs may be obvious, such as changes in appearance and speech, or finding drug paraphernalia. Other signs may be subtler and noticed gradually over time. It's important not to jump to conclusions, but to ask if you notice any of the following:

- Changes in sleep and appetite
- Abrupt, intense changes in mood
- Losing interest in social, occupational or recreational activities
- More time and money spent finding, using and recovering from the substance

- Cycling through relationships, or change in preference to spend more time alone or with others who use
- Absent or late for school or work
- Putting out lower quality work or making more mistakes, increased work-related injuries
- Irritable with family and friends, classmates or co-workers
- Lying, Stealing, hiding, avoiding

## Risk Factors for Overdose

*Overdose may be intentional or accidental, but whether the substance abused is alcohol, street drugs or prescription medication, the potential for overdose is real.*

- Increase in the amount used at one time
- Intravenous drug use
- Prior history of suicide attempts
- A previous overdose
- Resuming use of a drug after a period of abstinence
- Combining multiple substances, including alcohol

## Signs of Overdose

*Depending on what a person has taken, symptoms of overdose vary, and if a person is under the influence of a drug, they may not be aware they are experiencing an overdose.*

- Slow or shallow breathing
- Constricted or “pinpoint” pupils
- Extreme agitation
- Psychosis
- Profound drowsiness or loss of consciousness
- Choking or gurgling sounds
- Pale, cold or clammy skin
- Vomiting

## What to Do if You or Someone You’re with Has Overdosed

*Some people may be reluctant to seek help for fear of legal consequences. The Good Samaritan Law was passed to encourage people to call 911 in the event of an overdose. Read more about how the law works in [North Dakota](#) and in [Minnesota](#).*

**Additional tips for dealing with an overdose:**

- Do not put your safety at risk.
- Try to keep the person awake by asking them questions.
- Do not allow the person to take more of the substance.
- Try to keep yourself calm, and assure the person that help is coming.
- Lay the person on their side to prevent choking.

- If the person is unconscious, administer naloxone if available, or follow 911 operator's directions for first aid and CPR.

## When to Seek Help for a Drug or Alcohol Problem

*If you think you or someone you love has a substance use problem, please know that you are not alone. If you are not sure when to seek help, here are some questions to ask yourself:*

- Do you worry about how much you or your loved one uses alcohol or drugs?
- Do you lie or make excuses for yourself or your loved one's behavior?
- Have you hurt or embarrassed yourself or others when you are using?
- Are you having financial problems because of how much money you or your loved one spends on drugs and alcohol?
- Do you worry that you/they will hurt someone, or have you considered calling the police because of their behavior while under the influence?
- Do you feel hopeless, resentful, your life is meaningless, or want to die?

## Why Won't They Just Get Help?

*Over 22 million Americans struggle with a substance-related problem, but less than 20% of people seek treatment. Recovery doesn't look the same for everyone, and there are many resources for people who want to change how they use substances.*

*I've tried treatment and it didn't work.* – Recovery is ongoing, and it doesn't end after you leave treatment. Some people may return to use even after years of abstinence. You may need to try a different approach or return to treatment to strengthen your recovery skills.

*I can't afford treatment.* – Many states, including Minnesota and North Dakota, have funding to help pay for treatment. For information about the Minnesota SUD process and reform, click [here](#). For information about North Dakota, view the [SUD voucher brochure](#).

*They won't get help until they've hit rock bottom.* – Not only is this not true, it's a dangerous belief to hold. Waiting until a person hits rock bottom could mean death or permanent damage. And you may be surprised to know that people forced into treatment have about the same rates of recovery as people who go voluntarily. The earlier you can get help, the better your chances for recovery.

*The only way they'll get clean is if they go inpatient.* – It's true that getting sober is hard, and if you are withdrawing from a substance, you may need medication and monitoring to keep you safe for a short time after you stop using. However, there are a wide range of options for recovery support and treatment that can help someone stay free from drugs and alcohol.

*I'll lose my job if I go to treatment.* – Even if you've been trying to hide it, it's likely your boss suspects something, and your job may be at risk if you continue to use. If you decide to talk to your boss, you may be surprised to find that they are supportive. Your benefit package may even include an Employee Assistance Program (EAP) that covers some or all the cost for counseling or other services. Ultimately, what you choose to tell your employer is up to you, and

a qualified provider will work with you to find a program that fits your needs and maintains your right to privacy.

*I don't want to quit using completely, so there is no point to getting help.* – Some people may be able to learn skills to manage their use safely and reduce harmful consequences. Even if you don't want to quit completely, you can still seek information and non-judgmental support. Also, continued abuse of drugs and alcohol affect our thoughts, emotions, motivation and overall health, so any step to cut back or quit is progress in recovery!

*How do I support my loved one without enabling them?* Anyone who has dealt indirectly with addiction has known the weight of guilt and worry when it comes to helping your loved one. You can be supportive without enabling your loved one by learning skills for communication and setting limits. For more information, check out [this fact sheet](#) or dial 211 for support and resources in your community.

## What is Harm Reduction?

Harm Reduction is a public health approach to reducing the harmful consequences associated with substance use. It recognizes that abstinence only approaches exclude a significant number of people who wish to improve their health by reducing use and practicing safe use.

- Recognizes that the drug users themselves are the primary agents in reducing the harms of their drug use.
- Does not minimize or ignore the real harms associated with substance use, yet it also recognizes the realities that some drugs and methods of use are more harmful than others.
- Provides opportunity for education, healthcare, support and resources in a non-judgmental, non-coercive manner.
- Acknowledges biological and social factors such as race, abuse and homelessness that impact both vulnerability to and capacity for recovery related to substance use.
- Seeks to implement interventions and policies that improve health, social and economic outcomes for everyone, because everyone is impacted adversely one way or another by illicit and licit drug use.

## Where to Start if You Want Help

*Deciding to ask for help is the first, sometimes most difficult step. Recent data shows less than 20% of people who qualify for a substance use disorder get the help they need. Recovery is possible, and there are many pathways to treatment and recovery.*

- Dial 211 or call FirstLink at (701) 235-7335 for 24-hour listening and support. For youth and adults in Cass and Clay Counties, the Community Navigator is available to assist people in finding resources that fit their needs and goals for recovery.
- Talk with your doctor, pastor, significant other or other trusted friend or family member
- For youth, talking to a parent or guardian is an important first step. If you don't have a good relationship with your parents, go to another trusted adult, such as a teacher, school counselor, other family members, youth leader, or coach. If you're not sure who will listen, dial 211 and

Speak with a trained call specialist, they can listen and may be able to help you find ways to talk with a trusted adult and get help.

- If you love someone with a substance use problem, you may experience a myriad of emotions including anger, fear, guilt, helplessness. You can find support and educate yourself on how best to help your loved one by dialing 2-1-1 or (701) 235-7335.

## Pathways to Recovery

There are many ways people might try to quit, reduce or safely manage their drug or alcohol use. Depending on what type of substance, how much is used, and the way it is used, self-management or non-clinical paths may not be adequate and **may even be dangerous**. If you have questions or concerns, it is best to speak with a doctor or substance use professional.

Clinical Pathways	Non-Clinical Pathways	Self-Management Pathways
<ul style="list-style-type: none"><li>• Withdrawal Management/detoxification</li><li>• Behavioral Therapies</li><li>• Integrated Dual Disorder Treatment</li><li>• Matrix Model</li><li>• Medication Assisted Treatment</li><li>• Outpatient Programs (range from low intensity to partial hospitalization programs)</li><li>• Residential Treatment</li><li>• Recovery Housing</li></ul>	<ul style="list-style-type: none"><li>• Faith-based</li><li>• Justice-Involved (enforced abstinence)</li><li>• Recovery Community Organizations</li><li>• Sober Living Homes</li><li>• Peer Support Services (Recovery coaching, Twelve-step or mutual aid programs like SMART and Refuge Recovery)</li><li>• Online Support Groups</li></ul>	<ul style="list-style-type: none"><li>• Self-detox / tapering</li><li>• Natural Recovery – replacing substance use with healthy lifestyle choices</li><li>• Avoiding people, places, and events where use is triggered</li><li>• Personal awareness – knowing warning signs and triggers, use of healthy coping strategies and refusal skills to manage stress to abstain or use responsibly</li></ul>

## Substance Use Glossary of Terms and Abbreviations

LAC, LADC, SATP, SUD, ASAM... what does it all mean? Here are some common questions and terminology that can be confusing when you're trying to figure out what kind of help is available.

- **Addiction Counselors** - Providers of alcohol and drug abuse treatment may have different credentials, depending on their formal education and state where they are licensed to practice. For example, an addiction counselor in Minnesota is known as Licensed Alcohol and Drug Counselor (LADC), whereas in North Dakota, counselors trained in addiction are certified as Licensed Addiction Counselors (LAC).
- **Addiction Specialists** – Addiction medicine physicians and addiction psychiatrists who hold subspecialty board certification. Addiction specialists have extensive knowledge and training to recognize, intervene and treat addiction and the physical complications that go along with it (ASAM, 2018).

- American Society of Addiction Medicine (ASAM) – A professional society for addiction specialists. The ASAM developed a comprehensive guideline for evaluating patients with addiction and co-occurring conditions.
- Behavioral Health – The field of healthcare that is concerned with how physical and mental health affect and are affected by each other. It includes Intellectual disabilities, psychological disorders, substance use, and trauma.
- Comorbidity – Describes two or more illnesses (physical or mental) that occur in the same person and the interaction between the illnesses. They may occur at the same time or one after another. When experienced at the same time, this is referred to as co-occurring disorders.
- Detox – Short for detoxification, this is the process your body goes through to clear the influence of substances. Formal detox programs, also known as withdrawal management units (WMU), may use a non-medical or “social” model or a medically supervised model.
- Dual Diagnosis - When someone experiences mental illness and a substance use disorder at the same time. May also be referred to as dual disorders or co-occurring disorders.
- Evaluation vs. Assessment – these terms are sometimes used interchangeably and refer to an interview or screening conducted by a medical provider, counselor or addiction specialist that helps determine the severity of the problem and recommend appropriate treatment options.
- Level of Care (LOC) – refers to the setting in which treatment is provided and intensity of program, outpatient or residential.
- Medication Assisted Treatment (MAT) – involves the use of FDA-approved medication in conjunction with counseling to treat substance use disorders. MAT may be used to treat Opioid addiction, alcohol use disorder or for smoking.
- Recovery – [NIDA](#) defines recovery as a process through which individuals improve their health and wellness, lead self-directed lives, and strive to reach their full potential. You may hear programs describe themselves as recovery-oriented. These programs offer a dynamic range of services that include long-term recovery management, emotional and practical support.
- Substance Use Disorder (SUD) – This is the clinical term used to describes substance-related problems, including abuse and addiction.

Sources:

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