

IDENTIFYING HIGH RISK BEHAVIORS

Objective:

To help front-line workers conduct short screenings to find indicators of possible substance misuse or abuse, mental health issues, or domestic violence in families.

Intended Use:

- These tools are meant to be used to get a quick idea of the possible presence of substance abuse, family violence or mental health difficulties in a family.
- If the indicators are strong, the tools should also be used to help the worker and family develop an immediate response of safety or referral for a more thorough assessment.

Audience:

- Leadership: Understand trends among families served to assist in building partnerships needed to provide support
- Managers: To provide line staff with concrete tools to assess presence of high risk behaviors
- Family Workers: For use when high risk behaviors are suspected

Outcome:

- Enhance staff's ability to identify and act upon high risk behaviors in a timely manner.
- Identify families in need of on-going support

Context:

There are many barriers that make it difficult to discuss high risk behaviors. Fear, denial and shame all play a part. Simple assessment tools offer concrete ways for front line workers to address these issues in a structured and less threatening way.

Many front line workers who are not trained to address high risk behaviors sometimes find themselves in situations where they have a suspicion that alcohol or drug abuse, family violence or mental health issues exist in a family with whom they are working. The following tools are designed to assist workers identify signs and symptoms, and provide simple questions which can help determine appropriate next steps.

Tips

- Provide training and support to line workers before asking them to utilize these tools
- Front line workers shouldn't try to solve these issues themselves—organizations need to build supervisory practices to support them in making informed choices about next steps

The Process

The screening tools may be used in a variety of situations, including during an initial screening, a more formal family assessment, or when you have indicators of problems. It is not recommended to use the tools during a recruitment meeting, without obvious indicators of the presence of high risk behaviors. Some programs use these tools before a formal assessment and plan development to get a head start on providing supportive services to families in need.

The tools are best used informally. An experienced worker may not need the tool with her during a family discussion, as she knows the questions to ask and the behaviors to look for. Less experienced workers may prefer, with the family's consent, to use the tool as a discussion guide.

The worker and supervisor should use the information from the tools to begin developing next steps with a family. When there are obvious indicators, a counseling or treatment partner is a valuable member of the team to help develop strategies for follow-up. Local domestic violence and law enforcement agencies will also have protocols which should be followed should family violence be identified.

IDENTIFYING SUBSTANCE ABUSE

Physical signs and symptoms of substance abuse will vary depending upon the drug being used, but there are common indicators you may encounter. Keep in mind that physical illness and other mental health problems may produce some of the same indicators or occur along with a substance abuse problem. Not all of the signs will be present and may not be obvious in some cases.

1. Secrecy or avoiding contact; difficult to engage; not answering the door when home
2. Missed appointments or absenteeism from work or school
3. Decline in work performance or in children's school performance
4. Messy or disorganized home environment
5. Legal difficulties
6. Changed behaviors with regard to socializing, childcare, or schedules (e.g., frequently sleeping in)
7. Complaints from neighbors or housing authorities about parties, excessive noise
8. Increased isolation from family and friends
9. Mood swings; outbursts of anger, paranoia, or defensiveness
10. Financial difficulties not otherwise explained
11. Evidence of accidents, falls, or frequent illness, especially sinus problems
12. Physical evidence of alcohol or drug use (empty bottles, drug paraphernalia such as syringes, cigarette rolling paper, pipes, "bongs", etc.)
13. Change in sleep patterns, appetite, or mood
14. Dilated or constricted pupils; lapses of concentration; lethargy or excessive drowsiness ("nodding off"); slurred speech (alcohol or depressants); excessive excitability or rapid speech (stimulants); memory lapses or "blackouts", i.e., not being able to remember all or part of an evening when intoxicated (alcohol)
15. Care-taking behavior by children in the home (e.g., with parents, younger siblings, household chores, etc.)

Asking the right questions:

Questions about substance use are part of any family assessment and should be asked in a routine manner. If family members are willing to respond, basic questions could include:

- What substances are being used?
- How recently, how much, and how often are the substances used?
- What happens when the person uses? Are there negative consequences? Does the person feel guilt or remorse?
- Why does the person say they use the substance? (Using to deal with negative feelings or situations tends to be higher risk.)
- Has the person ever thought they had a problem with alcohol or other drugs?
- Has the individual ever stopped using or tried to stop using? If so, why?

IDENTIFYING FAMILY VIOLENCE

SIGNS TO LOOK FOR—ADULT TO ADULT VIOLENCE

1. A woman tells you her partner always puts her down in public
2. The woman becomes quiet when her partner is nearby
3. The partner sits in on home visits and appears to be controlling when or about what information is shared
4. The woman seems afraid to make her partner angry
5. The partner controls the family finances as well as the coming and going of the woman (e.g., she has to ask permission to attend a school function)
6. She regularly cancels plans at the last minute
7. You see the partner violently losing his temper
8. The woman does not seem to know what she wants or how she feels
9. The woman has injuries with unlikely excuses for their cause
10. There are absences from work and school
11. The woman stops seeing her friends and extended family and becomes more isolated
12. The woman laughs off her partner's violent temper or behavior
13. She frequently blames herself for things that go wrong in the home
14. There is aggressive behavior (e.g., hitting, yelling, etc.) or care-taking by the children in the home

SIGNS TO LOOK FOR—CHILD ABUSE AND NEGLECT

1. Past problems with abusive or neglectful behavior toward children
2. Problems with substance abuse that have been going on for a while or that appear serious
3. Past and present problems with violence between adults, between adults and teenagers or between children
4. Family has been without reliable supportive extended family and friends for a long time
5. Anger problems or impulse control problems
6. Depression or other psychiatric problems that they have had for a long time if they are not getting the help they need
7. Parents who are not warm or nurturing to their children, criticize their children a lot or discipline them harshly
8. An increased incidence of neglect or evidence that the parents really do not understand the basic needs of their children

IDENTIFYING MENTAL HEALTH ISSUES

SIGNS TO LOOK FOR—GENERAL MENTAL HEALTH

Many of the general indicators from the substance abuse section apply here as well. Keep in mind that there may be cultural and gender differences in the way mental disorders are described and experienced. For example, some people may focus more on physical complaints (e.g. fatigue or aches and pains) than on emotional concerns.

1. Secrecy or avoiding contact; difficult to engage; not answering the door when home
2. Missed appointments or absenteeism from work or school
3. Decline in work performance or in children's school performance
4. Messy or disorganized home environment
5. Poor personal hygiene
6. Changed behaviors with regard to socializing, childcare, or schedules (e.g. frequently sleeping in)
7. Increased isolation from family and friends
8. Mood swings; excessively elevated mood; pervasive sadness; irritability; paranoia; confusion; defensiveness
9. Change in sleep patterns, appetite or mood
10. Increased fatigue, worry or anxious feelings
11. Care-taking behavior by children in the home

SIGNS TO LOOK FOR—DEPRESSION

While more common in women, depression also occurs in men but the signs and symptoms may not be as obvious.

1. Feelings of sadness most of the time
2. Lack of enjoyment from doing things previously found pleasurable, including interacting with family and friends
3. Oversleeping (difficulty getting out of bed) or difficulty sleeping well at night
4. Feelings of fatigue
5. Reduced sexual energy
6. Loss of appetite or feeling like eating all the time
7. Difficulty focusing and being forgetful
8. Increased aches and pains that persist
9. Feeling bad about oneself most of the time
10. Feeling anxious and upset, but not sure why
11. Increased irritability
12. Thoughts of death including thoughts of suicide

IDENTIFYING MENTAL HEALTH ISSUES

SIGNS TO LOOK FOR—ANXIETY DISORDERS

1. The person is always worried about things, even when there are no signs of trouble
2. Reports frequent aches and pains that can't be traced to physical problems
3. The person is often tired, but has trouble sleeping
4. Appears physically tense or reports feeling tension in the body much of the time
5. Reports of panic attacks (heart racing, dizziness, difficulty breathing, tingling)
6. Reports of nightmares and flashbacks to past accidents or trauma (e.g. a sexual assault)
7. Repeated hand washing or obsession with germs; overly concerned about checking locks or leaving the stove on when leaving the house
8. Can't get thoughts out of their head about losing control and harming someone they care about
9. Fears about meeting new people, being embarrassed in social situations, or leaving the house

SIGNS TO LOOK FOR—THOUGHT DISORDERS

Mental health issues, such as schizophrenia, are relatively rare. In addition to the general symptoms listed above, most people know when they encounter an individual who has a thought disorder. Psychotic symptoms may also be caused by substance abuse or by certain physical conditions. Some other signs that can occur include:

1. The person exhibits unusual thoughts and speech patterns; has trouble focusing on a topic; loose or bizarre associations with the ideas they express; talks rapidly with a flood of thoughts
2. The person is not oriented to time, person or place
3. They express or exhibit hallucinations (hearing things, seeing things) or delusions (imagining things or holding strong personal beliefs that are not true)
4. There have been dramatic changes in behavior, including social isolation or withdrawal