

Assessing for Substance Use when Testing is Unavailable

While drug tests are great tools to confirm suspected substance use during a case, we need to be prepared to make informed assessments in times where drug testing is unavailable. The following are some examples of things to look for when making face to face assessments of families believed to be using substances that may impair their ability to parent safely. Please keep in mind that the below symptoms could be signs of substance use, but they could also point to other issues as well. These signs alone are not proof of substance use but rather signs that can be used during your assessment to help gather additional information.

Physical and health warning signs of drug abuse

- Eyes that are bloodshot or pupils that are smaller or larger than normal.
- Frequent nosebleeds--could be related to snorted drugs (meth or cocaine).
- Changes in appetite or sleep patterns. Sudden weight loss or weight gain.
- Seizures without a history of epilepsy.
- Deterioration in personal grooming or physical appearance.
- Injuries/accidents and person won't or can't tell you how they got hurt.
- Unusual smells on breath, body, or clothing.
- Shakes, tremors, incoherent or slurred speech, impaired or unstable coordination

Behavioral signs of drug abuse

- Drop in attendance and performance at work or school; loss of interest in extracurricular activities, hobbies, sports or exercise; decreased motivation.
- Complaints from co-workers, supervisors, teachers or classmates.
- Unusual or unexplained need for money or financial problems; borrowing or stealing; missing money or valuables.
- Silent, withdrawn, engaging in secretive or suspicious behaviors.
- Sudden change in relationships, friends, favorite hangouts, and hobbies.
- Frequently getting into trouble (arguments, fights, accidents, illegal activities).

Psychological warning signs of drug abuse

- Unexplained change in personality or attitude.
- Sudden mood changes, irritability, angry outbursts or laughing at nothing.
- Periods of unusual hyperactivity or agitation.
- Lack of motivation; inability to focus, appearing lethargic or "spaced out."
- Appearing fearful, withdrawn, anxious, or paranoid, with no apparent reason.

Making Referrals to Treatment when OSAR is Unavailable

While OSAR (Outreach, Screening, Assessment, and Referral) is the front door to treatment referrals and funding, OSARs may not always be available or have openings to make the assessments when we have a parent who needs to be screened and referred for some level of treatment intervention. In these situations you should move forward with referring a parent directly to a state funded treatment providers (<https://hhs.texas.gov/services/mental-health-substance-use/adult-substance-use>), assist the parent with contacting their Medicaid provider and inquiring about their behavioral health benefits (if the parent has Medicaid), asking the parent to contact their insurance carrier about their behavioral health benefits (if the parent has private insurance), or staffing with your Supervisor for approval to request a contracted Substance Use Assessment through our DFPS contracted services.