

Support for People with Substance Use Disorders: Treatment, Recovery, & Harm Reduction

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In 2021, more than 240,000 people in the United States died from drug overdoses and excessive alcohol use. Policies that prevent deaths from substance use and substance use disorders (SUDs) include increasing access to treatment, harm reduction, and recovery support.

Treatments for SUDs include medication, behavioral and cognitive therapies, and social support. A combination of approaches is [most effective](#) for treating SUDs.

1. **[Cognitive behavioral therapy](#)**: emphasizes changing negative thought patterns to change behaviors
 - a. Effective in reducing substance use among [adolescents](#) as well as adults, [when used alone and in combination with other treatment approaches](#)
2. **[Contingency management](#)**, or motivational incentives: reinforces target behaviors such as abstinence, reduced drug use, or engagement in treatment
 - a. Among the [most effective treatments](#) for SUDs, particularly when combined with medications, but access can be difficult
3. **[Dialectical behavior therapy](#)**: helps patients build confidence and coping abilities to effectively handle stressful situations
 - a. Can be especially [helpful](#) for individuals who have both SUD and borderline personality disorder or other severe disorders
4. **[Medications](#)** (e.g., methadone, buprenorphine, and naltrexone): safe and effective in reducing or eradicating withdrawal symptoms and cravings
 - a. Can lead to steady employment, lower likelihood of engaging in criminal activity, and higher engagement in behavioral interventions
5. **[Motivational interviewing](#)**: form of therapy that uses open-ended questions, affirmations, reflections, and summaries
 - a. [Strong evidence](#) for alcohol, tobacco, and marijuana, but other drug classes (opioids and methamphetamine) have insufficient evidence

Recovery, mutual support, and aftercare models support people after treatment and include:

1. **[Recovery community organizations](#)**: independent, non-profit organizations led and governed by people who have lived experience with addiction and recovery
2. **[Peer support](#)**: professionals with lived experience who help others
3. **[Permanent Supportive Housing](#)**: community-based housing for people who need financial and/or supportive wrap-around services; **[recovery housing](#)**: a shorter-term living setting with peer support; both may have sobriety or rental history requirements, unlike low barrier housing
4. **[Recovery High Schools](#)**: designed to meet academic and therapeutic needs of adolescents who have received or are receiving treatment for SUD; **[collegiate recovery programs](#)**: offer peer-driven recovery support delivered on college campuses
5. **[Twelve step programs](#) and other mutual support groups**: mutual aid for people in recovery (e.g., SMART Recovery, Celebrate Recovery)

Harm Reduction aims to reduce the negative physical, mental, and social impacts of substance use by working directly with people who are living with a SUD. Strategies include:

1. **Crisis support**: includes crisis call centers (e.g., 988), mobile response teams, and crisis stabilization facilities that are equipped to address a substance-use related crisis
2. **Fentanyl test strips (FTS)**: a drug checking strategy to avoid unintentional ingestion of drugs mixed with highly potent fentanyl that has entered the illicit drug supply
 - a. Associated with a 43% [report reduction in drug use](#), but possession [may be prosecuted under drug paraphernalia laws](#) in some states
3. **Low barrier housing**: a “housing first” model; improves the likelihood of engagement with wrap-around services (e.g., counseling, family support) and improves health
4. **Overdose reversal medication** (e.g., [naloxone](#)): rapidly reverses the decreased breathing and blood pressure that can result in death following an overdose
5. **Pregnancy and parenting supports**: includes access to [prenatal, birth, and postpartum peer doula services](#); effective for [improving maternal-child outcomes](#)
6. **Preventing child welfare involvement**: children in the child welfare system [have high rates](#) of substance use and experience barriers to treatment
 - a. Requires [education](#) and [supports](#) for families
7. **Safer use**: including sterile syringes, safe smoking supplies, and monitored drug use sites, are [effective in reducing overdose](#) by 35% and [reducing the spread of infectious disease](#) (HIV) by 65%
 - a. Example: [syringe services programs](#) facilitate safe disposal of used needles and syringes and provide healthcare; they can also provide mental health and substance use treatment
8. **Youth education programs**: [can be adapted](#) for the developmental stage of participants and their prior exposure to substances

Considerations for Policymakers

These strategies are effective, but many people living with SUD find it difficult to access these programs due to socioeconomic status, caregiving responsibilities, low implementation of programs, and legal barriers. Some specific strategies for improving access include:

- A coordinated research agenda on harm reduction
- Funding for states to [eliminate criminal penalties](#) for substance use and promote harm reduction, treatment, and recovery supports
- Expansion of [mobile crisis intervention](#) and outreach teams funded under the American Rescue Plan Act of 2021
- Exempt syringe services programs and drug testing supplies from [state](#) drug paraphernalia code, fund purchase of syringes (barred use of [federal funds](#)), and finance state uptake of the CDC’s [implementation plan](#)
- Amend state laws on [pharmacist](#) naloxone dispensing
- Ensure jails and prisons provide [access](#) to evidence-based treatment and [medication](#)
- [Maximize](#) existing tools in Medicaid, commercial insurance, and the treatment system