

# The CHECK Center – Leveraging Child Welfare and Healthcare Systems to Understand Development and Wellbeing for Children in Foster Care

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# Substance use

- Exploratory substance use in adolescence is common
  - e.g., 1 in 3 12<sup>th</sup> graders using marijuana
  - Bias and stigma regarding use
    - Perceptions of “adult” behavior
    - Perceptions of “criminal” behavior

# Substance use

- Exploratory substance use in adolescence is common
- Consequences of substance use, and particularly problematic substance use, can be severe
  - Substance use disorder
  - Impact on education, employment, social safety net programs
- Increased use (and scrutiny) when youth already have child welfare involvement

# Adolescent substance use prevention efforts rely on systems

- Families
  - Strong connections/relationship quality, parental monitoring
- Peers
  - Deviant peers, reduced substance use among self-selected friends
- Schools
- Social norms and policies
- Healthcare?

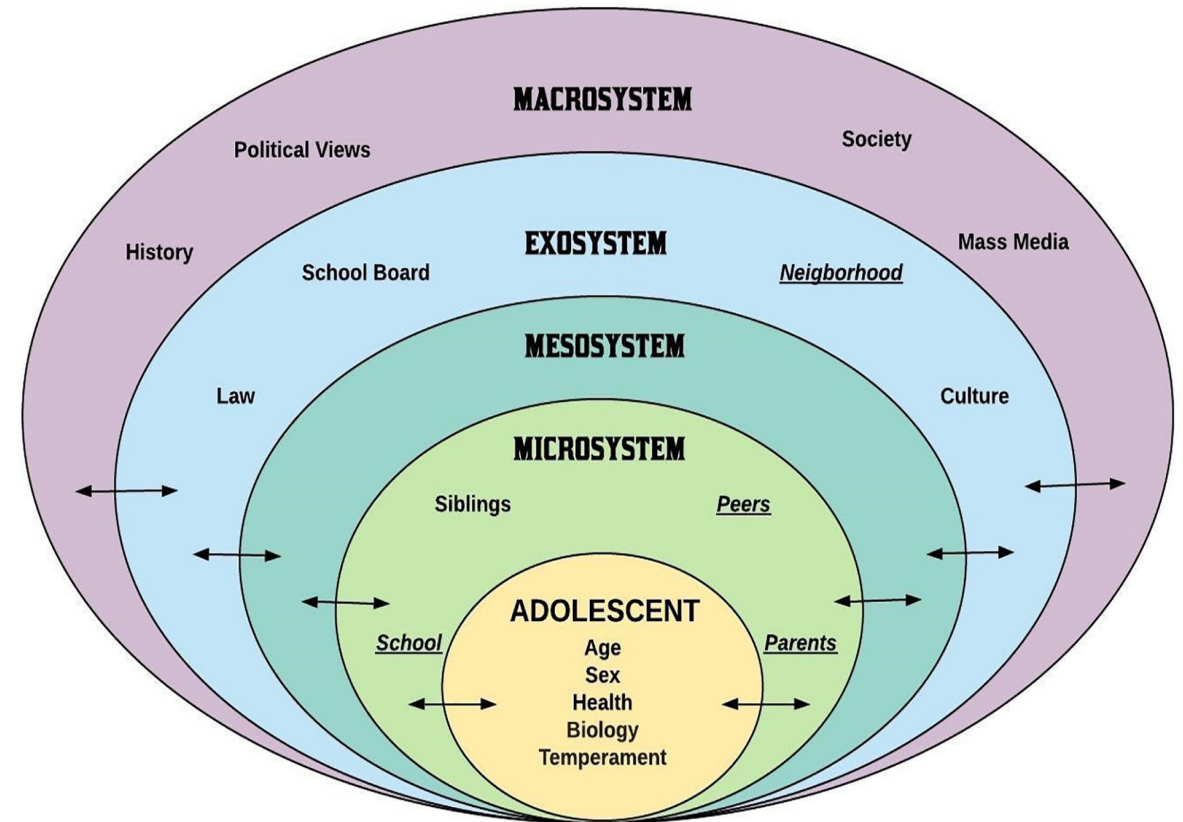


Figure from Trucco, 2020

# Healthcare's influence in adolescence

- Families rely on pediatricians as a first line of support
- School and federal policies promote engagement with healthcare
- Screening is normal and accepted
  - Including for substance use
- Confidentiality is supported
- Access is intended to be universal

## PEDIATRICS

OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS

[Pediatrics](#). 2012 Jun; 129(6): 1072–1082.

PMCID: PMC3362902

doi: [10.1542/peds.2011-1624](#)

PMID: [22566420](#)

### Computer-Facilitated Substance Use Screening and Brief Advice for Teens in Primary Care: An International Trial

[Sion Kim Harris](#), PhD,<sup>a,b,c,d</sup> [Ladislav Csémy](#), PhD,<sup>e,f</sup> [Lon Sherritt](#),  
MPH,<sup>a,b,d</sup> [Olga Starostova](#), MA,<sup>e,g</sup> [Shari Van Hook](#), MPH,<sup>a,b,d</sup>  
[Julie Johnson](#), BA,<sup>b,d,h</sup> [Suzanne Boulter](#), MD,<sup>i</sup> [Traci Brooks](#), MD,<sup>a,c,j,k,l</sup>  
[Peggy Carey](#), MD,<sup>m</sup> [Robert Kossack](#), MD,<sup>n</sup> [John W. Kulig](#), MD, MPH,<sup>o</sup>  
[Nancy Van Vranken](#), MD,<sup>p</sup> and [John R. Knight](#), MD<sup>a,b,c,d</sup>

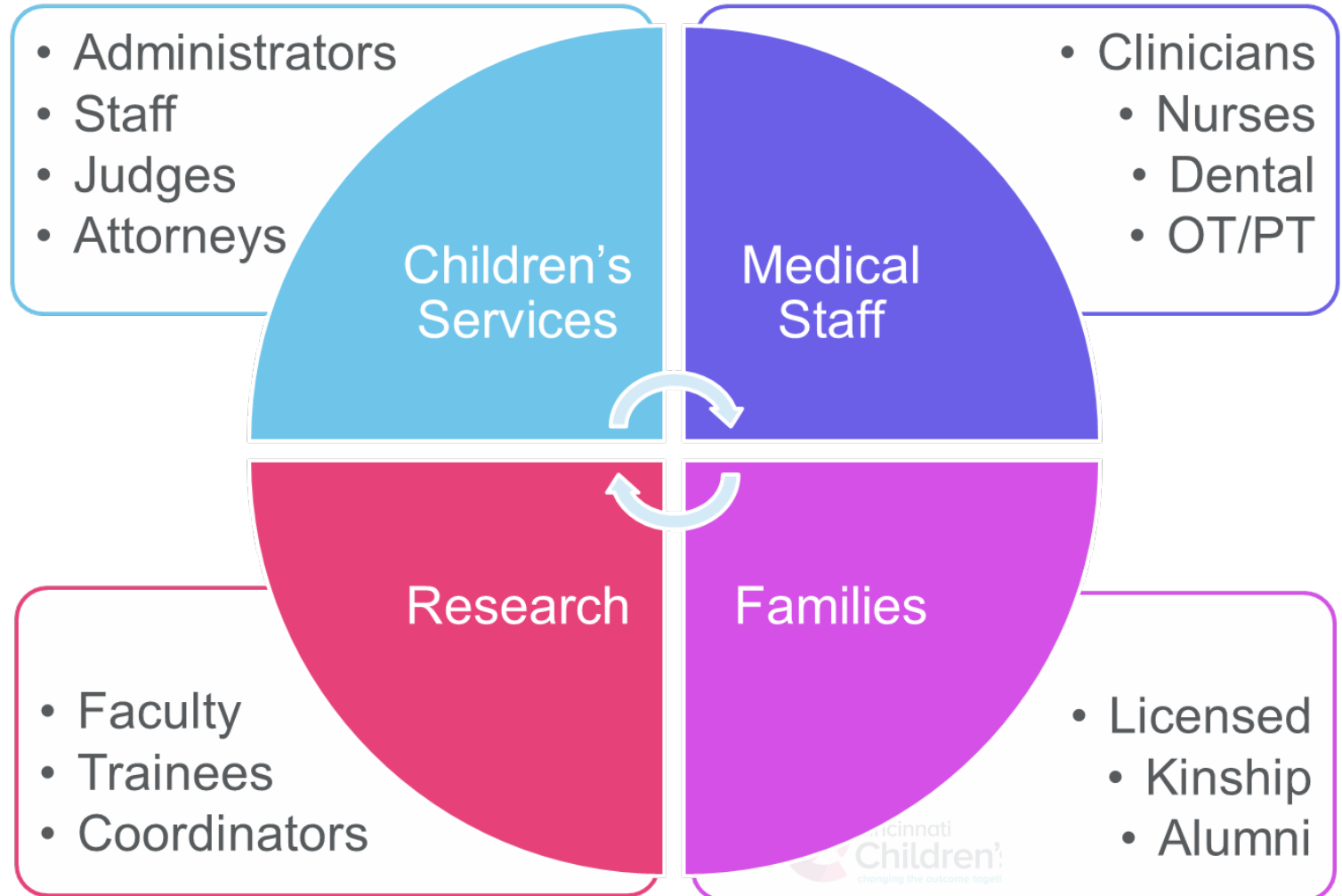
# Nonparental care: A social system disruption

- ~ 2.3 million children in non-parental care
  - ~1.8 million residing with other relatives
- 407,500 children in US foster care on any given day
  - ~40% are ages 10 and older
  - Disparities with respect to race, ethnicity, and poverty
- Placed outside of the family home, disrupted from school, healthcare, social settings
  - 38% placed with relatives
- Significant increase in risk for substance use in adolescence and adulthood
  - Maltreatment, parental substance use

AFCARS, 2021; Afifi et al., 2020; Braciszewski & Stout, 2012; Beal & Greiner, 2015; Courtney et al., 2011; Greiner & Beal, 2017; McDonald et al., 2014; US Administration for Children and Families, 2021

## A Research-Practice Partnership

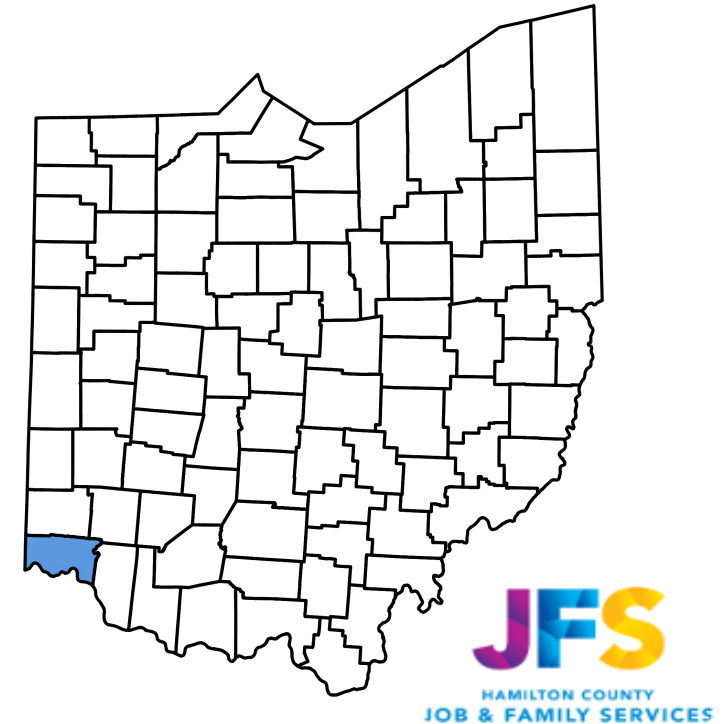
- Health evaluations at 5 and 30-60 days post entry into foster care/placement change
- Multidisciplinary service provision
- Research staff embedded to support recruitment and retention



# The CAREFul Study: Healthcare Access, Health Risk Behaviors, and Child Welfare Involvement

## Context

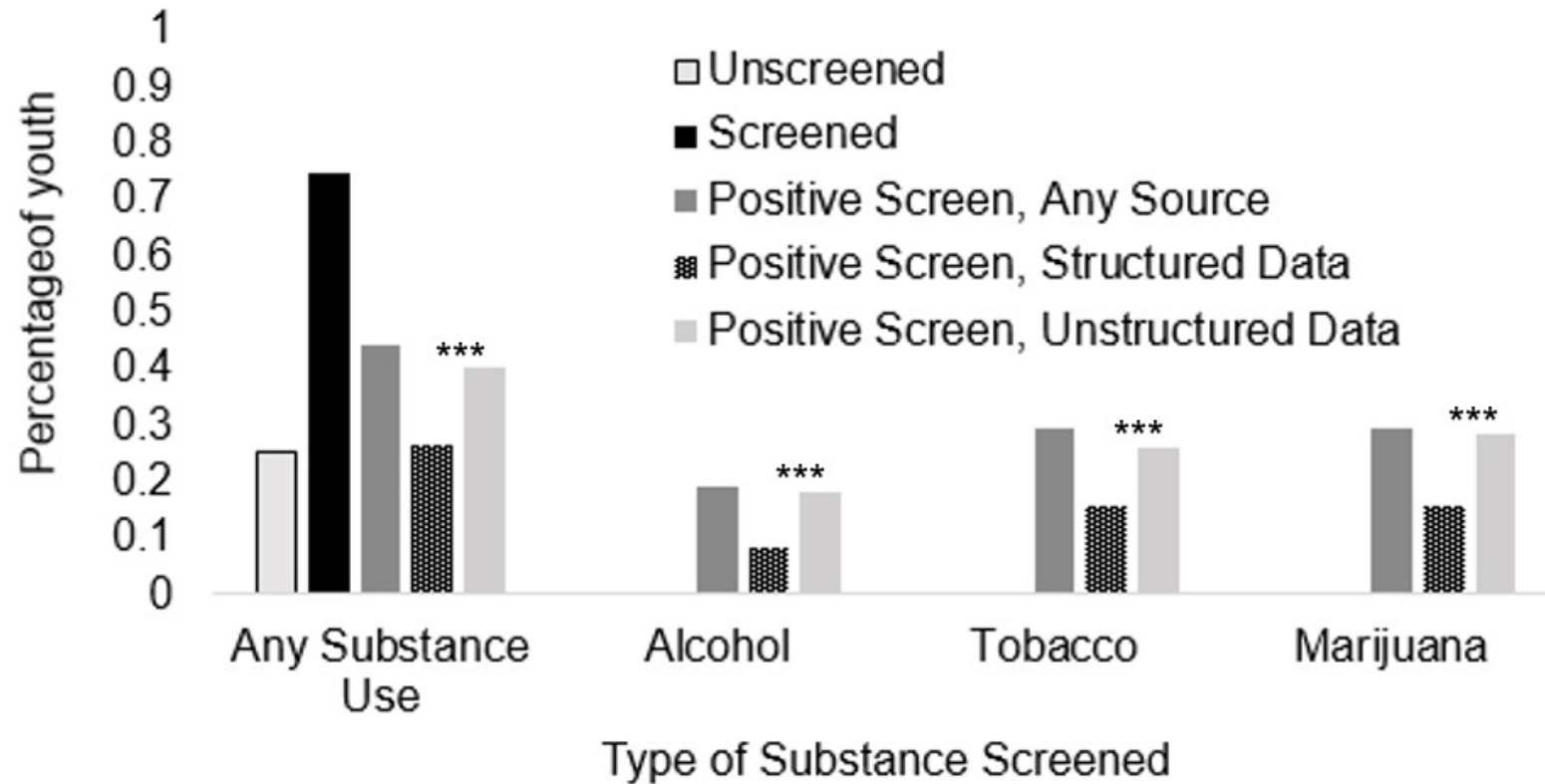
- Child welfare
  - County-administered
  - ~2k children in custody
  - Foster care to age 21
- Healthcare
  - Foster care consultation clinic
  - Only inpatient provider
  - Primary outpatient provider for specialty care, primary care



# CAREFuL

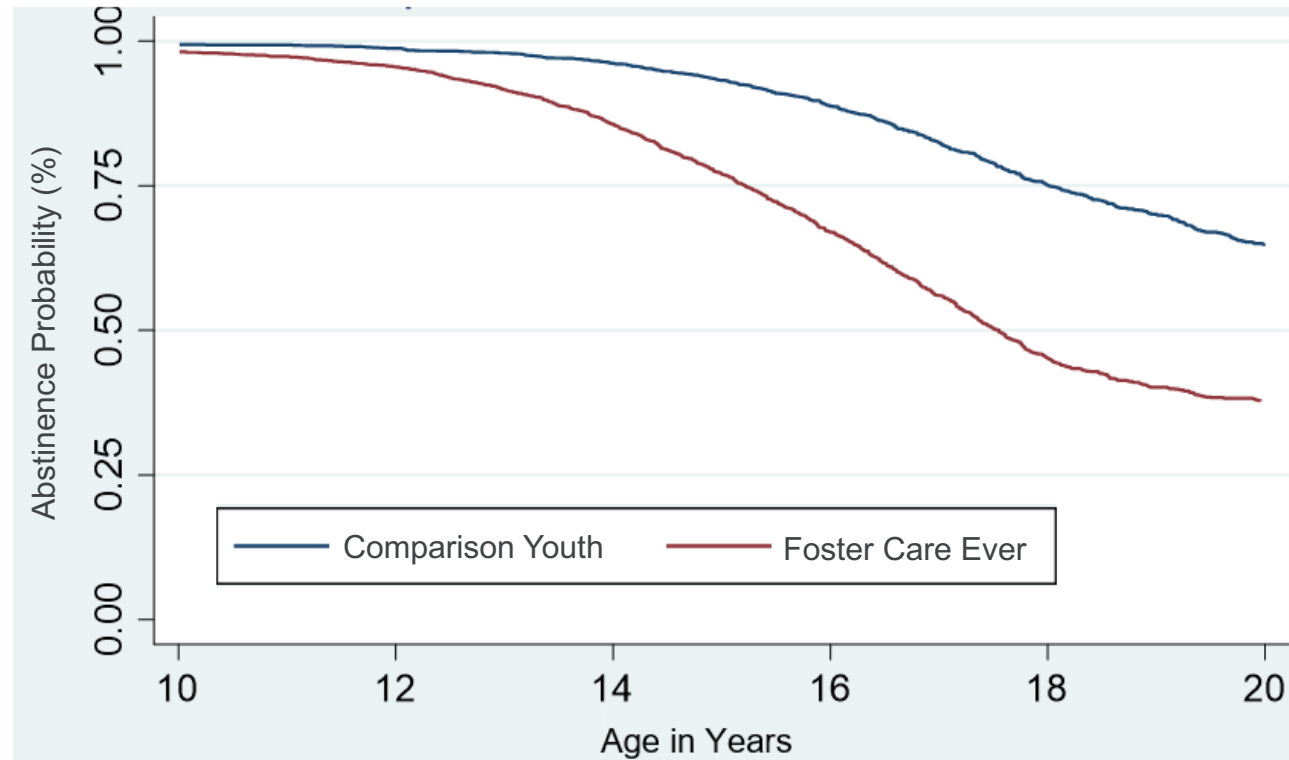
- Link child welfare and electronic health records data
  - 2787 youth 10 and older in foster care between 2012-2017
  - Comparison sample (n = 2787) never in foster care
- Understand differences in substance use screening and identification for these populations
- Identify disparities in healthcare access that might limit healthcare impact on substance use prevention

# Capturing Substance Use in the EHR

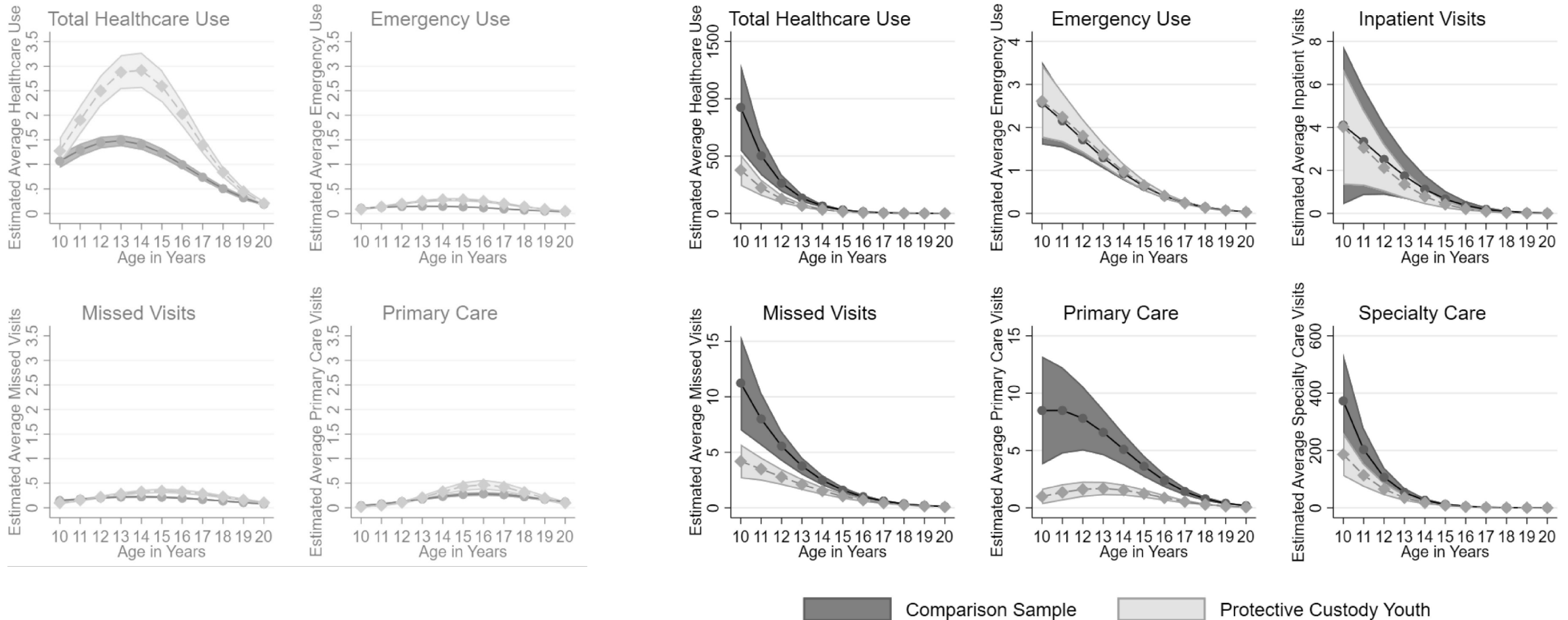


Foster youth were significantly more likely to receive screening ( $p < .01$ )

# Who is delaying substance use based on healthcare data?

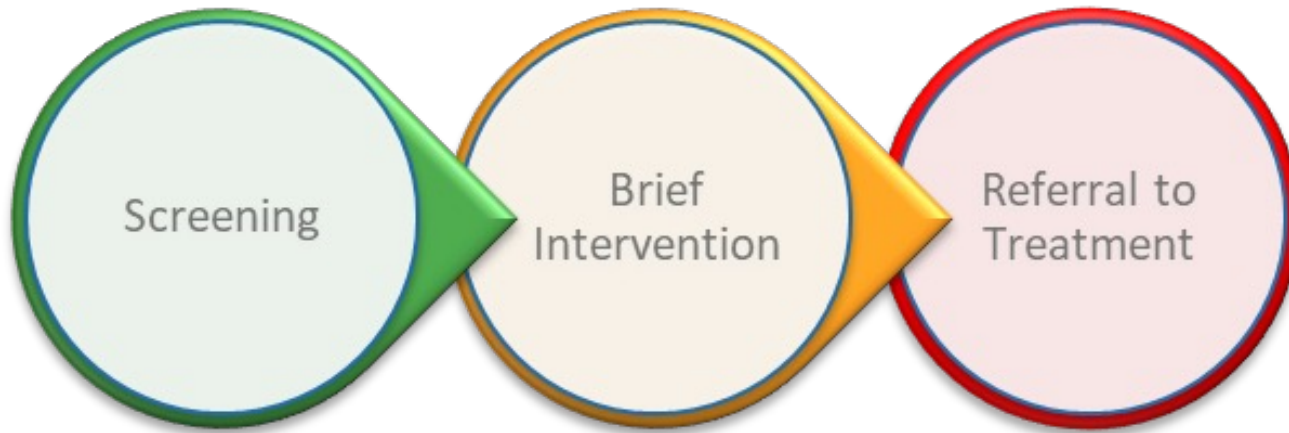


# Substance Use and Healthcare Use



Beal et al., 2021

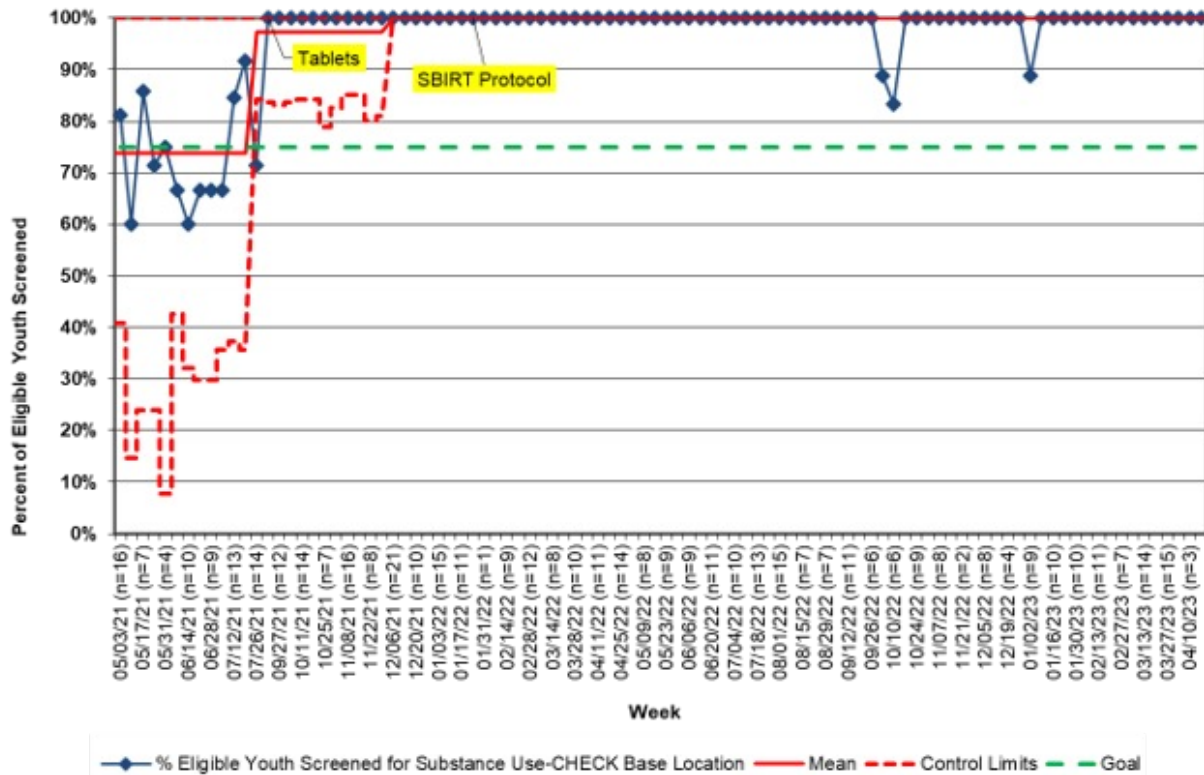
# SBIRT in CHECK



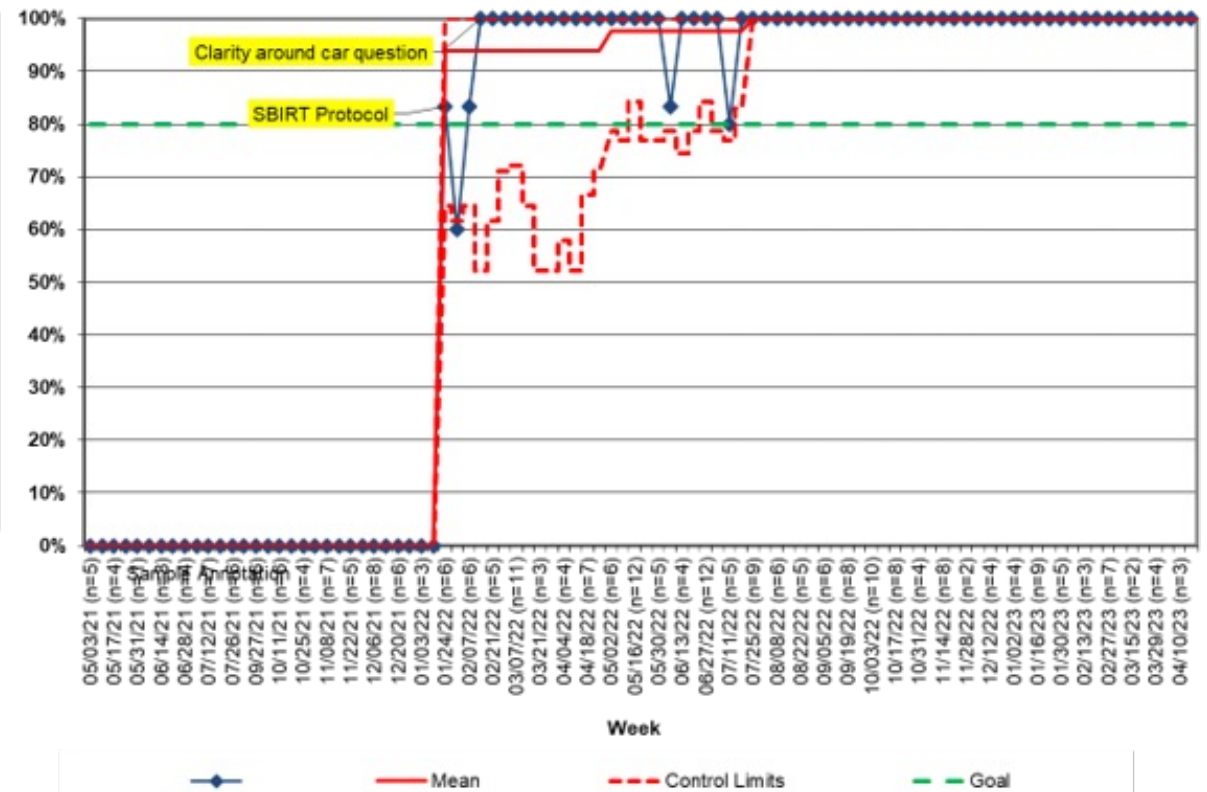
- CRAFT via WELCOME Tablets
  - Universal rather than targeted screening
- Continuity in monitoring substance use over time
- Trained MSW to deliver the Brief Negotiated Interview
- Referral to community SUD programs already contracted with CPS (n = 4)

# SBIRT in CHECK

% Eligible Youth Screened for Substance Use-CHECK Base Location



% of Youth Who Received a Brief Intervention for Substance Use



# Project EASY: Positive Screen

N = 71	Baseline	6-month follow-up	Bivariate Result
Any substance use in the past 12 months	100%*	--	
Any substance use in the past 30 days	75%	42%	$\chi^2(1)=16.92, p<.01$
Number of days of use in the past 30 days; M (SD)	10.6 (12.1)	7.0 (10.8)	$t(70)=2.58, p=.01$
Any alcohol use (%)	28%	19%	$\chi^2(1)=1.50, p=.22$
Any tobacco use (%)	47%	22%	$\chi^2(1)=13.76, p<.01$
Any marijuana use (%)	60%	30%	$\chi^2(1)=14.23, p<.01$

\* N = 17 adolescents excluded because they endorsed riding in a vehicle with an intoxicated driver but not substance use

# Support for Caregivers

- Talk with your young people about substance use
  - Never assume anything about use
  - Avoid judgmental and stigmatizing language
  - Remember that substance use during adolescence is normal
  - Ask for permission to discuss topics and get their buy-in
  - Get personal (but not too personal): sharing your experiences can be more effective than sharing facts
  - Discuss early and often – before substance use is initiated is best
  - Car rides are a great opportunity to get yourself used to having these conversations

# Support for Caregivers

- Adolescents have to be in the driver's seat
  - Professionals trained in prevention and harm reduction can help to create child-led plans for stopping or reducing substance use
  - Your role is in supporting the young person in implementing the plan in the way they want your help, not in creating a plan for them
  - Attachment, warm relationships, positive communication, caregiver monitoring are the bedrock to family-based protective factors that prevent substance use and SUD

# Support for Caregivers

- Learn more information about substance use
  - National Institute on Drug Abuse ([Parents & Educators | National Institute on Drug Abuse \(NIDA\) \(nih.gov\)](#))
  - Substance Abuse and Mental Health Services Administration ([Parent & Caregiver Resources | SAMHSA](#))
  - Centers for Disease Control ([High Risk Substance Use in Youth | Adolescent and School Health | CDC](#))
  - AdolescentHealth.org ([Substance Use Resources For Parents of Adolescents and Young Adults – SAHM \(adolescenthealth.org\)](#))
- Ask your young person for permission to connect them with additional resources
  - Pediatricians
  - Behavioral health support

# Support for Caregivers

- Confidentiality in behavioral health and healthcare settings
  - Young people may choose to disclose to someone other than you
  - Those conversations are confidential, providers will bring you in when your young person is on-board with that plan
  - If you have concerns, ask the provider or practice what resources they have in place for substance use prevention and harm reduction more generally