



Children and Family  
Research Center

UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN  
SCHOOL OF SOCIAL WORK



The 4<sup>th</sup> National Conference on Women, Addiction, & Recovery  
Recovery Coach Project (AODA) Waiver

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## Background of AODA and DCFS Court Cases *GAO, 1998*

- 74% of Cook County DCFS cases had 1 or more parent required to get AOD treatment
- 82% of mothers AOD histories greater than 5 years (41% > 10 years)
- > 80% were primary heroin or cocaine abusers
- Child welfare agencies had limited familiarity with AODA resources making admissions low
- Judges reported permanency decisions delayed due to lack of information on treatment progress

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Safe Communities





## Background of AODA Waiver Demonstration

- The Illinois Department of Children and Family Services received approval from the U.S. Department of Health and Human Services (HHS) beginning in April 2000 to waive certain restrictions on the use of federal IV-B and IV-E funds to facilitate the demonstration of new approaches to the delivery of child welfare services.
- The waiver allows the Department to provide enhanced alcohol and other drug abuse services to DCFS involved placement families in the Cook County catchment area.



## Illinois AODA Waiver Project Goals

- Increase the number of AODA impacted foster care children that are safely reunified
- Decrease the length of time it takes for safe reunification of AODA foster care cases
- Increase the number of cases and the speed at which AODA impacted cases are moved to a permanency decision
- Increase the number of DCFS involved individuals referred to AODA that remain in treatment for at least 90 days
- Reduce the number of subsequent oral reports (SOR) of child abuse and neglect

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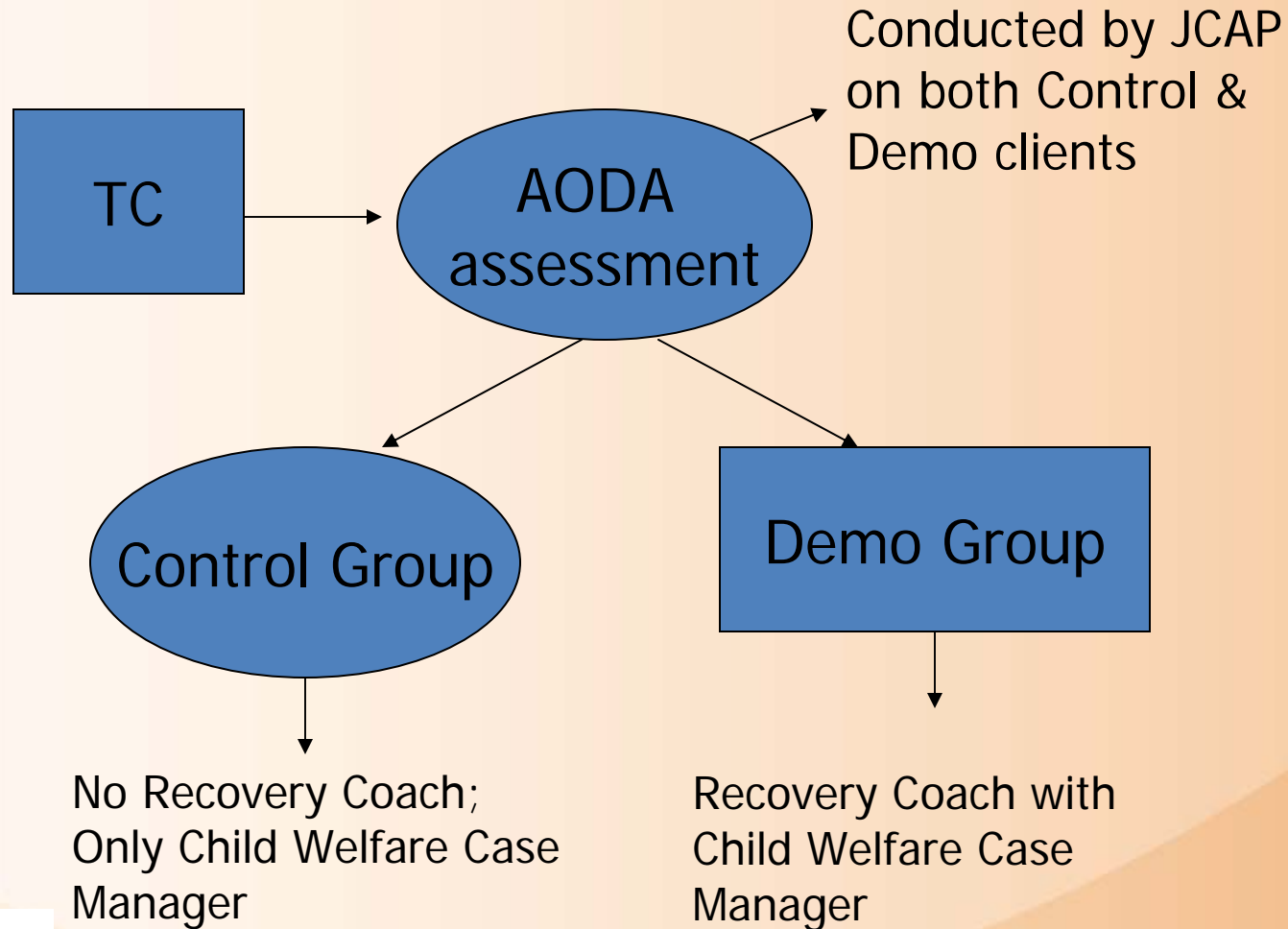


## JCAP AODA Assessments

- Provide Diagnostic impression based on DSM-IV criteria & determine Level of Care based on American Society of Addiction Medicine patient placement criteria
- Schedule intake appointment for the parent
- Provide the courts, caseworker and assigned Recovery Coach with results of the assessment
- Notify case workers of missed intake appointments
- Track clients for 30 days or until parent successfully enters treatment



## Classic Experimental Design (Random Assignment)





## The Role of the Recovery Coach

- Contracted through an independent agency (TASC)
- Recovery Coaches:
  - Assist the parent(s) in obtaining AODA treatment services and negotiating departmental and judicial requirements associated with AODA recovery and permanency planning
  - Work in collaboration with the Child Welfare worker, AODA treatment provider and extended family members to bridge service gaps
  - Provide specialized outreach, intensive AODA case management & support services throughout the life of the case, before, during, and after treatment & reunification

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## Specific Recovery Coach Interventions

- Coordinate AOD planning efforts, arrange staffings, participate in family meetings
- Provide ongoing assertive outreach and re-engagement efforts, i.e....transportation to initial intake appointment
- Assist in removing any barriers in engaging, retaining and re-engaging parents who have discontinued treatment
- Provide ongoing assessments to evaluate the need for mental health, parenting, housing, domestic violence and family support services
- Urinalysis testing
- Standardized, regular (monthly) reporting to worker & the courts

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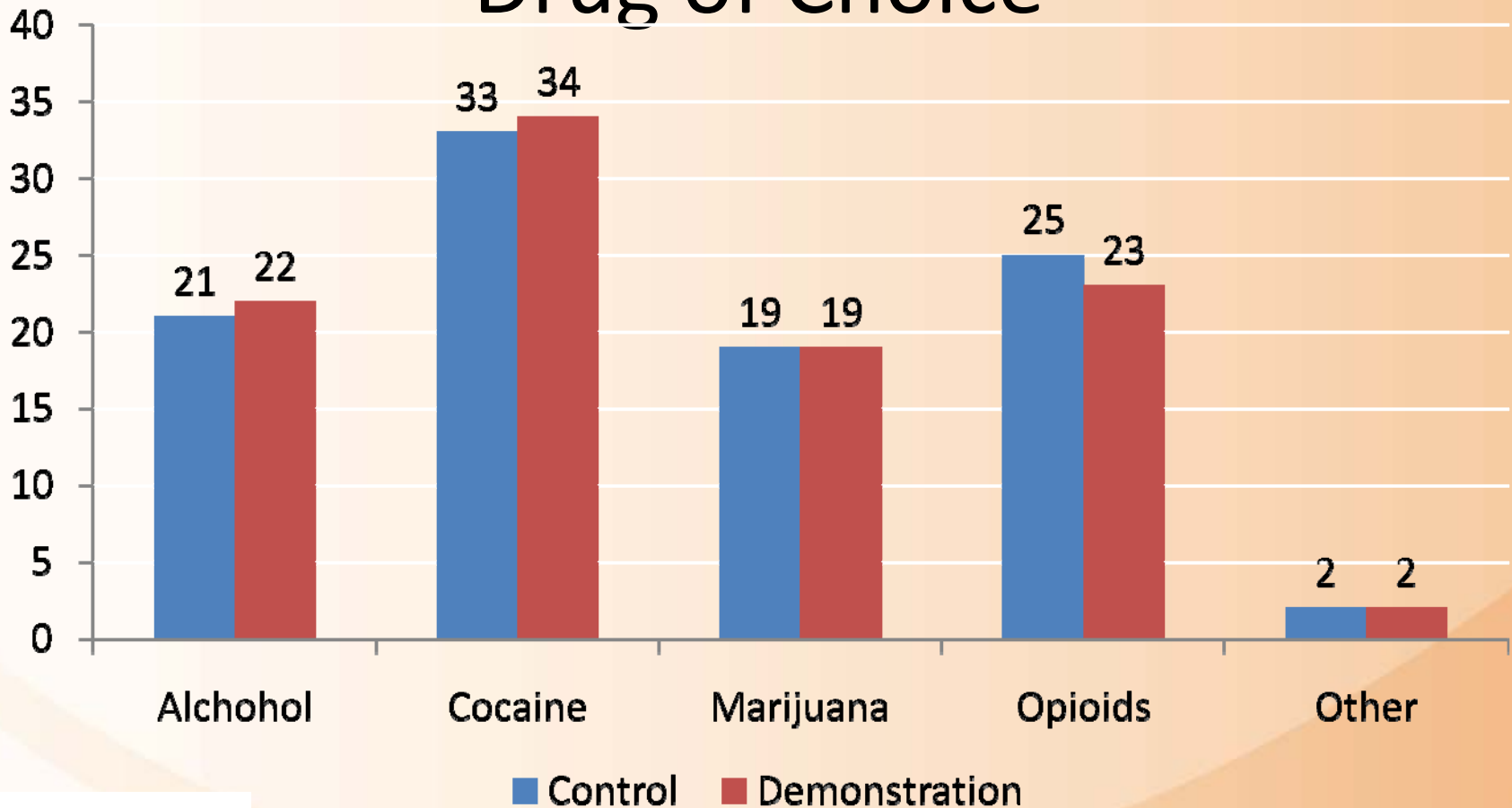
# Recovery Coach Parent- Tammy Koch

- Life Before DCFS involvement
  - My Story, My Family and Children
- My Recovery Experience
  - Recovery Coach relationship – How did I ‘Thrive’?
  - What worked and what did NOT work
  - What has changed?
- Looking Forward –
- Questions/Comments – Open Discussion



# Data & Outcomes

## Drug of Choice



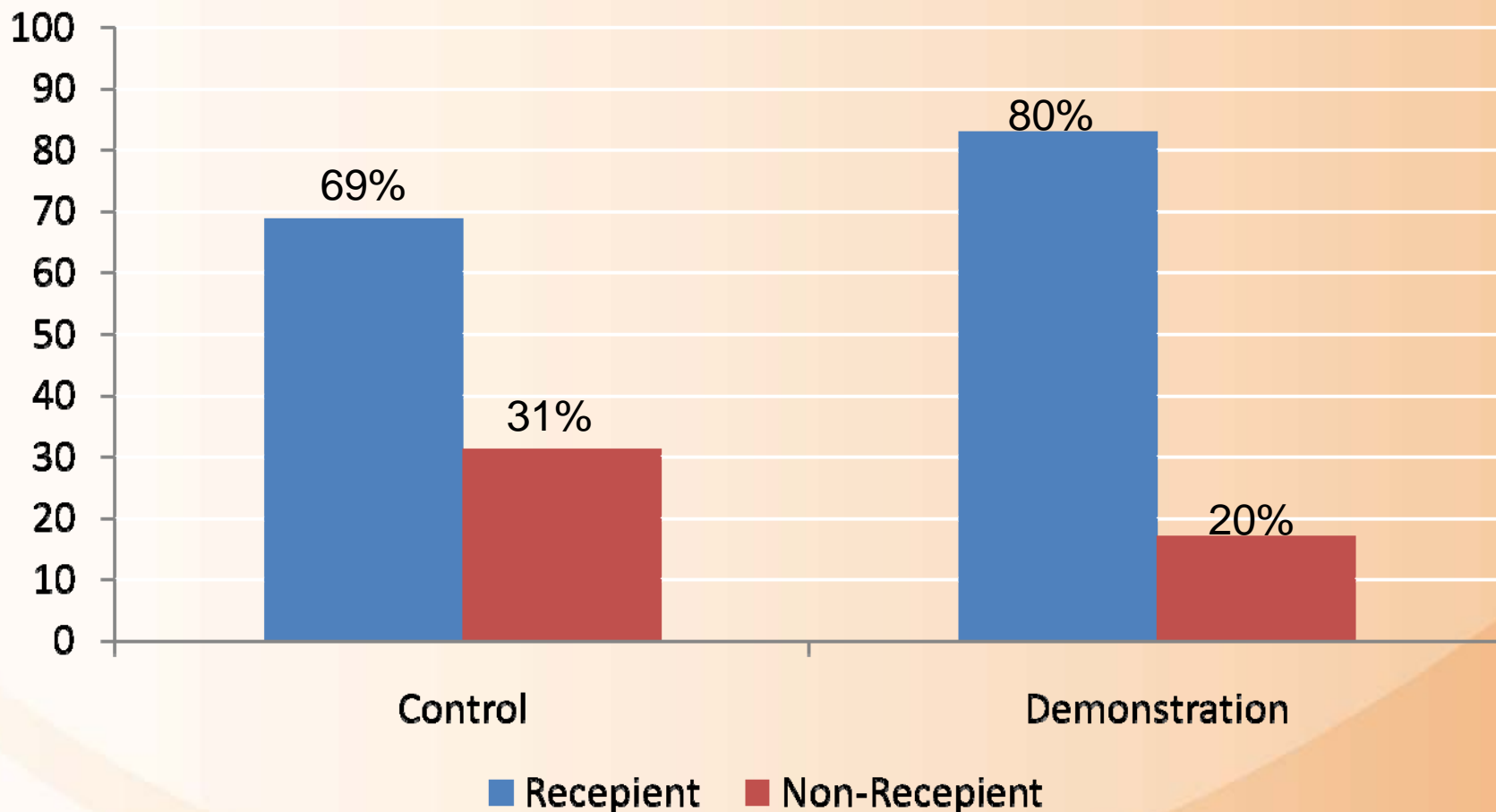
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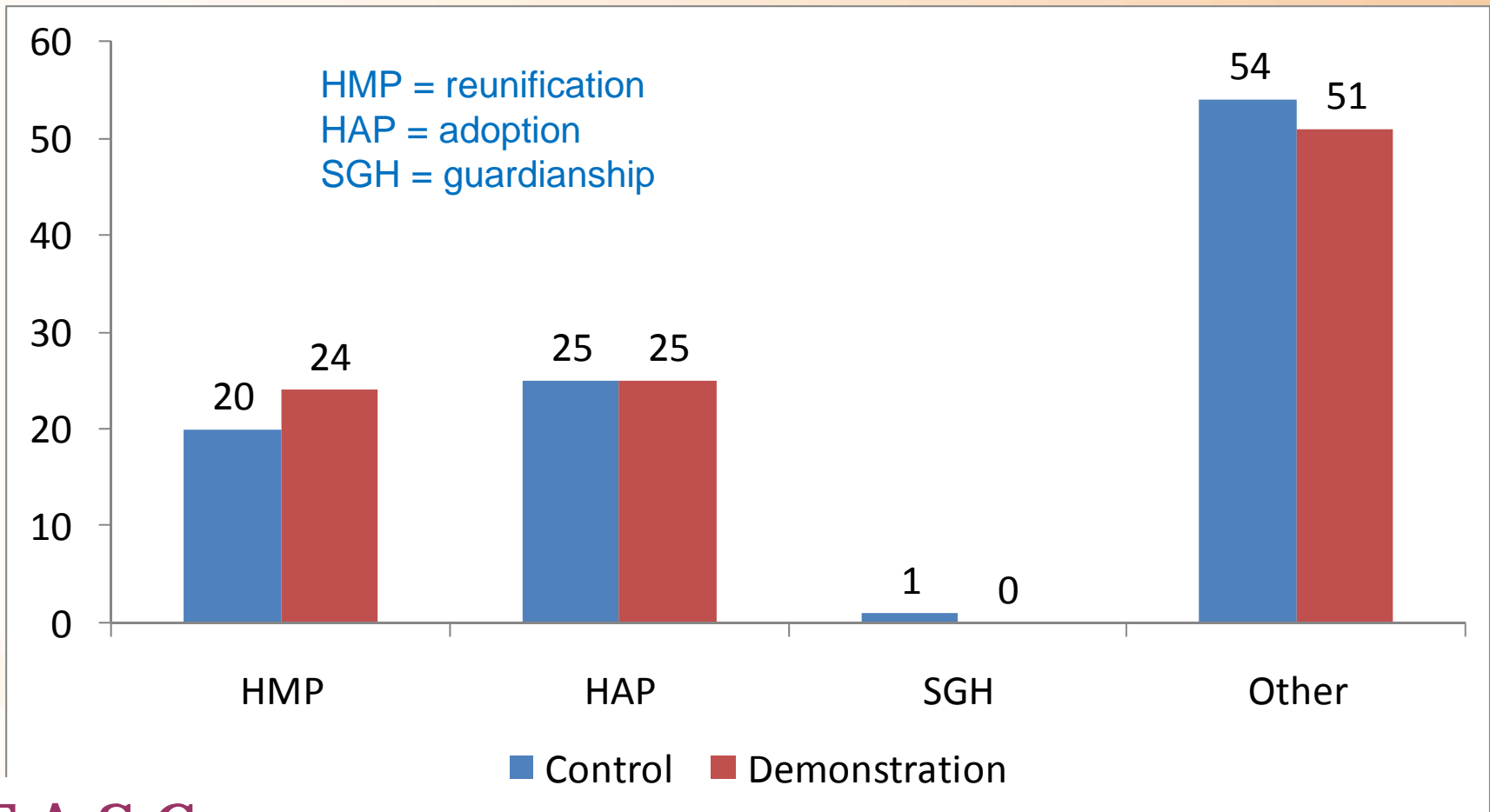


## Treatment Entry by Group Assignment



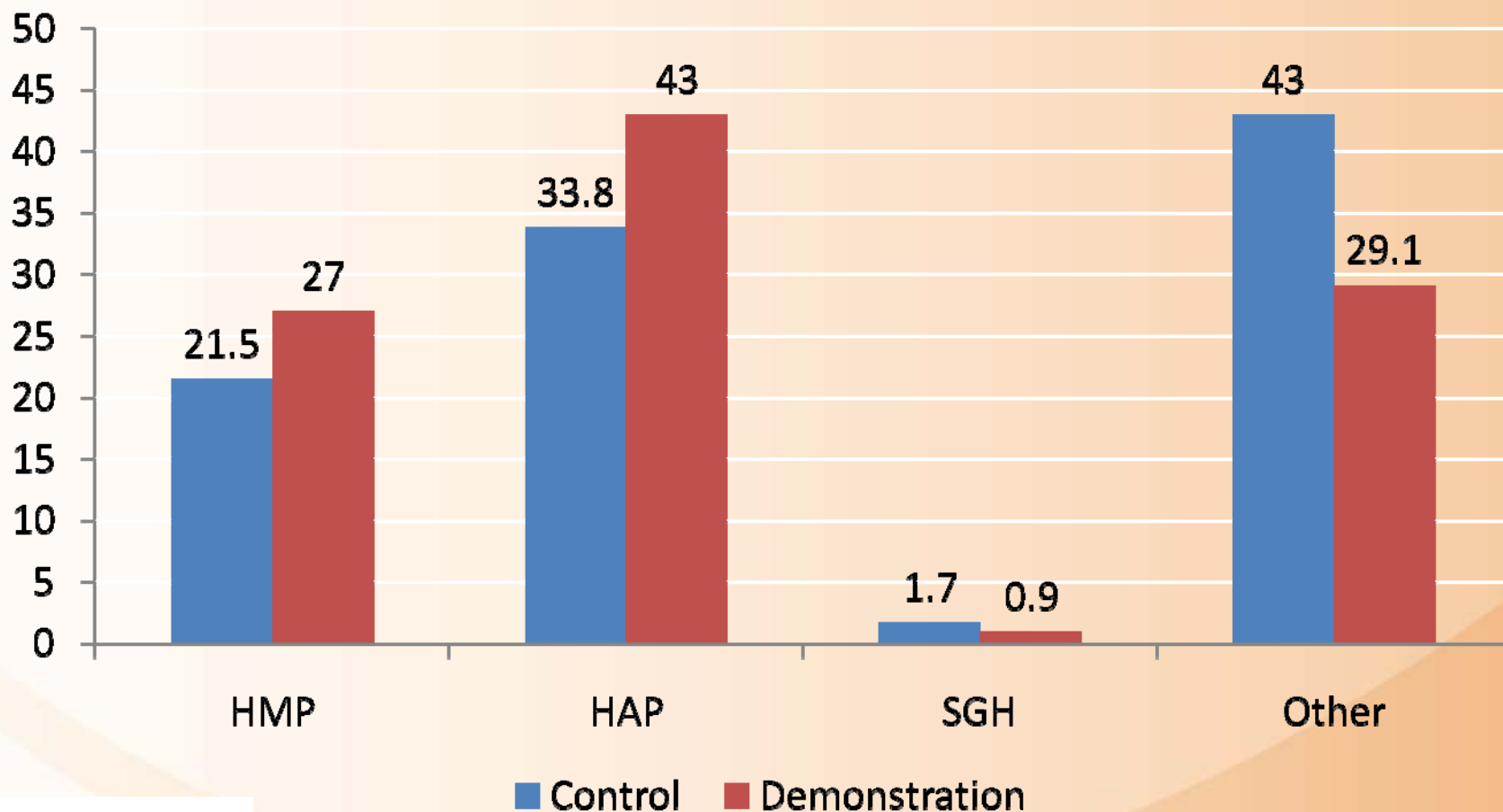


## Living Arrangements



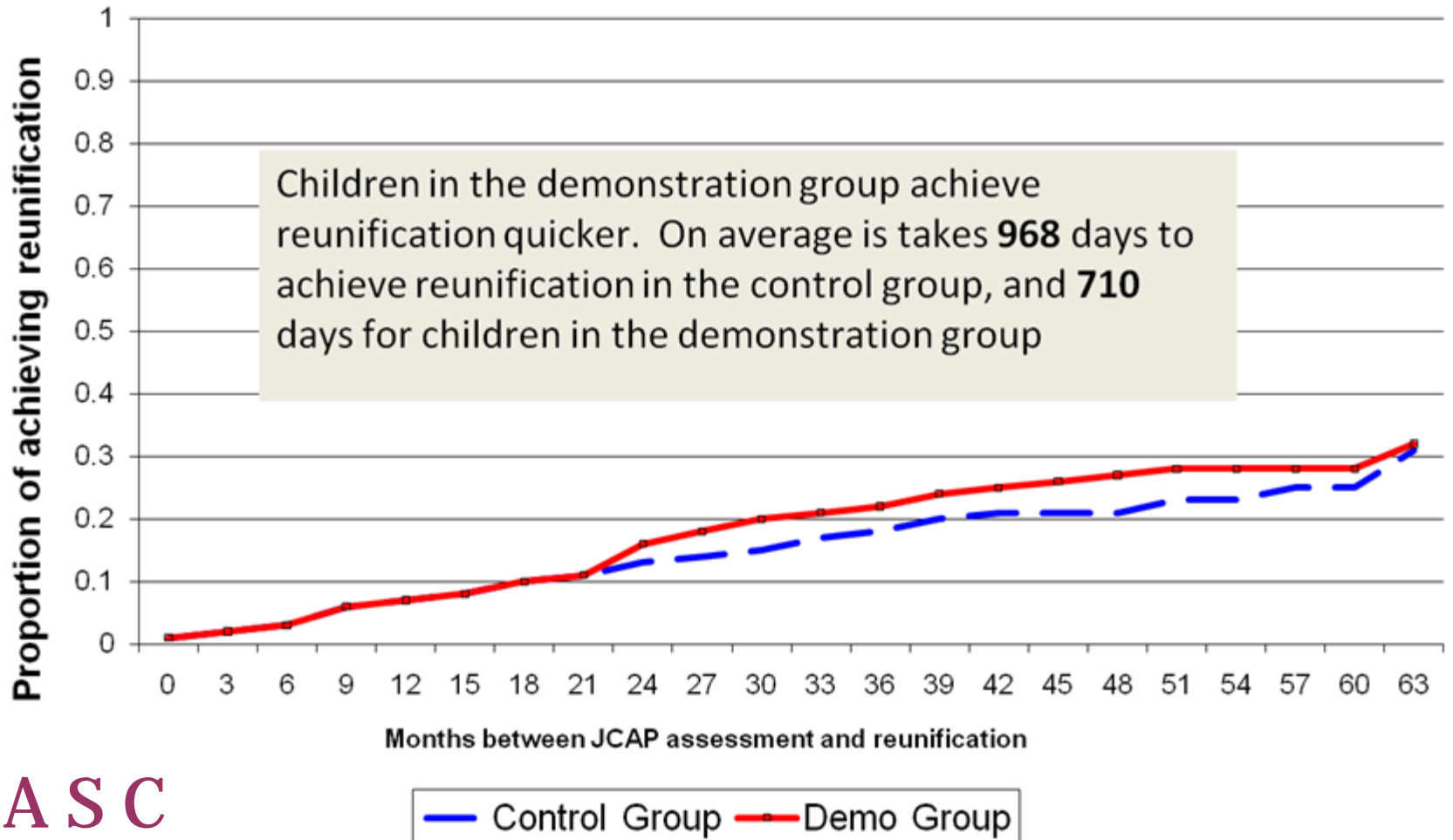


## Living Arrangements at 5 Years





## Time to Reunification



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## Summary of Primary Findings

1. Recovery coaches increase treatment access
2. Recovery coaches increases likelihood of reunification
3. Recovery coaches decrease time to reunification
4. Recovery coaches decrease length of time case remains open
5. Safety is not compromised, in fact risk of subsequent SEI decreases
6. Recovery coaches are cost effective – saving approximately 6.9 millions (06/09)



## The Recovery Coach Profile

- Recovery Coach Credentials:
  - Certified Alcohol & Drug Counselors (CADC)
  - Certified Assessment & Referral Specialists (CARS)
  - Some experience in Child Welfare
  - Bachelor Level Degree – Human Services Field
  - Supervised by Master Level Degree with Child Welfare & Substance Abuse Experience
- Caseloads: Average 20 - 25 clients



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