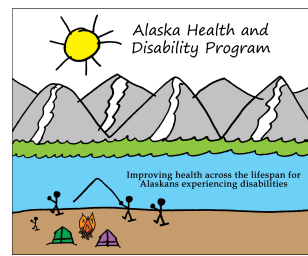


Substance Use Among Alaskan Adults with Disabilities



Introduction

The Substance Use and Mental Health Services Administration (SAMHSA) defines substance abuse and dependence as:

Both substance abuse and substance dependence refer to maladaptive patterns of substance use. Substance abuse usually refers to using any substance in a way that leads to a failure to fulfill major responsibilities at work, school, or home, or to substance-related legal or interpersonal problems. It also includes using substances in situations that put one's physical safety at risk. Substance dependence usually manifests as continued use of substance despite negative physical or psychological effects, inability to cut down or control the use of the substance, tolerance (using more of the substance to get the same effect), and withdrawal symptoms when the substance is no longer consumed.¹

Background

The prevalence of substance use disorders (SUDs) among individuals with disabilities is difficult to measure. Rates have been reported as both higher and lower than the general population.² Regardless of prevalence, it is generally accepted that an SUD can be harmful to an individual's health and quality of life.¹ Harm associated with SUDs can often be cyclical. For example, the use of substances increases risk for experiencing physical, sexual, or domestic violence and having experienced physical or sexual abuse is a risk factor for developing an SUD.^{1, 3}

Individuals with disabilities, including physical, sensory, and/or cognitive disabilities, who experience SUDs often face barriers to treatment. Barriers may include inaccessible buildings, negative attitudes and prejudice, lack of training for SUD counselors, and inaccessible materials.⁴

Conclusions

People with disabilities may have co-occurring SUDs and often face barriers in receiving treatment. Individuals, regardless of disability, should have equal access to treatment facilities and services. In order to bridge the gap to accessing treatment, resources should be made available to service providers and medical providers working with individuals with co-occurring disability and SUD. Substance use counselors should have access to resources and training for providing care to individuals with disabilities. Further, individuals with disabilities should have access to accessible materials regarding the harm associated with substance use and how to access treatment.

Recommendations:

1. Ensure resources on substance use and prevention are accessible and inclusive of people with disabilities.
2. Promote disability education and training for substance use counselors and behavioral health providers.
3. Disseminate information, screening tools, and referral options to disability service providers and partners.

References:

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