



Central Rockies (HHS Region 8)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

The Cultural Accommodation Model of Substance Abuse Treatment (CAM-SAT) for Latino Adolescents

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Acknowledgements

- National Hispanic and Latino ATTC
- Central Rockies ATTC
- University of Utah
 - Utah Addiction Center
 - Dept. of Educational Psychology
- Community Partners
- Funding Sources



Latinos, Substance Use, and Treatment

- 54 million Latinos in the U.S.
 - 1/3 under the age of 18
- Higher rates of substance use disorders (14%)
 - White (12.7%)
 - African American (7%)
- Standard versions of EBTs for substance use disorders
 - were not developed or designed for Latinos
 - not extensively examined for Latino adolescents



Benefit from Culturally Adapted?

- Compared to treatment-as-usual or standard (i.e., non-adapted) version of another of treatment
 - appear to benefit but results are mixed
- Compared to a standard (i.e., non-adapted) version of the same treatment
 - benefits moderated by cultural variables
- Look at prior webinar for more information (Feb, 2015):
 - Central Rockies ATTC webpage, click on Special Topics, scroll down for “*Culturally Adapted.....*”



What is the CAM-SAT?

- Cultural Accommodation Model for Substance Abuse Treatment (CAM-SAT)

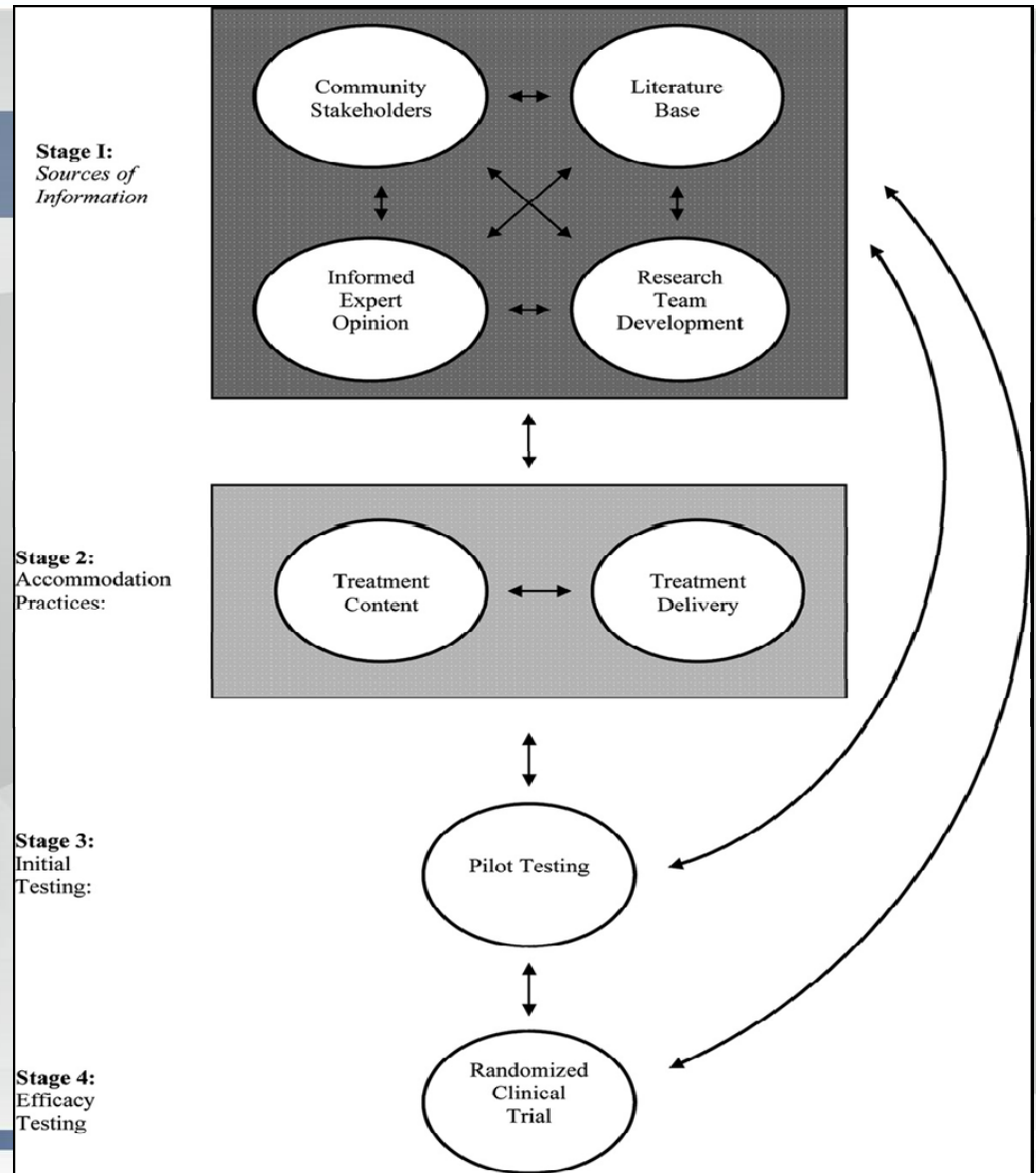
Four Stages:

- Sources of Information
- Accommodation Practices
- Initial Testing
- Comparative Testing

Source: Burrow-Sanchez, et al., 2011



Cultural Accommodation Model for Substance Abuse Treatment (CAM-SAT; Burrow-Sanchez et al., 2011)





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CAM-SAT and Clinical Trials?





Overview of VIDA Study

- Study 1: Focus Groups
Goal: development of culturally accommodated treatment
- Study 2: Pilot Study, 35 Latino Adolescents
Goal: feasibility testing
- Study 3: Randomized Clinical Trial, 70 Latino Adolescents
Goal: test of intervention efficacy



VIDA: Study 1

- **Focus Groups**
 - **Local Latino Community:**
 - Latino Parents
 - Latino Adolescents
 - Latino Community Leaders
 - **Juvenile Justice:**
 - Probation Officers
 - **Substance Abuse Providers:**
 - Therapists

Source: Burrow-Sanchez et al., 2011



VIDA: Study 1

- ▶ Perspectives on:
 - Latino adolescents
 - Substance Abuse Treatment for Latino Adolescents
 - Latino Families
 - Acculturation
 - Ethnic Identity

Cultural
Variables

- ▶ Major Themes:
 - Family
 - Acculturation
 - Ethnic Identity
 - Substance Abuse Treatment
 - Barriers to Treatment

Source: Burrow-Sanchez et al., 2011



Major Theme	Subtheme	Accommodation Practice	Examples
Ethnic Identity	ID of self; lack/loss of self; importance of ethnic ID	Treatment Content	Development of new module; therapist discusses issues during treatment
Family	Parental involvement and support; family protective and risk factors	Treatment Content and Delivery	C: Infused role-plays with relevant family situations D: Increased contact with parents
Barriers to Services	Cost; work and family obligations; language difficulties; services not welcoming	Treatment Delivery	Bilingual staff interacting with parents/adolescents; scheduling based on needs of family; bus tokens; location

Source: Burrow-Sanchez et al., 2011

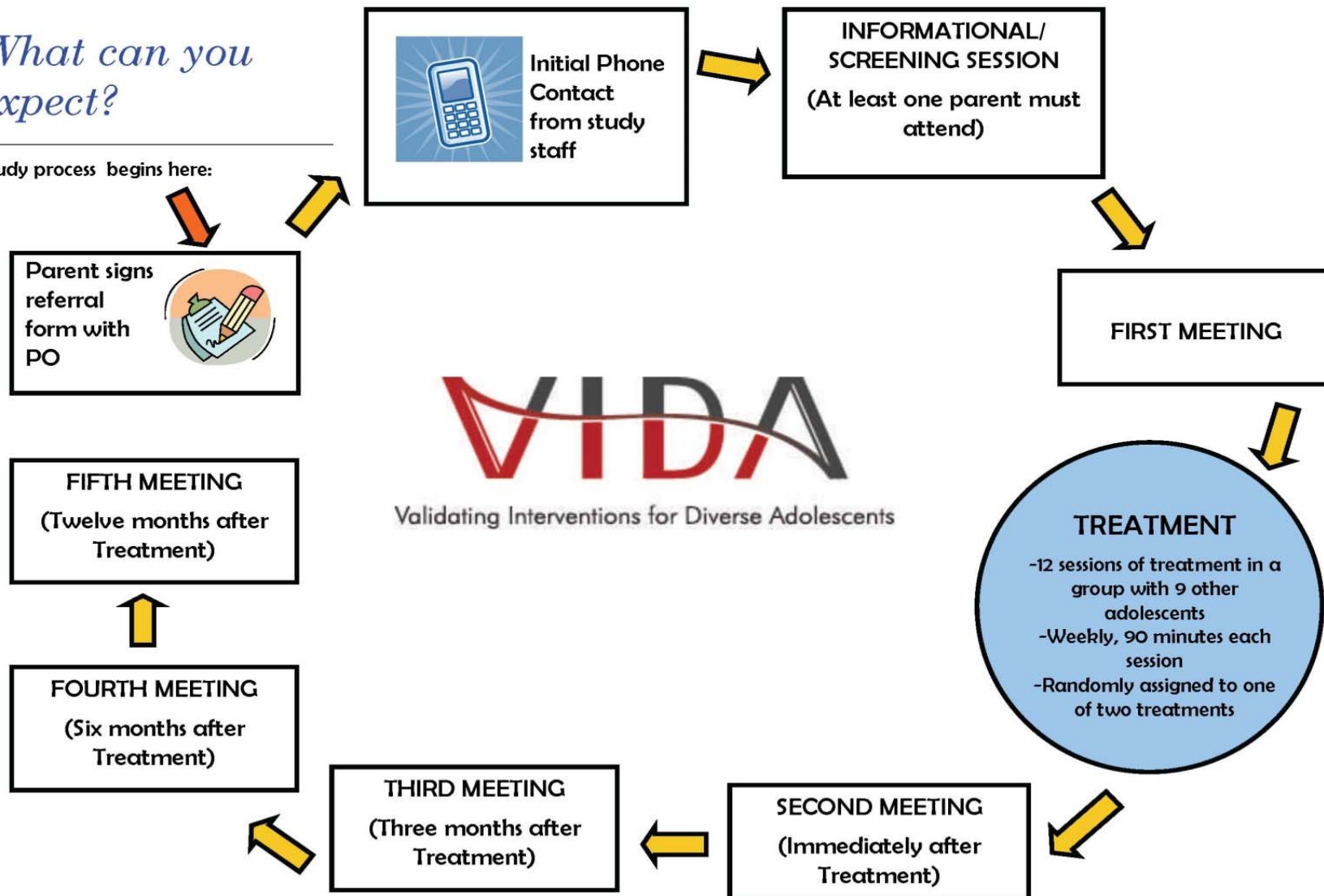


VIDA: Practical Issues

- Language
 - Adolescents, Parents and Study Staff
- Recruitment
 - Social Validity
- Engagement and Retention
 - Reasons to continue involvement

What can you expect?

Study process begins here:



Assessment Meetings will last around 2 hours and participants will be compensated for their time.

Please contact us if you have any questions or want more information!



VIDA: Studies 2 and 3

- Treatment
 - Standard Cognitive Behavioral Treatment (S-CBT)
 - *Cognitive-Behavioral Coping Skills Therapy Manual*
(Kadden et al., 1992)
 - Accommodated Cognitive Behavioral Treatment (A-CBT)
 - Integration of cultural elements into treatment content and delivery (Burrow-Sanchez et al., 2011)
- Delivery
 - Small group-based (6-10 adolescents)
 - 1 ½ hour weekly sessions over 12 weeks
 - Community Center
 - Bilingual doctoral student therapists

Sources: Burrow-Sanchez & Wrona, 2012; Burrow-Sanchez et al., 2015

VIDA – Treatment Content

Session	Standard	Accommodated
1	Intro and Engagement	Intro and Engagement
2	Problem Solving	Problem Solving
3	Decision Making Chains	Decision Making Chains
4	Problem Solving Maps	Problem Solving Maps
5	Coping with Cravings/Urges	Coping with Craving/Urges
6	Communication Skills	Ethnic Adjustment and Identity
7	Drug Refusal Skills	Communication Skills
8	Relapse Prevention	Drug Education and Refusal
9	Anger Management	Relapse Prevention
10	Mood Management	Anger Management
11	Social Support	Mood Management
12	Skill Review and Termination	Skill Review and Termination

VIDA – Treatment Delivery

Session	Standard	Accommodated
Pre	Phone Contact	Phone Contact and Mailings
1	Attendance Reminder Call (ARC)	ARC and Post Session #1 Call, Mailings
2	ARC	ARC
3	ARC	ARC and Post Session #3 Call, Mailings
4	ARC	ARC
5	ARC	ARC
6	ARC	ARC and Post Session #6 Call, Mailings
7	ARC	ARC
8	ARC	ARC
9	ARC	ARC and Post Session #9 Call, Mailings
10	ARC	ARC
11	ARC	ARC
12	ARC	ARC and Post Session #12 Call

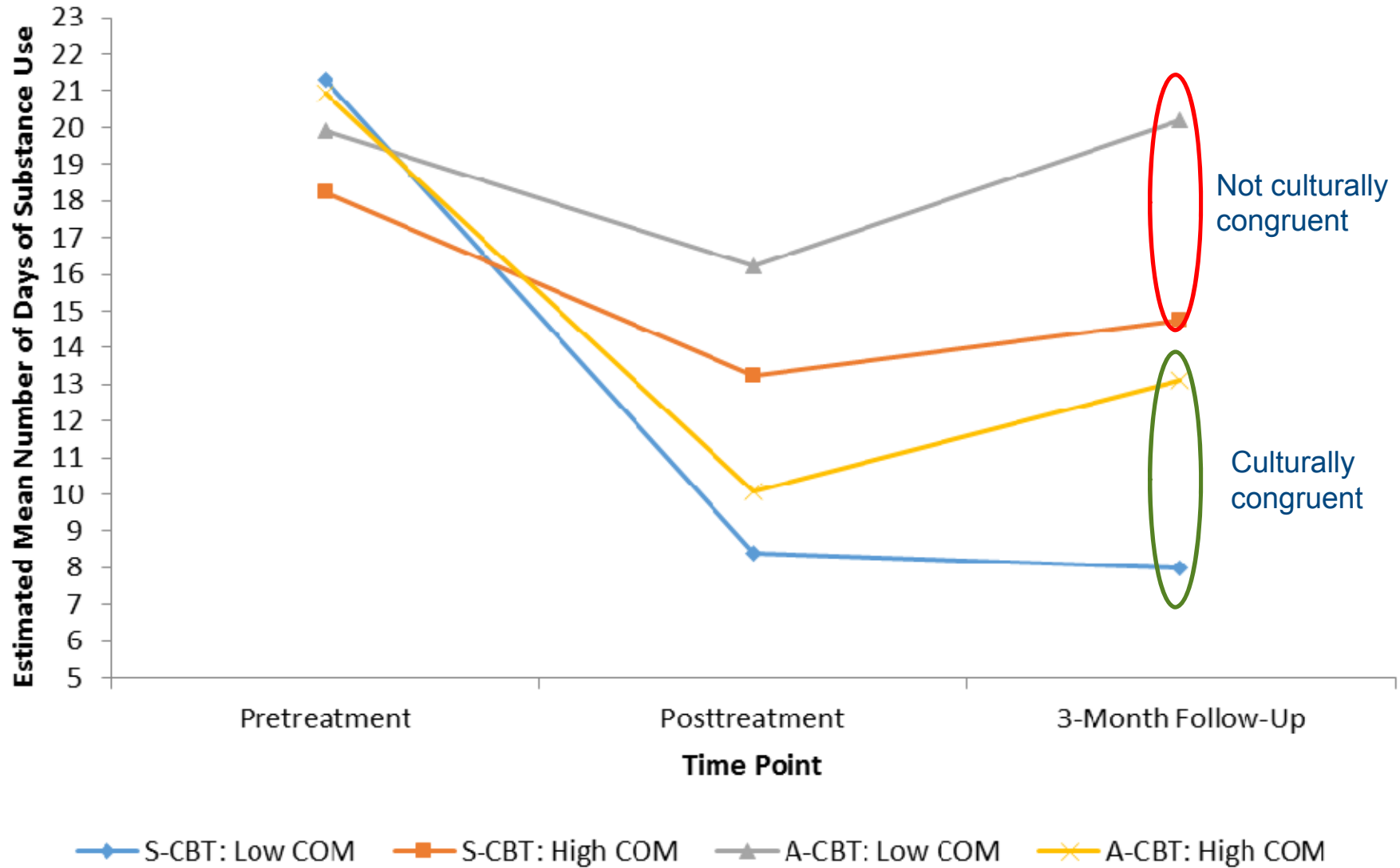
Demographic Variable	S-CBT (n = 36)	A-CBT (n = 34)
Adolescents		
Age	15.31 (1.28)	15.09 (1.19)
Male	88.9%	91.2%
Language Spoken at Home:		
Spanish	58%	85%
English	28%	9%
Both	14%	6%
Birth Country:		
U.S.	69%	53%
Mexico	28%	44%
Other	3%	3%
Parents		
Mother Birth Country:		
Mexico	67%	82%
U.S.	25%	9%
Other	8%	9%
Father Birth Country:		
Mexico	78%	85%
U.S.	6%	3%
Other	16%	12%
Annual Family Income:		
25,000 or less	72%	71%
25,000 - 45,000	20%	23%
45,000 or more	8%	6%
Did not answer	0%	3%



VIDA: Outcomes for Study 3

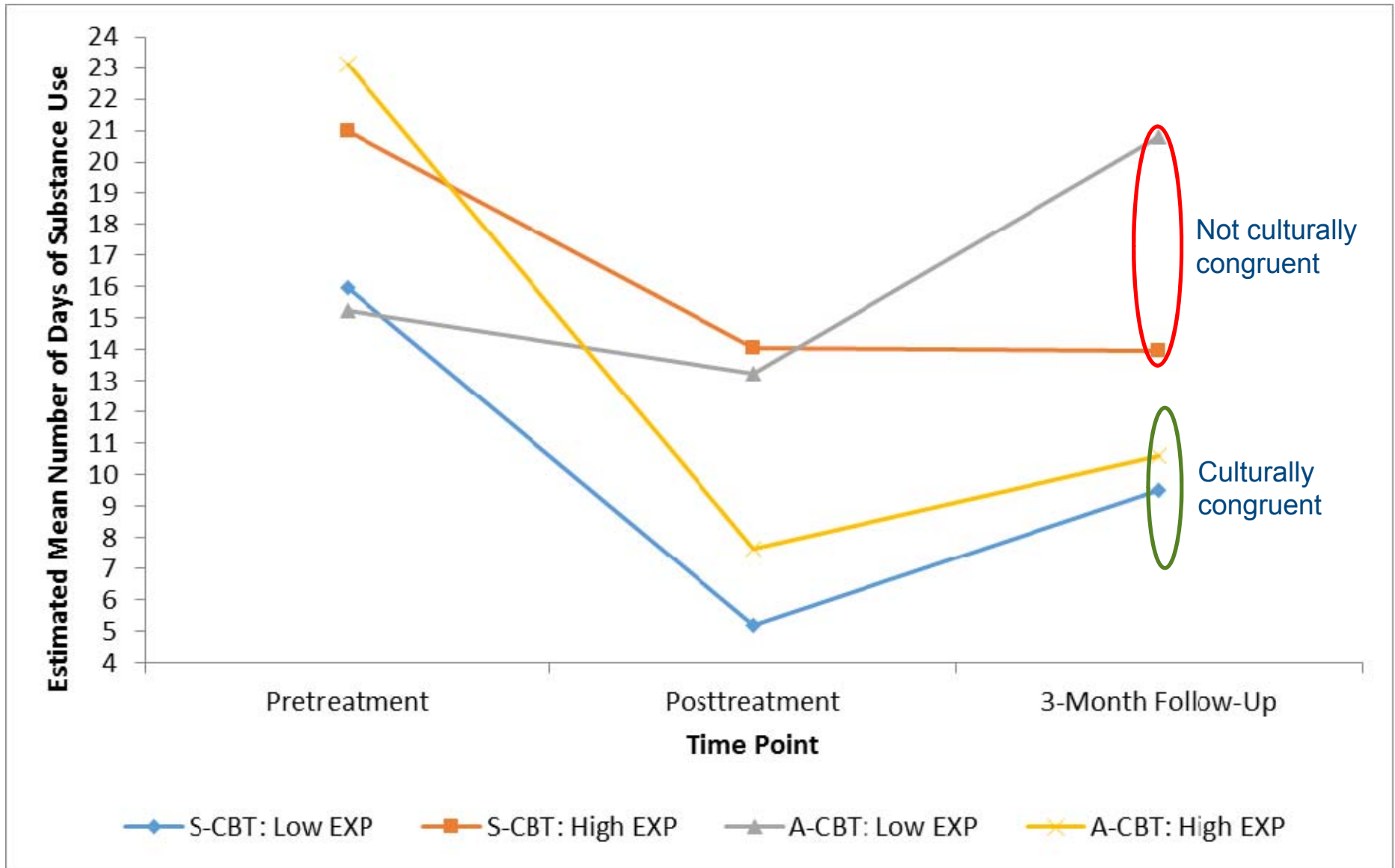
- **Retention:**
 - 73% treatment completion and 84% T2/T3 assessments
 - 67% for S-CBT and 79% for A-CBT (Tx Comp)
- **Attendance:**
 - S-CBT=10.42 (SD=1.14); A-CBT=10.59 (SD=1.05)
- **Substance Use Levels:**
 - **Time:** decrease in substance use across time for both group
 - **Time by Group:** change in substance use was not different by group across time
 - **Moderators:** change in substance use across time was moderated by cultural variables

Commitment Moderator



S-CBT = Standard Cognitive-Behavioral Treatment; A-CBT= Accommodated Cognitive-Behavioral Treatment; COM = Commitment subfactor of ethnic identity.

Exploration Moderator



S-CBT = Standard Cognitive-Behavioral Treatment; A-CBT = Accommodated Cognitive-Behavioral Treatment; EXP = Exploration subfactor of ethnic identity

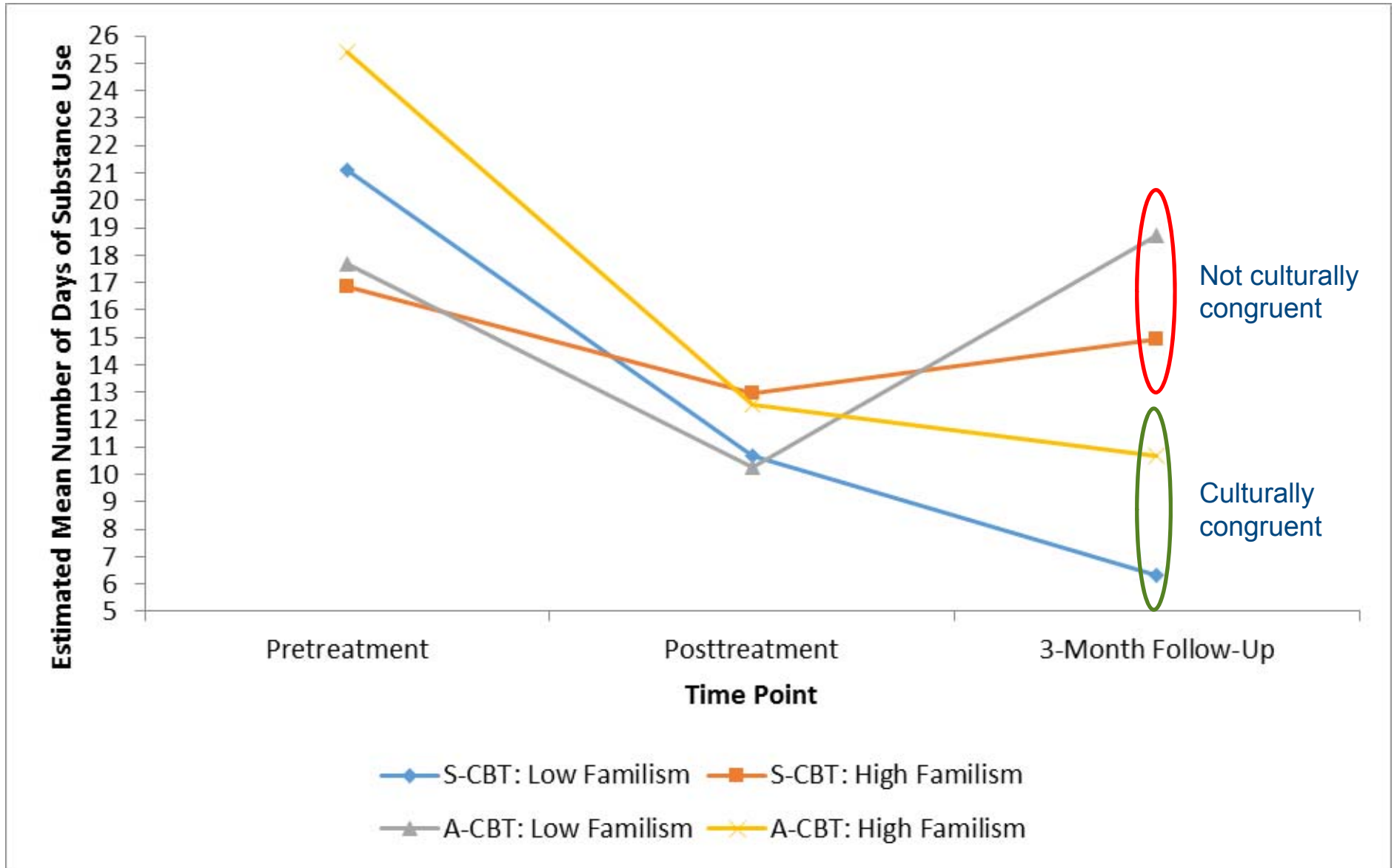


Major Points for Ethnic Identity

- Substance use outcomes were better when:
Ethnic identity and treatment were culturally congruent
 - Low ethnic ID and standard treatment
 - High ethnic ID and adapted treatment
- Substance use outcomes were worse when:
Ethnic identity and treatment were not culturally congruent
 - Low ethnic ID and adapted treatment
 - High ethnic ID and standard treatment

Source: Burrow-Sanchez et al., 2015

Familism Moderator



S-CBT = Standard Cognitive-Behavioral Treatment; A-CBT = Accommodated Cognitive-Behavioral Treatment.



Major Points for Familism (Parent)

- Substance use outcomes were better when:
Familism and treatment were culturally congruent
 - Low familism and standard treatment
 - High familism and adapted treatment
- Substance use outcomes were worse when:
Familism and treatment were not culturally congruent
 - Low familism and adapted treatment
 - High familism and standard treatment

Source: Burrow-Sanchez et al., 2015



References

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THANKS FOR LISTENING!!