Integrated Treatment of Substance Use Disorders and Trauma Experiences: The Women of Worth (WOW) Program

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Background
Women who seek treatment for substance use disorder (SUD) are more likely than US women as a whole to have post-traumatic stress disorder (PTSD). Seminal research indicates that up to 59% of women with SUD may be dually diagnosed with PTSD. Treatment for SUD has historically been siloed in separate systems from mental health treatment. Thus, many clinicians are not prepared to treat dually diagnosed women. This fact has implications for clients with PTSD as they tend to have poorer SUD treatment outcomes than their peers. Given the propensity for trauma histories in women, treating PTSD may be indicated for SUD to be managed effectively.

Objective
This study sought to examine the implementation, service quality, and client effectiveness outcomes of the Women of Worth program, an integrated SUD and PTSD treatment program. This study focuses on client effectiveness outcomes.

Methods
The study was a single-group design, and measures were administered at six time points, with the largest series of instruments administered at baseline, 12 weeks (treatment midpoint), and 24 weeks (treatment completion). Adult women with SUD in need of IOP services were eligible for enrollment. Priority was given to pregnant/parenting women and women who were at risk of homelessness/homelessness. The primary outcome measures included substance use in the preceding 30 days as measured by the addiction severity index (ASI), psychological trauma symptoms in the past 30 days as measured by the PTSD Checklist – Civilian Version for DSM-IV (PCL-C), and problems experienced as a result of substance use as measured by the Short Inventory of Problems (SIP-21). Demographic measures were also collected. Descriptive statistics were used to analyze data, and the Friedman Test, a nonparametric statistic similar to repeated measures ANOVA, was used to measure client outcomes.

Results
Most women in the study (N=86) were white (70.4%), unemployed (84.6%), had minor children (61.7%), and were an average of 39 years old (SD=10.5). At baseline, 67.9% of women screened positive for post-traumatic stress disorder and alcohol, cocaine, and opiates were the predominant types of substances used.

Conclusion
After 24 weeks of treatment, reductions in days of substance use over time (F(4, 22) = 10.67, p < .001), psychological trauma symptom severity (F(4, 22) = 6.65, p < .05), and substance-related problems (F(4, 22) = 6.4, p < .05), were all statistically significant.

Conclusions
The WOW program outcomes were both clinically and statistically significant. At treatment completion, the median reported psychological trauma symptom severity score was below the recommended clinical value of 38.1 As predicted, substance use subsequently decreased with women reporting median values of 0 for substance use and substance-related problems in the prior 30 days.

As next steps, the study is adding measures related to both children’s outcomes and parenting due to the family-centered nature of the programming. Additionally, while trauma symptom severity scores at the conclusion of the study were low, the range of scores was somewhat large (IQR of 38). Future recommendations include providing additional resources/training to continue to address the psychological trauma symptoms that underlie SUD.

References

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