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A breakthrough in addiction treatment

Amaro and Nieves collaborated on new treatment. Photo by Craig Bailey.

January 5, 2010

A new substance abuse treatment model for women, developed by Northeastern's Institute on Urban Health Research in collaboration with the Boston Public Health Commission, shows superior outcomes when compared to standard addiction treatment methods.

Known as the Boston Consortium Model (BCM), the novel approach toward treating women with coinciding drug addiction, abuse and mental health disorders was shown through a six-year study to significantly improve patients' physical and mental well-being.

The BCM is featured on the Web site of the Substance Abuse and Mental Health Services Administration, a division of the U.S. Department of Health and Human Services — a status it was accorded only after a rigorous two-year review of the model by a panel of national experts.

What makes the BCM approach unique, according to Institute on Urban Health Research director Hortensia Amaro, is that it links several critical factors in the patients' experience.

"Women with drug addiction disorders have high rates of mental illness and a history of childhood and adult physical and sexual abuse, which are often both precursors to and consequences of drug abuse," said Amaro, an associate dean and professor in the Bouvé College of Health Sciences who led the research and program development.

The BCM takes a multi-pronged approach, including pharmacological and behavioral treatment for addiction, mental illness and trauma. Additionally, workshops in leadership, economic planning, family reunification and parenting allowed participants to build the skills necessary for a successful recovery.

Women who participated in the integrated BCM program showed superior long-term benefits when compared to those who underwent traditional substance abuse treatment. Participants reported fewer mental health and post-traumatic stress symptoms, fewer HIV risk behaviors and more power in decision making with their partners at both the 6- and 12-month marks after completing the program. In addition, BCM intervention patients had higher drug abstinence rates.

For Rita Nieves, the Boston Public Health Commission's director of the bureau of addiction prevention, treatment and recovery support services, the program offers participants a unique opportunity to overcome their challenges.

"The unique practice-research partnership between the commission and the institute allowed us to create and test this model," said Nieves. "The data from the research shows significant gains for the participants, and we hope that this model will be used by other providers across the country."

View the program model: http://www.nrepp.samhsa.gov/programfulldetails.asp?PROGRAM_ID=271

For more information about Northeastern's Institute on Urban Health Research, please visit www.northeastern.edu/bouve/research/IUHR/

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