

Bureau of Justice Assistance Bulletin

Nancy E. Gist, Director

La Bodega de la Familia: Reaching Out to the Forgotten Victims of Substance Abuse

by Carol Shapiro, Project Director, La Bodega de la Familia

Drug abuse hurts many people, not just the addict. It hurts the grandmother whose grandchild steals from her. It hurts the wife whose husband beats her when he gets high. It hurts the child whose addicted parents can't care for him. It hurts the intravenous drug user's infant, born addicted to drugs or infected with HIV. It victimizes every

"Coping with the problems of an addicted family member puts a strain on any family. Imagine how much harder it is when that family is struggling in poverty." Carol Shapiro, Project Director, La Bodega de la Familia

relative, friend, and neighbor who watches helplessly as a person he or she cares about relapses.

Unfortunately, most drug addiction programs focus exclusively on the user, overlooking these hidden victims of drug abuse. In 1996, New York City Mayor Rudolph Giuliani publicly supported the opening of La Bodega de la



La Bodega's storefront, painted by famous New York City artist Chico, gave the center instant recognition in the community.

Familia ("the family grocery"), a drug crisis center in Manhattan's Lower East Side, which includes addicts' families in the drug treatment process. The center, operated for the city by the Vera Institute of Justice, is demonstrating that a supportive family is a drug user's best hope for recovery.

Recent Criminal Justice Responses to Substance Abuse

Socioeconomic status determines the drug treatment options available to a family seeking help for one of its members. For middle- and upper-income



Americans, substance abuse treatment is available through private insurance and the health-care system. For low-income families, however, substance abuse treatment primarily follows a drug user's arrest and often ignores the needs of the drug user's family.

"The Federal Government works best when it supports innovation at the local level." Nancy Gist, Director, Bureau of Justice Assistance

Nearly 25 percent of New York State prison inmates have committed no other crime aside from possessing or selling drugs. African-Americans and Latinos have felt the brunt of this criminal justice-driven response to drug problems. The disproportionate increases (12.3 percent a year on average for Latinos and 9.4 percent a year for African-Americans, compared with 7.6 percent for whites) in State prison populations largely reflect sentencing patterns for nonviolent drug offenses.

Recently, the criminal justice system has started to place drug offenders into drug treatment instead of traditional incarceration. Drug-use patterns and criminal activity attributable to the influx of crack in the late 1980s spawned a proliferation of alternative responses to substance abuse within the criminal justice system. Through these alternatives, many more low-income drug users began receiving treatment. These responses included residential and outpatient treatment as an alternative to incarceration, treatment for incarcerated offenders, and drug and community courts.

Although drug and community courts try to provide some social services to the families of offenders, the components of the criminal justice system largely ignore the important role families play in helping a substance abuser recover. John Goldkamp, in a 1994 article, argues "The attempt to integrate disparate elements [of criminal justice and drug treatment] has meant joining two perspectives accustomed to different

methods and sometimes competing aims regarding drug-involvement and its reduction" (Goldkamp, 1994).

Focusing solely on the needs of individuals leaves the families of drug offenders—the people who can make the most difference in changing an offender's behavior—with little support and misses a rare opportunity to interrupt the multigenerational cycle of drug use and criminal behavior. Families of drug offenders, especially in lowincome neighborhoods, desperately need the support of the criminal justice system. Their victimization can be severe,

including financial ruin, physical abuse, and emotional trauma.

La Bodega's Unique Approach: Family Case Management

La Bodega uses family case management (FCM) in its counseling activities. This approach focuses on the entire family, not only on the substance abuser involved with the criminal justice system. Case managers help friends and families support their loved ones in outpatient treatment and attend to related familial problems and concerns.

Drug Addiction's Devastating Impact on Families

An estimated 13 million American children live with parents who have reported using illicit drugs in the past year, and more than 6 million live with parents who have reported using illicit drugs in the past month (National Institute on Drug Abuse, 1994). When parents have serious substance abuse problems, their children suffer the consequences of living in unhealthy, chaotic environments. Parents who seriously abuse drugs commonly are unable to fulfill major obligations at home and at work. And some children are forced into foster care when a substance-abusing parent is incarcerated. Numerous studies have shown that substance abuse is often a critical factor in these harmful family situations.

- * Alcohol abuse is the leading cause of family violence. More than 50 percent of spousal murders are drug- or alcohol-related, and parents with substance abuse problems show much higher rates of abusive and neglectful behavior toward their children than do other parents. One study estimated that from 60 to 80 percent of children who are abused and neglected live with substance-abusing families (National Institute of Justice, 1994).
- * Drug abuse is one of the most common factors leading to a child's entry into the welfare system. In 1994, caseworkers nationwide reported that they knew of parental substance abuse in at least one-third of the families they were serving (Haack, 1997).
- * At least half of the 104,000 drug- and alcohol-involved female inmates in the United States had minor-age children living with them before they entered prison (National Center on Addiction and Substance Abuse, 1998). Many of these women receive little or no help from the children's fathers, lack supportive family and social networks, and have limited or no financial resources.
- * The number of women in drug treatment programs has more than doubled in the past two decades (Substance Abuse and Mental Health Services Administration, 1996).

They engage family members in the FCM process by developing an action plan. This plan proposes solutions that capitalize on family members' strengths and identifies specific actions that can help a substance abuser under criminal justice supervision remain in treatment. On average, La Bodega maintains a caseload of 45 families, with approximately 4 members per family.

FCM incorporates both prevention and treatment by including services that address the needs of the substance abuser as well as those of the substance abuser's family (Olsen, 1995). La Bodega's bilingual staff use a comprehensive mix of services, including assessment, treatment planning, referrals, monitoring, advocacy, counseling, and structural and instrumental social support, to tend to the multiple needs of substance abusers and their families (Rotham, 1991).

"Part of the problem is that the justice system and conventional treatment providers have not involved family and friends—the user's best hope for regaining health and stability—in the recovery process."

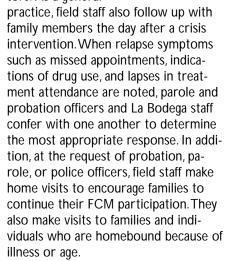
Christopher Stone, Director, Vera Institute of Justice

Traditionally a prototype of treatment with the chronically mentally ill, FCM has emerged recently as an important approach to substance abuse treatment (Rotham, 1991). Preliminary evaluations of FCM with drug-involved arrestees show that it has a positive effect on a range of outcomes, including reducing recidivism, increasing retention in treatment, reducing HIV-related risk behaviors, and reducing employment problems (Siegal et al., 1996).

Field Work and 24-Hour Sup- port. One element that distinguishes
La Bodega's FCM from other treatment programs is the program's field staff, who work with clinical staff to extend services to participants' in their homes and in the community. Field counselors

provide 24-hour support for families dealing with drug-related emergencies, which can include encounters with police, drug abuse relapses, domestic

violence situations, evictions, truancies, and health crises. Field staff also follow up on referrals made to clients and serve as their advocates in court or with enforcement agents such as probation and parole officers, child welfare caseworkers, or public housing investigators. As a general



Walk-in Support and Prevention Services. La Bodega offers a series of walk-in services that include workshops and support groups, access to computers and the Internet, information about health and housing services, referrals to primary and mental health care, job training, and housing and employment information. Walk-in support gives everyone residing in La Bodega's catchment area a way to learn about FCM and deal with the substance abuse problems of a family member without feeling threatened or stigmatized. Walkin services are also used by La Bodega's case managers to make sure families who no longer need the intensive attention of FCM still receive ongoing

assistance. For example, La Bodega's Monday night group meeting is designed to provide a safe forum for parents, guardians, and spouses of



Children working on homework at La Bodega after school.

substance users to discuss issues and concerns about addiction. Many participants are former FCM clients whose loved ones are in treatment and no longer living in crisis.

Using the Natural Support System

Recent studies show that substance abusers supported by caring family and friends are more successful than others in completing their outpatient treatment (Currie, 1993). An individual's problems are more easily understood and solved within the context of his or her interpersonal relationships. At times, relationships with relatives and neighbors can contribute to a user's addiction. However, in many instances, relatives and neighbors can help a drug user during the treatment process. Latino communities, such as those served by La Bodega, historically have had strong support systems based partly on the extended family (Delgado and Humm-Delgado, 1982). By providing counseling services that strengthen these existing networks, La Bodega can help ensure successful completion of a substance abuser's outpatient drug treatment program.

La Bodega's FCM approach provides an opportunity to improve treatment and realize prevention goals. Through constant

La Bodega de la Familia at a Glance

- * La Bodega de la Familia means "the family grocery." It opened in October 1996, taking its name from a grocery store that had once occupied the same storefront at C and Third Streets in an area of Manhattan's Lower East Side called the Loisaida by its Hispanic residents.
- * A violent confrontation between police and local drug dealers at the former grocery store in 1995 resulted in the death of one person and the near-fatal shooting of police officer Keith Prunty, who was left paralyzed. More than 30 businesses donated services and construction materials to transform the site.
- * La Bodega's annual budget of \$850,000 is funded through a collaboration between Federal and city government and the nonprofit sector. The center is operated by the Vera Institute of Justice, an organization that has worked since the mid-1960s to develop innovative solutions to crime and drug addiction. It is funded by the city of New York, Office of the Mayor's Criminal Justice Coordinator, and the Bureau of Justice Assistance.
- * At any one time, La Bodega provides assistance to more than 45 families (with an average of 4 members per family) through its family case management services. The center's client base is largely referred by police, probation, and parole officers; Lower East Side residents; and community-based organizations.
- * In its first year, La Bodega enrolled more than 90 local families in family case management. More than 350 individuals living in Manhattan's Lower East Side have been successfully treated through the center's walk-in and prevention services.

contact with both the substance abuser and his or her family, La Bodega proactively works to prevent the problems associated with a relapse or failure in treatment. The center's case managers, for example, will notify parole officers when a parolee relapses to divert a parole violation and will collaborate with the officer to find an appropriate treatment option. Moreover, La Bodega works to prevent the cycle of drug addiction and crime from being passed down through generations by reducing the negative effects of a user's incarceration on the rest of his or her family. The vast majority of La Bodega's FCM families have a history of multigenerational substance abuse (more than 80 percent) and many have been involved with the criminal justice system (46 percent). By addressing the drug abuser's family's needs, La Bodega hopes to break this cycle of abuse and crime.

Working in Partnership With Government

La Bodega's FCM approach is unique because it recognizes and responds to a low-income family's need for help when maneuvering through the criminal justice system and other complex public systems. Judges, prosecutors, and parole and probation officers are more likely to allow a substance abuser to complete a course of treatment in spite of problems such as relapse, repeat offenses, or irregular attendance if a family member is taking some responsibility for him or her (Galanter, 1993). La Bodega provides a vehicle for law enforcement agencies to stop the cycle of relapse and incarceration.

"While anti-drug abuse efforts often focus on the drug user only, La Bodega de la Familia will widen the focus to include help for the entire family."

Rudolph Giuliani, Mayor,
New York City

La Bodega partners with local government and community representatives to identify appropriate treatment options that incorporate a drug abuser's family in the recovery process. By keeping appropriate parolees out of prison and in the community, La Bodega hopes to reduce the family tensions caused by incarceration, increase parolees' chances for recovery by helping them connect with their families, and help families to see parole officers as an ally in the recovery process.

Administrators at La Bodega work closely with officials from the city's police and probation departments and the State parole division to encourage the use of family case management as an alternative to punitive responses. At the local level, La Bodega staff have cultivated strong relationships with precinct police, probation and parole field staff, social workers and investigators from the city's child services department and housing authority, school officials, and local health-care providers. These relationships permit the quick referral of drug-abusing family members for immediate services and allow La Bodega's field staff to track the substance abuser's progress in treatment.

La Bodega's willingness to work with government agencies has increased the confidence of the local criminal justice system that the center's approach can improve the success rate of outpatient drug treatment. Parole and police officers regularly refer individuals at risk of a parole violation to La Bodega. La Bodega also advocates for the early release of drug offenders with HIV and AIDS who would fare better in community treatment.

Although many of La Bodega's families have experience with government



agencies, they are often ashamed of their loved ones' substance abuse and criminal histories. The stigma they believe they will suffer often prevents individuals from seeking assistance outside the family, particularly for health-care and social services needs (Molina and Aguirre-Molina, 1994). Although more than half of the center's families have a member in mandated drug treatment, La Bodega remains a nonmandated, neutral option for its government partners, which complements the statutory requirements of parole and probation supervision. Family members and law enforcement officials have come to rely on La Bodega. In one case, a field representative introduced an Assistant District Attorney (ADA) to the family of a parolee who had violated his parole stipulations by relapsing repeatedly. His family was involved with La Bodega and was willing to support him in outpatient drug treatment. The ADA and the parole officer agreed to place the defendant in a short-term detoxification program on the condition that outpatient treatment would follow along with continued family support.

Keeping Recovery in the Neighborhood

In choosing a site to test this program, La Bodega planners sought a community with strengths as well as needs—a neighborhood with institutions and programs in place to address the myriad problems that arise for substance abusers and their families and friends. The Loisaida, a neighborhood in Manhattan's Lower East Side, is filled with community-based organizations, settlement houses, and health-care facilities and is a major consumer of criminal justice resources. The neighborhood is permeated with tangible evidence of the harmful effects of drug use on families—crime such as theft and domestic violence and drug-related health problems such as low birth weight, babies born addicted to drugs, and high rates of HIV infection and AIDS. The majority of La Bodega's participants are Hispanic, an ethnic group disproportionally represented in State prisons in relation to other ethnic groups (Bureau of Justice Statistics, 1996).

Historically, communities such as the Loisaida have failed to fully use the

Word of mouth in the Loisaida is integral to La Bodega's success. La Bodega relies on its reputation within the community to promote participation. The number of referrals to the center from neighborhood residents is increasing. La Bodega also enlists the community



Site of La Bodega de la Familia before its renovation.

social services available within their neighborhoods and have a history of resisting interventions from outside organizations. Engaging members of minority communities can be facilitated by having a staff similar to La Bodega's—ethnically diverse, culturally sensitive, and bilingual (Lecca, Gutierrez, and Tijerina, 1996).

A shortcoming of some residential drug treatment programs is that they take drug users out of their community and treat them away from the environment that precipitated the drug-abusing behavior. La Bodega's planners at the Vera Institute of Justice saw the importance of placing La Bodega within the community it serves so that staff could draw upon the resources of not only existing heath clinics, hospital detoxification facilities, religious groups, settlement houses, and counseling services, but also local residents. La Bodega received unanimous approval from the local community board to place its drug crisis center in Loisaida.

in evaluating its services. The Community Advisory Board, a guiding body comprising local service providers, academics, government partners, and Bodega participants, enables La Bodega to assess how well it complements existing local services, how services can be modified to better meet the needs of neighborhood residents, and how La Bodega can more effectively use government systems and resources to serve the families of substance-abusing offenders. The Community Advisory Board also plays an important role in developing programs and workshops that empower participants, teaching them to solve their own problems and lead by example in their homes and in their communities.

The Challenge for the Future

Whether measured by levels of attention or accomplishments, few controversies have rivaled the recent debates



The Road to Recovery: One Family's Story

The Family: Sam, father, 26; Maria, mother, 32; David, son of Maria, 11; Luis, son, 8; Monique, daughter, 7; Frances, mother of Maria, 50; Eleanor, mother of Sam, 44; and Paul, brother of Sam, 21.

Before seeking help from La Bodega, Sam had been incarcerated for 18 months at a Shock Incarceration Unit for possessing and selling drugs. He had a recent relapse after 8 months of sobriety; he was using drugs in violation of his parole. His parole officer referred him to La Bodega for family counseling, diverting an arrest for relapse. Sam was in need of drug treatment, education, employment, health-care coverage, a primary care physician, and family counseling. He was concerned and embarrassed about the pain his addiction and incarceration had caused his family, particularly his children.

Sam's family has struggled with substance abuse and criminal justice problems for many years. Sam's mother, Eleanor, began drinking alcohol at a young age and has had periods of heavy drinking over the past 25 years. Eleanor's eldest son, Adam, was killed 9 years ago in a drug-related driveby shooting. There is considerable conflict between Eleanor and her two surviving sons. Her relationship with Sam is especially strained; she is angry and disappointed about his substance abuse and incarcerations. Paul, her youngest child, began using marijuana as an early teen. He was convicted of assault with a deadly weapon in August 1997 and sentenced to 5 years in jail. Sam began using marijuana when he was 15 and heroin when he was 17. Sam and Paul have been arrested numerous times for possession of drugs, assault with a deadly weapon, robbery, and grand theft auto. The majority of the convictions were drug related.

Since his release from prison, Sam has worked occasionally at a relative's shop. He lives with his wife, Maria, her son, David, and their daughter, Monique, in a New York City public housing apartment. Maria works part-time as a sales representative and is the family's primary source of income. Sam has no contact with his 8-year-old son from a previous marriage, who lives with his mother. Maria's mother, Frances, who has been diagnosed with cancer, is an important source of support for the family. While Sam was incarcerated, she helped Maria when David began getting into fights at school. Monique attends school regularly and has not begun to act out against any member of her family.

Keeping the Family Intact

Rather than focus narrowly on Sam's addiction, La Bodega's counselors sought to help the whole family by involving each member in two types of family services—group sessions to address problems affecting the family as a whole and individual sessions to address each person's needs. La Bodega also supports the family's daily needs. For example, staff worked with David's school principal to deal with David's persistent fighting in school.

Sam, Maria, David, and Monique began attending counseling sessions at La Bodega as a group. Sam and Maria also participate in individual sessions. Sam's case manager helped him enroll in a detoxification program. The case manager had difficulty placing Sam in a program because he lacked Medicaid coverage. After completing the detoxification program, Sam began his parole-

mandated outpatient drug treatment. La Bodega staff held periodic conferences with his parole officer and drug treatment counselors to discuss his progress and compliance with supervision.

The Family's Progress

Eleanor and Sam are working on reestablishing a relationship that is positive and supportive. Eleanor has reduced her alcohol consumption but still refuses to participate with La Bodega.

Sam experienced a relapse and contemplated suicide in November 1997. Maria contacted the case manager, who intervened with his parole officer to divert an arrest for parole violation. Given the existing support of Sam's mother-in-law, wife, and children, his parole officer agreed not to violate him. Sam is awaiting approval for Medicaid coverage, after which he will transfer from his current outpatient drug treatment program to more intensive outpatient treatment.

Maria and the children continue to attend sessions and discuss their feelings about Sam's relapse, addiction, and incarceration. They also discuss Frances' cancer treatment.

Goals for the Future

Sam

- Transfer to a new outpatient drug treatment program after Medicaid approval.
- * Find employment.
- Enroll in a GED program.
- Continue to attend family and individual counseling sessions.
- Contact his estranged son, Luis.

Maria

- Continue family and individual counseling.
- Establish support systems to deal with her mother's chronic illness.
- Participate in "Reflejos," La Bodega's family support group for nonusers.

David and Monique

- Continue family counseling sessions.
- * Maintain good attendance and behavior in school.
- * Participate in youth activities.

Eleanor

Become involved in family and individual sessions at La Bodega.

Editor's note:The names of the members of the family discussed in this case study were changed to protect their privacy.

over U.S. drug policy. The criminal justice system is often at the center of these discussions. Acknowledging that singularly punitive policies have been prohibitively expensive and possibly ineffective, criminal justice researchers now search for ways to bring drug users into treatment and break their connections to drugs and crime.

La Bodega is a concept that could be replicated within other existing government and neighborhood services. By researching the effects of FCM on local families and by using a highly distinguished national advisory board to test the efficacy of this new model, La Bodega is learning how family-focused approaches to substance abuse can be implemented most effectively around the country.

If we include addicts' families in the drug treatment process, everyone will have a role: Judges could consider a treatment option such as FCM when sentencing if there is adequate family support; probation and parole officers could consider family-focused options before violating an offender for failures in drug treatment; when appropriate, police officers could seek family solutions instead of relying on arrests to manage family problems; and health-care providers could be sensitive to the likelihood that the substance abuse of one family member is a strong indicator that other family members may be at risk for poor mental and physical health.

The intransigence of the drug and crime problems in this country, marked by endless policy debates, suggests a need for many alternative solutions. Conventional offender-focused programs are one approach. La Bodega's family-centered approach represents an equally viable option—one that may provide a more comprehensive response to the myriad destructive consequences of this persistent problem.

Sources for Further Information

For more information on La Bodega de la Familia, contact:

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