A TREATMENT IMPROVEMENT PROTOCOL

# Addressing the Specific Behavioral Health Needs of Men

# TIP 56

Substance Abuse and Mental Health Services Administration
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**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment

1 Choke Cherry Road
Rockville, MD 20857

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# Consensus Panel

## Chair

**Patrick Reilly, Ph.D.**
Associate Chief
Mental Health Service
Community-Based Outpatient Clinic
Santa Rosa Veterans Affairs
Associate Clinical Professor
Department of Psychiatry
University of California San Francisco
Santa Rosa, CA

## Co-Chair

**William S. Pollack, Ph.D.**
Assistant Clinical Professor
Department of Psychiatry
Director
Harvard Medical School
Centers for Men and Young Men
McLean Hospital
Belmont, MA

## Workgroup Managers

**Gary R. Brooks, Ph.D.**
Professor
Department of Psychology and Neuroscience
Baylor University
Temple, TX

**Thomas E. Freese, Ph.D.**
Director
University of California–Los Angeles
Integrated Substance Abuse Programs
Pacific Southwest Addiction Technology Transfer Center
Los Angeles, CA

**Glenn E. Good, Ph.D.**
Associate Professor
Department of Educational, School and Counseling Psychology
University of Missouri–Columbia
Columbia, MO

## Panelists

**Louis E. Baxter, Sr., M.D., FASAM**
Executive Director
Physicians Health Program
Medical Society of New Jersey
Lawrenceville, NJ

**Rodger L. Beatty, Ph.D., LSW**
Assistant Professor
University of Pittsburgh
Pittsburgh, PA

**Terry Beartusk, B.A., CAS III**
Executive Director
Thunder Child Treatment Center
Sheridan, WY

**Harold O. Braithwaite, Jr., Ph.D.**
Associate Professor and Chair
Department of Psychology
Morehouse College
Atlanta, GA

**John P. de Miranda, Ed.M.**
Executive Director
National Association on Alcohol, Drugs and Disability, Inc.
San Mateo, CA

**Robert K. Edmundson, M.A., M.S.W.**
Assistant Professor
Department of Behavioral Medicine and Psychiatry
West Virginia University
Morgantown, WV

**Natarajan Elangovan, M.D., M.P.H.**
Clinical Director
Meadowview Psychiatric Hospital
Secaucus, NJ

**Thomas L. Geraty, Ph.D., LICSW**
Jamaica Plain, MA

**Jan Ligon, Ph.D., LCSW**
Associate Professor
School of Social Work
Georgia State University
Atlanta, GA

**William M. Liu, Ph.D.**
Assistant Professor in Counseling Psychology
Division of Psychological and Quantitative Foundations
University of Iowa
Iowa City, IA

**Irmo Marini, Ph.D., CRC, CLCP, FVE**
Professor, Graduate Program Coordinator
Rehabilitative Services Program
College of Health Sciences and Human Services
University of Texas–Pan American
Edinburg, TX

**Thomas J. McMahon, Ph.D.**
Assistant Professor
Yale University School of Medicine
West Haven, CT

**Michael Mobley, Ph.D., M.Ed.**
Assistant Professor in Counseling Psychology
Department of Educational, School and Counseling Psychology
University of Missouri–Columbia
Columbia, MO

**Jerry Pattillo, Ph.D.**
Chief, Chemical Dependency Services
Department of Psychiatry
Kaiser Medical Center
San Francisco, CA

**Thomas A. Peltz, M.Ed., CAS**
Therapist/Licensed Mental Health Counselor
Private Practice
Beverly Farms, MA

**David J. Powell, Ph.D.**
President
International Center for Health Concerns, Inc.
East Granby, CT

**Luis B. Rosell, M.A., Psy.D.**
Licensed Clinical Psychologist
LBR Psychological Consultants
Mount Pleasant, IA

**Eddie B. Sample, Jr., M.S.Ed.**
Research Associate
Rehabilitation, Research and Training Center on Drugs and Disability
Wright State University
Trotwood, OH

**Bernard Segal, Ph.D.**
Director
Center for Alcohol and Addiction Studies
University of Alaska–Anchorage
Anchorage, AK

## Addiction Technology Transfer Center Representative

**John Porter**
Technology Transfer Specialist
Northwest Frontier Addiction Technology Transfer Center
Salem, OR

# KAP Expert Panel and Federal Government Participants

**Barry S. Brown, Ph.D.**
Adjunct Professor
University of North Carolina–Wilmington
Carolina Beach, NC

**Jacqueline Butler, M.S.W., LISW, LPCC, CCDC III, CJS**
Professor of Clinical Psychiatry
College of Medicine
University of Cincinnati
Cincinnati, OH

**Deion Cash**
Executive Director
Community Treatment and Correction Center, Inc.
Canton, OH

**Debra A. Claymore, M.Ed.Adm.**
Owner/Chief Executive Officer
WC Consulting, LLC
Loveland, CO

**Carlo C. DiClemente, Ph.D.**
Chair
Department of Psychology
University of Maryland Baltimore County
Baltimore, MD

**Catherine E. Dube, Ed.D.**
Independent Consultant
Brown University
Providence, RI

**Jerry P. Flanzer, D.S.W., LCSW, CAC**
Chief, Services
Division of Clinical and Services Research
National Institute on Drug Abuse
Bethesda, MD

**Michael Galer, D.B.A.**
Chairman
Graduate School of Business
University of Phoenix– Greater Boston Campus
Braintree, MA

**Renata J. Henry, M.Ed.**
Director
Division of Alcoholism, Drug Abuse, and Mental Health
Delaware Department of Health and Social Services
New Castle, DE

**Joel Hochberg, M.A.**
President
Asher & Partners
Los Angeles, CA

**Jack Hollis, Ph.D.**
Associate Director
Center for Health Research
Kaiser Permanente
Portland, OR

**Mary Beth Johnson, M.S.W.**
Director
Addiction Technology Transfer Center
University of Missouri–Kansas City
Kansas City, MO

**Eduardo Lopez, B.S.**
Executive Producer
EVS Communications
Washington, DC

**Holly A. Massett, Ph.D.**
Academy for Educational Development
Washington, DC

**Diane Miller**
Chief
Scientific Communications Branch
National Institute on Alcohol Abuse and Alcoholism
Bethesda, MD

**Harry B. Montoya, M.A.**
President/Chief Executive Officer
Hands Across Cultures
Espanola, NM

**Richard K. Ries, M.D.**
Director/Professor
Outpatient Mental Health Services
Dual Disorder Programs
Seattle, WA

**Gloria M. Rodriguez, D.S.W.**
Research Scientist
Division of Addiction Services
New Jersey Department of Health and Senior Services
Trenton, NJ

**Everett Rogers, Ph.D.**
Center for Communications Programs
Johns Hopkins University
Baltimore, MD

**Jean R. Slutsky, P.A., M.S.P.H.**
Senior Health Policy Analyst
Agency for Healthcare Research and Quality
Rockville, MD

**Nedra Klein Weinreich, M.S.**
President
Weinreich Communications
Canoga Park, CA

**Clarissa Wittenberg**
Director
Office of Communications and Public Liaison
National Institute of Mental Health
Kensington, MD

## Consulting Members

**Paul Purnell, M.A.**
Social Solutions, LLC
Potomac, MD

**Scott Ratzan, M.D., M.P.A., M.A.**
Academy for Educational Development
Washington, DC

**Thomas W. Valente, Ph.D.**
Director
Master of Public Health Program
Department of Preventive Medicine
School of Medicine
University of Southern California
Alhambra, CA

**Patricia A. Wright, Ed.D.**
Independent Consultant
Baltimore, MD

# What Is a TIP?

Treatment Improvement Protocols (TIPs) are developed by the Substance Abuse and Mental Health Services Administration (SAMHSA) within the U.S. Department of Health and Human Services (HHS). TIPs are best practice guidelines for the treatment of substance use disorders. TIPs draw on the experience and knowledge of clinical, research, and administrative experts to evaluate the quality and appropriateness of various forms of treatment. TIPs are distributed to facilities and individuals across the country. Published TIPs can be accessed via the Internet at http://kap.samhsa.gov.

Although each TIP strives to include an evidence base for the practices it recommends, SAMHSA recognizes that the field of substance abuse treatment is continually evolving, and research frequently lags behind the innovations pioneered in the field. A major goal of each TIP is to convey front-line information quickly but responsibly. If research supports a particular approach, citations are provided.

# Foreword

The Treatment Improvement Protocol (TIP) series fulfills the Substance Abuse and Mental Health Services Administration's (SAMHSA's) mission to improve prevention and treatment of substance use and mental disorders by providing best practices guidance to clinicians, program administrators, and payers. TIPs are the result of careful consideration of all relevant clinical and health services research findings, demonstration experience, and implementation requirements. A panel of non-Federal clinical researchers, clinicians, program administrators, and patient advocates debates and discusses their particular area of expertise until they reach a consensus on best practices. This panel's work is then reviewed and critiqued by field reviewers.

The talent, dedication, and hard work that TIPs panelists and reviewers bring to this highly participatory process have helped bridge the gap between the promise of research and the needs of practicing clinicians and administrators to serve, in the most scientifically sound and effective ways, people in need of behavioral health services. We are grateful to all who have joined with us to contribute to advances in the behavioral health field.

**Pamela S. Hyde, J.D.**
Administrator
Substance Abuse and Mental Health Services Administration

**H. Westley Clark, M.D., J.D., M.P.H., CAS, FASAM**
Director
Center for Substance Abuse Treatment
Substance Abuse and Mental Health Services Administration

**Frances M. Harding**
Director
Center for Substance Abuse Prevention
Substance Abuse and Mental Health Services Administration

**Paolo del Vecchio, M.S.W.**
Director
Center for Mental Health Services
Substance Abuse and Mental Health Services Administration

# Executive Summary

This Treatment Improvement Protocol (TIP) is a companion to TIP 51, *Substance Abuse Treatment: Addressing the Specific Needs of Women.* These two volumes look at how gender-specific treatment strategies can improve outcomes for men and women, respectively. The physical, psychological, social, and spiritual effects of substance use and abuse on men can be quite different from the effects on women, and those differences have implications for treatment in behavioral health settings. Men are also affected by social and cultural forces in different ways than women, and physical differences between the genders influence substance use and recovery as well. This TIP, *Addressing the Specific Behavioral Health Needs of Men,* addresses these distinctions. It provides practical information based on available evidence and clinical experience that can help counselors more effectively treat men with substance use disorders.

Historically, standard behavioral health services for substance abuse have been designed with male clients in mind. As the number of women presenting for substance abuse services increased, clinicians began to understand that women had different treatment needs than men, related to differences in their patterns of substance use and their perceptions of both the problem of substance abuse and its treatment. Researchers began to investigate how standard substance abuse treatment in a variety of behavioral health settings can be altered to improve outcomes for women. In the process, they have gained insight into how men's and women's responses to substance abuse and substance abuse treatment differ. These insights can also improve treatment for men. New research in the areas of gender studies and men's studies can help providers understand why men abuse substances and how to address masculine values in treatment.

## Why Are Men at Greater Risk for Substance Abuse?

Men in America today may have advantages that women lack. However, in spite of these advantages, men die at a younger age on average than women; men are also more likely than women to have a substance use disorder, to be incarcerated, to be homeless as adults, to die of suicide, and to be victims of violent crime. Conversely, men are *less* likely than women to seek medical help or behavioral health counseling for any of the problems they face. These significant problems, combined with men's tendency to avoid addressing them, call for a response from behavioral health treatment providers. It is the consensus panel's hope that this TIP will begin to focus providers' and researchers' attention on the diverse

problems that men with substance use disorders face and to serve as both an introduction to the topic and a summary of what is known regarding the subject to date.

## How Is the Term "Substance Abuse" Used?

In this TIP, the term "substance abuse" refers to either substance abuse or substance dependence or both (as defined by the *Diagnostic and Statistical Manual of Mental Disorders*, 4th Edition, Text Revision [DSM-IV-TR]; American Psychiatric Association 2000) and encompasses the use of both alcohol and other psychoactive substances. Though unfortunately ambiguous, this term was chosen partly because the lay public, policymakers, and many substance abuse treatment professionals commonly use "substance abuse" to describe any excessive or pathological use of any addictive substance. Readers should attend to the context in which the term occurs to determine the range of possible meanings; in most cases, however, the term refers to all substance use disorders described by the DSM-IV-TR.

## Who Can Use This TIP?

This TIP is addressed to the variety of behavioral health service providers in a variety of treatment settings who may be involved with helping men recognize their need for treatment, mobilize to access appropriate care, participate in substance abuse treatment interventions, involve their families and significant others in recovery, and continue services in extended recovery. Although traditional substance abuse treatment has been provided in settings that are specific to substance use disorders, this TIP recognizes that treatment for substance abuse today can occur in a variety of behavioral health settings and that there is no wrong door for men to enter and participate in treatment and recovery.

## What Is This TIP's Scope?

This TIP covers many topics relating to adult men (defined here as individuals ages 18 and over) and their use of, abuse of, and/or dependence on substances. What this TIP does *not* cover are the substance use patterns and treatment of boys and adolescents, as they form a distinct population with particular treatment needs. TIPs 31, *Screening and Assessing Adolescents for Substance Use Disorders* (Center for Substance Abuse Treatment [CSAT] 1999*c*), and 32, *Treatment of Adolescents With Substance Use Disorders* (CSAT 1999*d*), address substance abuse assessment and treatment, respectively, for both male and female adolescents. Please note, however, that some of the research used in this TIP does include men younger than 18, and in these cases the text indicates the age group referenced.

The TIP represents the view of the consensus panel that a clear link exists between the social and cultural environment within which many boys are raised and the difficulty that many men have in seeking help from others. Pressures on men and boys can stem from expectations to conform to society's view of the ideal man—successful, accomplished, independent, and self-sufficient—which sometimes conflicts with a man's need to seek help. Additionally, when men do need help, such as in substance abuse treatment or other behavioral health services, negative consequences may arise, such as stress, anxiety, shame, rejection, low self-esteem, depression, and other mental problems that have been sedated or disguised by the substance use. These secondary effects can complicate the efforts of many men to seek help for their behavioral health needs.

In recent years, there has been increased awareness of the extent of women's substance abuse, but men in the United States are two to five times more likely to develop a substance

use disorder than women (depending on the study). Research shows men are less likely to seek help for medical or behavioral health problems; even so, the majority of clients entering substance abuse treatment are male.

## Chapter 1: Creating the Context

Much of this TIP is premised on the understanding that stereotypes of masculine behavior shape men's attitudes, beliefs, and behaviors (including those related to substance use and abuse). These socially defined concepts of masculinity push men in our culture to restrict their emotional responsiveness, be more competitive, be more aggressive, and be self-reliant. Masculine roles may also hinder some men from seeking needed treatment for a variety of health, and particularly behavioral health, concerns, including those related to mental illness and substance abuse.

Concepts of masculinity affect different men to different degrees, but no man is unaffected by them or by the ways in which proper masculine behavior is defined at a societal level. Not all effects of masculine ideologies are negative, however, and traditional masculine values can be helpful or beneficial. Also, although there are certain masculine values that are dominant in contemporary American culture and fairly common across cultures, some cultures may define masculinity differently. Masculine values may also differ according to the role a man is filling (e.g., father, brother, friend).

In addition to explaining some of the research on masculinity, the first chapter defines other key concepts, such as gender, sex, and substance use disorders. It also presents some basic information on men's substance use and abuse in relation to that of women. Finally, it discusses the current state of the behavioral health field in regards to male-specific substance abuse treatment, what the future may hold for male-informed treatment, and how various audiences can use this TIP.

## Chapter 2: Screening and Assessment

The screening and assessment of substance use disorders is an important and ongoing facet of treatment that should be adapted to the needs of the individual client. Part of this process of tailoring screening and assessment to client needs is being aware of how a man's beliefs and concerns about his identity *as a man* affect how he responds to screening and assessment questions and procedures—by doing so, clinicians will be better able to engage men in this process.

This chapter reviews three parts of a comprehensive screening and assessment process, which are:

1. The screening.
2. An assessment of the presenting problem (e.g., substance abuse) and its social, spiritual, psychological, and medical consequences.
3. A personal assessment that investigates other behaviors, values, attitudes, and experiences that may influence treatment in behavioral health settings.

Throughout this process, clinicians should be aware of the ways in which male gender roles influence men's psychosocial adaptation, substance use/abuse, and help-seeking behaviors.

Men are often ambivalent about seeking help for health problems (whether related to behavioral or physical health), and clinicians should acknowledge and possibly discuss this ambivalence with the client before assessment commences. Furthermore, many men are typically embarrassed or reluctant to talk about feelings. Providers can acknowledge this difficulty and work with clients to make the process less threatening. Because men are often action-oriented and focused on the concrete, it is

helpful to present specific goals in the assessment process and sometimes to use visual representations of their problems and past experiences.

Although screening for and assessment of substance use disorders are among the primary goals of behavioral health service providers, there are a number of other factors that can affect treatment that need to be investigated as part of a comprehensive personal assessment. Some of these areas will be investigated in almost every case, others will be pursued if particular information surfaces during the screening, and still other areas will only be investigated if the client expresses interest or concern. The chapter briefly considers the following areas of assessment:

- Work/employment history
- Housing status and needs
- Criminal justice involvement and legal issues
- Physical health
- Functional limitations
- Co-occurring mental disorders
- Trauma histories
- Motivation to change
- Relapse risk and recovery support
- Spiritual and religious beliefs

In addition, the chapter provides a more in-depth consideration of the assessment of family history (including both childhood abuse and current domestic violence), male sexuality, and shame.

## Chapter 3: Treatment Issues

Chapter 3 explores issues that may affect substance abuse treatment for most, if not all, men. It begins with a discussion of some general considerations about how masculine roles may affect men in treatment, men's treatment-seeking behavior, and methods of engaging men in substance abuse treatment.

The chapter then discusses at length the issue of gender dynamics, transference, and countertransference for male and female behavioral health counselors working with male clients. Case examples are given to highlight some potential problems that can arise. The chapter also discusses the pros and cons of having either male or female counselors working with male clients. Because the majority of substance abuse treatment clients are male but most counselors are female, the chapter also includes some ideas about recruiting male counselors.

A variety of social and behavioral issues can affect men's patterns of substance use/abuse as well as their success in treatment. These issues include counseling men who have difficulties expressing emotion and men who feel excessive shame, both common problems for men in substance abuse treatment. Male roles and training may result in difficulties accessing some or all emotions, or in problems reacting appropriately to some emotions, such as anger. Men are affected by different kinds of shame and social stigma than women, and men are expected to engage in different rituals or rites of passage, many of which involve alcohol.

Men's behaviors relating to sexuality and violence are often important issues in treatment. Men are much more likely to commit violent acts than women, and those acts of violence are often associated with substance use/abuse. Violence, criminal behavior, and anger are factors that often need to be addressed if a man is to remain substance free. Although providers may be aware of the possibility that men may commit violent acts, they are less likely to consider that men are often victims of violence as well. Clinicians often do not look for—and men are rarely forthcoming about—histories of childhood physical or sexual abuse or current victimization by domestic partners, and

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