

## **One Woman's Story**

*Today Anita is healthy and happy. She is taking care of her three children. She is employed. She is a college student. But she didn't always live her life this way...*

*Anita was admitted to treatment for crack cocaine use in November 1989, when she was three to four months pregnant. During the course of treatment she delivered a substance-free baby girl, Stephanie. After successfully completing treatment in April of 1990, she returned to her mother's home.*

*Approximately two months later, Anita relapsed and was once again hooked on crack cocaine. Her mother would not tolerate her lifestyle nor allow Anita to live in her home. She notified the local child protective services office, which removed Anita's infant daughter from the home. Anita's life continued to deteriorate. On one occasion she was choked to the point of unconsciousness and was left in a vacant lot. Another time she accepted a ride with two men who promised her drugs. When she realized that they both had guns, she escaped from their car. They became angry and fired at her. Fortunately, Anita was not hurt physically. At this point, she "had hit bottom" and decided to seek help again.*

*Anita admitted herself to a treatment program in January 1991. She was two months pregnant. The program has a detoxification center, a residential care facility, and an outpatient continuing care program. Anita was first admitted to the detoxification center. She remained there for one month until bed space was available in the residential facility. Anita completed the six-month course of treatment in May. Treatment included direct attention to her substance abuse, prenatal care and other health services, counseling to address her problems with relationships, and referrals for social services, including job training. After completing this treatment phase, Anita entered an outpatient continuing care program and attended support groups. She remained in the outpatient program until September 1991. When she left the residential treatment program she had a full-time job and a stable living environment in her mother's home. During this time, Anita delivered her baby, Shauna, who was substance-free. After three months, she moved into her own apartment with her infant. Once she completed all the required treatment phases, the program's advocacy department assisted Anita in regaining custody of Stephanie.*

*In April 1993, Anita was hired as a program assistant for the treatment program. She wanted to be a role model and provide hope to those, like herself, who are still in treatment. Since then, she has been promoted and is working on her bachelor's degree in social work. In the year since she has been employed by the treatment program, Anita has married, and all three of her children—Eric, Stephanie and Shauna—live with her and her husband, who is adopting the children.*

*Today, Anita continues to participate in self help meetings, is drug-free, and committed to recovery.*



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## Glossary of Terms

**abstinence:** nonuse of a specific substance.

**abuse:** harmful use of a specific substance.

**addiction:** a disease process characterized by the continued use of a specific psychoactive substance despite physical, psychological, or social harm.

**AIDS:** acquired immunodeficiency syndrome. A disease characterized by opportunistic infections (e.g., *Pneumocystis carinii* pneumonia, candidiasis, Kaposi's sarcoma) in persons whose immune systems are weakened; caused by the human immunodeficiency virus (HIV) and transmitted by exchange of body fluids.

**at risk:** term used to identify individuals based upon a composite profile of various risk factors.

**case manager:** one who defines, initiates, and monitors the medical, substance abuse treatment, psychosocial, and social services provided for the client and her family.

**cross training:** to be trained in several disciplines to facilitate broader coverage in a treatment unit.

**dependence:** abuse of alcohol, tobacco, or other drugs, such that to stop using would result in physical and/or psychological symptoms of withdrawal.

**dual disorders:** denotes the coexistence of two independent, but invariably interactive disorders.

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**early intervention:** a strategy to identify problems early in the development cycle, to minimize risk factors, and to prevent progression to more serious problems.

**epidemiology:** the study of the relationship between various factors that determine the frequency and distribution of diseases in human and other animal populations.

**fetal alcohol effects (FAE):** diagnosis given to a child who shows signs of prenatal exposure to alcohol but who does not meet all the criteria for an FAS diagnosis.

**fetal alcohol syndrome (FAS):** a syndrome caused by prenatal exposure to alcohol through maternal use. Characterized by small head size, mental retardation, heart or other organ defects, and facial features including small eyes, drooping eyelids, flat midface, and a simple philtrum (underdevelopment or absence of the indentation in the upper lip).

**gonorrhea:** a sexually transmitted disease manifested by an inflammation of the genital mucous membrane.

**HIV:** human immunodeficiency virus. Retroviruses that become incorporated into host cell DNA and result in a wide range of clinical presentations varying from asymptomatic carrier states to severely debilitating and fatal disorders. AIDS is a secondary immunodeficiency syndrome resulting from HIV infection and characterized by opportunistic infections, malignancies, neurologic dysfunction, and a variety of other syndromes.

**incidence:** the number of new cases within a particular period of time.

**maternal alcohol and other drug use/abuse:** use or abuse of drugs or alcohol by a woman during pregnancy.

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**morbidity:** pertaining to severe illness.

**mortality:** pertaining to death.

**perinatal:** clinical definition—the period from the 20th-28th weeks of pregnancy through four weeks after birth. Program definition (e.g. Healthy Start)—the period from conception through the first year of life.

**polydrug use:** use of multiple drugs.

**postneonatal:** the period from six weeks after birth to the end of the first year of life.

**postpartum:** the period after childbirth (up to a few weeks); usually refers to the mother.

**prenatal care:** refers to health promotion, risk assessment, and intervention linked to the risks and conditions uncovered. Prenatal care begins when conception is first considered and continues until labor begins.

**prevalence:** the total number of cases at a particular point in time.

**problem use:** use of alcohol, tobacco, or other drugs that does not fit the criteria for abuse or dependence, but that does bear significant risks.

**psychotropic:** pertaining to drugs used in treatment of mental illness; affecting the mind.

**recovery:** a process that supports abstinence from alcohol and/or other drug use, involves changes in social, physical, and psychological functioning, and that may or may not have an end.

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**relapse:** is any occasion of alcohol or other drug use by a recovering person when such use violates her/his own prior commitment to recovery.

**resiliency:** the ability to withstand or minimize the effects of an illness, exposure to alcohol and other drugs, continued use or abuse of alcohol and other drugs, or to social and environmental factors contributing to such conditions.

**risk:** the association between an exposure and the likelihood of an outcome or effect.

**service delivery system:** the full continuum of health and other care providers, alcohol and other drug prevention and treatment providers, and public and community-based organizations involved in providing services to women, children, and families.

**stabilization:** the accomplishment of a steady, nonvarying physical state.

**STD:** sexually transmitted disease; venereal disease. Any of several diseases that can be contracted through sexual intercourse, for example, gonorrhea, chlamydial infection, herpes, syphilis, genital warts, and human immunodeficiency virus (HIV).

**syndrome:** the combination of signs and symptoms associated with any morbid process, which together constitute the picture of the disease.

**syphilis:** a chronic, contagious, often congenital, sexually transmitted venereal disease caused by a spirochete. If left untreated, it will usually progress through three stages of increasing severity over many years and may eventually lead to death.

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**treatment:** a broad range of services for persons who have abused alcohol and/or other drugs; may include detoxification, inpatient or outpatient care and counseling, methadone maintenance, rehabilitation, and long-term residence in supervised housing.

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