



2018 State Roundtable Report Drug & Alcohol



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A Call for Collaboration: Addressing the Issue of Substance Abuse in Child Welfare

The mission of the Drug and Alcohol Workgroup is to promote child safety, permanence, and well-being for families touched by substance use disorders by providing access to a continuum of services that include early engagement, cross-systems collaboration, and clinical integrity.

BACKGROUND:

During its 2013 meeting, the Pennsylvania State Roundtable (SRT) spent several hours discussing the subject of substance abuse in the context of child welfare. As was heard clearly in all of the Leadership Roundtables, and as common knowledge within the field, substance abuse is an ever-increasing problem in communities across the Commonwealth. It was decided that a workgroup be created to explore the issue of substance abuse as it intersects with the child welfare population. Ultimately charged with making recommendations that will improve practices for families in the child welfare and the dependency system that are affected by substance use disorders, areas of focus for the workgroup were as follows, in priority order:

- Changing the culture, beliefs, and approaches to addiction, including the manner in which addiction is treated
- Finding effective treatment for substance abusers and their families
- Recovery/relapse supports
- Funding issues
- Identifying and overcoming barriers to successful treatment
- Drug & alcohol assessments
- Research, investigate, review, and visit successful programs and evidence-based practices and report positive outcomes
- Dual diagnosis, co-occurring disorders
- Collaboration

The Drug and Alcohol Workgroup (Workgroup) was convened in August, 2013 led by the Honorable Jonathan Mark, Court of Common Pleas of Monroe County and Wendy Hoverter, LCSW, Children and Youth Administrator of Cumberland County. In 2015 Kerry Browning, LSW, Court and Community Service Director, Department of Human Services, Office of Youth and Family Services of Lackawanna County replaced Wendy Hoverter as co-chairperson upon her retirement. The Workgroup, with a membership that covers a broad spectrum of state and local level positions within the courts, child welfare, substance abuse and mental health fields, met monthly to explore the issue of substance abuse in Pennsylvania.

Brainstorming at its first full meeting, the Workgroup discussed issues, barriers to service, and the individual and collective strengths and weaknesses of our systems. Even with a more diverse group of participants than the SRT, the results of the discussion mirrored the SRT for its concerns and priority areas of focus: changing beliefs and cultures

surrounding substance abuse, effective treatment at objectively proper levels of care, cross-systems education and training, and funding. At the end of the meeting, one member remarked, “Wow! We are people in systems who work side-by-side every day but who don’t know each other.” That prescient in-the-moment statement foreshadowed a common theme that the Workgroup has heard, loud and clear, from numerous sources: collaboration between child welfare, treatment providers, and the courts is essential to improving the lives of and the provision of services to children and families affected by substance abuse.

Research validates the position of both the SRT and Workgroup that collaboration is key when working with the substance abusing child welfare population. The Center for Disease Control and Prevention’s National Center for Injury Prevention and Control (2014), identified risk and protective factors associated with child maltreatment. Included on its list of individual risk factors for perpetration of child maltreatment is substance use. The connection between child maltreatment and substance use necessitates collaborative and coordinated delivery of services by two interveners, the child welfare professional and the substance abuse treatment provider. However, barriers exist. According to Lee, Esaki, and Greene (2009), several factors can serve as barriers to genuine and effective collaboration between these two primary interveners including but not limited to different perceptions and loyalties, segregated delivery of services, conflicting policies and biases and differential treatment which inhibit communication, and consequently collaboration.

An extensive literature review confirmed the beliefs of the SRT and the Workgroup. In its simplest form the literature showed:

- ✓ The importance of treatment interventions including the whole family.
- ✓ The need for collaboration and cross-training between the courts, child welfare, mental health and drug and alcohol.
- ✓ The need to recognize addiction as a disease in order to move forward with helping individuals and families affected by SUDs.

To assist with the priority charge given by the SRT, culture change regarding substance using people and facilitate change at the local level, the Workgroup sought the assistance of the National Center on Substance Abuse and Child Welfare (NCSACW). The partnership assisted the Workgroup in identifying, fleshing out, and better understanding the unique features of the issues in Pennsylvania through an established program known as In-Depth Technical Assistance (IDTA). Simultaneously, the IDTA process provided direct assistance to eight diverse counties known as the “core counties” in the IDTA program. The Workgroup gained a deeper understanding of how substance abuse affects children and families. Now that the IDTA process is complete, issues which have been deferred will be comprehensively addressed and research and evidence-based practice recommendations for Pennsylvania will be developed.

In addition to examining the issues counties are facing with the opiate addiction epidemic and the accessibility and quality of services, the Workgroup continues to refine the

national IDTA program to a Pennsylvania specific process that can be replicated in counties that could not be part of the national program.

2014 PENNSYLVANIA STATE ROUNDTABLE:

The Workgroup made several recommendations to the SRT in May 2014. Recommendations included:

- Moving forward in working with the National Center on Substance Abuse and Child Welfare.

✓ Work has progressed forward in eight counties, each doing an intensive case review process, a walk through and gap analysis, and creating a plan of action to address their priority areas. Implementation of strategies to enhance substance abuser services is ongoing.

- Requesting that the Office of Children, Youth and Families consider incorporating substance use case identification in their development of a CWIS system.

✓ A request was made at a Pennsylvania Children and Youth Administrators meeting by co-chair Wendy Hoverter. This was followed up by a written request to the Office of Children, Youth, and Families for consideration in their second level CWIS release.

- Requesting that the Summit Committee include a session on Substance Use Disorders including the neurobiology of addiction to address a cultural change.

✓ A request was made to the Summit Committee to include a session on Substance Use Disorders during the bi-annual summit. The summit was held April 20-22, 2015 and included a plenary session, Effective Strategies for Working with Families with Substance Use Disorders, presented by Pam Baston, one of the consultants for the National Center on Substance Abuse and Child Welfare.

- Urging Local Children's Roundtables to invite a representative from the Drug & Alcohol system and join them if one is not already present.

✓ Counties have been encouraged to include someone from the local Single County Authority and/or a primary substance abuse treatment provider on their local Children's Roundtable. Many counties reported extending this invitation.

Continuing to prioritize the issue of culture change, the SRT approved all Workgroup recommendations. Additionally, it tasked the Workgroup with developing a cross systems training providing for a shared understanding of substance abuse and the needs of substance using people involved with the child welfare system. Additionally, the SRT

requested that the issue of confidentiality, as it relates to the release of treatment information, be explored.

2015 PENNSYLVANIA STATE ROUNDTABLE:

Recommendations made to and approved by the SRT in 2015 were:

- Develop a resource to serve as a quick reference guide for substance use disorders.
 - ✓ *Work is progressing forward with the resource guide. Information about the guide's contents is provided in the section on Progress and Updates.*
- Develop the training content for a cross systems training addressing substance use disorders and a training delivery plan.
 - ✓ *A training plan is completed and training content will soon be finalized. More information is provided in the Progress and Updates section.*
- Continue with the In-Depth Technical Assistance process and develop a plan to disseminate findings and process for replication to counties.
 - ✓ *The National Center on Substance Abuse and Child Welfare (NCSACW) concluded their work with the Drug and Alcohol Workgroup in December 2015. IDTA counties found their work with NCSACW very beneficial. Most beneficial to counties was the opportunity for the court and CYS to work closely with their local drug and alcohol agencies.*
- Submit a written request to the Department of Human Services to consider adding a component on Substance Use to the Quality Service Review Process.
 - ✓ *Considering the depth and magnitude of work involved to add a component to the already developed Quality Service Review Process, the workgroup decided that it would be better to have a conversation with key players, determining the best avenue for capturing information in a meaningful fashion.*

2016 PENNSYLVANIA STATE ROUNDTABLE:

Recommendations made to and approved by the SRT in 2016 were:

- Create a Pennsylvania-specific process similar to the IDTA process.
 - A Pennsylvania specific IDTA process is being created that mimics the process used by the National Center of Substance Abuse and Child*

Welfare. It will be ready to test in volunteer counties in the fall with a kick-off training.

- Explore the possibility of having a session on substance abuse at the 2017 Summit that is led by an in-state expert and includes a panel from IDTA counties on the benefits of the process and how to replicate the process.
 - ✓ *The 2017 Children's Summit included a presentation on substance abuse by Ken Martz, Special Assistant to the Secretary of the Department of Drug and Alcohol Programs, an in-state expert on substance abuse. Following the presentation was a panel highlighting innovative practices in several counties.*
- Create a video of D&A information to support the Workgroup's training being developed that will standardize the material across all counties/regions. The video will address the needs of court/legal and child welfare professionals.
 - ✓ *The storyboard for the video has been the main focus of the Workgroup and it is in the final stages of completion. Videotaping will be held this summer and training in Fall 2017.*

2017 PENNSYLVANIA STATE ROUNDTABLE:

Recommendations made to and approved by the SRT in 2017 were:

- Test the Pennsylvania IDTA process in two volunteer counties.
 - ✓ While a process has been created, it has not been tested. Declining workgroup membership and inconsistent participation has placed some geographic constraints on the selection of test counties. Finding a willing participant county has been a challenge. To address this the workgroup decided to combine the multidisciplinary training with the first step in the collaborative process. More detail will be given later in the report.
- Develop a resource for judges regarding things to consider when a parent is using substances, either because of a substance use disorder or as part of treatment.
 - ✓ The workgroup created a bench card for judicial officers to use.
- Work jointly with the Trauma Workgroup to explore the intersection of substance use disorder and trauma.
 - ✓ The workgroup met with the Trauma Workgroup in January of this year. The meeting provided great information for each group to consider as they complete their charges. They will continue to meet periodically.

PROGRESS AND UPDATES

Since the last State Roundtable, declining membership and lack of participation has challenged the workgroup. Spanning over five years, it is understandable that members have changed job positions, faced expanding workloads, or resigned from their jobs. Most of the members who engaged in the IDTA process have left their positions or agencies. The years the departed members gave to the workgroup is appreciated. The workgroup is in a process of renewing membership and anticipates new membership will bring a fresh outlook and energize the workgroup. Very important work remains to be done and the leadership is looking forward to moving through their charges with renewed vigor.

Pennsylvania IDTA Process/IDA Process

The Pennsylvania IDTA (In-Depth Technical Assistance) process, now referred to as the PA In-Depth Analysis (IDA), mimics the IDTA process used by the National Center on Substance Abuse and Child Welfare. The process will include:

- A multidisciplinary training on substance abuse
- Development of a collaborative team to identify and address county issues related to substance abuse
- Creation of a shared value statement and goals for the collaborative group
- Drop Off Analysis
- Agency Walkthrough to review current practices
- Development of an action plan to guide changes in practice
- Support from a member or members of the DAWG

A full day kick-off event will be held in the test county. Members of the dependency court system, the child welfare system and the drug and alcohol system will learn about each other's roles, how substance abuse is viewed and relevant issues to consider from the system's perspective. To support this, a video is being created to share different perspectives on substance abuse and encourage collaboration.

Substance Abuse Video

The Workgroup continues to fine-tune the creation of a substance abuse video. They are striving to create a video that will support training in IDA counties and be a resource other counties can use during local children's roundtables to initiate discussions about the culture and practices surrounding substance abuse.

Substance abuse will be explored from multiple perspectives, including those of a judicial officer, child welfare administrator, substance abuse professional, parent and youth. Illustrating the importance of collaboration and the urgency of addressing substance abuse issues in dependency cases, the video will hopefully spur counties to action.

Filming for the video will be in late summer and be available to use during the IDA kick-off event in early December.

Multi-Disciplinary Substance Training

As discussed above, a multi-disciplinary training will be held in the IDA test county sometime in early December. The audience will be judicial officers and attorneys in the dependency system, child welfare staff and drug and alcohol system staff. The morning session will cover substance abuse information, understanding goals and constraints from a multi-system perspective and practice tips for handling substance abuse in dependency cases. The afternoon will focus on developing a collaboration and creating an action plan for moving forward in the IDA process.

Resource Guide

A resource guide is currently in development. The guide will encompass pertinent information for judicial officers, attorneys and child welfare staff. It is intended to be used as a quick reference for information, not as an exhaustive guide of substance abuse information. Where appropriate, sources for further information will be noted. The guide will be available in both print and electronic form and the feasibility of it being an app is being explored. It will have the following sections:

- Basic drug and classification information
- Signs of drug use/abuse and withdrawal
- Screening and Assessment
- Treatment
- Confidentiality
- Funding Treatment
- Support Programs
- Recovery
- Using FGDM to Support Recovery
- Considerations for Removing and Returning Children to Substance Abusing Parents
- Drug Testing
- Parental Substance Abuse in the Family
- Effects of Parental Substance Abuse on Children
- Adolescent Substance Use/Abuse
- Practice Highlights from Across Pennsylvania
- Resources for Further Information

The publication of the resource guide was delayed allowing the workgroup the opportunity to fully explore the effects of substance abuse on the family, especially children, and supports that could be provided to strengthen families. The workgroup wants the resource guide to completely encompass the issue of substance abuse and its many effects.

Bench Card for Judicial Officers

The workgroup did not want to wait until the completion of the resource guide to provide some guidance to judges and hearing officers faced with parental substance abuse in the cases before them. To that end, a bench card has been developed for judicial officers. Content includes considerations on removal and return of children, implication of substance use on visitation, medication assisted treatment and parental capacity and key points of successful recovery.

Drug and Alcohol-Trauma Workgroup Joint Meeting

A joint meeting of the Drug and Alcohol Workgroup and the Trauma Workgroup was held on January 25th, 2018. The meeting was facilitated by Dr. Ken Martz, Psy. D., a licensed psychologist with an expertise in substance abuse and trauma. The meeting was very informative, and the Drug and Alcohol Workgroup became aware of the strong link between trauma and substance abuse. Issues raised at the meeting were:

- Trauma-informed substance abuse treatment
- Using motivational interviewing techniques in dependency courts
- Medication assisted therapy (MAT) and the way clients present in court
- Risk factors with MAT including prior dosing
- Trauma-informed care vs. trauma treatment
- The brain and trauma
- Timing of trauma and substance abuse treatment
- Trauma and substance abuse: impact on protective capacity and resiliency

Both groups felt that the discussion was beneficial and could help inform the work of their respective groups. They agreed to meet periodically to further explore the issues raised and consider making joint recommendations regarding them. They would like to create a list of key questions that judicial officers could ask of substance abusing parents who also have trauma histories.

Other Training

- PBI Session: Current Issues for Child Advocates

The DAWG was asked to help with a PBI training entitled, “Current Issues for Child Advocates”. Kerry Browning, co-chair of the DAWG, was part of a panel discussing the opioid epidemic. Ms. Browning presented information on the child welfare’s perspective on substance abuse, specifically addressing visitation and removal/return considerations in cases with parental substance abuse.

- Drug Court Coordinators: Addiction Is a Family Disease

The Honorable Jonathan Mark, co-chair of the DAWG, together with Karen Plowman, Prevention and Childcare Services Supervisor, Gaudenzia, Inc., presented an educational session on the effects of addiction on the family to a group of Drug Court Coordinators hosted by the AOPC. The session was a broad

overview of addictions impact on the family and some considerations for supporting non-substance using members of the family. A handout provided during the training can be found attached to this report.

CONCLUSION:

The Workgroup believes that it has brought its best thinking and recommendations to the State Roundtable regarding culture change. Work will continue in the test phase of the PA IDA process. The Workgroup turned their attention to the effect of substance use disorder on the family focusing on the parenting ability of a person under the influence of substances including those used in medication assisted treatment. Moving forward, best practices regarding the non-substance abusing parent and children will be explored as substance abuse effects all members of the family. Helping families touched by substance abuse grow stronger and function in healthy ways provides a rich environment for successful outcomes for substance abusers in recovery and the best chance for increasing the functioning and well-being of their children.

RECOMMENDATIONS:

The Drug and Alcohol Workgroup respectfully submits to the Pennsylvania State Roundtable the following recommendations:

1. Explore how legalization of marijuana may impact child welfare.
2. Develop a resource on supporting the child prenatally exposed to drugs and alcohol.
3. Explore the implications of co-occurring substance abuse and mental health issues.

Addiction Is a Family Disease

Honorable Jonathan Mark, Court of Common Pleas of Monroe County

Lynne Napoleon, MS, Judicial Programs Analyst, AOPC/OCFC

Karen Plowman, Prevention and Childcare Services Supervisor, Gaudenzia, Inc.

Possible Effects:

The Non-Substance Abusing Parent:

- Communication difficulties/arguing
- Jealousy
- Infidelity
- Financial difficulties
- Violence in the home
- Stress related disorders
- Substance use to deal with conflict and tension
- Feelings of responsibility
- “Am I crazy? Is it me?”

Source: American Association for Marriage and Family Therapy

The Child:

- Physical effects due to pre-natal exposure
- Inadequate medical/dental care
- Educational delays, absenteeism/truancy, increase in behavioral problems/suspensions
- Diminished security due to chaotic environment
- Adverse Childhood Experiences/Trauma
- Mental health issues: Anxiety/Attention Deficit/Depression/Oppositional Defiant Disorder
- Increased vulnerability to future substance use

Source: American Academy of Pediatrics

Critical Issues:

- With a substance abusing parent in the home, the risk of child abuse and neglect increases, and, nationally, 60–80% of substantiated abuse and neglect cases parental substance abuse (Young, et al, 2007). Many of Pennsylvania’s child welfare agencies have indicated substance abuse as at least one factor in the agency becoming involved with a family.
- Children of substance abusing parents may develop less secure attachments than children with non-substance abusing parents. Secure attachments are critical to the development of children. Lack of secure attachments can lead to long lasting problems in many life areas.

Source: Solis, Shadur, Burns, and Hussong, 2012

- As insight and healthy coping strategies emerge, family stress is likely to decrease creating a more positive recovery environment for the substance abusing parent.

Critical Messages:

The Non-Substance Abusing Parent:

- Addiction effects the whole family.
- You can't control another person.
- You can recover.
- Children can recover too.
- Helping your children will help you.

The child:

- You're not alone.
- It's not your fault.
- There is help.
- Addiction is a disease.
- It's okay to share your feelings with safe people.

Ways to Help:

- Use the Family CAGE screening tool
 - **C** Have you ever felt that anyone in your family should **cut down** on their drinking/drug use?
 - **A** Has anyone in your family felt **annoyed** by complaints about their drinking/drug use?
 - **G** Has anyone in your family ever felt bad or guilty about their drinking/drug use?
 - **E** Eye Opener: Has anyone in your family ever had a drink/used drugs first thing in the morning to steady their nerves or get rid of hangover?
- Refer to self-help groups
 - Al-Anon: For family members of alcoholics
 - Ala-Teen: For teens with a family member who is an alcoholic
 - Nar-Anon: For family members of addicts
 - Narateen: For teens with a family member who is an addict
 - *note: Narcotics Anonymous and their related groups consider alcohol a drug and are inclusive of both addicts and alcoholics*
 - Coda: For co-dependent individuals
 - Recovering Couples Anonymous
- Provide SAMHSAs National Helpline number: 1-800-662-HELP (4357)
- Develop a multi-disciplinary collaborative to assess gaps in services, develop needed services and to develop creative and out-of-the-box solutions to issues for children and families affected by substance abuse.

Do You Need Nar-Anon?

Ask yourself the following questions and answer them as honestly as you can:

1. Do you find yourself making excuses, lying or covering up for your child/spouse/friend?
2. Do you have reason not to trust your child/spouse/friend?
3. Is it becoming difficult to believe his/her explanations?
4. Do you lie awake worrying about him/her?
5. Is he/she missing school/work often, without your knowledge?
6. Is your spouse missing work and the bills piling up?
7. Are the savings mysteriously disappearing?
8. Are the unanswered questions causing hostility and undermining your marriage?
9. Are you asking yourself, "What's wrong?" and "Is it my fault?"
10. Are your suspicions turning you into a detective, and are you afraid of what you may find?
11. Are normal family disagreements becoming hostile and violent?
12. Are you cancelling your social functions with vague excuses?
13. Are you becoming increasingly reluctant to invite friends to your home?
14. Is concern for your spouse, child or friend causing you headaches, a knotty stomach, anxiety?
15. Is concern for your spouse, child or friend easily irritated by minute matters? Does your life seem a nightmare?
16. Are you unable to discuss the situation with friends or relatives because of embarrassment?
17. Are your attempts at control frustrating?
18. Do you over compensate and try not to make waves?
19. Do you keep trying to make things better and nothing helps?
20. Are the life style and friends of the loved one changing? Do you ever think that they may be using drugs?

If you have answered "YES" to four or more of these questions, NAR-ANON may be able to assist you with the answers that you are looking for.

Available at:

<https://www.ncadd.org/images/stories/PDF/do-you-need-nar-anon.pdf>

Accessed 4/11/18



FAQs - Narateen

What is Narateen?

Narateen is a part of the worldwide fellowship of Nar-Anon Family Groups, a twelve step program. Narateen provides support and hope to young people whose lives have been affected by a relative or friend's addiction.

Narateen meetings are facilitated and monitored by certified experienced Nar-Anon members.

What is a Narateen Group?

Narateen is an integral part of the Nar-Anon fellowship. Facilitators guide and share knowledge of the Twelve Steps and Twelve Traditions by keeping group focused and on topic. Narateen meetings are closed and limited to teenagers who are coping with the addiction problem of a family member or friend.

What are Narateen Facilitators?

Every Narateen group has two Nar-Anon facilitators who have passed a background check and have been verified by the region in which they serve. It is best if a facilitator is not a parent of a Narateen member as the members of the group may not feel free to speak openly. Facilitators should be those who are active in Nar-Anon and continue to attend their own meetings regularly.

What age group is Narateen?

Narateen is designed for members in their teens. Members beyond the teen years are encouraged to attend Nar-Anon meetings. Family members below teen years may not be ready for the Narateen program. Such children may have to depend on others to choose what they learn. This dependency could lead to the development of a teaching program rather than a shared learning experience. "Teaching" is not compatible with the Nar-Anon principle of sharing. There are, however, younger children who need and are ready for sharing in Narateen. It is within the autonomy of each Narateen group to lower the age limit or divide into groups according to age.

What can I do to help my children?

Narateen is a part of Nar-Anon specifically for teenagers who are affected by the addiction of a family member or friend. At Narateen meetings, teens share their experiences and hope with others living with similar circumstances.

How can Narateen help?

Through group meetings, young people learn effective ways of coping from each other, while gaining some peace of mind and hope for a better way to live. Members help one another by sharing their experience, strength and hope.

What if there is no Narateen in my area?

If there is no group near you, talk to someone in a Nar-Anon meeting and ask if they would be willing to facilitate a Narateen group for you. Nar-Anon members interested in starting a Narateen meeting should contact their regional service committee or the World Service Narateen Committee at narateen@nar-anon.org for more information.