## CLINICALLY MANAGED HIGH INTENSITY RESIDENTIAL
### Co-occurring Enhanced (CEC) programs - with Withdrawal Management

Residential programs providing treatment at ASAM Level 3.7 include treatment of **Co-occurring conditions and** with **Withdrawal Management** addressing severe addiction, **symptoms of Post-Acute Withdrawal (PAWS)**, and selected co-occurring biomedical, behavioral, or cognitive needs.

The structure of the resources described below supports stabilization, specifically and systematically develops readiness to change, and moves the clients through successive stages of change, while teaching, mastering, and developing confidence in critical self-management DBT emotional regulation strategies and distress tolerance coping skills.

A critical element of these resources is the focus on the potential recurrence of **post-acute withdrawal symptoms** (PAWS) as triggers to relapse going forward. As these symptoms are a major threat to recovery, this process is developed thorough more than twenty 10-session units (200+ sessions) which can be initiated at the hospitalization and residential levels of treatment, and continued across the Continuum of Care through PHPs, IOPs and even into EOPs. At this level major emphasis is placed on developing Readiness for Change through treatment engagement activities and MI-tools incorporated in the actual program resources.

The treatment resources included here are shaped for programs at the 3.7 level. They provide significant structure, support key aspects of treatment planning, and guide achievement of critical behaviorally-stated objectives and the needed documentation for concurrent and retrospective Utilization Review. The resources specific to programs at this level provide 30+ hours per week of treatment programming - and the resource set listed below can support more than 210 program hours of this type.

These resources are developed from our evidence-based programs initiated at New York City's Rikers Island (CBT, DBT, and MI-based substance abuse, co-occurring mental health, and serious and persistent mental illness programming). They were adapted for open group/open admissions use, and then expanded and enhanced (2025-2026) to address post-acute withdrawal (**Withdrawal Management**). They address both substance abuse and co-occurring conditions with increased emphasis on PAWS symptoms identification and management.

The twenty Units (200+ sessions) are shaped around the following four (4) major topics. Tables of Contents are provided at **www.insightandoutlook.com**

- Change for Life (C4L) 50 sessions - the foundation for substance abuse, co-occurring, and withdrawal management treatment (MI and CBT-based). Critical at the initial stages of treatment.

- Managing Symptoms and Triggers (MST) CBT, DBT, MI, and withdrawal management. Five 10-session Units - 50 sessions. Included resource elements provide multiple opportunities to address key triggers and symptoms through use of DBT emotion regulation strategies and distress tolerance skills in dozens of interactive and practical problem solving scenarios and situations relating to the significant risk of remission or relapse following post-acute withdrawal.

- Handling Difficult Feelings (HDF) Five 10-session units - 50 sessions, addressing key feelings/diagnoses, and symptoms - DBT. CBT and withdrawal management.

- Relapse Prevention - several of these units can also serve as flexible aftercare and recovery issues resources (these units support 9-10 sessions each).

Additional resources include:
- Bridge Unit D - Treatment adherence/Medication Compliance. Supports MAT.
- Basic Anger Management Unit: MAV-10
- Resources for Serious and Persistent Mental Illness (SPMI). The Comprehensive Self-Management Curriculum is an evidence-based 50-hour group and individual resource addressing mood disorders and psychotic spectrum disorders. Based on CBT, DBT, and the MI Mental Health stages-of-change model.