Bright Path

Biopsychosocial Assessment

- Client Name: April T
- Record Number: 06789
- Date of Birth: 01/16/2009 (age 25)
- Date of Assessment: 1/18/2024

Presenting Information: April is a 25-year-old White female referred for an assessment and services by the local hospital after a recent Emergency Department visit due to an opioid overdose. April is unemployed. She is extremely thin but does present as her stated age, and is appropriately groomed, and dressed. She is currently approximately three and a half months pregnant.

Biological Components

Medical History: April denies any chronic illnesses and reports meeting all of her developmental milestones appropriately. She was hospitalized for childbirth approximately three years ago with a C-section and has had several surgeries for right ACL repair.

Current Physical Health: April is malnourished due to food insecurity and lack of appetite due to her opioid use. She does not have a current primary care provider. She has had three sexual partners in the last year and requires testing for sexually transmitted diseases.

Family Medical History: April noted her mother takes medication for high blood pressure and has a history of substance use but has been in sustained remission for ten years. April also stated that both her paternal and maternal grandfathers are deceased due to lung cancer and her maternal grandmother is deceased after a heart attack.

Substance Use: April reports a 6-year history of opioid use. She started using oral opioids at age 19 after they were prescribed to her following a knee injury requiring surgery, which was sustained while playing lacrosse in college. She initially took the oxycodone as prescribed but began taking them for other reasons (e.g. anxiety, stress, to relax) within 3 months. Eventually she began crushing and snorting her pills and began buying them after her doctor discontinued her prescription. She dropped out of college and transitioned to heroin use when she could no longer afford to buy oxycodone. She began injecting heroin about 5 months later. Currently she is injecting about \$60 worth daily. She also smokes marijuana about 2-3 times weekly and smokes ½ pack of cigarettes per day.

April has had several admissions for medically supervised withdrawal and was on buprenorphine for the last 4 months of her pregnancy during which she reports she was in remission from heroin and cannabis use but was unable to stop smoking. She resumed heroin use about 8 weeks after delivery in the setting of tapering off of buprenorphine and use escalated once her daughter was removed from her custody. She denies any other treatment episodes.

Psychological Components

Mental Health History: April scored an 11 on the GAD-7 and notes she has been diagnosed with generalized anxiety disorder but is not receiving any current treatment.

Current Mental Health Status: April notes her recent overdose scared her and is a motivation for her to seek recovery. She denies any recent or current urges to self-harm. She does have some domestic violence trauma from her current boyfriend who also uses substances and is both verbally and physically abusive. April also expresses feelings of extreme guilt for not taking care of her three-year-old daughter.

Cognitive Functioning: April doesn't have issues related to cognitive functioning. She did well in college prior to her substance use and would like to return to school and complete her education.

Social Components and History: April does not have an extensive support network. She is estranged from her parents although they occasionally give her money and spends most of her time with her boyfriend or other individuals she knows who use substances.

Education and Employment: April completed a year and a half of college and would like to complete her fouryear degree in education. She is currently unemployed and receives some money from her parents as well as panhandling. She has minimal prior employment experience as a waitress.

Cultural and Societal Factors: April identifies as heterosexual and her parents are still together, currently caring for her three-year-old daughter. She was raised as a Baptist but does not express any specific cultural considerations as important to her at this time.

Life Stressors: April noted several stressors, including food insecurity, unemployment, homelessness, domestic violence, and not having a relationship with her parents or daughter.

Spirituality and Religion: April states that she has no spiritual or religious practices that should be considered in therapy.

Values and Beliefs: April is motivated to find housing and reconnect with her family. She stated that "I don't want to die, and I don't want to live like this anymore."

Coping and Resilience: April's primary coping skill currently is substance use. Her parents have expressed willingness to assist her if she engages in treatment and shows motivation to change her current lifestyle. She has expressed a willingness to also seek peer supports and self-help resources.

Sense of Purpose and Meaning: April wants to complete her education, find employment and housing, and resume care of her daughter and unborn child.

Health Related Social Needs

Employment: April does have some waitressing experience and is willing to seek some sort of employment while she returns to school.

Affordable/Stable Housing: April currently lacks stable housing.

Healthy Food: April lacks access to a consistent source of healthy food.

Personal Safety: April has domestic violence issues with her current boyfriend, who is verbally and physically abusive. She wants to end contact with him despite him being the father of her unborn child.

Transportation: April is reliant on public transportation.

Affordable Utilities: April does not have utilities as she does not have housing. She intermittently has a cell phone when she has enough money to pay for some minutes.

Assessment completed by: Stacey Jones, LCSW, CAADC 1/18/2024