

The case of rosa lee essay sample

[Health & Medicine](#), [Addiction](#)



Rosa Lee Cunningham is a 52 year old African-American single mother of eight, who is a long time heroin addict, and has an extensive criminal record. Of her eight children six of them have followed her in her life of addiction and crime. These crimes include everything from petty theft, to prostitution, to drug trafficking. Rosa Lee has recently showed up at the Howard University Hospital emergency room because her body is trying to shut down due to her heroin addiction, and she has Acquired Immune Deficiency Syndrome (AIDS). The staff in the emergency room reports that Rosa Lee is no stranger to the emergency room, and her records show an extensive 13 year record of drug abuse including heroin, cocaine, and amphetamines. Rosa Lee was referred for counseling for study, in an attempt to get a better understanding of her addictive cycle and an attempt to help Rosa Lee control her addictive behaviors. SOURCES OF INFORMATION:

Self-report, family members, criminal records, and hospital records

PSYCHOSOCIAL HISTORY:

Rosa Lee Cunningham was born on October 7, 1936, and was one of 11 children from her mother Rosetta, and one of seven from her father Earl Wright, who died when Rosa Lee was young. They were poor sharecroppers from Virginia who moved to the Washington DC area during the great depression for work. Her mother remarried after her father died and had four more children with her second husband.

Rosa Lee describes her childhood as being from a very poor family, and her relationship with her mother was very abusive. Rosa Lee started shoplifting and stealing at a very early age, which was a large reason for her and her mother's bad relationship. Another possible reason for this astringed

relationship is the fact that Rosa Lee became pregnant for the first time when she was thirteen years old. Rosa Lee had eight children with six different men who all grew up in the same neighborhood as Rosa Lee. Rosa Lee was married one time to Alvin Cunningham, who was the father of her third child. Rosa Lee tried to hold on to men by having children by them which never worked out. Besides these six men, Rosa Lee was also involved in one long term lesbian relationship, which is when her substance abuse started, and she had many partners due to her addiction problem and that she was a prostitute at one time to support her drug habit. Of her eight children, six of them have followed Rosa Lee into a life of poverty, addiction, and various crimes, while the other two are living normal productive lives. Rosa Lee's oldest son died last year after a long bout with Human Immunodeficiency virus (HIV) and AIDS.

Rosa Lee has an extensive criminal record starting with shoplifting when she was 13 years old. She went to jail for the first time when she was 16 and pregnant with her third child. Over the years she was arrested for everything from shoplifting to petty theft, to prostitution, to drug trafficking, including one arrest for using her grand-daughter to mule heroin and/or crack cocaine, and selling stolen goods. She was imprisoned 12 times over her lifetime, the longest for 9 months on several occasions. Rosa Lee's drug addiction didn't start until later in life. In the mid 70's while in her lesbian relationship she started using amphetamines to help control her weight. After a painful breakup, she started using heroin with her daughter, which quickly inclined to using heroin intravenously with two of her daughters and two of her sons.

It was through her sharing needles with these children or her own prostitution that she contracted HIV which has developed into full blown AIDS. Currently she is going to a methadone clinic, though I expect this is just to hold off sickness when she cannot afford heroin. Due to this addiction problem and living in deep poverty for her entire life, Rosa Lee moved a lot living in 18 different places over her lifetime including two different homeless shelters. She currently lives in subsidized housing with two of her children and her grandchildren. Rosa Lee attended Mount Joy Baptist Church as a child, and recently she and two of her grandchildren were baptized. Other than this, I do not believe that she spent much time during her life attending much church since she never mentioned much more about any type of spirituality.

Rosa Lee's support system is her children and grandchildren who depend on her more than she depends on them. Because of this, Rosa Lee really has no support system. CURRENT STATUS:

Currently Rosa Lee starts her day around 5: 30, when her methadone wears off. She cleans herself up, wakes up her grand children to go to school before the methadone clinic opens at 7: 30. Then she goes and gets her methadone. After this she might go shoplift, or petal heroin, depending what might be going on during that day.

Rosa Lee has taught all of her children and grand children to shoplift. It appears that shoplifting has become a way of survival for her and her family. If Rosa Lee is sick she will still try to get up and go get her methadone but

then she will go home and go back to bed. Many times those who are supposed to be her support are in more need of support from her.

Rosa Lee is on several different medications for seizures and for her full blown AIDS. Not long ago she was admitted into the hospital for taking too much of one of her medications. This is due to the fact that she cannot read well. While she was there, her daughter Patty ripped off one of the local heroin dealers who came to the hospital looking for Rosa Lee to collect the debt that her daughter created. When Rosa Lee finally gets out she goes straight to the heroin dealer to work off Patty's debt.

Rosa Lee believes that she is very crafty as a shoplifter and as a crafty talker, which she demonstrates when she has to go to court. Rosa Lee dresses in her best clothes, goes into the court room and plays on the judge that she is having to help raise her grandkids while her daughter was in jail, although her daughter was already out, convincing the judge to put off sentencing for several months. INDICATORS OF USE/ABUSE/DEPENDENCY:

Attitude and Behavior: Rosa Lee's activities are based around drug and criminal activity while obtaining what she needs to continue using heroin.

Social Functioning of Rosa Lee: Rosa Lee's social life involves her helping her other addict children score drugs. Rosa Lee has no real support system.

Occupational Functioning: The closest thing that Rosa Lee has to a job is shoplifting which she has taught to her children and grand children.

Financial Aspects: Rosa Lee only worries about what is happening right now and is not

concerned about tomorrow. Familial Relationships: Most of Rosa Lee's family is also addicts and I believe that her relationship with her children who are

not addicts is estranged. Legal History: Rosa Lee has an extensive arrest record for shoplifting, petty theft, drug trafficking, and prostitution. Health History: Rosa Lee suffers from seizures due to her drug abuse, her body has started shutting down on her several times, she is HIV positive, and is now suffering from full blown AIDS. Spiritual History: Rosa Lee grew up attending Mount Joy Baptist Church, but walked away from the church after leaving home at age 16. Recently Rosa Lee and two of her grandchildren were baptized, but not sure what that means to her. **DIAGNOSTIC IMPRESSION:**

Rosa Lee has been suffering from a substance use disorder (SUD) for approximately 20 years plus. She also has AIDS caused by either sharing hypodermic needles, which she shares with four of her children who are also using heroin, or through prostitution, which her, her daughter Patty, and her oldest son, who passed away from AIDS last year were all involved in.

According to Doweiko coexisting medical problems and SUDs are common among people who have a SUDs suffer from an assortment of medical problems such as heart problems, cirrhosis, and a host of infectious diseases such as hepatitis C, HIV, and AIDS. This can also result in a host of other mental disorders (Doweiko, 2012).

Rosa Lee does not complain of any mental disorders, though I expect she suffers from depression, and possible co-dependency as demonstrated through the many different relationships she has had over the years. Co-dependency can be defined as one person in a relationship trying to make it happen while the other does not (Clinton & Scalise, 2013). In Rosa Lee's

case it was any relationship she could find, as demonstrated by her relationship with six different men, and one long-term lesbian relationship.

Rosa Lee has an extensive criminal record dating back to age 13, at which time she was not abusing drugs. After starting to abuse drugs in her late 20s, a string of drug trafficking and prostitution charges have followed. This is a major epidemic throughout the world, with SUDs being a major part of crime throughout the world (Doweiko, 2012). Over the years Rosa Lee has turned to shoplifting and theft not due to being a kleptomaniac but more out of a need of survival (Clinton & Scalise, 2013).

Other factors that need to be taken into consideration are; Rosa Lee has lived in extreme poverty for her entire life, unsure how her diagnosis of HIV affects her mental state, while her children are dependent on her, I believe that she is also dependent on them. Rosa Lee also puts herself at risk physically while pedaling drugs, her participation in prostitution, and sharing hypodermic needles with her four other heroin addicted children.

RECOMMENDATIONS:

There are several factors that need to be taken into consideration in the treatment plan for Rosa Lee. One must consider her medical condition, the length of her heroin use, the lack of family support, and her environment. Other things to take into consideration are her criminal record, and her chance of future incarceration. First and for most Rosa Lee must have a desire to change. Once she shows a desire to change, she is more apt to commit to a treatment program. One of the first steps within rehabilitation is a medically managed detoxification. Some people mistake detoxification as a

form of rehabilitation, however one must understand that this is just the first step of rehabilitation and those who go through detoxification must also have a plan of relapse prevention (Doweiko, 2012). Second is to continued pharmacological intervention to help Rosa Lee better deal with withdrawal symptoms. The most common is methadone treatment which she is already on. Methadone is used to ease the process of detoxification off of prescription opiate drugs or illicit drugs such as heroin (Doweiko, 2012).

Along with this methadone treatment there must also be a treatment plan for her HIV/AIDS to help prevent further health deterioration. While I believe that Rosa Lee should continue her methadone treatment at the present time, however due to the length of time that she has been on methadone medical staff should consider detoxification from the methadone and replacing it with another agonist medication such as Buprenorphine. Buprenorphine, also known as Suboxone, is a cousin of morphine, however when injected it is 25-50 times more potent as its cousin morphine. Because of its strength only 0.3 milligrams of Buprenorphine is needed to have the same effect as 10 milligrams of morphine. When this drug is taken sublingually it blocks opiate receptors such as methadone, with a much lower feeling of euphoria than methadone, making it a very good substitute for methadone (Doweiko, 2012). Because of Rosa Lee's lack of support towards clean living in her current housing situation, and her medical condition, a hospital-based residential treatment program is recommended.

A hospital-based residential treatment program offers different services including medical services, family therapy, individual therapy, group therapy,

psycho-educational therapy, and social services for patients who need it (Doweiko, 2012). The first place to start is through individual counseling where she can deal with her past including her harsh upbringing, her estranged past relationship with her mother to bring closure to that chapter of her life. Some of the advantages of individual therapy are that the patient can address issues that may be too personal to address in group therapy (Doweiko, 2012). Another part of both individual counseling and group counseling is cognitive behavioral therapy. Cognitive behavioral therapy can help the client to deal with thoughts such as, " I need to do drugs to deal with my problems" (Doweiko, 2012). The most common form of addiction therapy is group therapy. With group therapy the members can deal with social issues and also build a type of family group. This can help the client to deal with unresolved relationship problems, and to experience healthy relationships and a pseudo-family unit (Doweiko, 2012).

Finally is family therapy which in Rosa Lee's position can be very difficult. This is because her family is a huge part of her addictive behaviors. Most family therapy is used to teach family members to deal with unfinished conflict and help the family to learn the correct way to support the client when they go home (Doweiko, 2012). Because of Rosa Lee's family situation when she finishes inpatient treatment I might recommend that she enters into a halfway house if possible. A halfway house is a good choice for those who do not have a strong support system at home. Most halfway houses have fewer people than a inpatient treatment center with much less supervision. Most halfway houses require the client to work, pay rent, do chores around the house, stay sober, and attend a 12-step program such as

Alcoholics Anonymous (AA) or narcotics Anonymous (NA) (Doweiko, 2012).

This may be difficult for Rosa Lee because she appears to be the main caretaker of her family. If this is the case then one must emphasize to Rosa Lee the importance of her strengths when she returns home. One such strength is her love for her family.

This is demonstrated when she comes to the realization of how her teaching her grandchildren to shoplift is a bad idea. If Rosa Lee realizes how her dysfunctional behaviors effects both her kids and grandkids she may change her behavior, and in return quit enabling her children and even helping them in the end. Finally are the spiritual beliefs of Rosa Lee and the spiritual aspects of addiction. One must realize that when we alter our chemical balance even a little bit it opens a spiritual window and alters one's spiritual outlook (Scalise, 2009). With this being said we cannot talk about recovery of addiction without including some of the spiritual aspects of addiction and rehabilitation. While Rosa Lee hasn't always been involved with spiritual practices, we know she grew up in church, and her and her grandchildren were recently baptized, Rosa Lee should be open to the idea of spiritual addiction therapy. One must realize that when there is an addiction problem it affects more than just one's mind or body but it also affects one spirit, and all of these aspects need to be addressed.

This is why the church needs to be involved in the rehabilitation process.

First of all one must ask themselves what would Jesus do? Jesus would reach out in truth and love and help these people. The bible tells us in Ephesians 4: 11-12 " So Christ himself gave the apostles, the prophets, the evangelists,

the pastors and teachers, to equip his people for works of service, so that the body of Christ may be built up" (NIV). This shows us the need for the priest who consuls one and shows empathy and love, for the prophet who shakes people up and makes them uncomfortable, and makes the addict think about what they are doing. These are areas that people who are suffering from addiction need (Scalise, 2009). When one is suffering from an addiction they are in a love hate relationship. the apostle Paul addresses this feeling in Romans 7: 14-15 when he says, " We know that the law is spiritual; but I am unspiritual, sold as a slave to sin. I do not understand what I do. For what I want to do I do not do, but what I hate I do" (NIV) (Scalise, 2009). For Rosa Lee this can be addressed in after care programs such as Celebrate Recovery or Life Recovery, which can be found in most communities. While these programs are based on the same 12-steps as AA and NA, they also focus on Biblical aspects such as the beatitudes reaching recovery and encouraging clean and sober Christian living.

References

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