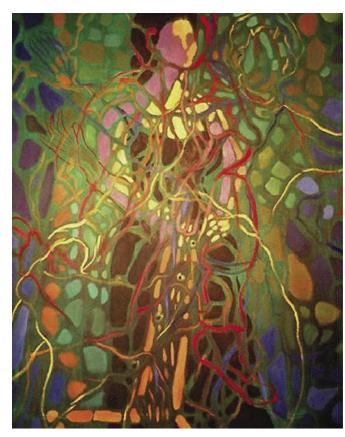
Why People Take Drugs

To feel good

To have novel:
Feelings
Sensations
Experiences
And
To share them
(Connection)





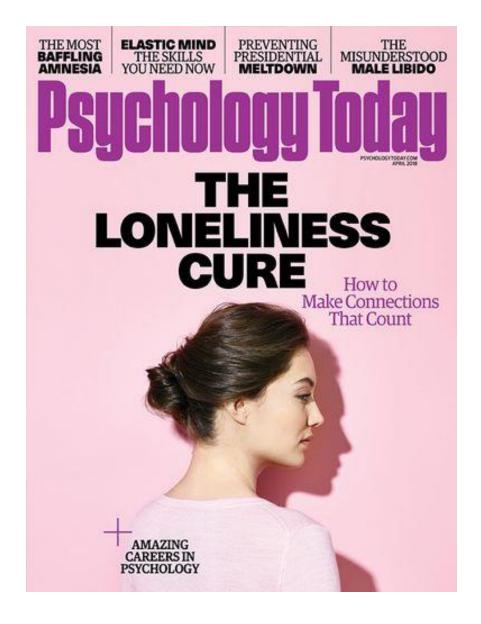
To feel better

To lessen:
Anxiety
Worries
Fears
Depression
Hopelessness
Withdrawal
(Disconnection)

"The opposite of addiction is not sobriety. The opposite of addiction is connection."

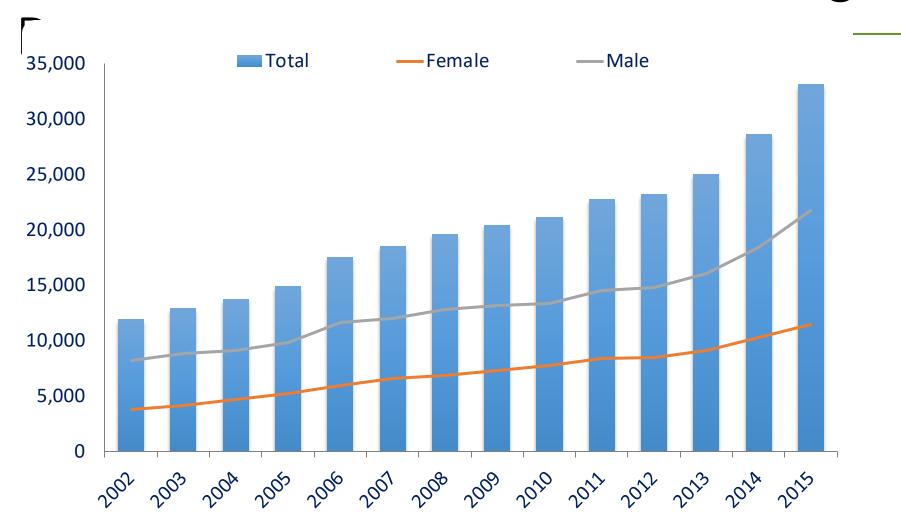
-Johann Hari

We need to address problems "upstream"



- Acts on same parts of brain as physical pain
- Social support is protective
- Loneliness is not being alone- subjective experience independent of the size of network.
- Emptiness
- Worthlessness
- Lack of control
- Personal Threat
- 16-24 y/o most likely of all age groups to report feeling lonely

National Overdose Deaths Involving Opioid



Source: National Center for Health Statistics, CDC Wonder

Lethal Doses

Heroin: 30 milligrams

Fentanyl: 3 milligrams

Carfentanil: 2 micrograms

(estimated)

"Just about the size of Lincoln's beard on a penny of Carfentanil can be lethal to most people."—DEA

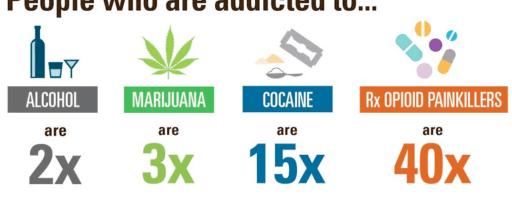


New Hampshire State Forensic Lab (Schultze, 2017)

Heroin Use Is Part of a Larger Substance Abuse Problem



People who are addicted to...



...more likely to be addicted to heroin.

SOURCE: National Survey on Drug Use and Health (NSDUH), 2011-2013.

Addiction Potential of Various Substances

1.	Tobacco	32%
2.	Heroin	23%
3.	Cocaine	17%
4.	Alcohol	15%
5.	Sedatives	9%
6.	Cannabis	9%

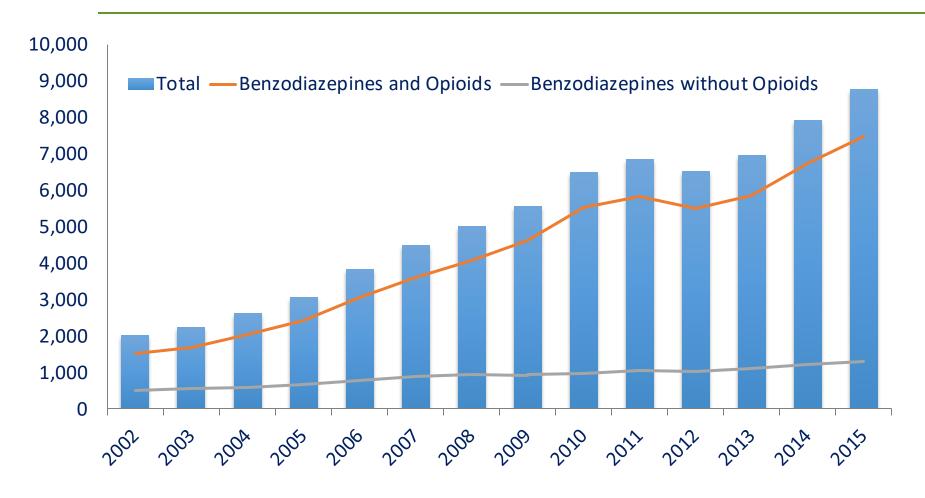
If age of start is:

= or < 18 years old +17%

= or < 15 years old +25-50%



Opioid Involvement in Benzodiazepine Overdoses



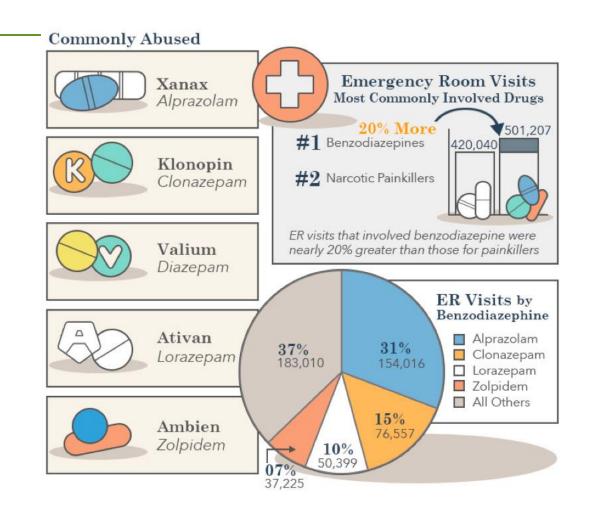
Connecticut Accidental Drug Intoxication Deaths Office of the Chief Medical Examiner

	2012	2013	2014	2015	2016 Jan-March	2016 Apr-June	2016 Jan-June	2016 (projected)
Accidental Intoxication Deaths*	357	495	568	729	208	236	444	888
-Heroin, Morphine, and/or Codeine detected	195	286	349	445	118	146	264	528
-Heroin in any death	174	258	327	416	109	135	244	488
-Heroin alone	86	109	115	110	26	14	40	80
-Heroin + Fentanyl	1	9	37	108	39	80	119	238
-Heroin + Cocaine	50	69	73	106	26	39	65	130
-Morphine/Opioid/Codeine NOS	21	28	22	29	9	11	20	40
-Cocaine in any death	105	147	126	177	53	65	118	236
-Cocaine alone	46	53	22	30	7	6	13	26
-Oxycodone in any death	71	75	107	95	22	30	52	104
-Methadone in any death	33	48	51	71	20	19	39	78
-Hydrocodone in any death	15	19	15	20	5	5	10	20
-Fentanyl in any death	14	37	75	188	84	139	223	446
-Fentanyl alone	8	6	12	31	15	15	30	60
-Fentanyl + Cocaine	2	16	14	43	18	36	54	108
-Fentanyl + Prescription Opioid	4	7	14	23	14	25	39	78
-Fentanyl + Heroin	1	9	37	108	39	80	119	238
Any Opioid + Benzodiazepine	<mark>41</mark>	<mark>60</mark>	<mark>140</mark>	<mark>221</mark>	<mark>58</mark>	<mark>54</mark>	<mark>112</mark>	<mark>224</mark>
-Hydromorphone	1	0	12	17	5	4	9	18
-Amphetamine/Methamphetamine	7	5	11	20	5	1	6	12
-MDMA	0	0	2	1	1	0	1	2

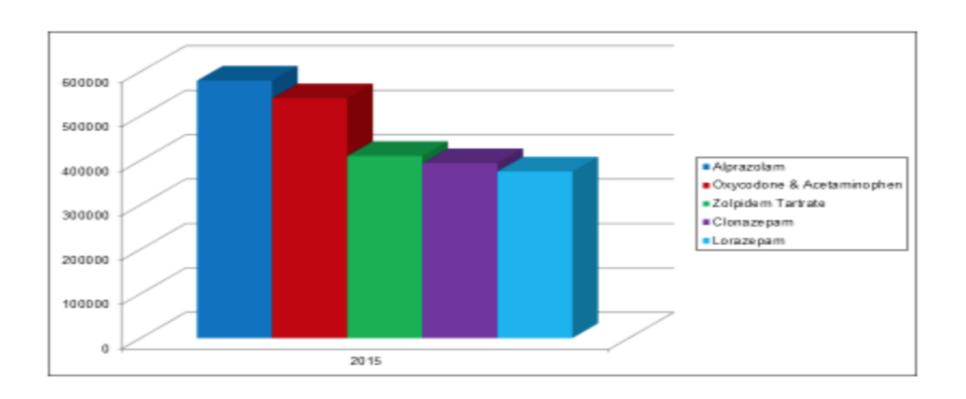
^{*}Some deaths had combinations of drugs; pure ethanol intoxications are not included. NOS, not otherwise specified Updated 9/2/16

What Are Benzodiazepines?

- Sometimes called "benzos"
- Sedatives often used to treat anxiety, insomnia, and other conditions
- Combining benzodiazepines with opioids increases a person's risk of overdose and death



Most Prescribed Controlled Substances - 2015



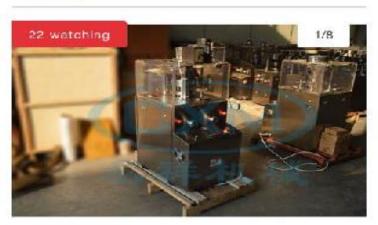










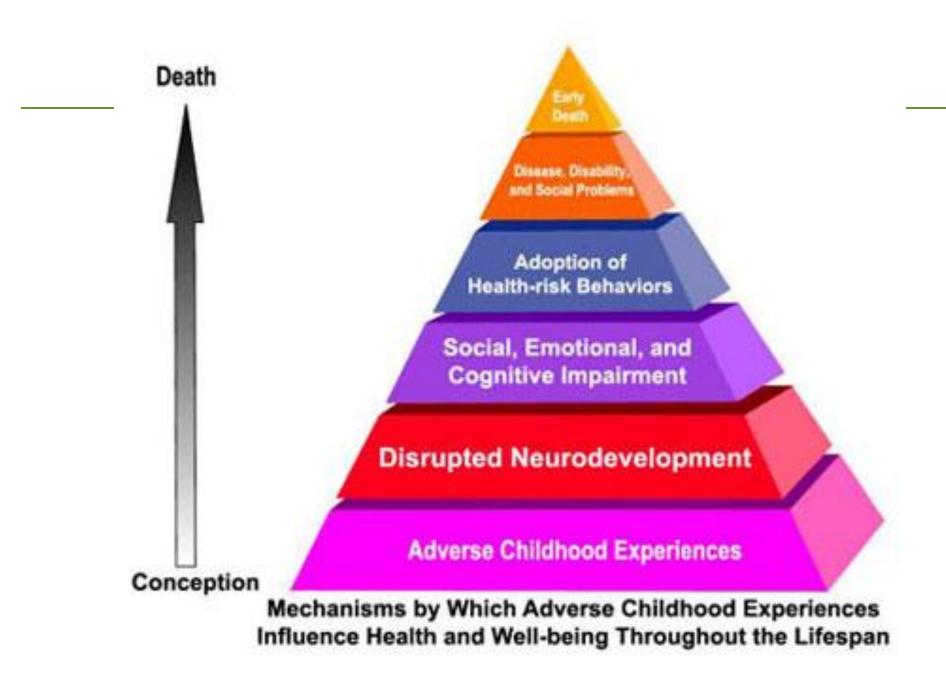


ZP9A pill press, small rotary tablet press,pill press, tablet press

\$5,350.00 + S500.00 Shipping



•INCREASED EXPOSURE TO DRUGS, ALCOHOL AND TOXIC STRESS INCREASES RISK



Trauma

Trauma is not what happened to you, It is what happened inside you.

Trauma is a disconnection to self, to body and emotions. It makes it impossible to be in the present moment.

Addiction is most often rooted in trauma.

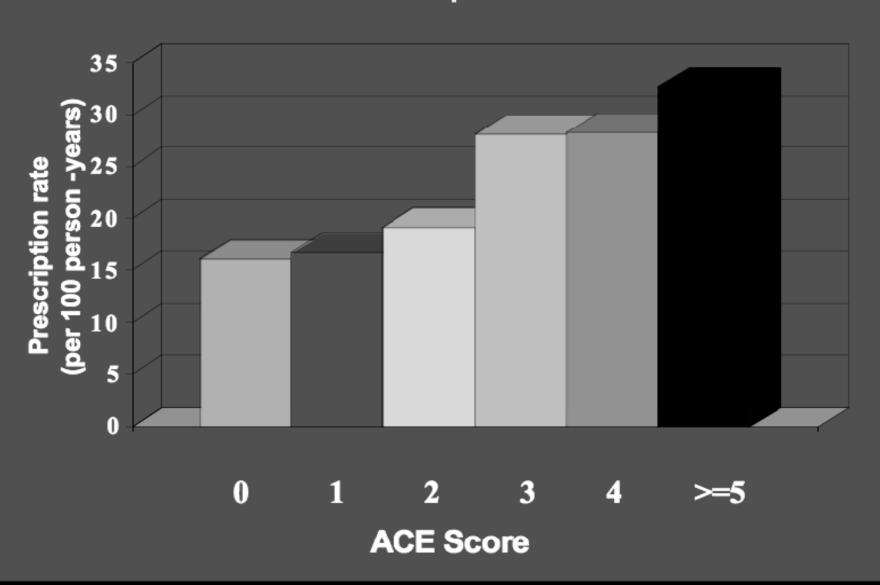
The goal of sobriety is to have the capacity to be present. (Gabor Mate)

Salience Attribution-what is important to pay attention to.

- We don't react to what happens, we react to our interpretation of what happens.
- Trauma interferes with our response flexibility-the ability to chose a response.
- What is salient to a traumatized brain is whatever will sooth the brain or distract.
- Addiction is not a lack of free will, it is a lack of free won't

(Mate)

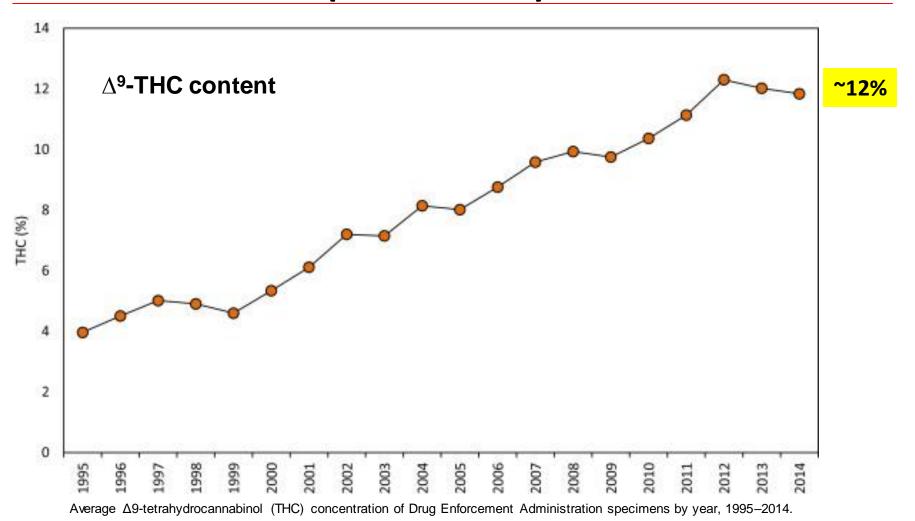
ACE Score and Rates of Anxiolytic Prescriptions



Anxiety of parents will influence the anxiety of your teens.

—John Gottman

Cannabis Potency Has Increased Over the Last 2 Decades (1995–2014) in the U.S



"But it's just a plant..."

(80-90% THC) Concentrates



M-Cigarettes

(marijuana vaporizers) – Brought to you by Groupon!



Is Cannabis Addictive?

CUD ≥2 of the following <u>accompanied by significant impairment of functioning and distress</u>:

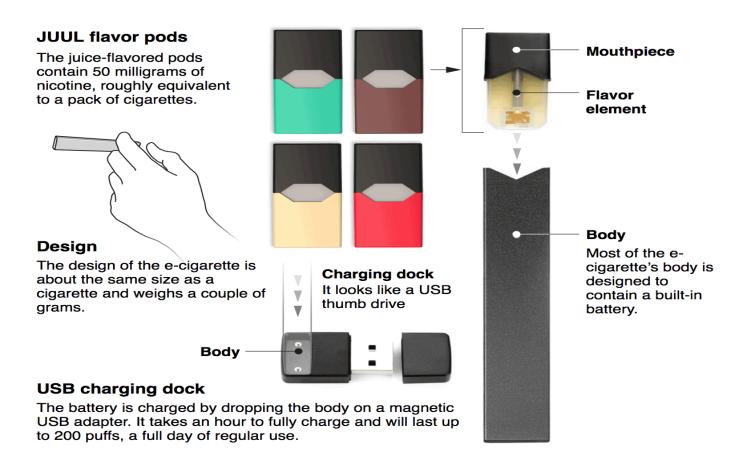
- Difficulty containing use.
- people failed attempts to quit or reduce.
- Too much time spent acquiring, using, or recovering from the effects of cannabis.
- Cravings and a desire to use.
- Continued use despite consequences.
- Other important activities in life superseded by the desire to use.

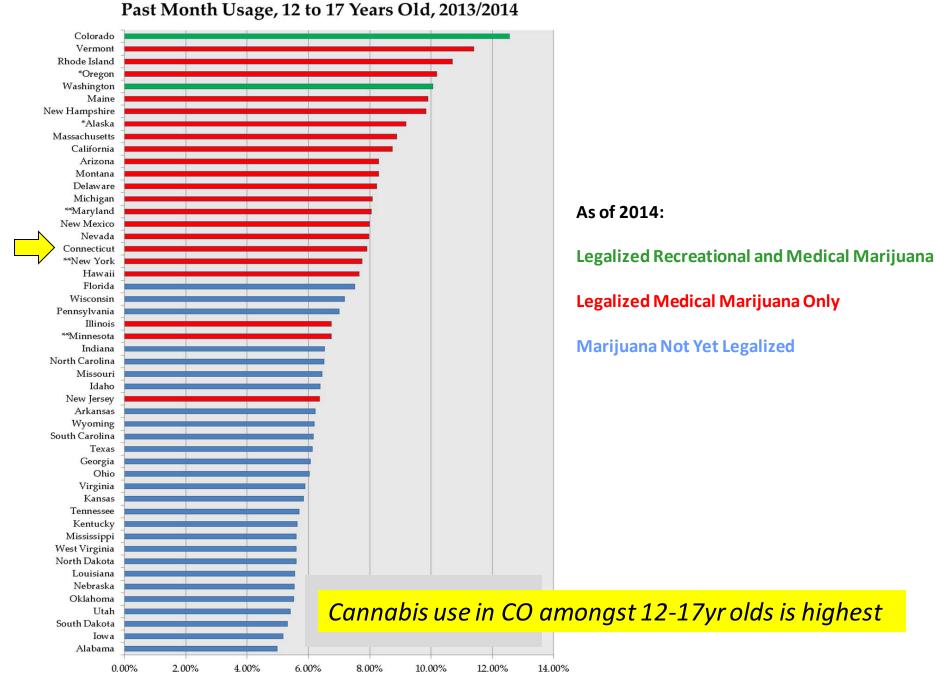
- Use in contexts that are potentially dangerous (e.g., driving).
- Continued use despite awareness of problems attributed to use.
- Tolerance.
- Withdrawal.

Cannabis is addictive (~10%)

JUUL e-cigarettes

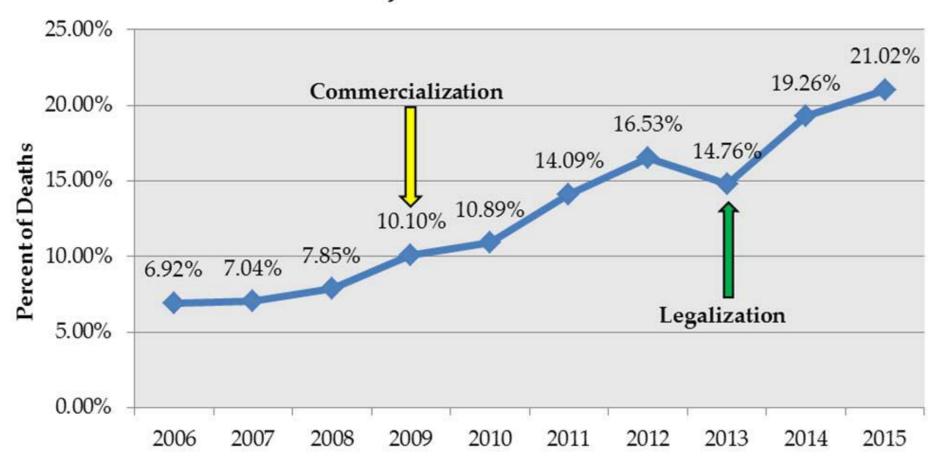
Some e-cigarette critics are calling the JUUL e-cigarette the "Apple of vaping" or the "iPhone of vaping." With its relatively low entry price, sleek portable design, ease of use, and nicotine head rush it generates for users, JUULS are catching on with younger people.





SOURCE: SAMHSA.gov, National Survey on Drug Use and Health 2013 and 2014

Percent of All Traffic Deaths That Were Marijuana-Related*

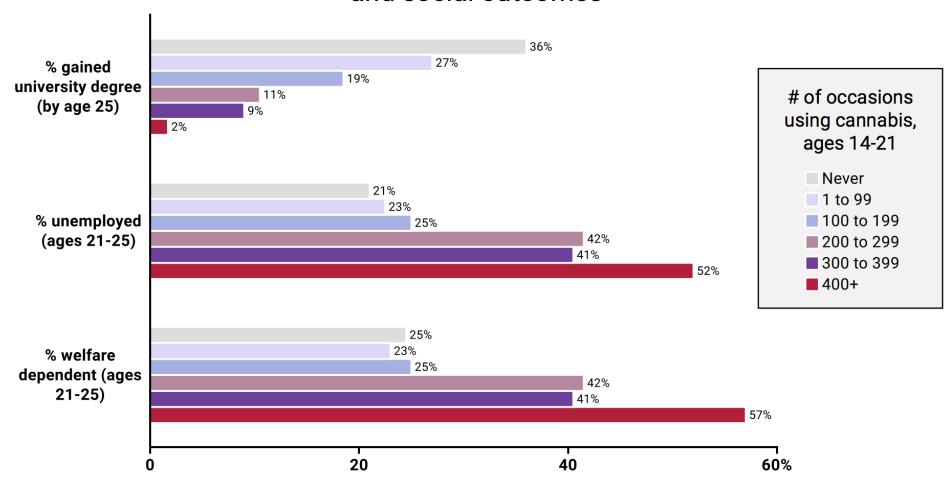


*Percent of All Fatalities Where the Operators Tested Positive for Marijuana

Increase in cannabis-related traffic deaths in CO

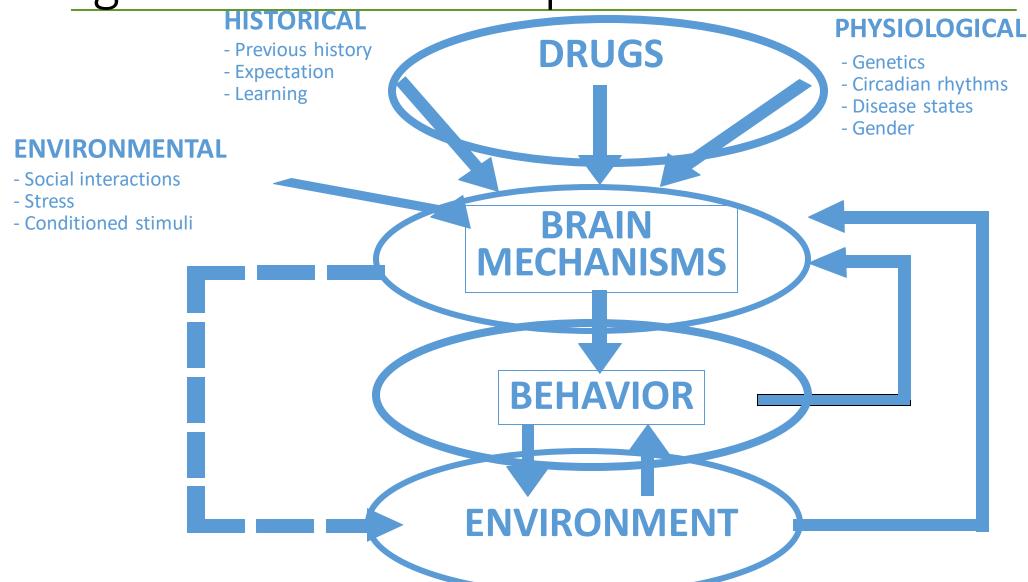
Mohini Ranganathan

New Zealand study showing relationship between cannabis use and social outcomes





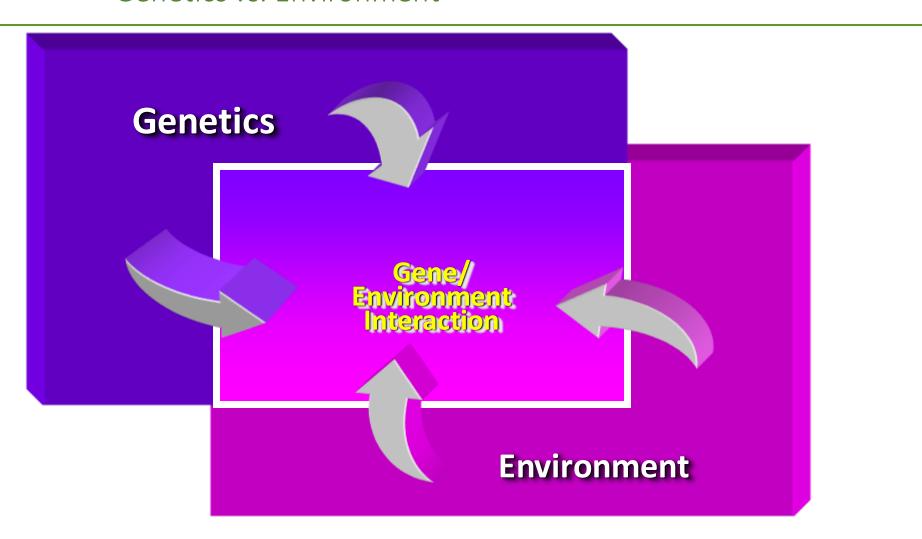
Drug Addiction: A Complex Disorder



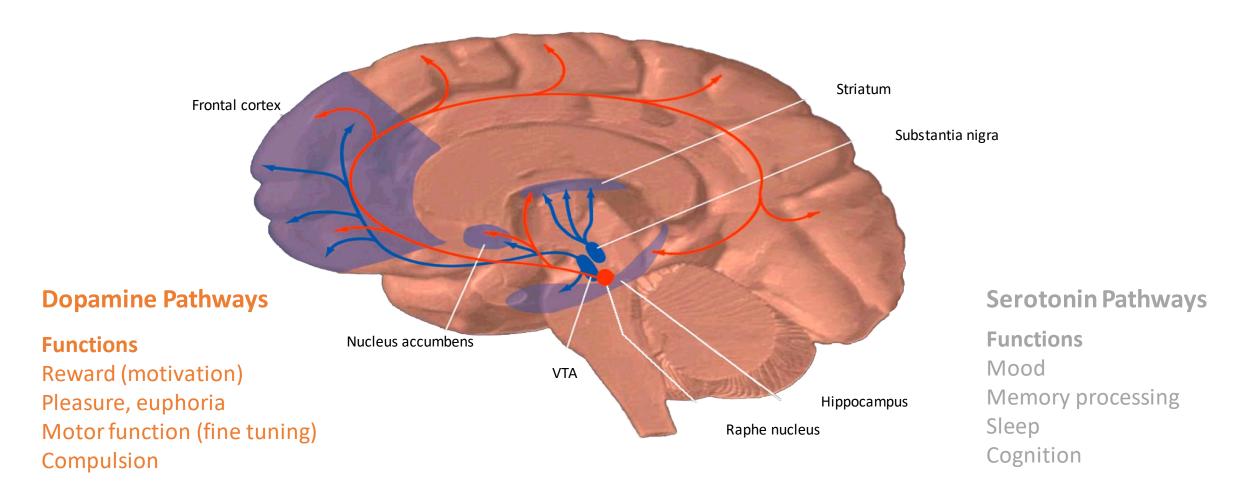
Institute of Medicine (IOM) Continuum of Care Model:



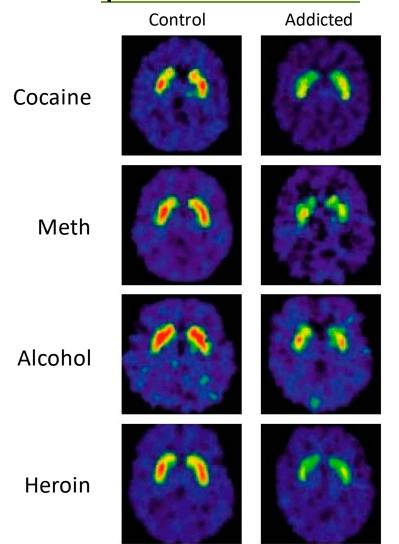
Genetics vs. Environment



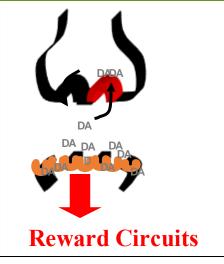
How Drugs Affect Brain Function



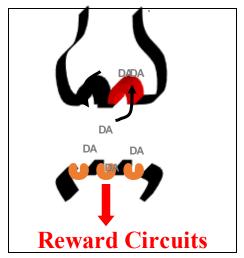
Dopamine D2 Receptors Are Lower in Addiction



DA D2 Receptor Availability

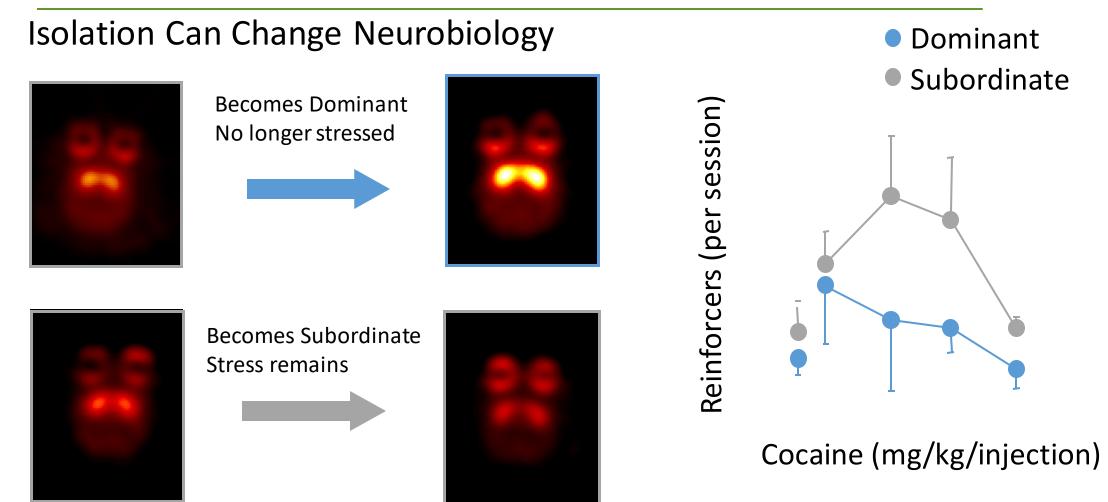


Non-Drug User



Drug Abuser

Effects of a Social Stressor on Brain



Impact on Brain Development Exposure to drugs of abuse during adolescence could have profound

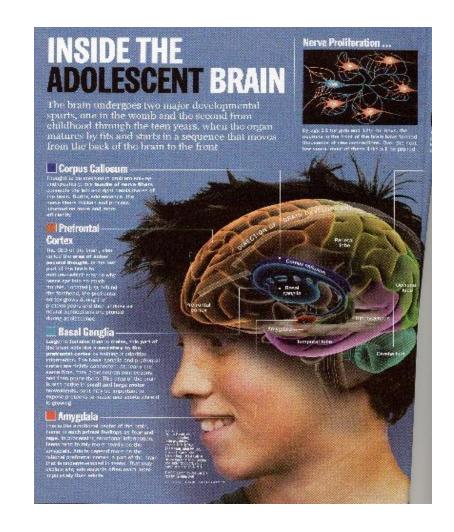
Exposure to drugs of abuse during adolescence could have profound effects on brain development & brain plasticity

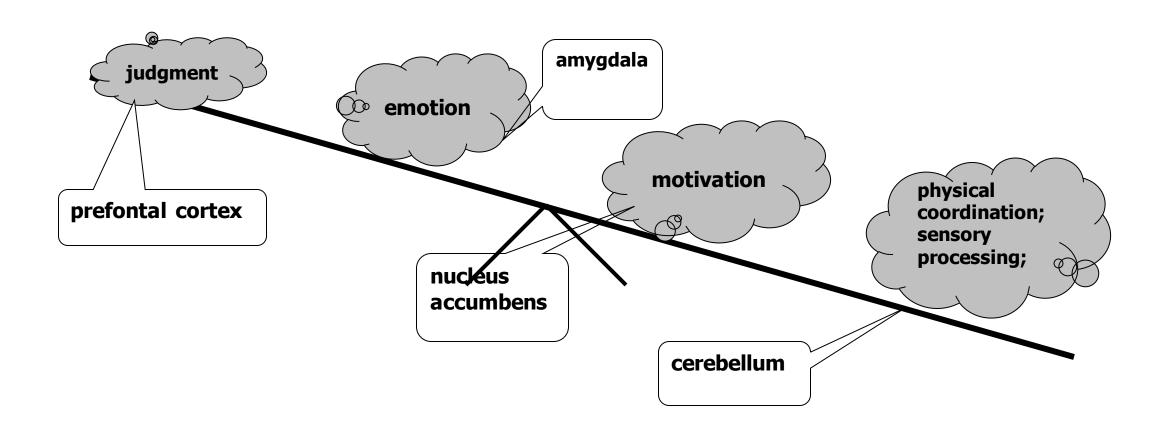


Adolescence is a period of profound brain maturation

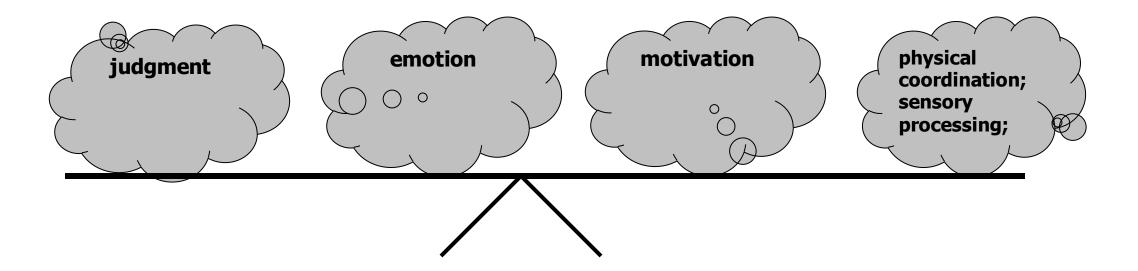
It was believed that brain development was complete during childhood

The maturation process is not complete until about age 24!!!





Age 24



- Neurodevelopment likely contributes to....
 - > risk taking (particularly in groups)
 - > propensity toward low effort high excitement activities
 - > interest in novel stimuli
 - < capacity for good judgment & weighing consequences

Arrested Development

- Back of brain matures before to the front of the brain...
 - sensory and physical activities favored over complex, cognitive-demanding activities
 - propensity toward risky, impulsive behaviors
 - group setting may promote risk taking
 - poor planning and judgment



Can Addiction be Prevented by Delaying Drug Use Onset?

• Every year use of a substance is delayed, the risk of developing a substance use disorder is reduced.

CRAFFT

➤ Car

➤ Relax

➤ Alone

➤ Family or Friends

➤ Forgot

➤ Trouble

Treatment

Prevalence of Co-Occuring Disorders

Estimates of psychiatric co-morbidity among clinical populations in substance abuse treatment settings range from 50-70%

Estimates of substance use co-morbidity among clinical populations in mental health treatment settings range from 20-50%

^{*}Flynn and Brown, Co-Occurring Disorders in Substance Abuse Treatment: Issues and Prospects, *Journal of Substance Abuse Treatment*. January 2008.

Search Institute's The Origin of "Assets"

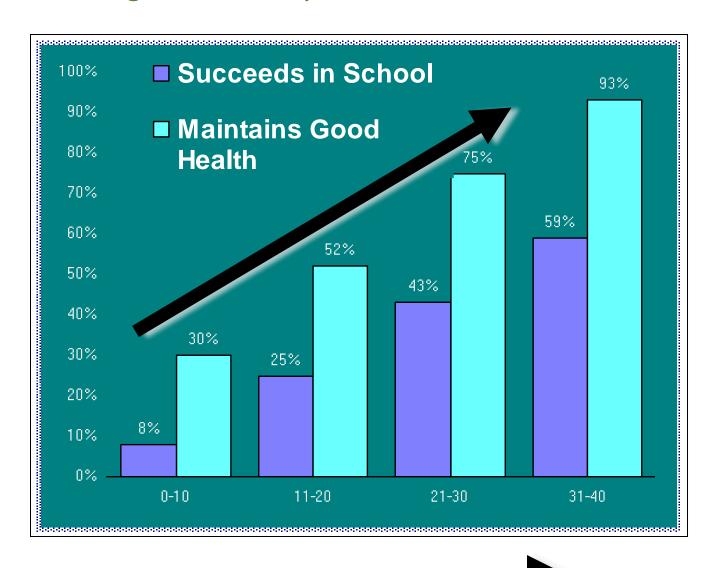
External Assets

- Support and Caring Relationships
- Empowerment
- Boundaries and Expectations
- Constructive Use of Time

Internal Assets

- Commitment to Learning
- Positive Values
- Social Competencies
- Positive Identity

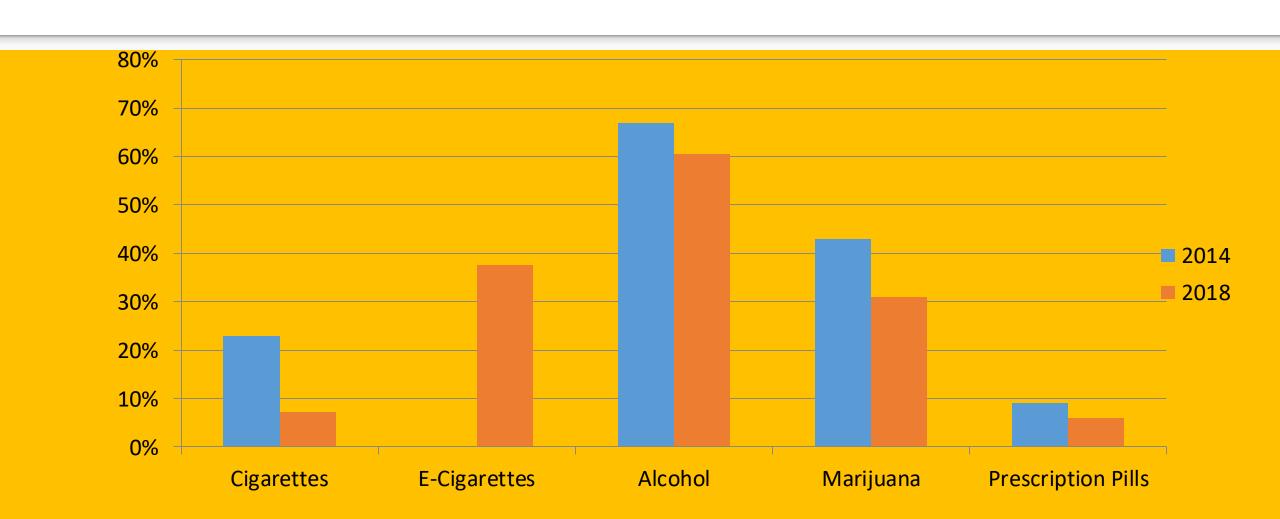
Thriving Indicators by Asset Level



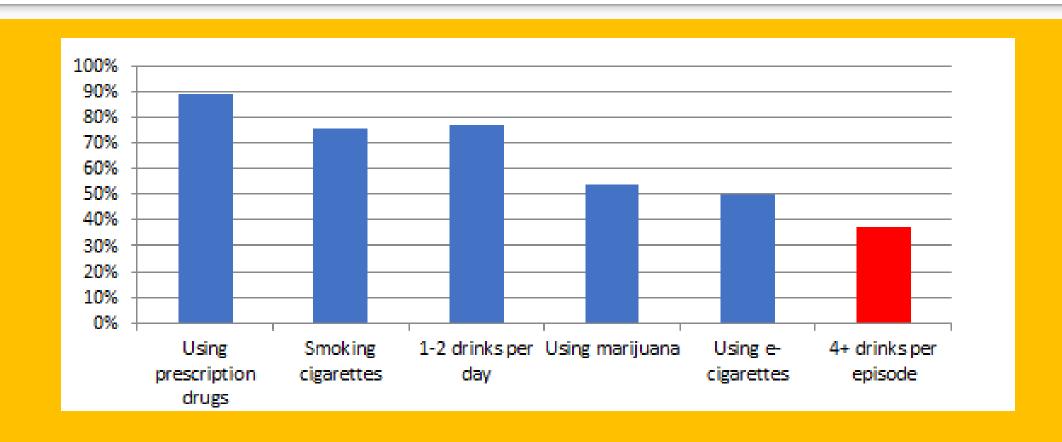
Darien Students' Asset Results



30 Day Prevalence of Substance Use for 12th Graders 2014 vs. 2018



12th Graders Perception of Parental Disapproval of Substance Use 2018



Why do students drink?



Friends; Peer Pressure; To Have Fun

Stress; To Feel Better

Ready Availability of Alcohol; Curiosity

Students report deterrents to drinking



Search Institute's Asset Framework

The Search Institute has been researching how children and teens grow up healthy for **50 years.**

They have surveyed over **5 million students** around the globe.

The Search Institute has identified 40 positive experiences and qualities that help young people grow up healthy, caring and responsible.

WHERE ARE WE STRONG?

- SUPPORT
- EMPOWERMENT
- COMMITMENT TO LEARNING
- CONSTRUCTIVE USE OF TIME

WHERE ARE WE ADEQUATE?

- BOUNDARIES & EXPECTATIONS
- POSITIVE VALUES
- SOCIAL COMPETENCIES

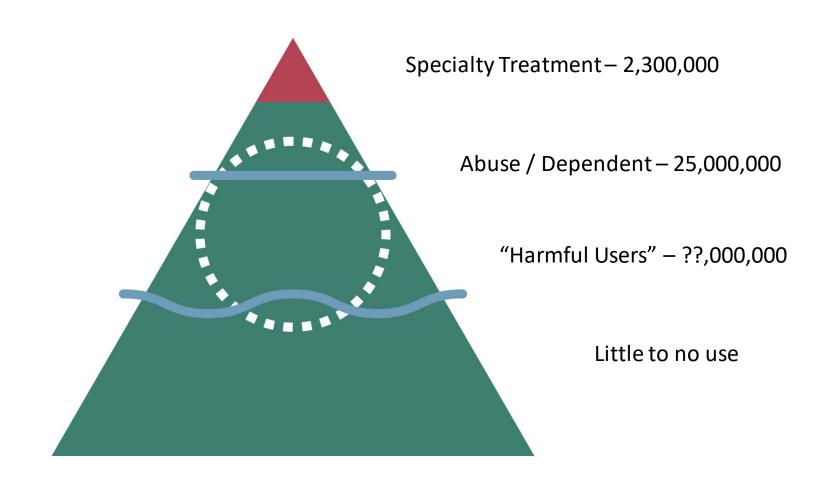
What do youth need from parents?

- Positive Reinforcement
- Ground rules
- Support, Love & Encouragement
- Realistic Expectations
- Don't live through your kids
- Communication
- Ability to Fail
- Openness
- Being a role model for kids
- Judgement free outlet

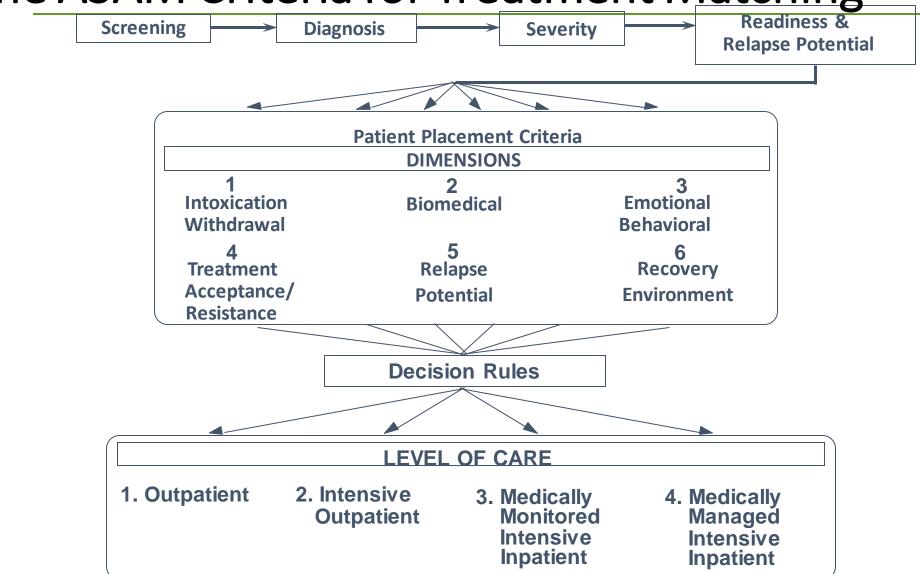
RISK AND PROTECTIVE FACTORS

Risk Factors	Domain	Protective Factors
Sensation-seeker	Individual	Successful student
Child of drug user		Bonds with family
No supervision	Family	Consistent discipline
Parent/sibling drug use		Anti-drug family rules
Pro-drug use norm	School	Anti-drug use norm
Availability of drugs		High academics
Crime/poverty	Community	Consistent anti-drug message
No afterschool programs		Strong law enforcement

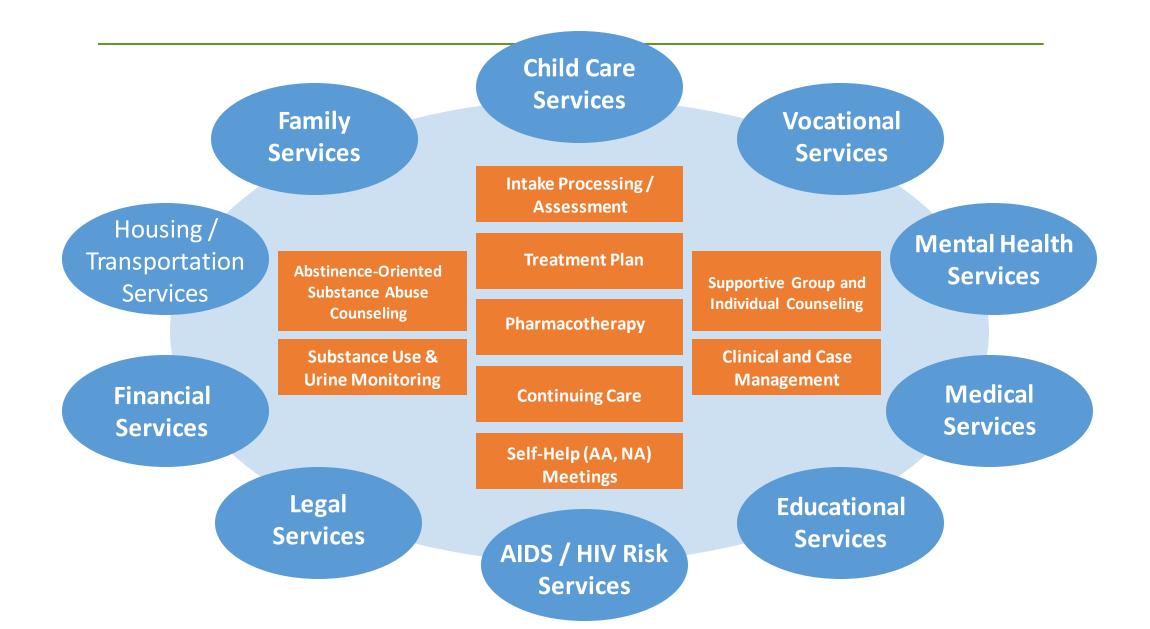
Who Gets Treatment?



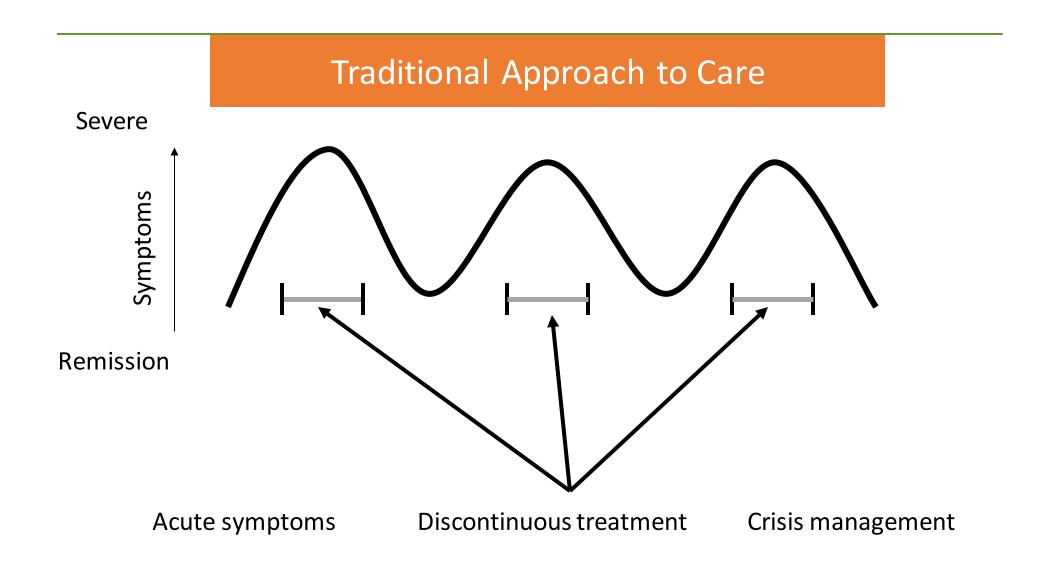
The ASAM Criteria for Treatment Matching



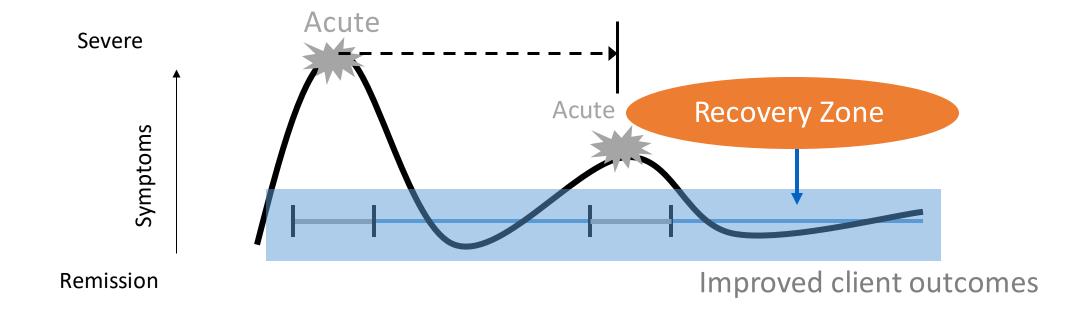
Treatment: Core Components and Services



Treatment Episodes Are Cyclical and Recurrent



Goal: Helping People Move into Recovery Zone





What is a Recovery Coach?

- Research shows *trained peers* with shared experiences have a higher success rate at engaging individuals in need of help.
- Work with people affected by alcohol/substance use disorders.
- Coaches don't diagnose or treat addiction.
- Focus on the future; they do not explore past feelings or trauma.
- Help with decision making, plans towards recovery that will improve lives, one step at a time.
- Provide support in following through.
- Knowledgeable about "multiple pathways" of recovery.

Multiple Pathways of Recovery

- 12-step (AA, NA, CA, ACA, DRA, Women in Sobriety)
- Religious (Celebrate Recovery, Alcoholics for Christ, Pioneer Association) or Spiritual (Refuge Recovery, White Bison)
- Secular (Life Ring, SMART)
- Medicated Assisted Treatment- Methadone, Suboxone, Vivitrol
- Wellness based (Yoga, Meditation, Qigong, Tai-Chi, etc.)
- Active Sober Community (Phoenix Multi-Sport, ROCovery Fitness, Fit2Recover, etc.)
- Online Recovery Supports (In the Rooms, Apps, Daily Affirmations, etc.)

NIAAA Guidelines

Men-less than 4 drinks daily/14 per week total

Women-less than 3 drinks daily/ 7 per week

DRINKING PATTERNS

Never exceed the daily or weekly limits-1 in 100

• Exceed only the daily limit-1 in 5

Exceed both daily and weekly limits -1 in 2

Medical system "ill-prepared" for new wave of older adult substance abusers

- Gerontologists in short supply.
- Physicians receive little-to-no training in addiction.
- Few age-specific treatment programs.

 Adults 60+: substance abuse one of U.S. fastest growing health problems.

- Baby boomers retiring: 10,000 a day.
- 85+ fastest-growing demographic.

Factors contributing to substance abuse

- Grief (loss of spouse, job, ability to function.)
- Trauma (elder abuse).
- Boredom / Ioneliness. Particularly for late onset drinking.
- Family history of alcoholism
- Gender: men more at risk for alcohol abuse; women more at risk for psychoactive medication abuse.
- Previous history of substance abuse
- Cognitive impairment

Patterns of older adult substance use disorders

- Early-onset:
 - substance use disorders develop before age 65.
 - psychiatric and physical problems tend to be higher than late-onset (Bogunovic, 2012).
- Late-onset:
 - substance abuse develops after stressful life situation (death of partner, retirement.)
 - boredom and loneliness high risk factors.
 - Addiction can occur unintentionally (Bogunovic, 2012).

Chronic pain is a high risk factor for both categories (Shallow, 2014).

Prescription drug misuse often overlooked in elderly (Doweiko, 2014).

The use of alcohol with pain pills is a common occurrence.(Neagle, 2012).

IF YOU MEET PEOPLE WHERE THEY ARE YOU WILL ALWAYS WALK AWAY WITH EMPATHY AND NEW UNDERSTANDING

ALWAYS ASSESS

ABILITY

• WILLINGNESS

Trust vs Faith

Everyone makes the best decisions available to them at the time with the choices available to them

Do what the relationship allows for the moment

- WHO BELIEVED IN YOU?
 - (HOW DID YOU KNOW?)

• What messages do you give your kids that you believe in them, have faith in them?

- Listen
- Understand
- Take serious
- Affirm

Reasonable parenting

- based on who your child is not who you think they should be
- show them how much you care before you show them how much you know

ENJOY YOR MATE MORE THAN YOUR CHILDREN

- The greatest gift a father can give to his children is to love their mother and the greatest gift a mother can give to her children is to love their father
 - This is where kids learn intimacy and dignity and respect

Intimacy=Sharing

- 1. Recreational
- 2. Aesthetic
- 3. Social
- 4. Intellectual
- 5. Emotional
- 6. Spiritual
- 7. Physical

- •DEPERSONALIZE
- •BE NICE AND FORGIVE (STAY THE ADULT)

 Tailor intervention based on your relationship with your friend or family member and their relationship with alcohol and drugs

Dysfunctional Family

 There is no such thing as a dysfunctional family. All behavior is adaptive and has a function.

Enabling

- Everyone shows love the best they know how.
- HELP FAMILY MEMBERS REALIGN AND REDEFINE RELATIONSHIPS IN A MANNER WHICH PROMOTES RECOVERY FOR EACH FAMILY MEMBER

•WHO BELIEVED IN YOU?

(HOW DID YOU KNOW?)

•THE MORE YOU SHOW YOUR HUMANESS, THE MORE YOU ARE LOVABLE (FAMILY MEALS)

• What messages do you give your kids that you believe in them, have faith in them?

Mental Health

- Lovable
- Capable
- Connected