

ADDRESSING THE OPIOID CRISIS THROUGH COMPREHENSIVE SCHOOL PROGRAMS & POLICIES

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Prevention Services



- State and federally funded to provide education, training and outreach for individuals in active use, bystanders and the community at large

SUBSTANCE ABUSE PREVENTION COLLABORATIVE (SAPC GRANT)

- Bridgewater, Brockton, East Bridgewater, Rockland, Whitman-Hanson
- Awarded grant in 2015 to address underage drinking amongst high school aged youth
- Mechanism to further address substance use, including opioids, as a whole.
- Extensive needs assessment process; key stakeholders voiced concern on addressing school chemical health policies

BROCKTON AREA OPIOID ABUSE

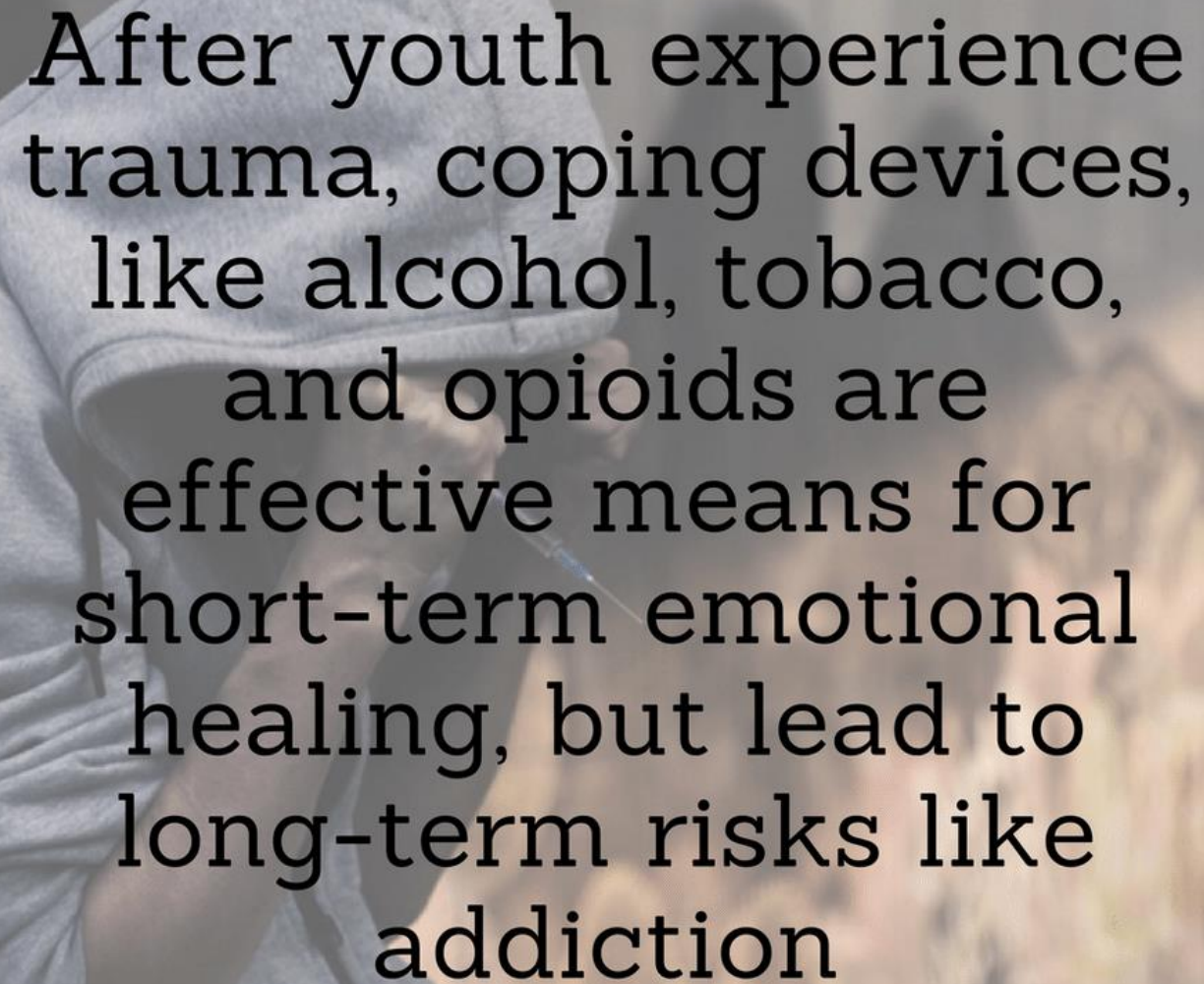


PREVENTION COLLABORATIVE

"ACEs are adverse childhood experiences that harm children's developing brains so profoundly that the effects show up decades later; they cause much of chronic disease, most mental illness, and are at the root of most violence."

- ACES Too High



A person wearing a grey hoodie is shown from the chest up, holding a syringe in their right hand. The background is a blurred outdoor setting. The text is overlaid on the image in a black, serif font.

After youth experience
trauma, coping devices,
like alcohol, tobacco,
and opioids are
effective means for
short-term emotional
healing, but lead to
long-term risks like
addiction

ADVERSE CHILDHOOD EXPERIENCES (ACES)

- Many students have had traumatic experiences
 - Trauma impacts learning, behavior and relationships at school
- Strong community support can reduce severity of trauma symptoms
 - Schools are communities for children



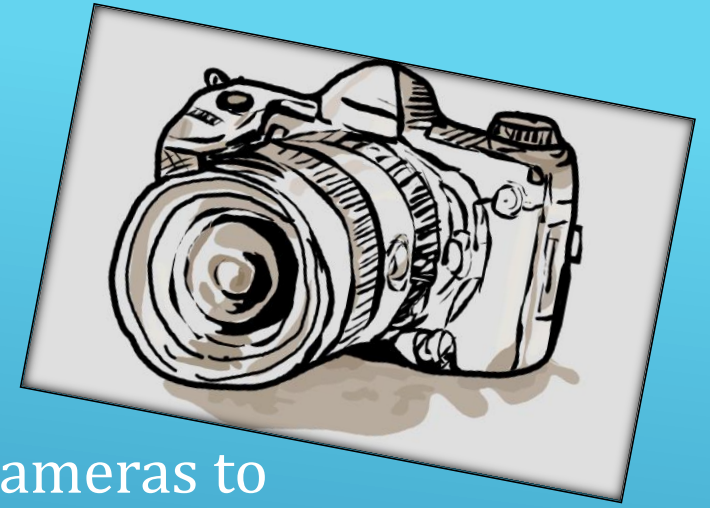
ONE OF THE BEST
PREDICTORS OF A CHILD'S
RESILIENCE IN THE FACE
OF TRAUMA IS
INTERACTING WITH A
CARING, CONSISTENT
ADULT.



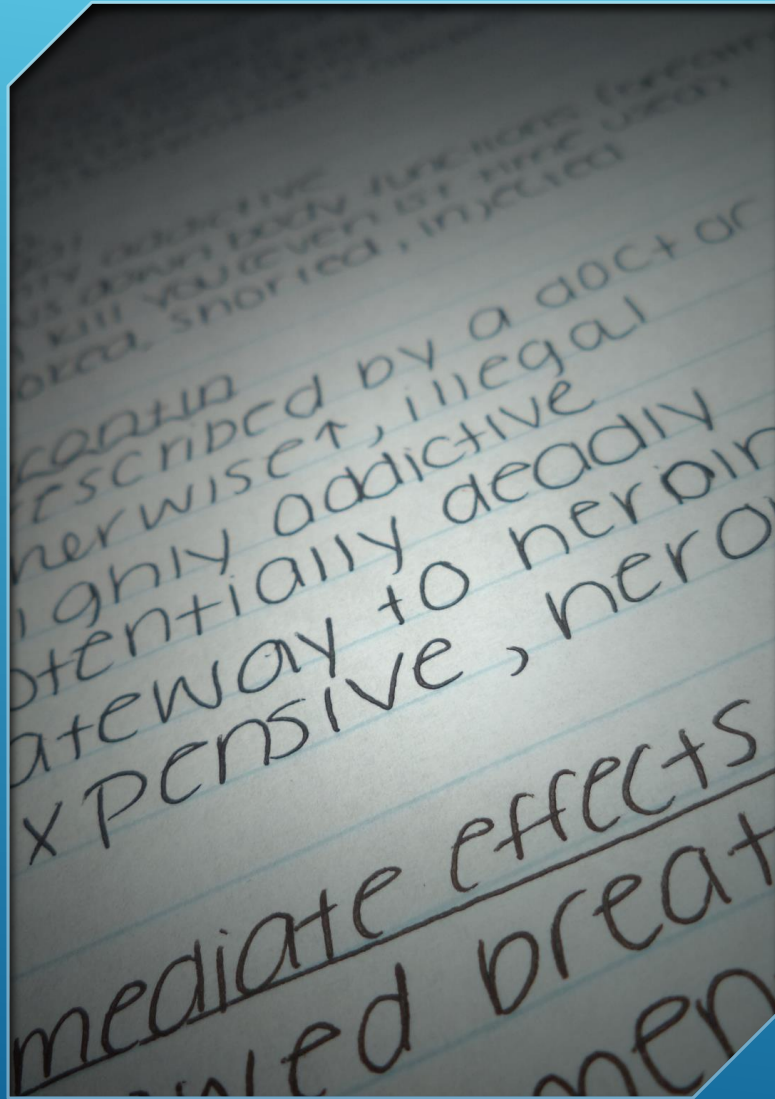
How many schools allow their
students to assist in policy making
or strengthening?

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YOUTH INFORMED PROGRAMMING

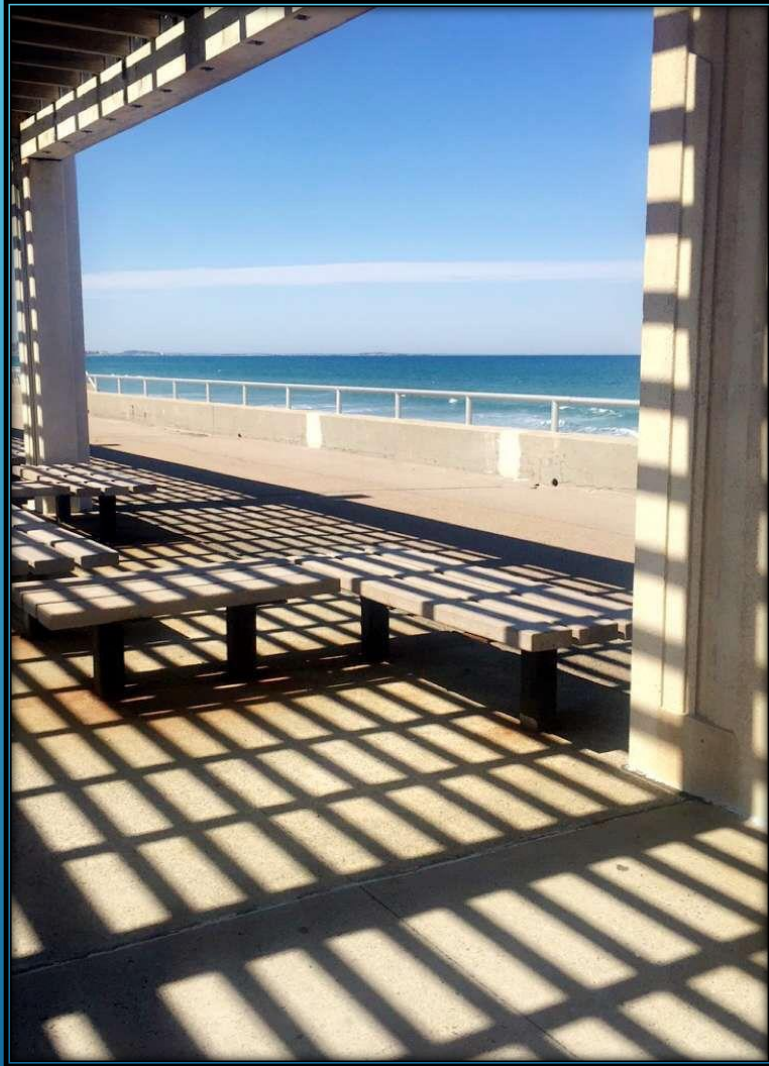


- PhotoVoice
 - Qualitative research method, participants utilize cameras to inform the community on issues.
 - Utilize the youth voice to inform policy strengthening
 - Provide non-traditional drug education while learning from them qualitatively
 - Broad based questions; week 3 is “What Can Be Done”
 - For example: More substance abuse education, less bullying



BROCKTON PILOT, 2013

“I think the biggest problem is that kids don’t know what can happen when you start. It could help them if they know what could happen. When we’re faced with it, you won’t know what to do with it because teachers haven’t talked to you about it. I think the teachers are afraid to talk about drugs; it’s harsh trying to teach even for parents. But when we are faced with it we won’t know what to do because no one even talked to us. People don’t know how serious it is once they start, they think they can try it just once, but then they’re hooked. I’m sure some parents have the conversation. My parents haven’t talked to us about drugs at all, other than don’t do it and stay away from people who do it.”



INDEPENDENCE ACADEMY

“People recovering from drugs need support and counseling. Being able to talk to someone about how you feel and what you’re going through helps relieve the stress. At my school I can always see a counselor when I feel like using, or if I’m upset. I think everyone should have support like this during recovery.”



“This is present in schools; people go to school high all the time.”

JOHNNY HAS A DRUG PROBLEM...

JOHNNY *DOESN'T* DO DRUGS.





CONVERSATION NOT CONFRONTATION

- School sector expressing need for more comprehensive policy
- Other stakeholders acknowledge school policies are often more punitive than supportive or preventative
- Chemical Health Policies within the schools currently offer
 - Minimal assistance, help or resources to students who may already be struggling with SUD in high school

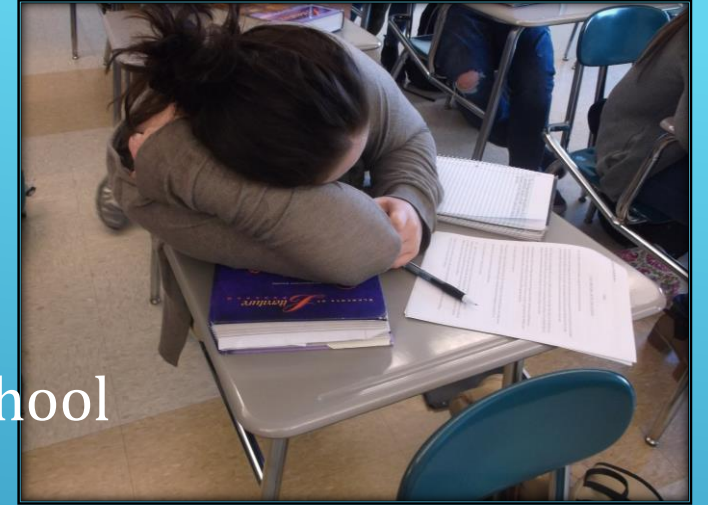


OUR RESPONSE

Substance Abuse Policies by School District			
School	Policy	Disciplinary Actions	Re-Entry Procedures
Brockton	<p>The School's Substance Abuse Policy established for Brockton is based upon the concept that the role of the school is basically educational and rehabilitative; consequently, the major concerns of the school with regard to drug and alcohol use and abuse are the welfare of the individual student and the general welfare of the school population.</p> <p>However, in order to safeguard the individual and general welfare and safety, the school must at times initiate medical, psychological, social and legal safeguards in the case of drug and alcohol abuse.</p> <p>The Brockton School Committee policy is to uphold and enforce the laws of the Commonwealth of Massachusetts relating to the unlawful possession and/or unlawful distribution of controlled substances and alcoholic beverages.</p>	<p>All students may be assigned a suspension of up to 10 days.</p> <p>All students found to be in violation of the policy may lose privileges of extra-curricular activities, including but not limited to sports team participation, prom attendance, and graduation ceremonies.</p> <p>All students may be subject to expulsion for violating the policy.</p> <p>Athletes must adhere to all MIAA rules.</p>	<p>All students may be required to successfully serve their suspension at the Counseling and Intervention Center at the alternative school before being readmitted to their respective schools; failure to complete the alternative placement intervention at the CIC may result in permanent assignment to that school or expulsion.</p>
Bridgewater-Raynham	<p>The Code of Conduct states that the possessing, selling, distributing, or being under the effect of an alcoholic beverage or controlled substance will not be tolerated.</p> <p>The Alcohol Policy is based upon the concept that the role of the school is educational and rehabilitative.</p> <p>However, it should be clearly understood by the students, parents, and citizens of Bridgewater and Raynham that the use, possession, distribution or being under the influence of alcohol will not be tolerated in the Bridgewater-Raynham High School or on its property.</p>	<p>Any student who is found to be under the influence, in possession of, or to have distributed alcohol on school property or at school-sponsored events will be suspended from school, after an appropriate informal hearing, for a minimum of eight (8) days (for the first offense).</p> <p>For a second offense, the student will be suspended for a minimum of ten (10) days and his/her record may be placed before the School Committee with a recommendation for expulsion.</p>	<p>At the conclusion of the minimum eight-day suspension, the student will be permitted to return to school following a satisfactory conference held with the student, the parents/guardians, the administration, guidance personnel and compensatory services. At this conference a specific plan will be developed to monitor and assist the student.</p>

OUR RECOMMENDATIONS

- Consider best practices while including feedback from school administrators
- Consider requirements for parent and community health education programs
- Complete a bi-annual needs assessment to determine the issues of greatest prevalence within the school's community.
- Ensure that health educators are receiving continued health education and are knowledgeable of current trends



MODEL POLICY

- Rationale
- Prevention of Unsafe and Unlawful drug use
- Intervention Plan
- Identification of drug related problems
- Assistance and Referral




RATIONALE


- Many factors that lead to the use of tobacco, alcohol & other drugs. This policy should be as comprehensive as possible.
 - Framework should address substance use and other drug related problems in a caring and consistent manner for the school community.
- Should be binding on all members of the school community while on school premises, at a school function or excursion.
 - Should include parents, staff, volunteers, and visitors
 - Should have mission statement and goals.



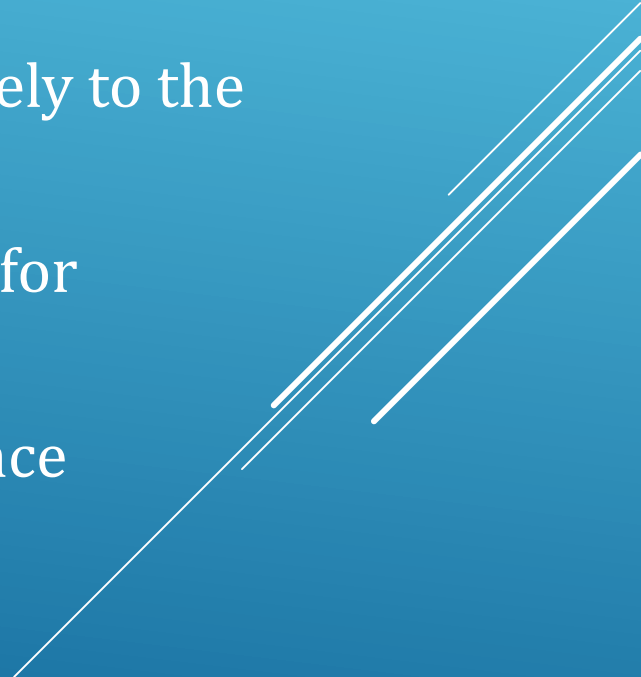
PREVENTION OF UNSAFE & UNLAWFUL DRUG USE

- Every two years, a needs assessment should be conducted to identify the areas of highest prevalence
 - Health education needs to be comprehensive and up to date
 - Teachers need to have continuing education
 - Requirement of parent and community health education programs wherever possible
 - Policy should be reviewed on a regular basis
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INTERVENTION PLAN

- Responding to incidents of drug use broadly then with specific protocols based on substances consumed.
 - All of the substances should offer counseling first then disciplinary after.
 - Differences between students who are using, distributing and in possession.
 - Each of these students may be in need of different services, resources, guidance and consequences.
 - Clearly defining differences in these situations and associated disciplinary actions and re-entry procedures, allows for more appropriate intervention.
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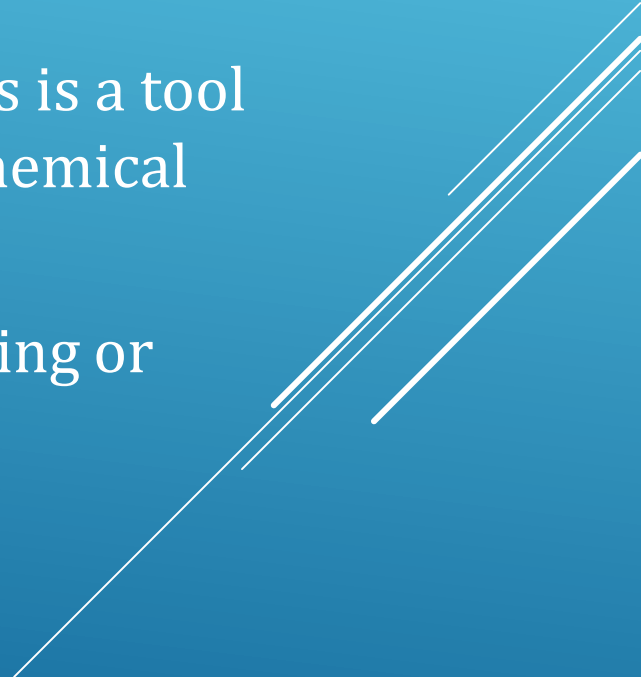
INTERVENTION PLAN ; RESPONDING TO INCIDENTS OF DRUG USE

- Developed with the health and welfare of students in mind.
 - Respond to student's immediate safety.
 - Accompany student and take the substances involved immediately to the office.
 - School administration identify a point person to be responsible for managing instances
 - Actions may vary based on details of incident, including substance involved, the behavior history and impact of other students.
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IDENTIFICATION OF DRUG RELATED PROBLEMS

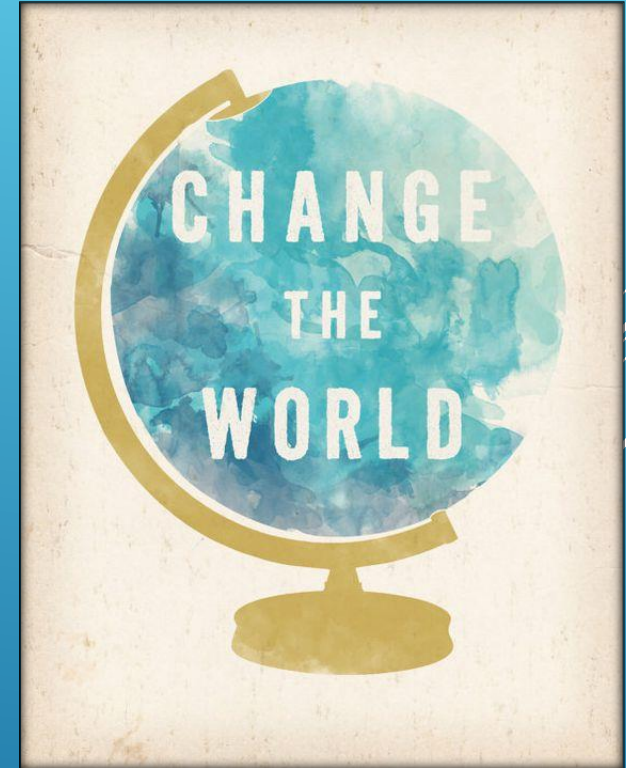
- Having someone trained as a drug recognition expert could be beneficial for the community. Contact your local police department for more information.
 - www.massdre.org
- The school should have a designated staff person to identify drug related problems and monitor students where necessary.
- When drug use is suspected this staff person would be referred to and drug policy would be applied.

ASSISTANCE AND REFERRAL

- Have list of contacts identified and ready to be provided in case of incident
 - With SBIRT services being required within school districts, this is a tool that should be prepared regardless of any changes to school chemical health policies.
 - Offer mechanism to have students engaged in a program, training or class, rather than spending a suspension out of school.
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BE THE CHANGE

- Provide professionals with tools to inform school districts on how to best implement policies that are all encompassing, non-punitive and solutions based.
- We believe these changes would:
 - Reduce the amount of substances used by students
 - Increase the connectedness between the school, parents, and local resources to provide comprehensive education and support regarding substance use



INDEPENDENCE ACADEMY

A Different Angle

► Nosce te Ipsum

- What are my triggers?
- Why do I use?
- When do I use?
- What are my coping skills?
- Who are my support people?
- What supports are available to me in the community?



Our Schedule – Every Day

9:00AM – 10:00AM

Daily Journal Writing

Physical Exercise

Reading (for pleasure or development)

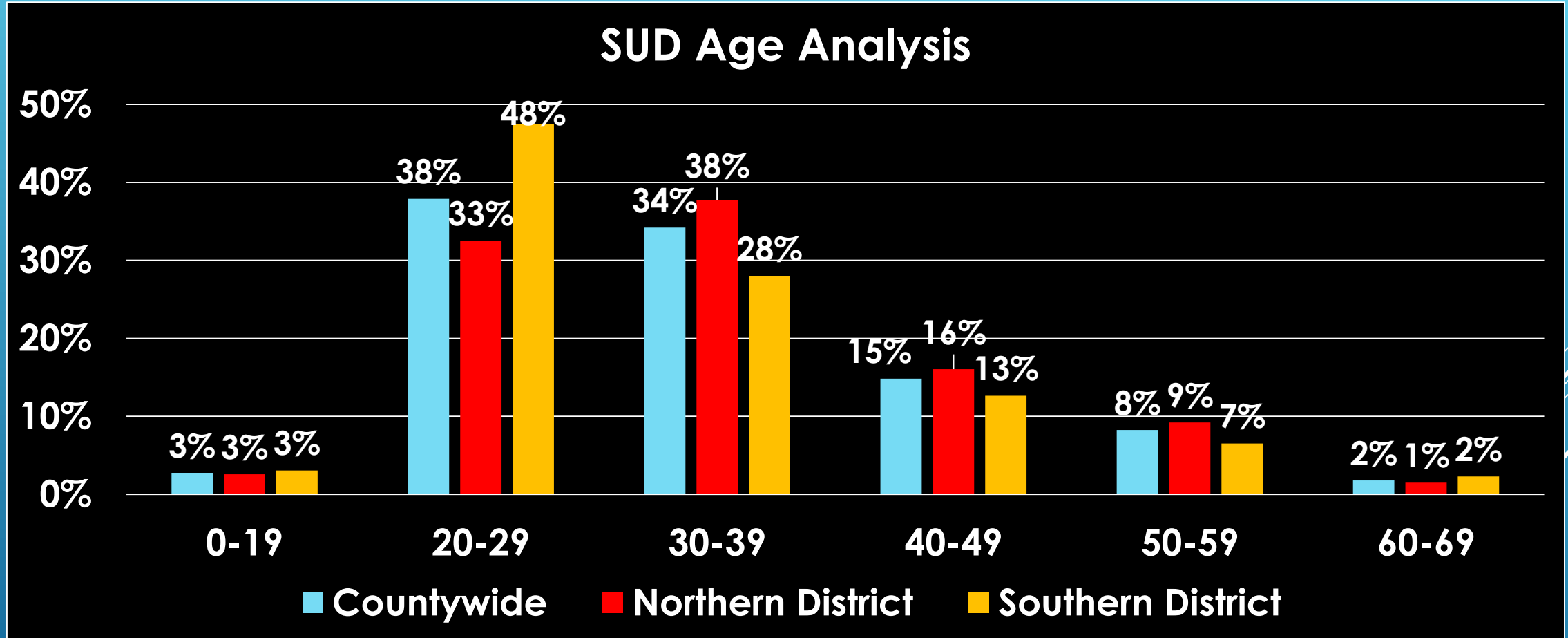
Mindfulness

1:55PM – 2:25PM

Peer Group

Daily Reflection

PCO: INCIDENT ANALYSIS (JAN-JUNE 2017)



Younger individuals age 20-29 were overrepresented in the South District (48%) compared to the North (33%). SUD's age 30-39 were overrepresented in the North District (38%) compared to 28% in the South District.

The Presenting Problem?

“There comes a point where we need to stop just pulling people out of the river. We need to go upstream and find out why they are falling in”


- Desmond Tutu

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THE OPIOID EPIDEMIC



Engaging Youth

- Marijuana use
 - 1000 ---> 40% ---> 17% = 68 students
 - Who do they talk to?
 - Have to build capacity with trusted adults
 - What does that conversation look like?
 - Open and honest without fear of repercussions
 - What resources are available?
 - What opportunities for SEL exist?
- 

Setting Us Up to Fail

- Screening - SBIRT?
 - Opioid Addiction vs. MJ Addiction
 - SU “experts” in schools?
 - Referrals to Treatment
 - “Overwhelmed” schools and agencies
 - Courts and CRAs – “it's just marijuana”
 - Parents – “at least it's not heroin”
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Starting Early

- Identifying children early – Risk Factors Relationships/Home, Community, Societal
- Identifying and Implementing Protective Factors
 - Universal – Not Opioid Abuse Curriculum
 - Selective – who have identified risk factors
 - ****PREVENTATIVE INTERVENTIONS– who have violated policies***

Three Scenarios

Student 1


Comes to
school
under the
influence

Student 2

Smells like
weed, has a
small bag
in pocket

Student 3

Caught
selling
Xanax to
students

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CURRENT SITUATION

14 year old boy, not acting his normal self. “The Big 3” are impacted. Withdrawing from interests but developing other interests, other groups of friends.

Isolating in his room. Family intact and have had multiple conversations but nothing really changing.

Going to school but becoming more apathetic.

Comes to school smelling of weed and admits to being under the influence.

WHAT NOW????

CONTACT INFORMATION

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