

Substance Use and Fentanyl Awareness



Welcome

- ▶ Panel Discussion
 - ▶ Fentanyl overview
 - ▶ What does youth substance look like in our community?
 - ▶ PPS substance use supports for prevention and intervention
 - ▶ Adolescent treatment services and supports at NARA
 - ▶ Hear from students directly
- ▶ Breakout Sessions
 - ▶ Processing space
 - ▶ Youth-specific space – chat and ask questions
 - ▶ How to talk with your kids about substance use

Our speakers

- ▶ Anna Bledsoe, Big Village
- ▶ Lydia Bartholow, DNP, PMHNP, CARN-AP
- ▶ Kalu Obasi, Volunteers of America Oregon
- ▶ Dr. Jenny Withycombe and Mary Krogh, Portland Public Schools
- ▶ Christy Hudson, NARA
- ▶ Cordelia Kraus LPC, CADC 1, certified CRAFT clinician & Lurlene Shamsud-Din M.S., QMHP, CADC III
- ▶ Jeremy Ralls, Harmony Academy, Emily Rask and Dakota Behr, Students
- ▶ Isabella Dean, Haven Recovery & Nora Johnson

Big Village

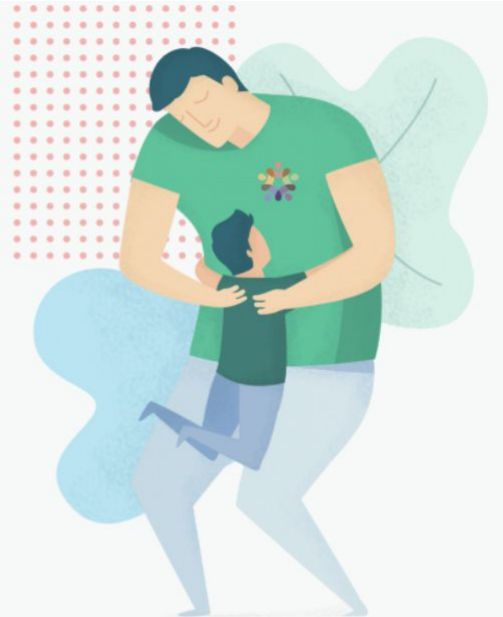
- ▶ Get in touch with us!
 - ▶ Bigvillagepdx.org
 - ▶ bigvillagepdx@gmail.com
 - ▶ Coordinator (Clair Raujol):
971-337-5463



Building a stronger PDX community

Big Village PDX is passionate about making Portland an even better place for our youth as we engage the community to identify substance abuse problems and solutions. We foster creativity and innovation while remaining grounded in evidence-based approaches.

[LEARN MORE](#)



Lydia Bartholow

- ▶ What is fentanyl in Multnomah County?
- ▶ How is it best to talk about fentanyl with you (teenagers)?
- ▶ What is Narcan and how do you access it?
- ▶ Accidental skin exposure – not a real concern
- ▶ Thank you!

What is fentanyl?

- ▶ Ultra potent opioid, 50-100 times more potent than morphine
- ▶ Dominating the illicit opioid supply across the country
- ▶ Less than 1% of fentanyl-related overdoses in Multnomah county people under the age of 18



How to talk about fentanyl

Doesn't work	Does Work
Just say No	Centralize Safety
Never do any pills, ever	Encourage openness and transparency
Don't do any drugs, they are bad	Focus on knowledge base <ul style="list-style-type: none">- Narcan- Fentanyl test strips
People who drugs are bad	

Narcan

- ▶ Opioid overdose antidote
- ▶ Available at any Oregon pharmacy without a prescription
- ▶ Often free by mail-order online
- ▶ Very easy to use
- ▶ No harm done if NOT an opioid overdose
- ▶ Should be in school backpacks and in the your kitchen
- ▶ WORKS on Fentanyl!



Accidental Skin Exposure



ACMT Releases Safety Precautions for Emergency Responders in Case of Fentanyl Exposure

Fentanyl exposure safety precautions based on the experience of physicians who specialize in medical toxicology.

PHOENIX, JULY 19, 2017—On July 12, 2017, the American College of Medical Toxicology (ACMT) and the American Academy of Clinical Toxicology (AACT) released a detailed statement on safety precautions for emergency responders in case of fentanyl exposure. Fentanyl is an ultra-potent opioid that police, firefighters and paramedics may encounter when responding to medical calls, crime scenes, or drug raids.

Despite concerning stories of emergency responders developing symptoms after exposure of skin to fentanyl residue or powder, the reported symptoms have not been consistent with poisoning by opioids. In addition, these drugs are not absorbed well enough through the skin to cause sickness from incidental contact.

ACMT contends that emergency responders should exercise reasonable caution around unknown drugs. However, excessive personal protective equipment (which has been recommended by some safety organizations) may be harmful because bulky, unnecessary equipment could potentially interfere with vital tasks that emergency responders perform.

Accidental skin exposure doesn't happen

- ▶ Despite concerning stories of emergency responders developing symptoms after exposure of skin to fentanyl residue or powder, the reported symptoms have not been consistent with poisoning by opioids. In addition, these drugs are not absorbed well enough through the skin to cause sickness from incidental contact.

Thank you

Always available (albeit slowly) for questions via email:

Lydiabartholow.pmhnp@gmail.com

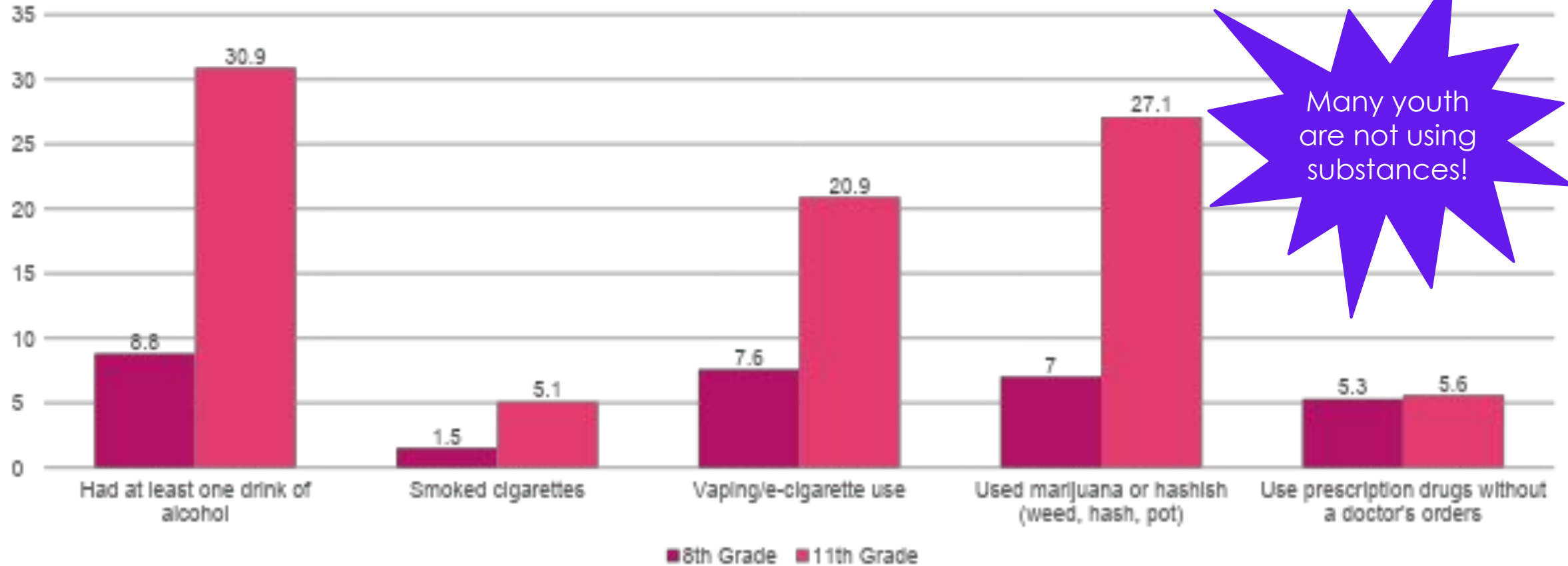
www.lydiabartholow.com

Youth Substance Use in Multnomah County

▶ Presented by: Kalu Obasi



Oregon Healthy Teens Survey, 2019



Risk Factors:

Conditions that increase the likelihood of developing problems with substance use

Some examples:

- Age of first use
- Family history of addiction
- Mental health issues
- Exposure to trauma

Protective Factors:

Conditions that reduce the likelihood of developing problems with substance use

Some examples:

- Family cohesion and support
- Clear rules and expectations
- Healthy communication
- Involvement in activities that promote pro-social engagement, such as community building-activities



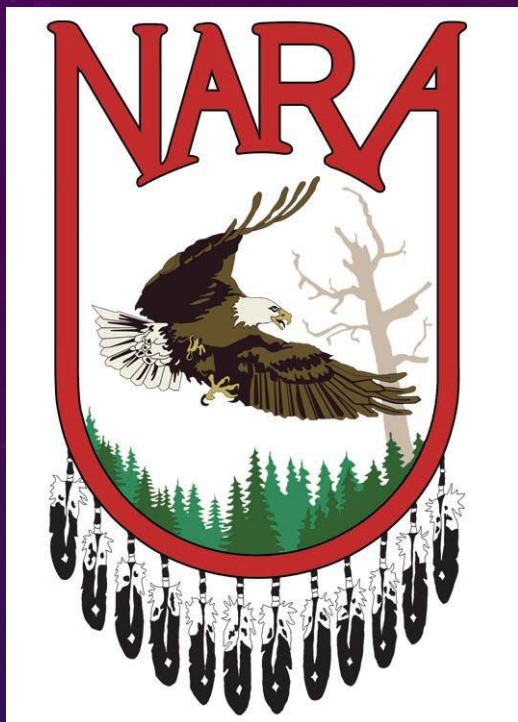
Supports specific to PPS

- ▶ Overview of Substance Use Prevention Education requirements in Oregon
 - ▶ Annual drug and alcohol prevention education, K-8 and in High School
 - ▶ Skills Based Standards
- ▶ Overview of supports in Portland Public Schools
 - ▶ Primary Prevention Units
 - ▶ Drug and Alcohol Specific Units
 - ▶ Living Scope and Sequence
 - ▶ Laws, Mandates, and Policies
 - ▶ Oregon Health Education Standards
 - ▶ Best Practices
 - ▶ Data - Qualitative (Youth Risk Behavior Survey; Successful Schools Survey; Health Teacher Surveys)
 - ▶ Data - Quantitative (Public Health, Teachers, Students)

The Health Skills



Project School Wellness



Native American Rehabilitation Association of the Northwest

- Services: Youth Outpatient and Residential Treatment
- Youth Alcohol and Drug Outpatient Treatment Services serving youth and young adults to age 25. Our services include individual alcohol and drug counseling, alcohol & drug educational groups, relapse prevention, recovery focused groups as well as culture group. Outpatient services also includes equine therapy, youth suicide prevention services, re-engagement services for youth needing to get back on track with school. Native American regalia making such as ribbon shirts and skirts, shawls, beading, drumming and drum making. Youth outpatient can provide services to schools, individuals and families as well as referrals from community justice programs. Youth A&D outpatient has certified recovery mentors, cultural specialist and certified alcohol & drug counselors. Our program can continue services for youth coming out of the inpatient treatment program.
- Our Team:
- Luci LaDue A&D Treatment Director Youth OP & YRTC (971) 413-2206
- Christine Hudson Youth OP Team Lead & Youth A&D Counselor (503) 349-2631
- Twila Jones Youth OP Cultural Specialist & CADC-R (503) 396-7109
- Mary Perry Youth Certified Recovery Mentor & Peer Support Specialist (971) 221-5820

620 NE 2nd Street
Gresham, OR 97030
971-274-3757

Email:
youthop@naranorthwest.org

- NARA Youth Residential Treatment Center is 24hr inpatient residential facility providing inpatient drug and alcohol treatment for youth ages 12-17

The YRTC is a 24-bed unlocked co-ed facility providing treatment for youth with a primary diagnosis of substance use disorder. We serve American Indi-an/Alaskan Native and other youth be-tween the ages of 12-17.

Our length of stay is approximately 90-180 days, dependent on the progress of the youth.

We offer a multi-disciplinary treatment program that includes medical, dental, mental health, education and cultural activities.

We use a variety evidence based practice counseling modalities.

Contact info for YRTC:

Luci LaDue Youth A&D Outpatient & YRTC Director

Nathan Perry Clinical Supervisor YRTC

Lela Buser YRTC Intake Specialist/Admissions (971) 413-0514

620 NE 2nd Street
Gresham OR 97030
971-274-3757

Communicating with your child about substance use

- ▶ What we say doesn't matter if it's not being received by the other person
- ▶ We can't control them but we can increase the chances that we will be heard... and talked to.
- ▶ Helpful for any conversation - research done specifically on talking about substance use with a love one.

Perspectives & Skills for Effective Communication





- ▶ Stance: Collaboration, Empathy & Validation, Curiosity
- ▶ Skills:
 - ▶ Awareness of your teen's response in the moment
 - ▶ Skills for Listening (to encourage them to talk)
 - ▶ Skills for Talking (to encourage them to listen)
- ▶ Many resources available to help you learn these skills and perspectives over time:

<https://tinyurl.com/fentanyl-info-night-041922>



Harmony Academy: We Recover in Community

Youth need each other to recover! They also need responsive systems. At Harmony Academy, youth with SUD and co-occurring disorders show up for each other and for themselves and are welcomed each day. They learn to be happy, healthy and free while earning a high school diploma and dreaming of and working towards a bright future. Harmony is a public school for youth who want something different. Enrollment is low barrier. The program is accessible, youth-centered, and values multiple paths towards freedom from substances.

RISK FACTORS Risk factors increase the likelihood young people will develop health and social problems.	DOMAIN	PROTECTIVE FACTORS Protective factors help buffer young people with high levels of risk factors from developing health and social problems.
<ul style="list-style-type: none"> ▪ Low community attachment ▪ Community disorganisation ▪ Community transitions and mobility ▪ Personal transitions and mobility ▪ Laws and norms favourable to drug use ▪ Perceived availability of drugs <ul style="list-style-type: none"> ▪ Economic disadvantage (not measured in youth survey) 		<ul style="list-style-type: none"> ▪ Opportunities for prosocial involvement in the community <ul style="list-style-type: none"> ▪ Recognition of prosocial involvement ▪ Exposure to evidence-based programs and strategies (some are measured in youth survey)
<ul style="list-style-type: none"> ▪ Poor family management and discipline <ul style="list-style-type: none"> ▪ Family conflict ▪ A family history of antisocial behaviour ▪ Favourable parental attitudes to the problem behaviour 		<ul style="list-style-type: none"> ▪ Attachment and bonding to family ▪ Opportunities for prosocial involvement in the family ▪ Recognition of prosocial involvement
<ul style="list-style-type: none"> ▪ Academic failure (low academic achievement) <ul style="list-style-type: none"> ▪ Low commitment to school ▪ Bullying 		<ul style="list-style-type: none"> ▪ Opportunities for prosocial involvement in school ▪ Recognition of prosocial involvement
<ul style="list-style-type: none"> ▪ Rebelliousness ▪ Early initiation of problem behaviour <ul style="list-style-type: none"> ▪ Impulsiveness ▪ Antisocial behaviour ▪ Favourable attitudes toward problem behaviour ▪ Interaction with friends involved in problem behaviour <ul style="list-style-type: none"> ▪ Sensation seeking ▪ Rewards for antisocial involvement 		<ul style="list-style-type: none"> ▪ Social skills ▪ Belief in the moral order <ul style="list-style-type: none"> ▪ Emotional control ▪ Interaction with prosocial peers