PREVENTING THE PAIN:
An Early Drug Intervention and Prevention Model
During this class we will highlight the significance of early drug intervention and introduce several effective prevention tools and curriculum. We will discuss the belief that prevention is an essential element towards fighting against the growing problem of drug use and abuse in our country. We will discuss how drug use and abuse is not a problem solely belonging to the individual, but rather, the grave effects it has on the foundation and security of the family structure, the community, and society as a whole. We will look at how to introduce and apply evidence based prevention techniques and materials to educators, parents, and social service agencies. The hope is, some if not all, of this material can be used in the classroom, in the home and through community outreach programs.
EARLY INTERVENTION
EARLY INTERVENTION

• Early intervention is a system of coordinated services that promotes the child's age-appropriate growth and development and supports families during the critical early years.
WHO NEEDS OUR HELP?

• Every child on the planet, needs the guidance help, and love of the adults in their lives.

• NIDA, the National Institute of Drug Abuse, conducted a study in 2013, which included approximately 67,800 participants.

• In this study they reported that In 2013, an estimated 24.6 million Americans aged 12 or older—9.4 percent of the population—had used an illicit drug in the past month.

• So it is safe to say at least 24.6 million Americans are in need of intervention and prevention models.

TRENDS IN PREVALENCE OF VARIOUS DRUGS

National Institute on drug abuse reports the trends from 2012-2015 for 8th grade to 12th grade students using illicit drugs. The report shows:

<table>
<thead>
<tr>
<th>Drug</th>
<th>Time Period</th>
<th>8th grade</th>
<th>10th Grade</th>
<th>12th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>2015</td>
<td>21%</td>
<td>42%</td>
<td>58%</td>
</tr>
<tr>
<td>Cigarettes</td>
<td>2015</td>
<td>4%</td>
<td>6%</td>
<td>11%</td>
</tr>
<tr>
<td>Hallucinogen</td>
<td>2015</td>
<td>1.30%</td>
<td>3%</td>
<td>4%</td>
</tr>
<tr>
<td>MDMA</td>
<td>2015</td>
<td>1.40%</td>
<td>2%</td>
<td>4%</td>
</tr>
<tr>
<td>Heroin</td>
<td>2015</td>
<td>0.30%</td>
<td>0.50%</td>
<td>0.50%</td>
</tr>
<tr>
<td>Inhalants</td>
<td>2015</td>
<td>5%</td>
<td>3%</td>
<td>2%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>2015</td>
<td>12%</td>
<td>25%</td>
<td>35%</td>
</tr>
</tbody>
</table>
MENTAL ILLNESS AND SUBSTANCE ABUSE

Mental Illness

- Approximately 1 in 5 adults in the U.S.—43.8 million, or 18.5%—experiences mental illness in a given year.1
- Approximately 1 in 25 adults in the U.S.—10 million, or 4.2%—experiences a serious mental illness in a given year that substantially interferes with or limits one or more major life activities.2
- Approximately 1 in 5 youth aged 13–18 (21.4%) experiences a severe mental disorder at some point during their life. For children aged 8–15, the estimate is 13%.3
- 1.1% of adults in the U.S. live with schizophrenia.4
- 2.6% of adults in the U.S. live with bipolar disorder.5
- 6.9% of adults in the U.S.—16 million—had at least one major depressive episode in the past year.6
- 18.1% of adults in the U.S. experienced an anxiety disorder such as posttraumatic stress disorder, obsessive-compulsive disorder, and specific phobias.7
- Among the 20.2 million adults in the U.S. who experienced a substance use disorder, 50.5%—10.2 million adults—had a co-occurring mental illness.8

Substance Abuse

- Those who are mentally ill are more likely to abuse drugs and/or alcohol. The two issues often go hand in hand. According to SAMHSA, 26.7% of people with mental health issues abused illicit drugs in 2012. In the general public, only 13.2% of people abused drugs.
- Undiagnosed mental illness can lead to substance abuse as the person tries to treat the symptoms of the mental condition. Depression, anxiety, paranoia, and restlessness are some of the common symptoms that mentally ill addicts are trying to self-medicate.
THE BEST TIME TO PLANT A TREE WAS 20 YEARS AGO. THE SECOND BEST TIME IS NOW.” – CHINESE PROVERB

No one plants a tree and expect to wake up and see a seedling the next day, one realizes it takes time and care to grow. Our children are as such, intervention and prevention education takes time to set in and take root. The earlier we begin the more ground we can cover.
NOT A INDIVIDUAL ISSUE

• The impact of drug use and abuse has a significant and direct impact on the family.
• It shakes the foundation of the family structure
• Forces Grandparents or public organization to raise the children of an individual addicted to drugs
• Limited recourses to the grandparents that take in their grand children
• Lack of community support groups for the mental health and well being of the grandparents
• The cost of drug abuse on a society
DRUG ABUSE AND THE COMMUNITY

• Cost to jail individuals that have committed crimes as a direct result of drug abuse and use
• Cost of prevention programs/and staffing each facility
• Cost of Ambulance and Fire Services (Emergency situations and overdose)
• Cost of treatment centers, rehab and detox centers
• Substance abuse costs our Nation over $600 billion annually and treatment can help reduce these costs. Drug addiction treatment has been shown to reduce associated health and social costs by far more than the cost of the treatment itself. Treatment is also much less expensive than its alternatives, such as incarcerating addicted persons. –NIDA, 2016

• According to several conservative estimates, every dollar invested in addiction treatment programs yields a return of between $4 and $7 in reduced drug-related crime, criminal justice costs, and theft. When savings related to healthcare are included, total savings can exceed costs by a ratio of 12 to 1. NIDA 2016
RECOVERY-ORIENTED SYSTEMS OF CARE

• Recovery-oriented systems of care (ROSC), is defined as: a coordinated network of community-based services and supports that is person-centered and builds on the strengths and resilience of individuals, families, and communities to achieve abstinence and improved health, wellness, and quality of life for those with or at risk of alcohol and drug problems.
IMPLEMENTING ROSC

- Effective Training and education for persons in the helping professions
- Cultural Sensitivity training for persons in the helping professions
- Collaboration of services offered in the community
- Policy Evaluation/ Staying current on the needs of the community
- Distributing Resources evenly
- Prevention Education expansion
- Make Life Skills training mandatory in the school for all Children K-12
- Follow up
- Vocational Training Career readiness education
**LIFE SKILLS**: A SKILL THAT IS NECESSARY OR DESIRABLE FOR FULL PARTICIPATION IN EVERYDAY LIFE.

We know that healthy Life skills are critical important, and without them prevention can not effectively be implemented. Life skills are the tools that empower youth to make sound wise decisions about their bodies and their lives.

Life skills are the foundation of prevention they engage the **whole** individual: mind, body, and soul.
LIFE SKILLS TEACH

• Good decision making
• Awareness: Self and Community
• Options
• Coping Skills
• Perspective
• Empowerment

• **Life skills education**
  Life skills education is a structured program of needs- and outcomes-based participatory learning that aims to increase positive and adaptive behavior by assisting individuals to develop and practice psycho-social skills that minimize risk factors and maximize protective factors. Life skills education programs are theory- and evidenced-based, learner-focused, delivered by competent facilitators, and appropriately evaluated to ensure continuous improvement of documented results.
SYSTEM OF COORDINATED SERVICES

Early intervention programs include the individual, the family, and their community. America has decided that education beginning at 3 years old is imperative to the growth and development of young healthy minds and strong communities. This concept birthed the Head Start program here in the US.

In January of 1964, President Lyndon B. Johnson declared The War on Poverty in his State of the Union speech. Shortly thereafter, Sargent Shriver took the lead in assembling a panel of experts to develop a comprehensive child development program that would help communities meet the needs of disadvantaged preschool children.
PROPOSAL: FROM PRESCHOOL TO COLLEGE

If we can effectively implement early prevention education beginning in preschool and carry it out through college; the idea is that each individual will have a myriad of tools and recourses to cope with the challenges of life.

Implement a Pre-School evidenced based model that is used universally

Carry significant concepts and build on them as the child ages

Encourage children to use their tools in life simulation activities

Offer community incentives for children displaying these skills
<table>
<thead>
<tr>
<th>Individual</th>
<th>Family</th>
<th>Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address, assess, and diagnose Mental health issues early.</td>
<td>Defining and Maintaining emotionally healthy homes</td>
<td>Offering Community resources to all people</td>
</tr>
<tr>
<td>Medical health intact</td>
<td>Encourage the growth of the family structure</td>
<td>Make resources available to the participants</td>
</tr>
<tr>
<td>Exploration</td>
<td>Address complicated family dynamics that may exist</td>
<td>Educational programs</td>
</tr>
<tr>
<td>Education</td>
<td>Access to care</td>
<td>Support groups</td>
</tr>
<tr>
<td>Personal Safety</td>
<td>Access to resources</td>
<td>Life skill classes</td>
</tr>
<tr>
<td>Inspiration and motivation mantra</td>
<td>Stability</td>
<td>Fundraising</td>
</tr>
<tr>
<td>Character development</td>
<td>Jobs and money</td>
<td>Prioritize each Communities need</td>
</tr>
<tr>
<td></td>
<td>Life skill implementation</td>
<td>Effective Schools</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Good teachers</td>
</tr>
</tbody>
</table>
PREVENTION

Proactive VS Reactive
PREVENTION

• The road to recovery is a difficult road to travel.
• One of the most effective methods to not go down that road is to never start in the direction of drug use and abuse; and prevention is that method!
• Recovery is possible prevention is sure
• Prevention allows us to be proactive rather than reactive
**Project Alert** is a drug prevention program specifically designed for Middle school students. The curriculum is published by the BEST Foundation for A Drug-Free Tomorrow, adapted from an original curriculum developed and tested by RAND. Project Alert has been designated an exemplary Model Program by both the U.S. Department of Education and the U.S. Department of Health and Human Services. Proven results for research participants compared with control groups provide strong evidence of reduced marijuana use initiation, decreased current and heavy smoking, reduced pro-drug attitudes and beliefs, success in helping smokers quit and effectiveness for ethnically diverse youth, and both high and low risk adolescents. Detailed information on all the research behind Project Alert can be found at: www.projectalert.com/fundamentals_research.asp.
PREVENTION PROGRAMS

• **Too Good**: Too Good is a family of comprehensive drug and violence prevention programs written by the Menendez Foundation designed to mitigate risk factors and build protection against problem behaviors. A comprehensive body of evidence demonstrates the positive effects of Too Good on emotional competency skills, decision-making ability, intentions to use illicit substances, substance use behavior, and intentions to engage in aggressive behavior. Too Good programs have demonstrated effectiveness in third party evaluations.

• **The theoretical foundation of Too Good includes elements of**:  
  - Social Learning Theory (Bandura)  
  - Problem Behavior Theory (Jessor)  
  - Health Behavior Theory  
  - Social Development Model (Hawkins and Catalano)  
  - 40 Developmental Assets (Search Institute)
REFERENCE

• http://drugabuse.com/library/mental-health-and-drug-abuse/

• http://www.nami.org/Learn-More/Mental-Health-By-the-Numbers


• http://www.toogoodprograms.org/too-good/research

• https://www.projectalert.com/
