
Parenting for Prevention

Student Assistance Services Corp., 660 White Plains Road, Tarrytown, New York, 10591, January, 2013

Not My Kid



As you may recall, this newsletter featured an awareness campaign last year with the tag line, “If It’s Not Your Kid, Whose Kid is It?” The goal was to have parents realistically consider the fact that it could be “their” child and not the “other” children in their community who are using alcohol.

I would suggest, based on several anecdotal stories that I have heard, that this phrase should be applied to the possibility that mainstream students as using other drugs as well. And that includes marijuana. However, another emerging trend is the use of prescription drugs by teens. That is worrisome enough but once addicted to prescription drugs the next step for some is moving on to heroin.

The results of getting involved and probably addicted to heroin are devastating. It has a very high addiction rate and most teens are unaware of the potency of this drug. Be vigilant about children using prescription drugs as this could result in a long, tortuous road.

Patricia Murphy Warble, LMSW, PCC

Monitoring The Future

The results of this years Monitoring the Future (MTF) results were released in mid-December. MTF is an ongoing study of the behaviors, attitudes and values of high school students. Each year about 50,000 students in 8th, 10th and 12th grade are surveyed. The survey has been given to 12th graders since 1975 and 8th and 10th graders since 1991. MTF is conducted by the Survey Research Center at the University of Michigan.



a continuing study of American youth

The release of this information provides substance abuse prevention professionals with an accurate picture of which substances teens in our country are using. The survey also provides important information about drug trends and attitudes. This year there is concern about drugs that are “under the radar” like bath salts, synthetic marijuana and salvia. Locally there is concern about an increase in heroin use and heroin deaths among older teens and young adults. The following are some of the important findings from this year’s survey of U.S. secondary school students as reported in the MTF press release.

Alcohol. Use of alcohol declined on all measures in 2011, bringing rates down to historic lows during the life of the study. For 8th graders, these significant declines continued into 2012 for 30-day prevalence of drinking and 2-week prevalence of having five or more drinks in a row described as binge drinking. For 10th and 12th graders, however, the declines in alcohol use halted in 2012.

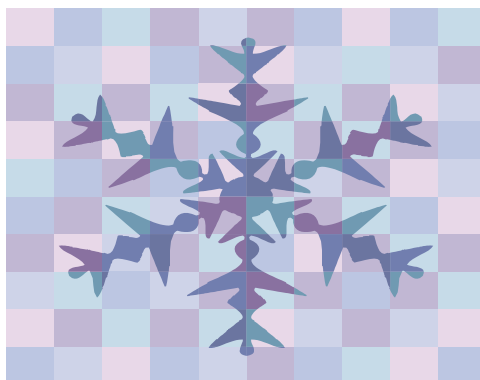
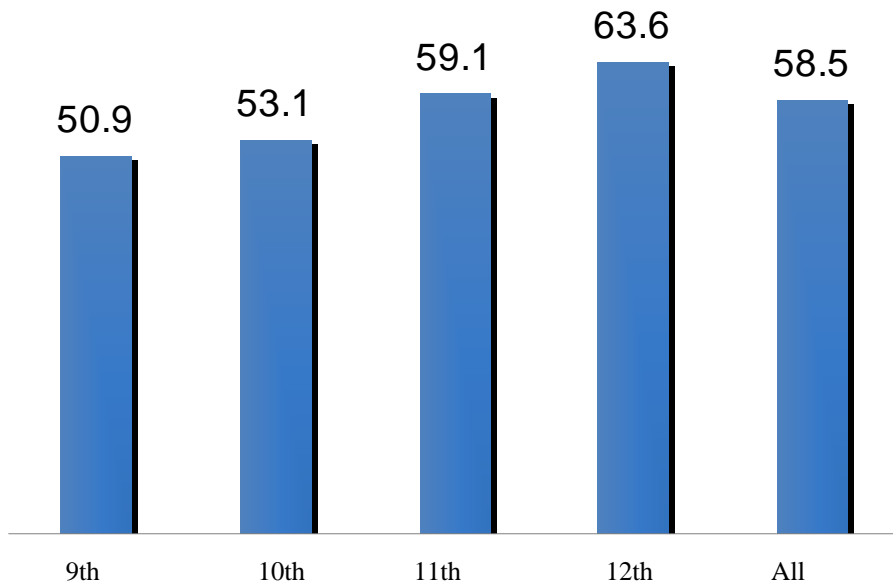
In fact there is some evidence to suggest a turn-around. In particular, binge drinking among 12th graders increased significantly in 2012 by 2.0 percentage points to 24%. In other words, about a quarter of the seniors reported that they engaged in binge drinking in just the two weeks prior to taking the survey. “This possible turnaround in alcohol consumption among the older teens is somewhat unexpected,” stated Johnston, “and certainly not a welcome development.” There was no decline in perceived risk or disapproval of binge drinking, nor any increase in perceived availability of alcohol, that might have helped to explain the change in use. Availability of alcohol to 8th graders did

continue its sharp decline this year.

“Despite the modest increases in alcohol use this year among the older teens, it still is important to put them into perspective,” notes Johnston. “The percent of 8th, 10th and 12th graders who report binge drinking in the prior two weeks is 5%, 16%, and 24% in 2012; however, these rates, reflect proportional declines of 62%, 36%, and 25%, respectively, since the peak years of use in the mid-1990s.”

The latest survey results from almost 4,000 Westchester high school students in 2012 indicated that Westchester youth have higher rates of 30 day use of alcohol than their peers nationally, and among those that do drink once a month, over half are binge drinking.

■ % of Westchester youth who reported drinking alcohol in the past 30 days who binged



Marijuana. After four straight years of increasing use among teens, annual marijuana use showed no further increase in any of the three grades surveyed in 2012. “Whether this is more than a pause in the ongoing increase that we have seen in teen marijuana use in recent years is unclear at this point,” said Lloyd Johnston, the study’s principal investigator. “One important variable that has been a lead indicator of use, namely the amount of risk teenagers perceived to be associated with marijuana use, continued its sharp decline in 2012 among teens, which would suggest further increases in use in the future.” Reported availability of marijuana had been falling for some years, but it leveled out about four or five years ago. Daily use of marijuana, which had also been rising in all three grades in recent years, remained essentially flat between 2011 and 2012 at relatively high levels. The recent increases have been substantial—up by a quarter to one third compared to their recent low points reached between 2006 and 2008 for the three grades. Today one in every fifteen high school seniors (6.5%) is a daily or near-daily marijuana user. The comparable rates in 8th and 10th graders are 1.1% and 3.5%.

With regard to marijuana use by Westchester students, 12th grade use of marijuana is higher than the national average but 10th grade use is lower. However, the percentage of Westchester Youth that report that there is “Great Risk” in smoking marijuana regularly is lower than the national number. The “perception of

risk' of the use of a drug is a barometer for what will occur in the future. As a result, this number concerns prevention professionals and they worry that there will be an increase in the use of marijuana by teens in 9th and 10th grades.

Synthetic Marijuana. Synthetic marijuana (sold as K-2, Spice, etc.) has been of increasing concern both because of its adverse effects and its high rates of use, first documented by this study last year. Use held level among 12th graders in 2012, the second year of measurement, at 11.3% annual prevalence. "The fact that use of this dangerous drug has leveled is encouraging, but the fact that its prevalence rate has remained this high despite federal and state efforts to reduce its use is troublesome," Johnston said.

Aside from alcohol and tobacco, this is the second most widely used drug among 10th and 12th graders after marijuana, and the third most widely used drug among 8th graders after marijuana and inhalants. Synthetic marijuana is made by spraying synthetically produced cannabinoids (chemical elements found in cannabis) on herbs or other plant materials. It is usually sold over-the-counter or on the Internet. In 2011 the Drug Enforcement Administration scheduled (banned) a number of specific chemicals commonly used to make it, but chemical variations continue to appear.

Bath salts. So-called "bath salts," are called this because they are often marketed as such, but really are products containing designer drugs, synthetic cathinones, which are stimulants that have effects like amphetamines. Questions on

the use of these powerful and dangerous drugs were included in the survey for the first time in 2012. Fortunately, a relatively small proportion of teens indicate having used bath salts in the prior 12 months. These drugs are frequently sold over the counter in gas stations and "head shops" under a number of different names. They are reported to have a number of serious side effects, including paranoia, suicidal thoughts, violent behavior, hallucinations, and increased heart rate. Calls to poison control centers about bath salts increased dramatically after 2010. Reportedly, there were 3,500 calls in the last six months of 2011, but that number fell by half to 1,700 in the first six months of 2012 and has been falling further since (<http://www.aapcc.org/alerts/bath-salts/>). This is quite likely due to the DEA scheduling some of the chemicals in bath salts and also to widespread publicity about the dangers they carry.

Salvia. Salvia divinorum is an herb in the mint family that can induce relatively short-acting hallucinogenic effects when smoked or eaten. Salvia, first measured in 2009, had significant declines in 10th and 12th grade this year, and a non-significant decline in 8th grade. The annual prevalence rates in 2012 for salvia are 1.4%, 2.5%, and 4.4% in grades 8, 10, and 12.

Heroin. Annual prevalence rates are very low at 0.3% in grade 8 and 0.4% in grades 10 and 12. Heroin use rates are substantially below their recent peak levels, which generally occurred nationally in the mid- to late 1990s.

Heroin in Westchester

As reported in the MTF results, it would appear that the use of heroin is not something that Westchester parents need to be concerned about in terms of their children using this dangerous and potent drug. Sadly, this does not reflect some of the recent events and realistic concerns that substance abuse professionals have about residents of Westchester County.

In recent weeks there have been articles in local papers about what is being characterized as an heroin "epidemic" in our northern suburbs. Four young men died within a two-week period in late November and early December of suspected heroin overdoses.

Heroin is a drug that can be injected, snorted, or smoked. All three methods of administering heroin can lead to addiction and other severe health problems. These include a fatal overdose, infections and pulmonary problems, including various forms of pneumonia.

It is not uncommon for heroin users to first get hooked on opiate based prescription painkillers

like Oxycontin. When those pills get too expensive then users switch to heroin that can sell for \$5 to \$10 for a bag whereas one Oxycontin tablet can cost \$80.

Doreen Lockwood, director of a chemical dependency, treatment, and prevention agency says, "Typically what we see is a person starting with pain killers," and the they turn to heroin. "I can't tell you how many times young people have told us dealers didn't have any pills and said, 'Here try this.'"

Given this situation, it is very important for parents/caregivers to be vigilant about their children's use of pain medication following an orthopedic injury or surgery, a dental procedure or any other event that requires pain medication. Parents/caregivers also need to make sure that once the medication is no longer needed for pain, that the remaining pills are accounted for and disposed in an ecologically appropriate manner.

The usual method that doctors recommend to stop taking strong pain medication is to "taper-down,"

which means to gradually take less and less of the medication over a set period of time. If a child is not doing that and instead abruptly stops, it may be a sign that they have substituted another drug like heroin for the pain medication.

There are other signs as well that could indicate your child is continuing to use something else once the prescribed pain medication is gone. The first thing to check is to make sure that no other family is missing pain medications. Also, make sure that money or "valuables" like jewelry which is easy to sell are not missing.

Although it is hard for most parents/caregivers to believe, as it seems to be such a breach of the integrity and trust of a family, the first place that an addicted child will usually go to get what they need to support a drug habit is their home. But that is the reality, so start with monitoring and vigilance to keep your children safe from this "epidemic."

Upcoming Events

Feb 4 **7:00-9:00pm**
Phoenix House Academy
Drug Crises In Our Backyard
Contact: 582-8384

Feb 20 **7:00-8:30pm**
Yorkstown High School
What Every Parent Should Know About Prom and Graduation Season
Contact: 243-8050X11647

March 1 **10:00-11:30am**
Katonah Village Library
The Resilience Formula
Donna Volipitta
Contact: 234-3227
To register-thedapc@gmail.com

March 8 **10:00-11:30am**
Katonah Village Library
Steering Your Marriage
Suzanne Burger
Contact: 234-3227
To register-thedapc@gmail.com

March 14 **7:00pm**
Ossining High School
Drive Safe/Drive Smart,
DUI: A Powerful Lesson
Mark Sterner