

# Youth Substance Use Prevention + Harm Reduction

Dr. Bonnie Halpern-Felsher & Alexie Orr







### **Zoom Webinar Logistics**

- Only panelists and hosts can share video and audio.
- Please enter your comments and questions in the chat and Q&A.
- Be respectful and curious.
- If you work with the media, please let us know if you plan to report on this webinar and email alison26@uw.edu







#### Welcome & Poll

#### • Who are we?

 <u>Center for Community-Engaged Drug Epidemiology Education</u> and <u>Research</u> at UW Addictions, Drug & Alcohol Institute

- What does your program do around prevention education and harm reduction?
- What barriers do you have to incorporating harm reduction into your youth work?







#### Youth overdose data

## "The overdose crisis among US adolescents," Joseph Friedman PhD, MPH & Scott Hadland MD, MPH New England Journal of Medicine

- Overdose deaths among young people continue to climb due to fentanyl, while use overall continues to drop.
- WA State has the third highest rate of youth (14-18 years old) overdose deaths from 2020-2022, with 9.72 deaths per 100,000 (representing 130 deaths), twice the national average.
- Three groups of youth at risk for overdose:
  - Experiment but don't have opioid use disorder
  - Have mental illness of trauma and use to cope
  - Have opioid use disorder
- Education should focus on risks, but also how to prevent and respond to overdose. Safety First is an example of how to do this.
- Overdose prevention for youth should also include mental health supports and high-quality accessible treatment.

<u>January 11, 2024</u>, N Engl J Med 2024; 390:97-100, DOI: 10.1056/NEJMp2312084





### Drug overdose death rates by age

#### Comparing 2019, 2020, 2021 and 2022

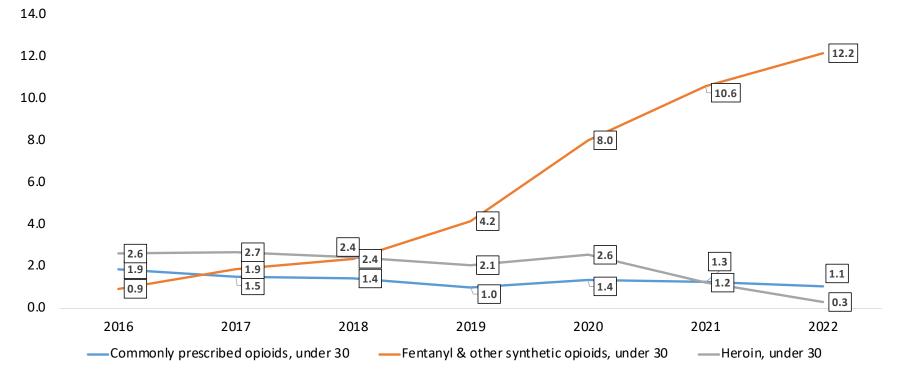


Ages 9 and under are suppressed.

https://doh.wa.gov/data-and-statistical-reports/washington-tracking-network-wtn/opioids/overdose-dashboard and the statistical-reports/washington-tracking-network-wtn/opioids/overdose-dashboard and the statistical-reports/washington-tracking-network-wtn/opioids/overdose-dashboard-wtn/opioids/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/opio-dashboard-wtn/op



#### Opioid-involved drug deaths in WA State, per 100,00 residents in age group



Data analyzed by UW ADAI, provided by WA Dept of Health https://adai.uw.edu/wadata/heroin\_versus\_fentanyl.htm











## Engaging and Serving Youth and YA

Foundation for Youth Resiliency and Engagement



#### **FYRE**

- Mission & Vision
  - We advocate for equitable opportunities that allow all youth to thrive. Our team envisions an Okanogan County where the opportunity for healthy minds, bodies, and homes exists for all young people.
- We serve young people ages 12-24 in Okanogan County and nearby outlying areas
  - BIPOC, LGBTQIA+, systems involved, undocumented, those who have experienced harm, young parents
- Approach and Belief
  - Youth voice matters
  - With young people, everything is upstream (from prevention to reintegration)
    - Whole person with a continuum of care so that we can engage them whenever and however
  - Safety and access for BIPOC, neurodiverse, and LGBTQIA+ youth; emphasis on harm reduction





Reach Lab

# SAFETY FIRST Youth Substance Use Prevention Education + Harm Reduction

Bonnie Halpern-Felsher, PhD, FSAHM

Marron and Mary Elizabeth Kendrick Professor

in Pediatrics II

Founder & Executive Director, REACH Lab and Curriculums

#### The REACH Lab







Bonnie Halpern Felsher, PhD Professor/PI



Shivani Galha, PhD Instructor



Devin McCauley, PhD Postdoctoral Scholar



Jessica Liu, PhD
Postdoctoral Scholar



Marcia Zorilla, DrPH Director of Positive Youth Development



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Holly Lung, BS Research Coordinator



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Bradley Zicherman, MD Psychiatrist, Co-Founder VISIT



Arash Anoshiravani, MD Adoloscent Medicine Co-Founder VISIT

**REACH Youth Action Board (YAB)** 



## **Special Thanks to Our Sponsors**

**CASA - Los Gatos** 

























COUNTY OF SANTA CLARA Behavioral Health Services





## Why Youth Use Drugs



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## Decision Theories Applied to Adolescent Risk Behavior

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Adolescents Take Risks Because They:

- Cannot judge risks appropriately
- Believe they are invulnerable to harm
- Are pressured by peers
- Have poor decision-making skills

### 3 I's of Adolescence...

Invulnerable

### 3 I's of Adolescence...

- Invulnerable
- Invincible

#### 3 I's of Adolescence...

- Invulnerable
- Invincible
- Infertile

#### But...

There ARE Real and Perceived Risks and Benefits to Using





#### What Can We Do?



Lucile Packard Children's Hospital Stanford



### **Honest Drug Education**

Reach Lab

- Based in science
- Based on how adolescent learn and make decisions
- Keep teens safe!



### Goal

- Normalize drug education communication not normalize drug use!
- Create "designated drivers"

#### Research

Our research is driven to improve a dolescent and young adult (AYA) health by:

- Conducting interdisciplinary, high-impact research focused on health-related decision-making
- Translating evidence into effective programs that reduce and prevent AYA risk behavior
- · Informing and supporting policies that improve AYA health
- Training the next generation of leaders in AYA health and risk prevention

Current research projects/evaluations:

Understanding the Potential Impact of FDA Authorization and Marketing on Adolescents Young Adults', and Adults' Perceptions, Intentions, and Actual Use of Tobacco (funded by the NIH)













Stanford REACH Lab offers free curriculums and resources to supplement prevention, education, harm-reduction, interventions and cessation on: vaping/e-cigarettes, cannabis, drugs and other substances. Scan the QR code below to learn more!

#### PREVENTION, EDUCATION & AWARENESS CURRICULUMS





#### HARM-REDUCTION & INTERVENTIONS







#### DATA DASHBOARD FOR EDUCATORS & ADMINISTRATORS

We have developed and launched a data dashboard for educators, where you can see, in **real time**, anonymous student survey responses related to the curriculum and interventions you are implementing.

#### GET STARTED

or visit tinyurl.com/reachlabdatadashboard



Connect with us and learn more by scanning the QR Code:



Reach Lab

## safety first

A Comprehensive, Harm-Reduction Based, Drug Intervention Curriculum

**NEW VERSION UPDATED & AVAILABLE!** 

What is a harm reduction drug education curriculum?



For the REACH Lab, we define it as:

A harm reduction approach to drug education <u>discourages</u> young people from using drugs but <u>offers more</u> than an abstinence-only approach by providing teenagers with <u>information to keep themselves and others safer</u> if, and when, they encounter these substances.





#### Safety First Does:

- See abstinence as an important, and primary, strategy in reducing drug harms.
- Empower teens to make healthier choices through accurate information.
- Recognize that some teens will try drugs.
- Encourage teens to take steps to reduce the potential harms of drug use.

#### Safety First Does Not:

- Encourage or condone teen drug use.
- Teach teens how to use drugs
- Judge teens who use drugs.





- Comprehensive, harm reduction
- 13 lessons (~50 minutes each)
  - Brain and addiction
  - Stress, coping, wellness
- Alcohol, opioids/fentanyl, e-cigs, cannabis, hallucinogens, stimulants
  - Marketing
  - Skill building and refusal skills



## Educating and empowering teenagers to make safe and healthy choices must be our highest priority.

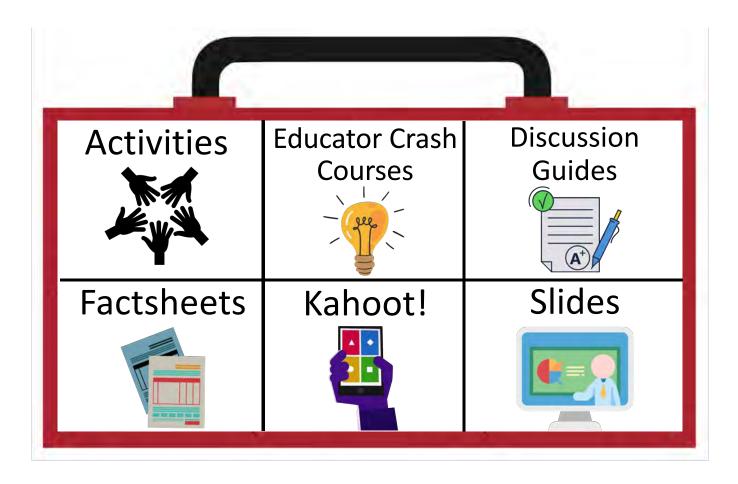
## Goals of the Curriculum

safetyfirst

- Encourage youth not to use drugs in the first place
- Encourage youth who are already using to stop or at least cut back or make alternative choices to reduce their risk
- Provide straightforward, science-based information
- Explore the risks and real and perceived benefits of drugs
- Prioritize safety through personal responsibility and knowledge.



Interactive Online Free









## USE ONLY AS RECOMMENDED





Set refers to someone's thoughts and emotions.



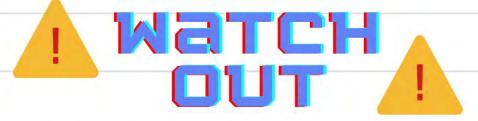


Setting refers to the physical and social environment.

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## DRUG ADULTERATION



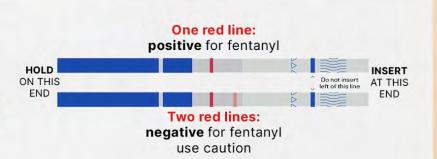
Substances may be adulterated with a variety of chemicals, toxins, fillers, or even poisons—from bulking agents to crushed prescription medications to heavy metals.

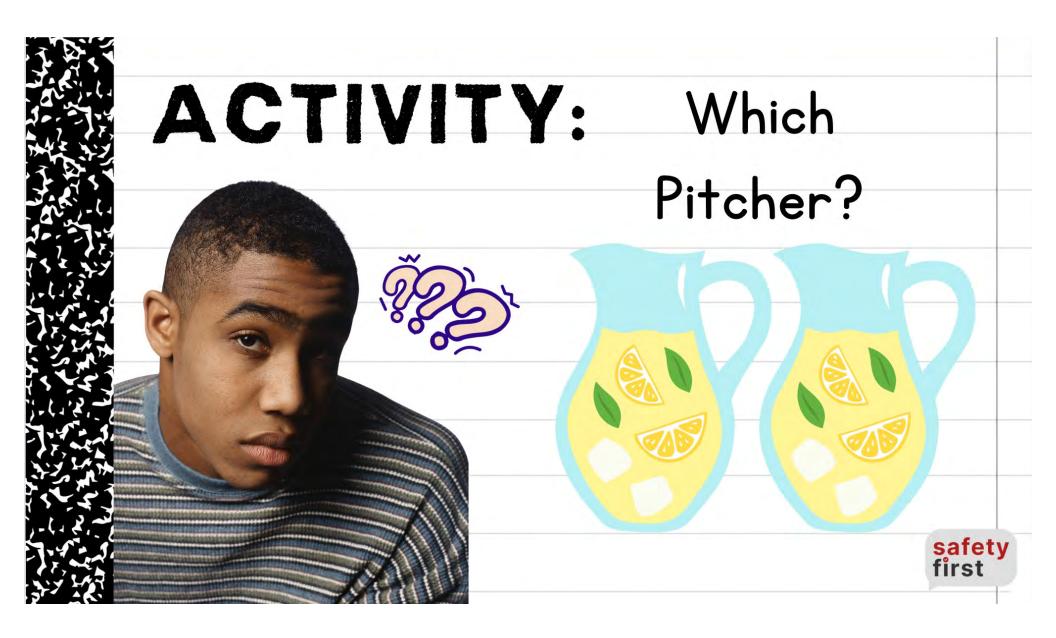
safety first

### CHECK THE SUBSTANCE

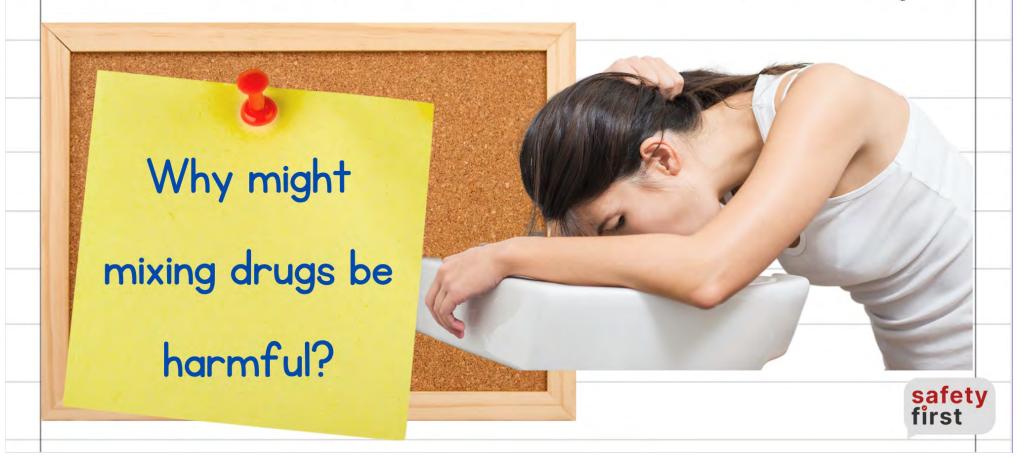


Drug checking allows a person to get more information about what's actually in a substance.





# DON'T MIX DRUGS!





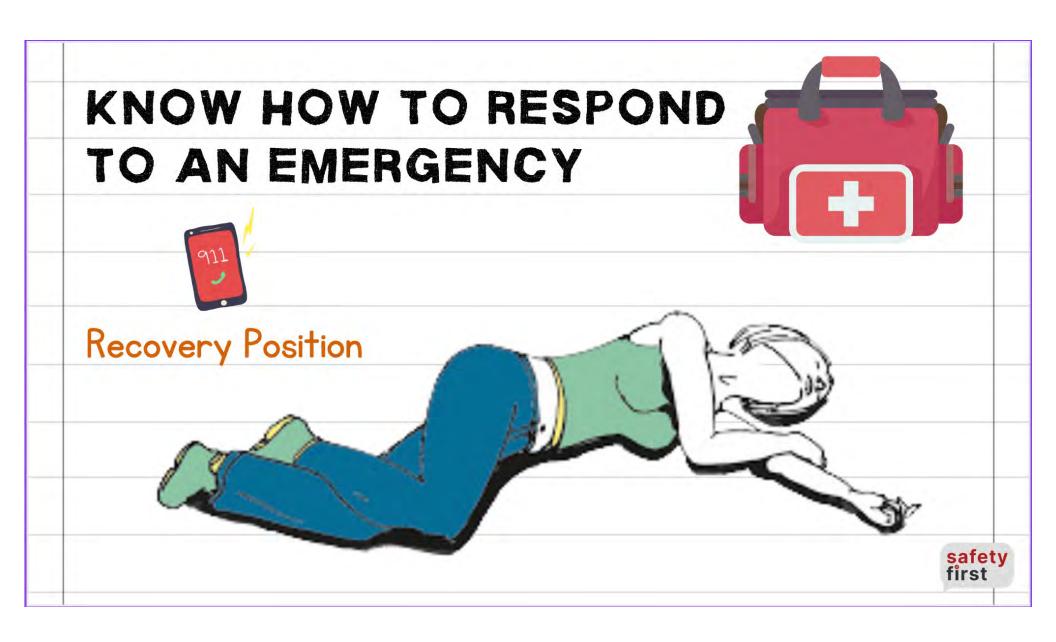




seek medical help!

Good Samaritan Laws protect people who call 911 for help.

safety first





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Naloxone can reverse opioid overdoses and is carried by EMTs.

Does our school have Naloxone and if yes, where is it located?

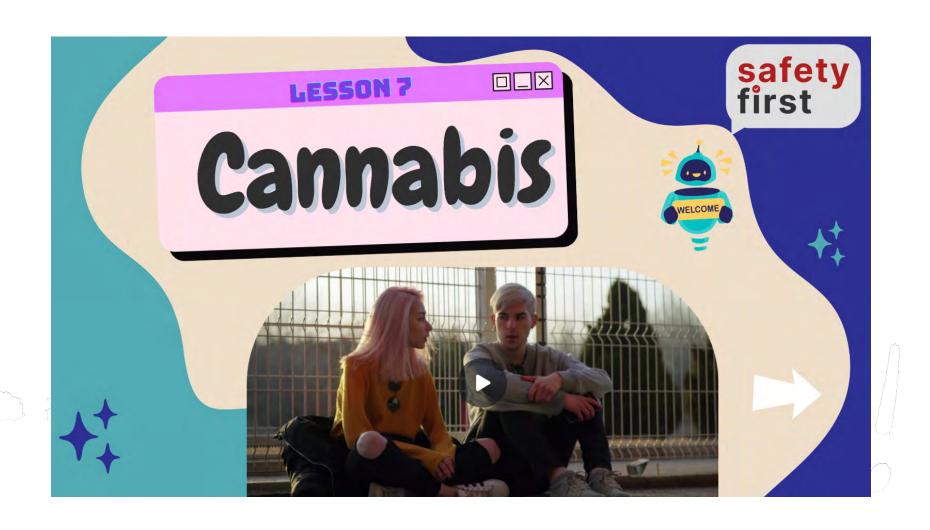
Good Samaritan laws or 911 drug overdose laws protect people who call to report drug overdoses.





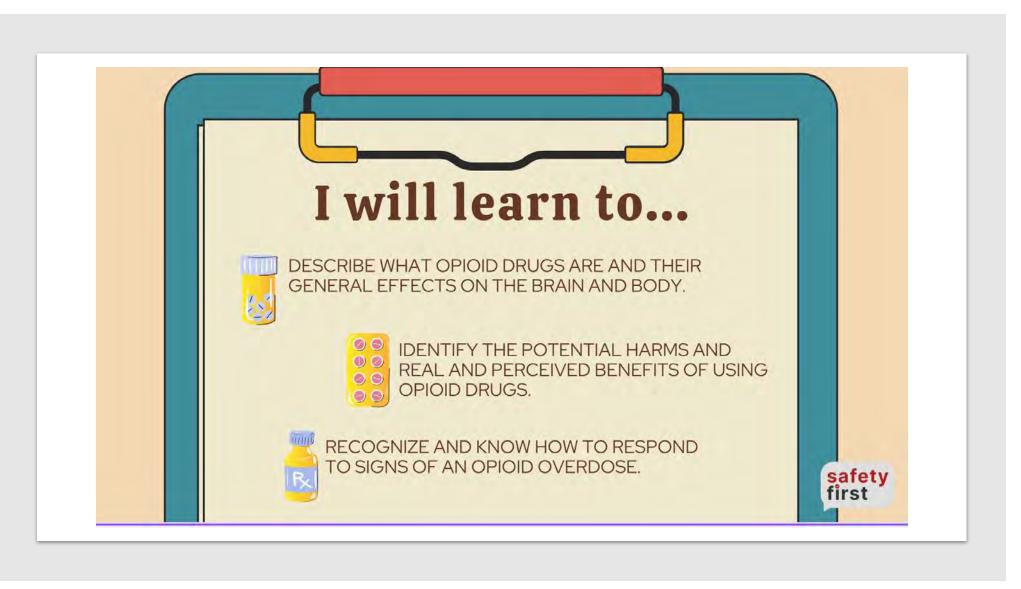




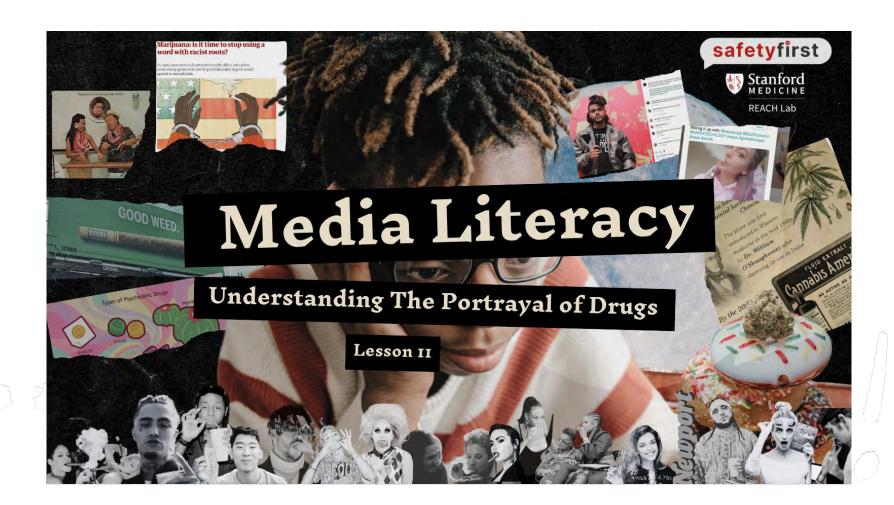


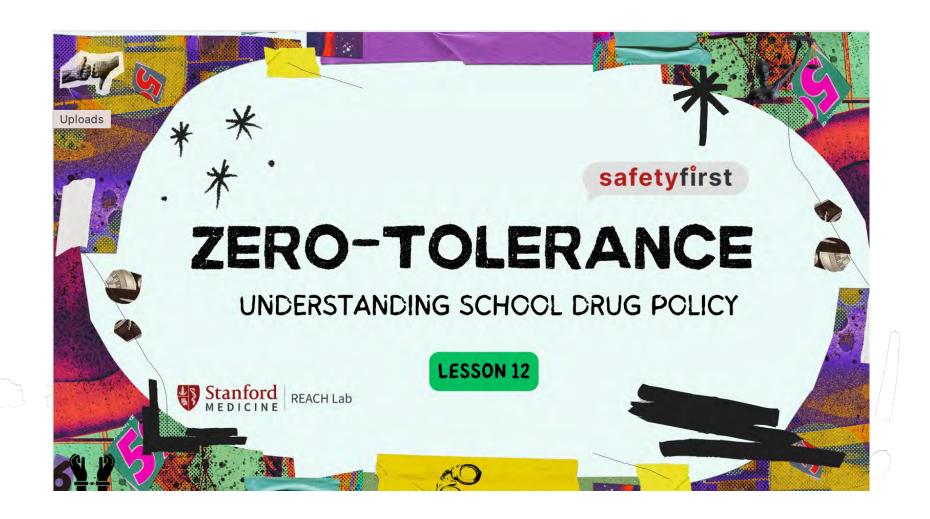


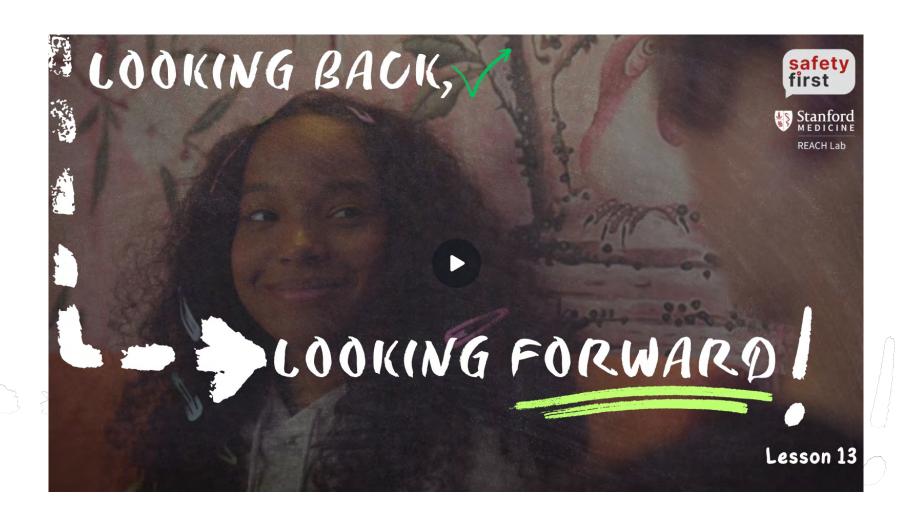


















Fentanyl effects can include: dizziness and drowsiness, vomiting and nausea, euphoria, pain relief, and respiratory failure

There are 2 types of fentanyl: pharmaceutical and illegally made fentanyl. Most overdoses are due to illegally made fentanyl



Carry Narcan to stop overdoses of those around you



Fentanyl can be sold in a pill, powder form, or as an injectable; you can't see, smell or taste it



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Use test strips to **test drugs** to see if they are **laced with fentanyl** 



GRAIN OF RICE

LETHAL DOSE OF FENTANYL

A lethal dose of fentanyl is equivalent to less than a grain of rice

#### Treatment is available.

Here is a resource to find a treatment center: findtreament.gov/locator



See our safetyfirst curriculum for more information

### **HOW TO USE**

NALOXONE



REACH Lab



Use our safetyfirst curriculum to talk with your students

## Recognize a Fentanyi Overdose

Knowing the signs of opioid overdose is crucial in saving a life.

#### Signs Include:

· Slow, shallow, and erratic breathingUnconscious and

NARCAM

NASAL

- unresponsive
- · Slow or no pulse
- Pale and clammy

Click here to mail order Narcan or learn more

### Respond to the **Emergency**

Here are the steps to follow:

- Have Narcan ready to use
- Hold the device with your thumb on the bottom plunger and two fingers on the nozzle
- · Insert the tip into either nostril
- Firmly press the plunger to release the dose
- Dial 911
  - Repeat with additional Narcan

\*Narcan does not cause harm if there is no overdose





## FENTANYL.

Can you tell the difference?



Talk to your teens about Fentanyl using
Stanford REACH Lab's Safety First Curriculum



TH Annual Teaching
Cannabis Awareness
& Prevention Virtual
Conference

APRIL 17<sup>TH</sup> & 18<sup>TH</sup>, 2024 8:00 A.M. - 2:00 P.M. (PST)

A Focus on the Triangulum of Cannabis, Tobacco/Nicotine, & Vaping

Early Bird Pricing: \$125 if registered by March 1st, 2024; After March 1st, registration will be \$150

To Obtain CME Credit: Additional +\$25\*





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## Resources

- <u>Safety First</u>-school-based prevention and substance use education curriculum
- WA Department of Health Overdose Education and Naloxone Distribution Program
  - Overdose education and TA and naloxone distribution program
- <u>StopOverdose.org</u>-Overdose education and naloxone map
  - Youth Overdose Education
  - <u>Fentanyl</u>
  - Schools
- <u>UW ADAI Clearinghouse</u>-order printed materials
- Youth-focused campaigns
  - <u>Laced & Lethal</u>-King County-focused
  - Friends for Life-funded by the WA State Health Care Authority
  - Prevent Overdose WA-funded by the WA Dept of Health



