

Vermont Department of Health officials recently reported that 34 percent of Vermont high school students have tried vaping, and risked getting addicted to nicotine, based on its latest data (VT YRBS 2017). At Twin Valley High School, 32 percent of students have tried electronic vapor products (WSWSU 2017 YRBS). The state legislature has listened to concerns of parents, principals, teachers, and health professionals regarding the dangers of nicotine addiction to youth and adults, passing three pieces of legislation that now are in effect.

First, all electronic cigarettes and products, such as cartridges, will carry a huge excise tax, 92 percent, as of July 1. The tax will increase the price of a \$20 product to \$38. Raising the tax on tobacco has repeatedly been shown to reduce the purchase and use of tobacco products by young people.

Second, online sellers are only be able to ship nicotine products to Vermonters who have a license to sell them (such as convenience stores). Many of our young people have been using the computer to purchase Juul cartridges, etc. Vermonters without a license will be forbidden to buy these items as of July 1.



Third, as of September 1, the age of purchase for all products containing nicotine will be raised from 18 to 21.

## Tobacco 21

Similar legislation passed in other states has proven effective in reducing tobacco usage and, consequently, nicotine addiction.

Health professionals will be watching closely to see how these measures influence tobacco usage in Vermont.

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National Recovery Month, sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), is a national observance held every September to educate Americans that treatment services can enable those with mental and substance use disorders to live healthy and rewarding lives. This observance celebrates the millions who are in recovery, reminding us that treatment is effective and that people can and do recover. It also serves to help reduce the stigma and misconceptions that cloud public understanding of mental health and substance use disorders.

The concept of stigma describes the powerful, negative perceptions commonly associated with addiction. Stigma has the potential to negatively affect a person's selfesteem, damage relationships with loved ones, and prevent those suffering from addiction from accessing treatment. Stigma is rarely based on facts but rather on assumptions, preconceptions, and generalizations; therefore, its negative impact can be prevented or lessened through education.

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As part of National Recovery Month 2019, DVCP is sharing the 9 Facts About Addiction People Usually Get Wrong.

This information refers to youth addiction and treatment, but can be applied to anyone, of any age, struggling with addiction.

# Facts about Addiction People Usually Get Wrong

There's a lot of stigma and misunderstanding with substance use disorders, treatment and recovery. But you should never let social judgment stand in the way of getting your child the help he or she needs and deserves. **Here are nine facts to know so you can be better prepared to help your child**.

## FACT: Substance use changes the brain, which can make drug use compulsive.

An adolescent may start out doing drugs occasionally or may be prescribed medicine by a doctor. Over time, continued use rewires the brain to compulsively seek substances, despite negative consequences. With opioids, a person may initially like the euphoria, but soon, the drug is needed just to feel "normal" and not get sick from withdrawal.

## ACT: Expecting your child to "just quit" cold turkey is unrealistic.

Changing substance use behavior is a process. In the beginning your child may not think there is a problem. Next, she may realize it is a problem, but feel conflicted about addressing it. Then she needs to figure out how to deal with it and take steps in a healthier direction, including getting professional help, changing friends, learning drug refusal skills and more.

## FACT: Intervening early is more effective than waiting for "rock bottom."

Because behavior change is a process, instead of letting your son or daughter hit their lowest point, it's important to help right away. And it is much easier to help when they are still engaged in school or work, have social supports and interested in sports or hobbies. In other words, they have structure, purpose and social connections — scaffolding needed for a good outcome.

## FACT: Your child can be ambivalent about treatment and it can still be effective.

While some welcome the opportunity for treatment, most will be conflicted about stopping their substance use. Studies show those who enter drug treatment programs as a result of loving pressure do comparatively better in treatment, regardless of the reason they sought treatment in the first place.

## FACT: Relapse is common and represents a learning opportunity.

Relapse doesn't mean that treatment hasn't worked. As with all chronic diseases, many people have one or more relapses before achieving long-lasting recovery. Relapses happen both when the person is doing well or when struggling, and can serve as a learning opportunity to identify what triggered the relapse — and to find ways to address it for the future.

## FACT: Positive behavior and communication skills are more effective than punishment.

Addiction is a brain disease and needs family support as with any other chronic illness. Shaming, detaching or punishing often backfires, with kids spiraling further into risky substance use and isolation. What does work is reinforcing positive behaviors, finding healthy activities that compete with your child's use and letting him or her experience natural consequences. Coupled with empathy and compassion, this approach (known as CRAFT) is a scientifically-proven way to help parents change their child's substance use.

#### FACT: Finding an effective approach for treatment can mean investigating different doctors or programs before finding a good "match."

The best programs give a screening and in-depth assessment of your child by a qualified professional versed in addiction and mental health. They will develop an individual treatment plan and combine methods tailored to address your child's specific needs. But don't be discouraged if the first program you investigate is not a good fit — keep exploring other options.

FACT: Medication-assisted treatment, coupled with counseling, is the preferred treatment for heroin and other opioids.

Taking medication for an opioid addiction is like taking medication for any other chronic disease, like diabetes or asthma. Numerous studies have shown that medications can reduce cravings, relapses and overdoses when taken as prescribed.

FACT: Many people struggling with substance use require longer-term and/or repeated treatment.

Because a drug problem can include relapses, going through treatment once may not be sufficient to keep your child drug free. Each treatment episode allows them to be abstinent for a period of time while learning new coping skills – but it may take time. Know the treatment options available so that you can make the best choice for your child's path to recovery.

### For more information, please visit drugfree.org.



September 2019

## It's Back to School Time!



A Note from ParentUpvt: Another beautiful Vermont summer is coming to a close, and kids will soon be transitioning from the backyard to the schoolyard. It's natural to want to trust your teens and give them a healthy sense of independence as they head back to school. But the truth is

that while our teens deserve our trust, they also deserve our commitment to helping them stay on track and out of trouble.

It's important that adults pay extra attention to teens' behavior during such times of transition. Research shows that teens often literally can't help but make bad decisions. During the teen years, the part of the brain responsible for making complex judgments is not as mature as the parts dedicated to emotion and motivation. So it's only natural for emotions and impulses to win out over good judgment. At the same time, the incredible changes that take place in the brain during these years leave it very vulnerable to the effects of alcohol and drugs meaning that the decisions teens make now could impact them for life. Constant monitoring of teens can seem overwhelming. Instead, identify a few areas of concern that help you set clear boundaries. Learn more helpful tips and strategies to keep your kids and community safe with ParentUp, an initiative of the Vermont Department of Health at <u>http://parentupvt.org</u>.



## Big Brothers Big Sisters Big Sisters, Big Sisters,

Through a partnership between DVCP, Twin Valley Elementary School (TVES), the Rotary Club of the Deerfield Valley, and Big Brothers, Big Sisters of Vermont, a mentoring program will be re-started at

TVES this fall. Big Brothers Big Sisters Mentoring program (BBBS) provides one-to-one mentoring relationships between children and adults. Its purpose is to provide friendship, emotional support, and guidance to youth through their involvement with positive role models. BBBS's national motto is "making a difference, one child at a time."

The BBBS program helps children achieve positive, measurable outcomes, including educational success, higher aspirations and confidence, improved relationships and risky behavior avoidance. For further information on the program, to make a referral, or to become a mentor, please see p. 4: Community Spotlight.



DVCP sends best wishes for all of your future endeavors to all of the 2019 TV Graduating Seniors, especially those members of the DVCP sponsored Pride Group, Wildcat Community Service Group and Our Voices Exposed (OVX): Olivia Genella, Maria Paige, Morgan Janovsky, Gunnar Nilsen, and Chase Speigel.



### Ready to quit smoking?

802Quits provides free support to quit tobacco. The help and resources include nicotine replacement therapy, and phone, online, and in-person counseling. www.802quits.org | 1-800-QUIT-NOW



### Steering Committee & Program Staff:

Carrie Blake Dawn Borys Bob Edwards Keli Gould Cindy Hayford Dario Lussardi Karen Molina Jen Nilsen Shelley Park Helena Queenie Lynn Redd Rebecca Sweeney

Upcoming Meetings: September 23, 2019 October 21, 2019 November 18, 2019



Dinner is served at 5:30pm Meeting 6:00-7:30pm

> Everyone is Welcome Please RSVP to: info@dvcp.org or 464-2202

### Community Spotlight

Deerfield Valley Community Partnership Cindy Hayford, Coordinator

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Email: info@dvcp.org





I am thrilled that the Big Brothers Big Sisters Program is coming back to our community! This is a true collaboration between organizations that care about our youth and want to help. Working together, the Deerfield Valley Rotary Club, DVCP and the Twin Valley Elementary School will provide funding, staff, mentors and mentee referrals to the Big Brothers Big Sisters of Vermont organization to match children (Littles) who need some extra support, with mentors (Bigs). This year, the matches will meet at the elementary school. Our hope is that in the future, the program will expand to matches meeting in the community.

BBBS is a program that is proven to work in reducing youth drug and alcohol use, as well as increasing positive behaviors among its participants! Researchers found that after 18 months of spending time with their Bigs, the Little Brothers and Little Sisters, compared to those children not in the program, were: 27% less likely to use alcohol, 46% less likely to use illegal drugs, and 52% less likely to skip school. They also found that the Littles had high aspirations, greater confidence and better relationships with family and friends. For more information: <u>www.bbsvt.org</u>

Now we need YOUR help! We need mentors. Please consider giving your time to a child in need. Spending time with a Little for friendship and support can make a world of difference. If interested, please contact Charlotte Raine at 802-689-0092 ext. 1 or charltotte@bbbsvt.org to learn how to enroll your child or volunteer as a Big Brother or Big Sister!

On another note, meetings of the Opioid Community Group continue to take place on a monthly basis. Meetings include committee updates, educational presentations and community outreach planning. If you are interested in getting involved, please call me at 464-2202.

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