



WHAT WORKS, WHAT DOESN'T



Code of Ethical Conduct

- Our code of ethics outline standards for exemplary professional behavior. This presentation links with:
 - Principle 2: Competence
 - *Prevention professionals shall... strive continually to improve personal proficiency and quality of service delivery...*
 - Principle 4: Nature of Services
 - *Practices shall do no harm to service recipients.*

What works in Prevention



➤ For children:

- Strategies and activities that build social competence, self-regulation and academic skills. Specifically, prevention programs should focus on developing these skills:

- ✓ *self-control;*
- ✓ *emotional awareness;*
- ✓ *communication;*
- ✓ *social problem-solving; and*
- ✓ *academic support, especially in reading.*



What works in Prevention



➤ For adolescents:

- Strategies and activities that build academic and social competence. Specifically, prevention programs should focus on developing these skills:
 - ✓ *study habits and academic support;*
 - ✓ *communication;*
 - ✓ *peer relationships;*
 - ✓ *self-efficacy and assertiveness;*
 - ✓ *drug resistance skills;*
 - ✓ *reinforcement of anti-drug attitudes; and*
 - ✓ *strengthening of personal commitments against drug abuse.*



What works in Prevention



➤ For families:

- Strategies and activities that enhance family bonding and positive relationships. Specifically, prevention programs should focus on developing these skills:
 - ✓ Use of good parenting skills – supportiveness, communication, involvement, monitoring and supervision;
 - ✓ Practice developing, discussing and enforcing family policies on substance abuse; and
 - ✓ Drug education and information for parents to enhance opportunities for family discussion.





Build social and personal skills

- Social and personal skills-building enhances individual capacities, influences attitudes, and promotes behavior inconsistent with use.
- These interventions may include information about the negative effects of substance use, but don't cross the line into fear arousal.





Cite immediate consequences

- Youth tend to be more concerned about social acceptance and the immediate rather than the long-term effects of particular behaviors or choices.
- Citing consequences such as stained teeth and bad breath is shown by research to have more impact than the distant threats of lung cancer or death.





Communicate Positive Peer Norms

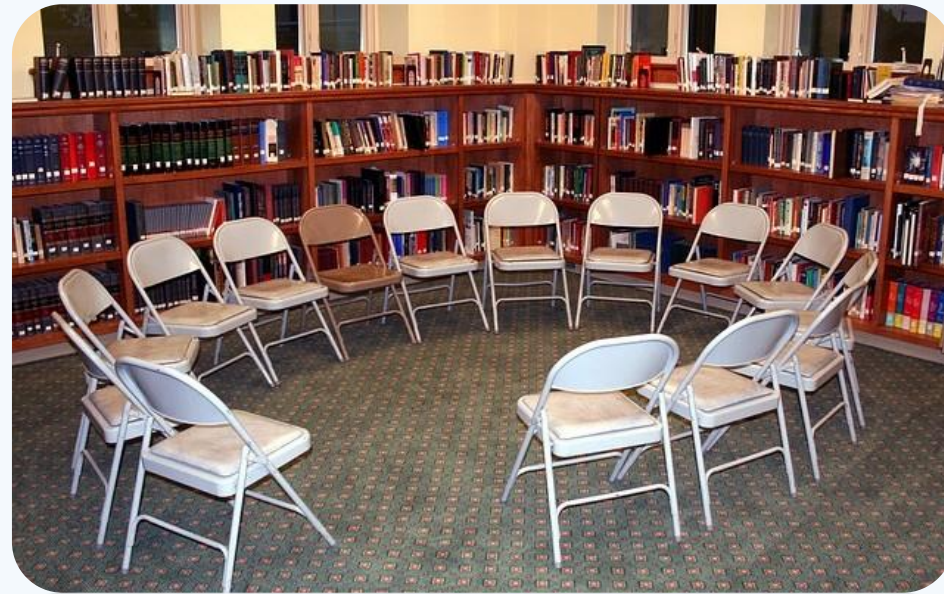
- Its important to communicate peer norms against use of alcohol and illicit drugs.
- Events and activities that communicate peer norms against use of alcohol and other drugs act as community statements in support of no-use standards.



Involve Youth with Peer-led Components



- Drug units and activities that are peer-led, or that include peer-led components, are more effective than adult-led approaches.



Use Interactive Approaches

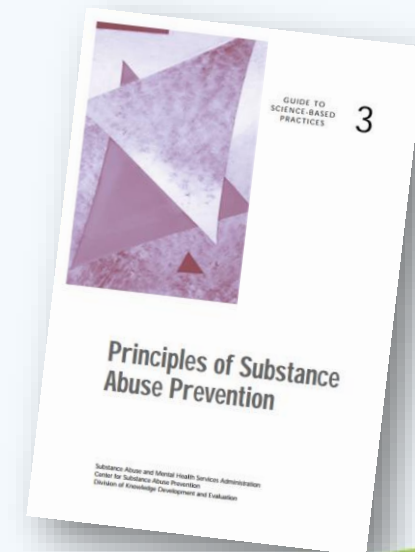
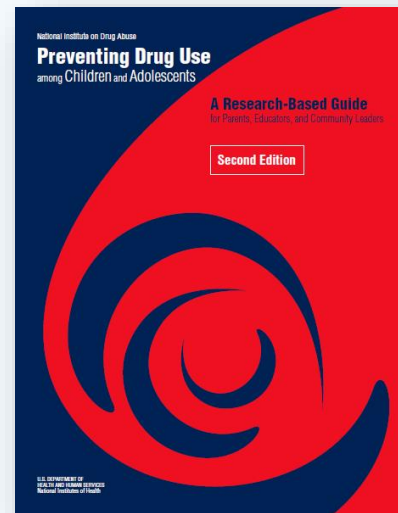


- Give students opportunities to practice newly acquired skills through interactive approaches.
- Interactive approaches, like cooperative learning, behavioral rehearsal, and group exercises that give students opportunities to practice newly acquired skills help to meaningfully engage them in prevention education programs.

Prevention Works When We...



- Use established evidence-based programs and strategies;
- Consider principles of effective prevention;
- Focus on healthy alternatives to use;



Prevention Works When We...



- Enhance connections to and bonding with prosocial adults, peers and institutions;
- Use interactive approaches that include skill practice; and
- Focus on normative education, which portrays true use rates and corrects misperceptions.

Our time and energy is best used to teach positive, healthy behavior, rather than fruitlessly trying to stop dangerous behavior through manipulation or strategies that contradict research.

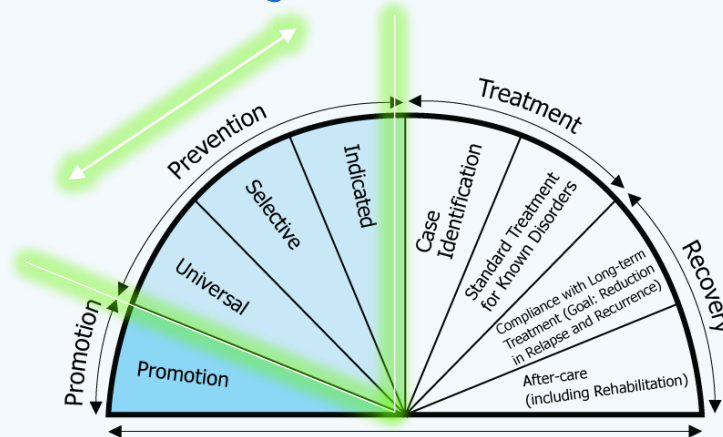
Counterproductive Prevention

- This part of the training may test you.
- It will ask you to reconsider long-standing ideas about what works.
- If you are implementing these types of strategies, challenge your coalition to conform them to principles of effective prevention, or to reconsider using them at all.



For Your Consideration

- Not all prevention is created equally
- Rationale red flags:
 - “If it helps just one...”
 - “It worked for me...”
 - “This is the way we’ve always done it...”



Fear Arousal



- When exaggerated dangers, grotesque images, false information or distant consequences are delivered, teens tend to disbelieve the message and discredit the messenger.
- Researchers point out that fear arousal often backfires when youth have access to contrary information and experience.



Fear Arousal



One Woman – 120 months of Methamphetamine Use.....Any Questions?



The photos you see here are all of the same woman.

She was approximately 38 years old at the time the Jan '89 photograph was taken.

These are Department Of Justice photos taken at the time of arrest.

She is now deceased.

THE HORRORS OF METHAMPHETAMINES



SKIN

Acne appears or worsens. Obsessive skin-picking often causes meth users' faces to be covered in small sores and scarring - the result of a common sensory hallucination of bugs crawling beneath the skin.



FACIAL MUSCULATURE AND FAT

Meth, like other stimulants, suppresses appetite and can lead to undernourishment due to long periods without eating. Over time, the body begins consuming muscle tissue and facial fat, giving users a gaunt, hollowed-out appearance.



TEETH AND GUMS

"Meth Mouth" is caused by several factors; tooth enamel is dissolved by the harsh chemicals of the drug, the blood vessels contained in healthy gums and teeth shrink, increasing the rate of decay, the production of saliva diminishes, allowing harmful acids to further damage the mouth, cravings for sugary foods increases with meth use, oral hygiene is typically neglected while high, and heavy tooth-grinding is an additional side effect of the drug.



INCREASING ESTIMATED AGE

The combination of skin issues, facial fat and muscle loss, hygiene neglect and increased oral decay lead to the appearance of exaggerated aging, sometimes shockingly so.



Methamphetamine Users

Addiction touches nearly every family, ravaging physical and mental health, relationships, and personal finances. Mothers, fathers, brothers, sisters, daughters and sons. No one is immune to the frightening long-term impact of hard drug abuse. What follows is a sobering depiction of REAL individuals who've fallen victim to the temptation of drug use - in this case, Methamphetamine - whose devastating effects are all too apparent.

Single Shot Assemblies and Events



- Stand-alone assemblies, events, and gruesome displays create temporary emotional arousal but do not impact behavior or intention to use drugs.
- Students sheltered from explicit media, or who have suffered a tragedy similar to the recreated display, may be re-traumatized.



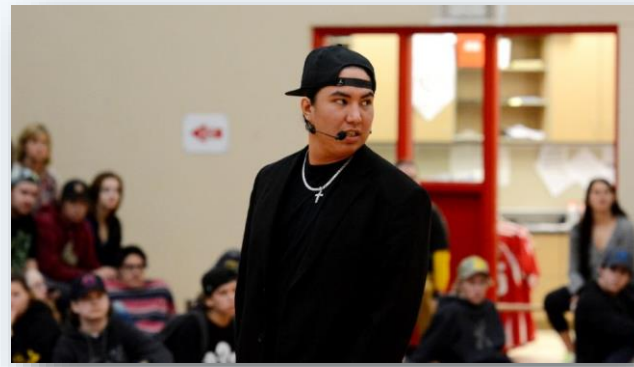
Every
15
Minutes



Personal Testimony



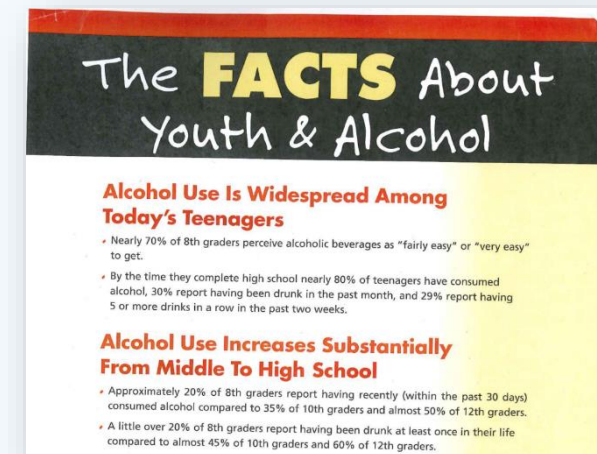
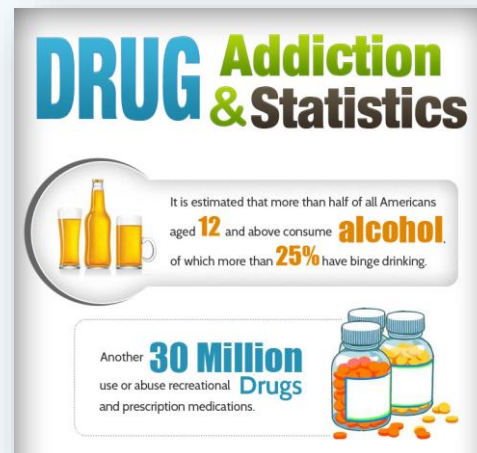
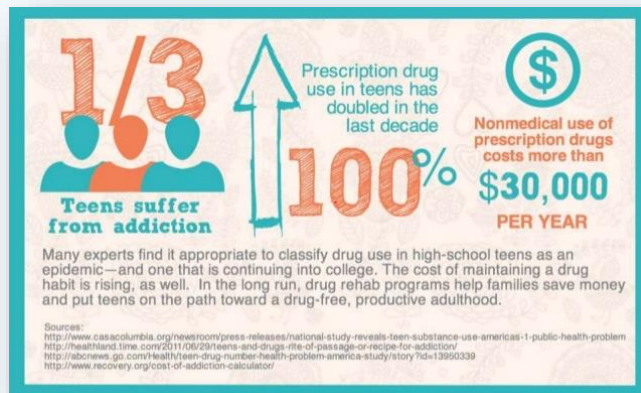
- Even if their story is powerful, testimony normalizes drug use by reinforcing the incorrect norm that "everybody uses."
- Young people see the positive attention the speaker gets, will learn that this person was able to stop using alcohol or other drugs, and the prevention message backfires.



Reinforcing exaggerated social norms



- Many well-intended communities and agencies try to create a community-wide response to youth substance abuse by sensationalizing information about high rates of use.
- These messages normalize the perception that everybody uses and undermines healthy responses to pressure to use.



Drug Fact Sheets



Tiny, little pill...

Big enough to kill.

THE NEW TREND IN TEEN DRUG ABUSE... INFORMATION FOR PARENTS & CAREGIVERS

Monroe Police Department & Monroe Crime Prevention Council

Do you know what you're looking at?

- Aleve
- Percocet
- Ecstasy
- Oxycodone
- Vicodin
- Sweet Tart Candy

oxy, oxycotton, peres, vics

- Fact sheets and posters that describe reasons for use, methods of use, street names, and potential benefits of use are ineffective at best and may increase experimentation in children who are at risk.
- There is significant data to demonstrate that fact sheets in the hands of middle school students show them how to defy adults and enhance peer reputation by engaging in risky behaviors.

													
	Alcohol	Cocaine/Crack	Cough Medicine/DXM	Ecstasy/MDMA	Heroin	Inhalants	Marijuana	Methamphetamine	Prescription Pain Relievers	Prescription Sedatives and/or Tranquilizers	Prescription Stimulants	Steroids	Tobacco
Street Names / Commercial	Booze	Big C, Blow, Bump, Coke, Nose Candy, Rock, Snow	Dex, Red Devils, Robo, Triple C, Tussin, Skittles, Syrup	Adam, Bean, E, Roll, X, XTC	Big H, Black Tar, Dope, Junk, Skunk, Smack	Whippets, Bagging, Huffing, Poppers, Snappers, Dusting	Blunt, Boom, Dope, Grass, Hash, Herb, Mary Jane, Pat, Reefar, Skunk, Weed	Ice, Chalk, Crank, Crystal, Fire, Glass, Meth, Speed	Codine, OxyContin (Oxy, O.C.), Percocet (Percs), Vicodin (Vike, Vitamin V)	Mebaral, Quaaludes, Xanax, Valium	Adderall, Dexedrine, Ritalin	Juice, Rhoids, Stackers, Pumpers, Gym Candy	Cancer Sticks, Chew, Cigarettes, Dip, Fags, Smokes
Looks Like	Liquid (types include beer, wine, liquor)	White crystalline powder, chips, chunks or white rocks	Liquid, pills, powder, gel caps	Branded tablets (Playboy bunnies, Nike swoosh)	White to dark brown powder or tar-like substance	Paint thinners, glues, nail polish remover, whipped cream aerosol, air conditioner fluid (Freon) and more	A green or gray mixture of dried, shredded flowers and leaves of the hemp plant	White or slightly yellow crystal-like powder, large rock-like chunks	Tablets and capsules	Multi-colored tablets and capsules; some can be in liquid form	Tablets and capsules	Tablet, liquid or skin application	Brown, cut up leaves
How It's Used/Abused	Alcohol is drunk	Cocaine can be snorted or injected; crack can be smoked	Swallowed	Swallowed	Injected, smoked, freebased or snorted	Inhaled through nose or mouth	Smoked, brewed into tea or mixed into foods	Swallowed, injected, snorted or smoked	Swallowed or injected	Swallowed or injected	Swallowed, injected or snorted	Swallowed, applied to skin or injected	Smoked or chewed
What Teens Have Heard	Makes a boring night fun	Keeps you amped up; you'll be the life of the party	Causes a trippy high with various plateaus	Enhances the senses and you'll love everyone	Full-on euphoria, but super risky	A cheap, 20-minute high	Relaxing, not dangerous and often easier to get than alcohol	Can keep you going for days	A free high, straight from the medicine cabinet	A great release of tension	Keeps you attentive and focused	Will guarantee a spot on the starting lineup	An oral fixation and appetite suppressant
Dangerous Because	Impairs reasoning, clouds judgement. Long-term heavy drinking can lead to alcoholism and liver and heart disease	Can cause heart attacks, strokes and seizures. In rare cases, sudden death on the first use	Can cause abdominal pain, extreme nausea, liver damage	Can cause severe dehydration, liver and heart failure and even death	Chronic heroin users risk death by overdose	Chronic exposure can produce significant damage to the heart, lungs, liver and kidneys. Can induce death	Can cause memory and learning problems, hallucinations, delusions and depersonalization	Chronic long-term use, or high dosages, can cause psychotic behavior (including paranoia, delusions, hallucinations, violent behavior, insomnia and strokes)	A large single dose can cause severe respiratory depression that can lead to death	Slows down the brain's activity and when a user stops taking them, there can be a rebound effect, possibly leading to seizures and other harmful consequences	Taking high doses may result in dangerously high body temperatures and an irregular heartbeat. Potential for heart attacks or lethal seizures	Boys can develop breasts, girls can develop facial hair and a deepened voice. Can cause heart attacks and strokes	Cigarette smoking harms every organ in the body and causes coronary heart disease, and stroke, as well as many forms of cancer
Teen Usage (Grades 9-12)	1 in 2 teens drank alcohol in the last year	1 in 10 teens has abused cocaine or crack in their lifetime	1 in 7 teens has abused cough medicine in their lifetime	1 in 8 teens has abused Ecstasy in their lifetime	1 in 20 teens has abused heroin in their lifetime	1 in 6 teens has abused inhalants in their lifetime	Nearly 1 in 2 teens has abused marijuana in their lifetime	1 in 12 teens has abused methamphetamine in their lifetime	1 in 7 teens has abused prescription pain relievers in their lifetime	1 in 13 12th graders has abused sedatives and/or tranquilizers in their lifetime	1 in 8 teens has abused Ritalin or Adderall in their lifetime	1 in 15 teens has abused steroids in their lifetime	1 in 5 teens smoked cigarettes in the last 30 days
Signs of Abuse	Slurred speech, lack of coordination, nausea, vomiting, hangovers	Nervous behavior, restlessness, bloody noses, high energy	Slurred speech, loss of coordination, disorientation, vomiting	Teeth clenching, chills, sweating, dehydration, anxiety, unusual displays of affection	Track marks on arms, slowed and slurred speech, vomiting	Missing household products, a drunk, dazed or dizzy appearance	Slowed thinking and reaction time, impaired coordination, paranoia	Nervous physical activity, scabs and open sores, decreased appetite, inability to sleep	Medicine bottles present without illness, Rx bottles missing, disrupted eating and sleeping patterns	Slurred speech, shallow breathing, sluggishness, disorientation, lack of coordination	Lack of appetite, increased alertness, attention span and energy	Rapid growth of muscles, opposite sex characteristics and extreme irritability	Smell on clothes and hair, yellowing of teeth and fingers that hold cigarettes
Important to Know	Being a child of an alcoholic places children at greater risk for developing alcohol problems	Cocaine is one of the most powerfully addictive drugs	The "high" from cough medicine is caused by ingesting a large amount of dextromethorphan (DXM), a common active ingredient	Can be addictive. A popular club drug because of its stimulant properties which allow users to dance for long periods of time	Heroin overdose is a particular risk on the street, where the purity of the drug cannot be accurately known	More than 1000 common products are potential inhalants that can kill on the first use or any time thereafter	Contrary to popular belief, marijuana can be addictive	Meth has a high potential for abuse and addiction, putting children at risk, increasing crime and causing environmental harm	Abusing prescription painkillers is just as dangerous, addictive and deadly as using heroin	Using prescription sedatives and tranquilizers with alcohol can slow both the heart and respiration and possibly lead to death	Many teens abuse this prescribed medication to help them cram for exams or suppress their appetite	Teens who abuse steroids before the typical adolescent growth spurt risk staying short and never reaching their full adult height	Secondhand smoke contributes to more than 35,000 deaths related to cardiovascular disease



Myth Busting

- Myth-busting is common across all types of health communication.
- “Illusion of Truth” effect shows people are more likely to recall myths as fact upon follow-up.
- Simple, factual statements increase knowledge retention over myth-busting techniques.

Myth	Drinking is a good way to loosen up at parties.
FACT	Drinking is a dumb way to loosen up. It can make you act silly, say things you shouldn't say, and do things you wouldn't normally do (like get into fights or have sex).

Knowledge Only Strategies

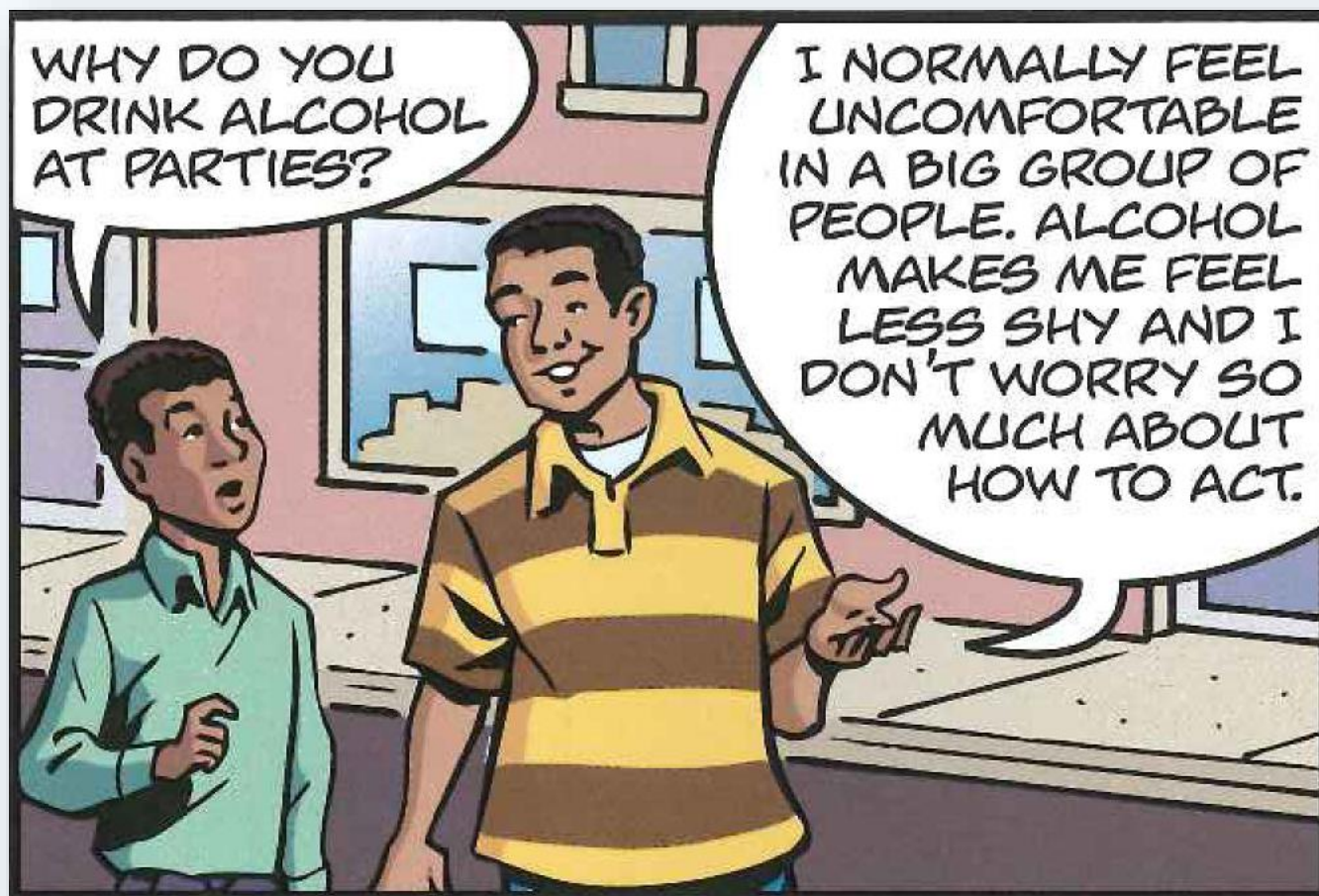
- Curricula that only provide information about the consequences of substance use do not produce measurable and long-lasting changes in behavior or attitudes. This approach is considered among the least effective educational strategies.



Conditioning Youth to be Users

- Many well intended programs portray youth as users through role play.
- Its helpful to use structured **behavioral rehearsal** to practice new skills, but unstructured **role play** can result in peer reinforcement of anti-social behavior.

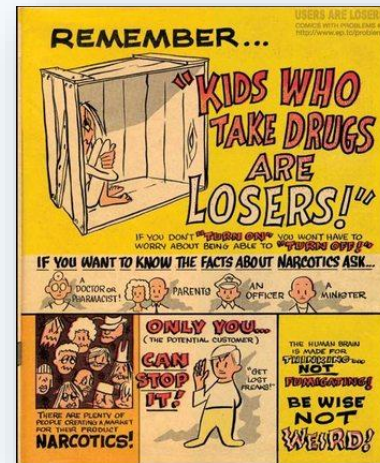
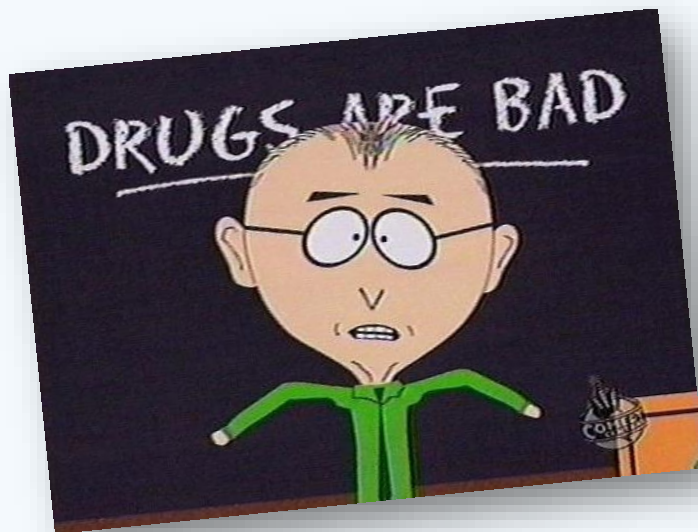




Moralistic Appeals (Um'kay?)



- As teens individuate, they begin to develop their own set of core values. Appealing to morality as young people are finding their own path to adulthood may have the opposite effect of what we intend.





Grouping At-Risk Youth Together

- Grouping at-risk youth together in early adolescence may inadvertently reinforce problem behavior.
- Thomas Dishion from the Oregon Social Learning Center found at-risk youth grouped with peers exhibit more problem behaviors than those who are not grouped with peers after prevention programming.





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