Opioid Crisis: Our Schools and Our Students

A Collaboration Between the Missouri Association of Secondary School Principals, the Missouri School Counselor Association, the Missouri Association of School Psychologists, & the United States Drug Enforcement Administration
Today’s Presenters (In Speaking Order):

- Amanda Purdum, United States Drug Enforcement Administration
- Dr. Shari Sevier, Director of Advocacy, Missouri School Counselor Association
What Do You Know About Opioids? A Quiz.
1. Which of the following are Opioids?

A. Morphine  
B. Vicodin  
C. Codeine  
D. Valium  
E. Xanax  
F. Adderall  
G. Ritalin  
H. Oxycodone  
I. Cocaine
Commonly misused prescription drugs fall under 3 categories:

- **Opioids**: Painkillers (Vicodin, Heroin, Codeine, Oxycodone, Methadone)
- **Depressants**: Used to relieve anxiety or help with sleep
- **Stimulants**: Used for treating attention deficit hyperactivity disorder
2. Where is the easiest place to find opioids?

A. On the street
B. A doctor’s office
C. A pharmacy
D. A medicine cabinet
Answer: A Medicine Cabinet

Opioids are prescription drugs.

They are most accessible in a home medicine cabinet.
3. Using prescription drugs is safe when under a doctor’s care.

True
Answer: False

For some people, taking a drug can be fatal/addictive after one or two uses.

There should be constant monitoring by the doctor and family.
4. Opioids and prescription drugs are expensive to get on the street.

True

False
Most teens who misuse prescription drugs get them free from a friend, relative or the family medicine cabinet.
5. Only certain people, or types of people, are likely to misuse or abuse drugs.

True
Answer: False

Drugs do not discriminate or stereotype.

They affect people from ALL races, ethnicities, and socioeconomic classes.
6. Since 1999, deaths from prescription opioids—like oxycodone, hydrocodone, & methadone have...
Answer: Have quadrupled!

Source: Centers for Disease Control and Prevention. (2017). Understanding the *Epidemic*
Chasing the Dragon
The Life Of An Opiate Addict
Q & A with the DEA
Consider These Statistics...

There are, on average, 193 drug overdose deaths per day in the United States. 46 of those deaths involve prescription opioids.

9.9 million Americans indicated misusing prescription opioids in 2018.

SAMSHA: National Survey on Drug Use & Health 2018
Consider These Statistics...

Nearly 1 in 5 teens say they have used prescription medicine at least once in their lifetime to get high.

Opioids have been linked to 60% of drug overdoses in the United States.
Consider These Statistics...

Oxycontin is now the leading cause of death for people under fifty.

Most prescription narcotics used by high school seniors are obtained through a friend or relative...not through a prescription.
Consider These Statistics...

If you’ve abused prescription drugs, you are 40 times more likely to abuse heroin.

4,000 people misuse prescription pills or take someone else’s prescription pills for the first time every day.
Is Missouri Really Dealing With a Crisis?

1 in 3 Missouri families has been affected by this epidemic.

Approximately 3 people die from an opioid overdose in Missouri every day.

Currently, for every 100 people in Missouri there are 80 prescriptions for opioid painkillers.
Is Missouri Really Dealing With a Crisis?

There were 908 Missouri deaths due to opioids in 2016

There were 952 Missouri deaths due to opioids in 2017

The eastern region of Missouri is the epicenter of the opioid crisis in Missouri
Is Missouri Really Dealing With a Crisis?

70% of the drug deaths in Missouri in 2017 were in the eastern region, largely due to fentanyl.

STL City has the 6th highest overdose rate of all US cities.

Although this is considered to be a white, rural issue, Missouri is one of only 7 states where the African-American population is more heavily affected.
What Is An Opioid?
Opioid Definition:

Drugs derived from the opium poppy plant, or a synthetic equivalent.

Many opioids are legal. Heroin is an illegal opioid.

These include a variety of pain medications routinely prescribed by doctors.

Because they are prescribed, they are often easily accessible at home.
For many people addicted to opioids, it started as a result of an injury or surgery.

These painkillers (opioids) may have been prescribed innocently enough.

However, the physiological processes that allow these medications to work are very powerful, and they can develop into dependency or addiction fairly quickly.
Cycle of Addiction

Low level narcotic prescription

Misuse/abuse of prescription = addiction

Once addicted, crave stronger narcotics

- Oxycontin costs $25-80 per pill

Eventually leads to craving stronger narcotics

- Heroin is $10 per bag

Forever chase/crave the euphoria

Use just to be normal
Opium Poppy

Opium

Morphine

Heroin

Created in Garage “labs”
No regulation
Play Russian Roulette
every time you take it

Codeine

Hydrocodone

Thebaine

Oxycodone

Highly Regulated
Drug Abuse, Dependence and Addiction
Risk Factors for Substance Use Disorders

One of the greatest predictors is EARLY USE! When the brain is not fully developed, use of these medications can lead to serious harmful effects.

HOWEVER....ANYONE can become addicted to prescription medication, regardless of age or risk factors.
Risk Factors for Substance Use Disorders

People with lower income are hit the highest

Ages 25-44 are most prevalent users

Increased purity of heroin, potency, injection, combining drugs leads to higher risk
Risk Factors for Substance Use Disorders

- Chronic pain
- Easy availability
- Early experimentation
- Weak family relationships
- Behavior problems
- Victims of abuse

- Childhood trauma/neglect
- Genetics
- Poor self-concept
- Difficulties coping with stress
- And many others
Substance Use Disorders

Stigma associated with SUD in seeking help or treatment.

We need to talk about this disorder openly. Families and individuals need support and help.

It’s important to know the risk factors for developing substance use disorders.
Drug Abuse

While legal pharmaceuticals under control in the Controlled Substance Act (CSA) are prescribed and used by patients for medical treatment, the use of these same pharmaceuticals outside the scope of sound medical practice is drug abuse.

When controlled substances are used in a manner or amount inconsistent with legitimate medical use, it is drug abuse.
Drug Dependence

In addition to having abuse potential, most controlled substances are capable of producing dependence, either physical or psychological.

Physical Dependence: Refers to the changes that have occurred in the body after repeated use of a drug that necessitates the continued administration of the drug to prevent a withdrawal syndrome.
Drug Dependence

The withdrawal syndrome can range from mildly unpleasant to life-threatening and is dependent on a number of factors, such as:

• the drug being used
• the dose and route of administration
• concurrent use of other drugs
• frequency and duration of drug use
• the age, sex, health, and genetic makeup of the user
Psychological Dependence: Refers to the perceived “need” or “craving” for a drug. Individuals who are psychologically dependent on a particular substance often feel that they cannot function without continued use of that substance.

- While physical dependence disappears within days or weeks after drug use stops, psychological dependence can last much longer. It’s one of the primary reasons for relapse.
Drug Dependence

Physical dependence is not addiction.

Physical dependence can exist without addiction. For example, patients who take narcotics for chronic pain management or drugs for the treatment of anxiety are likely to be physically dependent on that medication.
Drug Addiction

Defined as compulsive drug-seeking behavior where acquiring and using a drug becomes the most important activity in the user’s life.

This implies a loss of control regarding drug use, and the person with the substance use disorder will continue to use a drug despite serious medical and/or social consequences.
Drugs Dependency/Addiction

- Again, there is no discrimination.
- Could include staff and/or students and/or parents.
- Understand that this is often not a choice.
- Know the warning signs.
How Do Opioids Affect Our Schools?

The Intersection of Trauma
Family Trauma
Trauma definition: stressful or unpleasant experiences that cause a person to experience mental or emotional problems, usually for a long period of time.

No discrimination as to age of the drug user, socio-economic status, employment status, race, ethnicity.
Family Trauma

Causes of Trauma:

• Violence
• Physical & sexual abuse
• Neglect
• Medical trauma (of student or loved one)
• Natural disasters
• Loss of a significant loved one (through death, divorce, incarceration)
Opioid use by family member can lead to:

- Overdose
- Death
- Police involvement/incarceration
- Hospitalization
- Inconsistent care/neglect
- Financial issues (leading to homelessness, lack of food and other basic needs)

Family Trauma
**Family Trauma**

<table>
<thead>
<tr>
<th>Impact on the student:</th>
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<td>Decline in academic performance</td>
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<tr>
<td>Withdrawal from peers</td>
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<tr>
<td>Physical complaints and school avoidance</td>
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<tr>
<td>Difficulty eating or sleeping</td>
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<tr>
<td>Increased non-compliance / behavior problems</td>
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<tr>
<td>Maladaptive behavior in community: drug use, stealing, vandalism</td>
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Warning Signs
Opioid Use Warning Signs

- Loss or increase in appetite; unexplained weight loss or gain
- Small pupils
- Nausea, vomiting, sweating, shaky hands, feet or head and large pupils are all signs of opioid withdrawal
Opioid Use Warning Signs

- Change in attitude/personality
- Change in friends
- Avoiding contact with family
- Change in activities, hobbies or sports
- Drop in grades or work performance
Opioid Use Warning Signs

- Isolation and secretive behavior
- Moodiness, irritability, nervousness, giddiness, nodding off
- Wearing long-sleeved shirts or layers of clothing out of season
- Stealing
Watch For:

- Missing medications
- Burnt or missing spoons/bottle caps
- Missing shoelaces/belts
- Small bags with powder residue
- Syringes
Common Symptoms of Drug Use

- Drowsiness
- Inability to concentrate
- Apathy
- Slowed physical activity
- Constriction of the pupils
- Flushed face or neck
Common Symptoms of Drug Use

- Nausea
- Slowed breathing
- Dizziness
- Impaired coordination
- Sweating
- Itchy skin
Schools In Action
Prevention

Watch
- Watch for warning signs

Listen
- Listen to what kids are saying (Skittles/Pharm Parties)

Teach and practice
- Teach and practice refusal skills as part of the school counseling curriculum
  - Direct refusal
  - Exit the situation
  - Rely on help
Prevention

Collaborate with the DEA for speakers for presentations with students, parents, and staff.

Parent forums

Encourage parents to monitor their children, watching for warning signs; ask questions and start discussions; check to make sure their children are where they say they are.
Prevention

Make agreements with other parents to check on parental supervision at parties

Encourage parents to clear out medicine cabinets; lock up prescription drugs; turn in unused opioids during Drug Take-Back events
Prevention

- All staff members should be highly aware of the signs of trauma
- NOTICE changes in students & staff members
- INTERACT personally with each student every day
- NOTIFY your school counselor, school nurse, school psychologist, school social worker, administrator
- BE PREPARED to give students what they need to have a successful day at school
Handle With Care

Partnership with local police

When the police go to the home of a student on a drug-related issue, the police contact the administrator about the call.

The administrator sends an email/text to the staff titled: “Handle With Care”; the body of the email/text is simply the student’s name.

Alerts staff to be extra considerate, watchful with that student.
Great idea for school staffs to determine specific people and steps to take with each Handle With Care report.

Extends to the family, as well.

Often live in guilt and shame; feel alone and/or overwhelmed.

Schools should be judgment-free zones that offer empathy, compassion, understanding and support.
Handle With Care: Staff Awareness

- Make no assumptions about what the student can handle, preparedness for school, needs during the day
- Be present; make a connection with the student
- Ask them privately if there’s anything they need...or if they’d like to see the school counselor
- Give them free access to a trusted adult at school (school counselor, school psychologist, favorite teacher, etc.)
Handle With Care: Staff Awareness

- Keep the routine as normal as possible, but understand they may not have completed work, may not be prepared for school or exams.

- Speak with the student privately about missing work/exams... when do they think they might be ready, etc.

- Watch for signs of stress.
Community Supports

- Lunch/breakfast arrangements at school
- Partnerships with PTO/PTA
- Partnerships with local grocery stores
- Donation drives for gift cards
- Partnerships with local religious institutions
- Research and provide literature on where to get help and support; rehab clinics; mental health professionals who have a sliding scale
Many times families are dealing with guilt, fear, and embarrassment...as well as at a loss as to what to do to survive the financial and basic needs they may have.
Create a Giving Tree

- Notecards with needed items attached to the tree
- No names are listed on the cards
- People can buy the items listed, and bring them to the office
  - The office can then distribute the items to the family in need
Prioritize the presentation of the Missouri Comprehensive School Counseling Curriculum that deals with decision-making, dealing with stress, conflict resolution, making healthy choices.

Speakers for PE/Health classes

Parent Forums with Speakers
School Activities and Community Supports

talk-about-it-campaign--
good info for parents and parent forums

- [www.narcan.com/community/education-awareness-and-training-resources/](http://www.narcan.com/community/education-awareness-and-training-resources/) free Narcan for schools; work with your school nurse!
What Can Be Done to Address the Opioid Epidemic?

**Prevention** - prescription drug monitoring and prescribing guidelines, public awareness, mental health parity laws

**Treatment** - expanded access to medical treatment for addiction

**Harm Reduction** - safe syringe access, Good Samaritan laws, increased access to overdose education and naloxone

**Recovery** - peer support, use of best treatment options to decrease chance of relapse
What Can You Do?

- Pay attention to those medical providers who prescribe opioids freely and often.
- Advocate for easier & broader access to treatment for addicts.
- Advocate for accessible and affordable non-narcotic options for pain management.
- Keep your eyes, ears, and hearts open.
What Can You Do?

• Contact your legislators to press for responsible prescription/use guidelines and better laws.

• Assist your school district in engaging in ongoing professional development on this topic.

• Assist your school district in providing Comprehensive Drug Education for students, not fear-mongering.
Ryan Haight Online Pharmacy Consumer Protection Act of 2008 - made it illegal under federal law to deliver, distribute, or dispense a controlled substance by means of the Internet

Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act 2018 - contains a number of provisions related to Medicaid’s role in helping states provide coverage and services to people who need substance use disorder (SUD) treatment
Federal Legislation

SUPPORT Act of 2018:

Authorizes $50 million in grants per year for the next five years to help states and school districts implement schoolwide behavioral interventions and supports for students who have experienced trauma.

Authorizes $10 million in grants per year for five years to help school districts and nonprofits treat and prevent substance abuse disorders in children and young adults. Grants will be awarded competitively by the U.S. Department of Health and Human Services.
Missouri Recent Legislation

**SB 826 (2018):** limits initial new prescriptions of opioids to a seven day supply.

**HB 2280 (2018):** extends MO HealthNet (Medicaid) coverage an additional year for mothers in need of substance use treatment.

**SB 501 (2017) “Good Samaritan Law”:**

- Anyone can call for emergency assistance without fear of arrest or other penalties
- Anyone can receive naloxone from a pharmacist without having to first get a prescription from another physician
Missouri Proposed Legislation (2019)

- Establishment of a Prescription Drug Monitoring Program (HB 188 & SB 155)
  - MO is LAST state to not have this
- Establishment of a Joint Committee on Substance Abuse Prevention and Treatment (HB240)
- Add Fentanyl to the list of drug trafficking (HB239)
- Modify provisions related to controlled substances by aligning Missouri law with any updates to Federal law (SB6)
Do Your Homework!!

Who are your state legislators?

Who are their donors?

Are they receiving money from Big Pharma?

If so, are they voting for or against drug prevention efforts?

Let them know how you feel about these situations!!
Missouri - Other Initiatives

Missouri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) - 5 yr grant (2016) to reduce opioid overdose deaths among individuals 18 years and older.

CSTO Community Service Project - creating a 25-second video PSA to promote awareness of opioid abuse
Missouri - Other Initiatives

Missouri Overdose Rescue and Education (MORE) federal grant awarded to the Bureau of Emergency Medical Services to provide naloxone to first responders and train them on administering it to reverse an opioid overdose.

Partnerships For Success Grant SAMSHA grant awarded to MO Department of Mental Health to target prevention and reduction of underage & binge drinking and prescription drug misuse in ages 12-18
**Missouri - Other Initiatives**

**COPE Community of Learning: CDC grant**

- Establishes a multi-organizational statewide workgroup to support Missouri schools to address issues related to opioid misuse
- Find promising practices and evidence-based interventions to address abuse
- Serve as a clearinghouse for resources
- Track and evaluate professional development

**Membership:** MOASSP, MSCA, MASP, SSWAM, MASN, PE/Health Association, MARE, MSBA, MARE, DESE
Resources

Missouri Opioid Crisis:
https://opioids.mo.gov

Missouri Department of Health & Senior Services:
https://health.mo.gov
800.575.7480

MO-Hope Project:
MOHopeProject.org

SAMHSA Helpline (24/7):
800.662.4357
Resources

Heroin and Opioid Awareness and Prevention Toolkit (Guide for Schools):

Preparing for Opioid Related Emergencies for K-12 Schools:
https://rems.ed.gov/docs/Opioid-Fact-Sheet-508C.pdf

Educational materials for Elementary through High School:
www.smartmovessmartchoices.org
Questions??

Thanks for All That You Do!
References

• *Chasing the Dragon: The Life Of An Opiate Addict.* (2016). FBI and DEA.


• SAMHSA: National Survey on Drug Use and Health: 2018


• *Important information for parents regarding prescription pain medication and heroin.* New York State Dept. of Health and the New York State Office of Alcoholism and Substance Abuse Services. www.combatheroin.ny.gov
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- *Operation Prevention Parent Toolkit.* (2017) Discovery Education, Discovery Communications, LLC.

