



Talking About Substance Use with Youth

Nancy K. Hernández, LCSW

April 9, 2024



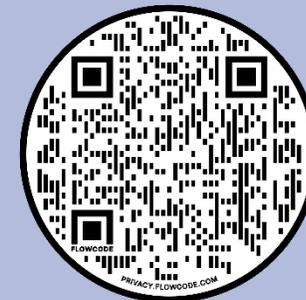
Indigenous Land Acknowledgement

- We respectfully acknowledge that we live and work in territories where indigenous nations and tribal groups are traditional stewards of the land. Our California office resides in Tongva territory.
- Please join us in supporting efforts to affirm tribal sovereignty across what is now known as California and in displaying respect, honor, and gratitude for all indigenous people.

Whose land are you on?

Option 1: Enter your location at [Native Land CA](#)

Option 2: Access Native Land website via QR Code





Advocates for Human Potential, Inc. (AHP) MIP Team



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Deputy Director



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Project Manager



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*BHWD Data and
Analyses Manager*



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*Quality Assurance
Coordinator*



Christian Citlali
*Lead Grantee
Coach*



Xiomara Romero
Grantee Coach



Aida Natalie Castro
Grantee Coach



Amanda Flores
Grantee Coach



Vic Walker
Project Coordinator



Krislyn LaCroix
Project Coordinator

MIP HUB and Past Events

Looking for past event recordings? Want to register for future events?

MIP HUB

Username: mipgrantee

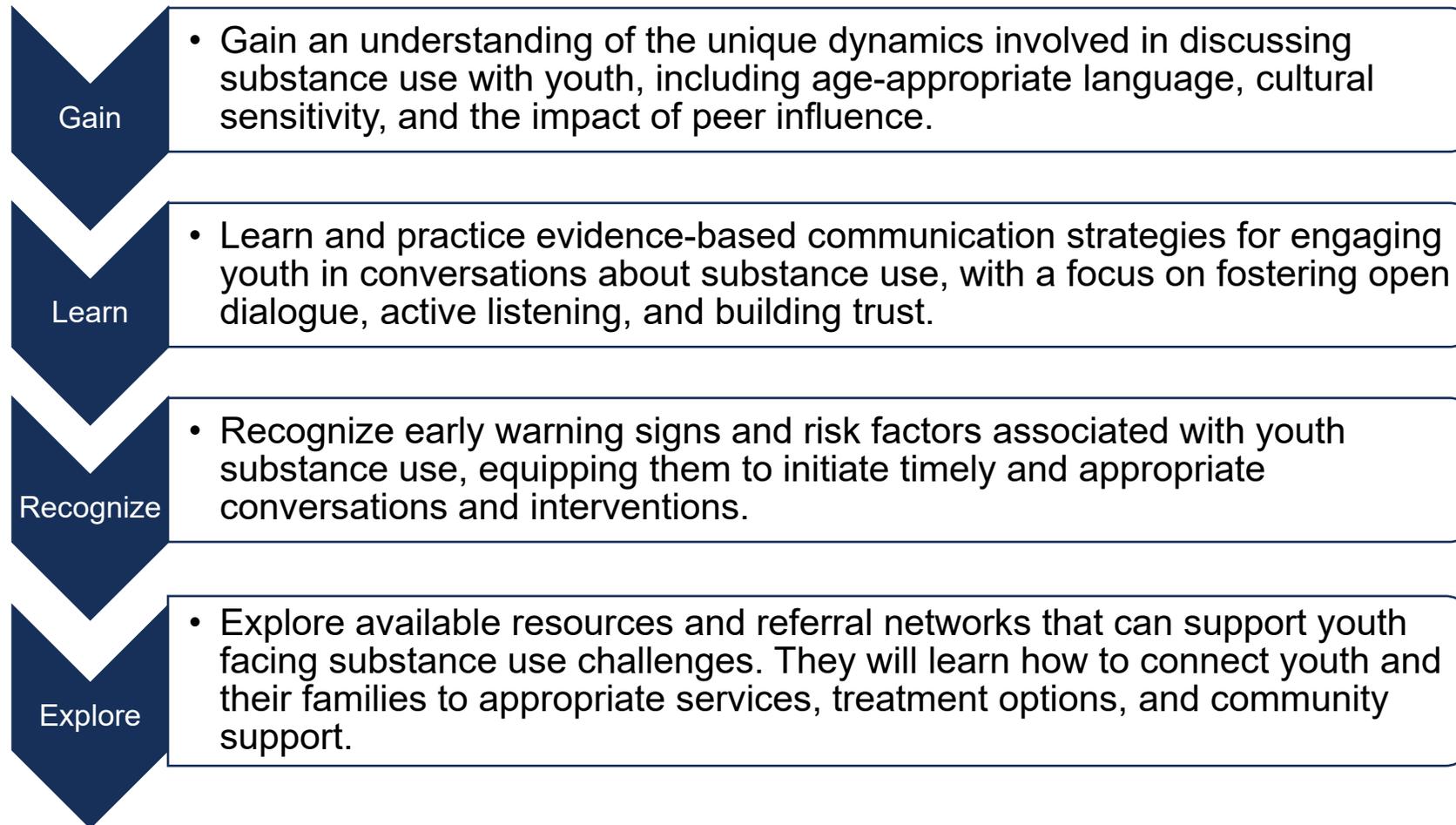
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Learning Objectives

Participants will be able to:





Agenda

1. Alcohol and Other Drugs (AOD) Among Youth
2. Risk/Protective Factors
3. How to Support Youth
4. Tools and Things to Consider
5. Q&A

AOD Among Youth



Risk Factors

- Lack of parental/caregiver involvement
- Child abuse and maltreatment (ongoing and/or history of it)
- Inadequate supervision
- Neighborhood poverty and violence
- Aggressive and/or violent behaviors
- Poor or negative self-image
- Lack of attachment
- Poor social skills
- Peer influence
- Perception of approval of drug-using behaviors
- Family history of substance use

Protective Factors

- “Family” involvement (chosen or by blood)
- Involvement in community and/or after-school programs
- Limited availability of alcohol or drugs
- Clear understanding of expectations and values
- Success in school
- Environments that encourage positive change to:
 - Learn new coping skills
 - Learn emotional regulation
 - Encourages positive views of the self

AOD Among Youth

3 Realms of ACEs

Adverse childhood and community experiences (ACEs) can occur in the household, the community, or in the environment and cause toxic stress. Left unaddressed, toxic stress from ACEs harms children and families, organizations, systems and communities, and reduces the ability of individuals and entities to respond to stressful events with resiliency. Research has shown that there are many ways to reduce and heal from toxic stress and build healthy, caring communities.



PACEs Connection thanks Building Community Resilience Collaborative and Networks and the International Transformational Resilience Coalition for inspiration and guidance. Please visit PACEsConnection.com to learn more about the science of ACEs and join the movement to prevent ACEs, heal trauma and build resilience.



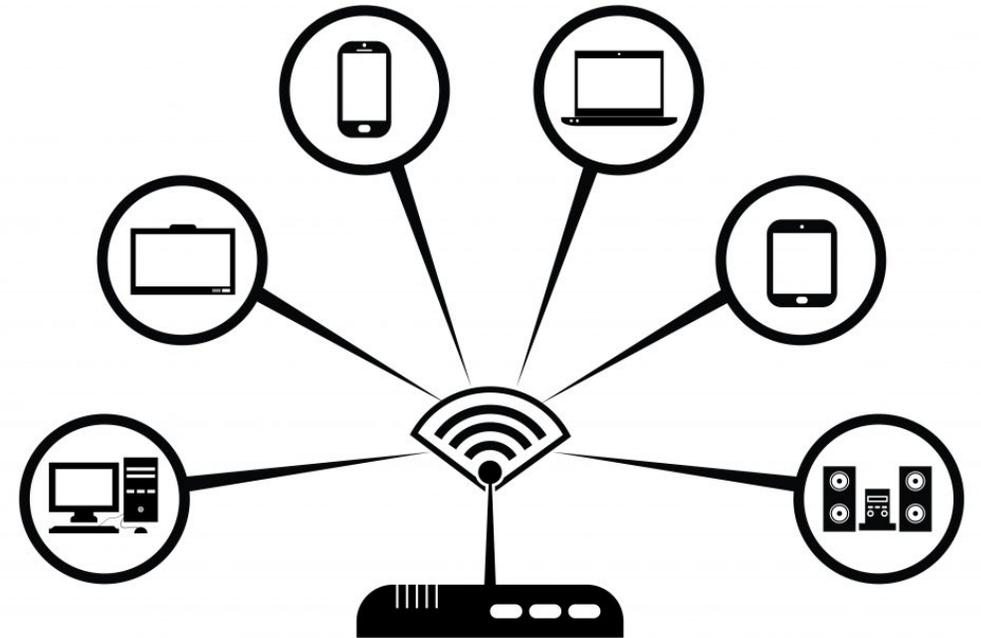
What to Do About It



Talking to Youth

Establish rapport with your client:

- Listen to understand, not respond.
- Be genuine.
- Review your limitations honestly.
- Review opportunities for safety.



Assessing

Teen health screen

We ask all our teen patients about drugs and alcohol because substance use can affect your health. Please ask your doctor if you have any questions. Your answers on this form will remain confidential.

S2BI:

In the PAST YEAR, how many times have you used:	Never	Once or twice	Monthly	Weekly
Tobacco:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marijuana:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you answered "Never" to all questions above, you can skip to CRAFT question #1 and then stop. Otherwise, please continue answering all questions below.

Prescription drugs that were not prescribed for you: (such as pain medication or Adderall)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Illegal drugs: (such as cocaine or ecstasy)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inhalants: (such as nitrous oxide)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Herbs or synthetic drugs: (such as salvia, "K2", or bath salts)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CRAFT questions

	No	Yes
1. Have you ever ridden in a car driven by someone (including yourself) who was "high" or had been using alcohol or drugs?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you ever use alcohol or drugs to relax, feel better about yourself, or fit in?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you ever use alcohol or drugs while you are by yourself, or alone?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you ever forget things you did while using alcohol or drugs?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do your family or friends ever tell you that you should cut down on your drinking or drug use?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you ever gotten into trouble while you were using alcohol or drugs?	<input type="checkbox"/>	<input type="checkbox"/>

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CAGE-AID Substance Abuse Screening Tool

The CAGE-AID screening tool was adapted from the CAGE alcohol assessment tool to include questions about drug use. The target population for the CAGE-AID is both adults and adolescents and can be administered by patient interview or self-report. These tools are not used to diagnose diseases, but only to indicate whether a problem might exist.

When thinking about drug use, include illegal drug use and the use of prescription drugs other than as prescribed

C	Have you ever felt the need to cut down on your drinking or drug use?	Yes	No
A	Have people annoyed you by criticizing your drinking or drug use?	Yes	No
G	Have you ever felt guilty about drinking or drug use?	Yes	No
E	Have you ever felt you needed a drink or used drugs first thing in the morning to steady your nerves or to get rid of a hangover (Eye-Opener)?	Yes	No

Scoring

A "yes" answer to one item indicates a possible substance use disorder and a need for further testing.

References

Brown RL, Leonard T, Saunders LA, Papasouliotis O. The prevalence and detection of substance use disorder among inpatients ages 18 to 49: an opportunity for prevention. *Preventive Medicine*. 1998;27:101-110.

Alcohol screening questionnaire (AUDIT)

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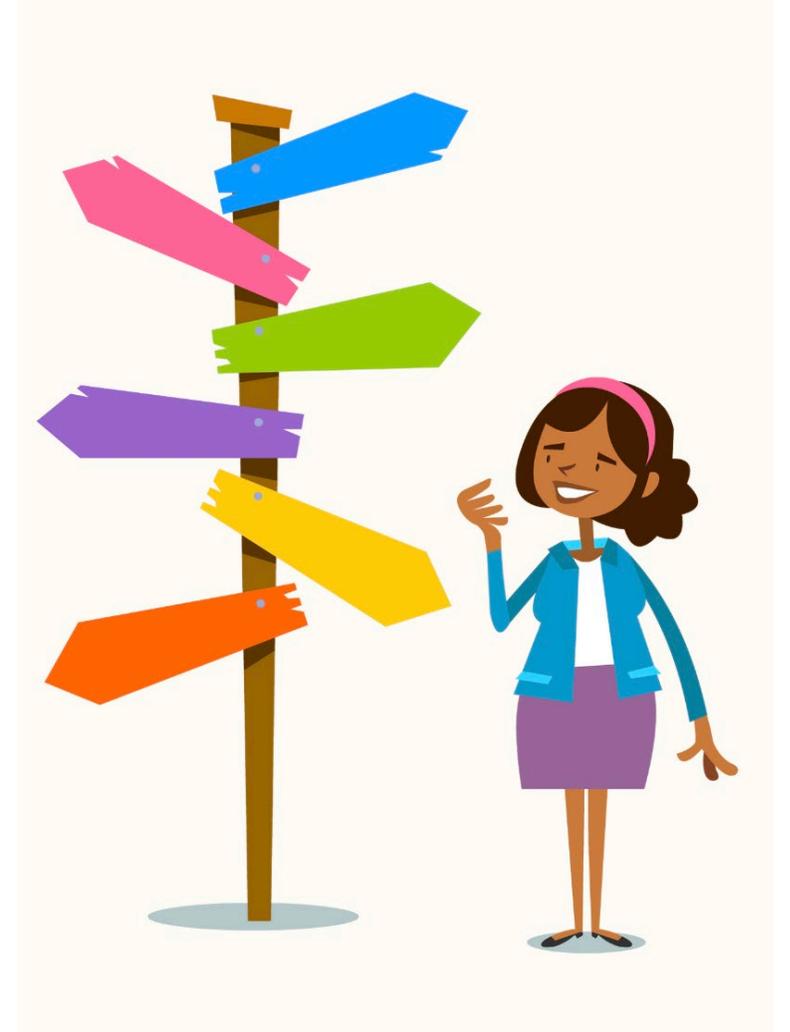
One drink equals:  12 oz. beer  5 oz. wine  1.5 oz. liquor (one shot)

1. How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times a month	2 - 3 times a week	4 or more times a week
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	0 - 2	3 or 4	5 or 6	7 - 9	10 or more
3. How often do you have four or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
9. Have you or someone else been injured because of your drinking?	No		Yes, but not in the last year		Yes, in the last year
10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	No		Yes, but not in the last year		Yes, in the last year
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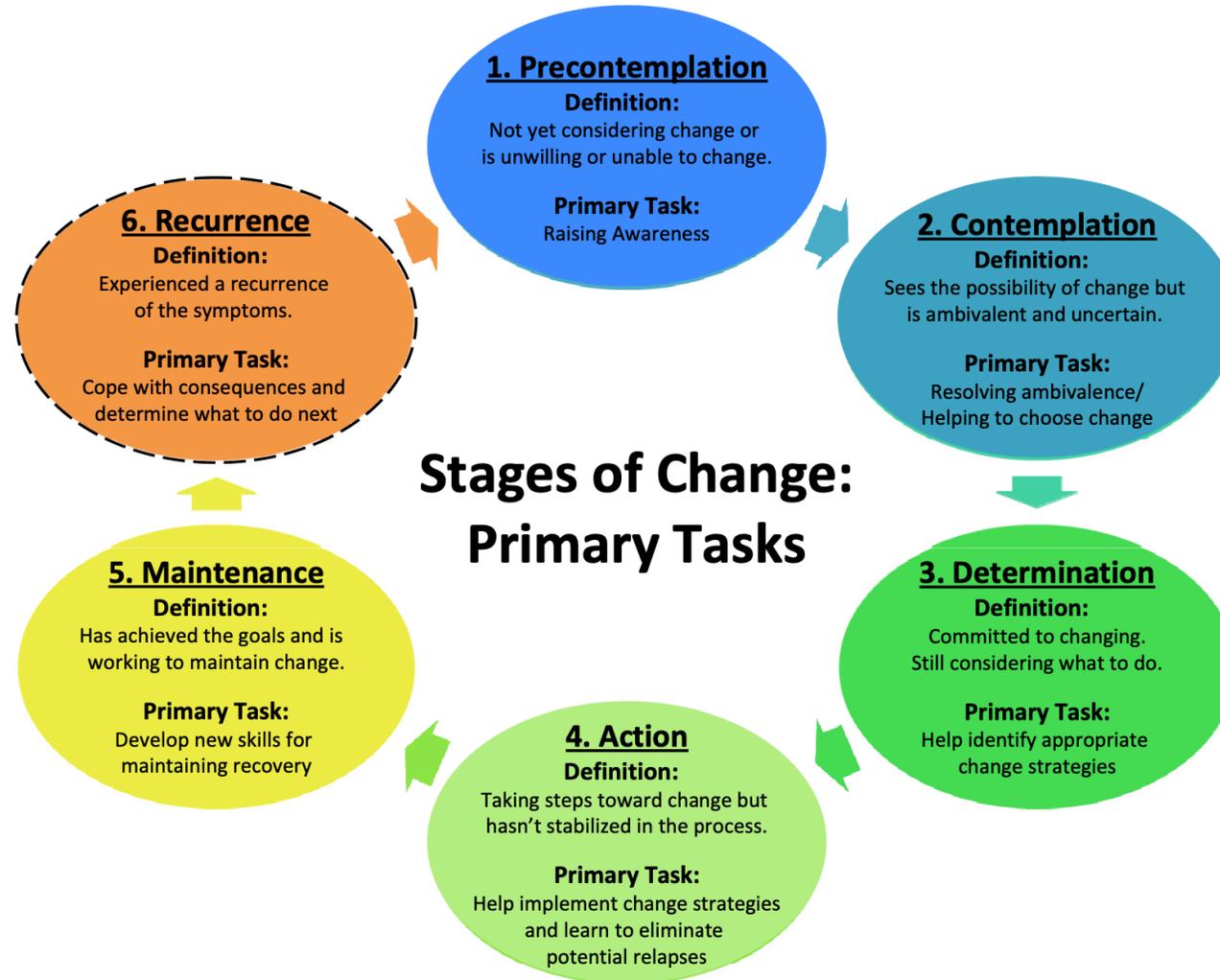
Have you ever been in treatment for alcohol use? Never Currently In the past

Talk About It

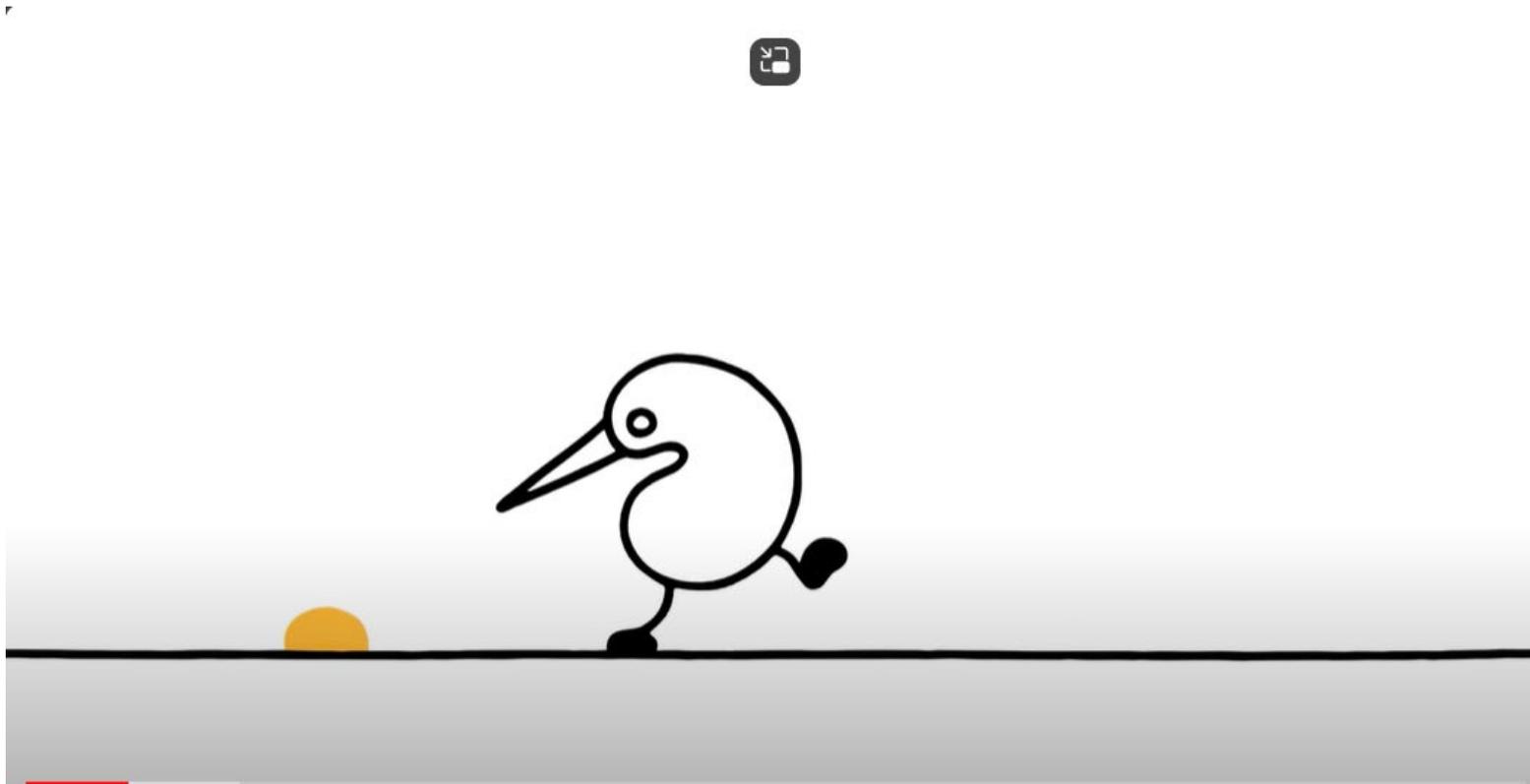
- Increase **awareness** of the problem.
- Increase **motivation** to change.
- Create **behavior change**.
 - Brief interventions trigger change.



Motivation to Change



[YouTube video titled "Nuggets"](#)



(Hykade, 2014)

Tools to Talk About It

Stages of Change: Intervention Matching Guide		
<p>1. Pre-contemplation</p> <ul style="list-style-type: none"> • Offer factual information • Explore the meaning of events that brought the person to treatment • Explore results of previous efforts • Explore pros and cons of targeted behaviors 	<p>2. Contemplation</p> <ul style="list-style-type: none"> • Explore the person's sense of self-efficacy • Explore expectations regarding what the change will entail • Summarize self-motivational statements • Continue exploration of pros and cons 	<p>3. Determination</p> <ul style="list-style-type: none"> • Offer a menu of options for change • Help identify pros and cons of various change options • Identify and lower barriers to change • Help person enlist social support • Encourage person to publicly announce plans to change
<p>4. Action</p> <ul style="list-style-type: none"> • Support a realistic view of change through small steps • Help identify high-risk situations and develop coping strategies • Assist in finding new reinforcers of positive change • Help access family and social support 	<p>5. Maintenance</p> <ul style="list-style-type: none"> • Help identify and try alternative behaviors (drug-free sources of pleasure) • Maintain supportive contact • Help develop escape plan • Work to set new short and long term goals 	<p>6. Recurrence</p> <ul style="list-style-type: none"> • Frame recurrence as a learning opportunity • Explore possible behavioral, psychological, and social antecedents • Help to develop alternative coping strategies • Explain Stages of Change & encourage person to stay in the process • Maintain supportive contact

Tools to Talk About It (cont.)

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Have you ever been in treatment for alcohol use? Never Currently In the past

Referring to Treatment

- Based on your location and your organization's guidelines, have an honest conversation about what options are available for the youth.
- Facilitate a hand-off by connecting the youth with a treatment provider.
- What else can be done?



Things to Consider

- Cal. Fam. Code §6929(b)
- Code of Federal Regulations (CFR) 42 Part 2



Make the Connection

“The opposite of addiction is not sobriety, it is human connection.”

Johann Hari

References and Resources

Centers for Disease Control and Prevention. (n.d.). [High-risk substance use among youth](#).

Hykade, A. (2014). [Nuggets](#) [YouTube Video]. Filmbilder & Friends.

National Center for Youth Law. (2024). [California minor consent and confidentiality laws](#).

The National Child Traumatic Stress Network. (n.d.). [About child trauma](#).

PACES Connection. (n.d.). [3 Realms of ACEs](#).

SBIRT Orgeon. (n.d.). [Screening forms](#).

University of California Los Angeles Integrated Substance Abuse Programs. (n.d.). [Stages of change](#).

Questions

Please enter your questions in the chat box and/or
send them to ca_mip@ahpnet.com



Upcoming Events and Important Reminders

April Events	Time	Date
Admin Coaching Call	11:30 a.m. – 1:30 p.m.	4/16/24
May Events	Time	Date
MIP Webinar: Topic TBD	12:00 pm. – 1:00 p.m.	05/07/24
June Events	Time	Date
Learning Collaborative: MIP Ed Partners	12:30 p.m. – 2:00 p.m.	06/14/24
Learning Collaborative: MIP Interns and Office Hours	2:00 p.m. – 4:00 p.m.	06/20/24
Learning Collaborative: MIP Coordinator	12:30 p.m. – 2:00 p.m.	06/21/24
Learning Collaborative: MIP Mentors and Office Hours	12:30 p.m. – 2:30 p.m.	06/28/24

Attendance and Survey

If you have any additional questions for the MIP team, you can email ca_mip@ahpnet.com



Thank you!