

Hello and welcome to the Montana State University Prescription Opioid and Stimulant Prevention Toolkit for Rural Youth, Module ____: Parental Awareness and Action. [insert speaker introduction here]. Before we begin, I would like to introduce you to the project team responsible for the development of this five-module toolkit.

MEET THE PROJECT TEAM

The following Montana State University faculty and staff created the content of this parent module

- Michelle U. Grocke-Dewey, Ph.D. Principal Investigator, Assistant Professor, Health & Human Development, MSU Extension FCS Health & Wellness Specialist
- Alison Brennan, Ph.D. Principal Investigator, Assistant Professor, Health & Human Development, MSU Extension FCS Mental Health Specialist
- Sandra J Bailey, Ph.D., Professor Emeritus, Montana State University.
- Barbara Allen, M.S. Program Director, MSU Extension Associate Specialist
- Jennifer Munter, Program Manager, MSU Extension



Dr. Michelle Grocke-Dewey is an assistant professor for the Health and Human Development Department here at Montana State University. She is also the MSU Extension Family and Consumer Sciences Health and Wellness Specialist and serves as Principal Investigator for this project.

Dr. Alison Brennan is also an Assistant Professor for the Health and Human Development Department at MSU. Alison is our MSU Extension Mental Health Specialist and serves as Co Principal Investigator for this project.

Dr. Sandra J Bailey is an Emeritus Professor at Montana State University and developed the curriculum content for this module and has been a consultant for all project activities.

Barbara Allen is an MSU Extension Associate Specialist and serves as Program Director overseeing all project activities

I am Jennifer Munter and I serve as the Program Manager for this project.

LEARNING OBJECTIVES

At the conclusion of this module, we expect participants will be able to:

- Understand why opioids and stimulants are of concern
- Understand the basics of adolescent development
- Identify risk and resilience factors related to opioid and stimulant use in youth
- Recognize signs of opioid and stimulant use in youth
- Start conversations with youth suspected of using opioids or stimulants
- Identify strategies for being an advocate for youth in your community



We are grateful for your interest in preventing substance misuse among rural Montana youth. We hope this module will be informative and that it will inspire you to take action in your local community.

At the conclusion of this module, we expect participants will be able to [read objectives].

As we go through the information, keep in mind that adolescence is generally between the ages of 10 and 24 years. In this presentation we will also refer to this stage of development as youth and teens.

The Blackfeet Nation's Plight Underscores the Fentanyl Crisis on Reservations

CONCERN

WHY IS THERE SO MUCH CONCERN ABOUT OPIOIDS AND STIMULANTS IN RURAL AREAS?

[READ BOZEMAN DAILY CHRONICLE FULL ARTICLE](#)

npr

TEEN OVERDOSE DEATHS ROSE RECENTLY, LARGELY DUE TO FENTANYL

3-Minute Listen

[LISTEN TO NPR RADIO 3-MINUTE AUDIO](#)

- When used according to a healthcare provider prescription, certain drugs such as Oxycontin and Adderall may be helpful to individuals. However, there is growth in youth and young adults misusing prescription opioids and stimulants.
- There is also a risk of overdose and/or death. Illegally produced fentanyl is being produced and added to other drugs. A very small amount of fentanyl can be lethal. We have heard and read that in Montana fentanyl is being added to marijuana, methamphetamine, opioids, and even vaping products.
- Originally developed for pain management treatment of cancer patients, fentanyl is 100 times more potent than morphine and 50 times stronger than heroin. (DEA; CDC)

WHAT ARE OPIOIDS



[Oxycodone Fact Sheet \(DEA.GOV\)](#)

[Hydromorphone Fact Sheet \(DEA.GOV\)](#)

[Morphine Fact Sheet \(DEA.GOV\)](#)

Opioids are medications prescribed for patients who are experiencing severe pain. Used as prescribed, they can be beneficial and are generally used short term.

Opioids or opiates are drugs that relieve pain. Some are natural and other are synthetic – produced by pharmacies for prescriptions. Opioids that are prescribed by doctors include such names as codeine, hydrocodone OxyContin, oxycodone, Percocet, and Vicodin.

WHAT ARE ILLICIT OPIOIDS?



The image displays three distinct types of illicit opioids. On the left, a brown powder is shown next to a white powder. In the center, a white powder is shown above a yellowish powder. On the right, a yellowish powder is shown in a container. Each image is accompanied by a link to a fact sheet from the DEA.

[Heroin Fact Sheet \(DEA.GOV\)](#)
 [Fentanyl Fact Sheet \(DEA.GOV\)](#)
 [U-47700 Synthetic Opioid Fact Sheet \(DEA.GOV\)](#)

Illegal opioids are any that are not made by a licensed pharmaceutical company.

Illicit opioids are any that are not made by a licensed pharmaceutical company. Heroin is a commonly known illicit opioid. In addition there are opioids that look like oxycodone and fentanyl that are manufactured by illegal pharmacies. We will view some of those later in this presentation.

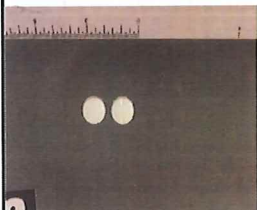
The reason that we chose to say 'illicit' instead of 'illegal' is because even a legal, prescribed opioid becomes 'illegal' when it is in the hands of someone it wasn't prescribed for.

It is important to also point out that fentanyl, the potent synthetic opioid is approved by the Food and Drug Administration and prescribed for pain relief like other prescription opioids. Prescription fentanyl products are currently available in the following dosage forms: oral transmucosal lozenges commonly referred to as fentanyl "lollipops" (Actiq®), effervescent buccal tablets (Fentora®), sublingual tablets (Abstral®), sublingual sprays (Subsys®), nasal sprays (Lazanda®), transdermal patches (Duragesic®), and injectable formulations.

Fentanyl. DEA. (n.d.). Retrieved July 1, 2022, from <https://www.dea.gov/factsheets/fentanyl>

WHAT ARE STIMULANTS?

[Prescription Amphetamines FactSheet \(DEA.GOV\)](#)



Amphetamines are prescribed as Adderall®, Concerta®, Dexedrine®, Focalin®, Metadate®, Methylin®, Ritalin®.

Stimulants enhance feel-good chemicals in the brain such as dopamine and norepinephrine and speed up the body's systems

[Read 2019 Article by Ashwood Recovery in Boise, ID](#)

[Prescription Methamphetamine Fact Sheet \(DEA.GOV\)](#)

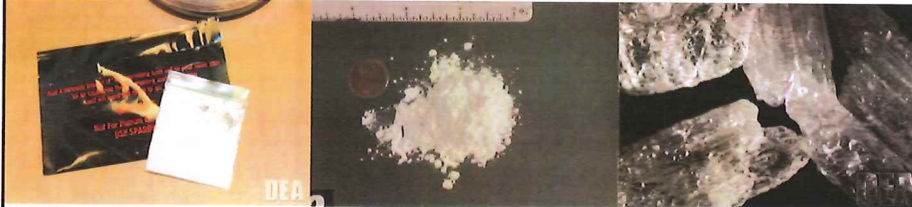


Methamphetamines are prescribed as Desoxyn®

Adderall is a drug that is prescribed for Attention-deficit hyperactivity disorder and narcolepsy. The drug increases alertness, energy, and attention.

There are also illegal stimulants, primarily methamphetamine.

WHAT ARE ILLEGAL STIMULANTS?



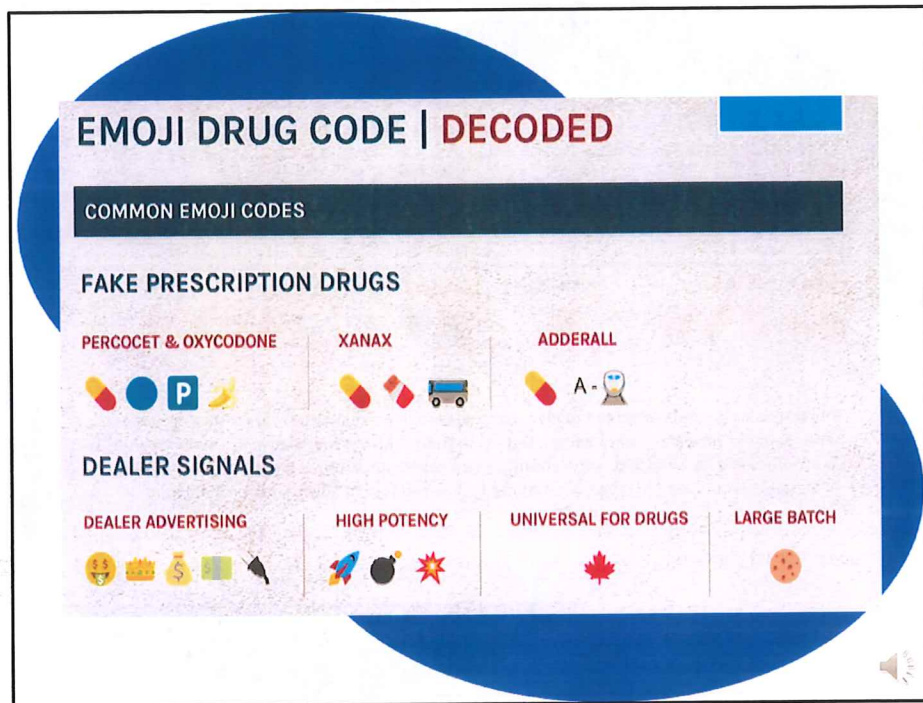
[Bath-Salts Fact Sheet](#)
([dea.gov](#))

[Cocaine Fact Sheet](#)
([dea.gov](#))

[Crystal Meth Fact Sheet](#)
([dea.gov](#))

According to the United States Drug Enforcement Administration, several stimulants are highly addictive and have no medical use in the United States ([DEA drug fact sheet, 2020](#)).

The most common illegal stimulants are cocaine, crack, amphetamines, methamphetamine, and bath salts



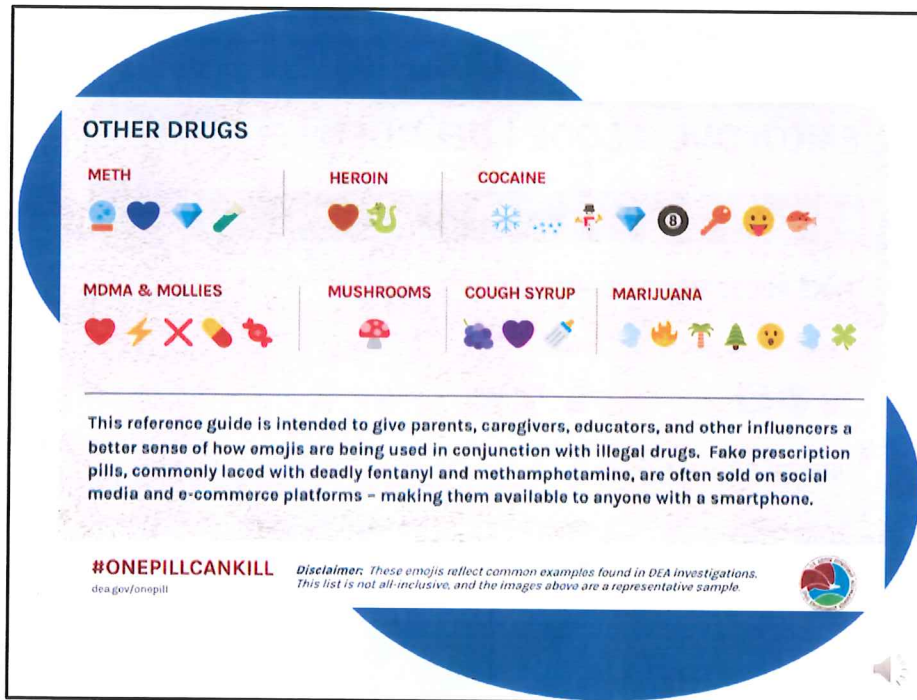
- Non-prescription (fake) pills are available via social media. Drug dealers are marketing on platforms such as Instagram, Snap Chat, and Craigslist. The pills look almost identical to prescription pills but may contain fentanyl. This slide and the next slide show some of the emojis on social media that are used to attract adolescents to sites where these counterfeit drugs can be found.

Source used with permission: [Drug Emoji Decoded.pdf](#)

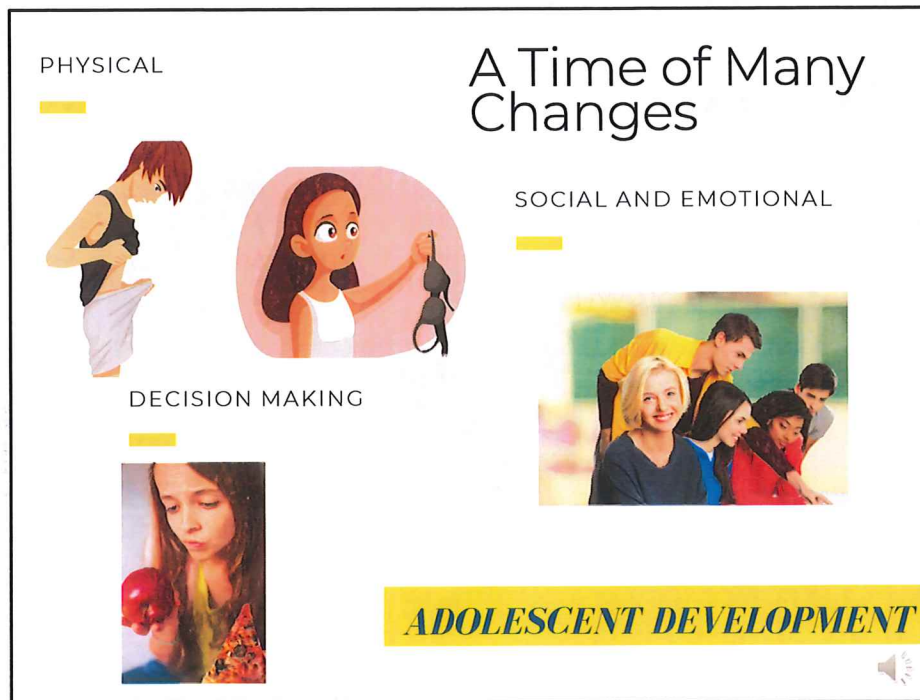
Contact the DEA at **DRUG PREVENTION AND EDUCATION:**

Office of Congressional and Public Affairs Drug Prevention questions:

(202) 307-7936



- Youth are at a developmental stage in which more risk-taking occurs. They are curious and are more likely to take a risk before thinking through the consequences.
- With counterfeit drugs that may contain fentanyl, one pill can be fatal. Even if not laced with fentanyl, illegal opioids and stimulant ingredients are not regulated and may contain lethal dosages.
- These emojis may appear on social media. As you can see there are often multiple emojis to represent a drug, such as with cocaine and meth.



Adolescence is a time of many changes. These changes come at a rate not seen since the first years of life. There is rapid physical growth, social and emotional changes occur during puberty, and cognitive changes occur such as changes in decision making.

The time between childhood and young adulthood has increased. Puberty is starting earlier and even after high school graduation, young people are exploring the world or going college. Adolescence starts in middle school around ages 10-12 and adulthood begins in the mid-20s when the brain is fully developed.

Today we know more about brain development and how that impacts adolescents' decision making and risk taking. Recent research has found that the adolescent brain matures from the back to the front – with the prefrontal cortex the last to mature. The brain also matures from the inside (limbic system) to the outside (cerebral cortex). The prefrontal cortex is responsible for impulse control, thinking through decisions, and reducing impulsiveness. Adolescents are using the emotional and impulsive parts of their brain rather than the cognitive and rational parts.

Source: Arian et al, 2013; Arnett 2005

PHYSICAL

- Faster growth
- Puberty



Parents may notice how quickly their preteen or teen is growing as they outgrow clothes and shoes at a faster rate. During the early teen years there are physical changes that occur such as menstruation and breast development for girls, facial hair and deepening of voice for boys. Acne appears and bodies start to sweat.

Teens become private about their bodies. They are experiencing many changes and may not know how to make sense of those changes.

Teen girls in particular may become interested in amphetamines to assist with weight loss and body image.

Ages 10-12 is not too early to start talking with your child. Let them know the changes are the normal transition to adulthood. The changes can feel scary at times but as their parent, you are there to support them. Remind them that it is okay to ask you questions.

Develop regular and open conversations with your child! During this developmental stage talking about risk taking and drugs becomes increasingly important. Respect their need for some privacy and withdrawal as they are experiencing puberty but work to

engage them in the changes happening with their bodies to prepare for other discussions such as risk taking, drugs, and relationships.

Source on body image: Parkes et al., (2008).

SOCIAL AND EMOTIONAL

- More self-conscious



- Spend more time with friends



- Disequilibrium



Teens become more self-conscious about their looks. Acne or having a “bad hair day” can cause more emotional meltdowns than normal as teens are experiencing the changes in their bodies from being a child to becoming an adult.

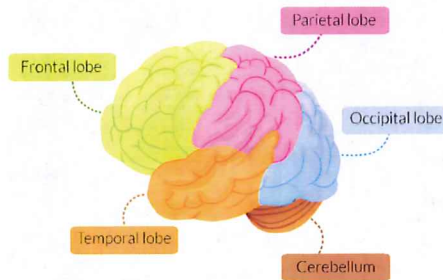
Adolescents are also going through a phase of finding where they fit within peer groups – essentially seeking their identity. This is part of normal development, and teens will often pull away from their parents as they find their identity. Parents can see this in music, hairstyles, and clothing youth choose.

During this time of identity development parents often see their teens arguing more and being moody. The relationship with parents can be out of balance. Typically, the issues are minor such as hairstyles or curfews. As teens gets older, this generally phases out as the brain continues to develop. While it can be difficult to see your teen pull away from you and prefer to spend more time with friends, they are preparing for life on their own – and as their parent, you can help them during this stage to learn how make good choices.

Steinberg & Morris, 2001; Parkes, et al. (2008).

How brain development impacts adolescents' decision making and risk taking

- Frontal Lobe: Thinking—
Planning--Problem Solving—
Emotions--Behavioral
Control-- Personality
- Parietal lobe: Perceptions--
Making Sense of the World--
Arithmetic and Spelling
- Occipital lobe: Vision
- Temporal lobe: Memory—
Understanding--Language



THE ADOLESCENT BRAIN

Reminder brain develops back to front and inside to outside

Although the limbic system is not featured in this image it is located below the temporal lobes, and lies under the cerebral cortex, which is the outmost part of the brain. It is responsible for processing and regulating emotions, forming and storing memories, sexual arousal, and learning.

Guy-Evans, O. (2021, April 22). *Limbic system: Definition, parts, functions, and location*. Limbic System: Definition, Parts, Functions, and Location | Simply Psychology. Retrieved July 1, 2022, from <https://www.simplypsychology.org/limbic-system.html>

DECISION MAKING



- Brain developing
- Reasoning changing
- Risk taking

UCLA researcher and assistant professor Dr. Adriana Galvan

Hit play twice to access this video OR, click on this link: <https://youtu.be/LWUkW4s3XxY>



In the past two decades researchers have found that brain development is not complete until an individual is in their mid-20s. Although teens' reasoning changes from that of a child, they are at a stage of risk taking and reward seeking. Development of reasoning abilities is not complete, and teens may find it challenging to make logical decisions. Instead, they are focused on the thrill of taking a risk and having an immediate reward. For example, trying alcohol, an opioid or stimulant to see how it will make them feel.

Adolescence expert, Dr. Lawrence Steinberg, talks about this as making decisions in relation to the social and emotional situation – or hot and cold situations. A cold situation would be one where a young person is driving alone and sees a traffic light turn yellow. He/she knows he should slow down and stop. A hot situation would be the teen driving with friends, music on and sees the light turn yellow. He/she is more likely to be willing to take the risk to run the light. In this situation there is a great deal of emotion as there are friends present.

Parents need to be aware of decision-making skills that youth are developing during adolescence because these unique features of development can contribute to potential misuse of substances such as opioids and stimulants.

Stop here and take the next 9-10 minutes to view UCLA researcher Adriana Galvan as she talks about how risk-taking, exploration, and thrill-seeking behaviors are a normal part of the adolescents developing brain and how she explains the opportunities and vulnerabilities that go along with this development.

Source: Galvan, 2010; Steinberg, 2005; Steinberg & Morris, 2001; Sussman & Arnett, 2014

DID YOU KNOW?

According to the 2021 Montana Youth Risk Behavior Survey Report

In 2019, over **1 in 10** high school students reported taking a prescription drug without a doctor's prescription

48% of youth reported vaping at least once

2 in 10 youth tried alcohol by age 12

2 in 10 youth tried marijuana by age 14

Read stats and then comment/add to the conversation.....

1) Be aware of any opioids or stimulants that are in your home.

2) Are they accessible to your children?

3) Are the number of pills regularly checked to make sure they are not misused or diverted?

4) Do you talk with your children regularly about the dangers of opioid and stimulant misuse?

We will discuss these questions in more detail, as we go through this session.

DID YOU KNOW?

Taking a prescription drug such as OxyContin or Adderall in a way that is not prescribed or taking someone else's prescription is called **diversion**. This is a common way youth access opioids and stimulants.



There are several reasons parents should talk with their teens about accessing opioids and stimulants in this manner.


First, you don't really know where the other person got the drug. Is it counterfeit and if so, the pill could contain fentanyl – and one pill can be deadly.

Second, taking medications that are not prescribed for you may make you ill or they may be fatal.


Finally, even if it is from your friend's prescription it is against the law to take medication not prescribed for you.

IDENTIFYING COUNTERFEIT OPIOIDS


Can you identify which of the pictured pills are from a pharmacy and which are illegally produced?



Oxycodone



Adderall



Xanax

In 2021, the DEA seized over 9.5 million fake pills (DEA.gov)

Source: US Department of Justice/Drug Enforcement Administration
[Counterfeit Pills fact SHEET-5-13-21-FINAL.pdf](#)

Counterfeit pills are medicines made outside a pharmacy. The ingredients are not standard and they are cheaper to make for someone who is trying to sell them illegally. They look very close to those that are distributed by a legal pharmacy. On the Left: Authentic oxycodone M30 tablets (top) vs. counterfeit oxycodone M30 tablets containing fentanyl (bottom). In the Center: Authentic Adderall tablets (top) vs. counterfeit Adderall tablets containing methamphetamine (bottom). To the right: Authentic Xanax tablets (white) vs. counterfeit Xanax tablets containing fentanyl (yellow) (DEA with permission).

The DEA has confiscated counterfeit pills in every U.S. state in remarkable amounts. Over 9.5 million counterfeit pills were seized in 2021, which was more than 2019 and 2020 combined. DEA laboratory testing revealed a drastic increase in the number of counterfeit pills containing at least two milligrams of fentanyl, which as you learned early is considered a lethal dose.

Counterfeit pills can be bright in color to attract the attention of potential young users. This strategy is similar to flavored vaping materials. The goal is to entice young people to use them.

These pills are easy to obtain on-line or via social media outlets. All can contain harmful ingredients such as fentanyl which can be deadly. A small amount can kill a person in seconds. Fentanyl is the cause of recent increases in drug overdose deaths.

Also, in a 2020 article, **OVER HALF of deaths from opioids are in the age group of adolescents up to age 25**

Talking with your teen about the dangers of taking any medication not prescribed for them is important – and especially those where they do not know where the medication was manufactured. It can be easy for a young person to think that taking some Adderall will help them study but this is not the case.

Source for the DEA Statistic:

DEA issues Public Safety Alert on sharp increase in fake prescription pills containing fentanyl and meth. DEA. (n.d.). Retrieved July 1, 2022, from <https://www.dea.gov/press-releases/2021/09/27/dea-issues-public-safety-alert>



- Nationally, nonmedical use of prescription drugs has surpassed all drug use except marijuana in teens and young adults. This age group is most likely to misuse prescription drugs.
- It is important to keep track of what happens to prescribed medicines in the home.
- Higher rates of depression in youth are related to higher levels of opioid use. During COVID lockdown suicide-related emergency room visits decreased for youth but since early 2021 they have increased, especially for girls.
- These findings suggest the prescription drug misuse is a public health problem.
- Source: Wilson, A. C., Morasco, B. J., Holley, A. L., & Feldstein Ewing, S. W. (2020). Patterns of opioid use in adolescents receiving prescriptions: The role of psychological and pain factors. *American Psychologist*, 75(6), 748–760.
- Source: Fortuna, R. J., Robbins, B. W., Caiola, E., Joynt, M., Halterman, J. S. (2010). Prescribing of controlled medications to adolescents and young adults in the United States. *Pediatrics*, 126(6), 1108-1116.
- Source: Gordon, J. A., (2021, September) Supporting Kids Mental Health During COVID 19. Retrieved from: [NIMH » Supporting Kids' Mental Health During COVID-19 \(nih.gov\)](https://www.nimh.nih.gov/health/topics/supporting-kids-mental-health-during-covid-19)



- Youth are often introduced to opioids by their physician when they are seen for a sports injury, removal of wisdom teeth, or headaches. The earlier youth are prescribed opioids, the more likely it is that misuse will happen. Studies find that often youth do not use all of the prescribed pills, however, that means there are unused opioids in the house that could be misused.
- If you are a parent or guardian of a child who has been prescribed a prescription medication, you are responsible for monitoring the use of the medication and follow the directions given by the doctor and the pharmacist.


PAUSE HERE AND PLAY VIDEO

Listen to the story of a pastor who overcame a substance use disorder, which he developed after a tennis injury as a young person



<https://youtu.be/48ayaqacIxE>





- Not following the instructions from the doctor
- Taking pills that are not prescribed for you
- Taking opioids to get high

WAYS OPIOIDS ARE MISUSED

Most opioid misuse starts with legal prescription opioid use. While most individuals who are prescribed opioids do not end up misusing them or becoming addicted, for those who do, there are different avenues to the misuse.

Opioids act as endorphins, which are naturally produced in the body, to help us alleviate pain. If a person misuses opioids, opioids take over the role of endorphins. This can lead to addiction.

Parents need to monitor the teen's use of prescribed opioids. Again, make sure they are following the doctor's instructions.

Remind them to never take pills that are not prescribed for them.

And let them know the dangers of taking opioids to get high. They could accidentally overdose.

Source: National Institutes of Health; US Department of Health and Human Services; Mind Matters: The Body's Response to Opioids

— Drowsiness — Constipation
— Nausea or vomiting
— Dizziness or weakness — Constricted pupils
— Dry mouth — Headaches
— Sweating — Loss of appetite
— Mood changes

Source:
[Opioids | Youth.gov](https://www.youth.gov)

SIGNS OF OPIOID MISUSE IN YOUTH

The infographic is a white rectangular box with a black border. It features a blue curved shape in the top right and bottom left corners. The text is arranged in a list format with yellow dashes preceding each symptom. At the bottom right, there is a small speaker icon.

A teen experiencing one or more of the above issues does not mean that they are using opioids or stimulants. However, chronic signs may be a warning that something is wrong.

Look for other signs associated with these such as a drop in grades, lack of interest in activities that the teen used to enjoy, a change in friends, breaking curfews, and signs of hiding what is happening in the teen's life.

— Rotting teeth — Dilated pupils

— Thinning body

— Intense scratching — Paranoia or confusion

— Acne or sores

— Irritability

Source: [Meth Symptoms & Signs of Use \(americanaddictioncenters.org\)](http://americanaddictioncenters.org)

SIGNS OF STIMULANT MISUSE IN YOUTH

These signs may suggest a person is misusing stimulants, however, parents are cautioned to not rush to judgement. For example, acne during the teen years is normal and as stated earlier, teens may be more irritable as they experience puberty. Watch for continued patterns of the above signs.

Source: [Meth Symptoms & Signs of Use \(americanaddictioncenters.org\)](http://americanaddictioncenters.org)

PAUSE HERE AND REVIEW

For a more complete description of opioids, review the following module



[Module One: Introduction to Opioids](#)



Take a break from the current module on youth to listen to the introductory module on opioids. The session is approximately 35 minutes and will provide an overview of opioids and the history of opioid use.

PAUSE HERE AND PLAY VIDEO

Opioids



4-min video

Stimulants



5-min video

Listen to these two short videos that provide an overview of prescription opioids and stimulants.



RISK AND RESILIENCE FACTORS

- Risk Factors



- Protective Factors



- Protective—or Resilience—Factors **decrease** the likelihood of substance use and behavioral health problems or reduce the impact of risk factors on behavioral health problems. These include a youth’s coping and problem-solving skills, good parental support, and involvement in the community to name a few.
- Risk Factors **increase** the likelihood of beginning substance use, of regular and harmful use, and of other behavioral health problems associated with use. This could include youth experiencing rejection from peers, having mental health issues like depression or anxiety, or lack of parental supervision, among others.
- Risk and protective factors are not mutually exclusive, and they do not exist solely with the youth. Parents, the neighborhood, school, place of worship, and community can assist if there are risks. For example, a youth who is rejected by peers could learn from school or community mentor better social skills. This mentor may be a coach, band leader or 4-H leader. Parents could assist and help the youth join an appropriate group or activity. These supports could be protective factors and it is important to engage youth early in activities. Once a youth is misusing it can be difficult to get them to join a group.
- Parents, schools, and the larger community play a role in helping to reduce risk factors and increase protective factors.

- Source: Substance Abuse and Mental Health Services Administration: Substance Misuse Prevention for Young Adults. Publication No. PEP19-PL-Guide-1 Rockville, MD: National Mental Health and Substance Use Policy Laboratory. Substance Abuse and Mental Health Services Administration, 2019.

WHAT CAN I DO AS A PARENT?

- Talk to your children early and often
- Use teachable moments
- Ask for their thoughts on the topic
- Model a healthy lifestyle



Refer to the parent handout
for more information

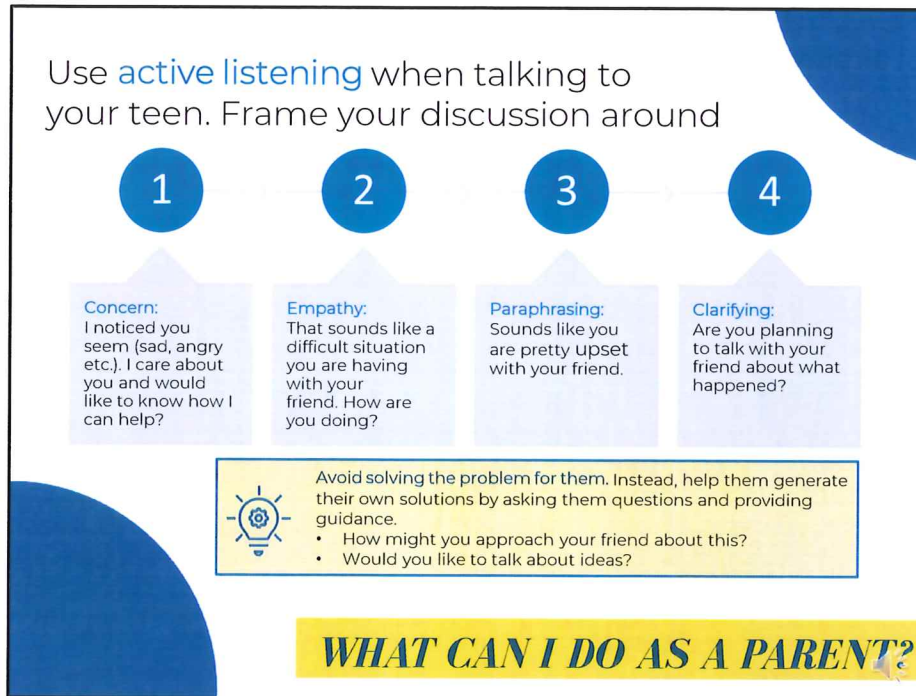
Talk to your children early and often – middle school is not too early. Use “teachable moments”—those that arise when you or your child has seen or experienced something related to substance use among youth. For example, if a story appears on the news about opioids use that as a segue to ask what they know about the increase in opioid use? Do they know if kids in their school use opioids or stimulants? What do they think about opioid and stimulant misuse?

Talk to your children more than once. Substance misuse is not a one-time lesson or discussion. Although parents should not dwell on the topic, make it a point to continue the discussion at another time and ask more in-depth questions of knowledge. What do you think happens to the body when someone takes OxyContin? Why do they think kids try drugs? Try to ask questions that really start a discussion, not ones that can simply be answered with “yes” or “no.”

Have a conversation where you can ask your teen, “What can I do as your parent that would be helpful to keep you from experimenting with opioids and stimulants?” Let them know that if they believe they are in a situation where they don’t know what to do – you will be there to pick them up. Let them know you will be calm and a discussion of what happened will be saved until a later time if the teen does not want

to talk about it at that moment – unless there is an emergency.

And model a healthy lifestyle. In other words, practice what you preach. Be responsible in the use of alcohol. Model proper disposal of unused medications.

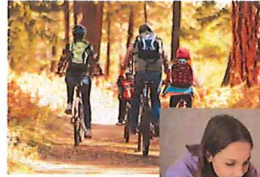


Active listening is a communication strategy in which you engage another person in a discussion while focusing on both verbal and nonverbal communication. Verbal communication refers to the actual words and sentences you use. Nonverbal communication refers to everything else: facial expressions, gestures, posture, tone, speed, and volume. When using active listening have a comfortable place for a discussion.

Frame your discussion around concern, empathy, paraphrasing, clarifying, and avoiding solving the problem

WHAT CAN I DO AS A PARENT?

- Understand the developmental issues your child is experiencing
- Realize risk-taking is normal during adolescence, however, parents need to remain aware
- Be involved in your child's life



Puberty can be a difficult time for youth. There are physical changes, new and strong emotions, shifting thought processes, explorations of different interests and abilities, and changes in friendships. Understand these changes and gently help your teen through this time. Sometimes your teen will want to share with you while other times they pull away. Be available to your teen by simply being present. Sometimes this may be when your teen is eating a snack or lunch and you are in the same room. Avoid grilling them with questions, and simply let your presence help them start a meaningful conversation.

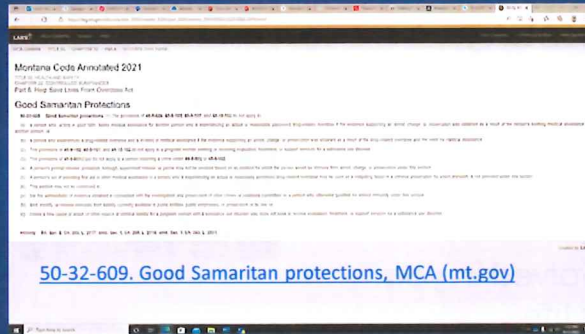
Be aware of what your teen is browsing on the internet. (gaming chat rooms, online apps like TickTock, Snapchat, WhatsApp, Kik, Facebook, Instagram, Hangouts, other teen chat rooms, etc.)

As their parent you may enter their bedroom and car if you suspect they are using drugs.

There will most likely be pushback from your teen on the last two points. Be prepared to let them know it is because you love and care about them.

DID YOU KNOW?

As of 2021, Montana has a Good Samaritan Law to obtain help for someone who has overdosed on drugs



Let your teen know that this law exists, and they can help a friend in an emergency. They can take a friend to an emergency room or call for an ambulance without fear of arrest. It is important to let medical professionals know that the person is experiencing a drug-related overdose so that appropriate care such as administering naloxone can be given in a timely manner.

WHAT DO TEENS SAY IS HELPFUL?

They (my parents) would just bring it (the subject of substance misuse and risk taking) up and tell me the bad effects it causes and them being open about everything helped the most.

16-year-old Montana Teen



Being present and really listening to your teen is helpful.

And being open to talking about difficult topics such as substance misuse can lead to a closer relationship and encouraging your teen to come to you with any issue they may be facing.

- Parent with high levels of love and warmth with firmness on expectations
- Know who your child is with and where they are at when with friends
- Set expectations with your child

Refer to parent handout for more information

WHAT CAN I DO AS A PARENT?

Parenting with high levels of love and warmth with firmness on expectations is called authoritative parenting. Characteristics of this type of parenting include responding to the emotional needs of your child; having open communication; and setting expectations for behavior and rules. And you have shared with them the consequences for not following the rules.

This is achieved over time based on the age of the child. You are trying to help your child become more independent as they grow by essentially building blocks so that they learn to be responsible. For example with a preschooler, he or she may be allowed to ride their tricycle only in front of the house. When they are preteens you may allow them to ride their bikes to the neighborhood park. Therefore, by the time they have a driver's license they have learned to manage responsibilities and accept limits on where they may go and who may be in the car with them.

When your child reaches adolescence, talk with them about changes in rules. For example, listen to them when they ask for a later curfew. You have the final say on the curfew, but take time to hear their perspective and explain your decision. Enlist them in discussions about rules.

Know who they are with when they are out with friends, and where they are at. With cellphones it is easy for them to call and check in.

IF YOU SUSPECT SUBSTANCE MISUSE.....

- Choose a time when your adolescent is not under the influence to talk to them
- Be specific as to why you have the suspicion
- Be prepared for your adolescent to become angry and upset
- Reinforce what you think about drug use
- Impose an appropriate consequence
- Get help if you believe your adolescent may have an addiction problem

Know you are not alone when you suspect substance use



If you suspect substance use, choose a good time to have the discussion – a time when both you and your adolescent are calm. Perhaps it is in the evening after dinner. Make sure your adolescent is not under the influence.

Let them know why you suspect their use by being specific. It maybe, "I found some strange pills in your bathroom that have not been prescribed to you."

Be prepared to have them react with anger and denial. Remain calm and let them know you are concerned and love them – not angry with them.

Reinforce that you have zero tolerance for drug use and that you are concerned they tried drugs. Also explain your concern that some drugs are being laced with fentanyl (including marijuana and vape pens) and that misusing drugs is illegal.

Impose a consequence, if you believe this is a one-time instance.

Get help from substance use counselor or program if you believe your teen has addiction problems.

Know you are not alone. As we have stated earlier in this session, adolescents are at an age for risk-taking and have not fully developed decision-making skills. Talk to school counselors or chemical dependency professionals for support if you find you suspect your adolescent is misusing substances.

Source: [Opioids | Youth.gov](#)

BECOME A PARENT ADVOCATE

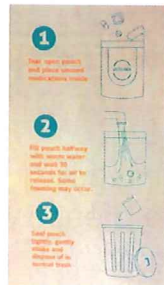
Talk to other parents



Once parents become acquainted, they can share concerns about parenting adolescents in this day and age, including the role that prescription medicine misuse plays within a community. Share what you know about opioid and stimulant misuse and ask for their knowledge of the issue. Work together to keep your adolescents safe such as common curfews, check-ins when the youth are out together, and if possible, identify some common limits on activities and consequences if limits are tested.

BECOME A PARENT ADVOCATE

Educate the community about Deterra bags and drop boxes



Focus groups held in four rural communities across Montana revealed the need to educate communities about opioids and stimulants. Specifically, focus group members discussed the need to educate community members about the availability of Deterra bags and drop boxes to dispose of unused medications.

Focus group members shared that some people are hesitant to use drop boxes, especially at law enforcement locations. Therefore, it is important to make proper disposal the norm. One suggestion was advertising and holding take back events that could be held during school events so people could drop off unused medications. Please note: You will not get in trouble if you dispose of your medications at a law enforcement location!

It was suggested that prescriptions containing opioids have a Deterra bag attached by the pharmacy with instructions on how to dispose of unused medications.

BECOME A PARENT ADVOCATE

Advocate for naloxone to be available in schools



For more information
about naloxone please visit
[Naloxone \(mt.gov\)](http://Naloxone.mt.gov)



Recent articles are discussing the need for naloxone to be available in schools. The overdose death of a 13-year-old in a Hartford, Connecticut has raised awareness that school staff need to learn how to recognize an overdose and schools should have naloxone available. Naloxone is easy to obtain from a pharmacy and easy to administer. This needs to be as standard in a school first aid kit as band aids or aspirin.


You may also want to advocate for naloxone at other locations such as places of worship, school activity buses, and out-of-school places including YMCAs, or Boys and Girl's Clubs.

Sources: [Should Schools Be Ready for Opioid Overdoses? | NIDA Archives \(drugabuse.gov\)](#);
[Health experts: Seventh grader's overdose death shows need for naloxone in schools | Connecticut Public \(ctpublic.org\)](#)
[Youth's overdose death renews pleas for Narcan in schools - ABC News \(go.com\)](#)

BECOME A PARENT ADVOCATE

Educate community members about opioids and stimulants, including but not limited to:

- Educators and coaches
- Caregivers
- Municipal and community employees
- Pharmacists and healthcare providers
- Youth



Participants in the 2021 focus groups across Montana expressed a need to educate community members about opioids and stimulants including what they are and why they are dangerous. Some of the focus group members reported not knowing much about these drugs. Work with your school parent organizations, school counselors and administrators to develop seminars for various community groups.

Work with school administrators to see if classes such as Health Enhancement could incorporate the youth components of this tool kit during the regular school schedule.

BECOME A PARENT ADVOCATE

Work with organizations, schools, and other parents to develop physical spaces for teens to interact



Adolescents need spaces where they can positively interact with friends and adults.

In rural areas there may be few places where these interactions can occur.

Work with others to develop community parks, basketball courts, skate parks, bike paths or mountain bike routes.

Encourage youth to join 4-H, sports programs, FFA, and other opportunities to have fun and learn positive leadership skills.

Get to know other parents in the community and take turns hosting adolescents with bonfires, sleepovers, and excursions to nearby sites.



***ABOVE ALL, LET YOUR ADOLESCENT KNOW
THAT YOU LOVE AND RESPECT THEM.***



Let your teen know on a daily basis that they are loved.

Acknowledge when they are doing good deeds – such as holding the door for someone at the store; helping a person in need with getting across a street or taking groceries to their car.

Encourage your teen to step outside of their comfort zone to join a sport, learn a musical instrument, or engage in an art project or other activity. Even if they are not skilled in the activity, point out what you like about their effort. “That was a great basketball game last night, and you did a nice job blocking.” “You must be learning a lot about color schemes in your art class – I can see it in your watercolor.” “I could see your enjoyment in music when I was at your recital.”

Keep the lines of communication, respect, and love to help your adolescent through the journey between childhood and adulthood.

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