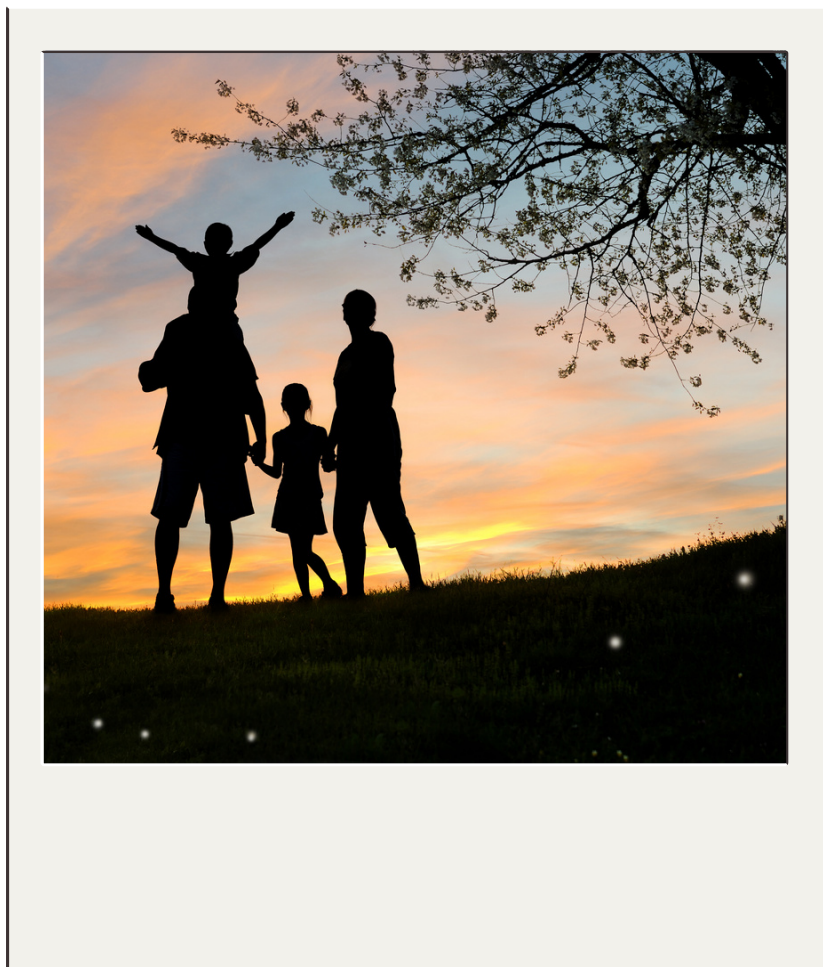


SEPTEMBER 2023

# Supporting Youth & Addressing Underlying Causes of Substance Use

*A Handbook for Adults*



**Developed by:**

Janet Dosseva, MPH, PS-C



New England (HHS Region 1)

**PTTC**

Prevention Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

***SAMHSA***  
Substance Abuse and Mental Health  
Services Administration

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**Land Acknowledgement:** The New England PTTC acknowledges that we are all on the traditional lands of native people. In Augusta, Maine, we work from the ancestral lands of the Abenaki People, part of the Wabanaki Confederacy. We have a responsibility to acknowledge our Indigenous connections and the histories of Indigenous land dispossession. We encourage you to learn more about the stewards of the land you live and work on by working with your native neighbors, and by visiting <https://native-land.ca/>



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The use of affirming language inspires hope.

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LANGUAGE MATTERS.

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**Words have power.**

PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.

Please note that very specific language is being intentionally used throughout this toolkit. Language is critically important in substance use prevention, harm reduction, treatment, and recovery. The words we use are impactful and should be used to breakdown stigma and stereotypes rather than to perpetuate them.

Unless in a direct quote, the use of the term "marijuana" will be avoided in this toolkit. In its place, "cannabis" will be used. "Marijuana" originated as a Mexican word and unfortunately has been used to discriminate and paint negative perceptions of people from that culture. Prevention professionals may urge others to not participate in that bias and to avoid the use of that term as well. "Cannabis" is the scientific name for the plant and includes all products derived from it.

This toolkit will also use the recommended practice of **person-first language** when discussing people who use substances and those who have substance use disorders. People are more than their diagnoses and stigma can act as a barrier, preventing folks from seeking treatment due to feelings of shame.



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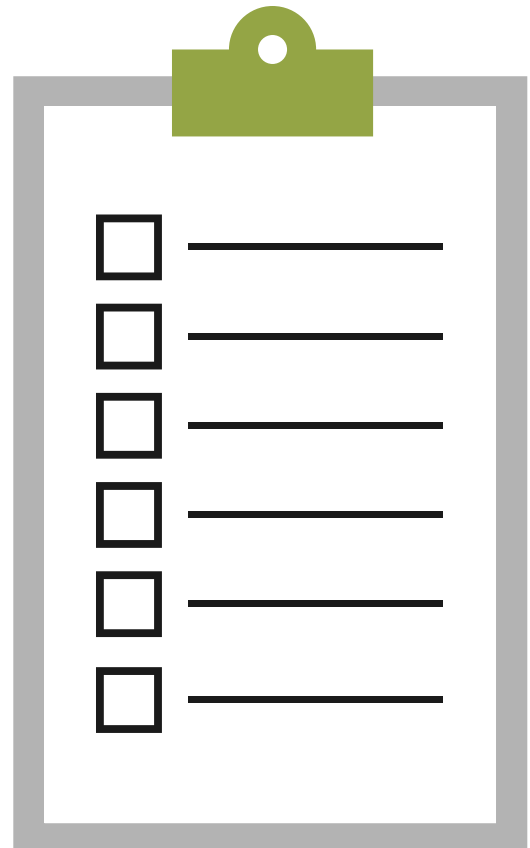
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# Supporting Youth & Addressing Underlying Causes of Substance Use

*A Handbook for Caregivers*

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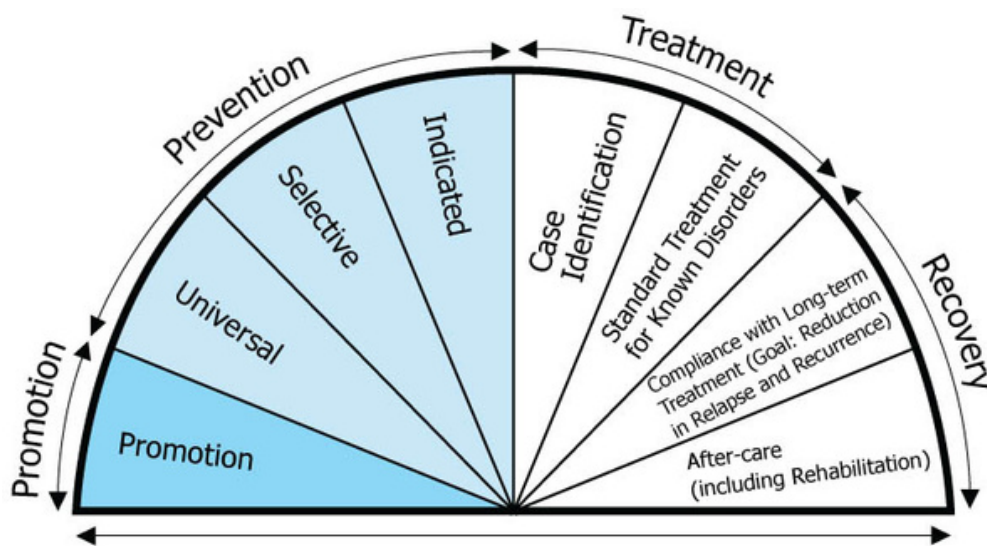


# Introduction

Data indicates that most people with substance use disorders (SUD) started using during childhood. Recent studies estimate that 74% of people with a SUD started using substances before age 17. Generally, the earlier the onset of substance use is, the greater the association is with psychosocial problems. This includes issues with relationships, employment, coping skills, and development of psychiatric disorders. Prevention, screening, and early intervention are key in adolescence. (1) There are many different reasons for initiation of use and not all will develop a substance use disorder. This handbook will explore ways to reduce the development of SUD and the role different caregivers can play in preventing youth substance use. The focus will be on underlying causes and linkage to resources.



## PREVENTION CONTINUUM



SAMHSA's continuum of care model (2)



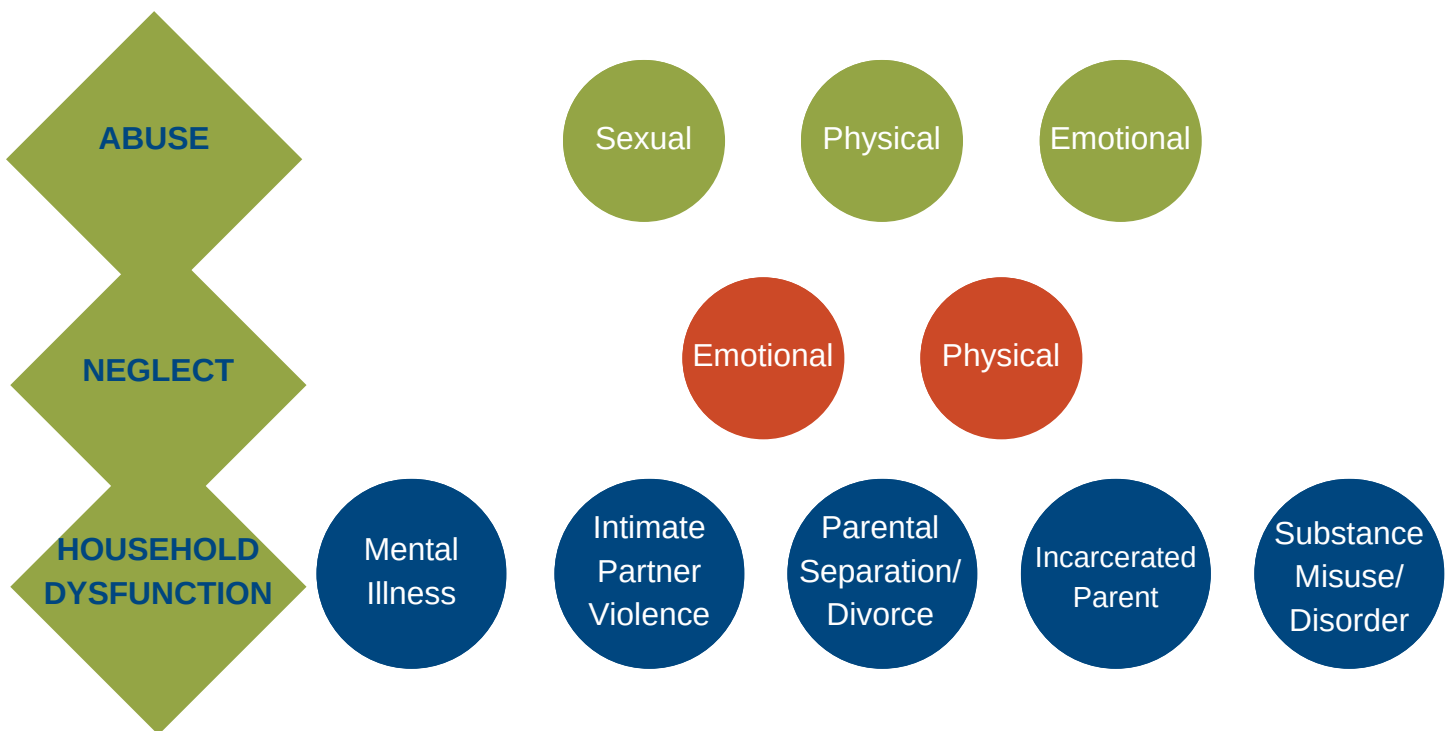
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Adverse Childhood Experiences, commonly referred to as ACEs, are known to be a major underlying cause of substance use. The ACE study was originally conducted between 1995 and 1997 by Kaiser Permanente in California. Over 17,000 adults participated, answering confidential health surveys with questions about their childhoods and current health statuses. The data was analyzed and findings included that ACEs were commonplace and many of the participants had experienced at least one ace. ACEs were split into three categories: abuse, household dysfunction, and neglect. ACE scores referred to the sum of individual ACEs a participant experienced. The most profound finding of the study was the relationship between ACE scores and negative health outcomes. The higher an ACE score an individual had, the more likely it was that they had experienced negative health outcomes. This included things like risk of heart disease, substance use disorder, and even an earlier death. (2) This relationship, however, is not predictive, and ACEs can be prevented and mitigated.

## Types of Advance Childhood Experiences (ACEs)



## Commonly Used Terms

### **Adverse Childhood Experiences (ACEs)**

Potentially traumatic events that occur in childhood. Included are abuse, household dysfunction, and neglect. ACEs are linked to chronic health problems, mental illness, and substance use problems in adolescence and adulthood. (3)

### **Resilience**

The ability of a system or person to adapt to challenges and changes. Recovering or improving a situation. (4)

### **Trauma-Informed Care**

Healthcare focused on looking having a complete picture of a patient's life, including past and present events and what they have gone through. Healing approach not solely focusing on treating symptoms. (5)

### **Protective Factors**

Characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact. (6)

### **Risk Factors**

Characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes. (6)

### **Social Determinants of Health**

The conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Five domains: economic stability, education access & quality, healthcare access & quality, neighborhood & built environment, and social & community context. (7)

### **Caregivers**

Any adult who regularly looks after or interacts with youth. Could be a parent, teacher, coach, babysitter, pastor, healthcare provider, etc.

### **Positive Youth Development**

Building protective factors and using positive influences to help young people succeed and handle problems. (8)

# ACEs: A Deeper Dive

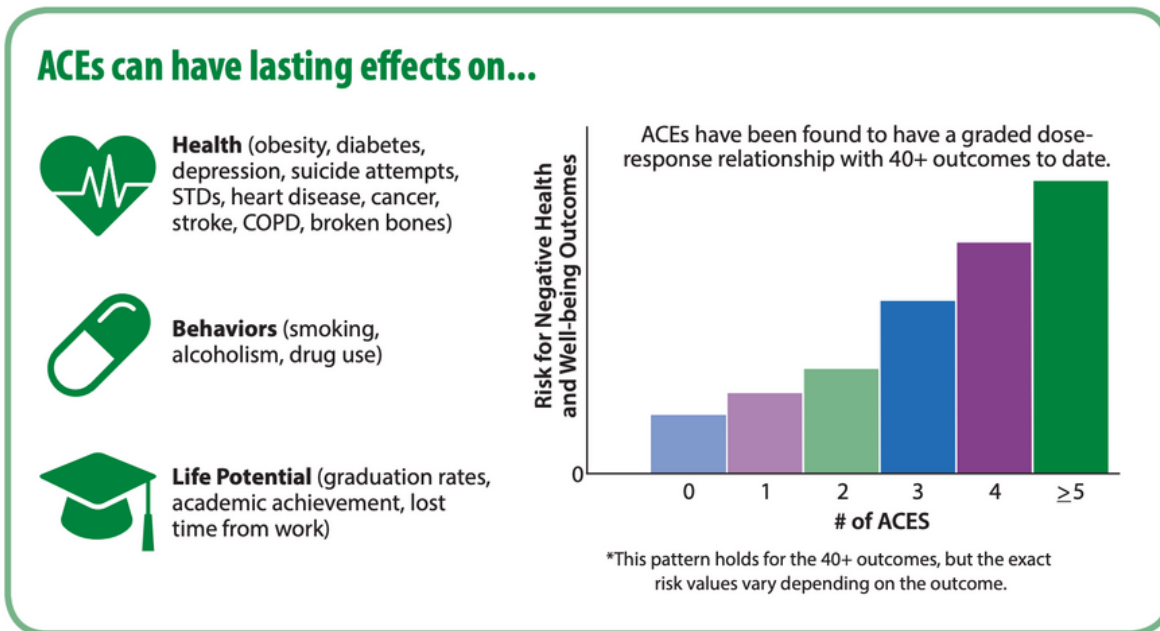


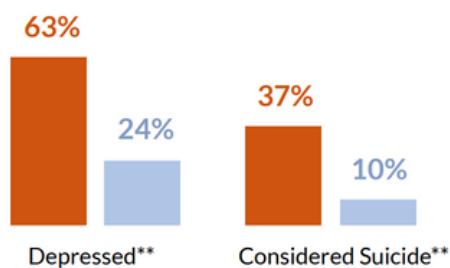
Image from Centers for Disease Control & Prevention (10)

The general findings from the ACE study reveal that there is a link between one's ACE score and negative health outcomes they experience. However, behavioral outcomes such as smoking, drinking, and drug use and life potential like graduation rates, achievement, and time lost from work are also observed to be impacted. (10)

In Maine, data collected from the Maine Integrated Youth Health Survey (MIYHS) in 2019 observed the following (11):

## More ACEs = Worse Health and More Risky Behavior

Students with 4+ ACEs are more likely to experience depression and consider suicide compared to those with less than 4 ACEs.



Compared to students with less than 4 ACEs, those with 4+ ACEs are...

- 3x more likely to smoke cigarettes\* (14% vs 4%)
- 2x more likely to be bullied at school\*\* (38% vs 18%)
- 2x more likely to drink alcohol\* (34% vs 18%)
- 2x more likely to use marijuana\* (37% vs 17%)

\* In the past 30 days \*\*In the past year



# Prevention & Mitigation of ACEs

## *What can you do?*

While there is a link between Adverse Childhood Experiences and negative health outcomes, this is not predictive or a self-fulfilling prophecy and ACEs and their harmful impacts can be prevented. (9-11)



strategy

**Strengthen economic supports to families**

**Implement strong early childhood supports**

**Promote social norms against violence**

**Teach skills (SEL, healthy relationships, positive parenting)**

**Connect youth to caring adults & activities**

**Intervene to lessen harms (treatment, therapy, victim-centered, trauma-informed services)**

**Encourage community engagement**

**Provide opportunities for positive youth development**

# Prevention & Mitigation of ACEs

## *What can you do?*

Since this handbook focuses on what adults and community can do, let's delve into those key strategies and how they can prevent youth substance use a little more. Some of the other strategies are more policy-based.

### **Connect youth to caring adults (10)**

There's no doubt that parents and family play a very important role in youth development & well-being. However, the most important part is that youth feel connected to **at least one** caring adult.

- **Who:** Coach, teacher, neighbor, etc
- **How:** help foster connectedness, build protective factors, fill unstructured free time
- **What:** mentoring & afterschool programs
- **Why:** proven to be preventative

### **Teach Skills (10)**

Building resiliency and healthy coping skills are key for any individual, but especially for those with ACEs and/or trauma.

- **What:** coping, healthy relationships, social-emotional learning, conflict resolution, communication, etc
- **How:** provides tools and builds foundation to deal with challenges
- **Why:** evidence-based to reduce risky behaviors like peer violence and substance use

### **Intervene to lessen harms (10)**

Not all ACEs or trauma can be prevented. For instance, losing a parent can happen at any age and have lifelong impacts.

- **What:** therapy, treatment, family counseling, AA/NA, social supports, access to resources, family-centered approach
- **How:** can mitigate harms and encourage healing & generational cycle-breaking
- **Why:** early evidence-based intervention linked to positive outcomes



# Community: Role & Resiliency (12)



Communities that are resilient, or in other words connected and equipped to respond to adversity and challenges that may arise, serve as good environments for the individuals and families who live, work, and play in them. This graphic shows that a healthy soil and root system lead to the growth of a healthy tree. Good policies and resources which encourage social determinants of health can lead to strong and healthy communities. Strong and healthy communities serve as protective factors for youth and can lead to a delay in the onset of substance use and play a role in general prevention of the development of substance use disorder. (12,15)



## How to Make a Difference (12-14)

Being a positive mentor and caring adult for a young person doesn't have to be super complicated. You don't need to become a teacher or counselor to have a positive and lasting impact.

Here are some tips based on relationship type:

### Parents / Guardians

- **Learn your own ACE score:** Are there things that happened in your childhood or traumatic events that you've faced in your lifetime? It's never too late to address and heal from those.
- **Get Help:** Access resources to break potentially generational cycles and be a present and supportive caregiver to children, thus preventing them from experiencing ACEs. Have a trauma-informed health care provider. Seek therapy or counseling if that's something that interests you.
- **Take Positive Parenting Classes:** Raising children is no easy feat. Learn how to have a healthy relationship with your child and communicate effectively. Be a positive role model.
- **Seek Treatment:** If you have a substance use disorder or mental illness and you're ready for help, take the next step.
- **Engage with Your Child:** Read a book to them, eat dinner together, do a hobby, ask questions, give praise.



## How to Make a Difference (12-14)

### Other Caring Adults

- **Volunteer:** There are many youth-centered organizations, like Big Brothers, Big Sisters. Find one in your community and volunteer your time.
- **Be A Mentor:** Help young people build skills and protective factors. You can join mentorship programs in your community.
- **Provide Encouragement:** When interacting with youth, provide encouragement and praise for something they are doing well. It can be a small thing, like waiting their turn to talk. Recognize good habits.
- **Create Opportunities:** Do you own a business? Consider hiring youth as interns or part time employees.
- **Donate Money:** Schools and youth-serving organizations need support for their programs and services. If you're not able to volunteer, consider providing financial help.
- **Involve & Engage Youth as Equal Partners:** Don't make assumptions. Encourage youth leadership skill development.
- **Make it fun:** Prevention doesn't have to be a boring lecture!



## Resources

Seek resources at the local, state, and national level in order to be able to be a positive role model, to help prevent and mitigate ACEs, and to build protective factors and reduce risk factors for youth. These can be extremely helpful in reducing youth substance use rates. (12)



### School/Municipal Components

School-based health centers, recreation departments, community centers, recovery liaison, mental health liaison, school sports teams, school clubs & organizations

#### **Westbrook Community Center:**

426 Bridge St, Westbrook, ME 04092

(207) 854-0676

<https://secure.rec1.com/ME/westbrook-me/catalog>

#### **Westbrook Recovery Liaison:**

Missy Esty

mesty@westbrook.me.us

Phone: (207) 303-4009

<https://www.westbrookmaine.com/340/Westbrook-Recovery-Liaison-Program-WRLP>

#### **Westbrook Mental Health Liaison:**

Jo Freedman

jfreedman@westbrook.me.us

Phone: (207) 807-7883

<https://www.westbrookmaine.com/827/Westbrook-Mental-Health-Liaison-Program>



### Faith-Based Centers

Churches, Mosques, Synagogues, Temples

#### **Maine Catholic Charities:**

<https://www.ccmaine.org/a-z-services>

#### **Substance Use services:**

<https://www.ccmaine.org/substance-use-disorder-treatment>



### Family-Centered Organizations

**Center for Grieving Children:** Portland, Sanford, & virtually

Provides free services to youth, teens, families who are grieving

(207) 775-5216

<https://www.cgcmaine.org/>

#### **The Family Restored:**

Provides resources to strengthen and support families affected by addiction

(207) 387-0015

<https://thefamilyrestored.org/>

# Resources



## Healthcare Providers

This includes doctors, therapists, counselors, treatment centers, walk-in clinics, etc

### Day One

Teen substance use treatment

(207) 767-0991

<https://day-one.org/>

### Tri-County Mental Health Services

Mental health, substance use, veteran services

(888) 304-4673

<https://www.tcmhs.org/>

### Spurwink

Behavioral health & educational services

1-888-889-3903

<https://spurwink.org/>

### Greater Portland Health

Affordable health care services for all

(207) 874-2141

<https://www.greaterportlandhealth.org/>

<https://spurwink.org/shifame/>

(Culturally-appropriate services for immigrant & refugees)

### Crisis & Counseling Centers

For urgent mental health and substance use issues

(888) 568-1112

<https://crisisandcounseling.org/>

### Sweetser

Family behavioral health services

800-434-3000

<https://www.sweetser.org/>



## Youth-Serving Organizations

Any organization which provides services and engages with young people. Examples:

Boys & Girls Club; Big Brothers, Big Sisters; YMCAs; local teen centers, Girls/Boys Scouts

### The Telling Room

Storytelling for youth. Building on writing & literacy skills.

<https://www.tellingroom.org/>

### My Place Teen Center

Safe space for youth in Biddeford & Westbrook, Maine. Life skill focus.

<https://myplaceteencenter.org/>



## Other Community Partners

Libraries, local businesses, volunteer organizations like Rotary International.

# Helplines



## NAMI Maine

**Teen Text Line: (207) 515-8398**

Peer to peer & confidential

For youth ages 13 to 23

2 pm to 10 pm daily

## Maine Crisis Line:

**1-888-568-1112 (Voice)**

24/7 free, confidential help

## 211 Maine:

**dial 211 or text your zip code to 898-211**

Find services in your area

## Maine QuitLink:

**1-800-QUIT-NOW (784-8669)**

Helpline to quit smoke, vaping, tobacco use

<https://mainequitlink.com/>

## Northern New England Poison Control (NNEPC):

**1-800-222-1222, chat online or text POISON to 85511**

24/7 help

<https://www.nnepc.org/contact>

## Maine Domestic Violence Helpline:

**1-800-437-1220**

Helpline for individuals impacted by violence or domestic abuse

<https://www.mcedv.org/get-help/>



## 988:

**Suicide and Crisis Line**

**Dial 988**

Support for people in distress

## SAMHSA:

**1-800-663-4357**

Help finding treatment options

## National Domestic Violence Hotline:

**1-800-799-7233 or text "START" to 88788**

Helpline for individuals impacted by violence or domestic abuse

<https://www.thehotline.org/>

## Trevor Project:

**1-866-488-7386 or text "START" to 678678**

24/7 crisis support for LGBTQ+ people





# Vulnerable Populations

## LGBTQ+ Youth

Research indicates that individuals who identify as lesbian, gay, bisexual, transgender, etc may experience ACEs at a disproportionately higher rate than their cis, heterosexual peers. (17) This is particularly the case for ACEs in the familial dysfunction category.

Findings from the 2019 MIYHS revealed that LGBTQ+ students faced more challenges and had fewer supports. As a result, they reported higher rates of substance use to cope with challenges. (18)



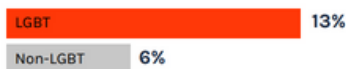
### How to support LGBTQ+ youth:

- Create a safe, affirming, and welcoming space by actively reaching out to LGBTQ+ students and using affirming language and programming (17)
- Create/support a GSTA (gay-straight-trans alliance) club at a school
- Provide LGBTQ+ youth with opportunities to connect with each other, and with supportive adults in your school or community. (17)
- Offer inclusivity training & support (18)

To cope with violence and discrimination, many LGBT students may turn to harmful **substance use**...



LGBT students are twice as likely to have **smoked cigarettes in the past 30 days**.



LGBT students are significantly more likely to have **used alcohol and marijuana in the past 30 days**.



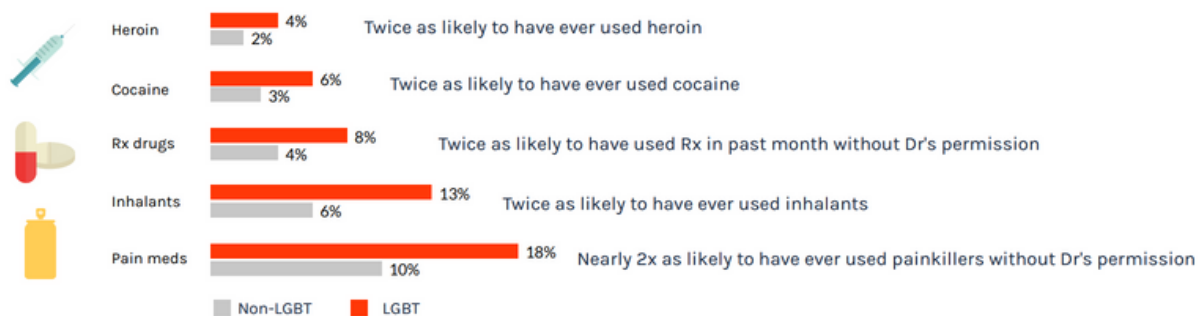
Alcohol



Marijuana



### Compared to non-LGBT peers, LGBT students are:



2019 MIYHS Data

## Other Helpful Online Resources

### **Maine Resilience Building Network (MRBN)**

MRBN is a nonprofit organization in Maine which strives to raise awareness and knowledge about ACEs and equip people with tools to prevent ACEs and build resilience.

<https://maineresilience.org/>

### **Positive Parenting Tips**

Useful tips from the CDC for parents as throughout various child age groups.  
<https://www.cdc.gov/ncbddd/childdevelopment/positiveparenting/index.html>

### **ACE Quiz**

Learn your own individual ACE score.

<https://www.npr.org/sections/health-shots/2015/03/02/387007941/take-the-ace-quiz-and-learn-what-it-does-and-doesnt-mean>

### **Maine Youth Action Network (MYAN)**

Learn about opportunities for youth and ways in which you can connect with youth in your community to empower and amplify youth voice.

<https://www.myan.org/>

### **SAMHSA's "Talk. They Hear You" Campaign**

Resources for parents 7 caregivers to talk with youth about alcohol and other drugs throughout the lifespan. Resources include: fact sheets & app

<https://www.samhsa.gov/talk-they-hear-you/parent-resources>

### **OUT Maine**

Resources to support and empower Maine LGBTQ+ youth.

<https://www.outmaine.org/about/>

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## About the Author



**Janet Dosseva, MPH, PS-C**  
**Maine, Senior Fellow**

Janet (pronounced “Jeanette”) Dosseva is a dedicated public health professional specializing in youth substance use prevention. She is the Program Director for Westbrook Partners for Prevention, a Drug-Free Community coalition in Southern Maine. Janet is a certified Prevention Specialist and a two time alumna from the University of New England, where she obtained a Bachelor of Science degree in Medical Biology as well as a Master of Public Health degree.

Janet loves implementing creative and innovative ways to engage communities in prevention and harm reduction strategies. She focuses on promoting health equity and amplifying youth voices. Janet is delighted to be working in the Westbrook community, where so many people are committed to supporting positive youth development through collaborative efforts. She is also a member of the Cumberland County District Public Health Council, Maine Public Health Association, NAMI Maine Board of Directors, Westbrook-Gorham Rotary Club, and various Maine CDC workgroups.



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