

January is:

- National Mentoring Month
- National Blood Donor



Month

- Glaucoma Awareness
 Month
- National Stalking Awareness Month
- Thyroid Awareness Month



- Global Family Day (Jan. 1)
- World Braille Day



NO NAME-CALLING WEEK

(Jan. 4) • No Name-Calling Week (Jan. 15-19)



What's SAPpening

Brought to you by the Center For Humanistic Change Student Assistance Program Liaisons

January 2018

National SAMHSA Survey Results

The Substance Abuse and Mental Health Service Administration (SAMHSA) recently released results of its **2016 National Survey on Drug Use and Health**. The SAMHSA survey collected data from Americans aged 12 years and older living in all 50 states and the District of Columbia. This article will focus on the 12-17-year-old group. Here is a summary of the results:

Tobacco Use

- In 2016, 855,000 adolescents <u>had</u> smoked cigarettes. This represented 3.4% of those surveyed (less than 1 in 20). This number has declined steadily from 13% in 2002 (about 1 in 8).
- About 129,000 respondents smoked cigarettes <u>every day</u>--about 1 in 7 (15%). These statistics were lower than the percentages in 2002 to 2015.
- Within this age group, 448,000 individuals smoked cigars and 123,000 smoked pipe tobacco.While cigar use has decreased, pipe tobacco consumption fluctuated between 2002 and 2016.

Alcohol Use

- The percentage of <u>current alcohol users</u> was 9.2% in 2016, which corresponds to 2.3 million people. This number was lower than 2002 through 2014, but similar to 2015.
- ♦ About 1 in 20 teens were <u>current binge drinkers</u> (4.9%) and about 1 out of 125 (0.8%) were <u>heavy</u> <u>drinkers</u> (5 or more days a month).

Illicit Drug Use

- Approximately 2 million respondents were <u>current illicit drug users</u>—7.9%. The most common illicit drug was marijuana. However, usage was lower in 2016 than in most years from 2009 to 2014.
- An estimated 389,000 misused psychotherapeutic drugs (pain relievers, tranquilizers, stimulants, and sedatives) at least once.
- There were 28,000 individuals who were <u>current users of cocaine</u> and 3,000 who were <u>current</u> <u>crack users</u> in 2016. These numbers represent 0.1% of adolescents who used cocaine and less than 0.1% who used crack.
- Less than 0.1% were <u>current heroin abusers</u> (3,000), about the same since 2007.
- An estimated 114,000 were <u>current users of hallucinogens</u>, or 0.5%, while 9,000 were current methamphetamine abusers.
- About 891,000 <u>misused opioids</u> in the past year, 3.6% of survey takers.

Substance Use Disorders (SUD)

- An estimated 488,000 people had an <u>alcohol use disorder</u> (drank alcohol on six or more days) in the previous year, or 2.0% of adolescents.
- Within this age group, 2.3% <u>had a marijuana use disorder</u> (clinically significant impairment) in the past year, or about 584,000 respondents.
- An estimated 0.1% had a <u>cocaine use disorder</u> (clinically significant impairment) in the previous year--approximately 29,000 adolescents.
- Less than 0.1% had a <u>heroin use disorder</u>(clinically significant impairment) in the past year, which corresponds to about 1,000 individuals.

Substance Use Treatment

• About 1.1 million needed treatment in 2016 for a substance use problem in the past year, representing 4.4% of 12 to 17 year olds.

Major Depressive Disorder (MDE)

In 2016, 12.8% of this age group (3.1 million) had an MDE during the past year, and 9% (2.2 million) had a past year MDE with severe impairment. Those who had an MDE with severe impairment represented more than two thirds (70.5%) of teens who had a past year MDE. This number was higher than the percentages in 2004 to 2014, but similar to the estimate in 2015.

Co-Occurring Major Depressive Episode and Substance Use Among Adolescents

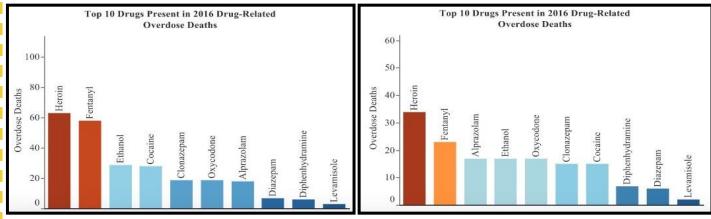
• The number of adolescents who used illicit drugs in the previous year was higher among those with a past year MDE than it was for those without a past year MDE (31.7% vs. 13.4%).

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Many government agencies, private organizations, individual researchers, and the public at large use this statistical information to estimate the need for treatment facilities or support prevention programs and monitor drug control strategies, etc. For the full 2016 National Survey on Drug Use and Health report and information on Pennsylvania , visit: <u>https://www.samhsa.gov/</u>

Free Group Therapy for Families Affected by Opioid Crisis

The Drug Enforcement Administration reported that Pennsylvania had one of the highest opioid and heroin death rates in 2016. Locally, 58 people in Northampton County died from opioids or heroin, while Lehigh County had 38 accidental opiate overdoses. An additional 73 deaths involved multiple drugs. To support the families caught in the epidemic, Lehigh County is teaming up with the Mid Atlantic Rehabilitation Services (MARS) to offer two therapy groups. One is for family members of adults suffering from opioid use disorder and the other is for families of adolescents battling the disease. There also will be separate groups for families who have recently lost a loved one to an opioid or other drug overdose, as well as those mourning people who have died from drugs more than three months ago. To register for these groups, call 610-419-3101, ext. 206 or 210 or email Angela Stevens-Carr at astevens-carr@marscare.com.



(Source: Rhodin, Tony. "Human Toll of Opioid Devastation in PA in Ex-addict's Words." lehighvalleylive.com. 10 December 2017.)

Mental Illness in Children: Know the Signs

Mental illness in children can be hard to identify. Many adults don't know the signs and symptoms. Youth can develop the same mental health conditions as adults, but sometimes present them differently. As a result, children who could benefit from treatment don't get the needed help. Mental health disorders in youngsters include anxiety, ADHD, autism, schizophrenia, bipolar, anorexia, bulimia, and more. While depression in adults may manifest itself as sadness, children may exhibit irritability. Warning signs that may indicate a mental illness include:

- mood changes—sadness or withdrawal
- intense feelings—overwhelming fear for no reason
- behavior changes—dangerous or out-of-control behavior
- unexplained weight loss—vomiting or loss of appetite
- physical harm—cutting, burning, suicidal thoughts

If parents are worried about their child's mental health, they should consult with the family doctor or pediatrician. Describe the behavioral concerns. Talk to the child's teacher, close friends, or other caregivers to see if they've noticed any changes in behavior. Above all, parents should support their youngsters, ask for advice, consider counseling, and find ways to relax and have fun with their children. (Source: https://www.mayoclinic.org/healthy-lifestyle/childrens-health/in-depth/mental-illness-in-children/art-

National Drug & Alcohol Facts Week January 22–28

Register your event and receive support from the National Institute on Drug Abuse (NIDA) to plan successful activities for your students. NIDA staff can help you order <u>free science-based</u> <u>materials</u> to complement your event, brainstorm activity ideas, and connect you with other organizations. Visit teens.drugabuse.gov/teachers to learn more! For more information, contact drugfacts@nida.nih.gov.

Thank you to our newsletter sponsor—the Lehigh County Department of Human Services, Drug and Alcohol Division!

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