Prevention Newslink

SEPTEMBER 2020

SD Prevention

Resource Centers WPRC

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SEPRC

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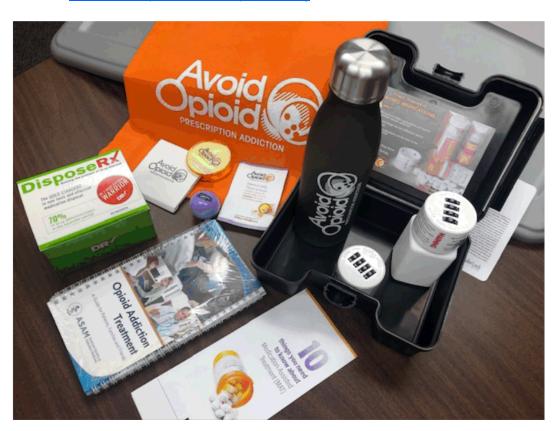
National Prescription Drug Take Back Day is October 24, 2020

This event is a safe, convenient, and responsible way to dispose of unused or expired prescription drugs at locations in communities throughout the country. Check DEA's official Take Back Day website for more information and to find year-round collection sites near you.

Source: getsmartaboutdrugs.org

Looking for resources for your local community? Contact your Prevention Resource Center to request materials pictured below.

SEPRC- m.majeres@voa-dakotas.org; NEPRC- dodih@humanserviceagency.org; WPRC—vackerman@youthand familyservice.org



SDAAPP 2020 Fall Conference October 7, 8, 9, 2020

Virtually and in person at the Best Western Ramkota Conference. Center space is limited to 50 people at the conference site

Keynote Speakers: Chaplain Bob Price and Dr. David Mee-Lee

Conference details and registration form can be found at: https://sites.google.com/site/sdaapp/

Attention All SADD and Other Student Leadership Groups

We have an exciting virtual opportunity for your student groups. Last spring, the SADD (Students Against Destructive Decisions) Conference had to be canceled. We have taken the topic areas from last spring's conference and developed different opportunities for students in grades 7-12 to participate via Zoom.

Here is the schedule:

Sept 16— from 1-3pm (CT)/12-2pm (MT) - Cara Filler will present "Drive to Save Lives" https://carafiller.com/

Sept 24—2-3pm (CT)/1-2pm (MT)—Relationships: The Good, The Bad, The Ugly, by Angie Meseberg, The Beacon Center

Oct 1—1-2pm (CT)/ 12-1pm (MT)—Creating Community Change Around Vaping, by Abe Baker-Butler, Students Against Nicotine

Oct 8—11-12 pm (CT)/ 10-11am(MT)—presentation on Mental Health/Suicide Prevention—TBD

Oct 15—10-11am (CT)/9-10am (MT)—The Road Back, by Lucas Nogelmeier from Avoid Opioid SD

Oct 22—9-10am (CT)/8-9am (MT)—School planning facilitated by PRC's

To Register: Contact Stephanie at (605) 884-3516 or stephaniek@humanserviceagency.org.

Even if you cannot attend the live presentations, you can still email so that the recordings can be sent to you for your students to watch at a later time.

Upcoming Training & Events

Sept 23— Opioid Public Health Crisis, 1-hour virtual training— stephaniek@humanserviceagency.org

Sept 24-25—virtual—NAMI Annual Conference https://www.eventbrite.com/e/2020-vision-why-we-nami-annual-conference-registration-117470598723?aff=Website

Sept 29—Webinar for South Dakota Educators: Model School Policy on Suicide Prevention https://sdsuicideprevention.org/event/webinar-for-south-dakota-educators-model-school-policy-on-suicide-prevention/

Sept 30—virtual—Interactive Journal Training— <u>stephaniek@humanserviceagency.org</u>

Sept 30-Oct 1—Community Response to Child Abuse Conference—Virtual https://www.eventbrite.com/e/20th-annual-community-response-to-child-abuse-conference-registration-118413178003



Better Choices, Better Health® SD offers free chronic disease self-management education workshops for adults in SD. The workshops are designed to help adults living with ongoing physical and/or mental health conditions and caregivers understand how health-ier choices can improve quality of life, boost self-confidence, and inspire positive lifestyle changes. To learn more and register go to www.betterchoicesbetterhealthsd.org

Mental Illness Awareness Week

Each year during the first week of October, the National Alliance on Mental Illness (NAMI) raises awareness on mental illness by educating the public, fighting stigma and providing support. This year runs from October 4-10, 2020 and the theme is "What people with mental illness want you to know." 1 in 5 U.S. adults experience Mental illness each year. 50% of all lifetime mental illness begins by age 14, and 75% by age 24. If you or someone you know needs help call the NAMI helpline at 800-950-NAMI or text NAMI to 741741. You can also find out more on local NAMI chapters at namisouthdakota.org.

Source: name.org

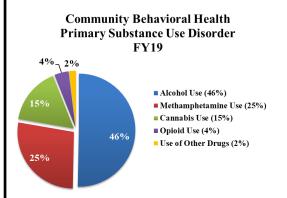


Facts about Marijuana

What is Marijuana?

Marijuana refers to the dried leaves, flowers, stems, and seeds from the Cannabis sativa or Cannabis indica plant. The plant contains the mind altering chemical Tetrahydrocannabinol, more commonly referred to as THC. Other common names include cannabis, reefer, weed, pot, grass, dope, hash, or chronic to name a few. Traditional marijuana is typically smoked or baked into edibles.

Marijuana extracts are another source of consuming THC. These are THC-rich resins that are extracted from the marijuana plant and are referred to as dabbing. They are frequently called hash oil, wax, or shatter.(9)



Effects

Today's marijuana is much more potent than in the past. Traditional marijuana averages 15.8% THC with pot edibles, candies, cookies, oils and waxes being up to 99% THC. Compare that to an average of 3.7% in the 1990's.(11)

Higher THC levels have been linked to an increase in marijuana involved emergency room visits.(11)

Physical and Mental Effects

Marijuana use can create breathing problems, increased heart rate, and problems with child development. Long-term marijuana use has been linked to mental health problems such as hallucinations and paranoia.(9)

Marijuana use impacts attention, memory, and learning skills. It also effects timing and coordination.(9)

Driving High

In Colorado and Washington State, marijuana impaired driving fatalities have more than doubled₍₁₎. One in five drivers in Washington State are under the influence of marijuana, up from one in 10 prior to legalization₍₂₎.

A study by the Colorado Division of Criminal Justice found of the 4,000 drivers tested for marijuana in 2016, 73 percent were found to have the drug in their system₍₃₎.

Marijuana is Addictive

According to a 2016 World Health Organization report and a 2017 National Academy of Sciences study, marijuana is addictive and harmful.

Research suggests up to 30% of those who use marijuana may develop some degree of Cannabis Use Disorder. People who begin using marijuana before the age of 19 are 4 times more likely than adults to develop a Cannabis Use Disorder₍₄₎.

In FY 2019, 15% of individuals served by South Dakota's publicly funded Substance Use Disorder treatment services had a primary diagnosis of Cannabis Use Disorder.

Medical Marijuana

The US Food and Drug Administration has not recognized or approved the marijuana plant as medicine. FDA clinical trials must be determined to show all benefits and risks associated with medicine. To date, there has not been enough research to show the benefits of marijuana plants outweigh the risks to its patients₍₅₎.

Scientific study has lead to a few FDA approved medications containing cannabinoid chemicals in pill form. Marinol and Syndros can be used to treat nausea and vomiting in cancer chemotherapy patients or weight loss in HIV patients. The FDA also approved a CBD-based liquid medication, Epidiolex, for the treatment of two forms of severe childhood epilepsy.(10)

The Cost of Legalization

Many groups calling for marijuana legalization highlight the potential for increased tax revenue. The tax revenue is often estimated at a large amount that is hopeful for use in education or street maintenance. The fact is, Colorado and Washington State are seeing revenue predictions fall short of what was promised and only amounting to a low percentage of the state's overall $budget_{(7)}$.

For every dollar received in tax revenue from legal drugs, it costs society more than \$10 in lost social costs. These costs can include loss of workplace productivity, workplace injuries, homelessness, drugged driving fatalities and injuries, and administrative overhead.

In addition to the costs associated with society, legalized states are also seeing increased issues presenting itself for insurance including, but not limited to, auto, home, health, life, and general liability insurance in addition to workers compensation and retail business insurance.

Legal Status

Federal law states that marijuana in any form is not legal for medical or recreational use.

Under the Controlled Substances Act, marijuana is classified as a Schedule 1 drug meaning:

1. It is not accepted for medical use in the U.S.

For Additional Resources on Marijuana Contact:

SE Prevention Resource Center

Volunteers of America-Dakotas, Sioux Falls

Michelle Majeres-Prevention Coordinator m.majeres@voa-dakotas.org (605) 444-6342

Erin Isackson-Prevention Specialist e.isackson@voa-dakotas.org

Western Prevention Resource Center

Youth and Family Services Inc., Rapid City

Vonnie Ackerman-Prevention Coordinator vackerman@youthandfamilyservices.org (605) 342-1593

NE Prevention Resource Center

Human Service Agency, Watertown

Dodi Haug-Prevention Coordinator dodih@humanserviceagency.org (605) 884-3516

Stephanie Kinnander-Prevention Specialist stephaniek@humanserviceagency.org

References

- 1. See Highway Loss Data Institute. (2017, August 3). Studies link legalized use of recreational marijuana with increase in crashes. Status Report, 52(5). Retrieved from http://www.iihs.org/iihs/sr/statusreport/article/52/5/3 on 2018, Feb. 3. And Washington Traffic Safety Commission. (2016). Driver toxicology testing and the involvement of marijuana in fatal crashes, 2010–2014. Olympia, WA: Author. Retrieved from http://wtsc.wa.gov/wp-content/uploads/dlm_uploads/2015/10/Driver-Toxicology Testing-and-the-Involvement-of-Marijuana-in-Fatal-Crashes_REVFeb2016.pdf on 2018, Feb. 3.19
- See Smart Approaches to Marijuana. (2018 March).
- 3. Lessons Learned from Marijuana Legalization in Four U.S. States and D.C. Retrieved from https://learnaboutsam.org/wp-content/uploads/2018/04/SAM-Lessons-Learned-From-Marijuana-Legalization-Digital.pdf on 2018, July 2.20 See https://www.denverpost.com/2018/08/09/driving-while-high-colorado
- 4. Drug Facts: Marijuana. National Insitute on Drug Abuse. Retrieved from www.drugabuse.gov/publications/drugfacts/marijuana.
- $5. \ Marijuana\ as\ Medicine.\ National\ Instute\ on\ Drug\ Abuse.\ Retrieved\ from\ www.drugabuse.gov/publications/drugfacts/marijuana-medicine.$
- 6. Cannabis and Insurance. National Association of Insurance Commissioners. Retrieved from https://content.naic.org/cipr_topics/topic_cannabis_and_insurance.htm.
- 7. Revenues v. Reality. Smart Approaches to Marijuana. Retrieved From https://learnaboutsam.org/wp-content/uploads/2019/01/15Jan2019-v3-Revenues-vs-Reality-1.pdf
- 8. The Cost of Marijuana Legalization to Society. Smart Approaches to Marijuana. Retrieved from https://learnaboutsam.org/wp-content/uploads/2018/06/14Nov2017-v5-costs-to-society.pdf
- 9. Marijuana, National Institute on Drug Abuse. Retrieved from https://www.drugabuse.gov/publications/drugfacts/marijuana
- 10. FDA and Cannabis: Research and Drug Approval Process. Food and Drug Administration. Retrieved from https://www.fda.gov/news-events/public-health-focus/fda-and-cannabis-research-and-drug-approval-process
- 11. Preventing Marijuana Use Among Youth and Young Adults. U.S. Department of Justice Drug Enforcement Administration.

Suicide Prevention

South Dakota Suicide Prevention



Resources

Statewide Website

sdsuicideprevention.org

The Helpline Center

HelplineCenter.org

Statewide Crisis Line

1-800-273-8255

Answered by the

Helpline Center



Help a loved one, friend or yourself.

Confidential • 24/7

1-800-273-8255

If you or someone you know needs help with...

- Depression Grief
- Relationship conflicts
- Drugs Alcohol
- · Suicidal thoughts

Suicide Prevention in Schools

Addressing the mental health needs of students in school communities is more important than ever before. The COVID-19 pandemic has exacerbated the stress and trauma faced by many students while bringing new challenges, such as isolation and increased risk for adversity at home. Schools play a unique and critical role in addressing the pandemic's potential mental health effects and preventing suicide. While COVID-19 has altered the educational landscape, it is imperative that schools are prepared for students by considering the impact of the pandemic on their well-being—regardless of the learning approach used. That includes using school-based suicide prevention resources, tailoring strategies to the current context, and ensuring school staff have the support they need to do their jobs effectively.

Preventing suicide in any school setting requires a comprehensive approach. This framework can be adapted to the needs of an individual school and its COVID-19 learning approach, whether in-person, remote, or hybrid. Key principles that all schools should consider are a commitment to promoting emotional well-being and connectedness among students, as well as identifying those who may be at risk for suicide and connecting them to help. In thinking about how to tailor these principles for each school community and its students, we must acknowledge that the pandemic has also brought persistent racism and racial and ethnic disparities into focus. Individual and community needs, and their inequitable distribution, are essential factors to keep in mind when designing and implementing suicide prevention strategies, services, and supports in schools.



As schools reopen, a <u>multi-pronged</u> <u>approach</u> to preventing suicide should also include educating staff about trauma and mental health, forming school-community partnerships, and encouraging staff self-care.

SPRC

Text4Hope is available to all high school students in the stated of SD.

We want to make sure that students always have someone to reach out to even outside of school hours. Text4HOPE program is available 24/7/365. Simply text icare to 898211.

For Additional Information Contact: Sheri Nelson ~ 605-274-1406 Sheri@helplinecenter.org

South Dakota Tobacco Control Program Regional Contacts



Teens Against Tobacco Use VIRTUAL TRAININGS

Teens Against Tobacco Use (TATU) trainings are going virtual this school year! No matter if your school district or group is meeting in-person or online, TATU will be able to accommodate your needs.

TATU is a tobacco prevention program designed to help teens teach younger children about the hazards of tobacco use and the benefits of making healthy choices. TATU trained teens can reach and teach younger children in ways adults cannot. Grade school kids enthusiastically understand and accept information which teens present and learn to avoid tobacco.

Below are the available times the TATU training will be available. Space is limited and it will be a first come, first serve basis.

CENTRAL TIME		MOUNTAIN TIME	
10/13/2020	10am-2pm	10/14/2020	8:30am-12pm
10/19/2020	12pm-3:30pm	10/21/2020	10am-2pm
10/26/2020	12pm-3:30pm	10/28/2020	12pm-3:30pm
11/02/2020	8:30am-12pm	11/05/2020	8:30am-12pm
11/09/2020	10am-2pm	11/18/2020	10am-2pm

Please contact Ashley Heyne for a registration form.

Email: aheyne@bhssc.org phone: (605) 276-5104

Southeast Region

Hilary Larsen

605-444-6341

h.larsen@voa-dakotas.org

Northeast Region

Ashley Heyne

605-276-5104

aheyne@bhssc.org

Central Region

Tynell Millner

605-494-3605

tmillner@bhssc.org

Western Region

Joan Lindstrom

605-394-5120

jlindstrom@bhssc.org



Youth Tobacco Survey Data

The Youth Tobacco Survey (YTS) new data is now available! To access the most recent data, please follow the link below and click on 2019:



SUICIDE PREVENTION MONTH

September is Suicide Prevention Month

September is Suicide Prevention Month in South Dakota. All month, mental health advocates, prevention organizations, survivors, allies, and community members unite to promote suicide prevention awareness. Everyone has a role in preventing suicide.

This month, challenge yourself to get involved. Attend a training or awareness event, host an activity at your school or place of work! For more ideas on ways to get involved, visit the South Dakota Suicide Prevention website.



EDUCATION AND TRAINING

Tribal Communities

From 2010-2019, the Native American suicide rate was 2.4 times higher than the white suicide rate in South Dakota. The Suicide Prevention Resource Center released a new video in their series, "Transforming Tribal Communities: Indigenous Perspectives on Suicide Prevention," which focuses on weaving culture into suicide prevention strategies in tribal communities. To view the entire series, click here.

COMMUNICATIONS

Crisis Resources

The <u>National Suicide Prevention Lifeline</u> is a national network of local crisis centers that provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. They're committed to improving crisis services and advancing suicide prevention by empowering individuals, advancing professional best practices, and building awareness. Anyone can call the Lifeline, whether themselves or a loved one is thinking of suicide or experiencing emotional distress. To reach the Lifeline, dial 1-800-273-8255 (TALK).

The <u>Crisis Text Line</u> is a free, 24/7 support for those in crisis. To reach the Crisis Text Line, text HELLO to 741741 from anywhere in the United States, anytime. Crisis Text Line is here for any crisis. A live, trained Crisis Counselor receives the text and responds, all from our secure online platform. The volunteer Crisis Counselor will help you move from a hot moment to a cool moment.

EVENTS

For more information on events, visit the South Dakota Suicide Prevention <u>Calendar</u>.

September

Walk

2 – Glacial Lakes SAFE Virtual
Remembrance Ceremony
3 – Survivor Support Group
10- Winner Suicide Awareness

10 – World Suicide Prevention

10 – Dese'Rae L. Stage presentedby the Helpline Center15 – Aliive Roberts County

Coalition Meeting 16 – Glacial Lake SAFE Coalition Meeting

26-Black Hills Area Survivors of Suicide Support Group 29-Webinar for South Dakota Educators: Model School Policy on Suicide Prevention

October

1 - Survivor Support Group
20 - Alive Roberts County
Coalition Meeting
21 - Glacial Lakes SAFE Coalition
Meeting
24-Black Hills Area Survivors of

November

Suicide Support Group

5 – Survivor Support Group 17 – Aliive Roberts County Coalition Meeting 18 – Glacial Lake SAFE Coalition Meeting 28-Black Hills Area Survivors of Suicide Support Group

To request a training for your community, <u>click here</u>.













