[Music]

Male VO:

The Substance Abuse and Mental Health Services Administration presents the *Road to Recovery*. This programming aims to raise awareness about substance use and mental health problems, highlight the effectiveness of treatment, and that people can and do recover. Today's program is Partnering With Youth and Young Adults in Behavioral Health To Live Happy, Healthy, and Productive Lives.

Ivette A. Torres:

Hello. I'm Ivette Torres and welcome to another edition of the *Road to Recovery*. Today, we'll be talking about youth and young adults in recovery. Joining us in our panel today are Tammy Barr, Assistant Director, Connections Counseling, board member of Recovery Foundation, Madison, Wisconsin; Jonathan Katz, Director, Rita J. Kaplan Jewish Community Services, Jewish Board of Family and Children Services, New York, New York; Justin Riley, at-large board member, Faces and Voices of Recovery, Seattle, Washington; Bridget Ruiz, technical expert lead, Division of Systems Improvement, JBS International, Bethesda, Maryland.

Bridget, 21.5 percent of 18- to 25-year-olds have an issue with illicit drugs. Talk to me a little bit about that and what kind of drugs are they using.

Bridget Ruiz:

It is quite different than it was even 2 or 3 years ago. We see a huge increase in pharmaceutical drug use, not using it as prescribed. We also see an increase in alcohol use, and binge drinking is a serious problem, as well as some of the more legal types of drugs labeled as incense or those types of things in different smoke shops.

Ivette A. Torres:

And Jonathan, does that hold true for what you are seeing in New York City?

Jonathan Katz:

Absolutely. We are seeing the use or the misuse of drugs such as Ritalin, Adderall, Inderal being used for specific purposes to help kids stay up late and study, to calm kids down. We're also seeing a lot of binge drinking, and that is quite disturbing.

Ivette A. Torres:

And Tammy, let's talk about underage drinking a little bit more that Jonathan brought up. Talk to us about what is underage drinking.

Tammy Barr:

Well, you know, the drinking age is 21. So there's a lot of kids who start drinking at 13, 14, or 15 and don't really have experience or understand how to drink responsibly, and so they end up drinking in very high-risk situations. They usually have a limited amount of time that they can use, so they are drinking in large quantities and binge drinking and then becoming really intoxicated and having kind of all of the risk factors that go along with that.

Ivette A. Torres:

Well, to be exact, there are about 10 million 12- to 20-year-olds that are engaged in underage drinking, which is a staggering—from 18 to 20, you've got 48.9 percent, Justin, of those cohorts are using alcohol. Talk to us about what you see in your practice and in the work that you've done in terms of how do kids get a hold of these substances and what are we looking at.

Justin Riley:

That's a great question. I think oftentimes kids and young adults, if you will, find the alcohol in their own home, in their parents' home. I've had several great conversations with families who weren't even aware that that was happening. That they kept alcohol in their home, moderate amounts of alcohol for regular social events, and the children simply had access to it, and that was my experience personally growing up. My parents had alcohol and that's where I got it from and then met people who were old enough to purchase it for me and it became just kind of a cycle and that is how we went about getting alcohol. And I see that true today.

Ivette A. Torres:

How old were you at the time when it started?

Justin Riley:

When I first started drinking, I was 14 years old and I found the alcohol—my friend and I found the alcohol in our parent's cupboard.

Ivette A. Torres:

Your friend had never experimented? Or he had already?

Justin Riley:

I think he had drank before, but that night was really about us figuring out what this alcohol thing was about. And we had watched so many other people do it, whether that was through media or just through our family.

Ivette A. Torres:

One of the things the audience needs to understand is that just that one experiment can become lethal if the level—right, Jonathan? If the level is quite high? And then one is not tolerating it.

Sure, we actually use a film in some of our prevention work called *Death in the ER* about someone who is near death because of alcohol poisoning.

Ivette A. Torres:

We also have another issue, which is depression and some mental health problems, correct Bridget?

Bridget Ruiz:

Absolutely. Oftentimes, especially in substance abuse treatment samples, we find that percentages range from 30 to 90 percent have some type of co-occurring issue from depression to trauma symptoms, those types of issues. So it is a really significant issue that we all have to really assess for and then be able to provide the treatment that young people need.

Ivette A. Torres:

And Jonathan, how does a parent understand when there is a problem? What should parents be on the lookout for?

Jonathan Katz:

Parents should be on the lookout for changes in behavior, and I think that's kind of the key sign post that we tell people to look for. A change in who your child is hanging out

with, how they're doing in school, their involvement with activities. But I do want to emphasize also that there are many young people who are very high achievers who nonetheless get caught up in drugs as a way of dealing with the stress that they're under.

Ivette A. Torres:

Tammy?

Tammy Barr:

And I think a lot of kids are looking for a way to feel better, and so when they drink and the first experience that they have feels good and they don't feel as sad or they don't feel as depressed or not as worried about what happened yesterday, that becomes part of the cycle that they kind of continue with. It kind of has a life of its own. So, it takes over after that.

Ivette A. Torres:

Tammy, you make up a very good point. They self-medicate to lower the threshold of pain that they are experiencing. So parents really need to know, as well as the kids themselves, when they go through one of these episodes, is it wise for them just to stop and say, "Why am I doing this?" And for the parents, when they're confronted, as Justin was noting, "I need immediately to go to counseling and start getting some help for this child."

Tammy Barr:

I think early intervention is really, really important, so whether that's parents being able to pay attention and to ask questions if they notice something. If it's the school system or somebody else that the child is coming into contact with because the sooner that we can intervene with somebody the less likely it's going to be a problem later on. So being able to identify that and seek support is really important. And kids struggle. They don't know how to deal with being adolescents and they need support from parents and from the community to help them through that period.

Ivette A. Torres:

Well, when we come back we'll take a look further into the issues of youth and young adults. We'll be right back.

[Music Playing]

Male VO:

For more information on *National Recovery Month* and to find out how to get involved or to locate an event near you, visit the *Recovery Month* Web site at recoverymonth.gov.

Male VO:

Brenda Bryan, virtual world counselor at Preferred Family Healthcare in Kirksville, Missouri, describes the virtual world counseling program that their organization offers.

Brenda Bryan:

I work for a virtual program with Preferred Family Healthcare and it provides services to young people. It is technology based. It is in a 3-D environment and it gives them the flexibility of having convenience. It addresses transportation difficulties from mainstream outpatient treatment and it gives them the opportunity to access resources for their recovery process anytime that they choose.

Male VO:

Lila Bertels, person in recovery and a consumer at Preferred Family Healthcare, discusses her experience with the virtual world counseling program.

Lila Bertels:

It's really cool because I get to wake up in the morning. I get to get my cup of coffee in my own house and I get to go sit at my computer and I get to talk about my rehabilitation with a real person over lines. It is really easy because it works on my schedule. I think that young people in my age group really enjoy the virtual world program. It's kind of like a game, actually. I think it's just taking the next step into technology and treatment and integrating that into an effective way for young kids to approach treatment.

Male VO:

Brenda Bryan continues.

Brenda Bryan:

This is a technology-based generation and, therefore, they're encountering technology on a daily basis, whether it be social media, courses online, schoolwork, projects. So this addresses their treatment environment in a context that they are very familiar with.

[Music]

Ivette A. Torres:

Jonathan, why is age of first use of any substance an issue in preventing both the illicit drug and alcohol abuse in later life?

Jonathan Katz:

That's very important because of the developmental growth of young people and children. The younger a child is when they start to get involved in some type of compulsive behavior, the more it takes over and interferes with their ability to develop skills for dealing with issues: how to deal with frustration, how to solve problems, how to be resilient. And so they begin to substitute these behaviors, the drinking and the drugging, the cutting, eating issues, and that helps them feel good in the short run, so they neglect or they are not able to develop the more constructive skills.

Ivette A. Torres:

And Justin, in your case did it not escalate into other more dangerous activity and drug taking.

Justin Riley:

It most certainly escalated, and it escalated very quickly. So, with my first drink at 14 years old and by the time I was 16 and 17, I started using cocaine, speed, really taking any prescription pill or anything that could alter my state of being. I think you hit on a really key point, Jonathan, when you mentioned how to cope with different things. I started to notice that not only I drank and used drugs when I was happy or sad or celebrating or lonely or afraid. It started becoming my go to for any situation. It became my solution for life.

Ivette A. Torres:

How does one then begin to interject perceived risk in that behavior that you just mentioned? Is that a factor in prevention for the parents to get through to that child that there is a risk in this type of behavior?

Justin Riley:

I think it's important to communicate to children and to young adults about the risks associated with that behavior. But as a young person who was participating in those behaviors, I didn't take that into consideration. I didn't have any immediate negative consequences of what I was doing because I was still a young achiever and I wasn't seeing those negative results yet, but it caught up with me very quickly.

Ivette A. Torres:

Were your parents sending you messages about substances? Did they sit down with you? Did they speak to you about it?

Justin Riley:

I remember hearing messages from DARE and GREAT programs, not only at home but also in the classroom. My mother was a teacher and my mom and dad both advocated to not use drugs and alcohol. My sister, just as a quick example, had no problem with drugs and alcohol and to this day still doesn't. Which is a much larger discussion of why me and not her, but I did receive anti-drug messages at home.

Ivette A. Torres:

Tammy, how do we then begin to develop approaches so that we can get to the youth and young adults at an earlier phase of their experimentation and prevent some of these problems?

Tammy Barr:

Yeah, I think one of the most important things is to be able to find issues that are relevant for that person. So teenagers and young adults are risk takers by nature. They're not going to listen to authority. They're individuating and they are trying to figure out how to make decisions on their own, and so we find that when we're able to find something that's important to them, that motivates them, that that is a way to start talking about the risks that they might be experiencing, the changes that they might need to make in order to be successful to reach the goals that they might have.

Ivette A. Torres:

So, Jonathan, let's talk now about—children, you know, as we mentioned, also face depression and severe mental illness. What kinds of things can we begin to do to prevent the child or a young adult going into a downward spiral?

Jonathan Katz:

That's a very crucial goal. The most recent research has shown early intervention is really critical even with very severe types of mental illness. Schizophrenia, for instance, or other psychoses, early intervention and helping people both behaviorally, learning skills to cope and sometimes psycho-pharmacologically giving them medication can really be extremely effective in helping young people avoid falling into a destructive pattern of behavior.

Ivette A. Torres:

Justin, at what point did your parents say, "Enough?" Or were you just, on your own, decided "I am not going to live at home anymore," or "I am going to walk away"?

Justin Riley:

I did not miraculously, if you will, decide to change that lifestyle. My parents really tried any tool that they could come across. Whether that was recovery communities, doctors, psychiatrists, I mean anybody, they literally took me to my childhood physician to see what they could do to help.

Ivette A. Torres:

And Bridget, this is the whole concept of screening and brief interventions, is it not, to really intervene at an earlier stage?

Bridget Ruiz:

Absolutely, and getting the entire community involved. So the educational system, the juvenile justice system, neighborhoods, everybody at the same table to come together and create ways to identify young people that need help or need intervention is key and screening, brief intervention, that is the whole basis for that initiative.

Ivette A. Torres:

And when we come back, we're going to be dealing with a lot more related to how we can help young people and get them into recovery. We'll be right back.

[Music Playing.]

Ivette A. Torres:

Jonathan, when and how should a parent first intervene with a potentially problem situation?

Jonathan Katz:

You need to have the conversation. And I think that is crucial to begin to talk about what they see, what their concerns are, and what is going on. It can be very challenging because adolescence is a time of experimentation. It's a time of risk taking. So, you know, one doesn't want to smother your kid or be what is referred to nowadays as a "helicopter parent," which my daughter accused me—but at the same time, one needs to have that conversation and begin to address the issues and point out what your concerns are and maybe set some parameters for what you are looking at and follow up. And see if things are not getting better, if you are seeing the same things that concern you, it's important to seek help, seek some kind of assessment.

Ivette A. Torres:

You know, what I am really troubled about is really the level among the 18- to 26-yearolds, that college age, the binge drinking that is taking place. We hear on the news time in and time out what it is doing, the number of accidents that occur, the number, quite frankly, of violent, violent date issues that we are seeing. Tammy, what does a parent say to a child that wants to have fun, because college should be a time when they are having fun? What do you say to a child when they are practicing, you know, weekend binge drinking?

Tammy Barr:

I think it's important for parents to have that expectation and to be able to clearly say, you're not of age—it's important to me that you are responsible with what you are doing and the choices you are making. And I think oftentimes parents just assume it's a rite of passage, that all college students do that. And kids really need to understand that there's responsible drinking and then there's really harmful binge drinking. I think there are some universities around the country that are doing things to try to educate students

and not saying that it is okay to drink underage, but if you are drinking then make sure that what you're doing and that you are making good decisions about it. You are taking care of yourself, you are not putting yourself in risky situations. So that students make better decisions, so that they can be happy and successful, which is what they want and it's what their parents want.

Ivette A. Torres:

And, Justin, was that your scenario? Did you go on to college and what did you see while you were there?

Justin Riley:

I got into college right out of high school into the [inaudible] school of business and was actually asked to leave a fraternity for drinking too much. So my experience—

Ivette A. Torres:

That was very responsible on their part.

Justin Riley:

Yeah, I mean, it really was. I was drinking at such an obnoxious and dangerous level that even for that kind of atmosphere it was deemed inappropriate. And so my experience in college was people were drinking, they were going to classes drunk, and I would think that's pretty common across the board.

Ivette A. Torres:

And so when that happens now, we know that there's an option for someone that has had a problem really continuing college through the sober dorms, etcetera. Do you want to talk to us a little bit about that, Justin?

Justin Riley:

Yeah, I have been able to meet some people here on the east coast that have been involved in different organizations like Association for Recovery Schools, which is a phenomenal program, and I didn't have any access to anything like that at the campus that I went to and I didn't know that those things were even out there. But I believe that those programs were also something that could have been pivotal in my potential recovery to know that those programs existed.

Tammy Barr:

And not only for college students but for high school students as well, there are recovery schools. A lot of them are attached to a high school in part of it, but there are more and more of those around the country that are helping students be able to transition back to high school. Which was their—that's where they used, being able to have a safe sober environment is really important for adolescents and for college students.

Jonathan Katz:

And it is very important that parents are supportive of the efforts on the part of the school system or the college. Unfortunately, we run into many parents who are just so focused on being concerned about their child's record and something being on their record that they immediately take this adversarial stance and they want to just sweep it under the rug and not be supportive of getting that help.

Ivette A. Torres:

Bridget?

Bridget Ruiz:

It's really important that we also train and educate our faculty members, our administrators at different schools, so that every school becomes almost a recovery school and stigma is reduced for young people. I think this is particularly important for different cultures and genders because there's definitely differential stigma associated.

Ivette A. Torres:

How do parents who recognize that there may be a behavioral problem, how do they deal with it in terms of getting them the right type of help for a mental health problem? Jonathan?

Jonathan Katz:

I think the key is to not be intimidated by the stigma or concerned about it. There are so many young people today who are coming forward and getting the help they need for anxiety, depression, bipolar disorders. And it's crucial to do that. They shouldn't be afraid of that or feel that their child will be marked by that. I think that schools, camps, travel programs, all of these programs, anyone who works in these settings for youth will tell you that a growing percentage of young people who take part in these programs

are under the care of a mental health or behavioral health practitioner, maybe receiving some kind of helpful medication, and so the stigma is diminishing and I think parents need to have some trust in that.

Ivette A. Torres:

Well, when we come back we'll take a look further into how we can help young people and get them into recovery. We'll be right back.

[Music]

Male VO:

Recovery benefits everyone. Substance use and mental disorders can be treated. It all starts on day one. Join the Voices for Recovery. For information and treatment referral for you or someone you love, call 1-800-662-HELP. Brought to you by the U.S.

Department of Health and Human Services.

Ivette A. Torres:

So Justin, how can we support young people in recovery? You had mentioned earlier recovery schools. What other areas can we look at?

Justin Riley:

I think the single most pivotal moment in my recovery was the power of an opportunity. It was one person, one story, teaching me that my story and my past didn't have to define me for the rest of my life. And I was given an opportunity to lead and empower other people even though I was clearly imperfect and I had made mistakes. But it was in that night in November of 2007 that my life changed by that one individual saying, "You can do this and you can—"

Ivette A. Torres:

Who said that to you?

Justin Riley:

His name was Nicholas Gerk and he was a 26-year-old who used to volunteer at the rehabilitation program that I was staying in. And he didn't take me to a meeting. He didn't take me to a seminar. He took me back to his house and we just talked and he just let me know what I could do to change to my life. And from that night until today, I am here and I haven't given up. I'm not perfect, but I have been able to communicate a message of hope to people whether it's been with a situation like this here today or one on one with parents and family members.

Ivette A. Torres:

And currently are you engaged in other peer type support initiatives?

Justin Riley:

Yes, as a matter of fact, there's a grassroots movement happening across the Nation right now called Young People in Recovery. And this movement, you can find us on Facebook and Twitter, of course. We're able to raise awareness and advocate and develop skills for young people to help other young people seek recovery and definitely, definitely reduce the stigma around that.

Ivette A. Torres:

And Tammy, talk a little bit more about other aspects of supporting young people in recovery to make sure that they sustain their sobriety.

Tammy Barr:

I think one of the things that is really important not to miss is kids need to have fun and if the only fun that you have is when you're using, then being sober is not going to be very appealing to that particular group. So one of the things that we try to do at Connections is to try to have sober, fun activities that people can be involved in every day. We have a huge mentor group where people when they've obtained some sobriety they can become a mentor and they can give back and we have people who stick around for a really long time because they benefit as much as the newer folks coming in. So I think being able to create that community, that support, to be able to see other people doing it is really important. Especially other people your age.

Ivette A. Torres:

Jonathan?

Jonathan Katz:

I also just wanted to mention about peer support. Working primarily with the Jewish community, there are many Jewish holidays that stress enjoying and having fun and drinking wine. Purim, the celebration of Jews avoiding getting killed in the old days. And there's a tradition that people have to drink heavily and that it's a misunderstanding of the text about it, but nonetheless it's quite popular. And we specifically hold youth events, sober Purim events, so that young people can celebrate it and can say to us, "My gosh, this is the first time in 5 years that I've celebrated this holiday in sobriety. And you know what? I had fun," and that's a critical point for them.

Ivette A. Torres:

Absolutely. And Bridget, peer support can be gotten in many ways. Talk to us a little bit about the new technologies, the new media, and what young people are doing through new media in order to support each other.

Bridget Ruiz:

That's a fabulous question and again I think it's so developmentally appropriate and appropriate for how young people are communicating these days. Young people connect via technology. So social networking sites, cell phone technology, text messaging—these types of technologies can be very powerful either to create a peer-to-peer mentoring program or support program and/or through some type of adult-sponsored program for young people.

Ivette A. Torres:

And Justin, there are some existing efforts where people can blog, go in. I know that we at the recoverymonth.gov site have opportunities for people to go in and connect with others. Talk to us specifically about Young People in Recovery and what might be available.

Justin Riley:

Well actually right now on the Young People in Recovery Facebook, you can go on there and ask questions and see what kinds of services that we can connect other people with and facilitate those services or ask those questions that they might not be ready to ask somewhere else. And so again and this movement, one of the great things that we wanted to do through it was have a movement for young people by young people. So there isn't a single person that is a part of it that isn't somebody like myself. There's a ton more Justins out there and some great people aside from me who are

making these things happen across the country. And I think it acts as a standalone almost, just being inspirational by being that model of recovery and that life can be extraordinary.

Ivette A. Torres:

And Tammy, how can family and friends best support someone that is in recovery?

Tammy Barr:

I think for family and friends to be willing to talk about it, to be willing to be part of the solution. And I hope we can get to a point where there's no wrong door for somebody to enter, whether it's mental health issues or substance use issues or bullying or any of that. Wherever you come into contact with the system, that you can get to the right place and to folks who can support you.

Ivette A. Torres:

Absolutely. And I want to remind our audience that *National Recovery Month* is celebrated every September and we hope that if you're in this audience and you have heard what is said here, if you're a young person that has a problem or you're someone that's in recovery, you can certainly look towards recoverymonth.gov for information and we really want young adults and youth to really get more connected and find people that are similar that are doing a tremendous amount to reduce stigma and to continue to celebrate their recovery. Thank you for being here, it was a great show.

[Music Playing.]

Male VO:

The *Road to Recovery* Television and Radio series educates the public about the benefits of treatment for substance use and mental health problems as well as recovery programs for individuals, families, and communities. Each program engages a panel of experts in a lively discussion of recovery issues and successful initiatives from across the country. To view or listen to the *Road to Recovery* Television and Radio Series from this season or previous seasons, visit recoverymonth.gov and click on the Multimedia tab.