

Vermont Afterschool

# **Positive Youth Development**

Prevention Resource Guide for the Third Space



#### **Overview**

Research over the past decade has shown that the third space is critical to helping children and youth develop into healthy, well-rounded adults. It also encompasses a significant amount of time: a young person in Vermont spends only 20% of their waking hours in school and the rest of the time at home or in the third space - in the community, working jobs, hanging out with friends, participating in extracurricular activities, volunteering, and pursuing interests and hobbies.

In a small, rural state such as Vermont, out-of-school time programs and resources play a critical role in efforts to break the cycle of addiction and heal opioid-affected communities. This guidebook provides afterschool and third space providors tools and resources to support prevention efforts.

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### **Prevention in the Third Space**

Vermont recognizes the value of the third space in a young person's life. With home and family being the first space, school and the formal education system being the second space, and the third space including all the important time outside the school day and over the summer, where so much important learning and growth can happen.

Approximately 24% of Vermont youth in grades k-12 are currently enrolled in Afterschool programs. Of those not currently in programs, 33%, or more than 22,000 children and youth, would participate if a program were available.

Vermont students who participate in up to 19 hours of extracurricular activities each week are less likely to use alcohol, tobacco, or marijuana than those who do not participate in any activities. Two out of three Vermont parents agree that afterschool programs make it less likely youth with engage in risk behaviors.

One in seven Vermont youth have lived with someone who had a problem with drugs or alcohol, an Adverse Childhood Experience (ACE). ACEs can increase a child's long-term risk of substance use disorders and other future health concerns, but quality afterschool programs use trauma-informed practices that offset these impacts.



### **Common Signs of Alcohol and Drug Use**

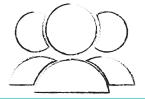
#### CHANGES IN BEHAVIOR OR MOOD

Restlessness, nervousness, paranoia, irritability, defensiveness, and/or a lack of interest in appearance or activities.



#### CHANGES IN FRIENDS

Switching friends and being relectant to introduce new friends.



#### PROBLEMS AT SCHOOL OR HOME

Poor attendance, drop in grades, and rebelling against rules.

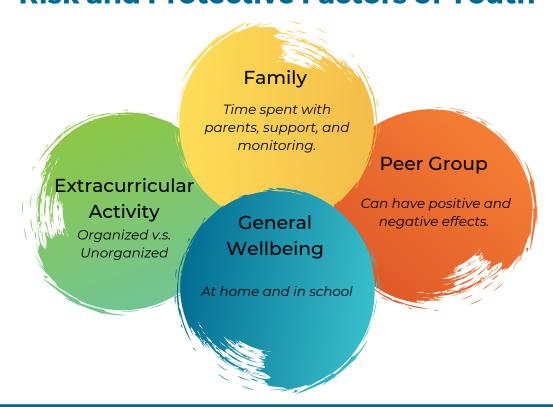


#### PHYSICAL OR MENTAL CHALLENGES

Slurred speech, lack of coordination, disorientation, memory lapses, trouble concentrating, or symptoms such as nausea, vomiting, bloody noses, teeth clenching, or sweating.



#### **Risk and Protective Factors of Youth**



#### **Alcohol**

Three in five students (58%) have ever had alcohol. One-third (33%) drank alcohol in the past 30 days.

Over the past decade, the percent of students who currently drank alcohol significantly decreased. However, alcohol use in the past 30 days significantly increased since 2015.

- Male students and students of color are significantly more likely than female students and white, non-Hispanic students to try alcohol before age 13 (16% vs 11% and 21% vs 12%, respectively).
- Lifetime alcohol use significantly increases with each grade level. By the time students are in their senior year, nearly three-quarters have tried alcohol.
- LGBT students are significantly more likely than heterosexual/cisgender students to consume alcohol in their lifetime and to drink alcohol before age 13 (20% vs 13%).

Vermont Department of Health. YRBSS. 2018.

### **Know the Signs**

Smelling of Alcohol

**Bloodshot Eyes** 

Lack of Coordination

Slurred Speech

**Poor Concentration** 

Memory Lapses

#### Did You Know?

For youth that did not participate in any afterschool activities, 6.2% reported binge drinking ten or more drinks at least once in the month leading up to the survey. This percentage decreased to 2.7% for youth who participated in one to four weekly hours of programming; to 3.2% for youth who participated in five to nine weekly hours of programming and 3.1% for youth who participated in ten to nineteen weekly hours of programming.

To learn more, please visit the Vermont Afterschool Blog: vermontafterschool.org/datadigest\_alcohol/

### **Additional Information and Resources**

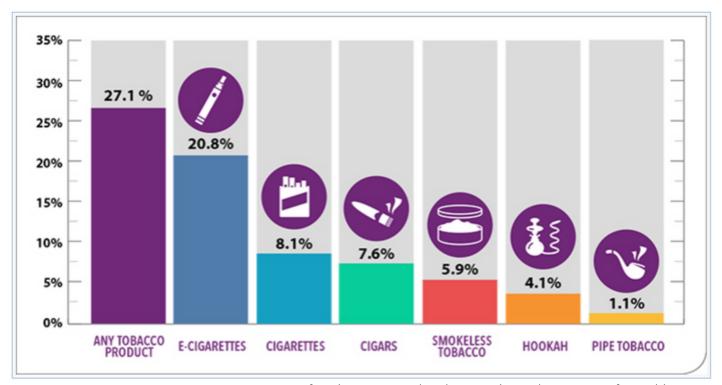
ParentUp: https://parentupvt.org

Free and confidential information and referrals

SAMHSA: 1-800-662-HELP (1-800-662-4357) / findtreatment.samhsa.gov

#### **Tobacco**

### Tobacco Use in High School (2018)



Center for Disease Control and Prevention. Tobacco Use Infographics. 2018.

E-cigarettes are the most commonly used tobacco product among middle and high school students.

JUUL, a popular e-cigarette, is shaped like a USB flash drive.

Some e-cigarette products do not look like tobacco products so students can use them unnoticed in school.

E-Cigarettes deliver a high dose of nicotine which is highly addictive and harmful to adolescent brain development.

#### **Tobacco Cessation Resources**

Youth can text "VtVapeFree" to 88709 to get help and support for quitting e-cigarettes and vaping.

Free tools and support for ages 13 and older.

802 Quits: 802quits.org

Free tools and resources.

Truth Initiative: truthinitiative.org

Free tools and resources.

CDC Quits: cdc.gov/tobacco/quit\_smoking/index.htm

### **Vaping Illness**

### What is Vaping Illness?

- The Centers for Disease Control and Prevention (CDC), the Food and Drug Administration (FDA), and state and local health departments, including the Vermont Department of Health, are investigating a multistate outbreak of e-cigarette or vaping product use-associated lung injury (EVALI).
- The investigation is ongoing and a cause has not been identified, but all reported cases have a history of using e-cigarette products. Many patients report using e-cigarette products with liquids that contain cannabinoid products, such as tetrahydrocannabinol (THC).

Department of Health. Lung Injury Associated with E-Cigarette Use in 2019.

# How to Stay Updated

EVALI is new and evolving. To stay updated, please visit the following CDC page: cdc.gov/tobacco/basic\_information/e-cigarettes/severe-lung-disease.html

#### **Know the Symptoms**

Cough, Shortness of Breath or Chest Pain

Nausea, Abdominal Pain or Vomitting

Fever, Chills or Weight Loss

### Additional Information and Resources

Youth can text "VtVapeFree" to 88709 to get help and support for quitting e-cigarettes and vaping.

Free tools and support for ages 13 and older.

802 Quits: 802quits.org

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### Marijuana

Nearly four in 10 students (37%) have ever tried marijuana, while one-quarter (24%) have used it in the past 30 days.

Over the past decade, marijuana use has remained stable. However, marijuana use in the past 30 days significantly increased between 2015 and 2017.

- Half of all seniors have ever tried marijuana. Ever using marijuana significantly increases with each grade level; using it before age 13 does not vary by grade.
- LGBT students are significantly more likely to report ever using marijuana (shown below) and to try it before age 13 (11% vs 5%), compared to heterosexual/cisgender students.
- Using marijuana before age 13 is significantly higher among male students compared to female students (7% vs 5%) and students of color (10% vs 5%).

Vermont Department of Health. YRBSS. 2018.

### **Know the Signs**

Anxiety

Smell on Clothing

Poor Physical Coordination

Red Eyes

Difficulty with Short-term
Memory

#### Additional Information and Resources

Department of Health: Let's Talk Cannabis. healthvermont.gov/lets-talk-cannabis

ParentUp: parentupvt.org

Free and confidential information and referrals SAMHSA: 1-800-662-HELP (1-800-662-4357) / findtreatment.samhsa.gov

### **Opioids and Prescription Drugs**

During their lifetime, 10% of students have ever misused prescription pain medicine or stimulants.

Less than one in ten students have ever tried inhalants (6%), cocaine (4%), methamphetamines (2%) and heroin (2%).

- Male students are significantly more likely than female students to misuse prescription pain medicine or stimulants.
- Students of color are significantly more likely to ever misuse a prescription pain reliever or stimulant compared to white, non- Hispanic students.
- LGBT students are nearly two times as likely as heterosexual/ cisgender students to ever misuse a prescription pain reliever or stimulant.

Vermont Department of Health. YRBSS. 2018.

### **Know the Signs**

Nausea or Vomiting

Sleepiness or Dizziness

Itching or Sweating

Confusion

Slowed Breathing

# Did You Know?

Among students who didn't participate in any hours of afterschool activities, 2.6% students reported using heroin at some point in their lives. This percentage dropped to 0.9%, 1.5%, and 0.7% respectively for students who reported participating in 1 to 4 hours, 5 to 9 hours, and 10 to 19 hours of afterschool activities per week.

To learn more, please visit the Vermont Afterschool Blog: vermontafterschool.org/data-digest-opioids/

### **Additional Information and Resources**

ParentUp: parentupvt.org

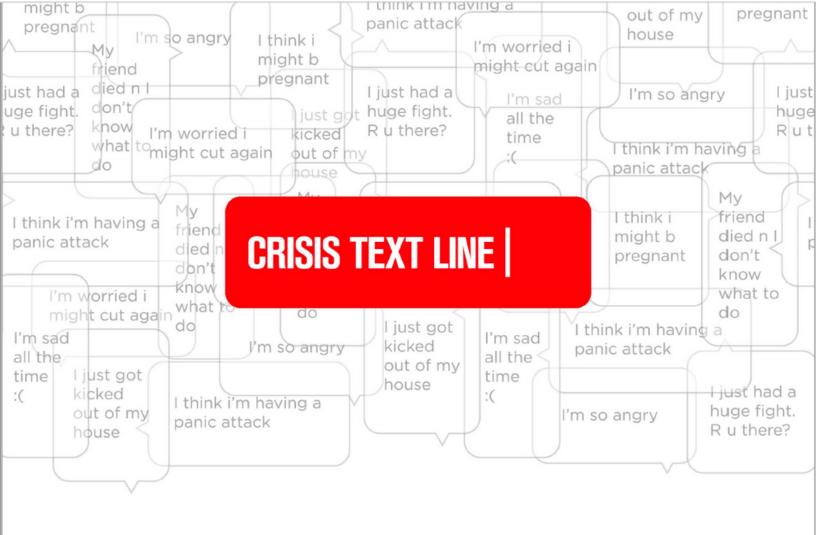
Free and confidential information and referrals

SAMHSA: 1-800-662-HELP (1-800-662-4357) / findtreatment.samhsa.gov

### **Supporting Youth in Crisis**

Emergency (or Crisis) Services are time-limited, intensive supports provided for youth and families who are currently experiencing, or may be expected to experience, a psychological, behavioral or emotional crisis. Services may also be provided to others in the immediate support system. These services are available 24 hours a day, 7 days a week.

- Clara Martin Center Crisis Line: 1-800-639-6360
- Counseling Service of Addison County Crisis Line: 1-800-388-7641
- Howard Center Crisis Line: 1-802-488-7777 (First Call for Chittenden County)
- Healthcare and Rehabilitation Services Crisis Line: 1-800-622-4235 (Windham and Windsor Counties)
- Lamoille County Mental Health Crisis Line: 1-802-888-8888 (weekends and after 4:30 weekdays) 1-802-888-5026 (Monday through Friday 8am to 4:30pm)
- Northwestern Counseling and Support Services Crisis Line: 1-802-524-6554
- Northeast Kingdom Human Services Crisis Line: (Derby) 1-802-334-6744 (St. Johnsbury) 1-802-748-3181
- Pathways Peer Support Line call or text 1-833-888-2557
- Rutland Mental Health Services Crisis Line: 1-802-775-1000
- United Counseling Service Crisis Line: (Manchester) 1-802-362-3950 (Bennington) 1-802-442-5491
- Washington County Mental Health Crisis Line: 1-802-229-0591



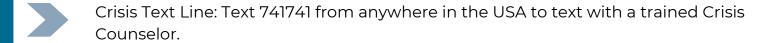
## **Text VT to 741741**

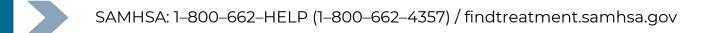
A free, 24/7 text line for people in crisis.

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#### **Additional Resources**

### 24/7 Informational Resources





### **Recovery Resources**

Vermont Recovery Network: (802) 738-8998 / vtrecoverynetwork.org

#### **Mental Health Resources**

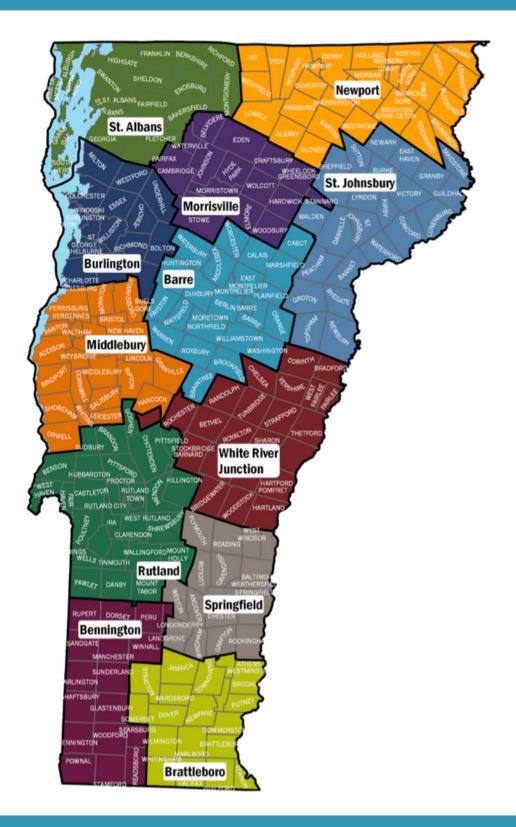
Vermont Suicide Prevention Center: (802) 254-6590 / vtspc.org

### Other Resources

- Vermont 211: Vermont 2-1-1 is a free, confidential service. You can call Vermont 2-1-1 to find out about hundreds of important community resources.
- Vermont Alcohol and Drug Information Clearinghouse (VADIC): VADIC provides information on a range of topics related to alcohol and other drugs, prevention, treatment and recovery.

  (802) 223-6263 / vadic.org
- Partnership for Drug Free Kids: drugfree.org / 1-855-DRUGFREE
- Northern New England Poison Control: 1-800-222-1222

# ADAP Substance Abuse Prevention Consultant (PC) Regions & Contact Information



PREVENTION CONSULTANT REGIONS
August 2019
Learn more at healthvermont.gov





#### PCs provide information and referral, training and consultation on substance misuse and prevention best practices, and community organizing.







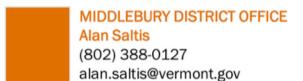




















#### **Statewide Prevention Coalitions**

#### **ADDISON COUNTY**

United Way of Addison County unitedwayaddisoncounty.org 48 Court Street Middlebury, VT 05753 802-388-7189 info@unitedwayaddisoncounty.or

#### **BENNINGTON COUNTY**

**Alliance for Community Transformations** 

actbennington.org 600 Main Street, #107 Bennington, VT 05201

Dare Meunier: director@actbennington.org

#### CALEDONIA COUNTY

Northeast Prevention Coalition

DART-NEK.org 297 Summer Street St. Johnsbury, VT 05819 802-748-8400

Tennyson Marceau: t.marceau@nvrh.org Cheryl Chandler: c.chandler@nvrh.org

#### CHITTENDEN COUNTY

Burlington Partnership for a Healthy Community

burlingtonpartnership.org 236 Riverside Avenue, Suite F Burlington, VT 05402 802-652-0997

Mariah Sanderson: mariahbphc@gmail.com

Essex CHIPS, Inc.

essexchips.org
2 Lincoln Street
Essex Junction, VT 05452
802-878-6982 x101
Justin Hoy: justin@essexchips.org

Winooski Partnership for Prevention

www.WinooskiPrevention.org
32 Malletts Bay Ave.
O'Brien Community Center
Winooski, VT 05404
802-655-4565
Kate Nugent: katenugent@winooskiprevention.org

**Connecting Youth** 

seewhy.info 5420 Shelburne Road, Suite 300 Shelburne, VT 05482 802-985-1931 Christine Lloyd-Newberry: cnewberry@cvsdvt.org

Milton Community Youth Coalition

miltonyouth.org 165 Route 7, Unit 1 Milton, VT 05468 802-893-1009

Tony Moulton: tmoulton@miltonyouth.org

#### **Statewide Prevention Coalitions**

#### FRANKLIN COUNTY

Franklin County Caring Communities

FCCCP.org 27 Church Street, Suite 2 St. Albans, VT 05478 802-527-5049 Crystal Lampman:

crystal.fcccp@gmail.com

#### LAMOILLE COUNTY

Healthy Lamoille Valley

healthylamoillevalley.org 480 Cadys Falls Road Morrisville, VT 05661 802-730-6599 Jessica Bickford:

jessica@healthylamoillevalley.org

#### **ORANGE COUNTY**

302 Cares

297 Summer Street St. Johnsbury, VT 05819 802-748-8400 Cheryl Chandler: c.chandler@nvrh.org

#### **ORLEANS COUNTY**

The Prevention Intervention Treatment Recovery Collaborative

55 Seymour Lane, Suite 11 Newport, VT 05855 802-334-7506 Allyson Howell: allyson.howell@neklsvt.org

#### **RUTI AND COUNTY**

Partners for Prevention partnersforprevention802.org 160 Allen Street Rutland, VT 05701 802-776-5515

#### **WASHINGTON COUNTY**

Central Vermont New Directions Coalition

www.cvndc.org 73 Main Street, #33 Montpelier, VT 05602 802-223-4949 Ann Gilbert, Coordinator

#### **Statewide Prevention Coalitions**

#### WINDHAM COUNTY

Brattleboro Area Prevention Coalition

brattleboroareapreventioncoalition.org Brattleboro, VT 05302 802-257-2175

Cassandra Holloway: cassandra.bapc@gmail.com

Deerfield Valley Community Partnership

dvcp.org Wilmington, VT 05363 802-464-2202 Cindy Hayford:

chayford.dvcp@gmail.com

West River Valley Thrives

WRVthrives.com Townshend, VT 05353 802-356-4700 The Collaborative

thecollaborative.us 91 Vermont Route 11 Londonderry, VT 05148 802-824-4200

Maryann Morris, Executive Director

**Greater Falls Connections** 

greaterfallsconnections.org Parks Place, 44 School Street Bellows Falls, VT 05101 802-463-9927 x208 Laura Schairbaum, Director

#### WINDSOR COUNTY

Black River Area Community Coalition, Inc.

braccvt.org Ludlow, VT 05149 802-228-7878

Paul Faenza: paul@braccvt.org

Springfield Prevention Coalition

springfieldprevention.org 59 Westview Terrace Springfield, VT 05156 info@thecollaborative.us Hartford Community Coalition

White River Junction, VT 05001 603-481-1177
Barbara Farnsworth:
wecare.hartford@gmail.com

Mt. Ascutney Prevention Partnership

289 County Road Windsor, VT 05089 802-674-7450 Melanie Sheehan:

Melanie.Sheehan@mahhc.org



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vermontafterschool.org

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802-448-3464

