Alcohol: Risks and Prevalence
By Jennifer Faringer, NCADD-RA Director

While the focus in the media has been on drugs other than alcohol, alcohol remains the number one legal drug affecting more individuals and families than all the illegal drugs combined. According to the University of Michigan’s Monitoring the Future survey’s most recent data, alcohol, tobacco (now in the form of vaping) and marijuana remain number 1, number 2 and number 3 respectively in terms of prevalence among high school seniors.

These increases have been obscured by the opioid epidemic which has captured attention nationwide with overdose rates of 72,000 in 2017 while the slower moving epidemic of alcohol misuse has accelerated. We tend to forget that alcohol is responsible for more deaths each year with approximately 88,000 people dying annually from alcohol-related causes.

Alcohol fatalities include those as a result of cirrhosis of the liver, cancer, pancreatitis, brain hemorrhages and suicide. It’s misuse has been attributed to cancers of the digestive tract (mouth to colon) and approximately 15 percent of U.S. breast cancer cases, with 33 percent of those cases affecting women who drank 1.5 drinks or less a week (according to the American Journal of Public Health). Alcohol is directly toxic to the nervous system from the spinal cord to peripheral nerves.

According to the Center for Disease Control and Prevention, alcoholism is at least three times costlier to treat than opioid addiction. Emergency rooms (ER) are the most expensive places to treat problems in general. In 2014 alone, the rate of ER visits involving acute alcohol use rose nearly 60 percent.
Alcohol: Risks and Prevalence (continued)

What can we do?
There are proven prevention strategies and approaches that include taxes on alcohol as well as limits on where and when alcohol may be sold and served. These strategies are embraced by health researchers and community prevention providers and coalitions but often not embraced by policymakers who may be influenced by the alcohol industry. In a recent *Pain in the Nation* report, the Well Being Trust identified losses from alcohol, drugs and suicides as "despair deaths." Social isolation is often both a major cause as well as a result of excessive drinking and affects individuals across the age span. Those who turn binge drinking episodes into nightly coping rituals are at high risk for alcohol use disorder as are those who are dealing with unresolved trauma in their lives.

Additionally, a new and very robust research study from the University of Southern California found after examining over 17,000 brain scans that drinking alcohol every day can speed up brain aging. Researchers (Monty Raksen/Getty) found that for every gram of alcohol consumed daily, the brain ages by 11 days. The same study also found that smoking one pack of cigarettes daily for a year aged the brain by 11 days.

The risks of alcohol use support the importance of early prevention education, proactive social policies that tax alcohol and limit access/use, family education and support, as well as referring those with an alcohol use disorder to counseling and treatment.

Learn more about the risks of underage, binge and problem drinking from our website at: ncadd-ra.org/resources/awareness-campaigns/underage-drinking/. Family members of a loved one who is suffering from alcohol use disorder are encouraged to recognize their need for self-care and support. To learn more about NCADD-RA’s family education program go to: ncadd-ra.org/services/total-approach-family-program/.

March 1-31, 2020 was Problem Gambling Awareness Month. For more information on problem gambling and how it impacts the problem gambler, the family and community, visit NCADD-RA at ncadd-ra.org/resources/awareness-campaigns/underage-gambling/ or the Finger Lakes Problem Gambling Resource Center at nyproblemgamblinghelp.org/ finger-lakes/. Additional statewide resources may be found at nyproblemgambling.org/.

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Front row: Aracelis Ramos, Bridget DeRollo and Jerry Bennett.
Back row: Jennifer Faringer, Elaine Alvarado, Amy Johnson, Erin Egloff, Milagros Rodriguez, Barb Christensen and Earl Greene.

NCADD-RA Services:

- Addictions Counselor Credential Training
- Community Education and Advocacy
- Finger Lakes Addiction Resource Center
- Finger Lakes Prevention Resource Center
- Hispanic Prevention Education Program
- Individualized Alcohol/Other Drug Education
- Resources and Referrals
- Total Approach Family Program
In recent years, suicide and addiction have both begun to lose their societal stigmas. People are discussing these diseases and their prevention more and more. One discussion that needs to occur more frequently is the correlation between the two. Depression and mood disorders are the number one risk factor for suicide, followed closely by alcohol and drug abuse. According to Psychology Today, people who suffer from a Substance Use Disorder (SUD) are six times more likely to commit suicide than the general population. An SUD is not only a risk factor in suicide, it is also a means to commit suicide. One out of every three suicide victims are under the influence of drugs or alcohol at the time of their death.

Given these statistics, one must ask the question why are so many people with an SUD turning to suicide? The answer is multidimensional. One explanation is that these substances take away people’s inhibitions and cause them to engage in risky behavior. In addition, if a person previously used the drugs to mask their feelings, and if they are attempting to stop using, then these feelings return and suicidal thoughts and plans develop. They also may simply feel hopeless—they may have lost family or friends to the addiction or may have faced legal problems—and they feel they have nothing to lose. Treatment for mental health is key during the treatment for SUD.

It is vital for doctors, counselors and other health care professionals to ask patients those difficult questions surrounding depression, mental health and suicide. Every person who goes through an Office of Addiction Services and Supports (OASAS) Certified SUD Treatment Facility should be treated not only for their SUD but also for their mental and physical health too. According to The American Journal of Psychiatry, methadone treatment lowers the risk of suicide by 20 percent for patients who suffer from opioid use disorder. Protective factors such as family involvement, crisis planning, problem solving skills and spirituality are also crucial.

It is equally important when battling this public health concern for the general population to recognize the warning signs for suicide. Common warning signs include being preoccupied with death, making plans (saying goodbye, updating will, giving possessions away), becoming withdrawn, showing signs of despair or hopelessness, mood swings, changes in sleep patterns and increases in reckless behaviors.

If someone you know is exhibiting these signs, it is important to get them the help they need either through a licensed mental health professional or the National Suicide Prevention Lifeline at 1-800-273-8255. For local resources, see Partners for Suicide Prevention (P4SP) at: suicidepreventioncoalition.org/resources.
n estimated one in four U.S. children under the age of 18 is exposed to a family alcohol problem, and countless others are affected by parental substance use disorder (SUD). This past February, our nation celebrated National Children of Addictions month, an annual recognition and awareness campaign highlighting the issues children face and necessary approaches to help them. Studies indicate that such children are at increased risk of a range of problems including physical illness, mental health issues, physical and emotional neglect and abuse. They are also at higher risk for developing an SUD at some point in their lives.

One of the most important gifts we can give a child is the ability to bond and attach in healthy relationships with others. Children exposed to SUD often experience broken promises, confusion, abuse and neglect. They learn the ‘No Talk’ rule well, defaulting to silence and isolation as a result. Children also develop a keen belief that people can’t be trusted and are left to interpret their environment with a blurred sense of reality. In order to counter the emotional and sometimes physical pain caused by possible abuse and neglect, children often stop feeling. They may begin to have fewer expectations because life experience has taught them that people don’t follow through on what they say.

So, what can we do?
• First, we can be a strong support just by listening and fostering healthy relationships for them.
• Become more aware of the topic to help them understand that they didn’t cause this, are not to blame, and aren’t responsible for it, as so many children believe.
• Provide age-appropriate information to help them understand what SUDs are and how it affects everyone in the family.

So many times, children think they are the only ones having these experiences, therefore it’s important they understand that many others are going through the same thing. There are more than 18 million children affected by addiction under the age of 18 in the U.S.

The more familiar we become with this topic, the more all of us can understand and assist those around us who may be impacted. You don’t necessarily have to be a clinician or expert on the topic but by clearly having some understanding lends opportunity to more effectively help and respond to someone’s confusion and pain. The National Association for Children of Addiction (NACoA) provides valuable information for children, caregivers and professionals. They have a publication entitled, “Children of Addiction: A Kit for Educators, Fifth Edition 2018” which contains a wealth of information on the topic. Download this publication at: nacoa.org/wp-content/uploads/2018/04/Kit-For-Educators.NACoA_.2018-1.pdf.

DePaul’s NCADD-RA also provides educational trainings to the community and offers the Total Approach Family Program, a psycho-educational six-week series for children, teens and adults who have been impacted by SUDs in their families. For more information, contact Bridget DeRollo at (585) 719-3483.

Shedding More Light for Children of Addiction
by Bridget DeRollo, Family Program Coordinator
As our understanding of the physiology and psychology of substance use and recovery deepens, individual opportunities for recovery are explored more thoroughly than in the past. Definitions of recovery are becoming more adaptable to a person’s or a family’s specific circumstances and situations. Intentional movement and exercise can provide a central anchor in a person’s recovery.

For athletic individuals, it may have always been a focus of their life and they naturally integrate it into their recovery. For those who may have never had interest in structured physical activities, exercise can be a new venture to centralize in their recovery efforts. For others, it may play a minor part in their recovery, yet provide significant benefits such as cardiovascular health improvement, alleviating symptoms of depression, and increasing natural endorphins. Additional advantages of exercise for those in recovery include a regularly scheduled commitment, improved sleep, increased self-confidence, and a way to work through stressful triggers and cravings.

The Finger Lakes region has made great strides in addressing the demand for recovery-focused exercise opportunities. ROCovery Fitness, a 501(c)(3) organization based in Rochester, provides a safe place for people to connect through sober exercise activities. All programs are free and open to anyone with 48 hours of continuous sobriety, as well as their family and friends. Through their Rochester clubhouse and chapters in Dansville and Watertown, an impressive number of experiences are available, including hiking, boxing, yoga, dance, weightlifting, skiing and snowboarding, and open gym equipment use.

A new Yoga of 12-Step Recovery (Y12SR) class began in February as part of the Orleans-Recovery Hope Begins Here group. Classes take place at the Missing Peace Holistic Wellness Center in Medina and are free to attend for those in recovery and their loved ones. Y12SR is a national program combining the wisdom of yoga with the practical tools of 12-Step programs.

Recovery WithOut Walls (Recovery WOW) is a newly opened recovery community center of the Geneseo/Orleans Council on Alcoholism and Substance Abuse (GCASA) in Genesee County. They’ve recently coordinated an archery tournament, bowling games and ice skating for those in recovery, as well as partnered with the Ride 2 Recovery Ministry (R2R) in Corfu, a religious youth outreach program.

Canandaigua has also seen a rise in exercise-related recovery programming. Connections Rounded Recovery, a recovery community center of the Finger Lakes Area Counseling & Recovery Agency (FLACRA), offers Restorative Yoga as well as Refresh and Energize Yoga groups in their new location on West Avenue. Connections works closely with The Partnership for Ontario County whose Community Support Center offers their own wellness programming. To support those in recovery from substance use and other challenges, The Partnership collaborates with Canandaigua CrossFit on South Main Street to provide regular gentle yoga sessions as well as community CrossFit classes.

Nearly all the opportunities mentioned here welcome individuals with a wide range of physical abilities. The Y12SR group in Medina can even provide gentle yoga movement exercises using a chair. If someone is hesitant to show up to a new class, they can call the organization to ask about the strenuousness involved in a particular activity. Contact information and service descriptions for regional recovery groups are listed in NCADD-RA’s Recovery Services Directories, which are available on the Finger Lakes Addiction Resource Center’s (FLARC) webpage: ncadd-ra.org/services/finger-lakes-addiction-resource-center.

Online resources:
www.ROCoveryFitness.org
www.facebook.com/OrleansRecoveryHope
www.y12sr.com
www.facebook.com/recoverywow
www.flacra.org/connections-rounded-recovery
www.partnershipforontariocounty.org
www.chairyoga.com
Ten representatives from eight area community anti-drug coalitions attended the Community Anti-drug Coalitions of America’s (CADCA) 30th National Leadership Forum in the Washington, DC area. Along with NCADD-RA’s Finger Lakes Prevention Resource Center staff, local attendees hailed from coalitions in Irondequoit, Webster, the State University of New York at Brockport, and Seneca, Chemung, Broome, Steuben and Schuyler counties. There were first time attendees, ‘veteran’ attendees and youth attendees—along with nearly 3,300 others from across the country and around the world!

Speakers from the National Institute on Drug Abuse (NIDA), National Institute on Alcohol Abuse and Alcoholism (NIAAA), CADCA, White House Office of National Drug Control Policy, and Centers for Disease Control and Prevention (CDC) led off each of the four days. In between these speakers, there were three rounds of workshops each day. Now that we’ve returned, it will take time to sort out the all-important ‘take-aways’ from the conference.

The mid-week highlight saw over 3,000 attendees ‘storming’ the Hill to meet with Congressional and Senate representatives. On the final day, several of our volunteers participated in a workshop on writing for the federal Drug-Free Communities grant. Current federally-funded coalitions operate in Webster and in Broome, Schuyler, Tioga and Steuben counties.

We learned a lot and have plenty of work ahead of us now that we’re back home!

Highlights include:
- Discovering coalition successes as found in the vendor exhibit hall
- Implementing coalition capacity-building tools
- In-depth education wrapped around e-cigs and vaping
- Tackling opioids on the playing field (a tool kit)
- Developing the power of partnerships as coalitions improve their volunteer management systems
- Improving on advertising and marketing with/for/to ‘Millennials and Generation Z’
- Thinking beyond medicine safety/security to include poison prevention
- Expanding local youth engagement efforts to include long-range sustainability
- Hearing about ‘One Choice Prevention’ as it emphasizes the all-important one safe choice youth must make early in life
- “Cultural Humility, an Interactive Experience” led by NCADD-RA’s Earl Greene

NCADD-RA joins our national partner National Organization on Fetal Alcohol Syndrome (NOFAS) and the United States Surgeon General in advising women to abstain from alcohol during pregnancy due to the risk of cognitive or developmental disabilities. NOFAS provides a personal perspective, the latest recommendations, and the science-based facts about the risk of prenatal alcohol exposure at www.nofas.org.

If you become pregnant, stop drinking alcohol. Every day matters. The sooner you stop drinking, the better for your baby. If you are finding it difficult to stop drinking, help is available. Visit your doctor to talk about your drinking, find a treatment facility, or contact Alcoholics Anonymous. In the Finger Lakes Region see NCADD-RA’s OASAS Certified Treatment Provider Directories for the nine counties which can be accessed and downloaded at: ncadd-ra.org/services/ finger-lakes-addiction-resource-center/. Studies have determined that the overall health of the mother, nutritional health, appropriate exercise, and early and regular prenatal care are among many factors that contribute to a healthy baby and could possibly reduce the effects of prenatal alcohol exposure. Men also play a role in preventing alcohol-related birth defects by understanding the risk of prenatal alcohol exposure, encouraging healthy behaviors, and minimizing or abstaining from alcohol themselves in support of the birth mother.

Locally, parents with children with a Fetal Alcohol Spectrum Disorder (FASD) are invited to join us at monthly Parent Networking and Support Group meetings by contacting jfaringer@depaula.org for more information.

For more information on FASD, educational presentations for your community/school group, as well as local diagnostic and intervention resources visit our website for more information: ncadd-ra.org/resources/awareness-campaigns/fetal-alcohol-spectrum-disorder/.
Increasingly, scientific research studies from multiple universities and research centers are raising concerns about the new risks resulting from the use of marijuana. Concerns are heightened as the potency of marijuana has increased from two to four percent tetrahydrocannabinol (THC) content in the 1970s to 20 to 30 percent THC more recently. With the concentrates, the percentage is even higher at 90 to 95 percent THC. A recent study from the University of Maryland (October 2019) found that an increasing number of women are using marijuana during pregnancy to treat morning sickness, anxiety and back pain. The study found that prenatal exposure to THC, the psychoactive cannabinoid found in cannabis, causes the developing brain’s dopamine neurons to become more hyperactive, increasing sensitivity to THC in pre-adolescent years. The study also confirmed what prior studies had shown – THC may contribute to an increased risk of schizophrenia and other forms of psychosis later in adolescence.

An earlier large research study published in Lancet Psychiatry Journal (February 2015) used high potency marijuana (the definition of high potency at the time of the study was 16 percent THC with little to no cannabidiol, the non-psychoactive cannabinoid) and found that users were five times more likely than non-users to experience a psychotic disorder, with weekend users three times as likely. The study also pointed to high-potency THC being responsible for 24 percent of patients presenting with first-episode psychosis.

Another very large study, this time from the University of Montreal (October 2017), found “an association between persistent cannabis use and violence is stronger than that associated with alcohol and cocaine” with patients 18 to 44 years of age. A study published in Frontiers in Psychiatry found that a patient’s continuing use of cannabis presented a 144 percent increase of violence.

Currently pre-natal research is also being conducted at the Icahn School of Medicine at Mt. Sinai in New York City on the impact of THC on the brain. Researcher Yasmin Hurd, Ph.D. found that exposure of the fetus to THC sets a phenotype in the brain for future vulnerability to addiction. It alters not only future sensitivity to marijuana, but also future sensitivity to heroin and other drugs. It is also linked to increased anxiety level in childhood, enhancing depression-like behavior and enhancing motivation to receive external rewards – all presenting risks and implications for adolescent drug use and mental health issues.

Another recent study from Duke University looked at the impact of paternal marijuana exposure on brains of offspring. The study found that use of marijuana by men well before conception appears to alter their sperm in ways that change the brains of their future offspring. Changes include brain areas that govern learning, memory, reward and mood. Researchers say “our studies provide evidence for adverse effects of paternal THC administration on the neurodevelopment in the offspring and further demonstrate the adverse impacts of drug exposure on brain development… vulnerability is engendered by exposures occurring prior to conception, involving the father as well as the mother.”

For more information on other areas of risk associated with increased use of marijuana see prior NCADD-RA newsletters at ncadd-ra.org/newsletters. Please reference the following issues:

- Fall 2019 page 1, Vaping: An Emerging Health Risk (and relationship to THC)
- Spring 2018, page 6, Research Updates on Cannabis Use in Adolescents and Newborn Health
- Fall 2018, page 5, Vaping Marijuana – Young People at Risk
- Spring 2018, page 1, Marijuana – linked to other addictive drugs?

Visit our website for additional information, research studies, and reports/findings from states that have already gone down the road of legalization are here at ncadd-ra.org/resources/awareness-campaigns/marijuana.

Hispanic Prevention Education Program Updates
by Milagros Rodriguez, HPEP Coordinator

The Hispanic Prevention Education Program (HPEP) is pleased to add RCSD #43 School to the list of schools that receive the evidence-based program “Too Good for Drugs” (TGFD), a ten to twelve-week program that covers Goal Setting, Decision Making, Identifying and Managing Emotions, Effective Communication, Bonding and Relationships, Managing Mistakes, Peer Pressure Refusal Skills, Alcohol, Tobacco and Other Drugs.

The goal of TGFD is to reduce risk and build protective factors related to drug use in order to promote healthy lifestyles and prevent alcohol, tobacco and other drug (ATOD) use. The program is designed to provide students with the skills, knowledge and attitudes they need for positive development, to keep them from initiating drug use and to keep the school community drug-free.

TGFD addresses the following risk/protective factors:

- Social and emotional competency (skills)
- Personal efficacy
- Attitudes toward ATOD use
- Perceived norms regarding ATOD use
- Perception of harm/risk regarding ATOD use
- Intended use of ATOD
- Attachment to the school/teacher

For information about the “Too Good for Drugs” programs and/or to schedule a presentation for your school or community group, contact Milagros Rodriguez at (585) 719-3486 or mrodriguez@depaul.org.
Community Presentations Available Upon Request...

NCADD-RA provides community presentations on a wide variety of substance use disorder related topics upon request. We customize presentations to fit the need, interest and available timeframe of your school/university faculty, PTA/PTSA or other school groups including classroom presentations, outreach and clinical staff, faith groups or workplace organizations.

For further information or to schedule a presentation with one of our staff, please contact Amy Johnson at ajohnson@depaul.org or (585) 719-3489, or Jennifer Faringer at jfaringer@depaul.org or (585) 719-3480.

Topics include, but are not limited to:
- Signs, Symptoms and Current Trends
- Impact of Addiction on the Family
- Opioid Epidemic and Community Response/Resources
- Marijuana, Concentrates, Vaping: What is the Connection?
- The Rise in Vaping Among Youth
- Underage and Binge Drinking
- Fetal Alcohol Spectrum Disorders
- Problem Gambling: Impact on Families and Communities