How well we understand ourselves and the ability to navigate our lives is influenced, to a great degree, by the life skills we develop. Life skills influence the quality of our lives, the relationships we have, our decisions, and how we respond to the world around us. Over the course of the past year, much has happened. I can’t help but think of ‘2020’ in terms of the world of optics where ‘20/20’ is a term to express normal visual acuity (the clarity or sharpness of vision). It wasn’t anticipated this would be a point in time where our ‘visual acuity’ and coping methods would be challenged, requiring a shift on a large scale.

One of my responsibilities as a program coordinator is to deliver the Too Good For Drugs (TGFD’s) LifeSkills Training program to schools. This evidence-based, emotional-social learning curriculum helps to develop and strengthen important life skills in children in grades K-12, with a separate parent curriculum. It is also a direct resource to apply to life experiences children may face during these altered times with lessons on topics such as Goal Setting, Decision-Making, Identifying & Managing Feelings, Effective Communication, Bonding & Relationships, Peer Pressure Refusal, Effects of Alcohol, Nicotine & Marijuana on the Brain, Over-the-Counter & Prescription Medicines, and Stress Management & Healthy Choices.

The TGFD lessons are traditionally delivered face-to-face in classroom settings. At the pandemic onset, the program was modified to allow for lessons to be delivered virtually using the school districts’ Google Meet platforms. Feedback from students and their teachers noted that these lessons came at the perfect time for numerous reasons (isolation, sense of normalcy and skill application to present life changes). Classrooms invited me onto their live classroom platforms to continue the lessons through the end of the school year, enabling program completion.

The current 2020-2021 academic year brought us to a new situation with many schools utilizing a hybrid schedule at the start of the school year with some students attending in-person and others attending remotely. With this new schedule came the need for continued adjustments to the delivery of the TGFD curriculum. The most effective method has been to provide pre-recorded weekly lessons, designed to stimulate thinking and interactive learning while maintaining fidelity, to each classroom teacher who can then determine the best way to administer them in their weekly schedule. We have developed methods to track comprehension of the learning objectives for each lesson including the use of Exit Tickets which are questions sent electronically to the students for reply and returned to the school representative after viewing the recorded lesson.

We have been presented with many opportunities to learn, adapt and grow over the past year. It sometimes reminds me of the ‘bully on the playground,’ forcing us to navigate our direction and responses. With patience, skill and the understanding that each person is having their own unique experience through all of this, we will get to the other side in much better shape. For more information on the Too Good For Drugs program, contact Bridget DeRollo at bderollo@depaul.org or (585) 719-3483.
In fall of 2020, I was introduced to the excellent new curriculum Cultural Competency: A Journey to Improve Outcomes as one of two cohorts who have and will continue to deliver this comprehensive training throughout New York State. The curriculum was commissioned by the New York State Office of Addiction Services and Supports (NYS OASAS) and created by the talented team of trainers at our local Coordinated Care Services, Inc. (CCSI).

The curriculum is designed to better reflect the current state of practice in the areas of cultural competence, structural racism and health equity. The modules focus on self-assessment, being aware of one’s worldview and mental model, and understanding the effects of power and privilege, with the goal of improving services that provide an equitable outcome for those we serve.

NCADD-RA offered this curriculum within our longstanding Addictions Counselor Credential Training (ACCT) program during evening classes in November and December 2020. We will continue to include it annually in the 350-hour ACCT program within Section 2. We offered this curriculum through a six-session series over three consecutive weeks in February and March 2021. Both were offered via distance learning in three-hour segments. As vaccination rates increase, it is our hope that our next delivery will be in-person in multiple full-day segments. NCADD-RA has been approved by NYS OASAS to offer this training in 15- and 18-hour segments (up to 24 hours).

Additionally, NCADD-RA’s May distance learning series will focus on Cultural Competency: Continuing the Journey, offering three half-day workshops, each focusing on a different population and the impact of substance abuse upon that population. We will be exploring both the challenges and opportunities in working with individuals from the LGBTQ+, Deaf and Hard of Hearing, and Native American communities. Join us for all three and continue your journey toward cultural competency. For more information or to register, please visit https://ncadd-ra.org/events-trainings/.
The FLARC Recovery Playlist
by Erin Egloff, B.A.

Many recovery journeys include a search for and a celebration of a greater meaning, be it inside oneself or an external force. That significance, that substantive understanding, has been found through meditation and wellness, relationship restoration, the arts and spiritual expressions – areas as diverse as both substance use recovery paths and the individuals who choose them.

For some, listening to music is an active, even participatory, experience. Many in recovery rely on music as one of their tools to process emotions, combat cravings, or to be reminded that they are not alone, and that others have endured similar obstacles. Sometimes a particular song or album will awaken a sense of self-worth or strength that can motivate a person to view the challenges of their recovery with increased positivity, or help a family member keep focus during difficult periods of the recovery process.

Music also serves as a form of connection with a loved one. While in recovery, Rochester resident C. was able to see one of her favorite groups in concert, and she shared with her son one particular song that always made her think about him. After his death, she learned from friends that he had often listened to the song and had even told others about it. As one would imagine, that song is very important to C. and listening to it connects her deeply with memories of her son.

The Finger Lakes Addiction Resource Center (FLARC) has compiled a playlist containing favorite recovery-related songs shared by people in the region. These songs have given them strength or inspiration throughout the recovery journey, and our shared hope is that they will provide others with the same. Some titles on the list include a rendition of RENT’s “No Day But Today” by Idina Menzel, “Crossroads” by Eric Clapton, “It’s Time” by Imagine Dragons, “Change” by Tracy Chapman, “Falls” by ODESZA, “Hero” by Mariah Carey, and “Walk” by Foo Fighters.

View or listen to the FLARC Recovery Playlist on Spotify at https://spoti.fi/3mhItCO. For help, regional resources, or to share a song to add to the playlist, contact Erin Egloff at eegloff@depaul.org or (585) 719-3485.

Alcohol Use During the COVID-19 Pandemic
by Amy Johnson, MS.Ed

A year ago, our lives drastically changed. COVID-19 took over our world, requiring adjustments surrounding social distancing, working from home or job loss, and online learning. With these changes came stress, boredom and loneliness, all of which require coping strategies to successfully navigate. Multiple studies have found an increasing number of individuals turning to alcohol to self-medicate in response to increasing anxiety. A study done by the Annals of Internal Medicine found alcohol sales in 2020 increased 34 percent from April to June in comparison to the same period a year prior. Although alcohol use increased among all demographics, a sharper rise was found among people under the age of 40, ethnic minorities, and people with young children or larger families. Another study also found a sharper increase of heavy drinking among women as opposed to men.

A study from New York University’s School of Global Public Health found that people with anxiety and depression were more likely to report an increase in drinking during the COVID-19 pandemic than those without mental health issues. According to the study’s lead author, Ariadna Capasso, this “is consistent with concerns that the pandemic may be triggering an epidemic of problematic alcohol use.” According to this study, people with depression were 64 percent more likely to drink, and people with anxiety were 41 percent more likely to do so.

History tells us that this increase in alcohol consumption surrounding stressful and traumatic events is not unusual. A 2002 study found that 25 percent of New Yorkers increased their alcohol consumption after 9/11. Nevertheless, just because this is consistent with history does not mean that it is not a cause for concern. This research illustrates how vital prevention, educational support services, substance use and mental health treatment services, and recovery services are at a time when our lives are being turned upside down. As the vaccine becomes more available and life slowly reverts to the way it was a year ago, it will be interesting to see the long-term effects of this increase in alcohol sales and use. Will the increased use continue? Will the number of people seeking treatment continue to increase? Only time will tell.

For further information, contact Amy Johnson at ajohnson@depaul.org or (585) 719-3489.

Statistics noted were from the following online articles: Alcohol and Tobacco Sales Climb During Early Months of COVID-19 Pandemic (2021, March 2). The University of Southern California. Drinking During COVID-19 Up Among People with Anxiety and Depression (2021, Jan 19). Health and Medicine.
Success of Community Coalitions - What Makes Them ‘Tick?’

by Jerry Bennett, B.A., CPP

The Finger Lakes Prevention Resource Center supports the work of 20+ community anti-drug coalitions. The keys to success revolve around an approach and a ‘plan’ - following the Strategic Prevention Framework. Community needs can then be responded to successfully.

Residents and organizations ‘know/feel/live’ with a variety of issues. The **Assessment** step challenges coalitions to get a pulse on the issues. Youth surveys, adult perception surveys, listening sessions and key informant interviews, archival date research – all play a part in developing a ‘picture’ of what’s going on locally. This relevant data allows for good decision making.

Of course, knowledge of the issues is only one basic aspect of coalition work. **Capacity** – building requires digging deep into the various sectors of the community – youth, parents, business, faith, health, local government, civic, volunteer, media, etc. A good volunteer management system covers recruitment, job requirements, retention, respect, rationing out the work, and recognition. These local coalitions must keep up with the ‘ups and downs’ of semesters, summer recess, COVID-19, snow/ice emergencies, retirements and moving to warmer climates.

This brings us to the **Planning** stage. Strategic plans and partnerships lead to successful ventures. It’s key to get efforts mapped out, with activities and events in place, and short- and long-term objectives mutually agreed upon by many.

The real fun begins as coalitions **implement** their efforts. There’s plenty of room for individuals and organizations to step up and pitch in. Many coalitions will utilize a variety of media and messaging approaches. Community residents seem to respond to a well-planned, highly promoted, engaging opportunity. Those strategic partnerships do pay dividends as the workload is spread out and ‘credit’ is shared by many.

Impact and outcome can only be gauged by a good **Evaluation** plan. Coalitions measure media impressions, resident involvement, resources generated, services provided, and needs assessment goals being met.

Coalitions need to be ‘in it’ for the long haul. They can only do this through the development of a sound **Sustainability** plan. Successful efforts will culminate in solid local partnerships, diversified funding, good ‘friend’ raising efforts, fostering collective impact, and maintaining relevance and credibility.

Within any community/county, it’s crucial for coalitions to be **culturally** relevant and responsive. The various communities of color, interest, language, geography and demography, and socio-economic status needs to be identified and involved in the work of the coalition.

These steps are constantly revolving, pivoting, changing and being refreshed. Coalitions greatly appreciate the fullest engagement from their local communities.

For more information on the Finger Lakes Prevention Resource Center, contact Jerry Bennett at jbennett@depaul.org or (585) 719-3488.

If NCADD-RA has touched your life, and has made an impact on you, your family and your community, please consider making a donation.

Your generous support will help NCADD-RA continue to provide quality education, support, resources and referral and advocacy through our many programs and services! There are many ways you can make a difference in the lives of those served by the NCADD-RA.

To donate, please visit ncadd-ra.org/donate.
In today’s world, community is more important than ever. As we see a rise in national disasters, crisis and disease, people are finding strength in numbers, and looking to their communities for guidance and support.

Community support comes from a variety of places, one of which are coalitions. A coalition is a group of community members/organizations who work together to improve local conditions by reducing risks, promoting protective factors, and helping to create systemic change. These groups are a representation of the communities they serve, each one unique and with strengths to respond to its community’s weaknesses.

“Coalitions connect multiple sectors of the community – including businesses, parents, media, law enforcement, schools, faith organizations, health providers, social service agencies and government – to collaborate and develop plans, policies and strategies to achieve reductions in the rates of consumption at the community level. Community coalitions reside at the heart of a proven comprehensive public health approach to support prevention efforts via a structured planning process that promotes civic engagement and the building of social capital.” (Community Anti-Drug Coalition, 2021)

Coalitions impact communities by offering an array of services. Some coalitions provide mass messaging campaigns such as Drug Free Irondequoit: Together Coalition (DFI). DFI partnered with Causewave Community Partners (a non-profit committed to strengthening community impact initiatives) to help educate the community on monitoring, securing, and responsibly disposing of prescription medications. The social media portion of the campaign reached over 44,000 people between the ages of 25 and 64. That's over 44,000 people that are more educated on the importance of monitoring, securing, and properly disposing of medications within their community and surrounding communities.

Another successful example of the impact of coalitions on community is the Webster Health Education Network - Drug Free Community Coalition (WHEN) which works with local businesses to ensure that they are checking IDs correctly for tobacco, vape products and alcohol. It is the collaboration and teamwork that allows coalitions to be so successful and it is the common goal of community improvement that drives them forward.

Collaboration across sectors is critical, especially during times of uncertainty, as with the COVID-19 pandemic. Recent data shows an increase in mental health concerns among youth which is directly correlated with increased use of drugs and alcohol as well as suicide. According to the 2019 Youth Risk Behavior Survey, “32 percent of students reported depression symptoms (up from 21 percent in 2007) and 14 percent reported they considered suicide in the past year (up from 12 percent in 2007).

Research indicates that exposure to adverse childhood experiences (ACEs), also called trauma, before the age of 18, without intervention and support, increases the likelihood of experiencing mental health challenges, using substances, and engaging in sexual risk behaviors.” Survey results go on to say “to properly address these ongoing trauma symptoms, our community must look at the root causes, including but not limited to individual and community violence, poverty, incarceration, and substance use disorder.”

Efforts being made by coalitions like the ones mentioned in this article ensure that our communities are safer for our young people by offering invaluable services and resources that single agencies or organizations would be hard pressed to provide.

For further information, contact Irene Lawrence at ilawrence@depaul.org or (585) 719-3582.
One year ago, our worlds were completely put on a hold as we slowly adjusted to what many refer to as our “new normal.” March 2020 was my last time stepping foot inside a school building to deliver the Too Good For Drugs (TGFD) curriculum directly to students in a classroom. Just like many teachers and other educators, we were faced with the challenges of teaching virtually. It was a learning curve for us all, especially the children. Yet, as I always tell my students, we learn from our adversities and we must always try our best to look for the positive in every situation.

The pandemic has affected us all in one way or another, causing stress, anxiety, mental health and other health issues. Furthermore, since the start of the pandemic, there has been an increase in substance use and suicidal ideation. With so many challenges facing both adults and children, the TGFD curriculum is especially relevant and impactful during these challenging times. The lessons offered to students in the evidence-based program are and have always been so important in preparing children to make healthy choices, build strong healthy relationships, and build protective factors related to the use of alcohol, tobacco and other drugs.

Although last school year finished with many challenges and low-attendance for many districts, this school year has brought many successes. Attendance has improved – dramatically to the point of some classrooms even having 100 percent attendance. Students have been more engaged and vocal in sharing over virtual platforms, especially in the lessons surrounding managing emotions and pertaining to alcohol, tobacco and the safe use of prescription and over-the-counter medicines.

The Hispanic Prevention Education Program (HPEP) continues to virtually deliver the evidence-based program TGFD to multiple classrooms within Rochester City School District until schools return to in-person learning.

This year has been a success considering the challenges of teaching via Zoom and not being able to have the children experience the many activities (card and board games) that are part of the program. Nevertheless, the children continue to embrace and welcome an opportunity for conversation within each program lesson. The program continues to be offered in both English and Spanish to students in second through sixth grade, reaching approximately 230 students thus far.

Some of the comments from students so far are as follows.

“Thank you, Ms. Rodriguez, for teaching us about healthy ways to manage stress.” -4th grade student

“Thank you for teaching us about medicine.” -3rd grade bilingual student

“Thank you for your time and teaching us.” -5th grade student

For more information on the evidence-based program Too Good For Drugs and/or any single sessions offered in Spanish and English, contact Milagros Rodriguez at mrodriguez@depaul.org or (585) 719-3486.
Stigma is defined as labeling people as disgraceful or unworthy secondary to a perceived flaw or negative characteristic. Shame, disgrace, dishonor, stain, taint, blot, blemish, brand, mark, slur, and smirch are just a few of the synonyms too often used in regards to those suffering from the disease of addiction, as well as from mental health disorders.

“Words have immense power to wound or heal...The right words catalyze personal transformation and offer invitations to citizenship and community service. The wrong words stigmatize and dis-empower.”
-William White, Author and Recovery Advocate

“Words are important. If you want to care for something, you call it a ‘flower;’ if you want to kill something, you call it a ‘weed.’”
-Don Coyhis, White Bison

How often has the fear of stigmatization been a primary reason that one chooses not to seek help? While individuals suffering from mental health disorders too often feel the pain of stigma, those suffering from addiction are even more likely to be the recipient of negative societal attitudes about their disease of addiction. What too often drives ongoing community stigma? Examples include when people don’t fully understand the nature of addiction and maintain false assumptions, as well as perpetuating stereotypes that reinforce stigma, such as that addiction is a choice, or that addicts are stupid, immoral, criminal, disheveled, etc.

Instead, recognize addiction as a disease just as it is recognized by both the American Medical Association and the American Psychiatric Association. Addiction is caused by the drug. It is the drug that is the vector. The use of drugs is a symptom of the disease. The drugs must be the public health concern/focus. The individual needs access and availability to care just as one suffering from any other potentially life-threatening disease requires immediate access and care. Those living with addiction need ongoing long-term care and support and access to the support of a recovery community, as do the families who’ve been impacted by the chaos of addiction.

For more information, contact Jennifer Faringer jfaringer@depaul.org or (585) 719-3480.
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. (Presentations are currently being provided through a virtual platform.)

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
- Opioid Epidemic and Community Response/Resources
- Marijuana, Concentrates, Vaping: What is the Connection?
- Risks of Vaping
- Underage and Binge Drinking
- Fetal Alcohol Spectrum Disorders
- Impact of Addiction on the Family
- Problem Gambling: Impact on Families and Communities