

# Autonomous but Not Alone: Navigating Students through Drug-Related Risk

A Toolkit for School-Based Staff

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# Acknowledgments



## Acknowledgements


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Thank you to the agencies, staff, and youth who have participated in this project: Children's Optimal Health, TEA Region XIII, Children's Optimal Health, UT Steve Hicks School of Social Work, Travis County Youth Substance Abuse Prevention Coalition, Communities in Schools, RLP Consulting

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We acknowledge the contributions of drug users; much of what we know about harm reduction approaches we owe to drug users who have courageously advocated for evidence-based models.

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Thank YOU!

- Children's Optimal Health
- Communities in Schools
- UT Steve Hicks School of Social Work
- TEA Region XIII
- Travis County Youth Substance Abuse Prevention Coalition
- RLP Consulting
- Office of Women's Health, US Dept. of Health & Human Services

Thank you to the late Dr. Lori Holleran-Steiker  
who helped author the toolkit!



# Agenda

- Why Do People Use Drugs?
- Toolkit:
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  - Setting the Tone
  - Confidentiality
  - 4 Scenarios
    - Riding & Driving
    - Youth Worried For a Friend
    - Conflicts
    - Engaging Reluctant Youth
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- Q&A

# Why Do People Use Drugs?

Like adults, youth use drugs for reasons! Understanding these reasons is often critical for helping youth.

- Trauma: many youth (whether they have disclosed to you or not) have survived oppression; neglect; emotional, physical, sexual assault; a traumatic event (e.g. a messy divorce, loss of a caregiver, etc.); and/or witnessed violence. Self-medication is a logical (albeit not recommended) response. Be prepared to offer powerful and accessible alternatives if discouraging use.
- To fit-in, rebel, experiment, or for recreation are also common reasons. These underlying causes may be easier to address.

# Title & Context

**Autonomous but Not Alone:  
Navigating Students through  
Drug-Related Risk**

**A Toolkit for School-Based Staff**



The Toolkit stresses the importance of building relationships and using a harm reduction approach to help empower youth to avoid and reduce risk.

# QR Code for Toolkit



# Introduction to Toolkit

The Toolkit seeks to provide method of approaching conversations that can be personalized to meet youth where they are at.





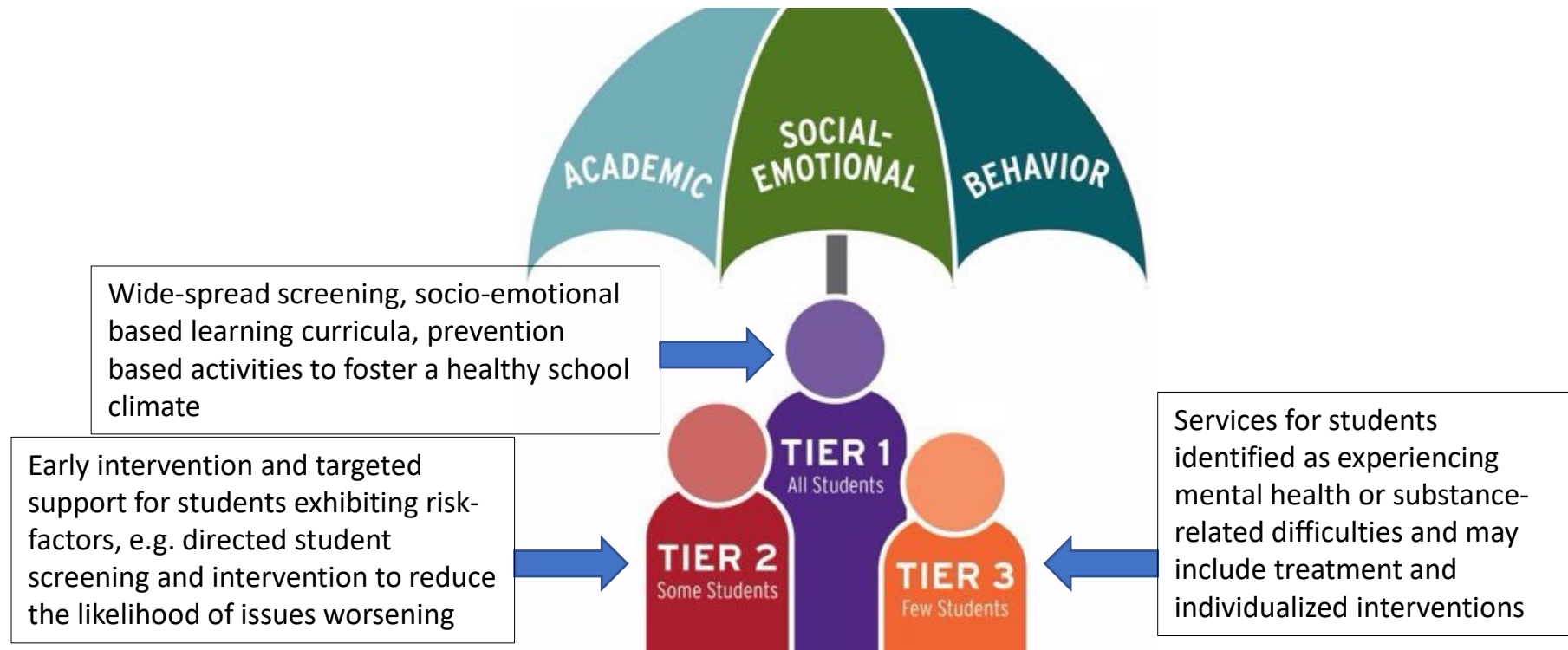
# Introduction to Toolkit



Risk is mediated by

- youth's brain development
- social/financial access
- method of acquiring the drug
- frequency of use

# Multi-Tiered Systems of Support (MTSS)



# Setting the Tone

*Avoid prescribing courses of action or using fear to motivate youth.*



Goal is to:

- Allow students' priorities to drive conversation
- Recognize what is working
- Help youth think ahead and develop their own plans

# Setting the Tone

Rather than say

**"the police could lock you up if you keep down this path",**

we might acknowledge, for example,

**"youth of color are more often stopped and frisked",**

then ask

**"how do you keep yourself safe?"**

# School Context



- Compliance with District Policy
  - Health, Mental Health, Discipline
  - Campus Practices
- Harm Reduction
- Consent and Confidentiality

## Resources

- [TX Health Steps Adolescent Health Provider Guide 2016](#)
- [TX Teen Consent/Confidentiality Training \(CEU\)](#)
- [TX DSHS Laws for Adolescent Health Screening \(2011\)](#)

# Confidentiality

**By law I must share any information that leads me to believe you are a harm to yourself, others or that you are facing neglect or abuse from caretakers. From here on out, if you tell me specifics I will take it to mean you are asking for outside help. If you believe you are in danger in any way I want to get you the help you need.**

**Can you give me some examples of things I need to report?**

# Confidentiality

**If you prefer to talk hypothetically that works too, for example: "if 'x' were happening, what would someone do?"**

**Or feel free to talk about risks your friends or family may be experiencing - sometimes it is easier to focus on the health and well-being of people we care about.**

# Breakout Practice #1: Confidentiality

- In pairs, practice using the language provided
- One person will be the staff member, the other person will be the student
- You will have 5 minutes in total



# Riding & Driving

Crashes are the **leading cause** of teen death.



## 8 Primary Precursors

1. Driver inexperience
2. Driving with teen passengers
3. Nighttime driving
4. Not using seat belts
5. Distracted driving
6. Drowsy driving
7. Reckless driving
8. Impaired driving

# Riding & Driving

Would you like to role play what you can say if you aren't comfortable driving or getting in a car with someone else?

What's the *smartest thing* you've done to avoid a crash?

What's the *worst case scenario* you personally might be in, and how might you prevent it realistically?

What are a *few things* you live for?

# Breakout Practice #2: Riding & Driving

- In pairs, practice using the language provided
- Only one person will be the staff member, the other will be the student (**no switching**)
- You will have 5 minutes in total

# Youth Worried For a Friend

Teach youth active listening skills to help them communicate with peers!



Encourage youth to think about the dynamics of raising the issue:

- Are you in the middle of a fight?
- Are you in a private place when you have time to talk?
- What could happen if your social media or texts are screenshot?

# Youth Worried For a Friend

Instruct students on how to use MI techniques:

It works like this:

- listen without interrupting (no matter what),
- then sum up what you've heard - to give your friend a chance to confirm.

After, try these phrases:

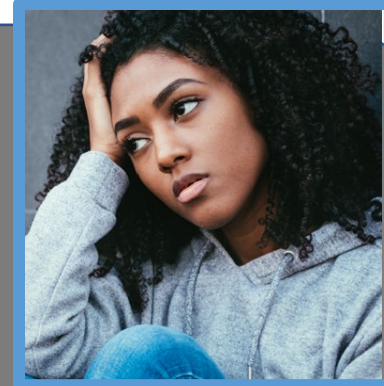
- "Am I right that you're feeling\_\_\_\_?"
- "On the one hand \_\_\_\_, but on the other hand \_\_\_\_."
- "What do you need?  
How can I help?"

# Youth Worried For a Friend

Practice having conversations with youth.

So people around you are drinking/using drugs.

- How do you feel about that?
- Why do you think they are using?
- How has it helped them?
- How has it hurt them? Anything they could do instead?
- Some youth don't use, why do you think they don't?
- You make choices everyday—what guides your decisions and what do you have to weigh?
- Ever been in a situation you wish you had handled differently?
- Want to brainstorm alternatives with me?



# Breakout Practice #3: Youth Worried for a Friend

- In pairs, practice using the language provided
- Only one person will be the staff member, the other will be the student (**no switching**)
- You will have 5 minutes in total

# Conflicts

Resistance arises as a normal, expected product of difficult dialogues.

When resistance emerges, there are good reasons the client is not ready to change in the way we are asking.





# Conflicts

It might be hard, but avoid using the following:

1. persuasion: "you should/can't..." and
2. the reflex to fix: "have you tried x, y, z". Instead ask what they've already tried and what they think they should or can't do.

# Conflicts

If you're met with resistance:

- Respect and roll with it
- Apologize as necessary
- Always demonstrate empathy and avoid argumentation
- Shift the conversation (for example: away from feelings toward a plan, or vice versa!)
- Express that the client is the expert of their own life experience

# Conflicts

- I'm glad you are here. Others are concerned—what about your behavior do you think concerns them?
- I can understand why you've been making those choices.
- It seems you've been working to find ways to cope and feel better. What are the payoffs and downsides?
- I believe in your power to make changes. When have you been able to do it differently?
- What's one small change you can make to help the situation?
- How can I support?

# Breakout Practice #4: Conflicts

- In pairs, practice using the language provided
- Only one person will be the staff member, the other will be the student (**no switching**)
- You will have 5 minutes in total

# Engaging Reluctant Youth



Students sometimes find school or therapeutic settings to be places where they feel tempted or compelled to be under the influence due to availability, social pressure, challenging academic expectations, buffers from emotions or intimacy, or other stressors.

It is best to acknowledge, in a nonjudgmental way:  
“You seem to be more \_\_\_\_\_ than usual and I wonder if you are under the influence of any substances right now?”

# Engaging Reluctant Youth

Youth will often be able to observe more and talk more about others rather than themselves.

I'm glad that you have not had any noticeable problems related to your use. People who use without consequences can sometimes find that their use either becomes more frequent, or that they stop hanging out with the same friends or doing activities that used to bring them joy.

- If it was becoming problematic for you, what might that look like?
- Do you know anyone that uses who ran into difficulties with their use?

# Breakout Practice #5: Engaging Reluctant Youth

- In pairs, practice using the language provided
- Only one person will be the staff member, the other will be the student (**no switching**)
- You will have 5 minutes in total

# Resources



Youth often seek resources online.

Help them discriminate between non-credible and credible harm reduction sources

## **Information on drugs**

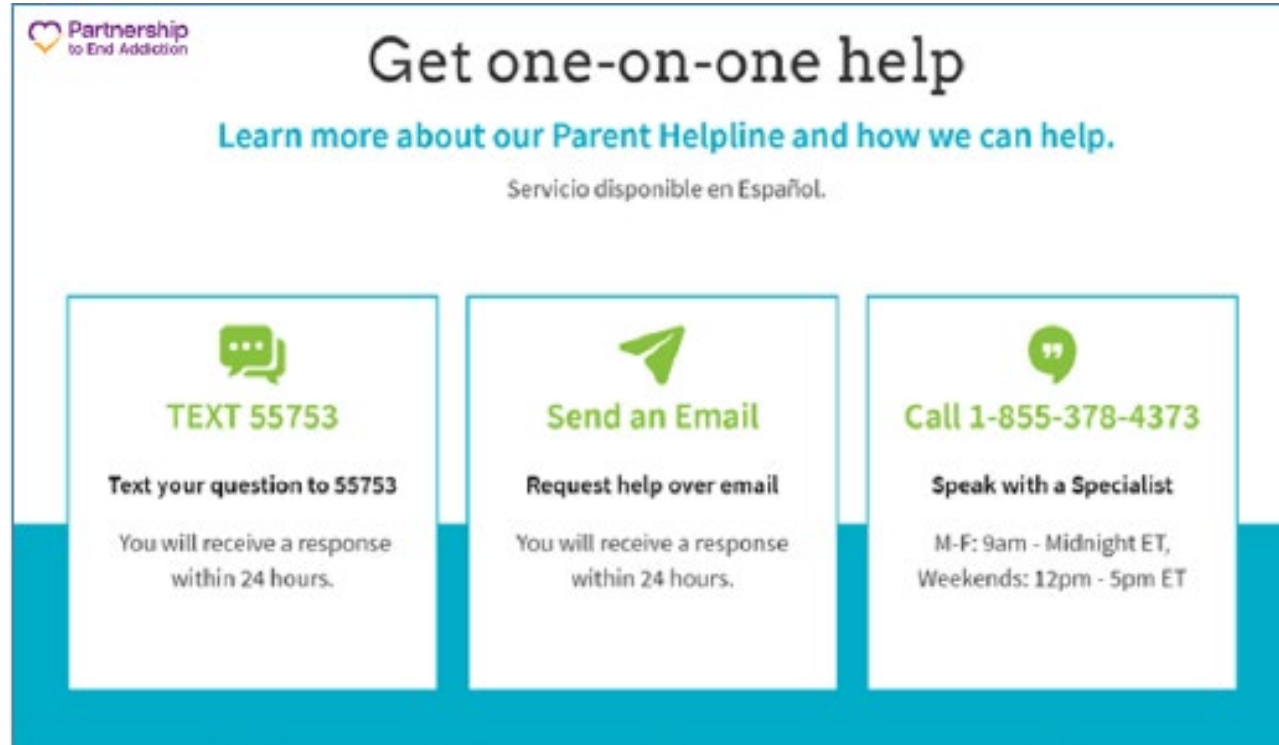
- <https://www.drugpolicy.org/drug-facts>
- <https://www.drugwise.org.uk/drugsearch-encyclopedia/>
- <https://harmreduction.org/issues/drugs-drug-users/drug-information/>

## **Drug interactions**

- [https://www.drugs.com/drug\\_interactions.html](https://www.drugs.com/drug_interactions.html)



# Partnership to End Addiction: Parent Helpline




The graphic is a white rectangular box with a blue border and a blue footer bar. In the top left corner is the logo for 'Partnership to End Addiction', which consists of a purple heart icon and the text 'Partnership to End Addiction'. The main heading 'Get one-on-one help' is centered in a large, dark grey font. Below it, the text 'Learn more about our Parent Helpline and how we can help.' is centered in a smaller, teal font. Underneath that, 'Servicio disponible en Español.' is centered in a small, dark grey font. The bottom section of the graphic is divided into three white boxes, each with a green icon and text. The first box on the left has a speech bubble icon, the text 'TEXT 55753', 'Text your question to 55753', and 'You will receive a response within 24 hours.' The middle box has a paper plane icon, the text 'Send an Email', 'Request help over email', and 'You will receive a response within 24 hours.' The third box on the right has a speech bubble icon with a quote mark, the text 'Call 1-855-378-4373', 'Speak with a Specialist', and 'M-F: 9am - Midnight ET, Weekends: 12pm - 5pm ET'.

**Partnership to End Addiction**

## Get one-on-one help

Learn more about our Parent Helpline and how we can help.


Servicio disponible en Español.



**TEXT 55753**

Text your question to 55753


You will receive a response within 24 hours.



**Send an Email**

Request help over email

You will receive a response within 24 hours.



**Call 1-855-378-4373**

Speak with a Specialist

M-F: 9am - Midnight ET,  
Weekends: 12pm - 5pm ET

<https://drugfree.org/get-support-now/>

# Referrals

Use the Substance Abuse and Mental Health Services Administration (SAMHSA) **Behavioral Health Treatment Services Locator**.

Or call **1-800-662-HELP** to tap into a support network where you can find immediate and confidential assistance 24/7. They can also direct you to local treatment options.

# Resources & Referrals

## **SUPPORT GROUPS**

Alcoholics Anonymous  
Central Texas Area Narcotics Anon.  
Sage Recovery & Wellness  
Communities for Recovery  
North Austin Foundation  
Lifering Secular Recovery  
Smart Recovery  
Texas Students for Recovery

## **COUNSELING**

Austin Center for Grief & Loss  
Capital Area Counseling  
Christi Center  
Community Care Clinic  
Lifeworks  
LoneStar Circle of Care  
Phoenix House  
Sol Counseling  
YWCA

## **TREATMENT**

### **LOCAL MENTAL HEALTH AUTHORITIES\***

Integral Care  
Bluebonnet Trails CS

\* Contracted by Texas HHSC for public mental health, SUD, and MAT.

## **DETOX & TREATMENT**

Austin Recovery  
Bluebonnet TCS  
Cenikor  
Christian's Farm Treehouse  
Clean Investments, Inc.  
Georgetown Behavioral Health  
Integral Care  
Right Step  
Texas Star Recovery (Nero)

# Overdose Prevention with Naloxone

Training and continuing education credits available on overdose prevention and response education to students, health professionals, and the public to combat the opioid crisis using harm reduction strategies.

- **Operation Naloxone** - Inter-professional collaboration from faculty and students at The University of Texas at Austin [College of Pharmacy](#), [Steve Hicks School of Social Work](#), and [Texas Overdose Naloxone Initiative](#) (TONI).
- **Communities for Recovery** - Train the Trainer Naloxone Training

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Q & A