



FALL 2017

TRENDS OF REGIONAL TEEN OPIOID USE

REGION 1, TEXAS

PREVENTION RESOURCE CENTER, REGION 1 TEXAS
MANAGED CARE CENTER FOR ADDICTIVE/OTHER DISORDERS, INC
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THE PRC, REGION 1

WHO WE ARE

The Prevention Resource Center (PRC) is a service of Managed Care Center for Addictive/Other Disorders, Inc. We serve the 41 counties of the Texas Panhandle and South Plains Region.

We serve as the central data collection repository and substance abuse prevention training liaison for Public Health Region 1, funded by a grant from the Department of State Health Services.

Our duties are to identify local community, county, and regional data resources that will provide and share data to enhance and maximize data collection and support the central data collection repository efforts.

OUR MISSION

The purpose of the Prevention Resource Center is to support activities that enhance and improve substance abuse prevention services across Region 1 of the State of Texas. The Resource Center serves as a central repository for data collected throughout Region 1 that will be used to develop a Regional Needs Assessment.

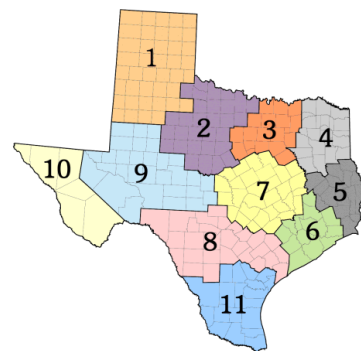
Our specific goals are:

- To provide current, relevant, and community-wide data on substance abuse trends
- To enhance the ability of our communities to more effectively respond to changes in substance abuse trends
- To influence data driven changes in the standards and attitudes within our communities

OUR REGION

We serve the following counties in West Texas:

- Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Cochran, Collingsworth, Crosby, Dallam, Deaf Smith, Dickens, Donley, Floyd, Garza, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hockley, Hutchinson, King, Lamb, Lipscomb, Lubbock, Lynn, Moore, Motley, Ochiltree, Oldham, Parmer, Potter, Randall, Roberts, Sherman, Swisher, Terry, Wheeler, & Yoakum.



HOW WE SERVE OUR COMMUNITY

We serve our communities by providing alcohol, tobacco, and other drug (ATOD) data to schools, colleges and universities, or other community agencies. This is done through **Information Dissemination**

which provides awareness and knowledge of alcohol, tobacco and other drug abuse, and issues and trends through the data collected by the central data repository.

Our **Community-Based Process** aids the community to more effectively provide "TIPS" (Treatment, Intervention and Prevention Services) for ATOD problems through community mobilization, collaboration, coalition building, networking and community empowerment efforts.

Through **Environmental and Social Policy**, we aim to reduce the incidence and prevalence of ATOD in the general population by establishing and/or changing written and unwritten standards, codes and attitudes within the community. This strategy also aims to combat substance abuse and related harms with concerted, community-based and comprehensive efforts to change norms, behaviors, systems and context that contribute to substance abuse problems in our communities.

TOBACCO STRATEGIES

Our Tobacco Specialist works with tobacco retailers to understand and comply with Texas laws concerning the sale and display of tobacco products. The Prevention Resource Center provides education to tobacco retailers and the media concerning tobacco laws and the harmful effects of tobacco.

COMMUNITY COOPERATION

The Prevention Resource Center collaborates with other agencies by sharing data about substance abuse issues, trends, planning, training and other activities within our region and state. The Prevention Center coordinates with regional coalitions and supports their prevention efforts.

Adam Barrera

Program Coordinator

15 November 2017

Prevention Resource Center, Region 1

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INTRODUCTION

Addiction to opiates is a serious problem because of the dangers associated with the drugs. Opiates can cause severe health problems and sometimes death when they are abused and misused. Opiates can kill if addiction is not managed as quickly as possible.

Opiates are drugs that were created from opium poppy flowers and create morphine-like effects in those who consume them. While created from a natural flower, the substances are highly addictive and have many dangers that can arise. Depending on the individual, it is possible to become addicted to the drugs with a single dose.

Opioids are a class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, morphine, and many others. These drugs are chemically related and interact with opioid receptors on nerve cells in the body and brain.

Opioid pain relievers are generally safe when taken for a short time and as prescribed by a doctor, but because they produce euphoria in addition to pain relief, they can be misused (taken in a different way or in a larger quantity than prescribed, or taken without a doctor's prescription). Regular use—even as prescribed by a doctor—can lead to dependence and, when misused, opioid pain relievers can lead to overdose incidents and deaths¹.

A NATIONAL CRISIS

Every day, more than 90 Americans die after overdosing on opioids². The misuse of and addiction to opioids—including prescription pain relievers, heroin, and synthetic opioids such as fentanyl—is a serious national crisis that affects public health as well as social and economic welfare. The Centers for Disease Control and Prevention estimates that the total "economic burden" of prescription opioid misuse alone in the United States is \$78.5 billion a year, including the costs of healthcare, lost productivity, addiction treatment, and criminal justice involvement.

In the United States, opioids were involved in 33,091 deaths in 2015 and opioid overdoses have quadrupled since 1999³. By comparison, between 2000 and 2014 there were 37,088 deaths due to heroin. There were almost as many deaths due to opioids in 2015 as heroin deaths over a 14-year span.

The National Institute on Drug Abuse have identified these four phenomena during this crisis⁴:

- Roughly 21 to 29 percent of patients prescribed opioids for chronic pain misuse them.
- Between 8 and 12 percent develop an opioid use disorder.
- An estimated 4 to 6 percent who misuse prescription opioids transition to heroin.
- About 80 percent of people who use heroin first misused prescription opioids.

¹ <https://www.drugabuse.gov/drugs-abuse/opioids>

² <https://www.drugabuse.gov/drugs-abuse/opioids/opioid-crisis>

³ <https://www.cdc.gov/drugoverdose/data/statedeaths.html>

⁴ <https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis>

This issue has become a serious public health crisis that extends beyond opioid misuse/abuse. For instance, newborn children born of mothers who abuse opioids suffer from Neonatal Abstinence Syndrome where the child is born in withdrawal from opioids. In 2012, 21,732 babies were born with this condition—a 500% increase from 2000⁵.

METHODOLOGY

This report will rely on data collected by the following surveys: The 2017 Texas Prevention Impact Index (TPII), the 2015 40 Developmental Assets Survey (40 DAS), and the 2017 VOICES of Hockley County survey. The results of these surveys provide the best picture into just how regional adolescents use/abuse prescription drugs.

Taken together, these surveys begin to illustrate how adolescents in Region 1, Texas perceive harmful risks of using prescription drugs and how they consume prescription drugs.

Throughout this report, we will be using some terms that correlate directly to how prescription drug consumption is understood for the purpose of reporting regional teen consumption rates and perceptions:

- Use: Medical use by teen as prescribed by a doctor for the teen
- Abuse: Nonmedical use by teen to alter consciousness or get high
- Misuse: Medical use by teen as prescribed by a doctor for someone else

REGIONAL ADOLESCENT PERCEPTIONS OF OPIOIDS AND RX DRUGS

Environmental risk factors are characteristics in a person's surroundings that increase their likelihood of becoming addicted to drugs. A person may have many environments, or domains, of influence such as the community, family, school, and friends. Their risk of addiction can develop in any of these domains.

Influential factors in substance abuse disorders include genetic predisposition and prenatal exposure to alcohol when combined with poor self-image, self-control, or social competence. Other risk factors include family strife, loose knit communities, participating in an intolerant society, being exposed to violence, emotional distress, poor academics, socio-economic status, and involvement with children's protective services, law enforcement, and parental absence.

However, research has also demonstrated that exposure to even a significant number of risk factors in a child's life does not necessarily mean that substance use or other problem behaviors will follow inevitably. Many children and youth growing up in presumably high-risk families and environments emerge relatively free of problems. Often these teens have protective factors that balance and buffer the risk factors that contribute to the decision to begin consuming dangerous substances by shaping how adolescents perceive these substances.

⁵ <https://www.drugabuse.gov/related-topics/trends-statistics/infographics/dramatic-increases-in-maternal-opioid-use-neonatal-abstinence-syndrome>

PERCEPTION OF ACCESS

Teens' ease of access to prescription drugs in their own homes and in the homes of family and friends enables teens to misuse and abuse prescriptions. In fact, four in ten teens (40 percent) indicate prescription drugs are everywhere, while 43 percent indicate prescription drugs are easier to get than illegal drugs.⁶

In general, teens from urbanized, but non-metropolitan areas are at the greatest risk for misusing or abusing prescription drugs, followed by rural and then metropolitan areas.⁷ However, lax attitudes and permissiveness by parents toward prescription drug misuse and abuse, along with availability, are directly linked to these abuses by teens. Access to prescription drugs is usually found in the family (or friend's) medicine cabinet and teens are more likely to misuse or abuse these drugs if they think that their parents are okay with it, or if they think that any punishment would be less than for using street drugs.

There is little region-specific data on how adolescents perceive access to opioids and other prescription drugs. However, many parents and grandparents give little thought to how they store their prescriptions—especially expired prescriptions. Some regional coalitions are starting to sponsor prescription collection programs and there seems to be a need. In April 2017, the Hockley County VOICES coalition reported that, during their prescription drop off program, they collected 69.6 pounds of unused prescription medication.

Still, there are a lot of drugs prescribed in Region 1. Half the counties in this region have more prescriptions than people in those counties. These include Lubbock, Potter, and Randal counties. This may indicate that most teens in half the counties would have access to at least one prescription from a relative.

Table 1: Total Prescriptions Per Capita by County, 2014

County	Total Prescriptions Per Capita by County, 2014		
	2014 Population	Total Prescriptions	Prescriptions per 100K
Armstrong	1922	2447	127315
Bailey	7531	6090	80866
Briscoe	1674	1400	83632
Carson	6235	7367	118156
Castro	8374	7082	84571
Childress	7175	10282	143303
Cochran	3277	2872	87641
Collingsworth	3120	3214	103013
Crosby	6348	7219	113721
Dallam	7155	6102	85283
Deaf Smith	20526	13161	64119
Dickens	2467	2442	98987
Donley	3709	4117	111000
Floyd	6592	4850	73574
Garza	6682	6617	99027
Gray	23249	31820	136866
Hale	37554	31617	84191

⁶ The Partnership at Drugfree.org

⁷ SAMHSA, April 11, 2013

Hall	3359	4416	131468
Hansford	5826	6569	112753
Hartley	6121	3647	59582
Hemphill	3973	5482	137981
Hockley	23808	25683	107876
Hutchinson	22451	28939	128898
King	292	247	84589
Lamb	14350	15356	107010
Lipscomb	3415	2633	77101
Lubbock	289348	336091	116155
Lynn	6112	5787	94683
Moore	23260	14808	63663
Motley	1219	1073	88023
Ochiltree	10935	9710	88797
Oldham	2104	2325	110504
Parmer	10852	6243	57529
Potter	126292	132083	104585
Randall	125684	159453	126868
Roberts	969	842	86894
Sherman	3127	2291	73265
Swisher	7988	7301	91400
Terry	13058	15245	116748
Wheeler	5498	5692	103529
Yoakum	8382	10192	121594
Texas	26581256	29638130	111500

Data Source: Texas Department of Public Safety Regulatory Service Division, Texas Prescription Program. 2014.

PERCEIVED RISK OF HARM

An adolescent's perception of the risks associated with substance use is an important determinant of whether he or she engages in substance use. For example, youths who perceive high risk of harm are less likely to use drugs than youths who perceive low risk of harm. Thus, providing adolescents with credible, accurate, and age-appropriate information about the harm associated with substance use is a key component in prevention programming.

Overall, Region 1 adolescents report that the misuse of prescription drugs can be harmful. 77% of Amarillo-area adolescents report them as dangerous⁸ while 81% of Lubbock-area teens report the misuse of prescription drugs as a moderate or great risk⁹. Regionally, 87.6% of adolescents report that using a prescription drug not prescribed for them is either very or somewhat dangerous to use.

Nationally, both teens and parents seem to share similar misconceptions concerning prescription drug misuse and abuse. 16% of parents and 27% of teens believe that using prescription drugs to get high is safer than using street drugs. 33% of teens believe that it is okay to use prescription drugs that are not prescribed to them in order to deal with injury, illness, or pain¹⁰.

⁸ Texas Prevention Impact Index, Amarillo, 2015.

⁹ 40 Developmental Asset Survey, 2015

¹⁰ The Partnership at Drugfree.org, 2013

Table 2: Perceived Risk of Harm, Not Prescribed, TSS 2016

How dangerous do you think it is for kids your age to use any prescription drug not prescribed to them?						
	Very Dangerous	Somewhat Dangerous	Not Very Dangerous	Not at All Dangerous	Do Not Know	
All Grades	75.7%	11.9%	4.7%	1.2%	6.5%	
Grade 7	83.8%	6.4%	3.6%	0.7%	5.6%	
Grade 8	78.3%	11.3%	4.9%	0.5%	5.0%	
Grade 9	71.0%	15.5%	5.1%	0.3%	8.2%	
Grade 10	74.3%	14.2%	5.0%	1.2%	5.3%	
Grade 11	68.6%	11.4%	6.5%	4.4%	9.1%	
Grade 12	76.9%	13.5%	3.2%	0.7%	5.7%	

Data Source: Texas Student Survey of Drug and Alcohol Use, 2016; Regions 1-2

Teens seem to have little idea about the danger of addiction in regard to prescription drugs. 25% of teens say that there is little to no risk in using prescription pain relievers without a prescription and 22% of teens say the same thing about Ritalin and Adderall. In addition, 20% of teens believe that pain relievers are not addictive at all.

REGIONAL ADOLESCENT MISUSE/ABUSE OF OPIOIDS

Prescription drug misuse and abuse by teens continues to be a significant health problem today and it is threatening the well-being of American adolescents. Currently, 24% of American teens—that is almost one in four—admit to misusing or abusing a prescription drug at least once in their lifetime.¹¹ This is a 33% increase between 2008-2013 and a much larger problem than many parents and educators may realize.

Approximately 6.1 million Americans abuse or misuse prescription drugs.¹² Abuse, particularly of prescription painkillers, has serious negative health consequences and can even result in death. Overdose deaths involving prescription painkillers have quadrupled since 1999 and now outnumber deaths from heroin and cocaine combined.¹³

Sales of prescription painkillers per capita have quadrupled from 1999 to 2010 and the number of fatal poisonings due to prescription pain medications has also quadrupled¹⁴. In fact, enough prescription painkillers were prescribed in 2010 to medicate every American adult continuously for a month.¹⁵ Each day, around 50 Americans die from prescription painkiller overdoses¹⁶. These drugs are responsible for more than 16,000 deaths and 475,000 emergency department visits each year.¹⁷

¹¹ The Partnership at Drugfree.org, 2013

¹² Substance Abuse and Mental Health Services Administration (2012)

¹³ Topics in Brief: Prescription Drug Abuse (2013)

¹⁴ Ibid.

¹⁵ Centers for Disease Control and Prevention (2011)

¹⁶ Ibid.

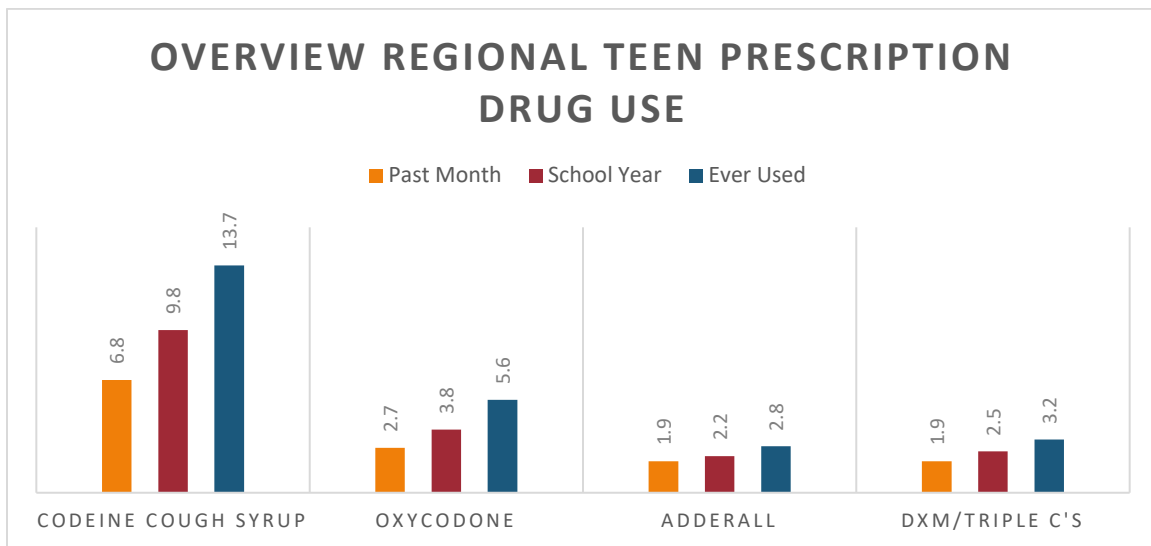
¹⁷ Trust for America's Health (October 2013)

A 2011 study estimated that in 2006, nonmedical use of prescription painkillers imposed a cost of about \$53.4 billion on the U. S. economy. This cost included \$42 billion in lost productivity, \$8.2 billion in increased criminal justice costs, \$2.2 billion for drug abuse treatment, and \$944 million in medical complications.¹⁸

OVERVIEW

Region specific data regarding prescription drug use or abuse is relatively limited. Prescription drug misuse and abuse was not the focus of the 2014 VOICES Community Coalition Survey, but it contained one question concerning teen prescription drug use: “During your life, how many times have you taken a prescription drug without a doctor’s prescription?” Only 9.7% (N=17) of Lubbock County teens who participated in this survey reported ever taking a prescription drug without a prescription. This is consistent with the Amarillo data from TPII that reported a rate of 9.9% in 2013.

Figure 1: Overview Regional Teen Prescription Drug Use¹⁹



Data Source: Texas Student Survey of Drug and Alcohol Use, 2016; Regions 1-2

Interestingly, prescription drug misuse and abuse seem to be trending down in Region 1. Teen misuse and abuse of prescription drugs seems to be declining significantly (-5.6%) in our region over the last five years. This decline is counter to the national trend (+33% between 2008-2013) and further research is needed in order to understand and identify the factors contributing to the decline.

In order to actively curb the trend of teen prescription drug misuse and abuse, parents and caregivers must safeguard all prescription drugs in the home, educate themselves about the dangers and risks of misuse and abuse of these drugs, and collect and responsibly dispose of unused or expired medications.

¹⁸ Hansen et al (2011)

¹⁹ Texas Student Survey, Regions 1-2, 2016

CURRENT USE

Regionally, 99.7% of adolescents report never trying heroin while only 4.3% believe that heroin is accessible to them at all. Only 0.9% believe that heroin is not very dangerous or not dangerous at all for them to use. It seems that the majority of adolescent opioid misuse in Region 1 is from prescription drugs.

Table 3: Recent Use of Opioids

How recently, if ever, have you used the following prescription drugs not prescribed to you...				
	Past Month	School Year	Ever Used	Never Used
OxyContin, Percodan, Percocet, Oxycodone, Vicodin, Lortab, Lorcet, or Hydrocodone?				
All Grades	2.7%	3.8%	5.6%	94.4%
Grade 7	1.4%	1.5%	2.1%	97.9%
Grade 8	1.6%	2.1%	3.4%	96.6%
Grade 9	1.7%	2.4%	4.6%	95.4%
Grade 10	4.1%	5.5%	7.7%	92.3%
Grade 11	4.0%	5.1%	8.3%	91.7%
Grade 12	3.9%	7.1%	8.8%	91.2%

Data Source: Texas Student Survey of Drug and Alcohol Use, 2016; Regions 1-2

Overall, 94.4% of regional adolescents report never using prescription opioids not prescribed to them, although it is more likely that they might have used as they get older. Regional adolescents are most likely to misuse codeine cough syrup (13.7%). In fact, only 5.9% report that using prescription drugs that are not prescribed to them is not dangerous.

CONCLUSION

Teen misuse and abuse of prescription drugs seems to be declining significantly (-5.6%) in our region over the last five years. This decline is counter to the national trend (+33% over 2008-2013) and further research is needed in order to understand and exploit what factors are contributing to this declination.

Nationally, prescription drug misuse and abuse constitutes a health epidemic that threatens adolescents and adults alike. Each day, 50 Americans die from prescription pain medication overdoses. These drugs are responsible for more than 16,000 deaths and 475,000 emergency department visits each year.

Both teens and parents seem to share similar misconceptions concerning prescription drug misuse and abuse. 16% of parents and 27% of teens believe that using prescription drugs to get high is safer than using street drugs. 33% of teens believe that it okay to use prescription drugs that are not prescribed to them in order to deal with injury, illness, or pain.

Overall, our region seems to be experiencing less misuse and abuse of prescription drugs by teens than the national average. However, 13.7% of regional teens self-report using codeine cough medicine without a prescription. This is certainly too high. Parents can reduce the likelihood of their teenage children misusing or abusing prescription drugs by learning about the dangers and risks of this behavior and communicating these risks to their teens. Teens who have learned “a lot” or “a little” from their

parents or grandparents are less likely to misuse or abuse prescription drugs over their lifetime than their peers who learn “nothing” from their parents.

KEY FINDINGS

- Teen misuse and abuse of prescription drugs seems to be declining significantly (-5.6%) in our region over the last five years
- 8.8% of regional 12th grade students report abusing hydrocodone at least once
- 3.9% of regional 11th grade students report abusing Adderall
- 94% of Lubbock-area teens report that parents believe Rx drug misuse as wrong
- 7.1% of regional 12th grade students report abusing hydrocodone during the school year
- 16.4% of regional 10th grade students report abusing codeine cough syrup
- Nationally, 1 in 5 parents report giving their child a prescription drug not prescribed for them
- 9.5% of regional 12th grade students report abusing codeine cough syrup in the past month
- Each day, 50 Americans die from prescription pain medication overdoses

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APPENDIX: REGIONAL PARTNERS AND COALITIONS

Impact Futures is a drug-free community coalition serving the Amarillo and Canyon areas. Their mission is to provide awareness of substance abuse prevention, intervention and treatment services in the Texas Panhandle. They provide opportunities for collaboration and partnerships with interested members who wish to respond to opportunities requiring a community coalition. Their vision is to ensure a healthier community by building assets, strengthening Protective Factors and reducing Risk Factors in the community.

Members of Impact Futures include representatives of youth and adults, parents, businesses, media, schools, youth and adult-serving organizations, law enforcement, faith-based community, civic and volunteer, healthcare, local government and other non-profit organizations. Together, members provide services and programs that educate people about the dangers of synthetic cannabinoids (and other drugs) in order to prevent the selling and consumption of these substances.

Texas Panhandle Poison Center/ Texas Tech University Health Sciences Center School of Pharmacy (TPPC) is part of the Texas Poison Center Network (TPCN) - six poison centers that serve the State of Texas. The mission of TPCN is to reduce morbidity and mortality related to poisonings; including poisonings that occur as the result of substance use, misuse, and overdose (intentional or unintentional). While TPPC's primary service region is that of the top-most 71 counties, the network call routing system results in calls from other regions of the State as well.

Poison centers provide poison treatment recommendations to both home callers and callers from healthcare facilities (i.e. healthcare providers). They also conduct follow up calls as needed to determine patient status and/or need for further treatment. Additionally, poison centers participate in surveillance activities to identify potential outbreaks of food poisoning or other public health threats, such as chemical spills.

The National Poison Data System, which includes Texas Poison Center Network data, is reviewed regularly by the Centers for Disease Control & Prevention (CDC) and the Texas Department of State Health Services. Detailed documentation on each poison case is maintained and includes age, gender, substance of exposure, clinical effects, treatment, patient outcome, and county in which the exposure occurred. Cases are reported to poison centers on a voluntary basis. Poison services include public and professional outreach, treatment, and prevention education. TPPC answers 25,000-30,000 calls each year.

In 2009, TPPC and Texas Tech University Health Sciences Center School of Pharmacy developed the Medication Cleanout program; an initiative to prevent poisonings, abuse, and misuse while protecting the environment. Medication take back events are conducted twice each year in Amarillo, Abilene, and Lubbock and to date, have collected over 40,000 pounds of unused medications for appropriate disposal. Law enforcement partners for these events include the Amarillo and Abilene Police Departments and the Lubbock area Texas Department of Public Safety as well as the United States Drug Enforcement Administration. Additional partners include the Lubbock County VOICES Coalition and Hendrick Health System – Abilene.

University Medical Center's Nurses Educating on Illegal Drugs & Synthetics (NEIDS) is an outreach group of registered nurses that believe synthetic marijuana and other illegal drugs kill and harm too many people. Their mission is to provide education to the public on the health risks and hazards of the use of synthetic marijuana and other harmful drugs.

These medical professionals hope to accomplish their mission by using public service announcements, focused educational offerings to school age children, point of care education, and working with local coalitions against synthetic marijuana. They support new or revised legislation of local and state laws to halt the sale, distribution, and the manufacturing of these synthetic compounds and illegal drugs.

Although a new organization, members of NEIDS are committed to their mission and have recently testified before the Texas Senate Criminal Justice Committee as to the devastating effects of synthetic cannabinoids.

VOICES of Hockley County²⁰ is a community coalition, funded by Texas Department of State Health Services (DSHS), whose purpose is to encourage community mobilization to implement evidence-based environmental strategies with a primary focus on changing policies and social norms in Hockley County to prevent and reduce underage drinking and marijuana and prescription drug abuse. Their mission is to empower communities to create positive changes in attitudes, behaviors, and policies to prevent and reduce at-risk behaviors in youth with a unified focus on alcohol, marijuana, and prescription drugs.

Members of this coalition are people who wish to help youth make better choices. These people are from a wide range of organizations that represent Hockley County. These volunteers include people from civic groups, local churches, city government, medical professionals, school officials, humanitarian organizations, and young people themselves. Anyone who wants to help make Hockley County a better place to live is welcome to join.

VOICES keeps active in the community through several programs aimed at making Hockley County a better place to live. Each year VOICES sponsors the Back-to-School Kickoff where backpacks filled with school supplies are given to students who need them. Twice a year VOICES conducts a Medication Cleanout where old and expired prescription medication is collected and safely disposed of. Through the school year, volunteers conduct youth prevention programs and other community service projects.

As part of their mission, Hockley County VOICES conducts a community needs assessment that looks at how teens are misusing marijuana, alcohol, and prescription drugs. As part of this, volunteers conducted a survey focusing on how Hockley County teens perceive and consume alcohol.

VOICES of Lubbock County Community Coalition is funded by the Texas Department of State Health Services, established for the purpose of assisting the community in developing policies, procedures and activities to prevent youth from using alcohol, marijuana, prescription drugs and other drugs.

Their mission is to empower communities to create positive changes in attitudes, behaviors and policies to prevent and reduce at-risk behavior in youth with a unified focus on alcohol, marijuana and prescription drug prevention. Recently, they have focused on preventing synthetic cannabinoid abuse as well.

²⁰ Volunteers Offering Involvement in Communities to Expand Services (VOICES)

Warriors against Synthetic Pot (WASP) is an organization dedicated to the eradication of synthetic cannabinoids. Ultimately, they are working to stop the selling and using of these drugs by influencing legislation to increase the legal consequences of pushing these products.

WASP is active at both the local and state levels. In Lubbock, they pushed the Lubbock City Council to action, protested the sales of synthetic pot in front of stores known to sell it, and aided Lubbock police in finding those places that are selling. They have also gone to the Texas State Capitol building and contacted local State Representatives concerning synthetic cannabinoids and they have testified before the Texas Senate Criminal Justice Committee as to the devastating effects of these drugs.

Although this organization originated in Lubbock, another chapter has started in Plainview and other chapters are planned state-wide.

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