Underage Drinking

According to the National Institute on Alcohol Abuse and Alcoholism, alcohol is the most widely used substance among America's youth. Although it is illegal for people under 21 years of age to drink alcohol, adolescents and young adults from 12-20 years of age drink almost 4% of all alcohol consumed in the United States. While youth drink less often than adults, adolescents tend to consume higher quantities of alcohol per occasion. In fact, statistics show that 90% of all



alcohol drinks consumed by youth are consumed through binge drinking.

Teens may try drinking for a variety of reasons including peer pressure, to escape stress, to fit in socially, or even boredom. Teens may also experiment with alcohol because of misinformation, not fully recognizing the risks associated with underage drinking. In addition, many teens report that alcohol is easy to access. In 2021, among adolescents who reported drinking alcohol in the past month, 99.7% of 12-14 year-olds and 84.7% of 15-17 year-olds reported getting it for free, (National Survey on Drug Use and Health, SAMHSA). In many cases, adolescents have access to alcohol through friends or family members or find it at home.

According to the American Academy of Pediatrics, underage drinking is a serious health issue and poses a range of adverse consequences. First and foremost, it is important to recognize that the teenage brain is more vulnerable to alcohol than the adult brain. This is because the teenage years are a critical time for brain growth. As such, underage drinking can interfere with normal brain development and change the brain over time. Specifically, frequent alcohol use can have a negative impact on regions of the brain that handle decision-making, learning, and memory. Additionally, alcohol can pave the way for addiction when the brain is still maturing. Several studies have found that early-onset drinking is linked to the risk of greater substance abuse problems later in life. Research shows that people who start drinking before the age of 15 are more than 5 times more likely to develop an alcohol use disorder later in life, compared to those who only drank after reaching the legal age of 21. The risk of developing an alcohol use disorder is even higher among teens who have a family member who has struggled with addiction. Teens who drink are also more likely to experience problems in school, social problems, adverse mental health issues (including a higher risk of suicide), abuse of other drugs, and legal problems, compared to teens who abstain from alcohol until the legal age of 21.

While educators and other youth-serving advocates can play a meaningful role in preventing underage drinking, parents and caregivers are a leading influence in shaping a young person's attitude toward

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alcohol use. Research shows that parents are the number one reason kids decide not to drink (American Academy of Pediatrics). Prevention starts by engaging in ongoing conversations about alcohol use. Keeping lines of communication open with children and teens can build trust and help them feel more comfortable to ask questions and share concerns. Prevention experts recommend the below tips when talking with kids about alcohol:

- Emphasize that you want your child/teen to be safe and healthy now and throughout their life.
- Rely on information from credible resources such as the Substance Abuse and Mental Health Services Administration (SAMHSA), National Institute on Drug Abuse (NIDA or NIDA Teen), National Institute on Alcohol Abuse and Alcoholism or the Partnership to End Addiction.
- Talk honestly about the dangers of underage drinking and establish clear rules about not drinking while underage.
- Emphasize that drinking or buying alcohol before age 21 is illegal.
- Normalize non-use. Acknowledge that even though many kids do develop drinking problems, national studies show that most teens stay away from alcohol during middle and high school.
- Help youth plan how to handle peer pressure and set expectations about what they should do if offered alcohol (i.e., "If there is alcohol at a party, call me and I'll pick you up").
- Talk about choices and consequences to help them take responsibility for their decisions.
- Teach and encourage healthy coping skills to deal with issues like stress and peer pressure.

For more information on how to engage in conversations with youth about underage drinking check out the below resources:

SAMHSA: "Talk. They Hear You." Substance Use Prevention Campaign Resources <u>https://www.samhsa.gov/talk-they-hear-you/parent-resources</u>

MADD: "Power of Parents" Handbooks

https://madd.org/power-of-parents/

Partnership to End Addiction: "Alcohol- What Families Need to Know to Help Protect Young People"

https://drugfree.org/wp-content/uploads/2021/03/Alcohol-Guide_Families_030821.pdf

References: American Academy of Pediatrics; National Institute on Alcohol Abuse and Alcoholism; National Institute on Drug Abuse; Partnership to End Addiction; Substance Abuse and Mental Health Services Administration

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Stress Reduction and Mental Hygienics

As we know, adolescent mental health has been a growing issue in our culture for a long while now. Increases in anxiety, eating disorders, depression, suicidal ideation, and a great many other mental health concerns have consistently appeared in youth over the last few decades. Today, it's estimated that as many as 1 in 7 people ages 12-19 are currently experiencing a mental health condition. These conditions can be situational, meaning they are brought on by the youth's current environment or events, or clinical, meaning they persist regardless of what the adolescent is experiencing. Whether their concerns are situational or clinical, or even if they aren't experiencing any mental health concerns at all, equipping youth with tools to boost their resilience and decrease stress is vital to preparing them for the difficulties of life, both today and in the future.

One potential aspect of this is teaching youth to practice good mental health hygiene. This can take shape in a variety of ways, with the goal of hitting a "mental reset button". Doctor Hui Qi Tong, of Stanford University, suggests that mental health hygiene need only include "simple practices that improve our quality of life by preventing negative behaviors and providing emotional stability". For instance, a few minutes of meditation or a brief walk in the morning may be sufficient exercises. The key difference from doing these in a traditional sense is to focus on "turning off the auto-pilot". The entire process should be done manually, while thinking only about what one is doing while one is doing it. For example, if the activity is teeth-brushing, one should focus solely on the experience of the feeling of the brush on their teeth, the motion of brushing, the feeling of the water and taste of the toothpaste. If the activity is a brief walk, one could focus on the feeling of the breeze, the sounds of animals or cars, and the swinging of their arms. If the mind begins to wander elsewhere, the goal is to relinquish that thought and bring it back to the exercise. While this may appear to be a simple act, in actuality, setting aside phones, TVs, or concerns for the day is an extremely hard skill to learn. In addition to its calming effects, this practice serves to boost attention span. With the ubiquity of phones and computers, particularly in youth's lives, attention boosting exercises have more importance than ever before and can serve to improve both their emotional control and their performance in school.

Other exercises can be done to help youth deal with stress as it comes up. While it can be challenging during extreme stress, writing about thoughts and feelings can be an excellent way for youth to learn where their sources of frustration are. The constant pressure from their school, social, and family lives can make it challenging to recognize where their stress really lies. Writing their thoughts, whether it's with a regular journal or just as needed, allows them a space free from consequences where they can vent, as well as avoid lashing out due to pent up anger. In a similar way, having teens write about what they're grateful for has been shown to help fight negative emotions. The more specific they are, the better.

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While these tools can be useful in decreasing stress and boosting resilience, there are many others to try as well. A few of these are:

- Regular Exercise: While most youth don't reach this goal, it's recommended that they achieve 60 minutes of exercise daily. This can be a great way to relieve stress, on top of keeping active.
- Prioritizing Sleep: Properly regulating sleep is something everyone struggles with nowadays. Blue lights and caffeine tend to be prevalent at all times of day for youth, but helping them regulate phone usage and caffeine intake before bed can help them sleep more soundly and improve mood throughout the day.
- Combat Negative Self-Talk: For many teens, it is easy to fall into a habit of doubting themselves and their capabilities. When presented with this, it's important to refute that statement. Having them talk through why they're saying the statement and seeing why it's incorrect assists much more than only denying the claim.

Youth mental health can be extremely challenging to support. They're experiencing a period of great change while exploring who they are and who they are becoming. Instilling in them the importance of proper stress fighting habits and mental hygiene can help them not only now but as they move forward with their lives, heading to college and becoming adults. For more resources on mental hygiene, stress reduction, and coping mechanisms, feel free to check out the links below.

https://scipnebraska.com/

https://www.nimh.nih.gov/health/topics/caring-for-your-mental-health

https://scopeblog.stanford.edu/2022/05/11/mental-health-hygiene-can-improve-mood-decreasestress/

https://www.apa.org/topics/children/stress

https://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Helping-Teenagers-With-Stress-066.aspx

https://www.nami.org/Get-Involved/Awareness-Events/Mental-Illness-Awareness-Week#:~:text=Since%201990%2C%20when%20Congress%20officially,Support%20Groups

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RED RIBBON WEEK

The National Family Partnership (NFP), in 1988, held the first ever national **Red Ribbon Week** campaign.

Red Ribbon Week is celebrating their 35-year anniversary! **Red Ribbon Week** allows and acknowledges communities and individuals that collectively take a stand in protecting the hopes and dreams of kids through drug prevention and education as well as a personal commitment to live drug free lives.

Each year the NFP holds a contest, that individuals, schools and/or communities can enter, to help determine what the national **Red Ribbon Week's** theme will be centered around. This year's winner was Danielle Helm, a youth service coordinator from Russell County Middle School in Russell Springs, Kentucky. The winning theme is: Be Kind to Your Mind. Live Drug Free

To learn more about the chosen theme, **Red Ribbon Week** and how you can enter the contest for next year, click on the following link: <u>https://www.redribbon.org/</u>

Red Ribbon Week is October 23 through October 31, 2023. Schools and organizations are welcome to commemorate **Red Ribbon Week** at a time in October that fits into their school/organizational schedule.

With that in mind, the Drug Enforcement Agency (DEA) will hold its annual National **Red Ribbon Rally** virtually this year on October 12, 2023 at 10:00am and it will be available through the entire month of October 2023. Click on the link below to find out more about the virtual rally. <u>https://www.dea.gov/redribbon</u>

You can find out more about **RED Ribbon** Week and/or substance use prevention using the links cited below.

HTTPS://SCIPNEBRASKA.COM/ https://www.redribbon.org/ https://www.dea.gov/redribbon

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NATIONAL STOP BULLYING MONTH

History of Bullying Prevention

In 2006, October was first declared as National Bullying Prevention Month. And the 2nd Wednesday in October is National Stop Bullying Day. This year it falls on October 11, 2023.

Since then, October has been a time to acknowledge that bullying has harmful effects on kids and their families.

And while bullies have been around well before the 1970's, it was not until the 1970's that Dr. Dan Olweus, a psychologist, began to study bullying behavior and its effects.

In 1983, Dr. Olweus developed one of the very first bullying prevention programs for schools in the United States, as a response to the tragic suicide of three boys who were being bullied.

Then in 1999, the heartbreaking and tragic shooting at Columbine High School occurred, which began a movement where not only anti-bullying policies were introduced but efforts were also undertaken to empower bystanders.

What is Bullying?

So what exactly is bullying? Bullying definitions differ from source to source. The Anti-Bullying Alliance defines bullying as "the **repetitive, intentional** hurting of one person or group by another person or group, where the relationship involves an **imbalance of power**." A person or persons intentionally hurting/harming another person or persons through behavior intended to cause harm.

Where it Occurs

We know most of the bullying that is reported occurs and/or starts at school. Bullying at school most of the time happens during less structured times throughout the school day such as during recess, in the hallways in between classes, lunch or the bus. It should be noted that it does also occur outside of school, such as in the youth's neighborhood, or on the internet and social media sites (cyberbullying).

Why do Kids Bully?

There are a lot of different reasons as to why kids bully. Knowing and understanding the motives behind bullying behaviors can help schools as well as parents better address the behavior

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through intervention strategies. Below are some examples of different components that can play a role in bullying behavior:

Peer Components:

- The desire to attain or maintain social power or to elevate their status in their peer group
- Easily influenced by peer pressure (engage in bullying behavior to try to fit in)
- Envy or jealousy of other peers

Family Components:

- Home life where bullying, aggression, or violence occurs
- Parents/caregivers who are too indulgent/lenient
- Home life where there is low parental involvement and little emotional support

Emotional Components:

- Having been bullied in the past or currently
- Feelings of insecurity and low self-esteem
- Inability to manage emotions
- Lack of skills to handle social situations in healthy, positive ways

There are numerous organizations dedicated to helping address or prevent bullying, including Pacer's National Bullying Prevention Center (<u>pacer.org</u>); <u>StopBullying.gov</u>; and <u>Stomp Out Bullying.org</u>, to name but a few. We can all play a role in preventing and stopping bullying.

To learn more in-depth information about bullying and prevention strategies, please visit our website at <u>https://scipnebraska.com</u>

References:

https://www.stopbullying.gov/prevention/at-school https://nationaltoday.com/national-stop-bullying-day/ https://www.pacer.org/bullying/nbpm/ https://scipnebraska.com/newsletters/archives/

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