

[Music]

Ivette:

Hello, I'm Ivette Torres and welcome to another edition of The Road to Recovery. Today we'll be talking about mental and substance use disorder issues among youth and young adults. Joining us in our panel today are Robert Ashford, Program Director, Collegiate Recovery Program at the University of North Texas; Sasha McLean, Executive Director, Archway Academy, Texas; Ivana Grahovac, Executive Director, Transforming Youth Recovery, California; Sophie, a young person in recovery and recovery high school student in Texas.

Ivette:

Robert, why is it important that our nation focus on substance use disorder issues and mental health issues within the population of high school and college students?

Robert:

I think it's a great question, first, and I think as we look at the disease of addiction and substance use disorders on the spectrum and then looking at mental health and the co-occurring, there are issues in mental health crises or epidemics in the country that if we're looking towards creating success for our young people as we look towards the future, who's really going to progress into these roles of creating jobs or running companies or being in government if we don't set them up for success for barriers whether it's a disease or a mental health concern. I mean really how are we allowing success to happen without these disorders and diseases are allowing them not to finish school, not to get to college. And if we look at the research, progression from a high school to college to higher education is absolutely necessary to set them up, to make sure they're successful in their adult lives. I mean that alone, the loss productivity, the lack of education, these are issues that deem whether or not we're going to be successful in the future of our country, so it has to be a concern, it has to be a major issue.

Ivette: Thank you. Ivana, how prevalent is this issue?

Ivana:

There is a rather high prevalence of substance use, misuse and overuse on college campuses. It affects about 30% of the student body, somewhere along the spectrum of substance use disorders.

Ivette: So in high school what would you say, Sasha?

Sasha:

It's really interesting because there's some fantastic national statistics out there but every community is different. There are some national norms but what we experience in Houston is an extremely high rate of young people abusing medication, especially prescription drug medication. And we're seeing the onset of use lowering every year.

Ivette:

Very good. And, Sophie, talk to us a little bit about your own experience in high school and prior to you joining a recovery high school. What was that like?

Sophie:

Well, I went to an all-girls Catholic private school my freshman year and even though I wasn't in like the big public school like HIST, part of that down in Houston, the amount of unawareness there and the access that I had to all different kinds of drugs, and I guess just the lack of support in the environment as a whole, just the fear that was associated with anybody talking about that or getting caught. It created an environment where I thought that if I asked for help that meant that I was going to get punished. And so before getting into recovery and going to Archway which I started my sophomore year, it was everywhere. It was all around me and even the people that weren't a part of it, everybody knew kind of what was going on but nothing was being done about it. It was just one of those things that everybody acted like wasn't happening unless they were getting in trouble for it.

Ivette: What are some of the warning signs that parents and others should be aware of?

Sophie:

I think some of the most significant ones are—for me at least, it was just complete isolation. That was something that I noticed a lot with me and the people that I used to use with. We were isolated. We were very closed off from the people around us at school. We didn't really talk to anybody, we didn't make eye contact with anybody. For me, I felt like I always had something to hide. I felt like I always had something to be judged about. And for me it was a lot of that, I guess, in relation to me also being depressed, having a lot of anxiety, created I guess a very isolated and very closed off—like that was how I acted everywhere I went at school.

Ivette: Thank you.

Robert:

If I could add to that, I think if we're looking at warning signs whether it's substance use disorder or the occurrence of mental health concerns, outside of isolation which is absolutely a huge one for populations across the gamut of young adults and emerging adults whether it's personal hygiene, whether it's isolation or not engaging in these activities that they have for a large part of their adolescence. We see starting to break the rules or these conceptions of what a well-behaved young adult is because they stop, they lose that interest whether it's drug seeking behavior or lack of engagement because of depression if it's on the mental health side, and then we see a transformation kind of overnight in some cases, and in other cases over the course of the adolescent growth of things beginning to change in a negative consequence way. Not all the time, especially on the mental health side but we see the person begin to transform in a way that is not kind of contiguous with what we expect of a normal lifespan of development.

Sasha:

And I'd love to add as well, one of the most common misconceptions I hear from parents is that my kids are playing sports, but their grades are high, they're a part of Boy Scouts, they're a part of all these after-school activities, so it can't be my child struggling with a co-occurring health issue or a substance use issue. Sometimes the warning signs are small and if parents aren't tuned in and significantly aware—

Ivette: Why don't you talk about what are the small warning signs.

Sasha:

Absolutely. Things like shifting in friend groups, you know? Looking for peer support out of kind of the normal friendship circle that those students had. Sometimes isolation doesn't have to look significant, like never coming out for family dinner or total avoidance of family members. But sometimes those little shifts are what parents need to be focused on; the little shift of more time away, more time with social media, less time engaging with the family, money coming up missing whether it's \$5 or \$500. I think what we experience as parents wait for the warning signs to be so big and so significant that their kid could be in grave danger versus paying attention to the smaller warning signs and addressing them when they're small.

Ivette:

Sasha, there are some very, very severe risky behaviors associated with using young adults that are engage in substance use disorders. You yourself are in recovery. Can you share some of those risky behaviors?

Sasha:

Oh, absolutely. You know, I think part of adolescence is novelty, looking for novelty and excitement and there's some appropriate risk taking behavior that happens during that developmental time in life that is appropriate for young people that parents shouldn't be afraid of. But we're talking about things like promiscuity and students looking for acceptance in their peer group by doing things wild, crazy, looking to make a name for themselves. We've also seen a lot of behavior where students begin to do poorly in classes not because of an ability issue but because of a perception issue around wanting to fit into a culture in their school about what cool looks like and how to fit into the cool group. And sadly in our culture, being really smart is not the cool kid group. So there are a lot of behaviors and that's a risky behavior because it's gonna set them up for some poor outcomes later in life.

Ivette:

Sophie, what are some of the steps that need to be taken to help students so that they're not adversely affected by substance use disorders?

Sophie:

I think that bringing a lot more information and a lot more awareness into the school environment, not necessarily in the classrooms but just offering more support like with academic staff members. Like for me, guidance counselors, I never went to them because it felt like they couldn't relate to me or they didn't really know what I need or they didn't really know what I was talking about. I never talked to them because like I said before, I thought that I was gonna get punished. I thought I'd get kicked out of school. So I think that breaking down the, I guess, stigma that we'll get punished or we'll get sent away or kicked out, whatever, with seeking out help with that stuff. I think that really emphasizing that there is support that we can get at school would make a tremendous difference and I think that teachers, school professionals making students aware that they know what is going on and they know there are lots of different ways that they can help us would make a huge difference rather than just acting like it's not going on or leaving us with the impression that we'll get in trouble.

Ivette: Ivana, I wanted you to add because I know that you're totally engaged in this.

Ivana:

Yes. I would like to say that parents play a really large role in setting an environment where students and their children can feel empowered to share about issues coming up in their life. So if parents devote some of their time each day maybe over a meal to talk about in this family it's okay to come to us when you're having an issue no matter what. Even if you're struggling with alcohol or drugs, you can come to us and we will support you and love you no matter what.

Ivette:

That's highly, highly, highly important. Robert, what other roles other than what Sophie has just mentioned, can educators and campus or high school community play in really preventing or getting out prevention messages?

Robert:

I think for across the gamut of professionals in settings whether it's in high school or in a Collegiate Recovery Program or a university institution of higher education we need to look at the message that we're sending and not necessarily the content but the way that we're sending that message. We see a movement acting director of the ONDCP, Michael Botticelli, talks quite frequently about this, that we're talking about individuals, humans first with a substance use disorder or with a mental health concern. They're not substance abusers; at best probably or at worst maybe they're misusing a substance. So when we're engaging, when we're sending those messages, we need to talk about them as humans, that we understand that these things are going to happen. Here are some resources, here's the services you might need to overcome or get through this issue rather than saying, that's wrong or this is a behavior problem. These things for adolescents and especially young adults continue to happen and by making them feel shamed about themselves we're not preventing anything. If anything, we're sending them further into isolation and not helping. So I think the most important is to talk about it in a positive light.

Ivette:

Absolutely, and when we come back, we're gonna continue to talk about how to prevent some of the problems even before they begin. We'll be right back.

[Music]

Pamela Hyde:

It's really important to focus on mental health issues and substance abuse disorders for young people especially in high school and college because our data shows us that between about 18 and 25 we have some of the higher rates of substance abuse issues and some of the lower rates of help seeking. We also have pretty high rates of suicidal behavior during that age group. We also know from research that mental health issues in adulthood start before the age of 14 about half of them before the age of 14 and frankly about three quarters of them before the age of 24.

[Music]

Female VO:

We try to hide our truths about our mental and substance use disorders from the world and sometimes from ourselves. Saying "I'm fine" is a façade. By facing our problems, recovery

begins, and we are empowered to speak our truth. Join the Voices for Recovery. Speak up. Reach out.

Male VO:

For information on mental and substance use disorders, including prevention and treatment referral, call 1-800-662-HELP. Brought to you by the U.S. Department of Health and Human Services.

Ivette:

Welcome back. Sasha, we've talked a little bit about negative effects, so can we broaden that and for you to really delineate what other negative affects might young people and teens face when they are engaged in substance use disorder.

Sasha:

The consequences are significant for a lot of our young people, including involvement in the criminal justice system, health issues, family issues, peers, social-related issues, a lot of teen pregnancy is created with some of the poor choices while under the influence. So when we talk about long term consequences for young people, they're facing significant challenges. The difficult part sometimes is making sure young people understand how serious the consequences are because we've got the parental voice saying, hey, poor choices lead to poor outcomes; but we've got the media and we've got the music industry and we have the cool kids all sharing something very different about how fun the lifestyle is, how engaging it is. And it's really I think difficult for young people when they're hearing kind of those two sides of the substance use issue.

Ivette: I see Sophie shaking her head yes. Do you want to expand on that?

Sophie: Well, I think that there are a lot of negative consequences that are complete just—there are immense outcomes from substance abuse and alcohol abuse, and I think that a lot of the times these consequences are either made—they seem like not big deals a lot of the time or it's just experimentation or they are looked past because of either like a denial factor from the parents or kids just not wanting to really pay attention to it or not wanting to stop what they're doing, and I think a lot of the time it's very under-dramatized and it is something that should be paid more attention to because it gets worse and worse. It doesn't stop with just one negative consequence that may seem like it can be brushed past or just brushed under the rug.

Ivette:

Ivana, should parents be playing a larger role in what they're saying to their children and what they're doing within the household to address these issues?

Ivana:

Absolutely. I'm hearing we're discussing the perception of outcomes and consequences that you have as a result of their substance use disorder, and sometimes when a student finds themselves struggling amidst a low GPA, criminal convictions, being kicked out of school and then the opportunity to get sober and get well is presented to them, they may feel that they have dug themselves so deep into a hole that there's no chance of them ever gaining recovery and a place in society. So parents can really do a great part in helping their student with

resiliency and being encouraging, supportive and absolutely empowering them to believe in themselves and in their communities, that they can succeed not despite their experience with addiction but because of what they will receive in their recovery.

Ivette:

Absolutely. And, Robert, you are a very active member of young people in recovery and they have gone out and some of the members of your group have actually gone out and talked to high school students about your own experiences.

Robert:

Absolutely. It started as an initiative that when we look at prevention, are we leveraging not only experience from individuals that lived lifestyles that have been in this but also how do we leverage recovery resources and practices to really prevent. And I think a lot of that is by going out and telling the realities of it. When we look at prevention messages, a lot of it is here are the negative consequences, here's what could happen, but within the context of that message or the confines we don't talk about the other side; what does recovery look like, here's what's possible, here are some of the access to resources you can go out and find in your community. So by sending in people that are living in long-term recovery from a variety of disorders and concerns we give those students or those young people and teens the access, the ability to know that these things also are out there, it's not just negative consequences but here's what you need to be successful when this happens.

Ivette:

Have you done some of that yourself to some of the high schools, and how do you feel that the students have reacted once you tell them your story?

Robert:

Yes. First off, I have gone out and done it and I think the reality is that when we look at teens and young adults, oftentimes from an adult perspective like well, we know best, we're going to tell them the truth or we may think that they're naïve; the reality is they're very, very smart and they know when somebody is coming in and just kind of paying lip service to the message and they know when somebody is being authentic and I think being an authentic self is something that translates regardless of how old you are. So when we are doing it, when I've done it, they are listening with attention and saying, this guy is telling me his life experience and what he's saying is real, this is a message that I can take home and count on because it's not an adult sitting up front and just telling me don't do this because it's wrong. It's somebody that's been there and I think that authenticity goes beyond anything that we've done in high schools with prevention.

Ivette:

Sophie, you are about to graduate from a recovery high school. Tell us a little bit about your experience in that, how that has helped you get your life back together.

Sophie:

Being in a recovery high school, this is my third year at Archway in Houston and having the support there and knowing that I can go to school and I will be taken care of and the things that I need help with and the things that I need support with emotionally, mentally, physically, all of

those things—my needs will be met at Archway not only by the support staff there but by my peers. And knowing that I have a common goal with everybody around me at school, it changed my life. I think it honestly saved my life. It allowed me to really access my potentials and really see my capabilities and, I guess, develop different passions for things and really like paved my way into my future which I'm extremely excited about. Graduating high school, that wasn't even something that I think I'd be able to do or that I thought I would be able to do a couple of years ago. It wasn't something that I wanted to do and now I'm excited to go to college next year. I'm excited to see where my life is gonna end up and I think that having a community and an academic environment, that really, really helped me discover different things about myself and really showed me different ways and different solutions of how I could live my life and how that could be fun and what it could look like. That completely impacted where I'm at today and where I'm going.

Ivette:

Were you skeptical when you first went in, in terms of what this environment would help you achieve?

Sophie:

I had my own personal—like I was skeptical about changing my behaviors but it had nothing to do with the environment. It had everything to do with me just not wanting to. I would look around me and every kid that I saw there was happy. Everybody was joyful and I was like, I want that but I don't know if I'm willing to do the things that it takes to get there. It was really hard for me to let go of my old behaviors and my old way of thinking.

Ivette:

But that environment becomes so supportive, correct Sasha, that then it just generates the desire, I suspect, for the students to thrive and grow.

Sasha:

Absolutely. You know, traditional high schools tend to be very recovery hostile environments which is why recovery high schools were created because a lot of students were going off to residential treatment facilities, they were experiencing the beginning of hope and recovery and what that would look like. They were feeling inspired and then they would return back to the high school with the same old people and in the same place and were struggling to be the new person they wanted to be in that same old environment again. So the purpose of recovery high school is just to give students a place to go where everyone in that system, teachers, counselors, fellow students respect recovery, respect the positive decisions that the students are making, making a big deal out of the joy of recovery, out of service work, out of building self-esteem, and that kind of becomes the new contagious behavior.

Ivette: And, Ivana, the broader community also needs to play a role, correct?

Ivana: Absolutely.

Ivette: And how is that?

Ivana:

Absolutely. At Transforming Youth Recovery we believe in a capacity building approach to recovery communities and recovery programs on campuses, and so that means mobilizing the assets, the places in the community that respect recovery by opening more doors for a young person to build connections, to build relationships, to have positive experiences, the more they will be set up for a successful life.

Robert:

If I may...At the University of North Texas Recovery Program we were a grantee of one of Transforming Youth Recovery's initiatives to provide some seed funding to create programs and their approach to capacity building is one that we, through their help, successfully utilized. And I think what we found is that we often think we're siloed or we don't have the support but finding allies in the community with assets and services that already exist through education by going out and talking to them and bringing them into the fold of recovery supports, the support that has increased exponentially through that asset leveraging approach that they taught us has been huge. We're allowing—not only do we need less physical resources, we can leverage other support services to help our students and I think that is—when we look at expanding these to around the country, that's what's got to happen. We've got to leverage what already exists plus create new safe spaces and communities.

Ivette:

And when we come back, I want to talk about the dynamics of how one goes about to set up one of these programs. We'll be right back.

[Music]

Tim Rabolt: Students for Recovery is a peer to peer support group for students on campus at GW who are in long term recovery or seeking recovery from any mental health disorder, whether that be a substance use disorder, eating disorder, depression, anxiety.

Alexis Janda: Our recovery community exists because of our students. It really all began because our students on our campus made themselves known and said, "Hey, we are here, we are important, and, you know, we want help. We want to be able to thrive on this campus, and we just want your support."

Tim Rabolt: I came to GW with this dream that I'm going to like the closest meeting on campus and find tons of kids in recovery. And no matter where I went, I didn't find any and I couldn't believe this school has 25,000 kids and there is no one else I know that is in recovery. Basically, we were working with an administrator and she knew some other students who also had been struggling with substance use disorders and drinking problems and things like that and she said okay, next month we're going to get everyone together in this conference room and we're going to see what we want to do. And that's how it started. Since then, we have met every single week that school has been in session. The nature of our meetings and how we structure is that it's open to anyone. We don't associate with any particular pathway to recovery like "12 steps" or "smart recovery" or anything like that and the fact that we don't limit ourselves to substance use disorders, it allows general recovery topics like "triggers" or "practicing honesty" or "dealing with family and relationships" and I think that's why it has been so helpful to so many students over the past semester and the past couple of years.

Alexis Janda: Every campus has students who are in recovery from something.

Tim Rabolt: We can't be secretive any more. The only way we're going to get help is if we're saying that we need help. It's up to us and especially my generation to start speaking up and say what's going on, what we need and why we need it.

Alexis Janda: Tim for me is this individual who has worked so hard to establish a community on our campus – not just for himself, but for his peers because, being in recovery, he knows how difficult it is, and he knows what he went through his freshman year, and he doesn't want others to have to go through and experience that.

Tim Rabolt: If *Students for Recovery* didn't exist, I think my collegiate experience would be non-existent as well.

Alexis Janda: Recovery truly is a life or death situation for our students.

Tim Rabolt: People are dying, every day. Over 120 overdosed deaths every single day. Tomorrow, one of our students could relapse and die.

Mark Levine: We talk about making history here; Tim is making history. We want our students to be successful. That's internally being strong for themselves, knowing they can do things. They can help to change the world. They help us to see how tough it is to get through the day, and that's a constant reminder that our work is never done.

[Music]

Sophie:

The symptoms of my alcoholism and my drug addiction appeared long before I decided to pick up and use. Growing up I had a very low self-esteem. I had a very low self-worth, and I didn't know that there was a solution out there for the things that were taking place internally. I was emotionally unstable. Mentally I knew that there were a lot of things that were wrong with me, and I had no idea how to ask for help and talk about them. So I acted out. I destroyed a lot of different aspects of my life. I had a really chaotic family life. Socially, I didn't really have a lot of friends, so I connected with a lot of people that used. I fell off the radar for a really long time, but I showed up making good grades, playing sports, doing the things that kept my parent's attention off of me and my acting out. Before I got into recovery, I had no idea who I was. Getting into recovery, having the opportunity to go to a sober high school and connecting with people who have the same goals that I do have allowed me to regain the things in myself and my true potential that I really thought drug addiction and alcoholism had taken from me. Getting into recovery and having the opportunity to go to a sober high school and connecting with people that have the same goals as I do, and have the support at my academic environment, has allowed me to be the young woman that I am today. This spring I'll have three years sober, and in the fall, I'll be heading to a university. I hope to spread the message that there is a solution, and there is hope for other people who have been through the same things that I have.

Ivette:

Welcome back. Sasha, how can schools, whether they're high schools—and then I'll go to you, Robert, for the university setting—help to strengthen protective factors so that less students fall to substance use disorder?

Sasha:

I think the biggest thing that schools can do is acknowledge that substance use is happening on their campuses and be willing to address it head on; whether that's inviting young people in to tell their stories to students on their campuses, and I think it's a combination of doing some group work like large scale assemblies but then also the individual connection because I think that's one element that's been lost especially as our high schools have grown larger and larger. Now with a campus of 4,000 students it's easy for students to kind of disappear or blend into the wall, and for the individual counselors and professionals that are there that can be addressing those problems to not even know who within the student body needs to be reached out to. And I think that some of the large group prevention techniques are extremely helpful but it's gonna be the one on one...—

Ivette: You mean, for example, like CADCA?

Sasha: Oh, absolutely.

Ivette:

Community Anti-Drug Coalitions of America. They've got a tremendous number of coalitions throughout the country that actually do a lot of prevention work in high schools.

Sasha:

Yes, and I think prevention on the part of student education and then also parent education, offering evening and weekend educational series for parents, offering it in Spanish or in other languages for communities so that we can make sure that all families have an opportunity to know what's happening.

Ivette:

And, Robert, it is particularly poignant the problems that are experienced among college and university campuses. They are written on a daily basis, the Greek community certainly brings in a tremendous amount of challenges for these settings. Do you want to talk to us a little bit about that and what can be done?

Robert:

Absolutely and I think to build resiliency to build these recovery protection factors which I think is really kind of not only in finding recovery if a student does have a substance use disorder or mental health concern but also looking at the general student body, so whether its Partners in Greek Life or in the student organization standpoint or athletics. We have to start talking about it and I think to me that's where the prevention message needs to go is we have to start talking about the realities that 40% of college kids are binge drinking. I mean 40% of college students have a mental health concern and then I mean co-occurring goes even higher if we look at the University of North Texas, but we can't begin to build protective factors if we're not talking about the issue. So I think the first thing that needs to happen is we have 4,000 universities in

this country, we have a little over 120 Collegiate Recovery Programs that even exist. So if you look at recovery high schools, I think there's like 40 for all of the communities in this country. We have to build capacity so that students have somewhere to go and to begin to start to build capacity to build to a point where you can build those factors. You have to have a program and a champion that's willing to have those conversations and I think that's exactly where Ivana comes in and what TYR is doing.

Ivette:

So, Ivana, having said that—thank you, Robert—having said that, let's talk about policies. What do these institutions have to consider as they're laying down policies in order to protect their students more from falling into substance use disorders?

Ivana:

So Collegiate Recovery Programs are not really about preventing students from falling into substance use disorders, they're about creating safe spaces where students with substance use disorders can find the support they need to continue to sustain their sobriety. So the overall goal is to provide a safe place where students in recovery can find peer support and others who are there to support and empower their recovery.

Ivette:

Very true. But, Robert, does that happen overnight at a university or does the university have to consider what its philosophy is and what its policies are related to the establishment of sober living spaces?

Robert:

I think it doesn't happen overnight and it can in special circumstances where the climate is just right where you have champions that do so. If you look at the ones out of the 120 plus that are successful, it had people like Ivana when she was at Michigan or myself at University of North Texas that are champions of the cause that can create that space not overnight but over the course of whether it's three months, six months or a year. But at a lot of campuses, because the messages are so different, it's a punitive process and until that conversation changes and we begin to talk about recovery as not only possible but that it works and what it is, that has to happen first so that the climate is right to establish these safe spaces, and I would continue on that not only does it need to be safe for students that are in sobriety but we have to start integrating mental health into the conversation at the Collegiate Recovery Programs for students that identify as living in recovery from depression and anxiety that also have co-occurring disorders with substance use have to feel safe there and I think they do feel safe but we have to begin to have the integration conversation that we need to have both or space for both. We have an integrated program at UNT and a lot of our students are not only co-occurring but we have our first round of students this spring that four of them are primary mental health generalized anxiety disorder, major depressive disorder. It's highly prevalent and before now the only place they could go is for clinical services and a counseling and testing center. They consider themselves in recovery, some of them for over a year, and now they have a safe space to go to as well. We've built a community by integrating both and I think it's vastly important.

Ivette: Absolutely. Ivana, talk to us about your own personal experience that Robert addressed.

Ivana:

Absolutely. I was 3-1/2 years clean and sober from heroin use when I entered the University of Michigan to pursue a masters in social work, and I expected that I would have a community of support around me like I did at the community college I went to in sobriety. And when I showed up on campus, there was nobody on campus that I could speak to about my recovery, nobody I could authentically identify with and relate to as a staff person, and there were no meetings on campus specifically for students that were part of the University of Michigan. So I felt very marginalized. I felt like nobody had taken the time to consider that there were students who had overcome significant obstacles to gain acceptance into this wonderful institution. And so for a year I went home every weekend to access my recovery supports and when I felt strong enough, I would come back to class. And after a year of thinking that I was going to fail out because what right did I have to graduate as a sober student. I realized I was getting straight A's and that's when I said we're not gonna leave campus the way that we found it. And I had found another group of students in recovery and allies for recovery and we formed a student group called Students for Recovery and it became the formal Collegiate Recovery Program at the University of Michigan.

Ivette: Congratulations.

Ivana: Thank you.

Robert:

That's how change happens. I mean that is the perfect epitome of success from beginning to finish because students create something for themselves because sometimes they don't exist and I applaud that. It's huge.

Ivette:

And I have to commend both of you because our audience may think that this is an easy venture; it really is not. The educational systems, right Sasha, in our nation as wonderful as they are sometimes can tend to become quite closed. So speaking to that point, Sasha, talk to us about what educators can do to really become part of the solution and to help.

Sasha:

Absolutely. Well, in education a lot of times what happens is teachers and administrators choose to focus on just one area of a young person's development and that's the intellectual development part, and they forget that the social development, the emotional development, all of those things also impact how a student is going to perform academically. So if we're only looking at the one area of what are your grades, how did you do on this test, how did you do on this quiz, and we're not taking a look at how are you relating to your peers, how are you fitting into this community, how do you ask for help, what do you do when you experience anxiety at school, then we're really not having the conversations that we should be having with young people and I think that's what leads to young people feeling low self-esteem at school, feeling ignored, feeling like it's a place that doesn't feel safe, it feels sometimes toxic. I mean I hear young people use that word a lot when they speak about education especially at the high school level, that the environment feels toxic to their mental health, toxic to their recovery.

Ivette:

Yes, and we heard from Sophie earlier about those same symptoms. Ivana, I want to go back to you and have you tell our audience really a little bit more about recovery schools in terms of how can recovery schools play a larger role? As both of you have said, it was very difficult to start. What do you want our audience to understand about these institutions and what they offer to students who want to be clean and who want to stay sober?

Ivana:

So as Robert mentioned, there's about 4,000 colleges in America and in 2010 my first job out of grad school was the Director of the Center for Students in Recovery at the University of Texas at Austin. At that time, there were only 14 college campuses with collegiate recovery programs. During that time though that number has grown because the schools have come together to share best practices and to spur this movement on. And now there are 120 collegiate recovery programs in different stages of establishment in America.

Ivette:

Well, I want to get back to this because I'm sure that some of you have done some type of research and you have some numbers related to success stories. So I want to get back to that when we come back.

[Music]

Daryl Kade:

Many individual family, social and community factors influence students' decisions to use alcohol and other drugs. Risk factors for youth substance use include: peer substance use, perceptions of high levels of use among peers, perceived parental approval and low parental monitoring, drug use in the family, poor school achievement or bonding, and the ability to get drugs.

[Music]

Male VO:

For more information on National **Recovery Month**, to find out how to get involved, or to locate an event near you. Visit the **Recovery Month** website at recoverymonth.gov.

Male VO:

For those with mental or substance use disorders, what does recovery look like? It's a transformation. It's a supporting hand. It's new beginnings. When does recovery start? It starts when you ask for help and support. Join the Voices for Recovery. Speak up. Reach out.

Female VO:

For information on mental and substance use disorders, including prevention and treatment referral, call 1-800-662-HELP. Brought to you by the U.S. Department of Health and Human Services.

[Music]

Mark Levine: Our Area Health Promotion Prevention Services – which is an evolution of our Alcohol and Drug Area – is really a true benefit to our students. Bringing several services together in a more accessible location gave us a terrific opportunity. So, we recently moved that area, along with our Student Health Service and our Counseling Services into one larger facility and really the main hub of campus – our Student Union. And that allows everyone to think differently. It's a nice way to kind of break your current strategy and to expand your own thinking.

Tim Rabolt: But just having all the different services together is unbelievably convenient for all the students in our group. I mean having the Medical Services there, obviously, and if someone's feeling sick or doesn't know what to do about this problem, we can tell them Student Health Services is right there in The Marvin Center. So, that's extremely convenient, and then, obviously, the Counseling Services – we use them a lot.

Alexis Janda: Now, especially now that we're all in one place, we are really working together to support one another, whether it is mental health outreach or, you know – for an example – a stress workshop.

Mark Levine: Well, I think it really raises the bar on our potential. We know we look at students more holistically, from a mind and body perspective, and this helps to reinforce that message, so it's not just a symbolic conversational piece – it's a reality. We know now more than before, there are many more students out there who are in recovery, different phases of recovery than we ever identified, or came to us about or realized they needed certain services, programs, support. It still feels very new to us in an exciting way because with this newness is opportunity.

[Music]

Robert:

Today I consider myself a person in long-term recovery, for me means I haven't had a drink, or a drug, or a manifestation of a symptom of my mental health illness for a little over two years. The reason I introduce myself that way is so I can be a face and voice of recovery, because it's very important for me to let others know that not only is recovery possible, but it works, and it works no matter who you are. My recovery journey began really as a child. I came from an upper-middle class family, I was enrolled, I could do anything that I wanted. Good grades, every sport that I wanted to play, and everything on the outside looked just like any other normal kid. But the fact of the matter, is that on the inside, the internal conflict and the damage and destruction that was going on was something that I wasn't aware of, but it continually progressed over my entire adolescence, until I really found recovery. So, when I finally got the gumption because of the love and support of a family and friends, that after I got my third DUI in Texas, that they finally said, which has never been said before in my life, "You need help. There's something that's going on. We want to take a look at this, and we really care about you". It's a message I've never heard clearly before. That day, when I decided to go to treatment, I got lucky in the state of Texas, because of governmental support, and state-level support that there was treatment access for me that I could go in. Those 30 days in treatment was really an eye-opener, because I began to take a look at what was going on inside of me. There were counselors, and other peer support of people that I could talk about the trauma and all the underlying things and my mental health illness and wasn't subjugated to stigmas or labels. It allowed me to finally see

who I was for the first time. It put me on a path to what I call long-term recovery. And it doesn't just end with treatment. Those 30 days of acute care wasn't enough. I needed long-term recovery support, which I think most people do. So, I got to go to a recovery residence hall. I got to enroll in college, and now I get to actually really take part in a collegiate recovery program with likeminded peers and services to support my recovery in a caring environment. And when I look towards the future and where I'm at today, compared to where I was at in my active addiction and mental health concern, I get to be a program director of a collegiate recovery program at the University of North Texas, that changes lives—that saves lives. All of this was possible because my recovery journey didn't end at 30 days of treatment, it's continuous for the rest of my life. And that message, that long-term recovery, whatever that may look like, whether it's abstinence-based, or counseling, or peer supports, it continues for the rest of it. Recovery is a life-long journey, and today I'm glad to know that I'm in it.

Ivette:

Welcome back. Robert, we were talking about success rates earlier, or I wanted to talk about success rates earlier, and I want you to really delineate what your findings are, if any.

Robert:

I think if we look around the country, there's a lot of research that Dr. Alexandre Laudet has done coming out of, from NDRI grants for Texas Tech, starting there and then kind of extrapolating that across and a lot of those success rates nationally hold true that recurrence of use or what is known as relapse, we call it recurrence of use, is much lower inside of these programs; oftentimes less than 6% for students that are involved. So across the board GPA rates are about 25% higher when you look at retention rates, so much of the LGEPTQ plus populations are about 10 points higher inside a collegiate recovery programs than the averages of the university. That's unheard of. So these programs are not only physically responsible from a business perspective for these universities but then you add in the context of social successful outcomes of saving lives, there's no reason not to have them because they are successful. That's the bottom line.

Ivette:

And, Sasha, for recovery high school do we have similar indicators.

Sasha:

Oh, absolutely and we're in the process right now of gathering a lot of great national data because so many of the recovery high schools operate different. Some are private, some are publicly funded, some are a combination of both. And there are a little over 40 plus high school recovery campuses across the country, and at least at Archway Academy what we've experienced is that 86% of our students maintain sobriety with no recurrence of use through the entire school year and we've got a 96% success rate in our students going to college the fall after they graduate. So it's some very impressive statistics and really what it shows is that when you take really brilliant very bright kids who have just kind of had a little detour on their path and you put them in an environment where they're able to be successful where they're surrounded by other kids that are all striving for something different, the contagious behavior becomes looking at colleges, touring campuses, caring about your GPA, addressing mental health issues when they come up, healing within your family. I think that's why we've been seeing such great success.

Ivette:

So we have promise, the much-proven promise in the collegiate program as well as in the high school program. Ivana, if I wanted to start a program, what do I need to do?

Ivana:

It depends if you're a student or a staff person, but there needs to be a champion who is there to cheerlead for the cause of collegiate recovery on campus. We've even seen parents in some communities who have taken up the cause. They've built a compendium of stakeholders that support them in advocating for collegiate recovery on campus and it really starts like a grassroots effort. You have to build your allies, you have to create your mission and you have to reinforce that early intervention is the goal of improved outcomes for treating young people with substance use disorders. And as a staff person at the University of Texas what was very helpful was when SAMSA gave the statistic that between the years 1999 and 2009 the rate of college students seeking treatment increased at 143%. I was able to take that statistic to our President and Board of Regence and say what are we doing as a university to be recovery ready for when these students leave treatment and reintegrate into the college setting, and as a result of these discussions in 2012 the Board of Regence unanimously approved the expansion of collegiate recovery programming for all nine UT system schools within Texas, and they unlocked one million dollars in funding to initially start up this effort.

Ivette:

Let's talk about the students because you made the differentiation between parents or someone at the school that has an interest who wants to start a program. But if students wanted to start a program, and I'm sure that within our audience there will be students who really are listening and what is the first step that they need to take?

Ivana:

When I was a student at the University of Michigan, I needed to do some independent study credits for my MSW and so I was able to connect with some staff members who became advisors to a student group that was recovery oriented, and because of the work of that student group and with the students that we attracted it was then able to become a formalized collegiate recovery programming. So going through the route of a registered student organization whose mission is to create a more recovery oriented campus is a great way to get the door open for a formalized collegiate recovery program.

Ivette:

And, Sasha, in the high schools would that be difficult to do because it's a younger population or is it possible?

Sasha:

It's very possible. I mean the Archway Academy was created by a group of parents and mental health professionals in the Houston area that quite frankly were just tired of going to funerals and tired of being asked what are we doing, and everyone is putting their hands up saying, well,

it's this person's fault, oh, it's the parents, they're not parenting well enough; oh, it's the schools, the environment there is toxic. And so I agree with Ivana, a grassroots movement and it just takes one person in that community to say enough is enough and to start rallying people together, people who have lost their young people to addiction, people who really care about education. It may be an adult in recovery themselves, people in the mental health community whether it's just on the substance use side or strictly mental health that want to come together to make some significant changes. And what's beautiful is new communities are able to now look at communities with established programs to receive mentoring. We have multiple cities come to Houston every year to tour with us to spend two days learning how we've created our culture, meeting with our founding board members because we want to be the hand that reaches out to say we've created this in our community, it's working here, we're proud of it, let us now help you take this back to your community and created it from the assets that you have.

Ivette:

I want to go to Sophie and I want to ask you this. We've talked about the responsibilities of students to help to start programs of college level, college age students that started programs. In your view, is there a responsibility for the students who are participating in sober environments? What is the responsibility of the student as they're going through that program?

Sophie:

Well, we have a huge responsibility in drawing people in, drawing our peers in, allowing them to feel welcome and warm in the environment and also reaching out to people who may be struggling with the same thing that we have. And I think that as a part—like in recovery being of service and giving back, like giving back to the things or the people and communities that gave us the opportunity to have the experiences that we did and also just paying it forward, reaching out to other people whether it's like people our own age, younger, parents, anybody that we can and really showing them what being in recovery is about and showing them how much our lives have changed and being able to relate to where they're at. I think that we have a huge responsibility to reach out to those people and be an icon of hope for them so that they know that it is possible to live a healthy and beautiful lifestyle in recovery as a student in high school.

Ivette:

Very quickly, Robert, I want to have each one of you do a round robin and give us some last thoughts. But before, if someone said we should only do substance use disorders programs and we should keep the mental health over here, you very successfully established an integrated program. What would you say to those doubters?

Robert:

I don't think any of them are doubters. I would say that I think where they come from, their background, may issue a primary purpose kind of focus, and I think there is absolutely a space for that but I think from a university down below standpoint is we look at universities that want to focus on wellness, that want to focus on 360 degree humans. I think we have a responsibility as educators. I'm a student and a program director at UNT, so I would say that you have a responsibility to look at a person as a whole person and I think some of the programs that may

not talk a lot about mental health are integrated and they just don't know it because they accept—like at UT Austin—they accept everybody that comes in. It's such a welcoming environment and the students are co-occurring. They are integrated in the sense that anybody can walk in those doors. So I don't think they're doubters, I think it's just different.

Ivette:

And the fact of the matter is that about 80% of individuals that have a substance use disorder also have a mental condition so we need to really be very, very cognizant of that. Ivana, your final thoughts?

Ivana:

Well, as Executive Director of Transforming Youth Recovery, we are here to support all colleges in building collegiate recovery programs on campus, and we are catalyzing a network of collegiate recovery programs in different stages of establishment and we can connect incoming colleges with more established colleges and really share best practices, toolkits and technical assistance. So please reach out to us.

Ivette:

Okay, very quickly, Robert.

Robert:

I think for the audience that's watching as you look at whether you're a student or an administrator, an educator or family member, these programs are successful. They're changing lives. Not only saving lives but improving the quality of our educational system across the board in long term success. If you want to get involved, look up Transforming Youth Recovery or Young People in Recovery or the Association of Recovery Schools. And thank you for everything that SAMSA and the people in Washington, D.C. have done in advocating to make sure that we are successful in the long term.

Ivette:

Excellent. Sasha?

Sasha:

I think the continuum of care issue is so important especially for young people and a lot of communities have good residential treatment programs and good attentive outpatient programs but there's really not a lot of post treatment, and that's what these support systems are about, collegiate recovery, recovery high schools. It's about making sure that young people have a place for a year or two years after their initial treatment episode.

Ivette:

And they can come and visit you.

Sasha:

Absolutely.

Ivette:

Sophie?

Sophie:

I just hope to see all of this grow so much, especially being a young person in recovery who is benefiting from programs like this. I hope that this continues to grow all over the nations that other young people who have had similar experiences to mine get this opportunity because it is so rare right now. So I hope that it becomes more of a commonality among collegiate programs, high schools, everywhere.

Ivette:

Thank you and we all wish you all the best in your college endeavors. And I want to thank you for being here. It's been a great show. I want to remind our audience that September is National Recovery Month. Visit recoverymonth.gov to get information, do events and talk to people about the wonderful programs that you just heard about today because those are the types of efforts and initiatives that are going to begin to change the tide in this country. Thank you for being here. I appreciate having you.

[Music]

Male VO:

For a copy of this program or other programs in the Road to Recovery series, call SAMHSA at 1-800-662-HELP or order online at recoverymonth.gov and click on the video-radio-web tab.

[Music]

Female VO:

Every September, **National Recovery Month** provides an opportunity for communities like yours to raise awareness of mental and substance use disorders, to highlight the effectiveness of prevention, treatment and recovery services, and show that people can and do recover. In order to help you plan events and activities in commemoration of this year's **Recovery Month** observance, the free online **Recovery Month** kit offers ideas, materials, and tools for planning, organizing, and realizing an event or outreach campaign that matches your goals and resources. To obtain an electronic copy of this year's **Recovery Month** kit and access other free publications and materials on prevention, recovery, and treatment services, visit the **Recovery Month** website at recoverymonth.gov, or call 1-800-662-HELP.

[Music]