

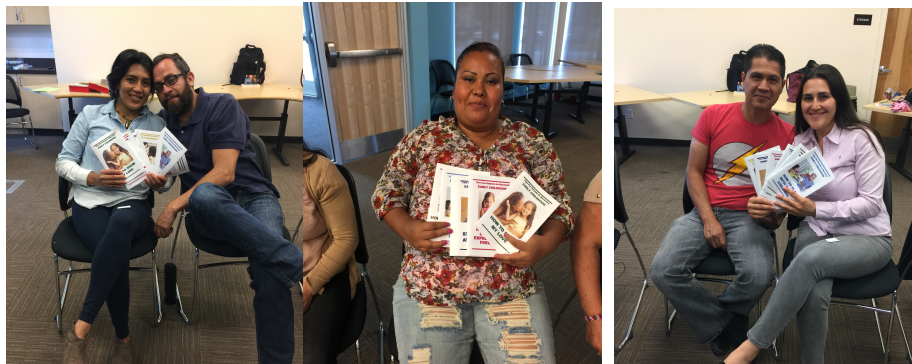


July 2017

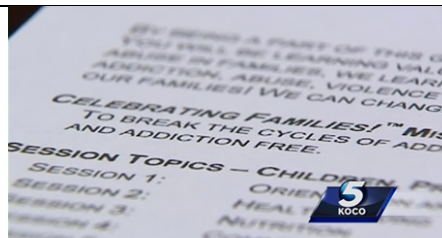
Welcome to Summer!

WHAT IS HAPPENING?

- Rosemary's resolution, proposed last fall at the *International Congress on Women & Addictions*, regarding the need for parenting services for women in early recovery with young children was submitted to United Nations Office on Drugs & Crime.
- Our new booklet series *Tips for Parenting in Recovery – Early Childhood* was completed and distributed to local sites. Topics include how to: *Strengthen Attachment; Communicate with Young Children; Discipline with Love & Respect; Help Children Express Their Feelings; Show My Love; and Play With Young Children*. See order form page 3 of this update if you are interested in obtaining electronic copies.



- Collaborating with NACoA a new Training of Trainers model was developed and very successfully piloted for State of Oklahoma in May. Local presentations were made at Saratoga's Foothill Club on *What About the Children* and at Saint Andrew's Women's Retreat (a supporter of our programs for many years).
- Update on local sites:
 - Uplift Family Services (previously EMQ Families first) provided *CF!* 3 nights a week, two in Santa Clara County and one in Alameda.
 - Parisi House on the Hill (PHOTH) offered the newly developed "CF! Day version" for mothers in treatment with young children with the basic *CF!* in evenings for older children and their caregivers. PHOTH is training all staff on *CF!* 0-3 Critical Parenting Skills so all know, can model, and mentor mothers. New "Intersession" materials for weeks when *CF!* is not offered are being developed.
 - Catholic Charities offered *¡Celebrando Familias!* for families in their community. (Fundors: Santa Clara County Medical Association Alliance Foundation and Saint Andrew's ECW.)
 - ConXion, a new site this year, offered *CF!* bi-lingually had State Senator, Jim Beall, distribute graduation certificates!
 - Translation of 0-3, funded by Cisco Foundation, is nearly complete. The development team included bi-lingual group leaders from Uplift Family Services and Catholic Charities.
 - The new Adolescent version, development funded by El Camino Hospital Foundation, will be piloted this fall by Uplift and ConXion, with evaluation by Dr. Cohen and Research Assistants from SJSU.
 - Evaluation efforts continue with Dr. Cohen and Research Assistants from San Jose State University working on further evaluation of the 0-3 component and a comparison study between clients referred by Dept. of Family & Children Services to Uplift's Differential Response (not receiving *CF!*) and those receiving *CF!*
- Nationally *Celebrating Families!*™ sites continue to grow – we even made several newscasts!



Woman gives back by helping families with parents battling addiction

Adele Burger grew up around parents who suffered from substance abuse. That's how she said she developed an addiction to opioids by the age of 12.

KOCO.COM

<http://www.koco.com/article/woman-gives-back-by-helping-families-with-parents-battling-addiction/10237373>



Local program helping families with addiction needs
 Celebrating Families!™ Daily update ☐ July 8, 2017 KLKN LINCOLN, Neb. — Local program helping families with addiction needs help Lancaster County Adult Drug Court is recruiting volunteers for the Celebrating Families™ curriculum to help families struggling.
<http://www.klkn.com/story/35836712/local-program-helping-families-with-addiction-needs-help>

NACoA released **0-3 Supplement**. The complete evaluation report is available on our website (www.preventionpartnership.us). Evaluators, Drs. Greenberg and Cohen, state in their summary:

Findings indicate that CF! 0-3 supplement supports the development of healthy resiliency factors in families, as well as assisting in interrupting risk factors.... CF! provides concrete programming addressing intergenerational needs in one comprehensive program.

They were particularly interested in responses showing what parents learned

- ❖ Ways to express feelings and avoid situations that trigger strong or difficult emotions.
- ❖ Three dimensions about being parents: roles and responsibilities; specific things they can do (talk, listen, spend time); and the importance of showing affection.
- ❖ The importance of “listening more, talking less”, “taking turns”, using “logic and reason not emotions”.
- ❖ New knowledge about substance use and its harmful effects.
- ❖ “How to celebrate my family”.

Update from NACoA NACoA is now the National Association for Children of Addiction. The Board of Directors determined it was time to be called that which more accurately reflects its mission and programs of the past 35 years. Acknowledging that the addiction, which kills the most people, devastates the most families, and adversely impacts the most children is still alcoholism, NACoA recognizes the extraordinary and tragic current opioid/ heroin addiction epidemic.. It is time to be called what we have always been -- the Voice for the Children who suffer every day in silence as their parents and other loved ones slip away into addiction. Sis Wenger, President & CEO NACoA.

Thank you once again for your support! Because of you, we have continued to serve children and families impacted by substance use disorders. *Celebrating Families!™* is part of the solution for these families. I’m happy to answer any questions. **We can only continue to develop and share these innovative services with your help and support.**

Rosemary Tisch, Director PPI, Program Developers *Celebrating Families!™*

Please refer to the next page for Research Updates.

***Celebrating Families!™* and *¡Celebrando Familias!* are programs of NACoA (National Association for Children of Alcoholics) offering curriculum materials, technical assistance and training services. For more information please contact: www.celebratingfamilies.net**

NEW

From

PREVENTION PARTNERSHIP INTERNATIONAL

Tips for Parenting in Recovery

“Early Childhood”



We are pleased to announce the publication of our first booklet series
Tips for Parenting in Recovery – Early Childhood

TOPICS INCLUDE

- How to Strengthen Attachment*
- How to Discipline with Love & Respect*
- How to Communicate with Young Children*
- How to Show My Love*
- How to Help Children Express Their Feelings*
- How to Play With Young Children*

Continuing our commitment to offering affordable materials: one set of six printed booklets and one CD with reproducible files are being offered for \$35.

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For further information or questions contact Rosemary Tisch— retisch@gmail.com or 408.406.0467

Research Updates

Newborns Exposed To Opioids, Health Issues May Be The Least Of Their Problems Babies exposed to opioids in utero may experience withdrawal symptoms at birth, but these symptoms are treatable. Typically, the babies can go home after a few days or a couple weeks. Dr. Joshua Sharfstein, pediatrician and professor at the Johns Hopkins Bloomberg School of Public Health, says while there's no evidence of "huge, obvious differences" in children who were exposed to opioids in the womb, there is a lot of research showing that the social environment plays a critical role in determining a child's future. Too often, we think about just the baby. We need think about the family. It's really the home they go into that's more important than the withdrawal symptoms. When it reflects an addiction and out-of-control home life — that's the problem. Solutions are to help the mom out of her addiction. There is nothing more important for the baby than that the mom is healthy. NPR, June 30, 2017.

Opioid Overdose Deaths Often Involve Other Drugs National Vital Statistics Report from 2016 analyzed death certificates to identify the specific drugs involved in overdose deaths between 2010 and 2014. Six of the top 10 drugs most frequently involved were opioids. More than half of the deaths caused by each of these opioids involved use of another drug at the same time. Benzodiazepines were involved in approximately one-third of opioid overdose deaths, and alcohol consumption was involved in 21%. Cocaine was involved in 20% and more than one third of fentanyl overdoses. The most common accompanying drug problems were marijuana (20.5%), cocaine (19.5%), alcohol (16.4%), and tranquilizers (11.1%) (Substance Abuse and Mental Health Services Administration, 2016). From *Widening the Lens on the Opioid Crisis Emerging Drug Trends Report—June 2017*. Hazelden Betty Ford Institute for Recovery Advocacy

What Are the Differences Between Trauma & Addiction? *The Journal of Alcoholism: Clinical and Experimental*, published a study which showed a link between childhood trauma and alcoholism

“a child with four or more adverse childhood experiences is five times more likely to become alcoholic. A boy with 4 or more of these adverse experiences is 46 times more likely to become an injection user than others.”

The researchers of the Adverse Childhood Experience further found that the effects of trauma are cumulative and that one of the most destructive forms is “chronic recurrent humiliation” -- name-calling or ridicule. Experiencing trauma does not guarantee that a person will develop an addiction, but research clearly suggests that trauma is a major underlying source of addiction. Neuroscience helps us further the link between trauma and addiction. The section of the brain related to the threat center, amygdala, may become overactive after experiencing a traumatic event — constantly seeking out and assessing threat. This causes the person to become excessively fearful and anxious. The brain’s center for processing memories, the hippocampus, may become under active. Rather than storing new memories, it may get hung up on the memories of trauma and play them on repeat. The brain’s cortex, the center of executive control, becomes caught up in survival instincts. These instincts are like paradoxical distortions — they decrease your ability to inhibit or control certain behaviors. *Huffington Post*, Louise Stanger ED.D., LCSW, CDWF, CIP & Roger Porter, Contributor Writer, Speaker, Clinician, Interventionist 04/17/2017

Turning Negative Thinkers Into Positive Ones “What do you do about people who are always negative?” the theory of Barbara Fredrickson, University of North Carolina, is that accumulating “micro-moments of positivity,” like my daily interaction with young children, can result in greater overall well-being. This research demonstrates the extent we can generate positive emotions from even everyday activities and determine who flourishes and who doesn’t. Repeated brief moments of positive feelings can provide a buffer against stress and depression and foster both physical and mental health. The brain is “plastic” - capable of generating new cells and pathways - and it is possible to train the circuitry in the brain to promote more positive responses.

“*The results suggest that taking time to learn the skills to self-generate positive emotions can help us become healthier, more social, more resilient versions of ourselves ...well-being can be considered a life skill. If you practice, you can actually get better at it.*” Dr. Fredrickson, National Institutes of Health Newsletter, 2015.

Activities fostering positive emotions include: 1. Do good things for other people. 2. Develop and bolster relationships. 3. Establish goals that can be accomplished. 4. Learn something new. 5. Choose to accept yourself, flaws and all. 6. Practice resilience - remember the expression: When life hands you a lemon, make lemonade. 7. Practice mindfulness. *New York Times*, Jane E. Brody, April 4, 2017. (Rosemary: Sounds like our curriculum!)

CHILDREN LEARN WHAT THEY LIVE

THE RECOVERY VERSION

By Tian Dayton, PhD, Inspired by Dorothy Law Nolte, PhD

If children live with parents who are high,
They learn that people are unpredictable and unreliable.

If children live with denial,
They learn to mistrust what they feel and sense.

If children live with shame,
They learn to hide who they really are.

If children live with rage,
They learn to be afraid or act out themselves.

If children live with emotional abuse,
They learn to feel bad about who they are.

If children live with trauma,
They learn to become anxious and despondent.

If children live with addiction,
They learn to become addicts.

If children live with recovery,
They learn that people can change for the better.

If children live with parents who ask for help,
They learn to reach out for help too.

If children live with amends,
They learn to forgive.

If children live with peace in the home,
They learn to feel safe inside.

If children live with dependability,
They learn to trust.

If children live with honesty,
They learn to tell the truth.

If children live with emotional maturity,
They're allowed to be children.



NA
CA NATIONAL ASSOCIATION FOR CHILDREN OF ALCOHOLICS
VOICE FOR THE CHILDREN WWW.NACOA.ORG

Marijuana and Psychosis Studies show a link between heavy pot use and the onset of schizophrenia. For a lot of teenagers smoking pot is thought of as a rite of passage no more dangerous than taking their first sip of beer or wine. But a report commissioned by the National Academies of Sciences, Engineering and cites evidence that heavy pot use, prolonged length of exposure and age at the beginning of exposure may all be risk factors in triggering a first episode of psychosis. Where mental illness — especially schizophrenia — already exists, the report concludes, heavy and prolonged pot use may make symptoms worse. Multiple studies show that marijuana use in adolescence can be a contributing factor in triggering symptoms of serious psychotic mental illnesses, most notably schizophrenia. But studies have also found that young people with a predisposition to developing a psychotic illness may be drawn to pot at an earlier age — possibly as a form of self-medication. **What can parents do?** Arm your kids early with the facts — not scare tactics or threats: occasional or infrequent use of pot is safer than regular use; daily use could set them up for real trouble; and initiating marijuana use at a younger age, “increases the likelihood of developing dependency, which can affect academic performance and social interactions.” We just don’t know enough about the risks to the developing adolescent brain and the long-term effects of marijuana. Ultimately it’s going to come down to what your child comes to think is in his or her best interest and how they act on that. *Drugs and Alcohol, Schizophrenia and Psychosis, Teenagers* by Juliann Garey, clinical assistant professor at NYU. Child Mind Institute,

Steps to Lower Your Breast Cancer Risk 1. Don't smoke – even quitting smoking can add significantly to benefits of postoperative chemotherapy and radiation. 2. Watch your weight. 3. Don't drink alcohol. Women who consume 2-5 drinks a day are 40% more likely to get breast cancer than nondrinkers. Just one drink a day can raise a woman's cancer risk by about 7 percent. 4. Eat a diet that emphasizes fiber-rich vegetables, fruits and whole grains, minimizes protein foods like red meat that are rich in saturated fats, and includes few, if any, sugar-sweetened foods and drinks. 5. Regular exercise - even 30 active minutes a day are better than none. *New York Times*, Jane E. Brody, May 9, 2017.