



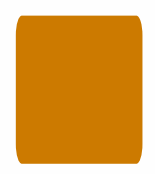
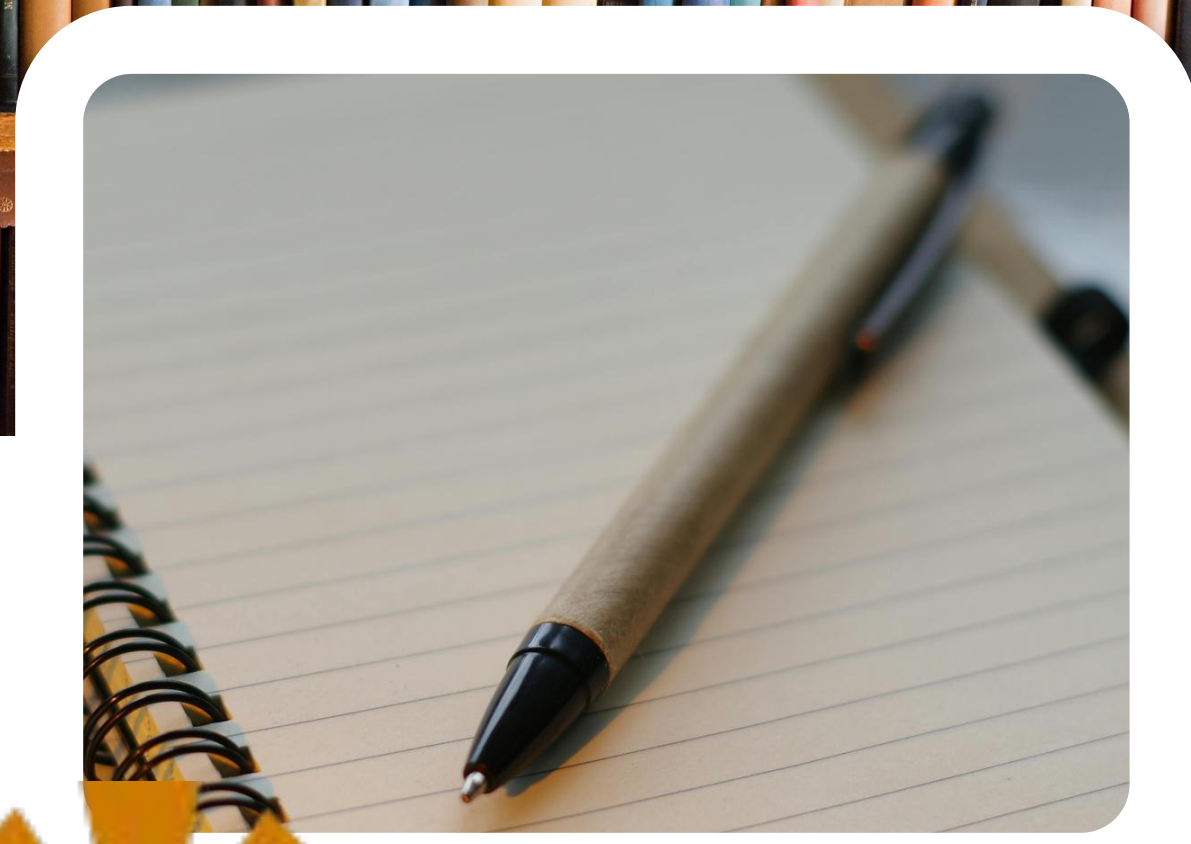
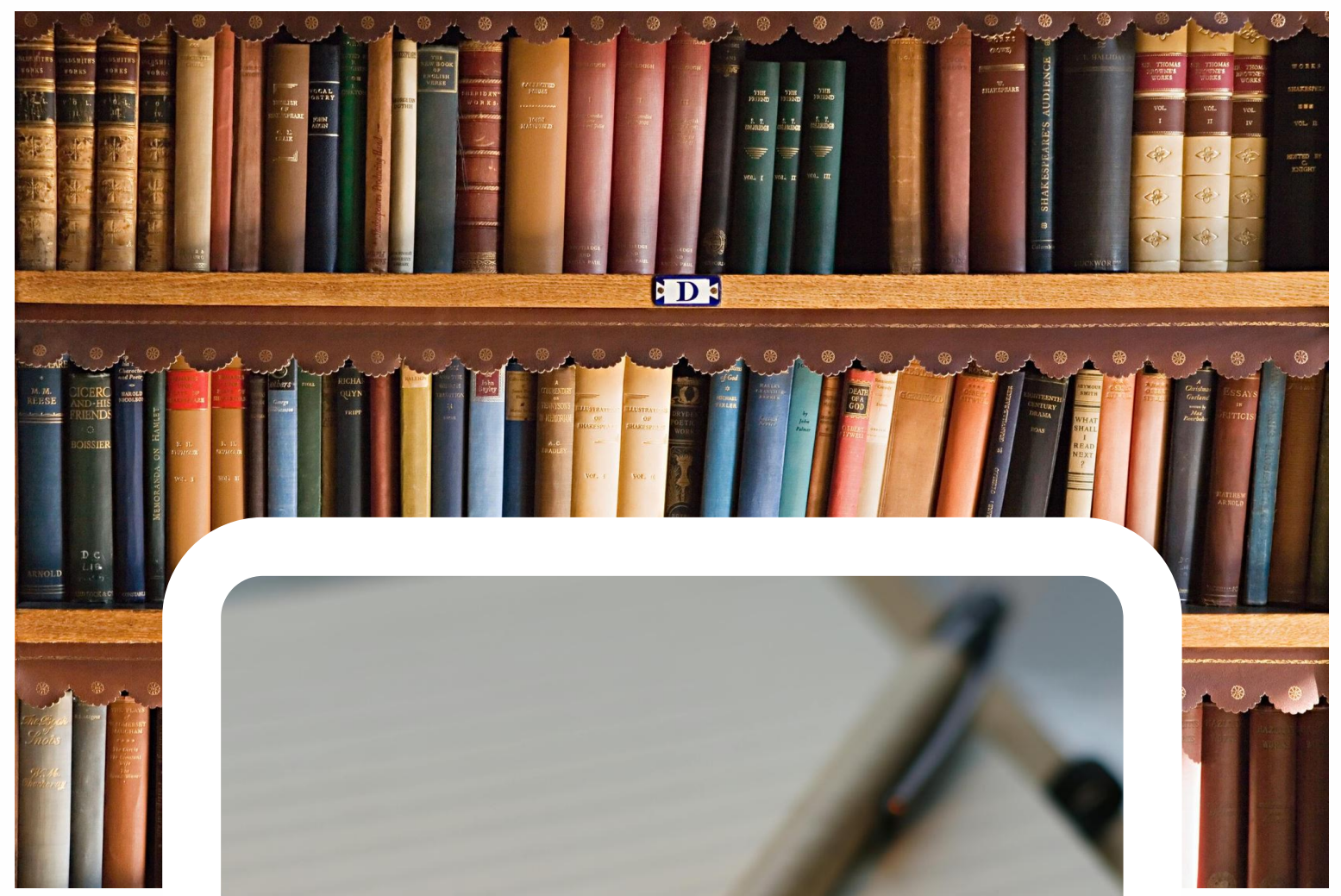
Substance Use

Prevention

for Crime Prevention

Specialists

Fiona Brown, LPC



This color font indicates a hyperlink

“People say nothing is impossible, but I do nothing every day.” – A.A. Milne



Tell us one fact
about yourself



Public Service Announcement

you have 5 minutes to create a PSA of any kind for your community. you will have 1 minute to share it with the group.

(Bonus points for bravery)





Agenda



Substance Use & The Brain

How does substance use impact the brain?
How does addiction develop?
What are the symptoms?

Common Drugs of Abuse

What are common drugs of abuse among adolescents & adults?

Effective Prevention

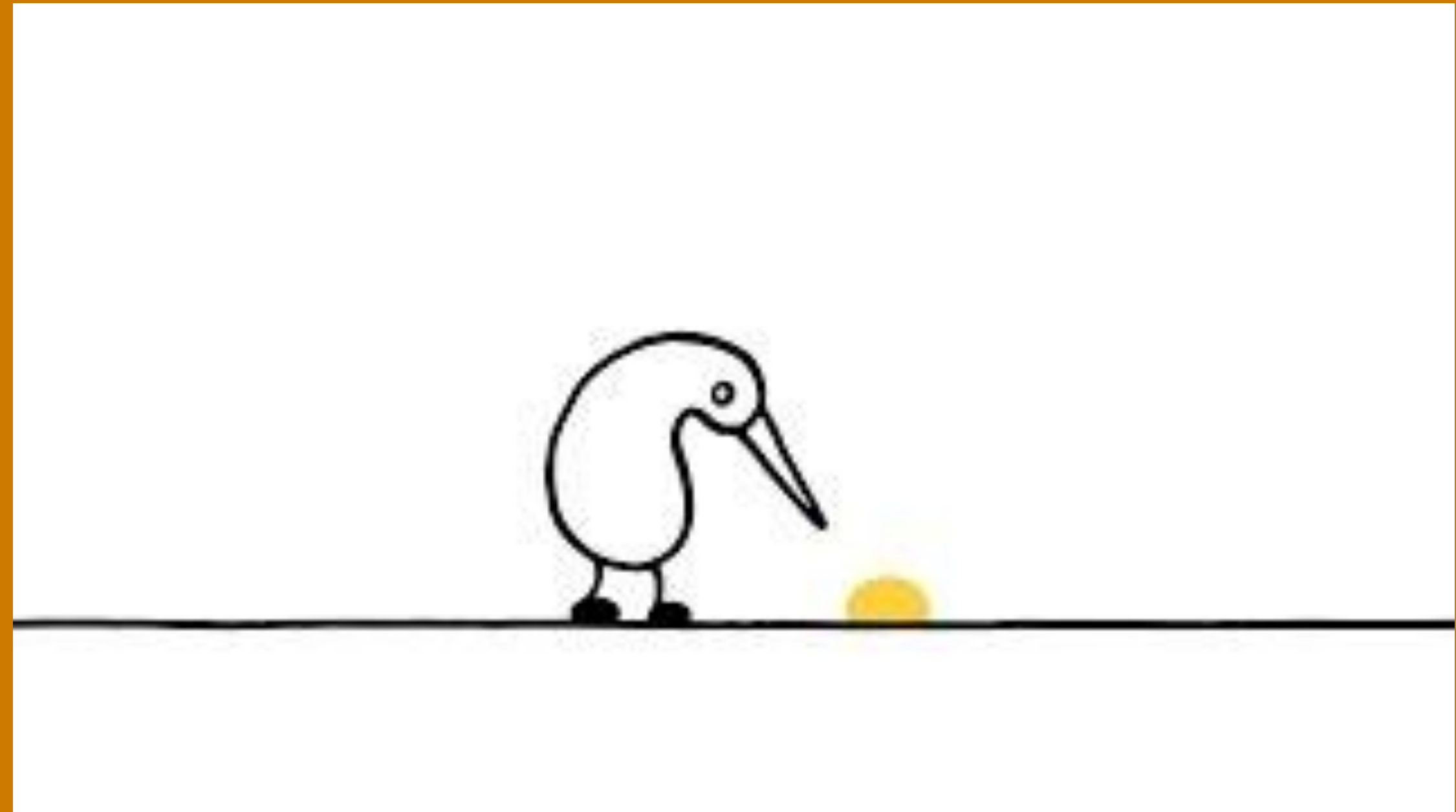
What are the different types of prevention?
What are the characteristics of effective prevention?

Resources & Next Steps

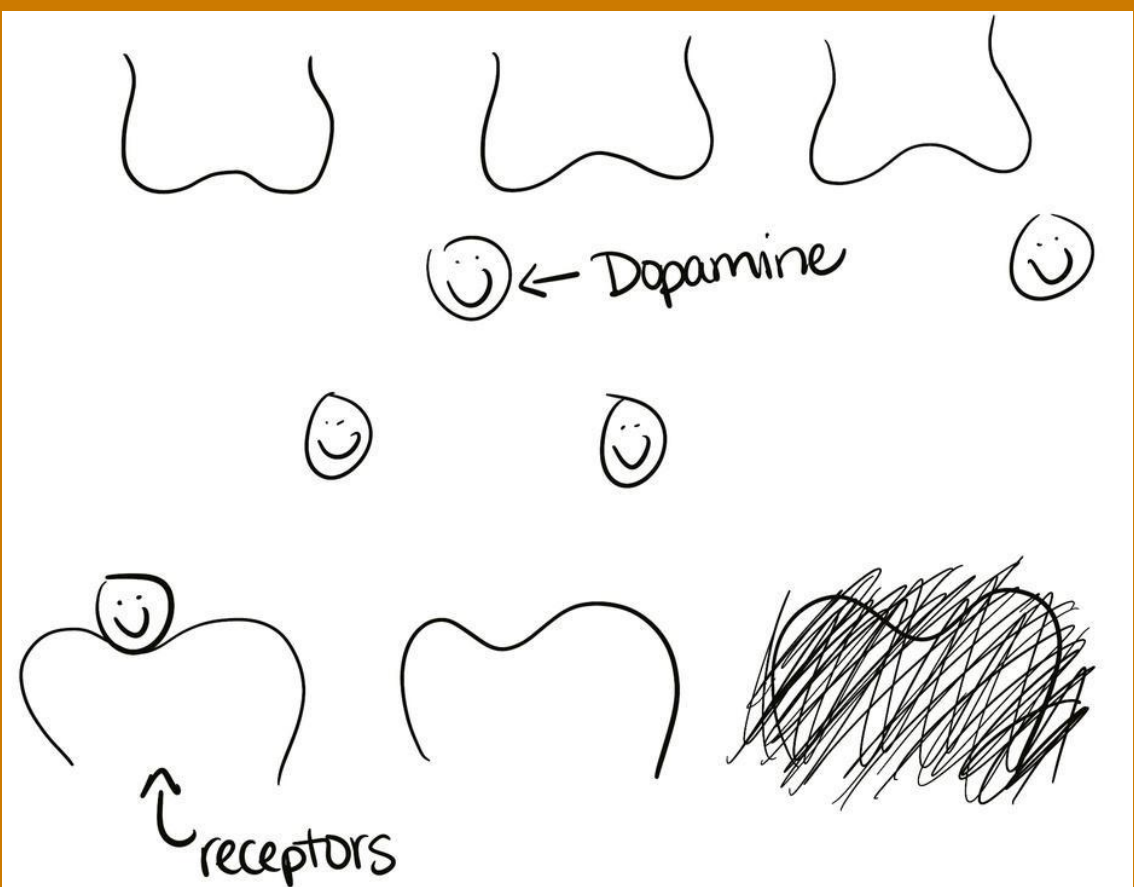
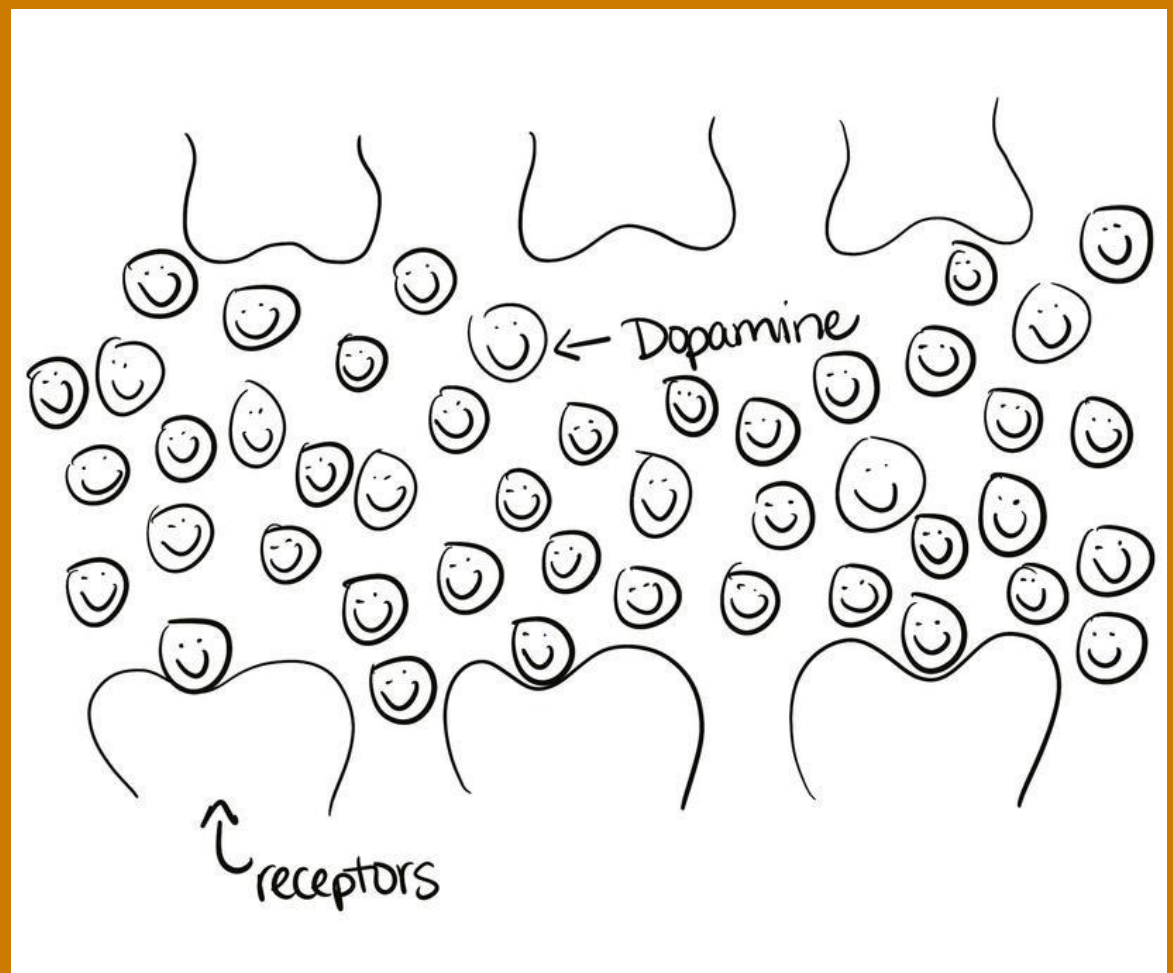
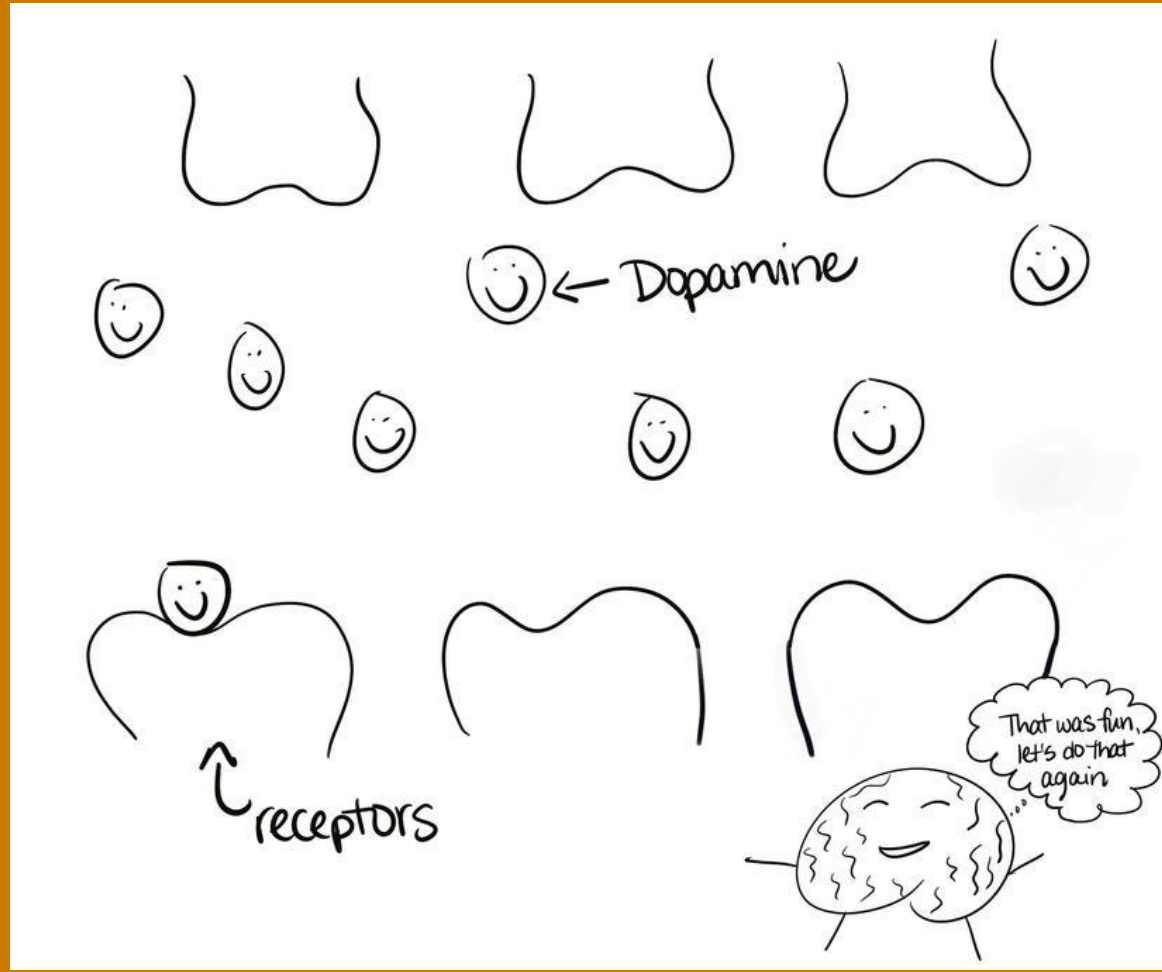
How can I advocate for my work?
Where can I find additional resources/information?

Substance Use & the Brain

What changes do
you notice?



Substance Use & the Brain



Dopamine



**Recognizes
reward**



**Drives us to repeat
behavior**



**Assigns value to
an activity**



Impact on Brain Functioning

Slows down activity in specific parts of the brain associated with the drug of abuse, causing:

- Problems with perception, mood stability, attention, memory, learning
- Lack of motivation
- Diminished response to rewards
- Increased sensitivity to painful/shameful experiences
- Exacerbated pre-existing mental illnesses
- Difficulty learning and internalizing new skills/connections



HOW DO DRUGS IMPACT THE BRAIN?

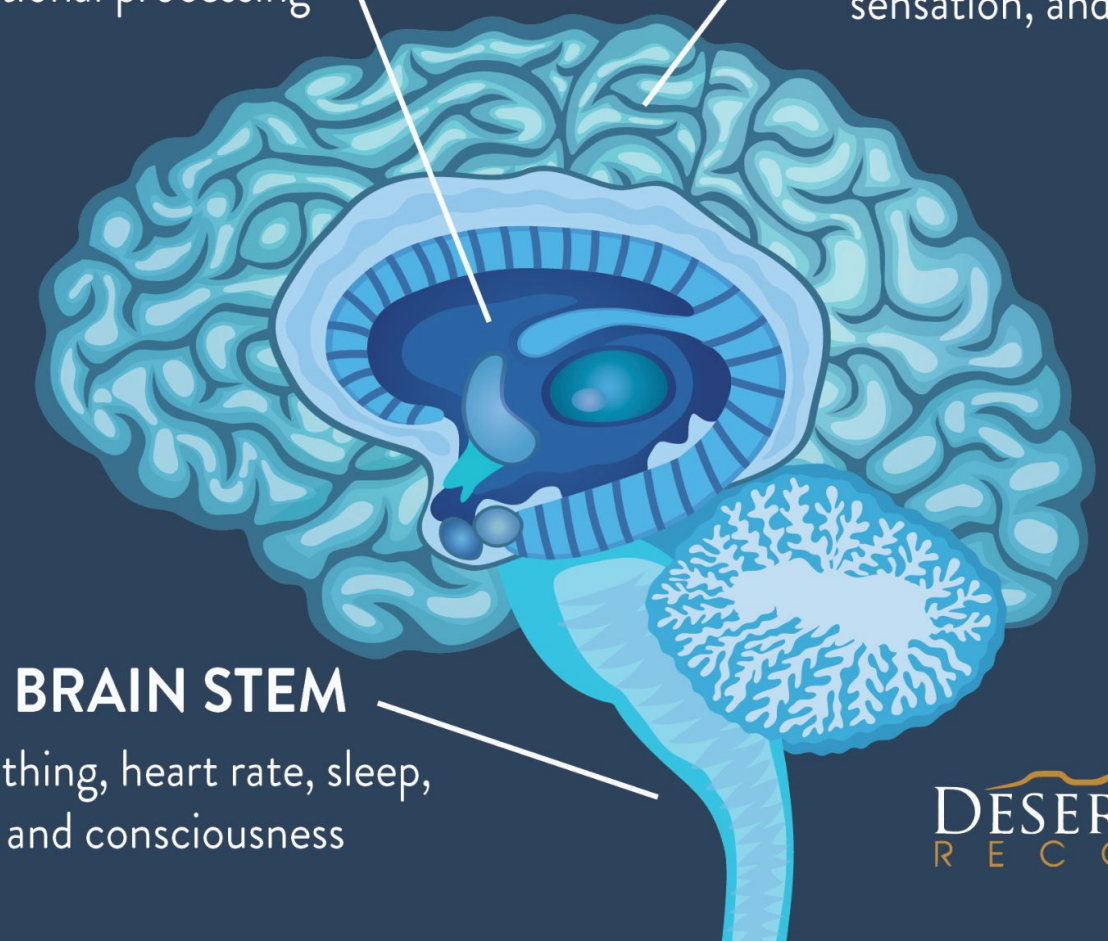
The three main areas of the brain affected by drugs include:

LIMBIC SYSTEM

memory and emotional processing

CEREBRAL CORTEX

decision making, language, sensation, and perception



BRAIN STEM

breathing, heart rate, sleep, and consciousness

DESERT COVE
RECOVERY

Symptoms



- Mood instability
- Changes in peer group
- Loss of motivation/interest/pleasure
- Isolation/withdrawal
- Academic difficulty
- Difficulty with attention, memory and learning
- Problems with sleep & appetite
- Suicidal thoughts/behavior
- Psychotic symptoms
- Irritability/conflict
- Lying/manipulation
- Money/items unaccounted for
- Seemingly unfazed by consequences
- Illegal activity
- Violating previously held value systems
- Whereabouts unaccounted for
- Possession of drugs/paraphernalia





Break time!
See you in 10



Up next . . .
Common Drugs of
Abuse



Common Drugs of Abuse

What are you dealing with most in your jurisdiction?



Overall Trends - Youth



Good News

Rates of abstinence have significantly increased

Overall prevalence rates have continued to decline

Bad News

Potency has increased dramatically

Increase in intensity of use

Decrease in Major Depressive Episodes (ages 12-17)

Decrease in suicidality (ages 12-17)



Overall Trends - Adults



Good News

Reduction in problematic alcohol use

Decrease in cigarette use

Bad News

Increase in Nicotine vaping

Increase in illicit drug and marijuana use (ages 12+)

Increase in rates of suicidal ideation with plan



Nicotine



Image: NBC News



Image: Baylor Medicine

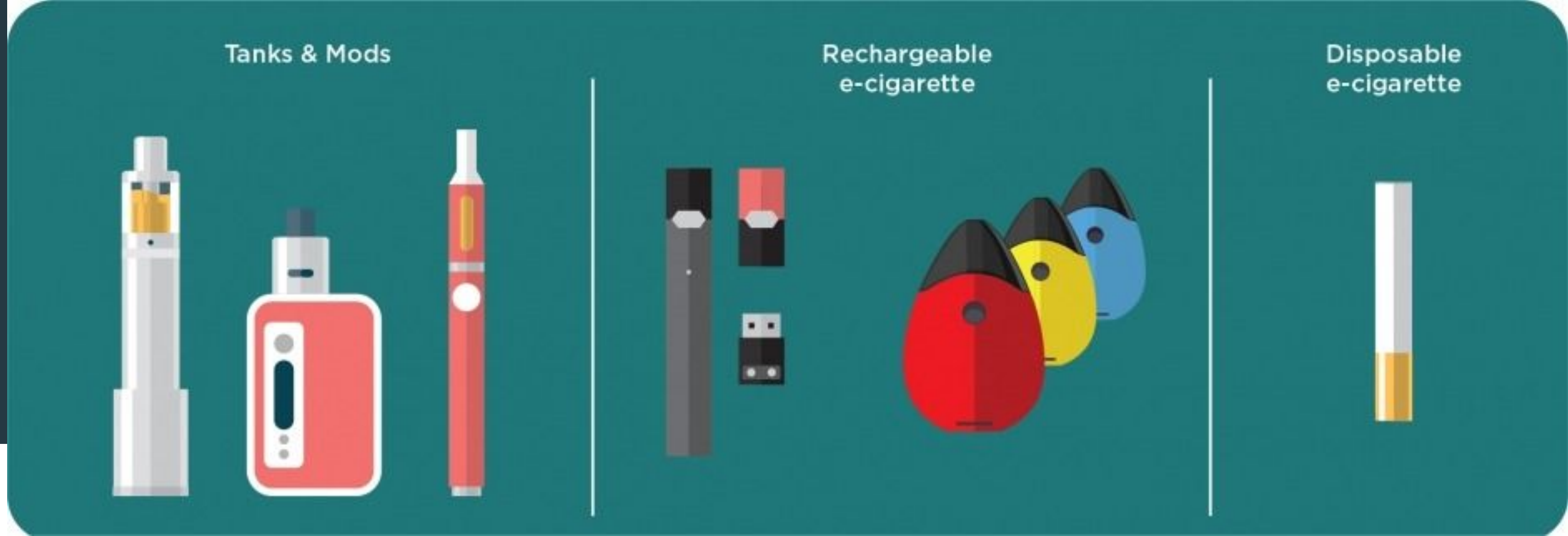


Image: National Institute on Drug Abuse

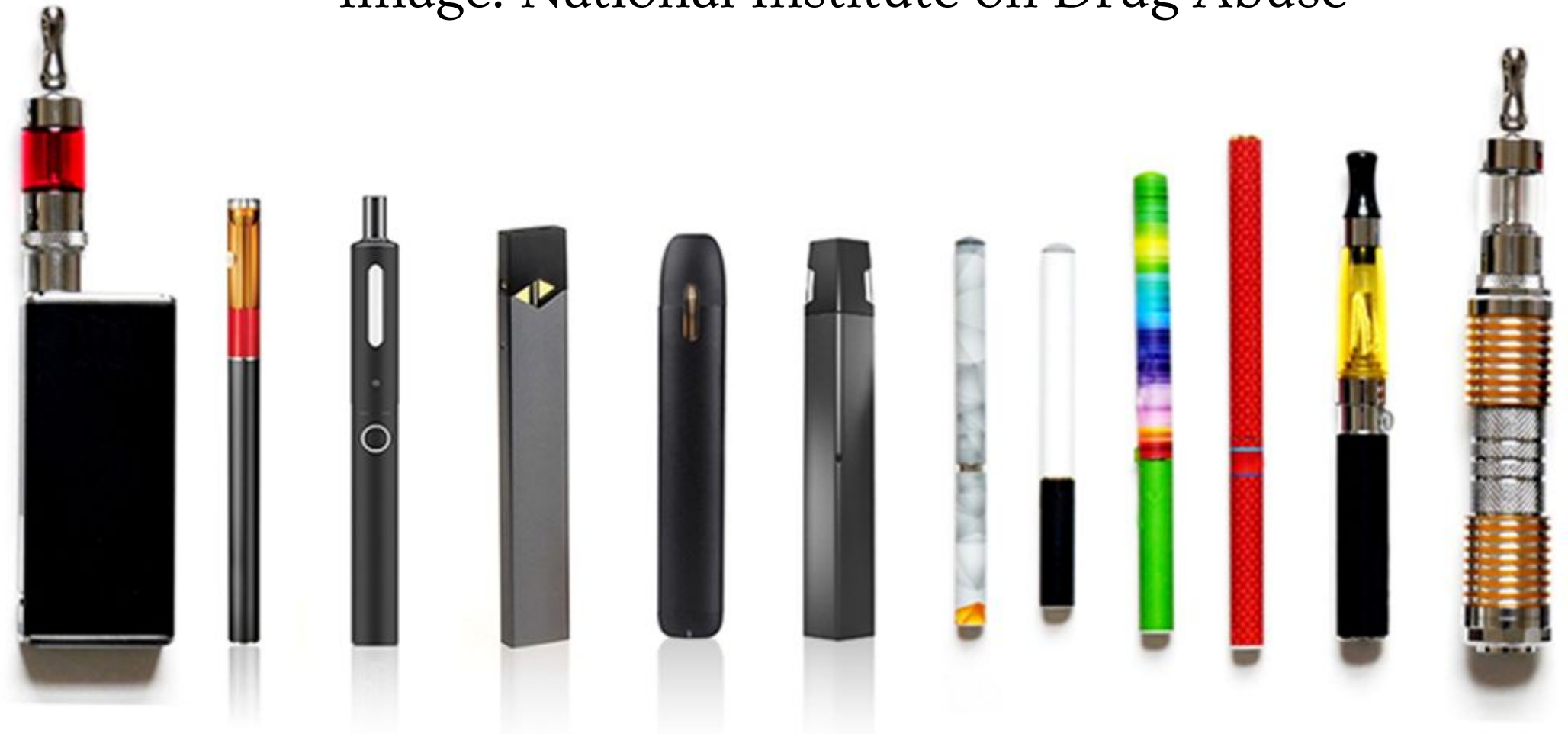


Image: Food & Drug Administration

Impact of Regular Nicotine use



- Increases/causes symptoms of **Depression, Anxiety** and **ADHD**
- Heart disease
- Highly addictive
- Primes the brain for addiction to other substances



Cannabis/THC Products



This is not your parents' weed...

3-4% until the 1990s

Leaf cannabis

16-98% today

Leaf cannabis & concentrates

Average THC concentration in leaf marijuana has increased nearly

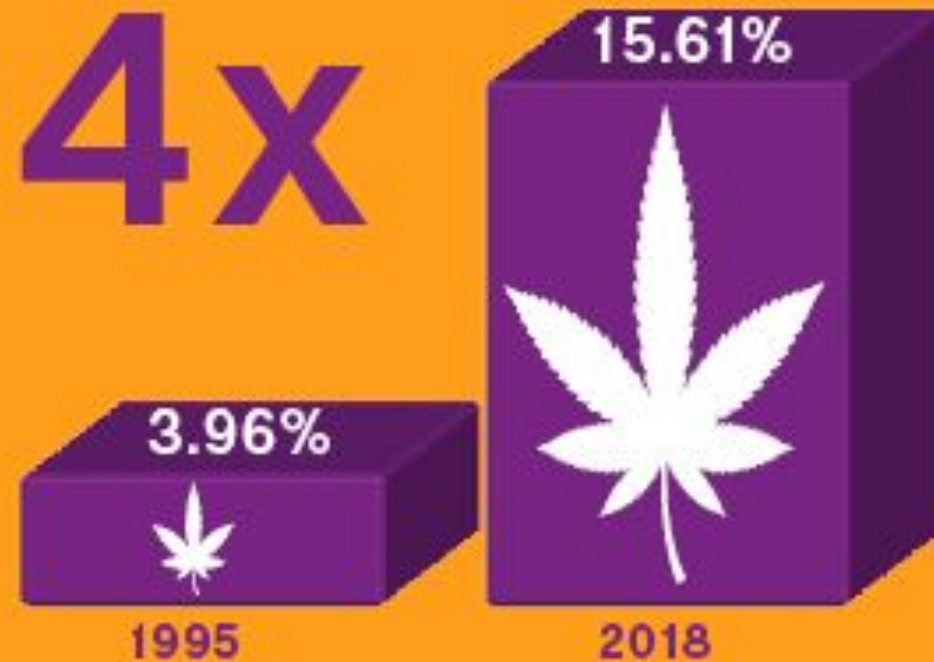


Image: CDC

Change in THC potency of Cannabis products 1990s - today

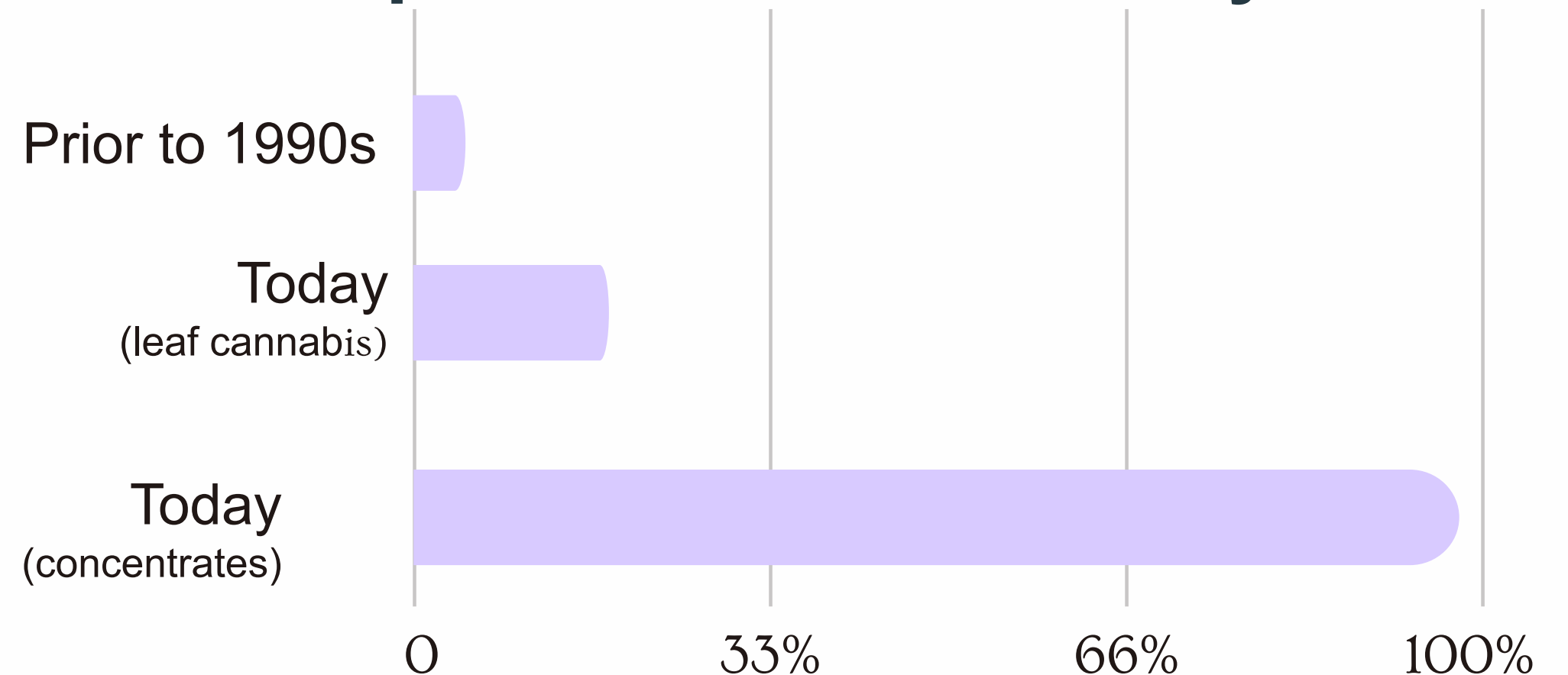


Image: Smoke Cartel



Image: Bud Bar

Image: Rolling Stone

Image: Science News



Image: Oklahoma Bureau of Narcotics

Impact of THC use



- Increases risk of psychosis
- Increases violent behavior
- Causes problems with learning, memory, motivation, mood, sleep, appetite
- Increases anxiety symptoms
- Increase in overdoses for users and children
- Cannabinoid Hyperemesis Syndrome (CHS)



Dietary Supplements



“... are not medicines and are not intended to treat, diagnose, mitigate, prevent, or cure diseases. - National Institutes of Health



Image: HCA Far West



Kratom

- Refers to a tree native to Southeast Asia, **and** to products derived from its leaves
- Marketed as dietary supplements
- Bioactive alkaloids influence the body.
Mitragynine & 7-hydroxymitragynine bind to certain opioid receptors
- Used to alleviate craving & withdrawal, manage pain and cope with mental health symptoms



Stimulant-like effects (increased energy, alertness and rapid heart rate) and opioid/sedative type effects (relaxation, pain relief and confusion).



Image: HCA Far West



“Pink Cocaine”



The only commonality of “pink cocaine” is its bright pink coloring.

Referred to as “2-CB” “Tusi” “Tuci”



Image: Loudoun County Sherriff's Office



Psilocybin Mushrooms



- Ingested orally or brewed as a tea
- Hallucinogenic effects
- Schedule I substance

Images: DEA



**U.S. Psychedelic Use
and Microdosing in
2025 | RAND**



LSD

- Lysergic Acid Diethylamide
- Most often on squares of paper / “stamps” but can also be found in liquid form, capsules or sugar cubes
- Schedule I substance
- Can cause Hallucinogen Persisting Perception Disorder (HPPD)



Images: DEA



Benzodiazepines



Images: Drug Enforcement Administration

- Used to help with sleep and anxiety
- Addictive for people who do not have severe sleep / anxiety disorders

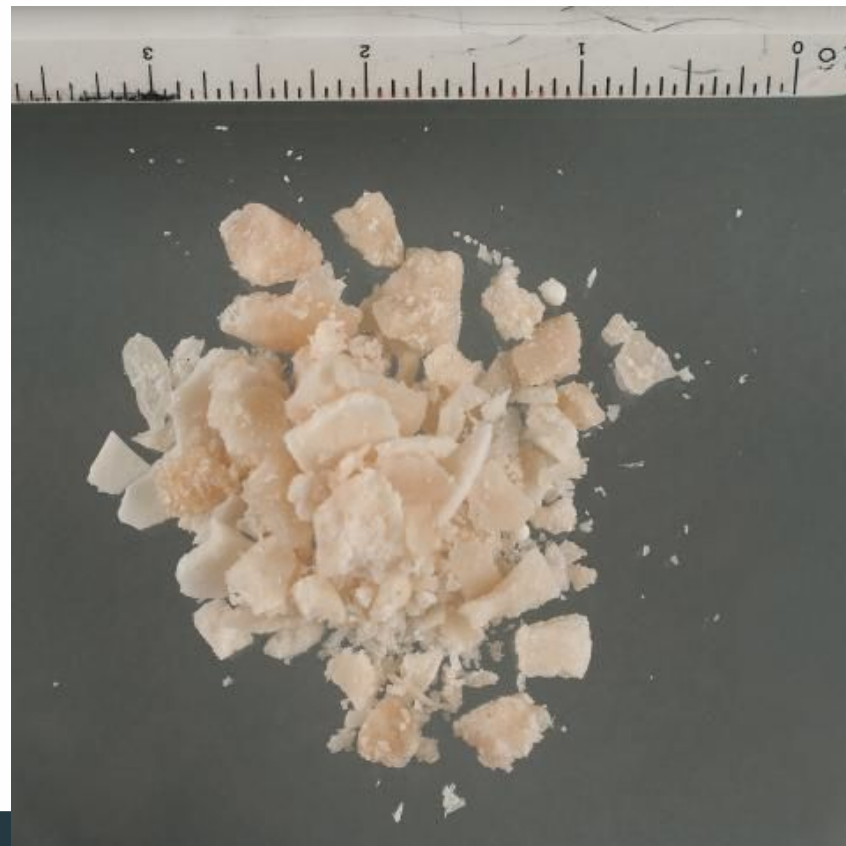


Stimulants



- Includes prescription medicines, cocaine, crack cocaine, methamphetamine
- As medicine, used to treat ADHD
- Highly addictive

Images:
Drug Enforcement
Administration



“Ecstasy” & “Molly”



- “Molly” refers to crystalline form of MDMA
- Adam, Beans, Biscuit, Clarity, Disco Biscuit, E, Eve, Go, Hug Drug, Lover’s Speed, MDMA, Peace, STP, X, XTC
- Ecstasy/MDMA acts as both a stimulant and hallucinogen, producing an energizing effect, distortions in time and perception, and enhanced enjoyment of tactile experiences.



Images: Drug Enforcement Administration



Ketamine



Images: Drug Enforcement Administration

Anesthetic for humans & animals

Long-term, heavy ketamine use is associated with memory problems, depression, and anxiety.

May cause psychosis & delusions

As medicine, used in small doses to treat depression



Xylazine



Image: RandLab Veterinary Medicine

- Also known as “tranq”
- Veterinary tranquilizer
- Xylazine can slow breathing, heart rate, and blood pressure to dangerously low levels.
- Overdose reversal medications do not reverse the effects of xylazine. In addition to risk for overdose, repeated xylazine use is associated with skin wounds, such as open sores (ulcers) and abscesses.



Opioids



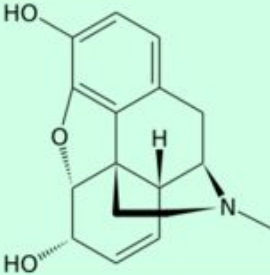
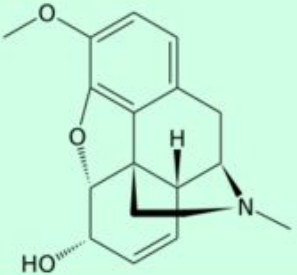
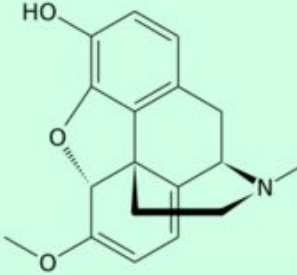
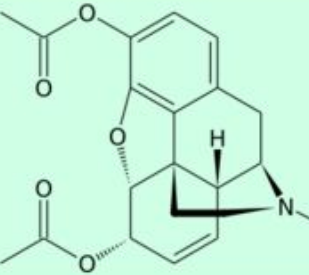
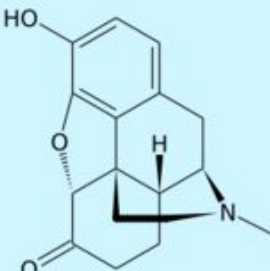
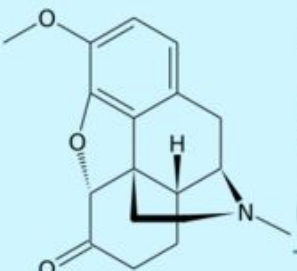
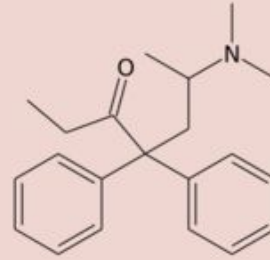
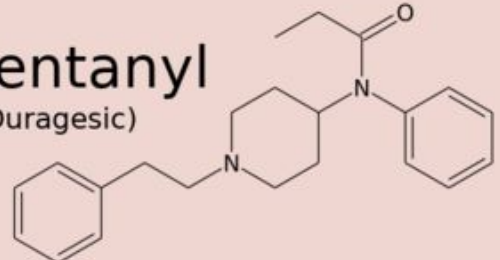
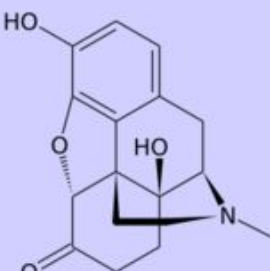
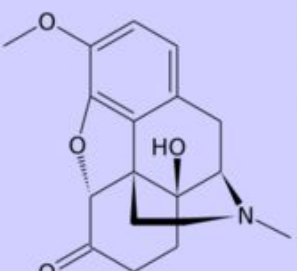


<u>3,6 Diol</u>	<u>3-Methoxy</u>	<u>6-Methoxy</u>	<u>3,6 Diester</u>	Natural Products Opiates
				
morphine	codeine	thebaine	diacetyl morphine (heroin)	
Hydroketone Semi-Synthetic Opioids				
		Fully Synthetic Opioids		
hydromorphone (Dilaudid)	hydrocodone (Vicodin)			
				methadone (Dolophine)
				fentanyl (Duragesic)
		Oxyketone Semi-Synthetic Opioids		
oxycodone (Percocet, Oxycontin)	oxycodone (Percocet, Oxycontin)			
				
oxycodone (Percocet, Oxycontin)	oxycodone (Percocet, Oxycontin)			

Image: Wikipedia



Opioids - Fentanyl



Fentanyl is a synthetic opioid typically used to treat patients with chronic severe pain or severe pain following surgery.

Schedule II controlled substance, 100x more potent than morphine.

Illicit fentanyl is primarily manufactured in foreign clandestine labs and smuggled into the United States.

Because of its potency and low cost, fentanyl is increasingly used to lace other substances.



Images: Drug Enforcement Administration

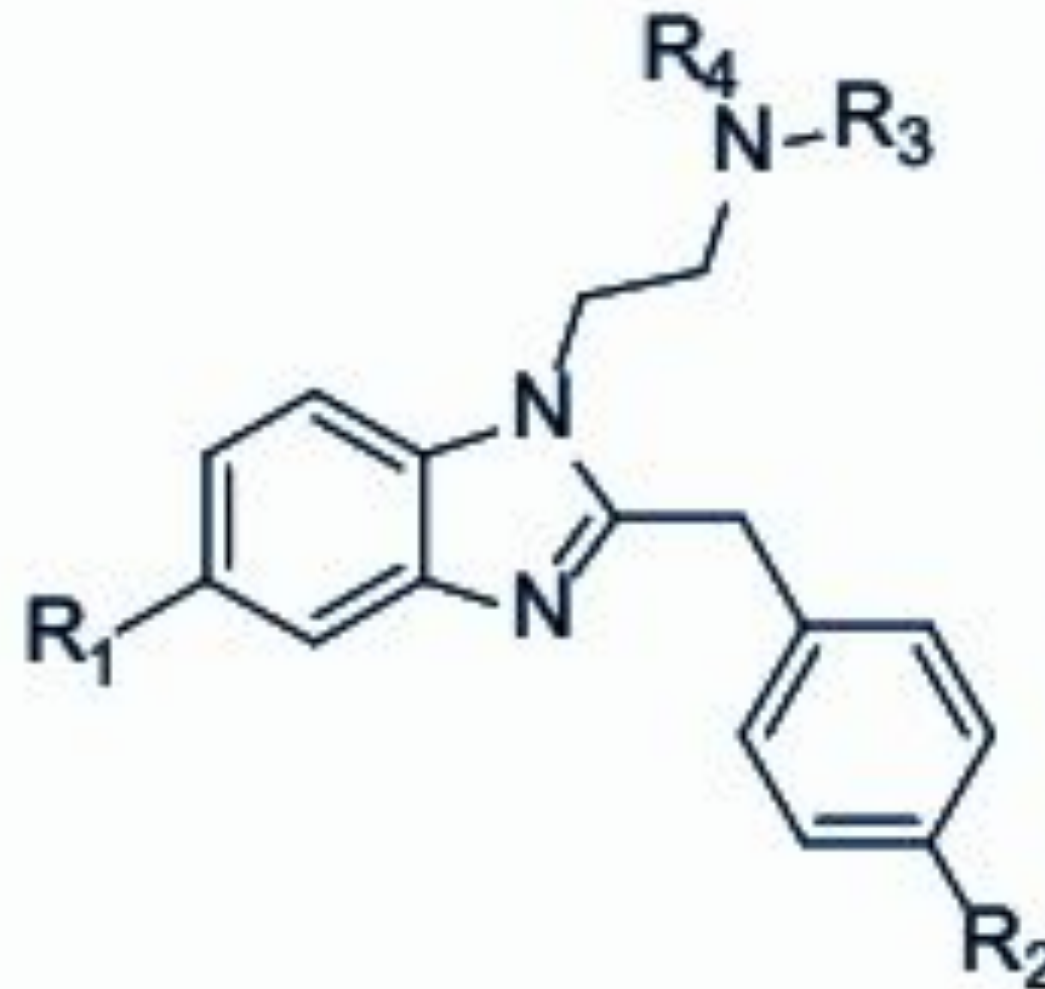
Opioids - “Nitazenes”



- 12 “nitazenes” are Schedule I.
- Up to 40x stronger than Fentanyl
- People are likely consuming substances without knowing they contain nitazines.
- Can be sold as a white or brown/yellow powder but primarily found in illegally purchased pills, heroin and other opioids.

Benzimidazole-Opioids

metonitazene
metodesnitazene
etonitazene
etodesnitazene
protonitazene
butonitazene
isotonitazene
clonitazene
flunitazene
etonitazepyne
etonitazepipne



Stash Items

What have you seen?





Break time!
See you in 10



Up next . . .
Effective Prevention



Effective Prevention



Which strategies or approaches have you found effective?





Characteristics of Effective Prevention



**Trauma-
Informed**

**Culturally
Appropriate**

**Reduces
Shame/Stigma**

**Positive
Norming**

**Solution-
Focused**

**Emphasizes
Connection**



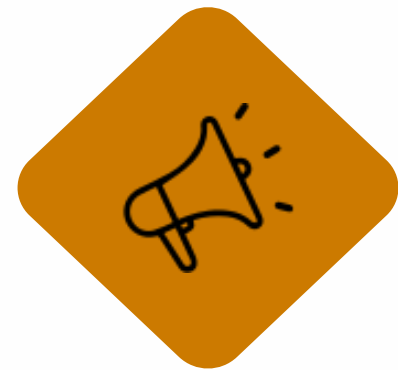
The Human Element



What strengths/skills do you bring to your work?



What do you bring to interactions with the people you serve?



What unintended messages might you be conveying?





Trauma-Informed



Why do
Trauma-Informed
Practices
matter when
addressing
substance use?

An estimated 50-75% of people with
a Substance Use Disorder (SUD)
have experienced trauma

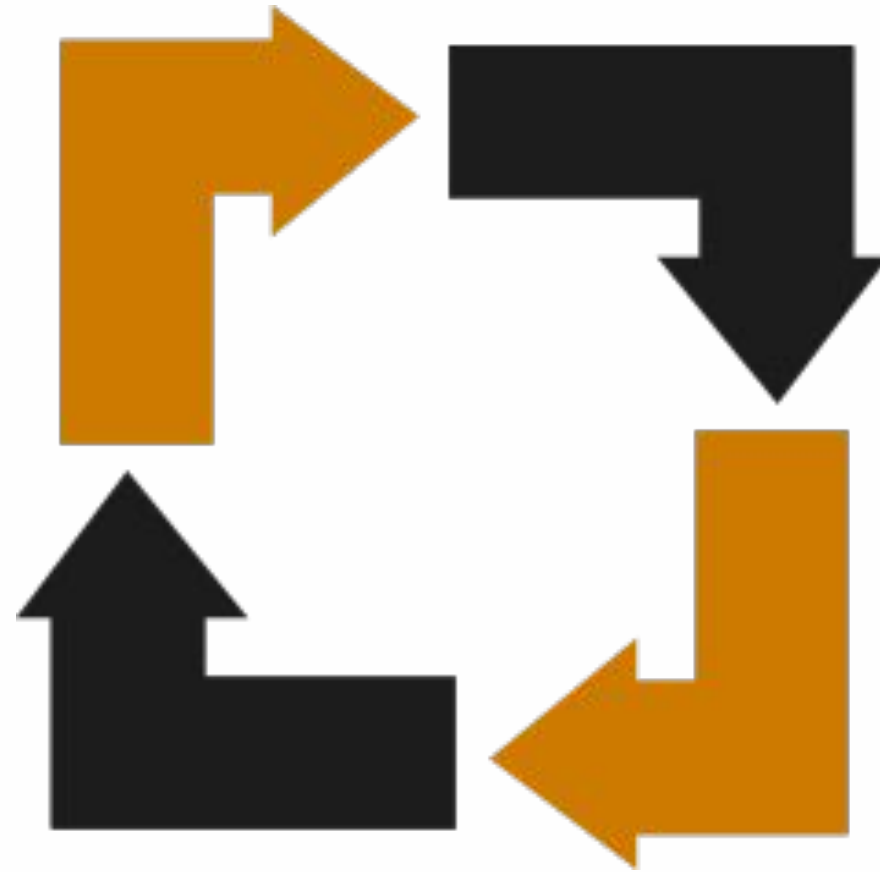




Shame & Stigma



Shame is toxic. It focuses on the person as the problem. It exacerbates substance use and prevents help-seeking



Guilt can be healthy. It focuses on the behavior as the problem, offering direction for change.

How can our programs help reduce shame and stigma?



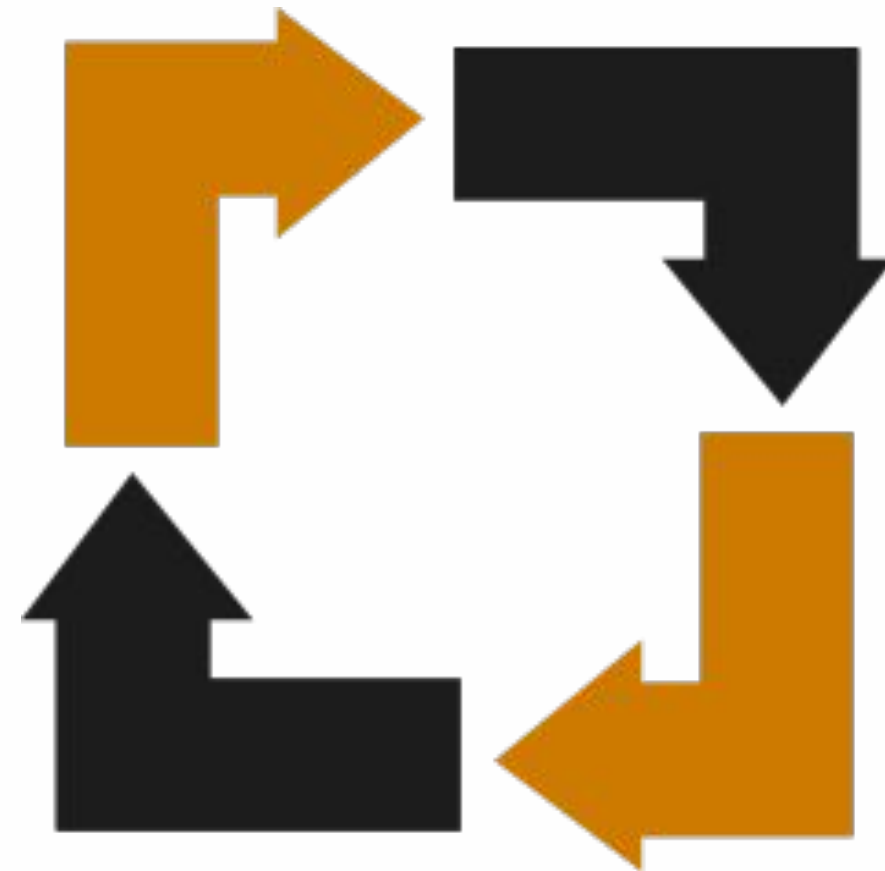


Solution-Focused



Focus on present and future goals

Builds upon strengths and previous successes



Goal-oriented and collaborative

What helped you move forward when you felt stuck?

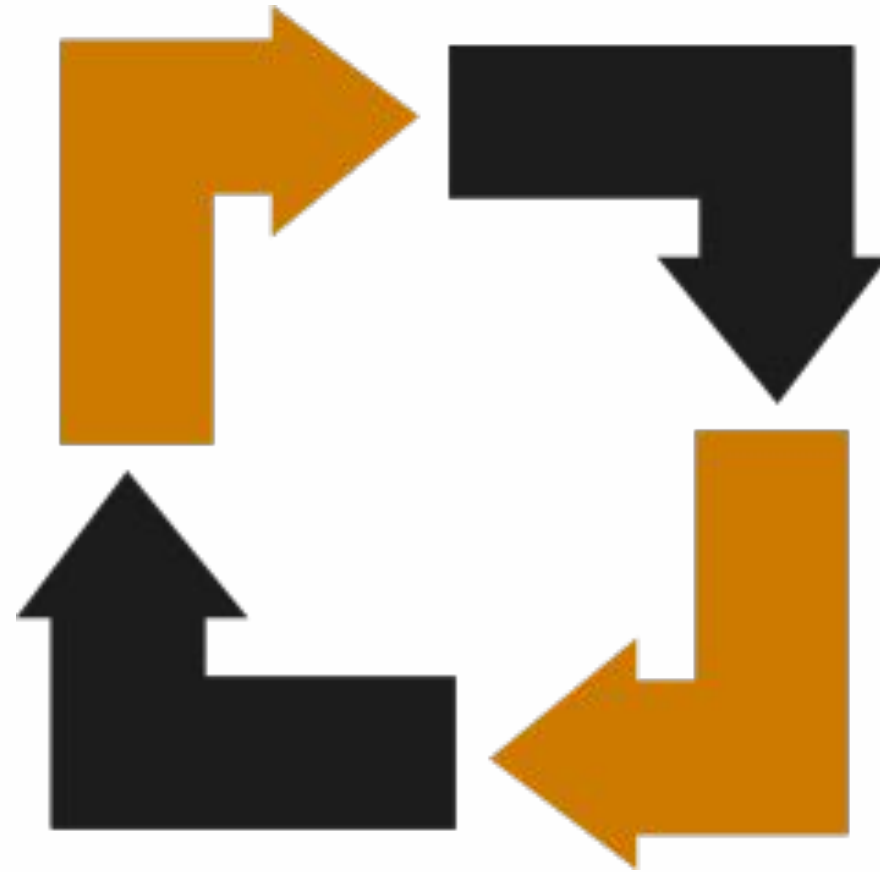


Culturally Appropriate



Who is your target audience?

Are there opportunities to seek feedback from your stakeholders?



Has your program or initiative been designed or tested with voice or consideration for those in your community?

What should you keep in mind about your community?



Positive Norming



**What do you WANT
people to START
doing?**

**Who/when/what/where
how is this already
happening?**



**Has your program or
initiative been
designed or tested
with voice or
consideration for
those in your
community?**

*When have you been influenced
to make a positive change?*

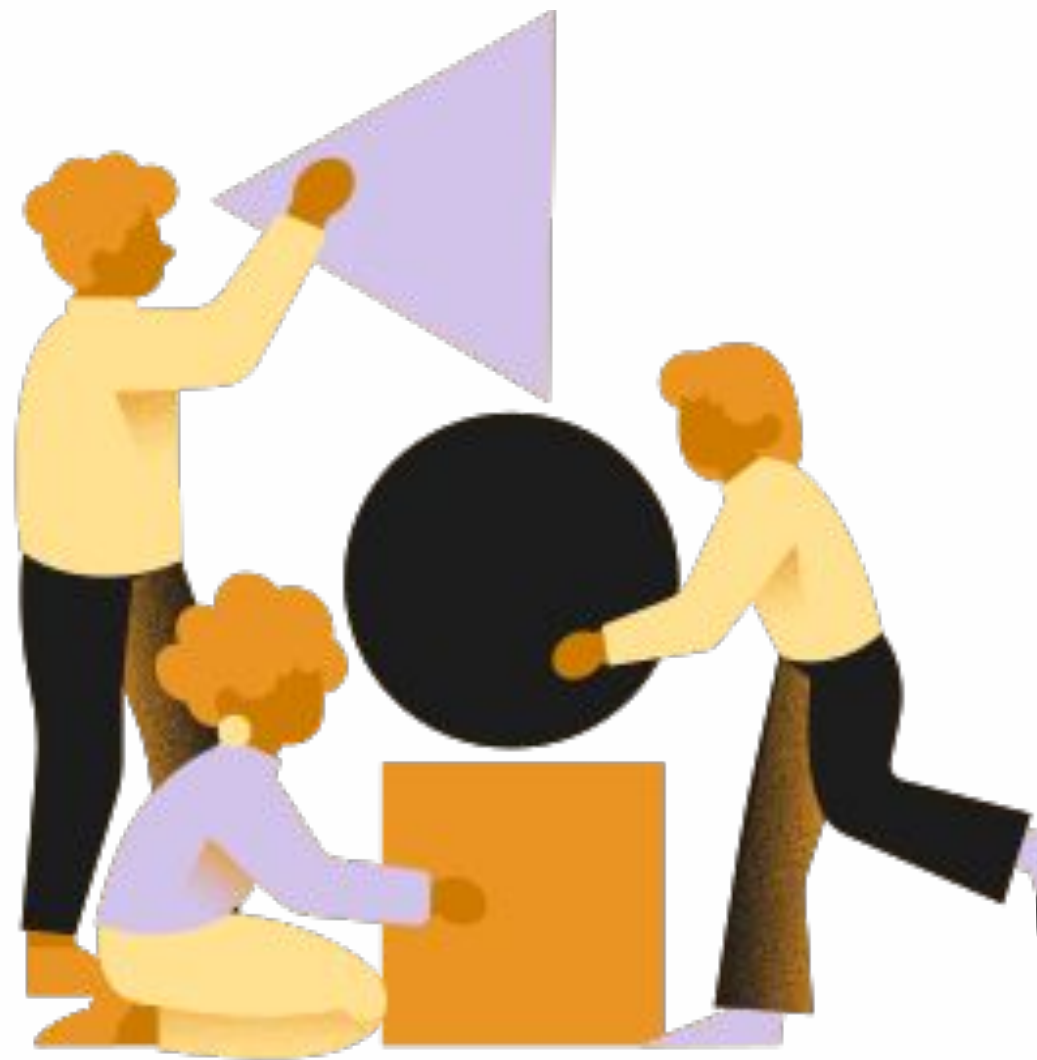




Connection



“The opposite of addiction is . . .” - *Johann Hari*



When has connection made a difference in your work or personal life?



Good Samaritan Law

§ 18.2-251.03. Arrest and prosecution when experiencing or reporting overdoses.

Protects against arrest or prosecution for unlawful purchase, possession, or consumption of alcohol, marijuana or a controlled substance or paraphernalia.



IF . . .

a person is experiencing an “Overdose” (life-threatening condition resulting from the consumption or use of alcohol and/or a controlled substance).

AND . . .

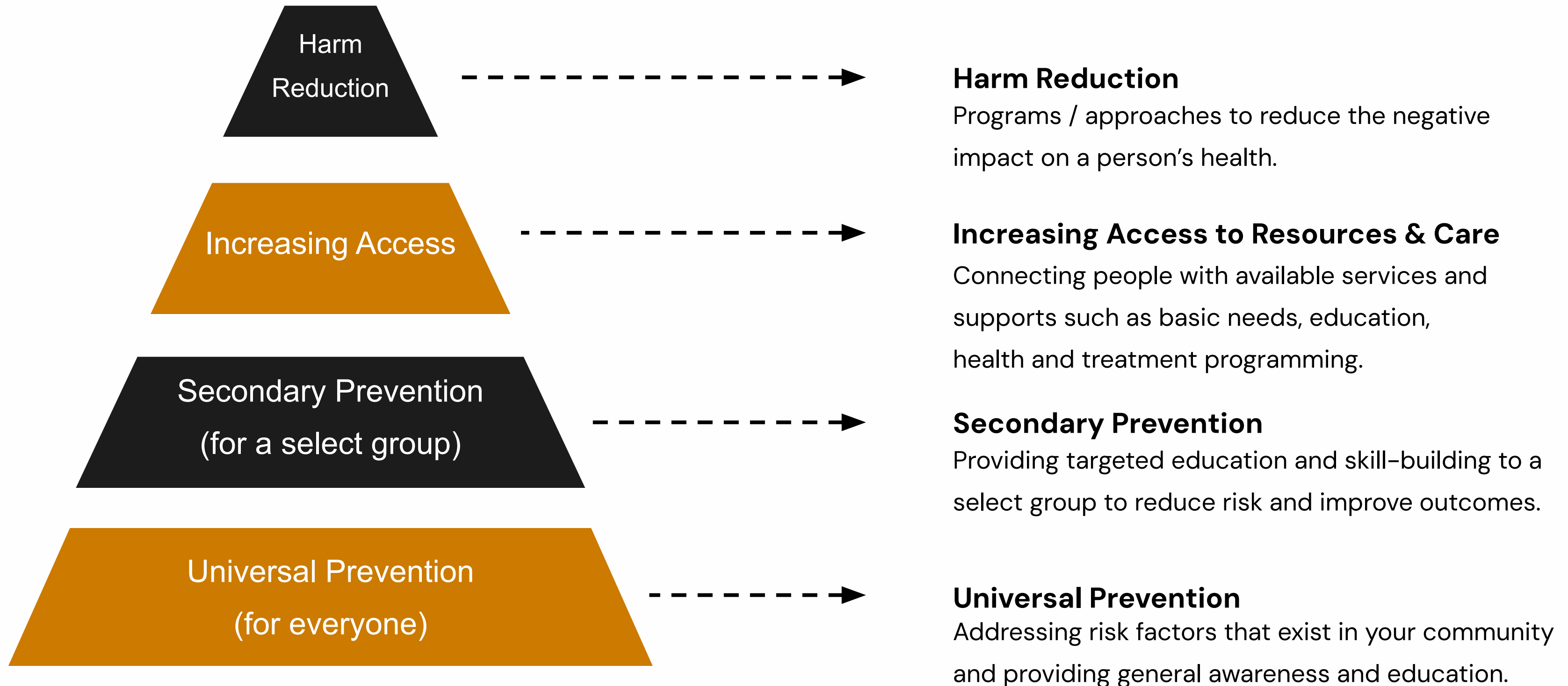
they or another person seeks emergency medical attention from: EMS, firefighter, LE or 911

AND . . .

The person remains at the scene or at any alternative location until a law-enforcement officer responds.



Tiered Prevention

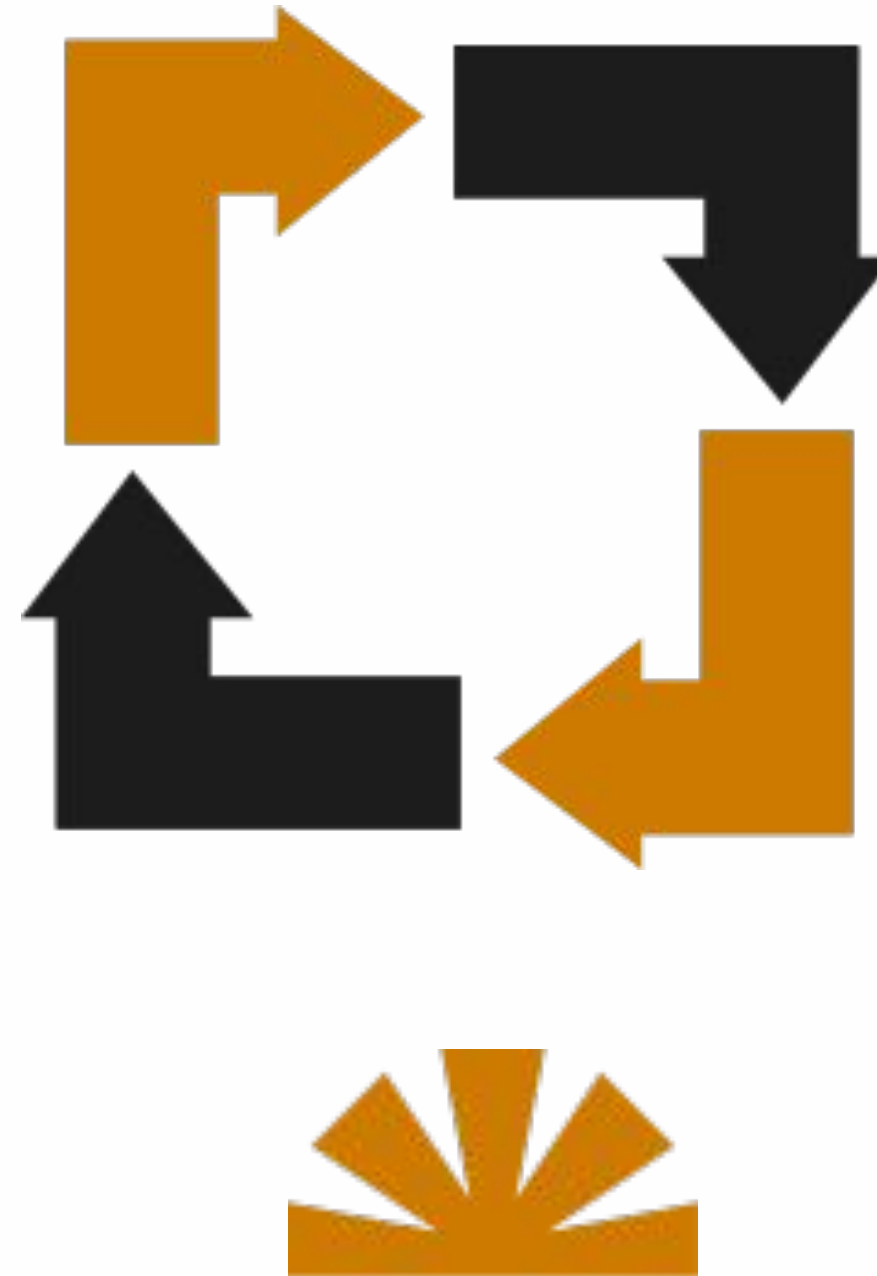




Universal Prevention

Addressing/raising awareness of risk factors:

- **Availability of substances**
- **Genetics**
- **Community safety**
- **Mental health**
- **Age of first use**



General awareness about risk associated with drugs of abuse

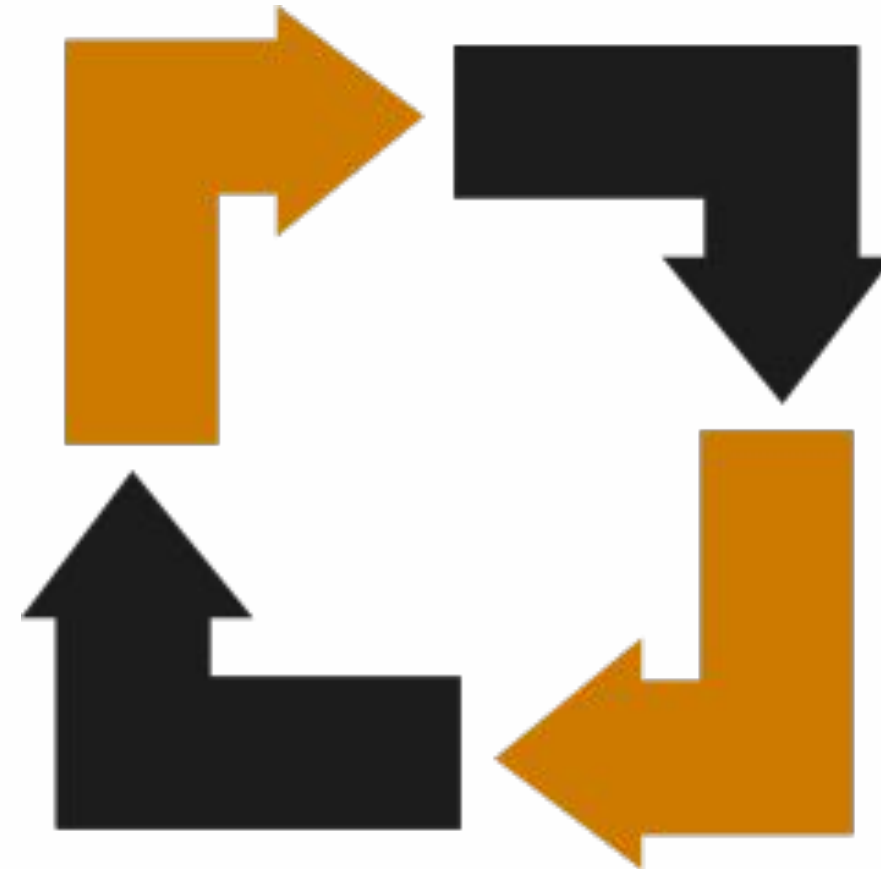
When perception of risk is high, drug use decreases.



Secondary Prevention



**Provided to a select
group of identified
people considered to
be at higher risk**



**Targeted education,
skill-building and
connection to
community supports**

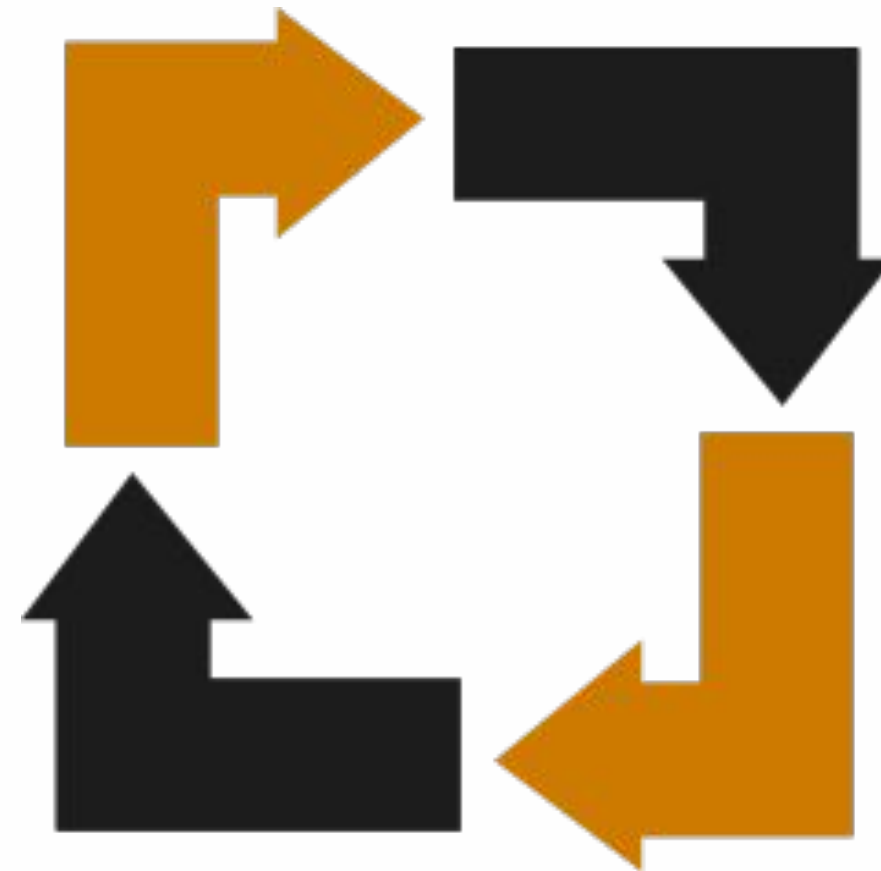


Evidence-Based



Programs

More than *evidence-informed*, they have been shown to be effective through rigorous evaluation



Must be implemented with fidelity

Consider which population they've been proven with - will it work for yours?



Access to Care

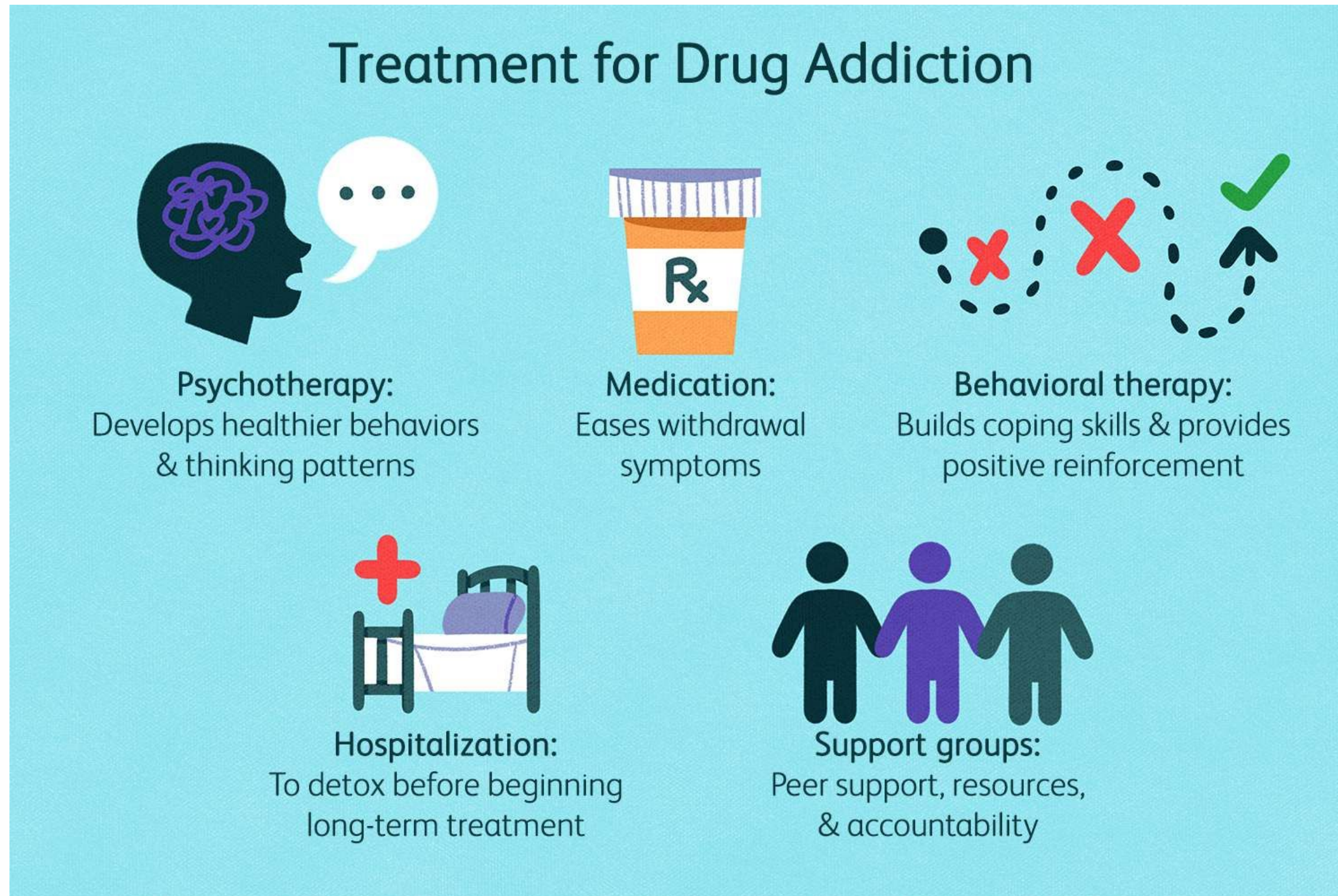


Image: Very Well Health



Access to Care



Levels of Care



Harm Reduction



- Connect individuals to **overdose education, counseling, and referral to treatment** for infectious diseases and substance use disorders.
- **Distribute opioid overdose reversal medications** (e.g., naloxone) to individuals at risk of overdose, or to those who are likely to respond to an overdose.
- **Lessen harms associated with drug use and related behaviors** that increase the risk of infectious diseases, including HIV, viral hepatitis, and bacterial and fungal infections.
- **Reduce infectious disease transmission** among people who use drugs (including those who inject drugs) by equipping them with sterile supplies, accurate information and facilitating referrals to resources.
- **Reduce overdose deaths, promote linkages to care**, facilitate co-location of services as part of a comprehensive, integrated approach.
- **Reduce stigma** associated with substance use and co-occurring disorders.
- **Employ** people with living and lived experience in leadership and in the planning, implementation, and evaluation of services. People with lived experience can also model for their peers what meaningful change can look like in their lives.
- **Build community and increase protective factors** — for people who use drugs and their families.

Collaboration

Virginia Office for Substance Abuse Prevention (VOSAP)

Member agencies:

Virginia Behavioral Health & Developmental Services

Virginia Department of Criminal Justice Services

Virginia Department of Education

Virginia Foundation for Healthy Youth

Virginia Department of Health

Virginia Department of Juvenile Justice

Virginia Department of Motor Vehicles

Virginia Department of Social Services

Virginia State Police (YOVASO)

Virginia National Guard



Collaboration

Community Coalitions:

- School
- Public Safety
- Public Health
- Government agencies
- Treatment providers



Learn more about organizing a coalition in your area

Portugal's Model



Decriminalization of Drug Use: In 2001, Portugal passed a law that decriminalized the possession and use of all drugs for personal use, allowing individuals to carry up to a 10-day supply. This shift aimed to treat drug addiction as a public health issue rather than a criminal one.

Dissuasion Commissions (Diversion): Instead of facing criminal charges, individuals caught with drugs are referred to a local commission composed of health professionals, social workers, and legal experts. These commissions assess the individual's situation and can recommend treatment or impose fines, focusing on rehabilitation rather than punishment.

Integrated Health Services: Portugal established a network of treatment facilities that provide free and accessible care for drug users addressing physical, psychological, and social needs.

Harm Reduction Initiatives: Needle exchange programs, supervised consumption sites, mobile outreach teams providing support directly to users in the community.

Portugal now has one of the lowest overdose death rates in Western Europe, averaging around 80 deaths per year compared to thousands in countries with punitive drug policies.



Create your own Campaign

you have 15 minutes to create a prevention campaign of any kind using your wits and the materials available in the room. you will have 3 minutes to share it with the group.

(Bonus points for creativity)



Advocating for your work

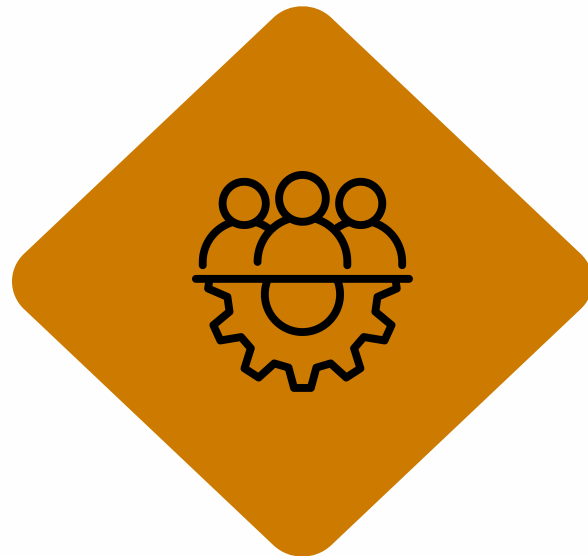
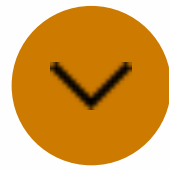


How do you get
other people on
board with your
initiatives?



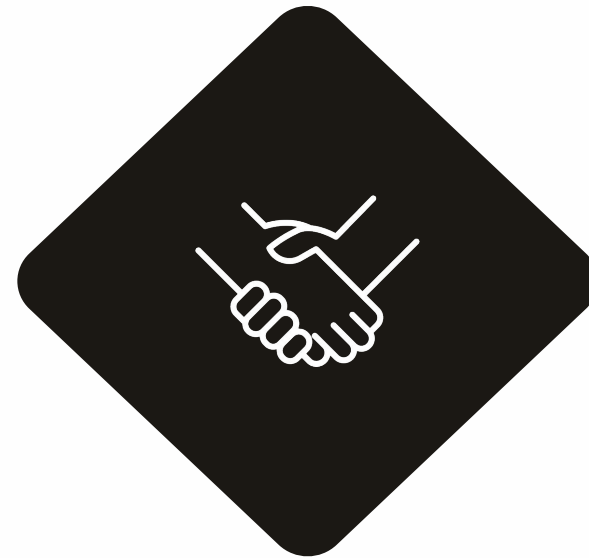


Funding



Data

What data are you able to gather about the people you serve and outcomes of your work?



Solutions

Which community-specific needs/challenges are you able to address in your work?



Return on Investment

Evidence-based interventions can save up to \$65 per dollar invested in prevention.

-SAMHSA, 2020





Visibility

Perception is reality

How others view your work matters. Are they able to see the valuable work you're doing?

Social Media

Use social media pages to not only promote your events/resources, but to promote your accomplishments

Toot your own horn

Who should be aware of your efforts? Who should hear your success stories?



Resources



[National Drug Early Warning System](#)

[National Survey on Drug Use and Health](#)

Drug Enforcement Administration - [Educator Resources](#) [Drugs of Abuse Handbook](#)

SAMHSA - [Public Messages](#) [Harm Reduction](#) [Evidence-based Practices Resource Center](#)

Blueprints for Healthy Youth Development - [Certified Interventions](#)

[Monitoring the Future](#)

National Institute on Drug Abuse - [Parents & Educators Page](#) [Commonly Used Drug Charts](#)

[Tall Cop Says Stop](#)

[Community Coalitions of VA](#)

[CDC's Overdose Prevention Page](#)



READ THIS
and
CALL ME IN
THE MORNING



a prescription for teen substance
use prevention **with cartoons**

FIONA BROWN, LPC, M.Ed./Ed.S.



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February 9-12, 2026

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Thank you,
Reach out any time!

Fiona Brown, LPC



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@drugladypresents

