February 21, 2016

With this letter, find summary results of the Youth Risk Behavior Survey (YRBS) that was conducted by Sharon HS in May of 2015. This information was recently presented to the School Committee. It was also shared at February's PTSO meeting. Data from this survey helps guide instruction, as well as future programming efforts.

The school department, SHS PTSO, and the Sharon Education Foundation all helped fund this initiative. Gratitude can also be extended to Barbara Munden (Wellness), Shelley Myerson (Counselor), Margie Mitlin (Social Worker), and Mike Hocking (School Resource Officer) for the time, energy, and advocacy that they contributed to this cause. Aside from promoting our school's participation and helping organize the results into a presentable fashion, they have partnered with the Sharon Substance Prevention & Resource Coalition (SSPARC) to continue to raise awareness about the issues and to identify valuable resources.

Included on the following pages are:

- summary results of the Youth Risk Behavior Survey (YRBS)
- a list of informative websites on various topics
- a letter from May of 2015 about the YRBS at SHS
- a flyer about the YRBS at SHS from the Sharon Substance Prevention & Resource Coalition (SSPARC)
- a list of local detox facilities from the SSPARC
- a drug & alcohol presentation put together by the SHS Guidance Department

Moving forward, SHS will continue to tackle the challenges raised by the topics covered in the YRBS. To that end, please don't hesitate to contact the school with questions or to seek assistance of any kind. SHS appreciates your attention to this information!

Respectfully,

Jose Libano

Jose Libano, Ed.D.
Principal
2015 Youth Risk Behavior Survey Results

SHARON HIGH SCHOOL
YRBS Results

• SHS YRBS 2015 was administered to the entire school on May 21, 2015.

• The results on the following graphs are reported in percentages, which were derived from dividing the frequency of each response by the total number of respondents for each question.

• Where SHS percentages differed from 2010-11 results, state or national data, statistical significance of the differences has not been determined.

• State comparison numbers used are from the 2013 Massachusetts YRBS data set and the national comparison numbers are from the 2013 CDC YRBS.
PARTICIPANTS

- 81% \((n = 897)\) of current Sharon High School Students participated in the survey:
  
  - 85% \((n = 219)\) of grade 9 students  
    (24.5% of total participants)
  
  - 89% \((n = 237)\) of grade 10 students  
    (26.5% of total participants)
  
  - 86% \((n = 278)\) of grade 11 students  
    (31% of total participants)
  
  - 61% \((n = 157)\) of grade 12 students  
    (17.5% of total participants)
Percentage of Participants From Each Grade (Total # 897 Students)
Major Categories of Questions

- Stress
- Sleep and fatigue
- Physical Activity
- Computer/television use
- Behaviors that contribute to Unintentional Injuries
- Behaviors that contribute to Violence
- Bullying
- Depression and Suicide
- Tobacco
- Alcohol
- Illegal Drugs — Marijuana, hallucinogens, heroin, LSD
- Prescription Drugs
- Access to drugs/alcohol
- Sexual behaviors that contribute to STDs and Unintended Pregnancies
- Nutrition-related behaviors
ALCOHOL-RELATED BEHAVIOR
(in % of participants)

- Age of onset
- First use before age 13
- Used within lifetime
- Use within past 30 days
- High-risk drinking past 30 days
- Drank on school property past 30 days

SHS 2010-11
SHS 2015
State
National
ALCOHOL AND DRIVING

Past 30 d rode with a driver who had been drinking
Past 30 d drove a car after drinking alcohol

<table>
<thead>
<tr>
<th></th>
<th>2010-11</th>
<th>2015</th>
<th>MA</th>
<th>US</th>
</tr>
</thead>
<tbody>
<tr>
<td>Past 30 d rode with a driver who had been drinking</td>
<td>16.4</td>
<td>9</td>
<td>18</td>
<td>22</td>
</tr>
<tr>
<td>Past 30 d drove a car after drinking alcohol</td>
<td>6.8</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>
Marijuana Use vs. Illegal and Prescription Drug Use
(Results in % of participants)

- Ever used marijuana
- Marijuana past 30 days
- Marijuana: @ school past 30d
- Cocaine lifetime
- Meth lifetime
- Steroids lifetime
- Inhalants lifetime
- Heroin lifetime
- Prescription stimulants
- Prescription antianxiety, tranquilizers
- Prescription Opioid pills
- OxyContin

SHS 2010-11
SHS 2015
State
National
MARIJUANA: A CLOSER LOOK
(results in % of participants)

<table>
<thead>
<tr>
<th></th>
<th>Ever used marijuana</th>
<th>Used marijuana past 30 days</th>
<th>First use before age 13</th>
<th>Rode in car w/ driver under influence marijuana past 30 days</th>
<th>Drove after using past 30 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHS 2010-11</td>
<td>33.7</td>
<td>24.3</td>
<td>3.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SHS 2015</td>
<td>36.5</td>
<td>25</td>
<td>2</td>
<td>23</td>
<td>9</td>
</tr>
<tr>
<td>State</td>
<td>41</td>
<td>25</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>National</td>
<td>41</td>
<td>23</td>
<td>9</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
MARIJUANA: A CLOSER LOOK
BY GRADE (in %)

<table>
<thead>
<tr>
<th>Grade</th>
<th>SHS 2010-11</th>
<th>SHS 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 9</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Grade 10</td>
<td>20</td>
<td>30</td>
</tr>
<tr>
<td>Grade 11</td>
<td>40</td>
<td>50</td>
</tr>
<tr>
<td>Grade 12</td>
<td>60</td>
<td>60</td>
</tr>
</tbody>
</table>
Frequency of marijuana use in 12th graders by %

<table>
<thead>
<tr>
<th>% of 12 th grade respondents</th>
<th>Used marijuana 40 - 99 times</th>
<th>Used marijuana 100 or more times</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHS 2010-11 12th Graders</td>
<td>7</td>
<td>20</td>
</tr>
<tr>
<td>SHS 2015 12th Graders</td>
<td>12.9</td>
<td>14.8</td>
</tr>
</tbody>
</table>
% of Student Adderall, Ritalin, or Dexedrine Use without a Prescription: A Closer Look by Grade

<table>
<thead>
<tr>
<th>Grade</th>
<th>SHS 2010-11</th>
<th>SHS 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 9</td>
<td>1.2</td>
<td>2.3</td>
</tr>
<tr>
<td>Grade 10</td>
<td>6.7</td>
<td>5.2</td>
</tr>
<tr>
<td>Grade 11</td>
<td>12</td>
<td>9.3</td>
</tr>
<tr>
<td>Grade 12</td>
<td>15.9</td>
<td>14.1</td>
</tr>
<tr>
<td>All respondents</td>
<td>9.1</td>
<td>7</td>
</tr>
</tbody>
</table>
% of Respondents Who Took Prescription Pain Pills (Vicodin, Percocet, Codeine, etc) That Were Not Prescribed to Them: A Closer Look

24% of students who took prescription pain pills w/o a prescription report the first time they took prescription pain pills was related to an injury or surgery where a doctor prescribed them.
A CLOSER LOOK AT REPORTED OXYCONTIN USE IN %

<table>
<thead>
<tr>
<th>OXYCONTIN USE</th>
<th>SHS 2010-11</th>
<th>SHS 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHS 2010-11</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>SHS 2015</td>
<td>2.6</td>
<td></td>
</tr>
</tbody>
</table>
HEROIN USE: A CLOSER LOOK

<table>
<thead>
<tr>
<th></th>
<th>HEROIN use past 30 days in % of respondents</th>
<th>HEROIN use past 30 days by # of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHS 2010-11</td>
<td>1.9</td>
<td>19</td>
</tr>
<tr>
<td>SHS 2015</td>
<td>0.9</td>
<td>8</td>
</tr>
<tr>
<td>U.S.</td>
<td>2.2</td>
<td></td>
</tr>
</tbody>
</table>
% OF STUDENTS WHO REPORT EVER HAVING USED MDMA (XTC, MOLLY): A CLOSER LOOK
% of Cigarette or other Tobacco Use: Lifetime

- Lifetime Tobacco use
- Past 30 days tobacco
- Tobacco use on school property
- Chewing tobacco past 30 days
- Electronic vapor product past 30 days
- Lifetime vapor product use

SHS 2010-11
SHS 2015
MA
U.S.
% Who Have Tried to Stop Taking Drugs that Were Not Prescribed to Them

SHS 2015

- No I have never tried to stop taking drugs
- Yes, I successfully stopped taking drugs
- Yes, I tried to stop once but was unsuccessful
- Yes, I tried to stop several times but have been unsuccessful
ACCESS TO SUBSTANCES: Alcohol

SHS 2015

- I don't drink alcohol
- From a friend
- Home w/o parent knowledge
- From my parent/guardian
- From an older sibling
- Other
- From a friend/family's parent
- Using a fake ID
- Ask a stranger to buy it for me

Percentage distribution among different sources of access to alcohol.
## ACCESS TO DRUGS ON SCHOOL PROPERTY

<table>
<thead>
<tr>
<th></th>
<th>SHS 2010-11</th>
<th>SHS2015</th>
<th>STATE</th>
<th>U.S</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCESS TO DRUGS ON SCHOOL PROPERTY</td>
<td>14%</td>
<td>20%</td>
<td>23%</td>
<td>22%</td>
</tr>
</tbody>
</table>
SEXUAL BEHAVIORS THAT CONTRIBUTE TO STDs AND UNINTENDED PREGNANCIES

<table>
<thead>
<tr>
<th></th>
<th>2010-11</th>
<th>2015</th>
<th>State</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ever had sexual intercourse</td>
<td>20.9</td>
<td>20.4</td>
<td>38</td>
<td>47</td>
</tr>
<tr>
<td>Recent sexual intercourse</td>
<td>15.7</td>
<td>15.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 or more partners</td>
<td>5.9</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>no condom last intercourse</td>
<td>32.8</td>
<td>31.2</td>
<td>58</td>
<td>59</td>
</tr>
</tbody>
</table>
### Sexual Behaviors that Contribute to Unintended Pregnancy

<table>
<thead>
<tr>
<th>Behavior</th>
<th>2010-11</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ever been pregnant or gotten a partner pregnant</td>
<td>2.6</td>
<td>2.1</td>
</tr>
<tr>
<td>Tested for HIV</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Tested for other STDs</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>No method used to prevent pregnancy last intercourse</td>
<td>7</td>
<td>29.5</td>
</tr>
<tr>
<td>No sexuality conversation with parents or other adult</td>
<td>50</td>
<td>54</td>
</tr>
</tbody>
</table>
Sexual Behaviors that Contribute to Unintended Pregnancy

<table>
<thead>
<tr>
<th></th>
<th>2010-11</th>
<th>2015</th>
<th>MA</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Used alcohol or drugs before</td>
<td>30</td>
<td>15.5</td>
<td>24</td>
<td>22</td>
</tr>
<tr>
<td>most recent intercourse</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Used condom last intercourse</td>
<td>67</td>
<td>68</td>
<td>58</td>
<td>59</td>
</tr>
<tr>
<td>Taught about condom use in</td>
<td>77</td>
<td>89</td>
<td>57</td>
<td></td>
</tr>
<tr>
<td>high school</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Relationship Abuse/Sexual Assault

<table>
<thead>
<tr>
<th></th>
<th>2010-11</th>
<th>2015</th>
<th>MA</th>
<th>US</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hurt physically by a date past 12 months</td>
<td>5.4</td>
<td>4.5</td>
<td>8</td>
<td>10</td>
</tr>
<tr>
<td>Sexual Contact against your will</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2010-11</td>
<td>6.9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>6.5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MA</td>
<td></td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>US</td>
<td></td>
<td></td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>
RISK FACTORS: STRESS

PERCEIVED UNMANAGEABLE STRESS PAST 30 DAYS

No unmanageable stress 1 to 2 days 3 to 4 days once/week 2-3x/week most days every day

SHS 2010-11 SHS 2015
RISK FACTORS: DEPRESSION, SUICIDE

- Depression symptoms
- Self-injury
- Considered suicide past 12 months
- Made a plan for suicide past 12 months
- Attempted suicide past 12 months
- Attempted suicide & needed medical treatment past 12 months

SHS 2010-11
2015
STATE
U.S.
Attempted Suicide in Previous 12 months
2015, 2010-11 and 2001 results

<table>
<thead>
<tr>
<th></th>
<th>SHS 2001</th>
<th>SHS 2010-11</th>
<th>SHS 2015</th>
<th>MA</th>
<th>US</th>
</tr>
</thead>
<tbody>
<tr>
<td>attempted suicide in prev 12 mths</td>
<td>12.9</td>
<td>2.9</td>
<td>7.2</td>
<td>6</td>
<td>8</td>
</tr>
</tbody>
</table>
RISK FACTORS: DEPRESSION, SUICIDE
Cross-tabulated by gender identification

- Seriously considered suicide past 12 months
- Made a plan for suicide
- Attempted suicide in past 12 months
- Needed medical attention for suicide attempt past 12 months

% of Students who identify as Male
% of Students who identify as Female
% of Students who identify as Gender Other
RISK FACTORS: FREQUENCY OF BULLYING

- Frequency: 0%
- 2%
- 4%
- 6%
- 8%
- 10%
- 12%
- 14%
- 16%
- 18%

SHS 2010-11
SHS 2015

- Once or twice
- 2-3 times
- 1x/week
- 2-3x/week
- >3x/week
RISK FACTORS: BULLIED ON SCHOOL PROPERTY

- % of students who identified as Male
- % of students who identified as Female
- % of students who identified as Gender Other

Bullied on School Property
RISK FACTORS:
WHERE BULLYING TAKES PLACE (% of all respondents)
PROTECTIVE FACTORS:

Less Unstructured Time, Adults to talk to, Success in School

- On at least 1 sports Team
- At least one teacher/adult at school to talk to
- At least one parent/adult to talk to
- Mostly A's and B's

SHS 2010-11
SHS 2015
MA
U.S.
SAFETY and VIOLENCE

<table>
<thead>
<tr>
<th></th>
<th>Past 30 d carried a weapon such as a gun, knife or club on school property</th>
<th>Been a member of gang or group w/similar utilities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2010--11</td>
<td>2015</td>
</tr>
<tr>
<td>2010--11</td>
<td>2</td>
<td>4.6</td>
</tr>
<tr>
<td>2015</td>
<td>2.5</td>
<td>10</td>
</tr>
<tr>
<td>MA</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>US</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>
Helpful Resources

- CDC Department of Adolescent & School Health
- It Gets Better Project
- National Highway Safety Traffic Administration
- National Institute on Drug Abuse
- Partnership for Drug-Free Kids
- Samaritans
- Smokefree Teen
- StopBullying.Gov
- Students Against Destructive Decisions
- Substance Abuse & Mental Health Services Administration
- The Trevor Project
- US Department of Human Health Services - Office of Adolescent Health
May 6, 2015

Dear Parent/Guardian:

Sharon High School will administer an adaptation of the CDC’s Youth Risk Behavior Survey on Thursday, May 21st. The survey, which will be given to students in every grade, will ask questions about the health-related behaviors of adolescents.

Subjects covered in the survey include: violence and personal safety, bullying, tobacco, alcohol, and other drug use, distracted driving, stress, depression, suicide, sleep and leisure activities, diet and exercise, and health education. The survey will also ask questions about sexual behaviors that can lead to AIDS, other sexually transmitted diseases, and pregnancy.

Taking this survey will cause little or no risk to your child. The only potential risk is that some students might find certain questions to be sensitive in nature. The survey, however, has been designed to protect your student’s privacy. Students will not enter their names on the survey. Also, no student will ever be mentioned by name in a report of the results.

While your student will get no immediate benefit from taking part in the survey, the results will guide future curriculum and programming for the school.

The survey is voluntary, but we would like all students to take it. However, no action will be taken if your student decides not to participate. Students may also skip any questions that they do not wish to answer. Additionally, students may stop working on the survey at any point.

Sharon High School last completed this kind of survey in 2010. We are excited about the potential benefits that could come from the results. After reviewing the contents of this letter and the website below, if you do not want your child to participate, please contact one of the wellness teachers listed at the bottom of this letter no later than Friday, May 15th.

If you would like to see the survey, a copy is available for viewing at the high school. Related information can also be found at the following website: http://www.cdc.gov/HealthyYouth/yrbs/index.htm.

Sincerely,

Jose Libano

Jose Libano, Ed.D.
Principal

David Christiansen  D_Christiansen@sharon.k12.ma.us
Ronde Gassman  R_Gassman@sharon.k12.ma.us
Barbara Munden  B_Munden@sharon.k12.ma.us

VISION, MISSION, AND CORE VALUES
Sharon High School strives to be a respectful, caring, dynamic, and inspirational learning community.
We offer our students the academic, civic, and social tools to be informed, thoughtful, and effective contributors to a globally connected world.

PERSEVERANCE ~ RESPONSIBILITY ~ INTEGRITY ~ DEDICATION ~ EXCELLENCE

Sharon Public Schools does not discriminate on the basis of age, color, disability, gender identity, homelessness, national origin, race, religion, sex, or sexual orientation.
Sharon Youth Risk Behavior Survey

This survey is a modified version of the CDC’s National Youth Risk Behavior Survey. It asks questions about substance use and other risk behaviors (like bullying and unprotected sex). Sharon High School (SHS) students are administered the survey every 3-5 years. Prior to the survey, SHS parents receive a letter describing the survey and its objectives. Participation is voluntary and any student or parent can choose not to participate. Students’ responses are completely confidential.

The most recent survey was given in May of 2015. A total of 897 students (81% of current students) completed the survey.

This survey is a valuable tool for measuring the challenges youth face and developing targeted prevention programs. It is funded by the Sharon Public Schools, Sharon Education Foundation, Sharon High School PTSO, and the CHNA 20.

Trends: Sharon 2015 vs. Sharon 2011, MA, and U.S.

Rates of alcohol and drug use are LOWER in Sharon than in MA or the US. Use of alcohol, marijuana, ecstasy, and Rx sedatives increased from 2011-2015, while smoking, heroin, Rx opioids and stimulants, and inhalant use decreased.

ABOUT HALF of SHS students (45%) don’t drink. Those students who drink say they can get alcohol: from a friend (30%) from their house without parent knowing (20%), from a friend’s house without parent knowing (14%), or from their parent (10%).

2015 Lifetime Marijuana Use Among SHS Students by Grade: 600% Increase from 9th to 12th

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>9th</td>
<td>9.8</td>
</tr>
<tr>
<td>10th</td>
<td>35.6</td>
</tr>
<tr>
<td>11th</td>
<td>45.7</td>
</tr>
<tr>
<td>12th</td>
<td>58.1</td>
</tr>
</tbody>
</table>

2015 Lifetime Prescription Opioid Misuse Among SHS Students by Grade: 300% Increase by 12th

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>9th</td>
<td>1.9</td>
</tr>
<tr>
<td>10th</td>
<td>3.5</td>
</tr>
<tr>
<td>11th</td>
<td>5.7</td>
</tr>
<tr>
<td>12th</td>
<td>5.8</td>
</tr>
</tbody>
</table>

This worksheet was based on a summary by the OASIS Coalition. Created for distribution in February 2016.

Would you like more information?
Pamela Hay. SSPARC Chair.
Email: haypamela@yahoo.com
Arlene Goldstein. SSPARC Co-Chair.
Email: agoldstein@baystatecs.org

SSPARC Members and Partners:
- Sharon Police Dept.
- Sharon Fire Dept.
- Sharon Public Health Dept.
- Norfolk District Attorney’s Office
- Public Health Faculty
- Local Treatment Providers
- Sharon Recreation Dept.
- Sharon High School Support Staff and Wellness Dept.
- Sharon Youth
- Sharon Parents
- Religious leaders
- Individuals in Recovery
- Parents who have lost children to substance use

Follow us on Facebook!
Sharon Substance Prevention and Resource Coalition
At SHS: Margie Mitlin, Shelley Myerson, Barbara Munden and Officer Hocking are members of SSPARC
The first step to getting into treatment is to figure out what level of care is right for you. Substance use treatment can take place in outpatient, inpatient, residential, or detox facilities. If you are unsure what level of care you need, call Riverside Community Care at 1-800-529-5077.

Some inpatient or residential facilities will only admit you once you have been physically detoxed. To get into a detox, you simply call local detox facilities and speak with the Admissions Department. Try to start early in the day to look for a detox bed (but you CAN call any time!), and be persistent. Have your health insurance information ready (some facilities have free care beds for uninsured patients). Contact the facilities on this list, and ask if they have an open bed. If the facility says there are no beds, ask when you can call back to check if any beds have opened up.

Write down call back times for each detox facility and call when they tell you to!

Enlist the help of a family member or friend if you need to.

KEY
Dual-Diagnoses: Designed to treat substance use and co-occurring mental health disorders
CSS: (Clinical Stabilization Services) Short-term residential treatment and comprehensive discharge planning
IOP: Intensive Outpatient Program/Partial Program

DRUG AND ALCOHOL DETOX FACILITIES:

1. Adcare
   107 Lincoln Street
   Worcester, MA
   800-345-3552
   800alcohol.com

2. Arbour Hospital (Dual-Diagnoses ONLY)
   227 Babcock Street
   Jamaica Plain, MA
   45 Clapboardtree Street
   Westwood, MA
   All Locations: 800-222-2237 or 617-390-1320
   www.arbourhealth.com

3. Baldpate
   83 Baldpate Road
   Georgetown, MA
   978-352-2131
   www.detoxma.com

4. Bournewood Hospital
   300 South Street
   Chestnut Hill, MA
   800-468-4358
   800alcohol.com
5. **Caritas Norcap**  
83 Baldpate Road  
Georgetown, MA  
978-352-2131  
http://www.steward.org/Substance-Abuse

6. **Community HealthLink**  
68 Jacques Avenue  
Worcester, MA  
508-860-1200  
www.communityhealthlink.org

7. **Dimock**  
55 Dimock Street  
Roxbury, MA  
617-442-8800  
http://www.dimock.org/behavioral-health/detox/

8. **Faulkner Hospital**  
1153 Centre Street  
Jamaica Plain, MA  
617-983-7060  
http://www.brighamandwomensfaulkner.org/programs-and-services/addiction-medicine

9. **Gosnold**  
200 Ter Heun Drive  
Falmouth, MA  
800-444-1554  
www.gosnold.org

10. **Highpoint at Brockton**  
30 Meadowbrook Road  
Brockton, MA  
508-584-9210  
www.hptc.org

11. **Highpoint at Plymouth**  
1233 State Road  
Plymouth, MA  
508-224-7701  
www.hptc.org
<table>
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<tr>
<th>Number</th>
<th>Facility Name</th>
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<th>City, State</th>
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<th>Special Features</th>
<th>Notes</th>
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<tr>
<td>12</td>
<td>Lahey at Boston</td>
<td>784 Massachusetts Avenue</td>
<td>Boston, MA</td>
<td>800-763-5363</td>
<td><a href="http://www.nebhealth.org/services/#Addiction">http://www.nebhealth.org/services/#Addiction</a></td>
<td>Male/Female</td>
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<td>13</td>
<td>Lahey at Danvers</td>
<td>111 Middleton Road</td>
<td>Danvers, MA</td>
<td>978-777-2121</td>
<td><a href="http://www.nebhealth.org/services/#Addiction">http://www.nebhealth.org/services/#Addiction</a></td>
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<td>Lahey at Tewksbury</td>
<td>365 East Street</td>
<td>Tewksbury, MA</td>
<td>978-259-7001</td>
<td><a href="http://www.nebhealth.org/services/#Addiction">http://www.nebhealth.org/services/#Addiction</a></td>
<td>Male/Female/CSS on Site</td>
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<td>15</td>
<td>McLean Hospital</td>
<td>115 Mill Street</td>
<td>Belmont, MA</td>
<td>617-855-3141</td>
<td><a href="http://www.mcleanhospital.org/programs/alcohol-and-drug-abuse-treatment-program">http://www.mcleanhospital.org/programs/alcohol-and-drug-abuse-treatment-program</a></td>
<td>Male/Female/Dual-Diagnoses/</td>
<td>IOP Available/CSS on Site</td>
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<td>16</td>
<td>New England Recovery Center</td>
<td>153 Oak Street</td>
<td>Westborough, MA</td>
<td>(855) 774-0744</td>
<td></td>
<td>Male/Female/CSS on Site/ IOP Available/Adolescent Treatment</td>
<td>Private Insurance Only</td>
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<td>17</td>
<td>Phoenix House</td>
<td>43 Old Colony Ave</td>
<td>Quincy, MA</td>
<td>888-671-9392</td>
<td><a href="http://www.phoenixhouse.org">http://www.phoenixhouse.org</a></td>
<td>Male/Female/CSS on Site</td>
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<tr>
<td>18</td>
<td>Spectrum</td>
<td>154 Oak Street</td>
<td>Westborough, MA</td>
<td>800-366-7732</td>
<td><a href="http://www.spectrumhealthsystems.org/programs/acute-treatment">http://www.spectrumhealthsystems.org/programs/acute-treatment</a></td>
<td>Male/Female/Long Term Aftercare On-Site</td>
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## 19. **SSTAR**
386 Stanley Street  
Fall River, MA  
508-324-7763  
www.sstar.org/ats-acute-treatment-services/  

*Male/Female*

**NOTES:**

## 20. **St. Elizabeth’s Hospital (SECAP)**
736 Cambridge Street  
Brighton, MA  
617-789-2574  
http://www.semc.org/SECAP  

*Male/Female/Dual-Diagnoses/IOP Available*

**NOTES:**

## 21. **VA Hospital Brockton**
940 Belmont Street  
Brockton, MA  
774-826-2112  
774-826-2318  

*Vets Only/No Pregnant Vets*

**NOTES:**
DRUGS AND ALCOHOL

Adolescent Use and Abuse
Drug and alcohol use continue to grow.

There have been a number of teen drug related deaths that have touched and directly impacted the Sharon community.

The guidance and clinical staff at Sharon High School are very concerned and want to provide education regarding this issue.
WHY TEENS GET INVOLVED WITH DRUGS AND ALCOHOL

- Often misguided attempts to manage stress
- To self medicate
- A way to fit in
- Bored
- Attitude that teen drug and alcohol use are normal
It’s an all too familiar story—

A young teen who was once loveable, happy and successful in school and was an all around good kid, has become disrespectful, defiant and secretive.

He/she spends hours in his/her room, uncommunicative.

He/she spends even more hours out of the house, places unknown.

He/she is often sleepy and red eyed.

Any request for information is met with hostility.

Unexplained behavior-dents in the car, decreased motivation, missing money

New friends, drug related paraphernalia around, breath fresheners appearing
No attempts to talk have helped
You have begged, pleaded, cried and threatened
You have taken away privileges
Nothing seems to make a difference
You are watching your child disappear into the drug culture and the stakes are high
You are worried that your child has a drug or alcohol problem—you think it may be just a phase—that all the kids do it
You have tried everything you know and nothing is working. Now what?

There are no quick fixes

You probably can not drag them to a program or therapy

But, if they are willing there are different types of programs

Or maybe an intervention?

An intervention is an orchestrated attempt by one, or often many people (usually family and friends) to get someone to seek professional help.
• When an adolescent is found to have a drug or alcohol problem, often times there is also another concern—such as depression or anxiety.

• Treatment is most comprehensive when both are treated.

• There were reasons that this problem got out of hand and those issues must be addressed and dealt with.

• Through intensive counseling, teens need to attempt to understand what drives them to use drugs, what their triggers are and to develop alternative strategies for coping stress and leading a healthier life.
OUT-PATIENT THERAPY, PARTIAL OR IN PATIENT

Out patient therapy- may be receiving counseling one day per week

Partial therapy- can be meeting from 9-3 daily for a number of weeks

In Patient

• ONCE ADMITTED TO IN-PATIENT

• 1. Comprehensive Diagnostic Assessment and Individual Treatment Plan

• 2. Detox - a challenging but necessary process that removes all drug toxins from the body

• 3. Care Management - Education, Counseling, Group counseling, Family involvement, Academics

MUCH OF THE WORK IS JUST BEGINNING

• 4. Aftercare - AA, Alateen, Alanon, question of returning to the same environment, counseling, new activities…
Families may experience, confusion, devastation, feeling that they are unprepared to handle this and don’t know where to turn, experiencing feelings of guilt or blame, fearful, seeing a deterioration in the relationship with the child as a result of dishonesty, difficulty in maintaining or regaining trust, conflicts between family members as to how to deal with this issue, feelings of hopelessness… You must remember that this is your child’s journey-only they can make the decision to change. Your role is to support and encourage.
Where do I find resources

What happens to missed school

Am I over reacting

Am I enabling

Is this just a phase

Who is going to pay

Will insurance cover this
RESOURCES

- McLean Hospital 1-800-333-0338
- Westwood Lodge 1-781-762-7764
- Children’s Hospital Addiction 1-617-355-2727,
- Mass General Hospital Addiction 1-617-724-5600-www.addictionanswers.com
- Caron House www.caron.org 1-800-854-6023
- Behavioral Health of the Palm Beaches (out of state and over 18) www.bhpalmbeach.com
- Bournewood Hospital 1-617-469-0300
- CAB Health www.cabhealth.org 1-800-323-2224, 1-866-801-8205
- Caritas Norcap Lodge 1-508-543-1873
- The Castle castlekids.org 1-508-638-6000
- Gosnold-gosnold.org 1-800-444-1554
- Sameem Associates 1-781-793-5800 www.sos.drugs.org
- Highland Grace Girls House 1-508-860-1172
- Adcare Hospital 1-800- Alcohol
• Alanon/Alateen 1-888-425-2666 www.al-anon.alateen.org
• AA-Alcoholics Anonymous 1-617-426-9444, 1-866-624-9444
• NA-Narcotics Anonymous 1-866-624-3578
• www.learn2cope.org
• Findtreatment.samhsa.gov
• Drugfree.org www.helpline-online.com
• Ostiguy Recovery High School ostiguyhigh.org 1-617-348-6070
• Wilderness Programs