

Regional Advisory Board (RAB) of Community Anti-Drug Coalitions

December 2020 Newsletter

December Awareness Campaign

December is National Impaired Driving Prevention Month. Impaired driving refers to being under the influence of alcohol and/or drugs while driving. More information can be found at Stopdruggeddriving.org.

Did you know?

New e-prescribing mandates begin Jan. 1, 2021: The Indiana General Assembly has passed two laws with requirements that will go into effect on January 1st, 2021 and include mandates for prescribing controlled substances. The first law will require a mandatory INSPECT query before an opioid or benzodiazepine is prescribed. While this requirement has been in effect for pain management clinics and hospitals since 2018, it has not applied to all controlled substance registration holders. The second law will require a schedule II, III, IV or V controlled substance prescription covered by Medicare part D drug to be “transmitted electronically”. (Indiana State Department of Health, 11/17/2020)

Indiana Department of Correction to Provide Naloxone to Offenders Upon Release:

The IDOC announced on November 10th that they will be making naloxone, the opioid reversal agent, available to those recently released from an IDOC facility. Dr. Kristen Dauss, IDOC Chief Medical Officer explains that providing naloxone upon release can help ensure they have an easier transition into the community. During a pre-release screening, the incarcerated person is asked whether they would like to receive a free naloxone kit, which contains one dose of naloxone, instructions for use, and a referral card for treatment. The goal of this effort is to replicate the naloxone program that currently exists in Indiana’s 10 parole districts. These efforts are in alignment with the state of Overdose Lifeline’s goal of reducing the stigma around substance use disorder. (Indiana State Department of Health, 10/6/2020)

Loneliness, Mental Health, and Substance Use among US Young Adults during COVID-19

As COVID-19 converges with loneliness and addiction epidemics in the US, both public health and mental health experts forecast dramatic increases in substance use and mental health conditions. Between April 22 and May 11, 2020, 1,008 participants ages 18–35 were recruited through social media to a one-time, online anonymous survey. Symptomatology was assessed using six scales. Perceived changes since COVID-19 were evaluated using 5-point Likert scales. Forty-nine percent of respondents reported loneliness scores above 50; 80% reported significant depressive symptoms; 61% reported moderate to severe anxiety; 30% disclosed harmful levels of drinking. While only 22% of the population reported using drugs, 38% reported severe drug use. Loneliness was associated with higher levels of mental health symptomatology. Participants reported significant increases across mental health and substance use symptoms since COVID-19, and estimates suggest that symptoms could have worsened since the pandemic. (ASAM Weekly, 11/24/20)

Know! What's Up with Psychedelics?

While you may not be familiar with psilocybin, chances are you have heard of psychedelic mushrooms, or shrooms. Psilocybin is the active ingredient in psychedelic mushrooms. Though many of us associate psychedelics with the 60's, there has been a resurgence of interest in their use. In November, Oregon became the first state to **legalize** psilocybin, and it has America talking. The question is, are you talking to your teens about this substance? If not, let us help you get the conversation started.

Here's Some Info to Know! on Psilocybin

- Psilocybin and other psychedelic drugs were broadly banned under the 1970 Controlled Substances Act.
- It is classified as a Schedule I drug, meaning, it has no legally accepted medical use and has a high potential for abuse.
- In May 2019, Denver, Colorado became the first city to **decriminalize** psilocybin, with Ann Arbor, Michigan; Oakland and Santa Cruz, California joining shortly after.
- Washington D.C. passed a ballot initiative to decriminalize this substance earlier this month.

All the legal jargon can get confusing, so here's a brief breakdown on **decriminalization versus legalization regarding psilocybin:**

- In the United States, similar to marijuana, psilocybin remains a **federally illegal substance**, regardless of individual city or state law.
- Again, similar to the model of legalized medical marijuana, in Oregon psilocybin has been approved for adults 21 years and older to have legal access to the drug for "medicinal purposes" under the supervision of a licensed facilitator.
- By **decriminalizing** this psychedelic drug, Oregon and the cities listed above push it to the lowest level of priority among law enforcement. In other words, police resources will not generally be used in the investigation or arrest of psilocybin-related incidents.

How Does this Impact Our Kids?

Clearly there has been a shift in attitude toward this mind-altering substance, as shown by voters. Children are highly influenced by the adults in their lives. When adults' attitudes shift, young people's attitudes tend to follow suit. As drug laws begin to loosen on this and other psychedelic substances, perception of harm is likely to decrease. The idea that psychedelics are dangerous illegal drugs may begin to diminish or fade into a gray area. Additionally, psilocybin is being promoted as having medical benefits, which may further provide a false sense of safety around its use, in the eyes of teens. Our children must be made clearly aware that regardless of law or potential medical uses, psilocybin—psychedelic mushrooms—are powerful, dangerous drugs. They must be told that decriminalization does not equal safety and that legalization in any form does not equal safety, especially for children. (Prevention Action Alliance, 11/23/20)

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