



The Journey:

**A guide to help you navigate through teen
substance use and treatment**

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Introduction

Welcome to Anuvia's Adolescent Services. This handbook is designed to meet the following goal – To give you an overview and understanding of what substance use treatment is about.

According to the 2009 US Census, there are 90,688 10 to 18 year-old adolescents in Mecklenburg County. Based on national rates, it is estimated over 7,000 of these adolescents have a substance abuse disorder in need of treatment (National Survey on Drug Use and Health, 2009). It is also estimated that over 24,000 participate in underage drinking and over 9,000 are current illicit drug users (NSDUH, 2009).

Substance abuse produces tragic consequences across all populations, but an adolescent engaged in substance abuse gravitates to ever-increasing risks that, in many respects, are more severe than risks experienced by adults with substance use disorders. Youth ages 12 to 17 are in critical stages of physical, cognitive and emotional development, and impairment can cause damage that lasts a lifetime, resulting in quality of life issues that negatively affect families, communities, the work environment and the justice system.

Specifically, an adolescent with a substance use disorder puts at risk every system of their body, most critically organ function, circulatory and hormone systems, fertility and brain function. With prolonged use, drugs can cause a youth significant and permanent psychological damage. There are adverse behavioral changes, including withdrawal from family, aggression, violence, criminal activity and risky sexual behavior. There are trends toward falling grades, withdrawal from school activities, increased absenteeism and greater dropout rates. One of the biggest consequences of drug abuse is addiction, perhaps for a lifetime, which amplifies every other drug-associated consequence. Addiction, as well as simple experimentation, can cause fatalities, shattering families and communities.

Beyond the individual level, everyone is affected by substance abuse. The consequences produce major impacts on our systems of healthcare, justice and education, consuming valuable resources of time and money. Most tragic is the person or family who is impacted by a death due to underage drinking and driving.

We hope you find this handbook helpful.

Hmm... Is My Teen Using?

My gold watch is missing. I've kept that in my jewelry box for the last 10 years.

My neighbor just told me she saw my son smoking weed with a group of teenagers around the corner.

My daughter's friends are rude and smell like alcohol. My daughter acts like this is no big deal.

I just found an empty liquor bottle under my son's bed.

I was sure I bought more cough medicine last week. What did I do with it?

The police just called. My daughter's been arrested for possession. What does that mean?

My mother said that after our family visited last weekend some of her prescriptions were missing.

My daughter's room smells like incense and air freshener all the time...

My son used to be an A student. His last report card was full of D's and F's.

My son just punched a hole in the wall and stormed out of the house.

When I asked my son where he was last night, he cursed at me and slammed the door...

I think my son is using, but I don't know what to do.

My daughter used to care about what she looked like. Now her hair is stringy and her eyes are always red.

Confirming Fears

Parents find out in many different ways that their child is using alcohol and other drugs. You may notice changes in behavior or changes in friends. A neighbor or a teacher may tell you. You may find drug paraphernalia in your teen's room. An emergency room staff person may call you. Regardless of how you discover your teen is using alcohol and other drugs, the experience can be overwhelming and frightening. Knowing some of the signs of substance abuse can be your first line of defense.

If you suspect that your teen is using, here are some warning signs to consider:

- Change in friends
- Declining grades
- Mood swings
- Legal problems
- Change in activities and interests
- Valuables missing from your home.
- Poor hygiene or drastic change in lifestyle
- Missing prescriptions or over the counter medications
- Missing alcohol
- Fascination with the drug culture (doodling marijuana leaves or mushrooms, posters or t-shirts depicting marijuana or other drugs)
- Decline in physical health
- Someone tells you your child is using
- Lack of motivation or change in work ethic
- Increase in conflicts in the family
- Child/teen experienced trauma

Don't second guess yourself if you see more than one of these warning signs. If you feel in your gut something is wrong, seek help. Parent/caregiver and family involvement is a strong indicator of success when it comes to intervening with teens and to reaching the stage of recovery.

Where to start

Realizing that your teen may be using drugs or alcohol is a scary issue for parents/caregivers. You may feel confused about your child's behavior. Many caregivers blame themselves or try to find reasons for their teen's behavior. If only I had been home more after school. If only his father didn't drink. If only she didn't hang out with those kids. If only I didn't live in this neighborhood. If only I...

Adults may also remember their own experimentation with alcohol and other drugs when they were teens. These experiences can lead caregivers to question whether they need to do anything at all. *After all, they turned out alright! Right?*

However, the reality is that some of today's drugs are far more potent than the drugs of the past. For example, the marijuana of today is much stronger than the marijuana from the 1970's and 1980's. Additionally with the Internet, cell phones/text messaging, etc., teens have far more access to information and to each other. Social pressures to use alcohol and other drugs are strong. Peer pressure often encourages teens to participate in heavy drinking that leads inevitably to "getting wasted." Music, TV, and video games give the illusion that doing drugs and drinking alcohol is normal for teenagers.

... one key element that influences successful intervention, treatment and recovery for teenagers is caregiver and family involvement.

These alarming statistics give prime reasons to pay attention to the influences on teens:

*The average age for first marijuana use is 14.
The average age for first alcohol use is 12.*

It can not always be understood why teenagers make the choices that they make, nor can we understand what influences their decisions. What we do know for certain is that the one key element that influences successful intervention, treatment and recovery for teenagers is parent and family involvement. It is very important for caregivers to move from shock to action. Caregivers must intervene when they suspect alcohol and other drug use/abuse. Adolescents can progress quickly from experimentation to dependency. There are steps that you can take to begin the process of getting help for your teenager.

Here are some steps you can take:

- ➔ Educate yourself. Understand this as a serious health issue versus a rite of passage or a moral issue. Get all the facts you can about alcohol and the substances your teen is exposed to and/or using.
- ➔ Talk to the other adults who are responsible for your teen's primary care. Make sure that you and other caregivers are on the same page so you can show your teen a united front.
- ➔ Utilize random drug screens – Administer random urine screens on your teen without forewarning them. Drug test kits are available at many drug stores or you can request a screening at facility such as Anuvia.
- ➔ Talk to your teen. When you talk, make sure you and your teen are both calm. It is very important that parents/caregivers emphasize that they are coming from a perspective of concern, not blame.
- ➔ Talk to your teen when they are sober.
- ➔ Set clear limits with your teen. Let your teen know that you will not tolerate future substance use. Remove privileges that provide access to bad behavior, while increasing access to positive social activities. Restrict movement on weekends and after school. Take away cell phones, car privileges and access to money. Pay attention to what is in your teen's room or in the home. Restrict phone access. Monitor computer time and keep computer access in an open area of your home, not in the bedroom. Follow-up with school personnel to ensure school attendance.
- ➔ Let your child know what choices you are willing and not willing to support.
- ➔ Be consistent with your expectations, guidelines and follow-through.
- ➔ Share information with and get support from others who work with your child. Does your teen have a counselor/therapist? A probation officer? School counselor?
- ➔ Enlist the help of a friend or family member who may be in recovery.
- ➔ Contact Social Service agencies that can help.
- ➔ Contact your insurance company regarding coverage of treatment options.
- ➔ Identify someone whom you trust, like a counselor, close friend or pastor, who can be your support person as you and your family journey on the road to recovery.
- ➔ Locate and attend a support group such as Alanon or Alateen.

Sound familiar?

You are overreacting. It's not that big of deal!

It's only cough medicine.

What were you doing in my room anyway!

I can stop if I want to.

Their parents bought the beer for us.

It must be safe, you have a prescription for it.

Keep your nose out of my business.

X's parents don't care that she drinks.

We weren't doing anything. The police were just harassing us.

The store sold it to me.

It's your fault! You put so much pressure on me to get good grades.

Everybody smokes weed!

What do I do next?

Regardless of how your teen responds to you, it is important that you enlist the support of a professional. There are many agencies and practitioners in Mecklenburg County and across the state of North Carolina that can support you in your family's journey.

Agencies offer different types of support depending on the needs of your family and your teen's willingness to participate. Your teen may fall anywhere along a continuum of use from experimentation to chemical dependency.

Screening - A preliminary evaluation to determine suitability for the program.

Drug Screen – A drug screen is usually done as a urinalysis to determine the presence of illegal drugs in a person's system.

Assessment – An evaluation that examines the extent of drug use, mental health issues and appropriateness for treatment.

Agencies that treat teens are able to help determine where your teen falls in the continuum by administering an assessment. Besides assessing for substance abuse, an agency may also assess for mental health issues. Often teens that are using alcohol and other drugs are masking symptoms of mental health issues. A combination of a substance abuse problem and a mental illness is also known as a co-occurring disorder.

Co-occurring disorders are not uncommon in teens who abuse substances. If there is a history of mental illness in your family or you have noticed a change in emotional behavior, advocate for your teen by making sure the agency includes a mental health assessment. Other terms used are diagnostic assessment and comprehensive clinical assessment.

When you call the agency to schedule an appointment, they may conduct a screening over the phone. A screen is not an assessment for placement or diagnosis, but rather allows the agency to ensure that they are prepared to handle your case. Be prepared to spend 5 to 15 minutes on the phone answering questions. This will help the agency best meet your teen's needs.

A substance abuse/mental health assessment will usually be conducted during your first appointment. The assessment can last from 1 – 3 hours. An assessor will ask your teen detailed questions about their use of alcohol and other drugs.

They may also ask for your input and observations. After an assessment, a counselor can suggest a level of services or treatment your teen needs. A teen that has just started using may benefit from early intervention services. Early intervention services may include counseling, classes or education groups that explore the affects of alcohol and other drugs with the teen. Early intervention groups also focus on life skills, youth development and social skills. If your teen has progressed beyond experimentation, a counselor may suggest treatment. The two types of treatment that will be considered when assessing your teen are **Outpatient** or **Inpatient** treatment.

Outpatient vs. Inpatient Treatment

Outpatient treatment requires that your teen attend individual and/or group therapy sessions a couple hours per day, for several days and/or weeks. Other times it can be the whole day, 5 days/week, which is usually referred to as day treatment or partial hospitalization. Outpatient programs may be flexible and can occur in late afternoons and evenings. Families may be asked to participate in family therapy, support groups or psycho education.

If a teen is unable to stay clean during or after completing an outpatient program they may be referred to inpatient treatment. Some teens may be assessed as needing an inpatient program at the time of their assessment. During inpatient or residential treatment your teen will stay at a facility for a certain number of days. During that time they will receive individual therapy, group therapy and other activities that support a drug free life style once they are discharged. An inpatient treatment program will also incorporate educational and therapeutic services for the family of the teen. Families may be asked to attend multiple family therapy sessions, educational groups and/or family support groups. If you teen is in school, the treatment facility will be in contact with the school so educational progress can be maintained. After teens complete an inpatient program, they may “step down” to an outpatient program to provide monitoring and support for changes made while inpatient.

More things to know about treatment:

When you are talking with your teen’s counselor, they may refer to treatment in terms of “Levels”. The American Society of Addiction Medicine (ASAM) has established five main levels in a continuum of care for substance abuse treatment. This is what they are talking about:

- ➔ **Level 0.5** – Early Intervention - Level 0.5 is NOT a level of care or treatment but the combination of psycho-education and assessment.
- ➔ **Level I** – Outpatient treatment includes individual therapy once or twice a week, family therapy, group counseling or a combination of these things, not totaling more than 9 hours per week.
- ➔ **Level II** – Intensive outpatient treatment (also known as IOP, partial hospitalization or day treatment) includes all the above services, but a client attends multiple days a week for several hours at a time (Level II is subdivided into levels II.1 and II.5).
- ➔ **Level III** – Residential/Inpatient treatment is a residential program. A client stays overnight for a number of days depending on how the program is structured and the individual needs of the client. A client is often discharged to a Level I or II outpatient program (Level III is subdivided into levels III.1, III.3, III.5, and III.7).
- ➔ **Level IV**- Medically Managed Intensive Inpatient Treatment Medically Managed Inpatient Residential treatment provides 24-hour medically directed evaluation, care, and treatment for addicted clients with coexisting biomedical, psychiatric, and/or behavioral conditions which require frequent care. Facilities for such services need to have, at a minimum, 24-hour nursing care, 24-hour access to specialized medical care, intensive medical care and physician care.

How do I find a treatment program in my community?

There are several ways for parents to find adolescent treatment facilities in their community.

1. Go to www.findtreatment.samhsa.gov and click on the treatment locator. The treatment locator allows you to click on your state, then enter your zip code and how many miles you are willing to drive. The next page allows you to check criteria. Check as many or as few that apply. The locator then will give you a list of treatment facilities in your area.
2. Talk to a community representative. A school counselor, pastor, neighbors and trusting friends are all good people to begin the process of finding help.
3. Open up your phone book to social service agencies or substance abuse facilities. Call agencies and ask whether they have substance abuse treatment and mental health services for adolescents.
4. Call your insurance company to find available programs covered by your insurance. You can also call your Employee Assistance Program or the Human Resources Department at your place of employment for treatment options.
5. If you have Medicaid, Mecklenburg County Area Mental Health hosts a website which you can access: <http://charmeck.org/mecklenburg/county/AreaMentalHealth>. Go *Consumer Directory* drop down menu where you can query a list of providers who accept Medicaid. You may also call 704-336-6027.

When you have identified a treatment provider, here are some questions you may want to ask:

Regarding an Assessment:

- ➔ Do you provide adolescent services?
- ➔ Is there a cost for an assessment? What do I need to bring to the assessment?
- ➔ If services or treatment is recommended, is there a wait time?
- ➔ Do you provide drug screens?

Regarding Outpatient Treatment:

- ➔ How often will you be meeting with my child?
- ➔ How long will my child have to see you?
- ➔ What is your background in treating adolescents?
- ➔ Do you have special training in adolescent treatment?
- ➔ What will you share with me about how my teen is doing?
- ➔ How often will you meet with me?
- ➔ What happens if my teen continues to use?
- ➔ What happens if my teen starts using again?
- ➔ What kinds of services do you offer parents/caregivers?

Regarding Cost:

- ➔ What is the cost of treatment?
- ➔ Will my insurance pay? How many sessions does my insurance cover?
- ➔ How do I find out what my insurance will pay for?
- ➔ Does Medicaid pay for this?
- ➔ What happens if I can't pay?

Regarding Inpatient Treatment:

- ➔ How long will my teen stay?
- ➔ Will my teen receive any medication? How will that be determined?
- ➔ What if my teen refuses treatment?
- ➔ How often can I visit my teen?
- ➔ Do I have to attend family therapy?
- ➔ How often do I get to visit?
- ➔ Will my visits be supervised?
- ➔ How many staff are on the unit during the day? At nighttime?
- ➔ What is the staff to teen ratio?
- ➔ What kind of activities will my teen participate in?
- ➔ Will my teen attend school during treatment?
- ➔ Will the work come from my teen's high school?
- ➔ Is the teacher on the unit certified?
- ➔ Do you have a continuing care program?
- ➔ Do you do any follow up with our family after treatment?
- ➔ Has the program's treatment methods been measured or studied?
- ➔ What services are available after discharge from treatment?
- ➔ What services are offered to support and educate the family?

If your teen is currently enrolled in school, here are some questions to ask:

Regarding the teen's School:

- ➔ What happens if my teen is in treatment for 30 or more days?
- ➔ Will you let my teen come back to the same grade?
- ➔ What will the teachers be told about why my teen is absent?
- ➔ Do you have any programs that will support my teen when she returns?

Consent and Confidentiality

Confidentiality is the right of a person to have things kept private with another person. In the case of treatment it might be between a teen and his counselor, or a family and a counselor, or a parent and a counselor. The counselor is bound by certain state and federal laws as well as ethical rules that prevent her from sharing your information with others. There are limited circumstances when confidentiality can be breached including but not limited to if the client gives written permission/consent to break confidentiality and or if agency staff needs to make a report of child abuse or neglect. Other exceptions may exist and can be discussed with your treatment provider.

HIPAA

There is a federal act in place that governs how agencies should handle confidential information. This is called the Health Insurance Portability and Accountability Act of 1996, more commonly known as HIPAA. Agencies will have you sign papers that outline your rights under HIPAA. Basically, HIPAA outlines how a person's personal health, including mental health, information should be handled and shared. The State of North Carolina also has laws regarding confidentiality, which are in compliance with HIPAA. These laws also affect how much information a parent can have about their teen's own treatment. Both state and federal laws (42 C.F.R. Part 2) protect the confidentiality of substance abuse information.

For additional information visit the official HIPAA website:

<http://www.hhs.gov/ocr/privacy/>

Laws governing consent and confidentiality in adolescent health care vary from state to state.

In North Carolina § 90-21.5 explains the law concerning a minor's consent sufficient for certain medical health services:

(a) Any minor may give effective consent to a physician licensed to practice medicine in North Carolina for medical health services for the prevention, diagnosis and treatment of (i) venereal disease and other diseases reportable under G.S. 130A-135, (ii) pregnancy, (iii) abuse of controlled substances or alcohol, and (iv) emotional disturbance.

This section does not authorize the inducing of an abortion, performance of a sterilization operation, or admission to a 24-hour facility licensed under Article 2 of Chapter 122C of the General Statutes except as provided in G.S. 122C-222. This section does not prohibit the admission of a minor to a treatment facility upon his own written application in an emergency situation as authorized by G.S. 122C-222.


(b) Any minor who is emancipated may consent to any medical treatment, dental and health services for himself or for his child. (1971, c. 35; 1977, c. 582, s. 2; 1983, c. 302, s. 2; 1985, c. 589, s. 31; 1985 (Reg.Sess., 1986), c. 863, s. 4.)

Note! Even in a situation that allows a minor to consent to their own treatment, for purposes of liability, an agency will often require consent from the parent/legal guardian. The fact that a mental health or substance abuse professional may provide services without parental consent does not mean that the professional must do so.

Recovery

Recovery is about putting together a life without drugs and alcohol. For teens this can be significant during a period of development that looks to friends for confirmation. Successful recovery means learning how to sustain the changes in lifestyle and personal beliefs to which a teen is introduced during treatment. For many teens this means rejecting friends who use. Caregivers can also play a key role in the teen's recovery by staying involved with the teen, offering opportunities for drug-free recreation and being supportive of the changes the teen is trying to make.

Recovery looks different for every teen depending on what issues the teen confronts in their addiction. For some teens there are underlying mental health issues or co-occurring disorders that complicate recovery. Teens may have depression, anxiety disorders, attention deficit hyperactivity disorder, or post-traumatic stress disorder. When seeking services for your teen it is important that the treatment program is able to recognize these issues and treat them in along with the addiction.




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alcohol.*

One complicating issue is that teens are often unwilling participants in their own recovery. They were brought to treatment by parents or guardians, they were court mandated to treatment, they are trying to avoid school expulsion or a lengthy school suspension. Often several systems are impacting a teen's decision to stay in treatment. The criminal justice system may require a teen to be involved in substance abuse counseling for a specified amount of time; a school may require only a drug assessment; and the treatment program may expect a teen to be involved for at least 90 days. Deciding which recommendation to follow can be confusing to a teen and their caregivers.

The best solution to this conflict is to communicate with the treatment program. The treatment program has experience working with teens with substance abuse problems and managing multiple systems. They can help you work with your teen to make sure he gets the most out of treatment and can help you communicate with the various systems involved. Keeping focus on your teen's health and recovery will help you make good decisions. Getting support for yourself will help tremendously in holding your teen accountable while providing the support you and your teen may need.

Relapse

Relapse is common among teens and does not mean failure. Teens may have to seek treatment 2-4 times before they are able to sustain recovery. The critical time is the first 30 to 90 days after treatment. Parents/caregivers must encourage and enable teens to get to their recovery programs so that they can maintain their recovery goals. Research suggests that staying in a continuing care program for one year after treatment is ideal. Self-help groups are another way teens get the support they need during their recovery. Self-help groups, such as Alcoholics Anonymous (AA) are based on the philosophy that teens can get support from talking with other addicts going through similar issues. Research confirms that a combination of treatment and 12-step involvement result in the best chance for a sustained recovery. Although relapse can occur, there are many teens who are able to sustain recovery without reusing alcohol and other drugs.



*Relapse is common
among teens and does
not mean failure.*

A teen's addiction affects the whole family. Family members, including siblings, will benefit from someone who can listen to them. Help and support is available for parents, guardians and other family members through Al- Anon, Ala-teen and Nar-Anon.

These 12-step groups provide non-judgmental, unconditional support, along with education about addiction, and ways to cope with a loved ones use as well as recovery efforts. They are found in many communities throughout the country. Siblings can get support through counseling or attending sibling support groups.

Helping teens manage their recovery requires an acknowledgment of teen development. A teen's desire to do things on his own is as important as recognizing his need to be with his family, as well as his need to finish school and maintain healthy social relationships.

Supporting teens in coping with all of these demands also encourages a sustained recovery. No matter what the circumstances were for you and your teen to seek treatment, recognizing recovery as a process of healing for both of you and believing teens with alcohol and/or drug dependence do recover will help strengthen you on your journey.

Resources

Informational Websites for Families:

www.TheAntiDrug.com – Offers resources, information and facts for parents/caregivers.

www.laantidroga.com – Offers resources, information and facts for parents/caregivers in Spanish.

www.drugfree.org – Offers tips and information for parents and caregivers.

<http://teenbrain.drugfree.org> – A Parents Guide to the Teen Brain

www.mamasite.net – An extensive website on Methamphetamine addiction.

www.marijuana-info.org – A website with reliable information on the effects of marijuana on the brain and links to other websites for further information.

www.momstell.org – Promotes “awareness and eliminate the stigma of substance abuse through improving treatment, education, legislation, policy and prevention.

Informational Websites for Teens:

www.abovetheinfluence.com – offers information, fact sheets, games and posters about drug use.

www.checkyourself.org – Resources, information quizzes and videos for teens to question them about their drug use.

www.thecoolspot.org – Website that provides facts about underage drinking.

www.drugfreeworld.org – An interactive website empowers youth and adults with factual information about drugs so they can make informed decisions and live drug-free.

<http://teens.drugabuse.gov/> – Website for teens that explains the science behind drug abuse.

General Information:

www.drugfreecharlotte.org – The Charlotte Mecklenburg Drug Free Coalition

www.samhsa.gov – Substance Abuse and Mental Health Services Administration’s national clearinghouse for alcohol and drug information.

www.ncsappb.org – The North Carolina Substance Abuse Professional Practice Board promotes standards for professionals in the substance abuse field.

www.nida.nih.gov – National Institute on Drug Abuse

www.niaaa.nih.gov – National Institute on Alcohol Abuse and Alcoholism

Mutual Support Groups

Alcoholics Anonymous (AA)

Alcoholics Anonymous (AA) is a group of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.

The only requirement for membership is a desire to stop drinking. There are no dues or fees for AA membership; they are self-supporting through their own contributions. AA is not allied with any sect, denomination, politics, organization, or institution; does not wish to engage in any controversy; neither endorses nor opposes any causes. Their primary purpose is to stay sober and help other alcoholics to achieve sobriety.

Metrolina Intergroup Association

1427 South Blvd. #106 / Charlotte NC 28203 / 704-377-0244

24 hour Hotline: 704-332-4387 Toll Free: 877-233-6853

Website: <http://www.charlotteaa.org> email: information@charlotteaa.org

There are several other 12 Step meetings, here are a few others:

<http://crna.org/ascs/8/> - Greater Charlotte Area of Narcotics Anonymous

www.aa.org – National Alcoholics Anonymous website

www.ca.org – Cocaine Anonymous website

www.crystalmeth.org –Crystal Meth Anonymous website

www.heroin-anonymous.org – Heroin Anonymous website

www.womenforsobriety.org – National self-help group only for women

Family Support Groups:

Alanon / Alateen

Alanon: strength and hope for families and friends of problem drinkers.

<http://www.al-anon.alateen.org>

Alateen: hope and help for younger family members and friends of alcoholics.

<http://www.al-anon.alateen.org/alateen-talk>

Al-Anon Family Group meetings can be found in many communities. Meeting information in local communities is provided by Al-Anon Information Services. The website has a locator box that contains both a link to the state or province Web site where meeting information can be found and a link to contact information for local Al-Anon Information Services.

You can also call 888-4AL-ANON (888-425-2666) Monday thru Friday, 8 am- 6 pm ET, for meeting information

CHARLOTTE: AL-ANON/ALATEEN INFORMATION SERVICE OF DISTRICT 5

4800 WEDGEWOOD DRIVE/ CHARLOTTE, NC (704) 523-1159

Website: <http://www.charlottealanon.org> email: district5lit@gmail.com

Help Lines for Youth / Adolescent Crisis Intervention and Counseling

Al-Anon / Alateen Hotline 1-800-344-2666

Drug Help National Helpline (Phoenix House) 1-800-378-4435

Gay, Lesbian, Bisexual, and Transgender Youth Support Line 1-800-850-8078

Marijuana Anonymous 1-800-766-6779

National Runaway Hotline 1-800-621-4000

National Association for Children of Alcoholics 1-888-554-2627

Self-injury Hotline – Self Abuse Finally Ends (SAFE) 1-800-DONT CUT (1-800-366-8288)

Sexual Assault / Rape Hotline 1-800-656-HOPE (1-800-656-4673)

Suicide Hotline 800-784-2433

Cocaine Anonymous International Referral Line (NOT a hotline) 800-347-8998

Narcotics Anonymous 704-379-0440

Alcoholics Anonymous 704-332-4387

Teen Health Connection 704-381-8336

Remember, you don't have to say who you are, and what you say is confidential.

Other useful resources:

Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
Department of Health & Human Resources - 919-733-7011

State insurance programs:

NC Health Choice – 800-753-3224

Medicaid – 704-336-3000 www.ncdhhs.gov

Substance Abuse and Mental Health Services Administration – 800-729-6686

Books

On Substance Abuse:

Addict in the Family: Stories of loss, hope and recovery by Beverly Conyers. Hazeldon 2003. This book validates the feelings and experiences of parents and families dealing with a child's addiction, coupled with education.

Beautiful Boy: A father's journey through his son's addiction by David Scheff. Houghton Mifflin, 2008. This is the story of a teen's addiction through the eyes of a parent.

Tweak: Growing up on Methamphetamines by Nick Schef. Ginee Seo books, 2008. This is described as a powerful memoir of alcohol and drug addiction.

Blackout Girl: Growing and Drying Out in America by Jennifer Storm. Hazelden, 2008. The author's personal account of addiction that began at the age of 12.

Broke by William Cope Moyers. Viking Penguin, 2006. The author, son of Bill Moyers, addresses his own spiral into addiction to alcohol and cocaine during the 80's and 90's.

Crystal Meth: They Call it Ice by Mary F. Holly, MD, Tate Publishing. 2008. This is a book about Crystal Meth and the havoc it wreaks on communities and families. It includes information about the biochemistry of Methamphetamine on the body, risk factors and ways to seek help.

In my Skin: A Memoir by Kate Holden. Arcade Publishing, 2008. The Australian author recounts her years as a heroin user.

The New Codependency: Help and Guidance for Today's Generation by Melody Beattie . Clears up misconceptions about codependency, identifies how codependent behavior has changed, and provides a new generation with a road map to wellness.

On Adolescent Challenges:

The Explosive Child; Understanding and Helping Easily Frustrated, "Chronically Inflexible" Children by Ross W. Greene, Ph.D. Harper Collins, 2001.

Setting Limits: How to Raise Responsible, Independent Children by Providing Clear Boundaries by Robert McKenzie. Prima Publishing, 1998.

The Second Family: Dealing with Peer Power, Pop Culture, The Wall of Silence by Ron Taffel with Melinda Blau, St. Martins Press. 2001.

Get Out of My Life, but first could you drive me and Cheryl to the mall? , Anthony E. Wolf, Phd., Farrar Straus and Giroux, 2002

The Primal Teen: What the new discoveries about the teenage brain tell us about our kids by Barbara Strauch. Doubleday, 2003.

Why do they act that way? A survival guide to the adolescent Brain for you and your teen. By David Walsh and Nat Bennett. Free Press, 2004.

Treatment provider acronyms

CCS – Certified Clinical Supervisor

CSAC – Certified Substance Abuse Counselor

LCAS – Licensed Clinical Addiction Specialist

LCSW – Licensed Clinical Social Worker

LMFT – Licensed Marriage and Family Therapist

LPC – Licensed Professional Counselor (there are various licensure levels)

MAC – Masters Addictions Counselor

NCC – National Certified Counselor

Important Phone Numbers

Anuvia Prevention & Recovery Center 704-376-7447 www.anuvia.org

Agency: _____

Counselor: _____

School: _____

Doctor: _____

Emergency: 911

Mobile Crisis: 704-566-3410

Rape Crisis: 704-375-9900

Levine Children's Hospital

1000 Blythe Blvd / Charlotte, NC 28203 / 704-381-2000

Presbyterian Hemby Children's Hospital

200 Hawthorne Lane, 2nd Floor / Charlotte, NC 28204 / 704-384-4021

CMC-Randolph Behavioral Health Center

501 Billingsley Rd / Charlotte, NC 28211 / 704-444-2400 / 800-418-2065

Suicide Hotline number/s

National Suicide Prevention Lifeline 1-800-273-TALK 24 hours/7 days per week
(www.suicidepreventionlifeline.org) 1-800-273-8255

The Relatives Crisis Shelter 704-377-0602 Youth shelter and hotline

1100 East Boulevard Charlotte, NC 28203