



NATIONAL  
**MENTORING**  
RESOURCE CENTER  
A Program of **OJJDP**

# Mentoring Youth Impacted by Opioid Use and Misuse

National Mentoring Resource Center Opioid Guide

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## ABOUT MENTOR

MENTOR’s vision is that all young people have access to the supportive mentoring relationships they need to grow and develop into thriving, productive, and engaged adults. For nearly 30 years, MENTOR has unified and led the mentoring field in expanding both the quality and quantity of youth mentoring relationships in the United States. We do this by:

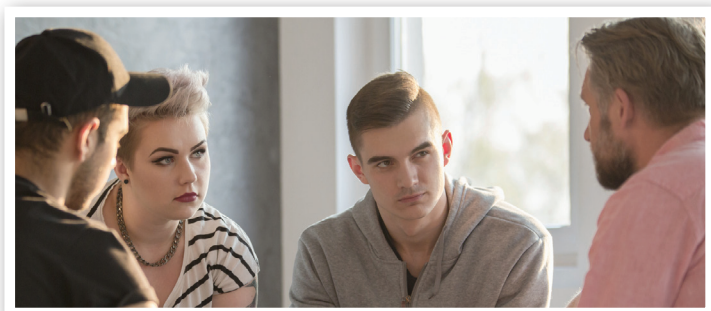
- Increasing public awareness about the power and impact of mentoring,
- Developing and delivering resources and training to mentoring programs nationwide, and
- Raising the quality of mentoring through evidence-based standards and research



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# INTRODUCTION

The opioid epidemic impacts thousands across the country and is affecting people across gender, geography, race, and socioeconomic lines. While there are youth who are misusing opioids, they are using alcohol and marijuana more frequently. The opioid epidemic appears to most commonly be impacting youth in the form of the trauma they experience due to a



parent, caregiver, or loved one struggling with or dying as a result of drug misuse. As mentors and caring adults in their lives, we are positioned to offer them timely support as they maneuver these difficult situations. This epidemic permeates families, schools, and communities in ways that require caring adults to become informed regarding drugs and how they impact youth and their families and to sharpen skills on effective approaches to mentoring impacted youth.

This guide was created to provide a high-level overview of these topics. It includes common scenarios you may encounter and examples on how to respond so that, although you aren't a trauma specialist, you will have the insight needed to be a support and connect young people with experts when needed. Whether you are providing structured mentoring to a young person who has been impacted by the opioid epidemic or are a caring adult who frequently engages in natural mentoring with youth in your community, you can provide the necessary support to help buffer them from risk factors which may lead to engaging in drug misuse and risky behavior.

## OPIOID MISUSE STATISTICS

U.S. adults aged 18–25 are most engaged in prescription pain reliever misuse (SAMHSA, 2018) and those aged 25–54 represent the largest group dying as a result of overdose in 2017 (Hedegaard et al., 2018). These statistics highlight the probability that the opioid epidemic is most likely to impact youth in the form of having a parent, caregiver, or loved one struggling with or dying as a result of drug misuse. This reality increases a young person's chance of using drugs and alcohol both in their youth and as they grow older. However, many are being impacted in other ways including struggling with depression and anxiety, poor school performance, and acting out.

2018 Monitoring the Future Study – Youth Lifetime Use			
Key Substance Use	8th grade	10th grade	12th grade
Alcohol	23.50	42.20	58.50
Vaping	21.50	36.90	42.50
Marijuana	13.90	32.60	43.60
Illicit Drugs (not marijuana)	18.70	36.30	47.80
Cigarettes	9.10	16.0	23.80
Any Prescription Drug (without doctor order)			15.50

*monitoringthefuture.org*



# A Trauma-Informed Lens to Understanding and Supporting Impacted Youth

In order to ensure we are responding to youth most effectively, it is important to approach our work and support for them with a trauma-informed lens. This approach leads us to consider an actively curious framework: “What are you going through?” rather than “What’s wrong with you?”

Substance Abuse and Mental Health Services Administration (SAMSHA ) defines trauma as what “results from an event, series of events, or set of circumstances that is experienced by an individual as **physically** or **emotionally harmful** or **threatening** and that has **lasting adverse effects** on the **individual’s functioning** and **physical, social, emotional, or spiritual well-being.**”

Examples of trauma youth may experience include child abuse/neglect; witnessing and being exposed to violence at home, school, or in the community; experiencing systematic oppression or racism; and having a parent/caregiver or loved one who suffers from mental illness and/or substance misuse. Signs and symptoms that youth may experience as a result of these incidents include diminished levels of self-esteem, increased anger, irritability and verbal aggressiveness, increased anxiety and worry, hypervigilance, and tendency toward passivity, being withdrawn, and isolating behaviors. These experiences can impact each youth in a variety of ways. It is important to understand that, depending on the individual, the situation may not be experienced as a trauma; the young person may be able to manage the situation without experiencing the lasting negative effects which greatly impair their daily functioning (National Child Traumatic Stress Network).

For those who do internalize those experiences as a trauma, the aforementioned behaviors are a young person’s attempt at coping with the feelings they are having related to the experience. Adults supporting youth who act out and cope with their feelings through decreased interest or effort toward schoolwork, aggressive behavior, or drug misuse can become frustrated and intolerant toward the youth, make assumptions about them, and give up. A failure to recognize their behavior as a coping mechanism/symptom of the trauma they are experiencing can lead us to respond in a punitive manner by which we fail to express empathy toward the youth, further traumatizing them and sending the message that they are not valued.

## The Traumatic Experience of Having a Parent/Caregiver Struggle with Drug and Alcohol Addiction

Many of the youth we mentor have experienced (and are often continuing to experience) at least one trauma (Fortson et al., 2016). Those who are living with the reality of having a parent, caregiver, or loved one experiencing addiction have additional layers of difficulty to process and manage day to day. Some of the challenges they may experience include:

- Assuming a caregiver role where the youth is caring for themselves, their siblings, and at times caring for their parent. This can include becoming a wage earner in order to provide food,

have money for utilities, getting self and/or siblings ready for school, and cleaning up the living space for the parent after a night of using.

- Becoming the primary emotional support to the parent/caregiver who is using, which can include listening to a caregiver share stories of being abused as a child, canceling plans with friends in order to be there for a caregiver who is feeling sad, managing crisis situations where the caregiver is suicidal, and using substances with their caregiver in order to have an emotional connection with them.
- Feeling guilt and taking responsibility for parents' use (i.e., believing they stress out their parent to the point of use).
- Struggling with the conflict of desire to reach out for help and desire to avoid betraying their parent by exposing family secrets to a teacher, counselor, friend, or mentor. This may also include managing the fear that seeking help could result in being removed from the home.
- Living in fear and managing what they do or say in an attempt to avoid triggering their parent to begin a physically and/or emotionally abusive series of actions.
- Fear of parent overdosing and dying.
- Being pressured by caregiver to underperform in school and other activities in order to qualify for financial assistance.
- Worrying what others will say about them and/or their parents if they find out their caregiver is facing addiction.
- Going without food and/or begging for food or money for food due to their parent using the family's income to buy drugs.
- Grief, which may include guilt as a result of having a caregiver die from overdose.



## Understanding Addiction

As caring adults who want to support youth, it is important that we understand addiction as a disease that is beyond the control or willpower of the person experiencing addiction. Research has shown some people are predisposed to a genetic makeup that increases the likelihood that substance experimentation or social use will ultimately become a serious addiction (NIDA, 2014). Additionally, it is important to understand drug use often begins as a coping mechanism used to manage emotional pain resulting from a trauma such as sexual violence, domestic violence, and childhood abuse. The Adverse Childhood Experiences (ACE) study outlines the many implications of adverse childhood

experiences in adulthood, which includes alcoholism and illicit drug misuse (Felitti et al., 2019). The parents/caregivers of the youth we are supporting are often individuals who experienced trauma in youth and did not receive the treatment and support they needed, and as a result, their lives as adults are severely impacted by mental health challenges, addiction, poverty, and physical health issues.




## Key Approaches to Mentoring Impacted Youth

There are several risk and protective factors that increase or decrease the likelihood for substance misuse and other adverse behaviors in youth. Having access to a supportive mentor/caring adult is a protective factor for youth that decreases the likelihood for drug use and other adverse behaviors in youth and is a conduit to increase the presence of other protective factors. Our role as formal and natural mentors is to minimize risk factors and increase protective factors so their ability to be resilient and excel beyond their circumstances is maximized.

Risk Factors		
Individual	Family	School/Community
<ul style="list-style-type: none"> <li>• Genetic disposition for addiction</li> <li>• Prenatal alcohol and other drug (AOD) exposure</li> <li>• Poor impulse control/self-regulation</li> <li>• Aggressiveness</li> <li>• Hyperactivity</li> <li>• Depression and anxiety</li> <li>• Early substance use</li> </ul>	<ul style="list-style-type: none"> <li>• Cold/unresponsive mother/parent, poor attachment with parents</li> <li>• Parental/sibling modeling of AOD use</li> <li>• Permissive parenting/lack of structure, discipline, supervision, monitoring</li> <li>• Harsh discipline</li> <li>• Parent/child conflict</li> <li>• Child abuse/maltreatment</li> </ul>	<ul style="list-style-type: none"> <li>• Low commitment to school</li> <li>• Peer rejection</li> <li>• Lack of access/availability for learning</li> <li>• Negative influences by peer group</li> <li>• Extreme poverty</li> <li>• Interpersonal alienation/isolation</li> </ul>
Protective Factors		
Individual	Family	School/Community
<ul style="list-style-type: none"> <li>• Strong self-regulation, coping, and problem-solving skills</li> <li>• Ability to make friends and get along with others</li> <li>• Mastery of academic skills</li> <li>• Compliance with rules</li> <li>• Good peer relationships</li> <li>• High self-esteem</li> </ul>	<ul style="list-style-type: none"> <li>• Reliable support, structure, and discipline from caregivers</li> <li>• Opportunities to resolve conflict</li> <li>• Adequate socioeconomic resources</li> <li>• Extended family support</li> <li>• Supportive relationships</li> </ul>	<ul style="list-style-type: none"> <li>• High quality of care</li> <li>• Healthy peer groups</li> <li>• School engagement</li> <li>• Positive teacher expectations</li> <li>• Positive partnering with family</li> <li>• Physical and psychological safety</li> <li>• Presence of mentors</li> </ul>

*Adapted from National Research Council and Institute of Medicine (2009). Preventing mental, emotional, and behavioral disorders among young people: Progress and possibilities. Washington, DC: The National Academies Press.*

Below are the three most common profiles of youth impacted by the opioid epidemic followed by key focus points for mentors to ensure they are approaching youth support with a trauma-informed lens. **The following scenarios model what these skills look like in real life.**

Profiles of Impacted Youth		
 <p><b>A youth with family/ caregiver/loved one who is misusing drugs and/or has passed away as a result of overdose</b></p>	 <p><b>A youth misusing drugs and in need of or currently engaged in alcohol or drug treatment</b></p>	 <p><b>A youth at risk to use/misuse drugs</b></p>
<p>Keisha, age 11, is in foster care due to her mother's challenges with drug use. Her mother is in and out of jail and has attempted treatment several times but keeps relapsing. Keisha acts out in school often, getting into fights and verbal altercations with teachers. Even though her mother has been unable to take care of her and has a habit of being extremely hurtful and mean when interacting with Keisha, she believes her mother will get better and expresses unwavering love for her. Keisha also struggles with issues related to being sexually abused by her uncle when she was 7 years old.</p>	<p>Brian, age 14, engages in heavy use of alcohol and marijuana. He used to enjoy school and achieve good grades, but now he often skips class and his grades are suffering. He lives in a neighborhood where violence and drug use are a norm. Brian lives with his grandmother, has never met his father, and sees his mother on occasion since being kicked out due to ongoing conflicts with his stepdad. His mom lives with her husband and Brian's siblings. She expresses her love for Brian, but he feels extreme anger and resentment toward her and never wants to see her again.</p>	<p>Kim, age 15, lives at home with her father who struggles to keep a job due to clinical depression he has experienced since Kim's mother died when she was 9 years old. She works part-time at a fast food restaurant to earn money to help pay bills and has two younger siblings whom she takes care of by getting them ready for school and ensuring they do their homework. Kim smokes marijuana on occasion during lunch with her friends and enjoys the opportunity "to forget about everything." Kim doesn't think much about her future beyond high school and focuses on taking care of herself and her family.</p>

## USE A TRAUMA-INFORMED LENS TO UNDERSTAND YOUTH AND THEIR FAMILIES

When encountering youth who are displaying attitudes and behavior that we know threaten their ability to reach their goals, we must seek to understand where that behavior and thinking is coming from and avoid becoming judgmental and punitive toward them. When we can understand the why behind their actions, we can better support them. This allows us to express and show empathy toward youth and their families. Honor their journey and the efforts they are making to survive and help them appreciate their resilience as much as you do.

***In Practice:***



**Brian**

Brian tells you he doesn't care about school anymore. He says there is no point in trying and says school won't do anything for him. You have attempted to get Brian to put more effort into school and to consider giving up smoking and drinking but he hasn't. You begin to realize that you have been judgmental regarding Brian's choice to use and haven't considered he is using drugs to cope with feelings of hurt and abandonment because of the situation with his mother. Rather than focusing on trying to get Brian to stop using and do better in school, focus on being a support to Brian, asking him how he is feeling, listening to him, and honoring his efforts to address his pain. Once he knows you care about him regardless of his behaviors, he is more likely to consider suggestions you may make for healthier ways to cope.

## BE AN ADVOCATE

Youth who are impacted by opioids and other significant challenges are often involved with several entities and organizations, which can be confusing, intimidating, frustrating, and disheartening. As caring adults, we have an opportunity to be a voice and an advocate to support them in understanding the systems and processes they are involved in as well as ensuring their needs and perspectives are being considered by the professionals and organizations involved in their lives. Often these systems are overloaded with cases and can benefit from the help and support that a mentor can offer. When possible and appropriate, contact the involved parties to gather information regarding their involvement with the youth, share thoughts and concerns regarding the youth, and participate in meetings in which decisions are being made regarding the youth and their family.

***In Practice:***



**Keisha**

Keisha says that no one has asked her what she thinks about what is happening and feels like no one listens to her. She also does not understand why someone from Children's Services must be present when she visits her mother. You can help Keisha understand what Children's Services' role is and their protocol for cases like Keisha's. You may need to contact her caseworker so that you can convey accurate information to Keisha. You may also want to advocate for Keisha to be enrolled in counseling services to help her process and manage feelings about being in foster care as well as address issues related to being sexually abused.

## BE DEVELOPMENTAL, NOT PRESCRIPTIVE

Youth need to learn to be able to think for themselves, to work through challenges, and find solutions both in schoolwork and in life. Their ability to problem-solve is critical to their success and is a protective factor against substance misuse and other adverse behaviors. They develop these skills by being given the opportunity to practice identifying what they don't know, what they do know, and then using critical thinking to acquire the information and solutions they seek. We help them do this by asking questions, and in cases where they are stuck, giving them pieces of information to assist them in answering the question rather than simply giving them the answer. Otherwise, we are enabling them, preventing them from being able to find solutions when we are not available.



***In Practice:***



**Brian**

Brian has mentioned on multiple occasions that he wishes he could be on the football team and tells stories about how much fun he used to have when he played in little league and middle school. All of Brian's friends from the middle school team are playing on the high school team, but he doesn't hang out with them anymore because he spends time with the guys he smokes with. Brian knows he can't try out for the team because his grades aren't good enough. To you, the solution is obvious: Brian must improve his GPA so he can try out for the team next year. You know that he will have to stop using drugs and quit hanging out with his current friends in order to have a chance to improve his grades. Rather than telling him this, consider what questions you can ask that will help him identify this solution on his own. Doing so allows him to develop problem-solving skills, and when he comes up with the solution on his own, he is more likely to implement the needed changes. Consider asking Brian questions like:

- What are the requirements to try out for the team?
- What do you need to do or change in order to be able to try out?
- What are the pros and cons to keeping your friends?
- How would being on the team make your life better?

Remember that ultimately, the choice is his.

**APPROACH YOUTH WITH A FOCUS ON CULTURAL AWARENESS AND SENSITIVITY. BE AWARE OF AND ADDRESS YOUR EXPLICIT AND IMPLICIT BIASES**

The opioid epidemic has impacted youth and families from all racial, ethnic, and socioeconomic backgrounds. Each of these families have cultures and beliefs that may differ from yours. Guard against projecting your culture and beliefs onto them. Experiencing implicit bias can lead youth to be further traumatized, which may result in withdrawal from environments of support, increasing risk for engagement in substance misuse and other adverse behaviors. Make an ongoing effort to learn about their culture and encourage them to do the same. High cultural centrality, "the extent to which a person normatively defines herself or himself with regard to race," has been shown to reduce and mitigate stress from various risk factors (Sellers et al, 2003).

***In Practice:***



**Kim**

Your initial thoughts when thinking through Kim's situation is that she should quit working to take care of her family and focus on doing what she can to "create a future for herself." You grew up in a culture where education is valued above all, including family. You begin to realize you are projecting your values on Kim and start to consider how important family is for her as a person of color. Rather than challenging her to completely abandon her approach to finding solutions for her family, you start to consider ways in which you can honor her culture and value for family while helping her learn more about her culture and history to support increased centrality and thus, increase self-esteem.

## BE CONSCIOUS OF PROJECTION OF UNADDRESSED TRAUMA FROM YOUR OWN LIFE

Many of us are inspired to mentor and support youth because of our own journey of challenge. We hope to help them avoid making the same mistakes we did by teaching them what we learned along the way. Sometimes we have unresolved emotions and feelings lingering in our lives and, without realizing it, we can begin to project upon them our fears, our values, our dreams, and our beliefs about what is “right” and what success looks like. Our role as mentors is not to identify goals for the youth but to support them in identifying, defining, and achieving success for themselves.

### ***In Practice:***



**Keisha**

Although Keisha doesn't say much to you about her experience with her uncle, you know she has been sexually abused and you know that many of her negative behaviors are associated with her abuse because you had some of the same challenges when you were a child due to your own experience with sexual abuse. You find yourself crossing boundaries and becoming overly involved with Keisha, at times having discussions with her that are beyond your scope as a mentor. Step back and acknowledge the way in which your past is impacting your interactions with Keisha. Process this challenge with your mentoring program coordinator to get support and determine steps to address these issues. Consider engaging in counseling services to assist in addressing unresolved issues from your past.

## SUPPORT THE FAMILY, NOT JUST THE YOUTH

Whether or not they are directly impacted by the opioid epidemic, many of the youth whom we encounter have parents and caregivers who have their own history of trauma. As mentioned above, their parents have a high likelihood of having experienced childhood trauma such as abuse and neglect and, unfortunately, never received the treatment and support they needed and deserved as children. As a result, these adults are facing mental health challenges, addiction, poverty, and physical health issues as adults. These individuals deserve empathy and support just as their children do; when we are supportive of them, the youth benefit as well. Youth who have a healthy, supportive family are at lower risk for substance misuse and other adverse behaviors. Regardless of the behaviors their parents are exhibiting, avoid judging the behavior and projecting thoughts about what you would do differently if you were in their shoes.

### ***In Practice:***



**Kim**

You find yourself completely disturbed by Kim's father's behavior and the way in which you feel he is failing her as a father. You can't understand why he doesn't just snap out of it and pull himself together. Take a moment to remember what you know about addiction as a disease as well as how trauma impacts adults and ultimately can negatively impact their parenting. When you are in touch with him to share updates about what you have been doing with Kim during your mentoring sessions, ask how he is doing and approach him with a mindset of empathy and understanding. He will appreciate that someone is being thoughtful and understanding toward him.

Exposure to parental substance misuse or any other risk factor does not guarantee that a child will engage in substance misuse or risky behaviors; however, the presence of these factors can increase the difficulty to cope with life experiences, thus increasing the likelihood they will. As supportive, caring adults in their lives, we can help them develop resilience and overcome the effects of childhood trauma by celebrating who they are to support the development of their self-identity, comforting them during times of challenge, collaborating with them to help them learn strategies to effectively address conflict, inspiring them through encouragement, and simply listening to them so they feel safe and valued (Futures Without Violence). Our efforts ultimately create safe, stable, nurturing relationships and environments for children which provide a buffer against potential stressors, helping them reach their full potential.

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