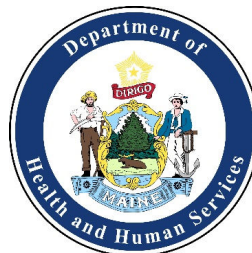


# Caring for Adolescents with Substance Use

Adrienne W. Carmack, MD – Medical Director for OCFS  
Gabby O'Neil, MPH – Youth SUD Specialist OBH CBHS

June 26<sup>th</sup>, 2025



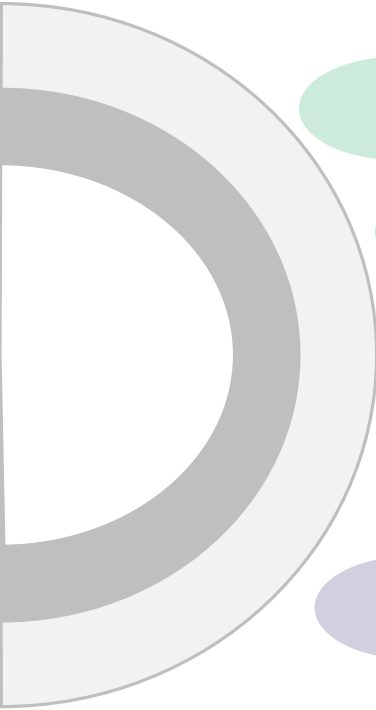
# Disclosure

The presenters have no financial disclosure or conflicts of interest with the presented material in this presentation.

# Objectives

- Recognize Substance Use Concerns: Understand adolescent use rates in Maine and general trends related to adolescent substance use nationally.
- Apply Treatment Strategies: Explore approaches for managing care, including treatment options, referrals, and educational opportunities.
- Engage Support Networks: Gain an understanding of various community resources that are available to help support adolescents who are impacted by substance use.

# Agenda



## Adolescent Use Rates

*An overview on the prevalence of adolescent substance use trends nationally and in Maine.*

## Substance Trends

*A look at what we are seeing in the drug supply and rates of fatal overdoses nationally and in Maine.*

## Assessing the Landscape

*What are we doing to assess the landscape of care for adolescent SUD in Maine?*

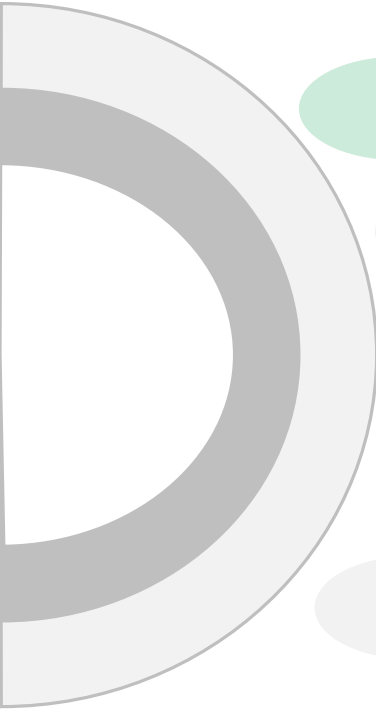
## Expanding Access

*A review of the ongoing adolescent SUD work at CBHS to support youth with or affected by an SUD.*

## Conclusion

*Wrap up and time for questions.*

# Agenda



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# National Past 30-Day Use Trends

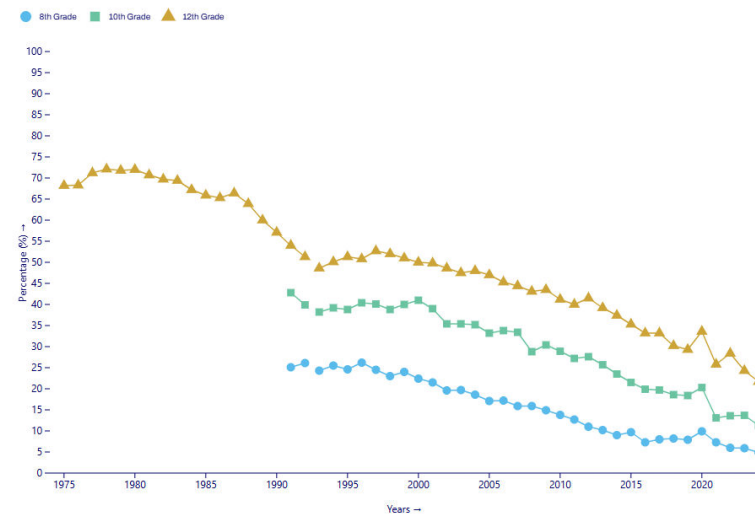
**MARIJUANA (CANNABIS): Trends in 12 Month Prevalence of Use in 8th, 10th, and 12th Grade**



Miech, R. A., Johnston, L. D., Patrick, M. E., & O'Malley, P. M. (2025). Monitoring the Future national survey results on drug use, 1975–2024: Overview and detailed results for secondary school students. Monitoring the Future Monograph Series. Ann Arbor, MI: Institute for Social Research, University of Michigan. Available at <https://monitoringthefuture.org/results/annual-reports/>

2023-2024 Change Level of Significance: \*= $p < .05$ , \*\*= $p < .01$ , \*\*\*= $p < .001$ .

**ALCOHOL: Trends in 30 Day Prevalence of Use in 8th, 10th, and 12th Grade**



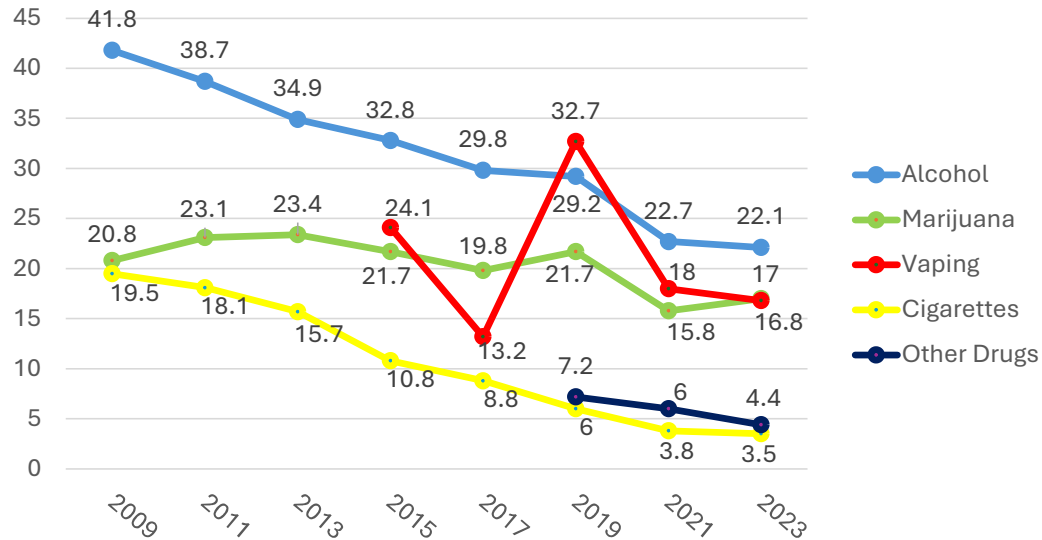
Miech, R. A., Johnston, L. D., Patrick, M. E., & O'Malley, P. M. (2025). Monitoring the Future national survey results on drug use, 1975–2024: Overview and detailed results for secondary school students. Monitoring the Future Monograph Series. Ann Arbor, MI: Institute for Social Research, University of Michigan. Available at <https://monitoringthefuture.org/results/annual-reports/>

2023-2024 Change Level of Significance: \*= $p < .05$ , \*\*= $p < .01$ , \*\*\*= $p < .001$ .

<https://monitoringthefuture.org/data/bx-by/drug-prevalence/#drug=%22%22>

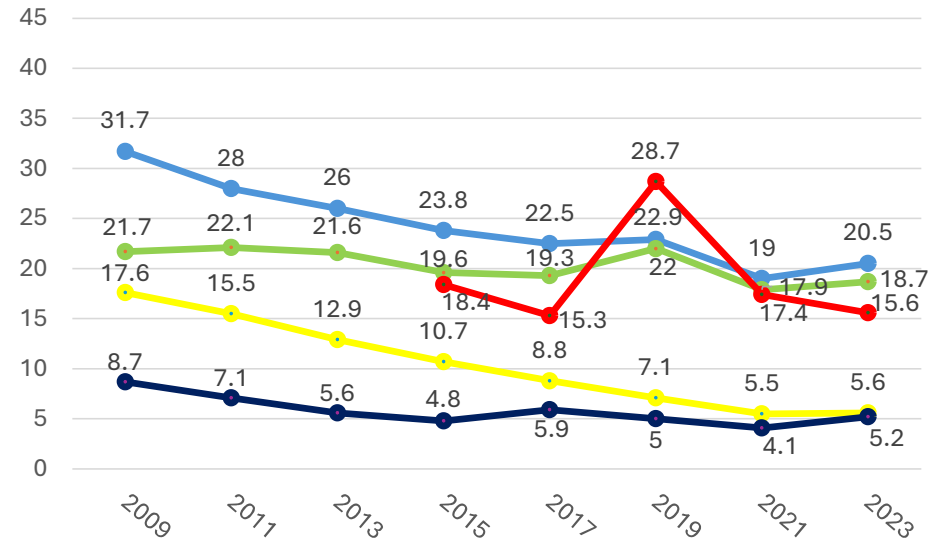
# High School Past 30-Day Use

## National Data



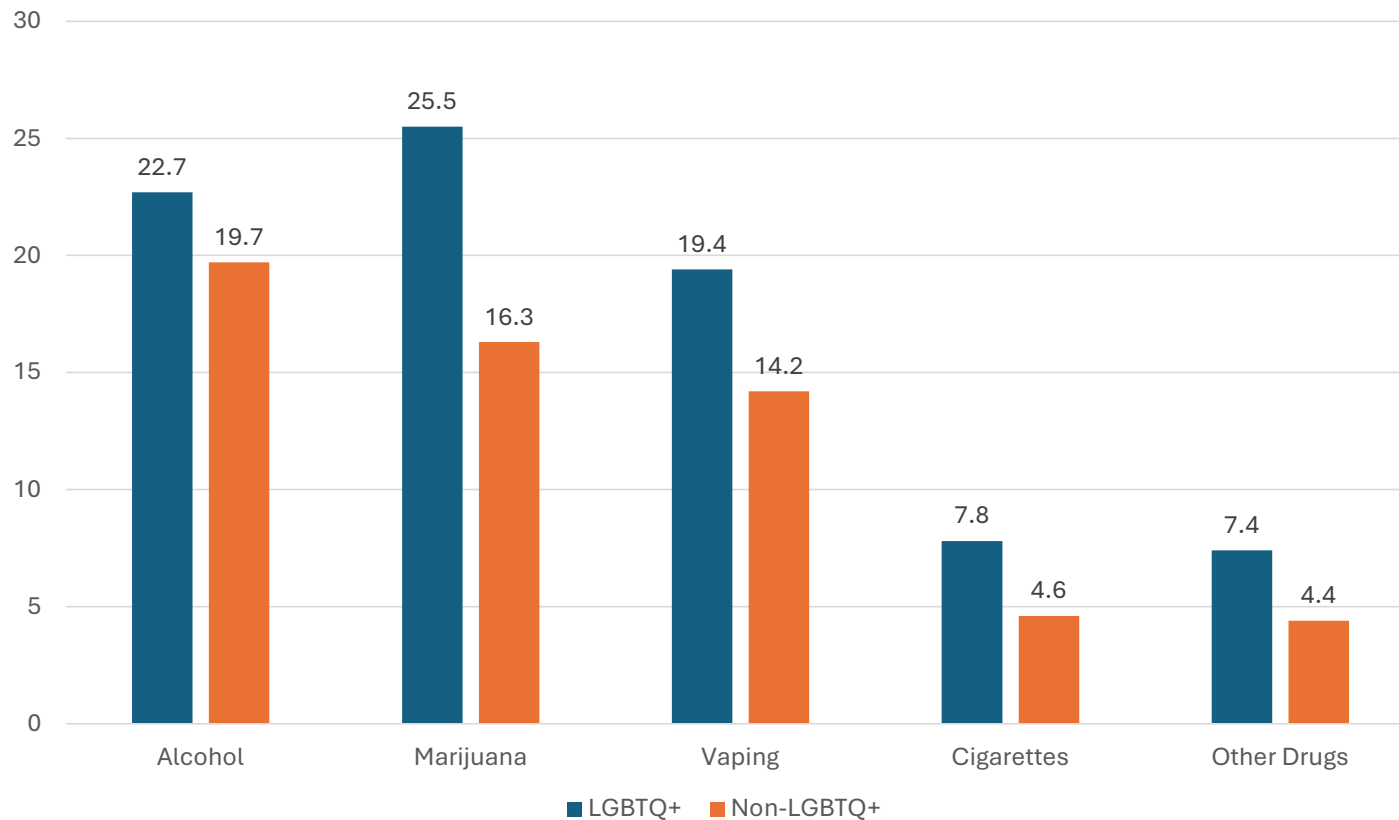
\* Past 30-day use reported by the [YRBSS](#)

## Maine Data



\* Past 30-day use reported by the [MIYHS](#)

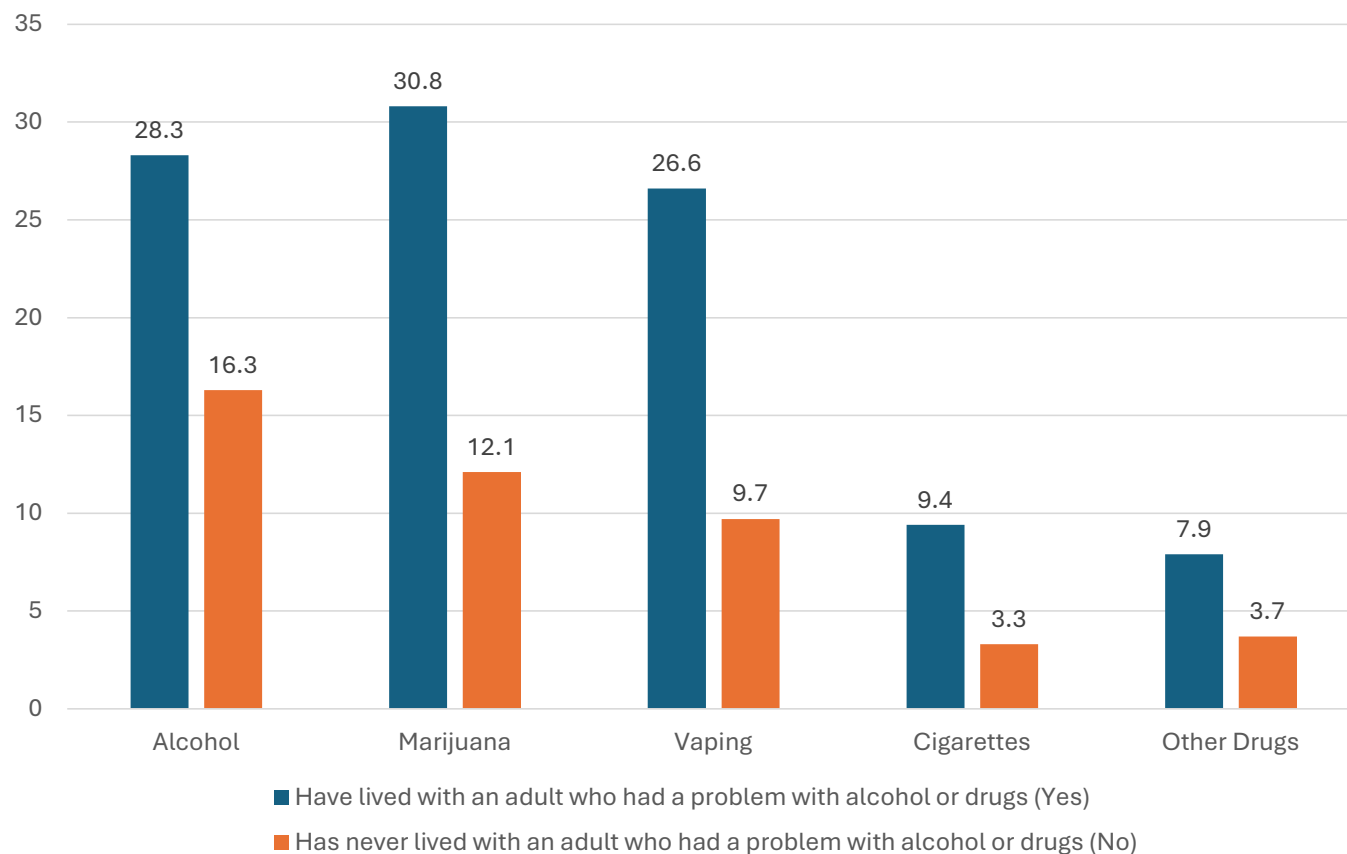
# High School Past 30-Day Use by Gender Identity and Sexual Orientation



\* Past 30-day use reported by the 2023 [MIYHS](#)



# High School Past 30-Day Use by “Have you ever lived with an adult who had a problem with alcohol or drugs”



\* Past 30-day use reported by the 2023 [MIYHS](#)

SHOTS - HEALTH NEWS

## A quarter of children have a parent with substance use disorder, a study finds

MAY 13, 2025 - 6:00 AM ET

HEARD ON MORNING EDITION

By Rhitu Chatterjee



2-Minute Listen

+ PLAYLIST

TRANSCRIPT



A new study says millions of children in the U.S. live in a household with a parent who has either a moderate or severe substance use disorder.

Olekii Mach/Getty Images/iStockphoto

New Online Views 2,821 Citations 0 Altmetric 847

Research Letter

May 12, 2025

## US Children Living With a Parent With Substance Use Disorder

Sean Esteban McCabe, PhD<sup>1,2</sup>; Vita V. McCabe, MD<sup>1,3</sup>; Ty S. Schepis, PhD<sup>1,4</sup>

► Author Affiliations

*JAMA Pediatr.* Published online May 12, 2025. doi:10.1001/jamapediatrics.2025.0828

The US substance use landscape consists of over 100 000 overdose deaths annually since 2020<sup>1</sup> and, in 2023 alone, over 46 million adults with a past-year *Diagnostic and Statistical Manual of Mental Disorders* (Fifth Edition; *DSM-5*)-defined substance use disorder (SUD).<sup>2</sup> Despite attempts to estimate the number of children exposed to parental substance use and *DSM-IV*-defined SUD,<sup>3,4</sup> recent research indicates that past-year prevalence estimates of SUD using *DSM-IV* criteria are substantially higher when using *DSM-5* criteria,<sup>5</sup> resulting in a key knowledge gap. Children exposed to parental SUD are more likely to develop adverse health outcomes than their peers without parental SUD exposure, including early substance use initiation, substance-related problems, and mental health disorder.<sup>6</sup> We aimed to estimate the number of US children living in the same household as at least 1 parent or primary caregiver with a *DSM-5*-defined SUD.

Medscape Medical News > MedBrief

MEDBRIEF

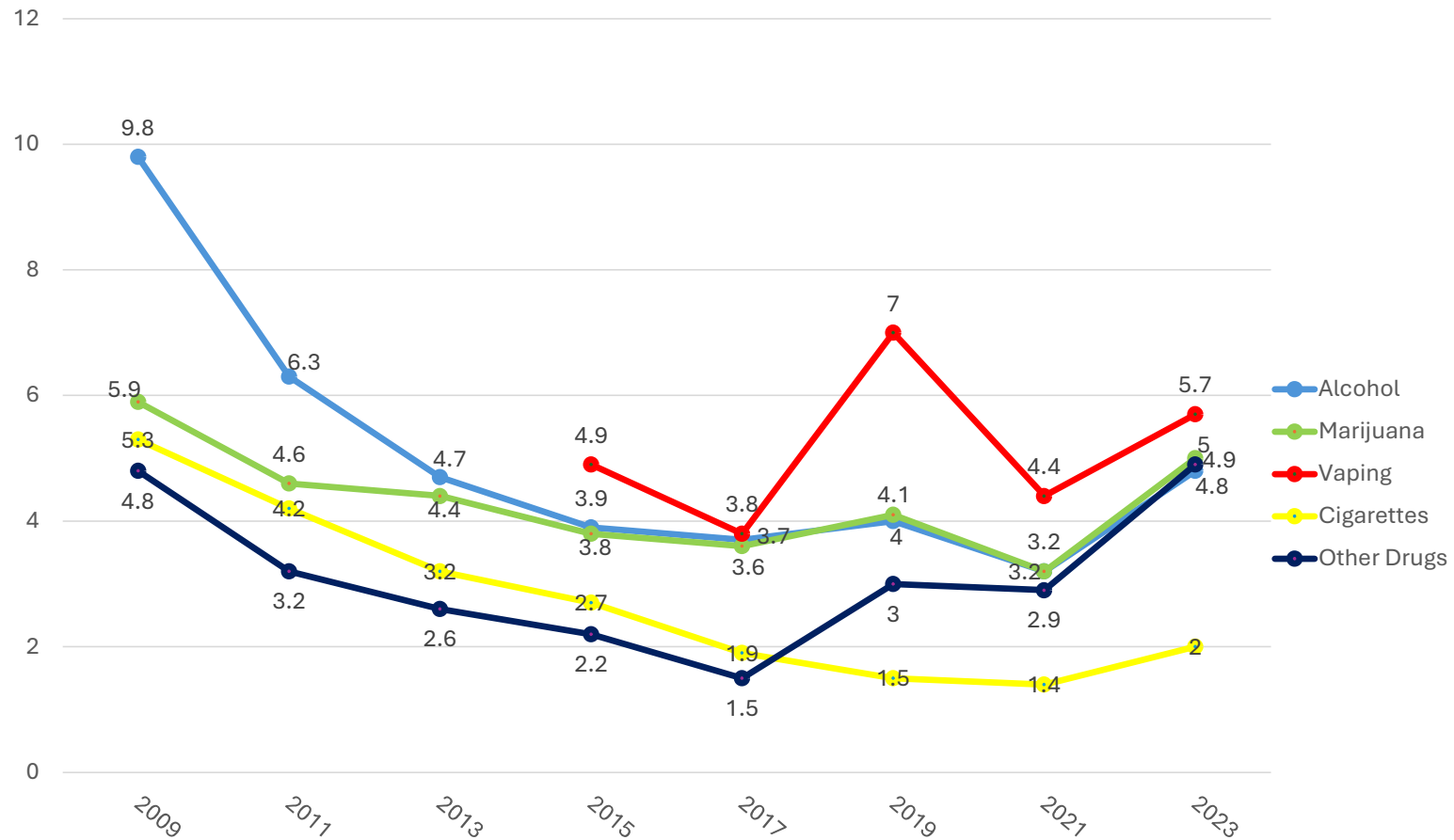
## Parental Substance Use Disorder Affects One-Quarter of US Children, Survey Study Finds

Edited by Lora McGlade

May 15, 2025

# Maine Middle School Past 30-Day Use

\* Past 30-day use reported by the 2023 [MIYHS](#)



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# What are we seeing in the drug supply in Maine?

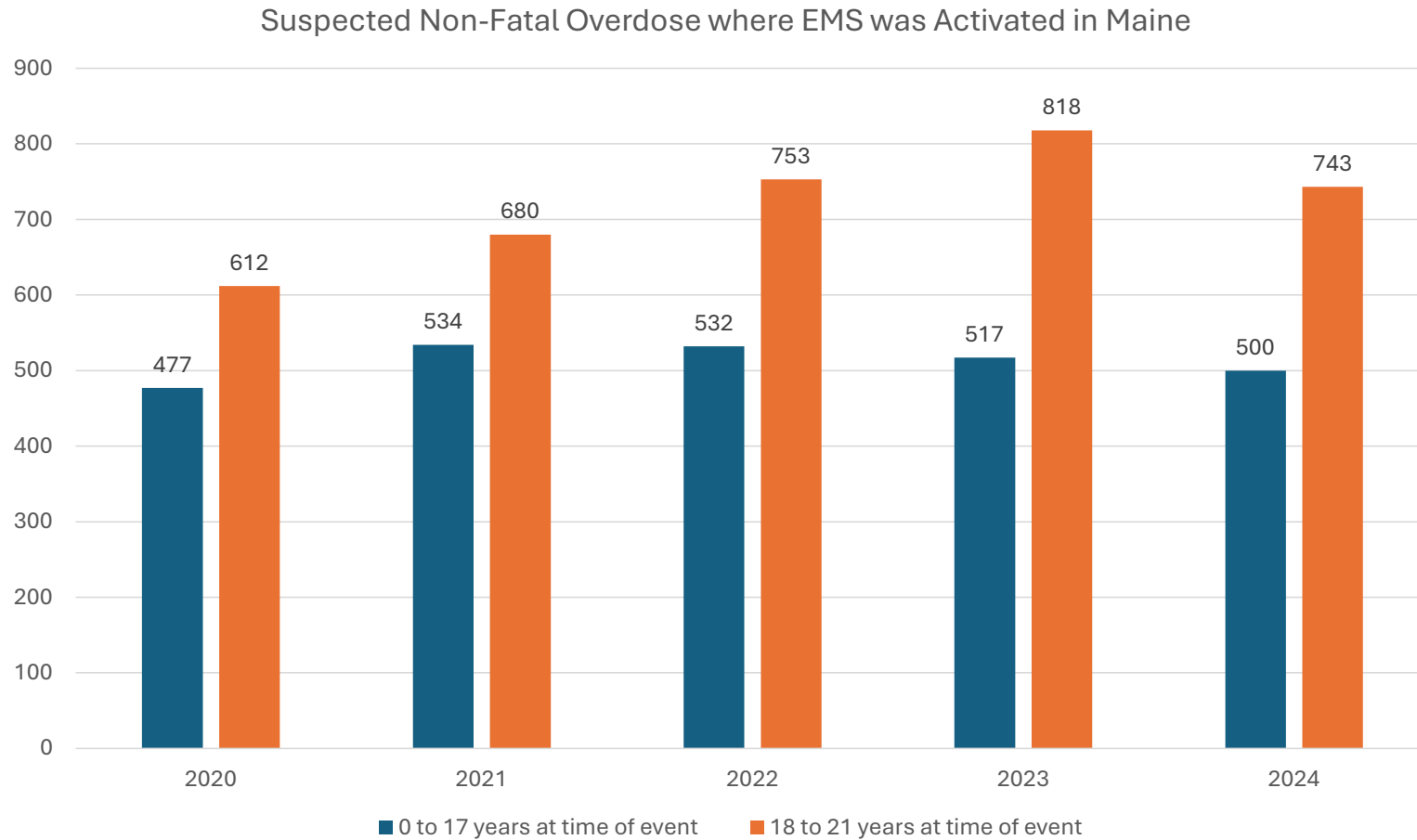
- Crack and cocaine are commonly seized in Maine.
- Seizures of powders and pills fluctuate throughout the year depending on what is available.
  - Synthetic cannabinoids like spice and K2 are becoming popular in Maine again. Nationwide, synthetic cannabinoids are becoming more popular in the correctional system setting
  - Lab reports indicate that carfentanyl and two different nitizine compounds have been seized in recent months.
  - BTMPS has been detected in illicit powders.
  - Heroin has shown up in recent seizures more frequently than usual.
- Drug trends historically have moved West to East.
  - Medetomidine is a concern and even though we have no data to indicate that it is prevalent in Maine it is frequently encountered in the Northeast.

<https://vimeo.com/1090194308/f387daa774>

Source: Maine Drug Intelligence Officer



# Non-Fatal Overdoses



# Fatal Overdoses

2020 to 2023 fatal overdoses that have been ruled accidental or of undetermined manner:

**0-17 years old**

Total 13

**18-21 years old**

Total 54

**Maine Drug Data Hub Home**



**Welcome to the Maine Drug Data Hub**

# What is Being Done About These Trends

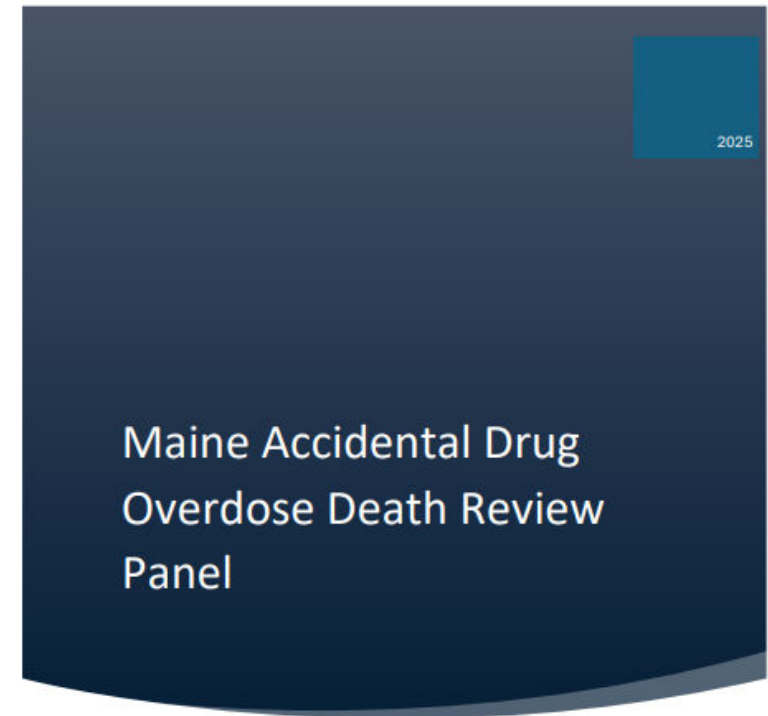
In 2023-24, the Maine Accidental Drug Overdose Death Review Panel focused on incidents of youth overdoses in the state.

Over 25 recommendations were made across 5 different domains:

- Screening & Assessment
- School-Based
- Public Awareness
- Outreach
- Miscellaneous

The full report can be viewed here:

<https://legislature.maine.gov/doc/11797>



SPECIAL REPORT: RECOMMENDATIONS FROM ADOLESCENT  
OVERDOSE REVIEW  
PREPARED BY THE MARGARET CHASE SMITH POLICY CENTER - UNIVERSITY OF  
MAINE, ON BEHALF OF THE MAINE ACCIDENTAL DRUG OVERDOSE DEATH  
REVIEW PANEL



Maine saw one of the nation’s biggest drops in fatal overdoses

 by Christopher Burns  
May 15, 2024



☰ KFF Health News



More Kids Are Dying of Drug Overdoses. Could Pediatricians Do More to Help?

By Martha Bebinger, WBUR  
APRIL 5, 2024

A CONVERSATION WITH ...

*Teen Drug Use Habits Are Changing, For the Good. With Caveats.*

Dr. Nora Volkow, who leads the National Institutes of Drug Abuse, would like the public to know things are getting better. Mostly.

Fentanyl is fueling a record number of youth drug deaths

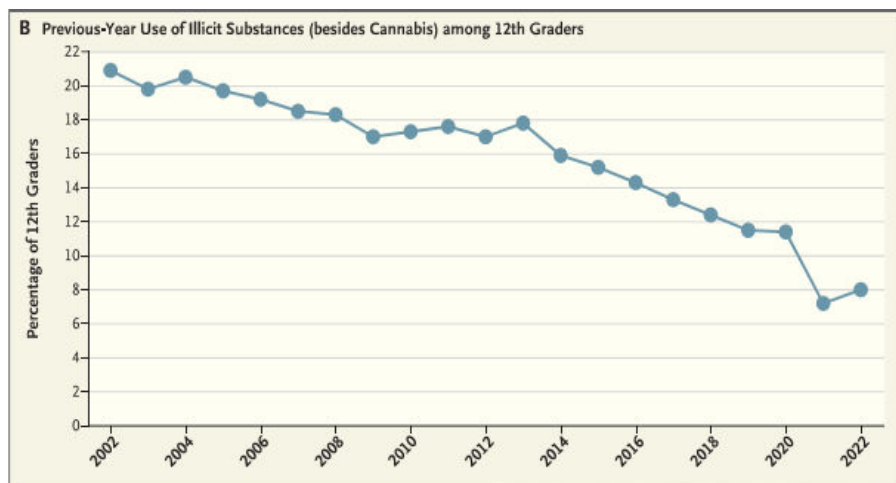
The new trend has shocked many pediatricians, who say they feel unprepared to provide counseling on opioid addiction.

*Overdose Deaths Dropped in U.S. in 2023 for First Time in Five Years*

Preliminary numbers show a nearly 4 percent decrease in deaths from opioids, largely fentanyl, but a rise in deaths from meth and cocaine.



The NEW ENGLAND  
JOURNAL of MEDICINE



**Drug-Overdose Mortality and Previous-Year Illicit-Drug Use among High-School-Aged Adolescents in the United States.**

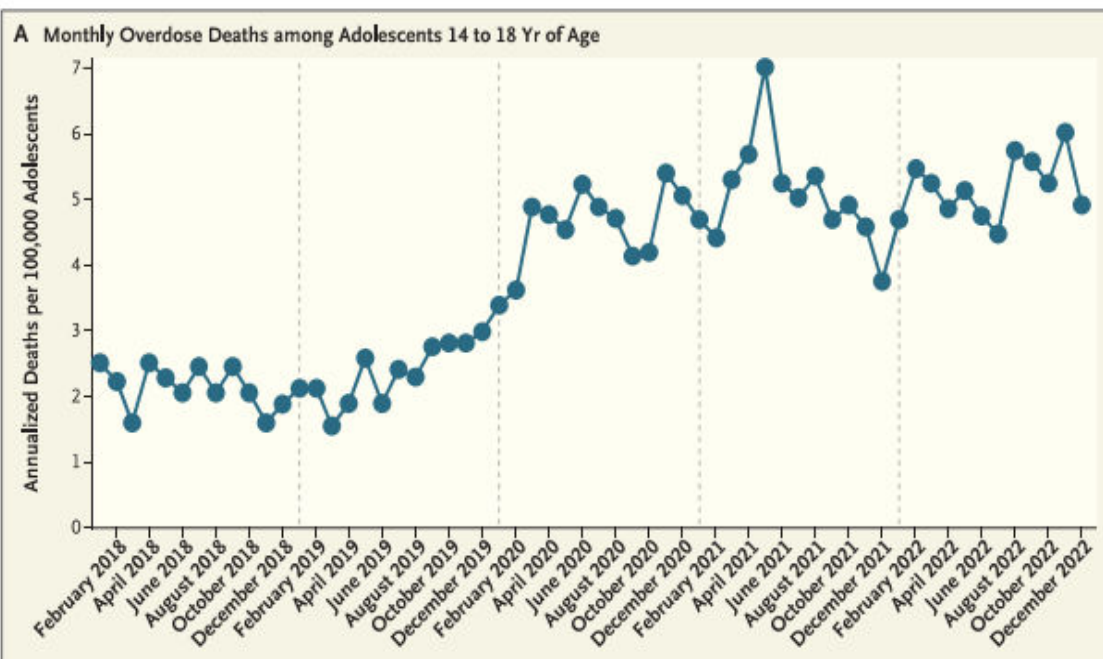
Panel A shows annualized monthly overdose deaths among adolescents 14 to 18 years of age between January 2018 and December 2022. Data are from the Centers for Disease Control and Prevention WONDER system. Data from 2022 are provisional. Panel B shows the percentage of 12th graders reporting use of illicit substances (besides cannabis) in the previous 12 months, between 2002 and 2022. Adapted from the Monitoring the Future survey (<https://monitoringthefuture.org/data/>). Specific question wording has shifted in minor ways over time.

PERSPECTIVE

f X in

# The Overdose Crisis among U.S. Adolescents

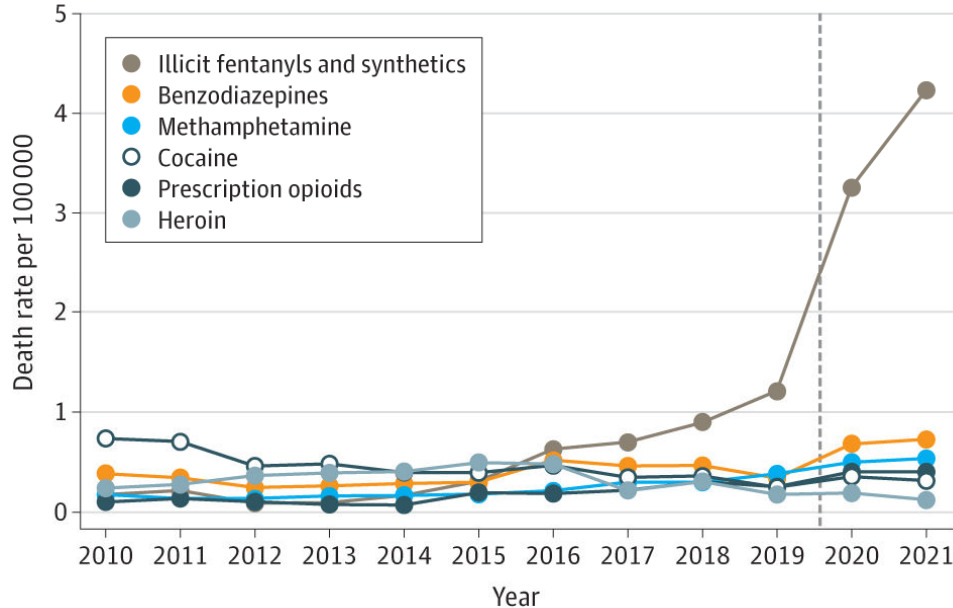
Authors: Joseph Friedman, Ph.D., M.P.H., and Scott E. Hadland, M.D., M.P.H. [Author Info & Affiliations](#)



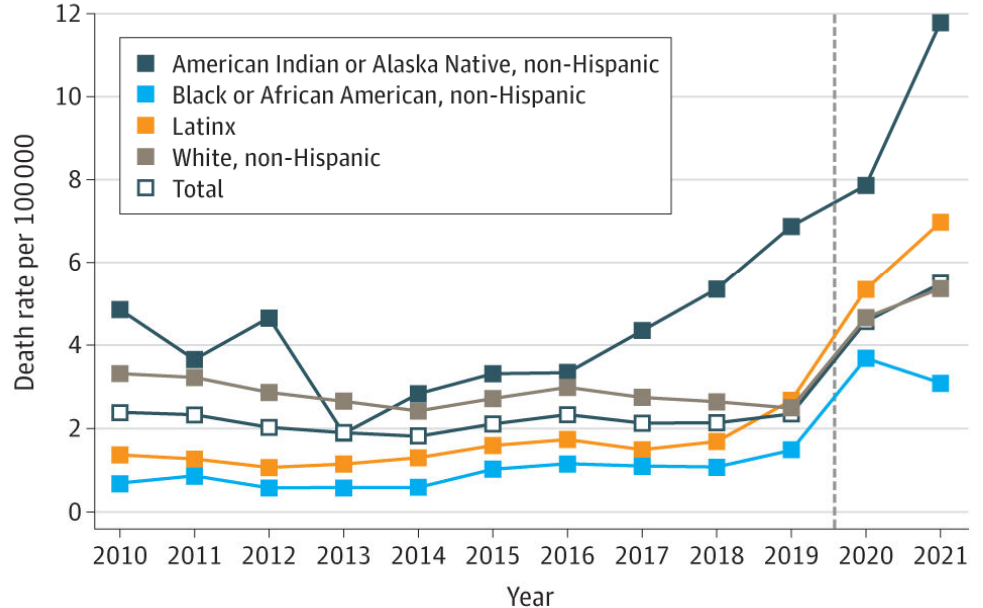
From: **Trends in Drug Overdose Deaths Among US Adolescents, January 2010 to June 2021**

JAMA. 2022;327(14):1398-1400. doi:10.1001/jama.2022.2847

**A** Overdose mortality among adolescents by substance type



**B** Overdose mortality among adolescents by race and ethnicity



**Figure Legend:**

Adolescent Overdose Deaths, 2010-2021 Drug overdose rates per 100 000 adolescents are shown by (A) substance involved and (B) race and ethnicity. The year 2021 refers to January to June 2021, and rates have been annualized. The vertical dashed lines delineate the prepandemic and pandemic periods of observed data.

# What is being done about these Trends



## Anticipatory Guidance to Prevent Adolescent Overdoses

Scott E. Hadland, MD, MPH, MS,<sup>a,b</sup> Deb M. Schmill, BS,<sup>c</sup> Sarah M. Bagley, MD, MS<sup>d,e,f</sup>

Scott E. Hadland, Deb M. Schmill, Sarah M. Bagley; Anticipatory Guidance to Prevent Adolescent Overdoses. *Pediatrics* May 2024; 153 (5): e2023065217. 10.1542/peds.2023-065217

[Episode 199 of Peds On Call Podcast](#)







Original Investigation | Substance Use and Addiction

## Substance Use Screening, Brief Intervention, and Referral to Treatment Among Youth-Serving Clinicians

Kathleen Ragan-Burnett, MSPH; Lyna Schieber, MD, DPhil; Andrew Terranella, MD, MPH; Christina Mikosz, MD, MPH

### Abstract

**IMPORTANCE** Despite decreasing substance use by adolescents in recent years, overdose rates continue to rise. Morbidity and mortality from substance use is preventable if detected; however, screening practices among youth-serving clinicians are unknown.

**OBJECTIVE** To describe youth-serving clinicians' screening, brief intervention, and referral to treatment practices for substance use disorders (SUDs) among adolescents.

**DESIGN, SETTING, AND PARTICIPANTS** This cross-sectional study used DocStyles data from September 5 to October 12, 2023, on clinical practice settings in the US. Responding clinicians included family physicians, internal medicine physicians, pediatricians, nurse practitioners, and physician assistants.

**EXPOSURE** Delivery of services to youths aged 17 years or younger.

**MAIN OUTCOMES AND MEASURES** Screening, brief intervention, and referral to treatment practices, including screening frequency and type of screening tool used, and screening at every well visit using a screening tool were assessed using descriptive statistics and multivariable logistic regression.

### Key Points

**Question** What are the current practices surrounding substance use disorder screening, brief intervention, and referral to treatment practices among youth-serving clinicians in the US?

**Findings** In this cross-sectional study of 1047 youth-serving clinicians from multiple primary care specialties, 57% reported that they routinely screen adolescents for substance use disorders at every well visit. Only 39% reported using a screening tool at every well visit.

**Meaning** These findings suggest that substance use disorder screening in youths needs improvement to better adhere to recommended screening practices.

**RESULTS** Of 1047 youth-serving clinicians (mean [SD] age, 45.3 [11.4] years; 555 male [53.0%]), 467 (44.6%) were family physicians, 250 (23.9%) were pediatricians, 132 (12.6%) were internal medicine physicians, 107 (10.2%) were nurse practitioners, and 91 (8.7%) were physician assistants (survey response rate, 57%). Median years in practice was 13 (IQR, 7-23 years). Most clinicians (634 [60.6%]) reported that skills in SUD diagnosis were relevant to their practice, and 800 (76.4%) reported seeing at least 1 adolescent with an SUD monthly. A majority of clinicians (596 [56.9%]) reported screening for SUDs at every well visit, with a high proportion of pediatricians reporting screening at every well visit (173 of 250 [69.2%]). Clinicians who screened at every well visit were more likely to use a screening tool (odds ratio, 1.87 [95% CI, 1.44-2.44]). Only 411 clinicians (39.3%) reported screening at every well visit using a screening tool; 321 clinicians (30.7%) offered all components of screening, brief intervention, and referral to treatment practice. Clinicians who reported seeing 5 or more adolescents with an SUD per month had a higher odds of screening with a standardized tool at every annual well visit (adjusted odds ratio, 2.19 [95% CI, 1.30-3.71]).

**CONCLUSIONS AND RELEVANCE** These findings suggest that while most clinicians report screening youths for SUDs at least sometimes, a substantial proportion screened only intermittently. Efforts to improve screening rates through education and systems-based practice changes may facilitate offering anticipatory guidance and SUD treatment in all youth-serving clinical settings.

JAMA Network Open. 2025;8(5):e2511579. doi:10.1001/jamanetworkopen.2025.11579

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# Barriers



Workforce challenges/ staffing



Lack of training available



Access to treatment /  
transportation



Youth readiness / reluctant to go



Comfort with treating youth SUD  
/ not willing to treat SUD



Limited hours/ scheduling  
around school

# Needs



Training



Staff



Funding (includes for  
programs, and  
compensation for staff)



Resources

# How Does This Impact Our Work?

Staffing /  
Workforce

Funding

Training

Resources



# Rack Cards



## Resource Guide for Adolescents with Substance Use Disorder

Are you or someone you know impacted by a substance use disorder? Below is a list of resources to support you wherever you are at.

### 988 Suicide and Crisis Lifeline

988 offers free, confidential, 24/7 access to trained crisis counselors who can help people experiencing mental health-related distress. You can call or text 988.



### Prevention for ME

A resource that provides partnership, and education throughout Maine to reduce and prevent substance misuse, commercial tobacco use, and promote wellbeing across the lifespan.

### Vape Free Maine

Ready to quit vaping? Get free & confidential support.



## Resource Guide for providers of an Adolescent with Substance Use Disorder

Below is a list of resources specific to adolescent substance use disorder geared to you as a provider.

### Addiction Technology Transfer Center Network (ATTC)

Free learning opportunities as it relates to teens and addiction.

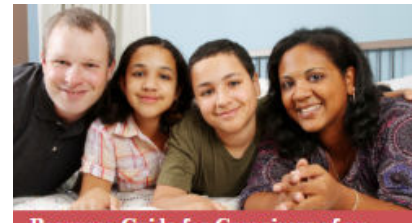


### Eyes Open For ME.

If you or someone you know is ready to stop using drugs, call 211 today or text your zip code to 898-211 (TXT-211) to be connected with a friendly Maine based specialist.

### Prevention for ME.

A resource that provides partnership, and education throughout Maine to reduce and prevent substance misuse, commercial tobacco use, and promote wellbeing across the lifespan.



## Resource Guide for Caregivers of an Adolescent with Substance Use Disorder

Below is a list of resources caregivers can use to support their child with substance use needs.

### "Talk. They Hear You."

SAMHSA's national youth substance use prevention campaign helps parents and caregivers get informed, be prepared, and take action to prevent underage drinking and other substance use.



### Eyes Open For ME.

If you or someone you know is ready to stop using drugs, call 211 today or text your zip code to 898-211 (TXT-211) to be connected with a friendly Maine based specialist.

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## Adolescent SUD Information Website

Children's Behavioral Health Services has created a website dedicated to information on adolescent substance use.



## Adolescent Substance Use Treatment Locator



Online search tool to locate resources for Adolescents with Substance Use Disorder.

## Get Maine Naloxone

Naloxone can be obtained in the state of Maine through several locations and programs. To get more information on where you can get Naloxone scan the QR code.



## 211 Maine

211 Maine is a free, confidential information and referral service that connects people of all ages across Maine to local services. It is available 24 hours a day, seven days a week.



# Adolescent SUD Website



STATE OF MAINE  
Department of  
Health and Human Services

[Hotlines](#) | [Contact Us](#) | [Online Services](#) | [Privacy](#)

SEARCH

## Office of Behavioral Health

[OBH Home](#) ▾

[About Us](#) ▾

[Get Support](#) ▾

[Providers](#) ▾

[Training & Certification](#) ▾

[DHHS](#) → [OBH Home](#) → [Get Support](#) → [Children's Behavioral Health](#) → Substance Use Resources for Youth

Get Support

Impaired Driving (DEEP)

Substance Use Disorder

Mental Health Services

Housing Services

Employment Services

Justice System Related  
Services

Rights and Legal Issues

Children's Behavioral  
Health

CBHS Contacts

Children's Behavioral

## Substance Use Resources for Youth

### Youth Substance Use Disorder (SUD) Corner

Children's Behavioral Health Services has a team of staff whose focus is substance use in youth. This page has been created to make information for youth easier to find and more accessible to those who need it. On this page you will find lots of information on different topics. We recommend taking your time to look through each of the components and links. We welcome you to bookmark this page and share it with others.

#### MAINE PAST 30 DAY USE IN 2023

##### Maine Middle School Students:

**2.0%** smoked cigarettes

**5.7%** used an electronic vapor product

**4.8%** drank alcohol

**5.0%** used marijuana

**4.9%** took prescription drugs without doctor's prescription

##### High School:

**5.6%** smoked cigarettes

**15.6%** used an electronic vapor product

**20.5%** drank alcohol

**18.7%** used marijuana

**5.2%** took prescription drugs without doctor's prescription

# Resources on Website

▼ [Nothing is Safe and Safe Storage](#)

^ [Resources](#)

## Links to Resources:

- [Prevention for ME | Youth/Young Adult](#)
- [Tips to Talk to a Friend about Drug use | Addiction Education Society](#)
- [Seize the Awkward | Talk With A Friend About Mental Health](#)
- ["I" Statements | I am statements, Feelings, Simple way \(pinterest.com\)](#)
- [Talking to Your Parents or Other Adults \(for Teens\) - Nemours KidsHealth](#)
- [Talking to Your Doctor \(for Teens\) - Nemours KidsHealth](#)
- [How to Talk to Teachers: 10 Tips for Student Success - Student Futures](#)
- [Resource Locator Tool - Maine Chapter American Academy of Pediatrics](#)
- [SAMHSA Families Family Support Guide](#)
- [Resources for Families Coping with Mental and Substance Use Disorders | SAMHSA](#)
- [Maine Addiction Treatment & Substance Use | Substance Abuse Programs | 211 Maine](#)
- [Surgeon General Fact Sheet](#)
- [Al-Anon Family Groups](#)
- [How to Set Healthy Friendship Boundaries | Well+Good \(wellandgood.com\)](#)
- [National Drug and Alcohol Fact Week 01/22/18 – 01/28/18 | Midwest Asian Health Association \(maha-us.org\)](#)
- [Protect Your Children: Store & Use Medicines Safely | Patient Safety | CDC](#)
- [Fentanyl Pills: Recent Seizure in Maine Highlights Risk to Public Health | Get Smart About Drugs](#)
- [Yes, Marijuana Laced with Fentanyl is Causing Fatal Overdoses \(addictions.com\)](#)
- [The Maine State Epidemiological Outcomes Workgroup \(SEOW\)](#)

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# Educational Opportunities

## Adolescent SUD ECHO

Partnership with CCSME SUD Learning Community

Three Sessions:

- ECHO 1; 57 participants from 36 agencies
- ECHO 2; 60 participants from 45 agencies
- ECHO 3; 173 participants from 93 agencies
- ECHO 4; 134 participants from 89 agencies

## Treat ME

Year long learning collaborative:

- Asynchronous
- Live webinars
- In person learning days

Resource list that breaks down content into various sections

## AdCare Trainings

AdCare has hosted several Adolescent SUD specific trainings including trainings on:

- Supporting youth and families in recovery
- Best practices for youth and young adult substance use treatment
- Adolescent marijuana use

## Maine Pediatric Behavioral Health Partnership

A program to improve the mental health of youth by offering pediatric care providers and their clinical team members education opportunities and patient care consultations with psychiatric and mental health providers.



[Home](#) [About Us](#) [Programs](#) [Resources](#) [Conferences](#) [Calendar](#) [Contact](#) [Search](#)



**Search**



Apply to



Request



Sign up for



View Our

**Upcoming Webinars and Events**

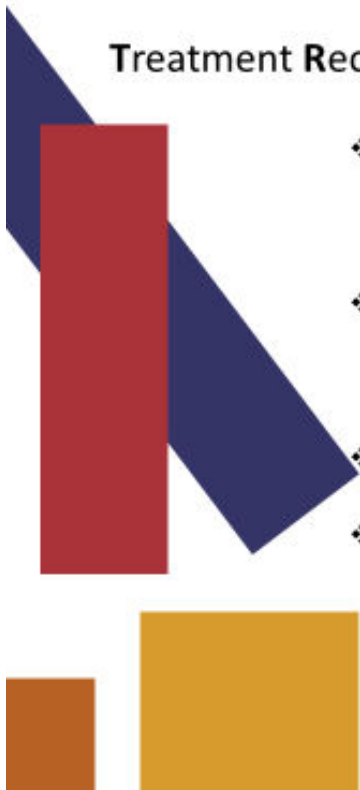
[Go To Full Calendar](#)

# treatME

MMA Center for Quality Improvement / Maine Chapter, AAP

## Treatment Recovery Education Advocacy for Teens with Substance use Disorder In Maine

- ❖ Urgency –Overdose increasing in younger populations
  - Worsening mental illness
  - Poor access to health care (PCPs, schools)
  - Declining social Influencers of health
- ❖ Learning Collaborative to Increase Treatment of Substance Misuse and SUD by Teens In Primary Care
  - Increase Clinician Knowledge
  - Cultivate Clinical Champions
  - Build Support for Clinicians and Families
- ❖ Steering Committee from OCFS, DHHS, Governor's Office, Day One, Maine AAP, Opioid Response Network, Spurwink, PCHC, and MMACQI
- ❖ Faculty – Maine Health, St. Mary's, Northern Light, Boston Medical Center, Boston Children's , Yale, UCLA, Johns Hopkins, Dartmouth, University of Wisconsin, University Colorado



A better tomorrow starts today.



## Treatment Recovery Education Advocacy for Teens with SUD In ME

**TREAT ME**, a 12 block learning collaborative to increase knowledge of treatment strategies for adolescent SUD, is available to all. If you seek Continuing Medical Education Credit, you can still obtain that by selecting the 'TREAT ME Courses for Credit' box below.

**TREAT ME Now** is a 'low barrier rapid assessment system' to evaluate youth 13-19 struggling with SUD and help coordinate treatment. To learn more, select the 'TREAT ME Now Overview' box below.

[TREAT ME Courses for Credit](#)

[TREAT ME Now Overview](#)

[Treat ME Resource List](#)



Click any subject below to view the content.

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This content was provided by the TreatME Learning Collaborative that took place from October 2022 to November 2023. More information on TreatME can be found at [www.treatme.info](http://www.treatme.info)

## General Overview

### Video

Addiction 101 - <https://www.youtube.com/watch?v=ySn20YJB2KQ>

Opioid Use Disorder - <https://www.youtube.com/watch?v=zOAZ5XylA1w>

Substance Use Presenting as/or Exacerbating Physical or Mental Illness in Teenagers - <https://www.youtube.com/watch?v=BMjR9bQSkIQ>

Substance Use and Substance Use Disorders in Youth - [https://www.youtube.com/watch?v=N\\_Mptt9ieRM](https://www.youtube.com/watch?v=N_Mptt9ieRM)

### Resources for Providers

Best Practices for Addressing Adolescent Opioid Use - <https://www.maineaap.org/assets/docs/Best-Practices-for-Addressing-Adolescent-Opioid-Use.pdf>

Medication-Assisted Treatment of Adolescents with Opioid Use Disorders - <https://www.maineaap.org/assets/docs/Medication-Assisted-Treatment-of-Adolescents-With-Opioid-Use-Disorders.pdf>

Search and Rescue Essentials - <https://www.maineaap.org/assets/docs/Search-and-Rescue-Essentials.pdf>

Investing in Adolescent and Young Adult Health Booklet - [https://www.treatme.info/assets/docs/Adolescent\\_Health\\_Investing\\_in\\_Adolescent\\_and\\_Young\\_Adult\\_Health\\_Booklet.pdf](https://www.treatme.info/assets/docs/Adolescent_Health_Investing_in_Adolescent_and_Young_Adult_Health_Booklet.pdf)

Characteristics of Medicaid-Enrolled Adolescents with Unhealthy Opioid or Other Substance Use - <https://www.treatme.info/assets/docs/Characteristics-of-medicaid-enrolled-adolescents-with-unhealthy-opioid-or-other-substance-use.pdf>

Access Maine - <https://www.accessmaine.org/>

211 Maine - <https://211maine.org/>

My Maine Connection - [https://www.mymaineconnection.gov/benefits/s/?language=en\\_US](https://www.mymaineconnection.gov/benefits/s/?language=en_US)

Regional Care Teams - <https://placemattersmaine.org/regional-care-teams/>

Find Treatment - <https://findtreatment.gov/locator>

Options - <https://knowyouroptions.me/>

Eyes Open for ME - <https://eyesopenforme.org/>

Maine Access Points - <https://www.maineaccesspoints.org/>

### Resources for Families

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# TREAT ME Now



TREAT ME Now offers a low barrier rapid assessment system to evaluate youth 13-19 Struggling with substance use/misuse/substances in appropriate care settings. In addition to primary care or hospital based services, this model could include counseling, case management or residential placement and additional services as needed. Referral to the TREAT ME Now system can come from a variety of sources:



Schools



Emergency Departments



Youth Justice



Self/Family



Primary Care



Youth Organizations

## The 'HUB' - A Team Approach to Care

The rapid evaluation team operates as the 'HUB' to provide a rapid intake, expert assessment, and recommend/offer patient-centered low barrier care.

- Rapid response: connection **within 24 hours** via phone or virtual platform.
- Plan initiated **within 72 hours** or sooner.
- Primary care office is alerted, if not the referral source, and offered support.
- Guidance to appropriate ED, if needed.
- Treatment protocols that include wrap around care will be provided.



## Basic Criteria for Rapid Assessment

- ED visit for overdose on an Opioid or Polysubstances and/or misuse over time
- ED visit or frequent incidence of Acute Alcohol Poisoning or Nicotine Toxicity
- ED visit or frequent incidence of severe misuse of methamphetamine/cocaine/ stimulants/benzodiazepines/barbiturates
- Admission for EVALI
- ED visits requiring IV hydration for cannabis hyperemesis
- Interaction with juvenile justice related to substance misuse requiring evaluation

## MORE INFO



(207) 344-2690  
www.day-one.org/online-referral





9:30 AM - 2:00 PM ET

[Home](#) [Events](#) [Programs & Services](#) [Professionals](#) [Contact Us](#)

11th leading cause of death in the United States, with rates of suicidal ideation, attempts, and completed suicides disproportion...

## July 2025

### Governor Mills 7th Annual Opioid Response Summit

🕒 July 10, 2025 at 8:00 AM - 5:00 PM ET

📍 Augusta Civic Center

### Ethics in Prevention (HHS Region 1)

🕒 July 31, 2025 at 9:00 AM - 4:30 PM ET • Registration Closed

Ethics in Prevention training provides Substance Use Prevention Specialists opportunities to engage in discussions of the six key principles of the Pr...

## September 2025

### Book Club: Healing a Village by Mark Lefebvre (ME#/450)

🕒 September 17, 2025 at 6:00 PM - 7:30 PM ET

### 2025 Opioid Response Monthly Webinar Series

First Friday of the month 11:30-12:30

### Governor Mills 7<sup>th</sup> Annual Opioid Response Summit July 10<sup>th</sup> in Augusta





Maine Pediatric  
& Behavioral Health  
Partnership

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[For Providers](#) ▾

[For Patients & Families](#)

[Resources for those effected by violence in Lewiston](#)



Welcome to the Maine Pediatric &  
Behavioral Health Partnership  
Program

[bhpartnersforme.org](http://bhpartnersforme.org)

# Evidence Based Practices

## A-CRA

(Adolescent Community Reinforcement Approach)



### Evidence-Based Practice Center

#### Adolescent Community Reinforcement Approach (A-CRA)

##### What is A-CRA?

The treatment model known as A-CRA recognizes that, at least initially, alcohol and other drug use is about reinforcing consequences that make us more likely to repeat actions. People who use alcohol and other drugs get something out of it – whether it is physical pleasure, euphoria, rituals or access to a new group of friends – or they wouldn't keep doing it. In the case of drugs like opioids, it doesn't take long before physical addiction takes over, and the positive rewards turn to drug seeking and using to avoid or escape opioid withdrawal pain.

The overall goal of A-CRA is to help clients reconnect with or discover new sources of positive reinforcement (people, activities, things) within their community to compete with alcohol or drug use.

How do A-CRA clinicians do this? By listening to and learning from their clients what is important to them. They then help them connect to pro-recovery activities that have meaning and value to their client. In addition, A-CRA clinicians help their clients identify small but important goals and learn how to achieve them. Clients also learn a variety of new skills, such as problem-solving and positive communication (with family, friends, and others), which help them enjoy a better quality of life. Practicing new skills is a critical component of the skills training used in A-CRA. Every session ends with mutually-agreed upon "homework" to practice skills learned during sessions.

A-CRA has been implemented in school, outpatient, MAT, intensive outpatient, and residential treatment settings. This

research-tested intervention is implemented across the US.

##### How is A-CRA Structured?

A-CRA sessions are positive on the individual's needs. Clinicians choose from a variety of procedures to choose from based on the client's needs. With includes guidelines for the caregiver(s) alone, and the client.

According to the client's needs, happiness in multiple life areas is a goal of A-CRA. Clinicians help their clients identify small but important goals and learn how to achieve them. Clients also learn a variety of new skills, such as problem-solving and positive communication (with family, friends, and others), which help them enjoy a better quality of life. Practicing new skills is a critical component of the skills training used in A-CRA. Every session ends with mutually-agreed upon "homework" to practice skills learned during sessions.

##### Goals of A-CRA

- Decrease/eliminate drug use
- Improve communication with family, friends, and others
- Increase participation in community activities
- Increase positive life outcomes

Chestnut Health Systems is an organization.

##### For More Information

Lora Passetti  
Evidence Based Practice Center Program Director  
[lpasetti@chestnut.org](mailto:lpasetti@chestnut.org)  
<http://ebtc.chestnut.org>

#### Adolescent Community Reinforcement Approach (A-CRA) Referral Information

Below is a list of agencies who have clinicians that are trained/certified in A-CRA:

##### Aroostook Mental Health Services (AMHC)

Provides services in their Outpatient Offices and Telehealth  
Services are provided in Aroostook County and Machias and Telehealth  
To make referrals call 1-800-244-6431

##### Anglez

Provides services in their Outpatient Office based in Augusta  
Services are provided in Kennebec County and other surrounding areas to include Lincoln, Sagadahoc, Androscoggin, and Waldo County  
To make referrals visit <https://anglezchhs.com/> or call (844) 294-5306

##### Community Health and Counseling Services (CHCS)

Provides services in their Outpatient Office and Telehealth  
Services are provided in their Bangor Office and Telehealth  
To make referrals call (207) 947-0366

##### Kennebec Behavioral Health (KBH)

Provides services in their Outpatient Office and School-based Services  
School Based Services are provided in Kennebec county  
Services provided in Maranacook schools area and office based in the Augusta community  
To make referrals call 1-888-322-2136

##### Sweetser

Provides services in their CCBHC, School-based Services, and Telehealth  
Services are provided in the Brunswick office serving Cumberland and Sagadahoc Counties and Telehealth  
To make referrals call 1-800-434-3000



## MDFT

(Multi-dimensional Family Therapy)

- Clinical Outcomes at Discharge from MDFT
  - 88% reduced opioid use
    - Including 63% abstinent from opioids and all other hard drugs
  - 62% improved mental health
  - 62% reduced violence
  - 57% improved school/vocational functioning



MDFT International: United States  
Year in Review: 2023



# Other Supports/Resources

## Recruitment and Retention RFA

- Prioritize adolescent in-person outpatient community-based treatment
- Two organizations awarded
- Sweetser
  - Hired 1 clinician in Brunswick
  - Hired 1 part time supervisor
  - Supervisor has completed an A-CRA training, and the clinician is currently working towards certification
- AMHC
  - Hired 2 part-time clinicians located in Washington and Hancock Counties
  - Both clinicians have taken the A-CRA training and are working towards certification

## Virtual IOP

- Pine Tree Recovery has started a virtual Intensive Outpatient Program for youth
- Consists of
  - Group sessions several hours a day, 3 days a week
  - Individual sessions
- Includes an app

## Maine AAP Treatment Locator Tool

### Resources for Providers and Families of Adolescents with Substance Use Disorder



#### Resource Locator

Click on your county in the map. Local, state, and national resources will be shown.



### Androscoggin County Resources

#### Avalon Counseling Services

*Provides individual treatment, substance use treatment groups, intensive outpatient treatment and MAT.*

**Androscoggin:** 37 Park St., Suite 302, Lewiston, (207) 333-1080

#### Outpatient Services available to adolescents:

Medication management/MAT  
Intensive outpatient treatment (IOP)  
Women's group  
Individual and group substance use disorder treatment  
Counseling

**Referrals:** Requires referral from primary care physician

**Insurances:** MaineCare, Anthem, Community Health Options, self-pays, etc.

#### Blue Ridge Counseling Center P.A.

*Mental health and substance use agency providing outpatient counseling and case management services.*

**Androscoggin:** 38 Union St., Livermore Falls, (207) 897-9000

#### Outpatient Services available to adolescents:

Substance abuse counseling - individual, group (w/ adults)  
Mental Health counseling

**Insurances:** MaineCare, Medicare, Private Insurances

#### Counselors:

3 - 1 LADC, 2 LCSW



## Other Supports/Resources

### Youth Peer Recovery Coaches

- Pilot program with Healthy Acadia
- Recovery coaches trained to specifically work with individuals aged 14 to 21
- Peer recovery coaches work with individuals who have a SUD or those impacted by SUD
- Healthy Acadia has hired a Youth Peer Recovery Coach supervisor and a Youth Peer Recovery Coach in both Hancock and Washington County
- Trained in CCAR model – Recovery Coach Academy for Young People
- Have hosted two Recovery Coach Academy for Young People trainings, and plan to host another in the fall



# Agenda



## Adolescent Use Rates

*An overview on the prevalence of adolescent substance use trends nationally and in Maine.*

## Substance Trends

*A look at what we are seeing in the drug supply and rates of fatal overdoses nationally and in Maine.*

## Assessing the Landscape

*What are we doing to assess the landscape of care for adolescent SUD in Maine?*

## Expanding Access

*A review of the ongoing adolescent SUD work at CBHS to support youth with or affected by an SUD.*

## Conclusion

*Wrap up and time for questions.*





Questions?

# Maine Youth Caucus



# What is happening in your community to support youth?

Examples could include:

- Healthy Acadia's Youth Peer Recovery Coach Pilot Program
- Penquis CAP – SAY (Substance Affected Youth) Program
- ME-RAP Youth Caucus
- SEED's (Students Empowered to End Dependency)

# A-CRA Flyer



## Evidence-Based Practice Center

### Adolescent Community Reinforcement Approach (A-CRA)

#### What is A-CRA?

The treatment model known as A-CRA recognizes that, at least initially, alcohol and other drug use is about reinforcing consequences that make us more likely to repeat actions. People who use alcohol and other drugs get something out of it – whether it is physical pleasure, euphoria, rituals or access to a new group of friends – or they wouldn't keep doing it. In the case of drugs like opioids, it doesn't take long before physical addiction takes over, and the positive rewards turn to drug seeking and using to avoid or escape opioid withdrawal pain.

The overall goal of A-CRA is to help clients reconnect with or discover new sources of positive reinforcement (people, activities, things) within their community to compete with alcohol or drug use.

How do A-CRA clinicians do this? By listening to and learning from their clients what is important to them. They then help them connect to pro-recovery activities that have meaning and value to their client. In addition, A-CRA clinicians help their clients identify small but important goals and learn how to achieve them. Clients also learn a variety of new skills, such as problem-solving and positive communication (with family, friends, and others), which help them enjoy a better quality of life. Practicing new skills is a critical component of the skills training used in A-CRA. Every session ends with mutually-agreed upon "homework" to practice skills learned during sessions.

A-CRA has been implemented in school, outpatient, MAT, intensive outpatient, and residential treatment settings. This

research-tested intervention has been used in over 500 organizations across the United States and Canada.

#### How is A-CRA Structured?

A-CRA sessions are positive, strength-based and focused on the individual's needs. Clinicians have a variety of A-CRA procedures to choose from based upon the issues clients raise during sessions. Within a broad framework, the model includes guidelines for three types of sessions: clients alone, caregiver(s) alone, and client and caregiver(s) together.

According to the client's needs and self-assessment of happiness in multiple life areas, clinicians choose from a variety of A-CRA procedures that address day-to-day issues of living, such as communication skills, and active participation in positive social and recreational activities with the goal of improving life satisfaction and eliminating substance use problems.

#### Goals of A-CRA

- Decrease/eliminate the use of alcohol and other drugs
- Improve communication with family, teachers, legal representatives, and others
- Increase participation in non-using social activities
- Increase positive relationships with family and peers

*Chestnut Health Systems is a 501(c3) not-for-profit community organization.*

#### For More Information

Lora Passeti  
Evidence Based Practice Center Program Director

[lpasseti@chestnut.org](mailto:lpasseti@chestnut.org)

<http://ebtc.chestnut.org>

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To make referrals call 1-800-434-3000

For more information email  
Amanda Chamberlain –  
[Amanda.Chamberlain@maine.gov](mailto:Amanda.Chamberlain@maine.gov)





# Virtual IOP Flyer



## VIRTUAL ADOLESCENT PROGRAM

Recovery is a lifelong journey. That's why we've created Guardian Virtual, to provide a proven system to keep our clients on track, from wherever recovery takes them.



### OUR UNIQUE APPROACH

Unlike other treatment programs, we focus on a complete restoration of physical, mental, emotional, and spiritual health. Because active addiction directly affects all areas of life, it makes sense that an effective recovery program should leave no stone unturned. We take a multi-pronged approach to recovery.

- Intensive Therapeutic Intervention**  
Individual, group, and family therapy.
- Medication Management**  
Coordinate with medical professionals to treat any underlying mental health issues that may be contributing to addiction.
- Holistic Approaches to Recovery**  
Heal with mindfulness, meditation, and art.

### WHY ADOLESCENT VIRTUAL IOP?

- Private**  
Our clients can heal from the comfort of their own home.
- Flexible**  
The ability to work around busy school schedules.
- Effective**  
The same individualized treatment from a nationally recognized leader.
- Availability**  
Colorado, Florida, New Jersey, New Hampshire, Maine and Vermont.



24/7 Helpline  
**(888) 522-7950**  
[Referrals@GRNcare.com](mailto:Referrals@GRNcare.com)

**HOPE STARTS HERE**  
[GuardianRecoveryNetwork.com](http://GuardianRecoveryNetwork.com)





WE ACCEPT MOST HEALTH INSURANCE.

## HOW TO GET STARTED

Flexible, intensive outpatient (IOP) care is at our client's fingertips. Guardian Virtual is straightforward treatment tailored to the needs of the individual. Our virtual program provides top-quality of care, combined with flexibility and privacy.



### 1. Contact

If you believe Guardian Virtual is a good fit for your client's needs, reach out to one of our experienced Treatment Advisors by phone at (888) 522-7950 or through our website.



### 2. Schedule

Undergo a brief assessment with one of our Treatment Advisors. We'll determine if Guardian Virtual will successfully meet all of your needs and schedule group and individual therapy sessions.



### 3. Treatment Plan

During the first one-on-one we create an individualized treatment program, tailored to the specific treatment needs and goals of your loved one. We are committed to helping families reach their desired outcomes.



### 4. Begin

Once the plan is established, access is as easy as logging into a computer. You are also given access to our treatment app where you can track progress and connect to groups.



24/7 Helpline  
**(888) 522-7950**  
[Referrals@GRNcare.com](mailto:Referrals@GRNcare.com)

**HOPE STARTS HERE**  
[GuardianRecoveryNetwork.com](http://GuardianRecoveryNetwork.com)

# Links to Resources in Maine

Maine SUD Learning Community: <https://mesudlearningcommunity.org/>

Treat ME Learning Collaborative: <https://www.treatme.info/>

Treat ME Resource List: <https://www.treatme.info/assets/treatMe/Treat-ME-Resources.pdf>

AdCare Maine: <https://adcareme.org/trainings/>

Maine Pediatric Behavioral Health Partnership: <https://www.bhpartnersforme.org/>

Maine AAP Resource Locator: <https://www.maineaap.org/substance-use-disorder>

Maine MOM: <https://www.mainemom.org/>

OPTIONS: <https://knowyouroptions.me/>

Adolescent SUD Prevention: <https://eyesopenforme.org/> <https://preventionforme.org/prevention/>

Plan of Safe Care: <https://www.maine.gov/dhhs/mecdc/population-health/mch/plan-safe-care.shtml>

CBHS Substance Use Treatment for Youth: <https://www.maine.gov/dhhs/obh/support-services/childrens-behavioral-health/substance-use-resources-for-youth>

YRBSS: <https://www.cdc.gov/yrbs/results/index.html>

MIYHS: <https://www.maine.gov/miyhs/results>

Maine Drug Enforcement Agency Facebook: <https://www.facebook.com/Maine.Drug.Enforcement.Agency/>

Maine Drug Data Hub: <https://mainedrugdata.org/>

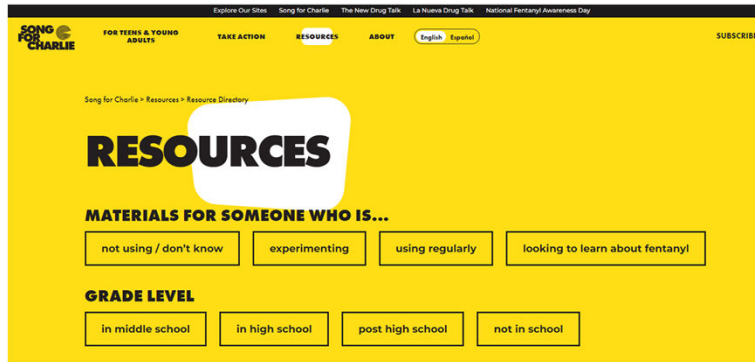
# Articles

- Teen Drug Use Habits are Changing, For the Good. With Caveats: <https://www.nytimes.com/2024/04/06/health/teens-drugs-alcohol-nicotine.html>
- [More Kids Are Dying of Drug Overdoses. Could Pediatricians Do More to Help? - KFF Health News](#)
- [Maine saw one of the nation's biggest drops in fatal overdoses \(bangordailynews.com\)](#)
- [Overdose Deaths Dropped in U.S. in 2023 for First Time in Five Years - The New York Times \(nytimes.com\)](#)
- [A record number of youth are dying from opioid use - The Washington Post](#)
- The Overdose Crisis Among U.S. Adolescents: <https://www.nejm.org/doi/abs/10.1056/NEJMp2312084>
- Pediatrics on Call: <https://www.aap.org/en/pages/podcast/promoting-healthy-active-living-preventing-overdoses/>
- [Only 1 in 4 People Who Need Meds to Fight Opioid Addiction Get Them \(healthday.com\)](#)



# Online Resources

## [Song for Charlie](#)



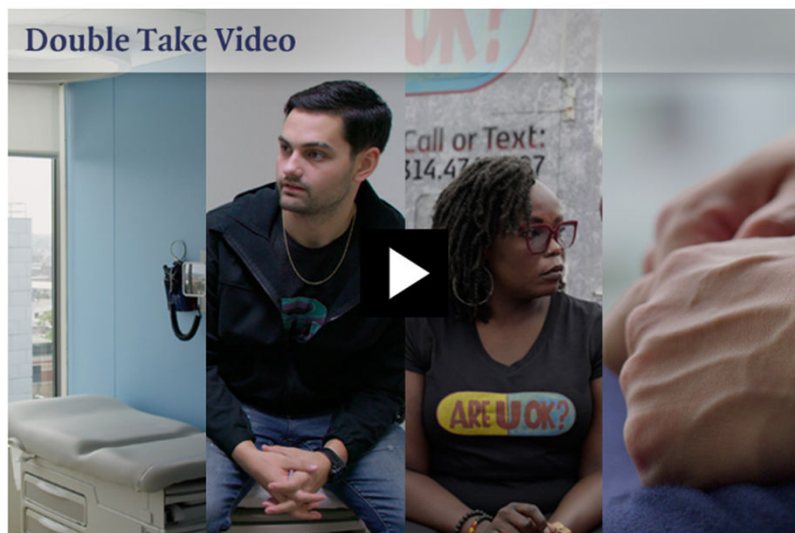
## The New Drug Talk: <https://www.youtube.com/watch?v=5e2cVU46JVo>





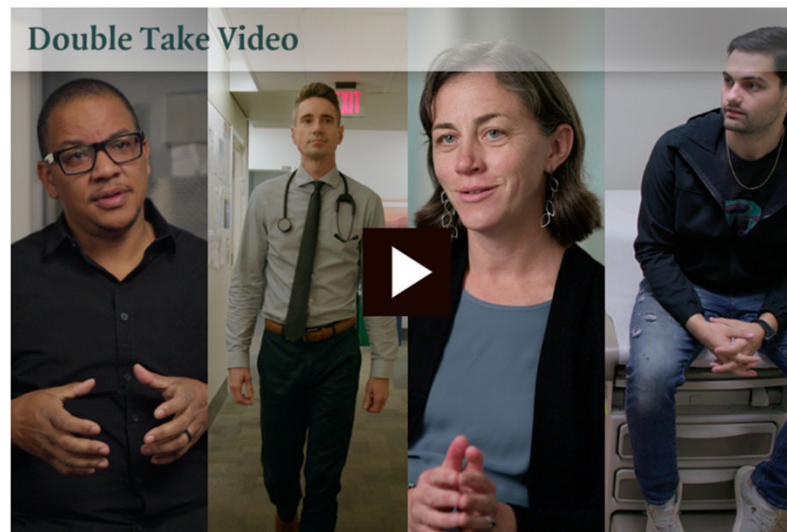
The NEW ENGLAND  
JOURNAL of MEDICINE

## Effective Treatments for Opioid Use Disorder — Finding Recovery and Staying Safe



<https://www.nejm.org/doi/full/10.1056/NEJMp2310172>

## Treating Opioid Use Disorder in General Practice — Diagnosis, Harm Reduction, and Medications



<https://www.nejm.org/doi/full/10.1056/NEJMp2310171>

# Additional Resources and Links

- Monitoring the Future Dashboard: <https://monitoringthefuture.org/data/>
- Effective Treatments for Opioid Use Disorder — Finding Recovery and Staying Safe: <https://www.nejm.org/doi/full/10.1056/NEJMp2310172>
- Treating Opioid Use Disorder in General Practice — Diagnosis, Harm Reduction, and Medications: <https://www.nejm.org/doi/full/10.1056/NEJMp2310171>
- American Academy of Pediatrics, Substance Use Prevention: <https://www.aap.org/en/patient-care/substance-use-and-prevention/>
- [Principles of Care for Young Adults With Substance Use Disorders | Pediatrics | American Academy of Pediatrics \(aap.org\)](#)
- [Treating Adolescent Opioid Use Disorder in Primary Care | Adolescent Medicine | JAMA Pediatrics | JAMA Network](#)
- [Mass General for Children Research Survey Finds Most Pediatricians Unprepared to Treat Teens with Opioid Use Disorder](#)

# Questions?

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