SPRING 2005 NIPC INHALANT PREVENTION UPDATE:

Since our last UPDATE quite a few new people have been added to this list so a brief explanation is in order. To keep people informed about inhalant abuse activities, research, issues, resources and events we send NIPC Inhalant UPDATES, electronic newsletters, to our email list. We urge you to forward the UPDATE to colleagues so they can join our list.

This UPDATE is longer than anticipated because of new important news. There is a great deal of new research to report to you. There is also an item about a little mentioned but very important topic … huffing in the military. A statewide inhalant initiative has been established in TN. New inhalant legislation has been introduced in two states. So here’s the latest NIPC Inhalant UPDATE – I hope you find it interesting and useful.

At the end of this UPDATE there is plea that you consider helping with a CONTRIBUTION or PAYMENT.

Over the past two years our funding has been reduced by over 60%! At the same time the number of people who contact us and the number of resources we send increased! All NIPC resources are sent at no cost to recipients. This includes the EDUCATE video, CBS Evening News CD and brochures (we have no funding for reproducing and mailing these items) and NIPAW kits. We maintain a toll-free telephone number and web site. I cover costs with workshop and presentation fees and a portion of my salary. Last year we sent resources to over 4,000 people – less than a hundred people made a contribution or payment to us. We need your help now!

NEWS, INFORMATION & RESOURCES:
Corporate News:
Within the next couple of weeks a major supplier of aerosol computer cleaner will announce they are placing a link to our website on their packaging. This is a new venue for us. This will be an exceptional opportunity to educate large numbers of people about product misuse dangers. Please check the “Important News” section on our web site in the near future for further information.

National Recovery Month:
September is SAMHSA’s National Recovery Month. We’ve been allocated several hundred local coordinator tool kits for distribution. The tool kit contents and information about the campaign can be found at http://www.recoverymonth.gov.
The kits will be made available, at no cost, to those who want them. If you would like a kit, please email me. Also, if you have a list of folks you can forward this to who might be interested, please forward.

Inhalant abuse will be one of the topics discussed on the SAMHSA June webcast entitled, “The Dangerous Frontiers of Substance Abuse: A Look at Alcohol and Drug Use Trends.” This will be available June 1, 2005 at http://www.ncadi.samhsa.gov/multimedia/webcasts/w.aspx?ID=410.

CADCA (Community Anti Drug Coalitions of America):
CADCA plans to a report on inhalant prevention strategies and are looking for innovative efforts (http://cadca.org/CoalitionsOnline/article.asp?id=761). Activities could include individual activities, communitywide education projects, workshops & presentations to diverse audiences, newsletter and newspaper articles, information & resource dissemination and proposed legislation. If you have done something, are doing something and/or plan to do something (this would include NIPAW activities), let CADCA know. Your ideas will help others. Send your responses to Natalia Martinez Duncan at NMartinez@cadca.org at CADCA and copy me at nipc@io.com.

New Chart:
At the request of the Nashville (TN) Metropolitan Police Department the NIPC developed a new “Inhalants Symptoms” chart. We’ve included “Special Considerations for Law Enforcement & Emergency Medical Personnel.” The chart was included in the last National Inhalants & Poisons Awareness Week (NIPAW) local coordinator’s kit. This chart has already had extensive distribution to law enforcement, emergency department, juvenile courts, etc. personnel. Please consider making similar distributions in your community (if you do please tell us to whom and how charts you distributed). The chart can be found on our web site under “New Items.”

In the Media:
Recently Connect For Kids online featured an inhalant article. The article spotlights young men who died from huffing and their families. Here is the site for the article: http://www.connectforkids.org/node/2993.

As a result of a National Institute on Drug Abuse (NIDA)/NIPC sponsored inhalant research panel at last January’s CADCA conference the Washington Post had an

A two part inhalant segment was aired on CNN’s Anderson Cooper show. Diane Stem, a Mom who lost her son Ricky Jr. to inhalants and Jessie, a young woman in treatment for inhalant addiction at Pathway Family Center (Indianapolis), were featured. Jessie spoke at our D.C. news conference at the National Press Club to kick off National Inhalants & Poisons Awareness Week. She is an extraordinary young woman who will grow and thrive.

As a reminder, CBS Evening News ran an excellent inhalant segment that is on our web site under “new items.” This provides one of the best short overviews of inhalant abuse issues.

Research:
Significant new inhalant research, publications and a new web site are available from NIDA at http://www.nida.nih.gov/. There is also new inhalant research and resources at SAMHSA’s (http://www.samhsa.gov/index.aspx) and NCADI’s (http://www.health.org) web sites.

Below is an inhalant research snapshot culled from various sources. The clear implication is that inhalant abuse must be viewed as a public health concern.

In addition to the toxic dangers of inhalants, recent research has shown that toluene, a solvent in many inhalants, promotes euphoria in the brain in the same way that cocaine, amphetamine/methamphetamine, PCP, and nicotine promote euphoria. Because of this research, we need to think of inhalants as highly addictive substances.

8.6% of all U.S. youths aged 12 or 13 have ever used inhalants. This is a higher lifetime use than any other illicit substance including marijuana. Further, youth ages 12 or 13 were more likely to use inhalants than marijuana in the past year.

Inhalant experimentation is initiated earlier than any other illicit substance, with young females starting before males.

At the eighth and tenth grade levels more females are huffing than males.

Inhalant use by 12 and 13 year olds is a marker for future drug use and delinquent behavior.
Youth 12 or 13 who used inhalants were more than twice as likely to have been in a serious fight at school or work in the last year and six times more likely to have stolen or tried to steal items worth more than $50.

In 2003, of the 169,000 individuals who were abusers or dependent on inhalants, 104,000 were between the ages of 12 to 17. This means 62% of those who need treatment are youth -- a larger proportion than for any other illicit substance.

The progression from inhalant use to abuse is related to early first use, use of multiple inhalants, and weekly inhalant use.

Adolescents who reported first use of inhalants at age 13–14 were six times more likely to be dependent on inhalants than those who started using inhalants at age 15–17.

We must stop viewing inhalant use by young adolescents as just being “a phase” they pass through as they grow up. Use of inhalants before age 14 may be an early marker of vulnerability for future involvement with illegal drugs such as heroin.

Adolescents with inhalant disorders use many other drugs, have mental health problems, and exhibit delinquent behaviors.

Adolescents with a history of foster care placement were about five times more likely to become dependent on inhalants than those never placed away from home.

Adolescents who were treated for mental health problems were more than two times as likely to be dependent on inhalants.

One study provides more evidence that early use of inhalants may be a precursor for later drug abuse that grows to include abuse of multiple illegal substances.

A study that examined the relationship between early inhalant use and later substance use in a sample of college students found that although early use of marijuana places youth at risk for future risky drinking and drug use, early use of inhalants may be an even more potent risk factor for later substance use and problems.

Inhalant use can also result in life-long problems. Studies of adult prisoners who were heavy inhalant users (as adolescents or adults) were significantly more likely
than drug users who had never used inhalants to have committed more property, violent, drug, and sex crimes in the past year; to have more alcohol and drug problems; to have been drunk or high on inhalants, cocaine, uppers, heroin, or marijuana when they committed crimes; to belong to a gang and, as a member, to have sold marijuana or cocaine; to have run away from home and to have been physically abused as a youth; to have lived with a partner who had substance abuse and/or psychiatric problems; to be depressed and have more mental health problems; to have had more treatment experiences; and to be at greater risk of HIV and AIDS.

According to the Partnership for a Drug-Free America’s *Partnership Attitude Tracking Survey*, inhalants are one of least talked about substances by parents to their children.

**Huffing in the Military:**

An NIPC concern for a number of years has been huffing in the military. This appears to be something of shadowy concern and not talked about except at the base level. (Getting the command level to recognize the problem and institute broad prevention efforts have been challenges.) Every year we have a few military installations, both domestic and abroad, participate in the NIPAW campaign. Things changed this year.

As a result of inhalant deaths of young military men, we received a number calls requesting help and resources. After talking with these folks we asked them to email counterparts throughout the world and tell them about our resources, ask if similar problems exist at their installations and to contact us for help. We received a significant number of calls and learned a great deal.

There is a huffing problem in the military – all branches. Would I call it a systemic problem? Not sure – but it exists (even *Rolling Stone* magazine noted huffing in an article a year or two ago when it reported on the conflicts we are currently involved in). I’m just guessing but I think part of the problem is an unintended consequence of the random drug testing that exists in the military – of course inhalants are not going to show up on these screens.

As a result of this effort more than 60 military installations joined the campaign. One person has put together a power point presentation. Progress is being made. I tried to call command level people to talk about this problem but none of my calls were returned.
Comment: For those of you who are in proximity to a military installation, please contact the substance abuse program and see if you can help.

Inhalant Resources:
NEW STRATEGIC ALLIANCE: The NIPC has formed a strategic alliance with the Elks to make more free resources available to consumers. The brochure, “A Parents’ Guide to Preventing Inhalant Abuse” is now available from the Elks Drug Awareness Program. You can get free copies by going to http://www.elks.org/drugs, click on Parents button for more information about the brochure and how to get copies (a PDF file of the brochure is at the site).

NIPAW:
Mark your calendars. The 14th annual National Inhalants & Poisons Awareness Week (NIPAW) campaign will be March 19th to 25th, 2006. More information about the campaign is at our web site. If you are interested in joining the campaign, please contact us.

Product Alert:
Over the past few months we have been getting an increasing number of calls about the misuse of AXE spray body deodorant. The problem seems to be confined to young men. According to the Daily Herald newspaper the problem with AXE misuse became so critical at Rotolo Middle School in Batavia, IL that the school principal banned AXE and similar aerosol products at the school.

Legislation:
Ricky & Johnson’s Law: In February companion inhalant bills were introduced in the TN Senate (SB 2007) and House (HB 1884) by Senator Randy McNally Representative Mike Turner. The Bills are named after two young men who died from huffing (Johnson Bryant, son of Toy Slayton and Chris Bryant and Ricky Stem Jr., son of Diane & Ricky Stem). The House Bill is at http://www.legislature.state.tn.us/bills/currentga/Bill/HB1884.PDF. I believe this is model legislation and all should take a look at it. The Bills address issues such as inhalant education, prevention, treatment and driving while impaired. We would like to thank Senator McNally & Representative for authoring these Bills.

There is good and bad news to report. Both bills were sailing thru until the House Bill got to the Budget Subcommittee. Because of the TN’s Department of Public Safety’s fiscal note (to print new forms, reprogramming and training) the House Bill has stalled. On the Senate side there is positive movement with the full Senate considering the Bill on May 26th. Diane & Toy have been strong advocates. See
The Tennessean letter to the editor from Diane & Toy:

Aaron’s Law: Inhalant legislation was introduced in the Wisconsin Assembly (AB 214) by Representative Garey Bies and is named after a young man who died from huffing (Aaron Wake, son of Laurie Culp). The bill is at http://folio.legis.state.wi.us/cgi-bin/om_isapi.dll?clientID=43962575&infobase=billhist.nfo&j4=ab214&jump=ab214&softpage=Browse_Frame_Pg.

Aaron’s Law will be Wisconsin’s first inhalant statute and provides recognition of the problem of inhalant abuse and sets forth penalties for sales of abusable products to minors as well as for the abuse of these products. The bill is moving forward and all are optimistic that it will become law this year. This WI Assembly will consider the Bill in early June. We would like to thank Rep. Bies for authoring the Bill and recognize Laurie and her family for their advocacy efforts. Laurie also established the WI Inhalant Prevention Coalition. If you would like more information or be an advocate please contact me.

Comment: I would like to note the valiant and courageous efforts of the parents of Aaron, Johnson & Ricky Jr. They are strong & tireless advocates and are doing all that they can to ensure that their pain is not visited on other parents. They have my eternal respect and admiration. They and other parents we work with are my heroes.

TN Inhalant Prevention Initiative Established:
In early January 2005 a group of people concerned about TN inhalant abuse rates met in Nashville. An outcome of the meeting was the establishment of an ad hoc, unfunded TN Inhalant Prevention Initiative that I chair. TN is tied for seventh and ranks fourth for school age males in the Nation for inhalant abuse. At age 15 and below almost twice as many Tennessee youngsters abuse inhalants when compared to any other illicit substances including meth.

A number of significant activities have occurred since January. Briefly, workshops and presentations have been given to over 600 people (additional workshops are planned for the Fall), articles have appeared in newspapers and newsletters (this summer an inhalant article will be in the TN Medical Association’s Journal), inhalant TV segments have been aired, a number of TN organizations participated last March in National Inhalants & Poisons Awareness Week (NIPAW) campaign,
over 3,000 inhalant related resources have been distributed and inhalant legislation has been introduced in the TN House & Senate addressing issues such as inhalant education, prevention, treatment and driving while impaired.

Please tell TN colleagues about this initiative. Ask them to contact me so they can join this important effort


Inhalant Treatment:
We are often asked for help with inhalant treatment referrals. These are the facilities we’ve come up with:
Fairbanks Hospital, Indianapolis, IN (http://www.fairbankscd.org/);
Four Winds Hospitals, Ketonah, NY (http://www.fourwindshospital.com/westchester/westchester.html)
Pathway Family Center, Indianapolis, IN (http://www.pathwayfamilycenter.org/), and
Tundra Swan McCann Treatment Center in Bethel, AK (http://www.ykhc.org/737.cfm).

Another resource, though I am not familiar with many of these facilities, is at - http://www.addictionresourceguide.com/specpop/inhalant.html.

If anyone knows of other treatment programs for inhalant abuse, please let us know.

Faith Partners:
An organization we have long been associated with and respect has recently published the “Faith Partners Journal,” a periodical from the Rush Center of the Johnson Institute. Faith Partners is a team ministry approach to drug and alcohol prevention, intervention and recovery for an entire congregation. I encourage you to learn more about Faith Partners and their Journal by going to http://johnsoninstitute.org/resources/index.php?DocID=41 and/or contacting Trish Merrill at trishmerrill@johnsoninstitute.org.

NIPC Activities: As our last CSAT contract year came to a close we had to report on project activities. Below is an accounting of our efforts by the number of people we were able to reach and resources distributed:
Direct Contacts by Phone and Email: 12,670
NIPAW Partners: 1,333
New Web Site Visitors: 271,000
Workshop & Meeting Audiences: 1,560
Mailing of Promotional Material: 76,733
Materials Distributed: 97,705
TOTAL Consumers Reached: 364,300

Urgent Appeal:
Unfortunately our funding has been reduced by over 60%. This has not deterred us from continuing our services at the same level as in the past. We continue to supply resources (sent 1st class or priority mail), at no cost, to all who contact us and continue to maintain our toll free telephone lines. The expenses for video dubbing, CD copying, brochures and mailing many of you received as well as our toll free phone service, among other things, come from my own pocket because we have no budget for this. If you have ever thought about making a contribution or payment to us, now is the time. If you require an invoice please let me know and one will be sent to you. The NIPC is a 501(c)(3), nonprofit corporation. Help us to continue to help others by making a contribution or payment to Synergies today. Mail to: Synergies/NIPC, 2904 Kerbey Lane, Austin, TX 78703.

Helping Others:
Speaking of donations, though not related to us but something I do personally. I would like to suggest a way of making a difference in the lives of people in your community. Many of us travel about the country. Most motels & hotels give us those “lovely” little bathroom items, soap, shampoo, etc., that we use and other times don’t. Items that go unopened I collect and donate them to a women’s shelter, Room in the Inn, in Chattanooga, TN. I know these basics of life are much appreciated. Think about doing the same in your community – if you do not have a place to donate these items, just send them to me. I’ll see to it that they make their way to people who will use them. So many things we take for granted make quite a difference in the lives of others.

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Please forward this to colleagues so they can join this list. If you have items you would like to add to the next UPDATE and/or have comments, please forward.

Harvey
nipc@io.com