

School Counselors and Fighting the Opioid Epidemic: Consequences of Use, Impact on Student Performance and Family Dynamics, and Treatment to Overcome the Battle

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ABSTRACT

This manuscript will address the definition of opioid usage, reasons for opioid usage, familial factors leading to usage, prevalence of the opioid epidemic, short and long-term consequences of opioid usage, as well as the impact that opioid usage has on students' academic performance. Opioid usage has a direct and deleterious impact on students' academic, social emotional, and psychological wellbeing, as well as a dire impact on family functioning. Sustained drug usage can lead to failure in school, dropping out, delinquent behavior, as well as lead to lifelong addiction issues. School counselors play a critical role in raising awareness about the dangers of drug usage, as well as motivating students to make healthy choices. Family support and involvement has also shown to play a vital role in the rehabilitation and success of students holistically. The definition of opioid usage, reasons for opioid usage, familial factors leading to opioid usage, statistics, consequences, modalities, as well as school counseling best practices for reducing opioid usage will be addressed.

Keywords: Opioid usage, school counselors, evidence- based practices, effective modalities

INTRODUCTION

The purpose of writing this manuscript is to raise awareness of the prevalence of opioid usage, the reasons as to why teens are using opioids, the familial factors that impact opioid usage, as well as evidence-based practices and interventions that have been shown to decrease the opioid usage epidemic and to save lives amongst adolescents nationwide. Opioids are a class of drugs that include Heroin, synthetic opioids such as fentanyl, as well as pain relievers including OxyCotin, Vicodin, Codeine, and Morphine. Opioids may be given via prescription or obtained illegally. All opioids including prescription opioids affect the human body and brain functioning. Opioids stimulate opioid receptors on nerve cells located in the brain and can be used to relieve pain (National Institute of Health, 2019). When consumed, opioids have a euphoric effect and some people if taking regularly become tolerant to these powerful drugs. Regular use or abuse of opioids has substantial ramifications including addiction, overdose, and death. More than 191 opioid prescriptions were given to American patients in 2017. The most common drugs involved in prescription opioid overdose deaths include Methadone, OxyCotin, and Vicodin (Center for Disease Control and Prevention, 2019).

Statistics Regarding the Opioid Crisis

The opioid crisis in the United States is pervasive; impacting those of all ages, specifically adolescents. More people are dying from opioid overdoses and in 2016 more than 42,000 overdosed on these class of

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drugs (Office of Adolescent Health, 2019). Many overdose deaths are now caused by Heroin laced with Fentanyl, which is 50 to 100 times more potent than Morphine. Due to its affordability, the use of Fentanyl is increasing in illicit street drugs. Opiates are known as pain killers. Opioid abuse includes taking these medications in more frequent or larger amounts, which can lead to habit forming behavior and eventually abuse (Substance Abuse and Mental Health Services Administration, 2017). In 45 states, opioid overdoses have increased more than 30% from July 2016 through September 2017. Prescription drug misuse is amongst the fastest growing drug issue in the United States and the statistics are staggering. In 2016, 3.6% of teens ages 12-17 years of age reported misusing opioids over that year. In 2015 alone, 52,000 people died of overdoses in the U.S. due to opioid misuse (U.S. Department of Health and Human Services, 2019). From 1999-2017, more than 700,000 people died in the United States from overdoses related to prescription opioids (Center for Disease Control and Prevention, 2019). Around 68% of the more than 70,200 drug overdose deaths in 2017 involved opioid usage. On average, a staggering 130 Americans die every day from an opioid overdose (Center for Disease Control and Prevention, 2019). This statistic is remarkably disconcerting due to the immense amount of the population who is succumbing to opioid dependence and addiction. Further, the percentage is double among older adolescents and young adults ages 18-25 years old. The majority of this population using opioids is due to prescription drugs including Percocet, Vicodin, Fentanyl, Morphine, and Oxycodone rather than Heroin (Center for Disease Control and Prevention, 2017). In 2017, the U.S. Department of Health and Human Services declared a public emergency and addressed a 5-point strategy to combat the opioid crisis. The 5-Point Strategy addressed improving access to treatment and recovery services, promoting use of overdose reversal drugs, improving an understanding of the epidemic through better public health monitoring, providing research on pain and addiction, and advancing practices for pain management (U.S. Department of Health and Human Services, 2019.) Although research indicates that there has been a slight decrease in opioid usage amongst adolescents, due to opioids being more difficult to obtain (in 2010, 54% of teens surveyed believed that drugs were easily accessible, whereas in 2018, 32.5% indicated that opioids were easily accessible) despite having more restrictions, a significant amount of adolescents believe that these drugs are still readily available. In 2015, 4,235 teens and young adults ages 15-24 died from drug related overdoses and over half of those were attributed to opioid overdoses (Center for Disease Control and Prevention, 2017). Teenagers are at a higher risk period for substance usage due to peer pressure, as well as brain development in that the reward center of the brain matures during this time. Teenagers are able to differentiate between less and more meaningful rewards, which provokes goal driven behavior and choices. Teenagers are therefore developmentally wired to demonstrate stimulating behaviors in order to experience greater rewards (US Department of Health and Human Services, 2017). Thus, regardless of consequences associated with opioid usage, many teens are experimenting with these drugs in order to ascertain heightened sensations to escape from or block pain or experience euphoria without recognizing the risks and dire impact their choices have on their overall wellbeing.

Reasons for Opioid Usage Amongst Adolescents

There are a variety of reasons for opioid usage amongst adolescents. Many teens use drugs to experiment and experience the 'high' or feelings drug usage may elicit. Others use drugs to manage stress and increase self-control in their lives. At times, adolescents use opioids to escape physical or psycho-somatic pain they may be experiencing (Partnership for Drug Free Kids, 2014). According to

research, a significant number of teens are using pain relievers and opioids to cope with academic, social, or emotional stress. Additionally, many adolescents use opioids due to peer pressure or exposure to opioids from family members, whether, prescription or illicit, which may evolve into addiction or abuse. Approximately 66% of teens who are reporting abuse of prescription or non-prescription opioid usage are receiving them from friends or family members. Therefore, in order to reduce the opioid crisis, family members and parents must be educated and cognizant of the harmful impact exposing or providing drugs to their children or family members is, as opioid overdoses whether accidental or intentional are escalating rapidly due to the availability of these deadly narcotics.

The Opioid Crisis: Familial Factors Leading to Opioid Usage

There are several family factors that have impacted the escalating opioid crisis. Children and teens who have parents who use opioids are more likely to experiment with opioid usage themselves due to normalization of usage, as well as exposure to these drugs. Genetic factors, psychological, and environmental factors have a profound impact on the likelihood of children and teens developing an opioid dependence or addiction themselves (Mayo Clinic, 2019). Other factors including poverty, parental unemployment, family history of substance usage, age, regular contact with opioid users, tobacco usage, risk taking and thrill-seeking behavior, as well as stressful circumstances have also been shown to increase opioid usage amongst adolescents (Mayo Clinic, 2019). Additionally, according to Ramonowicz, Voort, Shekunov, Oesterle, Thusius, Rummans, Croarkin, Karpak, Lynch, and Schak (2019), the researchers found that between 2009 and 2014, almost 3% of US children under the age of 17 lived in households where at least one parent had a substance use disorder. The researchers indicated that based on a study they conducted children with parents who used opioids, showed greater disorganized attachment, struggled with friendship making, had an increased risk of emotional and behavioral issues, poorer academic performance and poorer social skills in comparison to adolescent counterparts who did not have an addicted parent. Additionally, children with parents who used opioids were more likely to experience neglect, unemployment, as well as substance usage later on in life. Therefore, it could be interpreted that children and teens who have parents who use opioids are at a much greater risk of using opioids and struggling both in school and in life as a result of this harmful exposure.

The Opioid Crisis: Signs of Opioid Usage in Adolescents

Prescription drug misuse including opioid usage is among the fastest growing drug problems in this country. In 2016, 3.6% of teens ages 12-17 reported misusing opioids over that year. The percentage for teens using drug usage is twice as high amongst older adolescents and younger adults ages 18-25 (U.S. Department of Health and Human Services, 2019). In 2015, 4,235 youth ages 15-24 died from a drug related overdose. Teens who have acute or chronic health problems, a history of mental illness, or family members who have misused drugs are at greater risk of using opioids themselves (U.S. Department of Health and Human Services, 2019). There are several warning signs of opioid abuse. There are mood and psychological symptoms having anxiety attacks, psychosis, improved self-esteem, irritability, and decreased motivation. There are physical symptoms including having difficulty staying awake or sleeping, having flushed or itchy skin, having increased alertness, constricted blood vessels, increased heart rate, more energy, lower appetite, physical agitation, difficulty sleeping, or being hypervigilant. Additionally, there are behavioral symptoms including using opioids for longer than

intended, abandonment of activities once enjoyed, large amounts of time obtaining, using, and recovering from the drug. Additional signs of opioid usage include withdrawal from activities that one once enjoyed, decrease in grades, changes in peer associations, attendance in school, truancy, decline in test scores, difficulty concentrating dramatic mood swings, engaging in risky activities, or visiting multiple doctors in order to obtain more prescription drugs (Substance Abuse and Mental Health Services Administration, 2017). Side effects of opioid usage includes relaxation, inflated self-confidence, shallow breathing, impaired judgment, nausea, weight loss, hallucinations, or having a euphoric mood (Substance Abuse and Mental Health Services Administration, 2017). Risk factors for teenagers misusing opioids include those with chronic pain, physical health problems, low self-esteem, feel disconnected, or have mental illness such as depression, PTSD, or anxiety. Additionally, youth who have witnessed family members or peers using opioids are also at a higher risk. Protective factors for opioid misuse include having a high degree of intrinsic motivation to succeed in school, those who are aware of the dangers of prescription drug usage, as well as those who have a healthy relationship with their parents who express disdain regarding prescription drug usage (National Institute on Drug Abuse, 2016).

The Opioid Crisis: Ramifications of Opioid Usage Amongst Adolescents

One of the most serious consequences of opioid misuse is addiction. Many adolescents who are addicted to opioids experience intense cravings, focus on obtaining the drug, have a strong desire to use them on a daily basis, changes in relationships with peers, reduced athletic performance, strained personal relationships, experience withdrawal symptoms, use the drugs to cope with stressors, and struggle to stop using the drugs, despite being aware of the damaging impact it has on their physical and mental wellbeing (National Institute on Drug Abuse Blog Team, 2017). Additionally, in regard to short term effects, adolescents taking these drugs may experience euphoria, mood swings, drowsiness, and confusion. Long term effects may include desire to take opioids, tolerance, loss of interest in once pleasurable activities, and continuing opioid usage despite being mindful of the harm involved. Adolescents taking opioids may experience nausea, vomiting, slow breathing rate, increased risk of HIV or infectious disease due to needle usage, hallucinations, risk of choking (Healthline, 2019). In response to the opioid crisis, the U.S. Department of Health and Human Services (HHS) are working to improve access to treatment and recovery services, encouraging better practices for pain management, supporting research on pain management, as well as promoting the use of overdose reversing drugs such as Nalaxone, which works to rapidly reverse an opioid overdose. Nalaxone is an opioid antagonist and can reverse and block the effects of other opioids (National Institute on Drug Abuse, 2018).

Impact of Opioid Usage on Academic Performance

Opioid usage has a detrimental impact on students' academic performance. Many students who are misusing opioids experience a decline in grades, erratic behavior in and out of school, may struggle in peer relationships, have a decline in leadership abilities, are more likely to experience health issues, and are at greater risk for suicide or car crashes. Death from opioid usage amongst teens exceeds deaths from all other illicit drugs combined (Russo, 2018). The Center for Disease Control (CDC) indicated that 1 in 5 high school students indicated that they have misused prescription drugs and typically found these drugs in their homes or their homes of friends. Many students are using opioids to escape the pressures faced at school socially and academically. Additionally, the initial high experienced is

followed by tremendous lows, which leads to continuous overuse and addiction. Students who experience drug usage also an increased likelihood of dropping out of school. Many teens who are using drugs have pre-existing problems at school, report higher absenteeism, and decreased productivity. In accordance with data from the 2009 National Youth Risk Behavior Survey, the findings highlighted that a negative relationship exists between drug usage and academic achievement. Further, in a study conducted by King, Meehan, Trim, and Chassin (2007), the researchers indicated that drug usage had a negative impact on student performance, were more likely to experience truancy, demonstrate disengagement and poor self-control, lack motivation, and failed to possess skills that are needed to make healthy choices. Moreover, research has shown that drug usage leads to other issues including depression and poor decision making. Drug usage can lead to theft, truancy, cheating, dropping out, alienation, and not fulfilling long term goals. Students who engage in drug usage typically have lower grade point averages, lower test scores, are emotionally struggling with anger, depression, or anxiety, and may engage in risky behaviors (CDC, 2019).

School Counselor: Consultant's Role in Reducing Opioid Usage Amongst Students

School counselors are critical change agents who play an instrumental role in reducing, as well as supporting students who are struggling with opioid dependence. School counselors can work tenaciously to create an inclusive, engaging, and uplifting school climate in which students feel a sense of acceptance, belonging, purpose, and validation. As consultants, school counselors are leaders who can work to create a safe school climate and positive school culture that works to connect, motivate, and enlighten students about the dangers of opioid usage. School counselors can work to boost protective factors and increase student engagement by working to increase parental involvement, have students enroll in rigorous courses, encourage students to become involved in teams and extra-curricular activities, as well as provide resources to students and their families if students are struggling with an active opioid addiction. Additionally, states are setting guidelines and are permitting the use of opioid antagonists in schools to combat overdoses. Many school nurses are trained to administer lifesaving drugs (Rafa, 2018). Further, school counselors are facilitating professional development workshops to stakeholder and parents about opioid misuse an abuse. Further, counselors are integrating trauma informed practices in schools and are working to ensure that students feel supported, as well as monitoring students who may be struggling with truancy due to substance usage and are working with families to overcome truancy and increase intrinsic motivation.

Further, counselors can also facilitate responsive and direct services in schoolwide, classroom, small group, or individual counseling and work to educate students and families about the dangers and short and long-term consequences of opioid usage. School counselors are also strongly encouraged to integrate social emotional learning into their curriculum in order to teach students the intrapersonal and interpersonal skills necessary to overcome life's struggles. These skills include communication, time and stress management, problem solving, decision making, accountability, coping skills, emotion regulation, motivation, optimism, zest, conflict resolution, leadership, accountability, adaptability, and collaboration (CASEL, 2017). Social emotional learning works to empower, inspire, and help students work towards self-actualization. It has been shown that students who possess strong social emotional learning skills are more successful in school and in life, are more mindful about the importance of collaborating, experience greater self-awareness, are better able to self-regulate and manage their

emotions, have enhanced relationship making skills, are better able to make healthy choices, and are more likely to take responsibility for their choices and behaviors (CASEL, 2017).

Moreover, school counselors can work to enhance protective factors and increase student engagement, via encouraging students to join teams, take on leadership roles, engage in volunteer opportunities, increase parental involvement, as well as encourage students to enroll in rigorous courses in order to boost motivation and goal attainment (United States Department of Education (2017). Additionally, although school counselors cannot diagnose, they can refer students out to mental health agencies in order to obtain the support and help that they need to achieve sobriety. Further, school counselors can also facilitate evidence-based lesson plans addressing opioid and drug usage, facts, and impact of drugs on the brain and body both in the classroom as well as in small group or individual settings (National Institute on Drug Abuse, 2017).

Evidence Based Practices in Schools and Their Impact in Reducing Opioid Usage Amongst Students

There are several evidence-based practices that can be used in schools in order to combat opioid usage amongst students.

Operation Prevention. Operation Prevention is a free empirically based program that can be used school wide. There are various programs and lesson plans for elementary, middle, and high school students addressing substance usage and prevention. The program can be implemented in elementary, middle, and high school in order to raise awareness in students about the dangers of opioid use and misuse. In elementary school, the program discusses medications, how they work in the body, and how to use them responsibly. In middle school there are available lesson plans addressing how addiction and withdrawal affects the body, how drug use alters the mind, and students have an opportunity to create a peer-to-peer social media campaign advocating for anti-drug usage. In high school, there are available lesson plans addressing the science behind prescription opioid usage, overdose, and withdrawal. There are digital lessons for students at each level along with educator guides for each level. Within Operation Prevention, the DEA and Discovery Education are working together to raise awareness that opioid use has on students' performance, as well as overall wellbeing both at home and in the classroom (Discovery Education, 2017).

Overdose Lifeline. Overdose Lifeline Inc. (ODL) has created the first youth prevention education program that focuses on the opioid health crisis. The program is named, 'This is Not about Drugs' (TINAD), which is an empirically based program designed to raise awareness about opioid misuse. TINAD is designed for middle and high school students to raise awareness about the dangers and consequences of opioid misuse. (TINAD)is an in class universal program designed to raise awareness about opioid misuse. The brief intervention is used at times in conjunction with Botvin's Life Skills Too Good for Drugs. The outcome based and data driven program incorporates NIDA principles, risk and protective factors, and aligns with most health curriculums. TINAD is designed for students in 6-12th grade and raises awareness about opioid addiction and overdose. Youth learn how to recognize the symptoms of an overdose, learn about the availability of naloxone, and the importance of calling 911 in order to get help in an emergency (Overdose Lifeline, 2015).

Health and Opioid Abuse Prevention Education Curriculum. Health and Opioid-Abuse Prevention Education Curriculum (HOPE), is a K-12 based program that is a series of lessons and assessments developed to help students garner knowledge and understanding about opioid usage and its

ramifications. The HOPE curriculum provides students with knowledge, attitudes, and skills necessary to overcome and prevent drug abuse. The middle and high school lessons are designed for a health teacher to implement and the elementary school curriculum is designed for a classroom teacher to incorporate into curricula that are aligned with English Language Arts standards. There are 11 lesson plans for high school students about drug abuse prevention, there are three opioid abuse prevention lessons for middle school students, and 20-minute lessons for elementary school students. Elementary school students learn about peer pressure, trusted adults, and using medication safely. Middle school students learn about making good decisions and peer pressure, and high school students learn about refusal skills, saying no, assertiveness, and healthy decision making. There are assessments and rubrics to assess student learning, as well as PowerPoints, worksheets, and videos to reiterate major concepts learned. There are also tips for family and parent engagement, as well as resources for parents to review so they can reinforce concepts addressed at school at home. (Health and Opioid Prevention Education, 2019).

Botvin Life Skills Training Program. Botvin Life Skills Training Program is an evidence-based prevention program used in schools that addresses the dangers of illicit drug usage and tobacco amongst students K-12. There are training programs for elementary, middle, and high school. When utilizing the Botvin Life Skills Training Program, in elementary school, students learn about personal self-management skills, social skills, and drug resistance skills. There are 8 class sessions for each topic and each lesson is approximately 30-45 minutes. Students in elementary skill address self-esteem, decision, making, smoking information, dealing with stress, communication, social skills, and assertiveness. In middle school students again learn about personal self-management skills, social skills, and drug resistance skills. There are 12 sessions, each 30-45 minutes addressing self-image, making decisions, smoking and biofeedback, alcohol myths and realities, advertising, coping with anxiety, violence and the media, coping with anger, communication skills, social skills, assertiveness, and resolving conflicts. In the high school setting, students learn about personal self-management skills, social skills, and drug resistance skills. There are approximately 10 class sessions and each session is 40-45 minutes. High school students learn about the value of good leath, decision making, risk taking and substance usage, managing stress, anger, and other emotions, forming healthy family connections, and developing sound relationships. There is also a Life Skills Training Prescription Drug Abuse Prevention Module which provides teens with information to help them avoid misusing opioids. Schools who implement the Botvin Life Skills Training Program have reported that the program enabled them to help reduce drug usage amongst students by 75%. The Botvin Life Skills Training Program works to teach students skills necessary to resist peer pressure, to improve self-esteem, to better cope with anxiety, increase knowledge about the consequences of substance usage, as well as to increase competency to reduce risky behaviors (Botvin Life Skills Training, 2019).

D.A.R.E. Prevention Program. The Drug Abuse Resistance Education curriculum now includes a series of police lead lessons focusing on prescription drug abuse prevention. The curriculum was developed by a curriculum committee that specializes in prevention education, medicine, and addiction. This program has lessons that address substance abuse, violence, bullying, and internet safety. Middle school lesson topics address differences between over the counter and prescription medication, dangers of misusing medication, as well as information on the opioid epidemic. Elementary school lesson topics address what is safe to touch, smell, and eat and who to call in case of an emergency. High school lesson

plans focus on the relationship between prescription drug usage, opioid usage, and heroin. There is also a presentation for parents and the community, as research has consistently substantiated the importance of parental involvement in preventing drug abuse.

Medication: Treatment for Adolescents Experiencing Opioid Addiction

In regard to treatment for opioid addiction there is typically medication given in conjunction with talk therapy. Typically, Methadone or Buprenorphine (Suboxone), are used to decrease withdrawal symptoms and cravings. These medications work to restore balance in the parts of the brain impacted by the addiction. Buprenorphine (Suboxone) and Methadone are known as essential medicines for treating opioid addiction. Naltrexone can also be used in conjunction with Buprenorphine. A NIDA study showed that once treatment is initiated a Suboxone / Naloxone combination and an extended released Naltrexone are very effective in treating opioid disorders. Naltrexone requires full detoxification and once detoxification is complete, this medication is very impactful (National Institute on Drug Abuse, 2016). Naltrexone is prescribed for those struggling with opioid addictions. Naltrexone works differently than Methadone and Suboxone. Although this medication does not reduce withdrawal symptoms, it works to reduce the high that one normally experiences when taking opioids. Thus, Naltrexone is typically used to prevent relapse and one needs to be sober from opioids for 7-10 days prior to taking this medication in order to avoid having withdrawal symptoms (National Institute of Health, 2019).

Therapeutic Modalities: Treatment for Adolescents Experiencing Opioid Addiction

In regard to talk therapy, there are various approaches that can be used to help those struggling with an opioid addiction. Individual counseling can be used to help set goals, discussing triggers, as well as monitoring motivation and progress.

Medication Assisted Therapy (MAT) includes a combination of medication and counseling in order to holistically treat the person struggling with addiction. This modality is primarily used to treat substance use disorders and prevent opioid overdoses. MAT is mostly used to treat opioid use disorders, heroin addiction, and prescription pain relievers that contain opioids.

Cognitive Behavioral Therapy (CBT) can be used to assist those struggling with an opioid addiction. CBT strategies can help people to identify and reframe negative patterns of thinking that lead to destructive behaviors. CBT works to teach coping skills including healthier ways to manage stress and works to modify thoughts and triggers that cause one to abuse opioids. CBT helps those to identify and challenge negative thought patterns of thinking and behavior. CBT is useful when treating opioid addiction in that it helps the person struggling to reframe negative thoughts that may be exacerbating the behavior and change them into healthier and more positive ways of thinking. CBT helps to promote the building of healthy coping skills, including how to manage stress, as well as change thoughts that may lead to wanting to use or misuse opioids (NIH, 2019). CBT helps to show adolescents how to foresee issues and helps them to create healthier coping strategies to resolve those issues. Teenagers are encouraged to record and be mindful of their feelings and thoughts, as well as recognize how faulty thinking patterns can exacerbate substance usage.

In addition to Cognitive Behavioral Therapy, Motivational Interviewing (MI) and Motivational Enhancement Therapy (MET) are also used to assist those struggling with opioid addiction. MI is used

to help those resolve ambivalent feelings and find internal motivation to change behavior. MI is a way of discussing an issue that draws out a person's own reasons for changing rather than relying on another's ideas. MI recognizes that ambivalence (having mixed feelings about change) is a common part of recovery. Discussing ambivalence can bring out a person's reasons for wanting to change. MI focuses on finding and enhancing a person's motivation to change that reflects their values and beliefs. Principles of MI include collaboration vs. confrontation and working together rather than arguing, drawing out vs. forcing ideas, it is about helping one discover his / her own reasons for wanting to change, autonomy vs. authority, the true power of change comes from a person independently wanting to change, and lastly rolling with resistance, which includes listening, and challenging one to solve their own problem (Psychology Today, 2019). MI is centered on engagement, focus, evoking, and planning in regard to making and maintaining changes made. Clinicians who use MI tend to roll with resistance to meet the client where they are at, use positive change talk, reframing, as well as helps the client to overcome ambivalence to change in order to make more permanent and healthier changes in their lives.

Motivational Enhancement Therapy (MET) is a counseling approach that helps people to overcome their ambivalence about engaging in treatment and ending their drug usage. MET works to build motivation in order to help one stick with and achieve their treatment goals (NIH, 2019). This approach incorporates aspects of Motivational Interviewing and evaluates one's level of motivation to change, as well as provides non-confrontational feedback in a compassionate and direct manner. MET helps those to resolve ambivalence about drug usage by evoking rapid and internally motivated change. MET helps those to evoke rapidly internally motivated change. There is an initial battery assessment, followed by two to four individual sessions. During the first session, a counselor provides feedback about the assessment, information on substance usage, and uses motivational statements. In follow up sessions, therapists typically monitor change, review cessation strategies being used and encourages continuation of positive change. In regard to utilizing MET, counselors provide feedback and work with those to elicit self-motivational statements encouraging positive change.

Contingency Management strategies can also be used in regard to giving clients' rewards to reinforce their abstinence. Also, Community Reinforcement Approach Plus Vouchers has been used to treat opioid disorder. This is a 24-week outpatient therapy, which uses a variety of recreational, familial, social, and vocational reinforcers with material incentives to make a non-drug using life more rewarding than using substances. It teaches clients to abstain long enough to learn new life skills and sustain them (NIH, 2019).

Furthermore, group counseling is very impactful, especially for adolescents, due to peer influence, wanting to be accepted, as well as mitigating feelings of isolation associated with addiction. Group members have the opportunity to share their stories and struggles, as well as the chance to listen to and validate others. Group counseling also promotes communication and group members can learn different ways to cope in a healthy manner from one another (NIH, 2019).

Lastly, family counseling is imperative, as family members need to be educated, supportive, and learn about ways in which they can support their teen struggling with addiction; being accepting, tolerant, being there to listen, providing them with a safe space to share, and not engaging in behaviors; such as using themselves or being in denial, which will ultimately enable and intensify the addiction. Family

counseling can also work to improve relationships between members, open up lines of communication, as well as help family members to set healthy boundaries so that expectations are known and respected.

CONCLUSION

Opioid misuse and addiction have become an epidemic in this country specifically amongst adolescents and young adults. Opioid abuse has extremely destructive effects on one personally, emotionally, socially, physically, and academically. As educators, counselors, and consultants it is vital that we educate, enlighten, inform, and raise awareness of students and their families about the short and long-term consequences of opioid misuse, warning signs, causes, as well as treatment. Opioid misuse has been shown to negatively impact students' grades, performance, concentration, and engagement, as well as increase delinquent tendencies, dropping out, poorer grades, lower test scores, and truancy. Family members who use opioids themselves, typically have children and teens who are at a much greater risk of experimenting, using, and abusing opioids themselves due to normalizing the behavior, as well as exposing children and teens to these harmful substances. It is imperative that school counselors educate parents and provide workshops on the abysmal effect opioids have on students' lives personally, socially, academically, and psychologically both short and long term. Counselors and stakeholders are strongly encouraged to work with families who have adolescents struggling with substance usage and provide them with resources and information on substance abuse recovery centers so that teens can get the immediate help and support they need to live fulfilling and productive lives, as well as to ensure that the substance usage does not worsen. Counselors always want to work to be proactive rather than reactive to ensure that all students have the ability to be healthy, present, and succeed across the board in school and in life. Although difficult to overcome, treatment has been proven to be extremely impactful and effective in helping those attain and maintain sobriety. In order to promote positive change and to reduce the number of students struggling with opioid misuse, schools need to be proactive in working with families, connecting with outside agencies, carrying out responsive services, making referrals for struggling students, and integrating evidence based programs that have shown to elicit positive outcomes in mitigating drug usage amongst students. Perhaps most outstandingly, counselors and parents as leaders, advocates, change agents, and cheerleaders, need to be committed to providing students and their teens with the life skills necessary to persevere, demonstrate resilience, rise above, make healthy choices, resolve problems, reframe negative thoughts, find the silver lining, overcome challenges rather than being defined by them, believe in their abilities, promote resilience, encourage them to not allow their struggles to define them, celebrate their flaws, and build upon strengths in order to become the best version of themselves.

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