



Sullivan  
**BOCES**

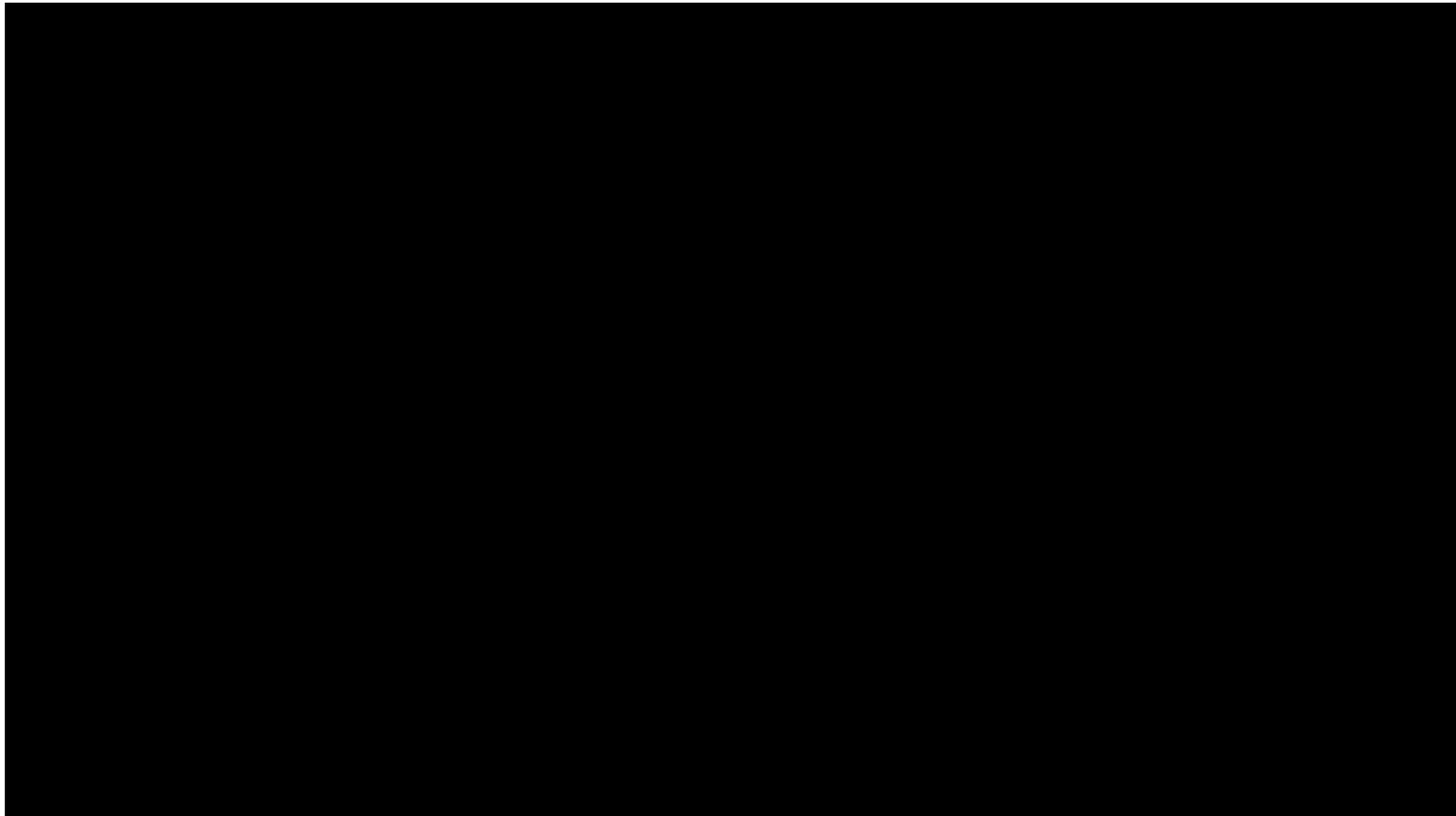
# The impact of opioid abuse on school age children

**H**ealthy **O**utcomes through **P**revention and **E**ducation

November 1, 2019

Dr. Robert M. Dufour  
District Superintendent & CEO





# Research on opioid use and its impact on school age children



# How old should or can a source be for research?

Southern New Hampshire University [ask@snhu.libanswers.com](mailto:ask@snhu.libanswers.com)



- A good rule of thumb is to use sources published in the past 10 years for research in the arts, humanities, literature, history, etc.
- For faster-paced fields, sources published in the past 2-3 years is a good benchmark since these sources are more current and reflect the newest discoveries, theories, processes, or best practices.
- Why did I waste time asking this question? To prove a point!



# RISK AND REALITY: THE IMPLICATIONS OF PRENATAL EXPOSURE TO ALCOHOL AND OTHER DRUGS

By Joanne P. Brady, Marc Posner, Cynthia Lang and Michael J. Rosati The Education Development Center, Inc. 1994.

- Some long-term studies indicate that children prenatally exposed to heroin suffer from below-average weight and length, **adjustment problems**, and **psycholinguistic and other ability deficits** through six years of age (and, in Olofsson et al. [1983] through age 10) (Deren 1986; Olofsson et al. 1983; Wilson et al. 1979).
- However, as with much of the research on prenatal drug exposure, many of the cognitive and behavioral effects could result from confounding environmental influences. One review of the literature on opiates concluded that: "In general, [the infants of opiate-addicted women] have a number of **behavioral disturbances early in life**, but lasting cognitive-developmental differences between these children and controls have not regularly been found" (Strauss & Allred 1986).



# Developmental outcome of school-age children born to mothers with heroin dependency: importance of environmental factors - Asher Ornoy et al Developmental Medicine & Child Neurology 2001

- We studied the developmental outcome of 5- to 12-year-old children born to mothers with heroin dependency in comparison with appropriate control children. The results suggest that in utero heroin exposure affects the fetal brain causing a **high rate of inattention, hyperactivity, and behavioral problems**, but not cognitive impairment. The intellectual development of the children born to parents with heroin dependency was influenced, to a large extent, by their environment. This emphasizes the importance of creating an environment which might improve their developmental outcome.



# Prenatal Exposure to Drugs of Abuse May Affect Later Behavior and Learning – National Institute of Health

*Robert Mathias – November 1, 1998*

- NIDA-funded studies are beginning to show that children who have been prenatally exposed to illicit drugs may be **at risk of later behavioral and learning difficulties**. Long-term studies using sophisticated assessment techniques indicate that prenatally exposed children may have **subtle but significant impairments in their ability to regulate emotions and focus and sustain attention on a task**. These neurobehavioral deficits may place these children on a developmental pathway that leads to poor school performance and other adverse consequences over time, researchers say.
- "The evidence that prenatal exposure to drugs may contribute to later behavioral and learning problems has important public health implications," says NIDA Director Dr. Alan I. Leshner. "Although these effects are subtle and may not be universal, the rising tide of data from ongoing studies indicates that we need to be alert to the fact that children who have been exposed to drugs before birth may need special attention." However, because the long-term effects of prenatal drug exposure are still unclear, "we need more answers from research about the full extent of drug-induced impairments in children and what we ought to be doing to best address this problem," he says.



# Mothers' prenatal opioid use may stunt children's learning, study finds - Cited in the Chicago Tribune August 30, 2018

- A Vanderbilt University study found that children whose mothers use opioids while pregnant commonly face learning disabilities and other special-educational needs.
- About 1 in 7 affected children required special classroom services for problems including developmental delays and speech or language difficulties, compared with about 1 in 10 children not exposed to opioids before birth, the study found.
- The study, which involved about 7,200 children ages 3 to 8 enrolled in Tennessee's Medicaid program, is the first major U.S. study that examines potential long-term issues in addiction-afflicted infants.
- Study co-author Dr. William Schaffner of Vanderbilt University said it makes sense that opioid use in pregnancy could affect children's later development. Some studies have found brain differences in affected children, including in a region involved in certain types of learning.



# Prenatal opioid use may affect child development through school age - *JAMA Network Open July 12, 2019*

- “The results agree with our hypothesis that [prenatal opioid exposure (POE)] has a negative association with cognitive and motor outcomes, these issues are apparent from as early as 6 months, and they persist during school age,” study author **Su Lynn Yeoh**, a medical student from the University of New South Wales in Sydney, Australia.
- In their analysis, Yeoh and colleagues included 26 cohort studies that compared the results of age-appropriate standardized cognitive and/or motor tests between children aged 0 years to 18 years who had any prenatal opioid exposure with drug-free controls.
- Cognitive outcomes were compared for 1,455 children with POE and 2,982 nonexposed children across three age groups. At up to 6 years of age, motor scores were lower in 688 children with prenatal opioid exposure, compared with 1,500 nonexposed children.
- “The exact cause and association of these findings with clinical factors and environmental adversities are unclear but suggest that children with POE should be provided long-term support and intervention beyond infancy,” they wrote.



# Children and the Opioid Crisis - Marian Wright Edelman is President of the Children's Defense Fund- October, 2017

"The continued trend of parental substance abuse is very concerning, especially when it means children must enter foster care as a result."

-Steven Wagner, Acting Assistant Secretary for Children and Families

- The opioid crisis marks the third wave of widespread drug abuse over several decades, following the crack cocaine epidemic and the methamphetamine crisis (which has seen a resurgence in some states with the opioid epidemic). All have severely impacted children and families. But veteran child welfare professionals say the opioid epidemic has had the worst impact on child welfare systems they have seen.
- After years of decline, the number of children in foster care has been rising steadily since 2012.
- In 2014 over 40 percent of children in relative foster homes were there because of parental substance use.
- Nearly a third of children entering foster care in 2015 were due at least in part to parental drug abuse – an increase of nearly 50 percent since 2005.
- Children in households where parents struggle with substance abuse are more likely to experience long-term effects of neglect or abuse than other children.



# What we don't know about prenatal opioid

exposure — Science Daily, August 28, 2019 University of Utah

- 'Will the baby be OK?' In cases of prenatal opioid exposure, the answer is unclear. Developmental psychologists Elisabeth Conradt and her colleagues collected and reviewed 52 publications to identify what's known so far about how prenatal opioid exposure affects childhood outcomes and development.
- Conradt found some of the same inconsistent results in the 27 studies that looked at cognitive development beyond age 2, with some studies finding significant effects in IQ and language ability, and some finding no significant effects. But studies of behavior were more consistent. Children exposed to methadone had higher fear, aggression and anxiety, and a NODS diagnosis was associated with lower attention. Conradt says it's not surprising that behavioral effects would emerge as children get older. "As children age, they're more challenged," she says. "They have to pay attention at school, they have to sit still, they have to control their behavior. It's not surprising that kids exposed to methadone in the womb may have a harder time with those skills."



October 29, 2019

## Opioid Crisis Shows no signs of slowing down

- In his five years as County Coroner, Albee Bockman hasn't seen a month as busy as October.
- That's because **the opioid crisis continues to devastate, and this month has seen seven overdose deaths so far.** Most of the seven overdose deaths this month took place in the beginning of October, and two of them happened on October 4 within one hour of each other.
- The coroner's office sees an average of one to four overdose deaths per month, so October is already on track to be much higher than average. There have been 29 overdose deaths since the beginning of this year. Looking at the numbers and hearing from those on the front lines, it seems the opioid crisis is not stopping.  
“We just don't see a change,” Bockman said. “It's stressful upon the first responders, and stressful upon the medical community as a whole.”





**115**  
AMERICANS

die every day from an  
**opioid overdose**  
(including prescription  
and illicit opioids.)

October 2019  
Sullivan County,  
New York

**7**

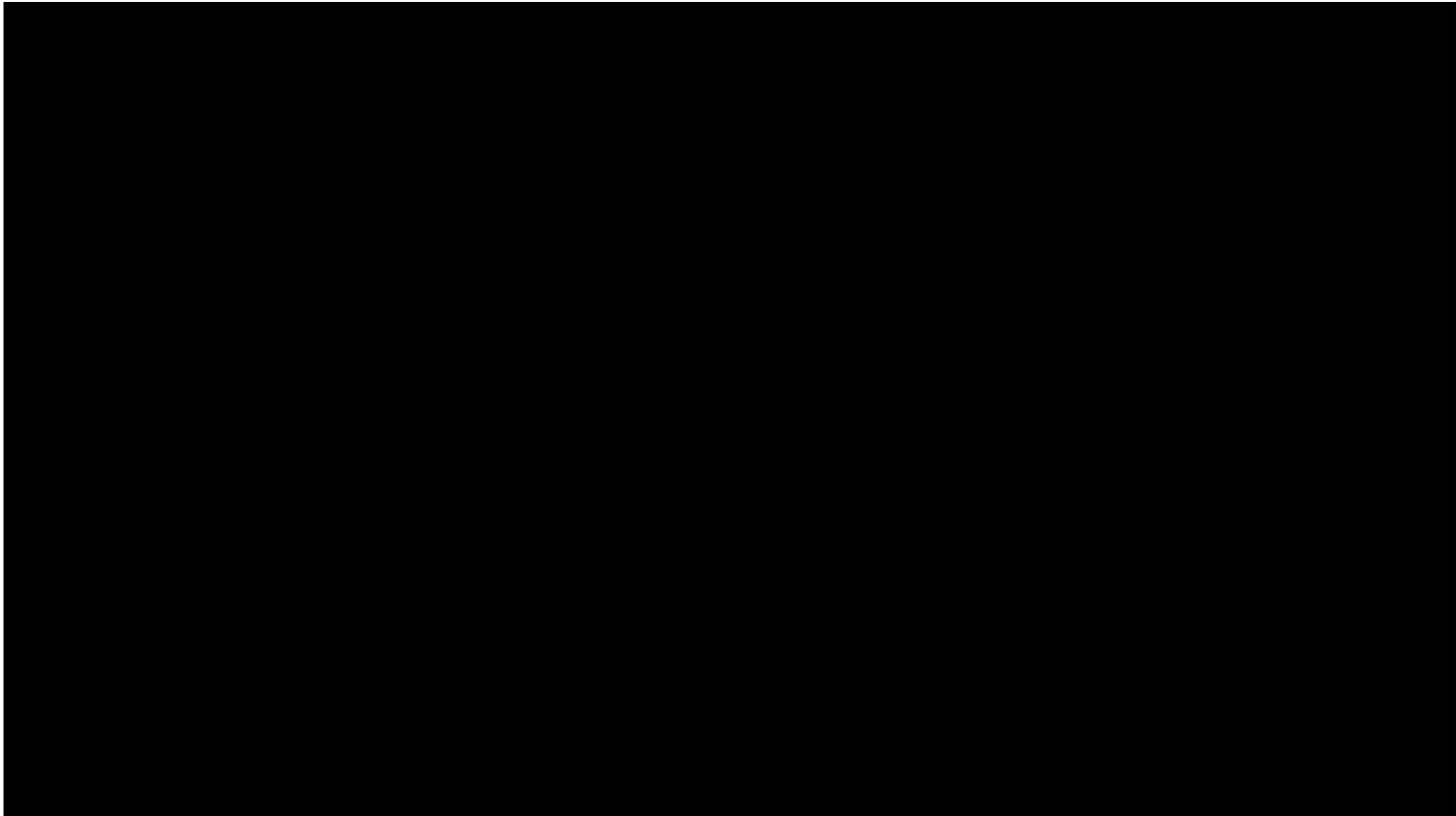
Opioid Related  
Deaths

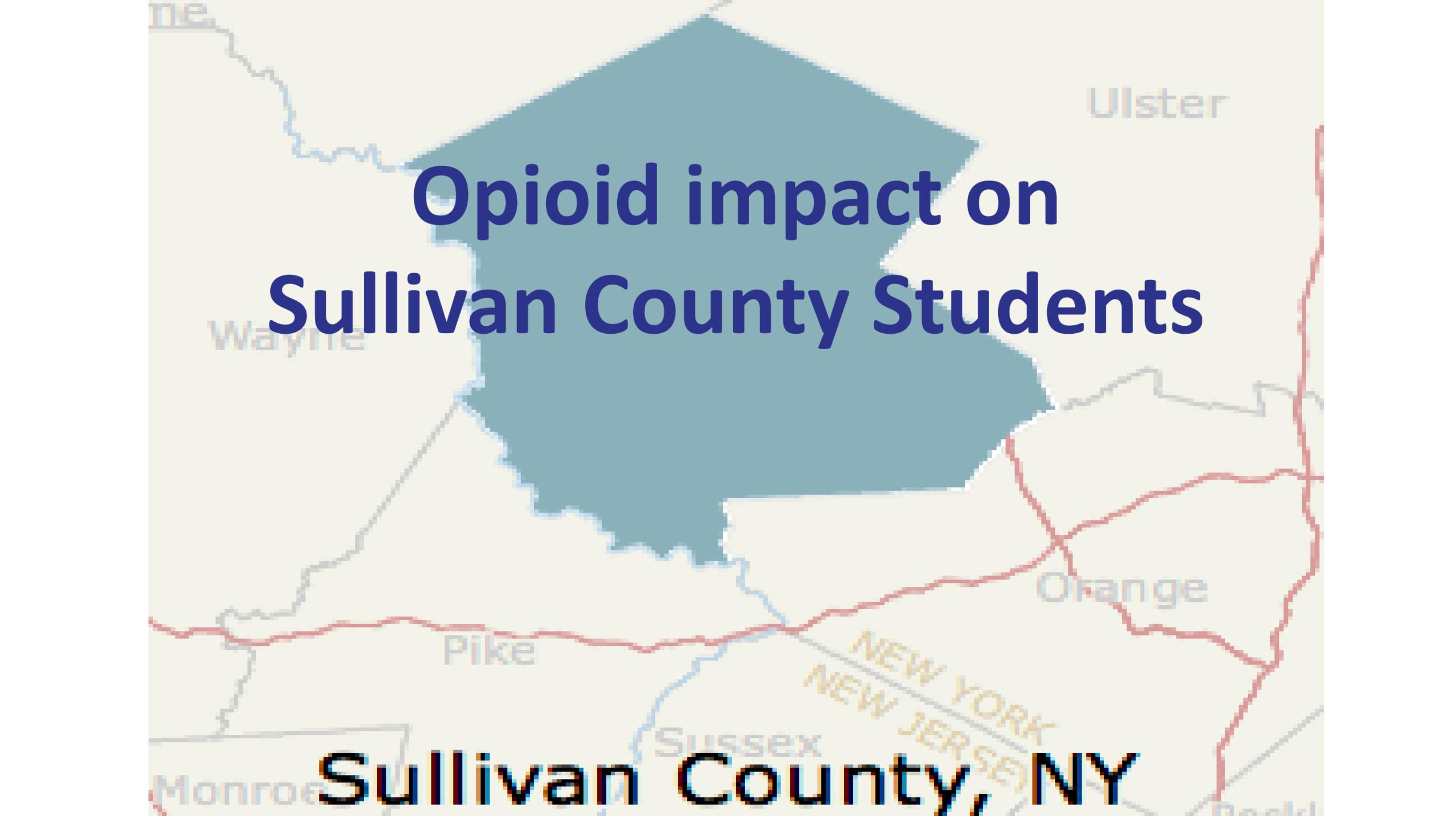
# Summary: What are schools dealing with as a result of the opioid crisis?



- Developmental delays
- Speech and language difficulties
- Adjustment problems
- Behavioral issues
- High rate of inattention and hyperactivity
- Learning Disabilities
- Emotional Problems
- General Health Problems
- Broken families







# Opioid impact on Sullivan County Students

**Sullivan County, NY**

# From Jeanette Smith Social Worker

- Sunny had a lot of emotional difficulties outside of school and had been witness to domestic violence, drug and alcohol abuse, and had suffered the death of a parent when she was about 12 years old.
- Sunny was **emotionally guarded** on one hand, yet she would often share things about herself that she did not readily share with other people. She **had a tumultuous (love/hate) relationship with her mother**, and would become very defensive if anyone dared make a negative comment about her mother and would even fist fight people if they should disrespect her. **Her mother was addicted to prescription pain medication. The family was in denial.**
- Sunny's mother's addiction to pain medication had a profound effect on her and on the rest of the family. **Sunny was distrustful of others. She regularly had her guard up and was always in "fight or flight" mode. She was unsure of herself and often got herself tied up in unhealthy relationships with males.** Her mother disappointed her time and time again. Made promises that were always broken because that is what addicts do. Because her father was deceased, **she did not feel she had too many adults she could REALLY rely on.**



# From Ann Marie Franklin – Social Worker

- We have young students (7-10) who have seen at least one family member OD. Some, have experienced this more than once. Some students have called for help when they find their parent and/or family member unconscious.
- These same students are often pulled out of the home and placed in foster care, which unfortunately, is very under staffed in Sullivan County. So often, children are placed in temporary homes and then removed and placed in another temporary home.
- Our younger students will at times report what they have seen or discuss their fears. Our older students, often hide the fact that there is drug abuse in the home, because they know that they may be removed.
- Our older students often, care for younger siblings before and after school. They often are the “parent” to the parent who is using drugs. They protect their family and try to keep the family together. These students can be anywhere from 12-18 years of age.
- Due to Opioid abuse, many families are on poverty level or below, due to either not holding down steady jobs or not working at all.
- So many of our students suffer from complex trauma. It may be in the form of physical and/or verbal abuse, neglect, lack of food, lack of safe housing, abandonment (repeatedly, as they are moved around). This trauma is ongoing. Parents and/or family members may be incarcerated, again abandoning the child.



# From Martin Colavito – MHS, CASAC

- Kids enter school these days saddled with parental deficiencies that not only impede learning, but also disrupts healthy development.
- As a culture we continue to react to crisis rather than prevent it. School districts experience this more than most institutions. School districts are charged with providing safe spaces for younger folks to learn, but often times deal with under resourced options when children are in need.
- Hope is a four letter word that needs to be taught and consistently reinforced.
- In my experience, considering a child is the cultivating factor that promotes growth. When we feel considered, we feel whole. We may not be able to prevent a child who may be experiencing the pain of a parent who uses, but we can reinforce their worth through consideration, education, and the human touch that those who work to promote healthy child development foster.
- Finally, consistency goes a long way towards healthy development. From my experience, a child needs to know that there is a safe place.
- I believe there needs to be a paradigm shift concerning the prevention of crisis. I believe that if we prevent a crisis, there is no crisis. The more we focus on preventable crisis the more we provide hope.



# Opioids' effects on families, social services, and schools – Rockefeller Institute of Government June 27, 2018

- What we didn't anticipate, but heard often, were the **spillover effects on families, social services, and schools**.
- Although opioid deaths are highest among New Yorkers age forty-five to fifty-four, **the effects of opioid use by grandparents and parents has an effect on schools**, as does the smaller (but growing) number of youth who use opioids.
- When we think about the opioid problem, we think about people with addictions and treating those addictions. But **the effects of opioid addictions spill over past those people who are addicted and into their families, the social services in a community, and to schools**. Policies and programs to address opioid addiction also need to take into account the needs of these other important institutions.



# What does this mean to schools?



- More demands on
  - Social workers and psychologists
  - Occupational therapy services
  - Physical therapy services
  - Speech and language therapy services
  - Behaviorists
  - Nursing and medical services
  - Special Education services and supports
  - Food Service
  - Transportation – McKinney Vento/Foster Care
  - Administration
  - General support in the form of clean and new clothing, personal hygiene & self care, etc. etc.

What do schools do?

What do schools need?



The image features the word "RESOURCES" in a large, white, 3D sans-serif font. The letters are centered and have a slight drop shadow. The background is a vibrant, abstract composition of overlapping, semi-transparent geometric shapes in various colors including blue, green, yellow, orange, pink, and purple. Some of these shapes are outlined with dashed lines in colors matching their fill. The overall aesthetic is modern and energetic, typical of a digital graphic design for a resource page.

# RESOURCES

# Can public schools still be all things to all people?

River Reporter

October 27, 2011 – By Doug Reiser and Robert M. Dufour

- .... something else was happening in public schools—especially inner city public schools. The school became the hub of the community. It also became a very convenient delivery modality for the perceived need for an array of social services. Schools today provide dental care, medical clinics, occupational therapy, physical therapy, speech improvement services, social work services and counseling services. Schools often have become the preeminent social service provider in their communities.
- Many of these services are being received by students that are not covered under the Individual with Disabilities Education Act (IDEA). Therefore, though important and necessary, they are not mandated.
- It will be up to the taxpayers and their representative school boards to decide what programs are important, worth paying for and exactly how much that will cost.



