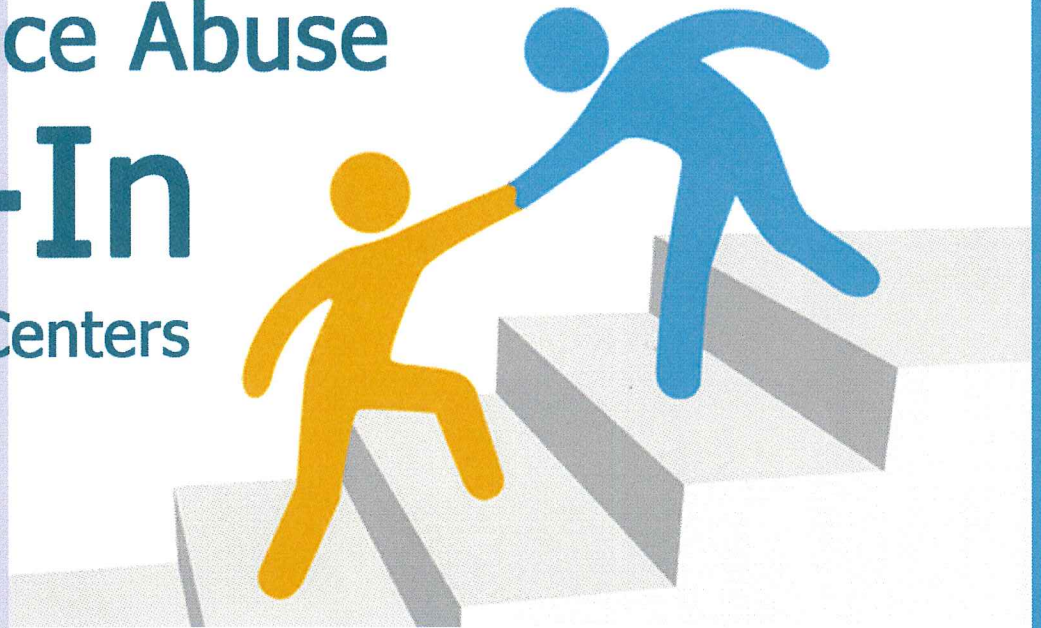


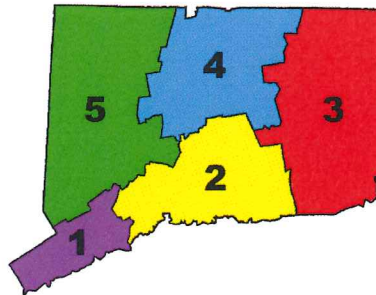
# Substance Abuse Walk-In

Assessment Centers



## Treatment works.

When you're ready to **talk**,  
we're here to **listen**.



For assessment centers in your area please visit  
[www.ct.gov/dmhas/walkins](http://www.ct.gov/dmhas/walkins) or call **1-800-563-4086**.



State of Connecticut  
Department of Mental Health and Addiction Services

# Connecticut Adolescent Screening, Brief Intervention, and Referral to Treatment Resource Guide

## Immediate Help/Crisis

**SUICIDE HELPLINE (INFOLINE)** Call 211

**NATIONAL SUICIDE PREVENTION LIFELINE**

1-800-273-TALK (8255)

1-888-628-9454 (Ayuda en Español)

TTY: 1-800-799-4TTY (4889)

[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

**POISON CONTROL**

1-800-222-1222

[www.aapcc.org](http://www.aapcc.org)

## Connecticut Resources

**ACCESS HEALTH CT**

Health Insurance Marketplace

1-855-805-4325 TTY 1-855-789-2428

[www.accesshealthct.com](http://www.accesshealthct.com)

**ADVANCED BEHAVIORAL HEALTH FETAL ALCOHOL SYNDROME DISORDERS (FASD) PROGRAM**

860-638-5309

[www.abhct.com/Programs\\_Services/FASD](http://www.abhct.com/Programs_Services/FASD)

**AIDS CT (ACT)** Care and Support

Coalition for HIV/AIDS Services

860-247-AIDS (2437) [www.aids-ct.org/cdc.html](http://www.aids-ct.org/cdc.html)

**CT 2-1-1**

Call 211

[www.211ct.org](http://www.211ct.org)

**CT ALLIANCE TO END SEXUAL VIOLENCE**

1-888-999-5545

[www.endsexualviolencect.org](http://www.endsexualviolencect.org)

**CT COALITION AGAINST DOMESTIC VIOLENCE**

860-282-7899

[www.ctcadv.org](http://www.ctcadv.org)

1-888-774-2900 (Crisis Line)

**CT COALITION TO STOP UNDERAGE DRINKING**

860-523-8042

[www.preventionworksct.org/CCSUD.html](http://www.preventionworksct.org/CCSUD.html)

**CT COUNCIL ON PROBLEM GAMBLING**

1-888-789-7777 (Helpline)

[www.ccpq.org](http://www.ccpq.org)

**CT SUICIDE PREVENTION**

[www.preventsuicidect.org](http://www.preventsuicidect.org)

Call 211

**CT NETWORK OF CARE**

[www.connecticut.networkofcare.org](http://www.connecticut.networkofcare.org)

**CT QUITLINE (Tobacco)**

1-800-QUIT-NOW [www.quitnow.net/connecticut](http://www.quitnow.net/connecticut)

**CT YOUTH SERVICES ASSOCIATION**

[www.ctyouthservices.org/Find\\_A\\_YSB/](http://www.ctyouthservices.org/Find_A_YSB/)

**CONNECTICUT CLEARINGHOUSE**

A library and resource center on alcohol, tobacco, other drugs, mental health and wellness

1-800-232-4424

[www.ctclearinghouse.org](http://www.ctclearinghouse.org)

**FATHERHOOD INITIATIVE OF CONNECTICUT**

1-866-6-CTDADS

[www.ct.gov/fatherhood](http://www.ct.gov/fatherhood)

**MOBILIZE AGAINST TOBACCO FOR CHILDREN'S HEALTH (MATCH)**

860-402-1554

**NATIONAL ALLIANCE ON MENTAL ILLNESS**

**NAMI CT**

860-882-0236

[www.namict.org](http://www.namict.org)

Helpline 1-800-950-6264

**OPIOID OVERDOSE PREVENTION/NALOXONE (NARCAN) INITIATIVE**

860-418-6993

[www.ct.gov/dmhas/cwp/view.asp?q=509650](http://www.ct.gov/dmhas/cwp/view.asp?q=509650)

**SUICIDE HELPLINE (INFOLINE)** Call 211

**THE GOVERNOR'S PREVENTION PARTNERSHIP**

1-800-422-5422

[www.preventionworksct.org](http://www.preventionworksct.org)

**TURNING POINT** (CT website for youth)

[www.turningpointct.org](http://www.turningpointct.org)

For referrals to resources  
in your community

**Call 211**

## Support Groups

**AL-ANON/ALATEEN**

CT Information

1-888-825-2666

Anywhere, USA

1-800-344-2666

[www.ctalanon.org](http://www.ctalanon.org)

**ALCOHOLICS ANONYMOUS (AA)**

Connecticut

1-866-783-7712

Anywhere, USA

1-800-344-2666

[www.ct-aa.org](http://www.ct-aa.org)

**COCAINE ANONYMOUS**

1-800-347-8998

[www.ca.org](http://www.ca.org)

**CO-DEPENDENTS ANONYMOUS (CoDA)**

1-888-444-2359

[www.coda.org](http://www.coda.org)

**FAMILIES ANONYMOUS**

1-800-736-9805

[www.familiesanonymous.org](http://www.familiesanonymous.org)

**GAM-ANON FAMILY GROUPS**

CT Hotline

1-800-266-1908

National Information

718-352-1617

[www.gam-anon.org](http://www.gam-anon.org)

**GAMBLERS ANONYMOUS (GA)**

CT Hotline

1-855-222-5542

National Information

213-386-8789

[www.gamblersanonymous.org](http://www.gamblersanonymous.org)

**MARIJUANA ANONYMOUS**

1-800-766-6779

[www.marijuana-anonymous.org](http://www.marijuana-anonymous.org)

**NAR-ANON**

CT Information

1-800-477-6291

[www.nar-anon.org](http://www.nar-anon.org)

**NARCOTICS ANONYMOUS (NA) CT Region**

CT Information

1-800-627-3543

National Information

1-800-447-6291

[www.ctna.org](http://www.ctna.org)

**NICOTINE ANONYMOUS**

1-877-879-6422

[www.nicotine-anonymous.org](http://www.nicotine-anonymous.org)

**OVEREATERS ANONYMOUS (OA)**

505-891-2664

[www.overeat\(OAersanonymous.org](http://www.overeat(OAersanonymous.org)

## National Resources

**AIDS NATIONAL HOTLINE**

1-800-342-AIDS

[www.cdc.gov/hiv](http://www.cdc.gov/hiv)

**CENTERS FOR DISEASE CONTROL AND PREVENTION**

1-800-232-4636

[www.cdc.gov](http://www.cdc.gov)

**MENTAL HEALTH AMERICA**

1-800-969-6642

[www.nmha.org](http://www.nmha.org)

**MOTHERS AGAINST DRUNK DRIVING (MADD)**

CT Information

203-764-2566

National Information

1-877-275-6233

[www.madd.org](http://www.madd.org)

**NATIONAL ASSOCIATION FOR CHILDREN OF ALCOHOLICS**

1-888-55-4-COAS

[www.nacca.org](http://www.nacca.org)

**NATIONAL INSTITUTE ON DRUG ABUSE**

301-443-1124

[www.drugabuse.gov](http://www.drugabuse.gov)

**NATIONAL ORGANIZATION ON FETAL ALCOHOL SYNDROME**

202-785-4585

[www.nofas.org](http://www.nofas.org)

**NATIONAL SUICIDE PREVENTION LIFELINE**

1-800-273-TALK (8255)

1-888-628-9454 (Ayuda en Español)

TTY: 1-800-799-4TTY (4889)

[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

**OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION**

202-307-5911

[www.ojjdp.gov/](http://www.ojjdp.gov/)

**POISON CONTROL**

1-800-222-1222

[www.aapcc.org](http://www.aapcc.org)

**SUBSTANCE ABUSE & MENTAL HEALTH SERVICES ADMINISTRATION**

1-877-726-4727

[www.samhsa.gov](http://www.samhsa.gov)



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## **State Agencies**

**CT DEPARTMENT OF CHILDREN & FAMILIES**  
1-800-842-2288 Careline [www.ct.gov/DCF](http://www.ct.gov/DCF)

**CT DEPARTMENT OF MENTAL HEALTH & ADDICTION SERVICES**  
860-418-7000 [www.ct.gov/dmhas](http://www.ct.gov/dmhas)

**CT DEPARTMENT OF PUBLIC HEALTH**  
860-509-8000 [www.ct.gov/dph](http://www.ct.gov/dph)

**CT DEPARTMENT OF SOCIAL SERVICES**  
1-800-842-1508 [www.ct.gov/dss](http://www.ct.gov/dss)

## **Regional Action Councils**

\*Contact your Regional Action Council for more information about Local Resources

**Capital Area Substance Abuse Council**  
860-286-9333 [www.casac.org](http://www.casac.org)  
Serving: Avon, Bloomfield, Canton, East Granby, Farmington, Granby, Hartford, Hartland, Newington, Rocky Hill, Simsbury, Suffield, West Hartford, Wethersfield, Windsor, Windsor Locks

**Central Naugatuck Valley Regional Action Council**  
203-578-4044 [www.cnvrac.org](http://www.cnvrac.org)  
Serving: Beacon Falls, Bethlehem, Cheshire, Middlebury, Naugatuck, Prospect, Southbury, Thomaston, Waterbury, Watertown, Wolcott, Woodbury

**Communities 4 Action**  
203-588-0457 [www.communities4action.org](http://www.communities4action.org)  
Serving: Darien, Greenwich, New Canaan, Stamford

**East of the River Action for Substance Abuse Elimination**  
1-800-568-4442 [www.erasect.org](http://www.erasect.org)  
Serving: Andover, Bolton, East Hartford, East Windsor, Ellington, Enfield, Glastonbury, Hebron, Manchester, Marlborough, Somers, South Windsor, Stafford, Tolland, Vernon

**Greater Valley Substance Abuse Action Council**  
203-736-8566 [www.vsaac.com](http://www.vsaac.com)  
Serving: Ansonia, Bethany, Derby, Milford, New Haven, Orange, Oxford, Seymour, Shelton, West Haven, Woodbridge

**Housatonic Valley Coalition Against Substance Abuse**  
203-743-7741 [www.hvcasa.org](http://www.hvcasa.org)  
Serving: Bethel, Bridgewater, Danbury, New Fairfield, New Milford, Newtown Redding, Ridgefield, Roxbury, Sherman, Washington

**Mid-Fairfield Substance Abuse Coalition**  
203-849-1111 [www.hscct.org](http://www.hscct.org)  
Serving: Norwalk, Weston, Westport, Wilton

**Middlesex County Substance Abuse Action Council**  
860-347-5959 [www.mcsaac.org](http://www.mcsaac.org)  
Serving: Chester, Clinton, Cromwell, Deep River, Durham, East Haddam, Killingworth, Middlefield, Middletown, Old Saybrook, Portland, Westbrook

**Northeast Communities Against Substance Abuse**  
860-779-9253 [www.necasaonline.org](http://www.necasaonline.org)  
Serving: Ashford, Brooklyn, Canterbury, Chaplin, Columbia, Coventry, Eastford, Hampton, Killingly, Lebanon, Mansfield, Plainfield, Pomfret, Putnam, Scotland, Sterling, Thompson, Union, Willington, Windham, Woodstock

**Regional Youth/Adult Social Action Partnership**  
203-579-2727 [www.rvasap.org](http://www.rvasap.org)  
Serving: Bridgeport, Easton/Redding, Fairfield, Monroe, Stratford, Trumbull

**South Central CT Substance Abuse Council**  
203-303-3391 [www.scctrac.org](http://www.scctrac.org)  
Serving: Branford, East Haven, Guilford, Hamden, Meriden, Madison, North Branford North Haven, Wallingford

**Southeastern Regional Action Council**  
860-848-2800 [www.sectrac.org](http://www.sectrac.org)  
Serving: Bozrah, Colchester, East Lyme, Franklin, Griswold, Groton, Ledyard, Lisbon, Lyme, Montville, New London, North Stonington, Norwich, Old Lyme, Preston, Salem, Sprague, Stonington, Voluntown, Waterford

**Substance Abuse Action Council of Connecticut**  
860-826-1358 [www.cmhacc.org/saac](http://www.cmhacc.org/saac)  
Serving: Berlin, Bristol, Burlington, New Britain, Plainville, Plymouth, Southington



# Facts on Prescription and Over-the-Counter Drugs



- Prescription drug abuse is when someone takes a prescription drug that was prescribed for someone else or in a manner or dosage other than what was prescribed.
- Opioids and stimulants are the most commonly abused prescription drugs.
- Prescription and over-the-counter drugs are the most commonly abused substance by Americans age 14 and older, after marijuana and alcohol.
- Abusing prescription drugs can have negative short- and long-term health consequences.
- When abused, some prescription drugs can be dangerous and can lead to severe health consequences, including addiction and overdose—just like illicit drugs can.

## PRESCRIPTION DRUG ABUSE

### What is Prescription Drug Abuse?

Prescription drug abuse is when someone takes a prescription drug that was prescribed for someone else or in a manner or dosage other than what was prescribed. Abuse can include taking a friend's or relative's prescription to get high, to treat pain, or because you think it will help with studying.

### What are the most commonly abused prescription and over-the-counter drugs?

Opioids (such as the pain relievers OxyContin and Vicodin), central nervous system depressants (e.g., Xanax, Valium), and stimulants (e.g., Ritalin, Adderall) are the most commonly abused prescription drugs. Some drugs that are available without a prescription—also known as over-the-counter drugs—also can be dangerous if they aren't taken according to the directions on the packaging. For example, DXM (dextromethorphan), the active cough suppressant found in many over-the-counter cough and cold medications, sometimes is abused, particularly by youth.

## TEENS AND PRESCRIPTION DRUGS

### How many teens abuse prescription drugs?

Prescription and over-the-counter drugs are the most commonly abused substances by Americans age 14 and older, after marijuana and alcohol.

According to NIDA's Monitoring the Future Study, in 2015, 12th graders reported 18.30% lifetime use, 12.90% past year use, and 5.90% past month use of prescription drugs.

### Where do teens get prescription drugs?

Both teens and young adults obtain the majority of prescription drugs from friends and relatives, sometimes without their knowledge. In one survey, 54 percent of high school seniors said that opioid drugs other than heroin (e.g., Vicodin) would be fairly or very easy to get.

## PRESCRIPTION DRUG ABUSE EFFECTS

### What happens when you abuse prescription drugs?

Abusing prescription drugs can have negative short- and long-term health consequences. Stimulant abuse can cause paranoia, dangerously high body temperatures, and an irregular heartbeat, especially if stimulants are taken in high doses or in ways other than in pill form. The abuse of opioids can cause drowsiness, nausea, constipation, and, depending on the amount taken, slowed breathing. Abusing depressants can cause slurred speech, shallow breathing, fatigue, disorientation, lack of coordination, and seizures (upon withdrawal from chronic abuse). Abuse of any of these substances may result in addiction.



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Abusing over-the-counter drugs that contain DXM—which usually involves taking doses much higher than recommended for treating coughs and colds—can impair motor function (such as walking or sitting up); produce numbness, nausea, and vomiting; and increase heart rate and blood pressure. Abusing any type of mind-altering drug can affect judgment and inhibition and may put a person at heightened risk for HIV and other sexually transmitted diseases (STDs).

#### **Aren't prescription drugs safer than illegal drugs, such as cocaine or heroin?**

No. Many people think that abusing prescription drugs is safer than abusing illicit drugs like heroin because the manufacturing of prescription drugs is regulated or because they are prescribed by doctors. That doesn't mean these drugs are safe for someone other than the person with the prescription to use. Many prescription drugs have powerful effects in the brain and body – and people sometimes take them in ways that can be just as dangerous (e.g. crushing pills, and snorting or injecting them) as illicit drug use. In fact, opioid painkillers act on the same sites in the brain as heroin, which is one reason why they can be so dangerous when abused. Also, abusing prescription drugs is illegal – and that includes sharing prescriptions with friends.

#### **If prescription drugs are dangerous, why are they prescribed by doctors?**

Virtually every medication presents some risk of undesirable side effects, sometimes even serious ones. Doctors consider the potential benefits and risks to each patient before prescribing medications. Doctors ask about patients' medical history, including what other health problems they have and what other medications they take. Based on this and other information (e.g., age and weight of the patient), physicians can prescribe medications while minimizing the risks. When abused, some prescription drugs can be dangerous and can lead to severe health consequences, including addiction and overdose—just like illicit drugs can.

#### **Why don't people who take prescription drugs for medical conditions become addicted?**

On rare occasions, they do, which is why a person must be under a doctor's care while taking prescription medications, and sometimes when stopping their use. Long-term medical use of certain prescription drugs can lead to "physical dependence" because of the way the brain and the body naturally adapt to chronic drug exposure. A person may need larger doses of the drug to achieve the same initial effects (tolerance), and when drug use is stopped, withdrawal symptoms can occur. Dependence is **not** the same as addiction. Addiction is when someone continues to take the drug even when they know it is severely affecting his or her life.

#### **Is it dangerous to abuse prescription drugs in combination with other drugs?**

Yes. Both prescription and over-the-counter drugs pose increased risk of health complications when combined with other prescription medications, over-the-counter medicines, illicit drugs, or alcohol. For example, combining opioids with alcohol can intensify respiratory distress and lead to death.

## **Connecticut Resources**

Department of Mental Health  
and Addiction Services  
[www.ct.gov/dmhas](http://www.ct.gov/dmhas)

Department of  
Consumer Protection  
Prescription Monitoring  
Program  
[www.ct.gov/dcp/pmp](http://www.ct.gov/dcp/pmp)

## **National Resources**

Substance Abuse and Mental  
Health Services Administration  
[www.samhsa.gov](http://www.samhsa.gov)  
1.800.662.HELP (4357)

National Institute on  
Drug Abuse  
[www.drugabuse.gov](http://www.drugabuse.gov)



# Marijuana and Teens



Many teenagers experiment with marijuana. Friends, peer pressure, and portrayal of marijuana in the media often affect a teenager's decision to use. Parents can also play an important role in teaching their children about the risks of using drugs.

Buying and using marijuana is illegal. Still, teen marijuana use is at its highest in 30 years, and teens are now more likely to use marijuana than tobacco. In 2011, a national study showed that one in eight 8th graders, one in four 10th graders, and one in three 12th graders have used marijuana in the past year.

There are over 200 different street names for marijuana. Many of them are based on the type of drugs or tobacco that is mixed in with the marijuana, "brands" from various areas in the country or around the world, or specially bred strains. Some common names include blunt, bud, pot, spliff, and weed. "K2" and "spice" are examples of synthetic (man-made) marijuana-like drugs. There are also street names for smoking marijuana, including blazing, bonging, puffing, and toking.

## Parents and Prevention

Talking with your child when they are in elementary or middle school in an honest and open way can prevent drug use in the future. The following are tips on how to discuss marijuana with your child:

- Ask what he/she has heard about using marijuana. Listen carefully, pay attention, and do not interrupt. Avoid making negative or angry comments.
- Offer your child facts about the risks and consequences of smoking marijuana.
- Ask your child to give examples of the effects of marijuana. This will help you make sure that your child understands what you talked about.
- If you choose to talk to your child about your own experiences with drugs, be honest about your reasons, be careful not to glamorize marijuana or other drugs, and discuss the negative things and dangers that resulted from you or your friends' drug use.

Sometimes parents may suspect that their child is already using marijuana. The following are common signs of marijuana use:

- Dizziness
- Acting silly for no reason
- Being hungry and eating more than usual
- Red eyes or use of eye drops
- Increased irritability or grumpiness
- Reduced motivation and lack of interest in usual activities
- Trouble remembering things that just happened
- A smell on clothes, or the use of incense or other deodorizers
- Owning clothing, posters, or jewelry encouraging drug use
- Having pipes or rolling papers
- Stealing money or having money that cannot be accounted for

Many teenagers believe that marijuana is safer than alcohol or other drugs. When discussing marijuana with your child, it is helpful to know the myths and the facts.



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### The following are some common myths about marijuana:

- "It is harmless and natural, it is only an herb, and it won't affect me long-term"
- "It is not addictive"
- "It doesn't hurt me as much as smoking tobacco"
- "It makes me feel calm"
- "It doesn't affect my thinking or my grades"
- "It's safe because it is used as medicine for cancer and other diseases"

### Effects of Marijuana

Regular use of marijuana can lead to dependence, which causes users to have a very hard time stopping. When teens use marijuana regularly, they may crave marijuana and give up important activities to use marijuana. If they stop using, they may suffer from withdrawal symptoms which can include irritability, anxiety, and changes in mood, sleep, and appetite.

Marijuana can also cause serious problems with learning, feelings, and health. Tetrahydrocannabinol (THC) is the active ingredient in marijuana. THC affects the brain's control of emotions, thinking, and coordination.

### Use of marijuana can lead to:

- School difficulties
- Problems with memory and concentration
- Increased aggression
- Car accidents
- Use of other drugs or alcohol
- Risky sexual behaviors
- Increased risk of suicide
- Increased risk of psychosis

### Long-term use of marijuana can lead to:

- The same breathing problems as smoking cigarettes (coughing, wheezing, trouble with physical activity, and lung cancer)
- Decreased motivation or interest
- Lower intelligence
- Mental health problems, such as depression, anxiety, anger, moodiness, and psychosis
- Decreased or lack of response to mental health medication
- Increased risk of side effects from mental health medication

### Medical Marijuana

Currently, only man-made forms of THC are approved by the Food and Drug Administration (FDA) for a very small number of specific medical uses. **There are no FDA-approved medical reasons for children or teenagers to use marijuana or THC in any form.**

"Medical marijuana" is not checked for ingredients, strength, or safety. There is no evidence that medical marijuana is any safer than other marijuana.

The use of marijuana is illegal in the United States and prohibited by Federal law. However, medical marijuana laws are different from state to state. Several states, including Connecticut, allow the use of medical marijuana for adults. Almost all of these states still say that it is a crime for minors to sell, have, or use marijuana.

For more information about Connecticut's Medical Marijuana Program, please visit the Connecticut Department of Consumer Protection's website: [www.ct.gov/dcp/mmp](http://www.ct.gov/dcp/mmp).

## Connecticut Resources

Department of Mental Health  
and Addiction Services  
[www.ct.gov/dmhas](http://www.ct.gov/dmhas)

## National Resources

Substance Abuse and Mental  
Health Services Administration  
[www.samhsa.gov](http://www.samhsa.gov)  
1.800.662.HELP (4357)

National Institute on  
Drug Abuse  
[www.drugabuse.gov](http://www.drugabuse.gov)

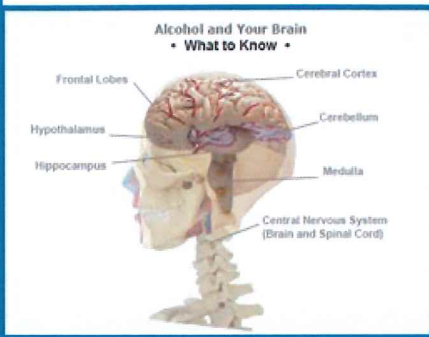
### Conclusion

Marijuana use in teens can lead to long-term problems. Teens rarely think they will end up with problems related to marijuana use, so it is important to begin discussing the risks with your child early and continue this discussion over time. Talking openly with your child will help with prevention. If your child is already using, open communication will help you know more about his or her use. If you have concerns about your child's drug use, talk with your child's pediatrician or a qualified mental health professional.

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# Alcohol and the Developing Brain



- Alcohol can cause alterations in the structure and function of the developing brain, which continues to mature into a person's mid-20s.
- These changes in the brain affect everything from emerging sexuality to emotionality and judgment.
- Alcohol is a central nervous system depressant.
- Drinking alcohol over a long period of time can damage the frontal lobes forever.

Alcohol can cause alterations in the structure and function of the developing brain, which continues to mature into a person's mid 20s, and it may have consequences reaching far beyond adolescence.

In adolescence, brain development is characterized by dramatic changes to the brain's structure, neuron connectivity (i.e., "wiring"), and physiology. These changes in the brain affect everything from emerging sexuality to emotionality and judgment.

Not all parts of the adolescent brain mature at the same time, which may put an adolescent at a disadvantage in certain situations. For example, the limbic areas of the brain mature earlier than the frontal lobes. The limbic areas regulate emotions and are associated with an adolescent's lowered sensitivity to risk. The frontal lobes are responsible for self-regulation, judgment, reasoning, problem-solving, and impulse control. Differences in maturation among parts of the brain can result in impulsive decisions or actions and a disregard for consequences.

## HOW ALCOHOL AFFECTS THE BRAIN

Alcohol affects an adolescent's brain development in many ways. The effects of underage drinking on specific brain activities are explained below.

Alcohol is a central nervous system depressant. Alcohol can appear to be a stimulant because, initially, it depresses the part of the brain that controls inhibitions.

### Cerebral Cortex

Alcohol slows down the cerebral cortex as it works with information from a person's senses.

### Central Nervous System

When a person thinks of something he wants his body to do, the central nervous system—the brain and the spinal cord—sends a signal to that part of the body. Alcohol slows down the central nervous system, making the person think, speak, and move slower.

### Frontal Lobes

The brain's frontal lobes are important for planning, forming ideas, making decisions, and using self-control.

When alcohol affects the frontal lobes of the brain, a person may find it hard to control his or her emotions and urges. The person may act without thinking or even become violent.

Drinking alcohol over a long period of time can damage the frontal lobes forever.



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### Hippocampus

The hippocampus is the part of the brain where memories are made.

- When alcohol reaches the hippocampus, a person may have trouble remembering something he or she just learned, such as a name or a phone number. This can happen after just one or two drinks.
- Drinking a lot of alcohol quickly can cause a blackout—not being able to remember entire events, such as what he did last night.
- If alcohol damages the hippocampus, a person may find it hard to learn and to hold on to knowledge.

### Cerebellum

The cerebellum is important for coordination, thoughts, and awareness. A person may have trouble with these skills when alcohol enters the cerebellum. After drinking alcohol, a person's hands may be so shaky that they can't touch or grab things normally and they may lose their balance and fall.

### Hypothalamus

The hypothalamus is a small part of the brain that does an amazing number of the body's housekeeping chores. Alcohol upsets the work of the hypothalamus. After a person drinks alcohol, blood pressure, hunger, thirst, and the urge to urinate increase while body temperature and heart rate decrease.

### Medulla

The medulla controls the body's automatic actions, such as a person's heartbeat. It also keeps the body at the right temperature. Alcohol actually chills the body. Drinking a lot of alcohol outdoors in cold weather can cause a person's body temperature to fall below normal. This dangerous condition is called *hypothermia*.

## Connecticut Resources

Department of Mental Health  
and Addiction Services  
[www.ct.gov/dmhas](http://www.ct.gov/dmhas)

## National Resources

National Institute on Alcohol  
Abuse and Alcoholism  
[www.niaaa.nih.gov](http://www.niaaa.nih.gov)

Substance Abuse and Mental  
Health Services Administration  
[www.samhsa.gov](http://www.samhsa.gov)  
1.800.662.HELP (4357)



# Opioids and Treatment through the Department of Mental Health and Addiction Services (DMHAS)

Heroin is the most commonly reported primary drug used when admitted to DMHAS services.



Heroin  
40%



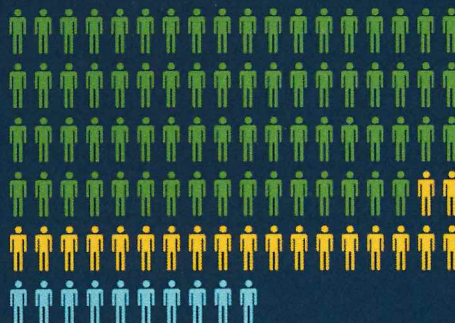
Alcohol  
35%



Prescription Drugs  
7%

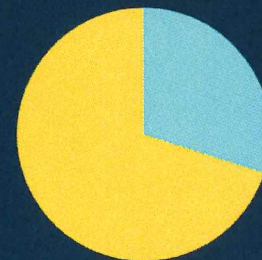
**In Fiscal Year 2015, DMHAS Opioid Admissions were mainly white males**

70% Caucasian



Caucasian Latino/a African-American

70% Male



## Available Treatment Options

Detox/Residential



Outpatient



Medication Assisted Treatment

