

## Prevention Day 2018

### Substance Abuse Prevention

My name is Ginny Burley and I have worked on and off for the Central Vermont New Directions Coalition, which I helped found in 1998 after Montpelier high school students died in a crash in East Montpelier after attending an underage drinking party in Calais. Since then we have worked on high risk drinking, tobacco prevention, marijuana, and other drugs. Sometimes physical activity and nutrition are included. It all depends on the funding available for that couple of years. Currently, we are the only prevention coalition in all of Washington County. I also work with Prevention Works, the statewide coalition of coalitions, and Sam-VT, the marijuana prevention coalition.

After 20 years in the field, I'm sharing with you my public health oriented take on prevention. A couple of generations ago, the main causes of death were accidents and infectious diseases. We can all name some of the strategies that reduced deaths by accidents: federal laws and agencies, like OSHA; child labor laws; seat belt laws; speed limits; etc. For infectious diseases, there are two main areas that turned the curve: vaccination and sanitation. As a kid I had chickenpox, measles, mumps, Rubella. I did not get polio; I stood in line to get the first oral vaccine. My uncle died of polio. I went to kindergarten with children in braces and with crutches. I did not get smallpox; there was a vaccine for that.

My children only had chickenpox. The other infectious diseases that I suffered from had vaccines to prevent infection by the time they were born, and now there is one for chickenpox too!

In our country we rarely hear of dysentery, cholera, and other infections caused by unsanitary conditions. The infectious diseases causing trouble here these days are ones like the flu, which change quickly and are more challenging to prevent. It's a different world.

The Vermont Department of Health has a new campaign called 3-4-50. It goes like this: 3 behaviors – tobacco use, poor nutrition, and lack of physical activity – cause 4 chronic diseases – cancer, diabetes, heart disease, and lung disease – that are responsible for more than 50% of deaths each year in Vermont.

Substance abuse prevention – preventing misuse, abuse and addiction to tobacco, alcohol, prescription drugs, opiates, marijuana, and other drugs – fits into this behavioral, chronic disease category. When behaviors and addiction are involved, it is a long-term effort involving prevention, intervention, treatment, recovery, and enforcement. What Prevention Works is promoting today is **primary prevention** – keeping people from starting to use or abuse substances in the first place. Unless we start here and consistently work on **primary prevention**, we cannot afford the amount of treatment, recovery and enforcement it will take. And remember – this effort never ends. Every year there's a new crop of kids coming along who need a solid foundation in prevention and education.

Tobacco prevention is the big success story. How did we make such progress to go from a world where cigarettes were everywhere – in restaurants, on airplanes, on TV ads – to one where only 17% of adults and 11% of youth smoke, down from 34% in the 90's? It took a lot of money – from the legal settlements when the tobacco companies were sued for misleading the public – and it took federal and state help. Who remembers Marlboro Man ads on T.V. and in magazines? Smoking on airplanes? Gone through federal efforts. It took a consistent and pervasive effort. Vermont was a leader in indoor air quality, gradually forbidding tobacco use in more and more places. When I was first on the U-32 school

board, there was a smoking lounge in the school building for teachers who smoked, along with the occasional student. When I took my kids to the Wayside, I had to choose between the smoking or non-smoking sections – in the same diner! And we cannot relax – the latest data shows a rapid increase in youth use of e-cigarettes and vapes.

We changed the culture around tobacco use. And we can change the culture around other drug use, but it will take consistent and pervasive effort. We need to educate the public, run media campaigns, educate kids, educate parents, limit access to substances, and address the social and economic factors that create the traumas that drive self-medication. It's a big job.

And we should keep positive youth development in the forefront. We cannot enforce or treat our way out of this – we need to stop it before it starts. In Iceland and Finland, youth substance use was slashed when they implemented universal afterschool programs and required hobbies. What a great idea!

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