



## **Brookfield Cares Annual Report: 2016**

### **Background**

The purpose of this report is to inform the public about Brookfield Cares and its efforts to address at-risk behaviors. Our focus has been and remains the health and welfare of the community as a whole.

Brookfield Cares is a 501c(3) organization, which enables us to solicit funds to allow us to expand the work that is being done in the community.

### **Mission**

Our mission is clear:

*Brookfield Cares is a community based organization dedicated to promoting awareness and education by focusing on the impact of substance abuse, depression, suicide, and other public health concerns.*

We continue to work hard to reach the entire community on issues that have an impact on our daily lives including addiction, drug and alcohol use, suicide prevention, and mental health issues. In this regard we make an attempt to work with all factions of the community through their representation on the coalition. We have initiated a variety of programs to further our mission and goals. The more the community can be informed, the more healthy our community will become.

Brookfield Cares continues its involvement in educating all members of the community concerning substance abuse and other health related issues. Heroin addiction has not spared any community in Connecticut. With over 756 overdose deaths (with four deaths

of Brookfield residents) in 2015, opioid addiction and abuse are of great concern for the health of our community.

The Hope and Support Group that was created by a generous grant from the Brookfield Education Foundation (BEF) continues to average 20-25 attendees every Monday night. Since the grant has ended, The C.A.R.E.S. Group, Inc., begun by Donna DeLuca, has assumed the costs for the Hope and Support Group.

Red Ribbon Week was conducted successfully again this year, which included a week-long event at BHS & WMS. This is an effort by the students to raise awareness regarding substance abuse and avenues to seek help and support. Several programs were conducted, which included a focus on family participation.

As a consequence of a generous grant from the Dex Smenyak Foundation and the Brookfield Education Foundation, a guest speaker on suicide was invited to speak in February. Kevin Breel, a young man who experienced suicide ideation and depression, spoke before a large crowd in the BHS auditorium. His youth and sense of humor helped connect with the young people in the audience. Breel spoke to the senior and junior classes the following morning.

The primary focus this year was the “A Courageous Community Dares to Discuss ...” event on March 1<sup>st</sup>.

Invitations were sent out and facilitators trained to guide breakout groups at this event. The goal of this event was to educate and raise public awareness regarding mental health and substance abuse and to solicit suggestions and/or ideas on how we, as a community, can effectively combat these issues. The event was well attended and the result of many thoughtful and focused hours put in by the Courageous Community committee. A follow-up survey was sent out and over 50% of the attendees responded. One consistent theme, in terms of feedback, was to increase communication and raise awareness regarding resources in the community. Although a web site exists with the type of information discussed, a more direct approach is needed. One suggestion is an electronic monthly newsletter. The Courageous Community Committee is pursuing this option. In addition, we will continue our social media presence with frequent postings of events, educational articles and videos to raise public awareness.

### Search Institute Surveys

A developmental assets survey was conducted this year. For the first time the 6<sup>th</sup> graders were included with their separate survey. For grades 8 through 12, we were able to compare results with the previous surveys conducted. Some of the more salient points will be provided later in this document. The surveys are designed to provide quantifiable input that helps us:

- Focus on strengths, supports, and skills that young people need to overcome challenges.
- Measure intangible qualities that really matter for youth development and education.
- Provide easy-to-understand, actionable information results that can help engage others and increase impact in the lives of young people.
- Bring young people’s own perspectives and experiences to planning.

We thank our students for participating in this survey. Below are the strongest and the weakest developmental assets, as reported by our youth.<sup>1</sup>

Strongest Developmental Assets		
Developmental Asset	Definition	Ranking
Achievement Motivation	<i>Young person is motivated to do well in school</i>	78%
Family Support	<i>Family life provides high levels of love and support.</i>	77%
Integrity	<i>Young person acts on convictions and stands up for his or her beliefs.</i>	76%
Positive View of Personal Future	<i>Young person is optimistic about his or her personal future.</i>	75%
Youth Programs	<i>Young person spends three or more hours per week in sports, clubs, or organizations at school and/or in community organizations.</i>	75%

<sup>1</sup> Search Institute, “Developmental Assets: A Profile of Your Youth: Executive Summary and Complete Survey Report – Brookfield High School and Whisconier Middle School,” February 2016.

<b>Weakest Developmental Assets</b>		
<b>Developmental Asset</b>	<b>Definition</b>	<b>Ranking</b>
Reading for Pleasure	<i>Young person reads for pleasure three or more hours per week.</i>	15%
Creative Activities	<i>Young person spends three or more hours per week in lessons or practice in music, theater, or other arts.</i>	17%
Parent Involvement in Schooling	<i>Parent(s) are actively involved in helping young person succeed in school.</i>	24%
Community Values Youth	<i>Young person perceives that adults in the community value youth.</i>	24%
Youth as Resources	<i>Young people are given useful roles in the community.</i>	30%

While the Developmental Assets provide important feedback on attitudes, the survey also provides information on the behaviors of our students.

- Alcohol continues to be the number one drug of choice (11% of 8<sup>th</sup> graders and 54% of 12<sup>th</sup> graders report past 30-day use – 18% of all students have rode once or more in the last year with a driver who had been drinking).
- Marijuana continues to be viewed by students as less dangerous than other substances with less parental disapproval choice (7% of 9<sup>th</sup> graders and 33% of 12<sup>th</sup> graders report past 30-day use).
- We need to be continually mindful of suicide risk of students (19% are frequently depressed and/or have attempted suicide).
- Violence is emerging as a serious issue (19% reported they had been the victims of violence over the past 2 years).
- 22% of our 6<sup>th</sup> graders say they have less than 1 hour per day of adult supervision after school.
- Onset of alcohol use is 11 years of age.

Brookfield Cares, working closely with the community, has made great gains in awareness of at-risk behaviors, education on related issues, and reduction in perceived stigma related to mental health issues. As we face increasing challenges we look forward

to – in fact we need – increased cooperation and collaboration with all constituent groups, including parents, the schools, town government, clergy, the medical community, seniors, and more. We can only achieve our goals by working together.

### **Trending:**

The third annual report on the impact of legalized marijuana in Colorado detailed the following:

#### ***Impaired Driving***

1. In 2014, when retail marijuana businesses began operating, there was a 32 percent increase in marijuana-related traffic deaths in just one year from 2013.
2. Colorado marijuana-related traffic deaths increased 92 percent from 2010 – 2014. During the same time period all traffic deaths only increased 8 percent.

#### ***Youth Marijuana Use***

1. In 2013, 11.16 percent of Colorado youth ages 12 to 17 years old were considered current marijuana users compared to 7.15 percent nationally. Colorado ranked 3<sup>rd</sup> in the nation and was 56 percent higher than the national average.
2. Drug-related suspensions/expulsions increased 40 percent from school years 2008/2009 to 2013/2014. The vast majority were for marijuana violations.

#### ***Adult Marijuana Use***

1. In 2013, 29 percent of college age students (ages 18 to 25 years old) were considered current marijuana users compared to 18.91 percent nationally. Colorado, ranked 2<sup>nd</sup> in the nation, was 54 percent higher than the national average.

#### ***Hospital Marijuana-Related Admissions***

1. In 2014, when retail marijuana businesses began operating, there was a 38 percent increase in the number of marijuana-related hospitalizations in only one year.

### ***Diversion by Parcel***

1. U.S. mail parcel interceptions of Colorado marijuana, destined for 38 other states, increased 2,033 percent from 2010 – 2014.
2. Pounds of Colorado marijuana seized in the U.S. mail, destined for 38 other states, increased 722 percent from 2010 – 2014.

### ***Related Data***

1. Overall, crime in Denver increased 12.3 percent from 2012 to 2014.
2. National THC potency has risen from an average of 3.96 percent in 1995 to an average of 12.55 percent in 2013. The average potency in Colorado was 17.1 percent.<sup>2</sup>

### **National Drug Threat Survey**

Connecticut's Heroin-Related Treatment Rates as of 2012 were 500 per every 100,000 as opposed to the national average, of 100 per every 100,000.<sup>3</sup>

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<sup>2</sup> Rocky Mountain High Intensity Drug Trafficking Area, *Executive Summary: The Legalization of Marijuana in Colorado: The Impact 3* (September 2015).

<sup>3</sup> Jessica Geary, "Heroin and Opioid Epidemic in New England – The New Approach" (New England State Police Information Network, April 2016).