

Drugs: True Stories Forum
March 9th 2007
Massachusetts State House

JEANNE BLAKE:

Good morning everyone. I'm Jeanne Blake. I'm the President of Blake Works. We are so grateful that you are here today. I want to thank our sponsors, Partners HealthCare, as always they have always stepped up to the plate. The Boston Public Health Commission, ditto, always there for us, as well as the Massachusetts Department of Public Health, Bureau of Substance Abuse Services, Michael Botticelli, thank you, always, always supportive of our efforts. We also want to thank our co-hosts, Bill Gaine here from MIAA – Mass Interscholastic Athletic Association. June Stansbury is here from the Drug Enforcement Administration, as a co-host. Senator Steve Tolman, thank you for your commitment to this program, for being its inspiration and for co-hosting this event and Shelia O'Connell from your office who has worked to make it such a success. We are delighted to have Commissioner-Designate John Auerbach, the Executive Director of the Boston Public Health Commission, to be here today and we also welcome folks from Blake Works. Bruce Tobey who is on our Board, and Deirdre Savage, I'm delighted that both of you could be here today. Peter Sack who works with us and I think just about everyone in this room has heard from Kettie MacLean, Kettie where are you? She's been working very hard. Allyce Najimy who is also with us who has worked very hard to make this event a success today.

We would also like to extend a very special warm welcome to the Levine family who you will know by noon today. Many of you already know Dr. Herb Levine, Susan, Joel Levine, we welcome Jillian Levine, Joel's sister and Lisa, Joel's girlfriend.

A warm welcome to Trevor Tyrell who is here and Justina Heyward, his mother. We are delighted to have you with us. You will be hearing from them as well. We also welcome Jim and

Nancy Bildner who you'll be hearing from. Representative Brian Wallace thank you for joining us. He has been tireless in his efforts on this issue in South Boston and throughout the City of Boston.

You are here today, as I am, because we care about the future of our youth. Each of us has tremendous power to help prevent substance abuse among young people. We can save lives. The research is clear. Young people who can talk with their parents or another adult in their life are significantly less likely to abuse drugs. We've read and heard the statistics. This morning we'll hear new statistics about drug use among youth in Boston. But today we are going to get beyond the numbers. We'll hear the heartbreaking true stories of lives that have been devastated by substance abuse. And we'll be inspired by the words of one young man, who despite tremendous pressures in his life, has managed to stay drug free.

These are difficult times for all of us. Young people tell me time and time again that so often they use drugs to try to cope with the stresses that they feel and I know that you agree that we can't ignore our children's needs. Substance abuse is harmful in so many ways. It leads to injury and poor choices. Repeated drug use can change the way the brain functions and it can lead to addiction. It can hurt the user and all of us who care about him and her and it takes from us the people that we love. Thank you again for taking time from your busy lives to be here, I know that you'll gain information, strategies and you'll get tools that you can take back to your communities that will help you work hard to continue your hard work to save lives.

During this Forum about drug abuse with a particular emphasis today on prescription drug misuse, we will hear from leaders in the field of substance abuse prevention, we'll watch our new DVD *Drugs: True Stories*, and we'll hear as a mentioned, from families who know first hand the pain of addiction. Then we'll have an opportunity to ask questions of our expert panel.

In his role as the former Chair of the Joint Committee on Mental Health and Substance Abuse, State Senator Steven Tolman brought enormous attention to the issue of drug use, addiction and treatment and continues to do so. His tenacity and sustained commitment to reducing substance abuse has without question saved lives of young people in Massachusetts. Here are just a few of his achievements – achievements made possible by his leadership. The Woburn District Court – Heroin Education Awareness Task Force received \$400,000 to educate the public especially parents about the

extent of heroine use and abuse among young people in their community. CASA Start which is a state-wide community based school center program designed to keep high risk pre-adolescent eight-to-13 year olds, and I argue that all eight-to-13 year olds are at high risk, free of drug and crime involvement. This organization is being supported with a \$750,000 state grant. The Bureau of Substance Abuse Services will soon be able to offer more step-down beds providing people who have completed detox with additional medical care and support. In short, Senator Tolman, you get it. Let's welcome him please. (Applause)

SENATOR TOLMAN:

Good morning everybody. GOOD morning everybody. (It's like Church!) Now first of all I want to clear up one point that Jeanne said is you know, and thank you for the very kind introduction but, nothing in the legislature is accomplished by one person. It's 200 legislatures, 160 members of the House, and 40 members of the Senate and without them, none of this would have been possible but we did increase the money for the Bureau of Substance Abuse, who I'd like to say affectionately has been lead by who I call the Commissioner Michael Botticelli. I can say that now. Now additionally, we all know of the Red Sox, and probably our two favorite players David Ortiz and maybe Manny Ramirez, well let me tell you in the House, ladies and gentlemen, we have two all stars. There's a lot of people that work hard on it but Brian Wallace from South Boston and Marty Walsh from Dorchester. Is he here yet? I know he's coming down. A hand for Brian Wallace please because and Marty Walsh. I can tell you that there are so many legislators that are focused on this issue that we're here to gather on and talk about and learn about this morning because the Senate President and the Speaker of the House had this concept of developing a committee specifically directed to address the issues of mental health and substance abuse and if you think about it, for years all of the issues that we've kind of galvanized and focused and keyed up and gotten ready to address, were always kind of lingering on the back burner of the Criminal Justice Committee, because that's where so many of the people lived up in the criminal justice system, or in the various health care committees or in the judicial committee, but because of their foresight, we have established a committee on mental health and substance abuse and it has taken every single issue that we care about and moved it to the front burner and for that we

should all be very, very grateful because it isn't about one legislator, it's about 200 legislators and when I tell you there are a lot of heroes in this room. There are a lot of heroes. When Jeanne Blake, when I saw Jeanne's video on alcohol, which was very, very powerful and we were in my office and we were talking and we were talking about the prescription drug abuse. And without missing a beat, she said to me, Steven, you're right. We have to do something like that. Well, in less than a year here she is with a product addressing probably what I consider the most important issue that any of us could face because the level of addiction in Massachusetts is through the roof. I refer to it as a silent epidemic. We talk about the perils in the community with Oxycontin, I gotta tell you I said early on, it's not a gateway to heroin, it is a rocket ship to heroin. And unless we react, we are going to lose the war. And you know what folks, the legislature has reacted, the judicial system is reacting, the criminal justice system is reacting and together, if we work together we can stem this kind of addiction by educating, by educating that's the goal. That is the goal.

We gotta get into the schools. We have to get into the judicial system. We have to get into the criminal justice system and we have to let them know that yeah, there's a level of addiction, but we have to treat them as sick people. It's people that need a helping hand like it's heart disease or like it's a broken arm. We would never turn our back on them. Who would you turn your back on when you see somebody with a terrible cough and can't breathe? Immediately, you take them to the hospital. But when we see somebody with addiction, we want to help but what kind of stumbling blocks do we run into? Let's think about one in particular that really got my claw I'll tell you and it's the health insurance companies. Blue Cross/Blue Shield in their own study did a study on the cost of health insurance and between 1991 and 2001 private insurers for health care decreased. Now, think of that. '91-'01 private insurer's commitment to substance abuse treatment decreased 1.1% each year. At the same time public pay increased. Think of this 6.8% each year. Now if I was saying that statistic, I wouldn't believe it but this is out of an insurance company's study. What are we doing about it? There should be a revolution about that. That is unacceptable. I can't tell you how many moms and dads I know that have invested their retirement. Taken it out and invested it to try to help their child who's sick and in many cases it wasn't successful the first and second time because we know it might take three times, it might take four times and at that point, if the insurance companies are turning their back on us, what

happens? How many people having had that opportunity to be able to do something about it? We have to change that. We have to change that. And who's bearing the burden? Who's bearing the burden?

Think about who's bearing the burden? The State of Massachusetts has picked up 75% of the cost of substance abuse treatment in the Commonwealth of Massachusetts. Now, are we picking up 75% of healthcare? Absolutely not. Absolutely not, but we are for substance abuse. Ask yourself why? It is unacceptable and it is another area that we have to change especially as we move forward to address this most serious concern. And I talk about it when back in the late '80's and 1990's, you could get a person who was sick, you knew that they had an addiction, 30 days in a treatment center and by and large you had a great success rate. And what has happened since then, they want to talk outpatient. Seven-day outpatient. They want to talk all these other different avenues that are not successful. So, I went on a tirade, I'm sorry. (Applause). I am still a member of the Mental Health and Substance Abuse Committee and I'm delighted for that and I would like to welcome the Chairs, I know Ruth Walzer and Senator Candaras would like to have been here, if they could have been here. But I'd like to thank Jeanne for all of your work, dedication, commitment to this endeavor. Jeanne Blake is an All Star. She's worked as a medical reporter, as an author and her role as a faculty member at the Division on Addiction at Harvard's Medical School, have provided the Commonwealth with an invaluable asset. Jeanne's intimately familiar with the challenges that young people face and no one is more equipped to reach out to them than our very own Jeanne Blake. Massachusetts today is experiencing an epidemic in prescription drug use. The likes of we've never seen before. It is so critical that we send a clear message to our young people that the dangers of substance abuse is far, far too extensive. We are losing the war. Our young people need to know that the misuse of prescription drugs is not just dangerous, it is a step on the path to destruction. So many of our young people have started on the road to addiction with casual use of prescription drugs and all too soon they turn to street drugs that will forever change their lives. This trend has become a silent epidemic and a disease that is in every one of our cities and towns and some the devastating statistics of overdose are beyond your wildest imagination.

Largely fueled by OxyContin and heroin, this epidemic has shaken the foundations of our communities. It knows no age, gender or social economic boundaries. It's breaking parents' hearts, it's ruining good families, and it is killing many of our loved ones. Even more shocking is that during the time of this skyrocketing opiate addiction, the rates, addiction rates, private insurers drastically reduce their payments for substance abuse treatment. By 2016 healthcare will represent 20% of our gross domestic product with all the money we spend on healthcare why are health insurances pulling coverage for substance abuse and more importantly, why are they getting away with it? We must put pressure on the companies so that people struggling with this dreaded addiction can receive the medical treatment that they so deserve. We have started to fight back strengthening the recovery infrastructure providing resources for those on the front lines on the war of addiction. We in the legislature will continue to fund these programs who give addicts their lives back and treat them as somebody who was ill not just inappropriate. Recovery is only one side of the equation. We must work hard to invest in substance abuse education, innovation treatment, and intercept these drugs before they get our loved ones. The DVD that Jeanne's organization has put together will address in no uncertain terms the threat that prescription drugs face, impose on our young people. To combat this surge of substance abuse, we must not only reach out and educate our young people we must educate our parents, our teachers, our law enforcement officials and our legislators. That is exactly what this DVD is intended to do. To let the people know what we are facing so that together we can work cohesively to address this very, very serious problem and reveal the truths and dangers behind recreational use of these substances. And believe me, I know, because I've seen the progress that we have made in the last couple of years, but beyond my wildest imaginations I would never have expected to learn the level of addiction that we have in our communities and we must not shield it, we must not hide it, we must look it straight in the eye and address it, because if we do that together we can, we can wipe out this problem. We can address this problem of working with New Beginnings, working with educational programs through the Bureau of Substance Abuse and most importantly folks, working with the new administration in the corner office who had the foresight to appoint as his new Health Commissioner, my hero, John Auerbach and I mean it. So thank you all very, very much.

Thank you Jeanne. Thank you all very, very much and I tell you what that applause should go to the leader right here, the brainstorm behind putting this educational tool together, Jeanne Blake, thank you.

JEANNE BLAKE:

Thank you Senator Tolman. You know what's so fabulous, well first of all I'm going to correct a mistruth a little bit later. I won't let you get by with that. But what I love today is looking around the room, we all know it will take a comprehensive effort to reduce underage drinking and the abuse of other drugs in our communities and what's so fantastic as I look around the room, I see law enforcement represented. I see education, policymakers from across the State, public health leaders from across the state, and there are parents here. We know that we all must work together. I also want to welcome Patrice Tierney. We all know that Congressman John Tierney has his hands full in Washington these days, so Patrice thanks so much for joining us.

John Auerbach's appointment as the Commissioner of Public Health for Massachusetts is nothing short of a gift to the people of Massachusetts. No one in the Commonwealth, and I argue from my travels as a medical reporter - across the country, does more to bring vision, compassion and commitment to protecting the public's health and I know that you agree with that. John has been fearless in taking on the tobacco companies to make the City smoke-free. His report with the Mayor's leadership on racial and ethnic disparities in health and healthcare was groundbreaking. And Boston, because of John Auerbach is taking the lead on mental health issues, funding and making viable neighborhood coalitions that do such important work on this issue. And now John will bring that vision to the Commonwealth. Commissioner Auerbach.

JOHN AUERBACH:

Good morning everyone. I'd like to start this by saying, for the time being, I'm still Director of the City of Boston's Health Department and so I'm going to begin my comments in that role although I very much look forwards to taking on the new role of State Health Commissioner which I will do in early April. In that capacity and the capacity of working in Boston, I just want to start by bringing greetings from my boss Mayor Menino. The Mayor has been an unflagging supporter of efforts to try to address

the issue of substance abuse and he has given us at Boston Public Health Commission the resources and the vision to develop a range of different activities and I'll talk a little bit about what some of those are in a minute but I also want to begin by saying how important I think today's event is. Jeanne Blake has done groundbreaking work in terms of developing educational materials on the issue of substance abuse and Jeanne thank you for the work that you've done in the past and I know that this material that we'll be seeing today that the latest DVD is going to be as excellent as the materials that you have already done and as useful, And I would just share with you we have used those materials in coalitions and in schools in Boston and we have found that they have been extremely important because one of the things that we do know about substance abuse is prevention can work. And so if you talk about it and you provide people with the tools and you give them the stories of people who have experience it, it makes a difference. And so talking about it, educating people is extremely is extremely important and you can't do that unless you have the tools and Jeanne Blake gives us the tools. So Jeanne thank you. That's important in this battle against substance abuse, and I would just say it's also an honor to speak following Senator Tolman because in addition to knowing that prevention works, we know treatment works. But saying that and not having the resources to be able to offer treatment, you know, can be heartbreaking and for many years, in Massachusetts, we didn't have the resources to be able to deal with substance abuse treatment and we saw half of our detoxes close in the State, just a few years ago. We saw devastating cuts across the board in terms of substance abuse prevention and treatment efforts. Then Senator Tolman and Representative Balzer took on a brand new committee that was formed in the legislature to focus on substance abuse and mental health and I remember meeting with Senator Tolman and he said, "We're going to turn this around." And he was talking about, I think the first meeting I met with him, he was saying we're going to add \$20 million to this budget and I thought, \$20 million who's he kidding? The legislature is never going to approve \$20 million. We'd be happy if they approved \$1 million. He said, no, no, it's going to be \$20 million. I thought, you know, couldn't happen. With his leadership, \$20 million was passed to supplement substance abuse! In one year, \$20 million of additional resources (applause) thank you. That's historic. That's historic and that's an illustration too of the, in addition to the prevention working and treatment working, leadership works and

his leadership and the other leadership in the legislature and Jeanne's leadership in terms of developing materials is critical in terms of fighting this epidemic.

So when we knew that this was going to be unveiled today, we decided that we also wanted to use the opportunity to share some information that we've been gathering. One of the things that we've been doing at the Boston Public Health Commission is trying to get more regular reports that come out which document what's happening in substance abuse because having the information concretely is critical for this fight. You hear a lot of anecdotal information but you want the hard facts and so we've worked very closely with Michael Botticelli at the State Health Department to gather as much information as we can gather about substance abuse, looking at treatment, looking at hospitalizations, looking at deaths, looking at emergency medical transports and ambulances, police reports and we put that together to get the picture of what we are facing. And this year, in the report that we're releasing today and there are reports that are available at the desk if you haven't received them, we are releasing this today, we're seeing some bad news that we already know about but we are also seeing some promising news.

And I'm going to mention just three things. One thing that we are seeing when we look at heroin use, what we're seeing is that heroin use is still at historically high levels. That we're seeing continuing to see fatal overdoses, we're continuing to see high levels of hospitalization and high levels of treatment. But the good news is, for the first time in several years, we're beginning to see a slight decrease using a number of indicators in terms of treatment admissions, in terms of the percentage of people that are calling to the help line that are saying this is the drug of choice that they are concerned about in terms of some of the police reports.

So we haven't turned the corner yet, but we are beginning to see the peak is now decreasing somewhat and we are hoping that continues. Now, I'm not saying that because I think the problem is over. The problem is still there. But I think part of the importance of looking at that beginning decline is an indication of what we've been saying for years, when you put the resources there, you can see a difference. When you begin to restore the treatment dollars, you begin to see a decrease in the problem. When you focus on prevention you can begin to see a decrease in terms of young people who are beginning to use. So we see this as very promising both because we want fewer people to be

using heroine but also because we think it confirms that when you put the attention to it and the resources to it you begin to see that trend. And we think if the pressure is kept up, if the money is still there and if the efforts continue we'll see that line go down and we'll monitor it closely and we'll give you that information.

Now the second point is that we looked at is the prescription drug abuse and we've looked at it again from all those different sources and we didn't see the same kind of the beginning of a decline with prescription drug abuse particularly OxyContin. What we did see was a leveling off. A leveling off is better than an increase and we've been seeing increases in terms of deaths and use and reports so seeing it leveling off is promising. Again, it's promising but it's clear to get that to begin to decrease it requires our continued attention.

And the third point I'll raise is a reminder about why this is so critically important. We've monitored the age of the people that are coming into treatment for heroin addiction or for addiction to prescription drug use that are opiates. And what we've found is over the last five years, just over the last five years, the percentage of people under 30 who are coming into treatment has increased from 28% to 39%. 39% now of the people that seek treatment for heroine addiction or for prescription drug opiates are under 30. We wouldn't have seen that five years ago. We wouldn't have seen statistics anything like that five years ago, 10 years ago. We would have seen a much older population and so that is a reminder to us that we have to focus our attention on young people. We have to focus our attention on teenagers and on young adults.

Those in some ways are the most vulnerable population and so our efforts particularly around heroin, particularly around prescription drug opiates like OxyContin have to have that youth focus. And again, this DVD that we are going to be seeing today has that youth focus and that's one of the reasons it's critically important.

I want to mention just a couple other things that the Mayor has done which we think also have contributed. The Mayor has funded in the last few years, grassroots coalitions in the neighborhoods of Boston. Seventeen of those now exist. And those coalitions really grew out of the fact that we were hearing more and more from young people, parents and community organizations who were telling us, you've got to do something. We're seeing things happening to our family and we need, we need more

assistance. And what we found was providing some assistance and guidance to those community coalitions has meant an enormous difference and some of the folks are here from the “No Drugs Coalitions” which exist now in the 17 different neighborhoods and I would applaud their work. These are efforts on a day-in-day-out basis are doing evening forums are reaching out to parents and providing those critical support groups for families that are trying to figure out what the next steps are and I applaud the Mayor’s vision in terms of supporting those and making sure that those grassroots efforts are able to do the work that they are doing.

And finally I just wanted to say, for more than nine years I’ve had the honor of working for Mayor Menino and heading up the City of Boston’s Health Department and have appreciated the opportunity to work on issues like substance abuse services. And, as I said, in April I’ll be starting as the State’s Health Commissioner and I’ll have the honor of working for the Patrick Administration and for Secretary JudyAnn Bigby. Both of those leaders really understand the issue of substance abuse and when I was interviewing for the job, I heard very clearly that this is a top priority for this administration that they want us to work diligently to get more money into treatment, to be more creative and resourceful about the ways of tackling these epidemics. And so in closing, I want to make a pledge to those of you who in the audience who are either in recovery yourselves or have a family member or a loved one or a friend that is struggling with the issue of substance abuse, I pledge to you that the Department of Public Health is going to do everything it can to make the issue of substance abuse a top priority. And we’re going to do everything we can to creatively tackle this epidemic so we apply the science of fighting substance abuse, the creativity of the marketing campaigns that need to occur, the tools like Jeanne’s tools, we will use well the resources that Senator Tolman and the other legislators give us. We will make this a top priority for the Commonwealth of Massachusetts and the Department won’t rest until we see a significant decrease in the epidemics of substance abuse. Thanks very much. (Applause).

JEANNE BLAKE:

Thank you John.

Just a little bit of background on *Drugs: True Stories* before we watch the DVD. All of our programs have emerged one out of another, it almost feels by accident and we had, as Senator Tolman

indicated, produced *Alcohol: True Stories Hosted by Matt Damon* about underage drinking. Senator Tolman and I were -- as a reporter I really do remember exactly what was said Senator -- so this is how the conversation went that day in your office: We were discussing *Alcohol: True Stories* and *Steroids: True Stories* and he looked me squarely in the face and said I wish you'd do something about OxyContin. So of course, the seed's planted, because so many people from across the country had asked us whether we would consider producing a program in the format of *Alcohol: True Stories* about drug abuse and as I had said to myself 15 years ago when we produced our program about HIV, we're a trillion years into the drug epidemic, there are national organizations committed to this. Is there really a need? That night Larry Kessler, whom so many of you know and love, called me and said you need to be working on something on Crystal Meth. I thought well, this is a coincidence. So I put down the work that I was doing on healthy weight, which we'll finish this summer, and went to work on *Drugs: True Stories*. I really did intend to cover a variety of substances, and we do in the *Words Can Work* booklet that you've been given a copy of ----- and with the generous support of Assistant Commissioner Botticelli and the Bureau of Substance Abuse Services, a box of the booklets as well. There are the stories of almost every drug.

When I met with Joel Levine, who I've read about, and I walked away from that lunch thinking is he for real? And he is for real. And I left that making a decision that I had to tell his story and then I met his mom and dad and his sister and I said, you know what, there is really no room for any other story because, well, you'll see of all of the issues that we touched upon. And so I want you to listen carefully and you will hear about substances in general with a particular emphasis on the misuse of prescription drugs and that's an important note. The other thing that's so important to me through the last 12 years in the work that I've been doing, I've been focusing on the importance of reaching parents. So this booklet is designed to be for parents and for young people. You will hear the messages in the DVD that are for parents and are for young people. Bill Gaine, during our expert panel, will talk a little bit from his post and knowing educators across the state and doing so much to help them understand the ways that parents and young people can be reached about how these materials can be used. But I just want to mention that on every DVD there's a discussion guide that has questions for young people and for parents. So as this goes back into your community, I hope that you will convene - and I know

it's not always easy to get parents together - that you will find ways to bring parents together to open up a dialogue about these important issues.

We do work in corporations, we do work in communities, and I hope that you will understand how these tools can be used and Bill will shine a light on that in a bit. I want to thank Dr. Howard Shaffer and Dr. Brian Johnson both from Harvard Medical School. Dr. Shaffer is the Director of the Division on Addictions for being I'll say both at my right hand as I produced these. I am a layperson. I am so blessed to work with the leaders in the field and I have driven them crazy with emails and phone calls at night, on the weekends and they're (he's smiling because he knows I'm right). We know, and you know what, they appreciate the fact. They understand that one word in a sentence can change the meaning of a sentence. So my first goal, and they know this, is to do no harm in any of the materials that we produce so they are so generous with their time and their expertise in making sure that what we produce has gone through their filter and has the absolute best opportunity of making a difference in the lives of young people and families across the country where they're distributed. So without further adieu, I'm going to put on my glasses to make sure, oh, and I just want to mention this, if you've got a pen, it's easy to remember, Dr. Shaffer's got this beautiful website called.

<http://www.expressionsofaddiction.com>. It is a phenomenal cutting edge look at addiction and you, just, just take a look at it and he's doing a beautiful job with his photography in bringing addiction into a new light. And so once again, expressionsofaddictions.com. So Dr. Shaffer and Dr. Johnson thank you once again for always being there and making sure our materials are as close as they can be to really doing the job they're intended to do. I also want to thank Michelle Gavin. Michelle thanks.

So here's the story of Joel and Susan and Herb and Jillian and Justina and Trevor - their true stories.

DRUGS: TRUE STORIES DVD RUNS

JOEL LEVINE:

Thank you very much. Jeanne just wants me to speak for a minute and a half. You know, I had a long struggle with drug addiction and I got into a program that focuses on the solution of my problem.

My problem, being drugs and alcohol, and basically how to live life. I wasn't very good at living life. I wasn't good to my family. I wasn't a good role model for my, for my little sister. I wasn't a good role model for anybody. This program showed me how to, how to get on the right track and how to live life and basically via the 12 steps of Alcoholics Anonymous, the 12th step is to help other drug addicts and alcoholics find the same solution as I found and that's what I do with other drug addicts and alcoholics. The reason why I did this video was, well first off, the first time I met Jeanne she bought me lunch at Legal Seafood so from there I was gonna do anything she asked me to do. But um, I found this video to be very good towards younger people, kids in high school who haven't yet made the same mistakes that I made. Try and shy them away from doing the same types of things that I did and show the consequences of doing all the things that I did. Like I said, it was a long struggle, but you know, I don't regret doing the things that I did because now I'm in a position to help so many people because there are so many people, there are so many people addicted to these drugs and addicted to alcohol and it is a struggle and I have a way out to help those people and you know, this video shows not to do the same things that I did. And that's all I'm gonna say, thank you guys very much.

HERB LEVINE:

My daughter Jillian and my wife Susan are in the audience. (Stand up). I'd like to congratulate Trevor and his mother for what a wonderful story. And one of my best friends is the vice President at Berkeley, if you have any trouble over there, you let me know.

I'd like to take the opportunity to recognize some folks that are here through the tremendous efforts of Steve Tolman. Senator Tolman and former lieutenant Governor Healey and so many people who come to work here every day. Through their efforts and Steve's leadership, we've been able to establish recovery high schools, three are open in the state and Michelle Lipinsky is here, who is the principal of Recovery High School in Beverly. Roger Oser is here, who is the principal of Recovery High School in Boston. I don't believe the folks from Springfield are here, I'm not sure, No. But we're very pleased to let you know that we're dealing with nearly 100 kids right now in those three schools who are committed to recovery with State support and thank you Steve for all of your efforts. Thanks to Mike Botticelli for his efforts and support and I would be remiss if I didn't thank Greg Hughes who from

the very beginning of this recovery high school effort through BSAS, he was really the straw that stirred the drink, made sure that we were on track and kept this process going, we worked on it for over a year. So I'd like to thank Greg Hughes for all of his efforts.

Jeanne Blake understates the degree to which she is a pain in the neck. She is so committed to her projects and the phone calls are regular. Every morning Joel would say, guess who called me today already? Or I would say: guess who called me today already? But without her commitment to these projects, they would not be the kinds of projects that they wind up to be so congratulations and thanks to you Jeanne. (Applause.)

This little eight-year old boy in New York and his father says to him, son for your birthday we're going to take you to the biggest sports store in New York city and sure enough on his birthday, there they go. And the whole family goes to the sports store and dad says you can pick out anything you want. About 15 minutes goes by and the little boy finds his sister and says sis I've decided to become a Red Sox fan and I've decided to take home this nice Red Sox jersey. His sister gives him a whack on the back of the head and says, that's a disgrace go find your mother. The boy goes and finds his mother and he said mom, I've decided to become a Red Sox fan and want to take home this nice Red Sox jersey, she gives him a whack on the back of the head and says that's a disgrace go find your father. He went to find his father and he said, dad, I've decided to become a Red Sox fan and I'd like to take home this nice Red Sox jersey. He gives him a whack on the back of the head and said that's a disgrace, go put the shirt back on the rack, we're leaving, you've lost your privileges here today son. About half way home the father turns to the little boy and says son, did you learn a lesson today? The little boy said, I sure did dad. He said well share it with the family. He said, well I've been a Red Sox fan for less than an hour and I already hate you Yankee bastards. (Laughing). It's been a pretty serious morning, I just thought I would tell that joke.

My family decided to go public with our story and especially from my viewpoint because from the perch of being the superintendent of schools I knew that I would reach a lot of people. Some people would come for morbid curiosity. Others because I held the superintendancy. And others because they truly were interested in the story of drug addiction and we have reached a lot of people. We are going to reach so many more people through this DVD. It was a struggle to come to the

conclusion to go public. My family is a very private family like most, my wife particularly, and we struggled as a family as to whether or not to share this publicly because there was a risk involved particularly for Joel. Joel has shown us so much courage in not only getting better but in being able and willing to share his story and do the work that he's doing with other people who need his help. So to Joel, my son, thank you for all the work that you do. Thank you for your courage and thank you for your love. Thank you very much, I appreciate it. (Applause.)

JIM BILDNER:

So, I've been like all of you, listening. But unlike many of you wondered "why am I here?" In fact, the just-retired principal from Manchester/Essex Regional High School which is the town that I grew up in, not knowing my story, said well, Jim I saw your name on the program, why are you here? And the answer to the reason why I am here is because my son, our son, my wife's here with me, died last December '05 from a substance abuse overdose. So watching that DVD, I mean it's our story, it's just a different outcome and just like you and your decision to go public, many of us, there are thousands of me around this country and too many of us take that loss and are unwilling to talk about it. And I suppose the purpose that I'm here is to be the exclamation point. This isn't drugs, drugs aren't recreational. This isn't a war that we're winning. And there are fatalities every day, every hour. In the last year alone, there was 20,000 of fathers like me that had memorial services for their kids like mine. And so Nancy and I like Herb and his family, have committed ourselves not to memorialize Peter but to make Peter's death meaningful so that kids understand that they're not playing. This isn't a joke. There are no second chances, often. Sometimes spontaneous recovery takes place. Often intervention is helpful. By the time Peter died, he had been in seven treatment centers – all private pay. Hundreds of thousands of dollars later and drugs are the equal opportunity killer. They don't discriminate. It's in every neighborhood in this Commonwealth, and when Peter was alive and sober he would say to Nancy and I, Put me on any street, in any city, in any state in this country and he could bring back a bag of heroine in ten minutes. And he's right. And one of the things that we're all up against is this is an economic theory at work. Drugs today are cheaper, purer, and more fatal than at any other time. And I wouldn't be doing this fantastic DVD or my own life experiences any benefit if I talked about

statistics because just as the Governor said in the budget address, it's not just behind every line item. There's a human being but behind every one of those statistics. There's some family and as that DVD made clear, when kids choose paths, they're not just choosing it for themselves. Peter left my wife, his sister and the countless friends. And the tragedy of it all is that it can happen to anybody, so in my minute and a half just consider me the exclamation point because our son's gone but he can make a difference. Thank you. (Applause.)

TREVOR:

Hello everybody. It's an honor to be here. I want to thank Jeanne Blake. I also want to thank David Skillicorn, he may not be here, from Sunrise Media, and Reverend Dickerson for making this all possible. I'm just going to be honest. I didn't really prepare a speech or anything, but I have something. Like Senator Tolman said earlier, education is key, right. And like the Commissioner had said, we need to get more prevention programs in our communities to inform different people and different families of the ills and the cons of substance abuse. Right. And by putting these things in place, just as the Commissioner said, it could lesson the issues regarding substance abuse. And um, also, my condolences go to Jim Bildner and your family, be encouraged. And Joel, you survived, you made it and I'm proud of you man. (Applause.) But the fact that you survived means that there's still potential. I believe there's greatness in you and as you continue to pursue whatever it is that you're pursuing you can fulfill your goals. You can achieve your dreams. So keep on keeping on. I'm on a mission to make a difference. As John F. Kennedy once said, "One person can make a difference." And one of the most inspiring things, (I know I've got about one minute left, but) one of the most inspiring things that any of my peers have ever told me, they said, you know what Trevor? You're a businessman. You inspire me and by that very moment I was very touched and I realize I was on the right path and really making a difference in the lives of those around me. But in closing, I just want to let everybody know that it's very important that you realize, well every young person in here, and everybody in general, that every choice that you make will lead to a result. So it's very important that you use wisdom, you use good judgment and every choice that you make now will definitely have an

effect on your future. In closing, I also want to say that you know, it's time now that we justify what's wrong and promote that which is right. God bless you all. (Applause.)

PANEL DISCUSSION

JEANNE BLAKE:

Thank you everyone for your wise words and we're going to now have time for our panel. I'll introduce them as they come. I think that you know most of them. Michael Botticelli, Assistant Commissioner of Substance Abuse Services with the Department of Public Health, June Stansbury, Special Agent in Charge of the DEA, Dr. Richard Falzone, who is with McLean Hospital and of course, you know Dr. Levine and you know Jim Bildner. And I'd like to start this out, Dr. Falzone, I think I'll start with you. You treat so, and we'll have time as I said, we are going to end at noon because many people will have to leave but we will have questions from the audience as well, but Dr. Falzone, you treat families, you see families, you try to get to the core of the issues of young people living with substance abuse, the Levine's were, as Herb said in the film, in the middle of Joel's progressing addiction for seven years, or six years, before they really knew what was going on. This is not uncommon. What words do you have that we can take back to the parents with whom we work to help them identify them, be honest about them and then take action?

DR. FALZONE:

First, thanks for this brilliantly produced and very hopeful piece. I'm going to use it and pass along to families. I think it illustrates very nicely the progression that goes with addiction, and I like the comparison somebody made earlier to a cancer, I think seeing it as an illness like that can take a lot of the unnecessary emotion out of it and get to treating it. Like a cancer, it can go a long time undetected and so I think there needs to be an assumption these days that kids are going to be offered and have access to substances at a very young age, certainly as early as elementary school.

The data shows that the risks that a kid will get offered something increase markedly between the ages of 12 and 13, so as a parent I would assume that the child is going to be exposed to

substances and really take an active role; establish a culture of closeness and communication. When your kid comes home, hug them, smell them look in their eyes, just make it a habit starting from when they are very, very young.

Thank you.

JEANNE BLAKE:

June Stansbury, Special Agent in Charge, what is the DEA doing in terms of the trafficking specifically around controlled substances like OxyContin? What action are you taking to try to stem the spread of the epidemic of OxyContin prescription drug misuse in the North East region?

SPECIAL AGENT IN CHARGE JUNE STANSBURY:

I would also like to thank you again for putting this on. I think this is really, really great. And I should say you all saw her come up and whisper in my ear so she already gave me the hook before I got started. I wanted to spend about five minutes so I'm going to try to talk very quickly. The first thing I want to do is introduce the people I have here with me just in the event that there's something that I say that you want to follow up on. I have Nancy Coffey, (they're sitting right there) she's our diversion program manager, and Mike Varnick, he's the group supervisor of the support unit and Tina Murphy who is the prevention specialist that we have and she gives a lot of presentations. I was certainly disheartened by some of the things that I heard today especially as it relates to the supply of prescription medications on the streets of New England and across the United States and the main thing I want to say about it is supply is fueled by demand and certainly we've heard the story of Trevor who has made the decision not to ever use drugs and we've also heard the story of Joel who used drugs and stopped and that's the message I like to get across to everyone here. If we want to affect the supply of drugs on the streets of the United States, we have to do something about the demand and if you don't do it necessarily for yourself, think about the other people who wouldn't necessarily have to make that decision of the drugs weren't out there.

We have basically three types of drug dealers that are dealing pharmaceuticals which is different from a lot of the other street drugs and there lies our problem. We basically have dealers, dealers everywhere. Now with respect to cocaine and heroin and marijuana and all those street drugs,

this is the only way that you're gonna be able to buy those drugs on the street okay. However, as it relates to OxyContin and other prescription medications, you can go on the internet, you can use your credit cards and you can purchase drugs. Now DEA is shutting Internet pharmaceutical companies. Pharmacies. If you haven't seen a doctor, and this is for everyone here. If you have not went in to see a doctor and gotten your prescription from a doctor, you have no business buying pharmaceuticals on the Internet. It's illegal, okay. We also, we have the situation where people are doctor shopping, they're going to the doctors. They're giving them erroneous information of those doctors who will give them prescriptions. So we have prescription fraud and then people are able to use their medical cards to go out. So Senator Tolman brought up this issue as it relates to reductions in treatment, maybe if we could find some of that money that's being used by people fraudulently in order to get OxyContin, that might free up some monies, because anytime there's anything that's fraudulent or thefts it affects the entire system. What DEA is doing, some of you have before you or hopefully everyone got it, we have a website called justthinktwice. It's designed for teenagers to go online and learn more information about drug abuse and how to avoid it and it's designed specifically for teens so we would welcome that you would go on that site. That's part of our educational efforts. We send people out to give presentations to talk about various things. We are shutting down the Internet pharmacies. We just had Operation Lightning Strike taken down in January of this year. There were eight pharmacies operating on the Internet based out of Florida that we were able to shut down. We know that they were diverting hundreds of thousands, even millions of tablets that were going out. We also have street dealers. I think that Oxycontin has basically reached street status. If you go and try to purchase marijuana or heroin, you can usually also from those same dealers, also get OxyContin. So there are three types of dealers out there. There are computer dealers and also we have the street dealers and also we have doctor dealers. You also have a story before you where most doctors are good, but we do have some doctors that will divert, the story you have before you is about a doctor out of Florida, he actually created addicts, he got heroine addicts to go out and find people who wanted prescription medications without prescriptions. He had them come in, he gave them prescriptions and then they started to use. He even exchanged sexual favors for his kind of a thing. So, we had a doctor here in New England

that we were able to shut down as well. I know that the time is up and I'm talking very fast so if anyone has any follow up questions feel free to see me or one of my staff. Thank you.

JEANNE BLAKE:

Thank you June.

While I ask Assistant Commissioner Botticelli a question, I invite you to begin to raise your hands if you have questions for any of our experts.

Michael, the state has obviously, we've been hearing that we're doing better in reducing substance abuse among our youth than a lot of other states, most other states. Let's talk just a little bit about what you've done that's working and what you think still needs to be done that all of the communities that are represented here can engage in?

MICHAEL BOTTICELLI:

Sure, just echoing the sentiments of my folks, I want to thank you Jeanne. I had the pleasure of working with our new Commissioner when he was Director of our Aids division and you were one of the few medical reporters willing to talk about it at that point and your willingness to continue to talk about difficult issues as well as our parents is vitally important, I think if we're really going to make an overall impact dealing with the stigma of this disease is tremendously important and I really applaud that courage of our parents, and Joel and in Trevor to talk about it because that's really what's going to change the conversation. You know, and I will say this, that Senator Tolman, you know, we would not be able to do this without leadership and finances and resources and that's tremendous as well as really you know, I think echoing the theme that if we're really going to make a change it's not just about what the Department does or the Bureau does it's really about how we collectively do this epidemic and you know, we have now a Governor's interagency council focusing on how each agency responds and criminal justice systems respond to it so I'm really excited. You know, one of the things that we've talked about, you know, we have been partnering for a long time in terms of, of trying to deal with some of those issues and on the prevention side do sponsor community coalitions because we really feel like that's where the heart of the matter lies, that if we do our job as a Bureau, or it's really providing those

communities resources to do that as well as some prevention materials and you know, one of the things that came out in the video was I think Joel saying that he got a prescription out of the medicine cabinet and you know, that's a very common occurrence and you know, we publish the material about how to safeguard your house and it talks about proper disposal. But you know, part of what we've done, really first and foremost, is now we have a continuum of care particularly for adolescents. We know that that's the case. And we really need to revamp our services, so in addition to prevention programming we have now have early intervention programs. We have youth residential programs. We will be opening in April probably the first in the country Youth Stabilization Program for kids and families who are in crisis and we have Recovery High Schools so we are beginning to see a continuum of care and you know if you talk to some of the kids in our recovery high schools who have gone through our residential treatment programs and now going onto college, it's really moving so I applaud it. We've been able to really expand treatment resources. But one more thing Jeanne, and I think one of the things and I think we've been focusing a lot on parents. But I think we've got to talk about the medical community and the medical community's role here. There was an alarming statistic that I ran across. 82% of our physicians fail to talk to their clients about alcohol and other drug use. 82%. You know and part of this is, you know, and this is physicians are not trained in medical school to talk about it, they're afraid to talk about it and if we really want to do a better job at picking up people early before they become addicted, it's not just the parent's responsibility, it's our collective responsibility including the medical community and part of what we've really been trying to do is focus on training physicians around screening and brief intervention. So let's pick up kids and early adults before they become addicted when we know that treating them is better and it's cheaper and we get better outcomes, so that's a big focus of our attention.

JEANNE BLAKE:

Thank you Michael. That's exactly why on the front cover of the *Words Can Work* booklet it says for young people, parents and for caregivers and I appreciate you underscoring that. It goes back to what I said about it requiring a community-wide effort. Anyone who comes into contact with young people. Just a quick correction. Joel purchased his OxyContin in the hallways at school not out of his

family's medicine cabinet. But I was speaking yesterday with a friend who's living with cancer and he's using OxyContin and I think it's important for all of us um to um, remind people that when, because people aren't thinking about it, that when their prescription is no longer needed to make sure that it gets flushed down the toilet and it doesn't end up on the street where it can harm someone rather than do good like my friend who is living with cancer right now.

QUESTION:

Good morning everyone. I'm Kirk Womack from the Salvation Army, South End Branch, I'm the Bridging the Gap Teen Director there. With the rise of so many of these situations recurring all the time, do you all think, I just wanted a brief opinion um about putting health back on the top of the curriculum in schools where they're teaching them more life skills and health skills and things like that you know to get them educated more at a younger age instead of waiting until they're 16, 17 where they've been listening to their parents for the last four months or the last four years because their parents don't talk to them about it so their parents have been teaching them so how do you feel about placing health as one of the top seats in the curriculum now? (Applause).

HERB LEVINE:

I think that you bring up an excellent point as we have come into the accountability world. Health isn't one of the things that's tested on MCAS. Sometimes it suffers because of that. We do need to put emphasis on health at all grade levels, from elementary as has been mentioned all the way up through high school but we need to do more and I'd like to at least stir some debate with the following remarks. We don't do enough in society to tackle the issue of drug addiction. We don't do enough in schools. You know, as a principal, I was a principal for 19 years and a Deputy Superintendent and Superintendent, I spent most of my adult life building bridges and trust with students and five years ago, three years ago, I might have believed the same thing about how important that is and don't invade their privacy and build their trust. Well you know what? I've realized going through the addiction in my family, that how much trust does a 13-year old need? How much privacy does a 13-year old need? We're not doing enough to get to these kids early. My suggestion

would be that we write a law that says that every teacher and every administrator in this state be trained to recognize the symptoms of drug addiction and upon reasonable suspicion, recommend that student be tested by a nurse or a professional in the school and if it comes back positive be able to get the parents involved to go to a place where that kid can get help. Not consequential but rehabilitative. I know that people are going to say that invades privacy, and it violates trust, and I watched a video yesterday of a graduate student in one of my courses who did something exactly on this and the kids that were interviewed said that hey, 65%, 70% of the kids are on some sort of drugs in my high school and they're all good kids. They'd get caught and they'd get in trouble. The kids know more than we do. The whoa-is-me attitude about going to funerals of kids who have died doesn't work. Society has stepped in before and said enough is enough. When the carnage on the roads with drinking and driving amongst young people got to the point where something had to be done and we tightened laws and we did invade privacy. On Memorial Day weekend you could be stopped doing nothing to see whether or not you've been drinking in order to stay, in order to keep people healthy and keep people from dying. I know it's controversial but its time has come, kids are dying.

JEANNE BLAKE:

Thank you Herb.

JIM BILDNER:

Having received well over I think at this point 3,000 emails depicting similar outcomes as ours, I think, and I've been on other panels when people have looked at June and whoever the State Trooper is there, and hoped against hope that they can solve the problem I think the one message that might be valuable is that the only person while we begin to fund these issues and work on treatment and help eradicate and reduce demand, the only person that can actually have a meaningful impact at the point where it really matters is a parent. And I know in our case, we just did not understand, as I think even Herb has eluded to that a cell phone, a parent thinks that having cell phones in their kids hands are keeping them safe, but the truth is, and in Peter's cell phone directory when he died is a list of every drug dealer he had had and the truth is, on the internet and on his email was the same thing. So, so

many of us in the desire to respect privacy, have actually enabled our kids to be so close to their dealers and supplies and we can't really look at the June's and the Sheriffs and the State Troopers and hope that they're going to solve it, there is no silver bullet. It's us. It's you and you know, I just can't stress enough how parents really need to understand the dangers that are intrinsic with technology that kids have today that none of us really had when we were their age. Think about a cell phone in the hand of a 12-year old and what access you're giving them.

JEANNE BLAKE:

Thank you.

SPECIAL AGENT IN CHARGE JUNE STANSBURY:

We actually recommend that computers, and that's not just drug enforcement, but even trying to keep your kids out of the hands of sexual predators that the computers are in a common area so that parents can monitor activity that's one way to deter.

JEANNE BLAKE:

Thank you. While I look up Dr. Johnson's brilliant quote in the *Words Can Work* booklet about this very topic and I believe it follows Jim's commentary, which is printed in this *Words Can Work* booklet, I'd like to ask you Michael to address that issues about because it is controversial and I don't want to leave here with it hanging in the air. Your thoughts please about random testing? And Dr. Falzone, I'd love to have you enter into that discussion as well, briefly, because there are some other folks who want to ask questions.

MICHAEL BOTTICELLI:

You know, I think the take away, and I think oftentimes that people look at drug testing as the silver bullet, kind of single strategy that's going to work and I think all of the literature says that drug testing absent a comprehensive prevention and treatment program is really, and I think that's the key that we really have to have comprehensive prevention and treatment programs. You know, and just if I

could just take a minute there are and I think your video articulated these that there are protective factors that we know that work and, and some of those things we've already talked about. Of really your own use has a direct impact in terms of kids' future use. Conversation, they did research, simply having dinner with your kids can be a protective factor in terms of their own alcohol and drug use. Sports and after-school activities. School involvement. Involvement of a caring adult. Lack of availability. Clear limit setting ability. So I do think that there are proven protective factors out there that we can implement either as parents and as a society that work.

JEANNE BLAKE:

Thank you Michael. Go ahead Dr. Falzone.

DR. FALZONE:

Urine testing should be no more controversial than blood testing for people suspected of having diabetes. Um, it really does fall to the parents. If there's any suspicion that something's going on, I have no problem recommending that you have the kid pee in a cup. I send a lot of urine to Quest Diagnostics. It's very illuminating um, and I don't buy the whole thing about invasion of privacy. It's a safety; it's a health issue period.

JEANNE BLAKE:

Okay. In the interest of time I'm going to read Dr. Johnson's quote that's on page 26, there's a difference, and I can't tell you how many people that have already read this have, this is the quote they pull out of this booklet. Dr. Johnson says: "there's a difference between privacy and secrecy. Allowing privacy builds trust. Secrecy on the other hand, means hiding. Kids who are abusing drugs want to hide it. Parents who suspect their kids of using drugs need to check bedrooms, school bags and cell phones for harmful secrets their kids are trying to keep." And then I ask "and when the child claims you don't trust me?" Dr. Johnson answers: "If your child gives you any reason to suspect unsafe behavior you can say: 'I do respect your privacy there's a difference between privacy and secrecy. If I think you're keeping harmful secrets, I need to check.'" Teaching kids the difference between privacy and

secrecy when they're young sets the ground rules. If I see trouble, I'll take action." And I think that I see a lot of heads nodding. It seems to be there's a lot of agreement about that. Anything else from the panel that you wanted to add? If not, we've got two questions in the back.

AUDIENCE QUESTION:

My name is Peggy, and I'm from Health Careers Academy here in Boston and it's not so much a question as a support for your suggestion. I'm not too clear on the testing issue because my students here reacted when you said that. But I am clear that the teachers who spend 6 hours a day with your children need to know the signs so that they can react because that's a lot of time in a given day with a child.

JEANNE BLAKE:

Peggy, thank you for saying that. Perhaps, Michael, you could address what we are doing to educate healthcare providers, um, and also educators about the signs to look for, um, and is Dr. Shaffer here? Dr. Shaffer and I had a discussion yesterday about this, they are not just warning signs for drug use, they're warning signs for underlying depression, underlying other issues. So if you could speak to what we're doing to reach healthcare providers and educators to bring them into this, um, I won't use the word "war" Jim but into the prevention of progressive drug use.

MICHAEL BOTTECELLI:

You know particularly for physicians and particularly for those who are prescribing OxyContin we actually just sent out a physician guideline that talks about the appropriate use and prescription of drugs. How to identify drug seeking behavior, um, because I think again physicians are not necessarily familiar with drug-seeking behavior of someone who might be going from, you know, addicts are crafty people, I'm one and you know, I know that we can do a good job at that. You know, all of our materials are available on line and we actually send them out to every school district and because we want to make sure that teachers have the tools to recognize and also where to refer folks. You know, one of the issues that came up that I think is important that we're actually working on now is a parent's training

that talks about identifying signs and symptoms and what to do if you suspect that your kid is using drugs.

JEANNE BLAKE:

Thank you Michael.

AUDIENCE QUESTION:

Hi, my name is Daniel McLean. I actually support everything you guys are saying. Um, but one of the things that comes to mind is I really feel and I think a lot of people would agree, what he was saying earlier, I don't think the answer was even, though the question was even answered to a point. Like, there should be more health classes in schools everywhere, um, I know it has to start somewhere, to a point, everybody has just so much power and it's affecting these kids to a point where they don't know anything about self-worth and especially in an environment where it promotes fear and doubt and you know, if you don't have this, then you're nothing. You know, you see it on T.V. all the time, radio all the time, advertisement everywhere, it promotes that a lot so it takes a village to raise a child not just a parent so what, what, what can we do to come to a solution to help these children know their self-worth at an early age before they reach to a point of identity?

JEANNE BLAKE:

Thank you for raising the question again. I don't know who wants to take that on? Bill Gaine, perhaps we could ask you to address that because you are out in the trenches with the schools, but I will tell you that Kettie and I and Michelle and Allyce are in the trenches working with schools as well and I can't tell you how often we hear from teachers that because of "no child left behind" and because of testing and the focus on testing that help has basically been wiped out. That there are no dollars for prevention tools. That's why with Partners Healthcare and our other funders, we've been able to raise funds to give these to schools and they're desperate for them. We, Kettie and I get calls almost weekly from schools saying do you have any complimentary materials for us. They do not have the budgets

for them. They will find a way to integrate them into the curriculum if they have the funds. Bill Could I ask you to address that please?

BILL GAINE:

Yes, thank you very much Jeanne. I appreciate those comments because I don't think we can underestimate our own power of influence and we have to recognize our limitations clearly but today's been a reality check clearly. We know what we're up against, but we don't have to continue to dwell on the statistics and the pain. This room is full of the Senator refers to as heroes. I heard Trevor speak of that as well. People who have a tremendous power of influence. We are the influencers to take on those drugs that do the negative influence on our kids. I just to applaud colleagues like Jeanne who take the leadership and have the sensitivity of establishing the events but provide the tools for these heroes amongst us to do the powerful work they can do. My representative association of 370 secondary schools in Massachusetts. Those schools have incredible individuals who care. Incredible individuals who are a power of influence. Yes they need these tools and we're grateful for them. But just to go back and think of something I learned so long ago, the simplest measure that I have to keep reminding myself of when we get to the issue of money is no excuse. There are little eyes upon you and they're watching day and night. There are little ears that take in every word you say. There are little hands all eager to do anything you do from the little child who's waiting to grow up to be like you. Thank you for everything Jeanne.

JEANNE BLAKE:

Thank you Bill.

Just one second Herb. We also get technical assistance from the Centers for Disease Control and Prevention and Chad Martin who is the person who is our liaison read Justina's comments and read Trevor's story and said we need to hear more from Justina because one of the things that Justina talked about so much and the research bears this out is monitoring. The importance of monitoring. And what you didn't hear in the film is how and we wrote a little bit more about it in the booklet in their story, that Trevor really was annoyed with his mother because of her constant calls to "where are you

now, where are you now, where are you now?" But there's data that backs up the importance of that kind of monitoring and being there for your child and always helping them strive for a goal and a dream.

HERB LEVINE:

I just want to react as respectfully as I can to what Bill said. He said something that I think needs a follow up. We don't know what we're up against. Schools and educators do not know what we're up against. We think we know what we're up against. I can guarantee you that we have no clue. Unless you've been through it yourself, unless you've been through it as a family, you do not know what you're up against.

JEANNE BLAKE:

Jim?

JIM BILDNER:

Yeah, that is as true as any statement and I think that one of the things that so insidious about this whether you call it a disease is that the folks that are behind it have no mercy, have no passion. These are cartels, well-developed, this is the most porous disease possible. You stop it in this town, it moves across to the next town. You put every resource that law enforcement can put in one city and it's into another city. There are no borders and Herb is right, you cannot underestimate what you are up against. Forget you, what your 12-year old, 13-year old, 14-year old and then put on top of that the intrinsic desire of a parent. Those words you said which is as long as my son gave me, anything to believe, I'd believe it and then put the power of this awful element in our society and then put the media on top of it and you get a sense of how unstoppable it is. It cannot be solved by funding. It cannot be solved by law enforcement. It can only be solved with a rage that really respects this adversary. It is incalculable to describe. That's all I can tell you and it takes no prisoners as my son is evidence of.

JEANNE BLAKE:

Thank you Jim.

HERB LEVINE:

Just a quote that I say every time I'm in public. Every time I recommend some form of student drug testing and some more aggressive strategy to find out who our kids are, who are in trouble and get them help. Albert Einstein said that the very definition of insanity is to do the same thing over and over again and expect a different result and that's what we're doing in our society right now with drug addiction.

DR. FALZONE:

Probably worth a couple of sentences also on what drives at the psychology behind addiction because that points to the major task of parenting or any type of um, health programs that you might do in school. The things that make an addiction or an addictive behavior continue are not the same thing that got them started, what usually gets kids started is a desire for shared experience and closeness with peers but what keeps it going is trying to regain control over some intolerable emotion so to parents, health programs need to teach emotional awareness that emotions are temporary, you can get through them.

JEANNE BLAKE:

Just as Joel said at the end of the film. Dr. Falzone or anybody else who can answer this question. In the world that our young people live with cell phones they can call and say I'm here and I'm somewhere else. You did that, right, Joel. How, who can answer this question, just a suggestion for parents and other caregivers who are working with parents, how do you monitor a child's behavior in this world where they can call from anywhere and lie about where they are.

SPECIAL AGENT IN CHARGE JUNE STANISBURY:

I can say that we have the technology. I know that my provider sent me something in the mail saying that I can find out where anyone that's on my account is located if I want to locate them.

JEANNE BLAKE:

With the technology.

JIM BILDNER:

You know, I think the answer again is painfully simple which I would gather, I mean in hindsight, we should have seen Peter so much earlier. A parent knows when their kid is in trouble and it's truthfully it's not technology based. You know it, you just don't want to believe it.

DR. FALZONE:

A father in San Diego handcuffed himself to his child for two weeks. That's how desperate he was. That's kind of an extreme case. Start very early. Build a culture and a family expectation that the kid always checks in and a parent needs to know where they are.

JEANNE BLAKE:

But what if they're checking in as in our Alcohol video, the young man checked in "mom, I'm on my way to a party," he was drunk and five minutes later, he slammed into a tree and cut his leg off. He checked in.

DR. FALZONE:

Right, and at that point the cancer is pretty far advanced. I'm talking about early on.

MICHAEL BOTTICELLI:

I want to read a quote by Dr. John Knight at Children's Hospital. Someone who we work with. It says, "Teenagers don't want limits, but they need them. They don't thrive without limits. It's the job of being a parent. It's one's role that is thankless in the short term." You know, there was also an interesting study that came out that said if parents set clear limits with their kids they are less likely to do things that parents didn't even talk about just because they knew their parents would be disappointed. And I think that's really telling.

JEANNE BLAKE:

Thank you so much for saying that. That to me wraps it up. That, that to me is everything. Please read Jim's commentary in the booklet. He talks about how hard it is to be the person, to be the parent who says no and to call where your kid is going. You might be the only parent and invariably when I speak to parent groups I'll ask how many of you call ahead and I don't know why it is, it's always one person, only one and there are a lot of reasons. Parents want to be their child's friend rather than a parent. And there are just a myriad of reasons that parents resist doing that. I think that I heard a real call to action for parents to get involved and we can help them do that. Um, we've got time for one more and I tell you what, did you want to make a real quick comment, really quick because then we've got to go, but we'll be here afterwards and we can chat.

AUDIENCE QUESTION:

Again, I just wanted to say. It's a mixture of everything that you guys are saying but it's also about self-worth. These kids don't know anything about being satisfied with who they are in a society that's promoting that you're not perfect and you need more and they're also going to look for more and I mean, it starts in the home. It's like how can you fight the negativity when it's everywhere. You just have to promote self-worth.

JEANNE BLAKE:

Thank you. Senator Tolman could I ask you to make the closing remarks?

SENATOR TOLMAN:

Thanks for the warning Jeanne, thanks for the warning. You know, you're right and I think I might be able to and maybe I should sing a song. Trevor come on up here. No, I can't sing forever. Congratulations. Well done. You know what, the question that I don't think was answered was about the school health education and you know what, we have a lot of concepts in legislation Jeanne that I would talk about. But to make sure that in every middle and high school we truly believe that there

should be a trained substance abuse counselor in every single school. (Applause). And from that, now hold on. Give yourself applause, but think about how simple is that. Just have a teacher or a couple of teachers get trained at the Universities. It's so, then we set up a dialogue between every single school about what are the problems, what are you seeing? And then we create the communication lines to address the very simple problems. I think that's Step A. And we do have a bill sponsored by Glen Wallace, myself, Marty Walsh and so many other members of the legislature focus on to do just that. And the healthcare piece is huge. It's about, look it, I gotta tell you something. This went by and whether it's two hours it went by for me in 10 minutes. This was so powerful. We need to be doing this more often. We need to let people know. And to Jim and to your wife, the heartache that you, for you, the problem is that people want to pretend that it didn't happen and they don't want to talk about it and that's why people don't understand the depth and the level of the problem that we're facing. So from the bottom of my heart, thank you guys because it is so important to understand that piece of it that it is fatal and that it is final and so we need to continue this dialogue. Jeanne, you did a fabulous job. (Applause.) Thank you everybody, but, how's this one, I'll close it right out with this thought, that this should not be a feel good, leave here, move on, this should be planting the seed to grow the garden and continue it to make sure that by working together and Jim said it's not going to be the legislature, it's not going to be any one thing, but by working together we can accomplish the goal and beat back this dreaded disease. Thank you all so very, very much.

JEANNE BLAKE:

Thank you Senator, thank you so much. Thank you so much everyone for attending. I underscore what the Senator said. Go home and continue the hard work. Jim and Nancy, thank you. Dr. Falzone, thank you. Brian Johnson, thank you. Bill, thank you. Peter, thank you. Greg Hughes, thank you. Michael Botticelli, thank you. And the Levine's and Trevor and his family, thank you so much everyone.