My name is Stephanie Marquesano and I am an Ardsley, NY resident. My 19 year-old son Harris died by accidental overdose in 2013.

Like millions in this country Harris had co-occurring disorders (COD), the combination of one or more mental health challenges and substance misuse and addiction. For Harris it was an anxiety disorder and ADHD, and he turned to substances beginning with marijuana to self-medicate. Two weeks before his death, Harris told me that had he never started smoking marijuana none of this would have happened. When I asked what he meant he said sometimes marijuana mellowed him out, but more often marijuana made his anxiety much worse. The challenge was that regardless of the negative feelings he couldn't stop. For Harris, this ultimately led to his misuse of prescription medications including opioids. The first time our family heard the term "Co-Occurring Disorders" was at the first residential treatment facility Harris entered. When we found out that it has a name, and the program treats it, we felt relief. What we quickly learned was that none of the 4 inpatient, 2 outpatient, and one short term mental health program he entered, regardless of what they promised, actually delivered integrated, co-occurring capable care.

I launched the harris project at his funeral, and have become an advocate in the prevention and treatment of COD to improve outcomes for teens, young adults, and their families.

What I hope I bring to this hearing is a unique perspective and COD lens. From prevention to treatment to sober living/housing to work force development to the criminal justice system to insurance EVERYTHING should be viewed from the perspective of the unique and complex needs of the individual. Mental health challenges, trauma, and substance misuse/addiction more often than not go hand in hand. If we can integrate and truly transform the system of care to be co-occurring capable there is no doubt that we will save lives and improve outcomes.

the harris project developed CODA (Co-Occurring Disorders Awareness) a peer-led prevention movement that has been introduced in 46 Westchester County high schools and several colleges across Westchester County, as well as regionally thanks to collaborators including the Westchester County Executive's Office, Department of Community Mental Health, and Youth Bureau; Putnam County Department of Social Services and Mental Health; Student Assistance Services; PNW and SW BOCES; and, most recently the Tarrytown Regional Office of NYSUT.

CODA encourages teens and young adults to explore paths to substance misuse and addiction (including things like mental health challenges, sports injury or wisdom tooth removal, as well as brain changes caused by use – (your brain isn't fully developed until you're 25) to be empowered decision- makers, connect and support peers who may be struggling (#CODAConnects), and know how to link to appropriate resources (#BeTheLink). All of our school and community-based programming and CODA components are delivered absolutely free, and to date we have received no state or federal funding.

Why fund CODA either as a Westchester County or 7 county Mid-Hudson Region pilot?

The simple answer is that primary prevention is the least expensive and most effective way to turn the tide on the overdose and suicide epidemics. The hope would be to include DOE, DOH, OASAS, and OMH in this comprehensive effort. By increasing engagement in mental health and trauma informed services we can support youth before crisis, and if they are reached before first use we create opportunities for better outcomes. In addition, by focusing on all substance misuse/addiction from a COD perspective the umbrella opens wider, and can also include comprehensive campaigns related to COD and vaping, marijuana, alcohol, prescription medication, and heroin.

Key Facts (sources/slides attached):

- 22% of US teens 13-18 have a mental health disorder with severe impact in a given year
- 50% of all lifetime mental health disorders arise by the age of 14, 75% by the age of 24
- more than 70% of teens/young adults addicted to and/or misusing substances have COD
- 43% of youth receiving mental health services were identified as having a co-occurring substance use disorder
- Almost 90% of those with lifetime COD had at least one mental health disorder prior to the onset of a substance use disorder
- approximately 10.2 million in this country alone meet the criteria for a diagnosis of COD
- the harris project is the only non-profit in the nation committed to the prevention and treatment of COD, and Westchester County is the first county in the nation to embrace this approach to changing outcomes

According to a 2007 study on the treatment of co-occurring disorders in adolescents, the time between onset of a mental health disorder and subsequent substance use disorder is a "key window of opportunity" where COD can be prevented (Treating Adolescents with Co-Occurring Disorders, Hills, 2007). Yet most have never heard of it...UNTIL NOW!

Key Events:

2nd CODA Youth Summit March 2019, CODA Youth As Voices of Change the follow-up to our highly successful first Youth Summit included 46 high
schools, over 400 students, 60 volunteers. Students participated in seven
interactive workshops. To prepare for CODA Weeks 2019, attendees were also
provided with updated celebration boxes, and the opportunity to explore and
practice with the tools and activities included (student ideas and pictures
attached). Students and staff were also introduced to the new CODA 2-star logo
and awareness campaign designed to bring an understanding of co-occurring
disorders to an even larger audience (several components attached).

- CODA Weeks are celebrated at almost all 50 Westchester public high schools from April 1-15, CODA Celebration Boxes are distributed to all 50 high schools (CODA Weeks Celebration Guide is attached). Each year the harris project partners with a high school to officially celebrate CODA Weeks Lakeland High School (2017), New Rochelle High School (2018), and White Plains High School (2019).
- CODA GAMES local high schools and colleges have begun hosting CODA Awareness Games, including CODA Homecomings (announcements and pictures attached).
- 2nd CODA Out of the Shadows Walk took place on September 28, 2019 participants included 450 diverse community members.
- First campus CODA benefit concert took place through Generockcity at SUNY Purchase in August 2018.
- CODA Field Days take place at Valhalla HS (May 2018, 2019).
- New Rochelle HS CODA Club received the Volunteer NY Spirit Award in Education & Literacy with Stephanie Marquesano (founder of the harris project) April 2018.
- PNW BOCES Fox Meadow CODA Club received the PNW BOCES Service and Innovation Through Partnership Award for Exceptional Service September 2018.
- Well over 100 CODA Community Conversations.

System Transformation – (The Journey attached)

As the Youth Advocate for the NYS Regional Planning Consortium Mid-Hudson, and Co-Chair of the Westchester County Co-Occurring System of Care Committee (COSOCC), I also collaborate with providers in Westchester and our six surrounding counties to transform the system of care so that treatment is integrated, and meets the co-occurring and complex needs of the individual. This provides the best opportunity to sustain recovery. We are the largest region in the nation working with international systems change expert Dr. Ken Minkoff and ZiaPartners on system transformation, and receives no state funding. It is time to change that.

Why fund COSOCC System Transformation? The current silo'd system of care is not meeting the needs of the individual. People should not be cycling through rehabilitation programs over and over again. They should receive an integrated assessment, and an individualized treatment plan that meets their needs within a "NO WRONG DOOR" framework. The idea of integrated treatment for persons with COD is not new, in fact SAMHSA "wrote the book on this" in the early 2000's (SAMHSA Effective treatment for persons with COD attached).

Staff will have better results and be more satisfied - in every program - and within
existing resources, improving integrated services for the individuals and families
with co-occurring mental health, substance misuse/addiction, trauma, and other
complex needs they are already serving (currently not very effectively – revolving
door).

- This is good for the individual: People with complexity are better engaged, and have better outcomes, when they receive integrated services.
- This is good for staff: Staff will be more empowered and less burned out by making changes in policy, procedure, paperwork, and practice that help them to be more successful with the individuals that are most in need.
- This is good for the organization: Engaging in co-occurring capability development teaches the whole organization how to be a high performing change management organization and involves all levels of staff as change agents.
- This is good for the bottom line: Welcoming individuals with complex needs leads to better engagement and fewer missed appointments.
- This is good for community relations: By being a great partner in the cooccurring effort, providers can help other types of providers, and receive help in
 return, while being viewed as a strong collaborator in the community and county.
- This is good for funder relations: By demonstrating an ability to work with complex populations efficiently and effectively throughout the whole organization, agencies become a go-to provider for funders making value-based payments.
- Already hearing from organizations with navigation grants that individuals are relapsing, and re-engaging in services because their complex needs were not met the first, second, third, etc. time around. Unless you address the whole person and their complex needs in an integrated manner this will continue.
- MAT/MOUD should be a part of an integrated treatment plan when appropriate, but it is not a magic bullet.

Work force development (including behavioral health providers, substance use counselors, and peers), housing (sober living and supported housing), "drug court" should be co-occurring capable (most who "fail" have co-occurring disorders), insurance/billing needs to allow for multiple diagnoses (each viewed as "primary") are additional key components, and a further indicator that OASAS/OMH/DOH should work collaboratively.

In addition to the RPC and COSOCC, I am also on the NIDA HEALing Communities Community Advisory Board, Transitional Age Youth OMH Workgroup, and the Westchester County Community Services Board. I am available at your convenience to discuss any of these topics further.

Stephanie Marquesano 914-980-6112 stephanie@theharrisproject.org





In the midst of the overdose and suicide epidemics gripping our nation, the harris project takes a unique, proactive, and transformational approach to saving lives and improving outcomes.

Harris Blake Marquesano was only 19 when he died by accidental overdose in October 2013. Shortly after Harris's death his family founded the harris project, a 501(c)(3) nonprofit organization that advances prevention programming and advocates for the implementation of integrated treatment opportunities to improve the lives of teens and young adults diagnosed with co-occurring disorders (COD). Harris was one of the more than 10.2 million with COD.

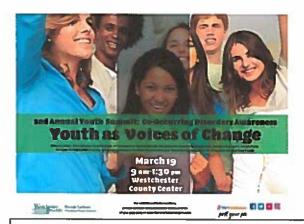
Never heard of it? COD is the combination of one or more mental health challenges and substance misuse/addiction. With 22% of our teens having a mental health disorder with severe impact, and more than 70% of all those addicted to/misusing substances meeting the criteria for a diagnosis of COD, it is time to bring COD: out of the shadows & into the light!

The mission of the harris project is laser-focused. CODA, the peer-driven Co-Occurring Disorders Awareness prevention movement developed by the harris project, empowers youth with knowledge about how they and their peers might enter the substance misuse/addiction narrative. CODA encourages them to take an active role in connecting and supporting each other, as well as recognize the value of linking to resources (#CODAConnects #BeTheLink). With equal enthusiasm, the harris project collaborates with local and state government, agencies, providers, hospitals, community organizations, and higher education to transform the system of care to one that is integrated, complexity capable, and meets the co-occurring needs of the individual. This provides the best opportunity to achieve and sustain recovery.

Making unprecedented impact in Westchester County and across the region, CODA is poised to become a national movement! the harris project recently launched the CODA 2-star logo to bring recognition and understanding of COD to a whole new level.



CODA WEEKS CELEBRATED 4/1-4/15/19 IN 50+ HIGH SCHOOLS



400 STUDENTS, 46 WESTCHESTER HIGH SCHOOLS 3/19/2019 WORKSHOPS, TRAINING, ACTION



REGIONAL SYSTEM
TRANSFORMATION FORUM(S)



Spring 2019 NCAA & HIGH SCHOOL CODA GAMES WITH 2-STAR LOGO



75+ COD COMMUNITY CONVERSATIONS 2018-19



9/18 CODA: OUT OF THE SHADOWS
WALK, 400+ PARTICIPANTS

WHY CODA (Co-Occurring Disorders Awareness)? WHAT YOU NEED TO KNOW...

Prevalence Data & Impact on YOUTH

statistics from SAMHSA.gov
NIMH.NIH.gov MHFA.org
Brief Report on Prevalence of Youth Drug
Use, Mental Health and Co-Occurring
Disorders

- Mental health disorders are the most common health challenge faced by our nation's school-aged children.
- 22% of youth ages 13-18 have a mental health disorder with severe impact (1 in 10 SED)
- 50% of all lifetime mental health disorders begin by age 14 75% by age 24
- Almost ½ of youth ages 8-15 who need mental health services don't receive them
- Fewer that 10% of children receiving mental health services got them for more than 3 months
- 43% of youth receiving mental health services were identified as having a co-occurring substance use disorder
- Over 70% of youth entering treatment for substance use disorder were identified as having a co-occurring mental health diagnosis
- Over one-third (37%) of students with a mental health disorder age 14-21 and older who are served by special education drop out: the highest dropout rate of any disability group
- 14% of high school students have seriously considered suicide; 6% report attempting suicide 1 or more times in the last year
- Suicide is 2nd leading cause of death among youth ages 15-24

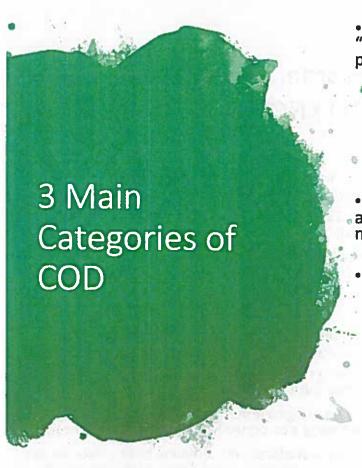
Treating Adolescents with Co-Occurring Disorders, Hills, 2007

The time between onset of a mental health disorder and subsequent substance use disorder is a "key window of opportunity" where COD can be prevented

2005 Comorbidity Study

- Not recognized or improperly treated mental health disorders can lead to more severe, more difficult to treat illness, and to the development of COD
- Onset of a mental health disorder often precedes a substance use disorder
- Almost 90% of those with lifetime COD had at least one mental health disorder prior to the onset of a substance use disorder
- Generally the mental health disorder occurred in early adolescence (median age 11), followed by the substance use disorder 5 to 10 years later (median age 21)
- 22% of US teens 13-18 have a mental health disorder with severe impact

Comprehensive prevention matters!



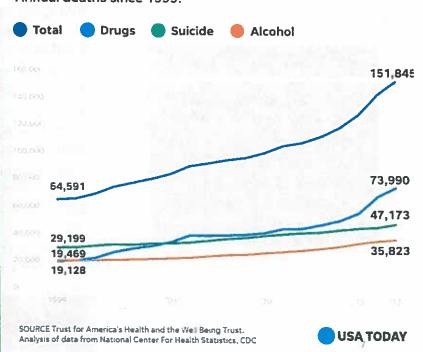
- Mental health disorder(s) and uses substances to "self-medicate" – alcohol, marijuana, nicotine, prescription medication
 - often young people living with depression; bipola disorder; anxiety disorders; PTSD; ADHD and/or ODD
 - trying substances in a misguided attempt to temporarily relieve stress, emotional pain or to just "feel typical" can lead to COD
- Substance use disorder and mental health disorder(s) a true substance use disorder often co-occurs with othe mental health disorder
- Substance use brings on mental health challenges
 - the use of alcohol, marijuana, nicotine & prescription medication can harm typical brain development, especially during adolescence and early 20's, and can increase the chance of developing some types of mental health disorders
 - impact of legal prescriptions sports injury; wisdon tooth removal
 - genetics/family history/trauma can play a role, the brain isn't fully developed until 25, so the longer a teen waits, the better

A TRUE PUBLIC HEALTH EMERGENCY...

- 73,990 overdose deaths in 2017
- Overdose leading cause of death for those under 50
- 6748 treated each day for misuse/overdose
- · 197 each day
- traffic accidents 37,461 deaths in 2016
- firearms killed 38,658 in 2016 –
 23,100 deaths by suicide
- 40,290 women died of breast cancer in 2015

Deaths from alcohol, drugs and suicide in the US hit highest level since record-keeping began

Annual deaths since 1999:



CODA Youth As Voices of Change 2nd Annual Youth Summit Westchester County

Power of Sports

- Awareness Games
- 2 star CODA logo on uniforms/warmup Jerseys
- Helmet/stick decals
- Black/white/green-out games
- CODA Announcements during games
- Tabling at games so parents/ community receive info.
- Sponsorships to get publicity
- Team bonding/mentoring/safe space
 - discussing COD for coaches, trainers, 1 practice per season dedicated to

Transformation Through Arts

- Songwriting/open mic
- Short film real students/real
 - Stories
- students to get more involved Fashion – use logo design tee include different groups of
 - Incorporate CODA into a play
- Cosmetology use 2 star logo
 - Concerts to raise awareness
- Expressing CODA themes through various mediums - host gallery, poetry slam

Mindfulness

- Positive ways to relieve stress
- Mindfulness rooms/space
- Calming music during transitions
- Positive affirmations/compassion wall/Instagram quotes
- Breathing exercises/yoga/learning to "Be Present in the Moment"
- Practice self-care

Creating Connections Bring clubs/groups together

- Field day
- Participate in CODA Walk/create a
 - ocal CODA Walk
- CODA themed Movie Night
- CODA themed PEP Rally
- Health classes all talk about COD
- Bake sales/awareness tables at all school events (play, art, sports)
- Cookout
- Powderpuff football
- Ambassadors to MS to start convo.
- Activities with other local HSs

What's Important To Me

- Training provided to all workshop participants
- thoughts/feelings/challenges/ Strength based tool to map saccesses
- Included in CODA Weeks Celebration Box
- Copies should be available in all waiting areas to help students

Frends & Social Media

- #CODAConnects #BeTheLink Consistent use of hashtags
- #YouAreAStarBecause challenge
 - Create Instagram account
- imited awareness/need to know Campaigns that emphasize facts/available resources
 - Student Voice/Student Issue -"WAKE UP TO COD"
- School newspaper dedicated to news articles/art/poetry PSA Commercials

Leading Change

- Being first generation understanding COD
- Create a variety of 90 second elevator pitches to impact different audiences
- Create talking points to impact elected officials at all levels to make COD & CODA a priority
 - Work with Social Media group





























SUGGESTED CODA Week Activities Suggested Daily Announcements April 1 - 5 or 8 - 12 Theme: #CODAConnects #BeTheLink "The Story Behind the Stars"

There are five days of announcements, use "5" on your CODA Celebration Day

- 1. Have you heard of CODA? CODA stands for Co-Occurring Disorders Awareness. Believe it or not over 10 million people have Co-occurring Disorders, but most have never heard of it! Co-Occurring Disorders is the combination of one or more mental health challenges and alcohol, marijuana, opioid or other substance misuse. Those with mental health challenges often misuse substances to try to cope and manage. We are going to spend this week learning more! Let's see how TOGETHER we can change outcomes. Stay tuned!
- 2. What is CODA? CODA stands for Co-Occurring Disorders Awareness. Co-Occurring Disorders is the combination of one or more mental health challenges and alcohol, marijuana, opioid or other substance misuse. Did you know you don't need to have a pre-existing mental health challenge to develop Co-Occurring Disorders? Substance use can cause chemical changes in your brain leading to Co-Occurring Disorders. Genetics, trauma, and the environment can also be factors in developing Co-Occurring Disorders. Let's start the conversation, tell someone what you learned today.
- 4. What is CODA? CODA stands for Co-Occurring Disorders Awareness. Co-Occurring Disorders is the combination of one or more mental health challenges and alcohol, marijuana, opioid or other substance misuse. Understanding the paths to substance misuse and addiction, the WHY and HOW things like stress, anxiety, depression; sports injury and wisdom tooth removal; and, understanding the risks of what some consider "experimentation" on the developing brain especially when 25 and under can lead to empowered decision making, and being a supportive friend #CODAConnects #BeTheLink
- 5. Today we are celebrating CODA DAY! You are learning some of the basics during CODA Week 2019. Visit the CODA table in the (LOCATION) to participate in activities, pick-up some great SWAG, and become part of the CODA Movement! CODA Connects and each one of us has the power to Be The LINK! Help us bring Co-Occurring Disorders: out of the shadows and into the light. #CODAConnects #BeTheLink





"CODA CELEBRATION DAY" ACTIVITIES, YOUR CODA DAY

Your CODA Celebration Box contains all supplies for an amazing day:

- CODA rack card with facts and information
- #CODAConnects #BeTheLink wallet cards
- "The Story Behind The Stars" postcards
- Compassion Wall
- "What's Important To Me"
- Specialty helmet decals for CODA sporting events and games
- CODA 2-star stickers and buttons
- the harris project/CODA silicone bracelets
- Green, white, black crepe streamers to tie ribbons at key locations
- Green, white, black balloons
- Green table cloth
- · Green, white, black lollipops
- All materials for the activities below

Encourage everyone to wear green, white, black on the day you designate your "CODA Celebration Day" in recognition of CODA WEEK

SET UP YOUR CODA DAY TABLE & LET'S GET STARTED Creating Awareness About Co-Occurring Disorders

Most have never heard of co-occurring disorders, your voice will be an important one as communities begin to talk about paths to substance misuse/addiction, mental health & co-occurring disorders.

Things to think about:

- What are your goals?
- Who is your audience?
- How can you promote positive, healthy conversations?
- Why is this important?
- What changes would you like to see in your community on this topic?
- What challenges might there be as you introduce the concept of cooccurring disorders and CODA?



A. LEAVE ONE-TAKE ONE Compassion Wall

The concept of compassion is powerful. Think about ways we can better support each other when it comes to mental health/trauma/substance misuse/addiction/risky behavior. We may have no idea what personal battle someone is facing, but being compassionate & providing a hopeful message can be the first step in showing someone they aren't alone.

Supplies: VINYL COMPASSION WALL, WHITE POST-ITS, MARKERS

- 1. Use a wall near your CODA table
- 2. Hang the COMPASSION WALL
- 3. Place about 100 compassionate, positive messages to start the wall, include some of the following CODA themed messages below
- 4. Invite participants to write post-its that provide compassionate and positive messages, to take one of their choice
- 5. Take pics and post on social media use: #CODAConnect #BeTheLink

"CODA – You Are Not Alone" "Knowledge = Power" "co-occurring disorders: out of the shadows and into the light"

B. #CODAConnects #BeTheLiNK Paper Chains

Linking together students, staff, and the school community through this activity can make a powerful visual statement. The individual links celebrate what makes us unique, creating the chain highlights the strength of connectivity. Uniting to raise awareness about co-occurring disorders includes recognizing the value of the human **connection** and knowing who you would **link** to if you are concerned about yourself or a friend.

Supplies: GREEN and WHITE PAPER STRIPS, MARKERS, TAPE

- 1. Give each participant one white and one green strip of paper and a marker, note the strips are all different/none perfect
- 2. Encourage participants to write a message on one strip about a quality that makes them unique, and on the other who they would connect to if they were concerned about themselves or a friend/peer
- 3. Tape the individual strips together to make one long, connected chain, which visually represents the power of uniting around how #CODAConnects and that each of us has the power to #BeTheLINK

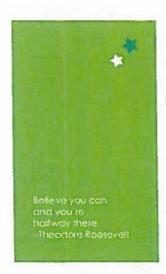


C. #GODAConnects #BeTheLink Wallet Cards

Supplies: WALLET CARDS, PENS

Each #CODAConnects #BeTheLink Wallet Card has 1 of 5 inspiring quotes, plus a place for recipients to write who they might link to if concerned about themselves, a friend, peer, teammate, community member, or loved one. Plus a reminder that You Are Not Alone!















D. The Story Behind The Stars

Supplies: THE STORY BEHIND THE STARS 5x5 POSTCARDS

The two-star logo has a special beginning. First used during the launch of the harris project in October 2013, Harris's sister requested that the harris project logo include 2 stars - 1 green and 1 white - as a tribute to a poem he wrote to her while in a treatment program (theharrisproject.org/stars). The stars were designed to symbolize their bond and connection.

Next applied in October 2016 as the peer-led CODA movement ignited, the green and white stars featured prominently in the CODA logo. CODA was piloted in 16 Westchester public high schools and Greenwich High School in Connecticut. As momentum grew around the CODA movement, the inclusion of the two stars in the logo took on additional significance. During the first CODA Weeks (April 1-15) 2017, the hashtags #CODAConnects #BeTheLink were embraced. It was also during this time that the CODA theme song "You Are Not Alone" premiered. Celebration boxes with activities and announcements were provided to all Westchester public high schools and Greenwich High School to celebrate CODA Weeks 2018.

Today, as the next step is taken to bring co-occurring disorders: out of the shadows & into the light, the two-star CODA logo will stand alone to embody:

- the power of the human connection
- the benefit of linking to appropriate resources
- the 2 main components of co-occurring disorders mental health challenge(s) & substance misuse/addiction.

It is designed to raise awareness, and as a reminder that "You Are Not Alone."







E. WHY CREATE AND SHARE "WHAT'S IMPORTANT TO ME"

Supplies: WHAT'S IMPORTANT TO ME 8.5 x 11 handout, PENS

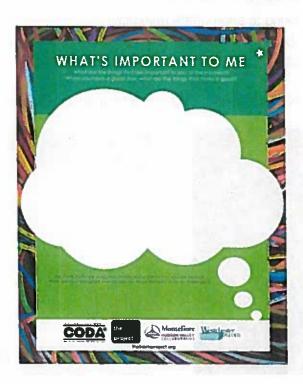
Filling out the "What's Important To Me" tool can help you in a number of ways:

- First and foremost it can help you think about your priorities, challenges, hopes, and dreams.
- It can also help you "find your voice" when speaking with people including family, peers, teachers, counselors, coaches & professional supports by helping you frame the things that are most important to you.
- With this crucial insight others around you may be in a much better position to understand what is important to you and work with you to find the best path forward.

By being able to share this information with the people in your life, it helps them understand more about the sort of things that are meaningful and fulfilling for you, what might be keeping you from achieving them, and helps you provide information they might not otherwise take the time to ask about – it's a win-win!

We hope that you will also take the time to ask those in your life "What's Important To You?" to spark meaningful conversations!

Who did you talk to? How did it feel? What happened?





F. FISH BOWL FACTS/FICTION

Find out what your school community knows about co-occurring disorders: the relationship between mental health disorders (like anxiety, depression, ADHD, etc.), and self-medication, substance misuse, and addiction; as well as the potential addictive impact of opioids, even when legally prescribed for things like sports injury/wisdom tooth removal; and, how brain changes caused by "experimentation" can lead to the development of co-occurring disorders.

Supplies: FACT/FICTION CARDS, ANSWER KEY, RESOURCES, PRIZES

- 1. Cut apart fact/fiction cards
- 2. Place cards in last year's fish bowl or any other bowl
- 3. Participants reach into the fish bowl, read and answer the question they pick
- 4. Using the answer key, let them know if answers are correct or incorrect and why
- 5. Use CODA stickers, buttons, and awareness bracelets as prizes
- 6. Knowledge=Power, this activity can be used to raise awareness

G. STUDENT-ATHLETE AWARENESS GAMES

Supplies: Helmet/Cleat/Equipment Decals (you have 98 on the big sheet of vinyl stickers – designed to meet NCAA specifications)

Raise Co-Occurring Disorders Awareness on the Field and in the Stands! You can:

- 1. Select a team and opponent on your schedule and designate a CODA game!
- 2. Most Westchester public high schools have attended the Youth Summit, so reaching out to coordinate a CODA game should be easy
- 3. This is a great opportunity to have parents, community members, and spectators of all ages learn about COD and the impact early intervention and support can have
- 4. You can use the announcements at the beginning of this activity guide for PA announcements during the game, and table with the materials included
- 5. Take pictures and post on social media, use #CODAConnects #BeTheLink hashtags

Contact Stephanie Marquesano: stephanie@theharrisproject.org with any questions, for additional supplies, to make suggestions about CODA activities/events, and to share updates on CODA and how you are making social impact in your community!





CODA Field Announcements

Have you heard of CODA? CODA stands for Co-Occurring Disorders Awareness. Believe it or not more
than 10 million people have Co-occurring Disorders, but most have never heard of it! Co-Occurring
Disorders is the combination of one or more mental health challenges and alcohol, marijuana, opioid,
nicotine or other substance misuse and addiction. Those with mental health challenges often misuse
substances to try to cope and manage.

REPEAT CHECK OUT THE CODA table and learn more, including the story behind the 2-star logo you see on our student-athletes **REPEAT**

- With 22% of teens having a mental health disorder with severe impact, and more than 70% of those misusing and/or addicted to substances having **Co-Occurring Disorders**, **The Harris Project** works with schools and communities to bring **Co-Occurring Disorders**: out of the shadows & into the light!
- CODA creates an understanding of paths to substance misuse and addiction, the WHY and HOW things like - stress, anxiety, depression; sports injury and wisdom tooth removal; and, the risks of what some consider "experimentation" on the developing brain - especially when 25 and under. And, how genetics and family history can be additional factors in developing Co-Occurring Disorders. This can lead to empowered decision-making!
- The hashtags #CODAConnects #BeTheLink highlight the importance of connecting with others and being a caring friend and teammate, while recognizing the value of knowing who you would link to if you are concerned about yourself or someone else.
- Did you know you don't need to have a pre-existing mental health challenge to develop Co-Occurring
 Disorders, especially if you're 25 & under? Substance use can cause chemical changes in the developing
 brain leading to Co-Occurring Disorders. Even legal opioid prescriptions for things like a sports injury
 can be factors in developing Co-Occurring Disorders.
- The 2-star CODA logo you see on our student-athletes embodies the power of the human connection, the benefit of linking to appropriate supports, and the 2 main components of co-occurring disorders: mental health challenges & substance misuse/addiction. It is also a reminder that "You Are Not Alone"!
- Co-Occurring Disorders is preventable & treatable. Raising awareness about Co-Occurring Disorders is the first step in saving lives & improving outcomes! #CODAConnects #BeTheLink
- Thank you to our Athletic Department, AD, Coaches, Trainers, our community, and most importantly our student-athletes for being a part of the CODA Movement to save lives & improve outcomes!
- To learn more about CODA go to theharrisproject.org

FIRST CODA GAMES WERE HELD SPRING 2019



Mercy College CODA Baseball & Softball Games



New Rochelle HS Lacrosse, Softball, Baseball, Track



Mercy College Men's & Women's Lacrosse



Mercy College Athletic Department and SAAC Host First-Ever Fall CODA Awareness Games - Mercy College At... mercyathletics.com

FALL CODA GAMES
HAPPENING NOW
INCLUDING FIRST
CODA THEMED
HIGH SCHOOL
HOMECOMINGS AT
PLEASANTVILLE,
NEW ROCHELLE, WHITE
PLAINS, ELMSFORD



For more information contact Stephanie Marquesano founder of the harris project, stephanie@theharrisproject.org or 914-980-6112

The Journey

COSOCC Mid-Hudson and County efforts include education, awareness, prevention; organizational selfassessment tool (COMPASS E-Z); County stakeholder Charter; workforce development/use of evidence-based practices; organizational and systems change.





Co-Occurring Disorders Integrated Treatment Roundtable April 2016 Westchester,

Putnam, Orange

Mid-Hudson RPC Dr. Minkoff forum Nov. 2017



Westchester COSOCC Jan. 2018



Forum Center for Practice Innovation June 2019 Mid-Hudson RPC COSOCC Leadership



Mid-Hudson RPC Dr. Minkoff forum Nov. 2018

Westchester DCMH COD

Forum May 2018



Mestra Congretations, County Executive
Michael Orth, Commissioner
BOACOMI Department of Community Mestal Health

Substance Abuse Treatment 0 Co-Occurring Disorders For Persons With C. C. SOR PARTITION OF THE STATE OF T Improvement A Treatment Protocol

Effective COD assessment/treatment views COD as the expectation – SAMHSA TIP 42

- coordination of mental health and addiction professionals to create an integrated/comprehensive treatment plan that deals simultaneously with both the mental health and substance misuse pieces, and:
- special peer groups meeting the needs of the individual
- prescribing medication when professionals believe it is appropriate
- positive and supportive social interactions
 - healthy recreational activities
- as much family involvement as is beneficial
 - NO "WRONG DOOR"

A MESSAGE OF HOPE Westchester Co-Occurring System of Care Committees

prevention/promotion quality improvement licensing/regulatory

Mid-Hudson Region commitment to system transformation