

LIBRARIES AND THE SUBSTANCE ABUSE CRISIS

Supporting Your Community

CINDY GROVE

ALA 
Editions
CHICAGO 2020

alastore.ala.org

CINDY GROVE is the director of a public library in New England. She has worked in libraries for over sixteen years and also has five years' experience working with various social service agencies. Throughout her life she has worked with people with substance use disorders and their loved ones. She has also appeared as a panelist for several webinars that focus on substance use disorders and mental health.

© 2020 by the American Library Association

Extensive effort has gone into ensuring the reliability of the information in this book; however, the publisher makes no warranty, express or implied, with respect to the material contained herein.

ISBN: 978-0-8389-4739-5

Library of Congress Control Number: 2020000790

Cover design by Kim Thornton. Cover images © Adobe Stock.

Text design in the Chaparral, Gotham, and Bell Gothic typefaces.

© This paper meets the requirements of ANSI/NISO Z39.48-1992 (Permanence of Paper).

Printed in the United States of America

24 23 22 21 20 5 4 3 2 1

alastore.ala.org

I dedicate this book to the
librarians who are willing to fight.

alastore.ala.org

Contents

Preface ix

Acknowledgments xiii

Introduction: We Have a Crisis xv

1 	The Library’s Role in the Fight against Addiction	1
2 	Understanding Addiction	7
3 	People in Distress	13
4 	Behavior and Stigma	21
5 	Library Safety and Security	25
6 	Library Policies	31
7 	Library Services	39
8 	Library Outreach and Marketing	51
9 	Staff Training	57
	Conclusion: Being Part of the Solution	63

APPENDIXES

A *Observable Signs of Common Drugs* 65

B *Further Reading and Viewing* 91

Index 103

Preface

LIKE SO MANY, I HAVE A CHILDHOOD FILLED WITH MANY WONDERFUL and heart-warming memories, and also some traumatic life-changing events. For most of my childhood I grew up in a low-income government housing development in Massachusetts. I was surrounded by people living in distress in my own home and in most of the homes around us. The people living in this community were (and still are) heavily impacted by violence, addiction, poverty, and neglect. The housing project area was surrounded by woods (which were not safe for children) and a major highway, which isolated the community. One resource I did have access to was the public library, because they had a bookmobile. The bookmobile would visit my neighborhood every other week. If it were not for the bookmobile, my access to information and recreational reading would have been greatly restricted. The resources I could access from that bookmobile had an enormous impact on my success in life; they enabled me to become a lifelong learner, and they provided materials that helped me experience the world outside of my own personal horizons.

During my childhood and teen years, I didn't understand the influence that drugs and alcohol had on my own family. While I was growing up, the emotions displayed in my family were intense, and I often felt like I was walking on eggshells. I never knew if those around me would be happy, furious, or deeply depressed. I never understood that the conditions I was living in were not normal. It was not until my 50-year-old stepfather died and I was told that he had struggled with addiction that I fully understood the challenges my family had been facing. I was shocked by this information, but then I was able to look back and realize all the signs I had missed growing up. The loss of my stepfather's life opened my eyes not only to his own substance use disorder, but to those of other family members and friends who have been part of my life.

My personal struggles and concern for those around me inspired me to pursue a degree in psychology. Armed with this degree, I worked for various

social service agencies. I had the opportunity to work with many different populations, including those struggling with developmental disabilities, young adults and children removed from their families by the state, seniors trying to maintain a safe living environment at home, and people calling in to a crisis intervention hotline. I loved working in the field of psychology and having the opportunity to make a difference in people's lives, but I was often overwhelmed by the level of need and the limited resources available. I was frustrated by the limitations often put in place by the organizations I worked for, as well as by the limitations of insurance coverage.

In 2005, I was inspired by my best friend to embrace my lifelong love of libraries and join the profession. I enrolled in the GLIS program at Simmons University in Boston, and my first library position involved working ten hours a week in the children's and circulation departments of a small public library. I immediately knew that I had made the right career decision, and since then I have had the honor to work with several wonderful public libraries, first as a reference librarian and now as a library director. I love assisting the public with whatever goals or needs they have at the various stages of their lives. The opportunity to transform someone's life is an honor that I have always been grateful for. Sometimes, when I help someone research a sensitive topic and see them walk away with the information they need, that moment can be so powerful and inspirational for me. I have also been thankful for the patrons who have shared those occasions when a small moment (such as attaching a resume to an e-mail or finding a family member's obituary) had a profound impact on their lives. I love welcoming each patron every day and enjoying whatever journey they choose to take me on.

In 2013 I began working as the head of reference services at the Tewksbury Public Library in Massachusetts. Tewksbury is a blue-collar town of about 28,000 residents. The Tewksbury Public Library is located next to the grounds of the Tewksbury State Hospital. In addition to the hospital, there are several detox and rehabilitation facilities on the same property. At that time the library did not have a formal strategic plan, so I began reviewing how my department was serving the community and which groups we were serving well, and which groups were underserved.

As I began to familiarize myself with the library and the community, I noticed the high number of behavior-related incidents in the library that required direction or support. Some of the library's patrons had wild mood swings—ranging from extremely positive to very aggressive—and they engaged in frequent pacing and showed signs of sweating and exhaustion. The library had a no-sleeping policy, and I found myself waking people up multiple times a day. I was not sure why so many people were exhibiting such odd behaviors, and I wondered what the cause could be. I found myself spending more time trying to correct patrons' behaviors than doing anything else during

my workday at the library. I realized then that I needed to focus on the source of these behavior issues and try to find a solution, so that the library could be more welcoming and I could provide services more effectively to everyone.

I first reached out to the Tewksbury community services officer, Jennie Welch. I told her of my observations based on documented incident reports. She confirmed that the behaviors were consistent with people using and detoxing from substances. She told me about the increasing problems surrounding opiate use in the community and what steps the police department was taking to assist those with a substance use disorder and their families. She also told me about several local organizations that were trying to provide support to drug users and their families. I was amazed by the organizations that were in my library's area and the connections the police department had with those organizations. I instantly wanted the library to become part of the solution. The patrons were already visiting the library, and I wanted to find a way to make their visits an opportunity to provide them with support.

I started with a permanent display located away from the reference desk that included books, information about local services, handouts on addiction from other organizations, and a resource guide I had created that included print and online resources available at the library as well as a list of local organizations. I also kept information in a subject file for staff working at the desk. As I reached out to the different organizations, I would also ask them if they would be willing to speak at the library. These events would often have a mix of people interested in learning about addiction, those supporting someone with an addiction, and those with an addiction. At these events, Officer Welch was able to offer access to recovery services immediately should anyone express an interest in them.

Around this time, a nearby public library invited local librarians to attend a presentation by Warren Graham, the author of *The Black Belt Librarian*. Graham was discussing patron behavior in the library and how to create as welcoming and safe a space as possible. He spoke about ways to prevent and handle inappropriate behavior in a clear and simple fashion. Immediately following his presentation, the staff at our library worked together to create a patron behavior policy that told patrons about expected behavior and what to expect if their behavior was inappropriate. With a solid policy to back us up, we had the authority we needed not only to redirect the behavior safely, but to also to reach out and offer assistance to those patrons. As the larger behavioral issues declined, we could quickly address smaller issues, and this led to a much more welcoming library for all.

Over time, word spread that I was open to discussing addiction and could offer support. Patrons would come to me for information and to access resources they needed for themselves or others. What was previously a huge stress on the library had become a strength.

I have since become the director of a public library, where I have been able to listen to a new community and use my previous experiences to create a library that is welcoming and responsive to all community needs.

It is my hope that by sharing my experiences and research, you will feel encouraged and supported to reach out to people in your community who are dealing with addiction. I hope this book will change your life the way mine has changed, from being overwhelmed, stressed, and at times scared to feeling empowered, energized, and ready to fight. It only takes one person to shift the balance in a library from stress to strength. When others feel your strength and confidence, they will follow and pitch in. Taking the first steps is often the scariest part, and my goal in this book is to make each of your steps ones you can take with confidence.

Introduction

WE HAVE A CRISIS

DRUG OVERDOSE DEATHS CONTINUE TO INCREASE IN THE United States. According to the CDC, from 1999 to 2017, more than 702,000 people died from a drug overdose (Centers for Disease Control and Prevention 2019). In some communities, people may be struggling with alcohol addiction, while others may be dealing with meth or LSD. In a growing number of communities, however, the drug of most concern is opioids. Government and health professionals are attempting to regulate the distribution and use of these substances, but in the meantime, people are dying from overdoses at staggering rates.

People struggling with addiction visit libraries and use their resources for support. Libraries have a responsibility to help and protect the people in their space. Understanding the signs of overdose, what to do when someone does overdose, and how to process the results (both managerially and emotionally) is a first step toward being prepared. Overdoses can and will happen, so being prepared is truly our only option. Libraries have the opportunity to be part of the recovery process for our patrons, our communities, and the nation.

REFERENCE

Centers for Disease Control and Prevention. 2019. "Opioid Overdose." www.cdc.gov/drugoverdose/index.html.

1

The Library's Role in the Fight against Addiction

PUBLIC LIBRARIES ARE AND SHOULD BE A REFLECTION OF THE communities they serve. Libraries are a community space where everyone is welcome, so they are used widely by patrons who are in a difficult period of life. With the growth of drug addiction in the nation, many libraries have seen an increase of usage by people with substance use disorders and the people (friends, family, and coworkers) caring for them. Just like every other patron, patrons in distress are looking for comfort, security, information, and relaxation. It is often distressing to read discussions about the library's role in working with people struggling with addiction, because these are primarily about the impact that people with substance use disorders have on libraries, rather than on how library resources can help people who have substance use disorders. In a recent webinar, one librarian mentioned that their library only became aware of the issue of substance use addiction in their community after there was a fatal overdose at the library (WebJunction and PLA 2017). It is critical that libraries become aware of the opioid crisis and prepare for potential emergencies in their facilities.

The American Library Association's statement on the "Core Values of Librarianship" demonstrates its understanding of social responsibility. It states:

The broad social responsibilities of the American Library Association are defined in terms of the contribution that librarianship can make in ameliorating or solving the critical problems of society; support for efforts to help inform and educate the people of the United States on these problems and to encourage them to examine the many views on and the facts regarding each problem; and the willingness of ALA to take a position on current critical issues, with the relationship to libraries and library service set forth in the position statement. (American Library Association 2004)

Libraries need to listen and respond to their communities in both large and small ways. We buy the latest James Patterson and Nora Roberts novels because those are what our patrons request, and we see many libraries expanding their e-content collections and programming because that is what their communities need. Similarly, recovery from substance use disorders is a community need that libraries should address. Ignoring the issue of drug addiction, or treating it merely as a disturbance in the library, are policies that fall short of our mission as public libraries, and fail to serve the best interests of our communities.

The library is a welcoming space that is warm when the weather is cold and cool when the weather is hot. We offer comfortable seating, access to technology, and privacy in clean bathrooms. Libraries do not require membership or check patrons' identification at the door. People can visit the library for just a few minutes or all day, from opening to close. Libraries are welcome to *everyone*. When patrons struggling with addiction visit the library, it is a chance for the community and library to provide a space, resources, and support for them to transform their lives. It is the library's responsibility to fight for the success of its community, and as part of that to fight against addiction.

I understand all too well that people struggling with addiction can bring disruptive behaviors into the library. People with a substance use disorder are desperate for drugs and may sell, buy, and use drugs in the library. The use and distribution of drugs is a serious concern because of the risk of overdose in the library, the safety of other visitors and staff, and the fact that the activity is illegal. Overdoses in the library have thrust library staff into a tough place where they wonder whether they should carry naloxone and get trained on how to provide lifesaving first aid. When someone does overdose, librarians are forced to make quick decisions which may save that person's life. Most professionals who decided to become a librarian never imagined themselves being placed in this position. Most of us became librarians for our love of reading, intellectual freedom, access to information, and public service.

Yet, working with patrons in crisis is part of the public service we provide to the communities we serve. We help the patron who wants to research cancer after receiving a diagnosis from their doctor. We support the patron who lost their job and is looking to write a resume. We support the patron from a

foreign country who wants to learn to speak and read English. We support the child struggling to find a fiction genre that they will love for the rest of their life. We support the young adult who is acting out and trying to discover their future. Why would we not support someone struggling with addiction and help them stay alive and recover?

Library services can have a positive impact on a person's recovery and a family's ability to care for someone struggling with addiction. Being a welcoming space for people struggling with addiction and for their support system will demonstrate public concern and provide opportunities for recovery and growth. In addition to being a welcoming space, libraries can also offer support through programs, materials, resource guides, and community outreach.

As you begin targeting your library's services and resources to assist people with a substance use disorder, you should keep your community and stakeholders aware of your library's concerns, ideas, goals, and objectives. Keep them informed regarding your successes and setbacks. Ongoing communication will be a critical step because you want your community to know what you're trying to do, so that they might become involved and participate in your program offerings, and so that they're not taken by surprise should the problems already visible in your library become more visible in the wider community.

One of the significant hurdles surrounding the opioid crisis is the shame of addiction. People don't want to admit they have a problem, that they know someone who has a problem, or that there is a problem in their community. Librarians must combat the social stigma that is attached to people with substance use disorders by informing the public what is happening at their library and what the library is doing about it. It is up to the library to shape the message that it communicates to others.

If your library starts to talk about addiction in a way that is supportive, people will hear your message and reach out to you for help. Your staff and the board may also hear from those who don't believe there is an issue in the community and are fearful that the library will be less welcoming if it offers services to people who are struggling with addiction. This is where having honest discussions with local public safety officials and substance use support agencies can help generate the community awareness that is needed to support your library's actions. It is also helpful to review your library's mission statement and the ALA's various statements and policies. Examining these documents will let you know if you are on the right path for your library.

The library can play a major role in preventing substance addiction. Connecting people with information and resources can prevent someone from trying drugs, and an awareness of the risks associated with prescription drug misuse can make a significant difference in that person's life. Libraries may have opportunities to partner with schools to offer drug prevention programs and to encourage and support drug awareness and prevention. There has been an increase in the number of compelling fiction and nonfiction books

for adults, young adults, and children that discuss addiction and recovery, so displaying these books in your library can help educate everyone about the risks associated with drug use. (See appendix B at the end of this book for a list of helpful titles.)

The library can also serve as a welcoming resource for people who are actively using drugs. This could be by simply making sure that if they do need medical attention, someone in the library will notice this and seek help. In addition, the library can offer a way for people to seek the resources they need in the library on their own (through a display or resource guide), or by approaching a librarian or speaking to someone at a library program. These ways of reaching out to people using drugs can transform and possibly save someone's life.

There is not enough support in our communities for people seeking recovery. There are so many stories of people who want to get treatment but are unable to find an available bed, or who have to wait on seemingly endless lists for a treatment center to find space for them. And even when people do get treatment, it may not be sufficient, since a twenty-eight-day rehabilitation process is often not enough. People need additional support in order to make their recovery a success.

For people in recovery, visiting the library can be an early step for them in rebuilding their lives. They might visit the library because they are looking for additional recovery services; or a new job; or simply for books and movies that might help take their minds off their situation, or for stories of inspiration to encourage them to stay sober. For many it may be the first time they have visited a library, but they quickly discover the wide variety of services and resources the library offers. For some, the library's computer equipment may be the only way they can reach out to family and friends and update them on where they are and how they are doing. At a lecture I attended with David Sheff, the author of *Beautiful Boy: A Father's Journey through His Son's Addiction*, he stated that his son's use of public library computers to send e-mails was how he knew where his son was and that he was alive.

The family and friends of people with a substance use disorder are another group that the library can have a role in serving. They might come in with a recent crisis, such as an overdose or an act of violence or theft by their loved one. They might not know where their loved one is and if they are safe. Materials, resource guides, programs, and understanding staff can assist these people to help not only their loved one, but also themselves.

People in our communities are struggling and dying. In order to win the fight against addiction and to support those in recovery, we have to become active on every level. Addiction is an individual problem, and those struggling with addiction and recovery need individual attention and support. Addiction is a family problem, and the family systems of those with addiction and in recovery all need support. Addiction is a community problem, and the community needs to come together and provide services and support for its

members. Addiction is a state problem, and we all need support organizations, laws, and guidance to respond in a way that supports recovery. Addiction is a national problem that needs government oversight, regulations, and laws to prevent, protect, and support everyone.

Libraries can make small changes that cumulatively have a large and long-lasting impact on the people in their communities. The impact you have will not go unnoticed, and patrons who are aware of the substance abuse epidemic will see the library as being part of the solution. The public will see a library listening to its community and doing what it can to support it.

REFERENCES

- American Library Association. 2004. "Core Values of Librarianship." June 29. www.ala.org/advocacy/intfreedom/corevalues.
- WebJunction and PLA. 2017. "Opioid Crisis Town Hall: Library Needs and Responses." www.webjunction.org/events/webjunction/opioid-crisis-town-hall.html.

Index

A

Adderall, 71
addiction
 caregivers and, 17
 causes of, 7–9
 as disease, 8–9
 elderly and, 16–17
 homelessness and, 14–15
 identifying, 10
 language and, 23
 library’s role in fight against, 1–5
 mental health disorders and, 14
 opioid crisis and, 9
 prevention of, 3–4
 shame of, 3
 support for those affected by, 4–5
 understanding, 7–11
 veterans and, 15–16
 young adults and, 16
ADHD (attention deficit hyperactivity disorder), 71
adults, recommended books for, 91–94
aerosols, 85
AIDS, 22–23
alcohol, 74, 77–79
alcoholism, elderly and, 17
American Library Association (ALA),
 1–2, 60
amobarbital, 75
amphetamines, 71–72

angel dust, 81
appearance, not relying on, 21
approving policies, 36
art programs, 41
Ativan, 76

B

barbiturates, 74–75
bathrooms, drug use in, 29
Beautiful Boy (Sheff), 4, 42
behaviors
 disruptive, 23–24
 policies for, 32–34
 problem, 15
 stigma and, 21–24
benzodiazepines, 17, 74, 76–77
Black Belt Librarian, The (Graham), 32
book displays, 45
book groups, 41
books, recommended
 for adults, 91–94
 for children, 95–96
 for library workers, 100–101
 for young adults, 94–95
Buzzed (Kuhn), 65
bystander training, 40–41

C

candlelight vigils, overdose, 53
cannabis, 84

caregivers, 17
 Centers for Disease Control (CDC), 9,
 26, 59
 Chicken Soup for the Soul series, 43
 children. *See also* young adults
 policies for, 34
 recommended books for, 95–96
 cocaine, 71, 73–74
 collaborative programming/services, 42,
 47, 48, 51–56
 Combat Methamphetamine Epidemic Act
 (2005), 72
 communication
 with community, 3
 importance of, 19, 60
 with patrons, 10
 compassion, 13
 Concerta, 71
 confidence, 22, 45
 confidentiality, 35, 46
 co-occurring disorders, 14
 “Core Values of Librarianship,” 1–2
 crack, 71, 73–74
 crystal meth, 72–73

D
 date rape drugs, 77, 83
 deaths due to drug overdoses, rates
 of, xv
 deliriants, 79
 delirium tremens, 79
 depressants, 74–79
 Desoxyn, 72–73
 Deterra, 58
 detox facilities, 55
 Dexedrine, 71
 dissociatives, 79
 distress, people in, 13–19
 DMT, 79
 DontDie.org, 28
 dopamine, 8
 drug awareness programs, 40
 Drug Enforcement Administration, U.S.
 (DEA), 9
 drug use, signs of, 10, 21–22, 65–89
 Dsuvia, 9

E
 ecstasy (MDMA), 79, 84–85
 elderly, 16–17

F
 fentanyl, 27, 27*fig*, 66, 67, 69–70
 films, recommended, 96–97
 Food and Drug Administration (FDA), 9, 58
 funding library services, 47–48

G
 gases, 85
 GHB (gamma-hydroxybutyric acid), 77
 Good Samaritan laws, 59
 Graham, Warren, 24, 32, 57–58
 grieving after overdose, 18–19

H
 hallucinogens, 79–85
 hazardous materials, 58
 “Helping Patients Cope with a Traumatic
 Event,” 59
 heroin
 about, 66, 67
 as substitute for pain
 medication, 15, 16
 homelessness, 14–15

I
 information services, 44
 inhalants, 85–86

J
 Jorm, Tony, 58

K
 keeping up-to-date, 61
 ketamine, 79, 83
 Kitchener, Betty, 58
 Klonopin, 76
 Kuhn, Cynthia, 65

L
 language
 in policies, 35–36
 relating to addiction, 23

Learn to Cope, 54

libraries

- openness of, 2, 14, 25
- outreach and marketing and, 51–56
- overdoses in, 2, 28
- policies for, 31–37
- role of in fight against
 - addiction, 1–5, 63–64
- safety and security in, 25–30
- services of, 39–49
- staff training and, 57–61

Librium, 76

life-skills programming, 41–42

local organizations, 52–53

LSD (lysergic acid diethylamide), 79, 80–81

M

marijuana, 79, 84

marketing, 51–56

materials, library, 42–44

media

- outreach to, 56
- policies for, 34–35

memoirs, 43

mental health disorders, 14

Mental Health First Aid training, 58

methadone, 70

methamphetamines, 71, 72–73

mission statements, review of, 3

morphine, 66

movies, 43

music, 43

N

naloxone, 2, 27–28, 59

NaloxoneNow, 28

Narcan administration training, 41

narcotics, 65–70

National Academy of Engineering, 9

National Academy of Medicine, 9

National Academy of Science, 9

National Association of Social Workers, 47

National Council on Alcoholism and Drug Dependence, 17

National Institute on Drug Abuse, 8, 27, 61

National Library of Medicine, U.S., 60

National Recovery Month, 53

National Survey on Drug Use and Health, 14

Network for Public Health Law, 59

neurotransmitters, 8

nitrites, 85

O

off-site training, 59–60

online resources, recommended, 97–100

online training, 60

opiates and opioids, signs of use of, 65–70

opioid crisis, 9

Opioid Overdose Prevention Toolkit, 59

opium, 66

outreach, 51–56

overdoses

- candlelight vigils for, 53
- drugs involved in, 26*fig*
- from fentanyl, 27*fig*
- grieving after, 18–19
- in libraries, 2, 28
- preparedness for, xv
- preventing/prevention training
 - and, 26–28, 59
- statistics on, 26

oxycodone, 66, 68–69

OxyContin, 9, 66, 68–69

P

patrons in crisis, working with, 2–3

PCP (phencyclidine), 79, 81–83

peer navigators, 47

pentobarbital, 75

Percocet, 68–69

Percodan, 68–69

person-first language, 23

peyote, 79

phenobarbital, 75

physiological causes of addiction, 8–9

police

- discussing library policies with, 36
- when to involve, 34

policies, library, 31–37

Preisler, Steve, 72

prescription drug drop boxes, 58
 prescription pain medication,
 overprescribing of, 9
 privacy, 35
 problem behaviors, 15
 programming, 39–42
 psilocybin/psilocybin mushrooms, 79, 81
 psychedelics, 79–85
 psychological causes of addiction, 8
 PubMed website, 7

R

radical transparency, 35
 readers' advisory services, 44–46
 recommended reading guides, 45–46
 recovery high schools, 55
 rehabilitation centers
 circulating materials to residents of, 44
 outreach to, 55
 resource guides, 44–46, 53, 60
 respect, 22–23
 reviewing policies, 36
 Ritalin, 71
 rohypnol, 77
 role-playing, 37
 Roxicodone, 68–69

S

safety and security, 25–30, 34
 secobarbital, 75
Secrets of Methamphetamine Manufacture,
 The (Preisler), 72
 senior citizens, 16–17
 serotonin, 79
 sharp and hazardous materials, 58
 sharps containers, 29, 58
 Sheff, David, 4, 42
 short stories, 43
 Shulgin, Alexander, 84
 sleeping in library, 33
 social causes of addiction, 8
 social media
 outreach and, 56
 policies for, 34–35
 social responsibility, 1–2

social services, 46–47
 social stigma, 3
 social workers as library staff, 47
 space, sharing of, 52
 speaking events, 52
 speed, 72–73
 staff training, 57–61
 starfish parable, 63–64
 Stevens, Calvin, 83
 stigma, 21–24
 stimulants, 70–74
 Substance Abuse and Mental Health
 Services Administration, 59
 sudden sniffing death syndrome (SSDS),
 85–86
 suicide rates among veterans, 15

T

television programs, recommended, 96–97
 training
 creating program for, 60
 policy, 36–37
 staff, 57–61
 traumatic events, coping with, 59

U

U.S. Drug Enforcement Administration
 (DEA), 9
 U.S. National Library of Medicine, 60

V

Valium, 76
 veterans, 15–16
 Veterans Affairs facilities, 15–16
 violence, 25
 volatile solvents, 85

W

WebJunction, 61
 withdrawal, as motivator for drug use, 10
 writing policies, 35–36

X

Xanax, 76
 Xtampza ER, 68–69

Y

yoga programs, 41

young adults. *See also* children

addiction and, 16

outreach to, 55

recommended books for, 94–95