

APRIL 2026

THE CHARLES TOWN INITIATIVE

Monthly Newsletter



DEAR CHARLES TOWN,

Spring is in the air, and so is momentum. From the energy of our first-ever March Madness basketball event to the launch of the Jefferson County SUPAR Coalition, this season has been full of community coming together. We're also shining a spotlight on JBA member Caroline Wilson and CTI Lead Mentor Brian Hairston — their stories remind us why this work matters. We hope these stories inspire you as much as they inspire us. As always, this work is only possible because of the mentors, partners, volunteers, and community members who show up every single day for Jefferson County.



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March 2026

School Support Specialist and Lead Mentor

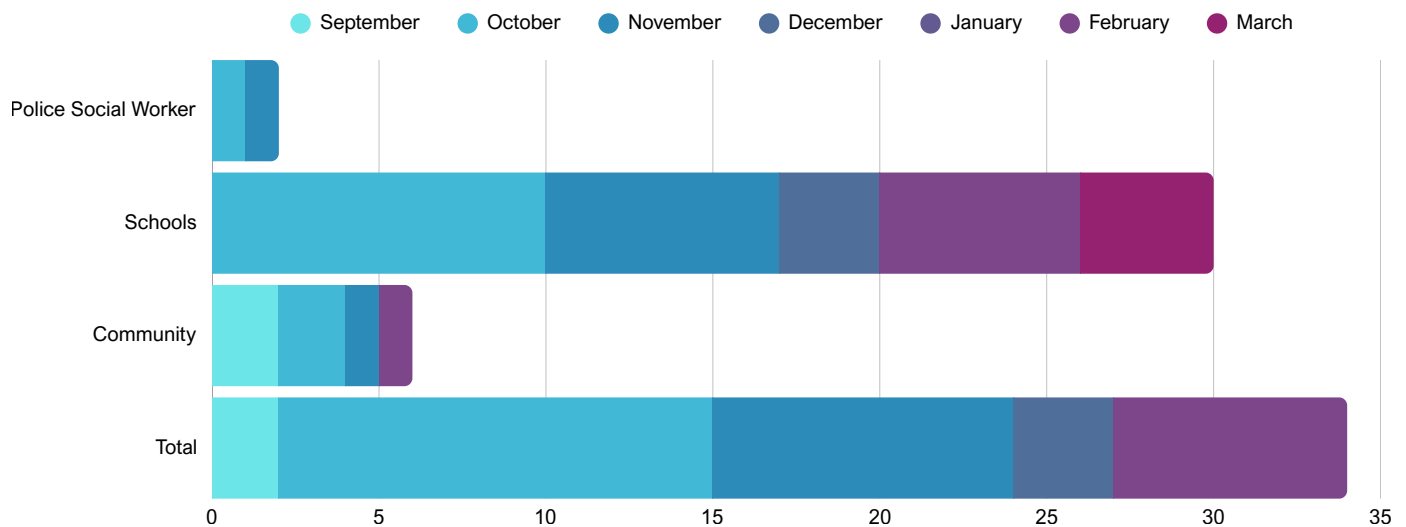
Number of Moderate- or High-Risk Students on Caseload

21 students

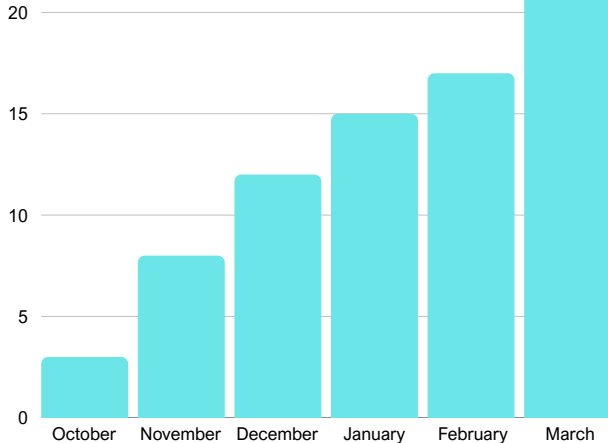
Specialized Skills Building to Moderate/High Risk Children

17 sessions

Source of Referrals to School Support Specialist



Growth in School Support Specialist Caseload



Number of Mentoring Sessions

28 sessions

Number of Crisis Interventions Provided

6 sessions

Number of ACEs Screenings

5 screenings

Success by Numbers

March 2026

Police Support Specialist



Successful Encounters

11 encounters

Number of New Referrals

5 referrals

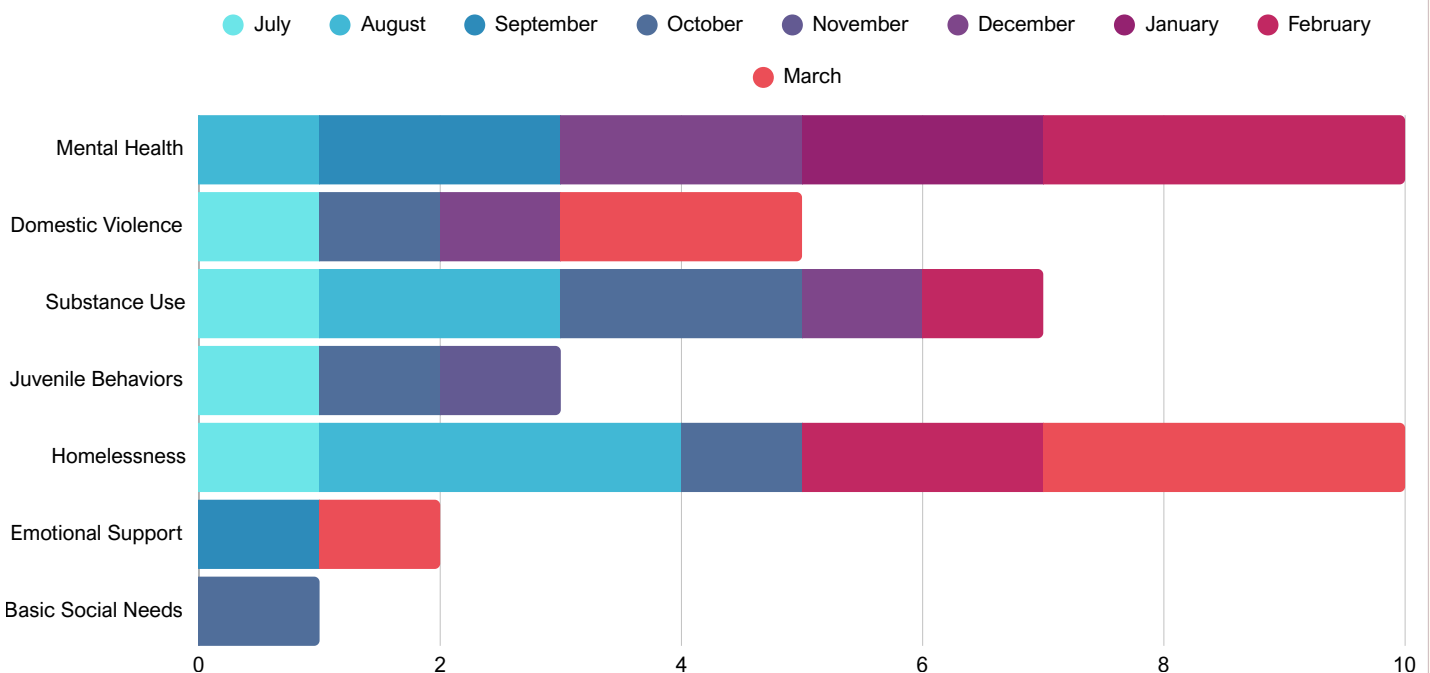
Number of SDOH Screenings

5 screenings

Individuals on Caseload

12 people

Number of Referrals to Police Support Specialist from July 2025 to March 2026



SHOWING UP: HOW ONE MENTOR IS CHANGING LIVES ONE CONVERSATION AT A TIME

Brian Hairston has spent years building mentoring relationships with students in Berkeley County. During the 2025–2026 school year, his work expanded into Jefferson County, where he has continued his relationship-based approach to mentoring, often building programs and connections in unexpected ways.

Brian describes many of this year’s successes as “serendipitous connections,” explaining that he often goes into schools with a plan to visit specific students but ends up building relationships with teachers and staff along the way. Those relationships have helped him find new ways to connect with students and create opportunities for mentorship.

One example came from a chance conversation with an English teacher at Charles Town Middle School, which led to the joint idea of starting a student chess club. For Brian, chess is more than just a game: it’s a way to build relationships. The newly formed chess club will also help Brian establish a consistent presence in the school and create a space where students can spend time, talk, and build trust.



“

“I play chess because it’s a nice way to talk to someone,” he said. “It takes the pressure off the conversations.”

”

Brian connects with students in many different ways, including sports. Having grown up playing basketball, he recently participated in TMI's March Madness basketball event that brought nearly 100 people together. Events like this allow students to have fun while also building relationships with mentors and positive role models.



Brian says the most important part of his work is building genuine relationships.

“The beautiful thing about this job is that nobody sees me coming... I’m able to have a genuine human interaction and we can talk about the deep parts of life.”

Some of Brian's most meaningful moments come from everyday conversations. He spends time in the school library reading and talking with students about books, history, and life. He also mentors students more formally, sometimes inviting them to share a meal. These small moments, he says, allow students to relax, enjoy themselves, and open up about life, school, and their future.

“

Reflecting on his work, Brian often thinks about his own childhood and the mentors who helped guide him. “This job is special because it is an expression of my life,” he said. “I remember growing up and wanting to know how to make it in life. I wished I could find someone older who could help me be successful. Now, when I see students like that, it makes this job feel like magic.”

”

For Brian, mentoring is not just a job; it's a lifelong mission built on conversation, connection, and showing up for students when they need someone in their corner. “It's the pleasure of a lifetime to do what I'm doing.”



MARCH MADNESS

Hoops, Heart, and Community: A Day of Fun and Mentorship on the Court

Drug-Free Communities Coalition Coordinator, Tom Kearns, and Lead Mentor, Brian Hairston, recently participated in a March Madness community event. With over 50 attendees, the day was filled with energy, teamwork, and fun. Participants were divided into groups by age and gender, enjoyed pizza and prizes, and stayed active throughout the event. We were especially honored to play alongside Vicky Bullett, former professional basketball player and current women's basketball head coach at West Virginia Wesleyan College. She shared an inspiring message with the kids and spent the day coaching and encouraging everyone on the court.



CHECK OUT JBA'S NEW INSTAGRAM PAGE!

Follow the Jefferson Berkeley Alliance on Instagram for the latest updates, events, and stories from across our community! Our page is a great way to stay connected, see the work happening on the ground, and share in the moments that make this mission meaningful. Search @jeffersonberkeleyalliance and give us a follow today.

SCHOOLS

LAW ENFORCEMENT

COMMUNITY

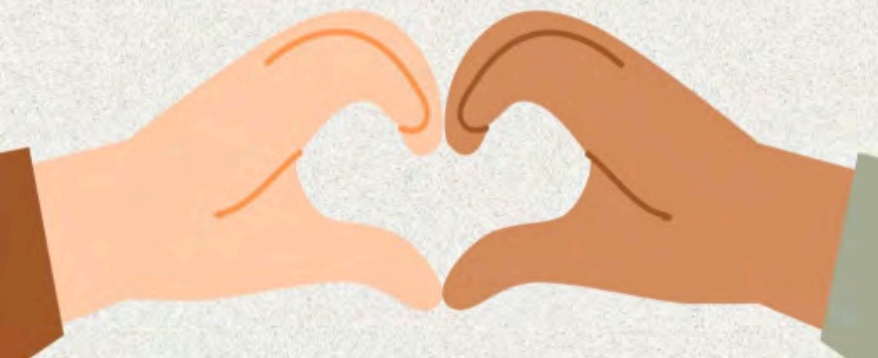
Real programs. Real partners.
Real impact in Jefferson and Berkeley Counties.

**WHAT IS THE JEFFERSON-
BERKELEY ALLIANCE ON
SUBSTANCE USE
PREVENTION?**

**WE ARE A COALITION OF
COMMUNITY MEMBERS**



**WORKING TO PREVENT
SUBSTANCE USE, REDUCE STIGMA,
AND CONNECT PEOPLE TO CARE.**



THE JEFFERSON COUNTY SUPAR COALITION

Together, we're building a recovery network that leaves no one behind.

On March 19th, community partners gathered at the Charles Town Police Department for the inaugural meeting of the Jefferson County Substance Use Prevention and Recovery (SUPAR) Coalition. This meeting marked a milestone moment in our region's response to the opioid crisis.

The SUPAR Coalition brings together agencies and organizations committed to a unified, multi-agency approach to substance use prevention and recovery in Jefferson County. Funding supporting this effort is expanding access to Medication-Assisted Treatment, peer recovery support, mental health services, overdose prevention, and case management, with a particular focus on high-risk populations including justice-involved individuals, pregnant women, and those re-entering from incarceration. The initiative also works to strengthen housing stability, job placement, and transportation access, recognizing that lasting recovery requires more than clinical care alone.

At the inaugural meeting, partners reviewed the current SUD landscape in Jefferson County, discussed service gaps, and began laying the groundwork for the coalition's structure and priorities. The energy in the room reflected what so many of us already know: when our community comes together with purpose, meaningful change is possible.

We are proud to be part of this coalition and look forward to sharing updates as this important work continues to grow.

A VETERINARY SEDATIVE IS SPREADING THROUGH THE U.S. DRUG SUPPLY. DOCTORS AREN'T READY FOR IT.

Medetomidine, known as "rhino tranq," is showing up in nearly all fentanyl sold in the Northeast. It causes overdoses naloxone cannot reverse and a dangerous withdrawal that can damage the heart and brain.

A powerful veterinary sedative originally developed to anesthetize large animals is quietly reshaping the U.S. overdose crisis. Medetomidine, which is more potent than both clonidine and xylazine and not approved for human use, has been found in illegal fentanyl supplies across at least 18 states and Washington, D.C., and its prevalence is accelerating at an alarming pace.

Forensic laboratory reports submitted to the National Forensic Laboratory Information System jumped from 247 in 2023 to 8,233 in 2025 — a rise of over 3,000% in two years. The drug is most concentrated in the Northeast, where more than half of all U.S. detections occur, followed by the Midwest. Eight of the 20 government-monitored drug-testing sites found medetomidine in over half of all opioid-positive samples.

What makes medetomidine particularly dangerous is not just its sedative potency; it's that our standard emergency response is only partially effective against it. Unlike fentanyl, medetomidine cannot be reversed by naloxone.

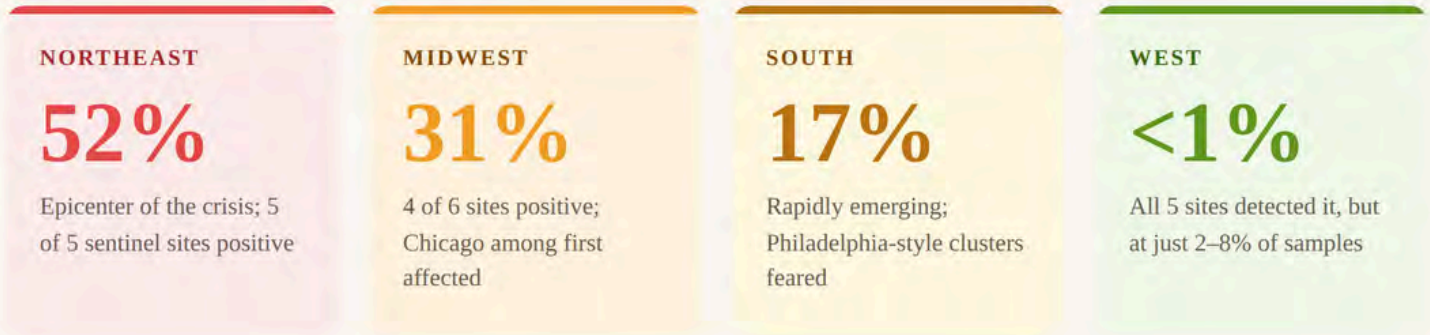
"While apnea may be reversed with naloxone, sedation from medetomidine may not be reversed — patients can remain deeply unconscious even after the opioid effect is addressed" - CDC Health Alert Network.

Two Distinct Threats: Overdose and Withdrawal

Clinicians and first responders are now contending with two separate emergencies tied to the same substance. The first is acute overdose: medetomidine causes profound, prolonged sedation alongside dramatic drops in heart rate and dangerously low blood pressure. Since fentanyl is almost always co-present, naloxone remains the essential first step to restore breathing. But the sedation can persist long after the opioid effect is reversed, leaving patients in a medically precarious state.

Medetomidine Is Concentrated in the Northeast — But Spreading Fast

Share of all U.S. forensic lab detections by region, 2025



The second threat is withdrawal. When someone who has been regularly exposed to medetomidine stops using, their body can enter a state of severe autonomic crisis. Symptoms typically begin within hours and peak between 18 and 36 hours after last use. Unlike opioid withdrawal, which is rarely fatal in otherwise healthy adults, medetomidine withdrawal has been linked to heart attacks and posterior reversible encephalopathy syndrome, a condition that can cause seizures and vision loss.

From September 2024 through January 2025 alone, 165 patients across three Philadelphia health systems were hospitalized for fentanyl withdrawal complicated by severe autonomic dysfunction believed to be caused by medetomidine. Similar surges hit Pittsburgh and Maryland, where hospitals reported patients requiring intensive care and intravenous sedation to manage the crisis.

Overdose (Acute Toxicity)

- Heart rate: **as low as 32 bpm**
- Blood pressure: **Dangerously LOW**
- Consciousness: **Profound sedation**
- Pupils: **Pinpoint**
- Naloxone effect: **Restores breathing only**
- Onset: **Immediate**

VS

Withdrawal (After Regular Use)

- Heart rate: **over 100 bpm**
- Blood pressure: **Severely HIGH**
- Consciousness: **Fluctuating alertness**
- Other symptoms: **Tremor, chest pain**
- GI symptoms: **Intractable vomiting**
- Peak timing: **18–36 hrs after last use**

What To Do

The CDC advises that naloxone should still be administered in any suspected overdose — since fentanyl is almost always co-present. Emergency responders should give repeat doses every 2–3 minutes to ensure the person is breathing, then place them in the recovery position. Sedation from medetomidine will subside on its own over time. Anyone experiencing withdrawal symptoms — particularly severe vomiting, chest pain, or fluctuating consciousness — needs emergency medical care immediately.

If you or someone you know uses fentanyl and experiences severe nausea, chest pain, or goes in and out of awareness, call 911 immediately. For overdose response questions, contact Poison Control. For substance use treatment, call or text SAMHSA's helpline.

Poison Control: 1-800-222-1222 SAMHSA: 1-800-662-4357

[Read the full report.](#)

98[%]

Of all drug samples testing positive for medetomidine **also contained fentanyl** — making co-exposure nearly universal for people who use illegal opioids.

165

Patients hospitalized across three health systems for fentanyl withdrawal complicated by severe autonomic dysfunction — in just five months.

CDC
ALERT
2026

WITHDRAWAL TIMELINE

HOURS UNTIL PEAK WITHDRAWAL

18–36

Withdrawal can begin within hours of last use and peaks at 18–36 hours. **Complications include heart attack and brain damage** if untreated.

STATES AFFECTED

DETECTIONS BY LATE JULY 2024

18^{+DC}

Medetomidine found in drug samples and biological specimens across **at least 18 states and Washington D.C.** — and spread has accelerated since.



“TALK. THEY HEAR YOU.”[®]
CAMPAIGN



What You Can Do to Prevent Your Child From Drinking Alcohol or Using Other Drugs

Be aware of potential risk factors, including:

- Significant life transitions, such as graduating from middle or high school or getting a driver's license;
- A history of social and emotional problems;
- Depression, anxiety disorders, or other mental health issues;
- A family history of alcohol or other substance use disorders; and
- Hanging out with friends or peers who drink alcohol or use other drugs.

Be a positive role model.



- Don't drink alcohol or use other drugs and drive, and don't get in a car if the driver has been drinking or using other drugs.
- Don't use prescription medication that wasn't prescribed by your doctor. And don't misuse medication that was prescribed to you.
- Get help if you think you have an alcohol- or other drug use-related problem.
- Don't give alcohol or other drugs to your child or their friends and peers. Explain that underage drinking and other drug use are never acceptable inside or outside your home.
- Know where you keep all of your alcohol and prescription medication, and always remind your child and their friends and peers that these substances are off-limits.

Work with schools and communities to ensure that they:

- Support and reward young people's decisions not to drink alcohol and use other drugs;
- Identify and intervene with kids who are engaged in alcohol and other drug use;
- Create, enforce, and promote rules that prevent underage drinking and other drug use; and
- Develop acceptable behavior agreements that are established, well-known, and applied consistently.

Provide support and give space for growth.

- Be involved in your child's life. Go to their school events and extracurricular activities, ask about their day, follow through on your commitments to them, and set aside time to do things together.
- Stay actively engaged in their social media activity. Talk with them about the differences between appropriate and inappropriate content and emphasize that what gets posted online can be there forever.
- Encourage their independence while establishing appropriate limits.
- Make it easy for them to share information about their life by actively listening and asking open-ended questions.
- Know where they are, what they're doing, and whom they're spending time with.

- Meet and get to know the parents or caregivers of their friends and peers. Share your rules about not allowing underage drinking or other drug use.
- Find ways for them to be involved in family life, such as participating in fun family activities and events, helping with house projects or weekly meal planning, doing chores, or volunteering together in the community.

Set clear rules and expectations.

- Brainstorm with your child about ways they can have fun without drinking alcohol or using other drugs.
- Encourage them to avoid parties and other gatherings where alcohol or other drugs are present. And don't allow underage drinking or other drug use at get-togethers in your home.

- Tell them to never drink alcohol or use other drugs and drive or get in a car driven by someone who has been drinking or using other drugs.
- Help them find services and support if you're worried that they're using substances.
- Create and sign a family agreement form where you agree to help keep them substance-free and they agree to not drink alcohol or use other drugs.
- Learn more about the risks and dangers of underage drinking and other drug use by visiting talktheyhearyou.samhsa.gov and using #TalkTheyHearYou on social media. Share and discuss this information with them.



Use Screen4Success.

Talking with kids early and often about the risks and dangers of underage drinking and other drug use can help keep them safe. But how do you know if your child needs more support, and where do you go to find it? Screen4Success will help you better understand your child's health, wellness, and wellbeing and find resources to help address their needs.

HELPFUL RESOURCES



Use and share Screen4Success.



Download and use "Talk. They Hear You." mobile app.



Subscribe and listen to "What Parents Are Saying" podcast.



Download and order "Talk. They Hear You." materials online from SAMHSA Store.



Download and read full "Tips for Teens" fact sheet series.



Download and read other SAMHSA underage drinking prevention and reduction materials.

