



***A Resource Guide
for Families:
Raising
Healthy Teens***

District 99 Student Assistance Program

Dear Parent/Guardian:

Guiding your children through the teen years can pose real challenges to any parent. It is natural and normal for this age group to want to test limits and gain new experiences. Unfortunately, the flip side of this healthy desire is exposure to activities that are not always healthy, such as the use of alcohol, tobacco, and other drugs. Many times these illegal activities take place when teens gather at parties.

This booklet is designed to help parents/guardians of current District 99 students recognize that their teenage children need to socialize and have fun together and that parents have the ability and responsibility to make sure teens party in a safe and healthy way. This guide also contains a wealth of information to keep you up to date on current drug trends, prevention ideas, community support resources, as well as changes in state laws which might affect your teenager.

By paying close and loving attention to your child during these crucial years, you will reap many rewards, including a stronger, healthier relationship. Each family should take into account its own values as they implement the suggestions in the booklet. It is most important to establish and clearly communicate reasonable expectations regarding your child's safety.

As always, the District 99 staff is ready to assist students, and parents/guardians with a variety of issues. Contact us for more information and assistance.

Sincerely,

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NOTE: This handbook is a guide. Illinois laws and local policies may change without notice. Phone numbers for support agencies may change as well. For all emergencies call 911, or if you are unsure of where to call to obtain information, please call your local police department. District 99 does not endorse or recommend any of the social service agencies listed as references in this handbook, and may not be held liable for interactions with said agencies.

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Did You Know

That the younger a person starts drinking, the more likely the individual will abuse alcohol or become an alcoholic?

According to a study by the National Institute of Health, for every year a youth delays drinking, the risk of getting hooked on alcohol goes down by 14 percent. What's more, underage drinkers get into more accidents, get into more trouble at home and school, and have a higher risk of being sexually active. Clearly, it is important for parents, schools, and communities to take a firm stance against the use of alcohol by teens.

Unfortunately, many parents and other adults give kids mixed messages and do not take a firm, "no tolerance" stand. They give excuses such as, "they won't get hurt if they drink at my home." But the reality is that kids who are allowed to drink at home are more likely to use alcohol outside the home and are more likely to develop behavioral and health problems related to alcohol abuse.

A Checklist for Parents

- ✓ Establish clear limits and apply them consistently. When kids are told it's okay to drink in certain situations, they are likely to think it's okay in other situations too.
- ✓ Set reasonable consequences for violating limits. Avoid threats, emotional outbursts, or physical punishments.
- ✓ Talk to, and listen to, your kids. Be open and supportive.
- ✓ Be a responsible role model. If you drink alcoholic beverages, do so responsibly.

**Learn to separate the MYTHS from the FACTS
about teenage drinking.
IT COULD SAVE YOUR CHILD'S LIFE!**

Myth: *It's not hurting anyone.*

FACT: *Alcohol is the number one killer of teens.*

- The death rate has been declining for every age but teens.
- Driving while impaired is a leading cause of death for the 15-24 age group.
- Alcohol is involved in more than half of all fatal crashes in which the driver is under 21.
- Suicide is another cause of teenage deaths. Suicides are 20 times more likely today to be alcohol/drug related than they were 20 years ago.
- Adolescents who drink and use drugs are more likely to be victims or perpetrators of crimes including vandalism and sexual assault.

Myth: *It's only beer.*

FACT: *Beer is a drug, too.*

- There is as much pure alcohol in a can of beer as there is in a 5 oz. glass of wine or a drink mixed with 1½ oz. of spirits.
- Alcohol has been called the most active drug affecting the human body, impairing the intellect, physical abilities, and metabolism.
- Chemical action of alcohol on the nervous system is similar to that of ether.

Myth: *It's just a harmless phase.*

FACT: *Alcohol impairs performance and retards development.*

- Use of alcohol decreases concentration, attention and memory retention, contributing to a loss of achievement and goal orientation.
- Alcohol use by teenagers impedes the development of a wide range of skills and competencies needed for developing self-confidence, for maintaining healthy relationships, and for fulfilling potential.

Myth: *There is no difference between adults and teenagers drinking. I would be a hypocrite to tell my child to abstain.*

FACT: *Teenagers are more vulnerable to the effects of alcohol.*

- Teens can become addicted more quickly because of their body size, metabolic rate, and the immaturity of their body systems.
- Adolescents who drink and use drugs are more likely to be victims or perpetrators of crimes including vandalism and sexual assault.
- EMOTIONAL development STOPS when regular drinking begins. When chemicals become the solution to life's challenges then socially acceptable coping and problem skills are not developed.
- The use of alcohol suppresses inhibitions and judgment, permitting young people to cross the line of sexual involvement at younger and younger ages.

Myth: *My child can drink responsibly.*

FACT: *Teenage drinking is against the law.*

- Alcohol is an illegal substance for anyone under 21.
- Just as there is no such thing as a responsible shoplifter, burglar, or murderer, there is no such thing as a responsible underage drinker. The 21 drinking age is the result of an overwhelming consensus of the citizens of Illinois. Teenagers tell us that they drink to get intoxicated or wasted, not to be responsible.

Why Adolescents Should Not Use Alcohol at All

- Adolescents become addicted to alcohol in as little as six months, because they are still developing physically and psychologically. This maturation process continues until approximately 21-24 years of age.
- Youth do not drink socially—they usually drink to get bombed or drunk. A pattern of drinking to get buzzed or drunk is one of the early signs of an impending drinking problem.
- Alcohol is a depressant. As little as one or two beers begins to put the brain to sleep. The result is that coordination, judgment, reflexes, and emotions are impaired. When driving, that can mean the difference between a crash and a near hit. When studying for an exam, it may determine the difference between a C and A.

Teens, Alcohol and the Law

The State of Illinois and many of its municipalities have passed tougher laws in recent years concerning the use of alcohol by minors. In fact, two statewide “zero tolerance” laws took effect on January 1, 1995. The laws make it illegal for any driver under the age of 21 to have even a trace of alcohol in their blood. The laws mandate strong penalties for parents who allow their children’s underage friends to drink in their homes.

- The new **“Use It & Lose It”** law requires an **automatic three month** suspension of a minor’s driver’s license if police detect even a trace of alcohol (0.01 or above) in the driver’s system. A minor’s refusal to submit to the sobriety test will result in an automatic 6-month suspension of driving privileges. A second offense yields a one-year suspension. Under this law, penalties are doubled if the minor refuses the sobriety test.
- If an underage driver is found to have a blood alcohol level of .08 or greater, he or she faces a drunken driving charge (DUI) and the loss of driving privileges for a minimum of two years. A DUI conviction remains on the driver’s permanent driving record.
- The new laws also make parents face up to greater responsibility for underage drinking. Adults are not only in violation if they are present when underage drinking is taking place, but they also will be held responsible if they knowingly allow their home to be used for underage drinking – even if they are not home. **Those in violation can be charged with a Class A Misdemeanor, punishable with a fine of up to \$2,500 and possible jail time.**
- **What about parents who rent a hotel room where minors are found to be drinking?** The penalties can be severe. The adult(s) may be held liable for property and injury damages, in addition to fines and possible jail time.

Also be Aware of these Laws . . .

Underage Possession of Alcohol

Any person under the age of 21 who has alcohol in his or her possession on any street or in any public place may be guilty of a Class A Misdemeanor, punishable by a fine of up to \$2,500 and/or imprisonment of up to one year.

Alcohol in a Vehicle

If you are under age 21 and in physical control of a motor vehicle in which there is alcohol, your license can be suspended for 12 months on the first offense. On a second offense, your license can be revoked. Many people think that they are not violating the law if they simply ride in, not drive a vehicle, in which there is a container of alcoholic beverage. That perception is wrong. No matter who the alcohol belongs to, everyone in the vehicle can be charged with illegal transportation.

Fake ID's

A minor convicted of purchasing, accepting, possessing, or consuming alcohol and in possession of false identification will have their driving privileges suspended for one year by the Secretary of State. Using someone else's ID or lending your ID to a minor is punishable by one year in jail and a fine up to \$2,500. It is a class 4 Felony to present false information to obtain identification from the Secretary of State, punishable by 1-3 years imprisonment and a fine of up to \$2,500.

Furnishing Alcoholic Beverages to Minors

It is illegal to provide alcohol to a person under age 21 (except in the performance of a religious service). This is a Class A Misdemeanor, punishable by a fine of up to \$2500 and/or imprisonment up to one year.

Parent Responsibility Laws and Civil Liability

There is a growing trend in Illinois communities to enact laws holding parents responsible for their children's illegal behavior. In our communities, parents can be penalized for their minor child's repeated curfew violations, illegal drinking, and other infractions. Adults who furnish alcohol to a minor (including a party at home) may be fined up to \$1,000 and given a jail sentence of up to one year. They may also be liable in a civil action for monetary damages if someone is hurt as a result of the intoxicated minor.

College Financial Aid Jeopardized by Drug Conviction

A federal law enacted in 1998 authorizes the suspension of federal student loan or grant eligibility if a student is convicted of a drug-related offense.

What Can Parents Do?

- 1. Understand that it is in your family's best interest to know and obey the laws pertaining to underage drinking.** Under the current laws, it's not just kids who suffer the consequences of underage drinking. The whole family can suffer from added legal complications and costs. Insurance costs could rise sharply, or the family could lose their coverage. Adults who violate the law by furnishing alcohol to a minor may be sued for personal or property damages caused by the minor.
- 2. Do not let your kids talk you into allowing them to have alcohol in your home.** Don't believe that it's better for them to drink at home than someplace else.
- 3. Do not allow graduation parties to be celebrated with teen drinking as a reward.** Underage drinking is not okay – even if teens stay overnight and don't drive.
- 4. Establish a “no use” policy in your family, then enforce it. “No one in this family should use illegal drugs, and no one under the age of 21 should use alcohol.”** If possible, you should establish this policy when your children are still in grade school, then review it with them at least once a year. Set up **consequences** for breaking this rule and discuss them as a family.

When you set a rule or a limit, you must be willing to expend the energy to **enforce** it. You must also set logical consequences in advance and you and your child should agree on them in advance.

Grounding is a frequently used consequence, but there are many other consequences worth considering, such as **community service, volunteer work at church, household jobs, or simply cutting back on privileges** (e.g. earlier curfews, shortened time with friends, etc.).

Teenagers can expect to have more freedom than younger children do, but they still **need** limits placed on that freedom. When a teen breaks a family rule, he or she should suffer the consequences. Teens who exercise good judgment and earn the trust of their parents can gradually earn additional privileges.

- 5. Homes where parents are absent frequently become party sites.** If you must be out of town while your teen remains at home, make arrangements for adequate supervision.
- 6. When you must be away, do all the following:**
 - ✦ Have an adult stay in the home
 - ✦ Alert neighbors
 - ✦ Inform the parents of your child's friends
 - ✦ Ask the police to watch your house
- 7. When you need to go out for the evening, or all day...**
 - ✦ If you have reason to be concerned, don't tell your teenager how long you'll be gone. That gives them time to plan.
 - ✦ Leave a phone number where you can be reached.
 - ✦ If possible, don't let them know that the house will be empty.
 - ✦ Call your home, and if you find reason to be suspicious, contact someone to check things out. It's better to check and show your concern (even if it's not warranted) than to be sorry later.

- 8. Set ground rules for teens in your home.**
- ✦ No revolving door policy. This discourages teens from leaving your home to drink or use drugs and then returning.
 - ✦ Do not have alcohol accessible to youth. It's easy to lock it up.
- 9. Know and enforce the legal curfew time for your child.** Be awake when your child returns home. Don't go to bed. Fall asleep on a couch or your child's bed so you can have contact with your child when he or she returns home. Children will be much less likely to get into trouble if they know you will be alert when they get home. These are often good times to talk.
- 10. Know where your child will be when he or she is away from home.** Let your teen know that you expect a phone call if his or her plans change.
- 11. Have rules about overnights.** Discuss and enforce them consistently. If your teenager stays overnight with a friend, always check with the friend's parents to make sure that they will be home and that the teens' curfew will be enforced. If these arrangements cannot be made before the teen goes out, then deny permission.
- 12. Talk to your teen about how to handle situations where alcohol or other drugs are available.** Listen to what your teen has to say. Find out what kinds of pressures he/she is facing. Help your teen think of ways to resist these pressures. Encourage your child to use you as the "heavy" when being pressured to do something unhealthy or illegal. For example: "Sorry, I'd better go home now. My mom doesn't let me stay out past curfew," or "I'm participating in activities/athletics, I can't break the code."
- 13. Don't underestimate the impact of alcohol and tobacco marketing and advertising on your teen.** Youth are bombarded with commercial messages that glamorize the use of alcohol and tobacco. Find out what your teen thinks about these messages and whether he/she understands that the purpose of these ads is to sell products and not to teach about the harmful effects of these products.

**DON'T MAKE EXCEPTIONS OR BARGAIN WITH YOUR KIDS!
IMPORTANT!**

- ✦ *Adult supervision at teen parties.*
- ✦ *Adult supervision for overnights.*
- ✦ *Parents knowing where their teenager is for extended periods,
and knowing who is with him/her.*

Illinois Child Curfew Act

Curfew Penalty for Violations

Chapter 23-2371

1. (a) It is unlawful for a person less than 17 years of age (18 in Woodridge) to be present at or upon any public assembly, building, place, street or highway at the following times unless accompanied and supervised by a parent, legal guardian or other responsible companion at least 18 years of age approved by a parent or legal guardian, or unless engaged in a business or occupation which the laws of this State authorize a person less than 17 years of age to perform:
 1. Between 12:01 AM and 6:00AM Saturday;
 2. Between 12:01 AM and 6:00AM Sunday; and
 3. Between 11:00 PM on Sunday to Thursday, inclusive, and 6:00AM on the following day.
- (b) It is unlawful for a parent, legal guardian or other person to knowingly permit a person in his custody or control to violate subparagraph (a) of this Section.
- (c) A person convicted of a violation of any provision of this Section shall be guilty of a petty offense and shall be fined not less than \$10 not more than \$500.

Amended by P.A. 79-159, 1 eff. July 9, 1975
Illinois Revised Statutes 1991
State Bar Association Edition

Suggested Weekend Curfews

A general guideline, knowing that special occasions require special consideration, you might consider the following suggestions:

9th Grade: 11:00 PM
10th Grade: 11:30 PM
11th and 12th Grade: Midnight.

IMPORTANT!

***The license of a driver under the age of 17 is INVALID
if the driver is in violation of the state curfew hours.
Insurance also may be invalid.***

Throwing Teen Parties

It's every parent's nightmare: the teen party out of control and your son or daughter is in danger.

Parties don't have to turn into nightmares. Your teen should be able to have fun socializing with friends, and one way to do this is at parties. With parental involvement and good planning, teen parties can be a fun and positive experience for everyone involved.

Parental knowledge and communication can be great protective forces for teens who are testing their wings in the social world. Here are some important guidelines. You may wish to add guidelines of your own. **It IS possible to have a healthy, safe teen party!**

When your teen is hosting the party:

- ✦ **Be Present**
- ✦ Do not serve alcohol or drugs or allow them to be served.
- ✦ Limit the number of people and length of the party.
- ✦ When guests leave, don't allow them to return to the party.
- ✦ Let your neighbors know what you are planning.
- ✦ Plan the party carefully with your teen.

When your teen is attending the party:

- ✦ Contact the parents of the teen who is hosting the party to verify the occasion and be sure a parent will be present.
- ✦ Know where your teen will be and that alcohol and other drugs will not be permitted.
- ✦ Know clearly how your teen will get to and from the party.
- ✦ Make it clear to your teen when you expect him or her home.
- ✦ Discourage your teen from staying overnight with a friend after a party.

Don't succumb to teen pressure:

- ✦ Typical attempts to dismiss your parental efforts are as follows: "Nobody calls other parents" or "You're too strict." Remember – **You are the parent.**

Many teen drinking parties would be eliminated if every parent would use the Safe Homes Directory and call other parents to check on parties before they occur, or call after a drinking party has occurred to tell the parents what went on without their knowledge.

Specific Drugs (other than Alcohol) and their Effects

Marijuana/Cannabis

- ✦ **Street Names:** Pot, Herb, Weed, Bud, Blunt, Nickel Bag, Dime Bag, Chronic, One Hitter, Hemp
- ✦ **Form/Paraphernalia:** Organic material that looks like oregano or parsley with stems and seeds. Marijuana is usually smoked in joints, bowls, bong, pipes or blunts, and has the odor of burning rope. Users keep Visine or other eye drops handy. In the 60s, Marijuana contained 1% THC, while currently the content of THC is 8-15%. Marijuana is a much more potent drug today.
- ✦ **Immediate effects include:** Euphoria (mellow high), changes in perception, mild enhancement of the senses (smell, taste, hearing), increased appreciation of music, increased appetite, motor control/ability to perform sequential tasks diminished, decrease in depth perception, sense of speed, dry mouth, bloodshot and red hooded eyes, increased heart rate, reduced ability to concentrate, time distortion and attention span affected.
- ✦ **Hazards of abuse:** Cannabinoids become concentrated in the lungs, liver, kidneys, adrenal glands, ovaries, testicles, bone marrow, and especially the brain. Most affected are the centers of the brain that regulate a person's highest level of thought and behavior. When a young person becomes a regular marijuana user, sometimes a series of systematic changes in a person's lifestyle, motivation, ambitions and personality can be observed.
- ✦ **"Amotivational Syndrome":** Includes apathy, emotional flatness, drop out syndrome (school, extracurriculars, family) diminished capacity or willingness to: carry out complex-long term plans, endure frustration, concentrate for long periods, follow routines, and successfully master new material. Verbal faculty is impaired in both speaking and writing, users become totally involved with the present at the expense of future goals and show a strong tendency toward regressive, childlike, magical thinking.
- ✦ **Lungs:** Carcinogenic tars and benzopyrenes are at higher levels than in tobacco, increasing risk for bronchitis, fungus infections and cancer.
- ✦ **Reproductive Systems:** In women: irregularities in menstrual cycle, damage to follicles. In men: decreased production of testosterone and lowered sperm count.
- ✦ **Immune System:** Increases susceptibility to upper respiratory infections, STDs, AIDS and herpes.

Additional Facts about Marijuana Use

What many adults may not realize is that marijuana and its use have changed in four significant ways.

1. **Age is down.** Users are starting younger. Treatment centers now report 12 and 13 year olds enrolling, formerly a rare event.
2. **The effects are clear.** Unlike the drug experimentation days of the 1960s and '70s, the effects of pot use now have been studied extensively. Among the conclusions:
 - Studies now show definitively that marijuana is addictive and can produce dependence
 - Marijuana reduces coordination; slows reflexes; interferes with the ability to measure distance, speed and time; and disrupts concentration and short term memory.

- The effects on the brain are many: less energy flowing in the neural circuits means the less rich and sensitive our feelings will become and the less clear our imagination, plans, and ideas will be.
 - Marijuana seriously interferes with psychological functioning. The major effects are lack of goals and motivation; impairment of memory and learning; and retardation of emotional growth. Moreover, the unique problems of the chronic user are his inability to perceive the change in himself.
3. **Quantity is up.** Kids today smoke larger amounts than their elders did, thanks to innovations such as “blunts” (short cigars hollowed out and stuffed with pot or a pot-and-tobacco mix). Marijuana is now often laced with other drugs, as in “primos” (with cocaine) and “illies” (for formaldehyde, makes the smoker ill).
 4. **Potency is up.** The pot teen’s smoke today is not their parents’ cannabis. The U.S. Drug Enforcement Administration says that THC levels (or primary psychoactive chemical) in pot on the street have doubled in the past decade, thanks to sophisticated cloning and genetic manipulations. (Some experts, however, say pot is no stronger now.)

Cocaine/Crack

- ✦ **Street Names:** Coke, Crack, Snow, Toot, Blow, Nose Candy, Lady White, Nose, Snowbirds Gravel (crack coke), Rola (Spanish for crack), and Pearl
- ✦ **Hallucinogenic intoxication includes:** Dilated pupils, skewed visual tracking, increased body temperature, increased heart rate and blood pressure, sweating, dry mouth and tremors.
- ✦ **Form/Paraphernalia:** White powder inhaled through nose, injected or smoked. Crack is concentrated in crystal form. Razor blades, small mirrors, straws, and screens are the paraphernalia.
- ✦ **Physical and Behavioral Symptoms:** Running or bleeding nose, dilated pupils, rapid respiration, elevated blood pressure, hyperactivity, rapid mood swings, insomnia, rapid development of tolerance and dependency and financial problems.

Methamphetamines

- ✦ **Street Names:** Crystal, Ice, Glass, Crack, Crank, Speed, Meth, Go Zip
- ✦ **Form:** Assorted pills, tablets and capsules, occasionally glittery powder or crystalline form. They can be swallowed, injected, snorted or smoked.
- ✦ **Physical and Behavioral Symptoms:** Severely dilated pupils, rapid breathing and heartbeat, increased blood pressure, decreased appetite, agitation, excited speech, increased physical activity, insomnia, excessive talking, grandiosity, hostility, paranoia, fevers, sweating and headaches. Associated with memory loss, violence, psychotic behavior, cardiac damage, and neurological damage.

Heroin/Opiates

- ✦ **Street Names:** “H,” Smack, Horse, Dust, Junk, Shit, Slag, Mexican Mud, China White, Black Tar. Heroin is packaged in small pieces of tin foil (bindles).
- ✦ **Heroin is used by:** Injecting subcutaneously (skin popping), smoking in a water pipe or regular pipe, mixing in a marijuana joint or regular cigarette, injecting into a vein (mainlining), inhaling as a powder via the nose, injecting into a muscle and inhaling smoke (chasing the dragon).
- ✦ **Physical and Behavioral Symptoms:** Immediate orgasmic rush followed by peacefulness, lack of pain, euphoria leading to drowsiness, pinpoint pupils, droopy eyelids, limited vision, shallow and slow breathing, nausea and vomiting, lack of appetite, constipation, reduced sex drive, increased urination, itching, low body

temperature, sweating, rapid development of tolerance and dependency. Often combined with amphetamines – “bombitas”; with cocaine – “dynamite,” “speedball” and “whizzbag”; or with marijuana – “atom bomb” and “A-bomb.” Opiates cause people to feel drowsy, warm and content.

- ✦ **Heroin is a narcotic.** It interferes with the brain’s ability to perceive pain and activates the brain’s pleasure system. Heroin depresses the central nervous system, usually appears as a white or brownish powder, also can appear as “black tar.” Tolerance and dependency develop quickly. Larger doses are needed to achieve the same effects of previously smaller doses. An overdose can result in death. Withdrawal is grueling. Heroin withdrawal includes hot and cold flashes, “goose flesh,” runny nose, restlessness, diarrhea, vomiting, abdominal cramps, malaise (flu), muscle pain and spasm, yawning, joint aching, irritability, insomnia and sweating.
- ✦ **What else should we know?** Leads to generational forgetting (young people not previously exposed to the negative effects of a particular drug in their generation tend to assume that it is harmless), availability is increasing, purity is up, youth who do not inject believe these practices make the drug safe and less addictive which is a myth. Small amounts are priced competitively with other illicit drugs.
- ✦ **Signs of narcotic intoxication are:** Pinpoint pupils that are unresponsive to light changes, decrease in respiration, facial rubbing and scratching, deepening of the voice and generally dreamy state. After use, there is an immediate orgasmic rush followed by peacefulness, lack of pain, euphoria leading to drowsiness, droopy eyelids, and limited vision.

Inhalants

- ✦ **Definition:** Model Glue, Gasoline, Amyl and Nitrous Oxide, Aerosol Sprays, Paint Thinner, Whipped Cream Cans, Air Freshener, Felt Tip Markers, Correction Fluid, Butane, White Out, Scotch Guard, Nail Polish and Nail Polish Remover and WD 40.
- ✦ **How inhalants are used.** Soak a rag, sock, etc. and place it in a bag and inhale, inflate a balloon with the propellant; pour inhalant into a separate container and huff (pop can); spray on a sweatband, headband, etc. and inhale; or paint underneath fingernails.
- ✦ **Physical and Behavioral Symptoms:** Varied effect. Chemicals in the fumes are directly absorbed into the bloodstream. In small amounts users will become dizzy and lightheaded with slowed reaction time and reduced attention. They will have slurred speech and experience balance issues. In some cases they will become hyperactive and aggressive. They may appear drunk and have a chemical odor on their breath with a red nose and constant sniffing. Hazards of abuse include: irreversible brain damage; muscle lack of coordination; damage to kidneys, heart and bone marrow; hepatitis; jaundice; dementia; hearing and memory loss; and blindness. Biggest danger is sudden death due to cardiac arrhythmia, suffocation, and accidents (explosions, burns).

Hallucinogens – LSD

- ✦ **Street Names:** Acid, blotter acid, window pane, dots and mellow yellow.
- ✦ **LSD is one of the most potent chemicals known to affect the brain.** It appears to cause profound disruption of brain neurotransmitters.
- ✦ **Form: LSD is a white, odorless, crystalline material.** It is diluted and sprayed on sheets of blotter paper or gum, sugar pills, etc. for oral ingestion. **Blotter acid** often has designs printed on it and may be named for the print. The high lasts 6-14 hours with mental effects including changes in perception, thinking, emotion and self-image.
- ✦ **Physical and Behavioral Symptoms:** Terrifying illusions and hallucinations may precipitate panic attacks or reckless behaviors. After effects include chronic or intermittent psychotic states, recurrent depression and flashbacks, months, even years later.

- ✦ **Hallucinogenic:** Intoxication includes dilated pupils, skewed visual tracking, increased body temperature, increased heart rate and blood pressure, sweating, dry mouth and tremors.

Hallucinogens – PCP

- ✦ **Street Names:** Dust, Super Grass, Killer Weed, Duster, Hog, Jet Fuel, Elephant, Kool Joint (PCP saturated menthol cigarette).
- ✦ **Form:** Pills, powder or liquid. Taken orally or smoked, often mixed with other drugs.
- ✦ **Physical and Behavioral Symptoms:** Lack of coordination, loss of sensitivity to pain, senses dulled, movements slowed, withdrawal, disorientation, memory problems, skewed perception, lack of concentration, poor judgment, paranoia, fearfulness, anxiety, possible bizarre behavior, and aggressive hyperactivity alternating with stupor.

Depressants

- ✦ **Definition:** Alcohol, Barbiturates, Tranquilizers, Valium
- ✦ **Street Names:** Booze, juice, downers, barbs, ludes, yellows, reds and blues.
- ✦ **Form:** Alcohol can be served with non-alcoholic beverages. Other depressants are various colored capsules and tablets.
- ✦ **Physical and Behavioral Symptoms:** Slurred speech, blurred vision, lack of coordination, shallow and slow breathing, “drunken” behavior, possibly including belligerence, severe withdrawal effects.

Over the Counter Drugs

- ✦ **Definition:** Coriciden, Sudafed (any cold pills with ephedrine base), Robitussin, Mini-Thins or any over the counter diet pills.
- ✦ **Ephedrine-based:** These drugs can cause high blood pressure, elevated pulse, tremors, headache, insomnia, nausea, chest pain, heart palpitations, seizures or stroke. The primary ingredient in Coriciden and Robitussin is DMX – dextromethorphan. It causes mood-altering effects. In high doses (8-36 tablets or 1 bottle), DMX can cause a dissociative effect much like LSD or PCP.
- ✦ **Physical and Behavioral Symptoms:** Itching, increased heart rate, panic/anxiety attacks, irregular heartbeat, nausea/vomiting, shortness of breath, prolonged dissociation, unconsciousness and psychotic breaks. Severe physical effects could include liver and kidney damage.

Tobacco

- ✦ **Form:** Cigarettes, Pipes, Cigars, Smokeless Tobacco
- ✦ **Facts:** Nicotine, the stimulant in tobacco, is more addictive than cocaine or heroin. Tobacco use usually begins in early adolescence – age 12 on average. Tobacco use is associated with alcohol and illicit drug use and acts as a “Gateway Drug.” It is generally the first drug used by young people who enter a sequence of drug use that can include tobacco, alcohol, marijuana and harder drugs. Tobacco acclimates lungs to smoke and is usually a shared drug experience. A disproportionate number of teen smokers try marijuana. It is rare to find a teen marijuana user who is not a tobacco smoker. **Teens who do not use marijuana, rarely use other drugs.**
- ✦ **Bidis:** Imported from India, tobacco wrapped in a leaf and flavored. Stronger than US tobacco, requires deeper inhaling to keep lit. More carcinogenic than US tobacco.

Ecstasy/MDMA – Hallucinogenic Stimulant

- ✦ **Street Names:** E, X, XTC, Rolls, Quarter Caps, Splits, Doves, Stacey and Beans
- ✦ **Form/Paraphernalia:** Synthetic drug in white tablet, capsule, or powder form. The tablets vary in size and have several designs stamped onto them indicating the name

and identifying the distributor. There are also clear gelatin capsules and blue and white capsules available. If in powder form, it will be white or tan in color. It may be swallowed, snorted or injected. There may be designs on the tablets such as a lightning bolt, triple diamonds, or cartoon characters. The drug combines the properties of mescaline (hallucinogen) with methamphetamine (a type of speed). It can be cut with a variety of other drugs such as amphetamine, LSD, ketamine, cocaine and heroin.

- ✦ **Physical and Behavioral Symptoms:** Sense of euphoria, hyper excitability, rapid heartbeat, dehydration, teeth grinding/jaw clenching, loss of appetite, nausea and insomnia. In high doses, users have been known to experience panic attacks, seizures and loss of consciousness. Body temperature can rise dramatically. The high generally lasts 3-6 hours, but can be up to 24 hours. Ecstasy causes feelings of well-being, increased empathy, self-insight, a drop in defense mechanisms, and an increase in intimate communication. It has a stimulant effect, with tension in the jaw and grinding of teeth (pacifiers, lollipops). There is a danger of heat exhaustion and dehydration because of a false sense of energy and increased body temperature and blood pressure. The high usually culminates in fatigue and damages the serotonin neurons. Cost is \$10-\$40 per tablet.

Date Rape Drugs - Ketamine

- ✦ **Street Names:** Special K, Animal Tranquilizer, K, Kat, K-Waves
- ✦ **Form/Paraphernalia:** Cost to veterinarians is \$7 per bottle. On the street, drug nets \$200 per bottle. Colorless, tasteless, odorless liquid. Also available in white powder form. It is snorted, injected or swallowed.
- ✦ **Facts:** Ketamine has physical effects similar to PCP (sedative and anesthetic). Date rape drug – especially when used with alcohol. Effects can include ringing in ears, drunken feeling, numbness of the body, shortness of breath, tunnel vision, out of body experience and self-analysis. The duration of the high is 20-30 minutes and the cost of one pill or capsule is \$20-\$30.

Date Rape Drugs – GHB/Gamma Hydroxybutyrate

- ✦ **Street Names:** Liquid E, G-riffic, Liquid X, Grievous Bodily Harm
- ✦ **Form/Paraphernalia:** White pill or a colorless, tasteless, odorless liquid – usually put in beverages. The clear liquid is usually colored with food coloring and an artificial flavoring is also added. GHB liquid form is carried into a club in 35 mm film canisters. The top of the canister is used to measure doses when sold to customers in a club. Ravers also dilute the GHB in the spring water bottles that are sold in clubs and slowly drink the GHB/water throughout the night. It sells for \$5-\$10 per dose.
- ✦ **Facts:** Alcohol-like or downer type of intoxication. Drowsiness, nausea, dissociative state, slowed reflexes, respiratory distress, vertical nystagmus (involuntary eye movement). GHB induces a blackout state where the person may not remember what happened for over 24 hours after the drug has worn off. GHB is a central nervous system depressant. It acts like a sedative, with dizziness, tremors, seizure-like movements and unconsciousness the result. Extremely dangerous when mixed with alcohol.

Date Rape Drugs – Rohypnol

- ✦ **Street Names:** Ruffies, Roach2, R-2, Shays, Wheels, Mind Erasers
- ✦ **Form/Paraphernalia:** Sold in white bubble pack packages similar to those used for cold tablets. Rohypnol tablets are white with a single line or crossed lines on one side with Roche and the number 1 or 2 in circles on the other.
- ✦ **Facts:** Ten times stronger than Valium. Odorless, colorless, tasteless and easily soluble when slipped into alcoholic beverages. Victim is left incapacitated, confused,

visually disturbed, dizzy, drowsy and vulnerable to rape and likely to suffer almost universal amnesia of events while under the influence.

Anabolic Steroids

- ✦ **Effects:** May become aggressive (road rage), edgy, impatient, and paranoid. Mood swings are common. Headaches, nosebleeds, stomach aches, acne, and increase in blood pressure and heart rate.
- ✦ **Facts:** Chemically manufactured version of the male hormone. Used by athletes who are trying to build up their bodies for sports and by people who think they will look better with bigger muscles.

Zipper Shots/Zippers

- ✦ Relatively new to the alcohol scene are “Zippers,” gelatin shots that contain 12% alcohol, 24 proof, and come in flavors. They are sold in plastic containers like Jello Lunch or Snack Packs and a child may put in his lunch box. They are sold in 20 states, and Illinois is one of them. They are being marketed in ways to appeal to an underage audience.

Warning Signs of which Parents should be Aware

The early changes occur subtly and are often mistaken for normal and harmless teenage behavior. Be aware that any given young person would not be assumed to be using alcohol or other drugs simply because he or she exhibits one or two of these characteristics. However, as a parent, you know your child and can make the best a judgment accordingly.

- ☐ Personality changes - unreasonable, anger, temper outbursts, lying and cover-ups, defiance, irritability, mood shifts, depressed one day and animated the next, agitation or nervousness.
- ☐ Change in friendships – secretiveness, will not bring friends home, isolates self from family, old friends replaced by others that appear to be less “desirable,” whispered telephone conversations, girls keep purses close at hand and regularly lock doors to bedroom and bathroom.
- ☐ Sleeping patterns – insomnia or habitually napping right after school.
- ☐ Health issues – frequent colds and upper respiratory infections, change in appetite, sleep difficulties, nervousness, fatigue and depression.
- ☐ Change in clothing – style change or unkempt personal appearance.
- ☐ Deterioration in school performance – lack of motivation, resentment of authority, sleeping, no homework being done, grades drop, disciplinary issues rise and absences are frequent.
- ☐ Loss of interest – sports, clubs, and other vigorous and engaging activities become unimportant.
- ☐ Discovery of hidden alcohol, marijuana or related paraphernalia – items such as pipes, baggies, rolling papers, roach clips, Visine, lighter, matches and small glass vials. Alcohol missing from home, incense or other room deodorizers present.
- ☐ Increasing demand for money – always “broke” or has more money than seems possible.
- ☐ Irregular eating patterns – binges on junk food at odd hours –“munchies.”
- ☐ Use of tobacco – addiction to nicotine, a gateway to other drug use.
- ☐ Phone calls – receives short telephone calls and/or visits from persons unfamiliar to parents. Places and receives calls in the morning before school. Leaves early for school and comes home late. Insists on going to school when ill, yet frequently cuts classes.
- ☐ Defensive posture – defends the use of alcohol and other drugs when the subject is discussed. When caught with “contraband” will almost invariably say it is being kept for a friend.
- ☐ Questions – when parents are going out, will press to know what time parents are leaving and when they will be returning.
- ☐ Attention – easily bored, often looks for greater thrill or appears unafraid.
- ☐ Writing and graffiti – may write stories, plays, poems about use of alcohol and other drugs; depressed attitude toward life; posters, jewelry, etc., promoting drug use. Graffiti on books, notebooks, etc. drawings of leafy plants, mushrooms, pipes, pills, other mysterious objects and the number 420 – the national pot smoking day/time.

Where do I Go from Here?

Yes, I have my suspicions. How can I find out if my kid is using drugs? Urine Test? My Doctor? A Counselor?

- ✦ Consult an expert: A professional who is certified in the field of chemical dependency has knowledge of the latest information and can perform an accurate and comprehensive assessment to determine if there is a problem and how severe it is. Carefully check their qualifications. To be qualified to make the best assessment, a professional should have an addictions counseling certification from the State of Illinois. Having an assessment performed sends a clear and strong message to your teen.
- ✦ A urine test functions best as part of a comprehensive assessment conducted by a certified addictions professional. A urine test is not always the best way to evaluate the extent of drug use. One has to know the specific type of drug you want to find to enhance the validity of the test. For example, urine to be tested for LSD must be handled differently than that being tested for marijuana, which is fat soluble. Alcohol is water-soluble and is eliminated from the body within 24 hours, so the test must be done almost immediately after consumption. The amount of the drug needed to deem a positive reading varies from lab to lab. Your doctor can advise you on what kind of urine testing is best. Please refer to the list of Substance Abuse Services and their phone numbers on page 24 of this booklet.

If you find a drug and need help identifying the substance, call your local police department or the DuPage County Crime Lab at (630) 682-7198

Please Feel Free to Contact Us with Your Questions Or Concerns:

Keith Bullock

*Student Assistance Coordinator – North High
(630) 795-8488*

Kristin Bormann

*Student Assistance Coordinator – South High
(630) 795-8588*

How to Handle Drunk or Drugged Teens

1. First of all, do not start a confrontation with your child or any other teen while he/she is under the influence of alcohol or other drugs. Delay the serious talk until he/she is sober.
2. Your immediate concern is the teen's health and safety. If you suspect an overdose or another possible life-threatening problem, call paramedics immediately. If the youth's situation is not life threatening, make sure he/she is transported safely home. Do not rely on another teen to drive a drunk or drugged teen home.
3. Gather your thoughts and your evidence before confronting your child about his/her behavior. Discuss the problem with your child in a firm manner. Set appropriate consequences for the behavior, and enforce them. Make sure the child understands that privileges will be restored gradually as the child demonstrates that he or she has learned from the mistake and can once again be trusted.
4. For recurring problems with alcohol or other drugs, get medical advice. Check support services at the back of this booklet. You may use the DESK form of Intervention in any situation when talking with your teen.

Describe the behavior you have observed.

Express how it makes you feel.

State what you would like to see happen and how you will help.

Know and communicate the consequences. What are your limits?

Where Kids Hide or Carry Drugs

In Bedrooms

- 35mm film canisters
- Pockets of clothing in closet/drawers
- Wall and ceiling light fixtures
- Air conditioner/heating vents
- Light switches
- Electrical sockets
- Record albums and cassette tapes
- Curtains
- Trophies
- Bed posts
- Furniture upholstery
- Knife handles
- Closet, taped to the wall above door
- Behind baseboards
- TV sets

On their Person

- Lipstick tubes
- Mouths (crack cocaine)
- Wallets, behind photos
- Lining of clothing
- Tampon cases
- Super glue containers
- Purse lining
- Hats
- Book Bags
- Cigarette packs
- Cigars (hollowed out and stuffed with pot)
- Pockets
- Socks and shoes
- Down front of pants and bras

In Vehicles

- Dome lights
- Under the spare tire
- Air conditioner vents
- Headrests
- Ashtrays

Ten Winning Ways to Drug Proof Your Kids

- 1. Set a family standard on drug and alcohol use.** Tell your children the family rules early. Let them know your expectations.
- 2. Establish consequences for violation of the rules.** Make clear in advance the consequences for violation of the family rules. Impose them without exception every time a violation occurs.
- 3. Set aside a time every day to talk with your kids about what is happening in their lives, how they feel, and what they think.** Let them talk. Actively listen and respect your child's experiences and feelings.
- 4. Help your child establish personal goals.**
- 5. Know your child's friends and spend time with them.** Know the parents of your child's friends. Spend time with them. They can enrich your life and help you be a better parent.
- 6. Help your children feel good about themselves and their achievements, large and small.** Life is an adventure. Share the adventure with your kids. You won't have them with you for very long!
- 7. Develop a system for conflict resolution.**
- 8. Talk about your children's futures early and often.**
- 9. Enjoy your kids.** Work with your children to make your home a positive place for everyone. That means family teamwork and mutual respect.
- 10. Be a nosy parent!** Let your children know that being nosy is your job as their parent and because you love them. Don't be afraid to search your child's room. Suspicion of drug use gives a parent enough reason to justify a search. This is a safety concern that supersedes how your teen feels. Let your child know his room is fair game for a search.

Need help? Contact your child's guidance counselor, social worker, psychologist or student assistance coordinator.

Parents – The #1 Prevention Tool!

We appreciate and applaud your efforts. Please encourage your child to get involved in our Prevention Programs. See the Student Activities Department or your Student Assistance Program Coordinator to learn how your students can get involved. Here are a few of the options to consider.

ACE – Athletes Committed to Excellence

Alcohol Awareness Month – April

LINK Crew – North High School Leadership and Mentoring

Mustang Mad Dash – South High Incoming Freshman Program

Operation Snowball

Operation Snowflake

Peer Leaders and Mediators

Red Ribbon Week – October

RUSH Corps – South High School Leadership and Mentoring (R U South High)

Students Against Destructive Decisions (SADD)

There is a world of information on the Internet! Here are some of the sites you might wish to explore.

American Council for Drug Education: www.acde.org

DuPage County Referral Service: www.dupagecris.org (630) 407-6500

Illinois Alcoholism & Drug Dependence Association: www.iadda.org

Illinois Poison Center: www.mchc.org/ipc/index.asp

Illinois Secretary of State: www.sos.state.il.us

National Clearinghouse on Alcohol and Drug Information (NCADI):
www.samhsa.org

Parents. The Anti-Drug: www.theantidrug.com

Partnership for a Drug-Free America: www.drugfree.org

School Resources

<u>OFFICE</u>	<u>NORTH</u>	<u>SOUTH</u>
Main Switchboard	(630) 795-8400	(630) 795-8500
Attendance	(630) 795-8450	(630) 795-8550
Deans	(630) 795-8430	(630) 795-8530
Guidance	(630) 795-8415	(630) 795-8515
Police Counselor	(630) 795-8436	(630) 795-8536
School Nurse	(630) 795-8480	(630) 795-8528
School Psychologists	(630) 795-8482/83	(630) 795-8582/83/84
School Social Workers	(630) 795-8485/86	(630) 795-8585/86/87
Special Services	(630) 795-8040/42	(630) 795-8640
Student Assistance Coordinator	(630) 795-8488	(630) 795-8588

Community Services

General Counseling		Support Group	
DuPage County Health Dept. (Intake)	630-627-1700 (24 hours)	Alanon/Alateen (Aurora)	630-896-5552
Hinsdale Community House	630-323-7500 ext. 239	Alanon/Alateen (Lombard)	630-627-4441
Metropolitan Family Services of DuPage (Wheaton)	630-784-4800	Alcoholics Anonymous	630-887-8671
Naperville Community Outreach (Youth and Family)	630-961-2992	National Alliance/Mentally Ill (NAMI)	630-752-0066
Associates and Family Care (AFC)	630-434-5595	Greater DuPage MYM (Teen Moms and Dads)	630-790-8433
Woodridge Resource Center	630-910-7027	Narcotics Anonymous	708-848-4884
Good Samaritan Hospital	630-275-6000	Horizons (Gay/Lesbian Services) 6:00-10:00 PM	630-415-2053
		DuPage/Questioning Youth Center (Gay/Lesbian)	
Family/Relationship Violence		Sexuality	
Rape/Date Rape, Sexual Assault		Pregnancy Testing/ Counseling	
DuPage Women Against Rape (DWAR)	630-971-3927 (24 hours)	Adoption Info. Center of IL	800-572-2390
YWCA	630-790-3030 (Office)	DuPage County Health Dept.	630-682-7400
Family Violence		Birth Control/Family Planning/ Sexually Transmitted Diseases	
Family Shelter Service	630-469-5650	DuPage County Health Dept.	630-682-7400
Child Abuse/DCFS	800-25A-BUSE	AIDS/HIV	
		Illinois Hotline	800- AID-AIDS
Mental Health		Nutrition	
Depression/Suicide		Eating Disorders	
DuPage County Health Dept	630-627-1700 (24 hours)	Linden Oaks at Edward Hospital	630-305-5027
Good Samaritan Hospital	630-275-6200 (24 hours)		

Additional Resources **Substance Abuse Services**

Parents and students may want to examine the fee structure of each agency before making a decision. District 99 accepts no responsibility for provision or cost of services by any of the following agencies.

Please call the Student Assistance Coordinator for more information.

Abraxis Interventions

630-968-6477

Breaking Free – Naperville

630-355-2585

Central Dupage Hospital – Winfield
(Behavioral Health Services) 630-653-4000

Glen Oaks Hospital – Glendale Heights

630-545-6160

Hinsdale Hospital – Hinsdale

630 856-7700

Linden Oaks At Edward Hospital – Naperville

630-305-5027

Provena Mercy Center – Aurora

630-801-2657

Rush Behavioral Health – Downers Grove

847-493-3600