



Lee's Summit
R-7 School District



901 NE Independence Ave.
Lee's Summit, MO 64086
Phone: 816.347.3298
Fax: 816.246.8206
www.lscares.org

A Guide For Parents



Drug & Alcohol Free R-7



Lee's Summit R-7 Community Works Together To Help Prevent Substance Abuse Among Teens

Through a community-wide collaborative effort, Lee's Summit R-7 schools, local law enforcement agencies and Lee's Summit CARES are working together to prevent substance abuse and promote youth safety.

"In Lee's Summit, youth safety and wellness is a community-wide emphasis," said Roby Little, Executive Director of Lee's Summit CARES, a local non-profit organization that coordinates efforts aimed at reducing substance abuse. "Our schools, our local police officials and numerous other community agencies and individuals do an incredible job of working together in a proactive manner."

This systemic, broad-based approach is unique within the Lee's Summit R-7 community, added Mrs. Little, and involves schools, families, law enforcement, civic groups, businesses and local young people. In fact, LS CARES was created 25 years ago when community leaders realized that reducing substance abuse was not the role of any one entity – but an effort requiring a team approach.

"Our community is unique in that the Lee's Summit Police Department has partnered with both the school district and Lee's Summit CARES for many years to proactively promote safety and positive choices for the youth of the community," said Lee's Summit Police Chief Joe Piccinini.

School Resource Officers from the Lee's Summit Police Department are assigned to all secondary schools, and officers work with staff and students on a variety of student safety and educational issues. In addition, the police department works with local educators to conduct regular "drug dog" searches of schools. Another community focused effort is the law enforcement officers' Party Patrols, which target high profile events or times of year, such as prom or graduation week. During these times, additional officers are on patrol.

Within the school district, the emphasis has been to educate students on the dangers of substance abuse and other risky behaviors. This education begins in elementary school and continues through middle and high school.

"We are fortunate in the R-7 School District to have the support of our parents as well as the community when it comes to substance abuse prevention," said Dr. David McGehee, R-7 Superintendent. "Combating drug and alcohol abuse among our young people takes a collaborative effort among many organizations and involves numerous programs and efforts."

R-7 curriculum, especially in health, physical education and science classes, teaches students about the risks of substance abuse, including alcohol, tobacco and drugs. Within elementary schools, all students

Community Resources

Alcoholics Anonymous Support for adults & teens dealing with recovery from alcohol dependency.	816-471-7229
Al-Anon & Alateen Support groups for teens with alcohol or chemically dependent parents, family members or friends.	816-373-8566
Crittenton Provides psychiatric care for children & their families.	816-765-6600
Narcotics Anonymous Is a non-profit fellowship of men and women for whom drugs had become a major problem. Meets regularly.	816-531-2250
Cocaine Anonymous Support for adults & teens dealing with recovery from cocaine dependency.	913-248-8873
First Call Education, Assessment, Referral & Prevention Programs	816-361-5900
Preferred Family Health Care Care for adolescents & their families with substance abuse problems.	816-347-8777
ReDiscover A full service mental health & substance abuse provider.	816-246-8000
Toughlove Parent Support Group Support for parents troubled by a child's behavior.	913-397-8118
Lakewood Counseling Service TMC Drug addiction recovery center	816-404-6170



Hotlines

Al-Anon Family Groups	888-425-2666
Alcohol & Drug Helpline	800-821-HELP
Center for Substance Abuse Treatment Drug & Alcohol Treatment Referral Service http://www.samhsa.org	800-622-HELP

True. The average age youth begin drinking in Missouri is age 12.

Lee's Summit R-7 School District

www.leesummit.k12.mo.us
 Director of Student Services
 Dr. Ann Starlin-Horner

986-1139

High School Student Resource Officers (SRO's)

Lee's Summit - Officer John Keck
 Lee's Summit North - Officer Rodger Bowers
 Lee's Summit West - Officer Bobby Conard

986-2135

986-3053

986-4035

High School Counseling Centers

Lee's Summit
 Lee's Summit North
 Lee's Summit West

986-2003

986-3019

986-4003

Websites



ReDiscover
 www.rediscovermh.org

Above the Influence
 www.abovetheinfluence.com

Office of National Drug Control Policy
 www.whitehousedrugpolicy.gov

Parents, The Anti-Drug
 www.theantidrug.com

Join Together
 www.jointogether.org

Mothers Against Drunk Driving
 www.madd.org

Wellspring Ministries
 www.wellspringkc.org

First Call
 www.firstcallkc.org

Lee's Summit CARES
 www.lscares.org
 Love and Logic Parenting Classes
 I Can Make a Difference - Bullying Prevention Program
 Tobacco Cessation
 Lee's Summit Community of Character

Partnership for a Drug-Free America
 www.drugfreeamerica.org

participate in the DARE (Drug Abuse Resistance Education), which is taught by local law enforcement officers. DARE continues into the middle schools to reinforce these lessons.

A popular organization within secondary schools are the Smart clubs. The clubs are named after each school's mascot with names such as Tiger Smart, Bronco Smart and Titan Smart. The groups stress that their members remain free of alcohol, tobacco and other drugs while also offering fun and inexpensive alternative activities for youth. The Smart clubs also educate students, parents and the community on substance abuse issues with the older students making visits to elementary schools to talk to younger students about how to avoid risky behaviors.

High schools host Project Graduation events to encourage a safe, substance abuse free celebration. The events receive significant support from parents as well as community organizations and local businesses. "The goal within our schools is to emphasize an educational approach that is embedded into each student's experiences through curriculum, school organizations and other activities and opportunities," Dr. McGehee added.

LS CARES is in its third decade of coordinating these community efforts for the benefit of teenagers and young adults. The organization offers tobacco cessation courses for teenagers, internet safety training for parents and conducts Love and Logic and Parenting Teens parenting courses throughout the year. Another example of the community collaborative effort is Fatal Vision. Middle school students participate in this educational program that uses vision impaired goggles. The lesson places students in situations to demonstrate the lack of reaction by themselves and exposes the potential consequences of driving while under the influence of drugs or alcohol. The program is sponsored through grant funding from LS CARES and the Lee's Summit Health Care Foundation with the assistance of Paradise Park.

Through its community advisory board, LS CARES has created a number of effective campaigns aimed at educating the community about substance abuse prevention. For example, the organization began a campaign several years ago called *Those Who Host Lose the Most* to inform adults about the legal risks of hosting parties for minors that include alcohol. LS CARES also coordinates an alcohol retailer training program to teach store employees about selling alcohol and the law. A new program offered through LS CARES and presented by local police officers focuses on energy drinks, including the dangers of mixing alcohol with these heavily caffeinated beverages.

For more information about LS CARES and its programs visit www.lscares.org. The organization also operates a Youth Advisory Board to advise LS CARES staff on issues facing local teens. Applications for this board are available at the website.

Table of Contents

Section 1Rules and Laws 1 - 5

Section 2 Parenting/Family 6 - 13

Section 3 Specific Drugs 14 - 21

Resources22 - 23

arrive in Germany and England. The Drug Enforcement Agency experts are evaluating as many as 50 new synthetic drugs.

Steroids

From January to April 2011, 2,700 victims of synthetic drugs have been sent to emergency rooms nationwide.

Street names for steroids are Arnolds, Juice, Pumpers, Roids, Stackers and Weight Gainers.

There are several substances that produce effects similar to those of anabolic steroids. These include human growth hormone (HGH), clenbuterol, gonadotropins, and erythropoietin.

Available in tablet and capsules, sublingual-tablets, liquid drops, gels, creams, transdermal patches, sub-dermal implant pellets, water-based and oil-based injectable solutions. Anabolic steroid use may cause psychological dependence and addiction. When users stop taking steroids, they may experience depression that may be severe enough to lead one to commit suicide.

In adolescents, anabolic steroid use can stunt the ultimate height that an individual achieves. In boys, steroid use can cause early sexual development, acne, and stunted growth. In adolescent girls and women, anabolic steroid use can induce permanent physical changes, such as deepening of the voice, increased facial and body hair growth, menstrual irregularities, male pattern baldness and lengthening of the clitoris.

In men, anabolic steroid use can cause shrinkage of the testicles, reduced sperm count, enlargement of the male breast tissue, sterility, and increased risk of prostate cancer. In both men and women, anabolic steroid use can cause high cholesterol levels, which may increase the risk of coronary artery disease, strokes and heart attack. Abusers may also develop endocarditis, a bacterial infection.

**The average age that youth begin drinking in Missouri is 12.
True or False?
(answer on page 23)**

Bath Salts

A new designer drug known as “bath salts” or incense has become increasingly popular and increasingly scary. But as of now there is no federal law prohibiting their sale. Make no mistake, these are not bath salts like the ones you would use in your bath.

The presumption is that most bath salts are MDPV, or methylenedioxy-pyrovalerone, although newer pyrovalerone derivatives are being made by illegal street chemists. Nobody knows, because there is no way to test for these substances.

By marketing this drug as bath salts and labeling them “not for human consumption” they have been able to avoid being specifically labeled as illegal. Bath salts are sold as Ivory Wave, Bolivian Bath and can be found in mini-marts, smoke shops and head shops for as little as \$10.

People who use bath salts can experience agitation, paranoia, hallucinations, chest pains, high blood pressure, increased pulse and suicidality. Many users describe extreme paranoia with a recurring theme of monsters, demons and aliens. The symptoms can persist for days. This is a highly dangerous drug.

As a new drug on the market it is too soon to know if bath salts are addictive, but many stimulants do cause a craving. The users can snort it, shoot it, and mix it with food and drink.

Bath salts are an unregulated unlicensed industry. No one knows the strength of the ingredients or what one is taking. Warn your teen that taking bath salts is extremely risky.

An Uphill Battle

At least 20 states have banned chemicals found in fake marijuana, many others have legislation pending. At least nine states have banned substances found in bath salts and 25 have laws in the works. Lawmakers know they are fighting an uphill battle. Chemists are very sophisticated and creative when making these drugs. The government can ban five chemicals used in synthetic marijuana, only to have manufacturers quickly adapt. They can crank out new formulas that are only a single molecule apart from the illegal ones.

Recreational drugs created in the laboratory have been around since the middle of the 20th century when LSD was first studied. But the latest examples emerged only a few years ago, starting in Europe. These products are typically made in China, India and other Asian nations and soon

Philosophy

R-7 School District recognizes that the use and/or possession of tobacco and mood-altering chemicals as a significant health problem for many adolescents, resulting in negative effects on behavior, learning and the total development of each individual. The possession or use of tobacco and of mood-altering chemicals, such as alcohol, drugs, marijuana, etc., by adolescents affects extra-curricular participation and the development of related skills.

Consequences of Substance Abuse

Any student in possession of, buying, under the influence of, or using a controlled substance, illegal drugs, drug paraphernalia, alcohol, mood altering chemicals or non-prescription drugs, or any student who represents any substance as one of the above, will be suspended for up to ten days with a possible referral to the superintendent, which could result in a suspension of up to 180 days.

A second drug offense during a student's high school career will result in an automatic ten-day suspension and referral to the superintendent for long-term suspension or expulsion.

The verbal or written agreement to sell or transfer intoxicants, alcohol, and/or physical or mind-altering chemicals (illegal drugs) or any substance a student represents as a controlled substance on a school property or at school-sponsored activities will result in a ten-day suspension and a referral to the superintendent, which could result in a suspension of up to 180 days or expulsion.

School discipline shall be imposed independent of court action. Local law enforcement agencies will be contacted in accordance with Safe Schools Act guidelines. Consistent with the community's expectation that school officials sustain a safe school environment, the Lee's Summit Schools will cooperate with appropriate law enforcement agencies in conducting periodic, unannounced searches requiring the utilization of canine units.

For Students Involved in Athletics/ Extracurricular Activities



Credible citizenship is a year round responsibility. The following rule includes the school year, summer, and season of practice, play or rehearsal:

Regardless of quantity, a student shall not use or possess tobacco; have in possession or use a beverage containing alcohol; use or consume, have in possession, buy, sell or give away illegal drugs or chemicals; or any substance

defined by law as a drug specifically prescribed for the student's own use by his/her doctor; or use or be in possession of drug paraphernalia. The use of prescribed or non-prescribed performance-enhancing products is greatly discouraged by Lee's Summit R-7 School District.

The use of each type of chemical can adversely affect the student on a short or long term basis. Chemical substances are defined as tobacco/alcohol/mood-altering chemicals/and drug paraphernalia.

The following are **minimum** guidelines that shall be applied for the violation of the substance abuse rules in our high schools. Each coach/sponsor shall have the option of assigning additional penalties for any violation.

First Violation Penalty

Following confirmation of the violation, the student would lose eligibility to participate in the next match/contests that occur in a consecutive chronological sequence. The student/athlete shall be ineligible for interscholastic competition and may not participate for a minimum of 40% of his/her competitive season. The matches/contests cannot be selected. The student must meet all other team obligations as defined by the coach/sponsor of that activity. Also, the student must undergo ten hours of tobacco/drug/alcohol counseling or rehabilitation before they can participate in activities.

the airways (throat and bronchial tubes) of frequent users

Marijuana smokers hold a greater volume of gas and particulates in their lungs for a longer period of time than do cigarette smokers and took puffs of almost twice the volume of cigarette smokers and inhaled 40-50 percent more deeply and held smoke in their lungs 3-5 times longer than tobacco smokers.

Carbon monoxide was measured at a level three times greater than in tobacco smokers. Marijuana had three to four times greater delivery and deposit of smoke particulates that produce tar in the lungs.

Synthetic Drugs - K2

K2 is fake weed but a real drug. Fake weed is a concoction also known as **K2** and "**spice**" that can cause hallucinations, vomiting, agitation and other dangerous effects. Also symptoms such as fast heart beat, dangerously elevated blood pressure, pale skin and vomiting. It is also believed to affect the central nervous system, causing severe, potentially life-threatening hallucinations and in some cases, seizures.

K2 has been sold since 2006 as incense or potpourri for about \$30 to \$40 per three gram bag. K2 is a mixture of herbal and spice plant products, but it is sprayed with a potent psychotropic drug and likely contaminated with an unknown toxic substance that is causing adverse effects.

One can get very high from it. It's 10 times more active than THC the active ingredient in marijuana. You can smoke less K2 and get just as high.

The synthetic marijuana products are a mixture of herbs, sometimes marketed in incense, infused with chemicals that purportedly mimic the effect of the active ingredients of marijuana.

Most commonly known as K2, K3 or spice, you can also hear it called "syn smooth", "blueberry meltdown" and "head trip."

The compounds work on the brain the same way as THC. It binds to the CBI receptors, which primarily affect the central nervous system. It also binds to receptors involved in the immune system. The Psychiatric Association announced a study in May, 2011, that found some people using synthetic marijuana suffered prolonged psychotic episodes that included auditory and visual hallucinations and paranoid delusions.

In Kansas and Missouri, distribution and manufacture of this banned substance is a felony. Possession of a small amount is a misdemeanor,

K2 is packaged and labeled "not meant for human consumption".

Marijuana

Street names for marijuana are Aunt Mary, BC Bud, Blunts, Boom, Chronic, Dope, Gangster, Ganja, Grass, Hash, Herb, Hydro, Info, Joint, Kif, Mary Jane, Mota, Pot, Reefer, Sinsemilla, Skunk, Smoke, Weed, Yerba. It is a dry shredded green/brown mix of flowers, stems, seeds and leaves from the Cannabis Sativa plant.

Marijuana is usually smoked as a cigarette, in a pipe or bong. It is also smoked in blunts, which are leaves that resemble cigars with the tobacco emptied and refilled with marijuana or a combination of marijuana and other drugs. It can be mixed with foods or brewed as a tea.

When smoked, THC passes from the lungs and into the bloodstream, which carries the chemical to the organs throughout the body, including the brain. THC then connects to specific sites called cannabinoid receptors on nerve cells and influences pleasure, memory, thought, concentration, sensory, time perception and coordinated movement (including driving).

Short-term physical effects may include sedation, blood shot eyes, increased heart rate, coughing from lung irritation, increased appetite, and decreased blood pressure. Short-term mental effects include problems with memory and learning, distorted perception, difficulty in thinking and problem-solving and loss of coordination.

Long-term chronic marijuana use is associated with Amotivational Syndrome, characterized by apathy, impairment of judgment, memory and concentration, loss of motivation, ambition and interest in the pursuit of personal goals. Marijuana smoke contains 50% more tar than a strong brand of tobacco cigarette. Extended use may cause suppression of the immune system, increasing the risk of cancer of the head, neck, lungs and respiratory tract.

Withdrawal from chronic use of high doses of marijuana causes headache, shakiness, sweating, stomach pains and nausea. Behavioral signs include restlessness, irritability, sleep difficulties and decreased appetite. Daily smoking of only one marijuana cigarette is comparable to smoking over one pack of cigarettes. Marijuana use seriously affects one's respiratory system.

Marijuana smoke is more irritating to the lungs than tobacco smoke. Although marijuana does not contain nicotine, it does contain THC (tetrahydrocannabinol), a respiratory irritant.

Marijuana smoke contains 50 percent more carcinogenic polynuclear aromatic hydrocarbons with a very high potential for malignant changes in

For Students Involved in Athletics/ Extracurricular Activities

Second Violation Penalty

The student shall be ineligible for 365 days, beginning with the date of the violation.

End of Season, Off-Season, Summer Violations

The loss of eligibility carries over to the next season in which the student/athlete participates. Example: If a student commits a violation during the last contest of the season, he/she loses eligibility (as per the consequence category involved) in the next season of participation. The 40% formula will be reworked per the next season of participation. Counseling and/or rehabilitation services must begin during the season of the violation.

Legal Consequences of Substance Abuse

- DUI (Driving Under the Influence).
- MIP (Minor in Possession) of alcohol.
- Accidents or near misses.
- Speeding/carelessness on roadway/highway.
- Thefts, assaults, infringements of the law.
- Curfew violations.

Sec. 4-7. Sales To Minors, Drunks and Drunkards Prohibited.

A. It shall be unlawful for any licensee under this chapter or employee of such licensee to sell, vend, give away or otherwise supply any alcoholic beverages in any quantity whatsoever to any person under the age of twenty-one (21) years, or to any person intoxicated or appearing to be in a state of intoxication or to a habitual drunkard. It shall be unlawful for any person except a parent or guardian, to procure for, sell, give away or otherwise supply alcoholic beverages to any person under the age of twenty-one (21) years, or to any intoxicated person or any person appearing to be in a state of intoxication or to a habitual drunkard.

B. This section shall not apply to the supplying of alcoholic beverages to a person under the age of twenty-one (21) years for medical purposes only or to the administering of alcoholic beverages to any person by a duly licensed physician.

(Code 1988, § 4-7)

State law references: Similar provisions, RSMo 311.310, 312.400.

Sec. 4-8. Acceptance, Purchase, Etc., By Minors Prohibited.

A. It shall be unlawful for any person under the age of twenty-one (21) years to accept, purchase, attempt to purchase, consume or have in his or her possession or on his or her person any alcoholic beverages.

B. It shall be unlawful for any person under the age of twenty-one (21) to be a driver of or a passenger in a motor vehicle in which any alcoholic beverages are found unless such minor is in the company of an adult twenty-one (21) years of age or over.

(Code 1988, § 4-8)

State law references: Similar provisions, RSMo 311.325, 312.407.

Sec. 4-9. Consumption By Minors On Licensed Premises Prohibited.

It shall be unlawful for any person under twenty-one (21) years of age to drink or consume alcoholic beverages in, upon or about any premises licensed under the terms of this chapter. (Code 1988, § 4-9)

Key Symptoms and Signs of Prescription Drug Use

- Constricted pupils, slurred speech, flushed skin, sweating, and loss of appetite.
- Personality changes, mood swings, irritability, excessive energy, sleepiness or avoiding sleep, forgetfulness, or clumsiness.
- Increasingly acting secretive, losing interest in personal appearance, borrowing money or having extra cash, skipping classes, or not doing well in school.
- Missing pills or the presence of unfamiliar pills or empty cough and cold medicine bottles or packages.
- Running out of his/her medications too quickly, losing pills or requesting refills.

Over-the-Counter (OTC) Drug Abuse

- Some youth are turning to grocery and drug store shelves to get high.
- In some cases, teens are taking anywhere from a few pills to dozens or more a day, drinking up to 3-5 bottles of cough syrup, or combining these preparations with alcohol.
- OTC drugs of choice are cough and cold medicines containing dextromethorphan (DXM).
- A federally funded university study estimated the intentional abuse of cough medicine among 8th, 10th and 12th graders at roughly 4%, 5% and 6% respectively.
- OTC drugs abused are sleep aids (Unisom), antihistamines (Benedryl) and anti-nausea agents (Gravol or Dramamine).
- Abuse of OTC drugs can cause memory problems, stomach pains, high blood pressure, rapid heartbeat, fever and headaches, rashes, and loss of consciousness.



Prescription Drug Use

Although illicit drug use by teens is declining, teen prescription drug use is an emerging threat. Teens abuse prescription drugs more than any illicit drug except marijuana. Many teens wrongly believe that abusing prescription drugs is "safer" than using illegal drugs. Prescription drugs when used correctly under a doctor's care can provide many benefits. But when abused they can be as dangerous as illicit drugs especially when used with alcohol or other illicit drugs.

Parents and caregivers are the first line of defense, as prescription drugs are often found in the home. Parents should keep medications in a secure location and monitor their use.

There are three classes of prescription drugs that are most commonly abused by teens:

Painkillers - including codeine, oxycodone, fentanyl, morphine, and brands such as Vicodin, Tylenol with Codeine, Oxycontin and Percocet.

Depressants - (prescribed to treat anxiety and sleep disorders) including barbiturates, benzodiazepines and brands such as Klonopin, Nembutal, Soma, Valium and Xanax.

Stimulants - (mainly prescribed to treat attention-deficit hyperactivity disorder or ADHD) including amphetamines, methylphenidate, and brands such as Adderal, Concerta, Dexedrine and Ritalin.



Sec. 17-117. Open House Parties Prohibited When Alcohol Or Illegal Drugs Are Possessed Or Used By Minors

A. *Definitions.* Unless the provisions explicitly state otherwise, as used in this section, the following terms and phrases shall have the meanings hereinafter designated:

1. *Alcoholic beverage.* Any alcoholic liquor as defined now and hereafter by the Revised Statutes of Missouri. Currently, "alcoholic liquor" is defined by RSMo 311.020.
2. *Control.* Any form of authority, regulation, responsibility or dominion, including a possessory right.
3. *Drug.* A controlled substance as defined and described now or hereafter by the Revised Statutes of Missouri. Currently, controlled substances are defined and described by RSMo 195.005--195.425 of the Revised Statutes of Missouri (Chapter 195).
4. *Minor.* A person not legally permitted by reason of age to possess, consume, or purchase alcoholic liquor as described now or hereafter by the Revised Statutes of Missouri.
5. *Open house party.* A social gathering at a residence or premises of persons in addition to the owner or those with rights of possession or their immediate family members.
6. *Residence or premises.* A motel room, hotel room, home, apartment, condominium, or other dwelling unit, including the curtilage of a dwelling unit, or a hall, meeting room, or other place of assembly, whether occupied as a dwelling or specifically for social functions, and whether owned, leased, rented, or used with or without compensation.

B. *Prohibited activities.* No person who is the owner in possession, a tenant or subtenant, or has temporary charge of any residence or premises, shall allow an open house party to take place at the residence or premises if any alcoholic beverage or drug is possessed or consumed at the residence or premises by any minor where the person knew or reasonably should have known that any alcoholic beverage or drug was in the possession or being consumed by a minor at the residence or premises.

The provisions of this section shall not apply to:

1. The consumption, use or possession of a drug by a minor pursuant to a lawful prescription for each drug.
 2. Religious observance or prescribed medical treatments. The possession by a minor of alcoholic beverages or lawfully prescribed drugs incidental to the lawful employment of such minor.
- (Ord. No. 5899, § 1, 2-17-05)

Be A Good Role Model

Be aware of your own use of alcohol and other drugs. Your habits will send your teen a powerful message. Parents' abuse of alcohol, tobacco or illicit drugs significantly increases a teen's chance of using and developing a substance abuse problem of their own.

Drinking alcohol is one of the accepted practices of adulthood. But drinking to the point of losing control sends the wrong message to teens. Also:

- Never drink & drive.
- Don't involve your teen in your use, such as asking him or her to get you a beer or a cigarette.
- Don't allow your teen to drink or smoke in your home.
- Don't provide alcohol to teenagers in your home. It's not safe, it sends the wrong message and you would be breaking the law.
- Consider locking up your alcohol.

Guide Your Teen

Believe it or not, older teens have already had to make decisions many times about trying alcohol and drugs. They witness many of their peers using alcohol and drugs - some without obvious or immediate consequences, others whose use gets out of control.

To resist peer pressure, teens need more than a general message not to use drugs. Most high school students are future oriented and are more likely to listen to discussions of how drugs & alcohol can ruin chances of getting into a good college, being accepted by the military or being hired for certain jobs.

Set your expectations. Expectations help you define the standard of behavior you expect from your teen. Communicate these to your teen. They need to know where you stand. Rules and consequences should be spelled out as well. They provide a solid way to help your teen understand your expectations and learn self-control. Also they provide teens with a believable excuse to give their peers when resisting drugs and alcohol.

Finally, it is important that parents praise and encourage teens for all the things they do well and for the positive choices they make. Knowing they are appreciated by the adults in their lives is highly motivating and can strengthen their commitment to remain drug and alcohol free.

Lee's Summit Youth Statistics:

According to the Mclouth Teen Survey Report for Lee's Summit 2009 - 2010, in the last 30 days

- 71.4% of 8th grade students had smoked cigarettes with 25.7% smoking over one pack
- 66.7% of 10th grade students had smoked cigarettes with 26.4% smoking over one pack
- 71.4% of 12th grade students and smoked cigarettes with 28.6% smoking over one pack.

Alcohol and Alcohol Energy Drinks

- Adolescents can become alcoholics in 6 - 18 months as opposed to a 5 - 15 year timeframe for adults to become alcoholics.
- A 12oz beer, 5oz glass of wine, 1oz shot of liquor contains the same amount of alcohol.
- Alcohol impairs vision, judgment, reactions, coordination and the ability to think clearly.
- Alcohol destroys brain cells.
- Binge drinking is life-threatening. At least one college student a week dies from alcohol poisoning.
- More than two thirds of young people who begin drinking before the age of 15 will try an illicit drug.
- Caffeine is addictive.
- The liver needs 12 hours to detoxify caffeine.
- Results in less oxygen to the brain, reduced memory and cognition.
- Can increase stress hormones epinephrine (adrenaline) by over 200%.

Alcohol Mixed With Energy Drinks Or Premixed Alcohol Energy Drinks (AED)

Students who consume AED's were:

- Twice as likely to be hurt, require medical attention, ride with an intoxicated driver.
- More likely to be taken advantage of or take advantage of someone else sexually.
- Likely to have an average Blood Alcohol Content (BAC) for AED 0.109, well above the legal driving limit of 0.08.
- Four times more likely to drive than those drinking only alcohol (beer, wine).

Tobacco

- Tobacco products are the chief avoidable cause of death in our society. An estimated 443,000 American lives are affected by tobacco related illnesses each year.
- Tobacco use in the United States cost business and industries over \$193 billion in 2004, including \$97 billion in lost productivity and \$96 billion in direct health care expenditures or an average of \$4,260 per adult smoker.
- The estimated cost of neonatal health care attributed to maternal smoking in the U.S. has been estimated at \$366 million per year, or \$704 per maternal smoker. Tobacco use during pregnancy causes 20 - 30 percent of low-birth weight babies, up to 14 percent of premature births and some 10 percent of infant deaths.
- Cigarette smoke contains 4,800 chemicals; 69 of which are known to cause cancer. Tobacco use is responsible for 90 percent of lung cancer deaths and 80 - 90 percent of COPD (Chronic Obstructive Pulmonary Disease) deaths.
- Diseases attributed to tobacco use: COPD (chronic bronchitis and emphysema), coronary heart disease, stroke, abdominal aortic aneurysm, acute myeloid leukemia, cataracts, pneumonia, periodontitis and bladder, esophageal, laryngeal, lung, oral, throat cervical, kidney, stomach and pancreatic cancers.
- Smokers die earlier than non-smokers; 13.2 years earlier for men and 14.5 years earlier for women.
- Tobacco, along with alcohol and marijuana, are referred to as "gateway drugs" that often lead to illicit drug use.
- Nicotine is one of the most addictive stimulant substances known.

Teenagers who smoke are:

- 14 times more likely to abuse alcohol
- 100 times more likely to use marijuana
- 32 times more likely to use cocaine



Monitor Your Teen

Monitoring is keeping tabs on your teenagers. It includes knowing where they are, whom they are with, what they are doing and when they will be home. It means asking questions, having your teen check in with you regularly, and checking up on them as well.

Require your teen to check in with you when they get home at night. This serves as a deterrent to alcohol, tobacco and illicit drug use if they know they will have to say goodnight. It also gives you the opportunity to check for signs of use, such as odors on breath or clothing.

Plug into the different areas of your teen's life, including school, work, friends, after-school activities, adult relationships, social media and free time. Sometimes it's a process of communication, and other times it means comparing notes with other adults in your teen's life.

Parents have no stronger allies in their fight against drug abuse than each other.

- Get to know your teen's friends and their parents. Agree on a general behavior code appropriate for your teens. It's helpful to be able to turn to other parents at the same stage of child-rearing with questions like "My son wants to go to a party where the chaperone will be a 20-year-old brother – are you allowing your daughter to go?"
- "Check up" on your teen periodically. Don't hesitate to drive by a party your teen is attending and call the host parents to ensure they will be home. Monitor your teen's social media accounts to see what is happening.
- Have your teen call from a residence phone (not a cell phone) and use caller ID to make sure they are where they said they would be.



Share information with parents of your teen's friends. Your teen is networking every day...are you?

Contract For Life

Young Adult:

I recognize that there are many potentially destructive decisions I face every day and commit to you that I will do everything in my power to avoid making decisions that will jeopardize my health, safety or your trust in me. I understand the dangers associated with the use of alcohol and other drugs, and the destructive behaviors often associated with impairment.

By signing below, I pledge my best effort to remain alcohol and drug free and agree that I will never drive under the influence of either, or accept a ride from someone who is impaired.

Finally, I agree to call you if I am ever in a situation that threatens my safety and to communicate with you regularly about issues of importance to us both.

Parent (or Caring Adult):

I am committed to you and to your health and safety. By signing below, I pledge to do everything in my power to understand and communicate with you about the many and potentially destructive decisions you may face.

Further, I agree to provide for you safe, sober transportation home if you are ever in a situation that threatens your safety and to defer discussion about that situation until a time when we can both talk about the issues in a calm and caring manner.

I also pledge to you that I will not drive under the influence of alcohol or other drugs and will always seek safe, sober transportation home.

Signed:

Student

Parent (or Caring Adult)

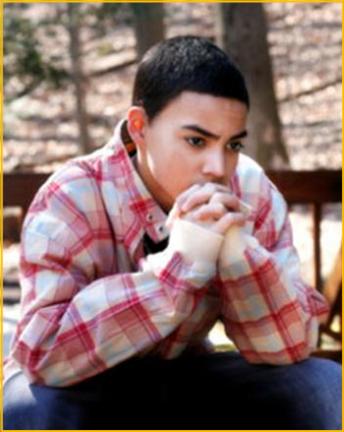


- Moreover, the brain's reward circuits (the dopamine system) get thrown out of whack when under the influence. This causes a teen to feel in a funk when not using drugs or alcohol - and going back for more only makes things worse.

It is important to urge your teen to take healthy risks. Not only will participation in constructive activities - such as athletics or the arts - help him or her form positive life-style habits, it will help your teen's forebrain develop as well.

Taken From
The Partnership for a
Drug-Free America

A Work In Progress



From early adolescence through their mid -20s, a teen's brain develops somewhat unevenly, from back to front. This may help explain their endearingly quirky behavior but also makes them prone to risk-taking.

The parts of the adolescent brain which develop first are those which control physical coordination, emotion and motivation. However, the part of the brain which controls reasoning and impulses - known as the prefrontal cortex - is near the front of the brain and therefore, develops last. This part of the brain does not fully mature until the age of 25.

It's as if, while the other parts of the teen brain are shouting, the prefrontal cortex is not quite ready to play referee. This can have noticeable effects on adolescent behavior. You may have noticed some of these effects in your teen:

- Difficulty holding back or controlling emotions.
- A preference for physical activity.
- A preference for high excitement and low effort activities (video games, sex, drugs, rock 'n roll).
- Poor planning and judgment (rarely thinking of negative consequences).
- More risky, impulsive behaviors, including experimenting with drugs and alcohol.

The development of the adolescent brain and behavior are closely linked. In a wink, hormones can shift your teen's emotions into overdrive, leading to unpredictable - and sometimes risky - actions. Unfortunately, developing brains may be more prone to damage. This means that experimentation with drugs and alcohol can have lasting, harmful effects on your teen's health.

- Research shows that alcohol abuse during the teenage years negatively impacts the memory center of the brain (the hippocampus).
- The use of drugs and alcohol may also disrupt the development of the adolescent brain in unhealthy ways, making it harder for teens to cope with social situations and the normal pressures of life.

A. Parents must be at the party.

1. No parent - no party.
2. A home minus adult supervision is asking for trouble.
3. Parents have a responsibility to see to it that parties are conducted in an appropriate manner.

B. Set ground rules with your teen beforehand.

1. Let your teen know your expectations; they do want guidelines. Make sure your teen passes these on to their guests in advance so there are no surprises.
2. Become involved with your teen in planning party activities. Agree on an appropriate guest list & stick to it.
3. Remind your teen that he/she is accountable for his/her behavior.
4. Notify your neighbors beforehand.

C. Alcohol or other drugs should not be permitted, served or available.

1. Be alert to the signs of alcohol or drug use.
2. Guests who attempt to bring in alcohol or drugs or who are uncooperative or uninvited should be promptly told to leave.
3. Have a plan to implement if anyone arrives at the party under the influence of alcohol or another drug. Do not let a person drive when under the influence of alcohol or other drugs. If they refuse call the police.
4. Anyone who leaves the party should not be allowed to return without the permission of the parent. This will discourage people from leaving with the intent of drinking or using drugs elsewhere & then returning to the party.
5. Be visible - bring in snacks, etc. Your visibility will help keep the party running smoothly & will give you an opportunity to meet your teen's friends.
6. Ask other responsible adults to help chaperone the party.
7. Have plenty of food & non-alcoholic drinks & a wide variety of activities available.
8. If you feel that despite your precautions things do get out of hand, please do not hesitate to call the police for assistance.

Family

- Changing attitude toward rules and regulations, parents, brothers and sisters.
- Lack of participation in family activities.
- Isolation (staying in room, etc.).
- Breaking curfew or sneaking out past curfew.
- Lying; blaming others for irresponsible behavior.
- Stealing (money, pills, goods to be “hocked”).
- Violence - physical and verbal.
- Erratic sleeping habits; extremes of too much or too little.
- Vagueness about company kept.
- Strange telephone calls; parties hang up or refuse to be identified.
- Compliant and agreeable, but fails to follow through with promises made.
- Changing attitude toward non-using friends.
- Change of circle of friends with little interest in old friends.



Family & Social Settings

- Parents don't know friends; can't get names and addresses.
- Hanging out with an older crowd.
- Decreasing interest in attending non-school activities.
- Subtle changes in conversations with friends (more secretive or “coded” language).
- Excessive tardiness, skipping classes or entire days.
- Increase in borrowing money.

School

- Grades begin falling for inexplicable reasons.
- Dropping out of sports or other activities.
- Disrespectful of teachers, assignments, rules and regulations.

- Frequent disciplinary referrals.
- Suspension or expulsion.

Note: None of the symptoms alone constitute a significant problem.

Physical-Psychological

- Odor of alcohol beverage on breath.
- Alcohol hangover; headache, vomiting.
- Reddened eyes or frequent use of eye drops (marijuana induced)/ dilated pupils (stimulant use) - watch for bottles of eye drops, which may be used to mask bloodshot eyes or dilated pupils
- Deep, nagging cough-dry and persistent.
- Weight loss/gain.
- Lethargic attitude; doesn't seem to be interested in anything.
- Undisciplined; doesn't get things done on time or as agreed upon.
- Blackouts; has period where memory is lost.
- Sometimes inappropriately happy; sometimes depressed/paranoid.

Miscellaneous

- Financial management poor; seems to spend lots of money and asks for money.
- Unaccounted for sums of cash.
- Paraphernalia kept or admired; rolling paper, pipes bongs, roach clips, pro-drug magazines, aluminum cans with holes punched in them.
- Uses excessive profanity.
- Frequently visits pro-drug websites.
- Increased secrecy about possessions or activities.
- Use of incense, room deodorant or perfume to hide smoke or chemical odors.
- Change in clothing choices; new fascination with clothes that highlight drug use.
- Evidence of use of inhalant products (such as hairspray, nail polish, correction fluid, common household products); rags and paper bags are sometime used as accessories.