



SUBSTANCE ABUSE

[KEEPING YOUR KIDS SAFE]

[resource guide]





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PANELISTS

SGT. TIFFANY CASTLE

Youth Relations Bureau, Collier County Sheriff's Office



Sgt. Tiffany Castle is a supervisor of the Collier County Sheriff's Office Youth Relations Bureau. She holds a Bachelor's degree in English and is currently pursuing a Master's degree in Environmental Science at Florida Gulf Coast University. Sgt. Castle has over 27 years in law enforcement, with the last four years working with the underprivileged and at-risk youth in the East Naples area. Sgt. Castle can often be seen interacting with young people – whether reading books in a classroom, or talking with them in public while on CCSO Mounted Patrol, atop her horse "Big Ben."

DR. RACHEL DAWES

Director of Student Relations, Collier County Public Schools



Dr. Rachel Dawes and her team support school administrators and parents with student attendance, discipline, registration, and Parental Choice. She is in her 19th year in education. Dr. Dawes has also served as a Special Education teacher at a mental health facility, an Exceptional Student Education Specialist, and an Assistant Principal.

NANCY DAUPHINAIS, LMHC, MCAP

Chief Operating Officer, David Lawrence Center



Nancy Dauphinais is the Chief Operating Officer of the David Lawrence Center (DLC). She is a Licensed Mental Health Counselor and Certified Master's Level Addiction Professional. Nancy holds a Master's degree in counseling from Florida Gulf Coast University and a Bachelor's degree in psychology from Duke University. She has worked at DLC for over 11 years in a variety of roles including behavioral health technician, emergency services clinician, outpatient therapist, clinical supervisor, and clinical director. During this time, she has been named DLC's Direct Service Provider, Administrator and Employee of the Year.

ALBERT DE LEON

Student/CORE Club President, Lely High School



Albert De Leon, from Brownsville, Texas, is a student at Lely High School, as well as the school's CORE Club President. He moved to Florida as an 8th grade student and was introduced to the CORE Society in 9th grade. Albert joined CORE because he believes that the next generation can make a difference, even if it is one step at a time. He believes that participating in the CORE Society has been one of the most hopeful movements as a student to make a difference. He hopes to pursue a future in politics and to make change for the better.

ANA DiMERCURIO

Assistant Director, Drug Free Collier



Ana DiMercurio has worked with Drug Free Collier since 2011. Her background in substance abuse prevention includes 12 years in law enforcement as a member of the Collier County Sheriff's Office. She is a graduate of the University of Texas at Austin and completed training through the National Coalition Academy to help strengthen local drug prevention efforts. Ana has a vested interest in prevention as a parent and long-time resident of Collier County.

DR. DAMIAN McGOVERN

Psychiatrist, NCH Physician's Groups



Dr. Damian McGovern is currently the Department Chair of Psychiatric Medicine with NCH Healthcare. He received his medical degree from Semmelweis University Medical School in Budapest, Hungary. He then completed an Internal Medicine Residency at the University of South Carolina, a Psychiatry Residency at the Mayo Clinic in Minnesota, and a Sleep Medicine Fellowship at Vanderbilt University in Tennessee. Dr. McGovern has been the recipient of various awards including the Alexander R. Lucas Award from the Mayo Clinic for achievement in Child and Adolescent Psychiatry.

PARENTS NEED TO KNOW...



Adapted from: National Crime Prevention Council (www.ncpc.org)

Research shows that the main reason that kids do not use alcohol, tobacco, or drugs is because of their parents -- because of their positive influence and because they know it would disappoint them. That is why it is so important that parents build a strong relationship with their kids and talk to them about substance abuse -- the earlier the better!

The good news is that it is easy to do! Here are a few ways you can build a positive relationship with your kids and start talking to them about drugs.

Establish and maintain good communication with your children

The better you know your children, the easier it will be to guide them towards positive activities and friendships. Talk to your children every day. Share what happened to you and ask what happened to them during the day.

Get involved in your children's lives

Young people are less likely to get involved with drugs when caring adults are part of their life. Spend time doing something your children want to do every day. Support your children's activities by attending their special events and praising them for their efforts.

Make clear rules and enforce them consistently

Research shows that when parents set harsh rules or no rules, kids are more likely to try drugs. Discuss rules, expectations, and consequences in advance. If a rule is broken, be sure to enforce the consequences. Give praise when your children follow rules and meet expectations.

Be a positive role model

Children imitate adults. Demonstrate ways to solve problems, have fun, and manage stress without using alcohol or drugs. Avoid contradictions between your words and your actions.

Help your children choose friends wisely

When children have friends who don't engage in risky behaviors, they are likely to resist them, too. Help your kids feel comfortable in social situations and get to know your children's friends and their families.

Talk to your children about drugs

When parents talk to their kids early and often about substance abuse, kids are less likely to try drugs. Short discussions go a long way. Educate yourself about alcohol, tobacco, and drug use before talking to your children. You will lose credibility if you do not have the facts right.

1 in 8 teens



have reported getting high on
over-the-counter cough medicine

(Source: Partnership for Drug-Free Kids)

[STATISTICS]

90%

of addictions start in the teen years. The teen brain is especially vulnerable because it is still developing through the mid 20s.

(Source: Partnership for Drug-Free Kids and NIDA)

1 in 6 teens

who smoke marijuana will become addicted, and among daily users, 25-50% will become addicted.

(Source: National Institute on Drug Abuse - NIDA)

Every day

2,000 teens

in the United States try prescription drugs to get high for the first time.

(Source: Partnership for Drug-Free Kids)

More than

4 in 10 people

who begin drinking before age 15 eventually become alcoholics.

(Source: National Institute on Drug Abuse - NIDA)

Rates of marijuana use among teens in Collier County show that

2.2%

 of middle school-aged youth and

15.6%

 of high school-aged youth

have used within the past 30 days.

(Source: 2016 Florida Youth Substance Abuse Survey)

In Collier County

4 out of 5 teens

DO NOT use drugs or alcohol.

(Source: 2016 Florida Youth Substance Abuse Survey)

DRUG

SOURCE: Partnership for Drug-Free Kids (www.drugfree.org)



ALCOHOL

**COCAINE/
CRACK**

**COUGH
MEDICINE**







**ECSTASY/
MDMA**

INHALANTS

	ALCOHOL	COCAINE/ CRACK	COUGH MEDICINE	ECSTASY/ MDMA	INHALANTS
Street Names / Commercial	Booze	Big C, Blow, Bump, Coke, Nose Candy, Rock, Snow	Dex, Red Devils, Robo, Triple C, Tussine, Skittles	Molly, Adam, Bean, E, Roll, X, XTC	Whippets, Bagging, Huffing, Poppers, Snappers, Dusting
Appearance	Liquid (beer, wine, liquor)	White crystalline powder, chips, chunks, or white rocks	Liquid, pills, powder, or gel caps	Branded tablets (heart, alien, skulls, and other symbols)	Paint thinners, glues, nail polish remover, whipped cream aerosol, Freon
How It Is Used / Abused	Consumed by drinking	Snorted or injected; crack can be smoked	Swallowed	Swallowed	Inhaled through nose or mouth
What Teens Have Heard	Makes a boring night fun	Keeps you amped up; you'll be the life of the party	Causes a trippy high with various plateaus	Enhances the senses and you'll love everyone	A cheap, 20-minute high
Dangers	Impairs reasoning, clouds judgement; long-term heavy drinking can lead to alcoholism and liver and heart disease	Can cause heart attacks, strokes, and seizures; in rare cases, sudden death on the first use	Can cause abdominal pain, extreme nausea, and liver damage	Can cause severe dehydration, liver and heart failure, and even death	Chronic exposure can produce significant damage to the heart, lungs, liver, and kidneys; can induce death
Teen (grade 9-12) Usage Fact	1 in 2 teens drank alcohol in the last year	1 in 10 teens has abused cocaine or crack in their lifetime	1 in 7 teens has abused cough medicine in their lifetime	1 in 8 teens has abused Ecstasy in their lifetime	1 in 6 teens has abused inhalants in their lifetime
Signs of Abuse	Slurred speech, lack of coordination, nausea, vomiting, hangovers	Nervous behavior, restlessness, bloody noses, high energy	Slurred speech, loss of coordination, disorientation, vomiting	Teeth clenching, chills, sweating, dehydration, anxiety, unusual displays of affection	Missing household products, a drunk, dazed, or dizzy appearance
You Should Also Know	Being a child of an alcoholic places children at greater risk for developing alcohol problems	Cocaine is one of the most powerfully addictive drugs	The "high" from cough medicine is caused by ingesting a large amount of dextromethorphan	Can be addictive; popular club drug due to its stimulant properties which allow users to dance for long periods of time	More than 1000 common products are potential inhalants that can kill on the first use or any time thereafter

IDENTIFICATION guide for parents



					
MARIJUANA	PRESCRIPTION PAIN RELIEVERS	PRESCRIPTION SEDATIVES	PRESCRIPTION STIMULANTS	STEROIDS	TOBACCO
Blunt, Boom, Dope, Grass, Hash, Herb, Mary Jane, Pot, Reefer, Skunk, Weed	Codeine, OxyContin (Oxy, O.C.) Percocet (Percs), Vicodin (Vike, Vitamin V)	Mebaral, Quaaludes, Xanax, Valium	Adderall, Dexedrine, Ritalin	Juice, Rhoids, Stackers, Pumpers, Gym Candy	Cancer Sticks, Chew, Cigarettes, Dip, Smokes
Green or gray mixture of dried, shredded flowers and leaves of the hemp plant	Tablets and capsules	Multi-colored tablets and capsules; some can be in liquid form	Tablets and capsules	Tablet, liquid, or skin application	Brown, cut up leaves
Smoked, brewed into tea, or mixed into foods	Swallowed or injected	Swallowed or injected	Swallowed, injected, or snorted	Swallowed, applied to skin, or injected	Smoked or chewed
Relaxing, not dangerous, and often easier to get than alcohol	A free high, straight from the medicine cabinet	A great release of tension	Keeps you attentive and focused	Will guarantee a spot on the starting lineup	An oral fixation and appetite suppressant
Can cause memory and learning problems, hallucinations, delusions, and depersonalization	A large single dose can cause severe respiratory depression that can lead to death	Slows down the brain's activity and when a user stops taking them, there can be a rebound effect, possibly leading to seizures and other consequences	Taking high doses may result in dangerously high body temperatures and an irregular heartbeat; potential for heart attacks or lethal seizures	Boys can develop breasts, girls can develop facial hair and a deepened voice; can cause heart attacks and strokes	Cigarette smoking harms every organ in the body and causes heart disease and stroke, as well as many forms of cancer
Nearly 1 in 2 teens has abused marijuana in their lifetime	1 in 7 teens has abused prescription pain relievers in their lifetime	1 in 13 12 th graders has abused sedatives and/or tranquilizers in their lifetime	1 in 8 teens has abused Ritalin or Adderall in their lifetime	1 in 15 teens has abused steroids in their lifetime	1 in 5 teens has smoked cigarettes in the last 30 days
Slowed thinking and reaction time, impaired coordination, paranoia	Medicine bottles present without illness, Rx bottles missing, disrupted eating and sleeping patterns	Slurred speech, shallow breathing, sluggishness, disorientation, lack of coordination	Lack of appetite, increased alertness, attention span and energy	Rapid growth of muscles, opposite sex characteristics, and extreme irritability	Smell on clothes and hair, yellowing of teeth and fingers that hold cigarettes
Contrary to popular belief, marijuana can be addictive	Abusing prescription painkillers is just as dangerous, addictive, and deadly as using heroin	Using prescription sedatives with alcohol can slow both the heart and respiration and possibly lead to death	Many teens abuse this prescribed medication to help them cram for exams or suppress their appetite	Teens who abuse steroids before the typical adolescent growth spurt risk staying short and never reaching their full adult height	Secondhand smoke contributes to more than 35,000 deaths related to cardiovascular disease



TALK TO YOUR KIDS

SOURCE: Partnership for Drug-Free Kids (drugfree.org)



PRESCHOOL (2-4 years old)

SCENARIO

Giving your child a daily vitamin.

WHAT TO SAY

Vitamins help your body grow. You need to take them every day so that you'll grow up big and strong like Mommy and Daddy—but you should only take what I give you. Too many vitamins can hurt you and make you sick.

SCENARIO

Your kids are curious about medicine bottles around the house.

WHAT TO SAY

You should only take medicines that have your name on them or that your doctor has chosen just for you. If you take medicine that belongs to somebody else, it could be dangerous and make you sick.



EARLY ELEMENTARY (5-8 years old)

SCENARIO

Your child has expressed curiosity about the pills she sees you take every day — and the other bottles in the medicine cabinet.

WHAT TO SAY

Just because it's in a family's medicine cabinet doesn't mean that it is safe for you to take. Even if your friends say it's okay, say, "No, my parents won't let me take something that doesn't have my name on the bottle."

SCENARIO

Your child dresses herself for school in a pink zebra print tank top, a polka dot vest, striped leggings and an orange beret.

WHAT TO SAY

"You look great. I love how you show your personality in your outfits." Celebrate your child's decision-making skills. Whenever possible, let your child choose what to wear. Even if the clothes don't quite match, you are reinforcing your child's ability to make decisions for herself.



PRETEEN (9-12 years old)

SCENARIO

Your child is just starting middle school and you know that eventually he will be offered drugs and alcohol.

WHAT TO SAY

I know we talked about drinking and drugs when you were younger, but now is when they're probably going to be an issue. I'm guessing you'll at least hear about kids who are experimenting. I just want you to remember that I'm here for you and the best thing you can do is just talk to me about the stuff you hear or see. Don't think there's anything I can't handle or that you can't talk about with me, okay?"

SCENARIO

You find out that kids are selling prescription drugs at your child's school. Your child hasn't mentioned it and you want to get the conversation about it started.

WHAT TO SAY

I heard there are kids selling pills at your school — prescriptions that either they are taking or someone in their family takes. Have you heard about kids doing this?" Let him know that in the future, he can always blame you to get out of a bad situation. Say, "If you're ever offered drugs at school, tell that person, 'My mother would kill me if I took that and then she wouldn't let me play baseball.'"



TEENAGER (13-18 years old)

SCENARIO

Your teen is starting high school and you want to remind him that he doesn't have to give in to peer pressure to drink or use drugs.

WHAT TO SAY

High school is going to be a lot of fun, and we want you to have a great time. But we also know there's going to be some pressure to start drinking, abusing medicine, smoking pot, or taking other drugs. A lot of people feel like this is just what high school kids do. But it's actually not. You'll have a lot of decisions to make and you might even make some mistakes. Just know that you can talk to us about anything, anytime — even if you DO make a mistake or feel stuck in a situation that you need help to get out of.

SCENARIO

Your teen has started to hang out with kids you don't know — and dropped his old friends.

WHAT TO SAY

It seems like you are hanging with a different crowd than you have in the past. Is there a problem with your old friends, or are you just branching out and meeting some new kids? Tell me about your new friends. What do they like to do? What do you like about them?

RISK FACTORS

FAMILY HISTORY

Family history of drug or alcohol problems can place a child at increased risk for developing a problem.

MENTAL HEALTH OR BEHAVIORAL ISSUES

Kids with psychiatric conditions like depression, anxiety, or Attention Deficit Hyperactivity Disorder (ADHD), are at more risk for a drug or alcohol problem.

TRAUMA

Kids with a history of traumatic events have been shown to be more at risk for substance use problems later in life.

IMPULSE CONTROL PROBLEMS

Kids who frequently take risks or have difficulty controlling impulses are more at risk for substance use problems.

WHY TEENS USE DRUGS & ALCOHOL

OTHER PEOPLE - Teens may see their parents/adults drinking alcohol and smoking cigarettes. Teens may try a substance because it is available and they see all their friends enjoying it.

POPULAR CULTURE - Forty-five percent of teens agree with the statement "Movies and TV shows make drugs seem like an okay thing to do."

ESCAPE AND SELF-MEDICATION - When teens are unhappy and cannot find a healthy outlet for their frustration or a trusted confidant, they may turn to chemicals for solace.

BOREDOM - Teens who cannot tolerate being alone, have trouble keeping occupied, or crave excitement are prime candidates for substance use.

REBELLION - Alcohol is the drug of choice for an angry teenager because it frees him to behave aggressively.

INSTANT GRATIFICATION - Drugs/alcohol work quickly and the initial effects feel really good. Teens turn to drug use because they see it as a short-term shortcut to happiness.

LACK OF CONFIDENCE - Many shy teenagers who lack confidence report that they will do things under the influence of alcohol/drugs that they might not otherwise.

MISINFORMATION - Perhaps the most avoidable cause of substance use is inaccurate information about drugs and alcohol. Nearly every teen has friends who claim to be experts on recreational substances, and they are happy to assure them that the risks are minimal.

WARNING SIGNS

BEHAVIORAL ISSUES

- Changed relationships with family members/friends
- Uses chewing gum or mints to cover up breath
- Often uses over-the-counter preparations to reduce eye reddening or nasal irritation
- Frequently breaks curfew
- Has cash flow problems
- Drives recklessly, and has car accidents or unexplained dents in the car
- Avoids eye contact
- Locks doors
- Goes out every night
- Makes secretive phone calls
- Makes endless excuses
- Has the "munchies" or sudden appetite
- Exhibits uncharacteristically loud, obnoxious behavior
- Laughs at nothing
- Has become unusually clumsy
- Disappears for long periods of time
- Has periods of sleeplessness or high energy, followed by long periods of "catch up" sleep

MOOD AND PERSONALITY SHIFTS

- Exhibits mood changes or emotional instability
- Sullen, withdrawn, depressed, silent, uncommunicative
- Shows loss of inhibitions
- Hostile, angry, uncooperative
- Deceitful or secretive
- Less motivated, unable to focus
- Hyperactive
- Unusually elated

HYGIENE AND APPEARANCE PROBLEMS

- Smell of smoke or other unusual smells on breath/clothes
- Messy appearance
- Poor hygiene
- Red, flushed cheeks or face
- Track marks on arms or legs
- Burns or soot on fingers or lips

SCHOOL AND WORK CONCERNS

- Absenteeism or loss of interest
- Loss of interest in extracurricular activities, hobbies, or sports
- Failure to fulfill responsibilities at school or work
- Complaints from teachers or supervisors
- Reports of intoxication at school or work

HOME AND CAR CONDITIONS

- Disappearance of prescription or over-the-counter pills
- Missing alcohol or cigarettes
- Disappearance of money or valuables
- Smell in the car or bottles, pipes, or bongs on floor or in the glove box
- Appearance of unusual containers or wrappers
- Appearance of unusual drug apparatuses
- Hidden stashes of alcohol

RX PREVENTING TEEN PRESCRIPTION DRUG ABUSE

SOURCE: Partnership for Drug-Free Kids (drugfree.org)

WHAT IS PRESCRIPTION DRUG ABUSE?

The use of prescription medication to create an altered state, to get high, or for reasons or by people other than those intended by the prescribing doctor.

HOW MANY TEENS ARE DOING THIS?

According to research conducted by Partnership for Drug-Free Kids, as many as **one in five teens** say they have taken a prescription drug without having a prescription for it themselves. This behavior cuts across geographic, racial, ethnic, and socio-economic boundaries.

WHY ARE SOME TEENS DOING THIS?

- To party and get high, in some cases, but also to “manage” or “regulate” their lives.
- They are abusing some stimulants such as **Ritalin** and **Adderall** to give them additional energy and ability to focus when they are studying or taking tests.
- They are abusing pain relievers like **OxyContin** and tranquilizers such as **Xanax** to cope with academic, social, or emotional stress.
- They are abusing prescription **amphetamines** to lose weight, or prescription **steroids** to bulk up.

WHAT ARE THE RISKS?

Short-Term

- Overdosing (especially on prescription pain relievers) can be fatal, as can mixing prescription drugs with over-the-counter medication and/or alcohol.

Long-Term

- Prescription pain relievers and other prescription medicines are potentially addictive. Coming to rely at a young age on prescription medicine (or any drug) to “manage” your life risks establishing a learned, lifelong pattern of dependency and limitation and prevents learning coping skills.

WHERE ARE TEENS GETTING RX DRUGS?

The vast majority of teens abusing prescription drugs are getting them from the **medicine cabinets of friends, family, and acquaintances**. Some teens traffic among themselves – handing out or selling “extra” pills of their own, or pills they have acquired or stolen from classmates. A very small minority of teens say they get their prescription drugs illicitly from doctors, pharmacists, or over the Internet.

ARE PARENTS EDUCATING THEIR CHILDREN ABOUT THE RISKS OF THIS BEHAVIOR?

Research conducted by Partnership for Drug-Free Kids shows that **parents are not communicating the risks of prescription drug abuse to their children as often as they talk about illegal drugs**. This is partly because some parents are unaware of the behavior and partly because those who are aware of teen abuse of medicine tend to underestimate the risks just as teens do.

A recent study by Partnership for Drug-Free Kids showed that 28% of parents have themselves taken a prescription drug without having a prescription for it themselves. This is not necessarily abuse, but it sets a dangerous example for kids – that the recommended dosage of prescriptions need not be strictly followed.

WHAT SHOULD PARENTS DO?

1. **Educate yourselves** – learn about the current trends of teen prescription drug abuse.
2. **Communicate** the risks of prescription drug abuse to your kids. Children who learn a lot about the risks of drugs are up to 50% less likely to use drugs.
3. **Safeguard your own medicines**. Keep prescription medicine in a secure place, count and monitor the number of pills you have.
4. **Safely dispose** of unused/needed medication.

OPERATION MEDICINE CABINET®

A pharmaceutical take-back program brought to you by Drug Free Collier

DO lock up all medications and keep away from children and teens.

DO take unused or expired prescriptions and over-the-counter medication to a permanent drop-off location for proper disposal.

DON'T flush medication down the toilet. It is a danger to the environment.

DON'T take needles or other “sharps” to permanent drop-off locations. Sharps may be taken to a Collier County Recycling Drop-Off Center.

PERMANENT DROP-OFF LOCATIONS

Collier County Sheriff's Office
3319 Tamiami Trail East
Mon. - Fri., 7:30am - 5pm

776 Vanderbilt Beach Road
Mon. - Fri., 8am - 5pm

4707 Golden Gate Parkway
Mon. - Fri., 8am - 5pm

14750 Immokalee Road
Mon. - Fri., 8am - 5pm

112 South First Street
Mon. - Fri., 7am - 7pm.
Sat - Sun., 7am - 5pm

Naples Police Dept.
355 Riverside Circle
Mon. - Fri., 8am - 5pm

Marco Island Police Dept.
51 Bald Eagle Drive
Mon. - Fri., 8am - 5pm

Collier County Medical Examiner
3838 Domestic Avenue
Mon. - Fri., 9am - 4pm

Everglades City Hall
102 Copeland Avenue
Mon. - Fri., 8am - 5pm

Walgreens
8900 Tamiami Trail N.
Open daily 8am - 10pm

15295 Collier Blvd.
Open daily 8am - 10am

