

# Drug-Free Campus Guidelines

*A publication of the Office of the Vice President for Student Life about Caldwell University's alcohol and drug policy and related resources. This publication is produced and provided annually to all students, faculty, and staff as required by the Drug Free Schools and Campuses Act Amendment of 1989 and the Drug Free Workplace Act.*

## Message to Faculty, Staff and Students

The abuse of alcohol and other drugs is a national health problem. Caldwell University's mission demands a comprehensive approach to this problem that includes providing education to all members of the University community concerning the health, social, and legal risks of substance abuse. As an institution rooted in the tradition of St. Dominic, the University is committed to helping any member of the community overcome the psychological and physical problems that may be associated with alcohol, drug abuse and addiction.

This guide contains information about University policies, campus assistance programs, and contact information for local service providers and treatment centers. This guide also includes the federal and state laws for the illegal possession or distribution of drugs and alcohol, as well as the range of University sanctions that can be imposed for violation of the University's policies regarding substance abuse.

## Policy Statement

The United States Department of Education has issued regulations for the implementation of the provisions of the "Drug Free Schools and Communities Act Amendment of 1989" (Public Law 101-226). These regulations require the University to distribute annually to each student and employee information regarding the unlawful possession, use or distribution of illicit drugs and alcohol by students and employees on University property or as part of on-campus or off-campus activities. Caldwell University's Alcohol and Drug policies can be found in the following handbooks or internet links:

[Caldwell University's Alcohol and Drug Policy](#) (pages 25-29)

Caldwell University 2016-2017 C-Book: A Student Guide to Residence Life and Student Code of Conduct  
<http://www.caldwell.edu/cbook> (pages 85-88)

Caldwell University Department of Intercollegiate Athletics Student-Athlete Drug Education and Drug Testing Program  
[http://caldwellathletics.com/documents/2014/6/26/drug\\_program.pdf?id=41](http://caldwellathletics.com/documents/2014/6/26/drug_program.pdf?id=41)

[Employee Policy Manual: General Institutional Policies](#)  
(\*Employee must be logged into portal to access Policy Manual)

## Services Offered at Caldwell University

Counseling Services (973-618-3307) offers counseling and educational services to students who are experiencing problems with alcohol or other drug use, or who are concerned about a friend or family member's use. Programs are designed to assist students in making safe and informed choices concerning alcohol and drug use.

**Workshops/Educational Programs:** A counselor is available to present or coordinate workshops or educational programs. These programs are designed to meet the needs of incoming freshmen, athletes, resident students, and members of campus clubs among other student groups. Campus-wide educational programming includes NCAAW and Safe Spring Break events. TIPS training is offered to resident assistants, representatives of Greek life and student government..

**TIPS for the University** is a 2.5 hour program that helps students make sound choices when faced with difficult decisions about alcohol use. Students learn to address drinking behaviors and develop intervention techniques appropriate to the Caldwell University campus.

**On-line Educational Courses:** Freshmen need to complete an on-line educational course before they arrive on campus. This web-based course is designed to assist students in making healthy choices regarding their drinking behaviors.

### **Freshman Orientation Educational Services**

At Orientation time, freshmen participate in an educational session regarding the signs of alcohol poisoning and are introduced to the University's Good Samaritan policy.

**Alcohol Screenings:** Alcohol and drug screenings are provided to students during individual counseling. Screenings are also offered to the campus community during National Alcohol Screening Day. On-line self-screenings are available through the Counseling Center's webpage.

**Helpline Service:** A free and confidential telephone counseling and referral line that is staffed by Caldwell University graduate students: 973-618-3689.

**The Substance Awareness Resource Library:** The Resource Library is available to students, staff, and faculty who are interested in learning more about drug and alcohol issues. It contains a broad selection of books, CDs, DVDs and pamphlets on a host of alcohol and drug-related topics. Additional on-line resources can be found on the Substance Awareness Counseling website.

**Don't Cancel That Class:** When professors plan to be absent from class, they can arrange for a counselor to offer a basic alcohol education program to their class.

**21<sup>st</sup> Birthday Card:** All students celebrating a 21<sup>st</sup> birthday during the academic year are sent a 21<sup>st</sup> birthday card reminding them to enjoy their special day, and if they choose to celebrate with alcohol, they need to "think before they drink."

### **Parent Education**

Educational materials are sent to parents prior to freshmen orientation that provides guidelines on how parents can discuss alcohol use with their students. Parents of resident students are also informed about the University's Alcohol and Drug Policy at Fall Orientation.

**Student Activities:** Throughout the academic year, Counseling Services co-sponsors many alternative alcohol-free activities during free periods and at high-risk drinking times.

**Peer Educators: C.A.T.S.** – Caldwell Advocates Teaching Students. Student leaders promote and support wellness on campus by encouraging students to make healthy lifestyle choices. Peer educators staff informational tables, offer workshops, and sponsor activities related to alcohol/drug use.

**S.A.M.** - Student Athlete Mentors. Athlete leaders work with their fellow athletes to create a positive environment by encouraging them to make healthier choices regarding the use of drugs and alcohol.

## **Substance Awareness for Faculty and Staff**

### **Substance Awareness Counseling Website**

The Substance Awareness Counseling website contains informational links for faculty and staff so that they can recognize the signs, symptoms and behaviors of students who may be abusing alcohol and other drugs.

[www.narconon.org/drug-abuse/signs-symptoms-of-drug-abuse.html](http://www.narconon.org/drug-abuse/signs-symptoms-of-drug-abuse.html); [www.narconon.org/drug-information/alcohol-information.html](http://www.narconon.org/drug-information/alcohol-information.html)

### **Other Campus Resources:**

Counseling Services..... 973-618-3307  
Residence Life..... 973-618-3472  
Health Services..... 973-618-3319  
Vice President for Student Life..... 973-618-3248

### **Employee Resources:**

Human Resources..... 973-618-3669  
Aetna Resources for Living\*..... 866-486-4334  
Horizon Blue Cross/Blue Shield ..... 800-626-2212

*\*Contact information for the EAP is also listed in the “Employee Benefits” section of the HR portal page.*

[https://my.caldwell.edu/ICS/Staff\\_Faculty/Human\\_Resources.jnz?portlet=Pay\\_and\\_Benefits](https://my.caldwell.edu/ICS/Staff_Faculty/Human_Resources.jnz?portlet=Pay_and_Benefits)

## **Local Resources**

### **Hotline Numbers**

Alcoholics Anonymous..... 800-245-1377  
Alcohol Referral..... 800-454-8966  
1-800-Alcohol Helpline..... 800-252-6465  
Alanon/Alateen..... 973-744-8686  
NJ Self-Help Clearinghouse..... 800-367-6274  
National Council on Alcoholism and Drug  
Dependence of New Jersey..... 609-689-0599  
NJ Treatment Referral.... 800-238-2333/609-292-7232  
Narcotics Anonymous..... 800-992-0401

### **Local Out-Patient and In-Patient Treatment Centers**

The Bridge..... 973-228-3000  
High Focus Centers..... 973-909-4098  
New Bridge Services..... 973-839-2520  
Full Recovery Wellness Center..... 973-244-0022

# Significant Laws Governing Use/Abuse of Controlled Substances

## 1. FEDERAL

Federal law prohibits the possession, use or distribution of illicit drugs. Strict penalties are provided for drug convictions, including mandatory prison terms for many offenses. The following information, although not complete, is an overview of federal penalties for first convictions. All penalties are doubled for any subsequent drug conviction.

- a. **Denial of Federal Benefits (21USC§862)** – A federal or state drug conviction may result in the loss of federal benefits, including school loans, grants, scholarships, contracts, and licenses. Federal or state drug distribution convictions may result in denial of federal benefits for up to 5 years for a first conviction, 10 years for a second conviction, and a permanent denial of federal benefits for a third conviction. Federal or state drug convictions for possession may result in denial of federal benefits for up to 1 year for a first conviction and up to 5 years for subsequent convictions.
- b. **Forfeiture of Personal Property and Real Estate (21USC§881)** – Any person convicted of a federal drug offense punishable by more than 1 year in prison shall forfeit to the United States any personal or real property related to the violation, including houses, cars, and other personal belongings. A warrant of seizure may be issued and property seized at the time an individual is arrested on charges that may result in forfeiture.
- c. **Federal Drug Trafficking Penalties (21USC§841)** – Penalties for federal drug trafficking convictions vary according to the quantity of the controlled substance involved in the transaction. The list below is a sample of the range and severity of federal penalties imposed for first convictions. Penalties for subsequent convictions are twice as severe. If death or serious bodily injury results from the use of a controlled substance that has been illegally distributed, the person convicted on federal drug charges of distributing the substance faces a mandatory life sentence and fines ranging up to \$8 million. Persons convicted on federal charges of drug trafficking within 1,000 feet of a public or private elementary, vocational or secondary school or a public or private University, junior University or university (21USC§860a) face penalties of prison terms and fines which are twice as high as the regular penalties for the offense, with a mandatory prison sentence of at least one (1) year for the first offense.
- d. **Federal Drug Possession Penalties (21USC§844)** – Persons convicted on federal charges of possessing any controlled substance face penalties of up to one (1) year in prison and a mandatory fine of no less than \$1,000 up to a maximum of \$100,000. The penalties could be more than \$100,000 if someone is convicted of possession of a very large amount of drugs since it could be assumed that more than a certain amount implies intent to distribute. Second convictions are punishable by not less than 15 days but not more than 2 years in prison and a maximum fine of \$2,500. Subsequent convictions are punishable by not less

than 90 days but not more than 3 years in prison and a minimum fine of \$5,000. However, notwithstanding those penalties, a person convicted under this section for possession of a mixture of substance that contains a cocaine base shall be imprisoned for not less than 5 years but not more than 20 years in addition to the payment of a money fine. If death or serious injury results the imprisonment may be life but shall not be less than 20 years with an additional penalty of a money fine of up to \$1 million (21USC§841).

- e. **Special sentencing provisions for possession of crack cocaine** impose a mandatory prison term of not less than 5 years but not more than 20 years and a fine of up to \$250,000, or both if:
  - (1) It is a first conviction and the amount of crack possessed exceeds 5 grams;
  - (2) It is a second conviction and the amount of crack possessed exceeds 3 grams;
  - (3) It is a third or subsequent crack conviction and the amount exceeds 1 gram.
- f. **Civil penalties of up to \$10,000** may also be imposed for possession of small amounts of controlled substances, whether or not criminal prosecution is pursued.

## 2. STATE OF NEW JERSEY

The New Jersey Comprehensive Drug Reform Act (N.J.S. 2C: 35-1 et seq) created new offenses, increased penalties for some existing offenses to “ensure the imposition of stern, consistent punishment for all drug offenders,” and transferred the enforcement of all drug related crime into the Code of Criminal Justice. A summary of its provisions follows:

- a. **Potential Penalties for a Conviction:**

New Jersey statutes provide for different levels of punishment based upon the degree of the criminal offense with the most serious being crimes of the first degree reducing to crimes of the fourth degree, and finally disorderly persons offenses. The punishment can include jail time and a fine. Punishment can run from up to 20 years and a minimum \$3,000 fine; up to 10 years and a \$2,000 fine; up to 5 years and a \$1,000 fine; and up to 18 months and a \$750 fine, for offenses in the first to the fourth degree, respectively. These are only guidelines and the punishments imposed and the fines assessed can be greater, based upon the facts and circumstances; in cases of repeat offender; the type of drug and the quantity involved; and, whether there was serious injury caused to another or death. The last category, disorderly persons offenses, can result in imprisonment for up to 1 year and a fine of \$500.

**(1) Simple possession, use or being under the influence of:**

- **Marijuana:** 0-18 months in jail and a fine of \$500 to \$15,000 and mandatory loss of driver's license for 6 months to 2 years.
- Possession of over 50 grams is a fourth degree crime and could lead to a fine of up to \$25,000.
- **Cocaine/Crack:** 3-5 years in jail and a fine of \$1,000 to \$25,000, and mandatory loss of driver's license for 6 months to 2 years.
- **Amphetamine ("Speed"):** same as cocaine.
- **Psilocybin ("Magic Mushrooms") and LSD:** same as cocaine.

**(2) Use or possession with intent to distribute:**

- **Marijuana:** 0-20 years in jail and a fine of \$750 to \$300,000, and mandatory loss of driver's license for 6 months to 2 years.
- **Cocaine:** 3-20 years in jail (with a 3-5 year \*\*mandatory sentence with no parole if amount exceeds 5 oz.) and a fine of \$1,000 to \$300,000 and mandatory loss of driver's license for 6 months to 2 years.
- **Amphetamine ("Speed"):** 3-20 years in jail and a fine of \$1,000 to \$300,000, and mandatory loss of driver's license for 6 months to 2 years.
- **Psilocybin ("Magic Mushrooms") and LSD:** 3-5 years in jail and a fine of \$2,000 to \$300,000, and mandatory loss of driver's license for 6 months to 2 years.

**\*\*In addition to the foregoing fines, every defendant convicted of any drug offense or who goes into a drug diversionary program must pay mandatory penalty ranging from \$500 to \$3,000 and a mandatory \$50 laboratory charge.**

**(3) Use or possession of drug paraphernalia:** Up to 6 months in jail, mandatory fine of \$500 to \$1,000 and a mandatory loss of driving privileges for 6 months to 2 years.

**(4) The Act provides that any person, 18 years or older, who uses, solicits, or directs a juvenile (17 years or younger) to manufacture or distribute drugs is guilty of a second-degree crime and is subject to imprisonment for 5-10 years and a fine of up to \$300,000.**

**(5) It is unlawful for any person to deliver drug paraphernalia to a person under 18 years of age.**

**b. Newer Offenses and Stiffer Penalties that can Affect Members of the University Community**

**(1) Newer Offenses:**

- **"Designer Drugs"** – Drugs like "Ecstasy" and other "club drugs" are now included in the list of "controlled dangerous substances."
- **Synthetic Marijuana** - Banning of Synthetic Marijuana (S1783). The possession, manufacture or sale of synthetic marijuana, often referred to as "K2," "Spice," "Blaze," and "Red Dawn X" is banned. Selling or producing more than an ounce of the drug

would be a second degree crime punishable by up to 10 years in prison, while for smaller amounts it would be a third degree crime that could land offenders in prison for up to five years. Possession would either be a third degree or fourth degree crime, which carries a sentence of up to one-and-a-half years in prison.

- **Pamela's Law**, amending and supplementing Title 2C of the New Jersey Statutes, criminalizes possession and sale of mephedrone and methylenedioxypropylone, commonly known as MDPV or "bath salts."
- **Criminal Homicide** – If a person dies as a result of a drug given by another, the giver of the drug can be charged with criminal homicide.
- **Drug-Free School Zones** – A special provision in this Act stipulates that if you are found on any school property (elementary or secondary) or within 1000 ft. of any school property or school bus and are convicted of distributing, dispensing or possessing with intent to distribute a "controlled dangerous substance,"
- **You will be sentenced to a term of imprisonment and a fine up to \$100,000, depending upon amount of the substance you possess.** During part of this term of imprisonment, you would not be eligible for parole.

**NOTE:** AREAS OF THE CALDWELL UNIVERSITY CAMPUS ARE CONSIDERED TO BE WITHIN THIS DRUG-FREE SCHOOL ZONE.

**(2) Stiffer Penalties:**

- There is a penalty of mandatory loss or postponement of driving privileges of at least six (6) months upon conviction of many drug offenses, e.g., possession of drug paraphernalia such as pipes, sifters, spoons, etc.
- Especially harsh penalties are established to impose "stern punishment for persons involved in the illegal manufacture of drugs."
- If a person distributes a drug to a minor (under the age of 17) or a pregnant female, there is now a stiffer penalty.
- The Act provides for forfeiture provisions where the State may confiscate a motor vehicle in which any "controlled dangerous substance" is found, no matter how small the amount.

**GOOD SAMARITAN EMERGENCY RESPONSE ACT (A578)**

This Bill eliminates criminal liability for persons who seek medical assistance in response to drug overdoses. This Bill grants immunity from prosecution from any evidence obtained as a result of calling 911 to seek medical assistance for a drug overdose. The law is intended to increase the likelihood that

persons who witness a drug overdose will seek help for that individual by removing the fear of subsequent prosecution.

### **Significant Laws Governing Use/Abuse of Alcohol**

All states carry "ZERO TOLERANCE" laws that target drivers under the legal drinking age. These laws penalize persons under 21 for operating a vehicle with any trace of alcohol in their systems (a BAC above 0.0), or with negligible BAC levels such as .01 or .02 percent. Caldwell University abides by all New Jersey state laws regarding the use and prohibition of alcohol, outlined as follows:

1. **DRIVING WHILE INTOXICATED (N.J. S.A. 39:4-50)** – A person is legally drunk if his or her blood alcohol concentration (BAC) is 0.08 percent or higher. A person also may be arrested with a BAC lower than 0.08 percent if his or her driving ability is considered unsafe. In either case, the person is charged with Driving While Intoxicated (DWI). All persons convicted of DWI must pay an insurance surcharge of at least \$1,000 per year for three years, in addition to the following penalties:
  - a. **First Offense:** If BAC is 0.08 percent or higher but less than 0.10 percent, additional fines and charges of at least \$250.00; loss of license for 3 months; 12-48 hours to be spent in an Intoxicated Driver Resource Center; and a possible 30-day jail sentence. If BAC is 0.10 or higher, additional fines and charges of at least \$300.00; loss of license for 7-12 months; 12-48 hours to be spent at an Intoxicated Driver Resource Center; and a possible 30-day jail sentence.
  - b. **Second Offense:** Additional fines and charges of at least \$500.00; loss of license for two years; 30 days of community service; jail sentence of not less than 48 hours or more than 90 days; and installation of an ignition interlock device in every motor vehicle owned; leased or regularly operated by the offender.
  - c. **Third Offense:** Additional fines and charges of at least \$1,000.00; loss of license for 10 years; a 180-day jail sentence; and installation of an ignition interlock device. The 180-day sentence can be lowered by participating in an inpatient rehabilitation program.
  - d. **The fines to be imposed are even greater if the offense took place on any property used by an elementary or secondary school or within 1,000 feet of such property.** In such cases, and under certain circumstances, the punishment can result in a suspension of driving privileges for a period of 20 years. It is not relevant that there was no knowledge that the offense was committed while on or within 1,000 feet of the described school property.
  - e. **If you allow someone to operate a motor vehicle that you own or control or is in your custody while the driver is intoxicated or under the influence of a narcotic, hallucinogenic or habit producing drug, you as the owner or custodian of the vehicle will be subject to the same penalties as the driver.** The New Jersey law on drunk driving subjects the owner or custodian of a vehicle to the same penalties as the driver if the owner or custodian allows someone who is under the influence of alcohol or drugs to operate the motor vehicle.
2. **REFUSING THE BREATH TEST (N.J.S.A. 39:4-50.4a)** – Refusal to take the breath test when there is probable cause to believe that the person who has been driving is under the influence of an intoxicating liquor or a narcotic is a separate offense which carries its own separate penalties, fines and loss of driving privileges which can run concurrent with or consecutive to the penalties, fines and suspension of driving privileges for a DWI.
  - a. **First Offense:** A fine of not less than \$300.00; a loss of license for not less than seven (7) months or more than one (1) year; and referral to an Intoxicated Driver Resource Center and complete an alcohol education or rehabilitation program for such duration as may be determined by the Center.
  - b. **Second Offense:** A fine of not less than \$500 or more than \$1,000; loss of license for up to two years; and referral to an Intoxicated Driver Resource Center and complete an alcohol education or rehabilitation program for such duration as may be determined by the Center. The revocation of license for a second offense shall be consecutive to any revocation imposed for a conviction of DWI coming out of the same arrest.
  - c. **Third or Subsequent Offense:** A fine of \$1,000; loss of license for up to ten years; and referral to an Intoxicated Driver Resource Center and complete an alcohol education or rehabilitation program for such duration as may be determined by the Center. The loss of license for a third or subsequent offense shall be consecutive to any revocation of license imposed for a conviction for DWI arising out of the same arrest.
  - d. **The fines to be imposed are even greater if the offense took place on any property used by an elementary or secondary school or within 1,000 feet of such property.** In such cases, and under certain circumstances, the punishment can result in a suspension of driving privileges for a period of 20 years. It is not relevant that there was no knowledge that the offense was committed while on or within 1,000 feet of the described school property.
3. **DRIVING ON A SUSPENDED LICENSE** – Driving with a suspended license because of a DWI conviction carries up to two years additional suspension, a fine of \$500 and a possible 90-day jail sentence. Involvement in an injury-causing accident carries a mandatory 45-day jail sentence.
4. **OPEN CONTAINER LAW** – Having an open or unsealed container of an alcoholic beverage in a car carries a \$200 fine for first offense and a \$250 fine or 10-day community service obligation for the second offense.
5. **UNDERAGE POSSESSION/CONSUMPTION OF ALCOHOLIC BEVERAGES** – The minimum age for possession or consumption of alcoholic beverages in New Jersey is 21.
6. **POSSESSION/CONSUMPTION** – Any person under the age of 21 who knowingly possesses or consumes alcoholic beverages in a public place or a vehicle is guilty of a disorderly persons offense that carries a fine of not less than \$100.
7. **PURCHASE** (N.J.S.A. 33:1-81)– Any person under the age of 21 who knowingly purchases or attempts to



purchase alcohol, or who misstates his or her age, or a person of legal age who purchases alcohol for an underage person faces a disorderly persons offense that carries a fine of not less than \$500 and a license suspension of 6-12 months.

8. **SERVICE TO UNDERAGE** – Any person who knowingly offers, serves or makes available alcohol to an underage person, or entices the underage person to consume alcohol is committing a disorderly persons offense and faces a fine up to \$1,000.
9. **TRANSFER OF I.D.** – Any person who is underage and uses another person's ID to obtain alcohol or a person who is of legal age and gives his or her ID to an underage person to obtain alcohol, faces a fine of up to \$300 or a 60-day jail sentence.
10. **MANUFACTURING FALSE I.D.** – Any person who sells or offers to sell a document that simulates a state driver's license or other governmental document that could be used to verify a person's age is guilty of a disorderly persons offense and faces a fine of up to \$1,000.
11. **HOST/HOSTESS LIABILITY (N.J.S.A. 2A: 15-5.6)** – Under a 1984 New Jersey Supreme Court decision, Kelly vs. Gwinnell, a host or hostess who serves alcoholic beverages to a guest, knowing that the guest is intoxicated and will soon be driving, can be held liable for injuries inflicted on a third party if that guest is involved in a motor vehicle accident.

**The underage person who is receiving medical assistance is also immune from prosecution. This immunity applies on public and private property. Health Risks of Substance Use/Abuse.**

All students and employees should be aware that the use of tobacco, alcohol, and/or other drugs can have negative health implications and can often result in chronic physical ailments and chemical dependency, as well as permanent injury or death.

**1. ALCOHOLIC BEVERAGES**

Whether in the form of beer, wine or liquor, alcohol is a mind-altering chemical that has effects similar to barbiturates and narcotics. Alcohol acts as a depressant to the central nervous system. Even though small amounts of alcohol can produce mild relaxation and a feeling of well being, alcohol affects each individual in different ways. Alcohol can cause intoxication, sedation, unconsciousness, or death. Hangovers are probably the best-known sign of too much alcohol in the body. They are caused by the body's reaction to the toxic, or poisonous, effects of alcohol. Often those effects can occur at very low levels of drinking. **Here are some facts regarding alcohol poisoning, blood alcohol levels, and binge drinking:**

**a. Signs of Alcohol Poisoning:**

- Staggering
- Slurred speech
- Vomiting
- Incoherent, unresponsive and/or unconscious speech
- Numbness (does not react when pinched)
- Skin becomes pale, blue, cold, and or clammy
- Breathing becomes irregular, slow or shallow

Steps to Take

- 1) Check for attentiveness (does person respond to her/his name; pinch skin)
- 2) Do not leave the person alone
- 3) Turn the person on her/his side to prevent airway blockage if she/he vomits. Place something behind the back so he/she does not roll back over.
- 4) Call for help; seek medical attention.

**b. Blood Alcohol Level (BAL)**

- (1) **0.02 to 0.03** results in slight euphoria and loss of shyness.
- (2) **0.04 to 0.05** results in lowered inhibitions, minor impairment in reasoning memory, and lowering of cautious behavior.
- (3) **0.06 to 0.09** begin to experience the depressant effects of alcohol; increased impairment of balance, speech, vision, reactions and hearing; reduced judgment and self-control.

**LIFELINE LEGISLATION (P.L. 2009, C.133)**

**Purchasing, possessing or consuming alcohol is illegal for those under the Minimum Legal Drinking Age of 21. This legislation provides immunity from prosecution when the steps below are followed.**

**If a young person is suspected of alcohol poisoning and their friend(s) want to help them, they must:**

1. **Call for Help:** One of the underage persons call 9-1-1 and reports that another underage person was in need of medical assistance due to alcohol consumption. The underage person is the first person to make the 9-1-1 report;
2. **Stay with your Friend:** The underage person (and, if applicable, one or two others acting in concert with the underage person who made the 9-1-1 call) remains on the scene with the underage person in need of medical assistance; AND
3. **Talk with Authorities:** The underage person who called 9-1-1 (and, if applicable, one or two others who were acting in concert with the caller) provide each of their names to the 9-1-1 operator and cooperates with medical assistance and law enforcement personnel on the scene.

- (4) **0.10 to 0.15** results in significant impairment in motor control, vision and reasoning. Most states consider a person legally intoxicated when they have a BAL of 0.10.
- (5) **0.16 to 0.24** anxiety and restlessness dominate, impairment increases, very poor decision making.
- (6) **.25** and above need assistance walking, double vision and legal blindness, complete mental confusion and loss of consciousness is likely. Medical attention should be sought.
- (7) The first consistent mood or behavioral changes occur when the blood alcohol level (BAL) reaches .05. This level is reached by a 150 lb. person taking two drinks in an hour. The person might feel relaxed and have a sense of well-being. However, the alcohol has already begun to affect their reflexes, vision, coordination, ability to concentrate, judgment, and restraint. This interferes with their ability to operate a car or other machinery safely.
- (8) At a BAL of .10 - .20, the alcohol further impairs a person's motor functions. Walking and hand and arm coordination are clearly affected. The person is likely to be clumsy. Reaction times decrease greatly; that is, the person does not respond to stimuli as quickly. The drug seriously hampers reasoning and judgment. Most states consider a person legally intoxicated when they have a BAL of .10.
- (9) At a BAL of .30 - .40, alcohol further affects the centers of the brain, which control response to stimuli and understanding. The person is probably in a stupor. Though possibly aware, they will not understand what they hear or see.
- (10) A BAL above .30 is very dangerous. Alcohol blocks the brain's ability to control breathing and heart beat. This can result in unconsciousness and possible death. A person with a BAL of .30 should receive immediate medical care.

### c. Heavy Drinking and Its Social Effects

Heavy episodic or "high risk" drinking was first brought to national attention in 1993 by the **Harvard School of Public Health University Alcohol Study**, and has become the focus of extensive media coverage. Defined as five (5) drinks in one drinking session for men (four drinks for women), one or more times in a two week period, binge, or high risk, drinking is referred to by the Harvard researchers as the most serious health hazard confronting American Universities and universities. This behavior not only affects the drinkers themselves, who are more likely to miss classes and fall behind in school, but also their fellow students, who are assaulted or otherwise harmed by them.

- (1) **The Harvard School of Public Health University Alcohol Study (CAS) study** is an on-

going survey of over 14,000 students at 120 four-year Universities in 40 states. Random samples have been collected at the same Universities four times: in 1993, 1997, 1999 and 2001. The schools and students selected for the study provide a nationally representative sample. Data from the 1999 CAS found that 44% of students in its sample met the criteria for binge drinkers, and 25% were frequent binge drinkers (those who binged 3 or more times in a 2-week period).

- (2) **Drinkers report** more problems such as academic difficulties, driving after drinking, injuries, violence, memory lapses, and unplanned sexual activity.
- (3) **Second-hand effects** – the harms experienced by the non-bingers have also continued at the same rate (approx. 78% of the non-binging students surveyed). These include interruptions of sleep, damaged property, injuries, sexual offenses, and deaths attributed to drunken driving and alcohol poisoning induced by fraternity hazing or other rituals.)
- (4) **Another casualty of drinking "to get drunk"** is the sense of civility. This lack of civility affects University classrooms, residence halls, sporting venues, the neighborhoods where students live with other members of the community, and the other areas where students and other community members meet and interact.

### d. Other Physical Effects

Each year, alcohol is involved in more than half of the auto accidents in the U.S. Even a BAL of 0.03 can impair a person's ability to drive or operate machinery safely. Any amount of alcohol consumed while pregnant may cause severe damage to the developing fetus. Heavy, prolonged or excessive drinking can lead to malnutrition, cancer, psychological problems, miscarriages and infertility in women, impotency and sterility in men.

- **Liver** – 95% of all alcohol is metabolized by the liver. Because clearing alcohol out of the body is a "priority," the other functions of the liver, such as regulating blood glucose levels, is slowed.
- **Stomach** – Alcohol causes a surge in the flow of digestive acids that can irritate the stomach lining. Nausea and vomiting frequently occur, while regular heavy drinking causes ulcers and chronic stomach problems.
- **Heart** – Alcohol makes the heart work harder and less efficiently. Long-term heavy drinking is associated with heart muscle disease, irregular heartbeats and an increased risk of coronary artery disease.

## 2. DRUGS AND NARCOTICS



Drugs have saved our lives, reduced pain, and improved the quality of our lives. However, use of drugs classified as controlled substances have health risks, as well as legal/criminal implications. PSYCHOACTIVE DRUGS act on the central nervous system (the brain). Here is a listing of the most common:

- a. **Marijuana** is a drug taken to produce a euphoric feeling and a state of relaxation. The short-term effects of marijuana include distortion of time perception, increased heart rates, dilation of the blood vessels, and loss of short-term memory. Visual perception and psychomotor skills are also decreased which have adverse effects on driving ability. The effects of long-term use include loss of motivation, chronic bronchitis, decreased lung capacity, and an increased risk of lung cancer. In men, marijuana use has caused lower levels of the sex hormone testosterone, and an increase in abnormal sperm.
- b. **Synthetic Marijuana (Spice/K2)** refers to a wide variety of herbal mixtures that produce experiences similar to marijuana (cannabis) and that are marketed as “safe,” legal alternatives to that drug. They are sold under many names including K2, fake weed, Yucatan Fire, Skunk, Moon Rocks, Kush, herbal incense, potpourri and sold in neon-hued packets with names like “Mr. Happy,” “Phantom Wicked Dreams,” and “Lava.” These are often labeled “not for human consumption.” These products contain dried, shredded plant material and chemical additives that are responsible for their psychoactive (mind-altering) effects. Spice users report experiences similar to those produced by marijuana: elevated mood, relaxation and altered perception. In some cases the effects are even stronger than those of marijuana. Some users report psychotic effects like extreme anxiety, paranoia and hallucinations. Poison control Centers report symptoms that include rapid heart rate, vomiting, agitation, confusion and hallucinations. Spice can also raise blood pressure and cause reduced blood supply to the heart (myocardial ischemia), and in a few cases it has been associated with heart attacks. Regular users may experience withdrawal and addiction symptoms.
- c. **Methamphetamine (“Crystal Meth”)** also known as batu, blade, chalk, crank, crystal, cristy, glass, hanyak, hiropon, hot ice, L.A. glass, L.A. ice, meth, quartz, shabu, shards, speed, stove top, super ice, Tina, uppers, ventana and vidrio. Methamphetamine is a powerfully addictive stimulant that dramatically affects the brain and the rest of the central nervous system. Easily made with relatively low-cost materials, meth is an odorless, bitter-tasting, white crystalline powder that dissolves in water or alcohol. The active ingredient is either ephedrine or

pseudoephedrine. Both are found in over-the-counter cold medicines.

- Meth “cookers” use products such as drain cleaner, lithium batteries, and engine-starter fluid to make a powder that can be smoked, snorted, injected or added to a beverage. Methamphetamine has a high potential for abuse and may lead to psychological or physical dependence. Its accepted medical uses are severely restricted.
  - According to the World Health Organization, methamphetamine is second only to marijuana as the most widely abused illicit drug in the world, and it is the most prevalent synthetic drug manufactured in the United States. “Meth” is a highly addictive stimulant that can be smoked, snorted, injected, or taken orally. Users, particularly during the withdrawal, or “tweaking” phase, may experience drug craving, irritability, depression, fearfulness, difficulty sleeping, shaking, nausea, sweating, and psychosis. Manufacture of methamphetamine exposes humans, animals and the environment to toxic and explosive chemicals. Because the manufacture and use of meth may result in adults neglecting children in their care, the drug is increasingly a factor in many child protective services cases.
- d. **Bath Salts (drug)** is a term used to describe a number of designer drugs often containing substituted cathinones, which have effects similar to amphetamine and cocaine. The name derives from instances in which the drugs were being sold under the guise of being bath salts. *Health Issues:* Users of bath salts have reported experiencing symptoms including headache, heart palpitations, nausea, and cold fingers. Hallucinations, paranoia, and panic attacks have also been reported, and news media have reported associations with violent behavior, heart attack, kidney failure, liver failure, suicide and increased tolerance for pain, dehydration and breakdown of skeletal muscle tissue. Visual symptoms similar to those of stimulant overdoses include dilated pupils, involuntary muscle movement, rapid heartbeat and high blood pressure.
  - e. **Cocaine** is a powerful stimulant that is short lasting. The drug’s immediate effect is to create a feeling that is often described as orgasmic or euphoric. It creates increased alertness, suppresses appetite, and temporarily relieves depression. Studies indicate cocaine’s effects on the body and psyche are dangerous and some damage may be irreversible. The least harmful effects are nosebleeds and nasal erosions that result from irritation of the lining of the

nose. Most dangerous are the “coke blues” which are the intense downs that occur often after a high and result in the user trying other drugs to relieve the physical and emotional discomfort. There is a strong psychological dependence to ‘coke’ which slowly accumulates as tolerance builds. Long-term use of cocaine can cause paranoia, sexual dysfunction, and deep depression. **Smoking cocaine (crack) is extremely addictive and may damage the lungs.**

- f. **Ecstasy or MDMA, also known as “Molly” (methylenedioxymethamphetamine)** is a stimulant that combines the properties of methamphetamine or “speed” with mind-altering or hallucinogenic properties. Because of many different recipes used to manufacture Ecstasy, deaths have been caused by substances created during production. Users are at particular risk of heat exhaustion and dehydration with physical exertion. Long-term use has been shown to cause brain damage.
- g. **Special K (ketamine hydrochloride)** is primarily used in veterinary medicine. Users experience hallucinations and can experience a loss of time and identity. Ketamine can cause delirium, amnesia, impaired motor function, high blood pressure, depression, recurrent flashbacks and potentially fatal respiratory problems.
- h. **LSD** is a potent hallucinogen derived from a fungus that grows on rye and other grains, and the effects of LSD are unpredictable. A “bad trip” can be terrifying, including frightening thoughts and feelings, fear of losing control, fear of insanity, and death. Chronic users may experience flashbacks and visual hallucinations long after use of the drug has stopped.
- i. **Rohypnol (“Roofie”)** is a strong sedative (flunitrazepam), referred to as a “date rape” drug because it causes extreme drowsiness and can cause deep sedation and amnesia. This drug is particularly dangerous, especially when combined with alcohol or other drugs, because of its sedative effects. It may have a paradoxical effect and cause aggression in some users.
- j. **GHB (gamma hydroxybutyrate)** is also referred to as a “date rape” drug. It is a central nervous system depressant that produces intoxication, followed by deep sedation. GHB can cause nausea, vomiting, delusions, depression, seizures, loss of consciousness, and coma. When combined with alcohol or other drugs, the potential for deadly overdose increases dramatically.
- k. **Stimulants** – Caffeine is the most widely used stimulant and can be found in coffee, tea, soda, and

cold medications. Amphetamines are known as “speed” and “uppers.” Stimulants increase awareness, keep people awake, and depress the appetite. Short-term effects include elevated blood pressure, nervousness, and hyperactivity. Long-term effects include insomnia, malnutrition, and acute psychosis.

- l. **Tobacco** contains nicotine, another central nervous system stimulant. In 1989, the U.S. Surgeon General issued a report that nicotine is the drug in tobacco that causes addiction. Nicotine is both a stimulant and a sedative to the central nervous system. In addition to nicotine, cigarette smoke is primarily composed of a dozen gases (mainly carbon monoxide) and tar. Use of tobacco can cause heart disease, lung cancer, emphysema, and other diseases. Use of tobacco by pregnant women is linked to higher incidence of stillborn and premature infants and low birth weights in infants. Some studies indicate that the children of women who smoke while pregnant have increased risk for developing conduct disorders. The Environmental Protection Agency has concluded that second-hand smoke causes lung cancer in adults and greatly increases the risk of respiratory illnesses in children and sudden infant death.
  - **Hookah**, also known as a waterpipe, is a single- or multi-stemmed instrument for vaporizing and smoking flavored tobacco in which the vapor or smoke is passed through a glass water basin before inhalation. Heavy and long-term use still has the potential to lead to diseases generally induced by tobacco, notably chronic obstructive pulmonary disease.
  - **Chewing Tobacco** is a type of smokeless tobacco product consumed by placing a portion of tobacco between the cheek and gum or upper lip teeth and chewing, releasing flavor and nicotine. Oral and spit tobacco increases the risk for leukoplakia, a precursor to oral cancer. Chewing tobacco has been known to cause cancer, particularly of the mouth and throat.
- m. **Depressants** – Downers and depressants include Quaaludes, barbiturates, and tranquilizers. These drugs reduce anxiety, induce sleep, and promote relaxation. Used together, they can be extremely dangerous and can suppress the central nervous system enough to cause death. Downers cause slowed response time, loss of rational judgment, decreased coordination, and loss of motor skills. Driving skills are seriously affected. Tolerance and physical dependence often develop. Rohypnol (“roofie”) has potent sedative/hypnotic effects. It

causes substantial memory loss and it has been used by sexual predators to sedate victims.

- n. **Hallucinogens** include LSD, mescaline, and PCP. They promote dream-like perceptions and panic reactions that produce horrifying perceptions. PCP is particularly dangerous and can cause a person to become violent to herself/himself and others. Ecstasy (MDMA) is a drug that became popular in the 1980's. It has been billed as the "perfect drug" enhancing thinking, coordination, and empathy. The bad news about Ecstasy is that it causes brain damage.
- o. **Narcotic Analgesics** – These drugs include opium, morphine, heroin, and codeine. They relieve pain without the loss of consciousness. Narcotics can cause physical dependence to develop over a short period of time. Too much of a narcotic can cause the body to stop breathing. Intravenous drug use is associated with increased risk of AIDS and hepatitis.
- p. **Inhalants** – The immediate negative effects of inhalants include nausea, sneezing, coughing, nosebleeds, fatigue, lack of coordination and loss of appetite. Solvents and aerosol sprays also decrease heart rate and respiration, and impair judgment. Long-term use can result in permanent damage to the nervous system. High concentration of inhalants can cause disorientation, violent behavior, unconsciousness, or death.
- q. **Steroids** are drugs that resemble the male sex hormone testosterone. Popular since the 1950's, steroids have been used by athletes and body builders to increase muscle mass and improve athletic performance. The use of steroids poses certain health risks. Taken in high doses, they can cause psychological dependence, increased anger, aggression, and depression, and will stunt growth in adolescents who have not attained full height. Men may experience nipple and breast growth, shrunken testicles and baldness. All users are at risk for hepatitis, liver cancer, an altered sex drive and AIDS.
- r. **Opioids and Morphine Derivatives** are usually injected, snorted, or swallowed. Intoxicating effects include pain relief, euphoria and drowsiness. Potential health consequences include nausea, constipation, confusion, sedation, respiratory depression and arrest, tolerance, addiction, unconsciousness, coma and death. Common examples of these drugs are:
- **Codeine** – Commercial and street names include Emprin with Codeine, Florinal with Codeine, Robitussin A-C, Tylenol with Codeine, Captain Cody, Cody, Doors & Fours, Loads, Pancakes and Syrup.
  - **Fentanyl and Fentanyl Analogs** – Commercial and street names include Actiq, Duragesic, Sublimaze, Apache, China Girl, China White, Dance Fever, Friend, Goodfella, Jackpot, Murder 8, TNT, Tango and Cash.
  - **Heroin** – Commercial and street names include Diacetylmorphine, Brown Sugar, Dope, H, Horse, Junk, Skag, Skunk, Smack, and White Horse.
  - **Morphine** – Commercial and street names include Roxanol, Duramorph, M, Miss Emma, Monkey and White Stuff.
  - **Opium** – Commercial and street names include Laudanum, Paregoric, Big O, Black Stuff, Block, Gum and Hop.
  - **Oxycodone HCL** – Commercial and street names include Oxycontin, Oxy, O.C., and Killer.
  - **Hydrocodone Bitartrate, Acetaminophen** – Commercial and street names include Vicodin, Vike, Watson 387.