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CHOICES

A publication of ABCDE
 Alliance of Barrington Communities for
 Drug Education

SPRING 1988



ALLIANCE of
 BARRINGTON COMMUNITIES
 For DRUG EDUCATION



SUMMER WORKSHOP JUNE 27-30

WATCH JUST SAY NO PARADE
 MAY 13 - 1:30 PM
 Downtown Barrington
 Support Our 4 - 6th Grade Kids

Summer Workshop
 June 27 - 30 at BMS

Helping Our Children Cope:
 our community's response
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LETTERS TO THE EDITOR

ALLIANCE of
BARRINGTON COMMUNITIES
For DRUG EDUCATION



ABCDE is a community effort to reduce school-age alcohol-drug abuse. Through its newsletter, CHOICES, ABCDE promotes education and awareness to achieve that goal.

...In the Dec. '87-Jan.'88 issue of "Here's How," the bi-monthly newsletter published by the Chicago Area Service of AA, the article "Don't Trust Those 'No-Booze' Wines" "There's enough alcohol in the popular new 'non-alcoholic' beers and wines to kick a recovering alcoholic off the wagon...By law, these drinks can have up to one-half of one percent alcohol...they also pose a lethal threat to alcoholics taking the drug Antabuse to make alcohol unpalatable."

...Since moving to the Barrington area last summer, I have followed with great interest and admiration the work of ABCDE. The scope and sophistication of your community project for prevention is truly outstanding, and should serve as a model for communities throughout the country. I have been equally impressed by the Barrington Parent Networking movement, whose impact should be extensive in so many areas of family health and child development.

I hope to be increasingly involved...and I hope that mechanisms can be found to facilitate the involvement of many fathers in this critically important work.-Lawrence Kerns, M.D.

I'm a 14 year old girl that attends Barrington High. I read the letter titled "Peer Pressure" by ELW (CHOICES, winter 1987) and I highly agree. I believe that peer pressure is a term that parents use as an excuse of why their children do drugs. I can safely say that the only peer pressure I feel is generated purely from within myself. My grades, friends, and social standings mean nothing to others. But, I put great pressure and stress upon myself to achieve my goals. When I'm at a party and don't want to drink, smoke, etc. I simply decline and that's the end of it. If I wanted drugs I know where to go to find them, but the pressure just isn't there. I'm not sure what can be done about these problems, but if adults would just give up these "peer pressure" cliches and get down to the real problem maybe someone could help. I know I would like to go into the restrooms during school without half way choking on the cigarette smoke, etc. Though this would be nice, I seriously doubt it will happen in the near future.

HSB



...I recently read that some parents say they want to teach their children to be responsible drinkers. But, I ask, how can you teach young people to break the law RESPONSIBLY? It seems a parent can SHOW his or her child how a responsible adult uses alcohol, or if the parent doesn't drink, talk about it. In my opinion, a parent can give only one message—it is

...I'm seeing changes in attitudes and values in Barrington that I didn't think were possible 5 years ago. Parents are now questioning their own drinking and the impact it has on children. I've seen parents curtail their drinking because they realize the example they set is much more important than the words they use to caution their children about drinking. I also applaud the family that decided not to serve alcohol at a party attended by parents and their high school children. These are small victories, but the fact that parents are re-examining their roles as models for their children is heartening.--PB

...As a primary care physician, I am concerned about being informed by patients in regard to their possible chemical dependency. It is imperative that patients, or their families, inform physicians about any past, or current, history of chemical abuse-dependency. Such knowledge would influence our treatment of any patient with a dependency history. This information would enable us to make more accurate decisions in regard to possible drug interactions when prescribing medication as well as making an appropriate referral when continuing treatment or counseling are indicated. Any information that can help us better take care of our patients' needs is certainly appreciated.--Bruce M. Bell, M.D.



illegal and unhealthy for underage kids to drink!--LS

...It was great to see an article about grandparents (Grandparent Power, CHOICES Fall 1987). I am pleased that others agree that grandparents, natural or adopted, are VERY IMPORTANT PEOPLE.--DS

What do you think?

YOUR COMMENTS PLEASE...Write CHOICES, PO Box 768, Barrington, IL 60011
Include your name and address; only initials will be printed. We reserve the right to edit for space and clarity.

No quick fix

In cold weather, when a car has some water in its fuel, the sputtering and temporary loss of power lasts until the driver uses up half the tank and can refill it with premium gas and a couple bottles of "Heat." If only the problems of adolescent drug use and abuse could be solved simply by replacing alcohol and other drugs with juice, cola, and water.

Today, the average age when kids begin to experiment is 11-13. Kids expect that experimentation and use of alcohol and other drugs will be part of their teen years. They know where and how to obtain alcohol, pot, and cocaine. They probably know that drug use is dangerous and risky. Like adults, kids know that alcohol and other drugs can change your mood and at first make you feel good. They disregard the facts that they are depriving themselves of opportunities to develop social skills and are taking risks which could lead to chemical dependency, as well as school, legal, or health problems. It is the nature of youth to often think that "nothing bad will happen to me." In addition, parents may worry, but deny, that anything could happen to their kids.

How does a community tackle such an enormous problem which can affect any kid and any family? No perfect plan is available; each community must develop its own. But it is essential that the whole community--parents, kids, professionals, agencies, organizations--share in the responsibility. Big words like EDUCATION, AWARENESS, INTERVENTION, PARENTING, CONFRONTATION, LAW ENFORCEMENT, CONSISTENCY, CONSEQUENCE, NETWORKING, SUPPORT, and BALANCE must become action words in a community's response. Together, slowly and persistently, with all segments doing whatever they can,

a clear message can emerge. The message will inform the community that it is both illegal and unhealthy for kids to drink and use drugs.

How are WE doing in Barrington? Okay! We admit that we still don't have all the answers nor do we have the perfect programs or statistics to say alcohol-drug use is way down. But, there are definite indications that we are headed in the right direction.

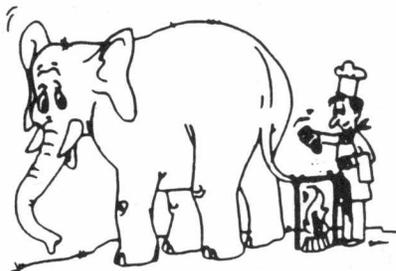
The best indication that something good is happening is that we are TALKING about the problems of youthful use of alcohol and other drugs. This public awareness about the disease of chemical dependency and the social behaviors of kids gives much needed support to school and police intervention programs. Many parents of elementary and middle school children now recognize unique benefits of communication and appreciate support from adult peers. More students now promote non-alcohol activities, take part in peer counseling, leadership and volunteer programs. Students who do not drink feel more support for their decision. Adults are more concerned about role modeling. Mental health professionals are networking to become familiar with each other's expertise. More students who need treatment are identified and referred for help. Support groups and professional help are accessible for treatment and aftercare.

So, where do we go from here? RIGHT ON with more of the same! Adults and kids--finding ways to work together; school, home, community--finding ways to work together. And, we can continue to take pride in each and every accomplishment.

What is your response?

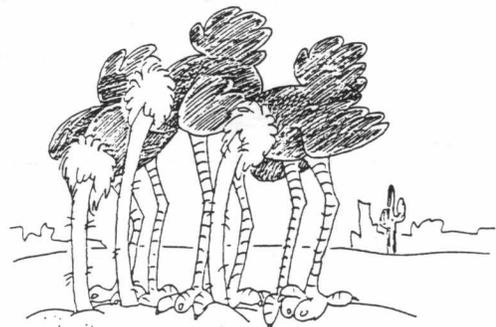
COMPARE the problem of adolescent use-abuse of alcohol and other drugs to an elephant which is preventing school kids from learning educational and social skills.

DO you HELP with the task of eating the elephant,



DO you ignore it and HIDE your head in the sand?

OR



Summer workshop: June 27-30, 1988

HELPING OUR CHILDREN COPE: Our Community's Response

This is an advertisement. ABCDE is seeking 80 persons who live or work with children in School District 220--parents, school personnel, coaches, youth leaders, church workers, police and firemen, health professionals--to take this workshop and join the more than 300 community people who have already participated in a similar one. We want YOU to join THEM, to share in the programs and responsibilities of prevention and intervention of alcohol-drug use by school-age youth.

Like the past 3 Summer Workshops, this one will be conducted by the professional staff of Community Intervention, Inc. ABCDE committee members worked with Jim Crowley and his staff to design a workshop to fit the needs of Barrington now. Through lectures, films, and activities, information will be provided about: use, abuse, chemical dependency (CD); the impact of CD on family; the impact of CD on adolescent development; children of alcoholics; early intervention; professional and personal enabling; feelings and defenses; treatment, recovery, aftercare; and the definition and activities of prevention. In a small group laboratory, each participant will experience the group process. A panel will describe what has happened here due to the task force efforts of ABCDE and how to further implement the work already started.

Full scholarships to School District 220 residents, school, and volunteer personnel are provided by ABCDE funds raised from contributions.

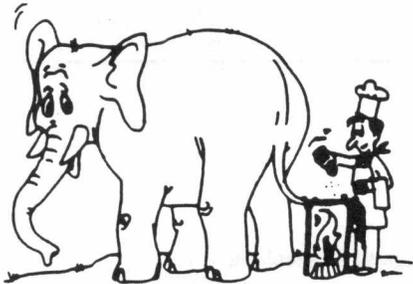
Four days is a large commitment of time; however, the



Jim Crowley and staff talk with Suzy Palmer about the ABCDE Summer Workshop

benefits both personally and in the home, workplace, or volunteer situation are worth it. Past participants state that the insights gained were helpful in many different areas of family life. Also, the support from others in the community who work and care about our kids strengthens the commitment to deal with problems and find solutions.

ABCDE board members believe that the training provides participants with understanding, motivation, and confidence to find their roles in the place where they serve in attacking the problem of alcohol and other drug use by our young people.



YOU CAN'T EAT AN ELEPHANT IN ONE BITE but you can take a bite! Help ABCDE fight drug use and abuse by school-age kids. If you live, work, volunteer with Dist. 220 kids, TAKE THIS WORKSHOP!

HELPING OUR CHILDREN COPE; our community's response

JUNE 27-30, 1988

BARRINGTON MIDDLE SCHOOL

Mon. 7:45 a.m.-8:30 p.m.

Tue./Wed. 8 a.m.-9 p.m.

Thur. 8 a.m.-9 p.m.

Lunch & Snacks provided

Applications at schools and churches, or send coupon to CHOICES, P.O. Box 768, Barrington, IL. 60011. NOT ELIGIBLE IF YOU HAVE PARTICIPATED IN A COMMUNITY INTERVENTION WORKSHOP. Participants must attend all sessions of workshop.

NAME _____

Last

M.I.

First

ADDRESS _____

WORK PHONE _____ HOME PHONE _____

I am involved with children as a parent ___ church leader ___ scout/campfire/4 H leader ___ volunteer coach ___ teacher ___ police/fire ___ OTHER _____
In School(s), Neighborhood, Church, Agency _____

How do you know?

Suppose that you are fairly certain a young person you know is using alcohol or another drug. How do you know if there is serious involvement? Drug use itself may be a sign of another problem. Parents, teachers, youth leaders, coaches, everyone can help the youth if they take note of some general signs of negative change that say, "something is wrong."



- Does a cooperative attitude become argumentative, maybe verbally abusive?
- Is there a defensiveness about behavior, attitudes, opinions, mistakes, friends, or when questioned about possible drug use?
- Do mood swings occur?
- Is there a new or increased unwillingness to assume responsibilities around the house?
- Do more problems with discipline and following home and school rules arise?
- Is there a new group of friends who are very different from the former group?
- Do you notice less concern about appearance? Apparel?
- Is there a secretiveness about plans?
- Do you see problems concerning money? Is money missing OR is there possession of more than a normal amount?
- Are health problems increased? Decreased energy?
- Is there a change in attitude about school or performance of school work? Team or group interest?
- Do you notice "hanging out" in unusual places?
- Is there a "coming and going" from school campus, during dances, parties, games?
- Are there problems on or with the job?
- Has there been trouble with the police? For possession, selling, driving under the influence?

What to do now? Role modeling

In the pamphlet, "Adolescent Drug and Alcohol Use, Signs and Symptoms," the staff at Community Intervention gives some basic actions for a parent, teacher, or concerned adult to consider when there is suspicion a young person may be involved with alcohol or another drug. Since the concerned adult does not need to diagnose chemical dependency or reach any conclusions, action may take place on the basis of concern, not solely on the basis of being positively certain. An adult may **SHARE** a concern with the person, **INVESTIGATE** if there is a suspicion, and **CONFRONT** if there is clearly a problem.

Let the young person know what you perceive to be the problem; be sure to focus on the specific behavior and information that concerns you. If it is clear that the behavior is unacceptable, outline exactly what is expected and what the consequences will be if unacceptable behavior is repeated. Avoid focusing on the reasons for the behavior; this allows less room for excuses. Avoid making hasty conclusions--you are expressing a concern based on your interest and caring about the person.

If there is suspicion that your child is using alcohol or other drugs, exercise your parental right to check it out. First check by asking the child; avoid accusing, condemning, or jumping to conclusions. If you are sure and have evidence, confront the child. **BUT** save the confrontation until the child is not under the influence of alcohol or other drugs, and when you are not angry. If necessary, check with others who know the child for information to get a better picture of the child's involvement. Seek professional help if needed.

Studies of families in which **DRINKING PROBLEMS ARE RARE** show some of these characteristics:

- parents who drink present a consistent responsible example of moderation, without lecturing or preaching
- standards for using or not using alcohol are well established and understood (and agreed upon) by all in the family
- excessive drinking is not acceptable to the family
- overindulgence or drunkenness is not looked upon as comical, even though family members recognize that people do some bizarre, funny things when drinking
- drinking is considered by parents to be morally neutral; it is neither virtuous nor evil
- drinking is not viewed as an escape, a proof of adult status or as representing "macho" or "cool"
- drinking is not the primary activity but is a part of other activities
- no pressure is placed on a family member or guest to drink
- no social significance is attached to a person's choosing not to drink
- in non-drinking families, negative references are not made about others who choose to drink

(Seen in Chemical People Newsletter, Sept. 1985 from FOR PARENTS, Eden, N.Y.)



Irrational, but real

Children and adolescents can develop some irrational beliefs which parents and other adults "know" are unfounded or untrue. But to those young people they are "true." Adults can help by doing a good job of listening, by reinforcing and promoting the positive in young persons, and helping them to explore new skills and interests. Some of those irrational beliefs are:

ADOLESCENTS

- It would be awful if my peers didn't like me, or to be a social loser.
- I shouldn't make mistakes, especially social ones.
- It's my school's (parents') fault that I'm so miserable.



- I can't help it, that's the way I am and I'll always be this way!
- The world should be fair and just.
- It's awful when things don't go my way.
- It's better to avoid challenge than risk failure.
- I must conform to my peers.
- I can't stand to be criticized.



- Others should be responsible.

CHILDREN

- It's awful if others don't like me.
 - I'm bad if I make a mistake.
 - Everything should go my way (I should
- 6 CHOICES

always get what I want).

- Things should come easy to me.
- The world should be fair and bad people should be punished.
- I shouldn't show my feelings.
- Adults should be perfect.
- There's only one right answer.
- I must win and can't stand it if I lose.
- I shouldn't have to wait for anything.

Children of alcoholics

When there is alcoholism or other drug addiction in a home, the children are often disappointed, neglected, or abused by the people they love and need most. They also have unexpressed feelings which may show up in some of these behaviors:

- Morning tardiness (especially Mon. a.m.)
- Consistent concern with getting home after school or activity
- Unwashed or has ill-smelling odor
- Not dressed properly according to weather
- Regression--thumbsucking, infantile behavior with peers, etc.
- Scrupulous avoidance of arguments and conflict
- Friendlessness and isolation
- Poor attendance
- Frequent illness--at school, frequent visits to nurse, especially with stomach complaints
- Fatigue, listlessness
- Hyperactivity, inability to concentrate
- Sudden temper or other emotional outbursts
- Exaggerated concern with achievement and satisfying authority in children who are already at the head of the class, team, group
- Extreme fear about situations involving contact with parents

Sometimes, during an alcohol-drug education discussion:

- Doesn't think that any drinking is o.k.; equates drinking with getting drunk
- Inordinate attention to alcohol situations in which it is of marginal importance
- Normally passive child becomes active, or distracting child becomes focused
- Change in attendance pattern or frequent requests to leave the room
- Lingering after activity to ask innocent question
- Mentions a parent's occasional drinking to excess or the drinking problem of friend's parent, uncle, or aunt
- Strong negative feelings about alcoholics
- Evident concern with whether alcoholism can be inherited

Adults need to be supportive and contribute to these children's personal skill building and self-esteem, which are not easily developed otherwise.

(From a presentation by Mary Lou Jensen, Consultant for Community Intervention, Inc.)

How Can I Help My Children?

Asks An
Al-Anon Member

Al-Anon
Family
Groups



If someone close has too much

If your spouse drinks too much (or uses drugs), help yourself AND the children in your family by attending Al-Anon, a self-help support group for families, relatives and friends whose lives have been affected by someone else's use of chemicals.

In an Al-Anon group everyone is accepted; trust and confidentiality are part of the atmosphere of respect for others. Here is an opportunity to learn how to cope, to receive comfort, strength, understanding, and friendship. Not only are the rewards for you, but for your children, whose lives are affected also. If there are teens in your family, urge them to attend Alateen.

Al-Anon groups meet every day and night. CALL 358-0338 TODAY.

RESOURCES

Black, Claudia, *It Will Never Happen to Me, ACT, MAC Printing & Publications, Denver, Co., 1981*
 Black, Claudia, *My Dad Loves Me, My Dad Has A Disease: A Workbook for Children of Alcoholics, ACT, Newport Beach, CA, 1979*
 Deutsch, Carles, *Broken Bottles, Broken Dreams, Teachers College Press, N.Y., 1982*
 What's "Drunk" Mama?, Al-Anon Family Grp. Hdq, NY, 1975
 "Soft is the Heart of a Child," 28 min. film, Operation Cork
 "Lots of Kids Like Us," 28 min. film, G. T. Rogers
 For a more complete list of resources on children of alcoholics, write RESOURCES, CHOICES, P.O. Box 768, Barrington, IL 60011

Family problems and classroom hassles

Claudia Black, M.S.W., Ph.D.

Teachers, coaches, scout leaders, and others who work with children may find help in the following suggestions for dealing with some of the typical behaviors of children from alcoholic families.

“THE PERFECT CHILD” is...

always volunteering, very responsible and manifests a drive, almost a compulsion, to be on top. These children have an insatiable need for attention and approval and are often class leaders who are parental or bossy in their relationships with other children. They tend to be very disappointed when losing, superior or snobbish when winning, and are frequently labeled “teacher’s pet” by other students.

Recommended adult behaviors:

- Give attention at times when the child is not achieving.
- Validate the child’s intrinsic worth, and try to separate his or her feelings of self-worth from achievements.
- Let the child know it’s okay to make a mistake.

Adult behaviors to avoid:

- Letting the child monopolize conversations or always be the first to answer a question or to volunteer.
- Letting the child validate his or self-worth by achieving.

“THE REBEL”...

tends to blame others, makes strong peer alliances, and is often disciplined by teachers or principals for breaking rules. The rebel tends to talk back, neglects work, and can be very frustrating to work with. The typical adult comments are “I don’t know what to do with that child,” or “I’ve tried everything!”

Recommended adult behaviors:

- Let the child know when behavior is inappropriate.
- Give the child strokes whenever he or she takes responsibility for something.
- Attempt to develop empathy for the child. This prevents adults from being angry or getting defensive.
- Set limits. Give clear explanations of the child’s responsibilities and clear choices and consequences.

Adult behaviors to avoid:

- Feeling sorry for the student.
- Treating the child as special and giving him more power.
- Agreeing with the child’s complaints about other students or other adults.
- Taking the child’s behavior personally or as a sign of one’s own incompetence as a teacher, counselor, etc.

“THE ADJUSTING CHILD”...

often gets lost in the shuffle. Teachers and other adults sometimes can’t remember the child’s name because he/she is so quiet and is seldom a behavior problem. They tend to have few, if any, friends and like to work alone in school, often in very creative or non-verbal ways. Other students either leave them alone or tend to tease them about never getting involved.

Recommended classroom behaviors:

- Every teacher (leader) should take an inventory. If there

are names that you consistently can’t remember, that may be a lonely, lost child.

- Try some contact on a one-to-one basis. Find out who they are!
- Point out and encourage the child’s strengths, talents, and creativity.
- Try to pick up on their personal interests and often they will begin to talk.
- Use touch slowly.
- Help the child build a relationship. There will usually be one child they will be drawn to in the class.
- Encourage working in small groups, two’s and three’s to build trust and confidence.

Some behaviors to avoid:

- Letting the child off the hook by allowing him-her to remain silent or never calling on the child.
- Letting other kids take care of the child by talking and answering for him.

“THE CLOWN”...

tends to be funny or distracting and gets attention frequently. The child likes to hide, make faces, pull the chair out from someone else, stick chalk in the erasers and otherwise act out.

Recommended teacher behaviors:

- It’s okay to get appropriately angry at the “class clown’s” behavior.
- Try to give the child a job in the class with some importance and responsibility.
- Hold him-her accountable.
- Encourage responsible behavior.
- Encourage appropriate sense of humor.
- Insist on eye contact.

Classroom behaviors to avoid:

- Don’t try to “laugh with” the class clown. He won’t understand it.
- Remember the class clown’s underlying fear.
- Remember the underlying depression this behavior often masks.

“THE CARETAKER”...

tends to focus on helping other people feel better. They are motherly in their relationships to other children. This is usually a “liked” child by friends and adults. This child’s sensitivity is noticeable.

Recommended adult behaviors:

- Assist the child in focusing on himself.
- Ask the child to identify his desire for himself.
- Help this child play.
- When assisting another, ask him-her to identify how he/she feels about the other’s pain.
- Validate child’s intrinsic worth, separating his-her worth from his caretaking.

Behavior to avoid:

- Calling on child to focus on another’s emotional pain. (Reprinted with permission.)

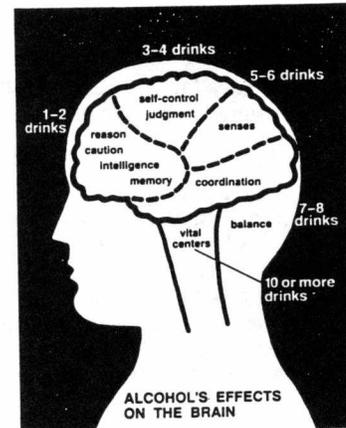
Getting sober

Alcohol passes from the MOUTH directly into the STOMACH, then to the SMALL INTESTINE and into the BLOODSTREAM, which carries it to ALL parts of the body, including the LIVER where 90 percent of it is metabolized in an oxidation process that changes it to water, carbon dioxide, and energy. However, the liver can oxidize only about one-half ounce of ethyl alcohol an hour. This means that until the liver has time to oxidize all the alcohol, it is circulating through all parts of the body, including the BRAIN. Although alcohol reaches the brain last, it gets there within minutes after it has been drunk.

Strong coffee, fresh air, or cold showers CANNOT cause a person to become sober; only the time needed for the work of the liver can do this job.

ethyl alcohol is found in 12 oz. beer, OR 5 oz. table wine, OR 3 oz. sherry or port wine, OR 1.5 oz. hard liquor. Physical effects are influenced by body weight, food in the stomach, speed of drinking, the kind of beverage and mixer, an individual's drinking history, and body chemistry. Drinking large amounts of alcohol over a long period of time seems to change the sensitivity of the brain to the effects of alcohol. This means that a person must drink more and more alcohol to get the same degree of intoxication as experienced in earlier drinking. This adaptation is called TOLERANCE. Sometimes this physical tolerance includes a psychological tolerance, or the acquired capability of not appearing to be as drunk as the person really is.

BLOOD ALCOHOL CONTENT, or BAC, is the percentage of alcohol in a person's blood. When the concentration of alcohol in one part of the body is known, the amount in any other part can be calculated. The BAC is measured by chemically testing any of the tissues or fluids in the body such as blood, urine, breath, spinal fluid, and saliva. Illinois law says intoxication occurs when a BAC is 0.10 percent--1 part alcohol to 1,000 parts blood.



How much?

Alcohol in beverages refers to ETHYL ALCOHOL, a central nervous system depressant drug that slows activity of the brain and spinal cord. One-half ounce of

EFFECTS OF BAC LEVEL ON BEHAVIOR AND DRIVING ABILITY			
Number of Drinks*	BAC	Effects on Feeling and Behavior	Effects on Driving Ability
1	0.02	Absence of observable effects. Mild alteration of feelings, slight intensification of existing moods.	Mild changes. Most drivers seem a bit moody. Bad driving habits slightly pronounced.
2-3	0.05	Feeling of relaxation. Mild sedation. Exaggeration of emotion and behavior. Slight impairment of motor skills.	Drivers take too long to decide and act. Motor skills (such as braking) are impaired. Reaction time is increased.
5-6	0.10	Difficulty performing gross motor skills. Uncoordinated behavior. Definite impairment of mental abilities, judgment and memory.	Judgment seriously affected. Physical and mental coordination impaired. Physical difficulty in driving a vehicle.
7-8	0.15	Major impairment of all physical and mental functions. Irresponsible behavior. Euphoria. Some difficulty standing, walking, talking.	Distortion of all perception and judgment. Driving erratic. Driver in a daze.
15-20	0.40	At this point, most people have passed out.	Hopefully, driver passed out before trying to get into vehicle.

* 12 oz beer, or 5 oz table wine, or 1-1½ oz hard liquor

This chart does not take into consideration the person's health, amount of food ingested, weight, mood, other drugs taken, etc. Some people "pass out" or lose consciousness with fewer drinks; increasing coma may progress to death. Chronic abusers

and alcoholics may survive very high levels of BAC where tolerance is extremely variable at different stages of abuse. Drunk drivers who have a BAC of .20 and above are almost always in need of treatment for chemical dependency.

Why drugs and driving don't mix

A person's body needs to perform specific functions for driving a motorized vehicle: tracking a moving target; sustaining attention; decision-reaction time for passing; ability to stop; reacting to more than one stimulus; memory; ability to process new information. Alcohol, other drugs, and even some over-the-counter drugs, impair these functions. The effects of all drugs, including alcohol, can vary from one person to another, and may even vary in the same individual at different times.

It is dangerous to mix drugs, particularly if one of them is alcohol, because they can produce a combined effect much greater than is expected. Alcohol works as a sedative, a central nervous system depressant, and it increases the sedative effect of tranquilizers or sleeping pills, while affecting coordination and judgment. Stimulants (amphetamines, cocaine, caffeine) combined with alcohol result in drivers who feel more alert and feel a FALSE confidence which makes them think they are in better shape to drive than they really are (a wide-awake drunk).

A marijuana user can have the same illusion, that marijuana increases the user's awareness and therefore improves driving ability. Not true. Studies show that 3 to 5 hours after smoking one marijuana cigarette, users are more easily distracted, their coordination decreased, and their ability to judge distances, speed or time is adversely affected. Furthermore, because marijuana is stored in fatty tissue, it takes 4-6 hours after smoking a single marijuana cigarette before normal levels of driving performance are regained. When alcohol and marijuana are combined, there is greater driving impairment; reaction time, manual dexterity, perception, coordination are most affected.

Another interaction which takes place when drugs are combined has to do with the method our bodies use to chemically process or metabolize them. The more rapidly a given drug is metabolized, the less impact it has. When drugs are forced to compete with alcohol for processing by the body, one or both are metabolized more slowly. As a result, the effect of alcohol and/or other drug is exaggerated because it remains active in the blood for a longer time. Some drugs, combined with alcohol, may result in a higher blood alcohol content (BAC) because the drug increased the alcohol absorption rate. Carbonation, including that in beer, increases absorption of alcohol in the blood stream while food in the stomach retards absorption of alcohol.

Signs of impaired driving

...high speed or consistent driving speeds

- frequent lane changing at excessive speed
- improper passing with insufficient clearance; slow driving or excessive swerving when overtaking and passing
- narrowly misses colliding with oncoming traffic
- begins breaking for stop signs or lights at much too great a distance or at the very last minute, or disregards signal altogether
- driving at night without lights, delay in turning on lights when starting from a parked position, fails to dim headlights when meeting oncoming traffic
- driving in lower gears without apparent reason, or repeatedly clashing gear, or jerky starts or stops
- driving too close to shoulders or curbs, hugging the center line or edge of road, or weaving from side to side
- driving with windows down in cold weather, or with head completely out of window
- slumps over steering wheel or apparently has difficulty keeping head erect and looking straight ahead.

IF YOU SUSPECT you are following a drunk driver, go to the nearest phone and advise police. Give license number, description of car, location and direction of suspected driver. UNDER NO CIRCUMSTANCES should you attempt to personally stop a suspected drunk driver.

close to 20 percent)

- 14 teens die and another 360 are injured in alcohol-related crashes per day

("Our Troubled Teens: Generation at Risk," 1987 documentary produced by WQED- Pittsburgh for public TV)



Smoking and other drugs

Research continues to support the relationship between smoking and the use of other drugs. Over three-fourths of male smokers age 12-17 are also regular alcohol drinkers, while one-fourth of non-smokers are regular drinkers. About 50 percent of male smokers use marijuana compared to 7 percent of non-smokers. Ten percent of male smokers also use cocaine, while less than one-half percent non-smokers use cocaine.

(NIDA Capsule, in IDEA NetNews, Jan.'88)

Harsh Stats

Drunk driving is a serious problem among all age groups of licensed drivers. But, teens are hard hit because some are combining learning how to drive, youthful risk-taking behavior, and drinking.

Although teen-agers compose only 8 percent of the driver population and account for only 6 percent of the vehicle miles traveled in this country, they add up to 17 percent of all accident-involved drivers and at least 15 percent of all drunk drivers in accidents.

- teen drivers are involved in 1 out of every 5 fatal accidents
- almost 60 percent of fatally injured teen drivers had alcohol in their blood systems; 43 percent were legally intoxicated
- teen fatal accidents occur 3 times more often between 8 p.m. and 4 a.m. than during the daytime
- teen drivers are involved in 1 out of 4 injury accidents (alcohol is involved in

Smokeless dates

Survey of Teen Preferences in Dating Smokers and Nonsmokers

Would you prefer to date a smoker or a nonsmoker?

	Prefer to Date Nonsmoker	Prefer to Date Smoker	Makes No Difference
ALL TEENS*	73%	1%	25%
Boys	78%	1%	21%
Girls	69%	1%	30%
Age 12 -15	78%	2%	20%
Age 16 -17	67%	0	33%
Nonsmokers (54% of sample)	86%	1%	13%
Former Smokers (35% of sample)	75%	1%	24%
Current Smokers (11% of sample)	10%	3%	87%
White	73%	1%	26%
Black and All Other Races	76%	0	24%

(Survey was conducted by Opinion Research Corp., published in Tobacco-Free Young America Reporter, seen in NFP Prevention Parentline, Sept. 1987)

PROM:

THE ROLE OF THE SCHOOL

Prom is the exciting event which can be a memorable occasion for a student to recall years later. According to Volker Engel, Assistant Principal in charge of student activities at Barrington High School, it takes a lot of planning to prepare for prom, much like a wedding reception.

Prom is planned by the Junior Class with the aid of Mr. Engel, along with Mrs. Michelle Miller and Mr. Robert Baker, teachers who are the Junior Class Board sponsors. After homecoming, the Junior Class Board selects a band, photographer, theme, and menu. It also organizes fund raising activities to help pay for the costs of the dinner and dance. The final price of the prom ticket is based on the amount of money the Junior Class raises as well as the cost of the band and menu selected.

Safety of the students while attending the dance is one of the prime concerns of the school. The facility needs an easily monitored entrance and exit, nearby washrooms and telephones. Beginning with the students' arrival in the parking lot until they leave, they are considered to be AT the prom. Once a student leaves the prom, he-she will not be readmitted.

Since prom is a school activity, the school co-curricular code (of conduct) is in effect. Staff and high school administrators serve as chaperones to help with any problem which arises; an off-duty policeman monitors the parking

lot. As in previous years, parents will be called and requested to pick up the student in incidents which involve use of alcohol or other drugs and the procedures of a co-curricular code infraction will be followed.

THE STUDENT'S ROLE

The student's responsibility is to adhere to the school policies and to make good decisions regarding pre- or post-prom activities. Students are wise to check their parents' guidelines as well as those of their dates' parents. Discussions and final decisions made well in advance avoid last minute arguments which can cause a poor start to the evening. Couples need to be creative in planning suitable and enjoyable activities.

THE ROLE OF PARENTS

Larry Bennett of Barrington Youth Services says, "At the time when kids say they need adults the least...that's when they need them the most. Kids need adults the most when they feel the most grown up, doing what they believe grown ups do best." He adds, "Teenagers in modern times often have credit cards and expensive cars at their disposal, cash, plenty of freedom, and a very sophisticated network of similarly armed friends. In short, the students envision themselves as 'adults to the fifth power.' At this level they have all the entrapments of adulthood and the decision-making power of children, groomed in the image of what imaginary adults do and look like but missing the reality of what most actual adults feel and think." Perhaps prom is

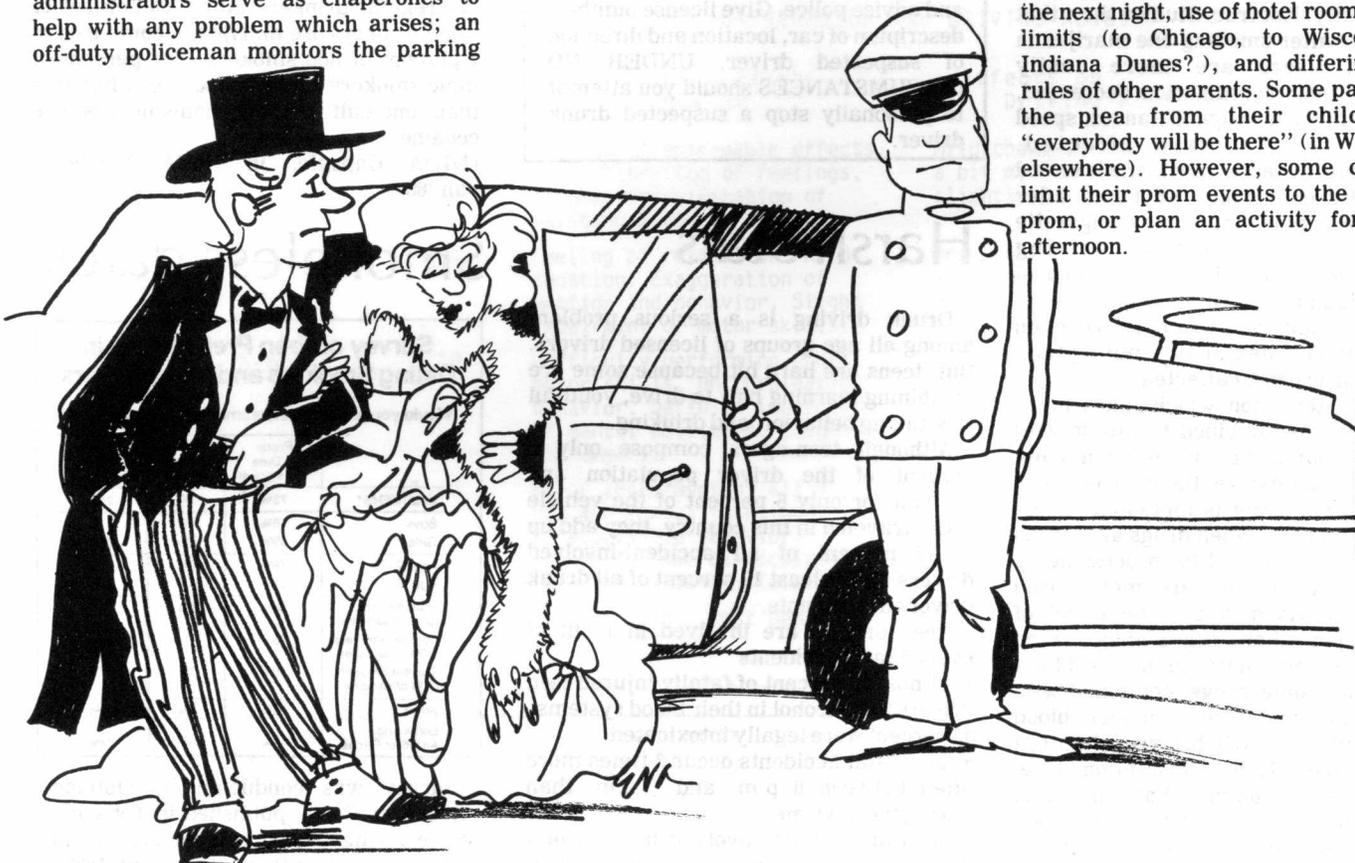
such a time, especially in relation to the activities before and after the dinner dance.

Larry Wiczorek of Family Service of South Lake County also urges parents to take a prominent part in the plans. "For some, prom signifies a rite of passage and the beginning of young adulthood. Because prom may suggest the transition into adulthood, some teens assert their right to make their 'own plans,' while adults anxiously question whether they have the right 'to interfere.' Adequate preparation for prom must include parent-teen negotiation around pre-prom and post-prom issues.

"Negotiation does not mean that parents must passively listen to and accept the plans of their teens. On the contrary, parents have a right and an obligation to oversee the prom plans of their children. Parents should establish their own bottom lines before beginning these discussions. Perhaps the most crucial bottom line is that all prom events be alcohol and drug free. Parents should clearly communicate an expectation of total sobriety to their teens."

"It is not easy for parents to oversee the prom plans of their young people. Parental attempts to set limits will be complicated by peer pressure among teens and by peer pressure among adults. Parents should always involve a spouse and-or network with like-minded adults so as to have support in establishing ground rules."

Common ground rule issues involve the use of a car or a limosine, whether after-prom means all of the next day--and all of the next night, use of hotel rooms, mileage limits (to Chicago, to Wisconsin, the Indiana Dunes?), and differing ground rules of other parents. Some parents hear the plea from their children that "everybody will be there" (in Wisconsin or elsewhere). However, some couples do limit their prom events to the evening of prom, or plan an activity for the next afternoon.



Prom worries

CHOICES asked, "What are some pre-prom worries?"

GIRLS

- Will someone else be wearing my dress?
- Will it rain, and ruin my hair?
- How do I look? REALLY?
- Do I need to bring money?
- Will he look and act great...or am I going to have to hide in the bathroom in shame?
- Will his boutonniere wilt before I get it on his coat?
- Will these shoes end up giving me blisters?

BOYS

- Will my parents let me take the car? or
- Will I have enough money for the limo?
- Will I look dumb dancing in a suit?
- Will my ex-girlfriend be there...and if she is, what will happen?
- Should I get a wrist corsage or a pin one?
- How late should we stay out?
- Will we go alone or in a bunch?
- Will she have a curfew?
- Will she insist on being with her pain-in-the-butt girlfriends all the time?
- Will she take all the dumb memorabilia off the table?

PARENTS

- Will they like the idea of a breakfast?
- Will kids not come because we won't serve alcohol?
- Should we talk to other parents?
- What do we say if they ask us to rent a hotel room?
- Will they think we are giving unspoken permission to drink because we are helping to pay for the limo?
- Are some parents serving alcohol?
- Will they have as good a time as I did at my prom?
- Should I talk to the limo driver about no drinking?
- Do we get to see how they look? Who'll take pictures?
- How late should our curfew be?
- Sex, pregnancy.



Prom's not for everyone

Some high school juniors and seniors do not think prom is such a big deal. Maybe they are not into dating; maybe they are not comfortable going to a "formal" dance; maybe they do not have the money; maybe there is too much "hype" with before and after prom activities; maybe they just are not ready. And, it's okay.

On prom night, these same kids may be going out to dinner or to a movie. Maybe they are having a sleepover with a group of friends. Some may be doing something special with their family. And, it's okay!

Plan parties

Parties are fun and a healthy way for children to develop social skills. Learning to be a party host begins in early years when children need to be involved in the party-planning process. Decisions concerning who and how many guests need careful thought and discussion, as do guidelines for what is appropriate "fun" and what is off-limits.

To avoid trouble spots for the younger host, it is wise to ask guests by phone or send invitations by mail. Written invitations should not be given out at school to avoid hurt feelings and sticky questions. Small parties are usually the most successful unless a large party has an adequate number of adults who are willing to help and follow the host's guidelines. Age-appropriate party themes and activities help avoid the attitude that "we've done it all" before reaching high school.

Trouble at teen parties arises when parents are not home, alcohol and other drugs are served or smuggled in, the host's house is trashed, or some personal items have disappeared. Some kids won't take the risk of having a party because "nobody will come if we don't have booze" or they fear party crashers. But, others have successful and safe parties because of advance planning, parental cooperation, and confidence in doing "their own thing."

Teen parties require invitations; they make it clear that the party is "invitation only." Parents, or other responsible adult chaperones, need to know the guest list and ask party crashers to leave. Some ground rules that parents and a teen host need to agree on ahead of time may include: no alcohol or other drugs; no smoking; no leaving the party and then returning later; leaving some lights on; ending the party at a set time; adult supervision.

Sleep-overs require special consideration: keep the

number of guests small; determine the "house" rules in advance; discuss them with the host child before the party and with all guests after they arrive. Be explicit about which rooms are off-limits, your guidelines for telephone use, and that no alcohol or other drugs are allowed.

Parents of party guests need information about party activities, particularly if they include a trip to a restaurant, movie, or other place away from the host's home. They need to know a time to pick up guests--and to be there on time. Guests' parents may call the host parent to be assured that their own ground rules will not be violated. And, if they disagree with the host parent, they don't need to argue the host's decisions or values. Rather, they can use that information when deciding whether their child can attend. Parents can make it easy for their child to leave a difficult party situation by assuring him/her that they, or another designated adult, will come when called.



TEENLINE:

TEEN LINE is a new 24-hour crisis intervention telephone service which was added to TALKLINE-KIDSLINE. From 6-10 p.m., however, TEEN LINE is operated by trained teens. Six of the 18 area high school students who were selected to be the teen counselors are from Barrington H.S. This is the first night experience of one of those six.

"When I walked in for my first night volunteering on Teenline, Illinois' first crisis hotline where troubled teens talk to teen counselors, I was uncertain and unprepared. I knew my skills and abilities, as well as my weaknesses, but how would these be incorporated into the demands about to be made on me?

Peers, Friends, Counselors at the high school was where I learned about Teenline, and it was also where I learned important listening and communication skills that I have been able to use at Teenline. But training at school involved working with groups, face to face. At Teenline, communication is done anonymously over the phone, and volunteers must be able to handle this type of counseling.

To become a mental health paraprofessional and qualified to work on the lines, I attended fifty hours of seminars. At the sessions I listened to professionals explain the symptoms and feelings of suicidal, depressed, abused, addicted, and confused people, and I was taught how to handle the issues brought up when a caller starts talking. The sessions proved to be as rigorous mentally as the nine years of gymnastics I took were physically. In order to decide how you are going to respond personally to an issue like homosexuality, you have to be in touch with your own feelings, and then take into account the caller's feelings. The two weeks of training were a time of personal insight and growth.

My supervision was over, and I began my first night. I worked hard on my first "real" call, making sure I had the information right from the caller, and then clearing away my own thoughts and feelings so that I could focus on hers. I offered her possible solutions, gave her a referral for further treatment in her area, and then helped her think through her own feelings and come up with a solution. When we were finished talking and she said "Thanks for your help," I knew why I had become a volunteer. By taking a call and listening to other's feelings, I gain further insight into myself, and a simple thank-you is as rewarding as a medal from the president."

TEEN LINE: 228-TEEN

TALKLINE: 228-6400

KIDS LINE: 226-KIDS

Scout badge

Girl and Boy Scouts can do a drug awareness activity as part of their Community Health and Safety badge. The fifth grade Girl Scouts at St. Anne's discussed and role-played some "What are your choices when..." situations. One scenario required them to react if they were offered a drink by a GOOD friend at their 8th grade dance. They also discussed the concept that alcohol and other drugs make you "feel good," if only temporarily, and then outlined healthy alternative activities.

Did your Scout Troop do a special prevention activity? Write about it to CHOICES: P.O. Box 768, Barrington, IL 60011.



BARRINGTON KIDS
Just say no.

Parade May 13

Watch the Just Say No Parade on the afternoon of May 13. It is important to the 4th, 5th, and 6th grade students to have YOU at curbside.

Social Service Network

The Social Service Network meets on the first Wednesday of each month during the school year at St. Anne's Parish Center from 10 a.m. to Noon. Its goals are (1) to educate human service people and interested others about youth related problems and services in the Barrington area, and (2) to increase contact and cooperation between human services providers (agencies, private practitioners, police, church workers). Meeting format includes announcements, highlighting of a service, program, or agency, followed by a program about a specific subject. The public is invited to attend. For information contact Larry Bennett (381-0345), Lois Coldeway (381-0243), or Larry Wiczorek (381-4981).

ITI week in July

Take a week to have fun and to grow, attend Illinois Teenage Institute (ITI) at Camp Allerton in Monticello, Illinois. BHS students who have attended are emphatic about the value of the experience in their personal growth, leadership development, and understanding of others. The ITI program includes general sessions and mini-workshops covering a broad range of topics which are later discussed in small groups--teens sharing with other teens. This outstanding week helps teens learn:

- about themselves; developing healthy self-concepts and self-awareness;
- to express their thoughts and feelings;
- about decision making, communication, problem solving;
- about the effects of alcohol and other drug abuse on individuals, families, communities;
- how to facilitate sessions which help younger students;
- about having fun.

BHS students in the local Operation Snowball Chapter have raised funds to provide scholarships for those who want to attend. For information about what ITI is like, see or call Meg Riley (382-2768), Andre Traversa (382-4413), or Eric Dick (381-2286). For scholarship and application information, call John Jarczyk at Barrington Youth Services, 381-0345.

CHOOSE FROM THESE SESSIONS:

Session I	July 10-16
Session II	July 17-23
Session III	July 24-30

DPP

The Barrington Youth Services DPP is an educational alternative to prosecution for minors age 19 and under who are arrested for violation of municipal ordinances regarding possession of alcohol and other drugs, or intoxication on these substances. After 2 years and 114 referrals, an analysis of the effectiveness of the programs was conducted.

According to the February BYS Newsletter, the DPP staff is very encouraged by the results, yet is sobered by the findings that nearly 60 percent of the parents in the program underestimate the degree of their child's chemical involvement.

At the library

A series of VHS video cassettes is available at the Barrington Area Library which focuses on family problems and positive steps to take. The tapes are presented by James F. Crowley, a nationally recognized authority on adolescent issues. Each is about 20 minutes and may be used separately for information at home or in a group. An excellent "starter" program.

FAMILY SURVIVAL: Facing Today's Issues

1. WHY OUR KIDS USE DRUGS
2. RECOGNIZING EARLY SIGNS OF ADOLESCENT ALCOHOL AND DRUG PROBLEMS
3. POSITIVE ACTION STEPS FOR PARENTS OF DRUG-ABUSING KIDS
4. PARENTS OF DRUG-ABUSING KIDS NEED HELP TOO!

Also available is **DRUG FREE KIDS: A PARENTS' GUIDE**. This is an excellent "how to" tape which appeared on TV. Actor Ken Howard hosts and Ned Beatty, Bonnie Franklin, Paul Winfield, Elliott Gould, Jane Alexander, and others role-play skits that emulate family situations; a replay of the skits offers constructive ways of dealing with a situation. Emphasized are the keys to effective parenting: communication and supervision. About 90 minutes; for parents at home or in small groups. Don't miss it.

Five years

In 1985, CHOICES printed a story about "Kathy" and her need for the lifeline of a support group. Kathy had had 9 months of

in-patient treatment and a half-way house experience for her alcoholism and drug addiction. She was back at Barrington High School to work toward graduation and had celebrated one year of sobriety.

Kathy is 20 now. She graduated from BHS, attends Harper College, and works part-time. She is determined to continue school until she has a 4 year college degree.

In June, Kathy will celebrate five years of sobriety. Recovery is still hard work and she attends Alcoholics Anonymous and Cocaine Anonymous meetings four nights a week. She is able to help others (a late step in a 12 step program) via the AA telephone hotline and by sponsoring newcomers to AA. When asked if she still gets the "urge" to drink, she said, "No, but sometimes I get the desire. There is a difference."

Applause, Kathy, for your hard work and good progress.

Aftercare

Barrington Youth Services has a new Aftercare-Wellness program to assist chemically dependent young people in adjusting to family, school, and peer environments during early sobriety. Teens will be offered guidelines and support as they re-enter everyday life chemically free. They'll receive support for:

- staying straight
 - altering self-defeating behaviors
 - sharing their feelings and concerns
 - developing a healthy and well lifestyle.
- Call BYS, 381-0345.

Talking it over

American parents and teachers are living and working with the first generation of youth who are being raised without the networks of grandparents, aunts, uncles and in-laws to support them. Dr. Stephen Glenn, Director of the Family Development Institute, likens the journey through childhood and adolescence "to crossing a great, high bridge over windy straits. With guard-rails, set firmly (but set far enough apart to give room to maneuver), the trip is usually safe, and you can learn to use the bridge to full advantage." *

Now Americans are learning to connect with neighbors and groups in their communities in order to share information and give support. Dr. Glenn says, "As urban pioneers, we are beginning to re-discover the value of getting together around the campfire with strangers heading the same way, in order to compare notes and reduce the hazards of the journey." So it is in Barrington. The idea of networking--communicating at any level--is seen in many examples, from nursery school play-groups to senior citizen calling networks.

In the beginning ABCDE efforts, the name "Parent Networking" scared some adults and angered some teens. Some saw it as "busy-body" gossip or grown-ups crowding their space. But, over the past four years the value is beginning to show. The definition is seen more clearly as plain, old-fashioned talking together. If combined with a non-judgmental and non-blaming approach, it works! Many parents are learning that they can do what their kids have done for years--share ideas and information and use them when thinking through the bottom line of their family's guidelines.

Parents of elementary-age (and younger) children are using a networking approach to talk about many things related to child-raising. They see that as prevention of not only alcohol and other drug use by school kids, but as prevention of other risky, unhealthy behaviors.

* "Our Troubled Teens," Generation at Risk, 1987 public TV documentary booklet, produced by WQED-Pittsburgh.

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New problems

In the "good ol' days" of the '40s, a teacher or school administrator was dealing with discipline problems that revolved around talking, chewing gum, making noise, running in the halls, staying in line, wearing improper clothing, and not putting paper in the wastebaskets.

According to statistics from the Fullerton (CA) Police Dept. and Calif. Dept. of Education, these are the problems schools face in the '80s: alcohol and other drug abuse; pregnancy; suicide; rape; robbery; assault; burglary; arson; bombings; murder; absenteeism; vandalism; extortion; gang warfare; abortion; venereal disease.



most grade levels. Larry Bennett, Barrington Youth Services, met with 7th and 8th grade parents for an open discussion on adolescent social concerns. A VHS tape of DRUG FREE KIDS: A PARENTS' GUIDE is available to the PN representative at each grade level. (Vira White)

MIDDLE SCHOOL

At BMS in November, Chemical Awareness Month found faculty, student, and parents involved in special programs related to alcohol-drug education. The planning committee included: Pete Peterson, Ellie Sigrist, Mary Civinelli, Diane Kostick, Jan Broders, Joanne Howell, John Spurgeon, Mary Beth Wolff, Jo Ellen Sandburg, Jim Schleker, Ray Piagentini, Mary Gorski, Judy Meyer, Barb Sinclair, Floyd Rogers, Darlene Webb, Kathy James, Kay Ryan, Ray Kostiuk, Pat Steward, Jane McGuire, and Don Thompson.

As a follow-up, the BMS Core Team sponsored a "Family Gym Night" in January where faculty, students, and parents met together for games and exercise. Also in January, students had a great deal of fun attending boys' basketball games and after-game dances at which each class had a special day. After the exciting games, with the band playing and cheerleaders cheering, the students completed the day by joining their classmates for a dance. A DJ provided entertainment, the school food service prepared refreshments, and the student council served pop. Also, Friday night class dances have been well attended and students have found out how much fun "school spirit" and being together really can be for all. More than 300 students attended each class dance.

The Barrington Middle School procedures concerning student chemical use are in place. The faculty, administration, staff and Core Team all play a part monitoring student behavior in this area. While the plan emphasizes prevention and positive alternatives, the procedure clearly sets forth an action plan. All parents and students have copies of this procedure; students reviewed the plan earlier this year in home rooms. (Don Thompson)

PIE

Parent Information Exchange

As an outgrowth of summer training and parent networking workshops, a number of parents have been working in their elementary schools to encourage sharing meetings among parents in their children's classes. So that they can benefit from the experiences of others, representatives from each school meet every other month. Their training in a Community Intervention workshop provides confidence and motivation to work toward prevention of alcohol and other drug use by youth. The parent networking training provides some guidelines on how to convene parents so that they share productively, without discussing school issues, judging others' values, and confidentiality.

Call your representative for more information.

Countryside School - Wanita Lamkey - 381-4838

Grove Avenue School - Patsy Mortimer - 381-8663

Hough Street School - Holly Shallenberg - 382-6741

Lines School - Connie LeBeau - 381-8176

North Barrington School - Quin Lanning - 526-6339

Roslyn Road School - Anne Brubaker - 381-3907

St. Anne's School - Vira White - 381-4565

Sunny Hill School - Kris Kocanda - 428-9678

Woodland School - Bev Kendig - 991-2359

IN THE SCHOOLS

ELEMENTARY

The Elementary Drug and Alcohol Advisory Committee, comprised of parent and staff representatives from each school in the district, meets regularly. Its general purpose is to increase awareness and to educate staff, parents and students to prevent the use of alcohol and other drugs by elementary age students. Reports on individual school efforts toward attaining the general purpose are given at each meeting. Commendably, elementary schools have parent networking groups and many schools have had programs which focused on prevention.

Specific Committee goals for 1987-88 include: recommending that the Board of Education consider modifying its policy to include prevention; supporting and promoting "Just Say No" clubs; researching new and existing alcohol and drug programs; informing parents of the referral process; and promoting district-wide educational programs for staff and parents. (Marie Plozay, Chm.)

ST. ANNE SCHOOL

Project Decide, the drug awareness curriculum remains a top priority. Several more teachers have been trained; it is the goal of the school to have all teachers trained in the curriculum.

Judge Mary Feerick, Coordinator of Community Youth Services for Cook County, made a presentation of the Project Decide Curriculum for school parents. The presentation included several students who demonstrated some of the decision-making processes they encounter through the program.

Parent Networking (PN) is occurring at

Credits

CHOICES is published by ABCDE, P.O. Box 768, Barrington, IL 60011.

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ABCDE GOALS:

PURPOSE

ABCDE is a community action group made up of concerned citizens including social service representatives, parents, school personnel, students, clergy and other interested people organized for the purpose of preventing the use of alcohol-drugs among the youth in the Barrington area communities.

To this end we shall promote awareness of the problem, inform parents and students of the potential dangers and symptoms of alcohol and other drug abuse, and support those who take the position that the use of alcohol-drugs among school age children is inappropriate.

Finances

Individual and group donations have provided funds for ABCDE workshops, CHOICES, and other educational activities. This year the Frances Chapin Foundation awarded ABCDE \$2,500.

Many thanks to all donors.

Thanks

The article on page 3, "No Quick Fix," refers to examples which indicate that much is happening here. It also will make you more aware of the caring community we live in, one that supports the voluntary efforts of many different people to help kids.

Though we cannot measure the results or count the many persons who have been helped, the organizations and people who provide or sustain these prevention activities make this community unique. They deserve our special thanks. Press on, together we are making a difference. Together we can "eat the elephant."

Clyde W. Slocum, Chairman



INFORMATION

Public awareness and education are the purposes of the ABCDE newsletter CHOICES; it is mailed to almost 14,000 households and businesses in School District 220. The Chamber of Commerce and Welcome Wagon distribute copies to new homeowners as well. The content gives drug prevention and intervention information, suggestions, and resources for help which brings together all residents, police, church and school personnel in the common community goal: to fight drug use by school age youth.

The Barrington Area Public Library provides books and pamphlets as well as film information specifically related to alcohol and other drugs. Some church libraries have a drug information collection.

ALTERNATIVE ACTIVITIES

All agencies and organizations which serve youth and their families are encouraged to provide and publicize activities which are not oriented to alcohol and other drugs. This gives support to young people who do not use drugs, provides healthy alternative activity opportunities to those recovering from chemical dependency, and to those trying to stop their pattern of alcohol-drug use.

ABCDE
PO BOX 768 Barrington, IL 60011

I WOULD LIKE TO HELP FIGHT DRUG USE BY SCHOOL-
AGE YOUTH

Enclosed is a tax deductible donation
 Send program suggestions for my organization
 Have a parent networking rep. call me

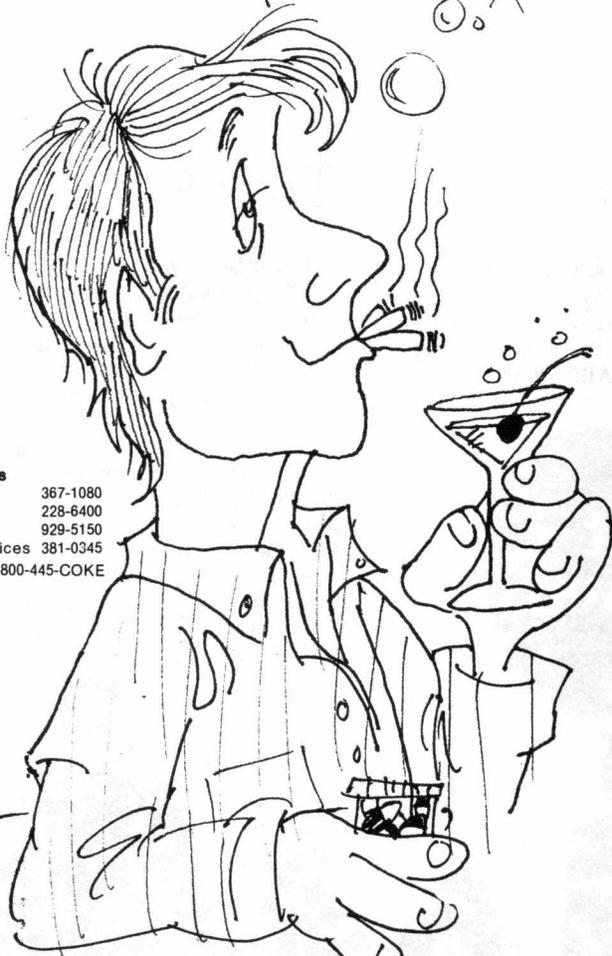
Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Office Phone: _____

**MEMBER: National Federation of Parents for Drug-Free Youth
Illinois Drug Education Alliance**

my friend has a problem



24-Hour Crisis Hotlines
CONNECTION 367-1080
 Talk Line 228-6400
 Metro Help 929-5150
 Barrington Youth Services 381-0345
 IL Cocaine Hotline 1-800-445-COKE

... where can he get help?

MAKE SURE THE HELP YOU SEEK MATCHES THE NEED

Individual and-or Family Counseling
 Barrington Youth Services (fee on sliding scale) 381-0345
 Family Services of South Lake County (fee on sliding scale) 381-4981

Private Counselors, see Yellow Pages under "Psychologist"

In-Patient and-or Out-Patient Care for Chemical Use, Abuse, Dependency

Addiction Recovery Corp. (ARC) Hoffman Estates	882-0070
Alcoholism Drug Dependence Program (A.D.D.) Rolling Meadows	394-9797
Alexian Brothers Medical Center	981-3524
Forest Hospital, Des Plaines	635-4100
Interventions-Contact Youth Clinic, Wauconda	526-0404
Lake County Health Dept., Substance Abuse, Waukegan	689-6770
Lovellton, Elgin	695-0077
Lutheran General Hospital Alcoholism Treatment Center, Park Ridge	696-7715
Northern Illinois Council on Alcoholism & Substance Abuse	244-4434
Parkside Lodge, Mundelein	634-2020
Renz Addiction Counseling Center, Elgin	742-3545

Other care facilities, see Yellow Pages under "Alcoholism Information and Treatment" or Drug Abuse and Addiction Information..."

Support Groups for Persons with Chemical Dependency Problems
 Alcoholics Anonymous* (Person with problem must make the call):

Barrington	359-3311
Carpentersville	741-5445
Cary, Fox River Grove, Wauconda	(815) 455-3311
Hoffman Estates, Bartlett	893-2300
AA Hearing Impaired	635-4100
Cocaine Anonymous	583-4433
Narcotics Anonymous	346-9043
Self-Help Group, 115 Lincoln, Barrington before 6 p.m.	381-0524
	after 6 p.m. 639-1667

Support Groups for Family and Friends of Persons with Chemical Dependency

Al-Anon (family), Al-Ateen (teen relatives, friends)	358-0338
Families Anonymous (family and friends of drug abusers)	848-9090
Adult Children of Alcoholics	929-4581
New Wine Christian Club (family and chemical abusers)	526-5200 or 381-2986

Parent Support Group for families in crisis because of unacceptable adolescent behavior

Tough Love	577-3733
Carpentersville	Day, 428-3602 P.M., 428-2302
Crystal Lake	(815) 455-3213
Elgin	695-4606
Glencoe	835-4805
Hoffman Estates	843-2000
Parental Stress	427-1161

*There are at least sixteen AA groups in the Barrington area, while numerous Al-Anon groups meet here or nearby daily, day or evening. To learn more about AA or Al-Anon, attend an opening meeting at Still Waters Club, Pepper Lake Road, Barrington, EVERY SATURDAY, 8 p.m.

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