Addiction — What Is It?

Addiction is not just a lot of drug use. It is actually a different state of being. In addiction, drugs hijack your brain, your mind, and your life. They literally change your brain — that is why we call addiction a brain disease.

Once people become addicted, their focus in life becomes seeking and using drugs. They no longer seem to care about any of the consequences that may result from taking drugs.

This is very different from a person who is a drug user or abuser. A drug abuser can choose whether or not to use a drug.

Drug addiction is a compulsion. When people become addicted to drugs, their brains have fundamentally changed. Addiction is compulsive drug seeking and use, even in the face of appalling consequences.

**How Drugs Work on the Brain**

Certain drugs make us feel very good — at least at first — because of what they do to our brains. Drugs that are abused change the way our brains work by disrupting the delicate mechanisms through which nerve cells transmit, receive, and process information critical for our daily living. Nicotine, cocaine, marijuana, and heroin, for example, are rapidly carried to the brain through our bloodstream regardless of whether they are smoked, injected, or swallowed. Then they stimulate different circuits in our brain, one of which is called the pleasure center.

Continued abuse of drugs, which unnaturally overstimulates brain circuits, can change the brain to an addicted state. The affected circuits can no longer function on their own, but need outside stimulation to function. The drug addict no longer has a choice whether to take the drug or not. We’re still not sure whether all the changes that occur in the addicted brain can ever be completely reversed. We do know that the use of inhalants literally destroys brain tissues.
Recent Discoveries

Drug abuse and addiction have been researched rigorously for more than 20 years. Research is a very slow but thorough and accurate process. Through prevention research, for example, we have very recently identified 14 principles that schools and communities can use to successfully prevent drug use among young people. These principles include the need for interactive methods for reaching adolescents, the development of age-specific and culturally sensitive programs, and an emphasis on family-focused intervention programs.

Another area in which researchers have invested a great deal of time and effort and have made great progress is treating drug addiction. We now know that addiction is a treatable disease. We also know that treatment effectiveness varies among individuals; what works for one person may not work for another. You can't just talk someone who is addicted to drugs into stopping. Treatment should always include professionals, especially since many times medications need to be prescribed in combination with behavioral therapies.

If you know someone who is addicted to drugs, it is best that you encourage him or her to seek professional care. It is also important to remember that because addiction is a chronic, relapsing disease, it will not be treated overnight; recovery is usually a long-term process.

Risk Factors & Protective Factors

Researchers are finding that some factors can help determine whether or not an individual is more or less likely to abuse drugs. With this knowledge, you can help yourself and your friends avoid drug abuse and the danger of addiction.

Risk factors, such as pressure from friends to use drugs, lack of interest and involvement from parents, a family history of substance abuse, and ignorance about the health risks of abused drugs, create greater potential for drug use. But there are also many protective or resilience factors, such as good adult role models, supportive friends, and achievement in school, which can reduce the chance of someone becoming a drug abuser. Strengthening protective factors can help you and your friends avoid drug use altogether, even if there are still many risk factors in your lives.

Activities

- Work as a volunteer in a local drug abuse prevention program in your community — or start one. NIDA's new user-friendly research-based publication “Preventing Drug Use Among Children and Adolescents” can help communities and schools establish local prevention programs. Read the guide online at the NIDA Web site (www.nida.nih.gov), or call the National Clearinghouse for Alcohol and Drug Information at 1-800-729-6686 or 1-800-487-4889 (TDD) for your free copy.

- Visit World Wide Web sites (such as www.nida.nih.gov) that provide accurate information on drug abuse and addiction.

Keep in Mind:

Once a person becomes addicted, his or her top priority in life becomes obtaining drugs, taking drugs, getting high, and then getting more drugs. Everything else — family, friends, job, the future — loses importance.

When a person first takes drugs, it is a voluntary decision. But there is a point when the person's decision to take drugs may no longer be voluntary. It is as if a “switch” goes off in the user's brain, and the person becomes addicted.
Tools of the Trade

Just as carpenters, engineers, and doctors have specialized tools for their jobs, so do drug abuse and addiction researchers. Much of their work is done in a laboratory setting, where they use test tubes, beakers, pipettes, and computers to test their hypotheses. More advanced technologies such as magnetic resonance imaging (MRI) and positron emission tomography (PET) are also used to understand how drugs work in the human brain. With this technology, researchers can observe the activity of the brains of individuals experiencing drug addiction while they are awake. Researchers can also use MRIs and PET scans to see the immediate and long-term effects of drugs on the brain.

Goals for the Future

As we enter the 21st century, drug abuse and addiction researchers will continue to use science to understand addiction, as well as to alleviate addiction’s pain and devastation. They will work to develop effective treatment interventions, especially a medication to treat cocaine addiction. They also will work to unravel the mystery of drug craving — a major cause of relapse even after years of successful abstinence.
How About a Career in Drug Addiction and Treatment Research?

Because drug abuse and addiction are such complicated problems, there are many ways we are combating them, from identifying emerging drug use patterns to discovering new addiction treatments. There are brain researchers (neuroscientists) who study the brain and how it becomes altered once a person uses drugs; and there are treatment researchers who use scientific approaches to determine the best ways to treat drug addiction. Some may be involved in developing new medications, while others might be developing psychological or behavioral approaches for treating drug addiction.

Prevention researchers focus on identifying factors that can help to prevent drug abuse, particularly among young people. HIV/AIDS researchers study the overwhelming link between a drug-using lifestyle and the spread of HIV and conduct research to determine the best strategies for reducing its spread. The bottom line is that there are many career opportunities for someone wishing to enter this exciting and important field of research. Most drug abuse and addiction researchers hold a doctoral degree or a medical degree. But the best time to start exploring and working toward a career as a researcher is while in high school.

Activities

- Call NIDA Infotax at 1-888-NIH-NIDA for fact sheets on a variety of drug abuse topics. (The hearing-impaired can call 1-888-TTY-NIDA.)
- Contact the Office of Science Education at the National Institutes of Health, (301) 402-2828, to find out about research and training opportunities for high school students.
- Visit someone who is working in an addiction research laboratory or clinic.
- Visit libraries and Web sites to find out more about careers in science — start with a visit to Research and Training Opportunities at the National Institutes of Health (http://www.training.gov) and Snapshots of Medicine and Health (http://ohrm.od.nih.gov/ose/snapshots).

Keep in Mind:

Many of the tools that drug abuse researchers use, such as PET machines, demonstrate that there are observable changes in brain function that take place after drug use. We can now see that the brains of addicts are different from the brains of non-addicts. And it is very difficult, in some cases impossible, to return the brain back to normal. Scientists, like those who work at or are supported by the National Institute on Drug Abuse (NIDA), are working to develop better treatments to help people who are addicted to drugs.
What is Recovery?

Most experts in the substance abuse field believe that once you’ve developed the disease of addiction, you have it for life. But — like diabetes, high blood pressure, and other chronic, relapsing diseases — addictive disease can be arrested, kept in remission through a lifetime regimen. That’s what recovery is.

Recovery is about taking back control over your life!

Because of the brain changes caused by addictive drugs, drug use becomes central to the addict’s life. Friends, parents, sports, and school all lose priority to the pull of getting high. Whether an “A” student or a winning athlete, the student with a substance abuse problem starts neglecting these interests to use drugs. Think about it: That’s why they call it “drug dependency.” You become drug dependent instead of independent. Recovery is a way to regain control.

There are lots of ways of getting into recovery. (For more information, see the Getting Help handout [student activity card 9]).

Can’t an addicted person stop for a while, then go back to using a little?

No. Once someone has developed the disease of addiction, it’s like developing an allergy. If the person is re-exposed to alcohol, tobacco, or other drugs, the symptoms (including compulsion to use, loss of control, and denial of the problem) may reappear.

How long does recovery take?

There is no exact time frame. Recovery is a process, not an event that’s over in 10 — or even 28 — days of treatment. But — contrary to many people’s fear — recovery is not synonymous with boredom and social isolation. In fact, it is a good thing.

How can the process of recovery be “good”?

Finding out that you’re addicted is not welcome news. But there can be some extremely positive results from getting into recovery. The process of overcoming addiction often brings about a profound life change for the better.

(continued on 3 b)
As a child, Rose was always against cigarette smoking. But in eighth grade she started smoking after school because her friends did. Then, when kids started to drink at parties, she tried that too. Eventually, when someone passed her a marijuana joint, she smoked it.

Though Rose had always been a good student, her grades started to slip. When she got drunk or smoked pot on a weekend, she didn't do so well on Monday's tests. Her junior year grades were the worst, so she didn't get into the college she wanted. She had relationship problems with family and friends.

Finally, at the urging of one non-using friend, Rose went to talk to a counselor at school. The counselor had Rose write out her goals and consider whether substance use was affecting her ability to reach them. The results were so revealing that Rose decided then and there to quit for good. To give Rose the support she needed, the counselor suggested she attend a group once a week after school.

Now, two years later, Rose is back on track — clean and sober. She had to attend community college for a year to get her grades back up, but at least now she's headed where she wants to go.

“I came real close to blowing everything,” she says. “If I had kept going like I was, I would have hated myself by now. By quitting drugs, I got my dreams back.”

Activity

What Are Your Dreams and Goals?
Whether or not you are a substance user, take a moment to make a list of what you TRULY want out of life. Include both immediate goals (get an ‘A’ in math this quarter) and long-range dreams (buy a motorcycle).

Your Personal / Relationship / Family Goals:
Examples:
* Have a boyfriend/girlfriend who treats me with respect
* Have kids someday, and be a good role model for them

* ___________________________________________
* ___________________________________________

Your School / Work Goals:
Examples: * Go to college
* Own my own business someday

* ___________________________________________
* ___________________________________________

Your Fun / Sports / Travel Goals:
Examples: * Travel / see the world
* Make the basketball team this year

* ___________________________________________
* ___________________________________________

Your Material / Money Goals:
Examples: * Have a bank account
* Buy a car

* ___________________________________________
* ___________________________________________

Keep in Mind:
If you have a substance abuse problem and don't get help, you'll probably never reach these goals — or even come close.
MY FRIEND HAS A LOT OF THESE SIGNS. SHOULD I BE WORRIED?

It is something to be concerned about. Eventually, substance abusers who don’t get help can develop serious depression, or physical problems such as liver and brain damage. Being out of control with alcohol or other drugs also makes people more likely to drive drunk or engage in unsafe sex resulting in pregnancy, AIDS, or other sexually transmitted diseases.

WHY IS THIS HAPPENING?

No one is really sure why some people develop problems with alcohol and/or other drugs, and others don’t. Tendencies to have substance abuse problems can be inherited, just like tendencies to develop heart disease or cancer. Others start using regularly to avoid bad feelings like depression — or just to fit in with friends. Then, with repeated use, brain changes result in cravings for more of the drug.

Put a check mark next to each statement that describes your friend:

○ Hanging out mostly with people who use a lot of alcohol or other drugs

○ Personality changes: becoming more aggressive and hostile, or becoming more withdrawn, isolated, and depressed

○ Getting into trouble at home because of substance use

○ Drinking or using drugs in large quantities

○ Getting angry and defensive if anyone questions the drug use; denying it’s a problem

○ Using regularly at certain times (like every evening, or every morning before school)

○ Continuing to use (say, at a party) even after everyone else has stopped

○ Having blackouts — forgetting events that occurred during substance use

○ Being high at school or work

○ Cutting school or class to get high

○ Losing interest in other activities, such as sports or schoolwork

○ Slipping grades

○ Getting into trouble at school because of substance use

○ Taking foolish risks when drinking or using drugs, such as having unsafe sex

○ Breaking the law while drunk or on drugs

○ Driving a car while under the influence

○ Getting into auto accidents related to substance use

(continued on 4b)
IF IT’S CAUSING SO MANY PROBLEMS, WHY DOESN’T MY FRIEND JUST STOP?
When people are dependent on drugs or alcohol, they have a disease. When people become addicted, their brains have fundamentally changed, and the affected parts of the brain need outside stimulation to function.

THEN HOW CAN I HELP?
It’s hard. You can’t force someone to get help, but you can let your friend know that you care and that you think it’s a problem. You can encourage your friend to talk to someone about the alcohol/drug use — either a professional or someone recovering from a similar problem.

WHAT IF MY FRIEND GETS MAD AT ME?
Your friend may get mad, and may not even want to be friends anymore. On the other hand, if you don’t do anything, and something terrible happens (like a drunk-driving accident), you will regret having kept quiet.

SO WHERE DO I START?
Before you do anything, talk to a counselor (some schools have a substance abuse specialist) about your concerns. (This isn’t betraying your friend; you don’t even have to mention names.) Ask the professional to help you figure out what to do. You can also attend a support group for people concerned about someone else’s substance use, such as Al-Anon, Nar-Anon, or Alateen.

THEN WHAT?
After you educate yourself, if you decide to speak to your friend, there are ways to do it that give you the best chance of being heard:

- Only discuss the issue when your friend is sober — never when he or she is high or hung over.
- Don’t accuse your friend of being an alcoholic or addict. Just express your concern about the things in his or her life that you see going downhill.

IS MY FRIEND ADDICTED?

- Stick to your own feelings. Talk in “I statements”: “I’m concerned . . .” “I’m worried . . .”
- Relate specific things your friend has done when high or drunk that concern you — “The night you left the party drunk and drove your car . . .”
- Finish by telling your friend that you want to support him or her in getting help.

AND IF MY FRIEND DOES ADMIT THE PROBLEM?
If your friend does admit that substance abuse is messing up his or her life, you should be prepared with specific ideas of where to go and whom to speak with (having gotten some suggestions from the professional you spoke to earlier, or from the Getting Help handout [student activity card 9]).

WHAT ABOUT AA OR NA?
Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) are confidential groups where you don’t have to give your name — and they’re free. Listening to others who have had problems with alcohol and other drugs can be enormously helpful. If your friend is afraid to go alone, you can go with him to an “open meeting,” where friends and family are welcome. These programs are everywhere; just look in the phone book.

AND IF MY FRIEND REFUSES TO GET HELP . . . WHAT SHOULD I DO?
Ultimately, you have no control over whether your friend gets help. But if you think your friend’s substance abuse is placing him or her in serious danger, consider talking to his or her parents.

For Resources, see GETTING HELP (student activity card 9) which lists organizations and hotlines to call.
No one knows for sure why some people develop problems with alcohol, tobacco, and other drugs — and others don’t. Researchers are beginning to identify “risk factors” that may be associated with addiction, as well as “protective factors” that help people avoid getting caught up in a pattern of drug abuse.

Before answering the following questions, you may find it helpful to look into your own family history of alcohol, tobacco, or other drug use. How have these substances affected the health of your parents, grandparents, siblings, or other family members?

<table>
<thead>
<tr>
<th>HOW VULNERABLE AM I?</th>
</tr>
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</table>

**For each statement below, check the “Yes” or “No” box.**

1. Do one or both of my parents have a history of abusing alcohol or other drugs? **yes □ no**

2. Is there substance abuse elsewhere in my family (grandparents, siblings, etc.)? **yes □ no**

3. Is there (or has there been) domestic violence or child abuse in my home? **yes □ no**

4. Do one or both of my parents let me drink or smoke pot at home? **yes □ no**

5. Do one or both parents think it’s not so terrible if I drink or smoke pot? **yes □ no**

6. Do my parents and I avoid talking about alcohol, tobacco, or other drug use? **yes □ no**

7. Do my parents let me get away with everything? **yes □ no**

8. Are my parents extremely strict, and do they tend to punish me severely? **yes □ no**

9. Is there a lot of fighting and conflict in our family? **yes □ no**

10. Am I often on my own to do whatever I want — without any adult supervision? **yes □ no**

11. Are my parents emotionally distant from me? **yes □ no**

12. Do most of my friends drink and/or use other drugs? **yes □ no**

13. Do most of my friends smoke cigarettes? **yes □ no**

14. When something bothers me, do I just hold it in and not tell anyone? **yes □ no**

15. Do I find it hard to say “no” to friends when they suggest I do something — even if I know I shouldn’t? **yes □ no**

16. Do I feel like an “outsider” at my school? **yes □ no**

17. Do I get into a lot of fights? **yes □ no**

(continued on 5b)
### HOW RESILIENT/PROTECTED AM I?

Check "Yes" or "No" for each of the following questions.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>Is my family history free of substance abuse?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
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<tr>
<td>2.</td>
<td>Do I feel very close to at least one of my parents and/or other family members?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
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<tr>
<td>3.</td>
<td>Is my home generally a comforting, nurturing place where I (mostly) feel comfortable and loved?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
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<tr>
<td>4.</td>
<td>Would my parents strongly disapprove of my using illegal substances?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
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<tr>
<td>5.</td>
<td>Can I talk to my parents about just about anything?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
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<tr>
<td>6.</td>
<td>Has my childhood been relatively free of horrible traumas (like child abuse, domestic violence, etc.)?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
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<tr>
<td>7.</td>
<td>Are my parents pretty fair in how they discipline me (firm but not too harsh)?</td>
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<td></td>
<td>yes □ □ no</td>
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<tr>
<td>8.</td>
<td>Are my parents very interested in my school work?</td>
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<td></td>
<td>yes □ □ no</td>
</tr>
<tr>
<td>9.</td>
<td>Do I participate in sports or other interests (dance, art, basketball, golf, reading, music, acting, karate, etc.)?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
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<tr>
<td>10.</td>
<td>Do I feel like I belong in my school, like I’m “part of” it?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
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<tr>
<td>11.</td>
<td>Am I an independent thinker who doesn’t just follow the crowd?</td>
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<td></td>
<td>yes □ □ no</td>
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<tr>
<td>12.</td>
<td>Am I pretty good at saying “no” when I want to, even when I feel pressured by circumstances or people?</td>
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<tr>
<td></td>
<td>yes □ □ no</td>
</tr>
<tr>
<td>13.</td>
<td>When I’m upset, do I have ways of dealing with it (talking with someone, exercising, relaxation, etc.)?</td>
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<td></td>
<td>yes □ □ no</td>
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<tr>
<td>14.</td>
<td>Do I attend religious services?</td>
</tr>
<tr>
<td></td>
<td>yes □ □ no</td>
</tr>
<tr>
<td>15.</td>
<td>If I have a problem, do I try to resolve it, and if I can’t, do I seek help?</td>
</tr>
<tr>
<td></td>
<td>yes □ □ no</td>
</tr>
<tr>
<td>16.</td>
<td>Do I talk things over rather than fighting?</td>
</tr>
<tr>
<td></td>
<td>yes □ □ no</td>
</tr>
</tbody>
</table>

Don’t fill out your name or share this questionnaire!!

If you found yourself answering “yes” to many of the risk factors and/or “no” to many of the protective ones, there are things you can do to help yourself. For example, you can find a supportive adult to talk to, preferably a trained counselor. If you said “no” to many of the risk factors and “yes” to many of the protective factors, remember not to get overconfident — you are still at risk of developing problems with substance abuse. No matter where you’re at, you can take action to improve your odds against addiction.
WHAT YOU DECIDE

Every day you make decisions — what to eat, what to wear, who to hang out with, and how to act. But your decisions are often affected by what others do and think.

When someone wants you to do something that’s not good for you, do you usually do it? Or do you resist?

WHERE’S THE PRESSURE?

Companies use marketing (advertising, publicity, and promotion) to convince you to use their products. In 1994, tobacco companies spent $5 billion trying to get people to smoke. In the first eight months of 1996, alcohol companies spent over $600 million convincing people to drink.

How do you respond to advertising? Does it affect what you buy and use? Or do you think for yourself?

Product Placement

Have you ever noticed how many people smoke in movies? In the 1980s, tobacco companies, like other businesses, paid big bucks for “product placement” — having their cigarettes smoked by stars, or having their product (or logo) featured somewhere in a scene. In 1990, tobacco companies responded to criticism of this practice by voluntarily agreeing to stop paying producers to have their brands displayed in movies. However, some insiders say that under-the-table product placement may still be going on — a charge that is denied by the tobacco industry.¹

WHY DO THE TOBACCO AND ALCOHOL COMPANIES SPEND SO MUCH?

Simple — they want your money. In 1995, $190 million of tobacco company profit came from sales to people under 18. Teenagers are a key market for tobacco companies. Few people over the age of 21 begin smoking, but every year more than 1 million teenagers become regular customers. Advertising reflects a focus on kids. Tobacco and alcohol ads use cartoon characters, animated creatures, and animals, all of which appeal to younger consumers.

Fact: Girls often smoke because they think it helps them stay thin. Seventy-five percent of them become addicted, and then they are faced with the other effects of smoking — bad breath, a hacking cough, and a poor complexion.

LET’S FACE IT, alcohol advertising isn’t very honest. In ads, people who drink are always having a great time — they are well-liked, the center of conversation, and attractive. The ads never show the drunk lurching about the room while others avoid him because he is loud, confused, smelly, and obnoxious. They never show a drunk in a driving accident or sick from alcohol or even dead from alcohol poisoning.

KNOW WHAT YOU ARE WATCHING. Don’t let advertisers make your decision for you. Make your own decisions from more reliable sources of information.

Ultimately, it’s your money, your body, and your decision.

Activities

- Collect ads for alcohol or cigarettes. Find news stories, information on the Internet, or books about the health consequences of these drugs. Using what you’ve found, make a poster on the theme: The Image and The Reality.

- Research the histories of the alcohol and tobacco trades. What roles have they played in the American economy? Report your findings to your class.
Developed by Thirteen/WNET to accompany MOYERS ON ADDICTION: CLOSE TO HOME

the
drug
trade
Illegal Industries

Many young people today are conscious of the environment, human rights, and animal rights. Yet they may not think about the fact that if they buy or use illegal drugs, they are directly contributing to the violence, child abuse, and exploitation fueled by the drug trade.

DO YOU REALLY WANT TO BE A PART OF THAT?

Murders and Other Violence
Fifty percent of all murders in the U.S. are alcohol- or drug-related.

WOULD YOU BUY ANYTHING FROM A COMPANY THAT YOU KNEW WAS KILLING PEOPLE?

Child Abuse
Parents who become dependent on drugs like cocaine are far more likely to abuse their children.

Not the Best Employers
Drug selling rings often use violence and threats of violence to control “employees.”

Even Most Dealers End Up Broke
Some young people assume that dealing drugs is the ticket to making good money. WRONG. It’s the ticket to jail, violence, addiction, and — too often — death.

The majority not only don’t get rich — they end up broke. Why? Many get addicted and use up their profits, and spend whatever is left to maintain their fast lifestyles. And, usually, they end up going to jail. (Prisoners sentenced for drug offenses constitute the single largest group of Federal inmates.)

A BAD DEAL
When you figure in the jail time, drug dealing is really a bad deal. Even if a person made $50,000 in one year selling drugs, if he got caught and went to prison for the next 10 years, that works out to about $4,500 a year — far below poverty wages.

Activities
- Read the papers for one week, clipping out articles related to the drug trade. At the end of a week, post all articles in the classroom, and discuss. Has learning about the drug trade changed your opinion about it?
- Have your class divide into two groups and debate the following question: Are people who buy illegal drugs responsible for the violence in the drug trade?
Nearly all people want and enjoy pleasure. Some of them—perhaps those with little to begin with—will try to snatch it through artificial means, even if these turn out to be destructive . . . Are human pleasures only within reach across a chemical bridge? The answer is surely a fat no.
—Lionel Tiger

What are three drug-free things that make you feel good?

Step Back & Think About . . .

pleasure

Nearly all people want and enjoy pleasure. Some of them—perhaps those with little to begin with—will try to snatch it through artificial means, even if these turn out to be destructive . . . Are human pleasures only within reach across a chemical bridge? The answer is surely a fat no.
—Lionel Tiger

loneliness

What is that strange sense of yearning passing lighted houses at night? Loneliness sets its own lamp alight.
—Lawrence Ferlinghetti

Can’t Step Back?
This Is Your Wake-Up Call.

If that can of beer, cigarette, or joint is powerfully tempting, recognize the danger signal. You may be more vulnerable to addiction than you realize.

Give yourself credit for realizing you have a problem. Get help. Your friends may not know the best way to help you, so ask an adult you trust—a parent or other family member, a friend’s parent, a neighbor, a teacher, or a counselor. It’s a sign of strength to be able to say “I can’t handle this alone.”

Moving to a new neighborhood, changing schools, or losing touch with friends can make you lonely . . . and make you want to make yourself oblivious to sadness.

Do you know someone who takes drugs or alcohol because they’re lonely?

When the high wears off, are they any less lonely?

(continued on 7b)
The Facts

It's tempting to think that drug problems only happen to other people, not us. But the risks of drug use are real. Step back and think about some of the risks:

- Using drugs to escape problems creates new ones.
- Guilt from sneaking drugs, tobacco, or alcohol can increase your stress level and damage your relationship with your family.
- The more you use a drug, the more of it you need to get high. And drug tolerance makes it harder to feel any pleasure.

dignity

There are millions of health reasons to avoid alcohol and other drugs. And then there's the barf factor. Have you ever gotten so drunk that you've thrown up in front of your friends (or on them)? Not a pretty sight or sound. Alcohol and drugs can make you lose control and look stupid. See yourself as others see you. How do you look when you fall into the furniture?

self-deception

Drugs and alcohol are called mood-altering substances because they change your mood. But when the drug wears off, you are frequently worse off than when you started. When you give up self-control to drugs, you may find yourself somewhere you really don't want to be.

What's in a cigarette?
Over 4,000 chemicals, including acetone, ammonia, arsenic, cadmium, carbon monoxide, DDT/Dieldrin, formaldehyde, hydrogen cyanide, methane, nitrobenzene, toluene, and vinyl chloride.

SOURCE: American Cancer Society

NICOTINE
the Profit Machine

Smoking yellows your teeth, wrinkles your skin, and causes bad breath.

Cigarette ads are fairy tales. Everybody parties; nobody is slowly dying from lung cancer or heart disease. To sell you on smoking, tobacco companies pretend it makes you confident and sophisticated.

Only you can make yourself confident and sophisticated — no external substance can do it for you.

The more people smoke, the more money the tobacco companies make. Just whose “happily ever after” are those ads really about?

Step back & think:

- If I've felt tempted to use alcohol, tobacco, or other drugs, where did that impulse come from?
- How can I feel better about myself?
- Which friends can I count on?
- Which adults can I confide in?
- What are my top two goals in life? What steps can I take to achieve them?

- Alcohol can cause serious liver damage.
- Marijuana impairs your memory and ability to concentrate.
- Alcohol-related accidents are the number one cause of death for adolescents.
- Every day more than 1,000 adults die prematurely as a result of starting smoking as a teen.
Joe

Joe, age 17, once felt that he could handle drugs. What he found out was that drugs had the upper hand.

“It’s remarkable how addiction catches you unaware. Everybody else sees it. You’re the only one who doesn’t. The sense of denial is enormous.”

Joe’s girlfriend became terrified that he would overdose on cocaine. She wrote him a letter urging him to stop. He crumpled it and tossed it onto his bedroom floor. A few days later his mother told him she found the letter. Joe’s parents talked him into getting treatment.

Even so, he did not admit he was addicted until he was in detox at the hospital.

“Every day I was flipping out. I blamed my parents for all the wrongs in the world, and I hated them for sending me to a clinic like that. I said they didn’t love me, and I yelled and cursed at them. I couldn’t imagine a world without drugs.”

Then he attended Narcotics Anonymous meetings.

“I started to listen. That was extremely helpful to me. Everybody was in the same boat.”

Joe is drug-free now, and grateful to his parents and girlfriend for saving his life. He is determined never to use again.

“I replace the cravings. It’s like filling a void . . . . I put my mind onto something else — art, reading, sculpting, music.”

Amy

Joe’s girlfriend, Amy, was aware that he was drinking and using drugs. She didn’t like it, but she didn’t challenge him either.

Then one day she realized that accepting his drug use might also mean having to accept his death.

She had gone to pick him up for school.

“He was on his bed, and he looked gray and sick . . . . I was touching his head to see if he had a fever. He started yelling at me . . . . then he crawled into the bathroom and started throwing up . . . . Later he told me he was experimenting with cocaine . . . . That really scared me. I mean, my eyes just bulged out of my head, and I started crying.”

Amy called a doctor at a rehab center. After Joe entered its program, Amy was the only friend allowed to visit.

Amy was terrified that when he found out she had helped get him into treatment, he would never speak to her again. Three months after his detox, Amy got up the nerve to confess her role.

To her relief, “He just hugged me — and said ‘thank you.’ Joe now liked the idea of being clean.”

Amy has discovered that getting off drugs wasn’t only healthier for Joe’s body; his mind calmed down too.

“Now he’s controlled his anger . . . . And he’s just a blast to be with, really funny.

“I love him a lot and care about him so much, and I think he does the same for me.”

Why was Amy afraid to tell Joe that she helped get him into treatment?

(continued on 8b)
Robin Tassler

A safe place.
That’s what Robin Tassler, a substance abuse counselor, tries to give students at Palmetto High School in Miami, Florida. “I’m not here to give them a suspension or detention or a grade. I try to give them a place they can find some peace.

“We focus on feelings. . . . When there’s been joy in life, we talk about how we can get back to that joy. Because when you use drugs, you really hide from yourself. I tell students, ‘This is a place we don’t hide.’”

Students say they trust Tassler because she listens, cares, and accepts them for who they are.

“I do have strong opinions about drugs,” Tassler says. “I think they’re terrible, and they destroy people’s spirits, and the kids know how I feel. But I’m not going to pass judgment on what happens. I really try to work on developing a relationship with students.”

Tassler is part of the TRUST program in Miami, an effort to decrease levels of substance use in the Dade County public schools. TRUST counselors assist students who have experienced problems related to substance abuse.

“You have to teach kids how to nurture themselves in spite of where they’ve come from . . . to ask, ‘If you form your family of friends out of people who use drugs, is that really helping you move in the direction you want to move in?’ They know a lot, these kids. They know what drugs do to you. My role is to guide them through the process of making more helpful choices and taking healthy risks.”

Dwight Gooden

For Dwight “Doc” Gooden, the World Series is about much more than baseball. It’s about being on top of the world, about to fall. And about struggling back to the top after hitting bottom.

In 1986, the Mets won the World Series, thanks in part to this talented young pitcher. But early success can be a burden as well as a blessing.

The first sign of trouble came the day after the Mets’ triumph. Gooden didn’t show up at the ticker-tape parade because he’d gotten so drunk the night before. Two months later, he was arrested in Tampa for assaulting a police officer. He denied doing drugs, but routine tests revealed his lie.

Gooden went into treatment but relapsed almost immediately, a pattern he repeated over the next several years.

“I didn’t want to go home and face my wife and kids,” said Gooden. Ashamed and depressed, he considered suicide. His wife walked in and saw him holding a gun. Desperately, his wife and his mother begged him to give life another chance. Once again Gooden went into treatment. This time, he managed to stay sober.

Now what he needed was another chance at baseball. George Steinbrenner gave Gooden a spot on the Yankees. It was a risk; many people had no faith that he had conquered his drug problem.

On May 14, 1996, Gooden proved them wrong. Despite concern about his father, who was hospitalized, Gooden pitched a no-hitter. The next day he presented his father with the game ball.

The Yankees won the World Series that year. This time, Gooden had no trouble showing up for the parade. This win was even sweeter than the first, because it wasn’t only about baseball. It was about reclaiming his life.
BUT ISN’T CLEAN AND SOBER REALLY LONELY AND BORED?
Some people think that life can’t be any fun if they don’t get wasted every day. But nothing could be further from the truth. In recovery, people start succeeding at their goals, enjoying better relationships — and being more in control of their lives.

DOES TREATMENT REALLY WORK?
Addiction is treatable, just like other chronic, relapsing diseases (such as diabetes, hypertension, and heart disease). But like those conditions, it also requires that you change certain behaviors in order to avoid relapsing to the active disease again.

Once you get into treatment — stick it out! Research shows that the longer a person stays in treatment, the better the chance of success.

Follow up treatment with other support. People who follow up treatment have the best success rates.

WHAT ARE SELF-HELP RECOVERY GROUPS? HOW CAN I FIND THEM?
Self-help groups, such as Alcoholics Anonymous, SMART Recovery, and Narcotics Anonymous are attended by people who have had substance abuse problems. The meetings provide hope, encouragement, and round-the-clock support — for free. You don’t have to give your name, sign up, or join, and no one will call your parents. To find them, look in your phone book. Lots of self-help groups hold special meetings now just for young people. If you go to one meeting and feel uncomfortable, try a different one.

DECIDING TO QUIT
If you’re a drug/tobacco/alcohol user, try this exercise to evaluate how it’s affecting you:

On one side of a sheet of paper list the “pros” — what you think you get out of using drugs/tobacco/alcohol (excitement, a feeling of acceptance, etc.) On the other side, list the “cons” — what it costs you (girlfriend broke up with me, parents upset, blew off sports, school problems, always broke, etc.)

If the costs outweigh the benefits, yet you keep using anyway, that’s a substance abuse problem.
Activity
[PREPARE AHEAD OF TIME]

- Brainstorm the kinds of situations in which you would feel social pressure (you’re at a party, and someone brings in beer or cigarettes; you’re in a car, and friends pass a joint around). Now prepare at least two or three realistic ways to decline in these situations, and practice them ahead of time.

WHERE TO GET HELP

SELF-HELP GROUPS
Alcoholics Anonymous (AA) - Check your phone directory for a local AA group
Cocaine Anonymous (CA) - 1-800-347-8998
Narcotics Anonymous (NA) - Check your local directory or call 1-800-662-4357 for a referral in your area
SMART Recovery (216) 292-0220

Organizations to Contact for Information
Hazelden Information Center 1-800-257-7810
National Council on Alcoholism and Drug Dependence, Inc. (212) 206-6770
American Council on Alcoholism 1-800-527-5344

Getting Help
For a Referral to Help in Your Area
Drug and Alcohol Treatment Routing Service: 1-800-662-HELP

Alabama - 1-800-762-3790
Alaska - (907) 561-4213
Arizona - (602) 381-8999
Arkansas - (501) 280-4500
California - (916) 445-0834
Colorado - (303) 866-7480
Connecticut - 1-800-203-1234
Delaware - (302) 571-6975
District of Columbia - (202) 727-5163
Florida - (904) 488-0900
Georgia - (404) 656-2465
Hawaii - (808) 586-3961
Idaho - (208) 334-5935
Illinois - (312) 814-3840
Indiana - (317) 232-7939
Iowa - (515) 281-3641, Mon.-Fri., 8 A.M.-4:30 P.M.
Kansas - (913) 296-3925
Kentucky - (502) 564-2880, Mon-Fri. 8 A.M.-4:30 P.M.
Louisiana - (504) 342-9354, Mon.-Fri. 8 A.M.-4:30 P.M.
Maine - (207) 287-2595, Mon.-Fri. 8 A.M.-5 P.M.
Maryland - (410) 767-6910
Massachusetts - 1-800-327-5050, 24 hours
Michigan - (517) 335-0278
Minnesota - (612) 296-3991
Mississippi - (601) 359-1288, Mon.-Fri., 8 A.M.-5 P.M.
Missouri - (573) 751-4942
Montana - (406) 444-3964
Nebraska - (402) 471-2851
Nevada - (702) 687-4790, (northern Nevada); (702) 486-8250, (southern Nevada), Mon.-Fri. 8 A.M.-5 P.M.
New Hampshire - (603) 271-6100
New Jersey - (609) 292-7232
New Mexico - 1-800-962-8963, Mon.-Fri. 8:30 A.M.-5 P.M.
New York - (518) 473-3460
North Carolina - (919) 733-4670, Mon.-Fri. 8 A.M.-5 P.M.
North Dakota - (701) 328-8920, Mon.-Fri. 8 A.M.-5 P.M.
Ohio - (614) 466-3445
Oklahoma - 1-800-522-9054, 24 hours
Oregon - 1-800-621-1646
Pennsylvania - 1-800-582-7746, Mon.-Fri. 8:30 A.M.-5 P.M.
Rhode Island - 1-800-622-7422
South Carolina - 1-800-942-3425
South Dakota - (605) 773-3123, Mon.-Fri. 8 A.M.-5 P.M.
Tennessee - (615) 741-1921
Texas - 1-800-832-9623
Utah - (801) 538-3939
Vermont - (802) 651-1550
Virginia - (804) 786-3906
Washington - (360) 902-0650
West Virginia - (304) 558-2276
Wisconsin - (608) 266-2717
Wyoming - (307) 777-7116, Mon-Fri 9 A.M.-5 P.M.
Developed by Thirteen/WNET to accompany MOYERS ON ADDICTION: CLOSE TO HOME

How have you seen alcohol and other drugs affect lives around you?

NADINE:
They've changed kids who would've been fine otherwise. Kids disappear from school for months at a time. Their lives get screwed up.

How do you handle peer pressure?

ELLISON:
When you see people in your neighborhood or family go down, it makes you not want to go that way.

KYESHA:
People at school know what I'm all about, and I'm not about drugs. I know kids who use, and I get along with everybody. It's just that we've made different choices.

NICOLE:
I surround myself with friends who don't use.

How do you cope with boredom and loneliness?

ELLISON:
I've been boxing for about a year and a half now with a trainer who trained four of my uncles. It requires a lot of discipline and forces you to focus your mind. It's a great way to get out frustrations.

When I go to the gym — or to church — my mind feels more centered on doing the right thing. I also coach a basketball team for little kids. Those guys make me feel good and make me laugh a lot.

FRUSTRATION IS THE MOMENT BETWEEN HOPELESSNESS AND DISCOVERY.

Most middle and high school students don't use drugs. The New York high school students interviewed here attend public and private schools. They include an athlete, future teachers, and an aspiring actress. They are from different cultural and economic backgrounds, but all are living drug-free lives.

Can you think of a time when you were frustrated — then figured out a way to make things better? • If your life were a movie, what would the title be?

Good luck to you.

Bill Moyers
N ICOLE:

I always used to complain, “I’m bored, I’m bored.” Then I got sick of hearing myself say it, and got a job. I’ve learned a lot about working with people and gained some independence through the money I’ve earned. As I see it, drugs are all about dependence, and I am working towards independence.

N ADINE:

I just realize that’s life. Sometimes I’m bored. Sometimes I’m lonely. It passes. Sometimes I use an activity to deal with it, such as writing or reading, but usually I would rather just let myself feel the different emotions.

> What do you do for fun?

J ESSICA:

I’ve got a friend who’s starting to be, like, “It’s Friday night, we should be drinking,” and I just tell her, “Don’t worry about it, we’ll have fun.” I also remind her of the kids who hang out in the park getting drunk every weekend. Every weekend. That sounds pretty boring, too.

E LLISON:

Get together with friends and chill, see movies, talk about stuff, act crazy, look for girls.

K YESHA:

We go to the movies, bowling. I can go to a party and have a good time without drinking. I eat and dance. I just drink soda.

> Who can you talk to?

J ESSICA:

I get on the phone and talk with my friends. If I’m not myself, they’ll ask me what’s wrong, and I’ll usually end up laughing about it.

What were the highs and lows of your life so far? What made the high points so good? The lows so hard? What or who helped you get through them?

N ICOLE:

I talk to my Mom. She’s very straight with me.

N ADINE:

My parents aren’t the first people I would go to to talk about this kind of thing. I mean, sometimes people think that just because I’m not doing drugs, I must live in the Brady Bunch. It’s not like that at all. I’m close with my guidance counselor and some teachers. Sometimes it’s easier to talk to them than to other kids.

> What are your plans for the future?

N ADINE:

I’m excited about going to college. As a career I’d like to work with kids, because I feel I’ve taken a different path as a teenager, and I’d like to show kids that even though it can be hard, it can be done, and it pays off in the end.

N ICOLE:

I want to be an English teacher and work with the deaf. When you know what you want to do and where you’re going, drugs really don’t fit into the picture.

E LLISON:

I feel I could be happy in a corporation or as a lawyer. That would represent a real journey for me and make me feel I’d really accomplished something special, considering where I come from.

K YESHA:

I plan to attend college and become a professional dancer and actress. And if I ever make it, I don’t want to be ashamed of things I’ve done in the past. That’s something that keeps me focused. That, and the fact that I have so much support from my friends.

J ESSICA:

I want to live a good life — not make too many mistakes, and learn from the ones I do make.