An eighth grade unit on tobacco, drugs, and alcohol is presented in this curriculum guide for teachers. The introductory section states general objectives and specific knowledge facts for each of the three study areas. Also, skills and attitudes to be developed, general motivating activities, and teaching hints for slow and rapid learners are included. Individual units enumerate basic concepts and suggest teacher and student materials, audio visual aids, motivating questions, and activities to develop the concepts. An appropriate glossary of terms and additional teacher information and ideas supplement each study area. Culminating activities and teacher-pupil evaluation of knowledge, skills, and attitudes for the entire unit conclude the guide. Sources of information and a bibliography are listed. This work was prepared under an ESEA Title III contract. (BL)
Great Falls Public Schools
Great Falls, Montana

Tobacco, Drug, and Alcohol Unit

Eighth Grade

ESEA Title III I.M.C. Project 5115
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Teaching about drugs, alcohol and tobacco entails much more than the presentation of facts. Although this is essential, emotional overtones in the beliefs students hold about these substances can be detrimental in achieving the desired objectives.

One of the foremost thoughts in the mind of the adolescent and teenager is the question of what drugs, alcohol, and tobacco are. At this time the youth is striving for a particular identity, trying to fit into the group of peers, parents, and society as a whole. While the teenager is reaching for something for himself, he is subjected to many conflicting ideas and opinions from others, each trying to give sound and, hopefully, factual, unbiased information to aid him in making personal decisions.

In addition to the help offered by others, the youth of today is exposed to many things, to question, to examine. But if a youngster is capable of assessing the facts and reality of the dangers involved in the abuse of tobacco products and alcohol, he will be able to avoid this kind of experimentation. Moreover, if he genuinely appreciates the world around him, he is not likely to think about trading real life experiences for something that will lower his self-esteem.

This unit is designed in a manner that the material presented will help the student recognize and appreciate the total human worth. It is intended that the student will be able to make wise and responsible personal decisions.

"The federal funds in this project were provided by ESEA Title III. The Elementary and Secondary Education Act is designed to encourage the development of new and innovative programs and to supplement regular school funds.
INTRODUCTION

The passing on of a body of scientific, emotional overtones in the beliefs and attitudes of the teacher can entail much more than the desired objectives.

While the teenager is reaching out and trying to establish an identity for himself among his peers, the youth of today is experiencing a desire to experiment with things in the mind of the adolescent and teenage group today is that of alcohol, and, hopefully, factual, unbiased information on which to base his opinions.

Moreover, if he genuinely appreciates the many valuable attributes of a youngster is capable of making intelligent decisions based on the dangers involved in the abuse of tobacco, alcohol, and drugs, he may well entation. Moreover, if he genuinely appreciates the many valuable attributes of a not likely to think about trading real living for "kicks" now or in the future.

It is intended that the student will be aided in his efforts to make for himself a realization. But if a youngster is capable of making intelligent decisions based on the dangers involved in the abuse of tobacco, alcohol, and drugs, he may well entation. Moreover, if he genuinely appreciates the many valuable attributes of a not likely to think about trading real living for "kicks" now or in the future.

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The project was provided by ESEA Title III. Title III of the Elementary and Secondary Education Act is designed to encourage the development of new ideas, to demonstrate worthwhile through exemplary programs and to supplement existing programs.
OBJECTIVES

To present to the students the pertinent facts concerning tobacco, alcohol, and drugs will encourage students to examine the facts objectively and then make their own decisions.

KNOWLEDGE

TOBACCO

General
Smoking is a habit that usually starts early in life and, because of this, impaired body functions result from it.

Specific
Smoking is a habit formed early in life.
People smoke for a variety of reasons.
Teenagers and adults usually smoke for different reasons.
Smoking is directly linked to lung cancer, heart disease, various respiratory diseases, and is an expensive habit.
Habits can start with continued use.
Habits are hard to break; they are related to the entire body process.
Smoking is an expensive habit.
Smoking is costly to life and health as well as monetarily.
The tobacco industry is the nation's fifth largest and, presently, quite volatile and far-reaching.
Taxes from cigarette sales are an important source of revenue for the government.
The tobacco industry spends many millions of dollars annually on advertising.
If smoking is curtailed, the United States tobacco companies would have to leave the market to make up for losses.
OBJECTIVES

The pertinent facts concerning tobacco, alcohol, and drugs in such a way that it examine the facts objectively and then make their own decisions.

KNOWLEDGE

Usually starts early in life and, because of this habit, many serious diseases and result from it.

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DRUGS

General

To present factual knowledge concerning the use and abuse of drugs so as to clear
question that the students may have regarding drugs.

To develop an understanding of the physiological, psychological, and sociologic
drug abuse of the hallucinogens, stimulants, and depressants.

To gain an understanding of the control measures being taken concerning drug ab.
become involved in making the world a happier and healthier place in which to l
To present an objective point of view so that students can make their own decis

Specific

A drug is any chemical substance, other than food, which affects body functions.
There are proper medical uses and improper uses of drugs.

Drug abuse is the use of a drug substance which may have a detrimental effect t without legal medication.

People take drugs for different medical and legitimate reasons.

Hallucinogens are partly a depressant and partly a stimulant which affects sens
Stimulants stimulate brain and mind functions and gives a sensation of well-bei excitation, alertness, and wakefulness.

Depressant depress the central nervous system producing insensitivity, relaxati
Drug dependence is the loss of ability to control the use of a drug, with relat on a regular continuous basis.

Drugs which produce psychological dependence (mental desire) are the hallucinog
knowledge concerning the use and abuse of drugs so as to clear up any misinformation or
students may have regarding drugs.

- **Objectives**

  - Understanding of the physiological, psychological, and sociological effects resulting from
    hallucinogens, stimulants, and depressants.
  - Understanding of the control measures being taken concerning drug abuse and how everyone can
    make the world a happier and healthier place in which to live.
  - Having the right point of view so that students can make their own decisions based upon facts.

  - A substance, other than food, which affects body functions or structure.
  - Medical uses and improper uses of drugs.
  - Knowledge of a drug substance which may have a detrimental effect to the individual or society,
    particularly a depressant and partly a stimulant which affects sensory interpretation.
  - Brain and mind functions and gives a sensation of well-being through producing
    insensitivity, relaxation, and/or sleep.
  - The loss of ability to control the use of a drug, with related administration required
    for different medical and legitimate reasons.
  - Psychological dependence (mental desire) are the hallucinogens and stimulants.
OBJECTIVES (continued)

Drugs which produce physical (body builds the dependence) and psychological (opiates, tranquilizers and barbiturates).

Drugs which build up a tolerance (the body needs more and more to get a high) include barbiturates, stimulants (amphetamine) and LSD.

Drugs do not solve the cause of aches and pains within the body.

The use of narcotics, not under direct medical supervision, as possession and selling is illegal and subject to criminal prosecution.

Dangerous drugs are legally classified as barbiturates, amphetamine, and marijuana which is legally classified as a narcotic.

Those persons giving or selling dangerous drugs of illicit forms are illegal and subject to criminal prosecution.

There are many varied causes of why people abuse drugs. Most factors relate to physical, psychological and emotional immaturity.

There is no single, conclusive symptom to prove the use of drugs. One must look at the physical symptoms, and any mechanical indications of drug abuse.

ALCOHOL

General

To acquaint the student with how alcohol is used in our society as a use, psychological and sociological problems that come with its abuse.

Specific

Point out that alcohol has a history which directly affects how we live.

Point out how the compound alcohol affects the body of an individual as well as of organs.

Emphasize that alcohol's dehydration action and its effect on the brain behavior and later in his body tissues.
OBJECTIVES (continued)

Body builds the dependence and psychological dependence are the depressants (biturates).

Use (the body needs more and more to get same effect) are the opiates, amphetamine and LSD.

Aches and pains within the body.

Without direct medical supervision, as possessing, or illegally transferring, or using is subject to criminal prosecution.

Classified as barbiturates, amphetamine, and hallucinatory drugs (excluding LSD).

Dangerous drugs of illicit forms are illegal and subject to criminal sanctions.

Why people abuse drugs. Most factors relate to the user's mental, social, and physical conditions.

Symptom to prove the use of drugs. One should consider the social symptoms, mechanical indications of drug abuse.

How alcohol is used in our society as a useful product together with the problems that come with its abuse.

History which directly affects how we live today.

Alcohol affects the body of an individual as it passes through each system and its action and its effect on the brain will cause changes in man's tissues.
Alcohol is not digested in the stomach as food is, but goes directly into the bloodstream.

Alcohol has serious effects on many organs of the body when taken in excess.

Alcohol has many physical properties which make it a valuable ingredient in our industrial products.

Types of alcohol and how each serves a purpose in our industry or society.

The fermentation process and how it is used in the production of alcohol and in some of the foods we use daily.

Alcohol is an indispensable tool of medicine, not when consumed as a beverage, but as a solvant, antiseptics and disinfectants or as an external applicant.

The production, distribution, and sale of alcoholic beverages today is a big business and may be affected by its economics.

The reasons for drinking alcohol are numerous and real to those who experience them.

The teenager has a unique risk in the indulgence of alcohol.

Imitation, sociability, and popularity are probably the most important reasons for the excess of alcohol by the young.

Cultural influences play a very important role in the drinking habits of both the adults and the teenager.

The drinking patterns of different cultures can be easily seen by comparing the Jewish and
OBJECTIVES (continued)

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...ms of different cultures can be easily seen by comparing the Jewish and the Irish people.
OBJECTIVES (continued)

GENERAL

To provide the student with the facts concerning the use of tobacco, alcohol, and drugs.

To correlate these facts with human behavior.

To encourage the students to make use of the material presented to help decrease the use.

SKILLS

Development of new skills in research

Development of critical thinking as an aid in making decisions.

Development of the scientific method of problem solving.

Development of self-confidence in meeting strangers, through interviews.

Development of:

- increase facility in handling new vocabulary
- use of equipment
- taking notes
- organization of ideas and concepts into logical patterns
- evaluating charts, graphs, and other audio-visual aids
- writing and giving oral reports
OBJECTIVES (continued)

GENERAL

The student with the facts concerning the use of tobacco, alcohol, and drugs.
these facts with human behavior.
the students to make use of the material presented to help in making wise decisions concerning

SKILLS

of new skills in research
of critical thinking as an aid in making decisions.
of the scientific method of problem solving.
of self-confidence in meeting strangers, through interviews.
of:
  increase facility in handling new vocabulary
  use of equipment
  taking notes
  organization of ideas and concepts into logical patterns
  evaluating charts, graphs and other audio-visual aids
  writing and giving oral reports
OBJECTIVES (continued)

ATTITUDES

Student Attitudes

To develop in the student the realization of his responsibility to himself, his family, and society as a whole.

To appreciate one's body as a finely balanced organism that can be seriously damaged with drugs and other harmful substances.

The realization that one doesn't need a chemical means to achieve status and a sense of other emotional needs.

To develop an understanding of the scope of the problem and the cause of conditions.

To instill in the student the realization that one's life can be more satisfying if one helps others.

To realize that the law enforcement people are only interested in their welfare and not to put them down.

Smoking, drinking, and taking drugs can be costly in terms of health and finances.

Habits are learned, not inborn; now is the time to learn good habits.

Every age has its own problems related to growth, both physical and emotional. In growth, one must be aware of the factors involved and make a serious attempt to adjust.

Teacher Attitudes

Respect the opinions of all of your students; do not let them turn you off.

Develop a positive attitude as a key to effective results.

Understand that our environment is changing and that facts and moral truths need to
OBJECTIVES (continued)

ATTITUDES

At the realization of his responsibility to himself, his family, and his community or
as a finely balanced organism that can be seriously damaged by the experimentation
of harmful substances.

He doesn't need a chemical means to achieve status and a sense of belonging or to meet
the realization that one's life can be more satisfying if he takes an active interest
in the realization of the problem and the cause of conditions.

Enforcement people are only interested in their welfare and are not attempting to degrade
taking drugs can be costly in terms of health and finances. Is it worth it?

Inborn; now is the time to learn good habits.

Problems related to growth, both physical and emotional. In order to insure good
of the factors involved and make a serious attempt to adjust accordingly.

I all of your students; do not let them turn you off.

As a key to effective results.

Environment is changing and that facts and moral truths need to be **reinterpreted**.

OBJECTIVES (continued)

Keep lines of communication open.
Avoid the scare technique.
Avoid creating an atmosphere of distrust and suspicion.
Avoid stereotype users or abusers.
Approach changing attitudes through the subtle and unconscious approach.
Avoid the head-on approach of an attitude you want to change.
Don't fake answers, be prepared to say "I don't know."
Do not moralize or preach about the evils of using drugs, alcohol, or tobacco. Students make their own decisions.
Avoid using terminology that is not meaningful to the students.
OBJECTIVES (continued)

- Communication open.
- Technique.
- Atmosphere of distrust and suspicion.
- Users or abusers.
- Attitudes through the subtle and unconscious approach.
- Approach of an attitude you want to change.
- Be prepared to say "I don't know."
- Preach about the evils of using drugs, alcohol, or tobacco. Outline the facts and let them make their own decisions.
- Philosophy that is not meaningful to the students.
MOTIVATING ACTIVITIES

TOBACCO

Invite a resource person from the Cancer Society or Heart Association to talk about the effects of smoking.
Ask him to tell only enough of the highlights to stimulate interest.

Encourage students to talk about what they already know about the effects of smoking, collection of newspaper and magazine articles relating to smoking. Ask the students to compare what they know with what is made by cigarette advertisers.

Ask students about some of the good habits they have; also encourage their sense of humor.

Ask: "Are habits easily broken?" Show a film concerned with smoking. (Example: "Phony Folks")

Encourage students to tell about an anti-smoking commercial that they have seen.

DRUGS

Encourage students to bring and report on articles from newspapers and magazines.

Take a survey of the drugs in one's own home; make a chart of how these drugs are stored, state the proper usage, and list effects if abused.

Encourage students to discuss openly the current drug scene: (why abusing drugs, mental, emotional harms can be derived, attitudes on the control) by the use of committee reports, panels, and individual reports.

Invite doctor or psychiatrist that has worked with treating teenage drug addiction and emotional problems that may encounter while or after abusing drugs.

Ask a law enforcement officer from the police department, and the sheriff's department, stressing local, and of the control measures being taken, federal and local.

Ask District Attorney or judge to speak on what penalties are being enforced against drug abusers and pushers.

Contact speaker's bureau to see if a former drug abuser will speak to the students.

Possibly conduct a controlled laboratory experiment with mice on the effect of drugs on behavior.
MOTIVATING ACTIVITIES

On from the Cancer Society or Heart Association to tell some of the effects of tobacco.
ough of the highlights to stimulate interest.

talk about what they already know about the effects of tobacco. Have them make a
r and magazine articles relating to smoking. Ask them to analyze some of the claims
iters.
ne of the good habits they have; also encourage their telling about habits they would
Are habits easily broken?" Show a film concerned with cigarette advertising.
"

tell about an anti-smoking commercial that they have recently seen on TV.

bring and report on articles from newspapers and magazines concerning the drug scene.
ugs in one's own home; make a chart of how these drugs are used for medical purposes,
, and list effects if abused.

discuss openly the current drug scene: (why abusing, what possible benefit, what social,
s can be derived, attitudes on the control) by the use of buzz groups, socio-dramas,
0 individual reports.

iatrist that has worked with treating teenage drug abusers; bringing out the mental, social,
that may encounter while or after abusing drugs.

officer from the police department, and the sheriff's department to talk about laws
f the control measures being taken, federal and local.

or judge to speak on what penalties are being enforced in the local courts concerning

au to see if a former drug abuser will speak to the students or tape an interview.

rolled laboratory experiment with mice on the effects drugs have on the nervous system.
Create problem-solving situations on why drugs are abused, or create some.

Review the biological effects or symptoms of drug abuse by pantomime or pantomime or

Review slang terms by dividing class into teams, asking each member to

**ALCOHOL**

Make posters showing how alcohol is used in industry, in medicine, and beverages.

Have panel discussions of the pros and cons of the 18 year old drinking.

Have surveys on the number and kinds of users in the junior high level.

Have students collect advertisements showing the extent of advertising.

Have demonstrations to show how alcohol affects different materials such white, etc.

Do experiments of fermentation and distillation.
MOTIVATING ACTIVITIES (continued)

eng situations on why drugs are abused, or create socio-dramas.
l effects or symptoms of drug abuse by pantomime or charade-type games.
ly dividing class into teams, asking each member to interpret a slang term or statement.
ng how alcohol is used in industry, in medicine, and in various products, excluding the
ions of the pros and cons of the 18 year old drinking age.
number and kinds of users in the junior high level.
et advertisements showing the extent of advertising and kinds of alcoholic beverages.
to show how alcohol affects different materials such as raw meat, plant leaves, egg
mentation and distillation.
TEACHING HINTS FOR SLOW AND RAPID LEARNERS

Slow Learner

Encourage students to make a notebook of those facts that are meaningful to them.
Encourage the slow learner to participate in class activities.
Slow learners will often be interested in developing and constructing posters and bulletin boards.
Encourage students to browse through the pamphlets and select those that are of interest.

Rapid Learner

Challenge these students to research the economics of smoking, drugs, and alcohol.
1. Manufacturing
2. Usage
3. Government revenue

Encourage the students to develop and broaden their vocabulary of drugs, tobacco, and alcohol.
Challenge the students to research the psychological effects on the body from the use and misuse of these substances.
1. Surgeon General's Report
2. Drug Abuse - Escape to Nowhere
3. Basic Information on Alcohol

The rapid learners might enjoy doing research on the world situation concerning tobacco and alcohol.
1. Use and misuse
2. Production
3. International Law
   a. Economic revenues
   b. Controls

Various research projects could be presented to the class in the form of a panel discussion. Posters or graphs could be used to display their findings.
TEACHING HINTS FOR SLOW AND RAPID LEARNERS

make a notebook of those facts that are meaningful to them.

learner to participate in class activities.
then be interested in developing and constructing posters and bulletin boards.
browse through the pamphlets and select those that are of interest to them.

en's Retort
cape to Nowhere
ption on Alcohol
ight enjoy doing research on the world situation concerning tobacco, alcohol, and drugs.

Law
venues

ects could be presented to the class in the form of a panel discussion or oral reports.
ld be used to display their findings.
As youngsters reach their teens they must begin making decisions on their own. One of these is whether or not to smoke. This unit will be concerned with social and biological aspects of smoking.

A. There are many reasons and influencing factors which will cause or motivate people to smoke.
   1. Teenagers
   2. Adults

B. Influencing Factors
   1. Adults

"Teenagers and Smoking"

"Your Teenage Children and Smoking"
Teachers' materials

<table>
<thead>
<tr>
<th>Teacher Materials</th>
<th>Student Materials</th>
</tr>
</thead>
</table>

reach their teens in making decisions.

One of these is to smoke. This concerned with logical aspects of

Many reasons and factors which will motivate people to

- "Teenagers and Smoking"
- "Smoke Cigarettes, Why?"

- "Your Teenage Children and Smoking"
- "Why Do You Smoke?" (Smoker's Self-testing Kit, Test 3.)
<table>
<thead>
<tr>
<th>Audio Visual</th>
<th>Motivating Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Posters:</td>
<td></td>
</tr>
<tr>
<td>&quot;Decisions, Decisions, Decisions .....&quot;</td>
<td>What are some of the decisions that you have made today?</td>
</tr>
<tr>
<td></td>
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</tr>
<tr>
<td>Transparencies:</td>
<td></td>
</tr>
<tr>
<td>&quot;Maybe I'll Look Older&quot; - T-8-1</td>
<td>What future decisions will you have to make?</td>
</tr>
<tr>
<td>&quot;Big Shot&quot; - T-8-2</td>
<td></td>
</tr>
<tr>
<td>&quot;But My Dear, It Makes Me Look Older&quot; - T-8-3</td>
<td>How many decisions are made where it might change a person's life?</td>
</tr>
<tr>
<td>&quot;Adult Smoking&quot; - T-8-4</td>
<td>Is it important that a student make decisions on sound facts?</td>
</tr>
<tr>
<td>Poster:</td>
<td></td>
</tr>
<tr>
<td>&quot;Benson and Hedges&quot;</td>
<td>Why do you feel teenagers smoke?</td>
</tr>
<tr>
<td></td>
<td>(Lead into questionnaire)</td>
</tr>
<tr>
<td>Poster:</td>
<td></td>
</tr>
<tr>
<td>&quot;You've Come a Long Way, Baby&quot;</td>
<td>Why do you think older people smoke?</td>
</tr>
<tr>
<td></td>
<td>1. Calm nerves</td>
</tr>
<tr>
<td></td>
<td>2. Control weight</td>
</tr>
<tr>
<td></td>
<td>3. Gain satisfaction</td>
</tr>
<tr>
<td>Poster:</td>
<td></td>
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<tr>
<td></td>
<td>What is the message that each poster is trying to project?</td>
</tr>
<tr>
<td>Motivating Questions</td>
<td>Activities</td>
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<tr>
<td>-------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>What are some of the decisions that you have made today?</td>
<td>Give students questionnaire on teenage smoking prior to transparencies.</td>
</tr>
<tr>
<td>What future decisions will you have to make?</td>
<td>After transparencies, put responses on recording. Use as class discussion with the aid of teenage series of transparencies.</td>
</tr>
<tr>
<td>How many decisions are made where it might change a person's life?</td>
<td></td>
</tr>
<tr>
<td>Is it important that a student make decisions on sound facts?</td>
<td></td>
</tr>
<tr>
<td>Why do you feel teenagers smoke?</td>
<td></td>
</tr>
<tr>
<td>(Lead into questionnaire)</td>
<td></td>
</tr>
<tr>
<td>Why do you feel adults smoke?</td>
<td></td>
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<tr>
<td>(Promote discussion)</td>
<td></td>
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<tr>
<td>Why do you think older people smoke?</td>
<td></td>
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<tr>
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<tr>
<td></td>
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</tr>
<tr>
<td>Some a Long Way,</td>
<td></td>
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</tbody>
</table>

**Promote discussion**

- Look Older" - T-8-1
- T-8-2
- T-8-3
- T-8-4
- Hedges"
TOBACCO (continued)

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Teacher Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Teenagers</td>
<td>&quot;Smoking Facts You Should Know&quot;</td>
</tr>
<tr>
<td>a. Peer approval</td>
<td>Tobacco and Health - A Handbook For Teachers, pp. 43-49</td>
</tr>
<tr>
<td>b. Advertising</td>
<td>Tobacco and Health, James and Rosenthal (School Library)</td>
</tr>
<tr>
<td>c. Image</td>
<td></td>
</tr>
<tr>
<td>d. Parents</td>
<td></td>
</tr>
</tbody>
</table>

II. There are many health factors involved in smoking because of the poisonous substances contained in cigarettes.

"Answering the Most Often Asked Questions About Cigarette Smoking and Lung Cancer"
<table>
<thead>
<tr>
<th>Teacher Materials</th>
<th>Student Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Smoking Facts You Should Know&quot;</td>
<td>&quot;Facts For Teenagers - Smoking, Health, and You,&quot; pp. 6-13</td>
</tr>
<tr>
<td>Tobacco and Health - A Handbook For Teachers, pp. 43-49</td>
<td></td>
</tr>
<tr>
<td>Tobacco and Health, James and Rosenthal (School Library)</td>
<td></td>
</tr>
<tr>
<td>Filmstrip w/record and guide:</td>
<td>&quot;What the Cigarette Commercials Don't Show&quot;</td>
</tr>
<tr>
<td>&quot;Cigarettes and health, challenge for educators&quot;, from American Cancer Society #75</td>
<td></td>
</tr>
<tr>
<td>&quot;Answering the Most Often Asked Questions About Cigarette Smoking and Lung Cancer&quot;</td>
<td>&quot;Facts For Teenagers - Smoking, Health and You,&quot; pp. 16-21</td>
</tr>
<tr>
<td>Audio Visual</td>
<td>Motivating Questions</td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Filmstrips:</strong></td>
<td>How important is the theory that to be accepted by your friends, you must smoke?</td>
</tr>
<tr>
<td>&quot;Critical Areas of Health&quot; SVE # 89 - &quot;Tobacco and Your Health&quot; w/record and guide</td>
<td>Do you feel that smoking parents and older brothers and sisters who smoke are a force to be considered in connection with teenage smoking?</td>
</tr>
<tr>
<td><strong>Transparency:</strong></td>
<td>Do you think that cigarette commercials are propaganda? One sided?</td>
</tr>
<tr>
<td>&quot;Smoking Parents, Smoking Children&quot; - T-8-5</td>
<td>For what reasons are the three major networks, N.B.C., C.B.S., and A.B.C. banning cigarette commercials in 1970-71?</td>
</tr>
<tr>
<td><strong>Films:</strong></td>
<td>Tell about some of the T.V. commercials that advertise cigarettes. What are some of their claims?</td>
</tr>
<tr>
<td>#1327 - &quot;Breath of Air&quot; ACS #1334 - &quot;Smoking and You&quot; McGraw-Hill</td>
<td>What type of diseases are often associated with smoking?</td>
</tr>
<tr>
<td>Motivating Questions</td>
<td>Activities</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>How important is the theory that to be accepted by your friends, you must smoke?</td>
<td>Discuss the filmstrips and the ideas they present.</td>
</tr>
<tr>
<td>Do you feel that smoking parents and older brothers and sisters who smoke are a force to be considered in connection with teenage smoking?</td>
<td>Discuss reasons adults smoke. Use transparency as a guide to create comments on student's attitude on adult smoking as a factor in teenage smoking.</td>
</tr>
<tr>
<td>Do you think that cigarette commercials are propaganda? One sided?</td>
<td>Collect cigarette advertisements from newspapers and magazines.</td>
</tr>
<tr>
<td>For what reasons are the three major networks, N.B.C., C.B.S., and A.B.C. banning cigarette commercials in 1970-71?</td>
<td>Analyze television claims. Students take notes and evaluate the claims.</td>
</tr>
<tr>
<td>Tell about some of the T.V. commercials that advertise cigarettes. What are some of their claims?</td>
<td>Use the mechanical smoker to illustrate the collection of tars and nicotine.</td>
</tr>
<tr>
<td>What type of diseases are often associated with smoking?</td>
<td></td>
</tr>
</tbody>
</table>
TOBACCO (continued)

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Teacher Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Smoking Effects On The Body</td>
<td>Tobacco and Health - A Handbook For Teachers, pp. 32-52</td>
</tr>
<tr>
<td>1. Cancer</td>
<td>&quot;1970 Cancer Facts and Figures&quot;</td>
</tr>
<tr>
<td>2. Heart disease</td>
<td>&quot;Smoking and Health - Report of the Advisory Committee to the General of the Public Health&quot;</td>
</tr>
<tr>
<td>3. Respiratory disease</td>
<td>&quot;Teaching About Cancer&quot;</td>
</tr>
</tbody>
</table>

III. There is a lot of money involved in smoking.

   A. What is a habit?
      1. How is it started?
      2. How can it be broken?

   Tobacco and Health - A Handbook For Teachers, pp. 19, 44-45

Cigarettes...America's No. 1 Health Problem
<table>
<thead>
<tr>
<th>Teacher Materials</th>
<th>Student Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco and Health - A Handbook For Teachers, pp. 32-52</td>
<td>&quot;Smoking or Health&quot; (Lindsay)</td>
</tr>
<tr>
<td>&quot;1970 Cancer Facts and Figures&quot;</td>
<td>&quot;The Facts About Smoking and Health&quot;</td>
</tr>
<tr>
<td>Smoking and Health - Report of the Advisory Committee to the Surgeon General of the Public Health Service</td>
<td>&quot;Answering the Most Often Asked Questions About....Cigarette Smoking and Lung Cancer&quot;</td>
</tr>
<tr>
<td>&quot;Teaching About Cancer&quot;</td>
<td></td>
</tr>
<tr>
<td>Tobacco and Health - A Handbook For Teachers, pp. 19, 44-45</td>
<td></td>
</tr>
<tr>
<td>&quot;1970 Cancer Facts and Figures&quot;</td>
<td></td>
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<tr>
<td>&quot;Cigarettes...America's No. 1 Public Health Problem&quot;</td>
<td></td>
</tr>
</tbody>
</table>
### Audio Visual

<table>
<thead>
<tr>
<th>Motivating Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are the effects of smoking immediate or does it show up after a lengthy time of smoking? (heart beat, sense diseases)</td>
</tr>
<tr>
<td>Will quitting smoking lessen one's chances of getting one of the diseases related to smoking?</td>
</tr>
<tr>
<td>What is a habit?</td>
</tr>
<tr>
<td>Are habits easy to break once they are formed?</td>
</tr>
<tr>
<td>What causes a habit?</td>
</tr>
<tr>
<td>Are certain people more prone to forming habits than others?</td>
</tr>
<tr>
<td>What is there about cigarettes that causes a habit to form?</td>
</tr>
</tbody>
</table>

#### Poster:
- "The Big Flip-Top Box"

#### Transparency:
- "Rate of Death From Cancer Due To Smoking" - T-8-6

#### Slides:
- "Pathological Sense"

#### Poster:
- "Chained Hands"

#### Film:
- #1341 - "Breaking The Habit" ACS
<table>
<thead>
<tr>
<th>Motivating Questions</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are the effects of smoking immediate or does it show up after a lengthy time of smoking? (heart beat, senses, diseases)</td>
<td>Have the teacher blow smoke through a piece of tissue without inhaling. Blow through another spot after inhaling. This will show how much of the tars and nicotine stayed in the lungs.</td>
</tr>
<tr>
<td>Will quitting smoking lessen one's chances of getting one of the diseases related to smoking?</td>
<td>Discuss Charlie's health - from film, &quot;Breath of Air.&quot; #1327</td>
</tr>
<tr>
<td>What is a habit?</td>
<td>Discuss with the students the various habits that people have, excluding smoking.</td>
</tr>
<tr>
<td>Are habits easy to break once they are formed?</td>
<td>Have students try to arrive at reasons for habits and why they are allowed to continue.</td>
</tr>
<tr>
<td>What causes a habit?</td>
<td>If possible, have an habitual smoker talk to the class about the problem of smoking as a habit. (Elicit questions from the students)</td>
</tr>
<tr>
<td>Are certain people more prone to forming habits than others?</td>
<td></td>
</tr>
<tr>
<td>What is there about cigarettes that causes a habit to form?</td>
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<tbody>
<tr>
<td>B. Cost of maintaining the habit of smoking</td>
<td></td>
</tr>
<tr>
<td>1. Cost goes up with increase of habit</td>
<td></td>
</tr>
<tr>
<td>2. Money could be used for other things</td>
<td></td>
</tr>
<tr>
<td>C. Cost in human lives</td>
<td>Tobacco and Health, James</td>
</tr>
<tr>
<td></td>
<td>and Rosenthal (School Library)</td>
</tr>
<tr>
<td>1. Death rates rise with rate of cigarette consumption.</td>
<td></td>
</tr>
<tr>
<td>2. Quitting smoking decreases the chances of dying prematurely.</td>
<td></td>
</tr>
<tr>
<td>Teacher Materials</td>
<td>Student Materials</td>
</tr>
<tr>
<td>-------------------</td>
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</tr>
<tr>
<td>the habit</td>
<td></td>
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<td>which increase</td>
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<tr>
<td>used for</td>
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</tbody>
</table>

Tobacco and Health, James and Rosenthal (School Library)  "Cigarettes...America's No. 1 Public Health Problem"

"The Story of an Ex-Smoker"
Audio Visual

Motivating Questions

Act

Is the monetary cost of smoking actually worth it?

Have smokers spent so much money on cigarettes?

What reasons do you suppose smokers have to spend so much money on cigarettes?

Film:

#1161 - "No Smoking" Sid Davis

Transparencies:

"Is It Worth It?" - T-8-7 A, B, C, D

"Responsibility of the Tobacco Industry" - T-8-8

"How Teenagers See Themselves" - T-8-9 A, B, C

Poster:

"Is It Worth It...$5,000 in 20 Years"

Does it appear that economic value of smoking is worth the risk to human life?

Has the economic value been emphasized so much?

Why do you suppose quitting smoking is emphasized so much?

It has been proven that cigarette smoking causes cancer. Why doesn't this scare?
Motivating Questions | Activities
--- | ---
Is the monetary cost of smoking actually worth it? | Have students compute the cost of smoking one package of cigarettes per day over a period of one year.
What reasons do you suppose smokers have to spend so much money on cigarettes? | Have students prepare charts on the death rate of a smoker.
Does it appear that economic value of smoking is worth the risk to human life? | Discuss the many things people could buy with the money not spent on cigarettes.
Why do you suppose quitting smoking is emphasized so much? | 
It has been proven that cigarette smoking causes cancer. Why doesn’t this scare? |
### TOBACCO (continued)

<table>
<thead>
<tr>
<th>Concepts</th>
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</tr>
</thead>
<tbody>
<tr>
<td>D. Financial benefits to the United States from smoking</td>
<td>Book: James and Rosenthal Tobacco and Health, 1962 by Charles C. Thomas, Publisher 172-190</td>
</tr>
<tr>
<td>b. Employment</td>
<td>Public Affairs Pamphlet 1964 pp 53-56</td>
</tr>
<tr>
<td>c. Advertising</td>
<td>Reprint: &quot;Teenagers and Smoking&quot; A report conducted for the American Cancer Society by Lieberman Research Inc.</td>
</tr>
<tr>
<td>d. New responsibility of tobacco industries</td>
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<tr>
<td>Teacher Materials</td>
<td>Student Materials</td>
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<tr>
<td>---------------------------------------------------------------------------------</td>
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<tr>
<td><strong>As to the smoking</strong></td>
<td><strong>Pamphlet: &quot;Americas No. 1 Public Health Problem&quot; Public Affairs Pamphlet #439. pp 11-12</strong></td>
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<tr>
<td>Book: James and Rosenthal, <em>Tobacco and Health</em>, 1962 by Charles C. Thomas, Publisher</td>
<td>172-190</td>
</tr>
<tr>
<td>Reprint: &quot;Teenagers and Smoking&quot; A report conducted for the American Cancer Society by Lieberman Research Inc.</td>
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<tr>
<td>Audio Visual</td>
<td>Motivating Questions</td>
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<tr>
<td><strong>Filmstrip:</strong> &quot;Tobacco Statistics and Chemistry&quot; Eye-Gate #613-85</td>
<td>What would the effect on the nation's economy be if everyone were to quit smoking?</td>
</tr>
<tr>
<td><strong>Transparency:</strong> &quot;Economics&quot;</td>
<td></td>
</tr>
<tr>
<td><strong>Transparency:</strong> &quot;Responsibility of Industry&quot;</td>
<td>Is there anything the tobacco industry can do to offset the problems created by reduced smoking?</td>
</tr>
<tr>
<td><strong>Poster:</strong> &quot;Bensen and Hedges&quot;</td>
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</tr>
</tbody>
</table>
Motivating Questions

What would the effect on the nation's economy be if everyone were to quit smoking?

Is there anything the tobacco industry can do to offset the problems created by reduced smoking?

Activities

Research concerning the amount of money spent on tobacco in 1969.

Compare the amount with that spent on education, highways, and churches.

Have students research on local distribution and collect data on local sales on the number of various companies that receive revenues for handling of tobacco products.

Visit local merchants and collect data on teenage purchasing of tobacco products.
IV. TEACHER INFORMATION

Habit
a. Nation's No. 1 leading habit
b. 1965 - American's smoked 512 billion cigarettes
c. 8.6 billion cigars
d. 74 million lbs. of pipe tobacco

Tobacco
a. Nation's fifth largest crop
b. Nation's No. 1 health menace
c. 1970 - 59,000 Americans will die from lung cancer

Deaths
a. 16% of death from all causes in U. S. due to cancer
b. All forms of cancer deaths on decline, except lung cancer
c. One in four Americans will someday have cancer

Smoking - Started with American Indian - - about 100 AD
Nicotine - Named after Jean Nicot, a Frenchman
Tobacco - From a plant, "Nicotine Tobacum"
John Ralfe - Introduced tobacco to the colonies
Sir Walter Raleigh - Popularized smoking in England
Tobacco - Today is a major industry in the United States
Advertising - $24.5 million annually spent - radio - TV
Money spent by smokers - 8.6 billion spent by American public annually for tobacco
Revenue from smoking - 3.3 billion are returned to the federal and state governments
Employment - 550 factories in thirty states - 88,000 workers
IV. TEACHER INFORMATION

2 billion cigarettes

acco

e die from lung cancer

s in U. S. due to cancer
on decline, except lung cancer
someday have cancer
ian -- about 100 AD
a Frenchman
obacum"
the colonies
oking in England
in the United States
spent - radio - TV
n spent by American public annually for tobacco products
are returned to the federal and state governments in tobacco tax, annually
y states - 88,000 workers
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>ammonia</td>
<td>colorless, pungent gas compound of nitrogen and hydrogen and as a strong cleaning fluid</td>
</tr>
<tr>
<td>arsenic</td>
<td>a silvery-white, brittle, very poisonous chemical; component of insecticides, glass, medicines; arsenic trioxide has no use</td>
</tr>
<tr>
<td>cancer</td>
<td>a malignant growth of tissue, usually ulcerating, tends to cause general ill health; a carcinoma or sarcoma</td>
</tr>
<tr>
<td>carbon monoxide</td>
<td>compound of carbon and oxygen; given off in car exhaust gas from combustion of any carbonaceous material</td>
</tr>
<tr>
<td>carcinoma</td>
<td>any of several kinds of epithelial cancer</td>
</tr>
<tr>
<td>cardiac</td>
<td>of or near the heart; relating to the upper part of the heart system</td>
</tr>
<tr>
<td>cardiovascular disease</td>
<td>disease of the vessels of the heart</td>
</tr>
<tr>
<td>cell</td>
<td>small microscopic mass of protoplasm; performs life functions</td>
</tr>
<tr>
<td>chronic bronchitis</td>
<td>inflammation of the bronchial tubes; continuing for a long period of time</td>
</tr>
<tr>
<td>cilia</td>
<td>hairlike process found on many cells; capable of vibration</td>
</tr>
<tr>
<td>coronary</td>
<td>pertaining to either of two arteries—right or left—within the wall of the heart</td>
</tr>
<tr>
<td>coronary artery disease</td>
<td>disease of the above mentioned arteries</td>
</tr>
<tr>
<td>decision</td>
<td>the act of making up one's mind; a judgment or conclusion; deciding or settling a question</td>
</tr>
<tr>
<td>depressant</td>
<td>lowering the rate of muscular or nervous activity</td>
</tr>
<tr>
<td>emphysema</td>
<td>an abnormal swelling of the alveoli of the lungs or the chest</td>
</tr>
<tr>
<td>formaldehyde</td>
<td>poison frequently used as a disinfectant</td>
</tr>
</tbody>
</table>
V. GLOSSARY

Colorless, pungent gas compound of nitrogen and hydrogen - NH₃; used in fertilizers, medicine, and as a strong cleaning fluid

A silvery-white, brittle, very poisonous chemical; compounds of it are used in making insecticides, glass, medicines; arsenic trioxide has no taste

A malignant growth of tissue, usually ulcerating, tending to spread, and associated with general ill health; a carcinoma or sarcoma

A compound of carbon and oxygen; given off in car exhaust; produced by the incomplete combustion of any carbonaceous material

Any of several kinds of epithelial cancer

Of or near the heart; relating to the upper part of the stomach

Disease of the vessels of the heart

Small microscopic mass of protoplasm; performs life functions

Inflammation of the bronchial tubes; continuing for a long time

Hairlike process found on many cells; capable of vibratory or lashing movement

Pertaining to either of two arteries—right or left—which arise from the aorta to supply tissue of the heart

Disease of the above mentioned arteries

The act of making up one's mind; a judgment or conclusion reached or given; the act of deciding or settling a question

Lowering the rate of muscular or nervous activity

An abnormal swelling of the alveoli of the lungs or the tissue connecting the alveoli of the lungs

Poison frequently used as a disinfectant
habit - custom - an inclination for an action acquired by repetition practice

hazard risk; danger; peril

hydrogen cyanide poisonous gas; used in execution of criminals

hydrogen sulfide poisonous gas; smell of rotten eggs (Yellowstone Park)

insecticide preparation for destroying insects

lung cancer cancer of the lungs

maturity state or quality of being developed

nicotine C₁₀H₁₄N₂—colorless, oily poison used as insecticide; stimulant

sarcoma form of cancer arising from non-epithelial tissue such as connective tissue, cartilage or bone

stimulant something which arouses or excites—spurs on

tar material that stains the inside of a smoker's lungs and acts as a sticky brown to black liquid with a pungent odor; obtained from the vapor of wood, peat, shale; tars are produced of hydrocarbons and preserving surfaces and organic compounds

tobacco products such as cigars, cigarettes, and snuff prepared from the plant which belongs to the nightshade family
Glossary (continued)

- Repetition for an action acquired by repetition
- Peril
- Gas; used in execution of criminals
- Gas; smell of rotten eggs (Yellowstone Park)
- On for destroying insects
- The lungs
- Quality of being developed
- Colorless, oily poison used as insecticide; stimulant drug; found in tobacco leaves
- Cancer arising from non-epithelial tissue such as connecting tissue, lymphatic artilage or bone
- Which arouses or excites—spurs on
- That stains the inside of a smoker's lungs and acts as a slow tissue poison; thick, brown to black liquid with a pungent odor; obtained by the destructive distillation of peat, shale; tars are produced of hydrocarbons and their derivatives; used in printing surfaces and organic compounds
- Such as cigars, cigarettes, and snuff prepared from the leaves of the tobacco plant which belongs to the nightshade family
I. Main objectives: To review the identification, medical use, improper use, and the physiological effects of drugs in their three main classifications
   A. Stimulants
   B. Depressants
   C. Hallucinogens

II. Proper Use of Drugs
   A. Prescriptions - how to read the labels
   B. Caution in taking over-the-counter drugs

III. Stimulants
   A. Cocaine
   B. Amphetamine
   C. Benzedrine
   D. Dexedrine

<table>
<thead>
<tr>
<th>Teacher Materials</th>
<th>Student Materials</th>
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<tbody>
<tr>
<td>&quot;First Facts About Drugs&quot;</td>
<td>&quot;A Guide for Teachers&quot;</td>
</tr>
<tr>
<td>&quot;The Use and Misuse of Drugs&quot;</td>
<td>&quot;Drugs of Abuse&quot;</td>
</tr>
<tr>
<td>&quot;Drugs and Your Body&quot;</td>
<td>&quot;Students and Drug Abuse,&quot; pp. 8, 9</td>
</tr>
<tr>
<td>&quot;How Safe Are Our Drugs?&quot;</td>
<td>&quot;Let's Talk About Goofballs and Pep Pills&quot;</td>
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<tr>
<td>&quot;Fact Sheets,&quot; pp. 10-12</td>
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<td>&quot;The Use and Misuse of Drugs&quot;</td>
<td>- &quot;Health Magic&quot;</td>
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<td>&quot;Drugs and Your Body&quot;</td>
<td>- &quot;Do's and Don'ts For Drugs&quot;</td>
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<td>&quot;How Safe Are Our Drugs?&quot;</td>
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<td>- &quot;Young Scientists Look At Drugs&quot;</td>
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<td></td>
<td>- &quot;Facts About Narcotics and Other Dangerous Drugs,&quot; pp. 5-10</td>
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<td>- &quot;Drugs and Your Body&quot;</td>
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<td>&quot;A Guide To Some Drugs Which Are Subject to Abuse&quot;</td>
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<td>&quot;Drugs of Abuse&quot;</td>
<td>&quot;Drugs of Abuse&quot;</td>
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<td>Motivating Questions</td>
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<td>Transparencies:</td>
<td>What is meant by a drug-oriented society?</td>
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<tr>
<td>&quot;Good Team For Proper Drug Use&quot; -</td>
<td>Is it necessary to take a drug for every minor ailment?</td>
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<td>D-8-1</td>
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<tr>
<td>&quot;How To Read Prescription Labels&quot; -</td>
<td>When should self-medication be used and when should responsible medical attention be sought?</td>
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<td>D-8-2</td>
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<tr>
<td>&quot;FDA Warnings On Drug Labels&quot; -</td>
<td>What are &quot;over-the-counter drugs?</td>
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<tr>
<td>D-8-3</td>
<td>When can they be harmful?</td>
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<td>How are drugs labeled for safe use?</td>
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<tr>
<td>Filmstrip:</td>
<td>How should prescription drugs be used?</td>
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<tr>
<td>&quot;Critical Areas of Health&quot; SVE # 91 -</td>
<td>Why should we be concerned about the safety of drugs?</td>
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<tr>
<td>&quot;Drug Misuse and Your Health&quot; w/record and guide</td>
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<td>&quot;Identification of Stimulants&quot; -</td>
<td>What are the medical uses of amphetamines?</td>
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<td>D-8-4</td>
<td>How can they benefit Man?</td>
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<tr>
<td>&quot;Slang Terms - Stimulants&quot; -</td>
<td>Why are amphetamines so dangerous if abused?</td>
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<td>D-8-5</td>
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<td>&quot;Symptoms of Stimulant Abuse&quot; -</td>
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<td>D-8-6</td>
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<td>Motivating Questions</td>
<td>Activities</td>
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<tr>
<td>What is meant by a drug-oriented society?</td>
<td>Review briefly the proper medical use of drugs in general.</td>
</tr>
<tr>
<td>Is it necessary to take a drug for every minor ailment?</td>
<td>Assign the students to take a survey of drugs in their homes.</td>
</tr>
<tr>
<td>When should self-medication be used and when should responsible medical attention be sought?</td>
<td>Chart the identification, proper use, and harms from improper use. From the information gathered, put the most widely used drugs on a large poster and give the details of proper and improper use of each. (Group project)</td>
</tr>
<tr>
<td>What are &quot;over-the-counter drugs? When can they be harmful?</td>
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<tr>
<td>How are drugs labeled for safe use?</td>
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<td>How should prescription drugs be used?</td>
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<td>Why should we be concerned about the safety of drugs?</td>
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<td>What are the medical uses of amphetamines?</td>
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<tr>
<td>How can they benefit Man?</td>
<td>Review briefly the identification, medical use, improper use pattern, and slang terms of stimulants.</td>
</tr>
<tr>
<td>Why are amphetamines so dangerous if abused?</td>
<td>Conduct an experiment on mice given a stimulant and watch the effects. (Refer to &quot;Young Scientists Look At Drugs&quot;)</td>
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</table>
### DRUGS (continued)

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<tr>
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<td>E. Caffeine</td>
<td>&quot;Fighting Illegal Drug Traffic,&quot; p. 3.</td>
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<tr>
<td>F. Methadrine</td>
<td>&quot;Amphetamines&quot;</td>
</tr>
<tr>
<td>1. Description</td>
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<tr>
<td>2. Slang expressions</td>
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<td>3. Proper use</td>
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<td>4. Improper use</td>
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<td>5. Physical effects</td>
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<td>G. Reasons for abuse</td>
<td>&quot;Students and Drug Abuse,&quot; pp. 8, 9</td>
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<tr>
<td>1. Social application</td>
<td>&quot;Fact Sheets,&quot; pp. 4-9, 10-12</td>
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<td>3. Emotional harm</td>
<td>&quot;The Crutch That Cripples: Drug Dependence&quot;</td>
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<tr>
<td>4. Risks involved</td>
<td>Read to the class:</td>
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<tr>
<td></td>
<td>&quot;Facts About Narcotics and Other Dangerous Drugs,&quot; pp. 21, 31</td>
</tr>
<tr>
<td></td>
<td>&quot;Restricted Drugs: For Use By Law Enforcement Agencies&quot;</td>
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<td>Teacher Materials</td>
<td>Student Materials</td>
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<tr>
<td>&quot;Fighting Illegal Drug Traffic,&quot; p. 3</td>
<td>Reports:</td>
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<tr>
<td>&quot;Amphetamines&quot;</td>
<td>&quot;Drugs and Driving - What Drugs Might Do To Your Driving&quot;</td>
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<td>&quot;Drugs and Our Automotive Age&quot;</td>
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<td>Students and Drug Abuse,&quot; pp. 8, 9</td>
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<tr>
<td>&quot;Let's Talk About Goofballs and Pep Pills,&quot; pp. 11-19</td>
<td>Ditto:</td>
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<tr>
<td>&quot;The Crutch That Cripples: Drug Dependence&quot;</td>
<td>&quot;Risks of Abusing Amphetamines&quot;</td>
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<td>Read to the class:</td>
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<tr>
<td>&quot;Facts About Narcotics and Other Dangerous Drugs,&quot; pp. 21, 31</td>
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<td>&quot;Restricted Drugs: For Use By Law Enforcement Agencies&quot;</td>
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<tr>
<td>Audio Visual</td>
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<tr>
<td>Drug Identification Kit - Winston</td>
<td>How can &quot;speed&quot; kill?</td>
</tr>
<tr>
<td>Filmstrip:</td>
<td>What are the signs and symptoms of an amphetamine abuser?</td>
</tr>
<tr>
<td>&quot;Tell It Like It Is&quot; Tane Press</td>
<td>What happens if alcohol is taken with stimulants?</td>
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<tr>
<td># 70 - &quot;Let's Talk About Goofballs and Pep Pills&quot; w/record and booklet</td>
<td>What are the dangers of driving while under the influence of &quot;pep pills&quot;?</td>
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<tr>
<td></td>
<td>What are the slang terms given to stimulants?</td>
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<td></td>
<td>Why, and by whom, are stimulants abused?</td>
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<td></td>
<td>What is meant by tolerance?</td>
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<td></td>
<td>Is cocaine a widely abused stimulant?</td>
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<td></td>
<td>How many amphetamines are abused every year?</td>
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<td></td>
<td>How much does a heavy abuser use every day?</td>
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<tr>
<td></td>
<td>What are the dangers of shooting &quot;speed&quot;?</td>
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<tr>
<td>Film:</td>
<td>What are the long-term effects of amphetamine abuse?</td>
</tr>
<tr>
<td>#1345 - &quot;Speedscene: The Problem of Amphetamine Abuse&quot; Bailey-Film Associates</td>
<td>What social harms could develop from amphetamine abuse?</td>
</tr>
</tbody>
</table>
Motivating Questions

- Winston
- Is" Tane Press
- Goofballs
- The Problem of
- Bailey-

Activities

How can "speed" kill?
What are the signs and symptoms of an amphetamine abuser?
What happens if alcohol is taken with stimulants?
What are the dangers of driving while under the influence of "pep pills"?
What are the slang terms given to stimulants?
Why, and by whom, are stimulants abused?
What is meant by tolerance?
Is cocaine a widely abused stimulant?
How many amphetamines are abused every year?
How much does a heavy abuser use every day?
What are the dangers of shooting "speed"?
What are the long-term effects of amphetamine abuse?
What social harms could develop from amphetamine abuse?
Discuss points brought out in the filmstrip concerning amphetamine abuse.
Ask a doctor or pharmacist to speak to the class about amphetamines and their effects on the body.
Discuss why amphetamines are becoming a growing concern.
Read excerpt from "Facts About Narcotics and Other Dangerous Drugs," p. 22
Discuss the mental and emotional problems caused by drug abuse.
Discuss points in the film concerning stimulant abuse.
### IV. Depressants

**A. Opiates**
1. opium
2. codeine
3. morphine
4. paragonin
5. heroin

**B. Barbiturates and Tranquilizers**
1. Phenobarbital
2. Seconal
3. Nembutal
4. Luminal
5. Sodium Pentothal
6. Miltown
7. Librium
8. Equamint

<table>
<thead>
<tr>
<th>Concepts</th>
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<tbody>
<tr>
<td>IV. Depressants</td>
<td>&quot;Narcotics: Some Questions and Answers&quot;</td>
</tr>
<tr>
<td>A. Opiates</td>
<td>&quot;Facts About Narcotics and Other Dangerous Drugs,&quot; pp. 14-16</td>
</tr>
<tr>
<td>1. opium</td>
<td>&quot;The Narcotic Addiction Problem,&quot; pp. 9-11</td>
</tr>
<tr>
<td>2. codeine</td>
<td>&quot;Living Death&quot;</td>
</tr>
<tr>
<td>3. morphine</td>
<td></td>
</tr>
<tr>
<td>4. paragonin</td>
<td></td>
</tr>
<tr>
<td>5. heroin</td>
<td></td>
</tr>
<tr>
<td>B. Barbiturates and Tranquilizers</td>
<td></td>
</tr>
<tr>
<td>1. Phenobarbital</td>
<td>&quot;Barbiturates,&quot; #OP-196 ANA</td>
</tr>
<tr>
<td>3. Nembutal</td>
<td>&quot;Fact Sheets&quot; Bureau of Narcotics and Dangerous Drugs, US Department of Justice</td>
</tr>
<tr>
<td>4. Luminal</td>
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<tr>
<td>5. Sodium Pentothal</td>
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<tr>
<td>6. Miltown</td>
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<tr>
<td>7. Librium</td>
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<tr>
<td>&quot;Narcotics: Some Questions and Answers&quot;</td>
<td>Refer to:</td>
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<td>&quot;A Guide to Some Drugs Which Are Subject to Abuse&quot;</td>
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<td>Reports:</td>
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<tr>
<td>&quot;Living Death&quot;</td>
<td>Synthetic Substitutes</td>
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<tr>
<td>tranquillizers</td>
<td>Kicking the Habit</td>
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<tr>
<td>&quot;Fact Sheets&quot; Bureau of Narcotics and Dangerous Drugs, US Department of Justice</td>
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<td>Audio Visual</td>
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</tbody>
</table>
| "Types of Depressants" - D-8-7 | What emotional harms could develop from amphetamine abuse? | \begin{itemize} 
- Briefly medical slang terms of brief 
- Discuss the film 
- Skits: 
- Have you ever heard of a death caused by an overdose of barbiturates? 
\end{itemize} |
| "Synthetics" - D-8-8 | What are the risks involved with amphetamine abuse? | \begin{itemize} 
- Briefly medical slang terms of 
- Discuss the film 
- Skits: 
- Have you ever heard of a death caused by an overdose of barbiturates? 
\end{itemize} |
| "Slang Terms For Depressants" - D-8-9 | What are the medical uses of the opiates? | \begin{itemize} 
- Briefly medical slang terms of 
- Discuss the film 
- Skits: 
- Have you ever heard of a death caused by an overdose of barbiturates? 
\end{itemize} |
| "Effects of Depressant Abuse" - D-8-10 | What is the most potent narcotic drug? | \begin{itemize} 
- Briefly medical slang terms of 
- Discuss the film 
- Skits: 
- Have you ever heard of a death caused by an overdose of barbiturates? 
\end{itemize} |
| "Elements Essential in the Making of an Addict" - D-8-11 w/overlays | How are narcotics abused? | \begin{itemize} 
- Briefly medical slang terms of 
- Discuss the film 
- Skits: 
- Have you ever heard of a death caused by an overdose of barbiturates? 
\end{itemize} |
| "Steps to Addiction" - D-8-12 | Have any of you had to take a narcotic? | \begin{itemize} 
- Briefly medical slang terms of 
- Discuss the film 
- Skits: 
- Have you ever heard of a death caused by an overdose of barbiturates? 
\end{itemize} |

Transparencies:

- "Types of Depressants" - D-8-7
- "Synthetics" - D-8-8
- "Slang Terms For Depressants" - D-8-9
- "Effects of Depressant Abuse" - D-8-10
- "Elements Essential in the Making of an Addict" - D-8-11 w/overlays
- "Steps to Addiction" - D-8-12

Drug Identification Kit - Winston

Film:

#1338 - "Narcotics, Why Not?" Cahill

Transparencies:

- "Medical Uses of Depressants" - D-8-13
- "Withdrawal" - D-8-14
Motivating Questions

What emotional harms could develop from amphetamine abuse?
What are the risks involved with amphetamine abuse?
What are the medical uses of the opiates?
What is the most potent narcotic drug?
How are narcotics abused?
Have any of you had to take a narcotic?
How can people become accidentally addicted to a narcotic?
What is withdrawal?
How are barbiturates used medically?
Are barbiturates physically or psychologically addictive drugs?
How are tranquilizers different from barbiturates?
How can barbiturates and tranquilizers prove to be dangerous if not used properly?
Have you ever heard of a death caused by an overdose of barbiturates?

Activities

Briefly review the identification, medical use, improper use, and slang terms of narcotics.

Briefly review the identification, medical use, improper use pattern, physiological effects, and slang terms of barbiturates and tranquilizers.

Discuss depressant withdrawal.

Discuss points brought out in the film, "Narcotics, Why Not?"

Skits: How drugs affect physical and/or mental skills.

Doctor
Athlete
Businessman
Pilot
Automobile driver
Typist
### V. Hallucinogens

#### A. Marijuana

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Teacher Materials</th>
<th>Study Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Description</td>
<td>&quot;Drugs of Abuse&quot;</td>
<td>Ditt.</td>
</tr>
<tr>
<td>2. Slang terms</td>
<td>&quot;Marijuana and Crime&quot;</td>
<td></td>
</tr>
<tr>
<td>3. Proper use</td>
<td>&quot;Marijuana: Social Benefit or Social Detriment?&quot;</td>
<td></td>
</tr>
<tr>
<td>4. Improper use</td>
<td>&quot;What About Marijuana?&quot;</td>
<td></td>
</tr>
<tr>
<td>5. Physical effects</td>
<td>&quot;Facts About Narcotics and Other Dangerous Drugs,&quot; p. 18</td>
<td></td>
</tr>
</tbody>
</table>

#### B. LSD (peyote, mescaline, DMT, STP, and psilocybin)

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Teacher Materials</th>
<th>Study Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Description</td>
<td>&quot;LSD: Some Questions and Answers&quot;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>&quot;LSD&quot;</td>
<td></td>
</tr>
</tbody>
</table>
Teacher Materials

"Drugs of Abuse"
"Students and Drug Abuse," pp. 5-7
"Marijuana and Crime"
"Marijuana: Social Benefit or Social Detriment?"
"What About Marijuana?" p. 5
"Facts About Narcotics and Other Dangerous Drugs," p. 18

Student Materials

Dittos:
"Drug Pre-Test"
"Crossword Puzzle"
"A Guide To Some Drugs Which are Subject to Abuse"
"Drugs of Abuse"

Refer to:
"LSD: Some Questions and Answers"
"LSD"
"A Guide to Some Drugs Which Are Subject to Abuse"
### Audio Visual

<table>
<thead>
<tr>
<th>Transparencies:</th>
<th>Motivating Questions</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Marijuana&quot;</td>
<td>Why are there more young people abusing hallucinatory drugs?</td>
<td></td>
</tr>
<tr>
<td>&quot;Identification&quot; – D-8-15</td>
<td>What are other &quot;highs&quot; that teenagers are experimenting with?</td>
<td></td>
</tr>
<tr>
<td>&quot;Slang Terms&quot; – D-8-16</td>
<td>Why is marijuana one of the most popularly abused drugs?</td>
<td></td>
</tr>
<tr>
<td>Drug Identification Kit – Winston</td>
<td>Why doesn't &quot;pot&quot; affect some people?</td>
<td></td>
</tr>
<tr>
<td>Filmstrip:</td>
<td>Why are the non-narcotic drugs thought to be more dangerous than the narcotic drugs?</td>
<td></td>
</tr>
<tr>
<td># 73 - &quot;Why Not Marijuana?&quot; w/record</td>
<td>What is the difference between physical dependence and psychological dependence?</td>
<td></td>
</tr>
<tr>
<td>and guide  Tane Press</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Transparencies:

| "Description of LSD" – D-8-17       | What other substances eaten, drunk, chewed, or otherwise manipulated, can one become psychologically dependent upon? |        |
| "Other Hallucinogens" – D-8-18      | What is hashish?                                                                                              |        |
| "Slang Terms" – D-8-19              | What does LSD look like?                                                                                      |        |

Why would anyone want to take LSD?
<table>
<thead>
<tr>
<th>Motivating Questions</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Why are there more young people abusing hallucinatory drugs?</td>
<td>Investigate the various views regarding the medical use of drugs:</td>
</tr>
<tr>
<td>What are other &quot;highs&quot; that teenagers are experimenting with?</td>
<td>Doctor</td>
</tr>
<tr>
<td>Why is marijuana one of the most popularly abused drugs?</td>
<td>Clergyman</td>
</tr>
<tr>
<td>Why doesn't &quot;pot&quot; affect some people?</td>
<td>Give a pre-test on the identification, proper and improper use, physiological effects, and slang terms of hallucinogens.</td>
</tr>
<tr>
<td>Why are the non-narcotic drugs thought to be more dangerous than the narcotic drugs?</td>
<td>(No grade)</td>
</tr>
<tr>
<td>What is the difference between physical dependence and psychological dependence?</td>
<td>Hand out crossword puzzle on drug terminology and slang terms.</td>
</tr>
<tr>
<td>What other substances, eaten, drunk, chewed, or otherwise manipulated, can one become psychologically dependent upon?</td>
<td>Have students bring in newspaper clippings and other articles concerning the use and abuse of drugs, or assign students to prepare a bulletin board on a certain drug area.</td>
</tr>
<tr>
<td>What is hashish?</td>
<td>Have a question box for anonymous questions concerning drugs.</td>
</tr>
<tr>
<td>What does LSD look like?</td>
<td>Briefly review marijuana using student guide and transparencies.</td>
</tr>
<tr>
<td>Why would anyone want to take LSD?</td>
<td>Briefly review the identification, medical use, improper and proper use, physiological effects, and slang terms for LSD.</td>
</tr>
</tbody>
</table>
DRUGS (continued)

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Teacher Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Slang terms</td>
<td>The LSD Story</td>
</tr>
<tr>
<td>3. Proper use</td>
<td>&quot;LSD: Trip or Trap?&quot;</td>
</tr>
<tr>
<td>4. Improper use</td>
<td>&quot;Let's Talk About Drugs&quot;</td>
</tr>
<tr>
<td>5. Physical effects</td>
<td>&quot;Drug Abuse: The Chemical Cop-Out&quot;</td>
</tr>
<tr>
<td>6. Psychological effects</td>
<td>&quot;Fact Sheets,&quot; pp. 9-2, 9-3</td>
</tr>
</tbody>
</table>

C. Volatile Chemicals (glue, rubber cement, gasoline, shoe polish, cleaning solvent, etc.)

1. Description
2. Proper use
3. Improper use
4. Physical effects
5. Psychological effects

VI. The Effect of Drug Abuse on Society

A. Any individual who is dependent on a drug for any reason other than one established by a doctor is an abuser of drugs.
### Teacher Materials

<table>
<thead>
<tr>
<th>The LSD Story</th>
<th>Student Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;LSD: Trip or Trap?&quot;</td>
<td>&quot;LSD - A Vanishing World&quot;</td>
</tr>
<tr>
<td>&quot;Let's Talk About Drugs&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;Drug Abuse: The Chemical Cop-Out&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;Fact Sheets,&quot; pp. 9-2, 9-3</td>
<td></td>
</tr>
<tr>
<td>&quot;Restricted Drugs: For Use By Law Enforcement Agencies&quot; (Fact Sheet #5)</td>
<td></td>
</tr>
<tr>
<td>&quot;LSD: The False Illusion&quot; (Part I and Part II)</td>
<td></td>
</tr>
<tr>
<td>&quot;The Problems of LSD and Emotional Disorder&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;Students and Drug Abuse,&quot; pp. 11-13</td>
<td></td>
</tr>
<tr>
<td>&quot;Glue Sniffing: Big Trouble In a Tube&quot;</td>
<td>Ditto:</td>
</tr>
<tr>
<td>&quot;The Glue Sniffing Problem,&quot; pp. 7-9</td>
<td>Poem: &quot;A Tube of Glue&quot;</td>
</tr>
<tr>
<td>&quot;Glue Sniffing&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;A Review of the Evidence of Glue Sniffing: A Persistent Problem&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;Fact Sheets,&quot; pp. 4-1, 4-2</td>
<td>Ditto:</td>
</tr>
<tr>
<td></td>
<td>Poem: &quot;For Teenagers Only&quot;</td>
</tr>
<tr>
<td>Audio Visual</td>
<td>Motivating Questions</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>&quot;Effects On The Brain&quot; - D-8-20</td>
<td>Why shouldn't everyone try LSD, just once, for the experience?</td>
</tr>
<tr>
<td>&quot;Bad Trip&quot; - D-8-21</td>
<td>What effects, other than hallucinations, can LSD produce?</td>
</tr>
<tr>
<td>Drug Identification Kit - Winston</td>
<td>Does LSD have any medical use?</td>
</tr>
<tr>
<td>Film:</td>
<td>Do the popular songs of today depict taking drugs to &quot;get high&quot; as the thing to do?</td>
</tr>
<tr>
<td>#1349 - &quot;LSD25,&quot; Professional Arts, Inc.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transparencies:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Types of Volatile Chemicals Abused&quot; - D-8-22</td>
<td>Why other substances are sniffed or inhaled?</td>
</tr>
<tr>
<td>&quot;Effects of Glue Sniffing&quot; - D-8-23</td>
<td>Why is it dangerous to inhale substances that contain hydrocarbons?</td>
</tr>
<tr>
<td>&quot;Body Organs Affected by Glue Sniffing&quot; - D-8-24</td>
<td>What are the effects of glue sniffing?</td>
</tr>
<tr>
<td></td>
<td>What organs, other than the brain, are affected by glue sniffing?</td>
</tr>
<tr>
<td></td>
<td>Who would be a situational user, a spree user, or the hard-core addict?</td>
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<tr>
<td></td>
<td>Who first introduces young people to drugs and how does it usually come about?</td>
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<td></td>
<td></td>
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<tr>
<td>Motivating Questions</td>
<td>Activities</td>
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<tr>
<td>----------------------</td>
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</tr>
<tr>
<td>Why shouldn't everyone try LSD, just once, for the experience?</td>
<td>Have a committee prepare a bulletin board that shows impairment of brain functions when an intoxicating substance is taken.</td>
</tr>
<tr>
<td>What effects, other than hallucinations, can LSD produce?</td>
<td></td>
</tr>
<tr>
<td>Does LSD have any medical use?</td>
<td></td>
</tr>
<tr>
<td>Do the popular songs of today depict taking drugs to &quot;get high&quot; as the thing to do?</td>
<td></td>
</tr>
<tr>
<td>What other substances are sniffed or inhaled?</td>
<td>Briefly review the identification, improper and proper use, psychological and physical effects of glue sniffing.</td>
</tr>
<tr>
<td>Why is it dangerous to inhale substances that contain hydrocarbons?</td>
<td></td>
</tr>
<tr>
<td>What are the effects of glue sniffing?</td>
<td></td>
</tr>
<tr>
<td>What organs, other than the brain, are affected by glue sniffing?</td>
<td></td>
</tr>
<tr>
<td>Who would be a situational user, a spree user, or the hard-core addict?</td>
<td>Buzz groups:</td>
</tr>
<tr>
<td>Who first introduces young people to drugs and how does it usually come about?</td>
<td>Prepare lists of reasons why there is an increasing number of juveniles who are starting a drug habit.</td>
</tr>
</tbody>
</table>
There are three main groups of drug abusers:

a. situational user
b. spree user
c. hard-core addict

B. There is no single cause or single set of conditions that clearly lead to drug dependence.

1. Key factors
   a. a drug
   b. an individual
   c. an environment
   d. personality deficiency

2. Juveniles
   a. adolescence complex process
   b. family influence
   c. sociological factors

3. Adults
   a. social maladjustment
   b. pressures and demands from society
   c. background of family difficulties
   d. community factors

"Narcotics and Dangerous Drug Abuse," McGrath, pp. 3-5, 3-6, 3-7

"Restricted Drugs for Use by Law Enforcement Agencies" (Fact Sheet #3.)

"Drug Abuse: The Chemical Cop-Out"

The Scope of the Narcotics and Drug Abuse Problem, p. 11
Teacher Materials: Student Materials

Main abusers: user

"Narcotics and Dangerous Drug Abuse," McGrath, pp. 3-5, 3-6, 3-7

The Scope of the Narcotics and Drug Abuse Problem, p. 11

"Restricted Drugs for Use by Law Enforcement Agencies" (Fact Sheet #3.)

"Drug Abuse: The Chemical Cop-Out"

Report: (or extra reading)

"Why Students Turn to Drugs"

"Realities We Must Face, But Won't"

"Drug Abuse: Escape to Nowhere"

"Behavior" Section of Time

Complex factors

Influence factors

Adjustment and demands of family factors
<table>
<thead>
<tr>
<th>Audio Visual</th>
<th>Motivating Questions</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Film:</strong> (Outside Source) &quot;Fight or Flight&quot; J &amp; F Productions.</td>
<td>What are some signs that may indicate that a person is having emotional problems? What are the best ways of working out these problems?</td>
<td>Find on d-8-28 from proc. with inv.</td>
</tr>
<tr>
<td><strong>Transparency:</strong> &quot;How To Prevent Drug Abuse&quot;</td>
<td>What is a mentally healthy individual?</td>
<td>For</td>
</tr>
<tr>
<td></td>
<td>How can the social setting affect the effects of a drug?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>What new standards and values are prevalent recently in the United States? (dress, movies, books, and other entertainment)</td>
<td></td>
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<tr>
<td></td>
<td>What is meant by the statement, &quot;we live in an age of anxiety?&quot;</td>
<td></td>
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<tr>
<td></td>
<td>Do adults try to identify with youth activities, making it difficult for teenagers to &quot;do their own thing&quot;?</td>
<td></td>
</tr>
<tr>
<td>Motivating Questions</td>
<td>Activities</td>
<td></td>
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<tr>
<td>----------------------</td>
<td>------------</td>
<td></td>
</tr>
<tr>
<td>What are some signs that may indicate that a person is having emotional problems? What are the best ways of working out these problems?</td>
<td>Find out the local statistics on drug abuse in your community from the probation department. This department may be able to provide actual case histories without using names of individuals involved.</td>
<td></td>
</tr>
<tr>
<td>What is a mentally healthy individual?</td>
<td>Form &quot;buzz&quot; groups and discuss:</td>
<td></td>
</tr>
<tr>
<td>How can the social setting affect the effects of a drug?</td>
<td>&quot;What are some criticisms of the &quot;establishment&quot;?&quot; &quot;Is it wrong to rebel?&quot;</td>
<td></td>
</tr>
<tr>
<td>What new standards and values are prevalent recently in the United States? (dress, movies, books, and other entertainment)</td>
<td>Problem-solution approach:</td>
<td></td>
</tr>
<tr>
<td>What is meant by the statement, &quot;we live in an age of anxiety?&quot;</td>
<td>&quot;What should you do if you find that a classmate is using a form of an illegal drug?&quot;</td>
<td></td>
</tr>
<tr>
<td>Do adults try to identify with youth activities, making it difficult for teenagers to &quot;do their own thing?&quot;</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. Drug abusers become careless about their appearance, their mode of living, health, contributions to the family and society, and in interpersonal relationships.

1. General effects and symptoms of drug abuse:
   a. physical illnesses
   b. mental disorders
   c. personal habits neglected
   d. malnutrition
   e. accidents, death
   f. potentiality of becoming a pusher

D. The adverse effects of drug abuse greatly outweigh any possible benefits.

1. Effects of drug usage depend upon:
   a. user's personality
   b. size and frequency of dose
   c. method taken
   d. motivated reason for taking
   e. environment

Teacher Materials:
- "The Use and Misuse of Drugs," pp. 10, 11
- "Students and Drug Abuse"


"Students and Drug Abuse"
<table>
<thead>
<tr>
<th>Audio Visual Transparencies:</th>
<th>Motivating Questions</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;General Effects of Drug Abuse&quot; - D-8-29</td>
<td>What is meant by &quot;rationalizing?&quot;</td>
<td>Discuss at one</td>
</tr>
<tr>
<td>&quot;General Symptoms of Drug Abuse&quot; - D-8-30</td>
<td>In what ways do teenagers rationalize?</td>
<td>Discuss forms of</td>
</tr>
<tr>
<td></td>
<td>In what ways do adults rationalize?</td>
<td>Discuss young</td>
</tr>
<tr>
<td></td>
<td>How can rationalizing be harmful?</td>
<td>Discuss that we</td>
</tr>
<tr>
<td></td>
<td>What is meant by &quot;self-discipline?&quot;</td>
<td>&quot;turn&quot;</td>
</tr>
<tr>
<td></td>
<td>Why do many adults abuse drugs?</td>
<td>What are some</td>
</tr>
<tr>
<td></td>
<td>How can drug abuse weaken the structure of society?</td>
<td>community factors</td>
</tr>
<tr>
<td></td>
<td>Where can people go to rid themselves of their &quot;hang-ups&quot;?</td>
<td>that could lead to</td>
</tr>
<tr>
<td></td>
<td>What are some factors that would influence the effects of any drug?</td>
<td>drug dependence?</td>
</tr>
</tbody>
</table>

What are some factors that would influence the effects of any drug?
### Motivating Questions

<table>
<thead>
<tr>
<th>Question</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is meant by &quot;rationalizing&quot;?</td>
<td>Discuss how we all rationalize at one time or another.</td>
</tr>
<tr>
<td>In what ways do teenagers rationalize?</td>
<td>Discuss how drug abuse has many forms of rationalization.</td>
</tr>
<tr>
<td>In what ways do adults rationalize?</td>
<td>Discuss why some people (both young and adults) are turning to drugs.</td>
</tr>
<tr>
<td>How can rationalizing be harmful?</td>
<td>Discuss the kind of society that would be if humans could &quot;turn on&quot; freely.</td>
</tr>
<tr>
<td>What is meant by &quot;self-discipline&quot;?</td>
<td>What social problems do we have in America today that are sending people away from reality — by the use of drugs?</td>
</tr>
<tr>
<td>Why do many adults abuse drugs?</td>
<td></td>
</tr>
<tr>
<td>How can drug abuse weaken the structure of society?</td>
<td></td>
</tr>
<tr>
<td>Where can people go to rid themselves of their &quot;hang-ups&quot;?</td>
<td></td>
</tr>
<tr>
<td>What are some community factors that could lead to drug dependence?</td>
<td></td>
</tr>
<tr>
<td>What are some factors that would influence the effects of any drug?</td>
<td></td>
</tr>
</tbody>
</table>
### E. Social, medical, and legal consequences of depressant and stimulant abuse

1. Reasons for abuse
2. Emotional harm
3. Social harms
4. Risks

### Teacher Materials

- "Facts About Narcotics and Other Dangerous Drugs," pp. 31-37
- "Let's Talk About Drugs," pp. 11-14
- "The Narcotic Addiction Problem," pp. 10-12
- "Drug Abuse: The Chemical Cop-Out"

### F. Social, medical, and legal consequences of opiate abuse

1. Reasons for abuse
2. Emotional harm
3. Social harm
4. Risks

### Teacher Materials

- "Fact Sheets," p. 6-1
- "Drug Abuse: A Dead End Street," p. 7
- "The Narcotic Addiction Problem," pp. 11, 12, 16, 17
- "The Crutch That Cripples"
- "Youth and Narcotics: A Study of Juvenile Drug Addiction"
- "The Control and Treatment of Narcotic Use," pp. 15-19
### Teacher Materials

<table>
<thead>
<tr>
<th>Topic</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Facts About Narcotics and Other Dangerous Drugs,&quot;</td>
<td>pp. 31-37</td>
</tr>
<tr>
<td>&quot;Let's Talk About Drugs,&quot;</td>
<td>pp. 11-14</td>
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<tr>
<td>&quot;The Narcotic Addiction Problem,&quot;</td>
<td>pp. 10-12</td>
</tr>
<tr>
<td>&quot;Drug Abuse: The Chemical Cop-Out&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;Fact Sheets,&quot;</td>
<td>p. 6-1</td>
</tr>
<tr>
<td>&quot;Drug Abuse: A Dead End Street,&quot;</td>
<td>p. 7</td>
</tr>
<tr>
<td>&quot;The Narcotic Addiction Problem,&quot;</td>
<td>pp. 11, 12, 16, 17</td>
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<tr>
<td>&quot;The Crutch That Cripples&quot;</td>
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<tr>
<td>&quot;Youth and Narcotics: A Study of Juvenile Drug Addiction&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;The Control and Treatment of Narcotic Use,&quot;</td>
<td>pp. 15-19</td>
</tr>
</tbody>
</table>

### Student Materials

| Dittos:                                                             |             |
| "The Risks from Barbiturate Abuse"                                 |             |
| "A Study of Juvenile Drug Addiction"                               |             |

### Report or assign to read:

<table>
<thead>
<tr>
<th>Topic</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Denver and the Dope Problem&quot;</td>
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</tbody>
</table>

### Slow Learners:

<table>
<thead>
<tr>
<th>Topic</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Scholastic Scope,&quot;</td>
<td></td>
</tr>
<tr>
<td>January 26, 1969, February 5, 1970. Work out a socioguidrama on the</td>
<td></td>
</tr>
<tr>
<td>best questions and answers they want to add.</td>
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</tr>
<tr>
<td>Transparencies:</td>
<td>Motivating Questions</td>
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<td>--------------------------------------------</td>
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</tr>
<tr>
<td>&quot;Number of Addicts in the U.S.&quot; - D-8-31</td>
<td>What type of person would abuse depressants?</td>
</tr>
<tr>
<td>&quot;Recognizing a Narcotic Addict - The Symptoms of Abuse&quot; - D-8-32</td>
<td>Does the body build up a tolerance to depressants?</td>
</tr>
<tr>
<td>&quot;Addicts Die Young&quot; - D-8-33</td>
<td>What is the difference between the misuse of aspirin or laxatives and the abuse of phenobarbital?</td>
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<td></td>
<td>How can one's driving be affected by the misuse of depressants?</td>
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</tbody>
</table>

Why would an adult abuse opiate drugs?
Why would a teenager abuse opiates?
Why would people living in a ghetto environment be more prone to drug abuse? Or would they?
What other types of people abuse opiates? (medical, people, musicians)
Why is narcotic abuse an urban problem?
What is an estimated guess of the number of narcotic addicts in the United States? What is the age range?
### Motivating Questions

<table>
<thead>
<tr>
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<th>Answer</th>
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<td>What is an estimated guess of the number of narcotic addicts in the United States? What is the age range?</td>
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</table>

### Activities

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have a student report on the local problem of abuse.</td>
<td></td>
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<tr>
<td>Have a class survey on how many families have medical prescriptions for sleeping pills or tranquillizers.</td>
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<tr>
<td>Read excerpts from &quot;Let's Talk About Drugs&quot; on amphetamine and barbiturate abuse.</td>
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<tr>
<td>Have a discussion of emotional and social harms that come from abuse of depressants.</td>
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<tr>
<td>Discuss the risks of abusing depressants.</td>
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<tr>
<td>Discuss what social and emotional problems an addict brings upon himself.</td>
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<tr>
<td>Read excerpts from &quot;Youth and Narcotics: A Study of Juvenile Drug Addiction.&quot; (What does a 'dope fiend' look like?)</td>
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</tr>
<tr>
<td>Student report: Local Narcotic Problems</td>
<td></td>
</tr>
<tr>
<td>Discuss the problems an ex-addict has in returning to society.</td>
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</tr>
</tbody>
</table>
### Social, medical, and legal consequences of hallucinogen abuse

1. **Reasons for abuse**
2. **Social harms**
3. **Emotional harms**
4. **Risks, both mental and physical**

---

**Teacher Materials**

- "Drug Abuse: The Chemical Cop-Out" Ditt
- "Marijuana: Social Benefit or Social Detriment?"
- "The Scope of Narcotic and Drug Abuse Problems," pp. 10-13
- "What About Marijuana?" pp. 12, 18
- "Fact Sheets," p. 7-2
- "Let's Talk About Drugs," p. 5
- "The Control and Treatment of Narcotic Use," pp. 11-13
Teacher Materials

"Drug Abuse: The Chemical Cop-Out"
"Marijuana: Social Benefit or Social Detriment?"
"The Scope of Narcotic and Drug Abuse Problems," pp. 10-13
"What About Marijuana?" pp. 12, 18
"Fact Sheets," p. 7-2
"Let's Talk About Drugs," p. 5
"The Control and Treatment of Narcotic Use," pp. 11-13

Student Materials

Ditto:

"Satire on Legalized Marijuana"
"What About Marijuana." (hand out)
Ditto:

"Risks of Marijuana"
Reports: (or extra reading)
"But Mom, Everybody Smokes Pot!"
"The Great Marijuana Plot"
"LSD and Marijuana"
Motivating Questions

What is the use pattern of narcotics in the United States?

How long do the effects last?

How can "freak" accidents occur from abusing narcotics?

What risks is a person taking when abusing narcotics?

Are the symptoms easily recognizable?

What are some non-violent crimes that drug abusers would pursue to support their habit?

Does the term "dope fiend" reflect public opinion toward the addict?

How should one concern himself with the problem of narcotic abusers?

What types of people are using "pot"?

What is an estimated guess of the number that have tried "pot" and are using it to some extent?

What is non-conformity? Could it be said that drug abusers are conforming to non-conformity?

What emotional problems could one have while under the influence of marijuana?

What factors determine the effects of marijuana? (individual susceptibility, strength of marijuana,  

Audio Visual

Transparency:

"Recognizing a Marijuana Abuser" - D-8-34

Filmstrips:

"Marijuana: What Can You Believe?" Guidance Associates
# 83 - Part I w/record
# 84 - Part II w/record

Film:

#1346 - "Keep Off The Grass" Sid Davis
<table>
<thead>
<tr>
<th>Motivating Questions</th>
<th>Activities</th>
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<td>How long do the effects last?</td>
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<td>How can &quot;freak&quot; accidents occur from abusing narcotics?</td>
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<td>What are some non-violent crimes that drug abusers would pursue to support their habit?</td>
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<td>Does the term &quot;dope fiend&quot; reflect public opinion toward the addict?</td>
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<tr>
<td>How should one concern himself with the problem of narcotic abusers?</td>
<td></td>
</tr>
<tr>
<td>What types of people are using &quot;pot&quot;?</td>
<td>&quot;Buzz&quot; groups: Give two questions to each group about the arguments concerning marijuana use.</td>
</tr>
<tr>
<td>What is an estimated guess of the number that have tried &quot;pot&quot; and are using it to some extent?</td>
<td>1. Marijuana is not addictive and therefore is no worse than tobacco.</td>
</tr>
<tr>
<td>What is non-conformity? Could it be said that drug abusers are conforming to non-conformity?</td>
<td>2. Marijuana always makes you happy and you like other people.</td>
</tr>
<tr>
<td>What emotional problems could one have while under the influence of marijuana?</td>
<td>3. Marijuana does not produce violence.</td>
</tr>
<tr>
<td>What factors determine the effects of marijuana? (individual susceptibility, strength of marijuana,</td>
<td>4. Marijuana is no worse than alcohol, so why shouldn't marijuana be legalized?</td>
</tr>
<tr>
<td>Audio Visual</td>
<td>Motivating Questions</td>
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<td></td>
<td>method taken, manner of handling, environment)</td>
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<td></td>
<td>What risks are you taking when you try or use marijuana?</td>
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<tr>
<td></td>
<td>Do you have any way of knowing exactly what you are getting in a &quot;joint&quot;?</td>
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<td></td>
<td>Instruct board and these pieces of information &quot;Buzz&quot;:</td>
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<td>2.</td>
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<td>3.</td>
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<td>&quot;L&quot;. Report:</td>
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<td>Activities</td>
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<tr>
<td>----------------------</td>
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</tr>
<tr>
<td>method taken, manner of handling, environment)</td>
<td>5. Use of marijuana does not lead to crime.</td>
</tr>
<tr>
<td>What risks are you taking when you try or use marijuana?</td>
<td>6. Marijuana is not addicting, so it really isn't as harmful as most people think.</td>
</tr>
<tr>
<td>Do you have any way of knowing exactly what you are getting in a &quot;joint?&quot;</td>
<td>Instructor write arguments on board and make opinion known on these points with factual information.</td>
</tr>
</tbody>
</table>

"Buzz" groups:

1. Should marijuana be legalized? (pros and cons)
2. Since marijuana is not physically but psychologically addictive, does this mean that marijuana is of lesser harm than heroin or a drug that produces physical addiction?
3. In what ways might legalized marijuana affect our society?

Read excerpts from:

"Let's Talk About Drugs," p. 5

Report:

"Problems on Pot Research" (Science News, Jan. 24, 1970)
### DRUGS (continued)

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Teacher Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>H. The Risks of LSD</strong></td>
<td>&quot;Students and Drug Abuse,&quot; pp. 5-7, 45</td>
</tr>
<tr>
<td>1. Reasons for abuse</td>
<td>&quot;LSD: The False Illusion, Parts I and II&quot;</td>
</tr>
<tr>
<td>2. Social harms</td>
<td></td>
</tr>
<tr>
<td>3. Emotional harms</td>
<td></td>
</tr>
<tr>
<td>4. Risks, both physical and mental</td>
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</tbody>
</table>

| **I. The Dangers of Glue Sniffing** | "The Glue Sniffing Problem," pp. 10, 11 |
| 1. Reasons for abuse | "Glue Sniffing: Big Trouble in a Tube" |
| 2. Social harms | |
| 3. Emotional harms | |
| 4. Risks, both physical and mental | |

"The Scope of the Narcotic and Drug Abuse Problems," pp. 10-4 (Read actual incidents of people under inhalant intoxication)
"Let's Talk About Drugs," p. 8 (read poem)
"Facts About Narcotics and Other Dangerous Drugs," p. 24 (Read case studies)
<table>
<thead>
<tr>
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<th>Student Materials</th>
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<tr>
<td>&quot;Students and Drug Abuse,&quot; pp. 5-7, 45</td>
<td>Reports:</td>
</tr>
<tr>
<td>&quot;LSD: The False Illusion, Parts I and II&quot;</td>
<td>&quot;Students and Drug Abuse&quot;</td>
</tr>
<tr>
<td>&quot;The Glue Sniffing Problem,&quot; pp. 10, 11</td>
<td>&quot;LSD Broken Chromosomes: What They Mean For Your Children&quot;</td>
</tr>
<tr>
<td>&quot;Glue Sniffing: Big Trouble in a Tube&quot;</td>
<td>&quot;The Stoned Age&quot;</td>
</tr>
<tr>
<td>&quot;The Scope of the Narcotic and Drug Abuse Problems,&quot; pp. 10-A (Read actual incidents of people under inhalant intoxication)</td>
<td>Ditto:</td>
</tr>
<tr>
<td>&quot;Let's Talk About Drugs,&quot; p. 8 (Read poem)</td>
<td>&quot;Risks of LSD&quot;</td>
</tr>
<tr>
<td>&quot;Facts About Narcotics and Other Dangerous Drugs,&quot; p. 24 (Read case studies)</td>
<td>&quot;Risks of Glue Sniffing&quot;</td>
</tr>
<tr>
<td>Audio Visual</td>
<td>Motivating Questions</td>
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<td>----------------------</td>
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<tr>
<td>Transparency:</td>
<td>Why is LSD abused?</td>
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<tr>
<td>&quot;Reasons For LSD Abuse&quot; - D-8-35</td>
<td>How did the LSD movement come about?</td>
</tr>
<tr>
<td></td>
<td>What exactly are hippies? What are their philosophies?</td>
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<td></td>
<td>Does &quot;tripping out&quot; help someone understand himself? Solve his problems?</td>
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<td></td>
<td>Does &quot;turning on&quot; advocate love and peace within the world?</td>
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<tr>
<td></td>
<td>What social and emotional harms can be brought about by abuse of LSD?</td>
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<td>What risks are involved in taking LSD?</td>
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<td></td>
<td>What is the age range of glue sniffers and those who inhale other volatile chemicals?</td>
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<td></td>
<td>What are the reasons for abusing glue and other inhalants?</td>
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<td></td>
<td>Can glue sniffing lead to heroin addiction?</td>
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<td></td>
<td>What is meant by &quot;maturing out?&quot;</td>
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<td></td>
<td>Why do glue sniffers mature out of their habit?</td>
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<td></td>
<td>Does peer group influence affect one's experimentation with drugs?</td>
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<tr>
<td>Film:</td>
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<tr>
<td>#1352 - &quot;LSD&quot; National Audiovisual Center</td>
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<tr>
<td>Transparency:</td>
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<tr>
<td>&quot;Recognizing the Glue Sniffer&quot; - D-8-36</td>
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</tbody>
</table>
### Motivating Questions

#### Abuse

- Why is LSD abused?
- How did the LSD movement come about?
- What exactly are hippies? What are their philosophies?
- Does "tripping out" help someone understand himself? Solve his problems?
- Does "turning on" advocate love and peace within the world?
- What social and emotional harms can be brought about by abuse of LSD?
- What risks are involved in taking LSD?
- What is the age range of glue sniffers and those who inhale other volatile chemicals?
- What are the reasons for abusing glue and other inhalants?
- Can glue sniffing lead to heroin addiction?
- What is meant by "maturing out"?
- Why do glue sniffers mature out of their habit?
- Does peer group influence affect one's experimentation with drugs?

#### Glue Sniffer

- What can young people do to promote love and peace to all mankind, rather than just talk about it?
- Check with speaker's bureau to set up a taped session with a former drug abuser.
- Report: "The Stoned Age"
- Discuss the hippie culture and its influences on our society.
- Read, or tell, about the experiences stated in the two articles on glue sniffing. Discuss.
- Have students research the local glue sniffing problem and report.
- Read excerpts from:
  - "Facts About Narcotics and Other Dangerous Drugs," p. 24
  - "The Scope of the Narcotic and Drug Abuse Problem," p. 10-A

### Activities

- Discuss what type of activities a person can do to achieve self-satisfaction.
- What can young people do to promote love and peace to all mankind, rather than just talk about it?
- Check with speaker's bureau to set up a taped session with a former drug abuser.
- Report: "The Stoned Age"
- Discuss the hippie culture and its influences on our society.
- Read, or tell, about the experiences stated in the two articles on glue sniffing. Discuss.
- Have students research the local glue sniffing problem and report.
- Read excerpts from:
  - "Facts About Narcotics and Other Dangerous Drugs," p. 24
  - "The Scope of the Narcotic and Drug Abuse Problem," p. 10-A
VII. Drug Traffic and Law Enforcement

A. Drugs enter the black market in many ways:
   1. Illegal drug distribution
   2. Original suppliers; compare 1940 and now
   3. Number of drug abusers in the United States

B. The cost to society is great
   1. Variables in drug price
   2. Cost to support habit
   3. Treatment for addicts

C. Illegal traffic of narcotics is operated on a large crime syndicate level.
   1. Pattern of opium and opiates
   2. Pattern of illicit heroin to the United States
   3. Escalating costs of heroin

"Drug Abuse: Escape to Nowhere," pp. 78, 79
"Fact Sheets," pp. 3-2, 5-2
"Task Force Report: Narcotics and Drug Abuse"
"The Scope of the Narcotic and Drug Abuse Problem," p. 7
"Restricted Drugs: For Use By Law Enforcement Agencies" (Fact Sheet #2)
"Facts About Narcotics and Other Dangerous Drugs"
"Fact Sheets," p. 3-1, 3-2
"What Can We Do About Drug Abuse," p. 16
drug price habit addicts narcotics large crime

Report — or for reference:

"Drug Abuse: Escape to Nowhere," pp. 78, 79
"Fact Sheets," pp. 3-2, 5-2
"Task Force Report: Narcotics and Drug Abuse"
"The Scope of the Narcotic and Drug Abuse Problem," p. 7
"Restricted Drugs: For Use By Law Enforcement Agencies" (Fact Sheet #2.)
"Facts About Narcotics and Other Dangerous Drugs"
"What Can We Do About Drug Abuse," pp. 21-28
"Facts About Narcotics and Other Dangerous Drugs," pp. 42-49
Transparencies:

"Original Suppliers of Drugs Today" - D-8-37

"The Cost of Drug Abuse to Society" - D-8-38

"Map of Heroin Route From Turkey to the United States" - D-8-39

"Escalating Costs of Heroin" - D-8-40

"Opium Production in One Year" - D-8-41

Motivating Questions

Why is there a very real danger of death from glue sniffing?

What social and emotional problems come from glue sniffing?

How are narcotics and dangerous drugs distributed throughout the black market?

What countries have supplied the United States with dangerous drugs?

Why is the cost of drug abuse so great to our society?

Why are these countries growing opium?

How does the opium arrive into the illicit channels? Where does it go from there?

How do the dealers get the opium from the plantations?

How does the cost vary as it travels through illicit channels?

Do you think that any of the people involved with drug traffic may be users themselves?
<table>
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<tr>
<td>Why is there a very real danger of death from glue sniffing?</td>
<td>Report: States that have the highest rate of drug abuse - suggest influencing factors responsible for the treatment of addicts.</td>
</tr>
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<td>How are narcotics and dangerous drugs distributed throughout the black market?</td>
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<td>What countries have supplied the United States with dangerous drugs?</td>
<td>Report: Discuss the transportation of heroin from Turkey to the United States.</td>
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<td>Why is the cost of drug abuse so great to our society?</td>
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**Report: Control and Treatment Measures For Addicts in the United States**

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</table>
D. Over one-half of the amphetamines produced in the United States fall into the black market.

1. Illicit distribution
2. Key figures in illicit traffic
3. Elevating costs
4. Traffic control problems

E. Due to their illegality in the United States, all hallucinatory drugs must come through illicit channels.

1. Marijuana distribution
   a. Mexico
   b. price variables
   c. traffic control problems

"The Control and Treatment of Narcotic Use," p. 24
"Fact Sheets," p. 3-2
Task Force Report: Narcotics and Drug Abuse," pp. 4-7
"Fighting Illegal Drug Traffic"
"Drug Abuse: The Chemical Cop-Out"
"Fact Sheets," pp. 3-1, 3-2
<table>
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<tr>
<td><strong>Report:</strong></td>
<td><strong>Report:</strong></td>
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<tr>
<td>British System of Drug Abuse Control</td>
<td></td>
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<tr>
<td>Ditto:</td>
<td>Ditto:</td>
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<tr>
<td>&quot;Pattern of Opium and Opiates, Pattern of Illicit Heroin To The United States&quot;</td>
<td>&quot;Illegal Distribution of Amphetamines and Barbiturates&quot;</td>
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<tr>
<td>&quot;Fact Sheets,&quot; p. 3-2</td>
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<tr>
<td>Task Force Report: Narcotics and Drug Abuse,&quot; pp. 4-7</td>
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<tr>
<td>&quot;Fighting Illegal Drug Traffic&quot;</td>
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<td>&quot;Fact Sheets,&quot; pp. 3-1, 3-2</td>
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<tr>
<td><strong>Problems</strong></td>
<td><strong>Problems</strong></td>
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<td>in the many causes</td>
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<tr>
<td>of drug abuse and related problems</td>
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</table>
How much heroin is smuggled into the United States yearly? (1,500 kilograms)

How are amphetamines and barbiturates being distributed throughout the black market?

Who would be key figures in the illicit distribution operation?

What are some of the problems in controlling illicit drug distribution?

Why is Mexico the main marijuana supplier for the United States?

What are the problems of law enforcement agencies in preventing marijuana smuggling?

What determines the pusher's final price?
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<td>Discuss what the local illicit amphetamine and barbiturate scene may be.</td>
</tr>
<tr>
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<tr>
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<tr>
<td>Why is Mexico the main marijuana supplier for the United States?</td>
<td>Report: Research into the smuggling of marijuana from Mexico into the United States.</td>
</tr>
<tr>
<td>What are the problems of law enforcement agencies in preventing marijuana smuggling?</td>
<td>Discuss enforcement problems from within Mexico, (border inspections, etc.)</td>
</tr>
<tr>
<td>What determines the pusher’s final price?</td>
<td>Discuss the price escalation of marijuana</td>
</tr>
<tr>
<td>Concepts</td>
<td>Teacher Materials</td>
</tr>
<tr>
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</tr>
<tr>
<td>2. LSD Distribution</td>
<td>&quot;LSD = False Illusion&quot; Part II.</td>
</tr>
<tr>
<td></td>
<td>&quot;Restricted Drugs for Use by Law Enforcement Agencies,&quot; p. 87</td>
</tr>
<tr>
<td>a. illicit labs</td>
<td></td>
</tr>
<tr>
<td>b. handling factors</td>
<td></td>
</tr>
<tr>
<td>c. cost</td>
<td></td>
</tr>
<tr>
<td>d. traffic control problems</td>
<td></td>
</tr>
<tr>
<td>3. Glue Sniffing Controls</td>
<td>&quot;Glue Sniffing: Big Trouble in a Tube&quot;</td>
</tr>
<tr>
<td>1. FBI</td>
<td></td>
</tr>
<tr>
<td>2. Bureau of Narcotics and Dangerous Drugs</td>
<td></td>
</tr>
<tr>
<td>a. enforcement</td>
<td></td>
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<tr>
<td>b. education</td>
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<tr>
<td>c. training</td>
<td></td>
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<tr>
<td>d. research</td>
<td></td>
</tr>
<tr>
<td>3. Bureau of Customs</td>
<td></td>
</tr>
<tr>
<td>4. FDA</td>
<td></td>
</tr>
<tr>
<td>5. State enforcement</td>
<td></td>
</tr>
<tr>
<td>6. Non-enforcement personnel</td>
<td></td>
</tr>
</tbody>
</table>
Teacher Materials

- "LSD = False Illusion" Part II.
- "Restricted Drugs for Use by Law Enforcement Agencies," p. 87
- "Glue Sniffing: Big Trouble in a Tube"
- "The Duties of the Bureau of Narcotics and Dangerous Drugs.
- "The Duties of the Bureau of Customs"

Student Materials

- Controls
- Increase of control
- Ditto:

Personnel
Audio Visual

Transparency:

"Costs of LSD" - D-8-43

Transparencies:

"A United Front Against Crime" - D-8-44

"Bureau of Narcotics and Dangerous Drugs Location of Field Offices" (Map) - D-8-45

Motivating Questions

How is LSD distributed?

In what ways has LSD been concealed?

Has the abuse of LSD declined? What other drugs are taking its place?

What is the price range of LSD?

What are problems involved in controlling LSD traffic?

What measures have been taken to control the abuse of glue sniffing and other inhalants?

What federal agencies are involved in controlling drug abuse?

What are the four main functions of the Bureau of Narcotics and Dangerous Drugs?

How does the Bureau of Customs control drug traffic?

How does the Bureau conduct its investigation?

Who are some non-enforcement people who aid in recovering smuggled goods?
<table>
<thead>
<tr>
<th>Motivating Questions</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>How is LSD distributed?</td>
<td>Discuss how LSD has been concealed.</td>
</tr>
<tr>
<td>In what ways has LSD been concealed?</td>
<td>Discuss whether or not the use of LSD is declining.</td>
</tr>
<tr>
<td>Has the abuse of LSD declined? What other drugs are taking it's place?</td>
<td></td>
</tr>
<tr>
<td>What is the price range of LSD?</td>
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<tr>
<td>What are problems involved in controlling LSD traffic?</td>
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<td>What measures have been taken to control the abuse of glue sniffing and other inhalants?</td>
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<tr>
<td>How does the Bureau conduct it's investigation?</td>
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<tr>
<td>Who are some non-enforcement people who aid in recovering smuggled goods?</td>
<td></td>
</tr>
<tr>
<td>Report:</td>
<td>Summarize existing community programs for the prevention of drug abuse.</td>
</tr>
<tr>
<td>Committee:</td>
<td>Discuss how the community as a whole can combat the cause of drug abuse.</td>
</tr>
<tr>
<td>Invite a person from the narcotic and drug division to be a guest speaker.</td>
<td></td>
</tr>
</tbody>
</table>
### DRUGS (continued)

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Teacher Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>G. Halting illicit drug traffic is primarily an international concern</td>
<td></td>
</tr>
<tr>
<td>1. United Nations</td>
<td>&quot;LSD: False Illusion&quot;</td>
</tr>
<tr>
<td>a. Permanent Central Opium Board and Drug Supervisory Body</td>
<td>&quot;What Can We Do About Drug Abuse?&quot; pp 16-17</td>
</tr>
<tr>
<td>b. Commission on Narcotic Drugs</td>
<td>&quot;Drug Abuse: A Dead End Street&quot;</td>
</tr>
<tr>
<td>c. World Health Organization</td>
<td></td>
</tr>
<tr>
<td>d. Division on Narcotic Drugs</td>
<td></td>
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<tr>
<td>2. Interpol</td>
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<tr>
<td>H. Laws have been passed to control the use of dangerous drugs.</td>
<td>&quot;Facts about Narcotics and Other Dangerous Drugs&quot; pp 50-52</td>
</tr>
<tr>
<td>a. International</td>
<td>&quot;Drug Abuse: Teenage Hangup&quot; pp 100-105</td>
</tr>
<tr>
<td>b. Federal</td>
<td>&quot;The Control and Treatment of Narcotic Use&quot; pp 21-23</td>
</tr>
<tr>
<td>c. State</td>
<td></td>
</tr>
<tr>
<td>d. City</td>
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</tbody>
</table>
Teacher Materials

"LSD: False Illusion"
"What Can We Do About Drug Abuse?" pp 16-17
"Drug Abuse: A Dead End Street"
"Facts about Narcotics and Other Dangerous Drugs" pp 50-52
"Drug Abuse: Teenage Hangup" pp 100-105
"The Control and Treatment of Narcotic Use" pp 21-23

Student Materials

Ditto:
"International Controls"
"Have you Ever Been Convicted of a Felony?"
"The Federal Laws"
<table>
<thead>
<tr>
<th>Audio Visual</th>
<th>Motivating Questions</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How has the United Nations controlled the use of drugs?</td>
<td>Discuss:</td>
</tr>
<tr>
<td></td>
<td>What are some of the problems encountered at an international level?</td>
<td>Organize traffic, question controls</td>
</tr>
<tr>
<td></td>
<td>How have the countries that grow and tolerate opiates advanced socially and economically?</td>
<td>Student Research, resource collection, student views, aspect analysis, student system, community abuse own, distribution, speak the crime, drug</td>
</tr>
<tr>
<td>Motivating Questions</td>
<td>Activities</td>
<td></td>
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<tr>
<td>----------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>How has the United Nations controlled the use of drugs?</td>
<td>If any students have gone through customs, have them explain the procedures they observed.</td>
<td></td>
</tr>
<tr>
<td>What are some of the problems encountered at an international level?</td>
<td>Discuss:</td>
<td></td>
</tr>
<tr>
<td>How have the countries that grow and tolerate opiates advanced socially and economically?</td>
<td>Organizations that aid in drug traffic control</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Questions regarding international control</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Student Report:</td>
<td></td>
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<tr>
<td></td>
<td>Research certain international control agencies</td>
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<tr>
<td></td>
<td>Students investigate various views regarding the legal aspects of drugs</td>
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<tr>
<td></td>
<td>Student report on the &quot;British System&quot; of drug control</td>
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<tr>
<td></td>
<td>Committee investigate how drug abusers are dealt with in their own locality</td>
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<tr>
<td></td>
<td>District Attorney as guest Speaker to inform students on the court procedures concerning drug abuse cases</td>
<td></td>
</tr>
</tbody>
</table>
DRUGS (continued)

2. Specific Federal Laws in US

a. Harrison Act 1914
b. Narcotic Import and Export Act 1922
c. Marijuana Tax Act 1937
d. Opium Poppy Control Act 1942
e. Boggs Act 1951
f. Federal Narcotic Control Act 1956
g. Narcotic Hospital Law
h. Narcotics Information Act
i. Narcotics Transportation Act
j. Narcotic Manufacturing Act 1960
l. Drug Abuse Control Amendments 1965
m. Narcotic Addict Rehabilitation Act.

Teacher Materials

- Handbook of Federal Narcotic and Dangerous Drug Laws
- "Drug Abuse: A Dead End Street" pp 15
- "Fact Sheets" Bureau of Narcotics and Dangerous Drugs, pp 21-22
- "Narcotics: Some Questions and Answers"
- "Drug Abuse: Escape to Nowhere" pp 22-25, 49
Federal Laws

Teacher Materials

- Poison Act 1914
- Post Import and Tax Act 1922
- Opium Tax Act
- Poppy Control 1942
- Act 1951
- Federal Narcotic Control Act 1956
- Hospital Act
- Information Act
- Transplant Act
- Manufac-

Student Materials

- Handbook of Federal Narcotic and Dangerous Drug Laws
- "Drug Abuse: A Dead End Street" pp 15
- "Fact Sheets" Bureau of Narcotics and Dangerous Drugs, pp 21-22
- "Narcotics: Some Questions and Answers"
- "Drug Abuse: Escape to Nowhere" pp 22-25, 49
Motivating Questions

Why is there a greater penalty for the pusher?

Why is marijuana legally classified as a narcotic?

Can this hold true in the drug problem: "Anything goes, as long as it doesn't hurt anyone"?

What right does the government have to restrict private behavior?

What are the arguments for and against: marijuana and tobacco? marijuana and alcohol?

What countries have made marijuana illegal where before it was legal?

When did the Drug Abuse Control Amendments come into being? What do they entail?

Why do you think the Narcotic Addict Rehabilitation Act was passed?

Activities

Buzz groups

If you had the chance to repeal drugs, what laws would you change?

Discuss hand convicted of drug abuse today.

Discuss: (1) Pass a law that has been repealed in the past.

Discuss (2) Law of the land.

Discuss: (1) Possess marijuana or not.

Discuss: (2) How do you feel about drugs and ill effects?
**Motivating Questions**

<table>
<thead>
<tr>
<th>Questions</th>
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<tbody>
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<td>Why do you think the Narcotic Addict Rehabilitation Act was passed?</td>
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</table>

**Activities**

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Buzz groups: If you were a law maker, what laws would you pass or repeal relating to the use of drugs?</td>
</tr>
<tr>
<td>Discuss handout &quot;Have You Ever Been Convicted of a Felony?&quot;</td>
</tr>
<tr>
<td>Discuss: (1) Parole rights that have been reinstated for Federal marijuana violators by a provision of Public Law 89-793 (Nov 8, 1966)</td>
</tr>
<tr>
<td>(2) Legislation is now pending before Congress to change the law of Dangerous Drugs so that the illegal manufacture, sale, or possession with intent to sell dangerous drugs would be a felony and illegal possession would be a misdemeanor.</td>
</tr>
</tbody>
</table>
IX. TEACHER INFORMATION

General Reasons for Drug Abuse

A. Four main groups of drug abusers
   1. "Situational user"
   2. "Spree user"
   3. "Hard core addict"
   4. "Hippies"

B. Key factors that lead to drug dependency
   1. A drug
   2. An individual
   3. An environment
   4. Personality deficiency

C. The juvenile's reasons for abuse
   1. Boredom - lack of definite goals
   2. Need to be accepted, "to belong"
   3. Sexual maturation
   4. Increasing responsibility
   5. Anxieties, frustrations, fear of failure, inner conflicts and doubts
   6. Loosening of family ties
   7. Defiance of parental authority and convention
   8. Family influence
      a. Absentee parents (physically or emotionally)
      b. Lack of identification with an adult or parent
      c. Lack of love and discipline from early adult figures
      d. Overcrowded conditions (lack of privacy)
      e. Negative parental attitudes toward healthy living
      f. Lack of moral discipline
      g. Present day mobility of families
h. Excessive discipline or lack of discipline
i. Lack of spiritual guidance
j. Lack of communication - "generation gap"

9. Affluence - need for new thrills

10. Poverty

11. Sociological factors
   a. Permissive society
   b. Experimenting new forms of tolerance and individuality
   c. New standards and values
   d. Lack of responsibility toward others
   e. Misinformation of drugs
   f. Largely metropolitan country
   g. Adults make to identify with young activities
   h. Concerned that social progress is failing to keep up pace with technol
   i. Pressures and material advances of modern society
   j. The problems in society - black power, crime, student unrest, civil

D. Adult reason for abuse

1. History of social maladjustment
2. Pressures and demands of society
3. Background family difficulties
   a. Discipline problems
   b. Trouble with police
line or lack of discipline
1 guidance
ation - "generation gap"

new thrills

ity
new forms of tolerance and individuality
ed values
ibility toward others
of drugs
itan country
identify with young activities
social progress is failing to keep up pace with technological advances
terial advances of modern society
ociety - black power, crime, student unrest, civil rights, poverty, and war

adjustment
as of society
difficulties

ems
lice
E. Community Factors

1. Overcrowded housing
2. Lack of employment
3. Health of individual
4. Education (lack of medical and psychological services)
5. Community attitudes (cultural, ethnic)
6. Sanitation
7. Lack of laws and enforcement
8. Recreation
9. Lack of spiritual atmosphere
10. Lack of recognition of problems
11. Lack of identity of individual with community
12. Lack of adequate police force
13. Mass media overemphasis
14. Community responsibility
15. Geographic areas
16. Lack of recognition that addiction is also a medical problem.

General Effects of Drug Abuse

A. Variables of drug effects

1. User's personality
2. Size and frequency of dose
3. How taken
4. Motivated reason for taking the drug
5. The environment
B. Physical illnesses

1. Respiratory diseases
2. Venereal disease
3. Hepatitis
4. Blood poisoning
5. Tetanus

C. Mental disorders

D. Neglect of personal habits

E. Malnutrition

F. Accidents - deaths

G. Potential pusher

---

General Symptoms of Drug Abuser

A. A drastic change in one's attitudes toward school, friends, and other activities.
B. A shift in friendships
C. A marked deterioration in overall personal appearances
D. Sudden and frequent absences from school or job
E. A general listlessness about life
F. Hypersensitivity, edgy behavior
G. Borrowing money from people at school, or those on the job
H. Observing the student in unusual isolated places around the school to the adult employee.

I. Any signs of equipment that can be associated with drug abuse.

**Illicit Channels of Drug Abuse**

A. Distribution of narcotics and dangerous drugs
   1. Major trafficker - importer - smuggler
   2. Distributor
   3. Bulk peddler - street peddler
   4. User

B. Main suppliers from 1940 - to date
   1. Turkey, Lebanon, Syria, China, Italy, France ... (white heroin)
   2. Mexico, (brown heroin) up from California
   3. Mexican opium
   4. Drug Store robberies, thefts, and RX forgeries

C. Estimate number of drug abusers in the United States
   1. 5 million alcoholics out of 70 million users
   2. 10 million smoke marijuana
   3. 10 million - pep pills
   4. 20 million - barbiturates
   5. 3 million - tranquilizers
   6. 60,000 heroin addicts
student in unusual isolated places around the school building ... which could also refer
ployee.
quipment that can be associated with drug abuse.

Illicit Channels of Drug Abuse

- narcotics and dangerous drugs
- ficker - importer - smuggler
- er - street peddler

from 1940 - to date
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- um
- robberies, thefts, and RX forgeries
- of drug abusers in the United States
- alcoholics out of 70 million users
- smoke marijuana
- pep pills
- barbiturates
- tranquilizers
- in addicts
D. Cost to society from all drug abuse

1. Variables of drug prices
   a. Location of user
   b. Demands for drug
   c. Availability for drug
   d. Purity of drug

2. Federal Bureau of Narcotics and Dangerous Drugs estimated about $400 million for illegal drugs.

3. Cost to support heroin habit
   a. $15.00 per day for narcotic drug equals $5,475 per year
   b. Drug abuser steals $3.00-$5.00 of goods to get $1.00 cash
   c. Must steal $50.00 property a day or $18,250 per year to support a habit
   d. In one year, one billion dollars worth of merchandise is stolen in support of their habit.

4. Treatment costs for the addict
   a. For a six week period it costs the United States $1,300 to $3,000
   b. Society pays around $83,214,300 to $192,033,000 for all addict treatments.
y from all drug abuse
of drug prices
on of user
is for drug
bility for drug
y of drug

ureau of Narcotics and Dangerous Drugs estimated about $400 million spent annually in
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port heroin habit.
per day for narcotic drug equals $5,475 per year
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steal $50.00 property a day or $18,250 per year to support a $15.00 a day habit
year, one billion dollars worth of merchandise is stolen in the United States for addicts
port their habit.

costs for the addict

six week period it costs the United States $1,300 to $3,000 a year for one addict. The	y pays around $83,214,300 to $192,033,000 for all addict treatment.
HALLUCINOGENS

Marijuana - Found in the flowering tops, leaves, and flowers of the hemp plant. Usually dried, crushed, or chopped into small pieces.

There are three grades of cannabis prepared in India:

1. Bhang - cheap; low potency; usually drunk; marijuana is 1/5 to 1/8 as potent as cannabis.
2. Ganja - two to three times as potent; made from mostly smoked.
3. Charas - pure resin obtained from plants or dried and sifted form of charas, but in India cannabis.

LSD - Lysergic acid diethylamide tartrate; synthesized from a fungus that grows on rye and wheat; now it is made synthetically.

Peyote - Mexican cactus; peyote buttons are ground into powder; religious ceremonies of Native American Church; not likely to cause psychological dependence, mescal and mescaline.

DMT - Dimethyltryptamine; natural constituent of seeds of cacti from South America; powder made from these seeds was used by the Aztecs; DMT produces effects required; also prepared synthetically; may cause psychological dependence.

Glue - A hydrocarbon.

Psilocybin - Prepared from a mushroom found in Central America.

DOM-(STP) - Prepared synthetically.
TEACHER INFORMATION (continued)

DRUG SOURCES

the flowering tops, leaves, and flowers of the Indian hemp plant, cannabis sativa; dried, crushed, or chopped into small pieces

three grades of cannabis prepared in India

-hash - cheap; low potency; usually drunk; marijuana compares in potency; when smoked, marijuana is 1/5 to 1/8 as potent as charas or hashish

-hanja - two to three times as potent; made from resin of plant or the dried flower; mostly smoked

-charas - pure resin obtained from plants or dried flowers; hashish is actually a powdered and sifted form of charas, but in literature hashish refers to any form of cannabis

acid diethylamide tartrate; synthesized from lysergic acid present in ergot, a fungus on rye and wheat; now it is made synthetically

mescal; peyote buttons are ground into powder; only legal when used in bona fide ceremonies of Native American Church; not likely to cause physical dependence but a psychological dependence, mescal and mescaline are forms of peyote

tryptamine; natural constituent of seeds of certain plants found in the West Indies and America; powder made from these seeds was used as snuff (called conoba) at the time arrived in the New World; DMT produces effects similar to LSD but larger doses are; also prepared synthetically; may cause psychological addiction - not physical

tarbon
from a mushroom found in Central America

synthetically
DEPRESSANTS

Opium - Prepared from the juice of the unripe seed capsules of the opium poppy mainly in China, Turkey, Iran and Yugoslavia; contains such alkaloids and papaverine; American addicts seldom take opium—rather they take opiates such as heroine

Codeine - A form of opium; present in some cough medicines that prescription, but pharmacist must, by Federal Law, have the person purchasing it; 1/6 as strong as morphine

Morphine - A form of opium; may be legally sold by prescription probably the most valuable of narcotics in medical use needed to reduce pain; slang, "Miss Emma" or "Whitey"

Paragoric - Opium; benzoic acid, and camphor; used to check intestines

Laudanum - Tincture of opium; alcohol and water

Barbiturate - Made chemically by heating a mixture of substances related to malonic compound found in urine, blood, and lymph of man and other mammals; basically a depressant

Tranquilizer - Example is reserpine—a crystalline alkaloid extracted from the root of quillers are closely related to sedatives; quiet nerves and reduce tendency to sleep

Alcohol - Colorless; volatile liquid; C₂H₅OH (ethyl alcohol); pungent smell; made of fermented grains, fruit juices, and starches

Bromides - Composed of bromine and another element; bromine is a chemical element in color; bromine is used in making dyes, in photography, and in anti-quiting effect on nerves
The juice of the unripe seed capsules of the opium poppy; the opium poppy is grown in Turkey, Iran and Yugoslavia; contains such alkaloids as morphine, codeine, anitiopium; American addicts seldom take opium—rather they take its derivatives—the heroines.

A form of opium; present in some cough medicines that may be sold without a prescription, but pharmacist must, by Federal Law, have the name and address of the person purchasing it; 1/6 as strong as morphine.

A form of opium; may be legally sold by prescription under strict regulations; probably the most valuable of narcotics in medical use because of small dose needed to reduce pain; slang, "Miss Emma" or "White Stuff".

- Opium; benzoic acid, and camphor; used to check intestinal fermentation.
- Tincture of opium; alcohol and water.
- by heating a mixture of substances related to malonic acid, and urea (a in urine, blood, and lymph of man and other mammals); made synthetically.
- pine—a crystalline alkaloid extracted from the root of an Indian shrub; tran- closely related to sedatives; quiet nerves and reduce tension without putting.
- Ethyl alcohol; pungent smell; made from the distillation.
- bine and another element; bromine is a chemical element, usually reddish-brown.
- used in making dyes, in photography, and in anti-knock motor fuel; has a on nerves.
STIMULANTS

Cocaine - A crystalline alkaloid made from dried coca leaves; Indians of South America use coca leaves mixed with lime; this keeps them from feeling tired or hungry—doesn't nourish body habit-forming and may ruin health; properly used as a local anesthetic to stop bleeding from a nosebleed; may produce visual hallucinations—both visual and tactual; addicts may sniff or inject cocaine with the terms "C" or "Snow".

Novocaine and procaine – Harmless relatives and are used by dentists to numb a tooth; physicians use it as a local anesthetic.

Benzedrine – Obtained from ephedrine which is obtained from certain desert shrubs

Methedrine – Methamphetamine hydrochloride; slang terms “Speed,” “Crystal”

Caffeine – Chemical formula: C₈H₁₀N₄O₂; odorless, slightly bitter solid; found in beans and tea, it increases circulation and is harmless; in large amounts causes headaches, and digestive disturbances; produced from plants in pure form; made in laboratory; caffeine is used as a stimulant of the heart and as a remedy for poison of alcohol, opium, and other drugs that depress the heart.

Nicotine – An acrid, poisonous, oily alkaloid, C₁₀H₅NO₂, contained in the leaves of the tobacco plant; if taken internally, it may cause death.
Alkaloid made from dried coca leaves; Indians of South America chew the leaves keeps them from feeling tired or hungry—doesn’t nourish the body; becomes nd may ruin health; properly used as a local anesthetic and in treatment of and eye; stimulates the heart and central nervous system; overdoses produce both visual and tactual; addicts may sniff or inject cocaine; called by slang now”
d procaine - Harmless relatives and are used by dentists when filling or pulling a tooth; physicians use it as a local anesthetic

ephedrine which is obtained from certain desert shrubs
hydrochloride; slang - "Speed," "Crystal"

\[
\text{a} - C_8H_{10}N_4O_2; \text{ odorless, slightly bitter solid; found in tea and coffee; in small es circulation and is harmless; in large amounts causes nervousness, sleeplessness, digestive disturbances; produced from plants in pure form in 1820; can now be}
\]

caffeine is used as a stimulant of the heart and nervous system and as a on of alcohol, opium, and other drugs that depress the nervous system.

ous, oily alkaloid, \( C_{10}H_5NO_2 \); contained in the leaves of tobacco
I. Description

A. Found in the flowering tops, leaves, and flowers of the female Indian hemp
B. Usually green in color and is usually dried, crushed, or chopped into small
C. Active ingredient THC (tetrahydro cannabinoids)
D. Smells like alfalfa when burned, in cigarette form it burns hotter and the
tip is easily extinguished so must be constantly puffed.
E. Potency depends on the amount of the plant contained

1. Bhang -- top of plant, not cultivated from which the resin has not bee
American marijuana)
2. Ganja - tops of cultivated plant without extracting the resin (about 4
Bhang)
3. Charas - Resinous extract from flowers of cultivated plants (8 times st
hashish)
4. Other factors, how taken into body, the manner of handling it, individ
illicit market

II. Some slang expressions

Pot Grass Mary Jane Hay Wee
Reefer Sticks Joints Dagga Loc
Bhang Hemp Charas Roach Jix

III. Proper Uses

A. None (except medical research)

1. N.I.M.H. - National Institute of Mental Health is responsible for suppo
forty nine research projects to learn more about marijuana

a. 1967 - extensive research has been able to take place because of fi
the active ingredient THC
HALLUCINOGENS

MARIJUANA

ops, leaves, and flowers of the female Indian hemp plant (cannabis sativa) and is usually dried, crushed, or chopped into small pieces (tetrahydrocannabinols). When burned, in cigarette form it burns hotter and the burning tip is brighter. The smoke must be constantly puffed. The amount of the plant contained in not cultivated from which the resin has not been extracted (powerful as marijuana) is cultivated plant without extracting the resin (about 4 or 5 times stronger than extract from flowers of cultivated plants (8 times stronger than Bhang - known as taken into body, the manner of handling it, individual susceptibility and the

Grass Mary Jane Hay Weed Hashish
Sticks Joints Dagga Locoweed Ganja
Hemp Charas Roach Jive Texas Tea

search)

Institute of Mental Health is responsible for supporting and conducting projects to learn more about marijuana. The research has been able to take place because of finding the synthetic form of

- 66 -
b. Studies to discover exactly how marijuana affects memory, physical movement, and long range effects on the mind and body.

c. Surveys of how people get the drug, how widely it is used, and effects may occur with different amounts and periods of use.

IV. Improper use pattern

A. Used second as an intoxicant to alcohol
B. Young introduced under social circumstances
C. Serve reefers (cigarette form) as social gesture

1. Moderate doses (1-2 reefers) effects of temporary intoxication include:
   2. Larger doses create extreme effects
   3. Four reefers - perception changes
   4. Total trip lasts 2-5 hours
   5. Smoked in room (teapad). Try to rebreathe as much smoke as possible, loud, talkative or very happy
   6. User normal on outside: talks with usual ability, sometimes hesitant
   7. On surface may be coherent, underneath may be "tripping out." If unable to coordinate movement, may fail in performance.

D. Sniffed
E. Eaten or drunk
F. Psychological dependence
G. Estimated 20,000 users in the United States

V. Physical effects

A. External

1. Yellow stain on smoker's fingers
2. Cold extremities
3. Hypersensitivity sensation of ants running over skin
er exactly how marijuana affects memory, perception (or awareness), mood, 
and long range effects on the mind and body.

People get the drug, how widely it is used, and what physical and psychological 
results with different amounts and periods of use.

ant to alcohol

cial circumstances
form) as social gesture

reefers) effects of temporary intoxication in fifteen minutes
extreme effects
otion changes
hours

Try to rebreath as much smoke as possible — begin to feel "buzz". May be
very happy
le: talks with usual ability, sometimes hesitantly or slurred
herent, underneath may be "tripping out." If placed under stress, or to have
it, may fail in performance.

in the United States

ers fingers

sensation of ants running over skin

-67-
TEACHER INFORMATION (continued)

B. Gastrointestinal
1. No effect on taste
2. Increase thirst and appetite
3. Large doses: nausea, emesis, diarrhea, constipation

C. Nervous system
1. Coordination altered
2. Speed and accuracy, intellectual capabilities impaired
3. Alternate laughing and crying
4. Up or down feeling
   a. Relaxed - at ease, self confident
   b. Anxious, paranoid
   c. Continue to go "up" depends if the behavior is impulsive and a mood
5. Hallucinations - experience (phantasmagoria) sensations of figures rush
   great speed
6. Delirium
7. Chronic exposure produces brain lesions

D. Circulation
1. Heart beat increases 120 times/minute
2. Blood pressure unchanged or slight decrease
3. Hypoglycemia (decrease blood sugar)
4. Slight anemia (chronic use)
5. Death - cardiac failure to some individuals after 100-200 times therapy

E. Respiration
1. Rate usually decreased
2. Coughing after smoking
3. Asthma or bronchitis may result
TEACHER INFORMATION (continued)

Dizziness, nausea, emesis, diarrhea, constipation

Alteration in mood, intellectual capabilities impaired
Anxiety and crying

Less or no stress, self confident
Hypomanic or mania: core symptoms to go "up" depends if the behavior is impulsive and a mood reaction variable

-experience (phantasmagoria) sensations of figures rushing toward the person in a
-pressures 120 times/minute
-unchanged or slight decrease
-Decrease blood sugar)
-(chronic use)

-lapse to some individuals after 100-200 times therapeutic dose

Decreased smoking

Cancer may result
F. Muscular
   1. Incoordination
   2. Large doses produce spasm of contracting muscles

G. Eyes
   1. Dilatation
   2. Bloodshot
   3. Tears

H. Elimination
   1. Not detected chemically in urine

I. Long term physical effects not known

VI. Psychological effects
   A. Depersonalization (under influence)
   B. Release normal inhibitions (under influence)
   C. Used daily and heavily may result in mental illness
   D. May cause one to see stronger drugs

VII. Reasons for abuse
   A. Rebellion
   B. Curiosity
   C. Promote sociability
   D. Escape reality
   E. Retreat from tension/worry
   F. Rid hang ups
   G. Understand self

VIII. Social application
   A. Lower caste (to experience the effect for the effect itself, to retreat from problems)
B. Upper caste (intellectuals - students - the "arty group")

1. Dabbler - use marijuana sporadically, something daring and contemporary.
2. User - A weekender. This group is where the "marijuana cult" begins and seemingly reasonably well-balanced users.
3. Head - The person's world revolves around the drug experience. The marijuana cult. They are a small group but abhor authority.

C. Highest incidence of users is 16-28 years of age.

D. Servicemen

IX. Social harm

A. Can become a chronic user
B. Inertia
C. Lethargy
D. Indifferent to ideas, opinions
E. Indulge in self-neglect
F. Familiarizing with the "wrong" people - may lead to stronger drugs

X. Emotional harm

A. Hard to make decisions
B. Easily open to other's suggestions
C. Emotions heightened - compelled to do anything (could break down moral standards)
D. Personality breakdown

1. Rationalize to justify wrong
2. Suspicious of others
TEACHER INFORMATION (continued)

(marijuana sporadically, something daring and contemporary. This is the "respectable" head.

weekender. This group is where the "marijuana cult" began. It is where the "kooks radicals" and seemingly reasonably well balanced users appear.

person's world rotates around the drug experience. They tend to be leaders in the marijuana cult. They are a small group but abhor authority and the whole respectable id is an enemy.

of users is 16-28 years of age.

nic user

reas, opinions neglect the "wrong" people - may lead to stronger drugs.

her's suggestions

ed - compelled to do anything (could break down moral structures)

to justify wrong of others
XI. Risks

A. Creates psychological dependence
B. Can cause respiratory system damage
C. The diluted or "cut" marijuana may be toxic and cause illness or possibly death
D. May lead to other drugs
E. Interrupt education
F. Police record if caught
G. With record - prevention into certain professions ... medicine, law, teaching.
H. Responsible jobs, difficult to come up.
I. Government jobs require individual evaluation

XII. Illegal traffic of marijuana

A. Distribution
   1. Mexico (majority from there)
      a. 3 1/2 to 5 tons into the United States each week
      b. Retail values of $100 million a year
      c. Shipped in Kilos 2.2 pounds and then broken down further for the peddler to push

B. Profits in marijuana
   1. Variables
      a. Further east it goes, the more it costs
         1) Chicago 1966
            a) 50-70 cents/cigarette
            b) $25.00 per can (tobacco tin)
            c) $85-$125 a pound
      b. Supply
      c. Demand
      d. "Heat" from police
C. Enforcement problems

1. 25,000 cars (business and pleasure) that cross Mexican border each year.
2. Airplanes, commercial and private smuggle it out.

XIII. Law

A. Federal

1. To have, give, or sell is a felony in the United States
2. Penalty
   a. First offense possession 2-10 years, fines up to $20,000
   b. Second offense, 5-20 years
   c. Third offense, 10-40 years
   d. First offense (selling) 5-20 years
   e. Second offense, 10-40 years

B. State

C. Devices used for lessening severity

1. Officials lean over as much as can
2. Charge persons found in same apartment with "loitering" for the purpose of a lesser violation

D. Law questioned by responsible observers

1. Government officials
2. Physicians
3. Educators
4. Psychologists
5. The American Civil Liberties Union
6. Newspaper editorial writers

   a. All believe law too severe
   b. Should not be legally classified with hard narcotics
TEACHER INFORMATION (continued)

ness and pleasure) that cross Mexican border each day
ial and private smuggle it out.

sell is a felony in the United States

possession 2-10 years, fines up to $20,000

e, 5-20 years

, 10-40 years

(selling) 5-20 years

e, 10-40 years

ening severity

er as much as can

und in same apartment with"loitering" for the purpose of using marijuana, which

onsible observers

als

l Liberties Union
al writers

law too severe

legally classified with hard narcotics
E. President's 1963 Advisory Commission

1. Recommended dividing the narcotic and marijuana offenses into four groups:
   a. The smuggling or sale of large quantities of narcotics or the possession for sale. Subject the offender to mandatory minimum sentences. Probation and parole would be denied.
   b. The smuggling or sale of small quantities of narcotics, or the possession for sale. Offender to some measure of imprisonment but not mandatory minimum sentence would not be available, but parole would.
   c. The possession of narcotics without intent to sell. The sentencing discretion as to these offenses.
   d. All marijuana offenses: the sentencing judge would have full discretion.

2. Recommends: State and Federal drug laws should give a large enough margin to the criminal justice and correctional authorities to enable them to deal flexibly with violations of the law, the nature and seriousness of the offense, the prior record of offender and so on.

3. Parole rights have already been reinstated for federal marijuana violators by Law 89-793 (November 8, 1966)

F. Recent countries alarmed by the uninhibited use in their country.

1. India - marijuana was accepted as religious life for years. Outlawed in 1930 due to negative effects.
2. African nations once accepted it now worry about its overall effects.
3. Nigeria - death penalty
Commission

the narcotic and marijuana offenses into four groups

sale of large quantities of narcotics or the possession of large quantities

t the offender to mandatory minimum sentences. Probation, suspension of sentence,

be denied.

sale of small quantities of narcotics, or the possession of small quantities for

some measure of imprisonment but not mandatory minimum terms. Suspension

not be available, but parole would.

narcotics without intent to sell. The sentencing judge would have full

these offenses.

des: the sentencing judge would have full discretion.

Federal drug laws should give a large enough measure of discretion to the courts

rities to enable them to deal flexibly with violators, taking account of the

 offense, the prior record of offender and other relevant circumstances

ready been reinstated for federal marijuana violators by a provision of Public

8, 1966)

by the uninhibited use in their country.

accepted as religious life for years. Outlawed its use in 1959 because of its

accepted it now worry about its overall effects.
I. Description
   A. Lysergic acid diethylamide
   B. Developed in 1938 from ergot, a fungus which grows on rye
   C. 1950 became available to experimental research workers
   D. 1959 entered black market
   E. Odorless, colorless, tasteless

II. Slang names
   Acid Acid Head Hawk The Chief

III. Proper Uses
   A. No accepted use in medical practice
   B. Government approved use for research
   C. Only legitimate source of LSD at N.I.M.H. (National Institute of Mental Health) Be supports 58 research projects
      1. Controlled administration - screening the subjects - and recording their effects, personality and performance changes
      2. Therapeutic effectiveness in some areas which have not been completely evaluated
         a. Alcoholics
         b. Neurotics
         c. Psychotic children
         d. Psychotic adults (frigidity and homosexuality)
         e. Autistic children
         f. Providing mental relief for those people having terminal illnesses
      3. Observation of side effects - to discover how to treat the people suffering from
      4. Surveys of extent of the LSD use among students and general population
      5. Long range projects to study LSD users and their culture.
TEACHER INFORMATION (continued)

LSD

Lamind, a fungus which grows on rye, is made from ergot, a fungus which grows on rye, and is used to treat experimental research workers.

A tasteless, colorless liquid, LSD is used in medical practice for research.

The Chief

Acid Head

Hawk

NIDA (National Institute of Mental Health) Bethesda, Maryland, which

projects - screening the subjects - and recording their effects (physical, genetic behavior, and performance changes)

Effectiveness in some areas which have not been completely evaluated.

Adults (frigidity and homosexuality)

Children

Mental relief for those people suffering from terminal illnesses

Side effects - to discover how to treat the people suffering from the side effects. A test of the LSD use among students and general population

Effects to study LSD users and their culture.
TEACHER INFORMATION (continued)

D. LSD is a member of the CMR (chemical, biological, and radiological) weapons

E. Illegal in the United States

IV. Improper Use pattern

A. Upper and middle class families

1. The majority
2. 18-30 year old bracket
3. Students or recent "drop-outs"
4. Had ample opportunity to achieve a higher education

B. Taken in sugar cube, cracker, cookie, capsule, licked off stamp, or put in a
C. Injected
D. Inhaled
E. Twenty-five milligrams found to be active

1. Is \( \frac{1}{40,000} \) of a gram
2. Four times this amount (100-250 milligrams) constitutes average dose
3. About \( \frac{1}{280,000} \) of an ounce gives effects from 8 to 12 hours

F. Visual changes occur after first hour and then followed by extreme changes in
G. Factors influencing "trip"

1. Set - what user expects to happen
2. Setting - effect on individual attitude toward self-control and ability
3. Tolerance built up

V. Physical effects

A. Exactly how the drug produces effects is only partially understood. The part of the forebrain, midbrain, hypothalmus, and hippocampus - where the input of information is decoded and processed. The substance (serotonin) organizes and channels information to the brain and it is believed that LSD inhibits this activity.

B. External

1. Shaking hands and feet
2. Flush face or paleness
IR (chemical, biological, and radiological) weapons to be used in warfare

Families

at

drop-outs" to achieve a higher education

cracker, cookie, capsule, licked off stamp, or put in any other object

ound to be active

nt (100-250 milligrams) constitutes average dose

ounce gives effects from 8 to 12 hours

er first hour and then followed by extreme changes in mood.

acts to happen

individual attitude toward self-control and ability to cope with crisis

duces effects is only partially understood. The parts of the brain affected are hypothalmus, and hippocampus - where the input of information from the senses. The substance (serotonin) organizes and channels sensory information to the that LSD inhibits this activity.
3. Wet mouth
4. Cold sweaty palms, shivering, chills or heat flashes

C. Gastrointestinal
   1. Readily absorbed from intestinal tract
   2. May produce nausea
   3. Loss of appetite

D. Nervous system
   1. With LSD ingestion one usually perceives actual objects and sounds are illusions rather than true hallucinations. Sometimes true hallucinations.
   2. Dizziness and headaches

E. Circulation
   1. Increase in pulse
   2. Blood pressure increased
   3. Blood sugar rises

F. Respiration
   1. Irregular breathing

G. Muscular
   1. Unsteadiness of hands and feet

H. Eyes
   1. Dilated pupils

I. Long term physical effects (maybe)
   1. Leukemia
   2. Epileptic seizures
   3. Deformed babies
TEACHER INFORMATION (continued)

alms, shivering, chills or heat flashes

ed from intestinal tract
ausea
ite

ation one usually perceives actual objects and sounds accentuated and/or distorted...these rather than true hallucinations. Sometimes true hallucinations do occur

headaches

ulse
increased
ises

athing

of hands and feet

effects (maybe)

zures
VI. Psychological effects
   A. Feeling two strong and opposite emotions at same time
   B. Changes in physical senses
      1. Taste, smell, hearing, touch are acute
      2. Colors brilliant
      3. Stationary things move
      4. Flat objects become three-dimensional
      5. Lose normal feeling of boundaries

VII. Mental effects
   A. Mystical feeling (some users report a sense of rebirth or new insight)
   B. Users believe increase of creativity occurs, studies fail to support this
   C. May impair users' powers of concentration and ability to think

VIII. Reasons for Abuse
   A. Curiosity
   B. Kicks
   C. Understand self
   D. Religious and philosophical insights

IX. Social application
   A. Pleasure seekers (a passive lot)
   B. Self improvers (more serious...they experience the effects, and try to be the painters, poets, and musicians that believe LSD enhances their
   C. Disenchanted (hippie). Believes society is incurably "sick" and wants

X. Social harm
   A. Dramatic shift in one's value system
   B. Ability to love and work stifled
   C. Missionary quality develops to get followers
   D. "Perceptual distortion" a feeling of improvement, but actual loss of f
   E. Adolescents believe it a "magic solution" for their struggles
TEACHER INFORMATION (continued)

opposite emotions at the same time

Sensing, touch are acute

Above

three-dimensional

of boundaries

Users report a sense of rebirth or new insight) of creativity occurs, studies fail to support this viewpoint

of concentration and ability to think

Ical insights

ive lot) various...they experience the effects, and try to act upon them. Examples of this type of music and musicians that believe LSD enhances their work.

Believes society is incurably "sick" and wants no part of it.

value system

stifled

lops to get followers

a feeling of improvement, but actual loss of functioning a "magic solution" for their struggles
XI. Emotional harm

A. Unpleasant sensations
   1. Fear
   2. Panic
   3. Depression
   4. Anxiety
   5. Confusion
   6. Schizophrenic type
   7. Paranoia (72 hours after drug wears off)

B. Pleasurable "positive trips"
   1. Believe answer to all problems
   2. Become chemically centered, religion and values

XII. Risks

A. Since made illegally, may have toxic elements to cause illness or death—could "blow someone's mind."
B. Flashbacks may recur 8-10 years later
C. Indirectly leads to chromosome damage and abnormal birth defects
D. Mental derangement
E. Accidental deaths due to "trip"
F. Suicidal feelings

XIII. Illegal traffic of LSB

A. LSD distribution
   1. Illicit laboratory
   2. Obtain patent from Patent Office for 50 cents, a copy being accessible
      inspect them
   3. Smuggled in from other countries
      a. Europe (Iron Curtain countries)
      b. Canada
sensations

sensory

psychotic group

schizophrenic type

via (72 hours after drug wears off)

the "positive trips"

the answer to all problems

a chemically centered, religion and values

the illegally, may have toxic elements to cause illness or death — also not knowing the strength of someone's mind.

may recur 8-10 years later

may leads to chromosome damage and abnormal birth defects

may lead to chromosome damage and abnormal birth defects

may deaths due to "trip"

feelings

of LSH

distribution

it laboratory

its patent from Patent Office for 50 cents, a copy being accessible to those who desire to

led in from other countries

Europe (Iron Curtain countries)
c. Australia
d. Italy
e. Mexico

1) Number of doses estimated at 50,000 - 100,000 (100 mg from Mexico)

4. Ways peddled
   a. Spitballs
   b. Glue on envelope flap
   c. Stamps
   d. Any absorbent material
   e. Powder concealed in a regular envelope contains around 10,

B. Escalating costs
   1. If big demand, the price is high
   2. One dose (100 - 300 mg) costs from 70 cents to $5.00
   3. Small college towns have to pay up to $15.00 a dose

C. Problems controlling traffic
   1. Smuggled easily
      a. Odorless, colorless, tasteless
      b. Handled in ounces, grams, milligrams and micrograms

XIV. Laws (Federal Drug Abuse Control Amendments, 1965)

A. For illegal production, sale or distribution
   1. Imprisonment from 1-3 years with fines of $1,000 - $10,000
   2. Persons over 18 who sell or give drugs to anyone under 21... to $15,000
es estimated at 50,000 - 100,000 (100 mg dose) smuggled monthly, mainly

flap

erial

in a regular envelope contains around 10,000 doses

ice is high
g) costs from 70 cents to $5.00
cave to pay up to $15.00 a dose

gic

ss, tasteless

, grams, milligrams and micrograms
(drol Amendments, 1965)
sale or distribution

years with fines of $1,000 - $10,000
gell or give drugs to anyone under 21 ... imprisonment up to 6 years and fines
B. State laws (penalties vary)
C. Merely possessing drug illegally - no intent to sell - $1,000 fine and/or one year in prison
I. Peyote and Mescaline

A. Mescaline - The pure alkaloid ingredient found in the peyote cactus. 3 - 8 - 10 hours

B. Peyote - Dried button-like growths found on the small, gray-green capsule preparation from the plant. Legal use of peyote is in the American Church.

C. Unpleasant tastes so taken with another substance

D. Immediate reactions

1. Nausea
2. Tremors
3. Perspiration
4. Wears off in a couple of hours

E. Intoxicated period

1. Hallucinations
2. Visual distortions

F. Deep sleep

II. Psilocybin and psilocin

A. Extracts of a Mexican mushroom
B. Effects similar to those of mescaline
C. 4 - 8 mg are ample for an experience to last 6 hours.

III. DMT

A. Dimethyltryptamine
B. Produced synthetically, originally found in seeds of certain plants in
C. Taken intravenously, smoked, or inhale the fumes.
pure alkaloid ingredient found in the peyote cactus. 300-800 mg have effects that last 10 hours

button-like growths found on the small, gray-green cactus plant. It is the unconcentrated
extraction from the plant. Legal use of peyote is in the religious services of the Native
American Church.

so taken with another substance

a couple of hours

od

ns

rtions

cin

ican mushroom
to those of mescaline
le for an experience to last 6 hours.

eically, originally found in seeds of certain plants in Central and South America.
ly oed, or inhale the fumes.
D. Produces hallucinations and a feeling of communication with the outer spiritual
E. 50-150 mg will last 45 - 60 minutes
F. "Businessman's trip" because reduced dosages turn out as little as 30 minutes an

IV. DOM or STP - synthetic hallucinogen that is very powerful. 1 - 3 mg produce euphor
pronounced hallucinations lasting 8 - 10 hours. With larger doses, a "trip" could 1

V. Morning Glory seed ingredients are closely related to those in LSD, however, the str
that of LSD

VI. Nutmeg - commercial nutmeg, derived from the dried seed of the Myristica fragans, is
are found in the tropical areas of the Eastern and Western hemispheres. Nutmeg of t
produce hallucinations when administered in doses of more than one teaspoon. Red
LSD-like experiences to little or no reaction.
TEACHER INFORMATION (continued)

ations and a feeling of communication with the outer spiritual world
at 45 - 60 minutes
trip" because reduced dosages turn out as little as 30 minutes and can last up to 6 hours.

hallucinogen that is very powerful. 1 - 3 mg produce euphoria. More than 3 mg -
ions lasting 8 - 10 hours. With larger doses, a "trip" could last for 2 - 3 days.

redients are closely related to those in LSD, however, the strength is only about $\frac{1}{10}$ of

utmeg, derived from the dried seed of the Myristica fragrans, is produced from trees which
ical areas of the Eastern and Western hemispheres. Nutmeg of this type has been found
ions when administered in doses of more than one teaspoon. Reactions seem to vary from
to little or no reaction.
I. Description

A. Opium - A powerful narcotic drug made from the milky juice of the opium poppy; grown mainly in China, Turkey, Iran, and Yugoslavia; it is taken out, dried to a brown gummy stage, and rolled into balls and shi changed to a white powder with a distinctive odor and sharp bitter tas

B. Alkaloids or derivatives of opium (opiates)

1. Codeine - Present in cough medicines that may be sold without a prescription; Federal Law, have the name and address of person purchasing it.
2. Morphine - Probably most valuable of narcotics in medical use because of s may be legally sold by prescription under strict regulations.
3. Paregoric - Opium, benzoic acid, and camphor.
4. Heroin - Dangerous, illegal opiate drug several times stronger than mor

II. Slang expressions

1. Heroin - "H"  Horse  Stuff  Harry  Joy powder  Scat  
2. Narcotics - Cotics  Gee-head  Goods  Hard stuff

III. Proper uses

A. Morphine

1. Large doses relieve pain and permit sleep
2. Small doses reduce pain
3. Used in treatment of these diseases and conditions:
   a. Cancer
   b. Cardiac asthma
TEACHER INFORMATION (continued)

OPIATES

Drug made from the milky juice of the opium poppy; opium is native to Greece and
only in China, Turkey, Iran, and Yugoslavia; it is cultivated in India, Egypt,
ial opium comes from the juice of the unripened pod which is slit and juice
a brown gummy stage, and rolled into balls and shipped to refineries where it is
powder with a distinctive odor and sharp bitter taste.

Opium (opiates)

Although medicines that may be sold without a prescription, but pharmacist must, by
ave the name and address of person purchasing it. It is \( \frac{1}{6} \) as strong as morphine.
valuable of narcotics in medical use because of small dose needed to reduce pain.
y sold by prescription under strict regulations.
ic acid, and camphor.

Illegal opiate drug several times stronger than morphine.

and permit sleep

ese diseases and conditions:
c. Whooping cough
d. Alleviating vomiting and check diarrhea
e. Gallstones
f. Renal colic
g. Internal hemorrhage
h. Traumatic shock
i. Congestive heart failure
j. Threatened abortion

B. Codeine
1. Used orally and hypodermically to relieve pain, spasm, and as a sedative
2. Treat severe coughs, asthma, intestinal pain, and neuralgia

C. Paregoric
1. Used to check intestinal fermentation

D. Heroin
1. None

IV. Improper use pattern (referring to the opiates)

A. Sniffed as a powder (snorting)
B. Injected (mainlining) (skin popping)
C. Heroin most commonly abused
   1. "Cut heroin" 3 - 10% pure, diluted mostly with milk, sugar, or quinine
   2. Tends to be less pure and more expensive as it moves through the streets
   3. Dosage
      a. Start with 5 - 10 mg
      b. End with 450 mg/day
      c. Average dose wears off in 6 hours

D. Addict dies each day of overdose
E. Morphine effects wear off in about 12 hours
TEACHER INFORMATION (continued)

coughing and check diarrhea

colic hemorrhage

c shock

ev heart failure

and hypodermically to relieve pain, spasm, and as a sedative
coughs, asthma, intestinal pain, and neuralgia

and intestinal fermentation

(referring to the opiates)

d (snorting)

(skin popping)

only abused

3 - 10% pure, diluted mostly with milk, sugar, or quinine.

less pure and more expensive as it moves through the illicit channels of distribution

with 5 - 10 mg

450 mg/day

dose wears off in 6 hours

day of overdose

ff in about 12 hours
F. Opium effects wear off in about 24 hours

Physical effects

A. External
   1. Cold, clammy feeling to body
   2. Perspiration and shakes if going through withdrawal
   3. Scar or skin infection from injections

B. Gastrointestinal
   1. Reduce thirst and appetite - loss of weight
   2. Vital secretions decrease through steady use, causing an acid mouth (teeth rot)
   3. Constipation
   4. Gallbladder often inflamed
   5. Abscesses on liver may appear
   6. Nausea and vomiting may happen to the inexperienced abuser

C. Nervous system
   1. Reduction of tension, easing of fears, relief from worry, (euphoria - state of well being)
   2. Inactivity, bordering on stupor may follow next
   3. Feelings of pain may be reduced
   4. Abscesses may appear on brain

D. Circulation
   1. Heartbeat reduced
   2. Poor circulation
   3. Blood pressure lowered

E. Respiration
   1. Breathing reduced to around 4/minute, average being 17/minute
   2. Oxygen supply reduced
   3. Abscesses may appear on lungs
   4. Sniffing induces nose inflammation
      a. Ulcers appear
      b. Division between nostrils may receive a hole

F. Muscular
   1. Intestine and stomach muscles reduced
   2. Withdrawal - the muscles wrench, produce spasms - shaking
G. Neglected health habits

1. Malnutrition
2. Dental caries
3. Chronic fatigue
4. Lowered resistance to infection
5. Devitalized condition

H. Withdrawal illness

1. Due to physical dependence
2. Symptoms - addict sweats, shakes, gets chills, diarrhea, vomits, suffer
3. Varies with degree of dependence and amount used
   a. Begins 8 - 12 hours after last dose
   b. 36 - 72 hours at peak
   c. 5 - 10 day gradually diminish
   d. Weeks later may suffer nervousness, muscle ache, and insomnia
   e. 6 months, the body may take to go back to normal

VI. Reasons for Abuse

A. Relief - escape from troubles
B. Feel more sure of self
C. Ease, contentment, relaxation
D. Teenage: curiosity, fear, boredom, bravado.

VII. Social application

A. 1968, about 64,000 active narcotic addicts in the United States. An estima
B. 47% between ages of 21 and 30 years old
C. 10,000 believed to be teenagers
D. Urban problem
   1. Found chiefly among young men of minority groups in ghetto areas
E. Other abusers range from doctors, nurses, druggists to jazz musicians and e
TEACHER INFORMATION (continued)

Dependence
sweats, shakes, gets chills, diarrhea, vomits, suffers sharp pain in stomach
of dependence and amount used
2 hours after last dose
at peak
gradually diminish
may suffer nervousness, muscle ache, and insomnia
e body may take to go back to normal

troubles

If
relaxation
fear, boredom, bravado.

active narcotic addicts in the United States. An estimated 6,000 being heroin addicts.
21 and 30 years old
teenagers

long young men of minority groups in ghetto areas
from doctors, nurses, druggists to jazz musicians and other "arty" people
TEACHER INFORMATION (continued)

F. Maturing out
   1. Usually would take place around 35 years of age
   2. Do not need the drug anymore
   3. Have matured emotionally and mentally to have realized they can carry out
      the drug

G. Hard to recognize an addict who receives regular supply, and who does not abu

VIII. Social harm

A. Non-violent crimes
   1. Shoplifting
   2. Stealing from parked cars
   3. Pick-pocketing
   4. Pandering and prostitution

B. Violent crimes
C. Family suffers
D. Push drugs to support habit
E. Unreliable to those around him

IX. Emotional harm

A. Strength of character weakened
B. No interest in anything, preoccupied with self
C. Pleasing personality lost - suspicious
D. Irritable, tell senseless lies

X. Risks

A. Problems going back into society if have kicked the habit
   1. Known as former addict
   2. No money
   3. Employees weary about hiring
   4. Family may be different
   5. Community disapproval
place around 35 years of age

ably and mentally to have realized they can carry out their processes without

idict who receives regular supply, and who does not abuse to great extent

ed cars

sitution

habit

ound him

weakened

g, preoccupied with self
lost - suspicious
less lies

t to society if have kicked the habit

idict

out hiring
6. Friends may be suspicious
7. "Addict friends" too available
8. Social agencies reluctant to help because successful ad
expenditure of time

B. Babies born to addicts may be addicted
C. Physical complications can set in
   1. Blood poisoning
   2. Tetanus
   3. Viral hepatitis
   4. Sclerotic veins (wall deteriorated)
   5. Abscess tissue

D. Threat of overdose
E. Withdrawal illness

XI. Illegal traffic of narcotics
   A. Pattern of opiates and opium
      1. Middle East to the United States
      2. Southeast Asia to Hong Kong, Japan, China, Taiwan to We
      3. Mexico to the United States
   
   B. Pattern of illicit heroin into the United States
      1. Poppy grown in Turkey, converted to morphine
      2. Shipped to Istanbul and Beirut
      3. Shipped to France where it is processed into heroin
      4. Shipped directly to the United States
      5. "Shipped first to Italy, to Canada, to Mexico and then t
      6. Far East (Burma and Thailand) to Hong Kong to the Unite

   C. Escalating Costs
      1. Turkish farmer - to pusher (refer to transparency)
      2. Ten kilograms of raw opium in Turkey sold to underworld
      3. Sells for $225,000 in the United States

suspiciously and reluctantly too available to help because successful adjustment is too slight to warrant necessary time.

Galactic phenomena may be addicted to morphine or heroin into the United States. In Turkey, converted to morphine, converted to morphine and opium.

The United States heroin into the United States. To Hong Kong, Japan, China, Taiwan to West Coast of America.

United States and opium can be addressed.

Time and place may be addressed. It is essential to help because successful adjustment is too slight to warrant necessary suspensions.

Teacher Information (continued)
D. Major problems in control

1. Amount of opium produced in a year is 2,800 tons
2. Illegally sold opium is 2,350 tons of this
3. Medical requirement is only 450 tons
4. Amount produced is at least 4 times that needed for medical and world.
5. Compactness of product
6. Financial profit in trade
7. Incompleteness of international controls
   a. Communist governments (notably, China and Cuba) are not of
   b. Underdeveloped areas (Iran and in the Middle East) opium and corrupt federal land holders

8. User does not consider self a victim (no voluntary complaints

XII. Law pertaining to opiates

A. Harrison Act of 1914

1. First offense--illegal possession 2 - 10 years
2. Second offense--illegal possession 5 - 20 years
3. First offense--illegal sale, fine of $20,000 and 5 - 20 years
4. Second offense--illegal sale, fine of $20,000 and 10 - 40 years
5. Selling to a minor (under eighteen) offender is refused parole and can be sentenced to life imprisonment or to death.

B. Narcotic Addict Rehabilitation Act 1966

1. Designed to support rehabilitation services for the addict, etc.
   a. With a non violent offense and those that have been prosecuted
1,000 packets of 5% pure heroin
set $5.00

in control

ium produced in a year is 2,800 tons
ld opium is 2,350 tons of this
irement is only 450 tons
ed is at least 4 times that needed for medical and research purposes throughout the
of product
of in trade
ss of international controls

t governments (notably, China and Cuba) are not obliged by agreements
loped areas (Iran and in the Middle East) opium is principal crop and is regulated by
federal land holders

not consider self a victim (no voluntary complaints to report offenders)

ates

1914

- illegal possession 2 - 10 years
- illegal possession 5 - 20 years
- illegal sale, fine of $20,000 and 5 - 20 years
- illegal sale, fine of $20,000 and 10 - 40 years

minor (under eighteen) offender is refused parole and probation even for first offense,
first offense, sentenced to life imprisonment or to death.

Rehabilitation Act 1966

support rehabilitation services for the addict, even those that have been caught and charged
violent offense and those that have been prosecuted
I. Description

A. It is the voluntary inhalation of the fumes or vapors from model airplane glue, paint thinners, lacquer thinners, cigarette lighter fluid, and marking pencil hydrocarbons.

II. Proper uses

A. None

III. Improper use pattern

A. Age range 8-10
B. Inhaling airplane glue
   1. 30-40 minutes after inhaling fumes the abuser is intoxicated (acts drunk)
   2. Disorder of perception
   3. Slurred speech
   4. Staggers
   5. Next hour - drowsiness, stupor, or unconsciousness can come about.
C. Inhaling other hydrocarbons
   1. Gasoline
   2. Alcohol
   3. Cleaning fluid
   4. Paint Thinner
   5. Lacquer thinner
   6. Lighter fluid
   7. Marking pencils
D. Psychological dependence
   1. Tolerance builds up (some abuse up to 20 tubes of glue in a day)
GLUE SNIFFING

Inhalation of the fumes or vapors from model airplane glue or other compounds (gasoline, thinners, cigarette lighter fluid, and marking pencils) containing aromatic

Inhaling fumes the abuser is intoxicated (acts drunk) confusion, stupor, or unconsciousness can come about.

Some abuse up to 20 tubes of glue in a day
IV. Physical effects

A. External
   1. Staggering

B. Gastrointestinal
   1. Nausea
   2. Vomiting
   3. Loss of appetite and weight
   4. Diarrhea

C. Nervous system
   1. Mild hallucinations
   2. Depression
   3. Euphoria (giddy, silly, excited)
   4. Delirium
   5. Drowsiness, stupor, unconsciousness

D. Circulation
   1. Lowering of blood pressure

E. Muscular
   1. Loss of coordination
   2. Pain in head, neck, chest, and legs
   3. Slurred speech

F. Respiration
   1. Sneezing
   2. Slows down if chronic abuse

G. Eyes
   1. Blurred vision
H. Ringing in ears

I. Long term effects

1. Brain
2. Kidney
3. Liver
4. Bone marrow

V. Psychological effects

A. Withdraw into fantasy
B. Releases aggressive impulses
C. Exaggeration of own sense of power
D. Withdrawal of interest from external objects

VI. Reasons for abuse

A. Adolescent rebellion
B. Low opinion of self
C. Difficulty in communicating
D. Anxiety
E. Kicks
F. Disorganized, weak personality

VII. Social application

A. Low income phenomenon (attempting to escape reality)
B. Influence of peer group
C. Parties or friends
D. Some solitary practice
E. Types of abusers

1. Hard core
   a. Strongly dependent on habit
   b. Likely to engage in truancy
   c. Withdraw from social situations
   d. Inability to cope with feelings of aggression
TEACHER INFORMATION (continued)

2. Accidental
   a. Influence of peer contacts
   b. Can give up with no problem
   c. Moody, restless
   d. Lack of interest in school work

F. Maturing Out
   1. Late teens
   2. No "kick" anymore
   3. Self-defeating...too irritating to nasal passages
   4. Seek more obvious sources for kicks

VIII. Social harm
   A. Loss of interest in home and school activities
   B. Crimes under intoxication
   C. Spread the habit to others
   D. Resort to stealing
   E. Targets for the narcotic peddler

IX. Emotional harm
   A. Moodiness
   B. Restlessness
   C. Psychologically dependent
   D. Impulsive and unpredictable under its influence

X. Risks
   A. Develop severe liver damage
   B. May damage the kidneys
   C. May develop aplastic anemia (condition where blood cells cannot be manufa
   D. Death by overdose or by unpredictable behavior
   E. Police record possibly, by stealing, or doing harm to someone else
   F. Lead to more serious drugs
TEACHER INFORMATION (continued)

Peer contacts
With no problem
As
Best in school work

Too irritating to nasal passages
Sources for kicks

Home and school activities
Action
Others
Peddler

Dent
Table under its influence

Damage
Anemia (condition where blood cells cannot be manufactured) in the bone marrow
By unpredictable behavior

By stealing, or doing harm to someone else
Drugs

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XI. Glue sniffing controls

A. Store owners have put their own restrictions in controlling the glue sniffing problem.
   1. Special locked compartments for the glue
   2. Notes from parents to buy the glue
   3. Restrict the number bought (plus other solvents)
   4. Cease to stock glue

B. Make the glue less toxic
C. Make the glue less desirable
D. PTA to educate parents and students

XII. Laws

A. No federal control
B. Sales restricted in some states
   1. In Maryland, it is a misdemeanor
I. Description
   A. Used in medical practice to calm and/or produce sleep. Slow central nervous system.
   B. Pills and capsules
   C. Tranquilizers (calming effect)
      1. Miltown
      2. Librium
      3. Equanil
      4. Valium
      5. Vistaril
      6. Ultran
      7. Serax
      8. Thalidomide
   D. Barbiturates
      1. Luminal
      2. Nembutal (phenobarbital)
      3. Amytal
      4. Seconal
      5. Barbitol
      6. Pentothal
      7. Sodium pentothal.

II. Slang expressions
   | Barbs       | Candy    | Yellows  | Good   |
   | Sleeping pills | Peanuts | Yellow jackets | Red    |
   | Nimbies    | Red      | Seggy, Seccy | Pink   |
   | Rainbows   | Double trouble | Tooies | Blue   |

III. Proper Use
   A. Produce sleep; relieve insomnia
BARBITURATES

Practice to calm and/or produce sleep. Slow central nervous system calming effect)

<table>
<thead>
<tr>
<th>Barbs</th>
<th>Sleeping pills</th>
<th>Himbies</th>
<th>Rainbows</th>
</tr>
</thead>
<tbody>
<tr>
<td>Candy</td>
<td>Peanuts</td>
<td>Red</td>
<td>Double trouble</td>
</tr>
<tr>
<td>Yellows</td>
<td>Yellow jackets</td>
<td>Seggy, Seccy</td>
<td>Toories</td>
</tr>
<tr>
<td>Goofballs</td>
<td>Red buds, red devils</td>
<td>Pinks, reds and blues</td>
<td>Blues, blue birds, blue devils, blue heavens</td>
</tr>
</tbody>
</table>

Believe insomnia
B. Reduce nervousness
C. Relax patients before and during surgery
D. Treat high blood pressure
E. Increase effects of pain-killing drugs
F. Treat mental conditions
G. Control epilepsy convulsions

IV. Improper use pattern

A. Unsupervised self-medication
B. Taken under extreme mental or emotional confusion
C. To counteract the effect of stimulant drugs
D. Neurotic
   1. To feel better physically and mentally
   2. To vanish insecurities and inadequacies
E. Psychopathic
   1. For thrill (Often mixed with other drugs)
   2. Immature socially
F. Temporary substitute for an addict when his narcotic supply has diminished
G. Suicide
H. Most abused
   1. Short-acting, long starting
   2. Phenobarbital (Nembutal)
   3. Secobarbital (Seconal)
I. At least 20 million prescriptions never see the doctor. One in four who write for mood-affecting drugs is the barbiturate drug type
J. Average abuse
   1. 20 - 40 pills a day (60 - 100 milligrams)
   2. $20.00/day habit
   3. Withdrawal - forty-eight hours after not having the drug will go
TEACHER INFORMATION (continued)

- Nervousness
- Nervousness before and during surgery
- Blood pressure
- Effects of pain-killing drugs
- Emotional conditions
- Epilepsy convulsions

- Sed self-medication
- Under extreme mental or emotional confusion
- Tract the effect of stimulant drugs

- Feel better physically and mentally
- Erase insecurities and inadequacies

- Chic
- Thrill (Often mixed with other drugs)
- Sure socially
- Substitute for an addict when his narcotic supply has diminished

- Sedated
- Long-acting, long starting
- Barbital (Nembutal)
- Barbital (Seconal)

- 20 million prescriptions never see the doctor. One in four prescriptions that doctors
- Mood-affecting drugs is the barbiturate drug type

- Abuse
- 40 pills a day (60 - 100 milligrams)
- 0/day habit
- Withdrawal - forty-eight hours after not having the drug will go into convulsions
K. Psychological dependence

V. Physical effects

A. Depress the nerves, skeletal muscles, and the heart muscles

1. Heart rate slow
2. Breathing slow
3. Blood pressure lower

B. Higher doses

1. Effects resemble drunkenness
2. Confusion
3. Slurred speech
4. Staggering
5. Impaired ability to think, concentrate, and work
6. Emotional control weakened, may become:
   a. Irritable
   b. Angry
   c. Combative

7. May fall into deep sleep

C. Physical dependence

VI. Reasons for Abuse

A. Relieve anxiety and tension
B. Temporary substitute for narcotics
C. Thrill - to give temporary feeling of well being
D. Upper and middle class abuse these drugs

1. Escape boredom
2. Self awareness
VII. Social harm
A. Accidents
B. Unpredictable behavior may result in picking fights, destroying property, etc.
C. Poor product of society since mental functioning is impaired with this drugs in

VIII. Emotional harm
A. Unpredictable behavior
   1. Quick temper
   2. Quarrelsome
   3. Snap judgements
B. Psychologically dependent on drug
C. Become a neurotic abuser

IX. Risks
A. Death
   1. Overdose
   2. Withdrawal
B. Withdrawal
   1. 8 - 12 hours after last dose (appears to improve)
   2. Next 24 hours - headaches, nervousness, twitching, nausea, weakness
   3. 36 - 72 hours - convulsions, resembling epileptic seizures. Can occur as
      or the eighth day.
   4. Days with mental confusion - DT's, delirium tremens
   5. Coma and...possible death
C. Accidents - injuries
   1. Automobile driving
   2. Falling
D. Loss of Job

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Some behavior may result in picking fights, destroying property, etc., lose friends, job.

- The influence of society since mental functioning is impaired with this drug's influence.

- Observe behavior
  - Temper
  - Imitation
  - Judgments

- Cally dependent on drug
- Neurotic abuser

2 hours after last dose (appears to improve)
- 4 hours - Headaches, nervousness, twitching, nausea, weakness
- 2 hours - Convulsions, resembling epileptic seizures. Can occur as early as the sixteenth hour

With mental confusion - DT's, delirium tremens
- Injuries
- Possible death

- Driving

- -98-
E. Conflict with law due to assaultive, aggressive behavior

X. Law

A. Each delivery, with or without payment, is a separate offense with a maximum penalty of one year in prison.
B. After prior conviction, the maximum penalty for illegal delivery is $10,000 fine and not more than one year imprisonment.
C. First offense — all persons over eighteen, who sell or give barbiturates, one may be imprisoned for not more than two (2) years or fined not more than $5,000.
D. Second offense ... six (6) years imprisonment and maximum fine of $15,000.
E. No pharmacist may fill or refill a prescription more than 6 months after the date of issue, if refills are authorized unless a medical practitioner orally or in writing orders refills.
F. Legislation now pending before Congress to change law so that illegal manufacture with intent to sell dangerous drug would be a felony, and illegal possession...
assaultive, aggressive behavior

Without payment, is a separate offense with a maximum penalty of $1,000 and one (1)
the maximum penalty for illegal delivery is $10,000 and/or three (3) years
ons over eighteen, who sell or give barbiturates or stimulants to anyone under twenty-
or not more than two (2) years or fined not more than $5,000 or both.
6) years imprisonment and maximum fine of $15,000 and/or both
or refill a prescription more than 6 months after the date of issue or more than 5
thorized unless a medical practitioner orally or in writing renews the prescription.
before Congress to change law so that illegal manufacture, sale, or possession with
a drug would be a felony, and illegal possession would be a misdemeanor.
I. Description

A. Drugs that excite the central nervous system
B. Produce alertness and wakefulness
C. Two forms:
   1. Cocaine - Obtained from isolated alkaloid of dried coca leaves for
      with lime to release cocaine. Appears like white crys
   2. Benzedrine - Obtained from ephedrine, which is made from certain de
D. Pill, tablet-capsule, or injected into body.

II. Slang expressions

<table>
<thead>
<tr>
<th>Bennies</th>
<th>Footballs</th>
<th>Roses</th>
<th>Bernice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cartwheels</td>
<td>Greenies</td>
<td>Wade-ups</td>
<td>Coke</td>
</tr>
<tr>
<td>Co-Pilots</td>
<td>Crystal</td>
<td>Browns</td>
<td>Corine</td>
</tr>
<tr>
<td>Dexies</td>
<td>Oranges</td>
<td>Speed</td>
<td>Dust</td>
</tr>
</tbody>
</table>

III. Proper Uses

A. Therapy for people who are seriously overweight
B. Relieve mild depression
C. Treating a variety of mild mental diseases.
D. Treatment of Narcolepsy - a disease characterized by an almost overwhelm
E. Treatment of Parkinson's disease (rigidity of some muscles)
F. Given to fliers and astronauts when the need for mental and physical al
G. Cocaine is used as a local anesthetic, and in treating nose and eye dis

IV. Improper use pattern

A. Half of the 9 billion pills made legally in the United States are distr
B. To ward off sleep (students cramming for test all night, truck drivers,
C. To give feeling of increased strength, endurance, and reduction of fati
TEACHER INFORMATION (continued)

STIMULANTS

The central nervous system and wakefulness

 Obtained from isolated alkaloid of dried coca leaves found in South America. Leaves treated with lime to release cocaine. Appears like white crystalline powder, has a bitter taste obtained from ephedrine, which is made from certain desert shrubs.

The following substances are common sources of stimulants:

- Coca
- Ephedrine
- Caffeine

<table>
<thead>
<tr>
<th>Common Name</th>
<th>Street Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coca</td>
<td>Coke</td>
</tr>
<tr>
<td>Ephedrine</td>
<td>Speed</td>
</tr>
<tr>
<td>Caffeine</td>
<td>Dust</td>
</tr>
</tbody>
</table>

The use of stimulants is not without risk. They can cause increased heart rate, blood pressure, and can lead to addiction. It is important to understand the potential consequences of their misuse.

who are seriously overweight

ession

y of mild mental diseases

lepsy - a disease characterized by an almost overwhelming compulsion for sleep

inson's disease (rigidity of some muscles)

and astronauts when the need for mental and physical alertness is very important

s a local anesthetic, and in treating nose and eye diseases

lion pills made legally in the United States are distributed through illicit channels.

(students cramming for test all night, truck drivers, etc.)

f increased strength, endurance, and reduction of fatigue during athletic performances.

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TEACHER INFORMATION (continued)

D. As substitute when other narcotic supplies are cut off.
E. For those wanting particular "thrills."
F. Generally swallowed as pills but can be injected into a vein at regular "speeding."
G. Tolerance builds increased dose

1. Abusers take as many as twenty-five at a time
2. Usual daily supply can go up to 150 pills (heavy dose)
3. Shoot as much as 300 mg every few hours (medical use is 5-30 mg daily)
4. No tolerance in cocaine

H. Need a "chemical up" and a "chemical down."
I. Psychological dependence
J. Cocaine abuse pattern

1. Intense stimulatory effects usually result in the abuser voluntarily
2. Combine a depressant drug such as heroin with stimulant such as cocaine
3. Alternating a drug as cocaine with a depressant.
4. Sniffed or injected into vein.
5. Not much in the United States. It is expensive

V. Physical effects
A. How they work

1. They stimulate the release of morepinephrine (a substance stored in
   concentrate it in the higher centers of the brain - thus speeding up
B. External

1. Restlessness...excitability
2. Talkativeness - often unclear or rapid
3. Tremor of hands
4. Profuse perspiration
5. Skin lesions and abscesses from over abuse of methamphetamine
6. Pale
narcotic supplies are cut off.

Pills but can be injected into a vein at regular time intervals, known as

In a vein.

and a "chemical down."

Effects usually result in the abuser voluntarily seeking sedation.

A drug such as heroin with stimulant such as cocaine (speedball)

Not cocaine with a depressant.

in the United States. It is expensive.

The release of morepinephrine (a substance stored in nerve endings) and

the higher centers of the brain - thus speeding up metabolism and the heart.

Itability

often unclear or rapid

on abscesses from over abuse of methamphetamine
C. Gastrointestinal
   1. Cause dry mouth, bad breath
   2. Diarrhea
   3. Depress appetite — lose weight

D. Nervous System
   1. Sleeplessness — excitability
   2. Headache
   3. Mirages or hallucinations may occur
   4. Acute psychosis ...characterized by auditory or visual hallucinations, or both

E. Circulatory system
   1. Increase heart rate
   2. Raise blood pressure

F. Urinary frequency

G. Respiration
   1. Rate may increase
   2. Overdose depress it

H. Muscular
   1. Tremor in hands
   2. Unpleasant and jittery feelings

I. Eyes
   1. Dialated pupils
   2. Blurred vision
   3. Impaired reaction of eye to light

J. Exhaustion (from lack of sleep
K. Combined with alcohol, everything is intensified, death may result

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VI. Reasons for abuse

A. Promote conversation and sociability
B. "Thrills - Highs"
C. Experimentation "magic energy supplier"
D. Ward off sleep
E. Give extra strength
F. Substitute for narcotic

VII. Social application

A. All kinds of people
   1. Middle-aged businessmen
   2. Housewives
   3. Students
   4. Athletes (although has been abandoned)
   5. Truck drivers

VIII. Social harm

A. Hideous crimes under heavy dosage
B. Irritable and unstable person in society (may lose acquaintances,
C. May seek to heavy narcotics
D. Intellectual breakdown

IX. Emotional harm

A. Amphetamine psychosis (affects those taking large doses over long
   1. Emotional breakdown
   2. Paranoid feelings (people plotting against abuser)
   3. Seeing and hearing things not there

B. Suffer deep depression when taken away (potential suicide)
and sociability

magic energy supplier"

narcotic

businessmen

ough has been abandoned

her heavy dosage

able person in society (may lose acquaintances, jobs, cause accidents, lose family)
narcotics

down

osis (affects those taking large doses over long period of time)
down

ings (people plotting against abuser)
ring things not there

sion when taken away (potential suicide)
X. Risks

A. Serum hepatitis (through methamphetamine injections)
B. Death (when unaccustomed to high doses) (suicidal)
C. Long term personality disorders
D. Losing everything worked for because of:
   1. Aggressive outbursts
   2. Committing a crime

E. Overestimate physical abilities (complete physical exhaustion - harm body)
F. Suffer heart and circulatory damage
G. Automobile accidents
   1. Shakiness
   2. Dizziness
   3. Confusion
   4. Combative and aggressive driving
   5. Decrease ability of concentration
   6. Hallucinations or blackouts

XI. Illegal traffic of amphetamines and barbiturates

A. Illicit channels
   1. Half of all amphetamines and barbiturates legally made fall into the hands of...
   2. Hijackers
   3. Thieves in laboratories
   4. Buyers using phony orders to purchase from laboratories
   5. Steal prescription pads from doctor - use fraudulent means.
   6. Manufacturers make quantities unlawful and dispose of them through
      clandestine laboratories make pills which are chemically affected at
      effect in them)
      a. Garages
      b. Warehouses
      c. Trucks
      d. Basements
TEACHER INFORMATION (continued)

methylamphetamine injections)
d to high doses) (suicidal)
disorders
d for because of:

abilities (complete physical exhaustion - harm body)
atory damage

essive driving
of concentration
blackouts
amines and barbiturates
amines and barbiturates legally made fall into the black market
ories
orders to purchase from laboratories
n pads from doctor - use fraudulent means
quantities unlawful and dispose of them through the black market
ories make pills which are chemically affected and also false pills (no chemical
8. Smuggled from Mexico
   a. Produced in Mexican laboratories
   b. Diverted to Mexico being legally made in the United States

B. Key figures to watch for
   1. Unregistered manufacturers
   2. Wholesalers
   3. Bulk peddlers

C. Escalating costs
   1. Methamphetamine - produced in makeshift laboratories
      a. $30 per pound to produce
      b. Wholesale at $1,200 per pound
      c. Retailers sell one ounce (35 spoons) for $20
   2. Speed
      a. $30 production cost
      b. $700 retail for one ounce
   3. One pill 5 times the pharmacy value
      a. Wholesale less than $1.00 for 1,000 pills
      b. Sold in illegal market $30 or $50 for 1,000 pills
      c. Retail 10 - 25 cents each

D. Problems in control
   1. Hard to trace
      a. No reliable way to spot an amphetamine abuser
      b. Visual identification of drug (pills and capsules) impossible
XII. Law

A. Each delivery, with or without payment, is a separate offense with a maximum year in prison.
B. After prior conviction, the maximum penalty for illegal delivery is $10,000 imprisonment.
C. First offense - all persons over eighteen who sell or give barbiturates or be imprisoned for not more than two (2) years or fined not more than $5,000.
D. Second offense - six (6) years imprisonment and maximum fine of $15,000 or
E. No pharmacist may fill or refill a prescription more than 6 months after the if refills are authorized unless a medical practitioner orally or in writing
F. Legislation now pending before Congress to change law so that illegal manuf intent to sell dangerous drugs would be a felony; and illegal possession wou
without payment, is a separate offense with a maximum penalty of $1,000 and one (1) year in prison, the maximum penalty for illegal delivery is $10,000 and/or three (3) years imprisonment. Persons over eighteen who sell or give barbiturates or stimulants to anyone under 21 may be fined not more than $5,000, or both, or imprisoned for not more than two (2) years or fined not more than $5,000, or both, or imprisoned for not more than two (2) years or fined not more than $5,000, or both.

(6) years imprisonment and maximum fine of $15,000 or both. Illegally refilling a prescription more than 6 months after the date of issue or more than 5 times, unless a medical practitioner orally or in writing renews the prescription, is punishable by imprisonment for not more than two (2) years or fined not more than $5,000, or both.

An attempt to sell or give barbiturates or stimulants to anyone under 21 or to use barbiturates or stimulants in any manner prohibited by law, is a separate offense with a maximum penalty of $1,000 and one (1) year in prison, the maximum penalty for illegal delivery is $10,000 and/or three (3) years imprisonment. Persons over eighteen who sell or give barbiturates or stimulants to anyone under 21 may be fined not more than $5,000, or both, or imprisoned for not more than two (2) years or fined not more than $5,000, or both.

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An attempt to sell or give barbiturates or stimulants to anyone under 21 or to use barbiturates or stimulants in any manner prohibited by law, is a separate offense with a maximum penalty of $1,000 and one (1) year in prison, the maximum penalty for illegal delivery is $10,000 and/or three (3) years imprisonment. Persons over eighteen who sell or give barbiturates or stimulants to anyone under 21 may be fined not more than $5,000, or both, or imprisoned for not more than two (2) years or fined not more than $5,000, or both.

(6) years imprisonment and maximum fine of $15,000 or both. Illegally refilling a prescription more than 6 months after the date of issue or more than 5 times, unless a medical practitioner orally or in writing renews the prescription, is punishable by imprisonment for not more than two (2) years or fined not more than $5,000, or both.
<table>
<thead>
<tr>
<th>Drugs</th>
<th>Pharmacologic Classification</th>
<th>Controls</th>
<th>Medical Uses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>Depressant</td>
<td>Legal age restrictions vary within state</td>
<td>Use of b. alcohol is rare; as sedative, as disinfectant, alcohol</td>
</tr>
<tr>
<td>Amphetamine drugs (e.g., amphetamine, dextroamphetamine, methamphetamine—also known as desoxyephedrine)</td>
<td>Stimulant</td>
<td>Controlled drug products (Per Drug Abuse Control Amendments, 1965. Methamphetamine added to list of controlled drugs in May, 1966)</td>
<td>For mild tension, anxiety, nausea, pain</td>
</tr>
<tr>
<td>Barbiturates (e.g., amobarbital, pentobarbital, secobarbital)</td>
<td>Depressant</td>
<td>Controlled drug products (Per Drug Abuse Control Amendments, 1965)</td>
<td>For sedation, sleep-induction, epilepsy, blood pressure</td>
</tr>
<tr>
<td>Bromides</td>
<td>Depressant</td>
<td>Regulated by prescription; some &quot;over-counter&quot; dispersal</td>
<td>Sedative</td>
</tr>
<tr>
<td>Cocaine</td>
<td>Central nervous system stimulant</td>
<td></td>
<td>Narcotic (Per Harrison Act, 1914)</td>
</tr>
<tr>
<td>Codeine (an opium derivative)</td>
<td>Depressant</td>
<td>Narcotic (Per Harrison Act, 1914)</td>
<td>To relieve headache and cough</td>
</tr>
<tr>
<td>Glue (also paint thinner, lighter fluid)</td>
<td>Depressant</td>
<td>No Federal controls. Glue sales restricted in some states.</td>
<td>None</td>
</tr>
<tr>
<td>Heroin (a morphine derivative)</td>
<td>Depressant</td>
<td>Narcotic (Per Harrison Act, 1914)</td>
<td>To relieve</td>
</tr>
</tbody>
</table>
### Macologic Classification

<table>
<thead>
<tr>
<th>Emphasis</th>
<th>Controls</th>
<th>Medical Use</th>
<th>Potential for Physical Dependence</th>
<th>Potential for Psychological Dependence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stimulant</td>
<td>Legal age restrictions vary within state</td>
<td>Use of beverage alcohol medically is rare; perhaps as sedative, disinfectant, alcohol massage</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Resistant</td>
<td>Controlled drug products (Per Drug Abuse Control Amendments, 1965. Methamphetamine added to list of controlled drugs in May, 1966)</td>
<td>For mild depression, anti-appetite, narcolepsy</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Resistant</td>
<td>Controlled drug products (Per Drug Abuse Control Amendments, 1965)</td>
<td>For sedation, sleep-producing, epilepsy, high blood pressure</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Resistant</td>
<td>Regulated by prescription; some &quot;over-counter&quot; dispersal</td>
<td>Sedative</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Central nervous system stimulant</td>
<td>Narcotic (Per Harrison Act, 1914)</td>
<td>Local anesthetic</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Resistant</td>
<td>Narcotic (Per Harrison Act, 1914)</td>
<td>To relieve pain and coughing</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Resistant</td>
<td>No Federal controls. Glue sales restricted in some states.</td>
<td>None</td>
<td>Unknown</td>
<td>Yes</td>
</tr>
<tr>
<td>Resistant</td>
<td>Narcotic (Per Harrison Act, 1914)</td>
<td>To relieve pain</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
## Reference Chart

<table>
<thead>
<tr>
<th>Tolerance</th>
<th>Possible Effects When Abused</th>
<th>How Taken When Abused</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Drowsiness; slurred speech; stupor</td>
<td>Drunk</td>
<td>Depresses central nervous system.</td>
</tr>
<tr>
<td>Yes</td>
<td>Excitation, dilated pupils, tremors, talkativeness, hallucinations</td>
<td>Orally or by injection</td>
<td>Prescription only. Original prescription must be obtained within six months.</td>
</tr>
<tr>
<td>Yes</td>
<td>Drowsiness, staggering, slurred speech</td>
<td>Orally or by injection</td>
<td>Prescription only. Original prescription must be obtained within six months.</td>
</tr>
<tr>
<td>No</td>
<td>Drowsiness; sedative reactions</td>
<td>Orally</td>
<td>Depresses dehydration and fluid loss by body posing some danger.</td>
</tr>
<tr>
<td>No</td>
<td>Extreme excitation, tremors, hallucinations</td>
<td>Sniffed or by injection</td>
<td>Although cocaine does not have the abuse potential of morphine, it has been placed in Schedule II of the Controlled Substances Act of 1970 because its abuse poses a serious danger to public health.</td>
</tr>
<tr>
<td>Yes</td>
<td>Drowsiness, pinpoint pupils</td>
<td>Orally (usually as cough syrup)</td>
<td>Preparations containing codeine are classified as a Schedule III controlled substance and may be obtained without prescription.</td>
</tr>
<tr>
<td>Yes</td>
<td>Staggering, drowsiness, slurred speech, stupor</td>
<td>Inhaled</td>
<td>Freely available as cough suppressants in some states for persons under 18.</td>
</tr>
<tr>
<td>Yes</td>
<td>Same as morphine</td>
<td>Sniffed or by injection</td>
<td>Not legally available legally in some countries for therapeutic use.</td>
</tr>
<tr>
<td>How Taken</td>
<td>When Abused</td>
<td>Comments</td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>-------------</td>
<td>----------</td>
<td></td>
</tr>
<tr>
<td>Pills, Drunk</td>
<td>Orally or by injection</td>
<td>Depresses central nervous system</td>
<td></td>
</tr>
<tr>
<td>Orally or by injection</td>
<td>Prescription only. Original prescription expires after six (6) months. Only five (5) refills permitted within this period</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orally</td>
<td>Prescription only. Original prescription expires after six (6) months. Only five (5) refills permitted within this period. Dependence generally occurs only with the use of high doses for a protracted period of time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Morphine, Sniffed or by injection</td>
<td>Depressant dehydration may occur; drug accumulates in body posing some danger of accidental toxicity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pills</td>
<td>Orally (usually as cough syrup)</td>
<td>Preparations containing specified minimal amounts of codeine are classified as &quot;exempt&quot; narcotics and can be obtained without prescription in some states.</td>
<td></td>
</tr>
<tr>
<td>Inhaled</td>
<td>Freely available as commercial products, except that some states have laws forbidding the sale of glue to persons under 18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sniffed or by injection</td>
<td>Not legally available in United States. Used medically in some countries for relief of pain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drugs</td>
<td>Pharmacologic Classification</td>
<td>Controls</td>
<td>Medical U</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>LSD (also mescaline, peyote, psilocybin, DMT)</td>
<td>Hallucinogen</td>
<td>(Brought under Drug Abuse Control Amendments only) in September, 1966</td>
<td>Medical</td>
</tr>
<tr>
<td>Marihuana</td>
<td>Hallucinogen</td>
<td>Narcotic (Per Marihuana Tax Act, 1937, plus subsequent restrictive legislation which covered marihuana and narcotics together)</td>
<td>None</td>
</tr>
<tr>
<td>Meperidine (synthetic morphine-like drug)</td>
<td>Depressant</td>
<td>Narcotic (Brought under Harrison Act in 1944)</td>
<td>To relieve</td>
</tr>
<tr>
<td>Methadone (synthetic morphine-like drug)</td>
<td>Depressant</td>
<td>Narcotic (A 1953 amendment to the Harrison Act brought drugs like methadone under control)</td>
<td>To relieve</td>
</tr>
<tr>
<td>Morphine (an opium derivative)</td>
<td>Central nervous System depressant</td>
<td>Narcotic (Per Harrison Act, 1914)</td>
<td>To relieve</td>
</tr>
<tr>
<td>Paregoric (preparation containing opium)</td>
<td>Depressant</td>
<td>Narcotic (Per Harrison Act, 1914)</td>
<td>For sedation</td>
</tr>
<tr>
<td>Tobacco</td>
<td>Nicotine - stimulant</td>
<td>Legal age restrictions vary within state</td>
<td>None: nicotine in insect</td>
</tr>
</tbody>
</table>

-109-
## DRUG ABUSE PRODUCTS

<table>
<thead>
<tr>
<th>Narcotic</th>
<th>Potential for Physical Dependence</th>
<th>Potential for Psychological Dependence</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>To relieve pain</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>To relieve pain</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>To relieve pain</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>For sedation and to counteract diarrhea</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>None: nicotine used in insecticides</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Legal age restrictions
- Vary within state

### Medical Use
- None
- To relieve pain
- For sedation and to counteract diarrhea
- None: nicotine used in insecticides
<table>
<thead>
<tr>
<th>Tolerance</th>
<th>Possible Effects When Abused</th>
<th>How Taken When Abused</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Excitation, hallucinations, rambling speech</td>
<td>Orally or by injection</td>
<td>In 1966, LSD was brought under the International Narcotic Abuse Control Amendments and is considered. Not legally available in the United States.</td>
</tr>
<tr>
<td>No</td>
<td>Drowsiness or excitability, dilated pupils, talkativeness, laughter, hallucinations</td>
<td>Smoked or orally</td>
<td>From a legal control standpoint it is considered as a narcotic.</td>
</tr>
<tr>
<td>Yes</td>
<td>Similar to morphine, except that at higher doses, excitement, tremors and convulsions occur</td>
<td>Orally or by injection</td>
<td>Shorter acting than morphine. Withdrawal symptoms appear.</td>
</tr>
<tr>
<td>Yes</td>
<td>Same as morphine</td>
<td>Orally or by injection</td>
<td>Longer acting than morphine. Develop more slowly, are prolonged. Prescription only.</td>
</tr>
<tr>
<td>Yes</td>
<td>Drowsiness or stupor, pinpoint pupils</td>
<td>Orally or by injection</td>
<td>Morphine is the standard by which analgesics are compared. Prescription only.</td>
</tr>
<tr>
<td>Yes</td>
<td>Same as morphine</td>
<td>Orally or by injection</td>
<td>Paregoric is often boiled narcotic. Content prior to injection in some states is toxic.</td>
</tr>
<tr>
<td>Yes</td>
<td>Increased heart beat, blood pressure, etc., central nervous system stimulant</td>
<td>Smoked; chewed; sniffed</td>
<td>Nicotine content is toxic.</td>
</tr>
</tbody>
</table>


*Drug Abuse Education Resource Materials*, Marin County, California
<table>
<thead>
<tr>
<th>How Taken</th>
<th>When Abused</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orally or by injection</td>
<td>In 1966, LSD was brought under the control of Drug Abuse Control Amendments of 1965. Control under one of the International Narcotics Conventions is being considered. Not legally available except for research.</td>
<td></td>
</tr>
<tr>
<td>Smoked or orally</td>
<td>From a legal control standpoint, marihuana is treated as a narcotic. It is almost never legally available in the United States.</td>
<td></td>
</tr>
<tr>
<td>Orally or by injection</td>
<td>Shorter acting than morphine. Frequent dosing reqd. Withdrawal symptoms appear quickly. Prescription only.</td>
<td></td>
</tr>
<tr>
<td>Orally or by injection</td>
<td>Longer acting than morphine. Withdrawal symptoms develop more slowly, are less intense and more prolonged. Prescription only.</td>
<td></td>
</tr>
<tr>
<td>Orally or by injection</td>
<td>Morphine is the standard against which other narcotic analgesics are compared. Legally available on prescription only.</td>
<td></td>
</tr>
<tr>
<td>Orally or by injection</td>
<td>Paregoric is often boiled to concentrate narcotic content prior to injection. Classified as an exempt narcotic. In some states obtained without prescription.</td>
<td></td>
</tr>
<tr>
<td>Smoked; chewed; sniffed</td>
<td>Nicotine content is toxic.</td>
<td></td>
</tr>
</tbody>
</table>

No Nowhere, Smith, Kline & French, 1968
Resource Materials, Marin County, California
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>- Benzedrine, dexedrine and methedrine</td>
</tr>
<tr>
<td>Acid</td>
<td>- LSD</td>
</tr>
<tr>
<td>Acid head</td>
<td>- An abuser of LSD</td>
</tr>
<tr>
<td>Artillery</td>
<td>- Equipment for injecting drugs</td>
</tr>
<tr>
<td>Backtrack</td>
<td>- To withdraw the plunger of a syringe before injecting drugs to position</td>
</tr>
<tr>
<td>Bag</td>
<td>- A container of drugs</td>
</tr>
<tr>
<td>Bagman</td>
<td>- A drug supplier</td>
</tr>
<tr>
<td>Bang</td>
<td>- To inject drugs</td>
</tr>
<tr>
<td>Barbs</td>
<td>- Barbiturates</td>
</tr>
<tr>
<td>Bennies</td>
<td>- Benzedrine (brand of amphetamine sulfate, Smith, Kline &amp; French)</td>
</tr>
<tr>
<td>Bernice</td>
<td>- Cocaine</td>
</tr>
<tr>
<td>Big John</td>
<td>- The police</td>
</tr>
<tr>
<td>Bindle</td>
<td>- A small quantity or packet of narcotics</td>
</tr>
<tr>
<td>Biz</td>
<td>- Equipment for injecting drugs</td>
</tr>
<tr>
<td>Blanks</td>
<td>- Poor quality narcotics</td>
</tr>
<tr>
<td>Blasted</td>
<td>- Under the influence of drugs</td>
</tr>
<tr>
<td>Blow a stick</td>
<td>- To smoke a marijuana cigarette</td>
</tr>
<tr>
<td>Blue devils</td>
<td>- Amytal (brand of amobarbital, Eli Lilly and Company) capsules</td>
</tr>
<tr>
<td>Blue heavens</td>
<td>- Amytal</td>
</tr>
<tr>
<td>Blue velvet</td>
<td>- Paregoric and an antihistamine</td>
</tr>
<tr>
<td>Bombido</td>
<td>- Injectable amphetamine</td>
</tr>
<tr>
<td>Boo</td>
<td>- Marijuana</td>
</tr>
<tr>
<td>Boxed</td>
<td>- In jail</td>
</tr>
<tr>
<td>Bread</td>
<td>- Money</td>
</tr>
<tr>
<td>Bull</td>
<td>- A Federal narcotic agent, a police officer</td>
</tr>
<tr>
<td>Burned</td>
<td>- To receive phony or badly diluted drugs</td>
</tr>
<tr>
<td>Busted</td>
<td>- Arrested</td>
</tr>
<tr>
<td>Cactus</td>
<td>- Peyote</td>
</tr>
<tr>
<td>Candy</td>
<td>- Barbiturates</td>
</tr>
<tr>
<td>Cap</td>
<td>- A container of drugs (usually a capsule)</td>
</tr>
<tr>
<td>Cartwheels</td>
<td>- Amphetamine sulfate (round, white, double-scored tablets)</td>
</tr>
<tr>
<td>Champ</td>
<td>- Drug abuser who won't reveal his supplier—even under pressure</td>
</tr>
<tr>
<td>Charas</td>
<td>- Form of marijuana in India; hashish</td>
</tr>
<tr>
<td>Charged up</td>
<td>- Under the influence of drugs</td>
</tr>
</tbody>
</table>
SLANG TERMS

Slang Terms

- nzedrine, dexamphetamine and methedrine
- abuser of LSD
- equipment for injecting drugs
- withdraw the plunger of a syringe before injecting drugs to make sure needle is in proper position
- container of drugs
- drug supplier
- inject drugs
- barbiturates
- nzedrine (brand of amphetamine sulfate, Smith, Kline & French Laboratories) tablets
- cocaine
- The police
- a small quantity or packet of narcotics
- equipment for injecting drugs
- poor quality narcotics
- under the influence of drugs
- to smoke a marijuana cigarette
- amytal (brand of amobarbital, Eli Lilly and Company) capsules
- amytal
- paregoric and an antihistamine
- Injectable amphetamine
- Marijuana
- In jail
- Money
- A Federal narcotic agent, a police officer
- To receive phony or badly diluted drugs
- Arrested
- Peyote
- Barbiturates
- A container of drugs (usually a capsule)
- Amphetamine sulfate (round, white, double-scored tablets)
- Drug abuser who won't reveal his supplier—even under pressure
- Form of marijuana in India; hashish
- Under the influence of drugs
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chipping</td>
<td>Taking small amounts of drugs on an irregular basis</td>
</tr>
<tr>
<td>Chippy</td>
<td>An abuser taking small, irregular amounts—also, probably</td>
</tr>
<tr>
<td>Clear up</td>
<td>To withdraw from drugs</td>
</tr>
<tr>
<td>Coasting</td>
<td>Under the influence of drugs</td>
</tr>
<tr>
<td>Coast to</td>
<td>Amphetamines</td>
</tr>
<tr>
<td>coasts</td>
<td></td>
</tr>
<tr>
<td>Coke</td>
<td>Cocaine</td>
</tr>
<tr>
<td>Cokie</td>
<td>A cocaine addict</td>
</tr>
<tr>
<td>Cold turkey</td>
<td>Sudden drug withdrawal</td>
</tr>
<tr>
<td>Connect</td>
<td>To purchase drugs</td>
</tr>
<tr>
<td>Connection</td>
<td>A drug supplier</td>
</tr>
<tr>
<td>Cook up a pill</td>
<td>To prepare opium for smoking</td>
</tr>
<tr>
<td>Co-pilots</td>
<td>Amphetamine tablets</td>
</tr>
<tr>
<td>Cop</td>
<td>To purchase drugs</td>
</tr>
<tr>
<td>Cop-out</td>
<td>To alibi, confess</td>
</tr>
<tr>
<td>Corine</td>
<td>Cocaine</td>
</tr>
<tr>
<td>Cotics</td>
<td>Narcotics</td>
</tr>
<tr>
<td>Crystals</td>
<td>Methedrine</td>
</tr>
<tr>
<td>Cut</td>
<td>To adulterate a narcotic by adding milksugar</td>
</tr>
<tr>
<td>Dabble</td>
<td>To take small amounts of drugs on an irregular basis</td>
</tr>
<tr>
<td>Dagga</td>
<td>Marijuana—India</td>
</tr>
<tr>
<td>Deck</td>
<td>A small packet of narcotics</td>
</tr>
<tr>
<td>Dexies</td>
<td>Dexedrine (brand of dextroamphetamine sulfate, Smith)</td>
</tr>
<tr>
<td>Dime bag</td>
<td>A ten-dollar purchase of narcotics</td>
</tr>
<tr>
<td>Dollies</td>
<td>Dolophine (brand of methadone hydrochloride, Eli Lilly)</td>
</tr>
<tr>
<td>Domino</td>
<td>To purchase drugs</td>
</tr>
<tr>
<td>Dope</td>
<td>Any narcotic</td>
</tr>
<tr>
<td>Double trouble</td>
<td>Tuinal (brand of amobarbital sodium and secobarbit)</td>
</tr>
<tr>
<td>Downs</td>
<td>Depressants</td>
</tr>
<tr>
<td>Dropped</td>
<td>Arrested</td>
</tr>
<tr>
<td>Dust</td>
<td>Cocaine</td>
</tr>
<tr>
<td>Elsie's shake</td>
<td>Morning glory seed</td>
</tr>
<tr>
<td>Factory</td>
<td>Equipment for injecting drugs</td>
</tr>
<tr>
<td>Fix</td>
<td>An injection of narcotics</td>
</tr>
<tr>
<td>Flake</td>
<td>Cocaine</td>
</tr>
<tr>
<td>Flea powder</td>
<td>Poor quality narcotics</td>
</tr>
</tbody>
</table>
TEACHER INFORMATION (continued)

- Taking small amounts of drugs on an irregular basis
- An abuser taking small, irregular amounts—also, prostitute
- To withdraw from drugs
- Under the influence of drugs
- Amphetamines
  - Cocaine
  - A cocaine addict
  - Sudden drug withdrawal
  - To purchase drugs
  - A drug supplier
  - To prepare opium for smoking
  - Amphetamine tablets
  - To purchase drugs
  - To alibi, confess
  - Cocaine
  - Narcotics
  - Methedrine
  - To adulterate a narcotic by adding milksugar
  - To take small amounts of drugs on an irregular basis
  - Marijuana—India
  - A small packet of narcotics
  - Dextroamphetamine sulfate tablets
  - A ten-dollar purchase of narcotics
  - Methadone hydrochloride tablets
  - To purchase drugs
  - Any narcotic
  - Tuinal capsules
  - Depressants
  - Arrested
  - Cocaine
  - Morning glory seed
  - Equipment for injecting drugs
  - An injection of narcotics
  - Cocaine
  - Poor quality narcotics
<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Floating</td>
<td>Under the influence of drugs</td>
</tr>
<tr>
<td>Footballs</td>
<td>Oval-shaped amphetamine sulfate tablets</td>
</tr>
<tr>
<td>Fresh and sweet</td>
<td>Out of jail</td>
</tr>
<tr>
<td>Fuzz</td>
<td>The police</td>
</tr>
<tr>
<td>Gage</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Ganga</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Gee-head</td>
<td>Paregoric abuser</td>
</tr>
<tr>
<td>Geetis</td>
<td>Money</td>
</tr>
<tr>
<td>Geezer</td>
<td>A narcotic injection</td>
</tr>
<tr>
<td>Gimmicks</td>
<td>The equipment for injecting drugs</td>
</tr>
<tr>
<td>Gold dust</td>
<td>Cocaine</td>
</tr>
<tr>
<td>Goods</td>
<td>Narcotics</td>
</tr>
<tr>
<td>Goofballs</td>
<td>Barbiturates</td>
</tr>
<tr>
<td>Gow-head</td>
<td>An opium addict</td>
</tr>
<tr>
<td>Grass</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Greenies</td>
<td>Green, heart-shaped tablets of dextroamphetamine sulfate amphetamine sulfate</td>
</tr>
<tr>
<td>Griefo</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Gun</td>
<td>A hypodermic needle</td>
</tr>
<tr>
<td>H</td>
<td>Heroin</td>
</tr>
<tr>
<td>Hang-up</td>
<td>A personal problem</td>
</tr>
<tr>
<td>Happy dust</td>
<td>Cocaine</td>
</tr>
<tr>
<td>Hard stuff</td>
<td>Morphine, cocaine or heroin</td>
</tr>
<tr>
<td>Harry</td>
<td>Heroin</td>
</tr>
<tr>
<td>Hash</td>
<td>Hashish; marijuana</td>
</tr>
<tr>
<td>Hawk</td>
<td>LSD</td>
</tr>
<tr>
<td>Hay</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Hearts</td>
<td>Benzedrine or dexedrine (brands of amphetamine sulfate and Kline &amp; French Laboratories) heart-shaped tablets</td>
</tr>
<tr>
<td>Heat</td>
<td>The police</td>
</tr>
<tr>
<td>Hemp</td>
<td>Marijuana</td>
</tr>
<tr>
<td>High</td>
<td>Under the influence of drugs</td>
</tr>
<tr>
<td>Hit</td>
<td>To purchase drugs, an arrest</td>
</tr>
<tr>
<td>Hocus</td>
<td>A narcotic solution ready for injection</td>
</tr>
<tr>
<td>Hooked</td>
<td>Addicted</td>
</tr>
<tr>
<td>Hophead</td>
<td>Narcotic addict</td>
</tr>
<tr>
<td>Hopped up</td>
<td>Under the influence of drugs</td>
</tr>
<tr>
<td>Horse</td>
<td>Heroin</td>
</tr>
</tbody>
</table>
TEACHER INFORMATION (continued)

her the influence of drugs

1-shaped amphetamine sulfate tablets
of jail

police

marijuana

marijuana

generic abuser

key

cocaine injection

equipment for injecting drugs

staine

cocotics

dibuturates

opium addict

marijuana

marijuana, heart-shaped tablets of dextroamphetamine sulfate and amobarbital

marijuana

hypodermic needle

roin

dersonal problem

staine

cphine, cocaine or heroin

roin

shish; marijuana

marijuana

nzedrine or dexedrine (brands of amphetamine sulfate and dextroamphetamine sulfate, Smith, 
Dene & French Laboratories) heart-shaped tablets

police

marijuana

her the influence of drugs

purchase drugs, an arrest

narcotic solution ready for injection

dicted

cocotic addict

er the influence of drugs

roin
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hot</td>
<td>Wanted by police</td>
</tr>
<tr>
<td>Hot shot</td>
<td>A fatal dosage</td>
</tr>
<tr>
<td>Hype</td>
<td>Narcotic addict</td>
</tr>
<tr>
<td>Ice cream habit</td>
<td>A small, irregular drug habit</td>
</tr>
<tr>
<td>Job</td>
<td>To inject drugs</td>
</tr>
<tr>
<td>Jive</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Joint</td>
<td>A marijuana cigarette</td>
</tr>
<tr>
<td>Joy-pop</td>
<td>To inject small amounts of drugs irregularly</td>
</tr>
<tr>
<td>Joy powder</td>
<td>Heroin</td>
</tr>
<tr>
<td>Junk</td>
<td>Narcotics</td>
</tr>
<tr>
<td>Junkie</td>
<td>A narcotic addict</td>
</tr>
<tr>
<td>Kick</td>
<td>To abandon the drug habit</td>
</tr>
<tr>
<td>Kif</td>
<td>Marijuana in North Africa</td>
</tr>
<tr>
<td>L.A. Turnabouts</td>
<td>Amphetamines</td>
</tr>
<tr>
<td>Layout</td>
<td>The equipment for injecting drugs</td>
</tr>
<tr>
<td>Lipton tea</td>
<td>Poor quality narcotics</td>
</tr>
<tr>
<td>Lit up</td>
<td>Under the influence of drugs</td>
</tr>
<tr>
<td>Locoweed</td>
<td>Marijuana</td>
</tr>
<tr>
<td>M</td>
<td>Morphine</td>
</tr>
<tr>
<td>Machinery</td>
<td>Equipment for injecting drugs</td>
</tr>
<tr>
<td>Mainline</td>
<td>To inject drugs directly into a vein</td>
</tr>
<tr>
<td>Make a buy</td>
<td>To purchase drugs</td>
</tr>
<tr>
<td>Make a meet</td>
<td>To purchase drugs</td>
</tr>
<tr>
<td>Man</td>
<td>The police</td>
</tr>
<tr>
<td>Manicure</td>
<td>High-grade marijuana (i.e., no seeds or stems)</td>
</tr>
<tr>
<td>Mary Jane</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Mellow yellow</td>
<td>Banana peel</td>
</tr>
<tr>
<td>Meth</td>
<td>Methamphetamine, usually injected for rapid result</td>
</tr>
<tr>
<td>Mezz</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Mickey Finn</td>
<td>Chloral hydrate</td>
</tr>
<tr>
<td>Miss Emma</td>
<td>Morphine</td>
</tr>
<tr>
<td>Mojo</td>
<td>Narcotics</td>
</tr>
<tr>
<td>Monkey</td>
<td>A drug habit where physical dependence is present</td>
</tr>
<tr>
<td>Mor a grifa</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Mutah</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>---------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Needle</td>
<td>Hypodermic syringe</td>
</tr>
<tr>
<td>Nickel bag</td>
<td>A five dollar purchase of narcotics</td>
</tr>
<tr>
<td>Nimby</td>
<td>Nembutal (brand of pentobarbital, Abbott Laboratories) caps</td>
</tr>
<tr>
<td>Off</td>
<td>Withdrawn from drugs</td>
</tr>
<tr>
<td>On a trip</td>
<td>Under the influence of LSD or other hallucinogens</td>
</tr>
<tr>
<td>On the nod</td>
<td>Under the influence of drugs</td>
</tr>
<tr>
<td>On the street</td>
<td>Out of jail</td>
</tr>
<tr>
<td>Oranges</td>
<td>Dexedrine (brand of dextroamphetamine sulfate, Smith, Kline</td>
</tr>
<tr>
<td>Paper</td>
<td>A prescription or packet of narcotics</td>
</tr>
<tr>
<td>Peaches</td>
<td>Benzedrine (brand of amphetamine sulfate, Smith Kline &amp; Fre</td>
</tr>
<tr>
<td>Peanuts</td>
<td>Barbiturates</td>
</tr>
<tr>
<td>P.G. or P.O.</td>
<td>Paregoric</td>
</tr>
<tr>
<td>Pep pills</td>
<td>Stimulants</td>
</tr>
<tr>
<td>Piece</td>
<td>A container of drugs</td>
</tr>
<tr>
<td>Pinks</td>
<td>Seconal (brand of secobarbital, Eli Lilly and Company) caps</td>
</tr>
<tr>
<td>Plant</td>
<td>Cache of narcotics</td>
</tr>
<tr>
<td>Pop</td>
<td>To inject drugs</td>
</tr>
<tr>
<td>Pot</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Purple hearts</td>
<td>Luminal</td>
</tr>
<tr>
<td>Quill</td>
<td>A folded matchbox cover from which narcotics are sniffed</td>
</tr>
<tr>
<td>Rainbows</td>
<td>Tuinal (brand of amobarbital sodium and secobarbital sodium</td>
</tr>
<tr>
<td>Reader</td>
<td>A prescription</td>
</tr>
<tr>
<td>Red birds</td>
<td>Seconal</td>
</tr>
<tr>
<td>Red devils</td>
<td>Seconal (brand of secobarbital, Eli Lilly and Company) caps</td>
</tr>
<tr>
<td>Reefer</td>
<td>A marijuana cigarette</td>
</tr>
<tr>
<td>Roach</td>
<td>The butt of a marijuana cigarette</td>
</tr>
<tr>
<td>Rope</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Roses</td>
<td>Benzedrine (brand of amphetamine sulfate, Smith, Kline &amp; Fr</td>
</tr>
<tr>
<td>Sam</td>
<td>Federal narcotic agents</td>
</tr>
<tr>
<td>Satch cotton</td>
<td>Cotton used to strain narcotics before injection</td>
</tr>
<tr>
<td>Scat</td>
<td>Heroin</td>
</tr>
<tr>
<td>Score</td>
<td>To purchase drugs</td>
</tr>
<tr>
<td>Seggy</td>
<td>Seconal (brand of secobarbital, Eli Lilly and Company) caps</td>
</tr>
<tr>
<td>Shooting gallery</td>
<td>A place where narcotic addicts inject drugs</td>
</tr>
<tr>
<td>Shoot up</td>
<td>To inject drugs</td>
</tr>
<tr>
<td>Slammed</td>
<td>In jail</td>
</tr>
</tbody>
</table>
syringe
ar purchase of narcotics
brand of pentobarbital, Abbott Laboratories) capsules
from drugs
fluence of LSD or other hallucinogens
fluence of drugs
brand of dextroamphetamine sulfate, Smith, Kline & French Laboratories) tablets
ion or packet of narcotics
(brand of amphetamine sulfate, Smith Kline & French Laboratories) tablets
s
of drugs
and of secobarbital, Eli Lilly and Company) capsules
rcoitics
rugs
atchbox cover from which narcotics are sniffed through the nose
and of amobarbital sodium and secobarbital sodium, Eli Lilly and Company) capsules
ion
and of secobarbital, Eli Lilly and Company) capsules
a cigarette
at a marijuana cigarette
(brand of amphetamine sulfate, Smith, Kline & French Laboratories) tablets
rcoitic agents
l to strain narcotics before injection
e drugs
and of secobarbital, Eli Lilly and Company) capsules
ere narcotic addicts inject drugs
rugs
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smack</td>
<td>Heroin</td>
</tr>
<tr>
<td>Sniff</td>
<td>To sniff narcotics (usually heroin or cocaine) through the nose</td>
</tr>
<tr>
<td>Snow</td>
<td>Cocaine</td>
</tr>
<tr>
<td>Speed</td>
<td>Methamphetamine, usually injected for rapid result</td>
</tr>
<tr>
<td>Speedball</td>
<td>An injection which combines a stimulant and depressant - often codeine and</td>
</tr>
<tr>
<td></td>
<td>heroin</td>
</tr>
<tr>
<td>Spike</td>
<td>The needle used for injecting drugs</td>
</tr>
<tr>
<td>Square</td>
<td>A non-addict</td>
</tr>
<tr>
<td>Stash</td>
<td>A cache of narcotics</td>
</tr>
<tr>
<td>Stick</td>
<td>A marijuana cigarette</td>
</tr>
<tr>
<td>STP</td>
<td>A highly potent hallucinogen</td>
</tr>
<tr>
<td>Stuff</td>
<td>Narcotics</td>
</tr>
<tr>
<td>Sugar</td>
<td>Powdered narcotics</td>
</tr>
<tr>
<td>Sugar cube</td>
<td>LSD</td>
</tr>
<tr>
<td>Texas tea</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Thoroughbred</td>
<td>A high-type hustler who sells pure narcotics</td>
</tr>
<tr>
<td>Toovies</td>
<td>Tuinal (brand of amobarbital sodium and secobarbital sodium, Eli Lilly)</td>
</tr>
<tr>
<td>Trip, tripping</td>
<td>Being &quot;high&quot; on hallucinogens, particularly LSD</td>
</tr>
<tr>
<td>Truck drivers</td>
<td>Amphetamines</td>
</tr>
<tr>
<td>Turkey</td>
<td>A capsule purported to be narcotic but filled with a non-narcotic</td>
</tr>
<tr>
<td>Turned off</td>
<td>Withdrawn from drugs</td>
</tr>
<tr>
<td>Turned on</td>
<td>Under the influence of drugs</td>
</tr>
<tr>
<td>Uncle</td>
<td>Federal narcotic agent</td>
</tr>
<tr>
<td>Ups</td>
<td>Stimulants</td>
</tr>
<tr>
<td>Wake-ups</td>
<td>Amphetamine</td>
</tr>
<tr>
<td>Washed up</td>
<td>Withdrawn from drugs</td>
</tr>
<tr>
<td>Wasted</td>
<td>Under the influence of drugs</td>
</tr>
<tr>
<td>Weed</td>
<td>Marijuana</td>
</tr>
<tr>
<td>Weed-head</td>
<td>Marijuana user</td>
</tr>
<tr>
<td>Weekend habit</td>
<td>A small, irregular drug habit</td>
</tr>
<tr>
<td>Whiskers</td>
<td>Federal narcotic agents</td>
</tr>
<tr>
<td>Whites</td>
<td>Amphetamine sulfate tablets</td>
</tr>
<tr>
<td>White stuff</td>
<td>The equipment for injecting drugs</td>
</tr>
<tr>
<td>Works</td>
<td>Morphine</td>
</tr>
</tbody>
</table>
| Yellow-jackets | Nembutal (brand of pentobarbital, Abbott Laboratories) capsules (s
TEACHER INFORMATION (continued)

narcotics (usually heroin or cocaine) through the nose

are, usually injected for rapid result

on which combines a stimulant and depressant – often cocaine mixed with morphine or

used for injecting drugs

narcotics

cigarette

potent hallucinogen

narcotics

The hustler who sells pure narcotics

and of amobarbital sodium and secobarbital sodium, Eli Lilly and Company) capsules

"high" on hallucinogens, particularly LSD

purported to be narcotic but filled with a non-narcotic substance

from drugs

influence of drugs

narcotic agent

user

irregular drug habit

narcotic agents

e the sulfate tablets

for injecting drugs

(brand of pentobarbital, Abbott Laboratories) capsules (solid yellow)
A. Bureau of Narcotics and Dangerous Drugs

1. Enforcement
   a. Major responsibility
   b. Six hundred agents scattered throughout the United States
   c. Twelve posts of duty in three overseas districts with nineteen agents. Work with authorities in host country to locate and seize illicit drugs for the United States.

2. Training (state, federal, and local agents)

3. Education
   a. Institutes to educate police officers to drug identification, that they may know social and psychological patterns of drug abuse
   b. Speeches by field agents
   c. Make films and pamphlets on drug education
   d. Conferences dealing with drug information

4. Scientific Research
   a. Issue permits for the importation of crude narcotics, and for limited production of illicit drugs, natural or synthetic, in terms of the needs of the country

B. Bureau of customs

1. Responsible for prohibiting the illegal entry of contraband drugs into the United States
2. Agents at sea and land ports of entry into this country; empowered to search individuals and their goods
   a. Custom port investigators
   b. Custom enforcement officers
      1) Conduct vessel and aircraft searches
      2) Perform uniformed patrol
Controllers of Illegal Drug Distribution

Dangerous Drugs

- Agents scattered throughout the United States duty in three overseas districts with nineteen agents to the three posts (1966).
- Authorities in host country to locate and seize illicit narcotic supplies destined States.
- Federal, and local agents)
- Educate police officers to drug identification, pharmacology, investigation technique, and psychological patterns of drug abuse
- Educated agents
- Pamphlets on drug education dealing with drug information

For the importation of crude narcotics, and for limiting the manufacture of narcotic or synthetic, in terms of the needs of the country

- Prohibiting the illegal entry of contraband drugs into the United States land ports of entry into this country, empowered by treaty to make searches of their goods
- Investigators
- Merchant officers
- Vessel and aircraft searches
- Uniformed patrol
TEACHER INFORMATION (continued)

3) Plain clothes assignments
4) Surveillances at airport, pier, and border crossing points.

c. Custom agents (criminal investigators.)

C. FDA

1. Responsible for implementing the provisions of the federal Food, Drug amendments.

D. State enforcement

1. In all states and localities there are over 1,000 persons engaged in
2. Forty-four states have developed plans for the control of all drugs.
   the Federal laws and are designed to suppress the trafficking of these

E. Primary objective to control drugs

1. To reach the highest possible sources of drug supply and to seize the
   illicit drugs before use.
   a. Undercover investigation - assume identity to make a "buy" as evi
   b. Use of enforcement - getting information from those facing - or n

F. Non-enforcement personnel who aid drug control

1. Examiners of merchandise
2. Verifiers of merchandise
3. Appraisers of merchandise
4. Inspectors of persons and vehicles and their effects arriving from ab

G. FBI gives the Bureau of Narcotics and Dangerous Drugs (state, local, fed

H. Problems of enforcement

1. How the contraband is concealed
2. Population (for example: 1965 more than 180 million persons and 53 mi
   in the United States.)
Localities there are over 1,000 persons engaged in narcotic enforcement
have developed plans for the control of all drugs. Most of the state laws parallel
and are designed to suppress the trafficking of these drugs.

- Control drugs
- at possible sources of drug supply and to seize the greatest possible quantity of
- Re use.

- Investigation - assume identity to make a "buy" as evidence
- ment - getting information from those facing - or not facing - criminal charges.

- Panel who aid drug control
- andise
- andise
- handise
- ons and vehicles and their effects arriving from abroad.

- of Narcotics and Dangerous Drugs (state, local, federal) assistance

- is concealed

- (example: 1965 more than 180 million persons and 53 million vehicles and trains arrived

     -118-
International Control

A. United Nations

1. Permanent Central Opium Board and Drug Supervisory Body
   a. Studies of legitimate needs for narcotics
   b. Treaties made to encourage production and distribution quotas limited

2. Commission on Narcotic Drugs
   a. Supervisory and policy making body
   b. Surveys activity in all countries
   c. Recommends improved control measures
   d. Appeals for public support

3. World Health Organization
   a. Disseminates information on drugs and their control
   b. Disseminates internationally agreed upon medical and health standards

4. Division of Narcotic Drugs
   a. Part of the U.N. Secretariat
   b. Implement treaties
   c. Plan more effective measures
   d. Handle scientific research

B. Interpol

1. International Criminal Police Organization
2. Cannot enforce any laws against narcotic traffic
3. Acts as clearing house for information about crimes and criminals

C. Problems of international control

1. Countries producing opium plants have inadequate laws or poorly enforced
International Control

International Control

International Control

International Control

International Control

International Control

International Control

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International Control
2. In some lands opium smoking and eating is tolerated.
3. Opium produced is four times that needed for legitimate medicinal and research purposes.

**Laws**

**A. Sources of law**
1. International treaties and agreements
2. Laws of the federal government
3. State laws
4. City and local laws

**B. Federal laws**

1. Harrison Narcotic Act (1914) is a tax measure designed to control the importation, preparation, purchase, sale, distribution, or gift of opium and its derivatives and payment of an occupational tax of all who deal in these substances. The Act requires registrants using official order forms, allowing exceptions only for legitimate purposes.

**Illegal transfer or sale:**

a. First offense—not less than 5 years or more than 20 years imprisonment;
b. Second offense and subsequent offenses—not less than 10 or more than 40 years imprisonment; $20,000 may be levied

The following offenses may not be suspended or probations granted. A person under eighteen years of age is refused parole and probation, and can be sentenced to death.

**Illegal possession:**

a. First offense—not less than 2 or more than 10 years imprisonment, plus payment of a fine;
b. Second offense—not less than 5 or more than 20 years imprisonment;
c. Third or subsequent offense—not less than 10 or more than 40 years imprisonment; sentences cannot be suspended or parole granted.
and eating is tolerated.

agreements that needed for legitimate medicinal and research purposes

Laws

is a tax measure designed to control the importation, manufacture, production,

distribution, or gift of opium and its derivatives. It requires a registration

of all who deal in these substances. The act limits sales or transfers

nal order forms, allowing exceptions only for legitimate medical or dental

es than 5 years or more than 20 years imprisonment; fine up to $20,000 may be levied

sequent offenses—_not less than 10 or more than 40 years imprisonment; fine up to

y not be suspended or probations granted. A person who sells narcotics to someone

ge is refused parole and probation, and can be sentenced to life imprisonment or to

es than 2 or more than 10 years imprisonment, plus possible fine of up to $20,000.

ess than 5 or more than 20 years imprisonment.

ffense—not less than 10 or more than 40 years imprisonment. After first offense, suspen

-120-
2. The Narcotic Drugs Import and Export Act (1922) is a reenactment and prohibits the importation of crude opium and coca leaves to amounts necessary for the manufacture of opium for smoking or for the manufacture of coca leaves for the manufacture of cocaine.

3. Marihuana Tax Act (1937) is similar to the Harrison Act. The same exact practice, but these are academic today because there is no medical use of marijuana in this country.

4. Opium Poppy Control Act (1942) prohibits the production of the opium poppy under license and provides penalties for persons who violate this act.

5. Boggs Act (1951) mandatory-sentence act for illegal possession or sale, suspension of sentences or the granting of probation or parole.
   a. For possession:
      - First offense 2 - 5 year range
      - Second offense 5 - 10 years
      - Third offense 10 - 20 years

6. Narcotic Control Act (1956)
   a. Maintained penalties for possession as in the previous Act.
   b. Increased maximum third conviction to forty years.
   c. Sale or transfer definite sentence
      1) First offense 2 - 10 year range
      2) Second offense 5 - 20 year range
      3) Third and subsequent offense, 10 - 40 years
   d. All without parole.
   e. Sale of heroin to minors (under eighteen)
      1) Authorized by federal courts
      2) Ten years to life sentence
      3) Optional fine up to $20,000
      4) Federal juries may impose death sentence
TEACHER INFORMATION (continued)

The Export Act (1922) is a reenactment and revision of an earlier law. It limits opium and coca leaves to amounts necessary for medical and scientific needs. It limits opium for smoking or for the manufacture of heroin, similar to the Harrison Act. The same exceptions are allowable for medical use.

Today because there is no medical use of marijuana, it suppresses the crop.

42) prohibits the production of the opium poppy in the United States, except for the entry.

It imposes penalties for persons who violate this act.

Sentence act for illegal possession or sale of narcotic drugs and limits the sentence for illegal possession as in the previous Act.

First offense 2 - 5 year range
Second offense 5 - 10 years
Third offense 10 - 20 years

Or possession as in the previous Act.

A conviction to forty years.

Immediate sentence

10 year range
20 year range
Sent offense, 10 - 40 years

Ors (under eighteen)

Sentence courts

Sentence $20,000

Impose death sentence
f. Customs and Narcotic Bureau officers allowed to make arrests without a warrant.

7. Narcotic Hospital Law provided the establishment of two hospitals, one in Fort Worth at Lexington, Kentucky.

8. Narcotics Information Act provides rewards to individuals who give information to violations in the illegal trafficking of drugs.

9. Narcotics Transportation Act prohibits the use of communication facilities in aiding transportation of narcotics. There is a two year penalty and such vehicle or vessels may be confiscated.

10. The Narcotic Manufacturing Act (1960) provides a system of licensing and quotas for drug manufacturers. The manufacturer must be properly registered, hold a license for a specific class of drugs.


   a. Insure safety of drugs that reach the public
   b. Laws administered by the FDA
   c. Information to be on all containers of new drugs

1) Name of drug (generic)
2) Description
3) Actions
4) Indications
5) Adverse reactions
6) Contraindications
7) Warnings
8) Precautions
9) Dosages and method of administration

12. Drug Abuse Control Amendments of 1965 are from the Federal Food, Drug and Cosmetic Act. They apply to depressant and stimulant drugs, other than the narcotics, and to drugs with potential abuse because of their depressant, stimulant or hallucinogenic effects. They provide detection and elimination of illegal drug distribution but do not provide criminal penalties. It is felt that through proper treatment, physical and psychological, the addict can be rehabilitated and returned to society. There are specific penalties for illegal possession of dangerous drugs.

The amendments are:

a. All manufacturers and wholesalers who produce, compound or sell amphetamines with a similar effect on the central nervous system must register with the
TEACHER INFORMATION (continued)

Officers allowed to make arrests without a warrant

The establishment of two hospitals, one in Fort Worth, Texas, and the other

Provide rewards to individuals who give information to authorities of Customs

Prohibits the use of communication facilities in arranging traffic in narcotics.

Such vehicle or vessels may be confiscated.

(1960) provides a system of licensing and quotas for medicinal narcotic

Producer must be properly registered, hold a license, and is assigned a quota for

The Drug and Cosmetic Act (1961)

Not reach the public

FDA

Containers of new drugs

Administration

Of 1965 are from the Federal Food, Drug and Cosmetic Act. These amendments

Plant drugs, other than the narcotics, and to drugs which are determined to have

If their depressant, stimulant or hallucinogenic effect on man. The law is for

Illegal drug distribution but does not provide criminal sanctions against the

Proper treatment, physical and psychological, the drug user can be

Society. There are specific penalties for illegal transfer, sale, and

Sellers who produce, compound or sell amphetamines and barbiturates (and other drugs

The central nervous system) must register with the Food and Drug Administration.

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b. Manufacturers, wholesalers, retailers, and physicians must keep records of illegal drug sales for at least three years.

c. Who may sell or possess is clearly stated.

d. Penalties are increased for the sale of illegal drugs to minors.

e. FDA may carry firearms and enforcement powers related to search, seizure, and forfeiture.

f. FDA is given expanded authority to combat drug counterfeiting.

g. Prescription for a stimulant or depressant drug under control is valid for a maximum of one year from the date it was written, not more than five refills for stimulants and not more than 30 refills for depressants.

Those benefiting financially from the illicit use of dangerous drugs are described in the Act. Legal penalties are:

a. Each delivery, with or without payment, is a separate offense with the maximum penalty being up to one year in prison.

b. After prior conviction, the maximum penalty for illegal delivery is increased to up to 20 years imprisonment.

c. First offense—any person who sells or gives barbiturates to a minor over 18 who sell or give barbiturates to a minor for the first time under the Act must be fined not more than $5,000 or both.

d. Second offense—six (6) years imprisonment and maximum fine of $15,000.

13. Narcotic Addict Rehabilitation Act of 1966

a. An addict charged with a non-violent Federal offense who elects to be treated instead of prosecuted for his crime can be committed to the Surgeon General's Addiction Treatment Center, where treatment, examination, and rehabilitation are provided.

b. An addict already convicted of a crime can be committed to the Act for a maximum period of sentence that is not excessive, not less than one year, or not more than two years.

c. An addict not charged with an offense can be civilly committed to the Act for his own application, or that of a relative or another "related individual".

d. The Act (NARA) is administered by the National Institute of Mental Health, and by the Department of Justice.

C. State and local laws

1. Uniform Narcotics Drug Act

a. Standard draft for state law

b. Adopted in 46 states
TEACHER INFORMATION (continued)

Retailers, and physicians must keep records of purchases and disposition for

early stated

the sale of illegal drugs to minors.

Forfeiture powers related to search, seizure, and arrest are expanded.

ility to combat drug counterfeiting.

or depressant drugs under control is valid for six (6) months and during

(5) refills

Illicit use of dangerous drugs are dealt with under the criminal section of

Illicit payment, is a separate offense with a maximum penalty of $1,000 and one (1)

maximum penalty for illegal delivery is $10,000 and/or three (3) years in prison.

er 18 who sell or give barbiturates to anyone under 21 may be imprisoned for

fined not more than $5,000 or both.

imprisonment and maximum fine of $15,000, and/or both

Set of 1966

violent Federal offense who elects to be committed for treatment instead

be committed to the Surgeon General of the Public Health Service for

habilitation.

of a crime can be committed to the Attorney General for a treatment period of

maximum period of sentence that could be imposed for his conviction.

offense can be civilly committed to the Surgeon General for treatment upon

of a relative or another "related individual."

ed by the National Institute of Mental Health, U.S. Department of Health,

the Department of Justice.
c. States having own laws

1) California
2) Massachusetts
3) Pennsylvania
4) New Hampshire

2. Most of the state laws parallel the Federal laws and are designed to supplement them. A person violating these laws may be punished under both Federal and state laws.

3. Under recent community mental health legislation, States and communities are receiving National Institute of Mental Health grants for specialized training programs and operation of new addiction treatment facilities on a joint Federal-State basis.

4. The laws concerning the control of dangerous drugs are not uniform. Most states have a requirement that records of receipt and delivery be kept for several years. Penalties for violation of state dangerous drugs are less than for narcotic violations. Sometimes the maximum penalty is a fine as low as $100. It is necessary to establish.
el the Federal laws and are designed to suppress the trafficking of these drugs. May be punished under both Federal and state laws.

health legislation, States and communities can receive Federal support through Health grants for specialized training programs, and for construction, staffing, in treatment facilities on a joint Federal-State basis. 

ol of dangerous drugs are not uniform. Most states have illegal possession features of receipt and delivery be kept for several years.

dangerous drugs are less than for narcotic violation. In many states violation is a sum penalty is a fine as low as $100. It is generally felt that a uniform act
The Drug Abuse Amendments were passed in 1965. They became effective February 17, 1966, because of the national concern of the drug abuse of depressants, stimulants, and hallucinogens.

The Bureau of Drug Abuse Control has been organized as part of the Food and Drug Administration to carry out provisions of the law. Three hundred trained agents were employed.

1. Seizing illegal supplies of controlled drugs
2. Serving warrants
3. Arresting persons illegally manufacturing drugs
4. Trading illegally
5. Handling dangerous drugs

Two methods are used to curb drug abuse:

1. Records of supplies and sales must be kept by all legal manufacturers of drugs. The following must take an inventory and balance their supplies of controlled substances against their records of sales and must also make records available to FDA agents:
   - Registered manufacturers
   - Processors and their suppliers
   - Wholesale druggists
   - Pharmacies
   - Hospitals
   - Clinics
   - Public Health agencies
   - Research laboratories

2. Punishment of persons supplying illegal drugs

The law is for detection and elimination of illegal drug distribution but does not provide punishment against the user. It is felt that through proper treatment, physical and psychological, the drug user can be rehabilitated and returned to his place in society.

Specific penalties for illegal transfer, sale, and possession may be found on page 127.
LAWS GOVERNING DRUGS: DRUG ABUSE AMENDMENTS - 1965

Passed in 1965. They became effective February 1, 1966. They were passed to prevent the drug abuse of depressants, stimulants, and hallucinogens.

They have been organized as part of the Food and Drug Administration. There are provisions of the law. Three hundred trained agents have the job of:

- Legal supplies of controlled drugs
- Warrants
- Persons illegally manufacturing drugs
- Legally
- Dangerous drugs

Legal abuse:

Supplies and sales must be kept by all legal handlers of drugs designated by the law. The following must take an inventory and keep records of receipts and must also make records available to FDA agents:

- Registered manufacturers
- Processors and their suppliers
- Wholesale druggists
- Pharmacies
- Hospitals
- Clinics
- Public Health agencies
- Research laboratories

List of persons supplying illegal drugs

Elimination of illegal drug distribution but does not provide criminal sanctions that through proper treatment, physical and psychological, the drug user can be placed in society.

Transfer, sale, and possession may be found on next page.
Drug Abuse Control Amendments of 1965

1. All manufacturers and wholesalers who produce, compound, or sell amphetamines or drugs with a similar effect on the central nervous system must register with the Food and Drug Administration.

2. Manufacturers, wholesalers, retailers, and physicians must keep records for three years.

3. Who may sell or possess is clearly stated.

4. Penalties are increased for sale of illegal drugs to minors.

5. Food and Drug Administration may carry firearms and enforcement powers of arrest are expanded.

6. Food and Drug Administration authority to combat drug counterfeiting is expanded.

7. Prescription for a stimulant or depressant drug under control is valid for that time, is limited to five (5) refills.

The aim of these provisions is to curb illegal abuse—not to restrict legitimate medical use. Those benefiting financially from the illicit use of dangerous drugs are dealt with under the Act. Legal penalties are as follows:

1. Each delivery, with or without payment, is a separate offense with a maximum of one year in prison.

2. After prior conviction, the maximum penalty for illegal delivery is $10,000 and ten years in prison.

3. First offense—all persons over 18 who sell or give barbiturates to any person under 18 are fined not more than $2,000 or imprisoned for not more than two (2) years or fined not more than $5,000 or both.

4. Second offense—six (6) years imprisonment and maximum fine of $15,000 and $100,000 or both.

The act provides for confiscation and destruction of all drugs not controlled under the provisions of the act. Other provisions of the act are designed to reduce illegal drug abuse and to increase penalties for those who profit from the illegal use of dangerous drugs.
TEACHER INFORMATION (continued)

of 1965

...and wholesalers who produce, compound, or sell amphetamines and barbiturates (and other
their effect on the central nervous system) must register with the Food and Drug

resalers, retailers, and physicians must keep records of purchase and dispositions

cess is clearly stated

ased for sale of illegal drugs to minors.

istration may carry firearms and enforcement powers related to search, seizure, and

istration authority to combat drug counterfeiting is expanded

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is to curb illegal abuse—not to restrict legitimate medical use

from the illicit use of dangerous drugs are dealt with under the criminal section

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or without payment, is a separate offense with a maximum penalty of $1,000 and one (1)

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persons over 18 who sell or give barbiturates to anyone under 21 may be imprisoned
two (2) years or fined not more than $5,000 or both.

x (6) years imprisonment and maximum fine of $15,000 and/or both.
Laws are not uniform. Most have illegal possession features and require delivery be kept for several years. Penalties for violation of state drug narcotic violation.

In many states violation is a misdemeanor. Sometimes, the maximum penalty generally felt that a uniform act needs to be established.
have illegal possession features and requirement that records of receipt and 1 years. Penalties for violation of state dangerous drugs are less than for

a misdemeanor. Sometimes, the maximum penalty is a fine as low as $100. It is
LEGAL AND MEDICAL DRUG DEFINITIONS DIFFER. A DRUG IS LEGALLY TREATED AS A NARCOTIC OR ADDICTION SUSTAINING LIABILITY. THESE DRUGS ARE LEGALLY TREATED AS NARCOTIC.

1. Opium and its derivatives--morphine, heroine, cocaine, etc.
2. Coca leaves (medically--a stimulant)
3. Cannabis, marijuana, and chemically related substances (medically--a
4. Synthetic narcotics--meperidine (isonipecaine)

FEDERAL

Harrison Act of 1914

Narcotics are under the control of the Bureau of Narcotics (a branch of the To
is assisted by Customs Officers and the Coast Guard. Important features of n
1. Registration of those dealing in narcotics
2. Special taxes are levied
3. Special order forms and record-keeping provisions must be maintained
4. There are prohibitions and penalties for illegal possession and traff

Not all narcotic preparations are treated alike. "Exempt narcotics" may be s
prescription; however, records must be kept and persons must sign for the nar
are for cough syrups.

Narcotic law penalties:

Illegal transfer or sale:

1. First offense--not less than five (5) years or more than twenty (to $20,000 may be levied.
LAWS GOVERNING DRUGS: NARCOTICS

A drug is legally treated as a narcotic if it has an addiction forming habit. These drugs are legally treated as narcotic.

Narcotics—morphine, heroine, cocaine, etc.

Hallucinogen—lysergic acid, and chemically related substances (medically—a hallucinogen)

Control of the Bureau of Narcotics (a branch of the Treasury Department.) The Bureau officers and the Coast Guard. Important features of narcotic laws and regulation are:

1. Those dealing in narcotics
2. Levied
3. and record-keeping provisions must be maintained
4. Confinements and penalties for illegal possession and trafficking in these drugs.
5. are treated alike. "Exempt narcotics" may be sold without a doctor's orders; must be kept and persons must sign for the narcotic. Most exempt narcotics

Sale:
1. not less than five (5) years or more than twenty (20) years imprisonment; fine up to levied.

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2. Second or subsequent offense—not less than ten (10) or more than fine up to $20,000 may be levied.

The foregoing sentences may not be suspended or probation granted. A person under 18 years of age is refused parole and probation, and can be sentenced to

Illegal possession:

1. First offense—not less than two (2) or more than ten (10) years in
   fine of up to $20,000.

2. Second offense—not less than five (5) or more than twenty (20) ye

3. Third or subsequent—not less than ten (10) or more than forty (4) first offense, sentences cannot be suspended or parole granted.

STATE

Most states follow the Uniform Narcotic Drug Act which follows Federal law.

EDUCATIONAL AGENCIES

The United National Commissions on Narcotics is working to control for medical of opium by having it sold by the producing nations to a single company which are required.

Medical associations are working to control the distribution of narcotics.

TREATMENT AGENCIES

To receive treatment a patient must fully cooperate; 4½ months minimum must be hospitals are located in Lexington, Kentucky (men and girls), in Fort Worth, New York, and in Chicago, Illinois.
quent offense—not less than ten (10) or more than forty (40) years imprisonment; 300 may be levied.

not be suspended or probations granted. A person who sells narcotics to someone used parole and probation, and can be sentenced to life imprisonment or death.

not less than two (2) or more than ten (10) years imprisonment plus a possible 20,000.

—less than five (5) or more than twenty (20) years imprisonment.

quent—not less than ten (10) or more than forty (40) years imprisonment. After sentences cannot be suspended or parole granted.

orm Narcotic Drug Act which follows Federal law. Some states have variations.

ions on Narcotics is working to control for medical use the world-wide production by the producing nations to a single company which would distribute it as needs

working to control the distribution of narcotics.

ment must fully cooperate; 6 months minimum must be spent in the hospital;

xington, Kentucky (men and girls), in Fort Worth, Texas (men), in California, Illinois.
I, FRANK MURRAY, Secretary of State of the State of Montana, do hereby certify a true and correct copy of House Bill No. 453, Chapter No. 314, Montana Session Laws of Forty-first Session of the Legislative Assembly of the State of Montana, approved by the Governor of said State, on the eleventh day of March, 1969, and effective on the eleventh day of March, 1969.

IN TESTIMONY WHEREOF, I have affixed the Great Seal of said State.

Done at the City of Helena, this twelfth day of March, 1969.

/S/ Frank Murray
Frank Murray
Secretary

CHAPTER NO. 314
MONTANA SESSION LAWS 1969
HOUSE BILL NO. 453

AN ACT PROVIDING FOR REGULATION OF THE POSSESSION AND SALE OF DANGEROUS DRUGS IN THE STATE OF MONTANA; DANGEROUS DRUGS TO INCLUDE DEPRESSANT, STIMULANT, HALLUCINOGENIC AND NARCOTIC DRUGS AND PHRASES IN CONNECTION THERewith: DEFINING WHO MAY LAWFULLY SELL AND POSSESS DANGEROUS DRUGS; PROVIDING FOR THE FRAUDULENT OBTAINING OF DANGEROUS DRUGS OR THE ALTERATION OF LABELS; PROVIDING FOR UNLAWFUL SALE AND POSSESSION; PROVIDING FOR THE STATE BOARD OF PHARMACY TO REGULATE, DESIGNATE OTHER DANGEROUS DRUGS AFTER PROPER NOTICE AND HEARING; AMENDING SECTION 27-724, 27-725, 54-101 THROUGH 54-128 INCLUSIVE, 94-35-123, 94-35-148, 94-35-199, R.C.M.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF THE STATE OF MONTANA:

IN TESTIMONY WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE GREAT SEAL OF SAID STATE.


/S/ FRANK MURRAY

SECRETARY OF STATE

CHAPTER NO. 314
MONTANA SESSION LAWS 1969
HOUSE BILL NO. 453

Section 1. Definition of terms. (a) "Person" includes an individual, partnership, trust or other institution or entity.

(b) "Drug" means articles recognized in the official United States Pharmacopoeia of the United States, or official National Formulary, or any supplement thereto.

(c) "Depressant drugs" include: Amobarbital, secobarbital, pentobarbital, glutethimide, meprobamate, chloral hydrate, paraldehyde, ethchlorvynol, and any derivative, compound, or preparation containing any of the above listed drugs.

(d) "Stimulant drugs" include: Amphetamine, dextroamphetamine, mephentermine, phenmetrazine, or any product, derivative, or compound or preparation of the above listed drugs.

(e) "Hallucinogenic drugs" include: Marihuana, lysergic acid diethylamide, mescaline, peyote, and any product, derivative, compound, or preparation containing any of the above listed drugs.

(f) "Narcotic drugs" include: Opium, morphine, heroin, codeine, ethylmorphine, methadone, and cocaine or any product, derivative, compound, or preparation containing any of the above listed drugs.

(g) "Dangerous drug" means any depressant, stimulant, hallucinogenic, or narcotic drug.

(h) The terms "manufacture, preparation, cultivation, compounding or procuring, repackaging or otherwise changing the container, wrapper, or labeling of any drug or preparing for the distribution of the drug from the original place of manufacture to the person or sale to the ultimate consumer,

(i) The term "warehousing" means the receipt and storage of goods for commercial or sale to the ultimate consumer.

(j) The term "wholesaling, jobbing or distribution" means the selling or furnishing of drugs to the ultimate user or consumer of such drugs.

(k) "Sell" means to sell, exchange, give, or dispose of to another, or to
MONTANA STATE LAW (continued)

ms. (a) "Person" includes an individual, partnership, corporation, institution or entity.

recognized in the official United States Pharmacopoeia, official Homopathic
is, or official National Formulary, or any supplement to any of them.

clude: Amobarbital, secobarbital, pentobarbital, phenobarbital, barbituric
cloral hydrate, paraldehyde, ethchlorvynol, and ethinamate, or any product,
tion containing any of the above listed drugs.

de: Amphetamine, dextroamphetamine, mephentermine, methamphetamine, and
derivative, or compound or preparation of the above listed drugs.

clude: Marihuana, lysergic acid diethylamide, psilocybin, dimethyltryptamine,
scamine or any product, derivative, compound, or preparation of the above

de: Opium, morphine, heroin, codeine, ethylmorphine, dihydromorphinone,
nine or any product, derivative, compound, or preparation of the above listed

any depressant, stimulant, hallucinogenic, or narcotic drug.

preparation, cultivation, compounding or processing" shall include
eg the container, wrapper, or labeling of any drug package in furtherance of
on the original place of manufacture to the person who makes final delivery.

means the receipt and storage of goods for compensation prior to final delivery.

jobbing or distribution" means the selling or distribution to any person who
sumer of such drug.

exchange, give, or dispose of to another, or to offer or agree to do the same.
(1) "Practitioner" means a physician, dentist, veterinarian, podiatrist, to prescribe drugs.

(m) "Manufacturer" means a person who by compounding, mixing, cultivating produces or prepares dangerous drugs, but does not include a pharmacist who co

sold or dispensed on prescriptions.

(n) Masculine words shall include the feminine and neuter and singular i

(o) The term "prescription" shall be given the meaning it has in R.C.M.

(p) This act may be cited as the "Montana Dangerous Drug Act."

Section 2. Authority of the state board of pharmacy to enact regulations

dangerous drugs.

(a) Registration and licensing. The state board of pharmacy is hereby a

turers, and to license, regulate, and supervise the warehousing, wholesaling, dispensing, and any other processing of all dangerous drugs, which is necess

tion as required by law, shall be added to the appropriate definitions of sec

section 1 for the purpose of the Montana Dangerous Drug Act.

(b) Fees. The state board of pharmacy is hereby authorized to require an amount to be fixed by the board, which fees shall not exceed one hundred d

(c) Dangerous drug designation. Any drug designated by the state board because of its depressant, stimulant, hallucinogenic or narcotic effects, aft

ion as required by law, shall be added to the appropriate definitions of sec

section 1 for the purpose of the Montana Dangerous Drug Act.

(d) Penalties. Failure to register or be licensed as provided for shall a fine not to exceed one thousand dollars ($1,000) or imprisonment in the cou (1) year, or both.
MONTANA STATE LAW (continued)

means a physician, dentist, veterinarian, podiatrist, or other person permitted by law

means a person who by compounding, mixing, cultivating, growing, or other process, 

manufactures drugs, but does not include a pharmacist who compiles dangerous drugs to be

prescriptions.

shall include the feminine and neuter and singular includes the plural.

"citation" shall be given the meaning it has in R.C.M. 1947, Section 66-1502(n).

cited as the "Montana Dangerous Drug Act."

of the state board of pharmacy to enact regulations, impose fees and designate

licensing. The state board of pharmacy is hereby authorized to register manufac-

ture, regulate, and supervise the warehousing, wholesaling, distributing, sale, purchase, 

processing of all dangerous drugs, which is necessary to carry out the enforcement

of the board, which fees shall not exceed one hundred dollars ($100) per year.

designation. Any drug designated by the state board of pharmacy as a dangerous drug 

stimulant, hallucinogenic or narcotic effects, after notice, hearing, and publica-

shall be added to the appropriate definitions of section (c), (d), (e), or (f) of 

of the Montana Dangerous Drug Act.

failure to register or be licensed as provided for shall be a misdemeanor punishable by

thousand dollars ($1,000) or imprisonment in the county jail for not to exceed one
Section 3. Dangerous drugs—persons and preparations exempt from the prohibited offenses. Medicinal preparations are excepted from the designated criminal offenses of presence or combination with therapeutically active or inactive non-narcotic ingredients:

(a) A preparation which contains not more than 64.8 mg. (1 grain) of codeine, one fluid ounce, or one avoirdupois ounce.

(b) Any preparation which contains cotarnine, nalorphine, narceine, noscapine, or any quantity. These medicinal preparations must contain, in addition to the narcotic qualities and be administered, dispensed, and sold in good faith as a medicinal preparation in this act.

(2) The following persons are excepted from the designated criminal offenses of presence or combination in this act while acting in the ordinary and authorized course of their business or employment or religious activity and whose activities in connection with dangerous drugs are specified in this section:

(a) Persons regularly engaged in manufacture, preparation, cultivation, or processing of pharmaceutical chemicals or distribution through branch outlets, wholesale druggists, or by direct shipment to hospitals, clinics, public health agencies, long-term care facilities, or pharmacies, or registered pharmacists upon prescriptions, or for use by or under the supervision of practitioners or laboratories or research or educational institutions for their use in research, teaching or clinical analysis.

(b) Suppliers (otherwise qualified in conformance with law) of persons engaged in preparation, cultivation, compounding, and processing referred to in subsection (a).

(c) Wholesale druggists who maintain establishments in conformance with law in supplying prescription drugs (1) to pharmacies, or to hospitals, clinics, long-term care facilities, or practitioners, for dispensing by registered pharmacists other than the person to whom the prescription is issued, or for use by or under the supervision of practitioners or laboratories or research or educational institutions for their use in research, teaching or clinical analysis.

(d) Registered pharmacists who are authorized to dispense dangerous drugs who are engaged in the authorized course of their business.

(e) Practitioners who prescribe or administer dangerous drugs.
drugs—persons and preparations exempt from the prohibition. (1) The following
excepted from the designated criminal offenses of sections 4 and 5 of this act
utically active or inactive non-narcotic ingredients:
ich contains not more than 64.8 mg. (1 grain) of codeine or any of its salts, per
oirdupois ounce.
which contains cotarnine, nalorphine, narceine, noscapine, papaverine in any
preparations must contain, in addition to the narcotic drug in it, other medicinal
red, dispensed, and sold in good faith as a medicine, not for the purpose of evading
persons are excepted from the designated criminal offenses of sections 4 and 5 of
the ordinary and authorized course of their business, profession, occupation,
activity and whose activities in connection with dangerous drugs are solely as
ly engaged in manufacture, preparation, cultivation, compounding, and processing who
nce with law, in preparing pharmaceutical chemicals or prescription drugs for
ch outlets, wholesale druggists, or by direct shipment, (1) to pharmacies or to
health agencies, long-term care facilities, or practitioners, for dispensing by
prescriptions, or for use by or under the supervision of practitioners, or
search or educational institutions for their use in research, teaching or chemical
wise qualified in conformance with law) of persons regularly engaged in manufacture,
compounding, and processing referred to in subsection (a).
ists who maintain establishments in conformance with law and are regularly engaged
drugs (1) to pharmacies, or to hospitals, clinics, public health agencies, long-
practitioners, for dispensing by registered pharmacists upon prescriptions, or for
vision of practitioners or (2) to laboratories or research or educational institutions,
teaching or clinical analysis.
acists who are authorized to dispense dangerous drugs.
no prescribe or administer dangerous drugs.
(f) Persons associated with a bona fide educational institution who use drugs in teaching or chemical analysis and not for sale.

(g) A common or contract carrier or warehouseman, whose possession of any dangerous drug is in the course of his business or employment as such.

(h) Officers and employees of the state, or a political subdivision of the state, in the course of their official duties.

(i) An employee or agent of any person described in paragraph (a) through (h), while such employee, nurse, or medical technician is acting in the course of his business, not on his own account.

(j) A person to whom or for whose use any dangerous drug has been prescribed by an authorized practitioner or pharmacist or for his personal or family use.

(k) Any bona fide religious organization incorporated under the laws of the state for religious purposes and not for profit, in good faith to transport, possess or use peyote (peyote) for religious sacramental purposes.

Nothing in this section shall be construed to prohibit or interfere with the use of peyote for religious or sacramental purposes.

Nothing in this act shall be construed to relieve any person from any requirement of Title 27, R.C.M. 1947.

Section 4. Criminal sale of dangerous drugs.

(a) A person commits the offense of a criminal sale of dangerous drugs if he sells, furnishes, supplies, dispenses, apologizes, gives, loans, or transmits any dangerous drug as defined in this act and excepted from the exceptions of section 3.
MONTANA STATE LAW (continued)

ated with a bona fide educational institution who use dangerous drugs in research, analysis and not for sale.

contract carrier or warehouseman, whose possession of any dangerous drug is in the usual for employment as such.

employees of the state, or a political subdivision of the state, while acting in the duties.

or agent of any person described in paragraph (a) through (g) of this subsection, and technician under the supervision of a practitioner who administers dangerous drugs, use, or medical technician is acting in the course of his employment or occupation and

om or for whose use any dangerous drug has been prescribed, sold, or dispensed by an or pharmacist may lawfully possess such drug.

religious organization incorporated under the laws of the state of Montana while on or using peyote (pellote) for religious sacramental purposes.

ction shall be construed to prohibit or interfere with the discretion of a practitioneribe or administer any dangerous drug to a patient for the treatment of a disease or his needs and to medical practice. Addiction, dependence or habitual use of a dangerous "disease or condition" and the prescription, administration, or dispensation of a e conditions incident to such addiction or habitual use shall be deemed "treatment of 

t shall be construed to relieve any person from any requirement prescribed by or under R.C.M. 1947.

al sale of dangerous drugs.

its the offense of a criminal sale of dangerous drugs if he sells, manufactures, prepares, or processes any dangerous drug as defined in this act and does not come within the
(b) A person convicted of criminal possession of dangerous drugs shall be imprisoned in the state prison not to exceed five (5) years. Any person of the age of 21 years or under violation under this section shall be presumed to be entitled to a deferred imposition of sentence.

Section 6. Fraudulently obtaining dangerous drugs. A person commits the offense of obtaining dangerous drugs if he obtains or attempts to obtain a dangerous drug by (a) fraud, deceit, or subterfuge; (b) falsely assuming the title of, or representing himself to be a manufacturer, practitioner, pharmacist, owner of a pharmacy or other persons authorized to possess dangerous drugs if he uses a forged, altered, or fictitious prescription; (d) the use of a false name or false a prescription or; (e) the concealment of a material fact.

Section 7. Altering labels on dangerous drugs. A person commits the offense of altering dangerous drugs if he affixes a false, forged, or altered label to a package or receptacle containing a dangerous drug, or otherwise misrepresents the package containing a dangerous drug.

Section 8. Penalty for fraudulently obtaining dangerous drugs or altering the labels. A person convicted of fraudulently obtaining dangerous drugs or altering the labels on dangerous drugs may be imprisoned in the county jail for a term not to exceed six (6) months.

Section 9. Alternative sentencing authority. A person convicted of criminal possession of dangerous drugs, fraudulently obtaining dangerous drugs or altering labels on dangerous drugs, if he excessive or habitual user of dangerous drugs either from the face of the record or by a petition, may in lieu of imprisonment, be committed to the custody of any institution for not less than six (6) months nor more than two (2) years.

Section 10. Jurisdiction. The district court shall have exclusive trial jurisdiction commenced under the Montana Dangerous Drug Act.

Section 11. Section 95-302(a) R.C.M. 1947, shall be amended to read as follows:

"95-302. Jurisdiction of the justice of the peace courts. The justices' courts have jurisdiction of all misdemeanors punishable by a fine not exceeding five hundred dollars, or imprisonment not exceeding six (6) months, or both such fine and imprisonment; excluding those commenced under the Montana Dangerous Drug Act except to act as examining and committing officers preliminary hearings as provided in subsection (c)."
MONTANA STATE LAW (continued)

Criminal possession of dangerous drugs shall be imprisoned by imprisonment in
five (5) years. Any person of the age of 21 years or under convicted of a first
will be presumed to be entitled to a deferred imposition of sentence.

A person commits the offense of fraudulently obtaining
attempts to obtain a dangerous drug by (a) fraud, deceit, misrepresentation
of the title of, or representing himself to be a manufacturer, wholesaler,
if a pharmacy or other persons authorized to possess dangerous drugs; (c) the
fictitious prescription; (d) the use of a false name or false address on
lent of a material fact.

A person commits the offense of altering labels on
dangerous drugs. A person commits the offense of altering labels on
else, forged, or altered label to a package or receptacle containing a
ers the package containing a dangerous drug.

 fraudulently obtaining dangerous drugs or altering the labels of dangerous drugs.

by obtaining dangerous drugs or altering the labels on dangerous drugs shall be
a term not to exceed six (6) months.

encing authority. A person convicted of criminal possession of dangerous
er labels on dangerous drugs, if he is shown to be an
gerous drugs either from the face of the record or by a pre-sentence investi-
t, be committed to the custody of any institution for rehabilitative treatment
or more than two (2) years.

The district court shall have exclusive trial jurisdiction over all prosecu-
Dangerous Drug Act.

a) R.C.M. 1947, shall be amended to read as follows:

e justice of the peace courts. The justices' courts have:

demands punishable by a fine not exceeding five hundred dollars ($500) or
months, or both such fine and imprisonment; excluding jurisdiction in cases
dous Drug Act except to act as examining and committing courts and to conduct
in subsection (c).
(b) Concurrent jurisdiction, with district courts, of all misdemeanors exceeding fifteen hundred dollars ($1,500); and

(c) Jurisdiction to act as examining and committing courts and for hearings."

Section 12. The following power of the Montana state board of pharmacy 66-1504, R.C.M. 1947, and shall be cited as section 66-1504.1, R.C.M. 194

(a) The Montana state board of pharmacy shall have the power to designate not now included under the present Montana Dangerous Drug Act as coming within the act after investigation finds such drug to have a potential for abuse because of its depressant, stimulant, hallucinogenic or narcotic effect; (2) the appropriate federal drug authorities, after investigation finds such drug to have a potential for abuse because of its depressant, stimulant, hallucinogenic or narcotic effect; (2) the appropriate federal drug authorities, the board may from time to time appoint a committee of experts to advise them in determining whether a regulation should be proposed.

(b) Before any drug shall be designated as a dangerous drug the board of the hearing specifying the drug concerned shall be published at least one week in five (5) newspapers of general circulation throughout the state.

(c) The regulations of the board in designating a substance as a dangerous drug shall be published in such manner to such extent as will effectively notify the public.

Section 13. If any section, subsection, sentence, clause, or phrase of this act is declared unconstitutional, such decision shall not affect the validity of the remainder of this act.


Section 15. This act shall become effective immediately upon its passage.
risdiction, with district courts, of all misdemeanors punishable by a fine only, not
exceeding dollars ($1,500); and

it to act as examining and committing courts and for such purpose to conduct preliminary

Following power of the Montana state board of pharmacy shall be inserted following section
and shall be cited as section 66-1504.1, R.C.M. 1947:

state board of pharmacy shall have the power to designate by regulation any drug that is
the present Montana Dangerous Drug Act as coming within that act when: (1) the board
deems such drug to have a potential for abuse because of its depressant, stimulant, halluc-
effect; (2) the appropriate federal drug authorities have promulgated regulations on such
pressant, stimulant, hallucinogenic or narcotic effect or its potential for abuse. The

ltime appoint a committee of experts to advise them with regard to any of the above matters

r a drug shall be designated as a dangerous drug the board shall hold a public hearing. Notice
ing the drug concerned shall be published at least once a week for three (3) consecutive
apers of general circulation throughout the state.

ions of the board in designating a substance as a dangerous drug coming within the Montana
ll be published in such manner to such extent as the board may deem necessary to adequately

any section, subsection, sentence, clause, or phrase of this act is for any reason held
decision shall not affect the validity of the remaining portions of this act.

, 54-112, 54-113, 54-114, 54-115, 54-116, 54-117, 54-118, 54-119, 54-120, 54-121, 54-122,
, 54-126, 54-127, 54-128, 94-35-123, 94-35-148, 94-35-199, R.C.M. 1947, and all acts and
ct herewith are hereby repealed.

s act shall become effective immediately upon its passage and approval.
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>addict</td>
<td>refers to any person who habitually uses any habit-forming drug, as defined by the Harrison Act of 1914; that is alkaloids of the opium poppy, hemp, and peyote in all its forms.</td>
</tr>
<tr>
<td>addiction</td>
<td>the classic term used to describe dependency on a drug; it is where the drug is habitually taken by law enforcement officers rather than medical personnel. Dependencies that have been identified: compulsion for a drug, tolerance, dependence, and a danger to the individual and the people around them.</td>
</tr>
<tr>
<td>amphetamine</td>
<td>any of a group of compounds which exert a stimulating action on the brain and the central nervous system.</td>
</tr>
<tr>
<td>antihistamine</td>
<td>a group of drugs developed in the last thirty years to treat conditions such as asthma, hay fever, etc.</td>
</tr>
<tr>
<td>barbiturates</td>
<td>a highly addicting group of depressant drugs, varying in potency; they are also used as anesthetics; although highly useful in medicine, they can cause dependence.</td>
</tr>
<tr>
<td>counterfeit drugs</td>
<td>a product manufactured illegally in an attempt to defraud the public in two ways: (1) there is no guarantee of the ingredients used; and (2) for those who prescribe medicinal use, it is deviating from proper use.</td>
</tr>
<tr>
<td>dependence</td>
<td>this is a general term, in recent years preferred by physicians, it is a state of psychic or physical need, or both, resulting from use of a drug on a periodic or continual basis; it is usually a drug-specific dependency.</td>
</tr>
<tr>
<td>depressant</td>
<td>a synonym for sedative or hypnotic; it is any of a group of drugs that act on the central nervous system.</td>
</tr>
<tr>
<td>drug</td>
<td>any chemical compound which produces an effect on the body; this effect can be positive or negative.</td>
</tr>
</tbody>
</table>
my person who habitually uses any habit-forming drug which is controlled by the Harrison Act of 1914; that is alkaloids of the opium or coca leaves, Indian yewote in all its forms.

term used to describe dependency on a drug; this term has been favored among enforcement officers rather than medical personnel; characteristics of addiction identified: compulsion for a drug, tolerance, psychological and physical and a danger to the individual and the people around him.

group of compounds which exert a stimulating action on the cerebral cortex an and the central nervous system.

are developed in the last thirty years to treat allergic conditions asthma, hay fever, etc.

 addicting group of depressant drugs, varying in use from sleep producers to psychedelic; although highly useful in medicine, they can be intoxicating and dangerous.

manufactured illegally in an attempt to defraud the public; such a drug is marketed to the public in two ways: (1) there is no guarantee as to the amount, kind, or strength of the ingredients used; and (2) for those who need the drug for some medicinal use, it is devoiding them of proper treatment.

general term, in recent years preferred by physicians over "addiction;" refers to psychic or physical need, or both, resulting from administration of a periodic or continual basis; it is usually associated with a particular drug, drug specific.

for sedative or hypnotic; it is any of a group of drugs which depress the nervous system.

al compound which produces an effect on the body; this effect may be either positive or negative.

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GLOSSARY (continued)

drug abuse
the self administration of excessive quantities of drugs leading to physical and psychological dependence, mental confusion, and other forms of harm primarily for the user of the drug.

drug misuse
the inappropriate use of a drug either through improper administration by a physician, a pharmacist or the individual; this term includes medical reasons, but different from those intended when the drug is prescribed.

euphoria
a feeling of well-being produced by various drugs, which results in a general depression of cortical regions in the brain along with a release of tension and inhibitory control.

exempt narcotics
that group of narcotic drugs which can be purchased without law requiring the purchaser's signature.

habituation
a less binding condition than addiction, but still occurring. Its characteristics include desire for the drug, some physical dependence on the drug, and the user's awareness of its characteristics.

hallucination
distortions of the perception processes; perceptions of people, places, objects, and events that are not actually present.

hallucinogens
the term given to a group of drugs which alter the processes of perception and orientation.

methadone
a drug now being used in the treatment of opiate addicts; it is administered to sustain the addict's withdrawal symptoms, reduce cravings, and prevent relapse. It is also used to reduce the harmful effects of heroin and other opioids.

narcotic drugs
means coca leaves, opium, cannabis, and every other substance physically distinguishable from them; any other drugs to which laws may now apply; and any drug found (by the State Commission of Health) to be an addiction-forming or addiction-sustaining liability similar from the effective date of determination of such finding (by the State Commission of Health or other competent state officer).
GLOSSARY (continued)

administration of excessive quantities of drugs leading to tolerance, physical and psychological dependence, mental confusion, and other forms of abnormal behavior; so considered to be the taking of drugs for the side effects that they produce.

appropriate use of a drug either through improper administration on the part of an, a pharmacist or the individual; this term includes the use of a drug for reasons, but different from those intended when the drug was originally used.

of well-being produced by various drugs, which results at least in part, from depression of cortical regions in the brain along with a reduction of anxiety, and inhibitory control.

up of narcotic drugs which can be purchased without prescription, however, the purchaser's signature.

condition than addiction, but still occurring from repeated use of a drug; characteristics include desire for the drug, some psychic dependence, and potential harm for the user of the drug.

ions of the perception processes; perceptions of people and objects; and sensory experiences of which there is no cause or explanation.

given to a group of drugs which alter the processes of the mind, particularly involving perception and orientation.

ow being used in the treatment of opiate addicts; it is said to relieve narcotic withdrawal and develop a tolerance which blocks the euphoric effect of heroin.

ca leaves, opium, cannabis, and every other substance, neither chemically nor biologically distinguishable from them; any other drugs to which the federal narcotic laws now apply; and any drug found (by the State Commissioner of Health or other state officer after reasonable notice and opportunity for hearing) to have addiction-forming or addiction-sustaining liability similar to morphine or cocaine, the effective date of determination of such finding (by said State Commissioner or other competent state officer).
physical dependence a state of the body brought about by repeated or continued use characterized by the development of severe acute physical symptoms when the drug is removed.

psychedelic a term meaning mind-expanding; associated with the hallucinogen LSD; most authorities believe that the person feels his mind expanding, but in fact, he does not.

psychological dependence a strong mental attachment to a drug which arouses from some emotional or psychic need of an individual; characteristically, psychological dependence is more difficult to break than physical dependence.

sedatives chief class of drugs, of which the most commonly abused are also of this group.

side effects abnormal reactions from the use of drugs; sometimes the foremost factor.

stimulants chief class of drugs, of which the most commonly abused are also of this group. These drugs stimulate the central nervous system by promoting alertness, a temporary rise in blood pressure and respiration.

tolerance the gradual conditioning of the body toward a drug; it is in order to recreate the feeling of well-being for taking the drug; it is this characteristic which causes a snowballing life of no return.

tranquilizers are a type of sedative in that they depress portions of the brain, those areas responsible for anxiety and tension; hangover and sedative effects.
GLOSSARY (continued)

The body brought about by repeated or continuous use of a drug that is
led by the development of severe acute physical symptoms when the drug

mind-expanding; associated with the hallucinogenic drugs, particularly
authorities believe that the person feels that he has a more creative or
and, but in fact, he does not.

atual attachment to a drug which arouses from a drug's ability to satisfy
al of psychic need of an individual; characteristically, this type of
is more difficult to break than physical dependence.

of drugs, of which the most commonly abused are barbiturates; tranquilizers

this group.

ctions from the use of drugs; sometimes in drug abuse the side effects become

factor.

of drugs, of which the most commonly abused are the amphetamines; this group

ulate the central nervous system by producing excitation, alertness, wake-
temporary rise in blood pressure and respiration.

conditioning of the body toward a drug; it is the ever-increasing dosage
in order to recreate the feeling of well-being that once was the main reason
the drug; it is this characteristic which hopelessly chains the individual
lling life of no return.

of sedative in that they depress portions of the central nervous system, that
reas responsible for anxiety and tension; normally they do not produce general
sedative effects.
# Concepts

## I. Preview of the 7th grade program
### A. History
1. The discovery of alcohol
2. How was alcohol first made?
3. For what purpose was alcohol first made?

### B. Taking alcohol into the body
1. Digestion
2. Absorption by the blood stream
3. Distribution to all parts of the body
4. Oxidation by cells
5. Elimination

### C. The effect on the organs and organ systems
1. Brain and nervous system
   a. Judgement
   b. Concentration
   c. Sense Organ
   d. Muscular control
   e. Reaction time
   f. Fatigue

## Teacher Materials

- "Supplement to the Problem: Alcohol Narcotics" pp. 22-25
- "Alcohol and Alcoholism" pp. 1 & 2
- "A Syllabus in Alcohol Education" pp. 60-68
- Basic Information on Alcohol, pp. 75-94
- "Booze a Youth Only"
- "The Physiology of Alcohol" (Reprint)
- "Teaching about Alcohol" pp. 53-61
- Alcohol Education for Classroom and Community, pp. 77-89
- "Alcohol and Alcoholism" pp. 19-22
- "A Syllabus in Alcohol Education" pp. 22-35
- Teaching About Alcohol, pp. 62-78

## Student

- Ditto: The
- Ditto: Bat
- Ditto: Fol
Other Materials

- Ditto: "The History of Alcohol"
- "Booze and You - For Teenagers Only"
- "Alcohol Today - A Workbook for Youth" pp. 15-26
- Ditto: "Alcohol, Fun or Folly"
- "Alcohol Today - A Workbook for Youth" pp. 15-26
- Ditto: Alcohol and the Major Organs of the Body

Student Materials

- Ditto: "Battles vs Bottles"
- "The History of Alcohol"
- "Battles vs Bottles"
- "Alcohol Today - A Workbook for Youth" pp. 15-26
- Ditto: Alcohol and the Major Organs of the Body
<table>
<thead>
<tr>
<th>Audio Visual</th>
<th>Motivating Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transparency:</td>
<td>How did alcohol find its beginning?</td>
</tr>
<tr>
<td>&quot;Ancient Procedures in Making Alcohol&quot; - A-8-1</td>
<td>How might alcohol have been handed down through history and finally adapted into our present society?</td>
</tr>
<tr>
<td>Poster:</td>
<td>Can you think of any way alcohol may have affected historical highlights?</td>
</tr>
<tr>
<td>&quot;Fun or Folly&quot;</td>
<td>In what way does the Bible mention alcohol?</td>
</tr>
<tr>
<td>Transparency:</td>
<td>Can food in the stomach affect absorption into the body?</td>
</tr>
<tr>
<td>&quot;The Path of Alcohol Through the Body&quot; A-8-2</td>
<td>How does alcohol reach all parts of the body?</td>
</tr>
<tr>
<td>Transparency:</td>
<td>How does the body get rid of alcohol?</td>
</tr>
<tr>
<td>&quot;The Brain&quot; A-8-3</td>
<td>Why is alcohol absorbed into the body quicker than food?</td>
</tr>
<tr>
<td>Posters:</td>
<td>Can we consider alcohol to be a drug, are the symptoms similar?</td>
</tr>
<tr>
<td>&quot;Fun or Folly&quot;</td>
<td>Why should the feeling of the individual at the time he drinks moderate drinking?</td>
</tr>
<tr>
<td>Filmstrip:</td>
<td>Why might it be foolish to count moderate drinking? Or is it?</td>
</tr>
<tr>
<td>&quot;Alcohol and Narcotics&quot;</td>
<td></td>
</tr>
</tbody>
</table>
Motivating Questions

How did alcohol find its beginning?

How might alcohol have been handed down through history and finally adapted into our present society?

Can you think of any way alcohol may have affected historical highlights?

In what way does the Bible mention alcohol?

Can food in the stomach affect the absorption into the body?

How does alcohol reach all parts of the body?

How does the body get rid of alcohol?

Why is alcohol absorbed into the body quicker than food?

Can we consider alcohol to be a narcotic or drug, are the symptoms similar?

Why should the feeling of the individual at the time he drinks affect his behavior?

Why might it be foolish to counsel moderate drinking? Or is it?

Activities

Point out how alcohol may have been first introduced into the human culture, and how it has survived the times.

Ask the students to list the things alcohol may have been used for.

A discussion of how alcohol made and affected history.

Discussion of how alcohol affected historical battles.

Through sketches and transparencies take the students on a journey. Trace a trip of alcohol through the different body systems, explaining their effect as you go.

Digestion

Circulation

Metabolism

Elimination

Discussion of how alcohol affects the brain and nervous system

1. Cortex and frontal lobes
2. Cerebrum
3. Cerebellum
4. Medulla Oblongata

As this discussion progresses, use the transparencies or make sketches
### Concepts

2. Liver  
3. Kidney  
4. Heart and circulatory system  
5. Stomach and intestines  
6. Reproductive organs

### D. Overall Health

1. Disease due to nutritional deficiency  
2. Loss of resistance to infection  
3. The hangover

<table>
<thead>
<tr>
<th>Concepts</th>
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</tr>
</thead>
<tbody>
<tr>
<td>2. Liver</td>
<td>Basic Information on Alcohol, pp. 88-93</td>
</tr>
<tr>
<td>3. Kidney</td>
<td>&quot;Alcohol and Alcoholism&quot; pp. 22-23</td>
</tr>
<tr>
<td>4. Heart and circulatory system</td>
<td>Teaching About Alcohol, pp. 75-76</td>
</tr>
<tr>
<td>5. Stomach and intestines</td>
<td></td>
</tr>
<tr>
<td>6. Reproductive organs</td>
<td></td>
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</tbody>
</table>
Teacher Materials

Basic Information on Alcohol, pp. 88-93

"Alcohol and Alcoholism" pp.22-23

Teaching About Alcohol, pp.75-78

Student Materials

Ditto:

Alcohol and Your Health
Besides the brain and nervous system what other organs of the body are affected by alcohol?

Point out first and other tissues affected

How is the kidney affected?

What is cirrhosis of the liver?

Is it possible that large amounts of alcohol might affect the reproductive organs?

Why do doctors advise their patients with ulcers to avoid drinking alcohol?

Can alcohol be considered a long-range health problem?

Discuss and list

Explain why:

a. Social or moderate drinkers frequently have to watch their weight
b. Alcoholics are frequently underweight and undernourished.

What is a hangover?
### Motivating Questions

Besides the brain and nervous system, what other organs of the body are affected by alcohol?

How is the kidney affected?

What is cirrhosis of the liver?

Is it possible that large amounts of alcohol might affect the reproductive organs?

Why do doctors advise their patients with ulcers to avoid drinking alcohol?

Can alcohol be considered a long-range health problem?

#### Explain why:

- Social or moderate drinkers frequently have to watch their weight.
- Alcoholics are frequently underweight and undernourished.

What is a hangover?

### Activities

Point out that while the brain is the first and probably the most affected, other parts of the body are also affected by alcohol in large quantities.

Discussion of alcohol and how it can affect your health.

Invite a public health nurse or doctor to explain the health hazards of drinking alcoholic beverage.
II. The compound Alcohol

A. Physical properties

1. Color - clear like water
2. Temperatures - freezing and boiling points
3. Mild and pleasant odor
4. Texture - cool and slippery on the skin
5. As a solvent
6. As a dehydrant

B. Chemistry

1. The hydroxyl group (OH)
2. The hydroxyl plus added carbons
3. Types
   a. Ethyl
   b. Methyl
   c. Isopropyl
   d. Butyl
   e. Ethyl glycerol
   f. Glycerol

Teacher Materials

- Alcohol Education for Classroom and Community, p. 70
- Encyclopedia: Alcohol - Its physical properties
- Teaching About Alcohol, p. 47
- Alcohol Education for Classroom and Community, pp. 69-76

Additional Resources

- "The Story of Industrial Alcohol"
- Encyclopedia: Alcohol - Chemistry
<table>
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<tr>
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<tbody>
<tr>
<td>Alcohol Education for Classroom and Community, p. 70</td>
<td>Ditto:</td>
</tr>
<tr>
<td>Encyclopedia: Alcohol - Its physical properties</td>
<td>The Physical Properties of Alcohol</td>
</tr>
<tr>
<td>Teaching About Alcohol, p. 47</td>
<td></td>
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<tr>
<td>Alcohol Education for Classroom and Community, pp. 69-76</td>
<td>Ditto:</td>
</tr>
<tr>
<td>&quot;The Story of Industrial Alcohol&quot;</td>
<td>The Chemistry of Alcohol</td>
</tr>
<tr>
<td>Encyclopedia: Alcohol - Chemistry</td>
<td></td>
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</tbody>
</table>
### Audio Visual Materials:
Ethyl alcohol, green plant leaves, raw meat, eggs (at least one for each class), Bunsen burners, beakers, thermometers, and stands for the beakers and Bunsen burners.

### Motivating Questions
- What are some of the properties of alcohol?
- How may some of these properties be of use to man?
- How might some of these properties be harmful?
- What is a solvent? A dehydrant?
- How might these properties affect the use of alcohol in industry in making other products?
- What is the hydroxyl group and do all alcohols have it?
- Of what three elements are all alcohols made up? What makes each alcohol different from the others?
- What are some of the other alcohols other than ethyl?
- Why shouldn't methyl alcohol be used as a beverage?

### Transparencies:
- "Hydroxyl group" A-8-5
- "Types of Alcohol" A-8-6 (series of six)
  1. Methyl
  2. Ethyl
  3. Ethylene Glycol
  4. Glycerol
  5. Propanal
  6. Isopropyl
Motivating Questions

What are some of the properties of alcohol?
How might some of these properties be of use to man?
How might some of these properties be harmful?
What is a solvent? A dehydrant?
How might these properties affect the use of alcohol in industry in making other products?

Activities

Have the students first become familiar with alcohol by touching, smelling, and examining it with their senses.

Experiment #1 - (see Teacher Information for procedure)

Use the results of the experiments with the raw meat, eggs, and plant leaves to emphasize some of the properties of alcohol which you cannot detect by just touching or looking at it.

Compare these results to the body's tissue and cells.
1. Dehydrating tissues
2. Dissolving
3. Reaction to Protein
4. Absorbant

A discussion of the elements carbon, hydrogen, and oxygen and how they are put together to form the different types of alcohols.

Explain the hydroxyl group.

Ask the students to research the reasons why most alcohol is not fit to drink.
III. The Production of alcohol

A. Fermentation

1. The breakdown of sugars and starches
   \( (C_6H_2O_6 + \text{yeast} \rightarrow 2C_2H_5OH + 2CO_2) \)

2. Raw materials
   a. Sugar
   b. Starch

3. Malting

4. Products of fermentation
   a. Wine
   b. Beer
   c. Foods (kraut, vinegar, sour milk, etc.)

B. Distillation

1. The concentration of wine and beer

2. Repeated distillation increases the percentage of alcohol

C. Destructive Distillation

1. Methyl - heat wood in the absence of air
2. Ethyl - \( (C_2H_4 + H_2O \rightarrow H_3PO_4 \rightarrow C_2H_3OH) \)
<table>
<thead>
<tr>
<th>Teacher Materials</th>
<th>Student Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Information of Alcohol, pp. 22-26</td>
<td>&quot;Alcohol Today - A Workbook for Youth&quot; pp. 9-14</td>
</tr>
<tr>
<td>Alcohol Education for Classroom and Community, pp. 69-76</td>
<td>&quot;Facts About Alcohol&quot; pp. 10-15</td>
</tr>
<tr>
<td>Teaching About Alcohol, pp. 46-52</td>
<td></td>
</tr>
<tr>
<td>&quot;The Story of Industrial Alcohol&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;Alcohol Today - A Workbook for Youth&quot; pp. 9-14</td>
<td></td>
</tr>
<tr>
<td>Encyclopedia: Fermentation</td>
<td></td>
</tr>
<tr>
<td>&quot;Alcohol Today - A Workbook for Youth&quot; pp. 9-14</td>
<td></td>
</tr>
<tr>
<td>&quot;Facts About Alcohol&quot; pp. 10-15</td>
<td></td>
</tr>
<tr>
<td>Ditto:</td>
<td>&quot;Useful Products of Distillation&quot;</td>
</tr>
</tbody>
</table>
Audio Visual

Materials:
Fruit juice, yeast, and a fermentation container (small stone or clay crock, if possible)
A bulletin showing the different products of fermentation.

Filmstrip:
"Alcohol and Narcotics"
#1719 "Alcohol and You" Part I w/record

Transparency:
"Chemical Equation for Fermentation" A-8-7

Motivating Question

What is the process of fermentation and what are the raw materials needed?

In what way may we use this process in making products other than alcohol?

Why does wine have a larger percentage of alcohol than beer?

Why can't we make a pure alcohol (100 percent) by using the process of fermentation?

How does the process of distillation make an alcoholic beverage with a higher percentage of alcohol?

Why is it almost impossible to distill a 100 percent alcohol?

What are some of the useful products of distillation?

From what are some of the common alcoholic spirits made?
Motivating Question

What is the process of fermentation and what are the raw materials needed?

In what way may we use this process in making products other than alcohol?

Why does wine have a larger percentage of alcohol than beer?

Why can't we make a pure alcohol (100 percent) by using the process of fermentation?

Activities

Discussion of the process of fermentation and malting.

Experiment #2 - (using the fruit juice and yeast to make a wine by fermentation.)

Let the students make their own bulletin on the different products of fermentation.

Discuss some of the useful products of fermentation, such as food.

How does the process of distillation make an alcoholic beverage with a higher percentage of alcohol?

Why is it almost impossible to distill a 100 percent alcohol?

What are some of the useful products of distillation?

From what are some of the common alcoholic spirits made?

Discuss and explain the process of distillation while setting up the distilling apparatus.

Experiment #3 - (the distillation of a diluted alcohol into a more concentrated solution.)

Have the students make a collection or bulletin on the many different kinds of alcoholic spirits, the students may take them from the magazines and advertisements.
3. The production of different whiskies.

IV. Alcohol Industry

A. Internal Use
1. Cooking
2. As a food by itself
3. As a beverage
   a. The consumers
   b. Annual cost of drinking

B. Medicinal
1. As an antiseptic
2. As sedatives and tranquilizers
3. Disinfectant (against infection)
4. For external application

C. Commercial
1. As a base for many cosmetic products
   a. Shaving lotion
   b. Hair tonic
   c. Perfumes
<table>
<thead>
<tr>
<th>Teacher Materials</th>
<th>Student Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching About Alcohol, p 51</td>
<td>Ditto:</td>
</tr>
<tr>
<td>&quot;Alcohol - Why the Fuss&quot; pp. 8-13</td>
<td>&quot;Is Alcohol a Food?&quot;</td>
</tr>
<tr>
<td>&quot;Alcohol and Alcoholism&quot; pp. 9-13</td>
<td>&quot;Alcohol - Why the Fuss&quot; pp. 8-13</td>
</tr>
<tr>
<td>Alcohol Education for the Classroom and Community, pp. 132-146</td>
<td></td>
</tr>
<tr>
<td>Basic Information of Alcohol, pp. 70-74</td>
<td>Ditto:</td>
</tr>
<tr>
<td>Encyclopedia: Alcohol in Medicine</td>
<td>&quot;Alcohol in Medicine&quot;</td>
</tr>
</tbody>
</table>

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### Audio Visual

Transparencies:

- "Four Tables Related to Consumption and Expenditures" A-8-9
  - a. Consumption of alcohol table from 1850 to 1962
  - b. Expenditures of alcohol as compared to food, tobacco, and recreation from 1936 to 1962
  - c. Federal, State and local revenues from alcoholic beverages from 1934 to 1962
  - d. Total absolute alcohol consumption in years 1850 to 1960

| Motivating Questions | Activ | Disc
|----------------------|------|------
| Would you consider alcohol to be a substitute for food, why? | Disc | Disc
| How may alcohol be used in medicine? | Disc | Dis
| Should a person suffering from a cold, snakebite, or shock be given alcohol? Why or why not? | Prep | Dur
| Is alcohol used in modern medicine anymore? | Ques | Ques
| Why is alcohol used in many cosmetics? | Ques | Ques
| Why do most all after-shave lotions contain a certain percentage of alcohol? | Ques | Ques
| Could we in our advanced society do without alcohol? | Disc | Disc

Bulletin of products containing alcohol
<table>
<thead>
<tr>
<th>Motivating Questions</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Would you consider alcohol to be a substitute for food, why?</td>
<td>Discuss the useful products of distillation</td>
</tr>
<tr>
<td>How may alcohol be used in medicine?</td>
<td>Discuss how alcohol can be used in foods to an advantage or disadvantage.</td>
</tr>
<tr>
<td>Should a person suffering from a cold, snakebite, or shock be given alcohol?</td>
<td>Prepare a questionnaire to hand out to the students to find out what percentage of the students' parents or guardians use alcohol.</td>
</tr>
<tr>
<td>Is alcohol used in modern medicine anymore?</td>
<td>Questionnaire: (See Teacher Information)</td>
</tr>
<tr>
<td>Why is alcohol used in many cosmetics?</td>
<td>Discussion of consumers (using the results of the questionnaire and added materials) and the cost of drinking.</td>
</tr>
<tr>
<td>Why do most all after-shave lotions contain a certain percentage of alcohol?</td>
<td>Have students prepare a bulletin on the ways in which alcohol is or can be used in medicine.</td>
</tr>
<tr>
<td>Could we in our advanced society do without alcohol?</td>
<td>Have the students make a survey on the articles in a drug store which contain alcohol.</td>
</tr>
<tr>
<td></td>
<td>Discuss how alcohol is used in medicine and explain why alcohol is used in many drugstore articles.</td>
</tr>
<tr>
<td></td>
<td>Make a survey of the cosmetics which contain alcohol (these may also be found in a drug store)</td>
</tr>
<tr>
<td></td>
<td>Discuss why and how alcohol is used in many of our cosmetics.</td>
</tr>
</tbody>
</table>
### ALCOHOL (continued)

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Teacher Material</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Industrial (manufactured from petroleum products)</td>
<td>&quot;The Story of Industrial Alcohol&quot;</td>
</tr>
<tr>
<td>a. Antifreeze</td>
<td>Encyclopedia: Alcohol in Industry</td>
</tr>
<tr>
<td>b. Varnish and paint</td>
<td></td>
</tr>
<tr>
<td>c. Plastic</td>
<td></td>
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<td>d. Dyes</td>
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<tr>
<td>e. Explosives</td>
<td></td>
</tr>
<tr>
<td>f. Cleaning solutions</td>
<td></td>
</tr>
<tr>
<td>D. Economy</td>
<td>Alcohol Education for the Classroom and Community, pp. 241-266</td>
</tr>
<tr>
<td>1. The size of the alcoholic beverage industry</td>
<td>Teaching About Alcohol, pp 79-94</td>
</tr>
<tr>
<td>2. Earning powers of the employees</td>
<td>&quot;Supplements to the Problem: Alcohol Narcotics,&quot; pp. 34</td>
</tr>
<tr>
<td>3. Advertising expenditures</td>
<td></td>
</tr>
<tr>
<td>4. Public revenues from the alcoholic beverage</td>
<td></td>
</tr>
<tr>
<td>V. Reasons for the use of alcoholic beverages in our society.</td>
<td>Basic Information on Alcohol, pp. 27-54</td>
</tr>
<tr>
<td>A. Family</td>
<td>&quot;Alcohol Today - A Workbook for Youth,&quot; pp. 35-40</td>
</tr>
<tr>
<td>1. For relaxation</td>
<td>Basic Handbook on Alcoholism, pp. 31-46</td>
</tr>
<tr>
<td>2. The feeling of satisfaction</td>
<td></td>
</tr>
<tr>
<td>3. Escape from reality</td>
<td></td>
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<tr>
<td>4. Dependence on the effects of alcohol</td>
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<tr>
<td>5. Independence</td>
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<td>6. Acquired habit</td>
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<td>7. Heredity</td>
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<tr>
<td>8. Taste and to relieve thirst</td>
<td></td>
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<tr>
<td>9. Social events</td>
<td></td>
</tr>
<tr>
<td>10. For religious purposes</td>
<td></td>
</tr>
<tr>
<td>Teacher Material</td>
<td>Student Material</td>
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<tr>
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</tr>
<tr>
<td>&quot;The Story of Industrial Alcohol&quot;</td>
<td>Ditto:</td>
</tr>
<tr>
<td>Encyclopedia: Alcohol in Industry</td>
<td>Alcohol and Industrial Products</td>
</tr>
<tr>
<td>Alcohol Education for the Classroom and Community, pp. 241-266</td>
<td>Ditto:</td>
</tr>
<tr>
<td>Teaching About Alcohol, pp 79-94</td>
<td>Economy and Alcohol</td>
</tr>
<tr>
<td>&quot;Supplements to the Problem: Alcohol - Narcotics,&quot; pp. 34</td>
<td>&quot;Alcohol Today - A Workbook for Youth,&quot; pp. 31-41</td>
</tr>
<tr>
<td>Basic Information on Alcohol, pp. 27-54</td>
<td>&quot;Alcohol Today - A Workbook for Youth,&quot; pp. 31-41</td>
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<tr>
<td>&quot;Alcohol Today - A Workbook for Youth,&quot; pp. 35-40</td>
<td>&quot;Alcohol: Fun or Folly&quot;</td>
</tr>
<tr>
<td>Basic Handbook on Alcoholism, pp. 31-46</td>
<td>Basic Handbook on Alcoholism, pp. 31-46</td>
</tr>
<tr>
<td>Audio Visual</td>
<td>Motivating Questions</td>
</tr>
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<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Transparencies:</td>
<td>Could we, in our advanced society, do without alcohol altogether?</td>
</tr>
<tr>
<td>&quot;Two Tables on Alcohol Beverage Industry&quot; A-8-10 A,B</td>
<td>What are some of the products we would have to do without if we never had the compound alcohol?</td>
</tr>
<tr>
<td>a. Selected expenditures of producers</td>
<td>Do you think the economy of our country is much affected by the alcohol industry?</td>
</tr>
<tr>
<td>b. Employment hours and earnings of production workers in the alcohol industry.</td>
<td>How does industry and alcohol affect you personally?</td>
</tr>
<tr>
<td>Transparencies:</td>
<td>Would or could a company be affected by the employment of a problem drinker of alcoholic?</td>
</tr>
<tr>
<td>&quot;Reasons For Drinking Alcohol&quot; Series of five - A-8-11A</td>
<td>How can crime from alcohol be considered an economical factor?</td>
</tr>
<tr>
<td>b. Relaxation</td>
<td>Most alcoholics or problem drinkers state they do not want to drink nor do they like the taste of liquor. Why then do they continue to drink?</td>
</tr>
<tr>
<td>c. Escape</td>
<td>Have they reasons they consider reasons for drinking alcohol.</td>
</tr>
<tr>
<td>d. Taste</td>
<td>For some people, drinking is a form of escape. How does form of escape differ from others such as: over eating, or watching TV, or movies several hours of the day?</td>
</tr>
<tr>
<td>e. Social events</td>
<td></td>
</tr>
<tr>
<td>f. Religion</td>
<td></td>
</tr>
<tr>
<td>Motivating Questions</td>
<td>Activities</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Could we, in our advanced society, do without alcohol altogether?</td>
<td>Discuss the important role alcohol has played in our lives as an industrial tool.</td>
</tr>
<tr>
<td>What are some of the products we would have to do without if we never had the compound alcohol?</td>
<td>Discuss the economical factor of alcohol and industry.</td>
</tr>
<tr>
<td>Do you think the economy of our country is much affected by the alcohol industry?</td>
<td></td>
</tr>
<tr>
<td>How does industry and alcohol affect you personally?</td>
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<td>Would or could a company be affected by the employment of a problem drinker of alcoholic?</td>
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<td>How can crime from alcohol be considered an economical factor?</td>
<td></td>
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<tr>
<td>Most alcoholics or problem drinkers state they do not want to drink nor do they like the taste of liquor. Why then do they continue to drink?</td>
<td>Have the students prepare a list of reasons, that they themselves or they have heard, why people drink. Discuss and evaluate these reasons.</td>
</tr>
<tr>
<td>For some people, drinking is a form of escape. How does form of escape differ from others such as: overeating, or watching TV, or movies several hours of the day?</td>
<td></td>
</tr>
<tr>
<td>Concepts</td>
<td>Teacher Materials</td>
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<td>-----------------------------------</td>
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<tr>
<td>B. Adolescence</td>
<td></td>
</tr>
<tr>
<td>1. Imitating adults</td>
<td>Teaching About Alcohol, pp. 7-17</td>
</tr>
<tr>
<td>2. Sociability</td>
<td>Alcohol Education for Classroom and Community, pp. 32-48</td>
</tr>
<tr>
<td>3. Popularity</td>
<td>Society, Culture, and Drinking Patterns, pp. 230-246</td>
</tr>
<tr>
<td>4. Unique risks of</td>
<td>Teenage Drinking, pp. 29-62</td>
</tr>
<tr>
<td>teenage drinking</td>
<td>&quot;Thinking About Drinking&quot;</td>
</tr>
<tr>
<td></td>
<td>&quot;How Teens Set the Stage for Alcoholism&quot;</td>
</tr>
<tr>
<td></td>
<td>&quot;The Use of Beverage Alcohol by Youth in an Abstinence Setting&quot;</td>
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<tr>
<td></td>
<td>Journal of School Health (Reprint)</td>
</tr>
<tr>
<td>Teacher Materials</td>
<td>Student Materials</td>
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<tr>
<td>Teaching About Alcohol, pp. 7-17</td>
<td>&quot;Booze and You: For Teenagers Only&quot;</td>
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<tr>
<td>Alcohol Education for Classroom and Community, pp. 32-48</td>
<td>&quot;Thinking About Drinking&quot;</td>
</tr>
<tr>
<td>Society, Culture, and Drinking Patterns, pp. 230-246</td>
<td>Ditto:</td>
</tr>
<tr>
<td>Teenage Drinking, pp. 29-62</td>
<td>&quot;Who's Responsible&quot;</td>
</tr>
<tr>
<td>&quot;Thinking About Drinking&quot;</td>
<td>Ditto:</td>
</tr>
<tr>
<td>&quot;How Teens Set the Stage for Alcoholism&quot;</td>
<td>&quot;The Unique Risk of Teenage Drinking&quot;</td>
</tr>
<tr>
<td>&quot;The Use of Beverage Alcohol by Youth in an Abstinence Setting&quot;</td>
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<tr>
<td>Audio Visual</td>
<td>Motivating Questions</td>
</tr>
<tr>
<td>------------------------</td>
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</tr>
<tr>
<td>Questionnaire:</td>
<td>Is the craving for liquor inherited?</td>
</tr>
<tr>
<td></td>
<td>Does it run in the family? Why?</td>
</tr>
<tr>
<td></td>
<td>How might alcohol be used in religion?</td>
</tr>
<tr>
<td></td>
<td>Do you think alcohol has a place in religion?</td>
</tr>
<tr>
<td></td>
<td>Drinking is a passive way of relieving tensions, what are some of the active ways?</td>
</tr>
<tr>
<td>Filmstrip:</td>
<td>How and why do most teenagers start drinking?</td>
</tr>
<tr>
<td></td>
<td>Why do teenagers believe it is necessary to drink to be popular?</td>
</tr>
<tr>
<td></td>
<td>Do you think adolescents should be introduced to alcohol by their parents?</td>
</tr>
<tr>
<td></td>
<td>Why might it be advisable to postpone drinking until the legal age?</td>
</tr>
<tr>
<td></td>
<td>What are some of the risks involved in teenage drinking?</td>
</tr>
<tr>
<td>Transparencies:</td>
<td>Do you feel that the adolescent should have the opportunity to decide whether or not he should drink, why?</td>
</tr>
<tr>
<td>&quot;Teenage Drinking&quot; A-8-12</td>
<td>Many athletes, especially Europeans drink regularly and moderately while maintaining sound training practices. Why?</td>
</tr>
<tr>
<td>Motivating Questions</td>
<td>Activities</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Is the craving for liquor inherited?</td>
<td>Have the students first circulate the questionnaire.</td>
</tr>
<tr>
<td>Does it run in the family? Why?</td>
<td>Discuss teenage drinking (the pamphlet &quot;Thinking About Drinking&quot; can be used as a good outline)</td>
</tr>
<tr>
<td>How might alcohol be used in religion?</td>
<td>Get back to the questionnaire as quickly as possible. The teacher (along with the students) should evaluate the questionnaire and try to formulate some conclusions from it.</td>
</tr>
<tr>
<td>Do you think alcohol has a place in religion?</td>
<td>Discuss the filmstrip.</td>
</tr>
<tr>
<td>Drinking is a passive way of relieving tensions, what are some of the active ways?</td>
<td>Ask the students to think of three persons they know well.</td>
</tr>
<tr>
<td>How and why do most teenagers start drinking?</td>
<td>FIRST PERSON - Drinks excessively</td>
</tr>
<tr>
<td>Why do teenagers believe it is necessary to drink to be popular?</td>
<td>SECON D PERSON - Drinks, but not excessively</td>
</tr>
<tr>
<td>Do you think adolescents should be introduced to alcohol by their parents?</td>
<td>THIRD PERSON - An abstainer</td>
</tr>
<tr>
<td>Why might it be advisable to postpone drinking until the legal age?</td>
<td>Have the students compare these individuals with each other, evaluate the</td>
</tr>
<tr>
<td>What are some of the risks involved in teenage drinking?</td>
<td></td>
</tr>
<tr>
<td>Do you feel that the adolescent should have the opportunity to decide whether or not he should drink, why?</td>
<td></td>
</tr>
<tr>
<td>Many athletes, especially Europeans drink regularly and moderately while maintaining sound training practices. Why?</td>
<td></td>
</tr>
</tbody>
</table>
C. Cultural Influence

1. Adult culture and their drinking habits
   a. Men
   b. Women

2. Cultural influence and the Adolescent

3. The Jewish culture and alcohol

4. Irish drinking patterns

5. Ethnic drinking in Russia


Alcohol Education for Classroom and Community, pp. 125-131
Teenage Drinking, pp 46-63, 102-113
"Drinking On the American Frontier" Reprint
Basic Handbook on Alcoholism, pp. 12, 13
Basic Information on Alcohol, pp. 54-63
Society, Culture, and Drinking Patterns, Dittman and Snyder, pp.154-225
Basic Handbook on Alcoholism, pp. 13-24
Teenage Drinking, pp. 83-102
<table>
<thead>
<tr>
<th>Teacher Materials</th>
<th>Student Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Education for Classroom and Community, pp. 125-131</td>
<td>Dittos:</td>
</tr>
<tr>
<td>Teenage Drinking, pp 46-63, 102-113</td>
<td>&quot;Culture and Alcohol&quot;</td>
</tr>
<tr>
<td>&quot;Drinking On the American Frontier&quot; Reprint</td>
<td>&quot;Our Influenced Youth&quot;</td>
</tr>
<tr>
<td>Basic Handbook on Alcoholism, pp. 12, 13</td>
<td>Dittos:</td>
</tr>
<tr>
<td>Basic Information on Alcohol, pp. 54-63</td>
<td>&quot;Other Cultures and Alcohol&quot;</td>
</tr>
<tr>
<td>Society, Culture, and Drinking Patterns, Dittman and Snyder, pp. 154-225</td>
<td>&quot;Why the Difference Between The Jewish and Irish Drinking Patterns&quot;</td>
</tr>
<tr>
<td>Basic Handbook on Alcoholism, pp. 13-24</td>
<td></td>
</tr>
<tr>
<td>Teenage Drinking, pp. 83-102</td>
<td></td>
</tr>
</tbody>
</table>
### Audio Visual

**Transparencies:**

"Different Cultural Aspects of Drinking" A-8-13

- a. Religious Aspect for Jewish
- b. Irish Pubs
- c. France - Wine at The Table

### Motivating Questions

- What is meant by culture?
- How has our culture affected our drinking habits and patterns?
- Why is the culture of the United States so confusing?
- Are we, the "young generation," the product of any one type of culture, or are we a mixture of several culturals?
- How do moral and ethnic beliefs affect our decisions of alcohol?
- Would you think different cultures provide for a wide variety of drinking habits?
- Why this extreme difference between the Jewish and Irish drinking patterns?
<table>
<thead>
<tr>
<th>Motivating Questions</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is meant by culture?</td>
<td>Discuss personal traits, ambitions, behavior, popularity, personality, appearance.</td>
</tr>
<tr>
<td>How has our culture affected our drinking habits and patterns?</td>
<td>Discuss the cultural trends and how they have affected the attitudes and ideas concerning the use of alcohol.</td>
</tr>
<tr>
<td>Why is the culture of the United States so confusing?</td>
<td>Give the students a good understanding of the term &quot;culture.&quot;</td>
</tr>
<tr>
<td>Are we, the &quot;young generation,&quot; the product of any one type of culture, or are we a mixture of several culturals?</td>
<td>Discuss some of the better countries and their cultures and drinking patterns.</td>
</tr>
<tr>
<td>How do moral and ethnic beliefs affect our decisions of alcohol?</td>
<td>Have the students do some research on the Jewish and Irish cultures and see if they can come up with some conclusions of their own.</td>
</tr>
<tr>
<td>Would you think different cultures provide for a wide variety of drinking habits?</td>
<td></td>
</tr>
<tr>
<td>Why this extreme difference between the Jewish and Irish drinking patterns?</td>
<td></td>
</tr>
</tbody>
</table>
VI. TEACHER INFORMATION

HISTORICAL HIGHLIGHTS

Drinking (only beer and wine up to 1200 A.D., for there were no distilled spirits definitely mentioned in history as one of the factors in many well known events.

a. The captivity of Israel
b. The captivity of Judah
c. The death of Alexander the Great
d. The fall of Rome
e. The Battle of Hastings
f. The Battle of Trenton
g. The Battle of Waterloo
h. The First World War
i. The fall of France
j. The fall of Pearl Harbor

FIRST Period: Punitive (1607-1774)

Early settlers brought with them from Europe the idea that because "drink" results from juices of fruits and grains, it was to be considered "a good gift from God". So for his condition, and punished for drinking "too much." To discourage the drinker, the first brewery was built (near Boston in 1634), to provide beer in quantity and to discourage drunkenness. The settlers could see the effects upon the Indians but not upon those of the English; so they punished the Indians for being drunk; then they forbade selling to Indians; but still they punished.

SECOND Period: Exortive (1774-1874)

Pulpit and platform joined in exhorting the drinkers to stop drinking: written pamphlets and organizations were formed. The meaning of the word "temperance" gradually changed to "total abstinence." Blame for drunkenness shifted from the drinker to the seller, by putting restrictions of sales, and by requiring licenses. Through referendums, citizens from opportunities to drink was obtained, first in towns, then in counties.

THIRD Period: Informative (1874-1920)

Teaching of factual information about the effect of alcohol, based on professions, findings and studies of past 100 years, came to be required by law in the schools.
VI. TEACHER INFORMATION

up to 1200 A.D., for there were no distilled spirits before that time) is as one of the factors in many well known events. A few of these were:


er the Great


So the drinker was blamed for drinking "too much." To discourage the drinking of "spirits" the people of the United States, through referendums, legal protection of the sale of alcoholic beverages to minors was obtained, first in towns, then in counties, and finally in states.

1874-1920

on about the effect of alcohol, based on professional observation, laboratory work, and by requiring licenses. Through referendums, legal protection of the sale of alcoholic beverages to minors was obtained, first in towns, then in counties, and finally in states.

1874-1920
FOURTH Period: Ethical (1920-1933)

With legislation protecting the citizens of the nation from the product of the industry, emphasized the relation of citizenship to law enforcement, but omitted teaching

FIFTH Period: Pedagogical Instruction (1933-1962)

The beginning of a program for classroom teaching of the effects of alcohol and other alcoholic beverages on people and making that information available to young people is receiving more attention than was formerly the case and certain national organizations are beginning to note the cost of drinking as it affects insurance rates in America and interest in the accident cost. Although social drinking seems to be on the increase, indications that people are slowly but surely beginning to learn that drinking is receiving more emphasis on getting information on the effects of alcohol and other alcoholic beverages on people and making that information available to young people is receiving more attention than was formerly the case and certain national organizations are beginning to note the cost of drinking as it affects insurance rates in America and interest in the accident cost. Although social drinking seems to be on the increase, indications that people are slowly but surely beginning to learn that drinking...

ALCOHOL IN THE BODY

The human body must process most substance that enters it by any route. Useful substances are transformed into heat and energy or built into living tissues needed for growth. In a useful form or else eliminated as a waste product. Alcohol is one of the simplest and is easily absorbed and used by the cells. Alcohol is one of the simplest and is easily absorbed and used by the cells. Alcohol is one of the simplest and is easily absorbed and used by the cells.
the citizens of the nation from the product of the liquor traffic, education citizenship to law enforcement, but omitted teaching what alcohol is.

(1933-1962)

For classroom teaching of the effects of alcohol and other narcotics, pedagogic-accurate, and administratively sound, to become a part of all teacher-training program including all phases to be taught by correlation with the others, from primary grades to the college level.

There has been increased emphasis on getting information about the effects of making that information available to young people and adults. The alcoholic man was formerly the case and certain national organizations are vigorously alcohol education in our schools and churches, insurance companies are also drinking as it affects insurance rates in America and industry is keenly inter-

Although social drinking seems to be on the increase as of today, there are many slowly but surely beginning to learn that drinking is hazardous. In 1960, nearly motor-vehicle accidents involved a drinking driver.

All substance that enters it by any route. Useful ingredients are either energy or built into living tissues needed for growth and repair. That which is immersed in powerful chemical baths as it is tossed about by the alimentary canal. Most foods, as a result of immersion in these chemicals, and in the digestive juices, are reduced to forms simple enough in molecular and bed and used by the cells. Alcohol is one of the few foods that is already fuel almost immediately after swallowing. Alcohol is an excellent source of energy, yielding more calories per gram than do sweets, starches, and proteins,
Not only does alcohol supply a good number of calories, but it supplies them very quickly. The rapid absorption may cause intoxication, and the quality of alcohol has drawbacks. To a large degree, this accounts for many of alcohol's adverse effects when used excessively, unwise.

To understand why alcohol can be a relatively harmless comfort when managed wisely and unwise, one needs to understand how the body uses and disposes of it. As long as it is not absorbed, its effects cannot be felt, nor can it be used for fuel. But since alcohol is oxidized, it begins almost at once to circulate throughout the body via the bloodstream, the small intestines.

The way in which alcohol is disposed of, (metabolism) consists of four phases:

a. Absorption, in which alcohol travels in the blood to each organ, tissue, and gland. It leaves the bloodstream and enters the cells, by the cells instead of calories released from any other food. Metabolized chiefly in the cells of the liver.

b. Distribution, in which the liver, at a fixed speed, remodels the chemical structure of alcohol and energy. The heat and energy, or calories, resulting from its metabolism, are fuel.

c. Oxidation, in which the liver, at a fixed speed, remodels the chemical structure of alcohol and energy. The heat and energy, or calories, resulting from its metabolism, are fuel.

d. Elimination, during which a small quantity (2 to 10 per cent) of the alcohol or urine.

THE GENERAL EFFECTS OF ALCOHOL ON THE BODY

BRAIN - Impaired efficiency is the basic effect of any amount of alcohol on the brain in the central nervous system. Even low concentrations dull the highest levels of thought. This is in no sense a true stimulant; on the contrary, it is a depressant. Actually, all in low dosage lead to excited and even exuberant behavior because they slow down the specialized part of the brain, the cortex. With increased amounts the depressant effect is overshadowed.

a. Judgement and inhibitions
b. Concentration and memory
c. Sense organs
d. Muscular control
e. Vital body functions
number of calories, but it supplies them very quickly. The instant-energy
"rapid absorption may cause intoxication, and the absence of vitamins,
undesirable nutrient. To a large degree, this ready-in-a-minute quality
be effects when used excessively, unwisely, or as a substitute for food.
relatively harmless comfort when managed wisely and a curse when managed
the body uses and disposes of it. As long as it remains inside the digest-
, nor can it be used for fuel. But since alcohol is ready for use when swallow-
culate throughout the body via the bloodstream, the remainder is absorbed from
of, (metabolism) consists of four phases:
ence in the stomach or small intestine, where alcohol enters the bloodstream at a
rate.
all travels in the blood to each organ, tissue, and cell. By simple diffusion
the bloodstream and enters the cells.
ver, at a fixed speed, remodels the chemical structure of alcohol to release heat
the heat and energy, or calories, resulting from the oxidation of alcohol are used
stead of calories released from any other food. Whereas most foods may be
small quantity (2 to 10 per cent) of the alcohol escapes unused via the breath
the body
basic effect of any amount of alcohol on the brain and on its related structures
low concentrations dull the highest levels of the brain functions. Alcohol
the contrary, it is a depressant. Actually, all narcotics, including alcohol,
an exuberant behavior because they slow down the activities of the most highly
ortex. With increased amounts the distracting action becomes more obvious.
LIVER - During severe intoxication, the liver often becomes swollen and inflamed, swelling and inflammation subside and the liver tissue appears normal. Individuals impair their health because the liver functions may be disturbed most of the time disturbance is not completely known. A serious disorder, (cirrhosis,) is characterized by hardening and fatty degeneration of the liver tissue.

KIDNEYS - In the concentration in which it occurs in the body, alcohol has no direct effect on the kidneys. The frequent urination so common after drinking is the result of antidiuretic secretion of the pituitary gland. Alcohol causes a decrease in this secretion; in other words, alcohol is a diuretic. Following the consumption of alcohol there is some disturbance in the balance of the mineral elements in the blood. If there is an increase in the amount of lactic acid in the blood and subsequently a condition which may lead to illness.

HEART AND CIRCULATION - After two and three drinks the pulse rate, blood pressure of the body usually increase about 5 per cent. In the case of persons with impaired liver function, beneficial effects, but in the judgement of many cardiac specialists, moderate drinking may be harmful.

STOMACH AND INTESTINES - In large quantities consumed by those who drink excessively, irritation of the stomach is bad that chronic gastritis results. Persons with ulcers are usual victims. Too much acid in the stomach irritates the ulcers, thereby causing pain and distress. In quantities sufficient to produce drunkenness, alcohol causes a virtual cessation of absorption, and the passage of food from the stomach to the intestines is usually slow and inefficient, which adds to the problems of the chronic alcoholic. Digestion is usually slow and inefficient, which adds to a condition which may lead to illness.

WATER BALANCE - Excessive drinking may alter the water balance between the inside and outside of the body. That portion of the water that is normally retained inside may shift to the outside of the body.

DISEASE - In itself alcohol is not a pathogenic, or disease-causing agent. But it is possible to improve the basic rules of health, especially diet, so that they are susceptible to disease as easily as other people. Indirectly, alcohol may also aggravate or arouse some health problems.
In a normal state, the liver often becomes swollen and inflamed, and when sobriety returns the side and the liver tissue appears normal. Individuals who are chronically intoxicated the liver functions may be disturbed most of the time. The exact nature of this known. A serious disorder, (cirrhosis,) is characterized by a permanent shrinking of the liver tissue.

When in which it occurs in the body, alcohol has no direct action, harmful or helpful. Urination so common after drinking is the result of the action of alcohol on the pituitary gland. Alcohol causes a decrease in this secretion and hence an increase alcohol is a diuretic. Following the consumption of large amounts of alcohol, the balance of the mineral elements in the blood. For example, under intoxication, amount of lactic acid in the blood and subsequently decline in the alkalinity level, illness.

Two and three drinks the pulse rate, blood pressure, and total flow of blood through a about 5 per cent. In the case of persons with impaired hearts, alcohol has no the judgment of many cardiac specialists, moderate drinking probably will not harm them.

Large quantities consumed by those who drink excessively, the stomach lining may be of gastritis results. Persons with ulcers are usually advised to abstain from all the stomach irritates the ulcers, thereby causing pain and retarding the healing to produce drunkenness, alcohol causes a virtual stoppage of digestion. The shed and the passage of food from the stomach to the small intestines is delayed. In action is usually slow and inefficient, which adds to his usual state of malnutrition. Inking may alter the water balance between the inside and the outside of body cells so normally retained inside them may shift to the outside.

is not a pathogenic, or disease-causing agent. But heavy drinkers are apt to neglect specially diet, so that they are susceptible to disease and may not be able to recover. Indirectly, alcohol may also aggravate or arouse some pre-existing disorders.
PHYSICAL PROPERTIES OF ALCOHOL

Absolute alcohol is a colorless mobile liquid with a slightly higher viscosity than water. It can act as a weak base or as a weak acid. It burns in air with a blue non-luminescent flame. It is hygroscopic (ability to retain or absorb water) and miscible with water in all proportions. Its freezing point is -114 degrees C and its boiling point is 78.3 degrees C. The freezing point may vary depending on the molecular weight of the alcohol.

The freezing point is a general figure as it may depend on the molecular weight of the alcohol, which has a considerable range of variation with each type of beverage.

TYPES OF ALCOHOL

ETHYL -- C₂H₅OH  Used in beverages, as a reagent in the manufacture of acetone.

ISOPROPYL -- C₃H₇OH  Used as a solvent, anti-freeze.

BUTYL -- C₄H₉OH  Used as a solvent and for the manufacture of acetone.

METHYL -- CH₃OH  (Wood Alcohol) Used as a solvent and for the production of formaldehyde.

PENTANOL 1 -- CH₃-(CH₂)₃-CH₂OH  Used as a solvent for lacquer and paints.

GLYCEROL -- CH₂OH-CH₂OH-CH₂OH  Used as a brake fluid, anti-freeze, and explosives.
e liquid with a slightly higher viscosity but lower surface tension. It
acid. It burns in air with a blue non-luminous flame. Absolute alcohol is
or water) and miscible with water in all proportions. It has a low freezing
g point is 78.3 degrees C. The freezing and boiling temperatures must
may depend on the molecular weight of the hydrocarbons and the spirit
range of variation with each type of beverage.

... ... ... Used in beverages, as a reagent, solvent, and is helpful in making
products such as: shellac, lacquers, plastics, and explosives.

... ... ... Used as a solvent, anti-freeze, rubbing alcohol, and is used to
manufacture acetone.

... ... ... Used as a solvent and for the manufacturing of plastics and
explosives.

... ... ... (Wood Alcohol) Used as a solvent, anti-freeze, disinfectant, and in
the manufacturing of formaldahyde and synthetic resins.

... ... ... Used as a solvent for lacquer.

... ... ... Used as a brake fluid, anti-freeze, and to manufacture medicines
and explosives.
THE PRODUCTION OF ALCOHOL

NATURAL FERMENTATION - Suspended in solution in all fruit juices is a form of sugar. Its chemical formula is C₆H₁₂O₆. Also present in all such juices that have been boiled, are certain minute single-celled living organisms called yeasts. One of these is the yeast plant. It can be deliberately added, but that is unnecessary. If the vat is not chilled or boiled, but kept at moderate temperatures, these ferment and attack the glucose as a food. Yeast secretes a chemical glucose into two forms. One is alcohol with the chemical formula of C₂H₅OH mixes with water and remains in solution in the wine. The other is carbon dioxide which bubbles through the vat or in the scum that forms on top. In the end, natural fermentation yields from 4 to 15 percent of alcohol in the wine.

BREWING - Beer is derived from starchy grains or vegetables, and the process of brewing involves grinding up wheat, rye, rice, potatoes, or any such starchy substance to make a mash, but the most common beer is made from barley, with hops added to give it a bitter flavor. The germination of the seed produces the enzyme that changes the starch into sugar. The barley is steeped in warm water and allowed to sprout and grow into a tangled mass. They are then pulverized. This malt is mixed into the mash and the vat is kept at a warm temperature until the grains have sprouted and grown into a tangled mass. Yeast is added, and fermentation begins and proceeds very much as in the case of wine. This method of fermentation yields from 4 to 15 percent of alcohol in the vat. Common usage applies for brewing purposes and which contains the highest percentage of alcohol.

DISTILLATION - Distilling is a procedure for the separation of substances. Alcohol boils at 173 degrees F., while water does not boil until 212 degrees F. Alcohol is separated from water rise off in a vapor above the heated wort and is conducted through a condenser. This method is employed for the production of liquors with a higher alcohol content than naturally fermented liquors. When applied to wines, it produces brandy, and it is used to produce whiskies. Whiskies are made by the distillation of any kind of fermented mash from 40 to 55 percent alcohol.
In all fruit juices is a form of sugar known as glucose, or fruit sugar, \( C_{6}H_{12}O_{6} \). It is also present in all such juices that stand open to the air, unless certain minute single-celled living organisms called ferments are present. It can be deliberately added, but that is unnecessary for fruits. So long as the fruit is kept at moderate temperatures, these ferments will make very rapid growth by converting the glucose as a food. Yeast secretes a chemical enzyme capable of breaking down the sugar to alcohol with the chemical formula of \( C_{2}H_{5}OH \), a colorless liquid that readily forms in solution in the wine. The other is carbon dioxide gas, \( CO_{2} \), which appears in tiny bubbles in the scum that forms on top. In the end, natural fermentation will produce about 16% alcohol in the wine.

From starchy grains or vegetables, and the process is somewhat more elaborate. Corn, or any such starchy substance may be ground up and mixed with water to provide the wort. It is made from barley, with hops added to give it a bitter flavor. The discovery, that to sprout and is mashed up in water it will ferment, must have been a very ancient one. The seed produces the enzyme that changes the starch to sugar. Barley is used most, alighting. The barley is steeped in warm water and spread out on a floor in a warm room to sprout and grow into a tangled mass. They then are dried out in an oven and mixed into the mash and the vat is kept at a warm temperature. Yeast is then added and cells very much as in the case of wine. This method is called brewing, and it will produce alcohol in the vat. Common usage applies the term beer to brewed liquors that age of alcohol, and that which contains the higher percentage is called ale.

A procedure for the separation of substances that have different boiling points is distillation. As F., while water does not boil until 212 degrees F., the alcohol and some of the water is boiled out in the heated vat and are conducted through a cooling condenser called a still. The production of liquors with a higher alcohol percentage than is found in wines is done by the distillation of any kind of fermented grain, and they commonly contain more alcohol.
CONSUMER RATE AND EXPENDITURES

One way to measure the amount of alcohol consumed is to divide the total population figure over by the number of gallons of all alcoholic beverages sold, thus calculating the per capita rate of these beverages. But because there are such side differences in the amount of alcohol, such figures measure the quantity of liquids containing alcohol rather than the amount consumed. For the purpose of these statistics, the actual or absolute alcohol content in wine and beer is figured at an average of 45 per cent and 17 per cent, and 4.5 per cent, respectively. The amount of absolute alcohol consumed per capita in beer has exceeded that in distilled spirits. Americans drink very little wine. During 1961 the amount of absolute alcohol was 2.06 gallons for the entire population 15 years of age or over. It was contained in distilled liquor, 0.23 in wines, and 0.97 in beer. This alcohol was 1.36 gallons of wine, and 21.47 gallons of beer per capita, respectively. Americans spent almost 10 billion dollars for alcoholic beverages in 1960, an increase of 42 per cent over 1950. By this measure they spent in 1960 about 20 per cent more for liquor than at the beginning of the decade. Comparatively speaking, this is in line with the general inflationary nature of the time during the period. For example, in the same ten years the overall personal consumption of food was increased from 194 billion to 328 billion. In 1950 Americans spent 51 billion dollars for food; in 1960 more, or 70 billion.

From these limited sources we might characterize the average American adult drinker as consuming about 2 gallons of absolute alcohol contained in approximately 25 gallons of alcoholic beverages.

THE ALCOHOLIC BEVERAGE INDUSTRY AND THE ECONOMY

SIZE - By any of the standard economic measures, the alcoholic beverage industry is one of the American economy. It contributes very little to total manufacturing employment, more than one half of one per cent of the economy. In terms of "value added by manufacture" (meaning the value of products as they leave a plant, minus the cost of raw materials,) the industry accounts for little more than 1 per cent of the economy. On the other hand, the industry accounts for almost 4 per cent of total consumer expenditures.

The largest companies in this industry are far smaller than the largest firms in the manufacturing industries, measured by shipments. In 1958 the big four distillers provided only 15 per cent of total employment provided by the largest four firms in the motor vehicle industry. On the other hand, the industry had a per cent figure of 159 per cent.
Alcohol consumed is to divide the total population fifteen years of age or over by the total quantity of alcoholic beverages sold, thus calculating the per capita consumption. Here are such side differences in the amount of alcohol in each type of alcoholic beverage. The actual or absolute alcohol content in distilled spirits, wines, and beer is 45 per cent and 17 per cent, and 4.5 per cent, respectively. Since 1955, the annual per capita consumption of alcohol has exceeded that of distilled spirits. Compared with distilled spirits, Americans drink very little wine. During 1961, the per capita consumption of beer was about 15 years of age or over. Of this, 0.86 gallon of wine, 0.23 in wines, and 0.97 in beer. This alcohol was consumed in 1.9 gallons of wine, and 21.47 gallons of beer per capita, respectively.

Dollars for alcoholic beverages in 1960, an increase of about 2 billion over 1960 about 20 per cent more for liquor than at the start of the previous year. In line with the general inflationary nature of the national economy in the same ten years the overall personal consumption expenditures rose from 50 per cent. Americans spent $51 billion dollars for food; in 1960 they spent 21 per cent more for food than at the start of the previous year.

The average adult drinker is one who annually consumes alcohol in approximately 25 gallons of alcoholic beverages.

THE ECONOMY

Economic measures, the alcoholic beverage industry is one of the smaller segments of the economy. It represents somewhat of the economy. In terms of "value added by manufacturing" (a technical term that includes the cost of raw materials), the manufacturing industry is 10 per cent of the economy. On the other hand, the industry's products contribute very little to total manufacturing employment; it represents somewhat of the economy.

The four largest firms in the motor vehicle industry. In 1958 the big four distillers provided only 3 per cent of the market for the motor vehicle industry. On the other hand, their employment is a small proportion of the industry.
TEACHER INFORMATION (continued)

EMPLOYMENT - Hourly earnings in the distilled spirits sector of the industry were several than those in all manufacturing in 1961, and 12 per cent above those in food and kindred in the beer segment fared substantially better, with weekly earnings and hourly earning per cent above those in distilled spirits and even more above those in manufacturing generalities of table 22, employment, hours and earnings).

ADVERTISING - Despite self-regulation and regulation by all levels of government, advertise expenditures have increased greatly in all sectors of the industry. However, per capita essentially unchanged between 1950 and 1962. It would appear, therefore, that advertise if anything, to stimulate the consumption of alcoholic beverages. In fact, in relation to table 25, advertising expenditures of alcoholic beverages).

TAXATION - The Federal receipts reported here stem from excises, import duties, and rel not include the revenue sources common to all industry, such as corporate income taxes, and social security taxes. Of the 3.3 billion dollars collected by specific taxation of at the Federal level in 1962, 73 percent was derived from taxation of spirits, 24 percent and 3 percent from taxes on wine. Federal receipts accounted for 72 percent of the 4.9 at all levels of government through such taxation. Revenues from alcoholic beverages pr all Federal excise collections and 4 per cent of all Federal tax revenues in 1962. (see 26, public revenues from alcoholic beverages: Federal, state, and local governments.)

An interesting sleight to this revenue story is that Mississippi, in which the sale of has been declared illegal, derived 9.4 million dollars in 1962 from alcoholic beverage fees, including a special sales tax on illegal liquor.

REASONS FOR DRINKING

1. Relaxation
2. Satisfaction
3. Escape
4. Dependence
5. Independence
6. Habit
7. Thirst
8. Social events
9. Religion
the distilled spirits sector of the industry were several percentages higher in 1961, and 12 per cent above those in food and kindred industries. Workers substantially better, with weekly earnings and hourly earnings approximately 25 per cent above those in manufacturing generally. (see transparent, hours and earnings).

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In fact, in relation (see transparency of scores of alcoholic beverages). The reported here stem from excises, import duties, and related items. They do not common to all industry, such as corporate income taxes, capital gains taxes. The 3.3 billion dollars collected by specific taxation of alcoholic beverages 73 percent was derived from taxation of spirits, 24 percent from taxation of beer. Federal receipts accounted for 72 percent of the 4.9 billion dollars collected through such taxation. Revenues from alcoholic beverages provided 34 percent of and 4 per cent of all Federal tax revenues in 1962. (see transparency of table of alcoholic beverages: Federal, state, and local governments.)

Ms revenue story is that Mississippi, in which the sale of alcoholic beverages lived 9.4 million dollars in 1962 from alcoholic beverage licenses and excise tax on illegal liquor.
ADOLESCENTS AND ALCOHOL

The young, as well as those not so young, learn more readily from precept than con and often imitate. During childhood the chief pattern or picture a youngster gets his home. As an adolescent, he adds other sources of example: His age-mates and community and group practices, and what the advertisements say. Within this galaxy he reaches adulthood - which in our society occurs about the same time as high school - every youth already has decided either not to use alcohol or to use it. This is really a matter of determination, and only a few might prefer that the decision to drink or not be postponed until legal age. Then being eighteen or twenty-one: young people know this, and many do not wait.

TEENAGERS IMITATE ADULTS

a. Drinking at home
b. Sociability
c. Popularity
d. Influence of advertising

THE UNIQUE RISKS OF TEENAGE DRINKING - Any person, young or old, who takes even one drink is at risk. In addition, there are six risks or dangers that a teenager is uniquely subject to.

a. Adolescents are affected more quickly and more severely by alcohol than adults.
b. Adolescents are more susceptible to psychological intoxication than adults.
c. Adolescents need to learn wholesome ways to meet personal problems, not through hiding or masking them.
d. Adolescents are more likely than adults to become ill from drinking a given amount of alcohol.
e. Inexperienced drivers and inexperienced drinkers are a dangerous combination.
f. Calories derived from alcohol rather than from the usual foods do not supply the necessary nutrients needed during growth period of adolescence, this may adversely affect health.
so young, learn more readily from precept than concept. We observe, judge, and what the advertisements say. Within this galaxy of influences, by the time our society occurs about the same time as high school graduation — practically.

either not to use alcohol or to use it. This is reality, although many adults to drink or not be postponed until legal age. There is nothing magical about young people know this, and many do not wait.

Any person, young or old, who takes even one drink incurs some element of six risks or dangers that a teenager is uniquely susceptible to if he drinks:

- more quickly and more severely by alcohol than adults.
- susceptible to psychological intoxication than adults.
- earn wholesome ways to meet personal problems, not develop habits them.
- likely than adults to become ill from drinking a given amount of alcohol.
- and inexperienced drinkers are a dangerous combination.
- alcohol rather than from the usual foods do not supply the proper nutrition, period of adolescence, this may adversely affect health.
In relation to alcohol, our cultural and social complexities have had the following effects:

1. Social complexity has practically eliminated three functions of alcohol that were important in primitive society, namely, food value, medicinal value, and the ability to depress certain inhibitions, anxieties, aggressions, and allow relaxation.

2. That alcohol can depress certain inhibitions, anxieties, aggressions, and allow relaxation, is being readily discovered.

3. Compared with simpler societies, the weight of the anxieties of most individuals in our society is greater, thus the depressant action of alcohol becomes more significant.

4. The very nature of the specialized process has created a network of roles, such as those of wealth, social position, and so on, which revolve around the business of society into existence a set of factors not present in the simpler society.

5. The complexity of society increases the need for sharp discrimination in making social choices, timing, cooperation, and the acceptance of responsibilities. Excessive drinking can deteriorate all of these.

6. The drinking of alcohol and its effects are not present in only one instance of behavior but infiltrated throughout, thus the control of drinking in our society is therefore a more difficult problem than in the simpler societies.

7. The excessive use of alcohol can more rapidly and thoroughly destroy the complex society because of the more formidable task in integrating the values and ideas in a satisfying way. The control of drinking behavior in this society is therefore a more difficult problem.
our cultural and social complexities have had the following effects:

- It has practically eliminated three functions of alcohol which were of minor primitive society, namely, food value, medicinal value, and religious value.
- It can depress certain inhibitions, anxieties, aggressions, and tensions thus to on, is being readily discovered.
- In simpler societies, the weight of the anxieties of most individuals have increased, assant action of alcohol becomes more significant.
- The specialized process has created a network of relationships, activities, position, and so on, which revolve around the business of alcohol, thus bringing a set of factors not present in the simpler society.
- Of society increases the need for sharp discrimination, caution, accurate ling, cooperation, and the acceptance of responsibilities. Alcohol, taken an deteriorate all of these.
- Of alcohol and its effects are not present in only one institution or pattern it infiltrated throughout, thus the control of drinking behavior in the complex therefore a more difficult problem than in the simpler society.
- Use of alcohol can more rapidly and thoroughly destroy participation in a y because of the more formidable task in integrating the individual to groups a satisfying way. The control of drinking behavior in the complex society is more difficult problem.
EXPERIMENTS

Experiment 1 - Compare two beakers (one containing alcohol and the other containing water) and look at their texture, color, smell, taste, and overall characteristics.

Experiment 2 - To test the action of alcohol on different organic materials, find a sample of raw meat in a solution of alcohol and watch the results of dehydration. Place a green leaf in another beaker of alcohol and notice how the chlorophyll bleaches into the solution. Place a small portion of raw egg white in alcohol and watch the results. The egg white represents the liver's ability to metabolize alcohol and look at each cell of your body.

Experiment 3 - Into a vessel (should not be of any metal) place one cup of fruit juice (it is not an imitation juice,) if sugar has already been added, add a pinch of yeast, (you do not need more than a pinch,) Watch the results and explain the results to the students.

QUESTIONNAIRE

When beginning the discussion of adolescent drinking, prepare a questionnaire consisting of the following:

1. Have you ever taken alcohol in the form of a beverage?
2. If so, when?
3. Have you taken alcohol in the past week?
4. Do you consider yourself a regular user of alcohol?
5. Why did you take your first drink of alcohol?
6. Who introduced you to alcoholic drink (parents, friends, or did you try to imitate adults)?
7. Have you ever been intoxicated to the point of staggering?
8. Do you like the taste of liquor?

The instructor may add or subtract from this questionnaire as he (or she) chooses. Collect the questionnaires and have them drawn into on the board to show the results. These results can be collected with the rest of the class and have them draw some conclusions from it.
TEACHER INFORMATION (continued)

EXPERIMENTS

are two beakers (one containing alcohol and the other containing water,) compare their texture, color, smell, taste, and overall characteristics.

Test the action of alcohol on different organic materials, first place a piece of meat in a solution of alcohol and watch the results of dehydration. Place a leaf in another beaker of alcohol and notice how the chlorophyll absorbed to the solution. Place a small portion of raw egg white in another beaker of alcohol and watch the results. The egg white represents the liquid protein in a cell of your body.

Place a vessel (should not be of any metal) place one cup of fruit juice, (make sure it is not an imitation juice,) if sugar has already been added, mix into this juice some st, (you do not need more than a pinch,) Watch the results after a few days and bring the results to the students.

QUESTIONNAIRE

discussion of adolescent drinking, prepare a questionnaire containing these questions:

ever taken alcohol in the form of a beverage?

en?

taken alcohol in the past week?

ssider yourself a regular user of alcohol?

ou take your first drink of alcohol?

uced you to alcoholic drink (parents, friends, or did you take it by yourself?)

ever been intoxicated to the point of staggering?

ke the taste of liquor?

Add or subtract from this questionnaire as he (or she) chooses. Evaluate the data test of the class and have them draw some conclusions from it.
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>absorb</td>
<td>to take in and incorporate into the cells</td>
</tr>
<tr>
<td>abstention</td>
<td>a doing without</td>
</tr>
<tr>
<td>alcoholic content</td>
<td>the amount of alcohol in a given substance</td>
</tr>
<tr>
<td>alcoholism</td>
<td>a diseased condition caused by habitually drinking too much alcohol</td>
</tr>
<tr>
<td>amnesia</td>
<td>partial or total loss of memory</td>
</tr>
<tr>
<td>anesthetic</td>
<td>a drug, gas, etc., that produces a partial or total loss of the sense or touch</td>
</tr>
<tr>
<td>antiseptic</td>
<td>free from infection; stopping the action of microorganisms</td>
</tr>
<tr>
<td>blood pressure</td>
<td>the pressure exerted by the blood against the inner walls of the veins</td>
</tr>
<tr>
<td>carbon</td>
<td>a non-metallic chemical element found in many compounds</td>
</tr>
<tr>
<td>depressant</td>
<td>a substance which lowers the rate of muscular or nervous activity</td>
</tr>
<tr>
<td>dilation</td>
<td>enlargement of an organ, cavity, or opening of the body beyond normal size</td>
</tr>
<tr>
<td>disinfectant</td>
<td>anything that destroys harmful bacteria or viruses</td>
</tr>
<tr>
<td>distillation</td>
<td>the process of first heating a mixture to separate the more volatile parts and then cooling and condensing the resulting vapor so as to produce a refined substance</td>
</tr>
<tr>
<td>ethyl alcohol</td>
<td>beverage alcohol which is composed of carbon, hydrogen, and oxygen - C₂H₅OH</td>
</tr>
<tr>
<td>euphoria</td>
<td>a feeling of well being</td>
</tr>
</tbody>
</table>
VII. GLOSSARY

and incorporate into the cells
without
of alcohol in a given substance
condition caused by habitually drinking too much alcoholic liquor
total loss of memory,
etc., that produces a partial or total loss of the sense of pain, temperature,
infection; stopping the action of microorganisms
the exerted by the blood against the inner walls of the veins and arteries
elic chemical element found in many compounds
which lowers the rate of muscular or nervous activity
of an organ, cavity, or opening of the body beyond normal size
that destroys harmful bacteria or viruses
of first heating a mixture to separate the more volatile from the less volatile
then cooling and condensing the resulting vapor so as to produce a more nearly pure
substance
cohol which is composed of carbon, hydrogen, and oxygen - \texttt{C}_2\texttt{H}_5\texttt{OH}
of well being
external - on the outside or exterior
false confidence - an inaccurate or mistaken feeling of being assured or certain
fermentation - breakdown and change of molecules in a substance due to a ferment
habit forming - a substance is habit forming if it causes its user to repeat its use so that it becomes automatic
hydrogen - an inflammable, colorless, odorless, gaseous chemical element
inferiority - the quality or condition of feeling lower in value, below average,
inflammation - diseased condition characterized by redness, pain, heat, and swelling
internal - of or on the inside
malnutrition - undernourishment resulting from insufficient food or improper diet
mature - full grown; fully developed; mental and physical development
muscular coordination - harmonious, orderly adjustment or working of the muscles
oxygen - colorless, odorless, gaseous chemical element
reaction - a response to a stimulus
reality - a state or quality of being real
reflex - reaction to a stimulus
self-control - control (command; authority) of oneself, or of one's own emotions,
self-respect - proper respect (consideration) for oneself, one's character, and
GLOSSARY (continued)

- The outside or exterior
- Inaccurate or mistaken feeling of being assured or certain
- Breakdown and change of molecules in a substance due to a ferment such as a bacteria
- Substance is habit forming if it causes its user to repeat its use over and over again so that it becomes automatic
- Inflammable, colorless, odorless, gaseous chemical element
- Quality or condition of feeling lower in value, below average, or mediocre
- Resolved condition characterized by redness, pain, heat, and swelling
- Or on the inside
- Starvation resulting from insufficient food or improper diet
- Full grown; fully developed; mental and physical development
- Harmonious, orderly adjustment or working of the muscles
- Colorless, odorless, gaseous chemical element
- Response to a stimulus
- State or quality of being real
- Action to a stimulus
- Control (command; authority) of oneself, or of one's own emotions, desires, and actions
- Proper respect (consideration) for oneself, one's character, and one's behavior
social problems - problems having to do with human beings living together as a group that they have dealings with one another

solvent - a substance used for dissolving another substance

standard - some measure, principle, or model with which things of the same class are compared in order to determine their quality or value

stimulant - a substance that increases the action of a body part; stimulants and alertness
avering to do with human beings living together as a group in a situation requiring
have dealings with one another
re used for dissolving another substance
e, principle, or model with which things of the same class are compared in order to
their quality or value
re that increases the action of a body part; stimulants produce excitation, wakefulness,
To terminate the teaching of the unit, it might help to have the students work together on a small project as a focal point of the entire unit. This can be accomplished by the use of discussions covering certain aspects of it or buzz groups.

Have students plan ways in which the knowledge they have gained can be shared with the student body.

(Example)

A. Hallway displays  
B. Showcases  
C. Murals  
D. School assemblies

Invite outside personnel to speak to the student body in any one of the three areas of specialization.

(Example)

A. Doctors  
B. Law enforcement personnel  
C. State department personnel  
D. Lawyers

Plan continuing interest activities.

(Example)

A. Keep abreast with the new and related information  
B. All students to bring to class anything new, of great interest, that develops

Plan a program to present to the parent-teacher groups.
CULMINATING ACTIVITIES

At the conclusion of the unit, it might help to have the students work together to develop a point of the entire unit. This can be accomplished by the use of panel discussion aspects of it or buzz groups. In which the knowledge they have gained can be shared with the rest of the

A. Hallway displays
B. Showcases
C. Murals
D. School assemblies

to speak to the student body in any one of the three areas.

A. Doctors
B. Law enforcement personnel
C. State department personnel
D. Lawyers

activities.

A. Keep abreast with the new and related information
B. All students to bring to class anything new, of great interest, that develops

to the parent-teacher groups.
EVALUATION

Evaluation should be an on-going process. Each lesson should be objectively and the student in order to plan for the next day's activities.

The student should be included in the evaluation in as much as they are the presented. It is for their benefit that the unit is being taught.

Written tests can be used only as a tool to check comprehension. However, that the prime objective of the unit is to help form attitudes. These cannot or factual test.

One way the teacher can evaluate to some degree the attitudes of the student will often reveal his feelings and then can be checked against an teacher may want to compile at the beginning of the unit.

The teacher should make a conscientious effort to evaluate the unit in term listed. Through observations, the teacher can determine if the attitudes, on tobacco, alcohol and drugs has shown some degree of improvement.
EVALUATION

An on-going process. Each lesson should be objectively evaluated by the teacher to plan for the next day's activities.

included in the evaluation in as much as they are the recipient of the material their benefit that the unit is being taught.

sed only as a tool to check comprehension. However, it should be held in mind of the unit is to help form attitudes. These cannot be evaluated by a written

in evaluate to some degree the attitudes of the students is by observation. The reveal his feelings and then can be checked against an attitude check list that the compile at the beginning of the unit.

ke a conscientious effort to evaluate the unit in terms of meeting the objectives evations, the teacher can determine if the attitudes, skills, and general outlook nd drugs has shown some degree of improvement.
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535 North Dearborn
Chicago, Illinois, 60610

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Washington, D.C. 20212

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United States Public Health Service
Bethesda, Maryland, 20014

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4040 North Fairfax Drive
Arlington, Virginia, 22203

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P.O. Box 3654
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