



Drug and Alcohol Prevention Policy

All employees and students are forbidden to use, possess, transfer or sell illegal drugs on company premises. Violators will be subject to disciplinary action, including immediate discharge for employees and expulsion for students. All employees and students are forbidden to use, possess or be under the influence of alcohol or illegal drugs on company premises. Violators will be subject to disciplinary action that may include immediate discharge for employees and expulsion for students. Illegal use, possession or distribution of drugs is subject to criminal legal sanctions under local, state and federal law. Additional information on this topic can be found on our website.

Effects of Drug Abuse

Physically, many drugs have profound effects upon various body systems that are extremely dangerous to good health. Psychologically, excessive drug use tends to focus the user on their drugs and their availability. Life becomes centered on drugs to the exclusion of health, work, school, family and general well-being. FUNCTIONALLY, WHEN LIFE BECOMES CENTERED ON DRUG USE, OTHER AREAS SUFFER AND RESPONSIBILITIES AND DUTIES TO SELF AND OTHERS ARE NEGLECTED. Therefore, excessive drug use or drug abuse has profoundly negative effects on the user and those people and organizations with which he/she is involved.

Often, the effects of drug use are complicated by increasing tolerance developed by the user to the drug of choice. This tolerance may be psychological, physiological or both. Such tolerance may lead to greater danger or overdose. When you detect a change in the ability of a student, a colleague, a friend or family member, or yourself to function adequately, it is appropriate to be concerned with drug use and abuse. Although other causes for negative functional changes clearly exist, given the present high level of drug use in our society, concern about drug abuse is certainly justified.

Alcohol

The alcohol we refer to is chemically known as ethyl alcohol or ethanol. There are numerous other types of alcohols that have very toxic and poisonous effects. Alcohol is the most widely used psychoactive drug. Some 90% or more of the population has used alcohol regularly, whether the alcohol is contained in wine, beer, or hard liquor.

As to its effects, it is the amount of alcohol consumed that is of importance, not the mixture in which it is consumed. To many users, alcohol is experienced as a very attractive drug because its immediate effects at low to moderate consumption levels are felt to be very pleasant. It increases sociability, gives some feeling of euphoria or well-being, and may increase appetite. However, even low doses significantly impair the judgment and coordination required to drive a car safely, increasing the likelihood that the driver will be involved in an accident. Low to moderate doses of alcohol also increase the incidence of a variety of aggressive behaviors, including spouse and child abuse. At heavier dosage levels, it causes loss of balance and coordination, mental dysfunction including speech and thought disruption, and severe lapses in judgment leading to very serious dangers such as drunk driving or other dangerous risk taking.

At heavier dosage levels yet, alcohol causes loss of consciousness. At very heavy dosage levels it yields loss of involuntary nervous system control leading to respiratory system depression, as well as heart and circulatory system failure and resulting death. At moderate to heavy levels of use there is the vomiting and hangover syndrome so widely known.



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Repeated use of alcohol can lead to dependence. Beyond its immediate effects, alcohol use in excess causes many serious chronic health problems including liver dysfunction, heart inflammation, brain damage and various types of digestive system cancers. Long-term alcohol use may also cause organic brain disease and psychiatric illness.

Heavily abusive drinking of alcohol over long time periods is termed alcoholism. This is generally agreed to be an addictive disease with a very poor prognosis unless the patient ceases alcohol consumption. Alcoholics Anonymous (AA) has had the best record in dealing with people whose lives are so focused on alcohol that we label them alcoholics. Medical treatment is indicated for acute and/or chronic alcohol abuse. There is some evidence that a genetic component exists in alcoholism. Children of alcoholic parents have a 40 percent greater risk of developing alcoholism than those children of non-alcoholic parents.

Sudden cessation of alcohol intake is likely to produce withdrawal symptoms including severe anxiety, tremors, hallucinations, and convulsions. Alcohol withdrawal can be life threatening.

Central Nervous System Depressants

There are many central nervous system (CNS) depressants of varying chemical makeup. They are generally labeled with the name "downers" although specific drugs have specific names. The CNS depressants include all sleeping medications, anti-anxiety drugs such as Valium or Librium, and alcohol. Medically, they are widely prescribed; probably far beyond their actual medical usefulness. They are also widely available illicitly or on the street under a variety of names.

Many of the CNS depressants interact with each other or with alcohol to produce a toxic effect far more severe than one would expect. Thus, these drugs are very life threatening and have a high potential for producing severe medical emergencies. Users of these drugs become increasingly tolerant of them. Thus, they tend to increase their dosage and put their lives at sever risk.

CNS depressants produce a "buzz" or feeling of well-being similar to that of alcohol. Some users report a kind of floating magical sensation that is very peaceful. These drugs tend to block out worry and anxiety and to cover depression and other unpleasant mood states.

As with alcohol, low to moderate dosages produce the feeling of well-being referred to above. At heavier dosages, some of the same toxic reactions will occur including loss of judgment and coordination, unconsciousness, and thought disruption. Many of these drugs at high dosage levels will lead to heart and respiratory collapse and to death.

When used abusively, withdrawal from these drugs as with alcohol may produce effects that need proper medical care and treatment. Addiction to CNS depressants is similar to alcoholism in that it is a very serious disease. Medical treatment and/or AA involvement are recommended with CNS depressant abuse.

Central Nervous System Stimulants

Unlike CNS depressants, CNS stimulants increase activity in the central nervous system. Thus, they are known generally as "uppers" although there are particular street names for particular drugs. The most available and popular is the CNS amphetamine; a popular form in street use is methamphetamine or "crystal". Cocaine, a stimulant drug of a different chemical makeup, has also become widely available and widely abused. Often, deceptive dealers purposely sell amphetamine as cocaine. Most CNS stimulants are highly addicting. Caffeine and nicotine, chemically known as Xanthenes are also CNS stimulants. However, given their different effects, they will be discussed in a separate section.



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CNS stimulants produce a sense of excitement and arousal often called a “high”. Thus, the slang name of “uppers”. They may decrease fatigue and increase alertness. Subjective feelings of heightened sexual arousal feelings may occur. Deceptive feelings of increased physical strength and coordination may also occur.

After using CNS stimulants, the body tends to try to re-stabilize itself and thus after use, depression may occur. This leads the user to take more of the drug to rid himself/herself of the depression. Thus, these drugs tend to reinforce their own use. Tolerance also develops to CNS stimulants. Thus, users tend to increase their dosage, leading to an increased potential to overdose. The effects of overdose may be excess excitability, excess irritability, delusions of grandeur, excess aggressiveness, severe loss of judgment, suspiciousness, as well as heart and circulatory system failure and arrest. It is very clear that CNS stimulants have addictive properties, as do alcohol and the CNS depressants.

Medical treatment of abuse is indicated. Beyond AA, organizations have been formed to aid CNS users: Narcotics Anonymous (NA) and Cocaine Anonymous (CA). There is a national Cocaine Hotline, 1-800-662-HELP, for anonymous and confidential help and support to cocaine users.

Marijuana or the Cannabinoids

In the sixties, marijuana was the first most popular of the illicit drugs among a large portion of the population. It is still a very widely used drug. Since 1970, scientific cultivation and increased imports from tropical climates have greatly increased the potency of today’s marijuana. Marijuana is now a quite powerful drug with more potent mind altering effects than in the past. The active ingredient in marijuana is called tetrahydrocannabinol or THC. THC is also the active ingredient of hashish, a refined form of marijuana produced from marijuana plants in a resin form.

Marijuana use produces a sense of euphoria and an altered sense of time. It thus tends to relieve the user of worry and anxiety and to produce a false sense of well-being. Some people using marijuana experience visual and auditory hallucinations, although this is not a common occurrence.

Unlike the drugs discussed above, either increasing tolerance or physical dependence is major problem with marijuana. Many users become heavily psychologically dependent upon it and have a very difficult time ceasing use.

As with other drugs, people who use marijuana abusively tend to focus their lives on the drug and neglect areas of functioning. Marijuana also produces errors in judgment and negatively effects physical coordination, thus leading to accidents. Driving under the influence of marijuana is similar to driving under the influence of alcohol. Marijuana is particularly dangerous for people with heart conditions as it may increase the heart rate, over-stressing the heart. New medical evidence clearly shows that chronic marijuana use has toxic effects on the lungs. It may lead to chronic bronchitis and other obstructive lung diseases. There is evidence that chronic marijuana use may also lead to lung cancer.

Treatment of marijuana abuse may require medical intervention. AA and NA are valuable treatment alternatives.

Opiates and Other Pain Killers

This class of drugs is called narcotic analgesics. Analgesic is another word for painkiller. Although these drugs clearly are sometimes medically useful, THEY HAVE NO VALID NON-MEDICAL USES. Some such as heroin and morphine are made from the opium poppy. Others are synthetically produced such as Darvon and Demerol. Regardless of their origin, they



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are highly addictive. Their use leads to severe withdrawal reactions when the drug is removed from addicted persons. Users of these drugs rapidly develop tolerance to them. To get a desired effect, they increase their dosage. This produces life-threatening and life-ending situations through overdose.

As many of these drugs are injected intravenously, many users contract severe diseases such as hepatitis (liver disease) or acquire immune deficiency syndrome (AIDS) from contaminated needles and drug paraphernalia.

Beyond their pain killing effects, these drugs produce drowsiness, changes of mood with an increased sense of tranquility and a clouding of mental functioning. They tend to give a "floating feeling of well-being" like "being on a cloud".

Users of opiates who develop into addicts often find themselves engaged in criminal activity to provide funds for the purchase of drugs. This pattern of using criminal means to support a "habit" is also common among users of other mind-altering drugs, particularly amphetamine and cocaine.

Specific "antagonist" drugs exist for opiate users and are used at times of treatment of overdoses. These antagonists are not useful in long-term treatment. As mentioned above, opiates carry high health risks in terms of death from overdose caused by respiratory and coronary collapse. Users are also at risk from very serious and at times fatal disease passed through contaminated needles directly into the bloodstream.

Medical treatment of opiate abusers and addicts is very strongly indicated with follow-up and maintenance programs necessary for long-term success.

Psychedelics or Hallucinogens

These are drugs that produce mental images and distortions know as hallucinations. Hallucinations are imaginary phenomena produced by the brain that appear real to the hallucinatory. They may be seen, heard, felt, tasted or smelled by the subject. Most often these drugs produce visual hallucinations. Often, the hallucinations are very frightening to the uses and they become very anxious and sometimes panic. Reassurance and the provision of prompt medical treatment are indicated.

Common hallucinogens are LSD (Lysergic acid diethyl amide), psilocybin (mushrooms), STP and PCP. PCP is a particularly drug and the user may become highly anxious and aggressive and very difficult to control. PCP is very widely available on the street and is sometimes substituted for other drugs or mixed with other drugs. Leading to unexpected and unwanted hallucinatory effects that are therefore more frightening to the user. It is reasonable to suspect PCP involvement with someone who is very anxious, and/or fearful and out of control. Intervention in this circumstance requires professional help from paramedics, police or other trained sources of aid.

Hallucinogenic drugs are not generally addictive. However, high levels of overdose can produce life-threatening physical symptoms such as high fever and convulsions. Some other commonly available substances are used for their mild hallucinogenic properties. Among them are nutmeg and morning glory seeds. Catnip is also sometimes used. These drugs provide a mild delusion-like experience. Morning glory seeds, if taken intravenously, may produce a shock syndrome with potential lethal consequences.

Federal Trafficking Penalties



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https://www.dea.gov/pr/multimedia-library/publications/drug_of_abuse.pdf#page=30

North Carolina Trafficking Penalties

https://www.ncleg.net/enactedlegislation/statutes/html/bysection/chapter_90/gs_90-95.html

Resources for Drug Abuse Treatment

As community and governmental concern has increased, resources for and knowledge about treatment of drug abuse have become widely available. Many communities now have resources for drug treatment that were not in existence several years ago. Large cities are likely to have a large number of resources available. Generally, those resources for treatment and aid that are part of the patient's home community are most useful. This is due to ease of access and the likelihood of continuing with the aftercare that is so important in drug abuse treatment. Various types of resources are available.

Hospital Emergency Room

These are the preferred facilities of choice when an overdose of a mind-altering drug is suspected. Since the results of overdose of many of these drugs can be life threatening, it is best to treat potential overdose situations conservatively and to obtain emergency treatment with all due speed.

Police, Fire, and Paramedic Services

If a drug-abuse situation appears especially dangerous based on the symptoms of the patient, it is wise to use these services to provide the quickest access to treatment. If the behavior of a suspected drug user is so disturbed or inappropriate that you fear it is out of control, use of police and paramedic services is also appropriate.

Emergency Outpatient Treatment Facilities

These facilities—sometimes known as “readicare, surgicare, or emergicare”—differ from fully equipped hospital emergency rooms in their ability to provide a wide range of treatment options. They also cannot provide inpatient care. In serious abuse situations, use of a hospital emergency room is to be preferred.

Drug Treatment Centers

Many types of drug treatment centers exist. Some work on an inpatient basis and some on an outpatient basis depending on the type of drug abuse involved and their philosophy of treatment. It is wise to survey your community as to the types of drug treatment centers available, the kind of patients they treat, and the economics of treatment. This information is available to faculty and administrators to be used when counseling students with regard to drug issues.

Alcoholics Anonymous and Similar Organizations

Alcoholics Anonymous is a very important resource for those dealing with alcohol abuse problems. As mentioned above, similar organizations exist to aid cocaine abusers, Cocaine Anonymous, and other drug users, Narcotics Anonymous. Contact numbers for these organizations are in your local phone book. They are non-profit, no cost groups run by their membership. Many of the most successful drug treatment programs are based on AA methods. Many communities have



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multiple chapters of all these organizations with multiple meetings and contact opportunities. THEIR IMPORTANCE AS A PRIMARY RESOURCE IN DRUG ABUSE TREATMENT CANNOT BE OVER EMPHASIZED.

Community Agencies and Social Services Groups

Many communities provide social service based facilities and groups for drug treatment. Various types of treatment methods are used, depending on the community, the range of services available and the type and severity of abuse involved. Information about such treatment resources can be obtained from your community department of social services or medical services. This information will be available to students and employees.

Church Groups

Many churches and religious organizations have programs to aid drug users and abusers. These groups are generally without fee. Information about them can be obtained from the churches directly or often through your communities social services agency.

National Hotline Numbers

- National Alcohol Hotline 800-ALCOHOL
- Cocaine Anonymous 800-662-HELP
- Alcohol and Drug Helpline 800-821-4357
- National Council on Alcoholism and Drug Dependence Hopeline 800-622-2255
- National Helpline for Substance Abuse 800-262-2463
- Drug Abuse Information & Referral Line 800-662-HELP (662-4356)

When referring an employee or student to a treatment program, it is important to stress the confidentiality of the referral. The employee needs to be assured that his or her privacy will be protected. Most if not all drug treatment programs recognize the necessity of confidentiality and protection of the privacy of their members. Without the assurance of such confidential treatment, it is less likely that the user will seek treatment and help.