

Straight, Inc.'s Straight World of Sports, Sept 12-20, 1987

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STRAIGHT

WORLD OF SPORTS

DIRECTOR - WASHINGTON
C. Suzanne Hardman

7/21 per Jack
Honorary Chairperson
JFM

JFM-3

/// serve as
Honorary Chairperson
for Straight World of Sports.

June 9, 1987

Mrs. Nancy Reagan
The White House
Washington, DC 20500

Dear Mrs. Reagan:

A committee of parent volunteers at Straight, Inc. of Greater Washington is planning an unprecedented week of sporting events during the week of September 12 - 20, 1987. As parents of children with a drug problem, we are extremely grateful for your steadfast commitment to the creation of a drug-free society and your enduring support of all of us who are working toward the same goal within the Greater Washington area.

STRAIGHT WORLD OF SPORTS is a fund-raising effort by the Parents Booster Club of Straight, Inc. This event will channel the energy and vitality of sports into the struggle against drug use by kids. STRAIGHT WORLD OF SPORTS is a unique concept which will bring together celebrities, individuals and companies in a number of events.

We would be greatly honored if you accept to be honorary chairperson for STRAIGHT WORLD OF SPORTS.

STRAIGHT WORLD OF SPORTS will be comprised of the following activities: a baseball pitching clinic, a 10K run, a celebrity auction/gala dinner, a golf tournament, a tennis exhibition match, a sports fashion show/luncheon and a coaches awareness clinic. All the events with the exception of the Coaches Awareness Clinic will be conducted during the period of September 12 - 20, 1987. The clinic has been scheduled for October 6, 1987 to accommodate the Washington area coaches. Because of the complexity of the event and in order to meet the two goals set forth by the parent group - that of fund-raising and of increasing the level of awareness in the community to the drug problem by our adolescent population - we have hired Clews Communications to assist us in our efforts.

We are hopeful that you will accept this invitation. Upon your acceptance we would like your approval for the use of your name in reference to STRAIGHT WORLD OF SPORTS and your participation at some of our activities. If for some unforeseeable reason you cannot join us we would appreciate your assistance by way of a letter of support to the event and the possibility of a video-tape to be shown during the Celebrity Auction. We are also extremely receptive to your personal recommendation for an honorary chairperson if you are unable to accept this invitation.

Straight, Inc. • 5515 Backlick Road • Springfield, VA 22151 • (703) 642-1980
A family oriented treatment program for drug using young people and their families

We would also like to extend an invitation to your staff to join us during this exciting week by participating in one or more of the many sports event scheduled for STRAIGHT WORLD OF SPORTS. Enclosed you will find a schedule of STRAIGHT WORLD OF SPORTS for you perusal and information. We hope that you will accept our invitation and join us for a very unique and exciting week.

As a parent group we would be greatly honored by your acceptance of this invitation as honorary chairperson of STRAIGHT WORLD OF SPORTS. We want to thank you again for you continuing support of our Greater Washington Straight.

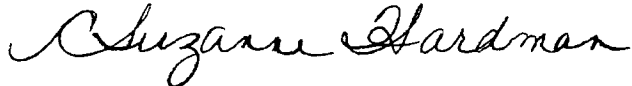
Sincerely,



Patricia M. Louque
Chairperson
STRAIGHT WORLD OF SPORTS



Bill Larman
President
Straight Parent Booster Club



C. Suzanne Hardman
Program Director

STRAIGHT

RESERVED FOR

FOR RELEASE

Straight Programs

Tampa Bay – 3001 Gandy Boulevard, St. Petersburg, Florida 33702, 813/577-6011,
In Tampa 813/223-4362

Orlando – 2400 Silver Star Road, Orlando, Florida 32804, 305/291-HELP

Atlanta – 2221 Austell Road, Marietta, Georgia 30060, 404/434-8679

Cincinnati – 6074 Branch Hill - Guinea Pike, Milford, Ohio 45150, 513/575-2673

Greater Washington – 5515 Backlick Road, Springfield, Virginia 22151, 703/642-1980

What others say about

STRAIGHT

"I have found it to be a unique treatment approach, offering unusually effective and affordable help to families caught up in the drug abuse epidemic... It focuses on teenagers and it actively involves parents in the treatment process. Straight is a tough-minded, drug-free program. It is intensive and effective... uses teenage peer pressure for positive goals, reversing the pressures of the drug culture... it also respects the individuality of each young person and each parent..."

* * *

"Straight is the best program of its kind in the country. What you do in the program helps the kids, helps the parents, and helps the community."

**Robert L. DuPont, M.D., President
American Council on Marijuana**

"... a highly effective treatment program... an excellent example of people, not government, helping other people."

**Congressman Frank R. Wolf (R.-Va.)
U.S. House of Representatives**

"I have been greatly impressed by the work of Straight, Inc., an organization which has helped many to give up drugs and brought families back together in supporting roles all over the country."

**Congressman Charles E. Bennett (D.-Fla.)
Chairman, Florida Democratic Delegation
U.S. House of Representatives**

"It's my sincere professional opinion that the Straight, Inc. program is one of the best treatment programs there is for kids who are abusing drugs."

**Maxie C. Maultsby, Jr., M.D., Director
Rational Behavior Therapy Center
College of Medicine
University of Kentucky**

Atlanta

2221 Austell Road
Marietta, GA 30060
(404) 434-8679

Cincinnati

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Milford, OH 45150
(513) 575-2673

Dallas

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(214) 644-4357

Greater Washington

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Springfield, VA 22151
(703) 642-1980

Michigan

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(313) 453-2610

New England

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Stoughton, MA 02072
(617) 344-0930

Orlando

2400 Silver Star Road
Orlando, FL 32804
(305) 291-4357

Tampa Bay

3001 Gandy Boulevard
St. Petersburg, FL 33702
Pinellas (813) 577-6011
Hillsborough (813) 223-4362

PARENTS OF TEENAGERS

Have you observed



- ☐ School tardiness, truancy, declining grades
- ☐ Loss of motivation, energy, self-discipline
- ☐ Loss of interest in activities, hobbies
- ☐ Forgetfulness, short- or long-term
- ☐ Short attention span, trouble concentrating
- ☐ Aggressive anger, hostility, irritability
- ☐ Sullen, uncaring attitudes and behavior
- ☐ Family arguments, strife with you, siblings
- ☐ Disappearance of money, valuables
- ☐ Changes in friends, evasive about new ones
- ☐ Unhealthy appearance, bloodshot eyes
- ☐ Changes in personal dress or grooming
- ☐ Trouble with law in or out of school
- ☐ Unusually large appetite
- ☐ Use of Visine, room deodorizers, incense
- ☐ Rock group, drug-related graphics, slogans
- ☐ Pipes, small boxes or containers, baggies, rolling papers, or other unusual items
- ☐ Peculiar odors or butts, seeds, leaves in ashtrays or clothing pockets

THE PROBLEM

If your responses in the boxes on the previous page indicate some doubt about your child's behavior, the reason may be that he or she is using some kind of drugs.

Parents are usually not well informed about the vast amounts and varieties of substances available to young people today. Studies indicate that young people use drugs for two years or more without the knowledge of their parents. Drugs and alcohol can be root causes of many persistent behavioral problems.

When parents confront young people about possible drug use, the answer will generally be denial: "Of course not!" or "Prove it!" A young person using drugs is clever at getting around suspicions of both parents and professionals.

Parents must accept the fact young people cannot handle drug use on a casual basis. Once they have begun drug use regularly, it is unlikely they will "outgrow" the problem; in fact, they usually increase drug use over time.

Statistics tell us well over half of high school students are "doing drugs." Most of these young people and their parents need assistance to bring about a solution to their problem. Straight can help.

THE SOLUTION

Straight is a family-oriented treatment program for drug-using young people and their families. It is one of America's most successful programs. Approximately 70% of all entrants go on to graduation and will have been drug-free for between twelve and eighteen months.

Since Straight began in 1976, over 5,000 young people and their families have been helped by the program and are living free of drugs while enjoying restored family relationships.

Total Family Involvement The drug-using young person is not isolated or institutionalized at Straight but is always among others who are aware of his or her problem — loving, caring host families. Active involvement of parents is a key element in the program. Research shows that the more the family is involved the higher the chance of success.

Professional Care Straight employs well qualified, highly skilled professionals who closely supervise the entire treatment process.

Kids Helping Kids The entire group of young people is involved in the therapeutic process and serves as a bridge to recovery through positive peer pressure. Straight's simple concept of kids helping kids works. Peer pressure is what gets young people into drugs, and at Straight, with professional supervision, peer pressure helps them get off drugs.

Focus On Youth Only a small percentage of drug treatment programs are designed specifically for young people. The average age of those involved in the Straight program is 17.

Cost Effective Straight incorporates a host home concept for participants during the first phase of the program. In later phases they live in their own home with their own families (or at host home if their family is from out of the area). In addition to its therapeutic effectiveness, this approach dramatically reduces room and board expenses. During daytime hours, clients participate in therapeutic discussion groups at the Straight facilities, full-time at first, then later after school or work.

HOW STRAIGHT CAN HELP NOW . . .

ASSESSMENT SERVICES

Straight, offers drug use assessments to families to help identify and define problems experienced by young persons. Parents may obtain more information and arrange an appointment by calling.

Straight, Inc.

Not-for-profit, privately funded, family oriented treatment program for drug using young people and their families.

OR WRITE STRAIGHT

Please send me more information.

Name _____

Address _____

July 27, 1987

Dear Friends:

On behalf of Mrs. Reagan, I am pleased to inform you that she has accepted your thoughtful invitation to serve as Honorary Chairperson for Straight World of Sports.

Please contact me at (202) 456-7905 to discuss the details of Mrs. Reagan's participation.

Sincerely,

James F. Manning
Director of Projects
Office of the First Lady

Ms. Patricia M. Louque
Ms. C. Suzanne Hardman
Mr. Bill Larman
Straight World of Sports
Straight, Inc.
5515 Backlick Road
Springfield, VA 22151

JFM:lasf2

JFM-3



220 7th Street, SE • Washington, D.C. 20003 • (202) 546-3711

August 18, 1987

Ms. Debra Balfour
Office of Projects
Office of the First Lady
White House
1600 Pennsylvania Avenue, N.W.
Washington, DC

Dear Ms. Balfour:

On behalf of STRAIGHT, the family treatment program of Greater Washington, it would be greatly appreciated if Mrs. Reagan would agree to do a public service announcement to promote the STRAIGHT WORLD OF SPORTS.

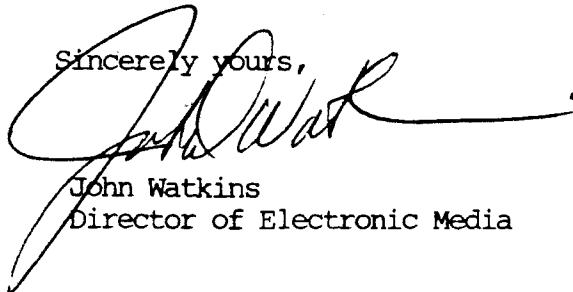
If at all possible, can we confirm the First Lady's appearance at the Third Annual Celebrity Auction/Gala Dinner on September 13th?

In the event that Mrs. Reagan's schedule does not permit a public service announcement taping or an appearance at the auction, would it be possible to secure an item donated by the first family for the auction?

Mrs. Reagan's continued support in helping to publicize this major drug awareness campaign is vital to raising funds necessary to prevent America's youth from becoming chemically dependent, thereby imperiling the nation's future.

Thank you for your interest and consideration.

Sincerely yours,



John Watkins
Director of Electronic Media

JW:jr
Encl.

"A Commitment to Quality"

THE WHITE HOUSE

WASHINGTON

September 15, 1987

Dear Mr. Watkins:

Thank you for your letter requesting participation of the First Lady at the Straight World of Sports' Third Annual Celebrity Auction/Gala Dinner which was held on September 13.

As you know, Mrs. Reagan was unable to attend, or prepare a videotaped message. Please rest assured that this was due to her very busy official schedule, and not in any way a reflection on the merit of Straight World of Sports' endeavors. The First Lady is grateful for all you are doing in the fight against substance abuse, and asked that I send her warm appreciation and best wishes.

Again, thank you for your continued interest. With warm regards,

Sincerely,

James F. Manning
Director of Projects
Office of the First Lady

Mr. John Watkins
Clews Communications Inc.
230 7th Street, S.E.
Washington, D.C. 20003

THE WHITE HOUSE
WASHINGTON

8/19/87

Jack,

NO

Frankie Coates of DEA as well as this communications company is on our back about this. Can we TD all three requests?

as you know, Mrs. Reagan is Honorary Chairman of the event and we are sending ^{written} message.

DB

Clews Comm.

Straight Games

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• EPIDEMIC...

No. 4 Straight talk about kids, drugs and families from The Straight Foundation

The Straight Program

Straight, Inc. is a family oriented treatment program for drug users between the ages of 12 and 21 and their families. While a youth is participating in the Straight program he or she must remain totally drug-free. The average age of our clients is 17, and the average client started using drugs at the age of 12. 60% are boys, 40% are girls. The treatment program of 12 to 18 months centers on a self-help philosophy — kids helping kids, parents helping parents, families helping families — the main objective of the therapeutic process being the revitalization of the family system.

While not an inpatient facility, Straight conducts an intense daily schedule of therapeutic sessions, utilizing the dynamics of peer pressure in a positive fashion to create a new lifestyle for the clients. The therapeutic tools utilized by Straight include a modified version of the Alcoholics Anonymous' Steps and Signs which Straight calls the "Tools of Personal Change", plus cognitive therapy techniques which deal with how a person thinks. The program uses a combination of intensive therapy and a structured, progressive approach where young people earn their way through 5 phases of the program to graduation. Straight is staffed by adult professionals who supervise young staff members who have been through the program and have subsequently been trained as counselors.



*"...kids helping kids,
parents helping parents,
families helping families..."*

The 12 Steps

Called "Tools of Personal Change" the 12 Steps used at Straight are actually principles of living — tools that are learned and used during the program and throughout life to help guide the person through the choices that confront him or her. The goal, achieved during the 5 phases of the program, is to internalize the program so that choices are routinely scrutinized — is it in my best interests? does it keep me out of trouble? The 12 Steps are guidelines used to direct this process.

The 12 Steps

1. We admitted we were powerless over alcohol and drugs — that our lives had become unmanageable.
2. Came to believe that a Power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God as we understood Him.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of character.
7. Humbly asked Him to remove our shortcomings.
8. Made a list of all persons we had harmed, and became willing to make amends to them all.
9. Made direct amends to such people wherever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong promptly admitted it.
11. Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.
12. Having had a spiritual awakening as the result of these steps, we tried to carry this message to others, and to practice these principles in all our affairs.

(cont. on pg. 2)

The Straight Program

The 5 Phases

During the months of treatment the young people progress through 5 distinct phases in the treatment cycle.

First Phase is the period immediately after the young person enters the program and lasts for a minimum of 14 days. The youth is working on "self". This involves developing honesty about one's past as a "druggie" and about one's "process" (thoughts and feelings) and how the youth sees his or her world. The child lives with a "host" family which has a child in an advanced stage of the program, who is the client's Oldcomer, and is in the building from 9am to 9pm Monday through Saturday and 7 hours on Sunday.

Second Phase is the exciting moment when the youth "comes home". Now he or she lives at home instead of with the host family and adds working on family relationships to working on self. The teenager is in the building 12

school or work on weekdays, then into the program in the afternoon and evening. He is in the building all day on Saturday and Sunday. Minimum time in Phase Three: 7 days.

Fourth Phase is the time when the young person begins staged withdrawal from active involvement in the

"...young people earn their way through 5 phases of the program to graduation."

program. He or she comes to the building after school 3 weekdays and one of two weekend days. The youth is working on constructive use of leisure time and on creative friendships. He or she is permitted, on a written permission basis, to go places for recreational activities with family or friends in the program. Minimum time in Phase Four: 90 days.

Fifth Phase involves only three days in the building, more personal freedom, and working on service to others — social responsibility. Fifth

meaningfully. Different types of raps are scheduled throughout the day, although all focus on drug use and recovery through self-change using the program tools. Led by 2 rap leaders (staff members), raps have topics that involve the group working together on a single rap theme and also working individually on different therapeutic tasks within the treatment process.

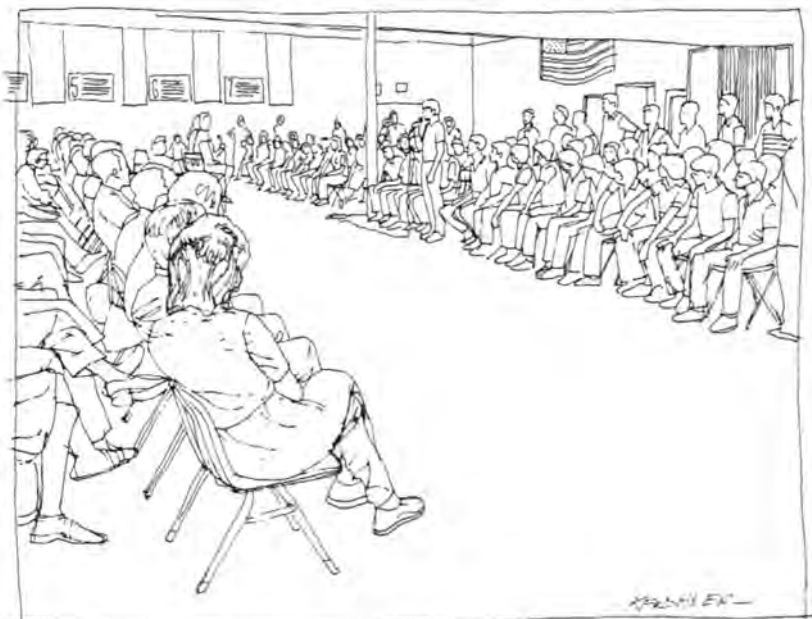
Different types of raps are held: A Past-Present-Future Rap develops a theme from the past, beginning either with childhood or the "druggie" past, to the present and then to the future, working on dreams or goals. A Confrontation Rap works with individuals in the areas of honesty and compliance with rules. The group members, under rap leader supervision,

"The goal...is to internalize the program..."

give strong confrontive feedback to particular individuals. A Review Rap may involve review of rules or, for example, the rap that follows an Open Meeting, where kids are given feedback relating to behavior and happenings during the Open Meeting. An Idea Rap takes a basic idea or word and builds on it, layer by layer with group members sharing their insights. An Instructional Rap is where teaching and learning are the primary goals, such as teaching the 12 Steps. Fun Raps are held to give the teenagers a chance to be kids — to have fun with an "off-the-wall" subject like ghosts, UFO's, bananas. Small work groups are also employed during the rap periods to develop an idea, which is then shared in the general session at the end of the rap.

"...rap therapy uses supervised peer pressure..."

Morning Rap, with first and second phasers in the building, deal with the basic foundation tools of the program. It gets the group involved with the day, is quickly paced and deals with the basics — the 12 Steps, the 5 Guidelines for "Straight" Thinking, routines, the 5 Phases, etc. There is little confrontation in the Morning Rap. After lunch, there are Boys/Girls Raps where the group is separated by sex. Topics may be more related to male/female issues and sexual identity, but not necessarily. There is



hours daily, Monday through Saturday and 7 hours on Sunday. Minimum time in Phase Two: 7 days.

Third Phase has to do with working on achievement through school or a job while continuing to work on self and family. This phase also represents the first time a youth faces "do drugs" peer pressure again. He or she has to face old friends at school and say "no". The young person goes to

Phasers assist the staff in working with the Group. The child graduates to aftercare upon completion of Phase Five. Minimum time in Phase Five: 60 days.

Rap Therapy

Based on the concept that peer pressure got the child involved with drugs in the first place, rap therapy uses supervised peer pressure to help get him or her off drugs.

• EPIDEMIC ...

Welcome Back, Mrs. Nancy Reagan

**SPECIAL
EDITION**

First Lady Nancy Reagan visited the Cincinnati branch of Straight Inc. on Monday, September 17th, as part of her personal crusade against teenage drug abuse. This was her second visit to a Straight facility (she visited the St. Petersburg, Florida branch in February, 1982), and she joined 160 young people and their parents for 3 hours at a regular Monday night Open Meeting. It was an emotional evening, as Mrs. Reagan listened to young people tell of their lives of drug use and despair and parents cry as they spoke of the worry and fear they had felt for their children and families.



Mrs. Reagan is greeted by William D. Oliver, Executive Director of Straight, Inc. National (left) and Jerry Rushing, Director of the Cincinnati branch.



Mrs. Reagan joins in applauding the Straight young people as they speak of the hurt and despair they experienced and the hope and joy they now have for their future.



Mrs. Reagan, with tears in her eyes, said, "As one parent to another, I know there's no hurt a parent can be given that can equal that that your child can give you...But I'm proud of you because you have supported your children and given them the love they need. They showed that need tonight." "We need you," she told the young people. "You'll be taking over this world. We need you to be strong and quick. I want you to know that I'm proud of you for having the courage to face up to your problems."

Welcome Back, Mrs. Nancy Reagan



Mrs. Reagan met Robin Page at Straight and invited Robin to accompany her to Indianapolis the next day to speak at a junior high class about the dangers of drug use. Robin joined Mrs. Reagan on Tuesday morning and sat with her on the Presidential plane where they discussed Robin's personal experiences with alcohol, marijuana and speed. "She was really nice," Robin said. "I was, like, amazed at how honest she was. She asked what she could do to become more involved in helping people with drug problems."



Jerry Rushing presents Mrs. Reagan with a small bronze figure of a child reaching out. It was sculpted by a parent of a Straight teenager.



Mrs. Reagan joins with bowed head and clasped hands as the Straight Open Meeting ends with the Lord's Prayer.



Just before leaving the Open Meeting, Mrs. Reagan walked over to the front row of Straight's young people and hugged each of them. "I love you all," she told them.



Straight program have intervened with these siblings during the treatment of a brother or sister. Children are a part of families, and families must be treated as a whole for the process to succeed. Youths *must* be accompanied by a parent to be admitted to the program.

Aftercare

A graduate of Straight enters a six-month Aftercare program. Consisting of a series of classes, the Aftercare program strives to support and teach the recent graduate. It offers the opportunity to extend the knowledge they've gained in the program and also to relate the experiences and problems they're now facing alone, without the support of the Straight group. Topics discussed include relationships and social dating, friendships, long-term goal setting, relapse symptoms, basic life skills, positive thinking, etc. Graduates are required to attend 2 classes per week for the first 3 months, then 1 class per week for the next 3 months. Parents are required to attend 1 class per month with their graduate.

"Straight seemed to us to be phenomenal. We have been involved in drug programs, we have seen far more of them, and we have read about most of them; but we have never seen a program that seemed so intelligently designed to bring about success in this very difficult field . . . Straight, we are inclined to suspect, is going to be recognized, eventually, as a national resource."

¹ Andrew I. Malcolm, M.D., F.R.C.P. (C), "An Examination of Straight, Incorporated", Toronto, Canada, 1981.

more confrontation and more individual work. Higher phase members are starting to arrive, from school or work. The Afternoon Rap brings the whole group together, with more old-comer participation. It is the most confrontive with more group leadership because of more old-comer involvement. Specific issues are confronted, such as responsibility, weaknesses versus strength, etc. The Night Rap, after dinner, focuses on positive themes with no confrontation, to end the day on an "up" note so that clients leave the building feeling positive about the day and themselves.

Family Involvement

Entire families are required and encouraged to participate in the Straight program. The main objective of the therapeutic process is the reconstruction and revitalization of the family system. Open Meetings are held on Monday and Friday evenings,

"The main objective of the therapeutic process is the reconstruction and revitalization of the family system."

bringing together in one large room the teenagers, parents and siblings. First, second and third phase parents are required to attend all Open Meetings, with fourth and fifth phase parents attending the one meeting per week that their child attends. Straight also conducts parent and sibling raps, individual counseling and family conjoint counseling. 92% of the siblings involved in the Straight program never get involved with drugs. Why? The best form of prevention is intervention, and their parents and the



A message from: William D. Oliver, Executive Director

Straight was founded in response to a need. Kids were in serious trouble with drugs and alcohol and nothing available seemed to really work...really work in the sense of not only achieving abstinence but also in recovering the quality of life. Some parents and professionals in St. Petersburg, Florida decided to do something about it.

In 1976, Straight was created as a non-profit, privately funded treatment center for drug using kids and their families. It had one client, a handful of staff, little money...but it had two key resources:

- a faith which would not quit
- a heart big enough to love the unloveable.

"Straight was founded in response to a need."

Now just eight years later, Straight has eight operating programs: Cincinnati, Tampa Bay, Atlanta, Washington, D.C., New England, Dallas, Orlando and Michigan. There are currently over 800 children in treatment.

Why? Because Straight works...not only to achieve sobriety but also and especially to recover the quality of life, the ability to become, to achieve,

to fulfill each child's potential as a human being.

Straight is the result of families all over America who refused to compromise, who refused to quit. If we have one secret, it is *commitment*.

- Commitment to recovery
- Commitment to achievement
- Commitment to excellence

We say it all the time. We are proud of our kids — not for what they have done. We are proud of who they have become.



Straight, Inc. Cincinnati
6074 Branch Hill-Guinea Pike
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Springfield, Virginia 22151
(703) 642-1980

Straight, Inc. New England
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Stoughton, Massachusetts 02072
(617) 344-0930

Straight, Inc. Dallas
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Richardson, TX 75081
(214) 644-4357

Straight, Inc. Orlando
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Orlando, Florida 32804
(305) 291-4357

Straight, Inc. Michigan
42320 Ann Arbor Road
Plymouth, Michigan 48170
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St. Petersburg, FL 33702
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St. Petersburg, FL 33742
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- ☐ Enclosed is my \$10 donation.
☐ Please send me information on Straight, Inc.
☐ Please add the following name to your EPIDEMIC mailing list.

EPIDEMIC...

No. 11 Straight talk about kids, drugs and families from The Straight Foundation

SIGNS & SYMPTOMS

A Pediatrician & Mother Speaks:

An interview with Dr. Janice W. Woolley, M.D.

I have a private practice on Mercer Island in the state of Washington.

My husband and I have four children. Our oldest son, Jim, 16 this past January, is a client at Straight in St. Petersburg, Florida, something that three or four years ago I would have never imagined could happen.

Jim was a very good child and student, with no major problems. In fact, I have a distinct memory of when he was in 6th grade (11 years old). His teacher invited me to talk to his class about some of the developmental changes that would be happening to them, and specifically about drug abuse. Jim was very interested and helped me in planning what I would talk about. He was supportive concerning the information and adamant about never being involved with drug use.

Less than a year later, we know now, he was experimenting with alcohol and smoking, at 12 years old. We began to see a change in him early in 7th grade. His long-time best friend was at our home less often, and Jim complained that his friend was boring. He moved on to a different group of peers, a group that we were uncomfortable with. He was a good student, and now his grades were dropping. He became unreliable about being where he said he would be. At the time we felt we were ex-

periencing some normal adolescent behavior, testing our values, and a little rebellion.

One incident I remember is finding a photo taken at a friend's house, showing my son and two friends sitting on the sofa with a whiskey bottle on the coffee table in front of them. The boys were spending the night together, and I dismissed it, thinking it was the parents' bottle. If I were to come across that now with one of the children, I would be very concerned.

I think that one problem for me as a mother and pediatrician was that I was quite familiar with the physiological effects of alcohol and drugs, but I knew nothing about chemical dependency and didn't understand it at all. I didn't understand the behavioral changes, and I realize now that I was overlooking it in my patients as well as my own child. I would have recognized drunk if I saw Jim drunk, but I didn't recognize stoned. And even now I can't remember more than a time or two when it should have been obvious that he was under the effects of a chemical.

What we did experience, and didn't pick up on, were the behavior changes. They were really classic — deterioration of school performance, change in peer group, change in

lifestyle and appearance — long hair, interest in heavy metal music, the t-shirts and earring. They were distressing to us but, again, we didn't recognize the meaning behind them.

We did what most parents do — sought help from other professionals — we have a long list of professionals we went to. Unfortunately, most of them didn't recognize chemical dependency either.

How long did this go on?

The whole process took three or three and a half years before we had a full understanding of the nature of the problem. About a year before Jim entered treatment my husband and I became pretty convinced that drugs were playing a major part — we still didn't fully understand that drugs could be the whole reason.

What finally brought you to that realization?

Well, we did begin to find drugs in his room — we looked through his belongings and found some marijuana. We found notes from his friends that alluded to drug use. We were quite uncomfortable with the friends he was associating with, and felt they were a bad influence on him.

(cont. inside)

INSIDE: Quick Checklist of Symptoms & Drug Reference Chart.

We even moved, thinking we could give him a fresh start, and we let him know we expected different behavior. We thought being out in the country would be a healthy environment. So at some personal sacrifice we moved to a rural area. We only lasted about six months — the commuting was very difficult and of course it didn't help. Jim immediately found the peer group that was using drugs.

So many parents think of the teenage drug problem as a big city problem. You found this isn't true?

Yes, if anything we found that it was even more of a problem in the rural area we moved to.

"I would have recognized drunk ... but I didn't recognize stoned"

When we moved back to the suburbs we made it clear to Jim that we expected him to make a clean start with new friends, still not understanding his dependency on drugs. We discovered then that there are many kids who look straight but aren't.

We took Jim to two teenage drug treatment centers in our area and neither picked up on the problem. The first one told us that he was going through a phase, and we needed to be easier on him. The second program said that he was at "high risk" and probably needed counseling. We were expecting to admit him, and were devastated to be told to take him home again. We did take him to a counselor, an expert in teenage drug abuse, who confirmed our suspicions. Along the way we did some urines (urinalysis testing) and more than one time had a negative reading. We thought we had confirmed the problem, and when the tests came back negative we thought "where do we go from here"?

How could the urine tests come back negative when Jim was using drugs?

I'm really not sure. But I do know that some testing labs are geared toward employment testing, and set high reporting levels. The doctor ordering the test has to give specific instructions to the lab to report any levels of drugs found, not just a positive or negative reading based on employment levels. Also, the excretion of drugs in the urine is erratic — we may have just chosen the wrong day to take the sample.

Was Jim denying his drug use?

He was during most of it. Toward the end, right before he came to Straight, he was beginning to admit it.

So when the urine tests came back negative he could say "See, I told you so."?

Right, it was not helpful to us at all. We did get two urine tests that showed marijuana

use, and Jim admitted then that he was using. He said it was because we were putting too much pressure on him — he couldn't handle school and the pressures at home. That was difficult for us because we couldn't see how we could put less pressure on him when things were going so badly. He was essentially failing all classes in his freshman year of high school. We didn't have much hope of his finishing high school at this point.

And at no time during your medical training were you presented with adolescent drug dependency information?

No, not at all.

Has that changed?

Well, I hope it is changing, although a recent John Hopkins survey said that less than 40% of pediatric training programs offer instruction in substance abuse. And I know from medical literature I read that there is, unfortunately, a substantial percentage of medical students and residents who use marijuana. And of course alcohol is used by most adults in general.

This is a big concern to me. I've tried to make inroads in helping educate my colleagues about the problem. I've had parents come to me who've had an experience with a pediatrician who wasn't interested in doing urine screens and didn't have the knowledge to help them. I think it's strictly a matter of not having the education. Unless an individual has a personal experience, they don't understand the extent of the problem.

So even the medical students of today — our future doctors — aren't getting the information they need to deal with the problem?

In most cases that's true. There may be exceptions, but I think there's a big gap in professional knowledge.

"We discovered that there are many kids who look straight but aren't."

What was happening to the rest of the family during the time Jim was using drugs?

The rest of the family was really suffering. We were so wrapped up in trying to keep Jim under control that we didn't have a lot of energy to help them, and kind of expected them to hang on and behave and cope. Which they did.

Of course our family relationships really deteriorated — Jim's relationships with the younger children were very poor. There weren't many positive things going on at all — a lot of hostile behavior toward the fami-

ly, anger, very little communication. One thing that frustrated me very much as a pediatrician was that I've always prided myself on my ability to communicate with adolescents. To make matters worse, I took a year and a half fellowship in adolescent medicine after completing my pediatric training, and presented myself as an authority on adolescents. And now I had a son I couldn't talk to.

How old are the younger children? Were they aware of Jim's drug use?

The next oldest was 14 when Jim went into treatment, and we have a 12 year old and a 9 year old. I don't think they were fully aware either. They knew he was smoking cigarettes. He didn't ever, fortunately, try to enlist them in drug use, as many children do. They were certainly aware that his behavior was out of control and they were angry with him. He was taking a lot of the family resources — money for counseling, our time and energy, two household moves. There was a great deal of disruption in their lives because of him.

"... less than 40% of pediatric training programs offer instruction in substance abuse."

There's one experience I remember — we went to Expo with the family and Jim disappeared, having made contact with a druggie friend. And my daughter, much to my surprise, said "Let's not worry about him — he'll be alright. You always worry about him and he ends up coming back and he's fine." I realized then how much he was affecting them.

How did you find Straight, from all the way in Seattle?

It's an interesting story. Actually, I'm grateful now that the other treatment programs didn't take Jim. They certainly do help some children but I feel they wouldn't have helped Jim to the extent that Straight has. He needed a long-term program — they were one and two month programs. He needed to make changes in his entire lifestyle and regain his self-confidence and self-esteem and I'm sure that a month or two wouldn't have done that. And he feels that way too. He had friends who have gone through other programs and recognized from their experiences that he's getting more of what he needs from Straight.

I read an article in a pediatric journal by Dr. Richard Schwartz (Medical Advisor at Straight, Greater Washington,) when we were still floundering around trying to figure out what was going on. He very concisely listed the behaviors that indicated substance abuse, and of course they were very familiar to me. I actually called him and said "I'm desperately trying to find out what's wrong with my son. We've been to counselors, we sent him on a wilderness survival

trip, and nothing seems to be working. What you said in your article really fits." He was kind enough to talk to me and although he couldn't make a diagnosis over the phone 3000 miles away, he did give me some encouragement in the feeling that this probably was the nature of the problem.

Was this the first time you came across information like this?

It really was. I'm sure there have been other articles in pediatric literature, but his article was very concise and really dealt with the behaviors. In looking back, I think most of the other articles dealt with the physiological aspects of drug use.

You saw nothing else besides medical literature — newspapers, magazines — nothing that helped you?

No, not during that time.

Anyway, that planted the Straight name in my mind. Dr. Schwartz didn't talk to me about Straight, but the credits of the article mentioned his relationship with the program.

By this time we were looking for treatment — actually we were looking for a way to get Jim out of our home, to be frank. Things were intolerable by then, and we knew we couldn't handle it anymore. My husband and I were exhausted from worry and lack of sleep and the whole family was suffering.

We came down to two choices, one being a boarding school which assured us there were no drugs there. We still didn't understand chemical dependency but knew we had to separate Jim from drugs. We came very close to sending Jim to this boarding school.

I took a day off from work — this was the

"Jim . . . was really in a chemical stupor most of the time."

day we had said a decision was to be made. I called a number of local treatment programs with a list of concerns I felt needed to be addressed. I wanted him to cope with life without drugs, of course, but another major concern was that his whole lifestyle be addressed. I felt that if he came through treatment and didn't change his social orientation and appearance, that it would be very difficult for him not to use again. I had experienced that with some of my patients who had been through treatment.

I had read Robert Dupont's book (*Getting Tough on Gateway Drugs*) and he mentioned Straight in his treatment chapter, so I decided to call Straight and get some information from them. I called the St. Petersburg program and went through my list of concerns, and every concern I had was very satisfactorily addressed. By the time I got off the phone I was convinced that Straight was the place for Jim. I didn't even

stop to think about the distance — I was so relieved to hear that there really was someone addressing the problems that worried us.

How long has Jim been in treatment?

About nine months. He came into the program when he was 15 and a half. The most difficult experience I had was leaving him here.

Did he know he was coming to Florida for treatment?

We had made all the arrangements, but because of his behavior and unpredictability we didn't tell him in advance. We were afraid he'd take off. We awakened him and told him that we were concerned about him

"... the two young men who helped with our admission . . . looked fantastic to me!"

and the family and that we couldn't continue the way things were. And that we'd made an appointment for an evaluation at a treatment program. That didn't surprise him, since we'd been to two other programs for evaluation. We were quite committed to leaving him here, but we also wanted to see for ourselves what it was going to be like.

We had him get up, get dressed, and we got on the airplane and came to Florida. And the following day we were in an admission evaluation at Straight. Of course the admission counselor confirmed that Jim was chemically dependent and told us and him that he definitely needed treatment.

We were reassured by what we saw at Straight, and that there was an immediate confirmation of what we had thought to be true. I was very impressed with the two young men who helped with the admission. They described their experiences with drugs and how they were doing in treatment. They looked fantastic to me! I thought that if we could come away from treatment with Jim looking like that and able to communicate that way, it would all be worth it.

Over the past months we've experienced that. We've seen fantastic changes in Jim. The real person is coming out again. We feel that it's saved his life, and our lives in a way. We've seen him emerge from the stupor he was in — it's hard to believe that we didn't see it at the time, but the changes were gradual. By the time we got him into treatment he wasn't functioning or thinking clearly at all. He was really in a chemical stupor most of the time. I think in many ways he's far ahead of where he was before he began using drugs — not only the three years of maturing he missed out on, but he has the self-confidence that I'm not sure he would have ever had without the help of these past months.

Have you commuted between Seattle and St. Petersburg during his treatment?

Yes, we did. We came to Florida about once a month to participate. His brothers and sisters have been here twice, because of the distance we couldn't bring them each time.

We're involved in trying to get a Straight program in the Seattle area. There are now seven families from the area who've been to Straight. We'd love to have a local program — the siblings need to be involved in the treatment process. But even without having been able to benefit from that part of the program totally, it's been a great help to us.

From your experience as a mother and pediatrician, what advice would you offer to other parents?

I strongly advise other parents to take any alcohol or drug use seriously. Don't be led to believe that it's just teenage experimentation or a phase your child is going through. Believe me, any evidence you do see is only the tip of the iceberg.

Also, make sure that any professionals you consult are familiar with teenage drug use and chemical dependency. Your pediatrician should include alcohol and drug use in the history he takes and if any testing is done, the lab needs to be aware that they're testing an adolescent for evidence of any drug use. You may have to search a bit to find knowledgeable professionals, but the effort is worth it.

A positive urine test can be very helpful, particularly in overcoming denial. The timing is important — if you suspect weekend drug use, collect the sample on Monday morning. Or if you suspect the child is getting high during school, when he or she gets home in the afternoon would be a good time. I'd be wary of at-home test kits — although I've had no personal experience with them. Professional testing labs use sophisticated equipment that perform complicated tests — I don't see how an at-home test can duplicate that. Remember, the urine test is an aid, it's not the whole answer. (Some kids have stopped using marijuana, because it's easier to spot in urines than other drugs. So they do alcohol or some other drug instead.)

Lastly, join a support group like Tough Love or Al-Anon, even before you're sure that your child is using drugs. Overcoming denial is the toughest part, and the support and experience you'll gain from the group is invaluable. They'll know local professionals knowledgeable in chemical dependency, where to go for help or guidance — and just knowing that you're not alone is really the biggest help of all.

Footnote: Soon after talking with Dr. Woolley, her son Jim graduated from the Straight program in St. Petersburg. He is now a staff trainee at the program.

When Is a Child On Drugs?

Have you observed:

- ☐ School tardiness, truancy, declining grades
- ☐ Loss of motivation, energy, self-discipline
- ☐ Loss of interest in activities, hobbies
- ☐ Forgetfulness, short- or long-term
- ☐ Short attention span, trouble concentrating
- ☐ Aggressive anger, hostility, irritability
- ☐ Sullen, uncaring attitudes and behavior
- ☐ Family arguments, strife with you, siblings
- ☐ Disappearance of money, valuables
- ☐ Changes in friends, evasive about new ones
- ☐ Unhealthy appearance, bloodshot eyes
- ☐ Changes in personal dress or grooming
- ☐ Trouble with law, in or out of school
- ☐ Unusually large appetite, or loss of appetite
- ☐ Use of eye drops, room deodorizers, incense
- ☐ Pipes, small boxes or containers, baggies, rolling papers, or other unusual items
- ☐ Peculiar odors or butts, seeds, leaves in ashtrays or clothing pockets
- ☐ Running away

Do you sometimes wonder at the strange and unpredictable actions of your teenage child? That tendency to stare off into space? Silly, excessive laughing for no apparent reason? Does your child come in later than told, with all kinds of excuses? Or does he or she go straight to his/her room and shut the door to listen to loud, blaring music?

If your answers to these questions and the ones above reveal some doubt about your child's behavior — the reason may be that he or she is using some kind of drugs.

These behaviors occur insidiously and are often thought by many well-meaning but naive parents to be caused by a difficult and temporary phase of adolescence. It is unnecessary to actually observe intoxicated behavior at home or to find concrete evidence of drug use — drugs, drug-related paraphernalia, alcohol — in the child's possession. **THIS POINT CANNOT BE OVEREMPHASIZED.**

In the early stages of chemical dependency (see Epidemic #2, Prevention) many drug-using teenagers lead a dual life: a straight life at home and a deviant life away from home in the company of drug-using friends. Frequently, evidence is never found at home, even with daily use of mood-altering drugs.

Avoidance of the family is one of the first signs of teenage drug use. Avoidance means not only physical distance, but also avoidance of intimate, honest relationships based on sharing of feelings. The teenager will become more aloof and secretive. The parents may note that over a period of several months, their child avoids family outings, religious services, even family meals.

After some time the teenager will appear apathetic and lethargic. The frequent drug user may be so confused by his behavior that he thinks he is "losing his mind." The teenager has very little insight into the cause of his behaviors and is unwilling or unable to accept enlightenment. Uncontrollable, self-destructive behaviors such as running away, involvement in automobile accidents or suicide may seem to a chemically-dependent adolescent as the only way out.

If you do find out your child is on drugs, **DON'T BE CONNED.** Don't let them tell you they can control the drugs . . . they can't. Don't let them tell you they can stop any time they want to . . . they can't. Don't let them tell you they would never do any "hard drugs" . . . they probably will. Don't let them tell you there is nothing you can do about it . . . there is.

It is important for you to accept the fact that children cannot handle drug use. If you see the above behaviors, don't let them tell you they have just "tried" it. Drugs are not child's play.

The Drugs Children Use

Drug/Street Names	How long it lasts in hours	Health Effects	Symptoms
Alcohol	1-12	Causes depression, aggression, blurred speech, muscular incoordination. Frequent use can lead to cirrhosis of liver, pancreatitis, brain disorders, vitamin deficiencies & malnutrition.	Puffiness of face, redness of eyes, depression, disorientation, shallow respiration, nausea, cold and clammy skin. Dehydration.
Marijuana /pot, reefer, grass, THC, hash, hash oil	2-4	Can impair memory perception & judgment by destroying brain cells. Raises blood pressure. Contains more known carcinogens than cigarettes.	Euphoria, relaxed inhibitions, disoriented behavior, staring off into space, hilarity without cause, time distortion. Bloodshot eyes, dry mouth & throat.
Barbiturates, Methaqualone /quaaludes, ludes, yellow jackets, red devils	1-16	Can cause slurred speech; staggering gait; poor judgment, and slow, uncertain reflexes. Large doses can cause unconsciousness and death.	Slurred speech, disorientation, drunken behavior with no odor of alcohol. Sedation.
Cocaine /coke, snow, blow, gold dust, lady	½-2	Causes dilated pupils, increased blood pressure, heart rate, breathing rate & body temperature. Can cause seizures, heart attacks and death.	Apathy, anxiety, sleeplessness, paranoia, hallucinations, craving for more cocaine. Weight loss. Constant sniffing.
Crack Cocaine /crack, rock	5-10 min.	More & stronger cocaine is getting to the brain quicker, increasing risks of cocaine use.	Same as cocaine.
Amphetamines /uppers, speed, black beauties, dexies	½-2	Increases heart rate, breathing rate, blood pressure. High doses can cause tremors, loss of coordination & death from stroke or heart failure. Frequent use of large amounts can produce brain damage, ulcers and malnutrition.	Decreased appetite, dilated pupils, sleeplessness, agitation, unusual increase in activity.
PCP (phencyclidine) /angel dust, killer weed, crystal cyclone, elephant tranquilizer, rocket fuel	variable	Increased heart rate and blood pressure. Large doses can cause convulsions, comas, heart & lung failure and ruptured brain vessels. Users may show long-term effects on memory, judgment, concentration and perception.	Sweating, dizziness, numbness, hallucinations, confusion, agitation. Violence and aggression or silence & withdrawn state.
Heroin /Mexican brown, China white, Persian porcelain, "H"	12-24	Repeated use can lead to infections of heart lining & valves, skin abscesses & congested lungs. Can lead to convulsions, coma & death.	Watery eyes, runny nose, yawning, loss of appetite, tremors, irritability, panic, chills, sweating, cramps, nausea.
Gas & Glue /Rush, Locker Room, aerosol cans, amyl nitrate, gasoline, lighter fluid. (inhaled through a saturated cloth or in a bag covering nose and mouth.)	variable	Brain damage occurs when used over a long period of time. All these chemicals carry considerable risk, particularly of cardiac arrhythmia.	Very alert, keen senses, hallucinations, dizziness, scrambled words & disconnected sentences. Smells like whatever the child was doing.
Hallucinogens /LSD, Mescaline, Peyote, mushrooms	3-12	Dilated pupils, nausea, increased blood pressure, hallucinations, stomach cramps, blackouts. Flashbacks, a recurrence of the drug effects, may be a problem for some.	Beady eyes, nervous, erratic behavior, laughing, crying, personality changes, "sees" smells, "hears" colors. Marked depersonalization.
MDMA /Adam, Ecstasy, X-TC (A Designer Drug:-structural analogs of controlled substances.)	variable-up to days	Increased heart rate & blood pressure. Blurred vision, chills, sweating. Believed to cause permanent brain damage.	Confusion, depression, sleep problems, anxiety, paranoia, muscle tension, involuntary teeth clenching, nausea.

Source: National Institute on Drug Abuse

Straight Open Meeting 'Inspires' V.P. & Mrs. Bush

Vice President and Mrs. George Bush spent what he called "probably as inspiring a 20 to 30 minutes as Barbara and I have had in our lives" at Straight Tampa Bay on March 17, 1987. After talking privately with two young people and their parents, they attended a special Open Meeting session, which is part of the weekly agenda at Straight. Vice President and Mrs. Bush join a long list of important guests who have visited Straight facilities, including First Lady Nancy Reagan, the Princess of Wales, the First Lady of Ecuador and the Vice President of Columbia.



Vice President Bush and his wife Barbara sat with parents and invited guests and listened to Straight teenagers and their parents talk about the destruction to their lives and families from drug use. Emotions ran high as one father said angrily, "your behavior has caused me to lose all respect for you. But I want you to know you're here because we love you."



Congratulating one young person for his courage and progress, Bush said, "it's (the drug problem) got to be solved by what we've seen here today. By faith, by love of family, and by young people determined to just say no."



"I don't see why there's a dry eye in the house," Bush said, after listening to the teenagers and parents speak. "Here, in places like this . . . lies the answer," Bush said, praising the commitment and determination of Straight's young people and families, "The education of the greatest group of young people in the world. Making them understand that there is no happiness in narcotics. Happiness lies in faith and the family."

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• EPIDEMIC . . .

No. 8

Straight talk about kids, drugs and families from Straight, Inc.

MARIJUANA



Marijuana. Everyone's heard of it, and many of you may have tried it or use it now. It's everywhere — almost like alcohol, except it's illegal. Unfortunately that attitude is widespread and marijuana has become accepted as a "soft" drug — differentiated from "hard" drugs like cocaine or heroin. "Many physicians and parents, aware of the widespread use of marijuana and alcohol by teenagers, have come to accept such use as a part of growing up. Their hope is that children will not abuse the drugs, but experiment wisely. Many parents, acknowledging their children's sexuality, have come to believe that most children will dabble some with sexual intercourse. Not knowing how to prevent such indulgence, parents may grudgingly accept it as inevitable.

Accepting drug use as normal obviously makes diagnosis of abuse difficult, if not impossible. When admission of occasional intoxication is seen as acceptable, early diagnosis of dependency will most often be missed."

What is marijuana?

Marijuana (grass, pot, weed) is the common name for a crude drug made from the plant *Cannabis sativa*. The main mind-altering (psychoactive) ingredient in marijuana is THC (delta-9-tetrahydrocannabinol), but more than 400 other chemicals are also in the plant. A marijuana "joint" (cigarette) is made from the dried particles of the plant. The amount of THC in the marijuana determines how strong its effects will be.

The type of plant, the weather, the soil, the time of harvest, and other factors determine the strength of marijuana. The strength of today's marijuana is as much as ten times

greater than the marijuana used in the early 1970s. This more potent marijuana increases physical and mental effects and the possibility of health problems for the user.

Hashish, or hash, is made by taking the resin from the leaves and flowers of the marijuana plant and pressing it into cakes or slabs. Hash is usually stronger than crude marijuana and may contain five to ten times as much THC. Hash oil may contain up to 50% THC. Pure THC is almost never available, except for research. Substances sold as THC on the street often turn out to be something else, such as PCP.

Where does it come from?

In 1983 an estimated 12,600 to 15,000 metric tons of marijuana was available in the United States. Of that amount, Colombia supplied an estimated 59%. The remainder came from Jamaica (13%), domestic production (11%), Mexico (9%) and other minor suppliers (8%). While foreign supplies remained relatively stable, production from domestic sources decreased about 26% from 1982 levels. This reduction is believed to be the result of expanded domestic eradication efforts. A positive commitment to eradication is clearly being demonstrated in the United States and Mexico, with Colombia also making efforts. However, the potential exists for Jamaica and other countries to expand production.

Who uses marijuana?

An estimated 20 million people in the U.S. use marijuana once or more each month, according to the most recent national survey. The use of marijuana among young people (age 25 and under) has continued to decline gradually since 1979, but in 1982

"Marijuana . . . the most commonly used illicit drug in the United States."

(cont. on pg. 2)

Marijuana (cont. from pg. 1)

there was no change in use by adults 26 and older. As the most commonly used illicit drug in the U.S., marijuana can be found throughout the nation, in rural areas as well as in big cities.

Daily use of marijuana by high school seniors, which had been as high as one in nine in 1978, is now at approximately one in 18. The annual surveys since 1979 reveal a number of major changes in the attitudes of those young people toward marijuana. In the 1983 survey, seniors were more concerned about the health consequences of regular marijuana use and were more likely to feel the disapproval of their peers if they used marijuana. Also reflecting the change in attitudes, both seniors and adults questioned in different parts of the U.S. favor stricter enforcement of laws against marijuana.

The reported change in attitudes suggests that strong reinforcement of prevention and education efforts could produce a significant reduction in marijuana use. The continued decline in marijuana use among younger persons may also lead to declines in the use of other drugs in future years. Recent research has indicated that by the time youth reach their mid to late twenties, early users of marijuana are almost twice as likely to use psychoactive drugs as non-marijuana users. Research also shows that, while youthful experimentation with cigarettes and alcohol does not automatically lead to marijuana use, those who do use marijuana usually have started with cigarettes and alcohol.

What are some of the immediate effects of smoking marijuana?

Marijuana is usually smoked in either "joints" or pipes. The smoke is held in the lungs and absorbed into the bloodstream just like tobacco smoke. It may also be eaten, such as in "grass" brownies. When smoked, effects occur immediately and last for 1 to 2 hours. When eaten, it may take an hour or more for the effects to appear and they may last for several hours. These immediate physical effects include a faster heartbeat and pulse rate, bloodshot eyes, and a dry mouth and throat. No scientific evidence indicates that marijuana improves hearing, eyesight or skin sensitivity.

"The effects of marijuana can interfere with learning . . ."

"Users report the main psychic effects are mild euphoria, changes in perception (heightened appreciation of sounds and colors, for example), and an apparent slowdown in the passage of time. Users may laugh frequently, become hungry and thirsty, or engage in disjointed conversations with unconnected thoughts and speech. Side effects include an increased heart rate, reddened eyes, and drowsiness. Experiments have demonstrated disturb-

ance of short-term memory (forgetting what was just said, or what one just learned) and impairment of perception, coordination and motor skills, including skills needed for safe driving. Panic reactions are occasionally reported, with feelings of persecution, confusion, and hallucination, but these are infrequent."²

"... the strength of today's marijuana is as much as ten times greater than in the early 1970's."

What about long-term effects?

Long-term regular users of marijuana may become psychologically dependent. They may have a hard time limiting their use, they may need more of the drug to get the same effect, and they may develop problems with their jobs and personal relationships. The drug can become the most important aspect of their lives.

One major concern about marijuana is its possible effects on young people as they grow up. Research shows that the earlier people start using drugs, the more likely they are to go on to experiment with other drugs. In addition, when young people start using marijuana regularly, they often lose interest and are not motivated to do their school work. The effects of marijuana can interfere with learning by impairing thinking, reading comprehension, and verbal and mathematical skills. Research shows that students do not remember what they have learned when they are "high."

In addition to being a crude drug with many chemicals, marijuana differs in another important aspect from all of the other psychoactive drugs. All the others are water-soluble and excreted from the body relatively rapidly. By contrast THC is lipid-soluble and is retained in the body for a relatively long period of time . . . it is stored in places where lipids are found, such as the brain, the lungs, the testes, the ovaries, and elsewhere throughout the body. In other words THC may accumulate.

The size of the person, his fat metabolism, his ratio of fat to lean body mass, and other factors affect the rate at which he excretes lipid-soluble material, and half-life may vary markedly from person to person.

The problem of being unable to eliminate THC may be a blessing when viewed another way. This property makes it possible for a pediatrician to screen the urines of children who are not high, but who show evidence of drug use. Denial of use is so prevalent and usage rates so high that the urine screen can be a most valuable tool.³

In response to the recent growth of marijuana use, several recent prestigious commissions have surveyed the evidence on marijuana's effects. These reviews broadly agree on the following points:



MARIJ
More than a haw



*Marijuana smoke has a composition very similar to cigarette smoke. Since long-term daily tobacco smoking can cause pulmonary disease and lung cancer, daily marijuana smoking probably poses similar risks.

*Marijuana smoking temporarily increases the workload of the heart. These effects pose risks for persons with cardiovascular disease. Many heart weaknesses in children and adolescents are not detected until later in life. Whether increasing marijuana use among youngsters will precipitate earlier manifestations of latent heart defects is an open question.

*Marijuana use may reduce the body's immune response to various infections and diseases. Because marijuana accumulates in the fatty membranes of the body cells, it affects the entire cellular process. Although more years of research are needed to establish conclusive findings, there is increasing evidence that marijuana use reduces or alters fundamental cellular defenses against disease.

*Heavy use of marijuana decreases the levels of sex hormones in males and females. Marijuana's depressant effect on the endocrine or hormonal system poses one of the greatest risks to children and adolescents, for a healthy balance of hormones is crucial for normal physical and emotional development in young people. Some scientists speculate that the chemical structure of THC may cause it to act as a "false hormone," interfering with aspects of normal hormonal function.

*Marijuana reduces the level of sperm production in men. Animal studies have also

shown that THC affects male reproductive hormones and female ovulation as well. Such phenomena could have adverse affects on reproductive systems.

*Marijuana causes short-term impairment of cognitive functions (including learning and memory). If, as contemporary reports suggest, many young people use the drug before or during school hours, it may reduce the amount they learn in school and may impair their long-term cognitive development.

*Marijuana unquestionably reduces motor coordination, tracking ability, perceptual accuracy and other functions important in driving.

Because of these and other concerns, all of the commissions recommended avoidance of regular, high-dose marijuana smoking. The U.S. commission, pointing to survey data suggesting that 9% of high school seniors smoke marijuana every day, concluded that the evidence on possible adverse effects of marijuana "justifies serious national concern."

1. Donald Ian Macdonald, M.D., *Drugs, Drinking, and Adolescents*, (Chicago: Year Book Medical Publishers, 1984), pg. 123.
2. Polich, Ellickson, Reuter, Kahan, *Strategies for Controlling Adolescent Drug Use*, (Santa Monica, CA: The Rand Corporation, 1984), pg. 15.
3. Macdonald, pp 57-58.

The following sources were used in producing this issue of EPIDEMIC:

- *Marijuana — Just say no*. Department of Health and Human Services.
- *1984 National Strategy For Prevention of Drug Abuse and Drug Trafficking*, Drug Abuse Policy Office, Office of Policy Development, The White House.
- *Parents, Peers and Pot*, by Marsha Manatt, Ph.D., for the National Institute on Drug Abuse.

What Message From the Media?

by William D. Oliver, Executive Director

Today's entertainment industry is guilty of pushing "do drug" messages through the material they produce.

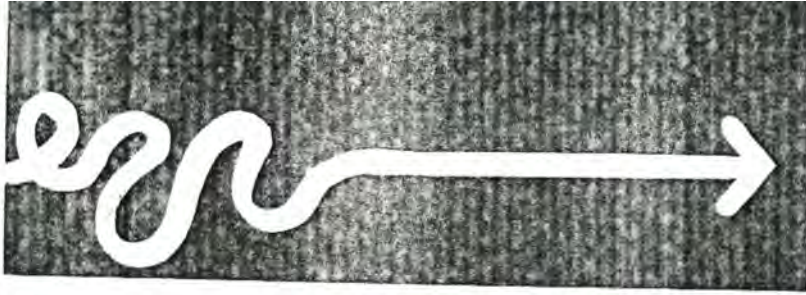
Movies such as *The Breakfast Club*, *Private Benjamin*, and *9 to 5* all showed marijuana use as accepted behavior for young people and adults. Each of these movies was highly acclaimed by the cinema critics as excellent material, a "must see." Was it absolutely vital to these films' success that the drug use scenes be included? Would the impact of any one of the movies have been lessened by their deletion? But, the motion picture industry is not alone.

The music industry is a longtime offender. Scores of music, from Heavy Metal Rock and Roll to Country and Western have offered drug use as a way to feel good, get through the day, and solve your problems.

Many television programs and commercials depict alcohol as the key to relaxation and good times. The ultimate reward for a deed well done is a Bud or a Heineken. Alcohol is depicted as a necessity for enjoy-

ment of a social gathering. Problems can always be alleviated by partaking in some wonderful spirit as presented by our nation's advertisers. We live in a society that views feeling good as essential. Feeling bad, for whatever period of time, is not acceptable. Too much emphasis is placed on feeling good through chemistry. This emphasis is most strongly reflected in those mediums that seek to please and entertain the American public. We are critically close to developing a generation of young people who know only chemical means of dealing with their emotions. A method that is a short-term, no-win route to self-confidence and clear thinking.

I applaud the efforts of many members of the entertainment community who are seeking to remove the "do drugs" messages from their productions. Many television shows no longer depict characters using alcohol or drugs unless it is vital to the story line. Steps such as these are important to changing the "feel good — do drugs" mindset of so many people today.



One daughter's story

My name is Pam. When I came into drug treatment I was 15 years old. By the time my parents brought me to the program I was smoking marijuana almost every day. I smoked about six or seven joints a day. I was also drinking all the beer I could get ahold of during the week. I also used hash, Rush, cocaine, ups, downs, acid, mushrooms and prescription drugs, and huffed solvents.

My parents got me into treatment after my school contacted them. I had been skipping school regularly for a long time and the school finally did something about it. I guess my parents finally had to look at the problem and do something about it too. Up until that time they had tried restrictions and curfews, but even if I couldn't go out on weekends I still went to school to meet my friends and get high. I would go in the front door when my mom dropped me off and straight out the back door to the parking lot to meet my friends.

My family was what I guess you would call a traditional, middle class family. My mom didn't work 'cause she wanted to be at home when we got home from school. Mom and dad tried to bring us up with strict morals. They were completely against drugs. I remember we used to spend a lot of time together before I got into drugs. We went on picnics and that kind of thing. We got along really well together, even though they were always strict with us.

I first started using drugs when I was eleven years old. We had just moved to a new neighborhood and I didn't know anyone. I really wanted to make some new

"... it was awfully important to me to be accepted by my new group of friends."

friends. The new group of kids that I wanted to get in with smoked pot and drank. I started with cigarettes. I refused to smoke two or three times when the kids first offered. But I finally began when they said I was chicken and that they wouldn't be friends with me if I didn't. The same thing happened with pot and alcohol. I said "no" a bunch of times. But it was awfully important to me to be accepted by my new group of friends. For about a year I used pot and alcohol with my friends when we went to parties. Not even every weekend, but every few weekends. My parents didn't know, because things were still going good at home and I wasn't skipping school so my marks were okay.

I first got into trouble when, after I had been using drugs for about a year, I had a party at my house with my drug-using friends on a night when my parents were going to be out for dinner. They came home early and found us having the party. Boy, did I get into trouble. I was about 12 years old at the time. Toward the end of that year I started to steal from my parents and my sister. Then I started shoplifting. I was arrested when I was twelve for shoplifting. Later I went to breaking and entering. I got caught and taken to the police station and fingerprinted, but I was never charged.

When I was thirteen, things really started

going down. I began to skip school and my grades dropped. I was always in a lot of trouble at home because of my grades and because I changed the way I dressed. I ran away from home one time. I stayed away for a couple of days after one big fight I had with my parents.

My first sexual experience happened when I was high on drugs and after that I really started to go way down. By the time I came into the program I had gotten really promiscuous. In fact, in order to get money for drugs I turned to prostitution at least three times. I overdosed on alcohol lots of times.

EPIDEMIC was recently awarded an Award of Distinction by the Tampa Bay Chapter of the Florida Public Relations Association for meeting its standard of excellence. **EPIDEMIC** is produced by Straight, Inc. in cooperation with Kershner, Bibber and Associates, Seminole, Florida

Subscription & Information

EPIDEMIC is published by Straight Inc. as a community service and depends on the support of families and friends of Straight. Your \$10 donation will be applied to a one year subscription and will also enable us to reach other parents and families.

- ☐ Enclosed is my \$10 donation.
- ☐ Please send me information on Straight, Inc.
- ☐ Please add the following name to your EPIDEMIC mailing list.

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(813) 577-6011

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(404) 434-8679

Straight, Inc. Washington, D.C. Area
5515 Backlick Road
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(703) 642-1980

Straight, Inc. New England
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Stoughton, Massachusetts 02072
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Straight, Inc. Michigan
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Plymouth, Michigan 48170
(313) 453-2610

Straight, Inc.
National Development
& Training Center
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STRAIGHT

WORLD OF SPORTS

DIRECTOR - WASHINGTON
C. Suzanne Hardman

June 9, 1987

Mrs. Nancy Reagan
The White House
Washington, DC 20500

Dear Mrs. Reagan:

A committee of parent volunteers at Straight, Inc. of Greater Washington is planning an unprecedented week of sporting events during the week of September 12 - 20, 1987. As parents of children with a drug problem, we are extremely grateful for your steadfast commitment to the creation of a drug-free society and your enduring support of all of us who are working toward the same goal within the Greater Washington area.

STRAIGHT WORLD OF SPORTS is a fund-raising effort by the Parents Booster Club of Straight, Inc. This event will channel the energy and vitality of sports into the struggle against drug use by kids. STRAIGHT WORLD OF SPORTS is a unique concept which will bring together celebrities, individuals and companies in a number of events.

We would be greatly honored if you accept to be honorary chairperson for STRAIGHT WORLD OF SPORTS.

STRAIGHT WORLD OF SPORTS will be comprised of the following activities: a baseball pitching clinic, a 10K run, a celebrity auction/gala dinner, a golf tournament, a tennis exhibition match, a sports fashion show/luncheon and a coaches awareness clinic. All the events with the exception of the Coaches Awareness Clinic will be conducted during the period of September 12 - 20, 1987. The clinic has been scheduled for October 6, 1987 to accomodate the Washington area coaches. Because of the complexity of the event and in order to meet the two goals set forth by the parent group - that of fund-raising and of increasing the level of awareness in the community to the drug problem by our adolescent population - we have hired Clews Communications to assist us in our efforts.


We are hopeful that you will accept this invitation. Upon your acceptance we would like your approval for the use of your name in reference to STRAIGHT WORLD OF SPORTS and your participation at some of our activities. If for some unforeseable reason you cannot join us we would appreciate your assistance by way of a letter of support to the event and the possibility of a video-tape to be shown during the Celebrity Auction. We are also extremely receptive to your personal recommendation for an honorary chairperson if you are unable to accept this invitation.

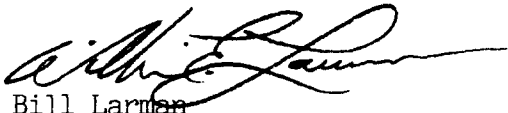
Straight, Inc. • 5515 Backlick Road • Springfield, VA 22151 • (703) 642-1980
A family oriented treatment program for drug using young people and their families

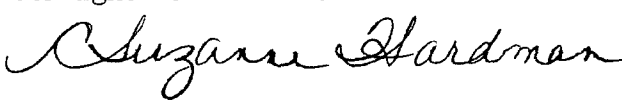
We would also like to extend an invitation to your staff to join us during this exciting week by participating in one or more of the many sports event scheduled for STRAIGHT WORLD OF SPORTS. Enclosed you will find a schedule of STRAIGHT WORLD OF SPORTS for you perusal and information. We hope that you will accept our invitation and join us for a very unique and exciting week.

As a parent group we would be greatly honored by your acceptance of this invitation as honorary chairperson of STRAIGHT WORLD OF SPORTS. We want to thank you again for you continuing support of our Greater Washington Straight.

Sincerely,


Patricia M. Louque
Chairperson
STRAIGHT WORLD OF SPORTS


Bill Larman
President
Straight Parent Booster Club


C. Suzanne Hardman
Program Director

STRAIGHT WORLD OF SPORTS

RUN FOR STRAIGHT

Date: September 12, 1987

Location: Springfield, VA

Honorary Chairperson: Congressman Frank Wolf

This activity is a 10K run and walk . It is anticipated participation will exceed 1,000 persons.

PITCH FOR STRAIGHT

Date: September 13, 1987

Location: To be announced

This is a clinic for kids and students on pitching to be conducted by Hall of Fame pitcher "Catfish" Hunter and pitcher Darold Knowles. It is intended for all kinds of audiences and we anticipate participation in the hundreds.

CELEBRITY AUCTION/GALA DINNER

Date: September 13, 1987

Location: Ramada Renaissance Hotel Dulles
Herndon, VA

This is a black tie affair where items and services will be auctioned off. Tables will be sold to corporations and individuals.

GOLF TOURNAMENT

Date: September 14, 1987

Location: Hobbits Glen Golf Club
Columbia, MD

A golf tournament which will be conducted with celebrities from the sports, entertainment and political arenas. Individuals and or companies will pay to play with these celebrities.

STRAIGHT SETS - TENNIS TOURNAMENT

Date: September 19, 1987

Location: Patriot Center
Fairfax, VA

An exhibition tennis match scheduled from 2 pm to 5pm. Network celebrities have been asked to play for a Battle of the Networks as well as sports and political figures.

SPORTS FASHION SHOW AND LUNCHEON

Date: September 20, 1987

Location: Sheraton Grand Hotel
Washington, DC

This is a fashion show luncheon with the latest fashions in sportswear and other apparel. Tickets and tables will be sold for this event.

COACHES AWARENESS CLINIC

Date: October 6, 1987

Location: Ramada Renaissance Hotel Dulles
Herndon, VA

Honorary Chairperson: Dr. Robert DuPont

A coaches awareness clinic co-sponsored by the Drug Enforcement Agency to develop awareness to the problem of drug dependency and use by athletes.

STRAIGHT WORLD OF SPORTS

July 8, 1987

JIM BROWN 60 GRAND 10K RUN FOR STRAIGHT

Date: September 12, 1987

Location: Springfield, VA - Springfield Plaza

Honorary Chairperson: Congressman Frank Wolf

This activity is a 10K run and One mile Fun Run. Presidential contenders, corporate teams, celebrities invited to participate. The goal is to raise \$60,000 through sponsors and entry fees to benefit STRAIGHT to help young people on the road to recovery.

PITCH FOR STRAIGHT

Date: September 13, 1987

Location: George Mason University, Fairfax, VA

This is a pitching clinic for young people ages 8-18 years of age conducted by Baseball Hall of Famer "Catfish Hunter" and pitcher Darold Knowles. Admission: \$15.00 per player.

CELEBRITY AUCTION/GALA DINNER

Date: September 13, 1987

Location: Washington Dulles Ramada Renaissance Hotel
Herndon, VA

A black tie dinner and auction, invitation only, with celebrity guests. It features items donated by local merchants, manufacturers and retailers as well as items provided by celebrities in the entertainment and sports fields. It is expected that celebrity guests, including political V.I.Ps. will attend this function.

GOLF TOURNAMENT - TEE OFF FOR STRAIGHT

Date: September 14, 1987

Location: Hobbits Glen Golf Club
Columbia, Maryland

A golf tournament conducted with celebrities from the sports, entertainment and political arenas. Individuals and companies will pay to play with these celebrities.

Honorary Chairman: Ken Singleton - Channel 13

The golf tournament will feature 30 foursomes and one celebrity. Each foursome will pay \$200.00 each. Companies to sponsor each of the 18 holes at a fees ranging from \$1,000.00 to \$5,000.00.

REGAL TENNIS CLASSIC - EXHIBITION MATCHES

Date: September 19, 1987

Location: Patriot Center
Fairfax, VA

Time: 2 to 5 p.m.

Battle of the Networks, with other sets played by political, sports and entertainment celebrities.

COACHES AWARENESS CLINIC

Date: October 6, 1987

Location: Washington Ramada Renaissance Hotel
Herndon, VA

Workshop sessions and luncheon for high school coaches co-sponsored by the Drug Enforcement Administration. Stress on interrelationship between athletics and drug abuse. Olympic coach Joe Newton and other celebrity sports figures.

HOW TO GET INVOLVED

We need your help in five critical areas to make the STRAIGHT WORLD OF SPORTS a success. Sponsorship of individual events through direct financial assistance, in-kind contributions, manpower, technical assistance, and active participation in the Fun Run, Jim Brown 10K Race, celebrity auction/dinner gala, golf tournament, tennis exhibition, fashion show and pitching clinic.

By attending the tennis exhibition and helping us with support activities related to the "Back to a Drug Free Future" rally, you will be helping us to carry the message to our young people that the business and volunteer leaders in the community care about helping our young people resist the pushers and users. Together we can help them resist the pressures to use drugs by leading the return to a drug-free future.

FINANCIAL CONTRIBUTIONS

Your company or organization can make a financial contribution to STRAIGHT INC: to support the activities planned for THE STRAIGHT WORLD OF SPORTS WEEK. Depending on the amount of your contribution, your company or organizations will be recognized in our program. Tickets will be provided to various events depending on the level of sponsorship. If you would like to contribute, please fill out the enclosed form or give us a call at (703) 642-1980.

MANPOWER

Each of the activities needs volunteers to help with registration, ticket distribution and sales, award presentations, and promotion. The Jim Brown 10K run needs volunteers to assist at the water tables, handle registration and time the runners at the finish line. The Regal Tennis Classic exhibition matches need people with experience as ball boys, line callers and record keepers. The Celebrity Auction/Gala needs volunteers to assist in displaying items, provide security in the viewing room, and work as assistants to the auctioneer. Scorekeepers and caddies are needed to assist with the golf tournament at Hobby's Glen Country Club in Columbia, Maryland.

IN-KIND CONTRIBUTIONS

A variety of in-kind contributions are needed. Here are some suggestions: computers and printers, diamond screens, video camera equipment and personnel, advertisements, printing tickets, fliers and posters, typesetting, storage facilities, transportation, rooms for press conferences with easy access to telephones, donations for the celebrity auction gala, such as automobiles (new and used), getaway weekends, airline trips, gift certificates and coupons, prizes for the winners of the sporting events. Also needed are items such as golf balls and tees, score cards, baseball caps, and runner numbers, tennis balls.

TECHNICAL ASSISTANCE

Your company or organization can help us by providing the use of your company's expertise in the following areas: computer operators and programmers, data entry personnel, accounting; security for the miles of dollars on the day of the run (Sept. 12) and the celebrity auction/gala (Sept. 13).

GENERAL PARTICIPATION

Your organization or company can also assist us by participating in these activities and publicizing these events in your newsletters, on billboards and bulletin boards, in ads and other in-house promotions. Encourage your membership and employees to register in advance, buy tickets for the individual events, and help distribute STRAIGHT WORLD OF SPORTS materials to the public.

Remember, we cannot do it without your help. The STRAIGHT WORLD OF SPORTS WEEK is a community-wide effort to educate adolescents and teenagers, parents and business leaders, to the dangers of chemical dependency and to provide information on rehabilitation services to the public.

Your organization's active involvement is the key. With your help, we can win the war against drugs. Families and teens in the Greater Metropolitan Washington area are looking to you for leadership and support.

CONTRIBUTORS CLUBS

AMETHYST CLUB

\$10,000 and above

Exclusive staked mile on the 10K course
Team entry in 10K run (4 people)
Table for 10 at Gala Dinner/Celebrity Auction
VIP box at Tennis Classic
One hole and 4 entries to Golf Tournament
Invitation to exclusive VIP Party
Substantial publicity ("brought to you by")
 Full page advertisement on program
 Listing in Main Program under Amethyst Club
 Listing in Dinner/Auction Program under Amethyst Club
 Unlimited programs
Plaque indicating contribution (with amethyst)
Plaque in Straight building

BENEFACTORS CLUB

\$5,000 and above

Staked half mile on 10K course
Two entries in 10K run
Four seatings at Gala Dinner/Celebrity Auction
Two tickets to Tennis Classic
One hole and 2 entries to Golf Tournament
Publicity
 One half page advertisement in program
 Listing in Main Program under Benefactor's Club
 Listing in Dinner/Auction Program under Benefactor's Club
 100 programs
Name on Benefactors Club Plaque in Straight building

SPONSOR'S CLUB

\$2500 and above

Staked quarter mile on 10K course
Two free entries in 10K run
Two seatings at Gala Dinner/Celebrity Auction
One ticket to Tennis Classic
One hole and 1 entry to Golf Tournament
Publicity
 One quarter page advertisement in program
 Listing in Main Program under Sponsor's Club
 Listing in Dinner/Auction Program under Sponsor's Club
50 programs

PATRON'S CLUB

\$1000 and above

Staked one tenth mile on 10K course

Two entries in 10K run

One ticket to Tennis Classic

Publicity

Listing in Main Program under Patron's Club
50 Programs

PACESETTER'S CLUB

\$500 and above

One ticket in 10K Run

Publicity

Listing in Main Program under Pacesetter's Club
Ten programs

CONTRIBUTOR'S CLUB

\$100 to \$500

Listing in Main Program under Contributor's Club
Two programs

FRIENDS OF THE HEART

\$1 to \$100

Listing in Main Program
One Program

APPLICATION FOR PRINTED PROGRAM ADVERTISEMENT
STRAIGHT WORLD OF SPORTS
SEPTEMBER 12-20, 1987

SPORTS EVENTS	PLACE	DATE
Jim Brown 10K Run	Springfield, VA	9/12/87
Pitch for Straight	George Mason University Fairfax, VA	9/13/87
Celebrity Auction/ Gala Dinner	Ramada Renaissance Herndon, VA	9/13/87
Tee Off Fore Straight Golf Tournament	Hobbitts Glen Golf Club Columbia, Maryland	9/14/87
Regal Tennis Classic Exhibition Matches	Patriot Center Fairfax, VA	9/19/87
Coaches Awareness Clinic	Ramada Renaissance Herndon, VA	10/6/87

COMPANY OR PERSON _____

CONTACT _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

	DESIRED AD - Program Booklet	
Full Page	\$200.00	Front Cover \$300.00
Half Page	\$150.00	Center Page \$300.00
Quarter Page	\$ 75.00	Inside Back Cover \$300.00
Bus. Cards	\$ 15.00	Back Cover \$300.00

Please attach a sharp black and white copy of the ad you wish to use.
In the absence of copy, please attach a sketch of the desired
lay-out on a separate sheet of paper.

PLEASE MAKE CHECKS PAYABLE TO STRAIGHT. FOR: STRAIGHT WORLD OF SPORTS

PAYMENT RECEIVED: \$ _____

SALESPERSON _____ PHONE NO: _____ TEAM _____

-----CUT HERE FOR RECEIPT-----

STRAIGHT WORLD OF SPORTS

DATE: _____ DESIRED AD SIZE/SPACE _____

CHECK # _____ AMOUNT _____ CASH _____

SIGNATURE OF SALESPERSON _____

STRAIGHT

WORLD OF SPORTS

DIRECTOR - WASHINGTON
C. Suzanne Hardman

SPONSOR INFORMATION FORM

I agree to be a sponsor of STRAIGHT WORLD OF SPORTS
\$ _____ Donation

Sponsors will be listed in our program and in all promotional materials developed for STRAIGHT WORLD OF SPORTS. Sponsors who contribute \$1,000 or more are entitled, depending upon their contribution, to a number of reservations at the Celebrity Gala Auction to be held Sunday, September 13, 1987 at the Ramada Renaissance Hotel - Washington Dulles, Herndon Virginia.

Please list as: _____
(Please indicate how you would like to be listed in the program.)

Contact Person: _____ Title: _____

Name of Company: _____

Address: _____

City, State, Zip: _____

Phone: _____

_____ Enclosed is My Contribution

_____ Please Bill Me

_____ I am unable to be a Sponsor but would like to be recognized as a Contributor. Enclosed is our contribution of \$ _____. (Please indicate above how you would like to be listed in the program.)

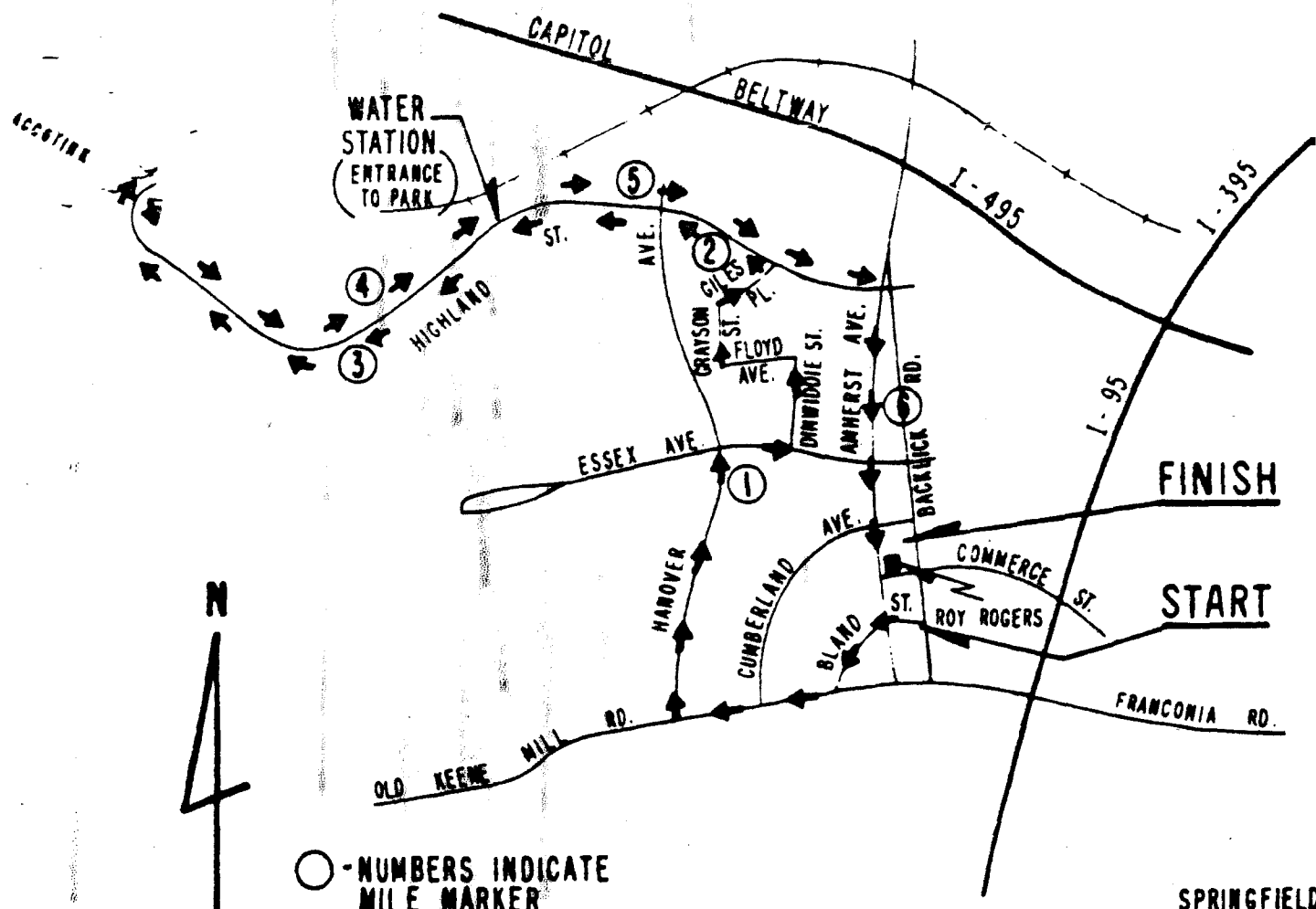
(Please make check payable to STRAIGHT)

YOUR CONTRIBUTION, WHILE ENTITLING YOU TO ATTENDANCE, DOES NOT CONSTITUTE A RESERVATION AT THE CELEBRITY GALA AUCTION. YOU WILL BE CONTACTED IN AUGUST TO MAKE RESERVATIONS FOR THE PEOPLE ATTENDING AS YOUR GUEST

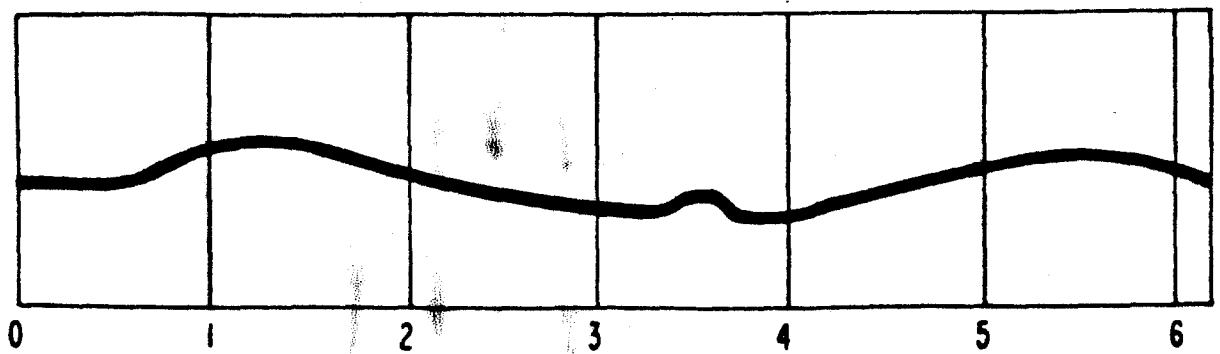
By: _____ Date: _____
(Authorized Signature)

Sport Event:(if sponsoring a specific event) _____

Straight, Inc. • 5515 Backlick Road • Springfield, VA 22151 • (703) 642-1980
A family oriented treatment program for drug using young people and families



○ - NUMBERS INDICATE MILE MARKER



COURSE ELEVATION

STRAIGHT

JCAH ACCREDITED

DIRECTOR - WASHINGTON
C. Suzanne Hardman

GREATER WASHINGTON STRAIGHT, INC.

FACT SHEET

- Greater Washington Straight services Virginia, Maryland, the District of Columbia, West Virginia, North Carolina, Delaware, Pennsylvania and New Jersey.
 - The Greater Washington Straight averages 250 clients.
 - The Greater Washington Program opened in October 1982.
 - Straight's success rate is more than 60 percent. It is among the highest in the country.
 - The average age of a Straight client is 17 years old. The age range for clients is 12 to early 20's.
 - The Program averages a cost of \$25. a day.
 - Treatment in the Straight Program ranges from 11 to 18 months. The average length of treatment is 1 year.
 - The Straight Program is based on the 12 Steps of Alcoholics Anonymous.
 - There are currently 8 Straight Programs nationwide:
 - Tampa Bay, Florida (National Headquarters)
 - Orlando, Florida
 - Greater Washington (Springfield, Virginia)
 - Boston, Massachusetts
 - Detroit, Michigan
 - Atlanta, Georgia
 - Dallas, Texas
 - Cincinnati, Ohio
- More Straight Programs are scheduled to open within the year.

Straight, Inc. • 5515 Backlick Road • Springfield, VA 22151 • (703) 642-1980
A family oriented treatment program for drug using young people and their families.

Straight Inc. Uses Teens to Help Turn Peers Against Drugs

By CINDY STAUFFER
New Era Staff Writer

"I hate you," Todd told his parents. "I never want to see you again."

Maryann and Barry had involuntarily committed their 17-year-old son to a drug rehabilitation program for adolescents called Straight Inc., located in Washington, D.C.

It was the most wrenching thing they had ever done.

But Todd had been inhaling freon, smoking marijuana and drinking alcohol. Formerly a good student and a loving son, he had lost interest in school. He had become violent, abusive and suicidal.

Their family life was a nightmare.

After three weeks in Straight, Todd hugged his mother and stepfather.

"I love you," he said. "Thank you for saving my life."

Barry and Maryann, who asked that their last name not be used, shared their experiences with Straight Monday night at a meeting of the Manheim Chemical People at Manheim Central Junior High School.

Straight, located in eight cities throughout the country, has chosen Lancaster County as the location for its next treatment facility. The non-profit program will first open a referral center and then, after \$435,000 is raised, the fa-

cility.

An adolescent is usually enrolled in Straight for 12 to 18 months, at a cost of \$20 per day. During that time, the teen goes through the program's five phases, gradually earning more responsibility and freedom.

The adolescents stay with families of children who have progressed to one of the final phases. Much of the counseling is done by the teens in the program, "which was perfect for our son," Maryann said. "When he went into the program, he had no regard for adult authority. The other kids knew all about the conning, the manipulation and the lying. He couldn't con them."

Another important aspect of the program, Maryann said, is that it involves the whole family in counseling.

"We know that if we are not in treatment with our son, he'd be coming back to the same parents. Now we understand his disease, the struggle he's going through. We've become his number one support system."

The family therapy taught Maryann how she had "enabled" her son's drug problem by making excuses for him. But it also taught her not to feel guilty.

"It was his choice, not mine," she said. "He chose drugs as a way out."

Among the dozen or so people at the Chemical Peo-

ple meeting was a young woman named Ruth, who described herself an "ex-junkie." Although she graduated from a drug treatment program and has "been clean" for five years, she said her parents still feel responsible for her drug problem.

"My father's from the old school," she said. "He takes the guilt of what I do. There are people out there who believe that you didn't bring up a kid right if he has a problem like that."

She admitted, "The guilt trips you can play on your parents are unreal. You can be so manipulative. You know all the right buttons to push."

What finally saved Ruth, she said, was facing her problem. "The bottom line is you have to get honest."

Todd has been in Straight for 10 months and will probably remain in the program another five months. Maryann and Barry are jubilant about the progress he has made but realize he still has a struggle awaiting him.

"It seems we live in a gray world today," Barry said. "Our kid's philosophy was that it's OK if you don't get caught, then you're a smart guy. There was never any question of right or wrong."

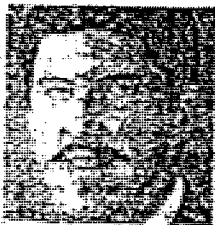
"We learned you need to give kids a very clear message: drugs are wrong."

The Dallas Morning News

Friday, September 12, 1986

VIEWPOINTS

Drug war must begin at home



MEL RIDDILE

The use of illegal drugs in our country is now the highest in the world. One of every four Americans is an occasional or frequent abuser. (Notice I say "abuser," not "user"; any use of an illicit drug is an abuse.) Twenty-three million Americans regularly use marijuana; 5 million use cocaine.

Among our young, the situation is even more alarming. Two of every three teenagers have tried an illegal drug before leaving high school. Half of all people between the ages of 11 and 17 are moderate to heavy drinkers. And the situation is getting worse. There are 5,000 first-time cocaine users every day, and they are getting younger all the time. Twenty-eight percent of the young people entering high school don't finish primarily because of a high level of drug abuse.

That's why the initiatives now coming out of Washington are so important. If all they do is raise our nation's drug-awareness level, they will have served a noble purpose, even though that is probably all they can do.

In the fight against teen-age chemical dependence, the real war zone is the home. And the best form of prevention is intervention. Parents must come between their children and drugs early and often.

Ideally, the battle against drug dependence should begin before age 11 — before your child has experienced drug or alcohol activity. It's then that you must let him or her know that you are aware of their culture and the temptations they face. Set rules, expect them to be followed and then check to make sure they are. Take a restrictive look at your child's friends, restrict the places he or she is allowed to go, keep them away from "drug" events such as rock concerts and unchaperoned parties.

Even if your child is "dabbling" in drugs — you still have time to act on your own. Distasteful as it seems, it may become necessary to search his or her room, open mail and listen in on phone calls. Be open about what you are doing — and why.

If your child begins to seek drugs actively, seek professional help, just as you would with any other chronic, progressive — and terminal — disease. Chemical dependence is not "just a phase." It will not "just go away." The end result of continued drug use is the emotional, spiritual or physical death of your child.

With their political initiatives, President Reagan and Congress have taken the first vital steps toward treating our nation's drug epidemic. They have admitted it exists. They have overcome denial. They have put out the word they intend to intervene. The same message has to hit home.

Dr. Mel Riddile is executive director of Straight, Inc., Family Treatment Program, in St. Petersburg, Fla.

ABOUT S T R A I G H T

STRAIGHT, INC. is a family treatment program based on the 12 steps of Alcoholics Anonymous, intensive therapy, and a highly structured approach which enables young people to progress through the five phases of the program to Commencement and Aftercare.

PHASES OF TREATMENT:

- First Phase** The young person is clinically assessed, and a treatment plan developed. The youth begins to confront his chemical dependence and explore emotion and thought processes. The first phase youth lives with a family that is responding successfully to treatment, and is engaged in therapeutic activities from 9 AM to 8 or 9 PM Monday thru Saturday, and 2 to 9 PM on Sunday.
- Second Phase** The youth returns home and begins to work with his or her family to heal the damage caused by chemical dependency. The therapeutic schedule remains as intensive as it is in the First Phase.
- Third Phase** The young person continues to open doors into the world that had been shut by chemical dependency. School and/or work becomes part of the daily routine again. For the first time, he or she learns to "say no" to drugs and negative peer influences. In the afternoons, evenings, and weekends, the youth returns to Straight for therapy, support, and structure.
- Fourth Phase** Straight now begins to help the young person focus on developing constructive use of leisure time and healthy friendships. He or she is now able to engage in structured recreation with family and friends in the Straight Program. The youth is now engaged in structured therapy on three weekday afternoons and one weekend day.
- Fifth Phase** Having completed the tasks of therapy, participated in the restructuring of the family, and maintained a drug/alcohol free lifestyle, the youngster is now preparing to re-enter society. He or she has demonstrated a healthy, independent lifestyle. Fifth phase clients now begin to help other youngsters who are just beginning to become involved in the Straight experience. From now until Commencement, the youngsters spend three afternoons in therapy, and begin to experience the benefits of their hard won freedom.

The Straight Program takes 6 to 24 months to complete; most young people complete it in 10 to 14 months. The program emphasizes the personal recovery of each youngster as well as family participation. A variety of services are offered to the client and his/her family, including group, individual, and conjoint family counseling. Program counselors are trained professionals. Initial assessments and special treatment issues are conducted and monitored by a team of two psychiatrists and a psychologist. Trained paraprofessionals assist in the daily operation of STRAIGHT, under the supervision of Program Counselors.

Underlying this sophisticated clinical guidance, however, are three simple and effective concepts: "KIDS HELPING KIDS" "PARENTS HELPING PARENTS" "FAMILIES HELPING FAMILIES"

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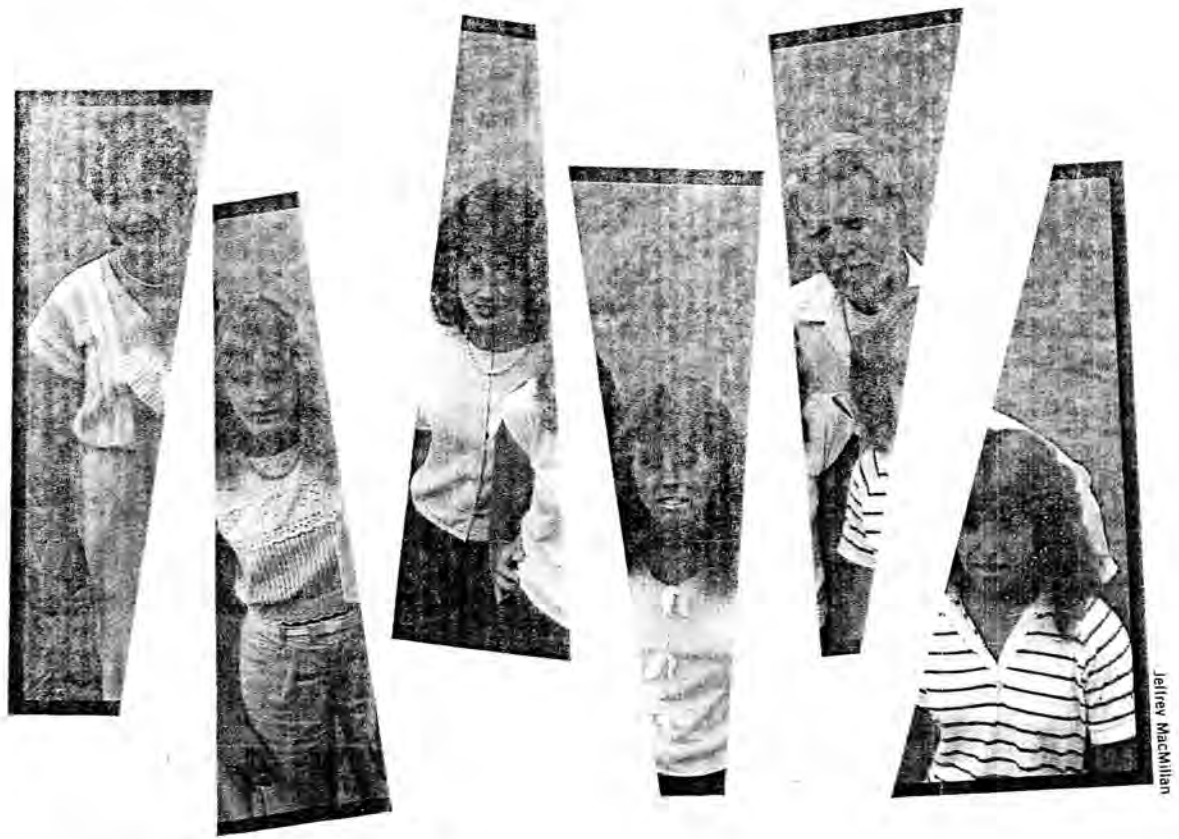
THE ORDEAL



Jeffrey MacMillan

OF AN AMERICAN FAMILY

BY PATRICK PACHECO



This is the story of a family that came apart with much pain, and came together with much love. It is a story you won't forget.

It was a beautiful spring day five and a half years ago, and Jean Richwein spent most of the morning playing with the puppy instead of doing housework. Her four daughters, aged eight to fourteen, loved animals, and the Richweins' house in a suburb of Baltimore was home to a large menagerie.

Karyn, the eldest, said she wanted to be a veterinarian and continually dragged home wounded animals. Jean, thirty-seven, a registered nurse, tended their wounds before trying to find them homes.

Thinking about Karyn, Jean wondered why lately everything was becoming such a battle with her. Just that morning, Karyn had argued endlessly because she wanted to wear a Black Sabbath rock band T-shirt to school. Muttering darkly, she'd finally left wearing the oxford cloth shirt Jean had laid out.

The telephone ring disturbed Jean's thoughts, and she almost tripped over the puppy on her way

to answer it. Her pensive mood quickly turned to disbelief, then shock, as she listened to her caller. It was a woman from the vice-principal's office at Karyn's high school.

"Mrs. Richwein, we believe your daughter has ingested a dangerous substance. Please come to the high school as soon as possible."

The words burned in Jean's ear, and her legs buckled into a kitchen chair. Trembling, she misdialed her husband's office twice before she got through. But Roy, thirty-nine, an engineer, wasn't in. She fumbled for the car keys and raced to Mount Hebron High School in Ellicott City, Maryland, a small, historic town. She prayed aloud the entire way in a quavering voice. "Please, God. Please make it a mistake. Not Karyn. Not my Karyn."

Karyn was in the gym teacher's office, slumped in a chair. She was conscious, but her eyes were unfocused and she could barely stand. Jean, from her experience as a

nurse, recognized the symptoms of a drug overdose.

The vice-principal explained that Karyn had left the school grounds with her friend Sally. When she returned, it was obvious that she had taken something.

"Why did you do this, Karyn?" Jean asked more loudly than she had intended. "Why?" It was only much later that Jean realized why Karyn's clothes looked so odd: Jean could see Karyn's Black Sabbath T-shirt showing underneath her button-down shirt.

Once home, Jean learned from Sally's mother that the girls had discovered a bottle of Demerol, a potent painkiller, in the medicine cabinet in Sally's home. Karyn had taken four hundred milligrams, a potentially fatal dosage for a young girl. Jean immediately phoned the doctor and described Karyn's symptoms. The pediatrician was reassuring: "Drug reactions vary from individual to individual. It appears

that it would take a much larger dose to slow your daughter's racing motor, Mrs. Richwein." Watching Karyn playing with the puppy, Jean had to agree that the effects were wearing off.

"Mommy, do you have to tell Daddy?" Karyn asked, frightened. "He'll be angry and won't speak to me."

Jean dreaded telling Roy about the overdose. He did not come home until late that night, after Karyn and the other girls had gone to sleep. As he was undressing for bed and discussing his day, Jean interrupted him with the terrible news. He continued to undress in silence after his wife finished.

"Well, aren't you going to say anything?"

"I'm tired," Roy said curtly. "I've had a tough day. I'm going to bed."

"Your daughter almost died of an overdose and you have nothing to say to her?" she demanded. "What's your responsibility in all of this?"

Roy felt powerless and hated that feeling more than anything else in the world. It was important for him to always be in control—of his work, his emotions, his family.

Jean woke Karyn up and brought her into the room, and Roy recognized in her young face the fear with which he had always faced his own father. He wanted to say so many things to her: "Please don't hate me. I do love you. Please, please don't ever do it again." But all he could do was embrace his weeping daughter. For the first time, Jean saw tears running down her husband's cheeks. She left them alone and went out on the deck adjacent to the bedroom. She knew that though there were problems in their marriage, she would never love Roy as much as she did at this moment.

The day after the overdose, Jean and Karyn, who had been suspended from school for the rest of the week, painted the outside of the house. It gave them a chance to talk, and Jean prided herself on what she thought was an open, honest relationship with her daughter.

"Have you ever smoked marijuana?" asked Jean.

"No," replied Karyn too quickly. "Well, yeah, but only once. Mom, it's not so bad, is it? Everybody says it isn't any worse than alcohol."

"Honey, people will always find reasons to do what they want to do," Jean answered. "It doesn't make it right. Marijuana, alcohol, all drugs are bad. Please promise

me that you'll never do it again."

Karyn promised.

"My promise lasted for five days, then I started smoking again. I was twelve when I took my first puff of pot. By the time I got to Mount Hebron, I did drugs almost every day—mostly pot and alcohol. I was terrified of going to high school. I thought nobody would like me. Then I discovered if you did drugs, you were cool. On the morning I overdosed at school, first I took the pills at Sally's house, and when nothing happened, I took a couple more. Then later, we drank some Jack Daniel's. We made it back to school, but the next thing I knew I was on the floor and it felt like I was going to die."

Even though Karyn had promised not to take drugs again, the Richweins took her to a drug counselor recommended by the high school. The counselor was reassuring. "Mr. and Mrs. Richwein, your daughter doesn't have a drug problem," she said. "She's just experiencing the normal adolescent emotional difficulties."

Karyn was restricted for the summer because of the overdose. She couldn't go out unless either Jean or Roy was with her. Jean watched her like a hawk, surprised that she took it so well. Even though there were ripples in the seeming calm—Karyn and her mother argued incessantly over clothes and makeup—the Richweins felt good about the resolution of the crisis. Each night when Karyn kissed her parents good night, Jean whispered a prayer of thanks.

On one such summer night, Jean awakened to hear a knocking at the door. She looked out the window to see a police car parked in front of the house. It was four A.M. She felt her stomach tighten as she and Roy scrambled downstairs.

"Mr. and Mrs. Richwein," said the officer, "we have your daughter Karyn down at the station. She and a boy were picked up joyriding in a stolen vehicle. Would one of you come with us?"

"I'm sorry, officer, but you're mistaken," protested Roy. "Our daughter is asleep in her bedroom downstairs."

The officer, who had heard this response many times from other parents, insisted he was correct. Still incredulous, Roy and Jean led him to Karyn's room at the far end of the house. The *(continued on page 168)*

There was a knock at the door. "Mr. and Mrs. Richwein," said the police officer, "we have your daughter down at the station." Roy protested, "You're mistaken, officer. Our daughter is asleep." Roy and Jean led the police officer to Karyn's room. The door was locked. With a sinking feeling, they realized she was gone. Roy forced the lock and they went inside. An autumn chill blew through the open window.

AN AMERICAN FAMILY

continued from page 113

door was locked. With a sinking feeling, they realized she was gone. Roy jimmied the lock and the door flew open. An autumn chill blew through the open window.

"After I was restricted for the summer because of the overdose, I'd wait till everybody was asleep, then I'd sneak out the window. I'd go joyriding with friends, kids from the neighborhood, in cars we'd 'borrow' from our families or neighbors. We usually did drugs—a hit of speed, a tab of acid, angel dust, a couple of joints or uppers or downers.

"Sometimes I'd go out alone. See, even though I ran around with this group at school, I felt lonely. When I overdosed in the spring, not one person came to see me, and I felt bad about that. I'd go sit in a field for hours, picking out the constellations in the sky and wondering where I fit into it all. My best friend was really my sister Sandi. I turned her on to drugs when she was about thirteen, partly to keep her from snitching, but mainly because she always wanted to do what I did. She liked what I liked; she looked up to me."

Seeing the stricken look on Jean's face, the policeman sought to comfort her. "Don't worry, Mrs. Richwein, it's just kids being kids."

Kids just being kids, thought Jean as she waited for Roy to return from the precinct. How much could "normal adolescent behavior" cover? At least there weren't any drugs that night. The police told Jean that they searched the kids and the car and had found none.

Roy was seething. The sight of his daughter in the holding cell hurt and angered him. "I was too soft," he decided. He had to run a tighter ship, turn this thing around before it got out of control.

"We weren't doing anything wrong!" screamed Karyn. "It was his sister's car. Didn't you ever go out looking for fun when you were a kid?"

"You're restricted again until I tell you otherwise," shouted Roy. He stormed off to bed, leaving Jean alone in the kitchen with her daughter.

"I'm sorry," Karyn was conciliatory. She looked like a lost urchin, and Jean felt her anger melting. She thought, If only she yelled and screamed at me like she does at her father, it would be easier to discipline her. But she knew that for the next two weeks at least, Karyn would do the housework, be charming and funny, and Roy's strictness would appear even more unfair.

Upstairs in the bedroom they shared, the two youngest girls lay apprehensively awake. "I wonder (continued)

what she did now?" said nine-year-old Wendy to her older sister Dianne.

"I don't know and I don't care." The reply was cynical for an eleven-year-old. "Go to sleep, Wen." Dianne was frightened. The police and everything. She cried softly into her pillow.

The Richwein home was becoming a battlefield. The more Roy cracked down—giving Karyn more and more chores to do and curtailing her social life—the more intractable she became, and Sandi was picking up some of the same bad habits. Jean felt alone and under siege; Roy used work more and more as an excuse to stay away from home, and she resented the way he came in, laid down the law and then left it to her to enforce it.

The rifts between Jean and Roy were widening, and Karyn and Sandi, now fifteen and fourteen years old, seemed to know exactly how to drive the wedge in deeper.

"Dave pulled out a gun and pointed it at me. I was frightened but fascinated. I knew it was going to be a different kind of joyride that night. The guys were trying to impress us with how tough they were. 'We're going to rob a 7-Eleven. Wanna come?' Candy and I didn't want any part of it, so I told them to drop us off at my boyfriend Robert's house and to come pick us up only if they didn't rob the store. I was really glad Sandi hadn't come with us that night. When the car pulled up later, we saw all these cartons of cigarettes and cash in the back seat, but nobody said anything. A couple of weeks later I almost jumped out of my skin when Mom showed me a newspaper article about the armed robbery. Don't you know these guys?" she asked me. I answered something lame like, 'Yeah, what a shock! They're from such good families, too.'"

Jean was just about to go out the door when the phone rang. She'd taken the afternoon off from her part-time job at the hospital to spend several hours with Dianne and Wendy. It was their annual school field day.

The police were on the phone. They wanted her to pick up Karyn at school and bring her to the station immediately. Her name had come up in connection with the armed robbery she had read about in the papers.

Jean tried to keep her quaking voice under control. "I'm going to take you to school, but I can't stay. Karyn's in serious trouble, and I have to help her."

Wendy's large brown eyes became thoughtful. "Does this mean there's going to be a lot of yelling and crying when Daddy comes home?"

"I hate her!" snapped Dianne. "Why doesn't she go away and leave us alone!"

"Dianne!" Jean took her daughter's

face in her hands and held it close. "You don't mean that. There's not enough love in this family right now, and that's part of the problem. Please help me," she pleaded to both her daughters. "I promise you I'll make it right again, and there won't be any more screaming or yelling." As much as she meant it, the promise sounded hollow.

"I don't know what's going on, but I have a feeling you do," Jean accused Karyn as they drove toward the police station. She warned her, "If you've ever told the truth in your life, now is the time to tell it. I've always protected you, but this time it's out of my hands."

At the police station, fear erased Karyn's usually smug demeanor, and she answered the detective's questions honestly. Satisfied that she had no part in the robbery, he told Jean that no charges would be pressed.

True to her word, Jean saw that there was no more screaming and yelling at the house that night. There were a lot of slamming doors, however, and behind them, the family brooded in fear, anger and pain.

"I really felt awful when I hurt my family, especially my mom. But no matter how hard I tried to be good, I ended up making a mess of things. I'd work real hard at school and at the end of the term, I couldn't even pass gym. My parents decided that Sandi and I would transfer to Mount De Sales Academy, the Catholic school, and repeat our school year because our marks were so bad. They thought that it would get us away from the bad element, but the bad element is everywhere. I was the bad element; that's how I thought of myself.

"At Mount De Sales, I was determined to do good and even got some A's first term, then I just fell flat on my face. I felt even more worthless and hopeless. I was losing my self-esteem because of boys, too. Among the heads I hung around with, sex was expected.

"One day Sandi and I were at a party when a guy pulled out some cocaine and a needle and started to shoot up. 'Can you do that to me?' I asked him, and he said sure. It was the most incredible high, and after that I started shooting up a lot. Then I began stealing money from family and friends, small amounts that weren't noticed.

"I wore long-sleeved blouses, but I never worried about Mom finding out. I mean, who checks a sixteen-year-old girl's arms for needle tracks?"

Jean had a strong suspicion that Karyn was on drugs, but she could get no help or confirmation from professionals. After they exhausted the resources of the school guidance counselors and drug counselors, the Richweins took

Karyn to a widely known psychologist, who again tried to allay their fears. "I wouldn't be unduly worried about drugs, Mrs. Richwein," said the psychologist. "Karyn has emotional problems at school and at home. You and Mr. Richwein have to learn to let go, stop imposing your morality on her. In time, these things have a way of clearing up on their own."

But the relief that Jean felt when a professional attempted to reassure her lessened as the months went by. Whenever she brought up the possibility of Karyn's continued drug use to a counselor, psychologist or teacher, they'd dismiss the idea.

When Karyn became ill with hepatitis, Jean braced herself again for confirmation that Karyn was on drugs. She knew that hepatitis could be transmitted through dirty needles, and was often an illness of addicts. She confronted the pediatrician who had cared for Karyn since she was six. "Is there any way this is related to drugs?" she asked.

"Only insofar as it's a reaction to a prescription I gave your daughter for that bad sinus infection, Mrs. Richwein," he replied.

Jean caught his eye and looked at him directly. "I meant street drugs."

"Not to my knowledge," the doctor replied, meeting her gaze. Once again, Jean seemed to be the only one who was convinced that Karyn's problems were drug-related.

"When I was a little girl, my father took me fishing. When I saw the fish flapping in the fish box, I screamed, 'They're suffocating!' and I threw water on them so they wouldn't die. That's the way I felt on drugs—like a fish flapping and dying in the hot sun. I couldn't complete a thought or a sentence, and I felt like my head was going to split open if I didn't physically hold it together."

"One day I came home from school tripping on acid. Voices in my head were screaming how worthless I was, so I tried to drown them out by turning on my stereo real loud. Dianne came in to tell me to turn it down. I picked up a pair of scissors and threw them at her, missing her by inches. She just stood there looking at me, terrified."

Jean was furious when Dianne told her about the scissors incident. She stormed into Karyn's room and confronted her daughter. "Get out! I'm tired of your selfishness, your lack of decency or regard for me or the family or for yourself. Pack your bags and leave this house now!"

Karyn raised her arm to hit her mother, and Jean slapped her hard for the first time in her life. Her hand stinging, she left the room,

climbed five stairs and collapsed in sobs against the railing. Violence never solved anything, and she knew she had done it out of frustration and rage. Still, Jean fought back the urge to apologize. She wanted Karyn to know just how angry she was, and she resolved not to undermine her own authority as she had done so many times before.

That evening, long after everybody else had gone to bed, Jean stayed awake, lying on the living-room couch and thinking. It was there that Karyn found her mother. Karyn's face had been scrubbed clean and she wore a nightgown. Jean was always amazed at how young and innocent her daughters looked after they put away the hard, crude adult masks they wore during the day. She felt her anger melting and she opened her arms. Crying, Karyn laid her head in her mother's lap.

"Karyn, what is it?" asked Jean. She smoothed her daughter's hair as she had done so many times before.

"Mama, I think I'm going insane."

"You can tell me, Karyn. I'll understand."

Then, never once looking at her, Karyn told Jean about her drug-taking in a long, scorching litany, and concluded, "I was going to shoot up heroin this weekend. Mother, I need help."

As Jean listened quietly, she felt a nightmarish fog lift. She could see the landscape for the first time. It was a bleak landscape, but at least she felt as if she were seeing clearly. "You're precious to me, darling. I promise that your daddy and I will do everything to see that you will be well again. You never need to worry. It's all over." They lay there for hours in silence, Karyn in a fetal position on her mother's lap, until Jean went to tell Roy.

The next day, Roy and Jean called the family together and told them about the gravity of Karyn's problem. Then they decided that the best move would be to enroll Karyn in a drug-rehabilitation program as quickly as possible. There were four thousand drug programs in the country to choose from. After a couple of days of frantic phone calls, the Richweins spoke with the parents of one of Karyn's classmates, who were pleased with the progress their daughter was making at a well-known psychiatric hospital in Texas. Jean and Roy were assured that their daughter would be well at the end of the treatment. (The Richweins still had no inkling that Sandi, too, was involved with drugs.) Just before she walked through the locked doors of the drug-abuse ward of the hospital, Karyn turned to give her parents a weak smile. Jean lifted praying hands to her lips: "Dear God, help her."

"I was terrified on that first day. Everyone was staring at me as I walked down the dormitory hall with my suitcase. A guy came up to me and asked me if I had any pot. I thought he was kidding. He wasn't. I spent most of my time there high on the prescription drugs the doctors gave me."

"When I left, they put me on lithium 'to even out my emotional peaks and valleys,' they said. I left Texas with a prescription, a new boyfriend and the feeling that I was really straight because I wasn't doing street drugs."

The hospital sent Jean and Roy regular reports of the therapies and medications that Karyn was receiving on a daily basis. It took a leap of faith for Jean to be convinced that treating drug abuse with another type of drugs was going to solve the problem. But any reservations that Jean had evaporated when Karyn came home. She was better dressed and her manner was congenial. She even looked healthier. Jean thought she had her daughter back again.

Karyn and Sandi began working at a local antidrug organization that Roy and Jean had started while their daughter was in Texas. The girls spent every Friday night at the center, working as drug counselors and discussion leaders. There, two months after Karyn's return, Sandi confronted her, "You're stoned, aren't you, Karyn?"

Jean knew there was trouble again, too, and it made her feel like a fool. The replay of tensions and arguments at home took away the last vestiges of her hope. Instinct told her that Karyn was back on drugs and that Sandi was becoming deeply involved as well. While cleaning Sandi's room, she found a drawing that seemed to confirm her suspicions. It was of an eyeball dripping blood and tears.

The depth of her despair came to her one night while she waited up, as she always did, for Karyn and Sandi to return home from a double date. They were late—it was well past their midnight curfew—and she became fearful. She was shocked to find herself thinking, I hope there was an accident. I hope they are dead. Then, at least, it would all be over, finally over. At least that way she would no longer be imprisoned by hope. And she would know that nobody could hurt them, and that they could no longer hurt the family. The lights of the car interrupted her thoughts, and she felt guilty. Has it come to this? she thought.

Jean confided her fears to her husband. "I'm worried, Roy," she told him one night as they lay in bed. "I'm worried that we're not going to make it." That night Jean confided in Roy, pouring out feelings about their marriage

that she had held in check for the twenty years they had been together. She was scared. She'd never been so open and honest with him, or so vulnerable. Please don't block me out, she thought.

Roy listened and then spoke softly. "I don't know how you've put up with me all these years, Jean," he responded tenderly. "I've always been terrified that you'd leave me. I know I'd be lost." But that night they talked until dawn.

In a diary entry from that weekend, Roy wrote, "As long as my wife and I love each other, no matter what happens to the kids, we can handle it."

"Sandi and I decided to run away when I was seventeen and she was sixteen. My parents had forbidden us ever to see our boyfriends, Dan and John, again, and so, because they were being evicted from their apartment, they said, 'Why don't you come with us to California?' That morning I went into Wendy's room. I hugged her and said, 'I love you very much.' I did the same to Dianne and my mom. I knew it would hurt them, but I thought, I'm a screw-up. They'll be better off without me."

Something snapped in Jean when she received the phone call from the high school telling her that the girls had been seen leaving school in a station wagon with two young men, and that a student had overheard them talking about their plans to run away to California. How could they do this to me? thought Jean. If they really loved me, how could they do this?

After the call, Jean went up to her daughters' rooms. She ripped down rock 'n' roll posters, tore clothes off hangers, and piled books, records and magazines in a heap in the middle of the floor, as if to torch the sordid past in a bonfire. Dianne came into the room and sat on the bed, watching her mother work with increasing frenzy. She was frightened. "Mom, our whole family is falling apart."

Jean stopped and remembered the promise she had given to her younger daughters, the promise to make things right again. What am I doing?, she thought. I have a family to take care of. She embraced Dianne tightly, and they wept in each other's arms. Strengthened by prayer, Jean plotted to bring everybody back together again. That was all that mattered.

Roy's reaction to the girls' running away was different. He was overcome with a fierce anger. Running away was the final, unforgivable outrage. As Roy saw it, Sandi was just a follower, but Karyn had jerked and pulled apart their lives for far too long. I don't even want a Christmas card or a birthday card or a Father's Day card from her, he

thought bitterly.

Knowing how strongly Roy felt about Karyn's betrayal, Jean decided to argue only on Sandi's behalf. She felt that if she could convince Roy to help Sandi, eventually she could reason with him to help Karyn, too. She told him, "This is the first time Sandi has really done anything so very bad. I think she deserves a chance." Roy agreed.

This time, the Richweins decided to look into a Florida-based drug-rehabilitation program called Straight Incorporated. Staff members from Straight had spoken at the local antidrug organization. Although Straight's methods are controversial, Jean had been impressed with the program's emphasis on family participation, the use of peer pressure, and the fact that, unlike the program in Texas, Straight was totally drug-free. She had told Roy, "If we need help again, this is where we'll go."

The Richweins flew to Florida to meet with the program directors.

The counselors at Straight told the Richweins that if they could get Sandi to the clinic, they would do the rest. When the meeting was over, Jean lingered in the office after Roy left to whisper that they would eventually be bringing in two of their daughters.

Three days after the girls had run away, Jean began to get calls from Karyn. They were brief, since the girls didn't want them to be traced. They were in St. Louis, they were in Las Vegas, they had arrived in San Francisco and were staying with the grandmother of one of the boys. When Karyn called again, Jean told her, "There's a prepaid ticket for Sandi at the San Francisco airport. It can't be cashed in. If she is not on the next plane for home, Karyn, you better start running, because I'm hiring a private detective to track you down and press charges. You'll be eighteen soon, but Sandi's underage. We'll prosecute you."

"I felt guilty about Sandi, so I made sure she was on that plane. Then Dan and I took off for Los Angeles. We stayed in Venice in the garage of a house that Dan's sister shared with a bunch of rock musicians. One day, walking along the beach, I remembered the time when I was a child and we were moving from Florida to Maryland. It was dark, early in the morning, and the four of us—I was six, Sandi was five and Dianne and Wendy were babies—were lying in the back of the station wagon, our limbs all tangled and warm. I remember looking up at the stars and feeling so secure and happy. Merry Land, I thought. We're going to Merry Land. When I came back to the garage, I didn't have any drugs, so I just took out this hypo I found on the dirty floor of a closet in the house. I

stuck it in my arm, withdrew blood, and then shot it back in again. I hoped an air bubble would travel to my heart."

Back home, Jean prayed as she paced back and forth, waiting for the phone to ring. She instinctively knew that Karyn would call that night, and she was ready. She and Roy had been shuttling to and from Florida during Sandi's first weeks in Straight, going through parent orientation. They were scheduled for their last weekend. Impressed with the program and Sandi's progress, Jean convinced Roy that Karyn, too, deserved one last chance.

When the phone rang, Jean took a deep breath. "Karyn, Sandi's in a drug-rehab center in Florida. We're going to visit her this weekend. If you can get away, why don't you join us there?" she said as nonchalantly as possible. "You can visit with Sandi, and I'll bring some clean clothes you can take back to California with you."

"I'll think about it and call you back," replied Karyn. Her words were slurred and she'd dropped the phone.

How much more time does she have? Jean wondered as she knitted a scarf late into that night. She knew parents whose sons and daughters had been returned to them in coffins with an envelope of personal belongings. Drugs were such arbitrary killers.

When Karyn called back to tell her mother she'd meet them in Florida, Jean's heart didn't leap for joy; she just kept knitting quietly. A family can fall to pieces so quickly, she thought, and sometimes you can never patch it up again. Jean hoped she could pull her daughter back from the precipice on which she stood.

"Oh, my God!" gasped Jean when Karyn got off the plane at the Tampa airport. She looked like a skeleton. She'd lost twenty pounds, and dark circles shadowed her eyes. She wore threadbare jeans and plastic heels. Her bleached hair was a mess. Roy, satisfied that his daughter was on the plane, turned and went back to the car. Jean embraced her daughter warmly, feeling her ribs protruding from under her skimpy top. Then she grabbed her daughter's hand and held it tightly until they reached the motel. If I let go, Jean thought, I'll lose her forever.

The next morning Karyn was signed into Straight. When Jean came into the room to say good-bye to her daughter, Karyn indignantly said, "You lied to me!" Her mother smiled at the irony and gave her daughter the scarf she had knitted for her. "The nights can be cool." As she watched her daughter go through the doors, Jean leaned on Roy's shoulder and cried with relief and hope

for the first time in four long, battle-scarred years.

"I felt like a wild animal in a cage at Straight. I punched and kicked and screamed, but they told me that even if I ran away, they could get a court order to force me back into the program. The first couple of days, you're not allowed to say anything in group. You have to listen to other kids talk about their loneliness and their problems with drugs. I realized that I wasn't alone. For the first time I could share my feelings. After three months, I was standing up in front of the group, and the director asked me, 'How do you feel about what you've done?' And I stood there, silent. I thought about all the pain I'd caused and all the hurt I felt, and I didn't know what to say. He asked again. And all of a sudden I was hit with these emotions and feelings, and I just started crying. I cried for what seemed like hours, wave upon wave of sobs. See, I never forgave myself for anything until that moment. I was dead inside. Now I was beginning to see something green and alive within me. Then, at another group session with parents present, they passed around the microphone and my father asked me to forgive him and then he told me that he forgave me and that he loved me. 'I love you, too, Dad and Mom,' I said, and I felt beautiful and worth something, really worth something."

It's been two years since Karyn and Sandi went into the Straight drug-rehabilitation program. The Richweins live in Glenwood, Maryland, now. They have left in Ellicott City the memories that are painful to recall even now. Karyn and Sandi graduated from the program after fifteen months. Today, the girls, who still live at home, are pulling top grades at a local community college and are active in church and community affairs. But the turnaround has not been easy, and it has involved every member of the Richwein family.

Officials at Straight made it clear that nothing less than a total family commitment was required for the program to work. Consequently, while the girls were confronting their own problems, Roy, Jean, Dianne and Wendy were individually and then collectively involved in a complementary family program. The rap sessions, which took place at Straight (the organization now has a branch in nearby Virginia) and at the Richwein home, have continued each week since then.

"The most difficult thing for us to do, especially for me," says Roy, "has been to get in touch with our feelings after

repressing them for so long. We were so rigid, which is common among families with drug problems. I always thought that being open, or admitting that I was wrong, was a sign of weakness."

In the long talks he has since had with his daughters, Roy says he was stunned to discover that all through the harrowing experience, Karyn never forgot that the one time she knew that her father loved her was when he cried with her after the overdose at school when she was fourteen. "She carried this memory like some weather-beaten memento. I've since learned that sharing your feelings is the only way to show somebody that you really care. Children shouldn't have to grab desperately at brief glimpses of love from their parents," he says emotionally.

"It takes humility to admit you're powerless to deal with this problem alone," adds Jean. "I always thought I could control the problem. Then when we went to Straight, I balked at the idea that we, the family, were sick." Jean winces. "It's hard to hear that I sometimes did and sometimes may be doing things that are not in the best interests of my family. But I've learned not to be threatened if my family knows that I'm not perfect, just human."

Jean says her desire for everything to be perfect led her to cover up and to deny what was happening for so long. She says that her biggest blunder was to assume the responsibility for Karyn and Sandi's mistakes. "They never had to accept the consequences of their drug-taking," says Jean. "I did. If chores didn't get done and Roy was due home, I'd do them just to keep peace in the family. Of course I resented it, but I'd vent my frustration on Roy, not the girls. The most important lesson we've learned is that your child must accept responsibility for what he or she is doing, not only to herself, but to the whole family, and not only accept responsibility, but do something about it."

Looking younger than her nineteen years in a pink cashmere sweater and gray pleated skirt, Sandi admits that for a long time, she blamed everybody but herself for her problems. When she realized that she was doing drugs because she chose to do so, not because of her sister, or because her life was so terrible, she was able to grow beyond her bitterness and anger.

Sandi believes that the biggest mistake her parents made during her bout with drugs was to underestimate the girls' resourcefulness in keeping the truth from them. "We could play them against each other," she observes. "When they started acting as a team,

then we knew we couldn't get around that, so we ran away."

For Karyn, now twenty, accepting responsibility for what she did to her family took a long time, and the process still continues. Dressed in jeans and a sweater decorated with hearts, which she would have scorned in her drug phase, she speaks haltingly of the brutal experience that still haunts her.

She says that she regrets having irretrievably lost a whole chunk of her life to drugs. She is sorry she missed out on simple things, like her senior prom and having a girlfriend she could trust. And she has regrets about more serious matters as well, such as turning other people on to drugs.

She acknowledges that staying straight is not easy, because drugs have such a glamorous image in American culture. "It's easy to glamorize my past," she says, "but I've just got to remember the terrible feelings of worthlessness and self-hate, and I know I never want to go back to that."

Wendy and Dianne, now thirteen and fifteen, realize more than most kids their age the damage that drugs can inflict on a family. "I used to feel cheated," remembers Dianne. "I was frightened of my sisters and thought our family would never get together again. Now I think we're closer than other families because we talk a lot about how we feel."

"When kids at school talk about how cool drugs are," says Wendy, "I tell them that I don't think it's so great. It's not easy, and sometimes I chicken out and don't say anything, but I know what can happen."

For the Richweins, awareness is the safety net. "I don't think that short of keeping a twenty-four-hour watch you can prevent your child from doing drugs," says Jean, "but a parent can be better informed, more aware. Today we draw strength and courage from one another to meet the challenge of being honest and open."

The Richweins' commitment to continued growth as a family and the fight against drugs is a contract that is renewed every day. Jean and Roy believe that the worst is behind them, but they take nothing for granted. Each evening, as the family sits down to supper, everybody links hands and gives thanks, forming a family circle that is fragile yet beautiful. **End**

Note: All names other than those of the Richwein family have been changed.

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