

**DRUG-FREE SCHOOLS  
(REGULATIONS)**

The Southwest Technology Center Board of Education will enforce policies and procedures for students, teachers, administrators, and staff that clearly forbid the sale, distribution, possession, or use of all illicit drugs and alcohol on school property or at school-sponsored functions. Parents, students, and staff have and will participate in developing and supporting these policies.

Policies and procedures include the following:

1. Prohibiting the promotion, use, or sale of any illegal substance (including alcohol, which is illegal for persons under the age of 21) at school, on school property, or at school-sponsored functions. (See policy DCC and policy FNCF.)
2. Establishing and enforcing of tobacco rules for students. (See policy CKDA.)
3. Developing a clear, strong, and consistent response for any violation. (See policy FNCE and policy FO.)
4. Reporting use or suspected use of drugs by students to parents and to law enforcement officials as considered appropriate. (See policy FNCE.)
5. Helping law enforcement officials get involved in identifying and resolving the problem when applicable and appropriate. (See policy FNCE and policy CKAЕ.)
6. Using school or other facilities for student support groups such as Alcoholics Anonymous and Narcotics Anonymous for education of the same. (See policy FFB and policy GK.)
7. Enlisting the participation of students who are respected by their peers in school programs to prevent illegal drug use when appropriate.
8. Ensuring that teachers, administrators, and other staff are neither abusers of alcohol nor users of illegal drugs. (See policy DCC.)

Provisions

SWTC's Drug-Free School Program will operate under the following provisions:

1. SWTC retains control over all district property, including buildings, grounds, parking lots, and vehicles. Lockers/desks or any other property assigned to students/employees will be on a joint control basis, with the right to inspect at any time retained by SWTC. (See policy FNF.)
2. Students who are under the influence of drugs, alcohol, or other controlled substances (excluding medication prescribed by a doctor for their treatment), while on district property or involved with district activities, will be in violation of SWTC's Drug-Free Schools policy prohibiting the use of such substances, regardless of where the substances were actually consumed or used.

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

3. The unlawful possession, use, manufacture, or distribution of illicit drugs, alcohol, or controlled substances is prohibited by state and federal criminal law that contains strong penalties. SWTC will report all violations to the appropriate law enforcement authorities, including the Jackson County Sheriff's department. (See note on federal crime in information section, below).
4. Violation of SWTC's Drug-Free Schools policy by secondary students will result in notification of parents/guardians in addition to the appropriate law enforcement authorities.
5. Disciplinary actions by SWTC will be administered fairly, in compliance with federal and state statutes, and in compliance with SWTC's commitment to nondiscrimination, as established in the non-discrimination policy. Disciplinary actions may include any or all of the following:
  - A. Suspension
  - B. Probation pending proof of satisfactory participation in an appropriate drug/alcohol abuse treatment program at the student's expense
  - C. Expulsion for students
  - D. Referral for prosecution

Information

1. Drugs and Federal Crime

In addition to state and general federal statutes that make it a crime to possess or distribute a controlled substance, there are special federal laws designed to protect children and schools from drugs:

An important part of the Comprehensive Crime Control Act of 1984 makes it a **federal crime to possess with intent to distribute, distribute, or manufacture controlled substances in or near a public or private elementary, vocational, or secondary school**. Under this law, sales within 1,000 feet of school grounds are punishable by up to double the sentence that would apply if such acts occurred elsewhere. Even more serious mandatory penalties are available for repeat offenders.

Distribution or sale to minors of controlled substances is also a **federal crime**. When anyone over age 21 sells drugs to anyone under 18, the seller runs the risk that he will receive up to double the sentence that would apply to a sale to an adult. Here too, more serious penalties can be imposed on repeat offenders.

2. Counseling and Treatment Programs

Students who violate SWTC's policy for a Drug-Free School, as one option for disciplinary action, may be placed on probation, pending satisfactory participation in an appropriate drug/alcohol abuse treatment program, at the student's expense. Information concerning available counseling and treatment programs, both

private and public, will be provided through the administrative offices. In addition, a listing of programs available in each county will be provided.

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

Individuals who desire information or referral from another source should contact the Department of Mental Health at the following phone numbers:

Oklahoma City Reach-out: 405-271-2444  
Teen-line (12 noon – 12 midnight): 1-800-525-Teen  
Hotline: 1-800-522-9054

This agency provides referral, education, and advocacy services at no cost, on a statewide basis.

**3. Drug Facts – Health Risks to Avoid**

The following pages include information about specific types of drugs, how to recognize and avoid them, and the immediate and long-term effects. This information should be considered general in nature, and although accurate, may not apply to specific individuals due to physiological differences.

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**CANNABIS**

<u>Type</u>	<u>What is it called?</u>	<u>What does it look like?</u>	<u>How used?</u>
Marijuana	Pot Grass Weed Reefer Dope Mary Jane Sinsemilla Acapulco Gold Thai Sticks	Dried parsley mixed with stems that may include seeds	Eaten Smoked
Tetrahydro-cannabinol	THC	Soft gelatin capsules	Taken orally Eaten
Hashish	Hash	Brown or black cakes or black balls	Eaten Smoked
Hashish oil mixed with tobacco	Hash Oil	Concentrated syrupy liquid varying in color from clear to black	Smoked

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**Effects**

All forms of cannabis have negative physical and mental effects. Several regularly observed physical effects of cannabis are a substantial increase in the heart rate, bloodshot eyes, a dry mouth and throat, and increased appetite.

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

Use of cannabis may impair or reduce short-term memory and comprehension, alter sense of time, and reduce ability to perform tasks requiring concentration and coordination, such as driving a car. Research also shows that students do not retain knowledge when they are “high”. Motivation and cognition may be altered, making the acquisition of new information difficult. Marijuana can also produce paranoia and psychosis.

Because users often inhale the unfiltered smoke deeply and then hold it in their lungs as long possible, marijuana is damaging to the lungs and pulmonary system. Marijuana smoke contains more cancer-causing agents than tobacco.

Long-term users of cannabis may develop psychological dependence and require more of the drug to get the same effect. The drug can become the center of their lives.

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**INHALANTS**

<u>Type</u>	<u>What is it called?</u>	<u>What does it look like?</u>	<u>How used?</u>
Nitrous Oxide	Laughing Gas Whippets	Propellant for whipped cream in aerosol spray cans, small 8 gram metal cylinder sold with a balloon or pipe (Buzz Bomb)	Vapors inhaled
Amyl Nitrate	Poppers Snappers	Clear yellowish liquid ampoules	Vapors inhaled
Butyl Nitrate	Rush Bolt Locker Room Bullet Climax	Packaged in small bottles	Vapors inhaled
Chlorohydrocarbons	Aerosol Sprays	Aerosol paint cans Containers of cleaning fluid	Vapors inhaled
Hydrocarbons	Solvents	Cans of aerosol propellants, gasoline, glue, paint thinner	Vapors inhaled

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Effects

Immediate negative effects of inhalants include nausea, sneezing, coughing, nosebleeds, fatigue, lack of coordination, and loss of appetite. Solvents and aerosol sprays also decrease the heart and respiratory rates and impair judgment. Amyl and butyl nitrates cause rapid pulse, headaches, and involuntary passing of urine and feces. Long-term use may result in hepatitis or brain hemorrhage.

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

Deeply inhaling the vapors, or using large amounts over a short period of time, may result in disorientation, violent behavior, unconsciousness, or death. High concentrations of inhalants can cause suffocations by displacing the oxygen in the lungs or by depressing the central nervous system to the point that breathing stops.

Long-term use can cause weight loss, fatigue, electrolyte imbalance, and muscle fatigue. Repeated sniffing of concentrated vapors over time can permanently damage the nervous system.

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**STIMULANT: COCAINE**

<u>Type</u>	<u>What is it called?</u>	<u>What does it look like?</u>	<u>How used?</u>
Cocaine	Coke Snow Flake White Blow Nose candy Big C Snowbirds Lady	White crystalline powder, often diluted with other ingredients	Inhaled through nasal passages Smoked
Crack or cocaine	Crack Freebase rocks Rock	Light brown or beige pellets or crystalline rocks that resemble coagulated soap; often packaged in small vials	Smoked

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Effects

Cocaine stimulates the central nervous system. Its immediate effects include dilated pupils and elevated blood pressure, heart rate, respiratory rate, and body temperature. Occasional use can cause a stuffy or runny nose, while chronic use can ulcerate the mucous membrane of the nose. Injecting cocaine with unsterile equipment can cause AIDS, hepatitis, and other diseases. Preparation of freebase, which involves the use of volatile solvents, can result in death or injury from fire or explosion. Cocaine can produce psychological and physical dependency, a feeling that the user cannot function without the drug. In addition, tolerance develops rapidly.

Crack or freebase rock is extremely addictive and its effects are felt within 10 seconds. The physical effects include dilated pupils, increased pulse rate, elevated blood pressure, insomnia, loss of appetite, tactile hallucinations, paranoia, and seizures.

The use of cocaine can cause death by disrupting the brain's control of the heart and respiration.

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

**OTHER STIMULANTS**

<u>Type</u>	<u>What is it called?</u>	<u>What does it look like?</u>	<u>How used?</u>
Amphetamines	Speed Uppers UPS Black beauties Pep pills Copilots Bumblebees Hearts Benzedrine Dexedrine Footballs Biphetamine	Capsules Pills Tablets	Taken orally Injected Inhaled through nasal passages
Methamphetamines Methadrine	Crank Crystal Meth Crystal speed Ice	White powder Pills A rock that resembles a block of paraffin	Taken orally Inhaled through nasal passages
Additional Stimulants	Ritalin Cylart Preludin Didrox Pro-State Voramil Tanuate Topanil Pondimin Sandrox Plegino Lonamin	Pills Capsules Tablets	Taken orally Injected

Effects

Stimulants can cause increased heart and respiratory rates, elevated blood pressure, dilated pupils, and decreased appetite. In addition, users may experience sweating, headache, blurred vision, dizziness, sleeplessness, and anxiety. Extremely high doses can cause a rapid or irregular heartbeat, tremors, loss of coordination, and even physical collapse. An amphetamine injection creates a sudden increase in blood pressure that can result in stroke, very high fever, and heart failure.

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

Methamphetamines can trigger aggression and violence in its users. People using this drug have been known to pick fights, drive erratically, kill themselves, and commit violent acts.

In addition to the physical effects, users report feeling restless, anxious, and moody. Higher doses intensify the effects. Persons who use large amounts of amphetamines over a long period of time can develop an amphetamine psychosis that includes hallucinations, delusions, and paranoia. Those symptoms usually disappear when drug use ceases.

**OTHER STIMULANTS**

<u>Type</u>	<u>What is it called?</u>	<u>What does it look like?</u>	<u>How used?</u>
Alcohol	Booze Beer Wine Hard Stuff Distilled Spirits (whiskey, vodka, rum, etc.)	Liquid	Taken orally
Barbiturates	Downers Barbs Blue devils Red devils Yellow Jacket Nembutal Seconal Amytal Tuinals	Red, yellow, blue, or red and blue capsules	Taken orally
Methaqualone	Quaaludes Ludes Sopors	Tablets	Taken orally
Tranquilizers	Valium Librium Equanil Miltown Serax Tranxene	Tablets Capsules	Taken orally



**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**Effects

Small amounts of depressants can produce calmness and relaxed muscles, but somewhat larger doses can cause slurred speech, staggering gait, and altered perception. Very large doses can cause respiratory depression, coma, and death. The combination of barbiturates, methaqualones, or tranquilizers with alcohol can multiply the effects of the drug, thereby multiplying risks.

The use of depressants can cause both physical and psychological dependence. Regular use over time may result in a tolerance to the drug, leading the user to increase the quantity consumed. When regular users suddenly stop taking large doses, they may develop withdrawal symptoms ranging from restlessness, insomnia, and anxiety to convulsions and death.

Babies born to mothers who abuse depressants during pregnancy may be physically dependent on the drug and show withdrawal symptoms shortly after they are born. Birth defects and behavioral problems also may result.

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**HALLUCINOGENS**

<u>Type</u>	<u>What is it called?</u>	<u>What does it look like?</u>	<u>How used?</u>
Phencyclidines	PCP Angle Dust Loveboat Lovely Hog Killer Weed	Liquid Capsules White crystalline powder Pills	Taken orally Smoked, may be sprayed on cigarettes, parsley and marijuana
Lysergic Acid Diethylamide	LSD Acid Green or Red Dragon White Lightening Blue Heaven Sugar Cubes	Brightly colored tablets Impregnated blotter paper Thin squares of gelatin	Taken orally Licked off paper Gelatin and liquid can be put in the eyes
Mescaline and Peyote	Mesc Buttons Cactus	Hard brown disks Tablets Capsules	Disks: chewed, swallowed or smoked Tablets and capsules: taken orally
Psilocybin	Magic mushrooms Mushrooms	Fresh or dried mushrooms	Chewed and swallowed

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**Effects

Phencyclidine (PCP) interrupts the functions of the neocortex (the section of the brain that controls the intellect and keeps instincts in check). Because the drug blocks pain receptors, violent PCP episodes may result in self-inflicted injuries.

The effects of PCP vary, but users frequently report a sense of distance and estrangement. Time and body movement are slowed down. Muscular coordination worsens and senses are dulled. Speech is blocked and incoherent.

Chronic users of PCP report persistent memory problems and speech difficulties. Some of these effects may last six months to a year following prolonged daily use. Mood disorders, depression, anxiety, and violent behavior also occur. In later stages of chronic use, users often exhibit paranoid and violent behavior and experience hallucinations.

Large doses may produce convulsions and coma, heart and lung failure, or ruptured blood vessels in the brain.

Lysergic acid (LSD), mescaline, and psilocybin cause illusions and hallucinations. The physical effects may include dilated pupils, elevated body temperature, increased heart rate and blood pressure, loss of appetite, sleeplessness, and tremors.

Sensations and feelings may change rapidly. It is common to have a bad psychological reaction to LSD, mescaline, and psilocybin. The user may experience panic, confusion, suspicion, anxiety, and loss of control. Delayed affects, or flashbacks, can occur even after use has ceased.

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**NARCOTICS**

<u>Type</u>	<u>What is it called?</u>	<u>What does it look like?</u>	<u>How used?</u>
Heroin	Smack Horse Brown Sugar Junk Mud Big H Black Tar	Powder, white to dark brown Tar-like substance	Injected Inhaled through nasal passages Smoked
Methadone	Dolophine Methadose Amidone	Solution	Taken orally Injected
Codeine	Empirin compound with codeine Tylenol with codeine Codeine Codeine in cough medicine	Dark liquid varying in thickness	Taken orally Injected

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

Morphine	Pectoral Syrup	White crystals Hypodermic tablets Injectable solutions	Taken orally Injected Smoked
Meperidine	Pothidino Demerol Mepergan	White powder Solution Tablets	Taken orally Injected
Opium	Paregoric Dover's Powder Prapectolin	Dark brown chunks Powder	Smoked Eaten
Other Narcotics	Percocet Percodan Tussionex Fentanyl Darvon Talwin Lomotil	Tables Capsules Liquid	Taken orally Injected

Effects

Narcotics initially produce a feeling of euphoria that often is followed by drowsiness, nausea, and vomiting. Users also may experience constricted pupils, watery eyes, and itching. An overdose may produce slow and shallow breathing, clammy skin, convulsions, coma, and possibly death.

Tolerance to narcotics develops rapidly and dependency is likely. The use of contaminated syringes may result in diseases such as AIDS, endocarditis, and hepatitis. Addiction in pregnant women can lead to premature, stillborn, or addicted infants who experience severe withdrawal symptoms.

**DESIGNER DRUGS**

<u>Type</u>	<u>What is it called?</u>	<u>What does it look like?</u>	<u>How used?</u>
Analog of Fentanyl (Narcotic)	Synthetic Heroin China White	White powder resembling heroin	Inhaled through nasal passages Injected
Analog of Meperidine (Narcotic)	Synthetic Heroin MPTP (new heroin) MPPP PEPAP	White powder	Inhaled through nasal passages Injected

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

<p>Analog of Amphetamines &amp; Methamphetamines (Hallucinogens)</p>	<p>MDMA (Ecstasy, XTC, Adam, Essence) MDM STP PMA 2 5-DMA TMA, DOM, DOB</p>	<p>White powder Tablets Capsules</p>	<p>Taken orally Inhaled through nasal passages</p>
<p>Analog of Phencyclidine (PCP) (Hallucinogens)</p>	<p>PCPY PCE TCP</p>	<p>White powder</p>	<p>Taken orally Injected Smoked</p>

Effects

Illegal as defined in terms of their chemical formulas. To circumvent these legal restrictions, underground chemists modify the molecular structure of certain illegal drugs to produce analogs known as designer drugs. These drugs can be several hundred times stronger than the drugs they are designed to imitate.

The narcotic analogs can cause symptoms such as those seen in Parkinson's disease – uncontrollable tremors, drooling, impaired speech, paralysis, and irreversible brain damage. Analog of amphetamines and methamphetamines cause nausea, blurred vision, chills or sweating, and faintness. Psychological effects include anxiety, depression, and paranoia. As little as one dose can cause brain damage. The analogs of phencyclidine cause illusions, hallucinations, and impaired perception.

**Athletes and Steroids**

Students involved in school athletics need to be informed about the danger of mixing drugs and sports, including the drugs used by some athletes to improve body strength and performance.

Anabolic steroids became popular among professional and world-class amateur athletes in the 1960's as a means of boosting weight training results. The health consequences of these drugs can, however, be serious and sometimes fatal. Athletes on steroids can experience a psychotic condition called "bodybuilder's psychosis", which involves hallucinations, power delusions, paranoid episodes, erratic motor behavior, and uncontrollable violence. In addition, victims may suffer chronic illnesses associated with the changes in their bodies brought on by steroids: heart disease, liver ailments, urinary tract problems, sexual dysfunctions, baldness, acne, and alterations in appearance. Some steroid users become impotent and/or sterile. Life expectancy may be significantly shortened. Cessation of steroid use can lead to depression and a pronounced sense of weakness.

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

**SUMMARY**

**1. General Effects of Drug Abuse**

Drugs can interfere with memory, sensation, and perception. They distort experiences and cause a loss of self-control that can lead users to harm themselves and others.

Drugs interfere with the brain's ability to take in, sort, and synthesize information. As a result, sensory information runs together, providing new sensations while blocking normal ability to understand the information received.

Drugs can have an insidious effect on perception; for example, cocaine and amphetamines often give users a false sense of functioning at their best while on the drug.

**2. Drug Dependence – Physical and Emotional**

Regular users of drugs develop tolerance, a need to take larger doses to get the same initial effect. They may respond by combining drugs – frequently with devastating results. Many teenage drug users calling a national cocaine hotline report that they take other drugs just to counteract the unpleasant effects of cocaine.

Certain drugs, such as opiates and barbiturates, create physical dependence. With prolonged use, these drugs become part of the body chemistry. When a regular user stops taking the drug, the body experiences the physiological trauma known as withdrawal.

Psychological dependence occurs when drug-taking becomes the center of the user's life. Among young people, psychological dependence erodes school performance and can destroy ties to family, friendships, outside interests, values, and goals. The individual goes from taking drugs to feel good to taking them to keep from feeling bad. Over time, drug use itself heightens the bad feelings and can leave the user suicidal. More than half of all adolescent suicides are drug-related.

Drugs and their harmful side effects can remain in the body long after use has stopped. The extent to which a drug is retained in the body depends on the drug's chemical composition, that is whether or not it is fat-soluble. Fat-soluble drugs, such as marijuana, phencyclidine (PCP) and lysergic acid (LSD), seek out and settle in the fatty tissues. As a result, they build up in the fatty parts of the body, such as the brain. Such accumulations of drugs and their slow release over time may cause delayed effects (flashbacks) weeks and even months after drug use has stopped.

**3. Drug Potency**

Drug suppliers have responded to the increasing demand for drugs by developing new strains, producing reprocessed, purified drugs and using underground laboratories to create more powerful forms of illegal drugs. Consequently, users are exposed to heightened or unknown levels of risk.

**DRUG-FREE SCHOOLS, REGULATIONS (Cont.)**

The marijuana produced today is from 5 to 20 times stronger than that available as recently as 10 years ago. Regular use, by adolescents, has been associated with an “emotivational syndrome” characterized by apathy and loss of goals. Research has shown that severe psychological damage, including paranoia and psychosis, can occur when marijuana contains 2 percent THC, its major psychoactive ingredient. Since the early 1980’s, most marijuana has contained from 4 to 6 percent THC – two to three times the amount capable of causing serious damage.

Crack, now becoming widely developed as an animal tranquilizer, has unpredictable and often violent effects, often individuals do not even know that they are using this drug when PCP-laced parsley in cigarette form is passed off as marijuana or when PCP in crystal form is sold as lysergic acid (LSD).

Phencyclidine (PCP), first developed as an animal tranquilizer, has unpredictable and often violent effects, often individuals do not even know that they are using this drug when PCP-laced parsley in cigarette form is passed off as marijuana or when PCP in crystal form is sold as lysergic acid (LSD).

Some of the new “designer” drugs, slight chemical variations of existing illegal drugs, have been known to cause permanent brain damage with a single dose.

PLAY IT SAFE.....JUST SAY.....NO!!