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A JOURNAL OF BETTER LIVING

A hand is shown lighting a cigarette. A thin black string is attached to the cigarette and extends down to a human brain. The background is dark with wisps of smoke rising from the cigarette. The brain is positioned in the lower right quadrant of the image.

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A Story Money Can't Buy

Tim Garrison

THE COOL gentle breeze felt good on Danny's face. It was a long way down from the top of the observation tower. But the height gave him a feeling of freedom, a sense of power—as if he were above the rest of the world, away from its constant pressures and demands.

Danny breathed in deeply, and with the night air the warm smoke from his neatly wrapped joint of Columbian Gold added to his feeling of freedom.

He was thankful for grass. It had given him something he had never before had in his life—acceptance. Several of the friends who had given him that acceptance were with him at the top of the tower.

For Danny the security he got from smoking grass had been long in coming. He had been searching for it ever

since his father died when Danny was seven years old. He knew his mother loved him, and yet somehow that wasn't enough. So in his frustration he looked for attention the only way he knew how.

"As a kid I was a constant problem. I spent a lot of time in the principal's office. I would continue to do the same things over and over again in spite of what other people told me. When I look back, that has a lot to do with me trying to get attention—to fit in with the group. I remember feeling an emotional insecurity as far as losing my mother. She was the last thing I had."

The everyday realities of life come hard to a kid without the tempering influence of a secure home. And unfortunately, the need Danny felt for guidance seemed to go largely unnoticed. He was labeled a "bad kid" by other kids who found acceptance in positive ways and excluded kids like Danny whose life-style was less than ideal. Danny fought and looked for anyone who would accept him, who would make him feel needed and wanted.

"I remember the day I first smoked grass. The only thought that went through my mind was that I had finally found my answer. This was the way that I could really be cool. I had no desire to get high or stoned. My only desire was that I'd found a way to get acceptance. And that acceptance was more of a thrill than the physical feelings that smoking grass gave me."

It seemed to Danny that he had finally found the acceptance he wanted. Here were friends—a group that he could feel a part of, that would give him the attention he needed. It seemed easy, and, when compared with what he had before, it was so much better.

Gradually the satisfaction that came from being accepted combined with the physical effects of grass gave Danny a new feeling of physical and psychological euphoria. By the time he was in the tenth grade he was smoking two or three joints a day. Danny loved the feeling he got from grass, and to him it was the only thing he had.

"My mind was constantly on marijuana, where to get it, running around with friends, having a party—that's where my mind was. I didn't care about school at all. I would set a book in front of me, and I just couldn't keep my mind on it. I'd say that the need for acceptance led to pot, and then pot broke my will, and that led to an 'I don't care about anything' attitude."

Danny failed three classes in the tenth grade. But school wasn't the only problem developing for Danny. He became more and more paranoid at home. He was hiding grass in little places all around the house. Every time he'd hear his mother call his name he knew she'd finally found his stash.

Danny's need for marijuana drove him away from home and away from the closeness he needed with the rest of his family. He hardly spent any time at home. He was always out on the road or some other place where he felt safe.

Then he began to see the weakness of that acceptance that had first caused him to smoke grass.

"Suddenly I discovered that a lot of my friends were gone when I didn't have some marijuana. They would be down the street with the next guy who had \$10 or \$20 to buy a dime bag or an ounce. And the next time I had pot they were my buddies again. The only thing I had was a lie—I was living a lie."



I had no desire to get high or stoned. My only desire was that I'd found a way to get acceptance.

For two years Danny lived with the feeling that the kids around him weren't really his friends. They didn't really care about him; their real love was the feeling that smoking grass gave them. But Danny refused to admit that his need for love and acceptance wasn't being satisfied. Having marijuana seemed like the only way he could gain friends.

It was about this time that several former drug users representing a group called Broken Needles came to



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Danny's high school. At first Danny wasn't impressed.

"I made a lot of wise comments to them, and I made a complete fool of myself in front of about 75 people."

But underneath Danny's outward contempt was a deep insecurity about using grass. The people from Broken Needles had made a distinct impression on him. He talked to one of the members of the group after its presentation to the students.

Jim Carr told Danny that if using grass was what he wanted and if he didn't want anything else in life, then that's what he was going to get. Then Jim explained to Danny that he had found acceptance and freedom from drugs by accepting and claiming the power of Christ. It was a decision that nobody but Danny could make. Jim Carr left a deep impression on Danny, but Danny wasn't ready to make that decision.

Now, as Danny and his friends smoked grass on top of the observation tower, he thought about what Jim had said. The sparkling lights of the city below were a bit fuzzy. As the fiery cinder of his joint reached the roach or end of the cigarette, Danny crushed out the flame and popped the roach into his mouth. He did the same thing with the next couple of joints. He ate the very end of each joint. As he gazed at the lights of the city suddenly a confusing weird sensation hit him.

"I turned to a friend of mine and totally flipped out of my head. It was like I had done some really heavy acid or something. I didn't know who I was or what I was doing or anything. I started crying and going into a fit and telling them I was freaking out. They just laughed, and said, 'You can't freak out on pot.' And I told them, 'Yes, you can, because I'm doing it right now.'"

Although confused and still mentally affected by the grass, Danny somehow made it home and told his mom what had happened. He told her how he had been using grass for the past two years and now it was becoming too much for him to handle. She told Danny to call someone for help. That's when Danny remembered Jim Carr from the Broken Needles organization.

"When I called Jim I was interested in one thing. I wanted to find out when I was going to crash."

Once again Jim explained to Danny the power that Christ had given to him to overcome life's problems. The next day Danny joined the Broken Needles' drug rehabilitation program.

"That's when I accepted Christ as my personal Lord and Saviour. And Jesus came into my heart, and He restored my mind to me."

Danny discovered a new way to cope with his problems of insecurity and lack of acceptance. And he also was able to overcome the desire to smoke grass. He replaced a false feeling of being wanted and needed with the real love and power of Christ.

"Christ not only said, I'm going to take marijuana out of your life. He reached into my heart and took the problems that were driving me to use marijuana. So now I have no desire to smoke grass. I found forgiveness through Christ for all the guilt and all the things I'd done to get marijuana. I found peace and I found acceptance and love among my Christian brothers and sisters."

Although Danny had found a new type of acceptance, the old life he was living still taunted him. His old buddies would still shove a little grass in his face, and kids at high school continually offered him a joint. They told him he'd been brainwashed, that he was a Jesus freak.



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"My senior year in high school I had people walk up to me and say, 'Danny, if you'll just forget about Christ one time I'll give you a bag of pot.' And I've had them sit there and wave it in front of me. It was amazing, because Christ took all the desire I had for pot, and He turned it around and put it in the right direction."

Interestingly enough, after Danny began to believe in Christ, he gained even greater acceptance among other high school students than he had ever had before.

"I told many people at high school about how Christ changed my life. And when they saw that I was more than just talking about it, they began to respect me. That's one thing that really blows my mind. Here I'd been smoking grass for acceptance, yet Jesus not only answered all my questions but even made a lot of those people that I was running around with respect me."

As a result of the faith Danny developed through the Broken Needles program, his life has made a complete turnaround. He has learned to accept the unchangeable circumstances of his life, to cope with and overcome the earlier problems of his life. But more than this, Danny can see beyond the present or the past, and he's developing goals for the future.

Of course, everything isn't all beautiful and nice for Danny. For several months after joining the Broken Needles program he experienced flashbacks and would fall into periods of extreme confusion. Doubts and fears about his security and physical well-being continually bothered him.

"Oftentimes I couldn't reason at all, and I would hardly know where I was. When I was talking, it was like I was talking out of a plastic bag. I could grab my skin and I had no sense of reality—it was like I was a mannequin. I can remember asking a friend what time it was and waiting for what seemed like a minute, and he'd say, 'It's eight o'clock.' I don't care what anybody says, pot definitely affects your mind. I know because I've been there."

Now 19 and a freshman in college, Danny regrets more than anything the fact that he sold drugs to younger kids. Although he's tried to tell them of his newfound hope and

faith, he can see that they're just like he used to be—not willing or ready to listen.

"One friend of mine—I more or less got him started on drugs. I really feel love for the guy because he's a lot like I was. I've talked to him many times about my faith in God, but I don't know what to say. He respects what's happened to me, and he believes it because he's seen it, but he doesn't want it for himself. And Christ has never forced you to do anything against your will."

There's not enough money on earth to buy what Jesus Christ did for me as an individual.



The circumstances of Danny's past can never change. But he has found a way of coping with the everyday difficulties he's experiencing now. He won't always make the right decisions, but he believes the faith he has found will give him the guidance he needs to try and make the right ones. Danny was lucky that a group like Broken Needles showed him an alternative way to solve his need for acceptance. More than that, it was fortunate that he made the decision to try that alternative.

"I believe that only by changing a person's heart can you really stem the drug problem. Nobody forced me to become involved in drugs. I jumped into it headfirst without looking—it was my own fault. I'm just thankful that Christ reached me and that He sent around people like those at Broken Needles who were willing to stick with me and help me."

"It all comes down to that individual decision of what you're going to do with Christ and what He's going to do with your life. Everyone has basic needs in life, and when people try to fulfill them through drugs, that's when the problem starts. The best thing I can do is to tell other people what Christ has done for me. You see, money can't buy my story. To me it's more valuable than anything, because there's not enough money on earth to buy what Jesus Christ did for me as an individual." ◇

The Broken Needles organization that helped Danny overcome his drug problem is located at 515 Tunstall Avenue, Blackstone, Virginia 23824. Or you can call their national hotline at (804) 292-5321.

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Robert Baird, MD

Is Marijuana Really All That Bad?



Dr. Robert Baird is known as the "doctor with a heart." He gives of himself to every patient. In addition to maintaining a flourishing practice on Fifth Avenue in New York City, he volunteers a "second practice" to aid unfortunates in trouble with drugs.

MARIJUANA is not a simple drug. There are many research reports these days, and meetings that claim to be scientific which discuss marijuana and come out with conflicting conclusions.

On the one hand, some research points to marijuana as a dangerous drug, while other research is reported as showing it to be harmless, with no deleterious effects.

Why does anyone take marijuana? It is taken for the sole purpose of producing a high. The user wants to become stoned, to get away from reality.

When one takes marijuana, he generally likes to turn someone else on too. This is a little different from booze, because with booze one can take a shot by himself and feel perfectly content, as with a pre-dinner cocktail. But with pot you've got to have congeniality, you like to be with someone else.

The rate of detoxification of marijuana is different from that of alcohol. One ounce of alcohol is detoxified in about an hour, whereas one joint will last anywhere from seven hours to 24 hours, if it is very strong hashish.

Are there any visible signs of marijuana use? Can you tell if someone is stoned? If someone is inebriated on alcohol, the signs are obvious, but with marijuana they are subtle. Especially is this true if a person high on marijuana

gets into a car to drive. This is a dangerous situation.

What does marijuana do? When it gets into the system, the average user will tell you there is an alteration of time perception. This is important, because if time is altered when an individual drives a car, he may think he has been driving for five minutes and actually he has been driving for only a minute. He wants to speed up in order to get to his destination. This fact can be brought out sometimes by asking a person on marijuana to listen to a record. He will tell you that it seems to drag on endlessly. So there is clearly a distortion of time.

There is also a distortion of depth perception. Generally if the individual is driving a car, he is not aware how far his foot is depressing the accelerator. Therefore he presses harder but is not aware that he is pressing harder. Ask a person on marijuana if he is walking. How do his feet feel? Often he will tell you that his feet feel very light, that he can't feel them, or if he is dancing, he hardly seems to be touching the floor. The user is unaware of the fact that he is touching the floor.

All these symptoms I'm describing don't apply to every user. This is where some researchers suffer from a disease syndrome that I have coined, "paralysis by analysis." They want to have all





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these symptoms in one user. No one user is going to get all of them. You know, when people get a bad sunburn, some say that their skin feels very taut, others say that their skin feels on fire, still others will notice blisters, some have a high fever, others will have chills. These are all symptoms of sunburn, but not everyone gets all of them. This is what I am trying to point out, that not all marijuana users will experience all these symptoms.

There is another danger while driving a car—distance perception is altered by the use of marijuana. The person on pot may think the car ahead of him is three or four car lengths away, when in actuality it might be only one car length. That sets up a situation for an accident. This alteration of depth perception can be demonstrated by getting a kid on marijuana onto the basketball court and letting him shoot baskets. He will either underestimate or overestimate where the basket is, yet he might be a great basketball player. These are common basic principles that we deal with in everyday life as far as effects of marijuana are concerned.

Marijuana markedly alters a person's powers of concentration while driving a car. The driver's mind tends to swing continually from one subject to another. Now in driving a car, if this occurs, it means that the person isn't

concentrating on his driving. In this day of fast-moving cars, and little cars, one has to be aware of this. All you have to do to verify this is read the statistics around major college centers and notice the increase of auto accidents as reported in the newspaper. The report may say, "John Dokes lost control of his car." Quite often John Dokes lost control of the car because he was stoned on marijuana. When the arresting officer comes, he does not pick up the scent of alcohol. The kid just cops out to the plea, "I lost control of the car," or "Another guy cut me off." He is not going to admit that he was smoking grass, because he knows there is a certain penalty that goes with it.

Another aspect of marijuana use has to do with what I call the "focal fixation hangup." An individual on grass sometimes becomes trapped by either a

sound or a color or an object. For example, if a guy is driving along on the highway, he may notice the white line and may follow that and go into a wrong turnoff, or he may watch the red light of a car ahead of him and follow that. On one occasion a boy watched the red light where he was supposed to stop, but he transferred his gaze from the red light at this corner to the one on the next corner, with the result that he went through the intersection and crashed into a car which had the green light.

When kids are on grass they want to spend leisure hours just sitting and enjoying the joint and listening to music, wasting valuable time that they could be spending on studies, or doing something far more rewarding than just to blow life's time. This has to be considered on the basis of how it affects school. Students tend to drop out of school when they smoke a lot of grass. They are preoccupied, with the result that they start to figure, "I don't have to stay in school," and they drop out. Then at a later time society has to take care of them whether they are on welfare or are simply unable to work.

Pot users have a tremendous appetite. This is significant to me in my field of treating diabetes, because it is the greatest way to throw a diabetic out of control. Appetite often cannot be con-

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trolled by the person on pot. He wants to eat—he has the “munchies.” But this is a physiological reaction, setting off a psychological entrapment. The kids want to eat more and more when they are on grass.

Ask the kid who's on pot if he does not become jocular and have uncontrollable laughter. The saddest story that I can give is of a kid whose mother died of a coronary in my hospital. This kid had had a joint just before I told him the bad news. This kid just sat there and laughed. I said, “Do you realize your mother is dead?” He said, “Doctor, I'm aware of her dying, but it strikes me so funny.” This is one result of using marijuana. This type of reaction is often glossed over, forgotten by researchers who ought to go into a community and observe the users more critically.

Marijuana has a tremendous propensity for bringing out the paranoia feeling in people. This is a feeling that someone is watching them, that someone is putting them down. Who goes on marijuana? I don't care if we have twenty million people on marijuana in the United States. If these twenty million people have to go on marijuana to deal with reality, they are very insecure people. If their own brain doesn't have the capacity to turn them on, then they are in big trouble, because a drug can never enhance the function of the human mind to a degree higher than it is now. In other words, your strongest potential is when you are straight.

It is an insecure personality, whether it be a doctor, psychiatrist, judge, lawyer, or minister, who says, “I am taking marijuana to relax.” You don't need marijuana to relax. Some may say, “I'm taking this to get high.” We can have

natural highs every single day in life to which we can be turned on psychologically. A good example is to let a kid who has had a long autumn see the first snowfall of the season. Through the whole school there pervades an energy—“It's snowing outside!” The kids are enthusiastic. It's the same when kids see spring coming, and they can go try out for the baseball team or play stickball. They haven't taken any drug, but they have a high that is psychologically set by their accomplishments.

I get the greatest high in life when I see people thrilled. For example, I examined a woman who had a lump in her breast, and I thought she had cancer. I told the husband and the son, “I think your wife and your mother has cancer.” We did a frozen section, and it came back negative, a nonmalignancy. I walked downstairs and told the husband and son—and the elation, the thrill! Now, I didn't give them any drugs or any medicine. It was a psychological high, coming from the action of the brain itself. Such are the thrills of life.

Another thing disturbs me with marijuana which is usually not brought out in reports of research projects. There may be other drugs involved.

When a kid starts with marijuana—whether it's one month or several years—there comes the time when he says, “Hey, I wonder what this other thing is like”—the eternal search for euphoria. So whether he goes to marijuana laced with opium or marijuana laced with hashish oil, he is not happy with his high so he may go on to other things. Some studies show that 30 to 40 percent of pot users were taking alcohol with it. If we were to legalize marijuana or take off some of these penalties, I not only would have to worry about the increasing rate of alcoholism—I'd worry about having potted alcoholics.

About the tidiness of the kid who uses marijuana—usually he doesn't care about the way he dresses. He says, “So what? I don't have to dress; I don't have to wear a shirt and a tie. I don't have to look neat. This is my rebellion against society.” No, that's not your rebellion against society. That's your rebellion as manifested by the drug's changing your mind, so that you don't care.

Another thing is a sense of bravado. Marijuana is a mild central nervous depressant with hallucinatory manifestations, because a kid can hallucinate on it. It doesn't mean it is hallucinative like LSD, because 95 percent of the kids on LSD will go through hallucinations. Marijuana takes off certain inhibitions so that a kid who is shy now has bravado, and he doesn't mind going up to a girl he has never been able to talk to before and say, “How about a date with me?” But that's not a *true* him—that's the effect of the drug, because when he comes off the drug he becomes shy again. The only way he can really overcome that shyness is to be

Your strongest potential is when you are straight.





Effects of marijuana may vary.

put into environmental situations where he can overcome it by dealing with people.

Sometimes if a kid has a bad experience with marijuana, he will have a so-called flashback. Generally this happens to a kid who is psychiatrically disturbed, and this is a big thing which bothers me. If we are going to take the penalty off marijuana, which of the psychiatrically disturbed kids is going to smoke grass? There's a greater chance of the psychiatrically disturbed kid seeking out marijuana than the normal kid, because the normal boy is happy he has a girl friend, he's happy he is playing an instrument, he's happy that he is going to school, he's happy he has a good life, he's happy with being on an athletic team, he's happy with the environment around him. But this other kid—he's not happy with life, so he's going to alter reality.

Are there side effects from marijuana? What about muscle coordination? I did a very simple experiment in my office. I gave a kid on pot a pencil and told him to put it into the pencil sharpener. Normally you and I would take it and zero in on that pencil sharpener opening. This kid couldn't do it. His muscle coordination was off.

A marijuana user has what I call, the "flight of ideas." You try to talk to him and he suffers almost from word diarrhea, swinging from one subject to another, and he thinks he is thinking very fast. This affects his schoolwork. Just to give an example: You give a kid a page to read when he is stoned on grass. He will read the paragraph over and over and over again because he does not have the ability to grasp what he is reading. He can't concentrate. Although he can recognize the words, his

perception has been altered.

I once gave a group of kids the assignment to write on the subject of gasoline. I told them to write whatever they wanted to about gasoline. One kid had written at least three or four minutes what he thought was a great dissertation. He said, "Gasoline is a unit of energy," and he kept writing it over and over again, it must have been 50 or 60 times. I didn't say anything. I collected the papers. The next day in group therapy, I brought out what Joe wrote the day before. I said, "Do you know what you wrote yesterday?" "Oh, yeah, doc, I told you how gasoline was a hydrocarbon and it had this tremendous ability to expand and explode and to cause a unit of energy." I said, "Where did you write it?" He said, "I wrote it on the paper." I said, "I want you to read the paper to the group." He could only read one sentence that kept going over and over, "Gasoline is a unit of energy, a unit of energy, a unit of energy." But in his mind he had written a great piece.

I think that to talk to the kids as a deterrent, about possible chromosomal damage and testosterone levels doesn't play a major part at all. This is the weakest point. The biggest threat is the psychological aspect,

where the kid can lose control of himself, where he may not be sure if he can handle the car, where he may get into an altercation with someone, where he may feel extremely paranoid. I myself would never use as an argument against marijuana anything about atrophy of the testicles, or sperm count, because that is the weakest argument to a young, dynamic, alive, alert kid of 14 or 15. He is not going to buy this. That's not the stuff! "Hey, I do get crazy, I guess. I can't control the drug. Me, I don't like this feeling of thinking that people are watching me or people are thinking that I am doing something wrong." He doesn't like feeling insecure.

One other thing, there is withdrawal from pot. There is a tolerance built up. If there weren't, why does the kid who smokes one joint and gets high, have to smoke two joints a few weeks later to get high? And if he has been smoking two joints, he has to go to three. I have seen them going up as far as 27 joints. The withdrawal is not the same severity as heroin addiction withdrawal, but marijuana is a completely different drug. However, there is a withdrawal.

I repeat that effects of marijuana may vary. Different people get allergic reactions to penicillin. One patient may get swollen ankles, another may get a rash, another may get asthma, another may get asthma and a rash and the swollen ankles, and another may get the most severe reaction—death. They are all allergic reactions, but the intensity varies. So it is the same thing as far as the effects of marijuana are concerned, and the withdrawal from it. The intensity varies, but every user is affected by the drug. This is the most important thing about marijuana. ◇

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Heroin— New Epidemic?



They said it was dead. But the legendary creature called the phoenix bird rose from the ashes of its death into unexpected life again.

THEY SAID it was dead, or at least dying—this specter of addiction to heroin. In 1973 the President of the United States observed that the nation had "turned the corner" on heroin addiction and that it was time to concentrate on other more immediate matters.

With a sigh of relief everyone seemed to relax, feeling that the problem which had plagued so many for so long and had grown into the No. 1 spot in urban crime, would now continue to recede, eventually to disappear.

Major evidence for this optimism came from the nation's capital, where as late as July of 1972 the city was gripped in a still-mounting epidemic involving a heroin-addict population of at least 18,000.

Then signs began to show a rapid recession. Because of the lack of patients, four of the city's treatment centers were closed. Over a period of three months there was not a single overdose death from either heroin or methadone.

Reasons for this dramatic drop seemed to be many—public awareness of the awful danger of the drug, the law-enforcement crackdown on heroin supplies, and a well-organized treatment program for addicts.

However, now it appears the phoenix bird is rising again. In one year, deaths from heroin overdose have doubled in Washington, DC. This involves 32 persons as compared with 16 the year before. Two more have died from a lethal combination of heroin and methadone, the drug so highly touted as the solution to heroin addiction.

The same story is coming from other cities, especially those in border or coastal areas. It seems that about three years ago supply routes from Europe were quite efficiently cut off, thus seriously reducing the available supplies to users. Now new supply routes have been opened, particularly from Southeast Asia, which are making available the so-called "brown" heroin.

This variety is more powerful than the previous types. Formerly it was estimated that only about 3 percent of the

average dose obtainable on the streets was pure heroin. Today this percentage has more than doubled.

Combining the higher potency with greater availability brings back the specter of increased addiction. Instead of "turning the corner," it appears now as if the graph line is once again climbing rapidly.

Perhaps some of the lessons learned so hard in evaluating and dealing with the problem previously will be of real help now.

One of these is that addicts are people. They are human beings in need of help. They are not vicious demons, to be ostracized as beyond all possibility of reclamation.

The plight of the addict is not easy at best. His hopes are grim, for even if he can walk a tightrope between dirty needles and hepatitis, between lethal "street bags" and endocarditis, between crime and punishment, rehabilitation offers no quick and easy solution.

For a society that is again being invaded by the heroin plague, the best armament of defense is that of prevention, which consists of accurate, nonemotional education combined with compassionate, skilled care for those caught up in the ravages of the drug.

This will require the close working together of all persons and agencies in the community and nation to meet the new challenge. ◇



Alcohol—A Handicap From the Start

Arthur C. Walsh, MD



AS MANY as four out of five babies born to alcoholic mothers are subject to possible birth defects as the result of their mothers' indulgence.

Some 83 percent of such babies run the risk of a variety of deformities stemming from the drinking done by

women prior to childbirth. This fact was reported by Drs. M. S. Tenbrinck and S. Y. Buchin, in the *Journal* of the American Medical Association, June 16, 1975.

Long has such infant damage been suspected, but it was scientifically

documented as early as 1972 by Dr. C. M. Ulleland in the *Annals of the New York Academy of Sciences*. He showed that these babies have a very low weight at birth and a seriously impaired growth and development rate after birth.

Further research, reported in 1973 in the British medical journal *Lancet* by Drs. K. L. Jones and D. W. Smith,

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documents the indisputable cause-and-effect relationship linking serious infant defects to alcoholism in the mother.

Some of the characteristic defects of a physical nature included abnormal eyes (some with small eye openings), dislocated hips, deformed elbows, "cauliflower" ears, arrested development of the jawbone with a protruding condition, and hands or feet with overlapping fingers or toes.

Some babies had heart murmurs at birth. The average birth weight was lower than normal, indicating prenatal growth deficiency. Also there was a postnatal lack of catch-up growth and development. At seven months of age some had not yet come back up to their

birth weight. There was impaired mental function after birth, adding up to actual mental retardation.

Up to the present time there has been a lack of knowledge as to how alcohol actually damages the fetus in the uterus of an alcoholic mother. Malnutrition has been ruled out because such babies have different abnormalities and respond to good care after birth. Direct chemical toxicity due to alcohol is a possibility, as alcohol passes the placental barrier, but this cannot be proved. Damage by the breakdown products of alcohol is also considered as a possible cause of damage to the developing embryo, but again there is no proof.

The purpose of this present study is

to propose that we now have enough facts available to explain the mode of action of the alcohol—how such a simple chemical can irreversibly damage the fetus. This is not to say that much more research will not be needed to make clear the various factors leading to different types of damage.

The first important step has been taken and the door to further knowledge has been opened when we realize that the most logical mechanism of such damage is the interference with the fetal blood supply brought about by the blood-sludging effect of alcohol. Dr. M. H. Knisely and his associates have shown that alcohol is a potent "blood sludger"—that is, it causes the red blood corpuscles to adhere and



In support of this research, our own clinical studies have shown that alcohol causes brain damage due to its blood-sludging effect, resulting in insufficient blood supply to the brain. The greatly improved brain function in the majority of alcohol brain-damaged patients after the use of anticoagulant therapy was dramatic. Even prior to these observations, improvement in patients with reduced brain function resulting from blood insufficiency was noted following such treatment.

The only rational explanation for such improvement was that some reversible process such as blood sludging in the sluggish cerebral circulation had allowed nonfunctioning brain cells to resume function. Further studies presented strong evidence that blood sludging can be a major causative factor in brain deterioration.

Research on this subject separates the toxic effects of alcohol into three major groups:

1. The agglutination of blood cells (blood sludging).
2. The physical circulatory effects in each tissue and organ initiated by this agglutination, ie, forcible reduction of flow rates, the plugging of vessels, and their consequences.
3. The direct effects of alcohol molecules themselves or their derivatives on the chemical processes going on: (a) in extracellular fluids, (b) at, in, or within extracellular membranes and surfaces and cell surfaces (surface chemistry) and, (c) as parts of intracellular molecular biological processes.

It seems fair to conclude, on the basis of the preceding facts, that babies of alcoholic mothers are damaged because of impaired vascular flow caused by blood sludging brought on by the mother's ingestion of alcohol. That the sludging is the primary factor rather than a chemical toxicity is most likely because the blood concentration of alcohol would not be great enough to cause the latter.

Furthermore, the sludging reaction of the blood represents a protective mechanism of the body whereby it diminishes the flow of blood through the tissues in order to reduce the supply of the toxic alcohol. In doing so, the protective mechanism itself does a great deal of harm—a situation analagous to that of inappropriate intravascular clotting causing strokes and heart attacks and of excessive histamine production with allergic responses. That is, the body overreacts and damages itself.

No doubt the effects of sludging are

greatly compounded in the pregnant woman because not only are the usual three vascular systems affected—the arteries, capillaries, and veins—but three different circulatory systems are involved—the mother's, the unborn infant's, and the placental, including the uterine vessels, the umbilical cord, and the placental vessels themselves.

The dynamics of the blood flow impairment can become incredibly complex so that it is small wonder that these babies suffer such serious and variable deformities. The situation is made even more complex when we consider that the type of damage will also depend not only on the area of vascular insufficiency and the degree of impaired blood flow, but also on the critical period of the pregnancy—likely in the first trimester—when various organs are being formed in the fetus.

A potentially important corollary of this analysis is that the mother may not have to be an "alcoholic" to damage the baby by alcohol intake. Theoretically, there may be required only one episode of alcohol intake sufficient to sludge the blood enough to deprive a specific area of the fetus of adequate blood supply at the critical moment in the development of that area—such as the brain, the eye, or the jaw.

Naturally, avoidance of alcohol by the pregnant mother could solve the problem. The simplest way of accomplishing this could be by education of the public. But for alcoholics this is not enough. External control would have to be substituted for their own weakness in this area. The magnitude of the disabilities as shown in the studies so far done on the subject would appear to warrant the drastic step of hospitalizing these mothers until the unborn infant is out of danger and protected from lifelong crippling.

These children are more seriously and permanently damaged than are the victims of child battering. Such restrictive actions, however, pose the legal question of whose rights are primary—the child's, the mother's, or the society's whose responsibility it will be to look after these deformed children the rest of their lives, many in state hospitals.

One difficulty with primary prevention is that the damage may occur before the mother is aware she is pregnant. When we consider how many people use alcohol, we cannot but wonder about how many infant deformities might be caused by alcohol intake. ◇

form aggregates which eventually block off the capillary circulation. Undoubtedly such effects in an alcoholic mother seriously impair the maternal, placental, and fetal circulations.

Many other conditions such as infections, malignancies, diabetes, and fevers can cause sludging; but for our present purposes alcohol is the main and sufficient culprit. The serious effects of blood-sludging on living tissues was originally noted by Dr. Knisely in his *The American Handbook of Physiology*, as well as in many other articles. Thus it has been established beyond doubt that blood sludging is a common mechanism of many serious disease conditions which before were thought to be entirely unrelated.



DAVID

TOMA—



LAUREN SMITH

David Toma is probably the best-known detective in the world. For some 20 years he worked in one of the highest crime areas in the nation, Newark, New Jersey.

He went beyond being a policeman—he worked undercover, using some 25 different disguises, but never using a gun. He broke some of the worst smuggling rings and solved many of the most heinous crimes. He made more than 9000 arrests with a 98 percent conviction rate. But even in the midst of a human jungle, Toma has always loved and helped people. He was known as “the compassionate cop.”

Toma says, “I’ve seen drug addiction in my own family with five nephews who were drug

addicts 15 to 20 years or more.”

In later years he has been lecturing in schools, private organizations, and community agencies on drug problems, including alcoholism and marijuana. He says, “I have literally hundreds of thousands of letters from kids who were smoking grass, who told me afterward that they believe me, and have cut out grass completely. Wherever I talk, it is from my own experience.”

David Toma is the only living person to have a major television series named after him and have it based on his life. The series originally named Toma, is now called *Baretta*.

MARIJUANA is probably the most unpredictable drug there is today. There are many things that determine this. It depends on how the grass is grown, it depends on where it is grown, it depends on how it is cultured, the temperature where it is grown, whether it is grown inside or outside.

The strength of grass varies from time to time. A user never knows what he’s smoking. He can smoke grass for five, six, seven, or eight years, and get high, but nothing else will happen beyond getting high. He says, “It hasn’t affected me in any other way.”

Well, outside of saying that it has been proved that marijuana psychologically affects you, it affects your metabolism, it affects many things in your body, perhaps even including your genes. I’m going to tell you a few stories, and I could tell thousands more like them.

I had someone very close to me in my family who had

been into drugs about twenty years. He said he wanted to get away from drugs. But he liked the feeling of getting high, so all he was going to do was to smoke a little pot. He didn’t want to fool around with the “dangerous” drugs. I told him how grass varies from time to time, how it is the most unpredictable drug, how it can affect a person in many different ways, but he didn’t believe me. He had been on grass for three years, had quit everything else. He called my sister to tell her the left side of his body was completely numb from his head down, his hands, his toes, his arm, his left leg. A psychiatrist told him it was part of a schizophrenic condition and that he belonged in a hospital. He was there almost seven weeks; he tried to commit suicide. They gave him every medication imaginable, but they couldn’t find what was wrong with him.

It is now three or four years later. From time to time his



What Pot Users Tell Me

left hand still gets numb, his left leg and left arm get numb; at times he feels like he's choking to death, his tongue gets four or five times its normal size and he can hardly breathe. He feels like he wants to rip his head, or sometimes he feels that his head is off his body.

He has told me a story that I've heard so many times, but coming from my own family it somehow is different. Several years ago when all this started, a kid he was with would pass a marijuana joint around each day and they'd get high before they went to work. One day this kid asked him to try a real "horse killer." He said, "It's a little stronger than what you've been using."

In telling me the story, he said, "Uncle Dave, I took two drags. All I remember is that on the second drag my head seemed to leave my body. My left side went completely numb, but I could still feel my tongue. However, it was four or five times its average size."

I asked him, "Anthony, did you hit it with anything? Did that kid put anything in it, did you shoot some cocaine or heroin?"

He replied, "Uncle Dave, I swear to you I did nothing different than I did every other time. All this kid told me was that it was stronger than what we had been using, but it would make me feel great." Now, years later, he still gets these effects. He still has a psychological problem. He can't control himself when this happens; he goes out of his mind. This happens not rarely, but once every two or three weeks. All this is strictly from grass.

I want to tell you another story about a friend of mine. A couple years back he got very sick and went to a hospital, and from there to a mental institution. He met a friend who had been there for eight years. What had happened to him? Eight years ago he wanted to cut out everything but grass. He said he just liked the feeling of getting high, but he wasn't going to shoot cocaine or anything else. Did you ever hear of a kid who gets high and can't come down off the high? Eight years later he's still in a mental institution. Nothing is helping him.

I went to New York the other day to visit a friend of mine. In the house was a 25-year-old girl I know. She looked sick. I asked her, "Lorraine, what happened?"

She said, "I'm a little embarrassed. I had an experience last week you won't believe. You know, I've been smoking pot for 13 years, since I was 12 years of age. Two weeks ago I was smoking pot with two or three of my friends. On the third drag I felt my whole body become itchy. Then my fingers looked like they were falling off, my hair felt like it was coming out of my head.

"I looked in the mirror, and felt like I didn't know who I was. I asked my friends, 'What is my name? Who am I? Is my name really Lorraine?' I lost all concept of time and place. I didn't know where I was. I started to scream and went to a phone to call a doctor whom I know well. He said I probably mixed it with heroin, but I didn't. It had nothing

I'm not saying that users should go to jail—no way.

to do with heroin because I never use heroin. All of a sudden I found myself on Broadway; two guys had thrown me out of a car. Apparently they were afraid I had overdosed. I roamed for three or four days, I didn't know where I was, who I was, but I finally went home.

"Even now I have lapses of memory. I'm not sure what my name is at times, sometimes I feel like something is popping up in front of me like a ghost. After 13 years I don't know why it would happen. It doesn't make sense. I didn't use anything different, in fact, I'll be honest with you, I used less alcohol than I always used, because I felt so

good that day I felt I could get off a real good high without that kind of alcohol.

"I don't know what to do. All my friends are doing the same thing, and it's happening to all of them. I wish I could get out of it. I just hope God takes care of me and gets me out of this feeling. I'm going out of my mind. I can't take it anymore."

Many people do not know or believe these stories, and they don't want to believe them for the most part because either they're using marijuana at that time, or they don't know what they are talking about.

I've visited nearly every rehabilitation center in this nation; I've spent time on the streets with pot smokers for 25 years or more; it's been in my own family; I've spoken to thousands of people in colleges and grammar schools and high schools; and kids cry when I talk to them because they say it's about time somebody told it like it is. Kids say to me, "I've been smoking 10 years and everybody I talk to tells me that it's OK, or do your own thing." But when I get to these kids they say, "I didn't realize this could happen to me."

When you talk about decriminalization, what you're saying to everybody is to make marijuana a lesser crime

There's only one reason you smoke pot—to get high.

because it's really not that bad. I'm not saying that users should go to jail—no way. I'm saying that we should educate the whole world, not merely the kids who are using pot, but their mothers, their fathers, priests, doctors, rabbis, and lawyers and judges and cops—everybody.

When you advocate decriminalization, you're telling kids to go ahead and get high, but don't have too much on you when you get high so if we grab you it's OK. Why not teach one thing that's so important in life—to get high on life, get high on nature, on music, on sports, on good food; get high on fresh air and sunlight, every day.

If marijuana is decriminalized, we're telling everybody, It's OK to get high. Then how about that man in the morning who picks up the 50 or 70 kids on the school bus. He gets a little high before he comes out to pick up the kids, and maybe he ends up wrapping them around a pole. It isn't so much that we should worry about decriminalization, about legalization, about whether we're going to send these people to jail. The chief concern should be about teaching them.

You know, it's an awful thing to go to a school and find that maybe one professor thinks marijuana should be legal, or one professor might be smoking pot. That professor might be a professor for 30 years. In that span of time he's going to teach 60 or 70 thousand students who are going home to tell their mothers, their fathers, brothers, sisters, friends. They're going to get married, they're going to become teachers, they're going to go on in life. That man is literally responsible for influencing perhaps millions of people in the future. If his distorted mind can teach what he believes and then people believe him, what will happen to our nation?

Remember, most people are followers, not leaders. If I go to a school, I know where I am; but our children or grandchildren go to school and sit in front of a teacher for eight hours a day for four years, they believe what they hear and see—that's why they are there—to learn. If you don't know where you are or who you are, you can't teach these kids a proper way, yet they will believe what you're telling them. You can teach anything to some kids. You can tell a kid you should shoot heroin every day, because it's good and will make your body feel better, and you can bet most of the kids are going to shoot heroin, believing

what their teacher tells them. Again it comes down to one thing, there is no real leadership, there are very few now who are in a capacity of being a powerhouse, who know what they're talking about.

I can tell you of another kid 22 years old, 19 out of 22 years smoking pot. He's been smoking pot so long that he doesn't even look high anymore, because he's built up such a tremendous tolerance. I saw him about eight months ago, and asked, "Where've you been? I haven't seen you." He's been in a mental institution for almost a year. He was smoking pot one day with some friends when suddenly he felt a funny feeling come over him. He didn't know why because it never happened before. His mind went completely. He said he felt a little better now, but needed somebody to talk to. "Sometimes I feel like something comes over me like a veil; I can't see right; I've lost my perception."

Why after almost 20 years did this happen? When you smoke pot, there's only one reason you smoke pot—to get high. There is no other reason in this world. If you smoke pot and you don't like the feeling, you never smoke it again. If you smoke pot and you like the feeling, you continue to use it. Most people like the feeling they get. Everybody in this world is lonely; everybody is looking for a crutch; everybody is looking for a way out. So if somebody tells you to try a little pot, you forget everything that's going on around you. You try it, and find it is your crutch. Then you continually use this crutch.

Let's face it, if you've got a problem with headaches, take two Anacin, and after six months or a year you get these headaches repeatedly. Then you say two Anacins do not help you anymore. Why? You build up a tolerance. That's why most people go to a doctor for something stronger. It's the same thing with grass, it doesn't help you anymore. You build up a tolerance, so you need something stronger—or your friends will give you something stronger. That is why marijuana may lead to other drugs. You want to go where people accept you; so that's why drug users, even alcoholics, turn other people on to their way of life. That is all they know. Misery loves company.

Can you see a marijuana smoker saying, "You know

*We'd better get high on good things
around us.*

when I smoke I get high, but don't you do it, it's not good for you"? They have to justify what they're doing, so they say to you, "Man, you don't know what you're missing. What a beautiful high you can get off this! It makes you feel great; you don't have to worry about anything; you see colors more vividly; and the flowers bloom so beautifully!"

Let me tell you, nobody sees flowers bloom better than I, and I've never gotten high in my life except high on life.

Every drug in this world that helps you also has an adverse side effect. This is even true with aspirin. My wife took penicillin for years, but one day she got very sick and almost died. They had to rush her to a hospital. Now she's allergic to penicillin. If it can happen with penicillin, it can happen with other drugs.

Who are these people who say it doesn't happen with grass? They know it happens with grass. You know why they say it? They use it themselves, and they feel they must justify what they're doing. We'd better get high on life. We'd better get high on good things around us. People are walking around twisted because they read some article in which a doctor or a professor said, "What's so bad about marijuana? It's no worse than having a couple of drinks of alcohol." We'd better learn fast, or we'll lose the battle.

I go to many places—schools, parties, meetings. I ask the question, "How many people here feel it's OK to smoke a joint?" The majority of people answer, "Why not? What's so bad about it?" I want to ask anybody that tells

me that, one thing. Were you ever stoned? Well, if you were stoned, it had an effect on you, didn't it? When you're stoned, your brain is affected. It's got to take toll on you some way or another.

I could talk for hours on grass. I'm psyched on it because I believe what I'm saying. I'm emotional about it because I know what it does. I know what I feel is right. I'm high right now. This is my high.

Why do you want to get high? You're running away from something. That's the only reason. Why do some drink a glass of Scotch or get drunk? They're running away.

Speaking of alcohol, many people ask me what I think of it. Unfortunately, we legalized it years ago. We now have something like 12 million alcoholics in this country. I've got a sister-in-law who was married to an alcoholic for 40 years, and if you were to ask her about marijuana and other drugs, she'd say they're nothing compared to alcohol because of the problems she has.

When this affects you—when you ask my sister-in-law or any alcoholic or reformed alcoholic, or anybody who's in a family of alcoholics—they will tell you they detest the day alcohol was legalized.

And remember, if there are 12 million alcoholics, most of them are married. That's 24 million, and most of them have kids and families, so alcohol is literally affecting at least 40 or 50 million people in our nation.

I've seen many people who say that they need a drink when they come home at night because they had a tight day at work. This is dangerous. This is what they call a social alcoholic, but these people don't realize it. Any person who comes home and says he had a tight day, and needs a drink to relax him, tomorrow he may need two, and next Friday he may need three or four, and before you know it he's a full-fledged alcoholic. That's how alcoholism starts.

I don't advocate drinking. If people want to have a drink socially, that's their thing. Some people say they can have one little drink and never drink for the next eight or ten years. But remember one thing, you don't drink to get drunk all the time. A handful of people drink to have a social drink and never do it again, but you do smoke to get high. There is a difference.

Again, I don't advocate alcohol. I'm not for alcohol. I don't drink. I don't need it, but you can have a drink and not get drunk. You cannot smoke pot and not get high.

I think we should learn a little bit about alcohol. Did you know that 90 to 95 percent of kids today in high schools have experienced drinking? Do you realize what that means? Ninety to 95 percent of the kids in high school today—because they don't know. You see, some kids experiment with it and become alcoholics later in life. Some kids experience it and become social alcoholics. Some kids experience it and put it down.

I'm not taking chances with my children, just like I'm not taking chances with marijuana. You can smoke a joint and say, "This is not for me," and put it down. Did you ever hear of a kid who never smoked a joint in his life and all of a sudden at 17 wanted to try it, and freaked out? That happens. I'm not going to take chances with my kids.

The same with alcohol. You drink a little alcohol and you get a taste for it, you get to like it, and it's very easy to go all the way. If you speak to alcoholics, you realize how they started with a very simple way of having a drink years ago, but they liked the taste of it so they had two and three. Then with three and four and five they forget all their problems. Of course, later when they come off the drunk, the problems are still there. So they go right back on the drunk again—to forget. Eventually they're drinking a quart or two a day.

So in comparison I think both alcohol and marijuana are bad. Unfortunately years ago we made the mistake of legalizing alcohol, and 40 or 50 million people in this nation are suffering because of that decision.

We made a mistake then. Why make the mistake again?

"Don't waste your time on me," Cindy cried,—

"I'm Not Worth It"

CINDY pushed me away and cursed. She spit back some of the medication the nurse and I had just forced her to take. Soon the medication would expel from her stomach the pills she'd taken twenty minutes before being brought into emergency room.

I was getting tired of Cindy's continual cursing and the variety of insults she expressed so freely. Emergency room was busy tonight, and I really wasn't thrilled at the thought of spending a lot of time with an obnoxious kid. Also I was angry at the head nurse who seemed to think that, because I was enrolled in a few basic psychology courses at the local college, I was the most qualified ER technician to deal with all the alcoholics, overdoses, and psychotics.

My thoughts came back to Cindy, the pretty 16-year-old lying on the emergency room stretcher in front of me. She was quiet now, and I knew the medication was working. She was pale and sweating slightly. Her hands trembled as she pulled herself to a sitting position and started vomiting rather violently.

When she finished, she was crying. She kept saying, "How can you just stand here and take all this? How can you stand the smell? How can you stand the sight of me after all the things I've just said? You should just let me die."

Something inside me started breaking up. Though it was painful at times, life had come to be precious to me. Now that protective wall which had kept me from getting involved with people like Cindy started to crack.

At the time I hadn't been trained in words like "catharsis." I really didn't know what that meant. But I did know that something special was happening to Cindy, and to me.

I told Cindy that I thought she was an important person—even if she didn't believe it at the time. I told her I'd like to help her if she would allow it. Her response was, "Don't waste your time on me. I'm not worth it."

There are thousands of Cindys in every city and town in the country. They appear in both sexes, in every age, race, creed, and social condition. They are the alcoholics, the overdoses, the drug addicts, all the hurting people we meet every day. And common to each one is a feeling that "I'm not worth it."



We learn to feel generally good or generally bad about ourselves over a long period of time.

I'm really not an OK person. Everyone else is OK, but not me. I'm a nobody, and I don't understand why you don't see that—"

This feeling is what is called low self-image. Most of us feel that way now and then, and it's an OK feeling unless it becomes a constant thing.

Most people would be surprised to hear beautiful, successful people, who appear to be specially gifted, express disbelief that they are indeed unique and special. Even the successful sometimes say they feel like failures.

A positive or a negative self-image doesn't just pop up suddenly. We learn to feel generally good or generally bad about ourselves over a long period of time. It begins at birth, possibly even before. And that positive or negative self-image is not really solid. Different

Kids learn from what they experience.



Jeff Mitchell

experiences may alter it throughout life.

Self-image is learned from others. Primarily, we learn self-image from our parents. Babies who are well cared for by loving and accepting parents usually develop strong positive self-images. A substantial portion of the self-image development becomes,



Kids who have a low self-image usually have the most problems.

then, the responsibility of the parents.

Kids learn from what they experience. If they live in an atmosphere where they are loved and accepted as valuable and unique human beings, they learn to feel good about themselves, and they also learn to love. On the other hand, if a child gets a message from his parents that he is not really welcome in the family and that he is, in effect, a pain in their lives, he will learn to mistrust himself and his parents. His self-image will be low and will probably be expressed in depression, rejection of others, perhaps even self-rejection, which usually implies self-destructive activities.

Also important in developing a kid's self-image are other relatives and the educational systems to which the young child is soon introduced. A kid will be frustrated by a teacher who sets goals and standards too high for the child to reach. He soon begins to feel like a failure.

And if his self-image is unstable because of the lack of proper home support, the failure he meets in school then reinforces his feeling that he is a rejectable person. Soon he expects rejection and tests every person he

meets. He may demonstrate negative behavior which is usually rejected, and this further strengthens his negative self-image.

Self-image is reinforced from another area—that of the peer groups. Kids have very strong needs for peer support, group identification, and loyalty. They undergo considerable pressure from their friends to do or not to do certain things. The weaker their self-image, the more they tend to follow the crowd instead of making independent choices. If the group rejects one kid, pressure is placed on all members of the group to maintain that rejection.

Often if the group leadership decides that smoking is a group pastime or a symbol, kids who strongly dislike smoking will smoke, rather than face coping with rejection by the group.

In my counseling experience, I've found that the kids who have a low self-image usually have the most problems, especially if drug and alcohol use is involved. After the curiosity, the excitement, and the initial pleasurable sensations are trimmed away and we get down to the hard facts, a kid who is serious about getting involved with drugs is feeling badly about himself before he ever takes any drugs.

He doesn't see himself as a valuable human being who has great potential and strength to climb to any height and overcome any obstacle and achieve any goal under his own power. The drug he takes becomes a crutch which he hopes will achieve what he is not confident enough to try for himself. He doesn't see the alternatives, the other things he could do with his life.

All of us are going to live with some kind of pain all the time.



I think the most important thing parents can teach their kids is to deal with the daily pain of living.

In general society teaches that we should always do away with all pain. But all of us are going to live with some kind of pain all the time. Maybe it's emotional pain, maybe it's sitting on an uncomfortable chair, or something else that makes us uncomfortable.

I think the most important thing parents can teach their kids is to deal with the daily pain of living. We have thousands of cures, bottles, pills, and alcohol, and we get away from our problems. But pain doesn't have to be totally negative. It's part of life, and we can learn to grow through pain.

I'm not suggesting that one who is seriously ill should just deal with the pain without the benefit of proper medication. Appropriate medication certainly has its place. Instead, the suggestion is that we teach kids to cope with the little letdowns and the disappointments we all meet each day, and that Mommy's hug is not going to take that all away. It's not a comfortable situation, but it can help us grow into better people with a peaceful life. That sounds like a contradiction, but peace is a mature method of dealing with pain and conflict.

Parents play an important role in developing a positive self-image within their kids. But kids themselves also have a great responsibility for their own self-image. They must realize that in a large measure they are responsible for the choices they make. If they choose to smoke or take drugs, they must realize that there are consequences which follow from these



An individual can take the responsibility for building up and changing his own self-image.

choices. They cannot place the blame for their drug abuse on parents, teachers, friends, or relatives. They have freely chosen that involvement, and they must accept responsibility for their behavior.

Self-image is never static. Various experiences in life can build up or destroy self-image. And if he's dissatisfied with his present self-image, an individual can take the responsibility for building up and changing his own self-image.

Change doesn't come easily. And most of us need help to change our self-image. Some people rely on friends to help them make changes. Others may need the help of a counselor. Sometimes kids need help in choosing a career or special programs that they might be interested in. Sometimes they just need somebody to listen. What is friendship? Two good friends are actually two people who need help, working together to achieve some kind of mutual help. I think most normal human beings have a need for guidance and counseling at some time during their lives so they may grow more effectively.

Counseling attempts to accept an individual where he is right now. I may not agree with the low self-image feelings he expresses, but for the meantime I'll accept those feelings. The process of reversing a negative self-image can be slow. It isn't changed into something positive overnight.

After initial acceptance of the individual as a unique and valuable person, the counselor will define more clearly

the problems and feelings that have led the individual to seek change. Then you can help him define all the alternative forms of behavior.

Sometimes you can't change what a kid may be up against. Perhaps his self-image can be improved, but his homelife can't be improved. If he has to continue to live within that situation, then you have to help him cope to the best of his ability. Learning to be peaceful, even in impossible situations, is a mature way of dealing with pain and conflict. He is still a valuable person, regardless of how painful his situation may be. He has to take a look at all the possible alternatives so that he can make a mature choice and then accept responsibility for the choice.

Sometimes a kid will make a bad choice, no matter what the alternatives are. You can guide him only so far; then when he makes his choice, that's a growth experience. He has to say, "Well, I made the choice, and I can't blame the counselor. I can't blame Mommy or Daddy. I did it. I took that choice." That is growth, OK?

A lot of times it seems we sit around and say, "I feel bad. Do something for me." This is a very passive thing. Change occurs only when an individual wants change to occur. It is an active process.

How do you change a negative self-image? One very effective way is to ignore the negative aspects of one's personality and emphasize those things that are positive. In other words, credit should be given where credit is due. If a kid can list two or three things about

Change occurs only when an individual wants change to occur.



himself that are positive, that's great and we should tell him so.

Another very effective way of dealing with a low self-image is to get the person interested in sharing with and caring about others. Teaching a kid to care for someone else helps him to stop concentrating on himself, a concentration which often leads to a continuous



If we try to eliminate someone else's pain, it takes care of some of our own pain.

disintegration of self-image. If we get involved in giving to other people, if we try to eliminate someone else's pain, it takes care of some of our own pain. If someone feels like a frog, sometimes a kiss really helps to change him into a prince.

Joan Baez does a song called, "Hello In There,"* and she says,

*"You know old trees just grow stronger,
Old rivers grow wider every day;
But old people they just grow lonesome,
Waitin' for someone to say,
Hello in there—Hello"*

*"So if you're walkin' down the street sometime
And spot some hollow ancient eyes,
Please don't pass them by and stare
Like you don't care.
Say, Hello in there—Hello"*

That's really all it takes. Giving—even in small ways—makes other people happy, and it builds up your own self-image. You are a special person to someone, somewhere.

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...AND SO FORTH

ACCIDENTS DEADLIER THAN DISEASE

Human error causes as much as 96 percent of the world's auto accidents. And traffic accidents are reaching increasingly epidemic proportions. According to the World Health Organization, for every 1000 vehicles involved in accidents, one person in industrialized countries and eight in developing countries are killed. Traffic accidents are the number one cause of death among young adults in the United States, Chile, Costa Rica, and Venezuela.

A PILL FOR EVERY ILL?

Consumers spend almost nine billion dollars every year on medicines that don't always give better health.

According to the Food and Drug Administration, we have a major drug problem that stems from the misuse or excessive use of medicines.

The FDA offers this advice: Don't buy medicine every time you don't feel well. Don't mix different drugs together without knowing if you might have an unfavorable reaction. Medicines may lose or increase their strength as time passes, so don't feel the largest size is the best buy.

And if you buy over-the-counter drugs, read the label first; also ask your pharmacist's advice. He may direct you to a lower priced brand than the one you chose.



"Group therapy."

KIDS WHO SMOKE AND DRINK LIKELY TO USE POT

A surprising 27 percent of high school students who take up smoking and drinking progress to marijuana within 5 to 6 months, while only 2 percent of nonsmokers and nondrinkers do so.

That's the finding of two studies, based on random samples of high school students in New York State. The studies also found that a substantial number of young marijuana smokers progress to other illegal drugs.

Twenty-six percent of the marijuana users went on to LSD, amphetamines, or heroin. But only 1 percent of nondrug users and 4 percent of smokers and drinkers did so.



Collectors that will absorb the sun's heat and use it for heating and cooling buildings are shown here at the Lockheed solar evaluating facility in Palo Alto, California. At the outdoor laboratory, researchers are now evaluating various types of solar collectors and other components used in solar-driven heating and cooling systems.

PARENTS ARE THE BEST TOY FOR KIDS

A parent is the best educational toy for a young kid according to a *New York Times* round-up of professional opinion on the value of educational playthings.

Contrary to the dark hints of toy manufacturers, children's mental development doesn't hinge on parents' choice of toys. The quality of preschoolers' total development does however, depend on the quality of their lives with their parents.

Intellectual development is interlocked with physical, social, and emotional growth. Parents who work along with their kids at ordinary routines, meeting mistakes with patience and good humor, fanning curiosity and fostering the will to try, are helping their youngsters develop "readiness" as packaged "educational" playthings never could.

DIVOTER'S DELIGHT

Rosemary Nichols

Hidden in the letters below are at least 51 words dealing with the game of golf. To find these words read the letters forward, backward, up, down, or diagonally. Draw a line around each word as you find it.

C R C A P E S F O R E O H N
H U O L I N K S A R D C E A
P C U D L E H K L I T E E S
L H R E P A O E V I R D E S
O I S R N O B O P G C W D A
B P E K H C T A M O P E A U
L U R A P P R O A C H D F Y
S L N B O U I L B A G G I D
F S U K S R T R S R U E W D
L L E P E E P T O T O I O A
C A A R L R Y S E N R G O C
D R D G D M A A I R L O D E
T U A E I D W L W E Y B K L
O E B E M S A B G N I W S E

ace	bye	dub	link	rough
address	caddy	eagle	lip	shank
approach	cart	fade	match	slice
away	chip	fairway	medal	stroke
bag	club	flag	nassau	stymie
ball	course	fore	par	swing
birdie	cup	green	pitch	tee
blast	divot	hook	pro	top
bogie	dogleg	iron	pull	traps
bunker	drive	lie	putter	wedge
				wood

DRINKING, DRIVING, AND DIETING

People on low-calorie diets should avoid drinking and driving, says a Canadian health official.

Dr. J. McLaughlin of the Canadian Department of Health has found that many dieters who cut down their food intake neglect to reduce their liquor consumption accordingly.

He cautions that as little as one and a half ounces of liquor may make a low-calorie dieter too drunk to drive.



A multiple exposure captures the grace and precision of American gymnast Ann Carr. Eighteen-year-old Miss Carr won a total of three gold medals during last year's Pan American games.

OUR LATEST SEXUAL DILEMMA

Recent behavior studies indicate that if a classic nursery rhyme had been changed to read "along came a spider and sat down ACROSS from her," little Miss Muffet might have been a bit more willing to share her curds and whey, instead of being so thoroughly frightened away.

Psychology experts at Purdue University have recently reported research suggesting that men and women have different kinds of territorial requirements.

Thus while women, like Miss Muffet, are more likely to be put on the defensive by side-to-side encounters, men appear more threatened by strangers in face-to-face approaches.

The sexual dilemma is obvious: When a man wishes to "approach" a woman by what he perceives as his least threatening route, he sits down beside her. To the woman, invasion of that particular personal space is most likely to trigger a negative response. Conversely, female strangers approaching a man from the front are more likely to make him uncomfortable and suspicious than those who choose a more lateral approach.

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On the Bicentennial

Anniversaries of any kind are usually happy occasions. They are times to take stock, reevaluate relationships, recognize problems and get set for future improvement.

Such are some of the purposes behind the anniversary being celebrated this year, the 200th birthday of the nation.

Obviously, there has been progress in these 200 years of American history, both for the nation as a whole and for its individual citizens. There has been much to be proud of.

But there are some things no one can boast about.

What nation can boast when millions of its citizens have a life-style which shortens life and reduces its quality?

Can a nation be proud when some ten million or more of its people are dependent on alcohol as a daily crutch?

What nation can exult when 60 million or more of its population use tobacco? Some say that tobacco is not addicting, but just ask anyone who has tried to kick the habit.

Moreover, can any nation boast when its citizens by the millions are being persuaded, by carefully orchestrated promotion campaigns, that it's medically and socially acceptable to protect themselves against all ordinary hazards of life by using chemical aids?

The penchant for popping pills is well nigh universal—to overcome that tired feeling, to go to sleep, to wake up, to be happy, to get rid of excess fat, to do about anything.

Furthermore, can any nation be proud of its people who reduce their usefulness or cut short their lives by poor dietary habits, either by choosing inferior or injurious foods, or by constant overeating?

All of which adds up to a major specter that in this anniversary year America needs to face realistically and vigorously. To do this on a national basis, it must first be done on an individual basis.

At a time like this, the ancient message of Scripture becomes very modern. The Master of men invites, "Come to me, all who labor and are heavy-laden, and I will give you rest." Matthew 11:28, RSV. How much better is this than taking pills to find rest and peace!

"Peace I leave with you; my peace I give to you. . . . Let not your hearts be troubled, neither let them be afraid." John 14:27. How much better is this assurance than hunting up a drink or two to try to drown your troubles!

When asked what is most important in life, the Master summarized, "You shall love the Lord your God with all your . . . mind. You shall love your neighbor as yourself." Matthew 22:37, 39. How much better is the unselfish principle of love than blowing one's mind with substances that confuse instead of help!

In this Bicentennial year, of all years, it would be a real service to the nation for all of its citizens to develop and live a life-style that is only the best, one which would both lengthen life and improve its quality.

In this way the nation itself would benefit in every way as it begins its third century.

Francis A. Soper

Listen

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Fogbound

How can I start this poem. I don't know,
Because I'm fogbound and my mind works slow.
Confusion reigns in my head,
And there's many a time I wished I were dead.
Sometimes I think, when my mind is semi-clear,
About who I am and why I'm here.
But usually when I'm thinking good things for myself,
I smoke another joint and put my head up on the shelf.
And then like a ship sailing blind,
I let the fog invade my mind.
When the fog is there, I just don't care—about others,
about anything.
Why I could even drive my car into a wall.
After a while, I'm starving to eat
All kinds of junk, usually something sweet.
But for all I eat, and this I really hate,
I just can't seem to gain any weight.
So after wasting all that food, and then getting tired,
I ask myself, Why do I keep getting wired?
I've done many things and traveled far;
I'm lucky I still have a job and a car.
I think of the chances with lovers that I have blown,
And the only reason I blew it was the fact that I was stoned.
I didn't know what to say, I was fogbound.
The weed I copped was always the best.
That means nothing when they say, "You're under arrest."
I spent a few nights in jail. They stink,
But who cares anyway? I was too blitzed to think.
Smoke Columbian, Panama Red, Acapulco Gold;
Smoke enough; you won't worry about getting old.
Just sit there, and get wasted all day,
And eventually you'll just waste away.
You won't care, you'll be fogbound.
I've smoked for many years now; these past years have been
a maze.
And it sure didn't help being in a constant haze.
They say that pot isn't addicting, but that isn't the point.
Because the more I smoke, the more I look forward to the
next joint.
It isn't like I'm a junkie, to get the money he would steal.
I'd compare it more to a wound that just won't heal.
So if there's a song of pity for me to be sung,
Don't sing it for me—sing it for my throat and lungs.
This is more or less just rambling rhyme,
The King of Fools for this I will be crowned.
But maybe if you read it and take the time,
You won't end up dead or worse yet, Fogbound.



LOOKING FOR SOMETHING?

Six books now available on the subjects of sex, drugs, and alcohol.

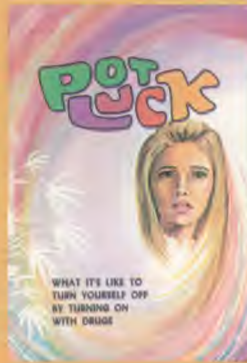
UP THE DOWN ROAD

There's Hope and Help for the Alcoholic
Cecil Coffey



UP THE DOWN ROAD

The Alcoholic: He drinks to live and lives to drink. But there is hope and help for the alcoholic. Questions and answers concerning the roads to alcoholism, what it is, who it affects, what the results are, and where to go for help are discussed. Price \$.60

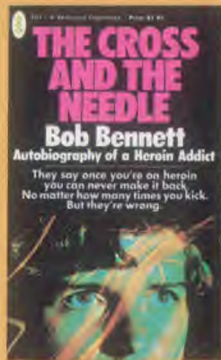


POT LUCK

What's it like to turn yourself off by turning on with drugs? Teen-agers speak out about dope, LSD, hash, uppers and downers, and all the rest known to those who have gone that way. A doctor deals with effects of such drugs upon the body. But the ending note from a girl of seventeen packs more punch than any lecture. Price \$.60

THE CROSS AND THE NEEDLE

"Here give it to me, man," I said. "I'm not scared of the needle." Someone has said that once you are on heroin, no matter how many times you kick the habit, you can never make it back. This story tells of one who did make it back—with the help of Jesus Christ. Price \$2.50



THIRSTY?

This is about drinking—pop wines, beer, any kind of booze. And it's about another kind of drinking. You'll find out about that kind by the time you read the end. Price \$.40



UNEASY BREATHER

Fact: There are no good reasons to smoke. Some 49 million people in the United States smoke, but 75 percent of them want to quit. Why? Geared to the youth, this booklet takes a new slant on smoking with suggestions on how to beat the habit and take hold of the breath of life. Price \$.40

"I'VE GOT THIS PROBLEM WITH SEX—"

When God created man, He made a being with emotional, intellectual, spiritual, and physical capabilities. This booklet provides guidelines to help deal with individual physical temptations, keep them in balance, and still maintain Christian growth. Price \$.40



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