

# LISTEN

## *Liquid Death*

When Alcohol and Water Don't Mix

■ Do Pot Smokers Hurt Others?

■ What the Press Didn't Print  
About Moderate Drinking





# The BEST PARTY

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Margaret Shauers

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"But, Mother!" Karen wailed. "It's not fair to say I can't go to Barbara's party just because you don't like her parents."

Mrs. Baxter sighed as she pulled the casserole from the oven and watched Karen putting the finishing touches to the table setting. "I don't dislike the Bierlys," she said. "I actually don't know them. But, Karen, it's rumored that they have some pretty wild parties for their adult friends. I'm just not sure that a party given by their daughter would be properly chaperoned."

"Barbara's not wild!" Karen insisted stubbornly. "She's pretty and terrifically popular. She has the very best parties. Everyone from school wants to go. I was lucky to get asked! Besides, I'm old enough to know right from wrong. You just don't trust me, that's all!"

"I do trust you, Karen," her mother said patiently. "But it isn't always easy to do what's right when everyone else does something wrong." She sighed again and shook her head. "No, Karen," she said firmly. "You'll have to tell Barbara you can't go. But don't worry. Plenty of your other friends will be having parties this summer."

But none like Barbara's, Karen reflected sourly after dinner while trying to keep her younger sister, Melanie, from making too much of a mess while doing dishes. None of my other friends are as popular as Barbara, she reasoned. I'm tired of being one of the school squares. Barbara's come to like me since we've worked together as hospital volunteers. I want to go to her party! I really do!

But even as her desire grew stronger, Karen knew there was no use trying to change her mother's mind. It wouldn't help to ask her father, either. When one of her parents made a decision, the other always agreed with it. Telling Barbara wasn't going to be easy, though. After all, she thought, how do you tactfully tell someone, "My parents don't approve of you even though they've never met you or your family"?

Karen was still trying to phrase a good refusal

the next morning as she put on her striped volunteer's outfit, walked the six blocks to the hospital, and picked up the mail she delivered to the patients each morning. She still hadn't thought of anything suitable when she met Barbara in the second-floor hall.

"Don't forget," Barbara said when she saw Karen. "The party starts at eight tonight. And do bring a sweater. It still gets chilly by the pool after ten or so."

Karen gulped. Barbara was so sophisticated and sure of herself. It had obviously never occurred to her that anyone so insignificant as Karen Baxter might turn down one of her coveted invitations!

"I—I'm afraid I won't be able to make it tonight," she managed after a long pause. "My parents—er—my parents claim I've been on the go too much lately." She laughed shakily. "Rot-ten, of course. But you know parents!"

Karen immediately felt ashamed for lying. She hadn't been anywhere since summer vacation had started. And she didn't usually put her parents down. But Mother, Karen thought, was being completely unreasonable about this.

Barbara looked first surprised, then sympathetic. "Yeah, parents!" she said with a sigh. "Mine go around doing the most outrageous things and then yell like fury if I do anything half as bad. But look, Karen, why don't you do what I do when I'm not supposed to go out? Plead a headache, go to your room, then sneak out the back way as soon as you can."

Then she added when Karen looked surprised, "Or are your parents the fussing kind who check on you when you're sick?"

"I—I'm afraid they are," Karen said weakly, glad for the easy out.

"Oh, well, I'll be having lots of parties this summer," Barbara said easily before moving on down the hall. "I'll let you know early so you can stay home long enough to please your parents next time. I'll tell you everything you missed when I see you tomorrow."

## • THE BEST PARTY •

Karen smiled weakly and walked off, feeling confused. Sneaking out of the house was dishonest—a lot more dishonest than the “polite” lie she’d told Barbara about why she couldn’t come. She wondered what sort of things Barbara had done to make her parents yell at her. Still, Barbara had seemed so nice as they’d worked together. And she and her special friends always seemed to have more fun than anyone else in school. It would be nice to belong to that crowd.

“She’s probably never sneaked out in her life,” Karen told herself firmly. “I’m sure the thought just popped into her head.”

“Oh, Karen,” her mother called the minute she got home, “there’s lunch here for you and Melanie, but I have to run. I’m going to do some shopping. Then your dad suggested that he and I go out for dinner.” She looked happy and excited about an evening out. “I’m so glad,” she said, giving Karen a light kiss, “that I can depend on you to keep an eye on Melanie for me. Thanks, dear. We should be back by ten.”

Karen hadn’t said a word the whole time her mother had been speaking. She was too surprised—no, shocked!

That’s why she wouldn’t let me go to the party, she thought angrily. She knew yesterday that she’d need me to baby-sit.

Even as the thought flew through her mind, Karen only half believed it. Her dad really did occasionally decide on the spur of the moment that they should go out. But no matter how she tried, Karen couldn’t quite push away the suspicion that her mother had used her to further her own plans.

“I’ll go to the party after they come home. If Mother can be sneaky, so can I!” Karen resolved more than once during the rest of the day. But when the time came, she found that she couldn’t follow through. When her parents got home she simply went to bed and lay there miserably, filled with thoughts of her mother’s actions and the near certainty that, had she been able to go to Barbara’s party, she would now be an accepted member of the most popular crowd in school.

These thoughts were still with her the next morning, and as her mother hummed and smiled her way through breakfast, Karen’s anger flared anew.

“The next time you need a sitter, please have

the honesty to tell me in advance,” she snapped when she could stand her mother’s apparent self-satisfaction no longer.

She hadn’t meant to express her suspicions out loud. But even as she half-regretted the words popping out, she found herself adding, “Well, your plans were the real reason I couldn’t go to the best party in town, weren’t they?” Then, as the happy look slid from her mother’s face, she rushed from the house and ran nearly all the way to the hospital.

She decided as she picked up the patients’ letters that she would let Barbara know that she would come to her next party—with or without her mother’s permission.

Barbara, however, didn’t seem to be on duty, although Karen was sure she’d seen her name on the duty roster the day before.

“Is Barbara Bierly sick or something?” she asked one of the other volunteers at noon as they turned in their mail trays and book racks at the office.

The other girl shrugged. “I haven’t seen her, Karen. But I know she hasn’t been here. I had to take library books to some of her rooms as well as mine.”

“She’s not sick,” one of the afternoon volunteers said, looking up from the flower deliveries she was arranging on a cart. “She’s in jail.”

“Jail!” Karen echoed incredulously.

“Well—” the girl hesitated. “She may be home now, but she and a bunch of those wild kids she hangs around with had a party last night. My dad’s a policeman, and he said they spiked the punch with gin. One guy got really drunk and jumped into the pool fully dressed. He almost drowned, so they had to call for help. Dad said the whole group was intoxicated and Barbara’s parents weren’t home, so the police hauled everyone in.”

She shook her head. “Barbara’s nice enough to work with, but my dad says this isn’t the first time her parents have had to bring her home from the police station. She’s pretty mixed up, I guess.”

Barbara isn’t the only one who’s mixed up, Karen thought as she slowly walked home. I was until now. She knew she should apologize for her cruel words that morning and let her mother know she’d saved her from the best party she’d ever missed! ◇

# Ask a Friend

JACK ANDERS

**My boyfriend is 21 and I'm 17. I love him a lot, and he says he loves me. I've been going with him for almost two years. The problem is he always seems to have other things to do and never enough time for me. What should I do?**

One of the real problems with relationships is the differences in caring between individuals. In any relationship one person nearly always cares more than the other person. The ideal would be that both of you would equally want to be with each other. But this rarely happens, except in the very early stages of a relationship.

You say that you love your boyfriend a lot, and then you go on to say that he says he loves you. I would assume by that that you're not sure that his love for you is as sincere or as real as your love for him, and this may well be true. This brings up another problem in early relationships: that it's very hard to maintain trust in another person.

You also say that he never has enough time for you. Perhaps you are too eager to be with your boyfriend and want to be with him all the time. If this is so, he may be feeling smothered and is afraid of being "swallowed up" by you. You might try letting go a little and see what happens.

When you are with him, pay attention to having a good time with him and not complaining about not being with him more. You can spend a lot of time when you are together complaining about the fact that he hasn't paid more attention to you, and as a result he may not want to come around just to be scolded.

You also say that it seems that he always has other things to do. Now, it may be that he's growing away from you. Certainly he is different at 21 from the way he was at 19 when he first started going with you, just as you are different now than when you were 15.

One of the problems with growing up is this matter of growing out of or away from a relationship. Since you say you love him a lot, it may be very painful for you to let him go, if this is what he wants. I have not found any easy ways to end a close relationship such as you must have after two years. I would not attempt to minimize the depth of or the intensity of feelings that an individual can have at age 14 or 15. Certainly not at 17 or 18, such as you are now. There's no doubt that your feelings are real.

The problem with relationships at an early age is that there's so much change going on within us that our feelings also change. Statistically, there are very few childhood sweethearts who continue going with each other and end up married and living happily ever after.

Remember that love cannot be forced. I recommend that you give your friend some space and not put demands on him for time and attention. Then when you are together, do all in your power to make these times as much fun and as meaningful as possible.

**I have a friend who thinks he's better than everybody else, and when he borrows things he doesn't return them or pay for them. He brags about himself constantly. How can I let him know I'm fed up with his behavior?**

In communication theory there is a principle called "problem-ownership," which means simply that whoever has the problem must figure out the solution.

Now, this fellow you describe doesn't have a problem because he's getting away with his behavior. *You* "own" the problem because *you* are "fed up" with his behavior.

Rather than give him a "You" message such as, "You make me mad," or "You're really a jerk," I recommend that you use an "I" message.

An "I" message has three parts: (1) A description of the behavior that is bothering you (usually this starts with the word *when*); (2) a statement of how you are affected by that behavior (this usually starts with *because*); and (3) a statement of how you feel about that behavior (this usually starts with "I feel").

You can work out your own "I" message, but here's a sample: "When I lend you something and don't get it back or get paid for it, I really get bothered and feel angry because the stuff I lend you costs, and I have to spend more of my own money to replace it. I want to be your friend, but I'm fed up with the way you've been acting."

I have found that people like your friend are very responsive to a straightforward and kind message that is delivered without anger. If you want more information on "I" messages, I recommend you read some of the books by Dr. Thomas Gordon, such as *Parent Effectiveness Training*. ♦



Have a question about friendships, family relations, drugs and health, or other teenage concerns?

Ask a friend—Jack Anders, parent, grandparent, counselor, and social worker from Silver Spring, Maryland.

Address your question to "Ask a Friend," *Listen Magazine*, 6830 Laurel Street N.W., Washington, D.C. 20012. Because of space limitations we cannot print all questions and answers in the magazine.

# DEALING WITH DEPRESSION

● VIVIAN BUCHAN ●

You've got the blues again. Everyone says you've got everything going for you, but you're still seeing the world through navy blue glasses even though you wish they were rose-tinted.

Your parents keep reminding you that these are the best years of your life, but you figure that if these are the best years, what's the use of going on?

Adults seem to think that adolescence is a time for fun and games. Teenagers don't have mortgage payments to meet, jobs to hold down, restless kids (like you) to cope with. So why aren't you happy?

"Sure," you agree. "Everything you say is true." But you're still either so mad at the world you can't stand it or you're so down in the dumps you don't care if the world keeps turning or not.

What's wrong?

It could be you're depressed. We know that at least one out of every five adults is going to be victimized by a major spell of depression at least once in his or her life. Until recently, however, it was never considered that young people get depressed and can become so overwhelmed by this crippling and sometimes life-threatening disorder that they lose their perspective and grip on life.

Now we're learning that depression can occur at any age (even in young children) without apparent reason or warning. Depression is a serious condition. It can lead to drug or alcohol addiction, criminal activity, antisocial behavior, mental disorders, and even suicide.

Until recently, however, we hadn't considered that such deviations from normal behavior could be caused by some biological malfunction or genetic predisposition.

Dr. Christopher Hodgman, a child psychiatrist at Strong Memorial Hospital in Rochester, Minnesota, says, "Childhood and adult behavior may be more closely linked than a lot of people like to think. We're looking again at behavior we have always accepted as bad nurture [caused by a bad home environment or disruptive social influences]. There's much evidence now that there are underlying biological causes [for such behavior]."

Biological causes for the blues? What's he talking about?

Dr. Joaquim Pugh-Antich, assistant professor of

psychiatry at Columbia University, explains that there are strong indications that youthful depression could be caused by a physical condition rather than by mental or emotional factors.

In a study that involved a group of depressed children, he found that 90 percent of them had abnormal levels of the growth hormone in their blood. Furthermore, this abnormal level of the same hormone appears in the blood of depressed adults.

Doctors have known for a long time that some people are born with a predisposition toward developing certain diseases or disorders at some time in their lives. Cancer, diabetes, high blood pressure, tuberculosis, and heart disease are some of the diseases to which people can be predisposed.

Now the question arises, "Can a predisposition toward depression be the cause of this problem in some people?"

The answer is Yes.

The tendency toward depression can lie dormant for years until some incident triggers a response. It could be the loss of a friend or pet; it could be the loss of a parent through death or divorce; it could be as insignificant (to an observer) as not making the honor roll or being cut from the football squad.

One of the reasons depression in children and young adults has been so hard to diagnose is that they don't understand just what depression means or have the vocabulary to talk about their feelings.

**How would you answer some of these questions:**

- Do you hate someone so much you get sick to your stomach just hearing that person's name?
- Do you cry (or feel like it) for no reason at all?
- Do you think nobody likes you?
- Do you wish your parents understood you better?
- Do you wish sometimes you could just crawl off somewhere and die?
- Do you wonder why you're so peevish and irritable with even your best friends?
- Do you wish your parents would quit bugging you about the way you're acting?

Now, such feelings in themselves do not necessarily mean you're depressed unless those feelings continue over a long period of time. Nor do they necessarily

mean your blues could stem from a biological reason such as an abnormal level of growth hormones in your blood. On the other hand, your feelings *could* be the result of some biological disorder.

Dr. Stephen Munson, assistant professor of child and adolescent psychiatry at the University of Rochester Medical Center, says, "We have to try to understand what kind of stress will combine with a genetic predisposition to cause an illness such as depression. Depression makes people feel terrible about themselves. It robs them of their ability to continue to develop the skills they need for life."

Let's take a child who needs glasses but has no idea that he does. He thinks the world looks as distorted to everyone else as it does to him. He's not aware that his view of the world is distorted. He thinks that's the way the world actually is.

The depressed adolescent may think that all adolescents feel as he does. The frame of reference and the lack of knowledge handicap that person to such a degree that he's totally unaware that his feelings aren't normal.

Because depression is so often misdiagnosed or overlooked, it often creates such deviant behavior that the

cause of the conduct is lost in the effects.

Depression can be treated as a medical disorder. Doctors can prescribe antidepressant drugs which, by the way, must be monitored closely, for the side effects can be serious.

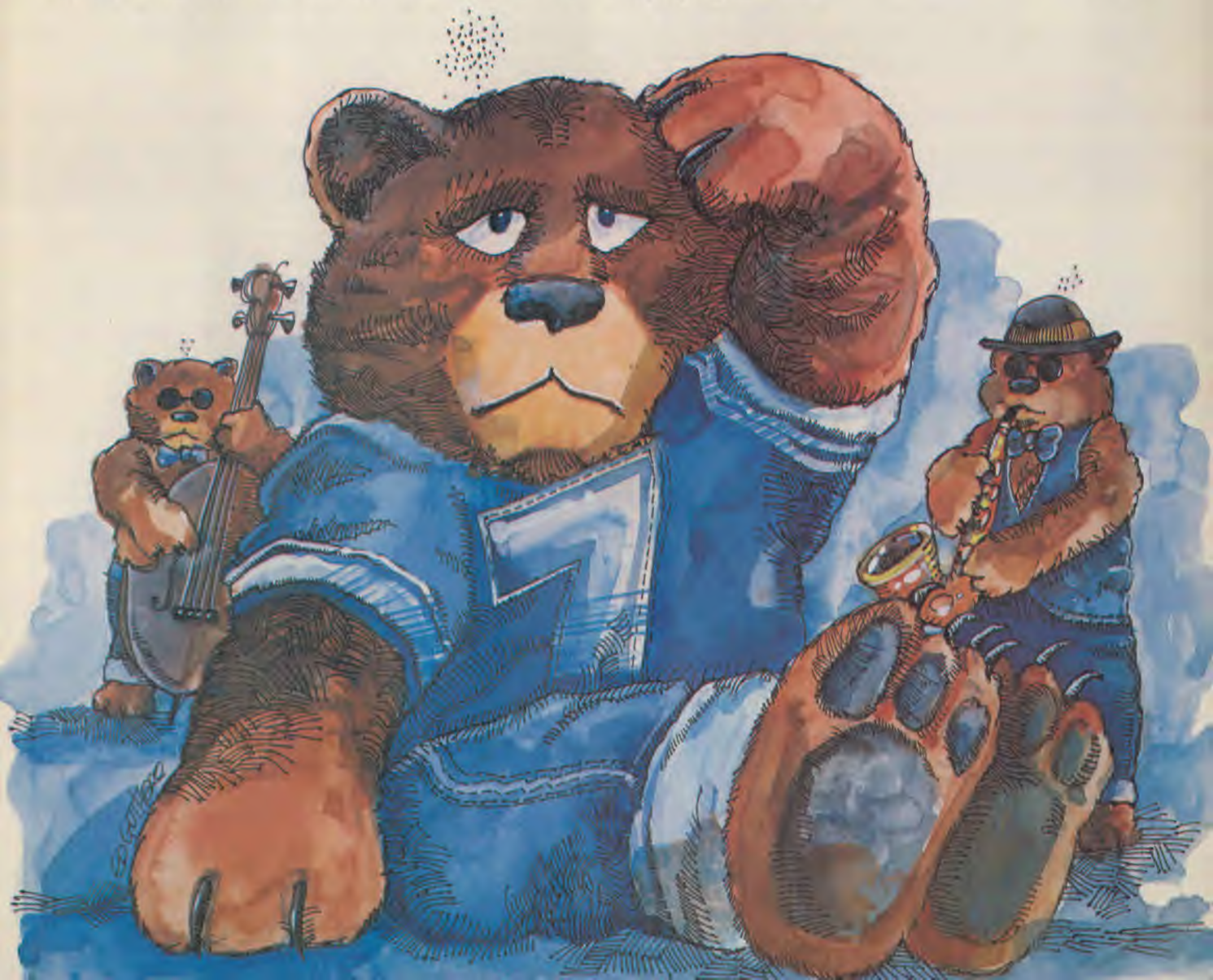
So if you're feeling depressed, don't resort to taking pills to "up" your "down" feelings. When you do, you're treating the symptoms, not the cause, and the result could be disastrous.

If you're feeling out of kilter with the world around you, and your spell of the blues is lasting longer than you think it should, it's time to seek professional help.

It's sad when a depressed person doesn't reach for help that may be right at hand to turn his navy blue world to rosy pink again. It's sadder yet when the person turns to drugs or alcohol to relieve the stress or even considers suicide as a way out.

Help may be at the other end of your telephone or just behind that door down the hall where some counselor may be waiting. Talk to your family doctor about being predisposed to depression and have him or her help you tackle your problem.

But whatever you do—and however you do it—don't keep crying the blues. ◇



# Alcohol & Your Heart

## WHAT THE PRESS DIDN'T PRINT ABOUT MODERATE DRINKING

J. A. SCHARFFENBERG, M.D., M.P.H.

"Alcohol use to increase HDLC (high density lipoprotein cholesterol) level is not encouraged at this time."

Such was the conclusion of a report of a recent study<sup>1</sup> published in the *Journal of the American Medical Association* which demonstrated that beer elevates the good kind of cholesterol (HDL) in inactive men.

In contrast to that conclusion, the Associated Press wired to newspapers throughout the country a story which stated, "Drinking three beers a day may give an inactive person as much protection against heart disease as running gives to marathoners, a new study suggests."<sup>2</sup> Some newspapers titled the message, "Three Beers Per Day May Help Heart."

The authors of the study further stated in their report, "We are also aware of the considerable body of literature that links excessive consumption of alcohol with adverse physiological and social conditions, including cirrhosis of the liver, hypertension, cardiomyopathy, pancreatitis, and a host of social problems related to alcoholism."

The first statement was a scientific message to scientists. The Associated Press statement was a nonscientific message sent by nonscientific minds to the population of the whole country. The first statement did not allow for unwarranted conclusions. The second statement does.

What are the facts? It has been known for a long time that alcohol does increase the good kind of cholesterol in the blood stream—the HDL cholesterol. It has also been known that people with higher levels tend to have fewer heart attacks. However, it is not known, as this study clearly states, whether increasing HDL cholesterol reduces the risk of coronary heart disease.

Organic pesticides also increase the HDL cholesterol, but no one is recommending that anyone take organic pesticides for this purpose. It is also known that a person who drinks enough alcohol to get cirrhosis of the liver has only one fourth the risk of a heart attack as those in the general population. But no one is recommending that people drink until they get cirrhosis of the liver in order to avoid heart attacks. So the fact that another study shows that the HDL cholesterol is raised by drinking three beers a day is no great news and should not be used to promote the consumption of beer.

There are studies, such as those of Dr. Takeshi Hirayama in Japan, which show that moderate drinking reduces mortality from heart disease. But does Dr. Hirayama recommend drinking because of this? Not at all. Why not? His studies show that overall mortality is increased even by moderate drinking, even though the heart-disease mortality is lowered.

Yes, HDL cholesterol is inversely related to heart attack risk as far as individual risk is concerned. However, "its presence explains little of the differences in rates between populations," according to the recent report of the World Health Organization's expert committee on coronary heart disease prevention.<sup>3</sup> It states that the LDL cholesterol (low density lipoprotein cholesterol, the bad kind) is mainly responsible for the population differences in heart disease risk. In the American Medical Association study, it was pointed out that alcohol did not lower the LDL cholesterol. Yet it is this cholesterol that must be reduced by dietary change or by stopping the use of cigarettes to reduce heart disease risk.

Some studies have shown that the overall mortality rate was lower in moderate drinkers than in nondrinkers. In one such study, Nancy Day Asher divided nondrinkers into reformed drinkers and lifetime nondrinkers. The reformed drinkers had high mortality rates and, when lumped together with the lifetime teetotalers, elevated the total nondrinkers' rates above that of the moderate drinkers.<sup>4</sup> It is known that reformed drinkers have high mortality rates. The cause of this has not yet been investigated.



Seventh-day Adventists (who are nondrinkers) have lower death rates from all causes combined than do moderate drinkers.<sup>5</sup> Therefore, alcohol is not something to be recommended based on overall

mortality rates. The Adventist mortality rates from alcohol-related conditions are only 13 percent of the expected for cirrhosis of the liver, 54 percent from single vehicle accidents, and 34 percent for esophageal cancers.

It has been shown that Seventh-day Adventists have lower death rates from coronary heart disease than do moderate drinkers.<sup>6</sup> Seventh-day Adventist men age 35 and over have coronary heart disease mortality rates of 14 percent, 39 percent, or 56 percent of the expected, depending upon whether they were total vegetarians, lacto-ovo-vegetarians, or nonvegetarians, respectively.

Most studies on alcohol and coronary heart disease don't include the diet variable in the study. The Tecumseh study did show that men with low blood cholesterol levels had higher coronary heart disease rates if they were moderate drinkers than if they were nondrinkers,<sup>7</sup> but in this study the

heavier drinkers had the lowest rates. However, most studies have shown the heart disease rate does go up with the greater amount of alcohol used. Since Seventh-day Adventists have shown much lower heart disease mortality rates than moderate drinkers, one certainly cannot come to a conclusion that drinking is of value from this standpoint if the whole life-style is considered.

Imbibing of alcohol leads a certain percentage (about 5 percent) of people to become chronic alcoholics. There is no way to differentiate psychologically between those who will and those who will not become chronic alcoholics. In a country where there are an estimated 17 million chronic alcoholics,<sup>8</sup> one dare not recommend alcohol.

Cirrhosis of the liver is the seventh leading cause of death, the fourth leading cause of death in men age 35 to 54, and fifth leading cause of death in women of that age group. Accidents are the leading cause of death in the age group under 30, and 59 percent are alcohol related. Alcohol is listed as either the third or fourth leading public health problem in the United States, and some would even say it is the leading public health problem. The economic costs are staggering. Alcohol is now being associated with high blood pressure, cardiac arrhythmias, and impairment of cardiac function.

Research on alcohol as it relates to heart disease is important. But suggestions by nonscientific minds that alcohol is useful in the prevention of heart disease is useful only in selling newspapers. Such promotion by the press is a disservice to the public's health. ◇

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5. *Adventist Health Study*, Loma Linda University, Loma Linda, California.
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# "POT SMOKERS DON'T HURT ANYONE."

"I'm all for legalizing marijuana," the portly man on the bus intoned. "So the kids smoke a few joints. So what? They're not harming anyone, and if they get enjoyment out of it, more power to them. It's about time the police stop harrassing them and go after some real criminals."

"God knows there are enough of them, some of them getting away with murder, literally," his seatmate agreed. "I get them in my office every

day. But really, it's the principle of the thing. By passing laws against the use of marijuana, we are undermining the very freedom for which our fathers fought."

"It's an invasion of privacy," the first said again. "No government has the right to decree what a man can or can't do in the privacy of his own home as long as he's not hurting anyone else. And what harm does marijuana do?"



The pair stood up, took their briefcases, and got off at the courthouse.

It made a lot of sense, I thought. Even if I don't choose to use marijuana myself, what right do I have to impose my standards on others?

I closed my eyes and leaned back in my seat as the bus rolled onward toward my office and the start of another day. What a night last night had been! Those two neighbors of mine from 627 had been at it again. Honestly, rather than harassing harmless marijuana smokers, the police should be enforcing existing laws against disturbing the peace, I thought. If the Hansons wanted to fight, that was their prerogative, but why did they have to involve the whole neighborhood?

I had almost become used to the frequent outbursts, the wife's screaming, the husband's cursing and pounding on the door when he was locked out. They had become part of life, but they were still an annoyance, a disruption of the peace we had come to expect and enjoy in our quiet neighborhood. Like many of the neighbors, I secretly wished that the Hansons would move elsewhere.

Last night had taken the cake! At first it had seemed an improvement. There were several cars parked in front of the house, and as I fell asleep I could hear guitars and the sound of people laughing and singing. But sometime in the early hours of the morning, the tranquility had been shattered.

Living in the city, I was used to hearing sirens. They were part of the normal background of city life, blending with the hum of traffic and the click of electric buses to lull me to sleep. But last night was something else! A whole battalion of sirens seemed to have been bearing down on me, each screaming, rising in crescendo to an ear-shattering shriek. Then, directly in front of our house, they had stopped.

When I had heard the sirens on my street, I had gone to the window, pushing the curtains aside. On the street below was a confused array of fire engines, ambulances, and police cars, with uniformed officers swarming among them. Two policemen were just ascending the steps to 627.

"Oh, no," I groaned. "Not the Hansons again!" When I saw that my husband was awake, I flicked on the light. It was 1:30 a.m.

"I just can't take it anymore," I told him. "I'm getting to be a nervous wreck. Either those

people move out of the neighborhood or we do."

I returned to bed with him, but sleep was out of the question. At six I had gotten up, dressed mechanically, made breakfast and lunch for the children, then sat down to eat before catching the bus to work. It was the end of the month. There were invoices to be typed, and I worried that I wouldn't be able to stay awake.

Later that day at the office my fingers moved mechanically, almost independently of the rest of my body, but my eyes burned, and my body seemed to be going in slow motion.

I was glad when ten o'clock came so I could take a break. I picked up the morning paper and sat down to relax for a few minutes.

Turning to the local news, I read a light-hearted account of a case of mistaken identity, a feature on the renovation of one of the city's historical landmarks, and a report of a dog that had been lost for several weeks being returned to its owners. Then a short item at the bottom of the page caught my eye.

"An early-morning pot party at 627 North 6th Street left two people dead and three children orphaned," I read. "What started out as a birthday party for Jim Hanson, 26, turned into a tragedy."

I stared at the page, inexorably drawn to the words. That address—that was the house across the street! With my heart in my throat I read on.

"The party had progressed through numerous joints of marijuana when Mrs. Hanson received a phone call. Mr. Hanson felt she was taking too long and ordered her to hang up. When she did not comply, he went into the bedroom, came back with a gun, and shot her, killing her instantly. Then, while horrified guests looked on, he turned the gun on himself. He was pronounced dead on arrival at the hospital.

"The Hansons had three preschool children."

I buried my face in the newspaper. "Oh, God!" I cried. "Those children!"

After a bit I began reading the paper again. An item in another section was about an organization calling for the legalization of marijuana. This must have been what prompted the conversation I had heard earlier on the bus, I thought.

"Marijuana is harmless," the organization's spokesman was quoted as saying. "Unlike thieves, murderers, or even litterbugs, pot smokers don't hurt anyone." ◇

*Elfriede Volk*

# Guarding THE FUTURE

## Listen interviews Surgeon General C. Everett Koop



**Dr. Koop, what do you consider the major problem today in the overall health field?**

I think the number one health problem in the United States is smoking. This year 330,000 people will die from smoking-related deaths.

As far as your audience is concerned, just since you and I have been sitting here talking, 10 high school students have started to smoke for the first time. If we could stop high school kids from smoking, I think we would be able to help them build a much better life, free from addiction. However, it's difficult to tell a young person that he's going to die of cancer of the lung 40 years from now. He won't listen—he never thinks he's going to die.

**What are the major effects of smoking on a young person?**

Smoking immediately impairs a young person's lung function so that he isn't as good athletically. It lays the foundation for heart disease and pulmonary disease, as well as for cancer. Also smoking gives you terrible breath. I don't think the opposite sex likes that too much.

If those five things aren't enough to make a young person stop smoking, then we must not be getting the message across.

But let me say that daily smoking among high school seniors is going down and has been going down for three years. That's a good sign, and I'm happy about that. But it would be still better if we could persuade them not to smoke before they ever start.

**Why do you think kids start smoking in the face of all these dangers?**

It makes them feel bigger than they really are. They

bow to peer pressure. They like to be part of the crowd. But my response to that is that there's a big crowd of kids out there who don't smoke. Make yourself a part of that crowd.

**Do you envision the development of a reverse peer pressure so that kids will feel more accepted when they don't smoke?**

That is happening in some places where organizations or specific people in schools are trying to get kids to understand what lies ahead if they begin to smoke. And I look forward to the day when there are student activists who are firmly anti-smoking the same way that Students Against Driving Drunk are making an impact on their peers.

**Do you think the kids could serve as an advance guard in developing a society geared toward nonsmoking?**

I don't think there is any other way such a society can develop. If we try to work only with the people who are already addicted and cut down their numbers, we're not going to accomplish nearly as much as we will if we prevent new smokers from starting.

**Do you see the terrific pressure exerted by advertisers today as a major hurdle to overcome?**

The problem is not only the advertising pressures but also the role models whom young people see, such as in movies and on television. These role models portray smoking as cool, smart, the thing to do. Who wouldn't want to have the fun that you see in some of the ads for cigarettes? But the fact is that you can have that same fun otherwise, even though the implication of the ads is that you can't.

**Why do you think the media portray smoking in such an attractive fashion?**

I don't think there's any doubt about the fact that the people who run advertising campaigns understand what's at stake healthwise, but as they say, they're in business and have to capture a market, and the earlier you capture it, the better off you are.

### **Obviously then it's a matter of money?**

As so many things come down to in this life, it's a matter of money. However, we must get across to young people that it's a matter of health for a long, long time. If a young person could see, as I have so many times, an adult victim of emphysema approaching the last days of his life and literally gasping for his next breath, the young person's intelligence would tell him to stop smoking.

### **Does smoking have an effect on a young person's looks?**

I don't think it has any effect on looks that can't be patched up with cosmetics. I saw a remarkable editorial in *Medical Tribune* a short time ago that was a takeoff on a popular slogan for one of the cigarette companies. It said, "You've come a wrong way, Baby!" Then it detailed all the things that are "not cool" about starting to smoke if you are a girl.

As you know, the pressure seems to be greater among teenage girls than among teenage boys, and women are following right behind men in this tremendous upsurge of cancer of the lungs and other organs, directly and indirectly as a result of smoking.

### **From your experience as a physician who deals specifically with young people, would you say that the earlier a young person starts a habit like this, the greater the impact that habit has?**

The studies that have been done in our own government circles on behavior indicate that with smoking, the earlier you start, the more difficult it is to give up.

### **Do you feel that this is the result of its effect on the nervous system?**

I don't think we can pinpoint it that accurately, but we can say that nicotine, which is the substance in tobacco that makes you want to keep on smoking, is the most addictive drug in this country.

**"Last year there were 55,000 deaths on our highways. One half of those involved drunk drivers."**

### **How do you compare the impact and prevalence of smoking with that of drinking?**

It's difficult to talk about their impact unless you make clear whether you're talking about it in terms of economic effects, loss of life, or disability.

Smoking takes its toll very slowly and very gradually, and the last days are postponed for a long time. With drinking it's a matter of lack of judgment and loss of reflexes. When you are doing something that requires skill, such as driving a car, it can have an immediate and totally unexpected effect and not only snuff out a young life early, but what is in a sense

even more tragic, it can paralyze a young life for the next 50 years.

Last year there were 55,000 deaths on our highways. One half of those took place because there was a drunken driver involved. When you realize that 10 percent of our population uses alcohol, you can see that you don't have to be an alcoholic to have alcohol put you in the driver's seat of a killing vehicle.

### **How can we teach young people to take responsibility for their actions and for the consequences of those actions and to foresee what can happen when they drive drunk or ride with someone who's been drinking?**

I think this is an educational problem for parents, teachers, and physicians, primarily pediatricians, to find a solution to. Doctors have a tremendous influence, as teachers do, if they will single out a given patient and admonish that patient: "Don't ever start to smoke," or "Don't ever get into a car with a driver who has been drinking." This advice sticks with kids, and they will practice the things they learn from a physician until they are old enough to make good value judgments themselves.

I think every child should be taught to avoid riding with anybody who has been drinking—I don't mean just those who are drunk, but anyone who has been drinking at all. Avoid that person as though he had an unbelievably contagious disease, because his driving could kill you just as effectively.

**"The number one health problem in the U.S. is smoking. This year 330,000 people will die from smoking-related deaths."**

### **How can we get the idea across to young people that alcohol is a drug—a narcotic drug—and will have drug effects?**

You have to keep hammering away at it, but I don't think it is solely an educational problem for kids only. I think their parents are part of this picture. As I have watched youngsters grow up with my own teenage children, I've concluded that the problem with alcohol is the fact that alcohol is legal and easily available. Many parents have it in their homes, so the young people don't have to go out and buy it. The same way parents put dangerous chemicals on a high shelf to keep them out of the way of toddlers, so should parents lock up their liquor when their kids are home.

Of course, it's very difficult for parents who drink a lot to say to their kids, "You shouldn't drink." That's like saying, "Don't cheat. I do, but don't you do it!" If parents expect to raise kids with decent standards and a good sense of values, they have to practice what they preach. They are all models.

**Do you feel that it's a comment on modern society that kids and adults too seem to feel it necessary to change their personalities by getting drunk in order to be sociable?**

I think there are several aspects of drinking that affect young people. Most young people drink the first time or two because they are curious and want to try something new. Then they drink because of peer pressure—it's the thing to do.

The problems that come with drinking after you get through those early experimental stages have to do with the failure to understand that alcohol is a drug, that it's addictive in some people, that it has profound physiological effects on a person's body and mind, and that a person who abuses alcohol is not just a danger to himself but is a danger to other people in society. This is one area where you should practice the golden rule: You don't want a drunk driver slamming into you, so don't be a drunk driver who slams into someone else.

**"Every child should be taught to avoid riding with anybody who has been drinking—I don't mean just those who are drunk, but anyone who has been drinking at all. Avoid that person as though he had an unbelievably contagious disease, because his driving could kill you just as effectively."**

**You talk about the "abuse" of alcohol. Is there a way that a young person can know when he starts to abuse it if he is a user?**

Alcohol affects different people in different ways. Some people have the ability to drink more than others without feeling it, but nevertheless they have lost their reflexes. I think if somebody is going to drink, he has to avoid other activities that may make him a danger to himself and to others.

**In other words, he ought to retire to his own room and not be sociable?**

Certainly not. He can be sociable, but he has to have some kind of protective mechanism. I've done a fair amount of work in Poland with children, and it always impresses me that when you go out for dinner in Poland, the waiter will not take your order until one person turns his glass upside down. This is a signal that that person is acknowledged as the nondrinking driver. This takes place in Poland because the penalties for driving while intoxicated are so stiff and well enforced that people will not take the

chance. Until we come to something like that in this country, we're not going to beat the problem.

**With smoking we advise people not to continue smoking even in moderation but to give it up altogether. Why don't we do the same as far as drinking is concerned?**

That's a very interesting question, and it doesn't really have an answer as far as I'm concerned. I think it might have something to do with the fact that we once went through Prohibition in this country. I don't know. But I can tell you that when I travel around the country and speak on things like this before adult audiences, when I talk against smoking, even the smokers nod their heads in agreement. When I talk about the abuse of drugs, everybody agrees that this is bad. But when I talk about alcohol, there's an entirely different reaction in the audience. I'm treading on a very special privilege that they believe is theirs.

I think that many individuals believe that, unlike the rest of the crowd, they can manage their drinking.

**Here again, do you feel that the advertising has been a major factor in leading to that conclusion?**

Many kids think it's the thing to do. The surgeon general's early reports on smoking asked television and movie producers not to have the first act of business for the hero/heroine be to take out a cigarette and light it. And there was a good response to that. Now actors and actresses begin a scene by pouring a good, heavy drink out of a very fancy decanter and looking very, very cool while they're drinking it.

**Do you envision in the future a decline in habits of this kind, a greater emphasis than at present on physical condition?**

Yes. In the government we have an agenda for health. I don't know that everybody realizes that, but we have goals set for ourselves for 1990. Right now one in three Americans is a smoker, and we would like to cut that by 1990 to one in four. And I think we're making progress.

The most important thing is the way young people in high schools have stopped smoking in the last few years, and I think if we can keep up the push and keep the message going out through magazines like yours, if we can get people to become more aware and talk about this as a problem and not just kick it under the rug, we'll see a change in this problem of smoking.

When it comes to alcohol, I think we're going to see that changes come about through the legal system, because when the penalties are eventually made stronger for the things the drunken drivers do to other people, then some kind of system of checks and balances will go into effect, such as I have described in Poland.

**Do you anticipate a liberalizing of marijuana controls, or do you think it will go the other way?**

I don't know that I am a prophet of sufficient standing to make that prediction. We are under constant pressures here in this office to take a more lenient attitude toward marijuana. However, we have made a very firm commitment that we will not alter our stand as public health officials. We think marijuana is a dangerous drug, and we don't have any intention of lowering our standards on that.

***Do you feel that sufficient evidence is available on marijuana to indicate that it is dangerous?***

Sufficient evidence is in, and I think there is enough danger to make any intelligent person be careful about using that kind of drug. But we don't know nearly as much about marijuana yet as we will know. If you were to project what we have learned about smoking tobacco over the last 30 years, and then you were to project what we have learned about the harmful effects of marijuana over the next 30 years, I think it would be devastating.

***"If parents expect to raise kids with decent standards and a good sense of values, they have to practice what they preach."***

***Do you feel that marijuana has as great a long-term potential for danger as some of the so-called stronger drugs?***

Yes, I think that the evidence is accumulating that that is the case, and I have to come back to my statement which people criticize a lot. I don't say that all people who smoke marijuana are going to go on to harder drugs, but I don't know anybody on hard drugs who didn't start on marijuana. That is scary, and should serve as a warning to those who use it.

***What would you, as surgeon general, suggest to young people as to directions they could take that would result in a more positive life-style and more positive contribution to society?***

The first thing I would advise any young person is to be an individual and not to feel that he has to gear his life-style to that of anyone else for any reason whatsoever.

Second, I think the best antidote for the temptations that come to try pot, to smoke, or to drink, lie in having a goal or an activity that's absorbing enough in life that this kind of breakaway relaxation isn't needed.

I'm convinced that there are more people in the society of young people who prefer *not* to be involved in smoking, drinking, and the use of drugs than there are who do. I would advise young people to find those other young people who are like-minded and stick together.

***Many kids use drugs to appear sophisticated and mature. As a physician, what is your concept of maturity?***

In the context we're talking about, maturity has a vision of the future. If one is living just for today, to eat, drink, and be merry, then die, none of these things makes any difference. But when you recognize what you are doing to your own health now and in the future, what you may be doing to the health of your offspring in the future, and what one reckless act while under the influence of a drug can do to an innocent bystander—to either snuff out his life or permanently damage it—then I think maturity says Stop.



C. Everett Koop, M.D., is surgeon general of the United States Public Health Service and deputy assistant secretary for health in the Department of Health and Human Services. He is a pediatric surgeon with worldwide experience.

As the nation's top medical officer, Dr. Koop advises the public on health matters, including smoking and health, diet and nutrition, environmental health hazards, and the importance of disease prevention. He directs the activities of the Public Health Service Commissioned Corps, with some 7200 members. He has authored more than 170 articles and books on medical topics.

Douglas Jay  
Jeffrey

# Liquid

WHEN WATER AND

P

opping open another beer, Bill simultaneously pressed down on the accelerator of his new Toyota truck. The tires screeched around the corners of the narrow mountain road which hovered above California's Kern River.

Wasting no time, Bill passed a slower car on a blind curve, grazing the guardrail which was suspended some 100 feet above the tortuous Kern. Terrie, Bill's girl friend, laughed and threw a half-empty can of beer at the slower car.

Bill had driven in his swim trunks through the 100-degree morning, and Terrie immediately stripped to her string bikini after they arrived at their camping spot.

An AC/DC tape blasted the boiling summer day as they unloaded chairs, inner tubes, blankets, and, of course, beer.

As he opened another beer, Bill suggested using the inner tubes on this stretch of river that included some fun rapids which eventually dropped into a nice pond.

Grabbing another beer, Terrie was in the water before Bill was through speaking. Bill killed his brew, grabbed another can, and drunkenly staggered toward the ruthless river.

Terrie fell backward into the tube and, sipping her beer, floated gently downstream with Bill right behind her.

Suddenly the river became stronger, faster, and dangerous. Terrie's joy turned to terror.

She slid sideways over a large rapid and dropped into the swirling, treacherous white water. Twenty yards downstream the tube floated riderless.

Screaming Terrie's name, Bill reached wildly and desperately for the dead branches where he had last seen her. Holding onto a rock and barely fighting the awesome current, Bill reached for her.

Frantically, he grabbed for her hand. Yelling her name and pulling as hard as possi-

ble, Bill cried when he pulled the flesh off the hand. What he thought was Terrie's hand was actually that of a corpse that had disappeared several weeks before.

Bruised, scratched, and confused by what had happened, Bill made his way to shore crying. Terrie was not found.

This is an actual incident reported by the Kern County Sheriff's Department. However, the incidence of drinking and drowning is not all that uncommon.

A survey conducted by Texas A & M University reveals that approximately 50 percent of the adults who drown are under the influence of alcohol, drugs, or both.

This should not be surprising, considering that the dangers of entering water under the influence include disorientation, breathing difficulty, slower reaction time, and panic when faced with a predicament.

To understand the increased danger of swimming under the influence, one must understand how alcohol adversely affects the body.

Alcohol is classified as a drug and a depressant. It is absorbed rapidly into one's system. Alcohol eventually adversely affects every cell in the body as well as the performance of all body functions, including the cardiac system, the respiratory system, the circulatory system, the motor system (coordination), and judgment.

When you take a drink, the liquor goes down your throat and into your stomach. There it is quickly absorbed into the bloodstream and sent to every cell and tissue in your body.

The dangers to your cardiac system are explained by Dr. Ralph E. Worden, professor of psychiatry and medical rehabilitation at UCLA: "Alcohol has a toxic effect on the heart muscle, and one of the worst things to do after drinking is heavy swimming," he says.

# Death

***A survey conducted by Texas A & M University reveals that approximately 50 percent of the adults who drown are under the influence of alcohol, drugs, or both.***

## ALCOHOL DON'T MIX

"When a person is in the water, the heart has to increase in cardiac output. This means that the pumping efficiency and quantity of blood to and from the heart have to increase, and the nervous system must work rhythmically. If one is under the influence, these just do not work well," Dr. Worden adds.

The respiratory system, or breathing, is adversely affected by alcohol. If a person gets excited and needs more oxygen, that person may not be able to breathe as much or as deeply as usual since the autonomic nervous system has been numbed. Additionally, one's energy and endurance are off.

Alcohol numbs the central nervous system and depresses the inhibition function which controls a person's actions. As a result, people have a tendency when inebriated to do things they wouldn't normally do.

Their judgment is altered, and this is especially dangerous when they're swimming.

"Normal judgment is very clouded, and a person gets much more tired swimming while under the influence because the muscles are numb and not as strong," says Dr. Michael Kline, primary evaluation consultant for the office of Alcohol Abuse and Alcoholism in Los Angeles County's Department of Health Services.

"A person has no judgment or endurance because the entire body has slowed down. Therefore, a person may think that it is possible to swim, for example, to a buoy, when it is impossible."

The numbing of the central nervous system also means that reflexes and response time are slowed. To worsen the problem, the drinker may be totally unaware of his reduced judgment and endurance. In addition, he may become disoriented because he would not see as far or as well.



*One of the most dangerous—and most popular—places to consume alcohol is at the beach. Approximately 6000 rescues occur annually on Los Angeles beaches. Approximately 70 percent of the adults rescued are found to be under the influence of alcohol.*

After alcohol has adversely affected all the body functions, it reaches the liver. Chemicals in the liver neutralize alcohol to a harmless substance.

Depending on the type of alcohol consumed, an ounce of alcohol requires 60 to 90 minutes to be metabolized or to otherwise leave the system. Two percent of all alcohol consumed is expelled in a person's breath or urine.

It should be apparent, therefore, that swimming under the influence is dangerous and possibly deadly. Nevertheless, such activity continues in spite of the dangers.

One of the most dangerous—and most popular—places to consume alcohol is at the beach. Approximately 6000 rescues occur annually on Los Angeles beaches alone. Approximately 70 percent of the adults rescued are found to be under the influence, according to John McFarlane, captain of the ocean lifeguards for the Los Angeles County Department of Beaches.

One reason the drownings are occurring is that people are unaware of the dangers of drinking and swimming. The danger is increased by riptides, holes, currents, or surf, as explained by McFarlane:

"A phenomenon or a physiological effect occurs when a person who has been drinking goes into the water. The muscles don't function, and a person has slower reactions and experiences disorientation. Combine these factors with a hole, current, or riptide, and the chances of surviving are low."

The intoxicated swimmer also reduces his rescue time because the guard has less time to spot the problem, get there, and execute the rescue.

"The sober person has a clear head and can combat the problem," McFarlane says. "A person under the influence is frequently in a shocklike trauma and goes into a noncombattant attitude. The intoxicated person is in absolute panic and has very little chance."

Although the amount of alcohol consumed affects everyone differently, it still adversely affects everyone.

A "false security" is sometimes attained by the athletic person because he feels he is in such good shape, McFarlane says. "This false

security can come back to haunt him," he continues. "He may have a little more strength and stamina, but he can still get into trouble."

The swimming pool is another popular but potential problem area. Not only do some of the previously mentioned problems exist here, but people under the influence also have to contend with the decking. A person who is bombed will most likely not be as aware of safety rules. And because that person's coordination is off, there is an increased likelihood of his slipping on the deck and getting hurt or falling into the water.

Spas are popular, but they are also dangerous when combined with drinking. The spa relaxes the muscles while the alcohol slows reflexes and judgment, so physically climbing out of the spa after sufficient immersion could be a problem.

There is a greater load on the heart to pump blood while under the influence because alcohol has dilated the blood vessels. Circulatory problems may result which could lead to dizziness, fainting, blacking out, or cardiac arrest.

Prevention of alcohol-related accidents will not be easy. Large summer beach crowds make it difficult for the lifeguards to watch everyone who is drinking. When they do spot someone, lifeguards notify them of the ordinance that prohibits drinking.

Other possible remedies are educational films or classes at school, media exposure, and public service announcements.

Despite the dangers, there appears to be no easy solution. The problem is made worse by the attitude of some, as explained by Lieutenant Carl Sparks, Kern County sheriff and search-and-rescue coordinator, when he says, "It's hard to tell a 19-year-old he can die. Most don't think they can die."

"When the temperature is 108, the water is nice, and others are using inner tubes, a teenager will get into his tube with a beer. The next thing you know he's in white water and in trouble before he even realizes it.

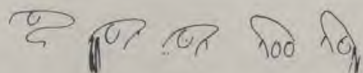
"When a person has had four or five beers, he just doesn't know the danger is there."

The danger is there, however, and it could violently, unsuspectingly, and ruthlessly get you if you challenge it.



# Saltzman Stings Smoking

Cartoons by Tony Saltzman



"That's a very dangerous trick. What if he misses and she has to keep smoking the cigarette?"



"Yes, they're handing out samples of an extremely hazardous product. They got the idea from a cigarette company."

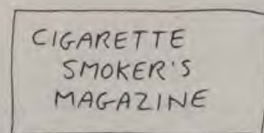


"It'll break your heart to quit smoking? Considering what you've done to it so far, why should that bother you?"

"Apparently, it's some sort of Earthling time machine. Those who use it have less time on Earth."



"Sometimes I just don't understand you, Myra. Why should our song be 'Smoke Gets in Your Eyes'?"



"It's a little embarrassing. Do I have to explain why the lifetime subscriptions are so cheap?"



# LOVE'S SIGN LANGUAGE

CHARLOTTE JONES

A wise man once said, "People have one thing in common: they are all different." Their looks, their opinions, their snores are examples. The ways they demonstrate their love is another.

Some people are "touchers." They hug and kiss and hold hands. The physical demonstrations of their love are reassuring reminders of their feelings.

For other people, however, showing affection

is not as easy. If they have never been shown how, it's difficult for them to demonstrate their feelings outwardly. Even if they would like to express their love, they cannot. The words *I love you* just don't come. Yet they don't love any less.

Recognizing love in families such as this seems difficult, but it's just a matter of learning Love's Sign Language.

The North American plains Indians developed a sign language—an intertribal communication. It



was not always the language of love; it was also effective in proclaiming peace or declaring war.

Persons who can neither hear nor speak use a sign language. This is primarily a language of necessity; secondarily, a means of communicating love.

Pets don't say, "I love you," but they have signs to convey their feelings. Using their tails, their tongues, their paws, but especially their eyes, they convey their sign language of love.

Sometimes we must look for the signs in family members—parents or brothers and sisters. And sometimes they must look for our signs. Here are some examples of signs with which both your parents and you can show your love for each other:

**AN ENCOURAGING WORD. Them:** "You've always been able to do anything you set your mind to." "Even when you were small . . ." "Go for it."

**You:** "Don't be discouraged. You'll find what you're looking for." "The way you ran the church sale, you'll do this easily."

**UNDERSTANDING. Them:** "I know how you feel." "I'd be disappointed too."

**You:** "I've never had to face such a situation myself, but I think I understand how you feel."

**RECOGNITION OF THE OTHER PERSON'S TALENTS. Them:** "Why don't you try out for a part in your school play?" "Would you print this sign for me? Your printing is so much better than mine."

**You:** "You have a great singing voice." "I don't think there's anything you can't fix."

**TIME. Them:** Whether your mother decides to stay home in order to have more time with you or works a full-time job and still finds time to take you shopping, that time says, "I love you." If your father uses his only night off in two weeks to watch you play ball, that's saying, "I love you."

**You:** Guitar lessons, soccer practice, youth group, phone conversations, school games, weekend job—do you ever give your family your time? Have you given them a chance to get to know you? Give them some time to find out how neat you really are.

When your dad needs to talk about his job search or your little brother wants to tell you about his home run, listen! Take time.

**SHARING. Them:** Of course, sharing time and the house and family meals shows they care. But there is another sharing: sharing experiences. Together times—their efforts to share an experience with you—say, "I love you."

Telling about the "good old days" or "when we were kids" is very important to your parents. Sharing their memories is their way of sharing themselves with you and saying, "I love you."

**You:** Share your own experiences with your family. Did something funny or sad or scary happen at school? Tell them.

If you are old enough to have a job and your little sister isn't, share your wealth! Take her to a program or buy her a record for an un-birthday present. Of course, she'll be suspicious of your motives, but you'll have fun surprising her.

**TRUST. Them:** Do you have a key to the house? If so, your parents are saying they trust you.

Do your parents confide in you, tell you problems they have at work or in their experiences? If so, they trust you—trust you not to tell the world about family problems, and trust you not to laugh at them.

Do they let you spend time at a friend's house or let you go shopping alone? This is sign language for "I trust you." And "I trust you" means "I love you."

**You:** Do you lock your bedroom door every time you leave the house? If so, you're telling your family you don't trust them. Do you trust your parents with secrets or problems you are having?

Also, be trustworthy. If your parents trust you, don't disappoint them. Be worthy of the confidence they have in you.

**LITTLE THINGS. Them:** Do you ever find a button has been sewed in place, a seam stitched, a special food cooked, your sheets changed? Has one of your parents ever filled in a baby-sitting job or delivered papers while you had something more important to do? These are not hugs or kisses, but they are signs of love.

**You:** Do you ever vacuum the floor without being asked (even if it is your brother's turn)? Or wash the dishes or mow the lawn or scoop snow or wash the car?

Do you ever see a job that needs to be done and do it? An old song said it simply: "Little things mean a lot."

**EXPECTED THINGS. Them:** Have you recently been to a dentist or a doctor? Do you wear glasses, braces, or comfortable clothes? Love pro-

vides these things. Without love, your parents might spend the money on something for themselves.

**You:** Cleaning your room, putting the laundry away, emptying the trash. There are a lot of chores you are expected to do which you could probably avoid. You could listen to music in your bedroom and force your mother to do your chores. But this would not be "sign language" for love, would it?

**HAPPINESS. Them:** Have your parents ever been glad to see you, grateful that you washed the dishes or vacuumed the carpet? Have they ever said, "Thank you" or "You did a good job"? These acknowledgments are signs of love.

**You:** What kind of attitude do you have? Are you grouchy and complaining or cheerful and enthusiastic? Smiling requires fewer muscles and less physical stress than frowning.

**PRIDE. Them:** People who can't say, "I love you" probably won't say, "I'm proud of you" either. But their eyes will say what their voices cannot. Sometimes pride has to come secondhand. Some parents find it easier to tell a friend or relative how proud they are, and you will have to hear it from an outsider. But it's the fact that they are proud of you that counts.

**You:** If you are proud of a member of your family, say so. Tell them. Tell the world. "I'm so proud

of you for doing that." "I'm so proud that you're my dad (or mom or sister or brother)."

**RESPECT. Them:** Respect for your feelings, your privacy, your ideas. Respect for you as a person. The respect your parents show you is a sign that they love you.

**You:** How do you talk to your parents or your brothers or sisters? What tone of voice do you use? What words do you use? Are you respectful of them?

**DISCIPLINE. They:** Have you ever been grounded or had privileges taken away? While it's no fun for you at the time, it's necessary for parents to set boundaries. This, too, is a sign of their love.

**You:** If you have disobeyed or done something wrong, you know beforehand you will be disciplined. Accept your punishment and learn from it.

**MATERIAL POSSESSIONS. Them:** While "things" seem cold and unfeeling, some parents can speak only with their money. While a hug would feel better, a gift might be their way of saying, "I love you."

**HUGS AND KISSES. You:** Physical affection must be initiated somewhere. Their not knowing how to be first to hug or kiss does not mean *you* can't. Give your mom a kiss or your dad a hug. You show them how to show their feelings.

**O**f course, people have days when they don't feel very lovable, when their self-worth is zero or less. Often a person who has a low self-esteem and doesn't think much of himself cannot believe that anyone else could love him (or her). While there are love signs everywhere, these people refuse to acknowledge them because they don't believe (or don't want to believe) they are loved. But each of us is loved by someone.

Teachers love their students. Yet they don't call out, "I love you." Instead their pride in their students' accomplishments, their disappointment when a student won't try, their eyes, and the tone of voice all say, "I love you."

Friends love one another. Yet, they don't run through the halls at school calling out, "I love you." Instead we know they love us by being there when we need them, by listening, by encouraging, by sympathizing, by trusting, by understanding.

While we might sometimes like to change our families, it's probably not possible. It would be like trying to teach a dog *not* to wag its tail. When the dog is doing everything possible to express its feelings, do you scold it for wagging its tail? The same idea applies to parents. When they are doing everything they know how to show their love, do you refuse to accept their efforts?

If we are willing to read a pet's sign language, a teacher's sign language, or a friend's sign language, don't we owe our family the same?

And if we are willing to offer our own sign language to the outside world, can't we "sign" a little love to our family?

As the old proverb says, "Actions speak louder than words."



# Through a BARTENDER'S EYES

● HARRY CALHOUN ●

**I** walk into the bar a few minutes before my shift begins. I've been at home, putting the finishing touches on a short story. Tending bar, which I do to supplement my income, should be a welcome break from writing. But after serving a few drinks, I can feel my shoulders tighten, my brow knit. It still disconcerts me to watch alcohol's effect on my only-too-regular customers.

Joe's here, as usual. Joe is the friendliest guy in the world. Everybody loves him. Sure, he drinks a great deal, but what a wild guy, they say. The bar crowd is too preoccupied to notice that Joe has begun to bellow his drink orders at me; a few drinks ago he was quietly requesting them. He brags that he'll drink an entire fifth of bourbon tonight.

I just sigh. I'm in for a long night.

And there's Patti. She's young, pretty, and has two small children, but she feels her marriage is a mistake. She began stopping in after work, daily, for a brandy alexander. Over the course of the past year her "dosage" has increased to three margaritas. (Such attractive names these "relaxers" have—much less diabolical sounding than Valium or methaqualone!)

Patti flirts with me, then with a few men at the bar. It's obvious she's looking for something, and soon there are three men buying her drinks and providing her with the attention she craves.

One of the men is Alvin. He's usually courteous, quiet to the point of shyness. Tonight, however, after several fortifying brandies, he's loud enough that Patti backs away when he speaks to her, although perhaps as much from his breath as his vocal amplification. He's not used to drinking this much. His face flushes like a Christmas light. But in spite of his actions and his appearance, Patti seems to be responding to him. Alcohol is doing its job on everyone tonight.

A little about this liquid drug I serve: it comes in many forms—spirits (liquor), wines, beers, and ales. All of them act as depressants on the central nervous system. They impair judgment and motor coordination.

The average rate of metabolism for alcohol is a

*steady* one-half ounce of pure spirits (the equivalent of one drink of 86-proof whiskey) per hour. Alcohol is fast-acting; it enters the system through the mucous membranes in the mouth and through the tongue before it is swallowed. The constant rate of assimilation, combined with rapid absorption, is what can cause drunkenness. Within an hour's time alcohol can produce personality changes that are as frightening as any I've seen in werewolf movies.

Since the metabolic rate is steady, any attempt to sober up someone with exercise, coffee, or fresh air only results in having a wide-awake drunk on one's hands. The intoxication simply must wear off. The effects are long-lasting, as well; after 10 drinks the drinker is legally intoxicated for six hours.

Why, if alcohol is a depressant, do people turn to it to combat depression? One reason is that it relaxes inhibitions and relieves feelings of guilt. Alcohol is frequently used to hide feelings of inadequacy. Like the old adage, "Where there's smoke, there's fire," it seems that where there's alcohol, there's insecurity. The two are old drinking buddies.

Joe is telling me about Patti's husband's recent affair with a barmaid in a nearby tavern. But Patti, by now, is oblivious to more than this. She has one hand on Alvin's sleeve and one on her drink. Alvin's subtle wit has gone by the boards; he leers and makes crude comments. Patti just smiles and lifts her glass. She's made her choice. Alvin may not be Prince Charming, but she's not looking for that. She's looking for some excitement to replace the disappointment of her married life. If she wanted to think or to talk over her marital problems, she wouldn't be here.

She and Alvin leave together, oblivious to the stares and whispers around them. A few days later I will overhear Patti telling her friends about Alvin's violent attack of nausea on the way to the motel. Very sexy!

Joe's girl friend, Laurie, comes in. Good old Joe begins to verbally abuse her. By the end of the night Joe is trying to call in a bet on a football game that was played last week. The fifth of



bourbon is, as predicted, gone. Laurie and John, the manager, help Joe out the door.

The next day there are rumors that Joe has beaten Laurie in the alley outside. I don't know; I don't see her for a few days. But when I do, I notice she's wearing a lot of eye makeup.

Joe, Patti, and Alvin are three regulars on my shift at the bar. They are not derelicts. Joe is a professor at a nearby university, Alvin is a respected physician, and Patti is a nurse at a hospital in the city.

Joe uses alcohol to blot out his problems—his broken marriage, his bad bets, his drunken-driving citations. Also blotted out, however, is the knowledge that the drug has caused, or contributed to, many of his problems. His alcoholism has fogged his thinking enough to keep him from coming up with workable solutions to his dilemmas.

Drinking helps Alvin to overcome his natural shyness. It also distorts his self-image sufficiently that he becomes a loud boor. And now that he's begun an affair with a married woman, he can add guilt to his problems.

Patti drinks to block out her marital problems and to give herself an excuse to have an affair. But when the drunkenness wears off, the marriage will still be there, with the problem of her "fling" now added to its burden.

There's a joke about the drunk who, when asked why he drank, said, "To forget my problem." When asked what his problem was, he replied, "I drink too much." Like most humor, this has a ring of truth, and it illustrates the cyclical nature of problem drinking. In fact, research indicates that three days *after* intoxication the drinker will feel depression without further drinking. The cycle continues even after the drug leaves the system.

If my customers asked for advice, I could give it. I'd tell Joe to face his problems sober and to think his way out of them. I'd tell Patti to go home and insist on a talk with her husband—over the breakfast table. I'd tell Alvin what a nice fellow he is when he isn't drinking and suggest he let others find that out. But my customers don't want advice; they want to be entertained, to hear stories.

**W**ell, I could tell them some stories too. About Belle, the elderly woman who assumed that her dizzy spells, poor balance, and numbness in her left arm were

the result of drinking and thus ignored them. When she finally went to a doctor, at my urging, she found that she had had a minor stroke. Her alcoholism had effectively covered the symptoms. With the doctor's help she quit drinking and averted another stroke, one that could have killed her.

Or the one about the surgeon who brags that he's able to drink all night and report to the operating room in the morning with steady hands. Or maybe I could tell them about my grandfather, who drank himself into early senility. Or about good old Joe's boast that the new, tougher drunk-driving law wouldn't make him alter his habits one bit. Or the chef I used to work with who has no memory at all of entire nights spent in alcoholic fogs.

I hope I've made it sound as if alcohol use is everywhere—middle class, upper class, skid row. Because it is. As our society's drug of choice, it's easy to get, and controls are lax. Authorities and peers look the other way where it is concerned while railing against other drugs.

The phrase "drugs and alcohol," which one hears so frequently, is a redundancy, as alcohol is every bit as much a mood-altering chemical as many others. Those who oppose the legalization of other drugs point to the laxity with which American society views alcohol consumption, and they reason that if other drugs were to be legalized, controls would be equally loose there, which could be disastrous. Alcohol use alone costs the United States over 10 billion dollars in lost production in an average year.

Tonight, as I leave, John, the manager, is having his fourth vodka and soda. Maybe tonight he will forget, once again, to lock up the restaurant, and the maintenance man will have to cover for him in the morning.

I tell John Good-bye and step into the dark night. I walk, head down, thinking about what I've seen this evening. A red neon sign, flashing "BAR" on-off, on-off, catches my attention. I slow down and look inside at a crowd that is, frighteningly, composed not of deadbeats but of respectable people.

I recall an adage about drug use for writers that applies to society in general: "The more in, the less out." The more drug ingested, the lower the productive or creative output. I think about what I want from my life.

I take a last look inside the bar, shake my head, and walk home to my writing. ◇



## I'M FOREVER BLOWING BUBBLES

Art critics call him a circus clown, and he refers to his own most recent work as "absurd," but 43-year-old Swiss sculptor Iwan Pestalozzi doesn't mind that his latest creation, a pink and red bubble blower, is good for nothing.

"Why always construct machines that produce something?" he says. "This machine produces only soap bubbles. The bubbles burst, and nothing is left. But it is a beautiful experience and a

memory that lingers."

Pestalozzi's machine, which took six months to build and is powered by a hand crank, has produced the longest (nearly 10 feet) and largest (almost three feet in diameter) soap bubble ever, as far as anyone knows. It makes bubbles by dipping an eight-inch-diameter ring into soapy liquid and then passing the ring in front of a fan.

Apparently someone else thinks Pestalozzi's bubble blower, the latest of

nine he has made in the last eight years, is good for something: Pestalozzi has been offered \$15,000 for the contraption.

Pestalozzi's future plans include building a bubble machine you can ride like a bicycle. "The bubble blower has something going for it," he says. "People become cheerful, and it is peace-giving. It would be fantastic to blow bubbles on Red Square in Moscow."

## WHISTLE A HAPPY TUNE

When electronics researcher Patrick Zurek put a microphone to his ear to study the way sound waves entering the ear interfere with each other, he didn't expect to hear noises coming *out* of his ear. But sure enough, his ear was *whistling*.

What he heard was not an echo, nor was it a case of tinnitus, the ringing people sometimes hear in their ears. When he tested his other ear, he heard it again: a high-pitched whistle being broadcast from inside his ear.

When a colleague who had agreed to be tested was also found to have whistling ears, Zurek knew he was onto something. He began a series of experiments at the Central Institute for the Deaf in St. Louis to look for ear broadcasts in animals as well as people.

Exactly 50 percent of the people Zurek tested had at least one whistling ear, and several had two. The whistling was steady and continuous, never ceasing

or varying in tone except when interfered with by other sounds that may be entering the ear.

None of the animals Zurek tested had ear whistles initially, but 10 percent of them developed ear whistles after being exposed to medium-loud noises.

In checking the medical literature, Zurek found several references to whistling ears. One woman's ear whistled loud enough to be heard by others two feet away. When the woman tried to play piano duets with her sister, the sister complained that she couldn't concentrate on her playing because of her sister's whistle. However, even those with the loudest ear whistles can't hear their own ears whistling.

Zurek speculates that ear whistling may indicate a damaged "feedback" system in the ear, a system that might exist to help the ear monitor incoming sounds and amplify or filter noises.

(You there, with your hands over your ears. I heard that!)



## BABY GOES TO YALE

What is 6845 plus 8895 divided by 5 times 3888 minus 9? (a) 1,224,991 (b) 12,239,415 (c) 8,393,422 (d) none of the above.

If you selected (b) without using a pencil or a calculator or taking more than three seconds to consider the question, congratulations! You're as good at arithmetic as two-year-old Adriana, a graduate of Philadelphia's Better Baby Institute, an organization that trains parents to begin educating their children at birth.

"The kids who start ahead end up ahead," says the institute's founder, Glenn Doman. "We have followed hundreds of children, and the better they are as kids, the better they are as grown-ups." The institute stresses such things as physical excellence and social responsibility as well as intellectual learning.

The institute offers a one-week, \$400 course six times a year to classes of 90 parents at a time. The parents are advised to give their children large doses of reading, math, science, foreign lan-

guages, music, and art a long time before their children reach school age.

For example, Doman says that even before a baby can talk, he can be taught to read by showing him a flashcard and saying, "This says *Mommy*." A baby doesn't need to know the alphabet before learning to read words, Doman assures his sometimes skeptical students.

Of course, Doman's course has its critics who say the children are too young to understand what they are taught.

"Children are great in simply giving you back what you want them to tell you," says Professor Ann Lucas, a developmental psychologist at Fairleigh Dickinson University. "They are wonderful tape recorders."

"My guess would be that they are simply doing it by rote memory," Lucas concluded.

How does your memory stack up against theirs? Who wrote *The Mikado*? Draw a map of South America, using no aids. The world's heaviest liquid is . . . (Keep thinking—the two-year-olds are gaining on you!)

## ON TRACK Doris Clothier

Hidden in this puzzle are 101 "railroad" words. Words are formed in the puzzle forward, backward, vertically, horizontally, and diagonally but always in a straight line. Words often overlap, and letters may be used more than once. Circle the words in the puzzle as you find them.

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

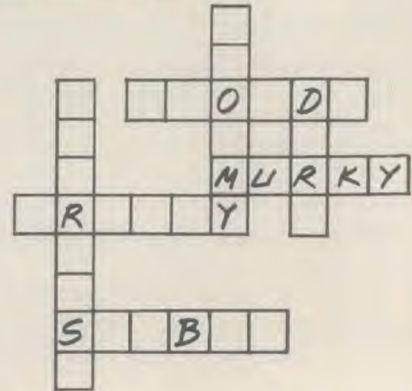
air brakes, ate, bag, barge, best, blow, brakemen, buggy, bunk, cab, caboose, Cannonball, cards, cars, case, Casey, coal, cog, coin, commuter, cop, cost, cowcatcher, crummy, diesel, dine, dot, drive, drivers, electric, engineer, era, excursion, expert, express, fast, fireman, flag, flagman, flimsy, freight, front, fuses, gate, gauge, grade, headlamps, heel, hey, hobo, hose, hue, Indian, Irish, jet, job, key, large, limited, line, locomotive, loop, man, meal, meet, milk, nail, ore, pilot, Pullman, rails, rare, ride, rim, rip, road, run, schedule, seat, sidetracks, sleeping car, steam, steam boiler, stop, summon, sun, telegraph, tender, ties, time, tracks, train, trestle, trip, tunnels, wet, wheels, whistle, wire, wood, yard.



"Nasty little cough you have there."

## IN THE DARK Rich Latta

Can you find all the synonyms for the word *dark* by filling in the missing letters to make words that read from left to right or from the top down?



## RHYME TIME Sharon Ferris

For each of the following words or definitions, find a synonym that is made up of rhyming syllables. For example, a word meaning "monotonous" would be *humdrum*. Now you try it.

1. To mingle
2. Bedlam, uproar
3. Weak, indecisive
4. A scatterbrained or stupid person
5. An incomprehensible language
6. A wild or lively party
7. Questionable or underhanded activity
8. A term used to conjure up magic tricks
9. Compulsive, helpless
10. Reckless, irresponsible

## PURPLE COW

• Lillian E. Carlton •

*I never saw a purple cow  
Or elephant of pink.  
The explanation I avow  
Is simple: I don't drink.*

## PUZZLE ANSWER Answer to "In the Dark"

Across: Cloudy, Murky, Dreary, Sombre  
Down: Overcast, Gloomy, Dark

## Answers to "Rhyme Time"

1. hobnob 2. hubbub 3. namby-pamby 4. nitwit 5. mumbo
6. wingding 7. hanky-panky 8. hocus-pocus 9. willy-nilly
10. harum-scarum

## President's Drug Awareness Campaign Introduces Teen Titans Comic Book

"Don't let anyone tell you that you can't be a hero. You can—and you are about to learn how." This message from Nancy Reagan to the young people of America appears in a letter on the inside cover of a comic book, of all places.

The comic book is a new feature in the President's Drug Awareness Program. Under the sponsorship of the Keebler Company, a million copies have been produced and sent to 35,000 schools across the country. It is to be used primarily for fourth graders, since that is the approximate age at which children are often making decisions to use drugs, according to a study conducted by The Weekly Reader Periodicals. Teachers have received copies of the comic book, a teacher's guide, a poster, and other materials for use in their classrooms.

The comic book, entitled *The New Teen Titans*, features seven teenage superheroes battling drug abuse among children. With such offbeat names as Cyborg, The Changeling, The Protector, Raven, Wonder Girl, Speedy, and Starfire, these superheroes present the message that drugs destroy young lives. As the superheroes fight drug-selling forces, Synanon-style testimonials of real drug abusers are interspersed throughout the story. The book closes with opportunity for the young reader to make a commitment to avoid drugs and alcohol.

"All across the country," says Dr. Carlton Turner, Special Assistant to the President for Drug Abuse Policy, "parents, teachers, and children themselves are looking for ways to remove drug abuse from our society. *The New Teen Titans* . . . is an excellent program to help youngsters in fourth grade become aware of the problems associated with drug and alcohol abuse."

Plans are already underway for similar materials for fifth and sixth graders. The fifth-grade comic book, sponsored by the Soft-Drink Manufacturers Association, will be available in September.

*The New Teen Titans* is currently the best-selling monthly comic book published by DC Comics with a circulation numbering in the millions. "Because the characters are youths who possess remarkable abilities, they inspire the young readers of their adventures and act as role models," says Jenette Kahn, president and publisher of DC Comics.

"I don't smoke or drink or use drugs

myself," says the writer of the comic books, Mary Wolfman. "But the research I did for this project brought me to tears. One 13-year-old girl told me that she got into drugs first through alcohol. At the age of eight, she got into alcohol because her father wanted someone to drink with."

*The New Teen Titans* project hopes to prevent this kind of story from happening again.

## "JOIN THE PRESIDENT'S DRUG AWARENESS CAMPAIGN"

WE WANT YOU  
TO BE A HERO...  
STAY DRUG FREE!



Copyright 1983 DC Comics

## Turning the Corner

I was standing in line at an airport check-in counter the other day. To each traveler came the usual question, "Smoking or nonsmoking?" One traveler asked in a voice that expressed strong conviction, "Why not just forget those smoking seats?" to which the airline employee replied, "At the rate we're going, it won't be long until we do."

This little exchange illustrates a trend that's gaining momentum these days.

"It is my contention that we have turned the corner on smoking to the point that smokers are now discovering reasons not to smoke," says Ron Wiggins, widely read writer and observer of current trends.

He points out that 20 years ago the scene was quite different. For example, old movies being rerun on television today show that at the time they were made virtually everybody was smoking, a thing rarely seen today on the TV screen.

In the days those movies were made, cigarette advertisements featured doctors, athletes, and movie stars who personally endorsed smoking. Some of the ads announced the names of veterans hospitals to which free cartons of cigarettes were being sent as a humane and generous gesture toward all patients.

Also in those days smoke clouds hung heavily over many areas, such as restaurants, work places, and recreation centers. Now, however, those clouds are gradually clearing away.

"I predict smoking is on the way out," Wiggins goes on to say. "Out in the sense that 20 years from now less than five percent of the adult population will smoke." He observes that at least two thirds of the adult population is *not* smoking.

All of which is especially significant in light of several factors which would seem to encourage not only the continuation of smoking but also its increase. Among these factors is that of strong peer pressure. Most smokers began their habit because others were doing it.

Now, however, peer pressure is beginning to work positively instead of negatively. Wiggins says, "Smokers sense that you don't like their smoke, and ultimately most of them will quit for the reason they started—social pressure."

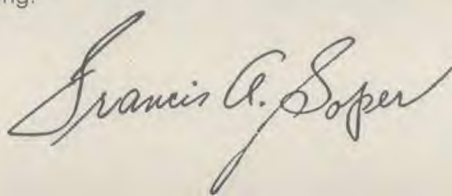
Another factor in the smoking scene is advertising. True, the ads are now off the air, but more of them are appearing in other media, including newspapers, billboards, and magazines.

Still another factor—and a very powerful one—is described by Dr. William Pollin, director of the National Institute on Drug Abuse: "The addictive nature of cigarette smoking is why cigarette sales continue year after year in spite of the health hazards of smoking." In spite of this, there are more than 30 million ex-smokers in the United States today.

Many people find smoking repulsive at first. The taste for tobacco is not a natural one, but once established, the taste becomes a factor in continuing the habit.

So it is that, to the smoker, his habit has several things going for it. But even stronger are the things going against it, such as its cost in money, its cost in health, its cost in property damage, and its cost in social disadvantage.

It's fortunate that millions of people are discovering these "reasons not to smoke." Even more fortunate are the people who discover these reasons before they have to go through the trauma of quitting.



# LISTEN

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Plastic makeshift:  
"I wish I could. . . ."  
True blue steel:  
"I can!"

—Bernice C. Heisler





## “I’m Glad I Gave LISTEN.”

High school’s a scary time. Not just for the teenager, but for me, his mom!

It’s a critical passage that either develops him—or destroys him.

A kid learns a lot more in high school than geometry. He learns the hard way about self-concept. Peer pressure. Drugs.

And that’s why I’m glad I gave *Listen* to my son. *Listen* gives him the facts about drugs and alcohol. Facts that never make it to the parking lot drinking sessions or encounters with behind-the-school bennies.

Giving *Listen* is a great way to guide my son—and still give him the independence he’s striving for during these difficult years.

I’m glad I gave *Listen*. Because he needs to know.

# LISTEN

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