

## **Health and Safety Committee Report May 2010**

### **Chair: Laurie Halverson**

#### **EFOs and Health Room Aide Hours May be Cut**

County Executive Ike Leggett has proposed that the number of EFOs (Educational Facility Officers) at MCPS schools be cut from 33 to 16 positions. The budget for EFOs comes out of the Police Department budget, not from the MCPS budget. Mr. Leggett's proposal also includes cuts to the hours of Health Room Aides from 7 to 6 hours. In 2006, MCCPTA passed a resolution on increasing the hours of Health Room Aides so that the schools were covered a half hour before the beginning of school and a half hour after the school day ends. These efforts were successful when the county increased the hours for the position, but unfortunately, measures to improve the safety of our students are now in jeopardy of being cut.

The County Council will make a decision in May on whether these cuts will be made. The Police Department and MCPS will work together to decide how to allocate the remaining EFOs. Because of possible elimination of the total program by the County Council, MCPS has offered to fund the remaining EFOs at a cost of \$.

To advocate against these cuts at MCPS schools, contact your county council members.

To advocate for your EFO at your own school (since MCPS and the Police will need to decide how to make the cuts), contact Chief Manger and Bob Hellmuth, MCPS Director of Safety and Security, and try to give specific examples of why your EFO is important.

#### **Safe and Drug Free Schools is Being Eliminated**

As of July 1, this MCPS Department, under the Department of Enriched and Innovative Programs is being eliminated. Federal funding has ended. Montgomery County is the only county in Maryland to eliminate this department.

Prevention programs for drugs/ alcohol are uncertain now. Here is a list from the MCPS website of the major functions of "Safe and Drug Free Schools:"

- Collaborating with community-based organizations to provide information and assistance to schools parents and the larger community as part of the Bridge to Excellence, Safe and Drug-Free Schools Program;
- Supporting staff interventions with students through the Montgomery County Student Assistance Program in MCPS secondary schools and participating non-public schools;
- Providing parent and community outreach, curriculum support, and peer leadership through programs such as "Every 15 Minutes" ," Keeping it Safe" Coalition, "Celebrate Recovery" and "Court Watch for Youth 18 and Under" based on the "Communities Mobilizing for Change on Alcohol" (CMCA) a research-based program;
- Coordinating with the Montgomery County Alcohol and Other Drug Abuse Advisory Council (AODAAC), Gang Task Force, "'Keeping it Safe" Coalition and Department of Police "CSAFE" regional coalitions;
- Partnering selected schools and with the Montgomery County Local Management Board, the Collaboration Council, to reduce early disruptive, delinquent, and harmful behavior in youth by increasing "School Connectedness";
- Ensuring the purchase of approved materials and the use of research-based curriculum training to prevent alcohol and other drug use and violence;
- Supporting peer leadership groups in cooperation with the Student Government Associations (SGA), Montgomery County Recreation Department (MCRD), Youth Services Bureaus, Students Against Destructive Decisions (SADD), and the Mental Health Association (MHA); and

•Implementing five MSDE-certified Continuing Professional Development (CPD) courses and the annual Safe and Drug-Free Schools Symposium.

**April 30 Symposium by Safe and Drug Free Schools-“Marijuana and Other Drug Use Prevention”**

Laurie Halverson attended the symposium at zero cost to MCCPTA. Speakers included:

Stories from 2 moms with sons who died in drug related incidents.

Pat O’Neill, BOE President

Duchy Trachtenberg, County Council member

Detective Richard Grapes, Special Investigations Division, Drug Enforcement Section, MCPD

Mike Gimbel, Mike Gimbel and Associates

Here are some key messages from this very informative event:

**Parents are in denial:** Parents often brush a child’s drug use under the rug and tend to think that they are “just being kids.” It is important for parents to pay attention to clues of drug use and confront their child. Parents can get drug kits to test their kids at home.

“If being a part of a group means everything, you’ll do anything to be a part of it.”

**Drug prevention programs are dwindling:** Montgomery County used to have a DARE program and now only a few officers are trained in that area and no funding exists. This program is an effective program. MCPS Safe and Drug Free Schools federal funding is ending and the department will be eliminated, meaning many prevention programs and intervention services will end as of July 1. Grants are available, but it is difficult for Montgomery County to be approved for them because of specific criteria that cannot be met. Grants have been denied for various reasons. EFOs are likely to be reduced by half, making it easier for drugs/ alcohol to be even bigger problems at our schools.

**Buying drugs is extremely dangerous:** Kids are getting robbed when making drug purchases and these robberies often go unreported. Very dangerous-a mom whose son went to BCC shared her horrid story of how her son was robbed, shot and killed while making a marijuana purchase. Her son was on the honor roll and looking forward to college.

**YouTube:** Some YouTube videos have factual information while others look like factual information, but are incorrect and are influencing kids to try marijuana. Groups promoting legalization of marijuana are sponsoring these sites.

In 2007, a YouTube video showed Prince Harry “snorting” vodka. Kids all around the world ended up in emergency rooms after seeing it with burned tracheas and other complications.

**Marijuana is 5 times more potent than when we were kids:** Pot isn’t the same as when we were in college. THC is the active ingredient in marijuana. In the 70s, the levels were at 6% and now they can be 20-25% and it is much more dangerous and less “natural” since chemicals are being mixed with the plants to make them more potent. Parents should not dismiss marijuana as a weak drug on par with alcohol anymore. “Burn out” occurs much more quickly and your child could turn into a “zombie” from burn out much sooner than in the 70s. It has the same agent as cigarettes for causing cancer. Marijuana is now the #1 reason why kids are going to treatment facilities.

Money from purchases goes toward the funding of drug cartels-many have been killed across the border, including children-telling your child this might make him/her think twice before buying something.

Marijuana is fat soluble and stays in your fat cells. Your brain, lungs and reproductive system are sponges for marijuana and it can be tracked in your system for up to one month.

Why not legalize marijuana since alcohol is legalized? You don’t have to drink to get drunk. When you smoke one joint, the purpose is to get high. Alcohol can be used responsibly by drinking one or two drinks, but marijuana can’t.

**Medical Marijuana could be legal in MD next year:** If you look at what has happened to California, you can see that legalizing marijuana for “medical purposes” is just a smoke screen to open the gates for

legalizing marijuana. Just about anyone can get a medical marijuana card in California. Walk down a street, and you see medical marijuana signs everywhere. There are 1,000 marijuana dispensaries in Los Angeles alone. If you fly over Los Angeles, the white tents you see everywhere are the dispensaries.

Groups are afraid to testify against a state bill to legalize medical marijuana. Baby Boomers “rule the world” now and have fond memories of smoking pot-they want their pot back after being “responsible” for years while raising kids, but now they want their pot back, but want it legally.

Why are legislators trying to decide our medical health when there is a system already in place, regulated by the FDA? Already 14 states have passed laws on legalizing medical marijuana, creating dispensaries to grow pot. You can't eliminate drug crimes by legalizing drugs-people will just want more of it and the drug cartels will lower the price drastically in response. If you don't want to see medical marijuana legalized in Maryland, it is important to voice your views with your state delegate.

**Methamphetamine, Ritalin, Adderall:** Used by kids with ADD and ADHD, but kids without these prescriptions are abusing them to help them focus in school. Smart kids are using these drugs to help them study. Kids with these prescriptions are giving/ selling them to their friends. These are addictive drugs.

**Heroin:** This drug is now very pure and much more dangerous than in the 70s. It used to have a 6% potency and is now up to 80%.

**Oxycontin:** kids are smashing the pills from their parents' medicine cabinet and the time release goes away so they get all 8 hours worth of drug all at once.

**Snuff:** Tobacco companies are making pouches of nicotine you put between your cheek and gum.

**Salvia, Mushrooms:** Even though Doug Gansler's daughter bought one, the state still did not pass regulations against the sale of these hallucinogenic herbs, but Ocean City banned it. Other states have outlawed it.

**Fake Pot, K2, or Spice:** The newest thing on the market and it's legal, herbs are sprayed with a synthetic chemical compound like THC, the active ingredient in marijuana. It isn't regulated, can be bought by kids and on the internet and it is making kids really sick.

**Drug accessories to look out for:** Sandals with bottle openers in the soles. Sandals that have a secret “flask” in the heel, small flashlights that unscrew and become marijuana pipes, magic markers that are hollow pipes, fake lipstick containers that are pipes, soft drink cans that hold drugs, funnels of any kind, missing “screens” in your faucets.

**What to do if you have old pills:** Kids often go to their parents medicine cabinets to get their drugs. Parents can dispose of drugs they no longer need at their local pharmacy.

**Treatment:** Treatment is really hard to find, especially at a reasonable cost. The secret to getting treatment is “the pain.” If it is more painful to take drugs than the alternative, then maybe an abuser will accept help. Waiting until the abuser goes willingly is not recommended-get someone into treatment as soon as the problem is known. While 1/3 can overcome their addiction through treatment, 1/3 will return for treatment and 1/3 can't be helped. Interventions are a good way of creating pain, making a person face their addiction. Florida is becoming a national model for treatment centers-patients stay in an apartment building and visit the “outpatient treatment center” across the street-this way insurance will pay for the “outpatient treatment.” A residential treatment program is better than an outpatient program.