HYS

HELPING YOUTH SUCCEED

PARENTS, TEACHERS & THE COMMUNITY BUILDING POSITIVE ASSETS IN YOUTH

Helping Youth Succeed

A Resource for Parents, Teachers and the Community

Table of Contents

- ***Introduction: Kermith R. Walters, Superintendent of Schools 3***
- ***The Importance of Increasing Positive Assets in Youth 4-5***
- ***Asset-Building Ideas 6-7***
- ***Respect, Celebrating Differences, and Taking Time to Talk 8-9***
- ***Resolving Conflict, and Safely Expressing Anger 10-11***
- ***Helping Children Deal with Bullying.....12-13***
- ***Suicide, and Stress In Your Child's Life.....14-15***
- ***Siskiyou County Ca. Healthy Kids Survey Results 2018.....16-19***
- ***Reasons Youth Give for Using Tobacco, Alcohol and Other Drugs...20-21***
- ***Alcohol, Tobacco, Drugs and the Law 22-23***
- ***Brain Health & E-cigs, Vaping and Nicotine 24-25***
- ***Recreational Marijuana, and Medicinal Cannabis 26-27***
- ***Opioids, and Naloxone.....28-29***
- ***Sugar, Caffeine, Alcohol, Body Image, and Eating Disorders 30-31***
- ***Exercise, Nutrition, and Talking to Your Teen about Sex.....32-33***
- ***Sexuality, Teen Dating Violence, and Healthy Relationships.....34-35***
- ***Resources 36***

Dear Families and Community Members,

As parents, we do everything we can to make sure our children are safe. Schools dedicate time and resources to teach our children how to make healthy and safe choices.

The results of the California Healthy Kids Survey indicate that some of our students put their lives in danger by using or associating with others who use alcohol and other drugs. Many admit to driving under the influence or having ridden in a car with someone who is driving while under the influence of alcohol or other drugs.

All school districts and the Siskiyou County Office of Education are committed to joining parents to meet this challenge. Our first line of defense is PREVENTION. Research tells us students with family and community support are more likely to make good choices about dangerous behaviors. Children with between 31-40 developmental assets generally are more successful in school, less prone to illicit drug and alcohol use, premature sexual activity, violence or bullying.

Parents, guardians, and communities DO make the difference. Talking to our children about these topics is not easy, but it is essential. This publication can serve as a valuable resource to you and your family. We are committed to helping you be successful in building positive assets for the future of our children.

Putting Children First,

Kermith R. Walters

Siskiyou County Superintendent of Schools

Helping Youth Succeed (HYS) is published by the Siskiyou County Office of Education. It is designed to help parents, teachers and the community to build positive developmental assets in children and guide them to make healthy and safe choices.

HYS is designed to provide tools, guidance and resources to assist YOU, to put the health, well-being and safety of our children first and to be part of building positive relationships with youth.

HYS is adapted, with permission, from similar publications produced by the Napa Valley USD, the Napa COE, the Sonoma COE, the San Luis Obispo COE, Osborn Graphics and Online resources.

Information about the 40 Developmental Assets included in this publication is adapted from research and materials by the Search Institute, www.search-institute.org (800-888-7828).

For additional information, contact Anna Hanisko at ahanisko@siskiyoucoe.net or Mark (Marcus) Mitchinson at mmitchinson@siskiyoucoe.net.

The Importance of Increasing Developmental Assets

Developmental assets prevent young people from getting involved in a wide range of risky behaviors, including smoking, alcohol and other drug use, early sexual activity, antisocial behavior and violence.

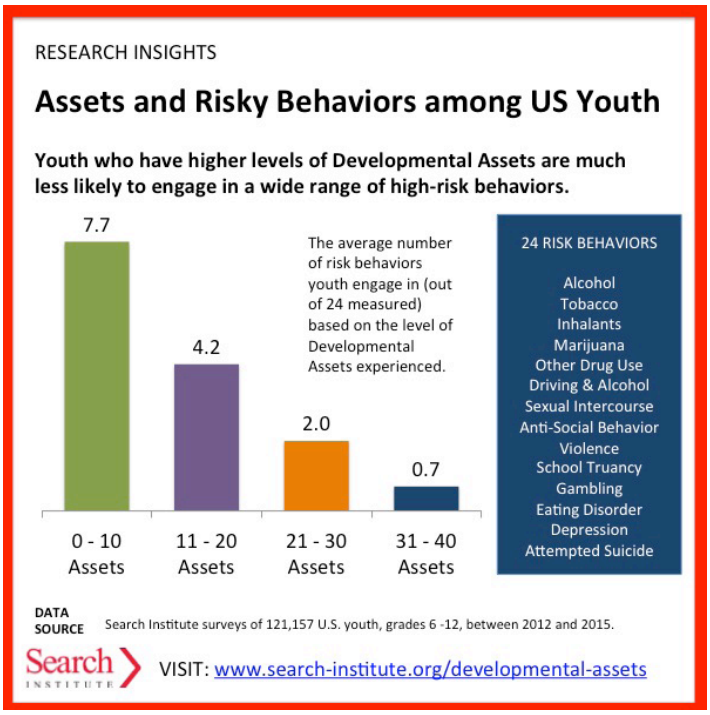
The more developmental assets young people have, the less likely they are to get involved in these problem behaviors. Furthermore, young people with many assets are more likely to make positive choices and commitments.

Developmental assets are particularly important for young people who experience difficult life situations, such as negative peer pressure, stress, abuse, or having an alcoholic parent. Although assets don't make the problems go away, they can provide young people with the support and resources they need to overcome the challenges they face.

Check out the next page next for a complete list of the 40 Developmental Assets.

Having fewer assets makes young people vulnerable to negative behaviors.

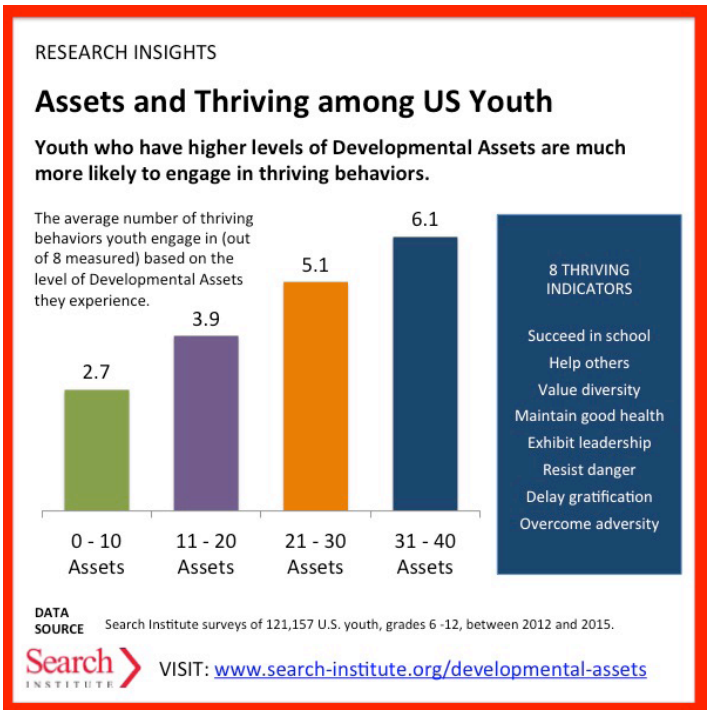
The percentage of young people who report involvement in high-risk behaviors significantly decreases when their developmental assets increase.



Reducing Risks—the Protective Power of Assets: Youth with low asset levels (0-10 assets) engage, on average, in 7.7 of 24 risk behaviors, compared to 0.7 risk behaviors among youth who experience 31-40 assets.

Having more developmental assets promotes positive behavior!

The percentage of young people who report positive attitudes and behaviors increases when their developmental assets increase.



Promoting Thriving: Youth with 0-10 assets engage in 2.7 of the 8 thriving indicators measured, compared to 6.1 thriving indicators among those experiencing 31-40 assets.

These charts are based on survey responses of 121,157 youth, grades sixth to twelfth, between 2012 and 2015.

Reprinted with permission from Search Institute®.
Copyright © 2008 Search Institute, Minneapolis , MN ; 800-888-7828; www.search-institute.org. All rights reserved.

Search Institute > **40 Developmental Assets® for Adolescents (ages 12-18)**

Search Institute has identified the following building blocks of healthy development—know as Developmental Assets®—that help young people grow up healthy, caring and responsible.

	Category	Asset Name & Definition
External Assets	Support	01. Family support - Family life provides high levels of love and support. 02. Positive family communication - Young person and their parent(s) communicate positively, and young person is willing to seek advice and counsel from parent(s). 03. Other adult relationships - Young person receives support from 3 or more non-parent adults. 04. Caring neighborhood - Young person experiences caring neighbors. 05. Caring school climate - School provides a caring, encouraging environment. 06. Parent involvement in schooling - Parent(s) are actively involved in helping young person succeed in school.
	Empowerment	07. Community values youth - Young person perceives that adults in the community value youth. 08. Youth as resources - Young people are given useful roles in the community. 09. Service to others - Young person serves in the community one hour or more per week. 10. Safety - Young person feels safe at home, at school and in the neighborhood.
	Boundaries & Expectations	11. Family boundaries - Family has clear rules and consequences and monitors the young person's whereabouts. 12. School boundaries - School provides clear rules and consequences. 13. Neighborhood boundaries - Neighbors take responsibility for monitoring young people's behavior. 14. Adult role models - Parent(s) and other adults model positive, responsible behavior. 15. Positive peer influence - Young person's best friends model responsible behavior. 16. High expectations - Both parents and teachers encourage the young person to do well.
	Constructive Use of Time	17. Creative activities - Young person spends three or more hours per week in lessons or practice in music, theatre, or other arts. 18. Youth programs - Young person spends three or more hours per week in sports, clubs or organizations at school and/or in the community. 19. Religious community - Young person spends one or more hours per week in activities in a religious institution. 20. Time at home - Young person is out with friends "with nothing special to do" two or fewer nights per week.
Internal Assets	Commitment to Learning	21. Achievement motivation - Young person is motivated to do well in school. 22. School engagement - Young person is actively engaged in learning. 23. Homework - Young person reports doing at least one hour of homework every school day. 24. Bonding to school - Young person cares about her or his school. 25. Reading for pleasure - Young person reads for pleasure three or more hours per week.
	Positive Values	26. Caring - Young person places high value on helping other people. 27. Equality & social justice - Young person places high value on promoting equality and reducing hunger and poverty. 28. Integrity - Young person acts on convictions and stands up for her or his beliefs. 29. Honesty - Young person "tells the truth even when it is not easy." 30. Responsibility - Young person accepts and takes personal responsibility. 31. Restraint - Young person believes it is important not to be sexually active or to use alcohol or other drugs.
	Social Competencies	32. Planning & decision-making - Young person knows how to plan ahead and make choices. 33. Interpersonal competence - Young person has empathy, sensitivity, and friendship skills. 34. Cultural competence - Young person has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds. 35. Resistance skills - Young person can resist negative peer pressure and dangerous situations. 36. Peaceful conflict resolution - Young person seeks to resolve conflict nonviolently.
	Positive Identity	37. Personal power - Young person feels they have control over "things that happen to me." 38. Self-esteem - Young person reports having a high self-esteem. 39. Sense of purpose - Young person reports that "my life has a purpose." 40. Positive view of personal future - Young person is optimistic about their personal future.

The 40 Developmental Assets® may be reproduced for educational, noncommercial uses only.
Copyright © 1997 Search Institute®, 615 First Avenue NE, Suite 125, Minneapolis, MN 55413; 800-888-7828; www.search-institute.org. All rights reserved.

Asset-Building Ideas for Parents and Caregivers

Parents and caregivers are a child's primary teachers. Building the Assets of your children will form the foundation they will need to make healthy choices and to succeed in life. The more assets, the stronger their foundation. Concentrate on intentionally building your child's assets:

- **Post the list of 40 Developmental Assets on your refrigerator door.** Each day, focus on an asset.
- **Regularly do things with your child,** including projects around the house, fun activities, and service projects. Take turns planning activities to do together as a family.
- **Eat at least one meal together** as a family every day.
- **Negotiate family rules and consequences** for breaking those rules.
- **Talk about your values and priorities**, and live in a way that is consistent with them.
- **Give your children lots of support and approval** while also challenging them to take responsibility and gain independence.
- **Nurture your own assets** by spending time with people who care about you and are supportive. Learn new things, contribute to your community, and have fun.
- **Think about the way you were parented** and how that affects your relationships with your children. If there are parts of your relationship with your parents that were very difficult or that get in the way of your parenting, consider talking with someone about these issues.
- **As a family, choose to reduce time spent watching television.** Find other interesting and meaningful activities for your children to do—some with you, some with their friends, some by themselves.
- **Learn as much as you can about what your kids need at their current ages.**
- **Recognize that children need more than just financial support.** They also need emotional and intellectual support. Balance family time with other priorities like work, recreation, and hobbies.
- **Talk with children before problems arise.** Keep in regular contact with teachers about how your children are doing and what you can do to help your children learn.
- **Think of teenagers as adults in training.** Teach them something practical, such as how to change a tire on the car, prepare a meal, or create a monthly budget. Help them expand their interests.
- **Do intergenerational activities** with extended family and with other neighborhood adults and families.
- **Be an asset builder** for other young people in your life.
- **Listen to your child.** Let them talk about their thoughts, feelings, fears, and dreams.
- **Make sure your children are supervised after school.** Enroll them in after-school programs at their school if needed. Join with your neighbors or extended family to share support after school.
- **Remember that you are not alone.** Other asset builders in your children's lives include teachers, coaches, child-care providers, spiritual leaders, and neighbors. Work with these people to give kids consistent messages about boundaries and values.

Become Involved - Be An Asset Builder!

Parents aren't the only ones who can build assets. Happy, successful young people need supportive relationships at home, at school, and with adults in the community. Every adult can help by getting involved with young people, establishing caring relationships, and participating in asset-building activities in the community.

ASSET-BUILDING IDEAS FOR GRANDPARENTS:

- Find out your grand children's interests or skills, and work together on a related project.
- Share a family tradition with your grandchild, like cooking a family recipe together.
- Share your family history with your grandchild. Tell bedtime stories, write them down or draw pictures.
- Stay in contact. Call or write.

ASSET-BUILDING IDEAS FOR TEACHERS:

- Choose a quote of the day with an asset focus.
- Greet students by name when you see them.
- Encourage access to at least one caring adult for each student.
- Teach students about the 40 assets, and help them set goals for the assets they want to develop.
- Work with students to set the boundaries of school rules.
- Ask students to gather information about their heroes—famous or not.
- Use "interviews" with students to help them identify their assets and strengths.

ASSET-BUILDING IDEAS FOR COACHES:

- Find ways for each child to participate.
- Insist that all team members treat one another with respect.
- Focus on helping players get better, not be the best.
- Model non-aggressive verbal and physical behavior. Model how to handle anger, frustration, and disappointment.

ASSET-BUILDING IDEAS FOR ADULTS:

- Learn the names of children and teenagers who live near you. Greet them by name.
- Expect young people to behave responsibly. Let them know what you expect from them—before there's trouble.
- Take time to talk with young people who live near you or work with you.
- Establish at least one informal, ongoing, caring relationship with a child or adolescent outside your family.
- Examine your attitudes about children and youth. See young people as resources rather than problems.
- Look out for the children and youth around you. Help keep them safe. Report dangerous and inappropriate behaviors to parents, school officials, or law enforcement officers.
- Get involved in volunteer efforts and community programs that involve children and youth.
- Support local efforts to provide safe spaces for young people to meet and spend time together.
- Become active in local decision-making, and help shape policies that promote youth development; advocate for appropriate changes and increased asset-building opportunities within the community.

RESPECT AND CELEBRATE DIFFERENCES

FOSTERING CULTURAL COMPETENCE

Cultural competence does not mean that we all have to like each other. Instead, it means that we treat each other with respect, tolerance, and equality. Children can strive to understand other cultures and come to appreciate them.

Here are some strategies for parents, caregivers, and adults to foster cultural competence:

- ***Help your child develop an ethnic awareness and cultural identity of his or her own.***
- ***Create an open family atmosphere that allows discussion of differences.***
- ***Encourage children to talk about where their prejudices and discomfort originate. Examine images on TV and in the movies, then discuss what's authentic and what's stereotypical.***
- ***Help your child to be curious about your own culture as well as others. Read articles together, rent videos, cook new foods, or try other ways to focus on cultures other than your own.***
- ***Encourage your child to get a pen pal from a different country.***
- ***When your child has a negative reaction to a cultural or racial difference, find out what happened and what your child is feeling, and suggest alternative responses.***

As adults, children will need to have skills to deal with people from a wide variety of backgrounds and perspectives.

"The way we feel about ourselves and the way we react to racism may reflect assumptions that are centuries old," says Darlene Powell Hopson, Ph.D., and Derek S. Hopson, Ph.D., clinical psychologists and authors. With your children, explore your feelings about people who are different from you. Talk about where your cultural competencies are strong and where they need some nurturing. Together you can foster a sense of cultural competence in each member of your family.

Youth are more likely to grow up healthy when they have knowledge of and comfort with people of different cultural/racial/ethnic backgrounds.

Siskiyou County is Becoming More Diverse

Siskiyou County's increasing diversity reflects changes in who we come in contact with every day: friends and neighbors, co-workers and employees, business owners and community volunteers, and the children in our schools.

The increasing diversity of Siskiyou County requires that every local resident—young and old alike—develop the ability to interact and feel comfortable with people of different cultural, ethnic, and racial backgrounds. Children are growing up in a world that is more diverse racially, economically, religiously, linguistically, and in other ways, than the world you grew up in. When parents help their children increase their knowledge of and comfort with people of different backgrounds, they are helping to develop their children's "cultural competence."

HELPFUL HINTS

Tips that make building cultural competence with your child easier:

- Examine images that television, movies, books and social media portray of various cultures. Discuss what's authentic and what's stereotypical and how you can determine the difference.
- Celebrate cultural customs and rituals from your own heritage.
- Together learn words from another language.
- Cook meals from different cultures.

Tips for Talking!

Schedule uninterrupted time together.

Find a quiet room, or take a walk in the park. Turn off the TV.

Use words and ideas that are familiar to your child.

Don't expect a child to come into your world. You have to get into theirs.

Practice active listening together:

1. Relax and take a deep breath.
2. Focus on each other.
3. Take turns talking.
4. Stay quiet until it is your turn to talk.
5. Care about what your child is feeling.
6. Nod your head to show you understand and rephrase what your child says.
7. Check with each other to see if you each heard what the other meant to say.

Use "I" rather than "you" statements.

"I feel (upset) because (I'm not being heard) ." Versus "You make me (angry) ."

Set a family rule that some practices are not allowed:

Avoid put downs, name calling, blaming the other, making excuses, threatening.

Stay in the present.

Nothing can be done today to solve problems in the past. Encourage learning from past experiences.

Follow rules of good communication:

1. Tell the truth.
2. Be fair and examine both sides.
3. Speak directly to your child.
4. Be willing to be wrong and admit it. Be big enough to say "I'm sorry."
5. Accept differences in values and life-styles.
6. Respect your child's feelings and intelligence.
7. Respond to anger with a calm voice.

Focus on the feelings that are behind the words.

Restate thoughts in terms of feelings. "I felt disappointed when you were late."

Be aware of body movements.

Hand movements, facial expressions, posture, and tension are important indicators of inner feelings.

Avoid talking down to or intimidating your child.

A parent's role is to improve a child's self-image, not to destroy it.

HOW DO YOU COMMUNICATE?

The more you communicate, the more at ease your child will feel about discussing sensitive issues with you.

- Be absolutely clear with your children about alcohol, drugs, sex and violence. Don't leave room for interpretation. Talk often, once or twice a year won't do it.
- Be a better listener. Ask questions, and encourage them. Repeat back what you heard your child said to you. Ask for their input about family decisions. Showing your willingness to listen will make your child feel more comfortable about opening up to you.
- Give honest answers. Don't make up what you don't know, offer to find out.
- Use TV reports, commercials, news and school discussions to introduce the subjects of tobacco, alcohol and other drugs, sex and violence in a natural unforced way.
- Don't react in a way that will cut off further discussion. If your child makes statements that challenge or shock you, turn them into a calm discussion of why your child has that opinion.
- Role play with your child and practice ways to resist the pressure to use tobacco, alcohol or other drugs, or engage in sex or violence. Acknowledge how tough these moments can be especially if friends are involved.

Walk The Walk

- **Be a role model; the person you want your child to be. What stronger message is there?**
- **Be a living, day-to-day example of your value system. Demonstrate the compassion, honesty, generosity and openness you want your child to have.**

Resolving Conflict

How to teach your child to resolve conflicts peacefully!

Conflict means that there are differences.

- It is okay to disagree on issues.

Realize that it is not possible to avoid all conflict.

- Differences are normal. Conflict can be healthy.

Ignoring conflict does not make it go away.

- Denial and avoidance may make the problem worse.

Conflicts are difficult because of the feelings involved.

- Be aware of the other person's feelings as well as the words that are being said. Teach your child to communicate their own feelings in ways that can be heard.

The outcome of conflict may be good for all parties.

- A new decision or action may make life better for everyone. Focus on a win-win situation.
- A compromise is often the best answer. Rather than one person takes all, each party gets some and gives some.

Cooperating may provide the most gains for everyone.

- Work together toward solutions rather than "you against me."

Focus on the problem rather than the individual.

- It is not necessary to prove the other person wrong to solve the problem. Appreciate the differences and attempt to "stand in the other person's shoes" for a moment.

Look at many possibilities.

- The best answer may be something you have never even considered. Brainstorm options.

When hostility is intense, call in a neutral mediator.

- A third person can often see new opportunities for resolution.

Violent conflict often produces negative results.

- Violent behavior can hurt others, and property can be destroyed. No one wins with violent behavior.

Good communication is important to solving conflict.

- Follow strategies for good communication.

Sometimes the best immediate solution is to take time out.

- Agree to take up the problem at a later time after thinking things over.

Expressing Anger

How to teach your child to manage his or her anger!

Give your child these three basic rules for expressing anger:

1. Do not injure yourself.
2. Do not injure others.
3. Do not damage property.

Help your child find safe ways to express his or her anger. It is natural and healthy!

- Anger may get more destructive over time unless it is expressed.

Teach your child safe ways to manage his or her anger.

- Examples are physical exercise, relaxation, games, crying, shouting, attention diversion, humor, controlled breathing and talking it out.

Accept your child, but not his or her destructive behavior.

- Acknowledge your child's need to express anger while being firm about acceptable ways to do so.

Set aside time to listen to your child.

- Listen closely, and do not judge your child. You may be able to identify and change a problem situation.

Attempt to understand what's underneath the anger rather than focusing on the anger itself.

- Anger often masks feelings such as hurt, guilt, fear, and low self esteem. Look beyond the anger.

Be aware that you are a role model in handling anger.

- Show your child how to express anger appropriately. Evaluate your own responses when angry.

Permit your children to experience the consequences of their own destructive behavior.

- Don't always rescue them. Protecting children from logical consequences can be harmful.

Seek professional help when needed.

- Look for symptoms such as staying angry, being angry often, and destructive behavior. Talk to your health care provider or spiritual counselor, or use the resources on the back page of this guide.

Allow your child to calm down before taking action.

- This allows time to think about choices and consequences. Adopt a "time-out" procedure.

Helpful Hints—**SMILE**

S—Stop

Take time to think about the impact your words and actions have on others (and yourself). Teach your children empathy as you model it for them.

M—Motivate

Encourage your family and friends to resolve differences peacefully through problem solving, negotiation and compromise. Hold family meetings in which differences are safely discussed.

I—I Love You

Let family members know you accept them and their strengths and weaknesses. When they feel unconditionally loved, they can more readily accept others on those terms.

L—Listen

Make time to hear your children's joys and concerns. As their strongest advocate, your support and belief in them provides them with an anchor as they grow and change.

E—Expect Kind Behavior

Make it a priority to create family rules of kindness that family members are responsible for following.

Types of Bullying

In order to stop bullying, each of us must take responsibility for a zero tolerance of unkind behavior towards others.

Cyber
Cyber-bullying is bullying that takes place using electronic technology. Electronic technology includes devices and equipment such as cell phones, computers, and tablets as well as communication tools including social media sites, text messages, chat, and websites.

Physical
Using the body or an object to harm—kicking, shoving, tripping, punching, hair pulling, biting, throwing objects at someone, and use of weapons.

Verbal
Using words to harm—name calling, threatening, put-downs, blackmailing, making up stories, spreading rumors, betraying a confidence either face to face or on the Internet.

Emotional
Using overt or covert methods to silence or exclude—laughing, mocking, rolling eyes, negative body language, imitating, writing notes, using finger/hand signs, rejecting, excluding, ostracizing & isolating.

Sexual
Using sexual means or nuances to intimidate or harm—touching someone in an inappropriate way, making fun of someone's body, comments about sexual orientation, and sexual coercion.

Helping children deal ...

Tips for helping a child who is bullied:

1. When a child tells you about a bullying problem:
   - Listen to what the child has to say. Find out what support the child needs and what help they would like from you.
   - Avoid blaming the child. This is not a time to focus on what the child should or could have done differently.
   - Keep a written record of the incidents and make sure to report them to the appropriate school personnel, if necessary.
   - Do not encourage the child to fight back.
2. Observe how the child talks and plays with other children. Help them to develop skills to make and sustain friendships.
3. Teach the child to be assertive and to say "NO!" or "Leave me alone!" in a clear, firm voice when feeling pressured or uncomfortable.
4. Help the child identify social supports and practice ways to stay safe (e.g., play or walk with a friend, identify and play near children who could help or step-in, etc.).
5. Teach the child to recognize "vibes" and body language that could signal danger. Always encourage children to walk away if a situation feels dangerous or out of their control.
6. Practice how to handle specific situations.
7. Encourage the child to ask for adult help. Reinforce the difference between telling and tattling.
8. Teach the child strategies for staying calm and confident if teased or bullied.
9. Help the child to develop techniques for diverting a bully's attention away from hurting them (e.g., verbal retorts, humor, or stalling tactics).

Excerpted with permission from the author. © 2001 Nancy Mullin-Rindler, Director, Project on Teasing and Bullying. Wellesley College Center for Research on Women, 106 Central Street, Wellesley, MA 02481-8203; (781)283-2477

Tips for the Witness to Bullying Behaviors

- **Walk away so the bully won't have an audience.**
- **Tell an adult.**
- **Stand up for the target.**
- **Challenge the bully.**
- **Offer support to the target in public.**
- **Don't laugh at the bully's put-downs.**
- **Offer support to the target in private.**
- **Don't join in with the bully.**
- **Talk to the bully in private.**
- **Get a group to stand up to the bully.**

..... with bullying!

Tips for helping a child who bullies others:

1. Take every incident or report of bullying behavior seriously; don't dismiss any as a one-time incident.
2. Supervise the child's interactions and play more closely. Intervene to redirect or stop any behavior that is inappropriate.
3. Do not tolerate behavior that hurts others.
    - Respond swiftly and consistently with natural consequences (e.g., restrict time with others).
    - Build empathy by asking them to notice how the other person felt because of their actions. Work on improving their ability to recognize feelings in others and themselves.
    - Practice actions or words that might make the other person feel better or to apologize
    - Help the child recognize how and when their behavior crosses the line from being acceptable to unacceptable.
4. Teach the child ways to recognize internal signals that they are about to lose control.
5. Use real-life situations to practice kind or friendly alternatives to unfriendly or bullying behavior.
6. Teach the child positive ways to get what they want. Offer acceptable alternatives for the child to have power and control.
7. Praise and reward positive interactions and negotiation.
8. Do not label a child as a bully. Teach the child bullying is behavior that can be changed and that it takes courage to change.
9. Get at the root of the bullying behavior. Use school specialists and other professionals as resources, if needed.
10. Be a good role model. Model the behavior that you want the child to use in their own life and interactions with others.

Bullying ... Myth & Fact

- **MYTH: Bullying is just teasing.**
- **FACT**: Bullying is much more than teasing. Some bullies do tease, others use violence, intimidation & other tactics.
- **MYTH: Some people deserve to be bullied.**
- **FACT:** No one ever deserves to be bullied. No one "asks for it." Being different is not a reason to be bullied.
- **MYTH: People who complain about bullies are babies.**
- **FACT:** People who complain about bullies are standing up for their right not to be bullied.
- **MYTH: Bullying is a normal part of growing up.**
- **FACT:** Getting teased, picked on, pushed around, threatened, harassed, insulted, hurt and abused **is NOT normal**. When people think it is normal, they are less likely to say or do anything about it, which gives bullies the green light to keep bullying.
- **MYTH: Bullies will go away if you ignore them.**
- **FACT:** Some bullies might go away, but others will get angry and keep bullying until they get a reaction.
- **MYTH: People who are bullied will hurt for a while, but will get over it.**
- **FACT:** Bullying hurts for a long time. Some kids have dropped out of school because of bullying. Some have become so sad, desperate, afraid, and hopeless that they have committed suicide. People never forget being bullied.
- **MYTH: If you tell an adult you are being bullied, it is tattling.**
- **FACT:** It's smart for a child to tell an adult who can help them do something about the bullying or if you see someone else being bullied.
- **MYTH: Bullies have low self-esteem so they pick on other people.**
- **FACT:** Some bullies have high esteem. Most of the time, bullying is not about high or low self-esteem, it's about having power over other people.
- **MYTH: Fighting or getting even is the best way to deal with a bully.**
- **FACT:** If a child fights with a bully, they might get hurt or hurt someone else, or they might get into trouble for fighting. The bully might come after them again to get even. Either way it only makes things worse.

SUICIDE IN TEENS

Suicide is a desperate attempt to escape suffering that has become unbearable. Blinded by feelings of self-loathing, hopelessness, and isolation, a suicidal person can't see any way of finding relief except through death. But despite their desire for the pain to stop, most suicidal people are deeply conflicted about ending their own lives. They wish there was an alternative to suicide, but they just can't see one.

Take any suicidal talk or behavior seriously. It's not just a warning sign that the person is thinking about suicide—it's a cry for help.

Teenage suicide is a serious and growing problem. The teenage years can be emotionally turbulent and stressful. Teenagers face pressures to succeed and fit in. They may struggle with self-esteem issues, self-doubt, and feelings of alienation. For some, this leads to suicide. Depression is also a major risk factor for teen suicide.

Risk factors for teenage suicide include:

- Childhood abuse
- Recent traumatic event
- Lack of a support network
- Availability of a gun
- Hostile social or school environment
- Exposure to other teen suicides

Warning signs that a teen may be considering suicide:

- Change in eating and sleeping habits
- Withdrawal from friends, family, and regular activities
- Violent or rebellious behavior, running away
- Drug and alcohol use
- Unusual neglect of personal appearance
- Persistent boredom, difficulty concentrating, or a decline in the quality of schoolwork
- Frequent complaints about physical symptoms, often related to emotions, such as stomachaches, headaches, fatigue, etc.
- Not tolerating praise or rewards

Source: American Academy of Child & Adolescent Psychiatry

Preventing A Suicide

Tip 1: Speak up if you're worried

If you spot the warning signs of suicide you may wonder if it's a good idea to say anything. It's natural to feel uncomfortable or afraid. But anyone who talks about suicide or shows other warning signs needs immediate help—the sooner the better.

Tip 2: Respond quickly in a crisis

If someone tells you that they are thinking about death or suicide, it's important to evaluate the immediate danger the person is in. Those at the highest risk for suicide in the near future have a specific suicide PLAN, the MEANS to carry out the plan, a TIME SET for doing it, and an INTENTION to do it.

If a suicide attempt seems imminent, call a local crisis center, dial 911, or take the person to an emergency room. Remove guns, drugs, knives, and other potentially lethal objects from the vicinity but do not, under any circumstances, leave a suicidal person alone.

Tip 3: Offer help and support

If the person is suicidal, the best way to help is by offering an empathetic, listening ear. Let your loved one know that they are not alone and that you care. Don't take responsibility, however, for making your loved one well. You can offer support, but you can't get better for a suicidal person. They have to make a personal commitment to recovery.

Compiled from info on https://helpguide.org/home-pages/suicide-prevention.htm

STRESS In Your Child's Life?

Signs & Symptoms

- low self-esteem
- little energy
- short attention span
- often sleepy
- extremely hyperactive
- often depressed
- inactive
- often misbehaves
- angers easily
- fights frequently
- easily frustrated
- uses adult sexual terms
- says bad things about self
- refuses to do what they are told
- walks unsteadily
- makes strange grunts, growls, snorts
- cries easily
- sulky
- detached and unresponsive
- uncommunicative
- change in eating habits
- mood swings
- increased defiance/ rejection of authority
- change in personal hygiene
- change in personality & appearance
- abusive to siblings
- grades fall
- talks back

Helpful Hint: BE OPEN

Children may talk more openly about sensitive topics with someone who is not their parent. Talking with an aunt, uncle, grandparent, sibling, coach or spiritual leader may be a more objective sounding board for your child.

Tools for Reducing Stress

- Allow your child to express their feelings & concerns.
- Promote good nutrition & exercise during the early years so that these become habits for a lifetime.
- Let your child know that you also experience pain, fear, anger, and nervousness.
- Look at your own coping skills to see if you are setting a good example.
- Teach your child relaxation exercises like deep breathing & sitting quietly for 10-20 minutes.
- Help your child develop their imagination so that they can make the most of opportunities that might arise from a stressful situation.
- Set goals based on the child's ability—not on someone else's expectations.
- Teach them the value of forgiveness of others and of themselves.
- Don't tire your child out by having too many activities all at once.
- Give your child a big hug, or take a long walk with him/her before and/or after a stressful situation.
- Establish a special time each day just for the two of you: reading a book together, watching a TV program, gardening, or baking a dessert.
- Show confidence in your child's ability to handle problems and tackle new challenges.
- Get your child's input about dealing with a stressful situation, and show your appreciation for their thoughtfulness.
- Help your child express anger positively, without having to resort to violence.
- Help your child learn from mistakes, and learn to forgive, not hold a grudge or punish for no reason.

Siskiyou County's California

Why is the California Healthy Kids Survey (CHKS) conducted?

The CHKS is conducted to collect information on the health risks and the resilience of students in grades 7, 9 & 11 every two years. The resulting report provides a summary of findings relating to substance use, violence and safety, physical health & other risk behaviors from the survey.

Who took the survey in Siskiyou County Schools?

- ◊ 76% of 7th Graders (318 students)
- ◊ 77% of 9th Graders (342 students)
- ◊ 75% of 11th Graders (260 students)
- ◊ 54% of Alternative (Alt) School Students (26 students)

According to CHKS standards, to produce representative data, a district must collect completed answer sheets from a minimum of 60% of students at each surveyed grade level. In Siskiyou County, Grades 7, 9, & 11 had participation rates over 60%, which produced data that is representative of all students in grades 7, 9 & 11. However, since the percentage for Alternative students is below 60%, the data is only representative of those students who completed the survey and is not considered representative of all students in Alternative education settings. For further information regarding CHKS contact WestEd http://chks.wested.org.

School Climate & Student Well-Being: The table below represents the **percent** of students surveyed scoring high (H), moderate (M) and low (L) in external developmental assets in the school environment. CHKS County Table A4.5

Grade	7th			9th			11th			Alt		
Assets	H	M	L	H	M	L	H	M	L	H	M	L
Caring Adults in School	34	54	12	31	54	15	32	57	11	36	56	8
High Expectations by Adults	51	42	6	42	50	9	40	52	8	56	40	4
Opportunities for Meaningful Participation from Adults	10	39	51	6	36	59	8	38	54	4	36	60

We are proud the majority of students maintain a medium to high score of external assets.

We are concerned that the high number of external assets decrease as a student progresses from grade to grade. Our young people are especially in need of more opportunities for meaningful participation in our schools.

WHY SHOULD WE BE CONCERNED?

- Too many students do not feel safe at school and are being harassed, bullied and/or teased.
- The dramatic increase of marijuana use in high school is of great concern.
- One in five students reports being under the influence of alcohol and other drugs while driving or being driven.
- Students vaping e-cigs is now a bigger problem than students smoking cigarettes.

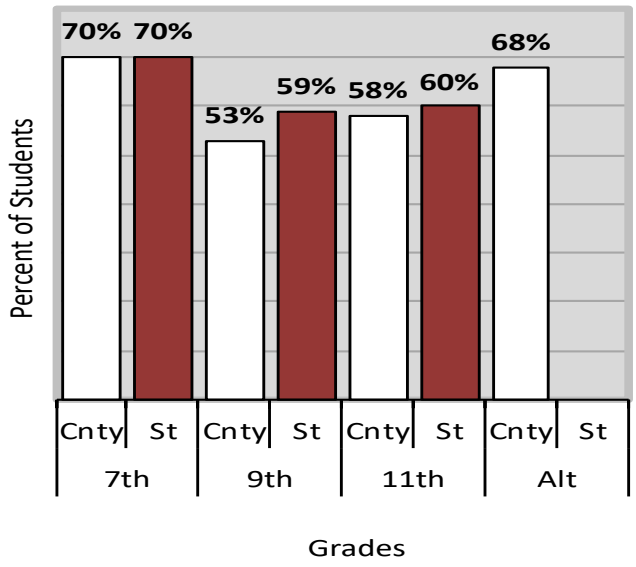
Healthy Kids Survey Results

In the past 12 months ...

Key: Alt = Alternative School Students,
County = Siskiyou, State = California

Felt Very Safe or Safe at School

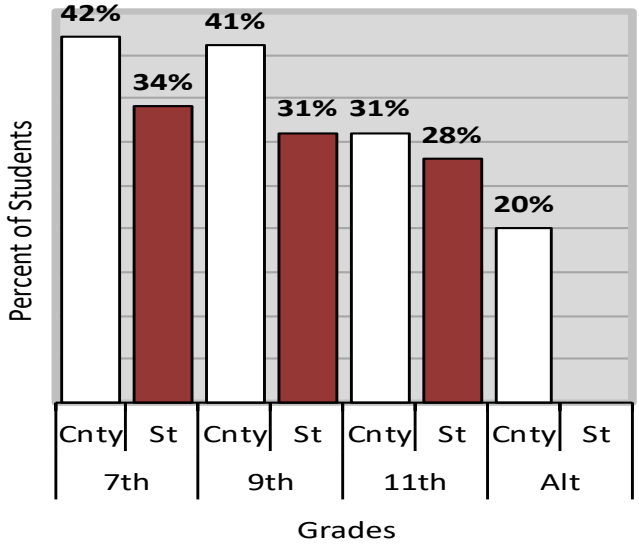
County Table: A5.1, State Table: 5.1



We are proud most students feel safe at school.
We are concerned that NOT ALL students feel safe at school.

Experienced Harassment/Bullying

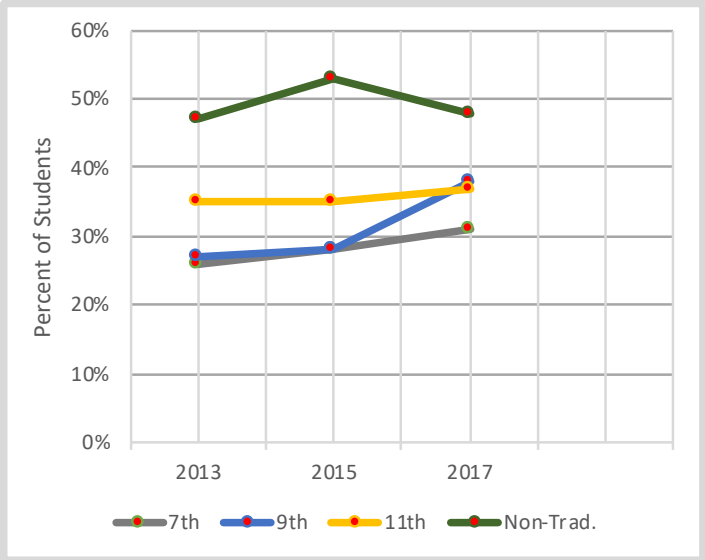
County Table: A5.2, State Table: A5.2



We are proud of those students who do not bully.
We are concerned that on average over 1/3 of students are harassed or bullied while at school.

Felt Chronic Sadness/Hopeless Feelings

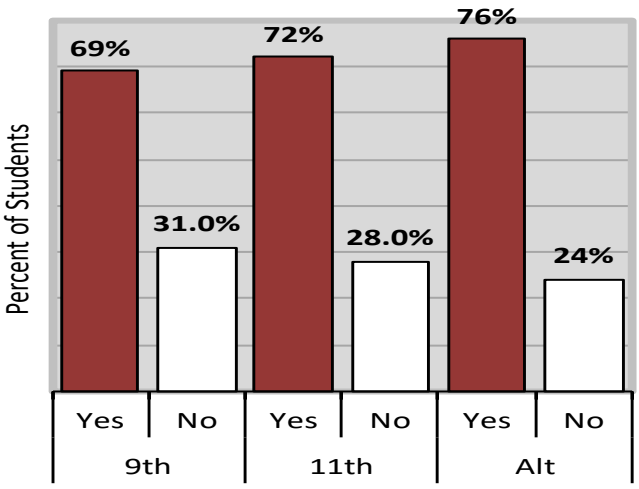
County Table: A8.4



We are proud that the majority of students do not feel chronic sadness and hopeless.
We are concerned in an up-tick of chronic sadness and hopelessness in youth since 2013.

Discussion with Parents/Adults on Sexual Topics

County Table: O8.1



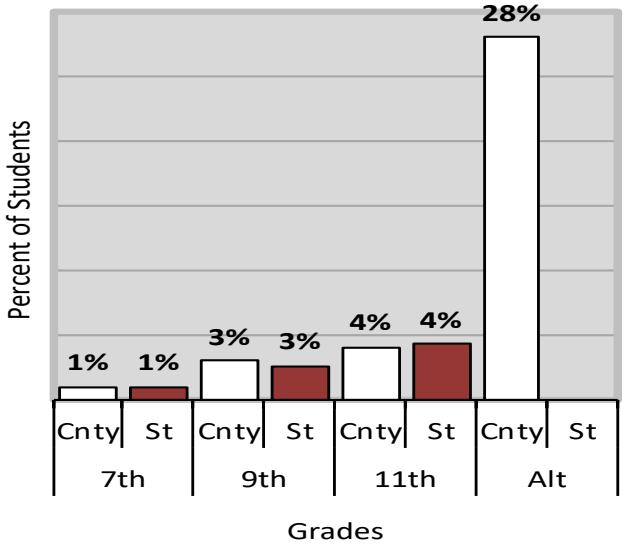
We are proud that over two-thirds of parents talk with their children about sex related topics.
We are concerned that many students do not get info about sex related topics from their parents.

Siskiyou County's California

In the past 30 days did you ...

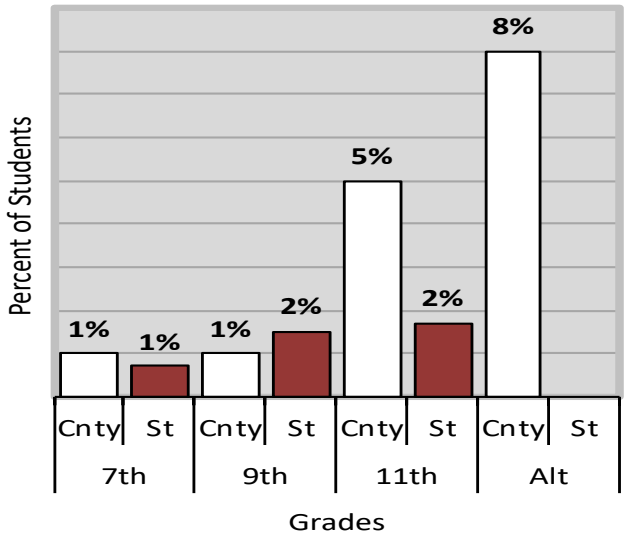
Key: Alt = Alternative School Students
County = Siskiyou - State = California

Smoke Cigarettes? County Table: A7.3, State Table: A7.3



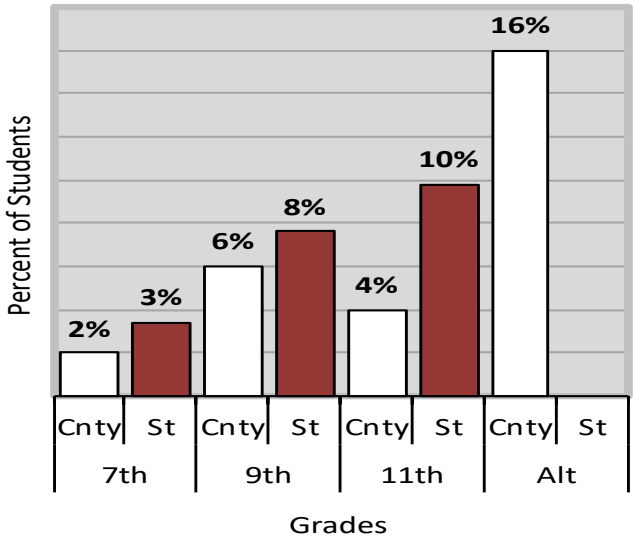
We are proud that the percentage of students who smoke is as low as our state's percentages.
We are concerned the percentage of students who do smoke increases with age.

Chew/Snuff Tobacco? County Table: A7.3, State Table: A7.3



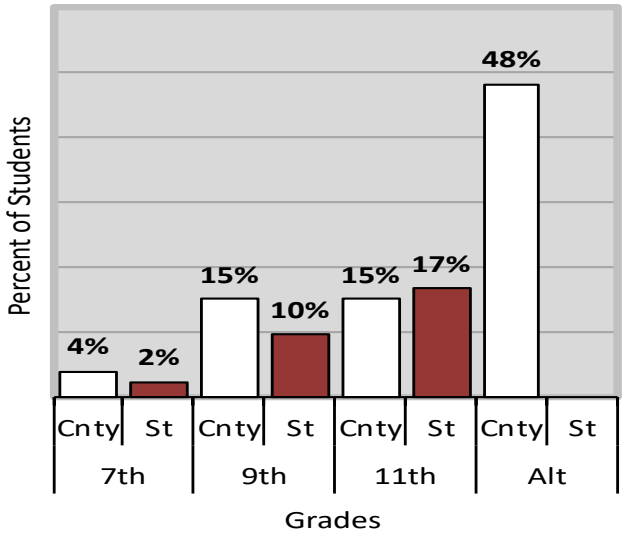
We are proud that the great majority of students do not chew.
We are concerned the percentage of students who chew more than doubles between grades 9 and 11.

Use E-cigs or Vape County Table: A7.3, State Table: A7.3



We are proud that the great majority of students do not vape or use e-cigs.
We are concerned the percentage of students who vape triples between 7th and 9th grade.

Smoke Marijuana? County Table: A6.5, State Table: A6.4

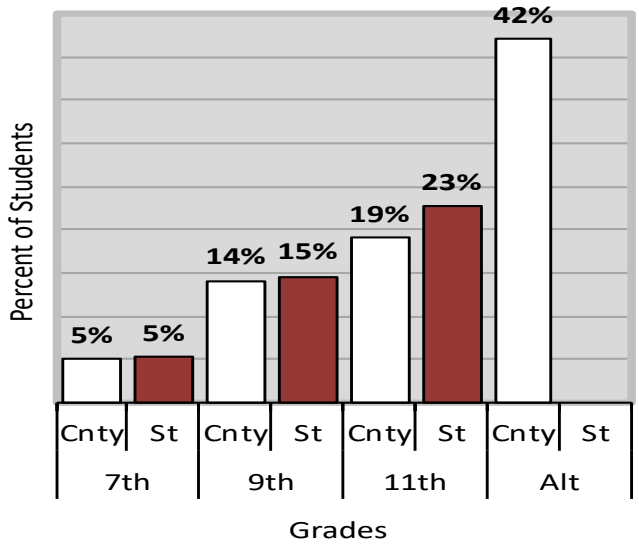


We are proud that the majority of students DO NOT smoke marijuana.
We are concerned the % of students who smoke marijuana is higher than the state percentage.

Healthy Kids Survey Results

Drank Alcohol, Past 30 Days

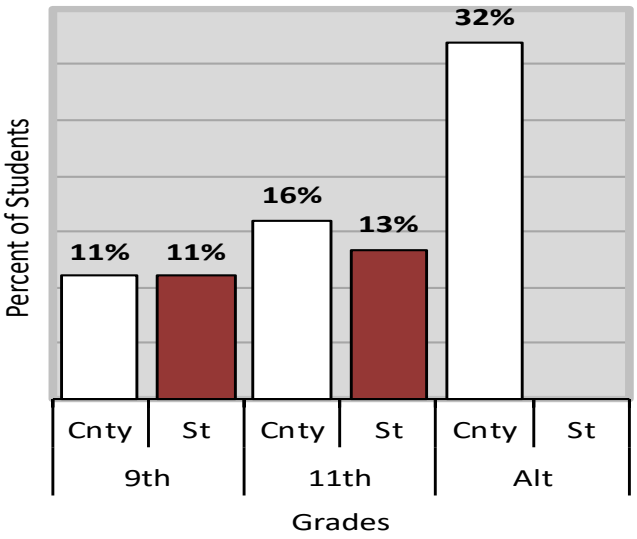
Cnty Table: A6.5, State Table: A6.4



We are proud the percent of students who drink is lower than the state percentages.
We are concerned that the percent of students who drink more than triples between 7th & 11th grades.

Driving Under the Influence, Life Time

County Table: A6.11, State Table: A6.8



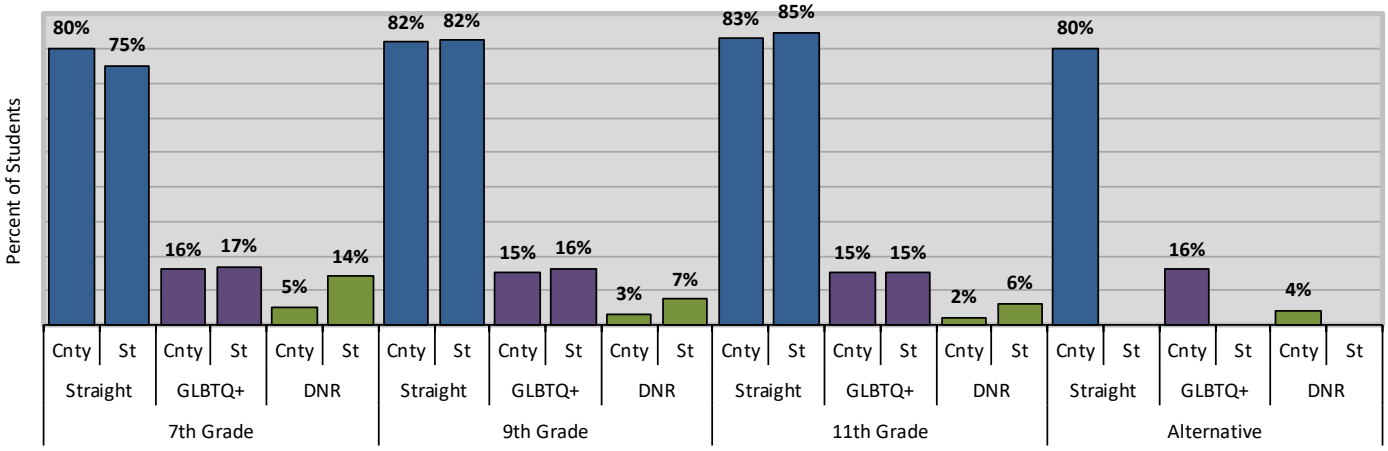
We are proud most students do not drink and drive.
We are concerned on average, 1/5 of students have experienced driving under the influence.

Which best describes you?

County Table: A3.13
State Table: A3.13

Key: DNR = Did Not Respond
GLBQ+ = Gay, Lesbian, Bisexual, Queer or Questioning

Percentages may exceed 100% since students were asked "Mark All That Apply".



WHY WE SHOULD BE PROUD!

- The majority of our students make safe and healthy choices. Students deserve our praise and congratulations for making good decisions.
- The super majority of students do not vape or use e-cigs.
- Many students treat each other kindly, do the right thing, and stand up for others who are being treated unfairly.
- Many students surveyed clearly feel that frequent use of alcohol and other drugs can be harmful.

REASONS THAT YOUNG PEOPLE GIVE TOBACCO, ALCOHOL

Reason #1—

To feel grown-up

Children like to imitate adults. How many times have we found children imitating the way we speak? Trying on our clothes or makeup? Having a pretend tea party? or cocktail party? Dressing up to go to work?

To a child, being a grown-up is a very desirable thing. Being grown-up means freedom. Being grown-up means making your own decisions. Being grown-up means being able to eat and drink anything you want.

Young people like to try on our behaviors along with our grown-up clothes. Lots of things fit into the grown-up category: getting married, having babies, drinking alcohol, driving a car cross country, working, and so forth.

Reason #2—

To satisfy curiosity

For many of the reasons already presented, children are very curious about alcohol, tobacco, and illicit drugs. Kids are smart, and they are very quick to pick up mixed messages in the media, at school, or at the dinner table. Even if we have done an outstanding job of educating and nurturing the children in our care, there are some children who will remain innately curious about alcohol, tobacco, and illicit drugs.

Reason #3—

To fit in and belong

Children want others to like them. Sometimes the group the child wants to join is using substances, or they think the group is using. Some kids turn to alcohol, tobacco, and illicit drugs to feel like they fit in, to overcome anxiety, change their personality, or give themselves courage to talk to other people.

Our society is flooded with messages that, perhaps unintentionally, encourage us and our young people to use alcohol, tobacco, and illicit drugs to enhance our lives and develop social skills.

Wanting to fit in and belong is one of the most natural parts of growing up. It is important. In fact, if we really listen, we may find that for some it is THE most important part of growing up. Establishing a clear position against alcohol and other drug use is not enough. Children need a repertoire of skills to help them. They need to learn how to decipher pro-use messages, refuse both subtle and direct offers of alcohol and drugs, act appropriately in social situations, build solid interpersonal relationships, express their thoughts and feelings, solve problems, make decisions, and communicate with people in positions of authority.

FOR USING & OTHER DRUGS:

Reason #4—

To take risks and rebel

All children need to learn how to take risks. This is part of growing up. By his or her actions, the child is often saying, "I'm going to take a risk today to test my balance by climbing up this tree." Or, "I am going to take a social risk today and go up to someone I don't know and introduce myself."

As children approach puberty, virtually everything holds a small amount of risk, because everything feels so new and unexplored. As great levels of risk are achieved, most young people will continue to look for opportunities to expand their horizons and grow.

Reason #5—

To relax and feel good

It may sound like a cliché, but children need a lot of support from a wide range of people who can spend quality time with them, and who can listen and be involved in their life experiences. Children need to talk about their friendships and about their need to fit in and belong. They need to be able to discuss their fears and their successes. Our children need to know that they will not be negatively judged, only the behavior that harms themselves or others.

What can YOU do if your child is using alcohol & other drugs?

1. Be courageous enough to seek help. Ask your pediatrician or call one of the many hot-lines for resources.

2. Do not confront your child who is under the influence of alcohol or other drugs. Wait until the child is sober.

3. Impose whatever discipline your family has decided upon for violating the rules and be consistent.

4. Focus on the fact that you care about your child. Be clear that it is the behavior you disapprove of, not your child. Make sure that your child hears that message.

5. Try to remain calm, unemotional, and factually honest in speaking about your child's behavior and its day-to-day consequences. Avoid emotional appeals and punishments.

6. Discuss the situation with someone you trust—a counselor, clergy member, social worker, friend or another individual who has experienced drug or alcohol abuse in their family.

7. Don't keep the problem a secret. Get help for your child, and get support for yourself and your family.

8. Be patient and live one day at a time. Recovery does not happen overnight. Try to accept setbacks and relapses with calmness and understanding.

Legal Risks of the Unchaperoned Party

Liability of Children

Can Children be sued?

YES! Children do not have to be 18 to be sued. If there is no insurance, or not enough insurance to cover the incident, the injured person can obtain a judgment for monetary damages against your child.

An injured person has as long as 10 years to collect on that judgment, and there is a procedure for extending that another 10 years. By then, your child will have something to lose: a car, a boat, a house, a salary, their credit rating! A judgment can be a cloud over your child's head for a long time.

What can children be sued for?

Your children can be found liable for two types of actions—intentional acts and negligent acts.

Intentional Acts: This includes vandalism, fist fights, date rape, and possibly transmitting sexually transmitted diseases.

Negligent Acts: This can include accidental shooting, horseplay, and other mishaps. The most common is the automobile accident. Oddly enough, drunk driving is often not the problem with very young drivers 16-17 years of age. More often, the accident arises out of inexperience and poor judgment. These accidents are often one-car accidents, with a carload of passengers, involving excessive speed, inattention, or recklessness.

Information provided by: Parent Party Patrol, POB 2322, Tacoma, WA 98401. (206) 572-7870

ALCOHOL AND THE LAW

The minimum age for drinking in California is 21. This means that the sale or transfer of alcoholic beverages to anyone under that age is prohibited. At unsupervised social gatherings a peace officer who lawfully enters the gathering can seize alcoholic beverages from anyone under 21.

The punishment for violating these laws varies. The offender may be found guilty of an infraction or a misdemeanor. Young people between the ages of 13 and 21 may have their driver's licenses suspended, revoked, or delayed up to one year for each offense. Young people may also be asked to pay fines or perform community service.

All minors must also abide by city and county ordinances that prohibit alcohol consumption in public places, driving under the influence of alcohol, and use of false identification to purchase alcohol.

TOBACCO, NICOTINE AND THE LAW

California law prohibits persons under the age of 21 from purchasing, receiving, or even possessing tobacco or related products or any paraphernalia designed to prepare or smoke/vape tobacco.

Any person or business that knowingly sells, gives, or furnishes tobacco and related products to people under age 21 is subject to criminal action.

ALL Siskiyou County school districts prohibit using any product containing tobacco or nicotine on/in school property and vehicles. A visitor who smokes/vapes on district property shall be informed of the district's tobacco-free schools policy and asked to refrain from smoking/vaping. If the person fails to comply with this request the Superintendent or designee may ask the person to leave the property, or may request assistance from local law enforcement in such removal. For repeated violations the Superintendent or designee may prohibit the individual from entering district property for a specified period of time.

DRUGS AND THE LAW

It is against the law to use or be "high on drugs." Young people are most often charged with "possession of a controlled substance." Possession of drugs can be treated as either a felony or a misdemeanor depending on the drug. California courts can suspend or delay a young person getting a driver's license, if that person has been found driving under the influence of drugs or convicted of a drug-related offense.

When young people are arrested with quantities of drugs they may be charged with "possession with intent to sell" drugs. This is a felony, even if the possession of the particular drug involved would not have been a felony.

Signs of Drug Use

Presence of drugs and drug paraphernalia:

- Possession of pipes, rolling papers, small decongestant bottles, needles, or small butane torches.
- Possession of drugs or evidence of drugs—peculiar plants, seeds, leaves, or butts in ash trays or clothing pockets.
- Odor of drugs or smell of incense or other "cover-up" scents.

Identification with drug culture:

- Drug-related magazines and drug-oriented slogans on clothing.
- Conversation and jokes about drugs.
- Resistance to discussing drugs with adults.

Signs of cognitive deterioration:

- Memory lapses, short attention span, & difficulty concentrating.

Poor physical coordination and slurred or incoherent speech.

- Deteriorating physical appearance.
- Disheveled dress, indifference to hygiene & grooming.

Overt physical signs of drug use:

- Bloodshot eyes and dilated pupils.

Dramatic changes in school performance:

- Distinct downward turn in grades.
- Assignments not completed.
- Increased absenteeism or tardiness.

Changes in behavior:

- Chronic dishonesty (lying, stealing, & cheating).
- Trouble with the police.
- Changes in friends, evasiveness about new friends.
- Possession of large amounts of money.
- Increasing hostility, irritability, and secretiveness.
- Reduced motivation, energy, self-discipline & self-esteem.
- Diminished interest in extracurricular activities.
- Association with known drug users.

Caution: Adolescent behavior is often unpredictable and ever changing. If you detect signs of substance use, follow up by being aware of how your child is acting and of any radical changes in behavior. Keep communication open and don't ignore signs of problems. Seek professional advice if you feel unsure. Pay attention to your intuition.

Liability of Parents

Premises Liability

You have a legal duty to maintain your property in a safe condition and to warn visitors about hazards that aren't obvious. You can be liable for accidents on your property, whether or not you were there when the accident happened. When you add children, alcohol, and horseplay together, the potential that someone can get injured greatly increases.

Negligent Supervision

A "negligent supervision" claim is possible when someone is injured due to activities arising out of an unchaperoned party involving one of your children, regardless of where the party occurred.

Furnished Alcohol to Minors

You have a legal duty to not make alcohol available to minors. This means you should never furnish alcohol to people under 21. It also means when you leave your property and know that people under 21 will be on the property, you should take reasonable steps to make sure there is no ready access to alcohol or other drugs.

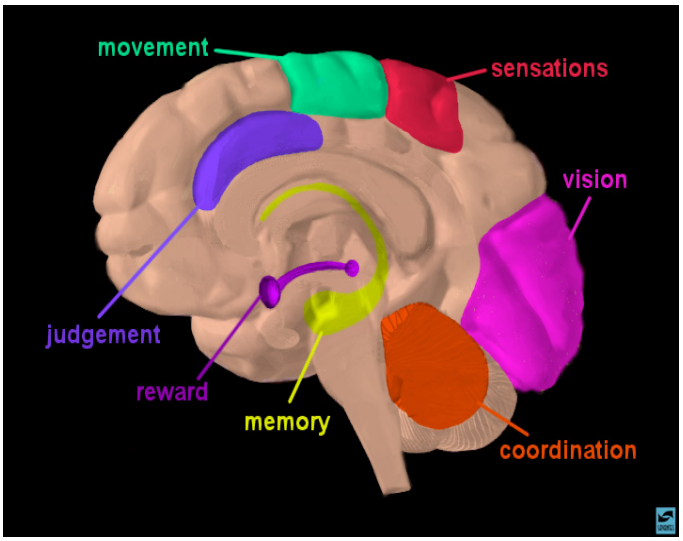
Parent's Liability

Parents can be held financially liable when their child's willful misconduct results in personal injury or destruction of property.

BRAIN HEALTH

Throughout your life, your brain's job is to help you make sense of the world and help oversee your daily operations. Brain health refers to the ability to remember, learn, play, concentrate and maintain a clear, active mind. It's being able to draw on the strengths of your brain. Simply, brain health is all about making the most of your brain and helping reduce some risks to it.

Drugs affect the brain by tapping into its communication system and interfering with the way neurons normally send, receive, and process information. Drugs, such as nicotine, marijuana and heroin, can activate neurons because their chemical structure



mimics that of a natural neurotransmitter. This similarity "fools" the receptors and allows the drugs to activate the neurons. When this happens it leads to abnormal messages being transmitted through the brain.

Other drugs, such as amphetamine or cocaine, can cause the neurons to release abnormally large amounts of natural neurotransmitters that make a person feel good/happy. This disruption produces a greatly amplified message, ultimately disrupting communication channels so that they cannot function normally.

Drugs that are abused target the brain's reward system by flooding the circuit with extra dopamine. Dopamine is a neurotransmitter present in regions of the brain that regulate emotion, motivation, essential functions and feelings of pleasure. When activated at normal levels, it rewards our natural behaviors and most basic needs such as eating and sleeping. However, overstimulating the system with drugs, produces euphoric effects, which strongly reinforce the behavior of drug use—teaching the user to repeat it, eventually creating disease in these systems in the brain.

Tolerance vs. Dependence vs. Addiction

- **Drug Tolerance** in the human body develops over time, and means that the person needs higher and/or more frequent doses of the drug to get the desired effects.
- **Drug dependence** occurs with repeated use, causing the neurons to adapt so they only function normally in the presence of the drug. The absence of the drug causes several physiological reactions, ranging from mild in the case of caffeine, to potentially life threatening, such as with heroin.
- **Drug addiction** is a chronic disease characterized by compulsive, or uncontrollable, drug seeking and use despite harmful consequences and long-lasting changes in the brain. The changes can result in harmful behaviors by those who misuse drugs, whether prescription or illicit drugs.

Compiled from information on https://brainhealth.nia.nih.gov/ and https://www.drugabuse.gov/

E-cigs, Vaping & Nicotine?

Nicotine is addictive.

Nicotine is the addictive substance found in tobacco. Most e-cigs/vapes contain nicotine. Nicotine is as addictive as heroin. Once hooked on nicotine, it is hard to stop! Nicotine found in Vapes/E-cigs can affect a person's heart rate, blood pressure, lead to heart disease, cause cancer, birth defects and other health problems.

Vapes/E-cigs don't look like cigarettes.

They can look like pens or flash drives and can pass unnoticed. Many have colorful, wild graphic patterns or plastic jewels decorating them. E-cigs come in all shapes and sizes.

Teens don't call them e-cigarettes/e-cigs.

Ask if they are using a vape or Juul! Many teens don't realize these can contain Nicotine. They all use a battery to heat up a liquid, also known as e-juice. The heated e-liquid creates an aerosol that is breathed in.

They are marketed to teens.

Vapes/E-cigs/E-juice come in fruit and candy flavors. Magazine/Social media ads for these products use sex and rebellion to catch teen eyes. Social media and YouTube are cluttered with ads and testimonials, often times paid, about e-cigarettes. 58% of 12-17 year-olds were exposed to e-cigarette ads on TV. 75% of these ads ran on networks that young people watch, like Comedy Central, ABC Family and MTV.

More and more teens are trying them.

E-cigs/Vapes are the most commonly used tobacco product in youth. 11.5% of high school students reported using e-cigarettes in the past 30 days, in 2016, compared to 1.5% in 2011.

Students are using them in school.

Students can easily use vapes at school, especially when they look like pens or flash drives. Teachers may not know what all of the products look like and smoke detectors won't catch the aerosol. In Siskiyou County, all schools have policies prohibiting the use of e-cigs/vapes by any student or adult.

They lead to cigarette use.

Teens who use e-cigarettes are 2-3 times more likely to smoke regular cigarettes.

E-juice is poisonous.

E-juice can be harmful if swallowed, or gets on skin or in eyes. From 2012 to 2014, calls to CA poison control regarding e-cig nicotine poisonings in kids five and under increased 2100%.

They can be modified for other drugs.

E-cigs/vapes can also be used to smoke THC, the active ingredient in marijuana and cannabis.

They aren't always treated like tobacco by law.

E-cigs/vapes are not subject to the same level of regulation as cigarettes. E-cigs are sometimes right next to the candy or slushie machine. They don't have to follow the same rules for cigarettes, such as not advertising on TV. Furthermore, lack of regulation means a teen may not know exactly what they are inhaling or the dose they are getting. The FDA does not monitor the additives/chemicals added by manufacturers.

Not necessarily safer than tobacco cigarettes.

The aerosol produced is not water vapor and contains a mixture of chemicals and particles that can hurt the lungs, the same as cigarette smoke. Many of these chemicals are known carcinogens. E-cigs are as addictive as regular cigarettes. As many as 90% of vapes labeled as "nicotine free", actually contain nicotine

Protect your family.

Never leave e-cigs/vapes where children can get them. Pregnant/breastfeeding women, teens and children should never use or be exposed to the aerosol from Vapes/E-cigs.

Compiled from information on www.cdph.ca.gov and www.stillblowingsmoke.org

Recreational & Medicinal Marijuana Laws

Prop 64, the Adult Use of Marijuana Act (AUMA) **allows adults 21 and over** to possess, privately use, give away up to one ounce of cannabis, and to cultivate no more than six plants for personal use at their residence.

Local city and county governments can restrict or ban cannabis businesses in their jurisdiction.

Prohibited Activities Under AUMA, Cannabis users 21 and over may NOT:

- Smoke, vaporize or ingest cannabis or cannabis products in any public place.
- Smoke or vaporize cannabis in any non-smoking area, or within 1,000 feet of a school, day care or youth center while children are present, except privately at a residence.
- Consume cannabis or possess an "open container" of cannabis while driving or riding as a passenger in any motor vehicle, boat, or airplane.
- It is also unlawful to use cannabis while in a car even if you are a passenger. This is also true for cannabis edibles.
- Possess or use cannabis on the grounds of a school, day care or youth center while children are present.
- Manufacture concentrated cannabis with a volatile solvent except for state-licensed manufacturers.

Other Restrictions

Prop 64 does not repeal, affect or preempt:

- The rights of employers to maintain a drug and alcohol-free workplace, or to have policies forbidding use of cannabis by employees
- The ability of landlords and other private parties from prohibiting or restricting use of cannabis on their privately owned property
- The ability of government agencies to prohibit or restrict use of cannabis within a building they own or occupy

Rights of Prop 215 Medical Users

California's medical cannabis laws gives patients and their designated primary caregivers the right to possess and cultivate cannabis for their personal medical needs given the recommendation of a California-licensed physician.

- **Minors under age 18 need permission from their parents or guardians to use medical cannabis.**
- Young adults age 18-20 are allowed to visit state-licensed medical dispensaries, but not adult-use ones.
- The parental rights of qualified Prop 215 patients are protected by AUMA in family and juvenile court proceedings.

Compiled from information on http://www.canorml.org,

Recreational Marijuana

Points to Remember

- Marijuana refers to the dried leaves, flowers, stems, & seeds from the Cannabis sativa or indica plant.
- The plant contains the mind-altering chemical THC and other related compounds.
- People use marijuana by smoking, eating, drinking, or inhaling it.
- Smoking and vaping THC-rich extracts from the marijuana plant, also known as dabbing, is on the rise.
- THC over-activates certain brain cell receptors, resulting in effects such as: altered senses, changes in mood, impaired body movement, difficulty with thinking, problem-solving, impaired memory and learning
- Marijuana use can have a wide range of health effects, including hallucinations paranoia, breathing problems, brain changes and possible harm to a fetus's brain in pregnant women
- The amount of THC in marijuana has increased in recent decades, creating more harmful effects in some people.
- Marijuana use can cause side effects, such as anxiety and paranoia and, in rare cases, extreme psychotic reactions.
- Marijuana use can lead to a substance use disorder, which can develop into an addiction in some cases.
- No medications are currently available to treat marijuana use disorder, but behavioral support can be effective.

Medical Marijuana

Points to Remember

- Medical marijuana refers to treating symptoms of illness with the whole, unprocessed marijuana plant or its basic extracts.
- The FDA has not recognized or approved the marijuana plant as medicine. However, scientific study of the chemicals in marijuana called cannabinoids has led to FDA-approved medications in pill form used to treat nausea, boost appetite and seizures.
- Scientists are conducting preclinical and clinical trials with marijuana and its extracts to treat symptoms of illness and other conditions, testing if there are other medical uses of the plant.

Can Medical Marijuana Legalization Decrease Prescription Opioid Problems?

- Some studies have suggested that medical marijuana legalization might be associated with decreased prescription opioid use and overdose deaths, but researchers don't have enough evidence yet to confirm this finding.
- A detailed National Institute of Drug Abuse (NIDA) funded analysis showed that legally protected medical marijuana dispensaries, not just medical marijuana laws, were also associated with a decrease in the following: opioid prescribing, self-reports of opioid misuse, treatment admissions for opioid addiction.
- NIDA is funding additional studies to determine the link between medical marijuana use and the use or misuse of opioids for specific types of pain, and also its possible role for treatment of opioid use disorder.

https://www.drugabuse.gov and https://leginfo.legislature.ca.gov.

OPIOIDS are drugs that act on the nervous system to relieve pain. Use and abuse can lead to addiction and withdrawal symptoms. Opioids come in tablets, capsules or liquid and were originally derived from opium. Now, many of them are synthetic medications that were developed by pharmaceutical companies to produce the same affects.

Well-known brand names commonly prescribed for pain are: ***Methadone, Percocet, Percodan, Vicodin, Dilaudid, Demerol, Oxycontin, Fentanyl, Sublimaze, Codeine and Morphine.***

Heroin is also an opioid and is derived from the opium poppy plant and is currently not legally prescribed for any condition.

OPIOID CRISIS IN THE U.S.

- Opioid prescriptions have quadrupled in the U.S. since 1999
- 91 Americans die every day from opioid overdoses

For every one person who dies from an overdose:

- 10 people are admitted for treatment
- 32 people are taken to emergency rooms for abuse or misuse of opioids
- 130 people are abusing opioids or dependent on them
- 832 people are using opioids recreationally for non-medical purposes

Siskiyou county has the 7th highest death rate from opioids in the state.

WHAT IS BEING DONE IN SISKIYOU COUNTY?

Siskiyou Against RX Abuse - SARA is a coalition of dedicated health care professionals, educators and law enforcement agencies and has a goal of reducing opioid related deaths in Siskiyou County. SARA accomplishes this by:

- Supporting Safe Prescribing Practices
- Expanding access to Medication Assisted Addiction Treatment
- Increase access and distribution of Naloxone/NARCAN, the opioid overdose reversal medication

SARA has accomplished, so far:

- has supported the increase from one to 9 prescribers who are certified to prescribe Suboxone, a drug used to treat opioid use disorder
- assisted with three countywide Drug Take Back Days
- provided naloxone to law enforcement so now all patrol cars carry this life saving drug
- have begun conducting opioid awareness events for the community where participants learn about addiction as a chronic disease and not a moral failing, and learn how to administer Narcan

Naloxone (NARCAN) in Schools

California state law says any California school may have a Naloxone program.

Naloxone is mostly given as a nasal spray. This medication can be administered to a person who is experiencing an opioid overdose. Death from an overdose occurs because the person stops breathing. Naloxone works by blocking the effects of opioids and reverses an overdose. Naloxone is very safe. If given to a person who has not taken opioids, it will not have any effect on them.

The best solution to this national epidemic is education and prevention. Currently, there are very few services for children who are already addicted in our communities. Having the Naloxone available in schools is a step that may make a big difference in saving a life.

Compiled from information on https://www.drugabuse.gov and

Points to Remember

- The science of opioids for chronic pain is clear: for the vast majority of patients, the known, serious and too-often fatal risks far outweigh the unproven and transient benefit.
- People misuse prescription opioids by taking the medicine in a way other than prescribed, taking someone else's prescription, or taking the medicine to get high. When misusing a prescription opioid, a person may swallow, inject, or snort the drug.
- Opioids bind to and activate opioid receptors on cells located in the brain, spinal cord, and other organs in the body, especially those involved in feelings of pain and pleasure.
- People who use prescription opioids can feel relaxed and happy, but also experience drowsiness, confusion, nausea, constipation, and slowed breathing.
- Prescription opioids have effects similar to heroin. In some places, heroin is cheaper and easier to get than prescription opioids, so some people switch to using heroin instead.
- Mixing opioids with alcohol or benzodiazepines (Valium, Ativan, etc.), greatly increases the risk of overdose and death.
- A person can overdose on prescription opioids, heroin and fentanyl. Naloxone is a medicine that can treat an opioid overdose when given right away.
- Prescription opioid use, even when used as prescribed by a doctor can lead to a substance use disorder, which takes the form of addiction in severe cases. Withdrawal symptoms include muscle and bone pain, sleep problems, diarrhea and vomiting, and severe cravings.
- A range of treatments including medicines and behavioral therapies are effective in helping people with an opioid use disorder.
- Fentanyl is a powerful synthetic opioid but is 50 to 100 times more potent than heroin.
- The risk of overdose increases, especially if a person who uses drugs is unaware that a powder or pill contains fentanyl.

NARCAN® (naloxone HCl) NASAL SPRAY

QUICK START GUIDE

Opioid Overdose Response Instructions

Use NARCAN Nasal Spray (naloxone hydrochloride) for known or suspected opioid overdose in adults and children.
Important: For use in the nose only.
Do not remove or test the NARCAN Nasal Spray until ready to use.

1 Identify Opioid Overdose and Check for Response

Ask person if he or she is okay and shout name.

Shake shoulders and firmly rub the middle of their chest.

Check for signs of opioid overdose:
- Will not wake up or respond to your voice or touch
- Breathing is very slow, irregular, or has stopped
- Center part of their eye is very small, sometimes called "pinpoint pupils"

Lay the person on their back to receive a dose of NARCAN Nasal Spray.

2 Give NARCAN Nasal Spray

Remove NARCAN Nasal Spray from the box.
Peel back the tab with the circle to open the NARCAN Nasal Spray.

Hold the NARCAN nasal spray with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.

Gently insert the tip of the nozzle into either nostril.
- Tilt the person's head back and provide support under the neck with your hand. Gently insert the tip of the nozzle into **one nostril**, until your fingers on either side of the nozzle are against the bottom of the person's nose.

Press the plunger firmly to give the dose of NARCAN Nasal Spray.
- Remove the NARCAN Nasal Spray from the nostril after giving the dose.

3 Call for emergency medical help, Evaluate, and Support

Get emergency medical help right away.

Move the person on their side (recovery position) after giving NARCAN Nasal Spray.

Watch the person closely.

If the person does not respond by waking up, to voice or touch, or breathing normally another dose may be given. NARCAN Nasal Spray may be dosed every 2 to 3 minutes, if available.

Repeat Step 2 using a new NARCAN Nasal Spray to give another dose in the other nostril. If additional NARCAN Nasal Sprays are available, repeat step 2 every 2 to 3 minutes until the person responds or emergency medical help is received.

ADAPT PHARMA

For more information about NARCAN Nasal Spray, go to www.narcannasalspray.com, or call 1-844-4NARCAN (1-844-462-7226).

©2015 ADAPT Pharma, Inc. NARCAN® is a registered trademark licensed to ADAPT Pharma Operations Limited. A1009.01

Sugar, Caffeine *and Alcohol?*

Energy drinks are beverages which contain large doses of caffeine and other legal stimulants like guarana and ginseng. If a drink advertises no caffeine, the energy comes from guarana, which is the equivalent of caffeine. Some drinks advertise "no crash," but this claim is referring to no "sugar crash" because the drink has artificial sweeteners. Any vitamins or amino acids like taurine are better found by eating a variety of foods and taking a daily vitamin and mineral supplement.

Short-term dangers to drinking energy drinks?

The stimulating properties of energy drinks can boost heart rate and blood pressure, dehydrate the body, and, like other stimulants, prevent sleep. Energy drinks should not be used while exercising as the combination of fluid loss from sweating and the diuretic quality of the caffeine can leave someone severely dehydrated.

What to do?

- *Be aware of what your teen is drinking!*
- *Limit the amount of caffeine and sugar your teen consumes. Caffeine is addicting!*
- *Talk to your teen about energy drinks mixed with alcohol being a potent combination. Know that there are no warning statements on energy drinks.*
- *It is important to read labels for information on ingredients, servings per container, and amount of ingredients per serving, especially since the size of drinks are on the increase.*
- *Be ready to call poison control/emergency room since teens are getting sick from drinking several cans in a row to get a buzz.*

Energy drinks are not "natural alternatives". Claims like "improved performance and concentration" can be misleading. They are marketed as dietary supplements, and the FDA does not approve or review the products before they are sold. Cans may say that 1 can is 2 servings, so calculate how much caffeine is being consumed.

Combining energy drinks with alcohol?

This combo carries a number of potential dangers.

- Since energy drinks are stimulants and alcohol is a depressant, the combination of effects may be dangerous. The stimulant effects can mask how intoxicated a person is and prevent them from realizing how much alcohol they have consumed. Fatigue is one of the ways the body normally tells someone that they've had enough to drink.
- The stimulant effect can give the person the impression they aren't impaired. No matter how alert you feel, your blood alcohol concentration (BAC) is the same as it would be without the energy drink. People will overestimate their ability to perform complex tasks like driving or crossing a busy road. Once the stimulant effect wears off, the depressant effects of the alcohol will remain and could cause vomiting during sleep or respiratory depression.
- Research shows that people drink more and have higher BACs when they combine alcohol and caffeine/energy drinks.
- Both energy drinks and alcohol are dehydrating. Dehydration can hinder your body's ability to metabolize alcohol and will increase toxicity, and therefore, the hangover the next day.

Keep in mind what is in these drinks. For example some 23.5-ounce cans of energy drinks:

- are 10-12% alcohol, which is the equivalent of 4-6 beers.
- contain 54-135 milligrams of caffeine. A 12-ounce Coke has 35 milligrams.
- contains guarana, sometimes it can be unclear how much is in the drink.

Compiled from information found on www.brown.edu

Body Image—What is it?

Body image is our personal view and interpretation of our body, including mental, emotional, historical, and physical components.

Signs of Distorted Body Image

- Weighing oneself daily or multiple times each day.
- Spending a lot of time in front of the mirror, obsessing about specific body parts.
- Hiding one's body with oversized clothing.
- Feeling ashamed or self-conscious about one's body, and even refraining from fun activities.
- Obsessing about food, weight, and level of fitness in private and in public.

Eating Disorders

Children can develop eating disorders. Eating disorders can be fatal, and they cause physical and psychological damage at a time when teenagers need extra support for healthy growth.

Anorexia, Bulimia and Binge Eating Disorder are extremely complex. They are often characterized by one or more of a combination of specific behaviors, including: restrictive food intake, weight loss or gain, excessive exercise, bingeing, binge/purge cycles, loss of menstruation, thinning hair, obsessive behaviors, as well as inaccurate thinking about food and weight.

Adapted from A Guide to the Primary Prevention of Eating Disorders pamphlet. Michael P. Leveine, PH. D & Margo D. Maine Ph.D and How to Help with Eating and Body Image, published by The National Eating Disorders Association, (800) 931-2237 or www.nationaleatingdisorders.org; and the Dairy Council of California

Help your child avoid eating disorders!

Avoid overemphasizing beauty and body shape. Do not promote the belief that thinness and weight loss are "good," while having body fat and/or weight gain are "bad."

Do not convey an attitude that says, "I will like you better if you lose weight or fit into slimmer clothes."

Discuss with your children the genetic basis of differences in body types. Make the connection between respect for diversity in weight and shape with respect for diversity in race and gender.

Help children appreciate the ways that TV, magazines, and other media distort the true diversity of human body types.

Talk with children, particularly those over the age of nine, about the dangers of dieting. Dieting is not harmless, nor is it a necessary part of a healthy life.

Accept children no matter what they weigh. Help them to understand the importance of the person, not the appearance.

Teach children to think critically and communicate assertively. This helps them to resist unrealistic messages from media, peers, and other adults.

- **Encourage children to be active and to enjoy what their bodies can do.**
- **Avoid rewarding or punishing children with food.**

Set a healthy example by:

- Eating a well-balanced diet featuring a wide variety of foods.
- Exercising moderately for the pleasure and health that exercise creates.
- Accepting our own shape and weight, including our right to engage in and enjoy a variety of activities such as swimming and dancing, regardless of our looks.
- Enjoying the creative aspects of fashion while rejecting the limiting and constricting aspects.

Exercise & Nutrition

Everyone can make a difference in young people's lives by helping them include moderate physical activity and good nutrition in their daily routines. Parents, especially, can set a good example and help their children develop healthful habits that last a lifetime. Here are some ideas for promoting physical activity and healthy eating:

- ✓ Eat together as a family, modeling good eating habits.
- ✓ Plan meal and snack times rather than allowing children to self-select their meals.
- ✓ Discourage grazing through the kitchen.
- ✓ Allow children to control their own appetites by deciding when they are full.
- ✓ Avoid the "fast food trap" and take the time to serve nutritional foods at home.
- ✓ Serve plenty of fresh fruits and vegetables.
- ✓ Reduce serving sizes—we have become a nation of super-sizing.
- ✓ Restrict intake of sugary foods, especially soft drinks and sugary fruit juices.
- ✓ Encourage drinking lots of water.
- ✓ Replace processed foods with unrefined whole foods, organic choices when possible.
- ✓ Find ways for family members to exercise; bicycle, walk, play catch and participate in sports.
- ✓ Turn off the television.
- ✓ Discourage having a television in a child's bedroom.
- ✓ Be aware of how foods are marketed to children i.e. use of cartoon characters.
- ✓ Advocate for convenient, safe, and adequate places for young people to play and be physically active.
- ✓ Don't use food to punish or reward your child.

Children need at least 60 minutes of fun, active play in addition to organized play at school as well as sports daily!

Talking to your Teen about Sex

Sexual Health Education (SHE)

SHE is required in California schools, as per Education Code 51930-39, but don't count on classroom instruction alone. SHE needs to happen at home, too. Here's some help to talk to your teen about comprehensive sexual health.

Sexual Health Education basics is covered in health class, but your teen might not hear — or understand — everything they need to know to make healthy choices about sex. That's where you come in. Awkward as it may be, sexual health education is a parent's responsibility. By reinforcing and supplementing what your teen learns in school, you can set the stage for a lifetime of healthy sexuality.

Breaking the Ice

It's often hard to avoid this ever-present topic. But when parents and teens need to talk, it's not always so easy. If you wait for the perfect moment, you might miss the best opportunities. Instead, think of Sexual Health Education as an ongoing conversation. Here are some ideas to help you get started — and keep the discussion going.

Seize the Moment

When a TV program or music video raises issues about responsible sexual behavior, use it as a springboard for discussion. Remember that everyday moments — such as riding in the car or putting away groceries — sometimes offer the best opportunities to talk.

Be Honest

If you're uncomfortable, say so — but explain that it's important to keep talking. If you don't know how to answer your teen's questions, offer to find the answers or look them up together.

Be Direct

Clearly state your feelings about specific issues, present potential risks objectively. Explain that choices come with consequences.

Consider your teen's point of view. Don't lecture your teen or rely on scare tactics to discourage sexual activity. Instead, listen carefully. Understand your teen's pressures, challenges and concerns.

Move beyond the facts. Your teen needs accurate information about sex — but it's just as important to talk about feelings, attitudes and values. Examine questions of ethics and responsibility in the context of your personal or spiritual/religious beliefs.

Invite more discussion. Let your teen know that it's OK to talk with you about sex whenever they have questions or concerns. Reward questions by saying, "I'm glad you came to me."

Responding to Behavior

If your teen becomes sexually active — whether you think they are ready or not — it may be more important than ever to keep the conversation going. State your feelings openly and honestly. Remind your teen that you expect them to take sex and the associated responsibilities seriously.

Stress the importance of safer sex, and make sure your teen understands how to get and use contraception. You might talk about keeping a sexual relationship exclusive, not only as a matter of trust and respect, but also to reduce the risk of sexually transmitted infections. Also, set and enforce reasonable boundaries, such as curfews and rules about visits with friends.

Your teen's doctor can help, too. A routine checkup can give your teen the opportunity to address sexual activity and other behaviors in a supportive, confidential atmosphere — as well as learn about contraception and safer sex. The doctor may also stress the importance of regular checkups and keeping vaccinations up to date. For example the human papilloma virus (HPV) vaccination helps prevent genital warts as well as cancers of the cervix, anus, mouth, throat, and penis.

Looking Ahead

With your support, your teen can emerge into a sexually responsible adult. Be honest and speak from the heart. If your teen doesn't seem interested in what you have to say about sex, say it anyway. Your teen is probably listening.

Compiled from information found on www.mayoclinic.org

Sexuality? Sex? Gender? Gender Identity?

Sexuality involves many aspects of being human. The four major components of sexuality are:

- sensuality
- intimacy and relationships
- gender/sexual identity
- sexual health

Each of these components can have healthy or unhealthy aspects that are influenced by an individual's values, culture, experience, and spirituality.

Sexuality begins before birth and is a lifelong learning process until we die. Sexuality involves and is shaped by many things, including: values and beliefs, attitudes, experiences, physical attributes, sexual characteristics, and societal expectations.

Sexuality is...

- the total of who you are, what you believe, what you feel, and how you respond.
- the way in which you have been acculturated, socialized, and sexualized.
- the sum of all your relationships and intimate encounters
- expressed in the way you speak, smile, stand, sit, dress, dance, laugh, cry, and...

Sexuality is all this, including the way religion, morals, friends, age, body concepts, life goals and self-esteem shape your sexual self.

Understanding sexuality, and not just sex, fosters and encourages the development of good relationships throughout our lives.

Sex is a label that's usually first given by a doctor based upon the genes, hormones, and body parts you're born with. Some people's sex doesn't fit into male or female and are called intersex.

- **Intersex** people are born with a mix of male and female biological traits, which can make it hard for doctors to assign them a male or female sex. Being intersex is often caused by one of many genetic or hormonal conditions, but it isn't a medical problem. It's also more common than most people realize. Many people don't find out they're intersex until they go through puberty, or even later.

Gender is how society thinks we should look, think, and act as girls and women and boys and men. Each culture has beliefs and informal rules about how people should act based on their gender.

Gender Identity is how you feel inside and how you show your gender through clothing, behavior, and personal appearance. It's a feeling that begins early in life.

- **Cisgender/Cis** are people who are assigned female/male at birth and feel like their assigned gender.
- **Transgender/Trans** people have a gender identity that doesn't match the sex they were given at birth.
- **Genderqueer** includes people who don't identify with strict male/female gender roles.

If you or your child has been struggling with questions around sexuality, gender, gender identity and expectations, it may help you or your child to talk to a counselor.

Compiled from information from https://www.plannedparenthood.org and https://www.thetrevorproject.org/

Teen Dating Violence & Healthy Relationships

Dating violence can be ...

- **Physical**—When a partner is pinched, hit, shoved, slapped, punched, or kicked.
- **Psychological/Emotional**—When a partner is subjected to name calling, shaming, bullying, embarrassed on purpose, or kept away from friends and family.
- **Sexual**—Forcing a partner to engage in a sex act when they do not or cannot consent, and/or nonphysical, like threatening to spread rumors if a partner refuses to have sex.
- **Stalking**—A partner is harassed or threatened with tactics that are unwanted and cause fear.

DATING VIOLENCE CAN TAKE PLACE IN PERSON OR ELECTRONICALLY, SUCH AS REPEATED TEXTING OR POSTING SEXUAL PICTURES OF A PARTNER ONLINE.

Unhealthy relationships can start early and last a lifetime and have a negative effect on health throughout life. Youth who are victims are more likely to experience symptoms of depression and anxiety, engage in unhealthy behaviors like using tobacco, drugs, and alcohol, or exhibit antisocial behaviors and think about suicide.

Factors that increase risk for harming a dating partner include:

- Belief that dating violence is acceptable
- Depression, anxiety, & other trauma symptoms
- Aggression towards peers and other aggressive behavior
- Substance use
- Early sexual activity and having multiple sexual partners
- Having a friend involved in dating violence
- Conflict with partner

How can we prevent dating violence?

During the preteen and teen years, young people are learning skills they need to form positive relationships with others. This is an ideal time to promote healthy relationships and prevent patterns of dating violence that can last into adulthood.

Part of promoting Healthy Relationships is talking about consent, **YES MEANS YES**, which requires that an affirmative, unambiguous, and conscious decision by each participant to engage in a mutually agreed-upon sexual activity. Getting consent is the responsibility of the person who wants to engage in initiating the sexual activity to ensure that they have the consent of the other person to engage in the sexual activity. Substance use voids any consent given while sober. Consent has to be ongoing throughout any encounter.

Bottomline, if a partner ...

- Constantly checks in on you
- Lies to you
- Won't let you talk to other people
- Threatens to hurt themselves
- Loses their temper quickly
- Embarrasses you in public
- Forces you to have sex
- Keeps you away from your friends
- Looks at your phone
- Does anything that scares you

... GET HELP!

Healthy Relationships

Online Resources

The websites listed are a few of the many resources available to families. The Siskiyou County Office of Education is not responsible for the content of these sites and does not necessarily endorse them. We recommend that parents review these websites before using them with their children. Educators should consult Education Code before using these resources with students.

Alcohol & Other Drugs

https://drugfree.org
https://www.drugabuse.gov
https://www.niaaa.nih.gov
https://www.projectknow.com

Bullying

https://bullying.org
https://futurewave.org/BullyProof/
https://www.stopbullying.gov
http://www.safekids.com

Communication

https://www.childrennow.org
https://www.familyfirst.net

Domestic Violence

https://www.thehotline.org
https://www.loveisrespect.org
https://www.nsvrc.org

Exercise & Nutrition

https://www.cdc.gov/youthcampaign/
http://www.andreasvoice.org
https://www.nutrition.gov
https://www.healthychildren.org

Human/Labor/Sex Trafficking

http://sharedhope.org
http://traffickingresourcecenter.org
http://abolishchildtrafficking.org

Mental Health

https://www.helpguide.org
http://teenmentalhealth.org

Sexuality

https://advocatesforyouth.org
https://kidshealth.org
https://powertodecide.org
https://www.teensource.org
http://www.iwannaknow.org
http://sexetc.org
https://www.hiv.gov

Suicide, Grief & Loss

http://www.suicide.org
https://save.org
https://www.thehealingplaceinfo.org
https://helpguide.org/home-pages/suicide-prevention.htm
http://www.griefnet.org
https://www.thetrevorproject.org

Tobacco

https://truthinitiative.org
https://www.thetruth.com
https://www.tobaccofreekids.org
http://med.stanford.edu/tobaccopreventiontoolkit.html

For more copies of Helping Youth Succeed, please contact the Siskiyou County Office of Education - 609 South Gold Street, Yreka, CA 96097
www.siskiyoucoe.net - 530-842-8400