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Parents Matter Coalition
will not be meeting in July.
Thanks—Have a Happy
Vacation.

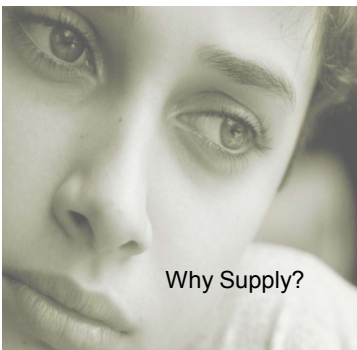
The next meeting will be
August 8 at Noon,
5th Floor Conference Rm.
St. Mary's Health Center
Pierre, SD 57501
Lunch will be provided.

Everyone is welcome.
Please call for a reserva-
tion: Ruby or Elaine 224-
3189 (necessary for food
preparation).

Parents Matter FACEBOOK:

www.facebook.com/

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Why Supply?



Parents Matter News Letter XX

July 2012

Adults Can Curb Underage Drinking This Summer and Year Round
The easy changes adults can make to promote child safety

With summer in and school out, unsupervised children and adolescents may be in danger of accessing dangerous materials in their homes. This is especially true of alcohol. According to the American Medical Association, two-thirds of teens ages 13-18 gain access to alcohol from their homes without consent from an adult. This summer and all year, adults should monitor and secure alcohol at home in order to help prevent underage drinking.

The North Carolina Preventing Underage Drinking Initiative (NC PUD) has created the ***Talk It Up. Lock It Up!*** Campaign to address the issue of unknowingly providing alcohol to a person who is underage.

“Aside from the legal issues for the adult, this is an issue of child safety,” said Michael Eisen, state administrator of the NC PUD Initiative at the NC division of mental health,

Developmental disabilities and substance abuse services.

“We wouldn’t leave dangerous chemicals around children in our homes. Why would we leave alcohol accessible to youth?”

Talk It Up. Lock It Up! Was developed to make sure that adults have the facts and know how important it is to keep alcohol away from underage people in their homes. The campaign also provides tips on ways to secure alcohol the home.

Currently, alcohol is the second leading preventable cause of cancer. It is also the leading cause of preventable death for youth, killing some 5000 nationally each year. Youth ages 15 and younger who drink alcohol are 4 times more likely to become dependent on alcohol and 5 times

More likely to abuse alcohol later in life than those who wait until they are 21 or older. In North Carolina, the cost of underage drinking is \$1.4 billion.

“Adults really bear the responsibility for the two-thirds of youth that access alcohol in their own homes. That access is 100% preventable with small actions that can be taken by the adult in charge of making the home safe,” said Flo Stein, chief of the community policy management section at the NC division of mental health, developmental disabilities and substance abuse services. Many communities in North Carolina have groups of people working on ways to prevent underage drinking.



Social Norms and Social Policy

“Alcohol is an integral part of American life. It is a normal accompaniment to most social events. Most Americans enjoy drinking on a regular basis.” These are widely held perceptions about alcohol—created in part by alcohol advertising and popular culture. But these perceptions are not entirely true. These perceptions—and misperceptions—affect our attitudes toward alcohol and our policies regarding the sale to and consumption of alcohol by youth as well as adults. The truth is, most Americans either abstain from alcohol or drink very infrequently—less than once a week. Public policies and social norms, however, do not reflect this fact and make alcohol readily accessible at low prices. Alcohol sales are dominated by a relatively small minority of the population who drink heavily. Policies and norms that promote alcohol availability support and encourage these problematic drinking behaviors. Most Americans consume very little alcohol, so it is not surprising that large majorities of the population support stricter alcohol policies designed to reduce drinking problems, especially among young people. These policy reforms have been shown to be effective in reducing alcohol consumption problems.

Negative Health Impacts of Caffeine and Energy Drinks

Although there is debate regarding the benefits of energy drink and caffeine consumption, there is consensus among health researchers that caffeine consumption can have adverse health consequences, particularly at high doses. Among the most common negative effects are increased anxiety, panic attacks, increased blood pressure, increased gastric acid, bowel irritability, and insomnia. According to an article published by the American Society of Addiction Medicine, caffeine is considered an addictive drug under standard drug under standard drug diagnosis criteria, and doses of 500 mg or more (four to eight servings of most energy drink brands) can result in caffeine intoxication. Dependent users report an inability to quit or to cut down their consumption, despite having medical or psychological problems made worse by caffeine, and they report continued use of caffeine to avoid experiencing caffeine withdrawal symptoms. Contrary to popular belief and industry marketing claims caffeine does not enhance sports performance and can have a negative impact at high doses because of its diuretic effect.

With the rising popularity of energy drinks and with more young people ingesting high levels of caffeine, more serious health problems are now being reported in the nation's poison centers. One three-year study by a Chicago poison center found more than 250 cases of caffeine overdose, with 12 percent of those requiring hospitalization. Nearly two-thirds of the hospitalizations involved the intensive care unit. Symptoms included insomnia, palpitations, tremors, sweating, nausea, vomiting, diarrhea, chest pains, and neurological

symptoms. The average age of patients was 21.

Another poison center study focused on Redline, a high potency nonalcoholic energy drink containing 250 mg of caffeine per serving. Nine cases requiring hospitalization related to this specific drink were reported in the California Poison Control System Database in a two-year period, with severe symptoms involved.

Recently, a nonalcoholic energy drink called Spike Shooter, containing 300 mg of caffeine per serving, caused an uproar in Colorado Springs. In just one week, 18 high school students there reported becoming sick after drinking this product. The principal of the high school became so alarmed that she banned the drink on campus and convinced the nearby convenience store to stop selling it.

The product's label warns that those under 18 and anyone with health concerns should not use it. According to the news account: *Despite the warning, 14-year-old Rachel Woodrow, a diabetic, drank one can and started shaking. Two days later, she was hospitalized for a seizure.*

Rachel's parents say doctors told them the drink increased her metabolism and may have triggered the seizure. Rachel admits she didn't read the label. Rachel says, "I thought it would make me feel hyper and everything, but I didn't think I would have a seizure." Another student wanted to "get a little hyper by drinking "s pike shooter". Instead, Chris Weir says, "My stomach started to cramp up. I had a headache and I started vomiting".

Systematic studies assessing the impact of caffeine overdose do not yet exist, although anecdotal reports from other countries suggest potentially

serious consequences. In 2000, an 18-year-old Irish student dies after sharing four cans of Red Bull with friends then playing basketball. In 2001, Swedish officials investigated the deaths of three young people who had been drinking Red Bull; two of them had mixed the product with alcohol. Ultimately, no clear connections in the deaths were made and the Swedish government simply recommended that energy drinks not be used to quench thirst or be combined with alcohol. Other countries have followed Sweden's lead and put restrictions on the availability of energy drinks. Norway has limited sales to drug stores, and France and Denmark have banned the drinks altogether.

In summary, although research is limited, we can conclude that people who consume caffeine experience similar (although less severe) effects on the body—addiction, withdrawal, and tolerance—as do consumers of other psychoactive drugs. Potentially serious health consequences occur when the drugs are consumed in high doses, and these occurrences are being reported more frequently by health providers as high-potency energy drinks become more available in the market. Yet, despite these health concerns, the primary focus of most research literature on caffeine and energy drinks is on whether the beverages enhance performance, with recent research questioning the industry's marketing claims. Largely ignored are the health implications of sustained consumption of high levels of caffeine, particularly among youth, and the impact of combining energy drinks with alcohol.

Article from the "Marin Institute" alcohol industry watchdog.

Alcohol, Energy Drinks, and Youth: A Dangerous Mix



Don't let the innocent looks deceive you!! These are not drinks that should be consumed by youth or anyone else!

Alcopops: Frequently Asked Questions

<http://www.marininstitute.org/> (this site has been changed to Alcohol Justice)

What are alcopops?

Prevention advocates use the term “alcopops” for sweetened alcoholic beverages that are usually sold in single serving bottles or cans. They are often bubbly and/or fruit-flavored and resemble soda or other soft drinks. Alcopops contain about the same amount of alcohol as beer (roughly 5%, sometimes higher). However, up to half the alcohol in alcopops is derived from distilled spirits. Alcopops are also known in the industry as “flavored malt beverages, (FMBs)” “malternatives” and “flavored alcoholic beverages.”

How are alcopops made?

While the industry keeps most manufacturing information secret, from what little we do know, alcopops apparently start out as beer. Then manufacturers remove the color, taste and much of the alcohol from the beer, leaving mostly water. They then add flavorings, sweeteners and distilled alcohol for the finished product.

When did alcopops first come on the scene?

Alcopops have been around since the mid-1990s. Zima, introduced by Coors in 1994, was one of the first products. Even then, popular culture references made fun of Zima’s appeal among young girls. Skits on Saturday Night Live featured a married man attempting to seduce a babysitter with Zima and a teenage girl hosting a party and offering Zima to her friends. Wine-based coolers, like Gallo’s Bartles & Jaymes switched to a beer base in the 1990’s and are now known as “flavored malt coolers”.

What companies make alcopops?

Manufacturers include Anheuser-Busch, the world’s largest brewer and Diageo, the largest multinational beer, wine and spirits company in the world. The top selling alcopops brands include Mike’s Hard Lemonade (Mark Anthony Group), Smirnoff Ice (Diageo), Skyy Blue (Skyy Vodka and SAB Miller), Bacardi Silver and Bacardi Breezer (both Anheuser-Busch).

Who is drinking alcopops?

Underage girls drink alcopops more than any other type of alcoholic beverage. While industry says the drinks are intended for adults, women 21 and older rank alcopops as their least consumed alcoholic beverage. About one-third of teenage girls, ages 12 to 18 and one-fifth of teenage boys have tried alcopops. Young people call alcopops “cheerleader beer” and “chick beer”.

Why are alcopops of such great concern?

Alcopops fuel the epidemic of underage drinking. Because they don’t taste, smell or look like alcohol, alcopops serve as a transition or bridge from soft drinks to alcohol, especially for young girls. The packaging and promotion of alcopops has led to a misperception these products are “lighter” than similar products. Young people report drinking alcopops because they are easier to conceal and “go down easy.”

When 4 + 1 Doesn’t Add Up

By Becki Potzeba

State Farm Insurance Agent

Early on , we learn 4+1=5. But, teens, when does it not add up? When risky driving is involved.

In the National Young Driver Survey conducted by State Farm and the Children’s Hospital of Philadelphia, 5,665 students shared their views of teen driving. Evidence from this survey shows four risk factors cause 84% of teen crashes.

Inexperience-About 2/3 of fatal teen crashes involve driver error-making mistakes due to inexperience and distractions. Give your friends time and space to learn to drive before pressuring them for rides, and never encourage risky driving.

Distractions-A teen drivers fatal crash risk increases by 3 to 5 times if there are 2 or more passengers in the car. A driver who talks on a mobile phone is four times more likely to be involved in a serious crash, regardless of whether the driver uses a hands-free cell phone. Be aware of the changing road environment by keeping your eyes and mind on the road.

Speed-The faster you drive, the longer it takes you to stop. Speed is involved in approximately 38% of fatal crashes involving male drivers ages 15-20. Speed limits on the road were set for perfect driving conditions.

Fatigue-The effects of driving while tired are similar to the effects of drinking and driving. 3/4 of teens report having seen other teens driving noticeably tired. Drivers younger than 25 years cause the majority of drowsy driving-related crashes. Rest up when you are tired from studying or

extra curricular activities.

These four factors often cause crashes. One other factor can lead to a crash, even fatal injury.

Lack of Seat Belt Use –Teens who do not wear seat belts in all seating positions are more likely to wind up in the crash statistics. Wear a seat belt every time you ride in a car.

Learn more about teen driver safety at: www.statefarm.com/teendriving .

Driving can add up to success when you are safe behind the wheel. Talk with an insurance professional about safety programs that can help you become a safer driver, and help save some money , too.

For more information on Teen Drivers Discounts & Driver Education, please visit: www.beckipotzeba.com or call: (605) 224-4173 or 877-224-4173

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