

Health & Science



What Kids Say Parents Can Do About Drugs

Amid the bad news of steadily rising drug use among kids, there also is good news. At least half of today's youngsters say they are not taking drugs.

The March 1996 issue of Reader's Digest magazine suggests winning strategies for parents to "drug-proof" their children - based on tips from kids who have successfully avoided drugs.

Make sure your kids know what drugs can do to them. According to the University of Michigan Institute for Social Research's 1995 survey on drug use, the most common reasons high school seniors give for not trying marijuana, cocaine and crack are fear of physical and psychological harm, and fear of becoming addicted.

Research shows that marijuana impairs short-term memory, judgment and problem-solving ability, and distorts perception, balance and coordination. Regular use of marijuana may lead to chronic bronchitis, contribute to lung cancer and damage the reproductive system.

Many young people think inhalants like paint thinner and butane are not dangerous. But continuous and deep inhaling can cause irreversible brain damage, and can bring on disorientation, unconsciousness and death - even when used just once.

Talk to your children about drugs.

A recent survey by Pride, the National Parents' Resource Institute for Drug Education, found that for every type of drug and for every age group, drug use was higher among students who reported little or no parental discussion. The more parents spoke with their offspring about the dangers of drugs, the less frequently the children used them.

It's important to start talking to kids early. One inhalant user seen in the emergency room was only 6 years old. Keeping the dialogue going throughout adolescence is equally important.

Don't forget praise. When Joe's mother discovered that her son had been offered drugs and had refused, she was quick to tell him, "Your dad and I are proud of you for being willing to stick to what you believe."

Help your child cope with peer pressure. "The people who offer you drugs usually aren't dealers," says a Connecticut high school sophomore. "They're your friends." Being able to say no with conviction without alienating others is a skill few kids, especially younger ones, possess.

Parents can help their kids develop a plan for what to do in such situations.

Kids can use their parents as buffers. A Georgia mother said her son tells his friends, "My parents doze on my bed until I get home. They'd know in a minute if I came in stoned."

Work with other parents and your community. At the beginning of each school year, Hinsdale Central High School in Illinois sends home a family agreement. Parent and kids sign a pledge that their family will prohibit alcohol and drugs at teenage gatherings in their homes, will provide adult supervision and will welcome calls from other parents to verify these conditions when a party is planned. The names of those who sign are in a directory available to all families.

Know what to say if you find your child has tried drugs. Remain calm when rules are broken.

"So often a good kid experiments once or twice, and the punishment roof caves in," says psychologist Robert Schwebel, clinical director of alcohol and drug treatment services at the Desert Hills Center for Youth and Families in Tucson. "Kids end up saying to themselves, 'If you want trouble, I'll show you trouble.' Instead, ask first why they did this and then ask if they plan to do it again. Next, start educating, talking and making your point of view on the consequences of continued drug use clear."

For a free reprint of "How to Drug-Proof Your Child," send a self-addressed, stamped envelop to Reprint Manager, Reader's Digest, P.O. Box 406, Dept. 396-001, Pleasantville, NY 10570-7000.

Childhood Lead Poisoning

Three children and one adult were lead poisoned as a result of a Sellwood home remodeling project completed in 1993, according to officials at Oregon Health Division. The project involved sanding and scraping of exterior lead-based paint on a 1902 vintage house. Dust and paint chips from the scraping and sanding settled in the soil in the children's play area and exposed them to toxic levels of lead.

Chris Johnson, program director of the Oregon Childhood Lead Poisoning Prevention Program at the Health Division says that lead poisoning continues to be a preventable pediatric health problem. His program has been testing Oregon children for lead since July, 1992; five to seven percent of children tested have been found to have elevated blood

lead levels. Studies show that even at low levels, lead can cause neurological damage and can interfere with a child's intellectual and motor development. At high levels lead can cause kidney failure, coma, and even death.

According to Johnson, the most common sources of lead in a child's living space are lead paint and dust and soil containing lead. Although use of lead in residential paint was banned by the Consumer Product Safety Commission in 1978, it is estimated that 53,000,000 homes nationwide still contain lead paint. "The older the home, the more likely that it contains lead. However, it is important to remember that lead is only dangerous when it is available to a child," he said.

As lead paint deteriorates it begins to chip, peel, crack, or chalk.

Children often eat the peeling paint, but a more common problem is the dust that is formed when lead paint is disturbed or begins to break down from age. This dust may either be breathed in or picked up on a child's hands, which are then placed in the mouth.

The OHSU Sellwood-Moreland Health Center is working with the Oregon Childhood Lead Poisoning Project to conduct an education and blood lead screening program in the Sellwood, East Moreland, and Brookline neighborhoods. Rick Leiker, research analyst with the Health Division says, "the percentage of pre-1940 housing in these areas, along with the number of children under five years of age who live there means these are neighborhoods with a high risk for lead exposure."



Students from the Portland Street Academy and Wilson High School were among 64 teams participating in the Feb. 24 Bonneville Power Administration high school science bowl. Woodinville High School in Woodinville, Wash. won the regional competition and will go to the national science bowl in Washington, D.C.

White House Taps Youth For Summit

At 18, Portland's Chocka Guiden will bring seven years of expertise on alcohol and drug abuse and violence plus proven leadership to the White House Leadership Conference on Youth, Drug Use, and Violence. Now a PSU Freshman, Ms. Guiden's credits include Roosevelt High School Student Body President, Roosevelt Student Council Chair, Black Student Union President, and Regional Drug Initiative Youth Coalition Chair.

Chocka enjoyed working on the Regional Drug Initiative (RDI) Youth Coalition dance held January 13th: "It's really important to focus on the positive, support good teens, and promote good clean fun. The Youth Coalition sponsors alcohol and drug free events to give teens positive alternatives and reward them for doing the right thing. The 700 youth at our alcohol and drug free dance had a good time and knew they were safe."

Regional Drug Initiative chair,

Portland Police Chief Charles Moose, sums up Ms. Guiden's leadership: "Portland's young adults care a great deal about our community and are taking an active, leadership role in making the community a better place. Chocka is an outstanding example of dedicated, enthusiastic young leadership. She plays a key role in making the RDI Youth Coalition a success. Her hard work was essential to the success of the two Youth Coalition city-wide alcohol and drug free dances. We look forward to seeing Chocka continue her leadership in college and beyond."

President Clinton's letter to Chocka expressed his interest in her participation: "During the conference we will discuss how to strengthen the efforts of family, the media, communities, and businesses to reduce drug use and violence and help our young people to make positive choices for themselves. Knowing of your involvement with these critical issues, I invite you to join us at this White

House Leadership Conference next month. Your participation can make a real difference."

Portions of the March 7th conference will be aired as a teleconference, which will be hosted in the Portland area by General Motors Training Center and co-sponsored by the Regional Drug Initiative.

Ms Guiden has also served as state-wide president of Oregon Student Safety on the Move (OSSOM); Multnomah County Teen Impact panel on alcohol and drug prevention, violence and violence prevention; Multnomah County leader for PSI (Postpone Sexual Involvement); member of the Multnomah County DUII (Driving Under the Influence of Intoxicants) Advisory Board; and Residence Assistant for two years at the National Student Safety Conference (NSSP). She is a skilled public speaker and expert on alcohol and drug abuse and violence among her peers. She currently serves on the RDI Task Force and Executive Committee.

HIV Is Knocking On Our Door

BY DR. M. KEITH RAWLINGS

AIDS has claimed approximately 300,000 lives in the U.S. While AIDS cases are steadily increasing in our country, the virus is exploding in communities of color. As an African-American, I am extremely concerned about the disproportionate number of African-Americans with AIDS. Yet, as a physician, I am excited about the advancements that are providing me with new weapons to combat HIV, the virus that causes AIDS. Given the rising numbers of Blacks with HIV, these developments are critical to us. These new methods of battling HIV can significantly improve the lives of people in our communities.

The numbers of Blacks infected with HIV are impossible to ignore. African-Americans account for 12% of the total U.S. population, yet represent more than 32% of all AIDS cases. One in 33 Black men aged 27 to 39 are HIV-infected. The number of women and children infected with HIV is growing as well, and Blacks now account for over 50% of all AIDS cases among women and children. Given these numbers, we must ensure that people in our communities are educated about HIV, encouraged to be tested, and provided medical treat-

ment to keep infected people healthier longer.

Often, feelings of denial, fear, and discrimination, combined with poverty and lack of access to health care, keep people in our communities from being tested and from receiving critical medical treatment. Some people also wrongly believe that HIV infection is untreatable. All of these factors have led to countless cases of Blacks being diagnosed in hospital emergency rooms with an infection typical of the advanced stage of the disease, such as AIDS-related pneumonia (PCP). This late diagnosis is unfortunate and unacceptable. Research shows that anti-HIV drugs and a healthy lifestyle can help the body actively fight the virus the moment it enters

the body. Early diagnosis and intervention also enables an infected woman to significantly reduce the likelihood of transmitting the virus to her child during pregnancy. Our people deserve the chance to benefit from this knowledge and to receive the best possible treatment they can for this disease.

Recently, there has been more good news for people with HIV. Researchers now believe that using combinations of drugs, rather than a single

drug, provides a much better chance of delaying the progression of HIV over an extended period of time. For instance, when the newly available anti-HIV drug 3TC is combined with AZT, there is often a boost in the body's number of CD4 cells -- a key indicator of a person's immune health. The use of this combination of antiretroviral drugs is an excellent example of the new treatment options available for persons infected with HIV.

Fortunately, as our understanding of HIV grows, health care professionals are better able to treat HIV. Blacks need to work closely with their physicians who can help them identify important community resources, such as educational, social and psychological services. Physicians should be thought of as partners in our health care.

Today, much can be done to avoid and to treat HIV. It is critical that anyone who doesn't know his or her HIV status be tested. Should the result of the HIV test be positive, treatment should be sought immediately. Further, we need to make sure that news about any promising new treatments reaches all those affected by HIV. Although HIV remains a life-threatening infection, those diagnosed with the disease can still enjoy full lives. Now, with our increased understanding of the disease, people with HIV can truly look forward to their futures.

Free Noon Lectures At Friendly House

Learn workplace and personal skills while you eat. The popular lunch-hour "Brown Bag" lecture series continues on Wednesdays in april at Friendly House in Northwest Portland. And it's even free.

Here are the lecture topics in April:

April 10 -- Stress in the workplace: (CRN 27951) Stress can be contagious! Speaker Frank Mills considers the major causes of stress in the workplace and ways to relieve them.

April 17 -- Working a Room: (CRN28181) Learn how to meet people, network, and start conversations in today's busy world from lecturer Richard Mohle.

April 24 -- Change Conditions in Your Life: (CRN27995) Speaker Aerial Long shows how to change your relationships, and improve any area from failure to joy.

Friendly House Community Center is located at N.W. 26th and Thurman. The "Brown Bag" lecture series is co-sponsored by Portland Community College and Friendly House Inc.

For more information, call 614-7308.

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