

HOOKED:The Addiction Trap

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HOOKED: The Addiction Trap

Facilitator's GuideTable of Contents

Introduction	1
Summary of the Video	2
Teacher/Facilitator Preparation	2
PART ONE	
Student/Viewer Objectives	3
Survey - Part One	3
Discussion Topics Before Viewing Part One	3
View the Video	3
Discussion After Viewing Part One	3
PART TWO	
Student/Viewer Objectives	4
Survey - Part Two	3
Discussion Topics Before Viewing Part Two	4
View the Video	5
Discussion After Viewing Part Two	5
PART THREE	
Student/Viewer Objectives	6
Survey - Part Three	6
Discussion Topics Before Viewing Part Three	6
View the Video	6
Discussion After Viewing Part Three	6
Extended Learning Activities.....	8
Script of Narration	11



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Hooked: The Addiction Trap

Grades 9-12

Running Times:

Part One: 25 minutes

Part Two: 28 minutes

Part Three: 27 minutes

INTRODUCTION

The problem of addiction, whether to substances or behaviors, is widespread in this country. Millions of Americans are hooked - on gambling, on smoking, on food, on shopping, on television, on alcohol, on drugs - on countless ways to escape their everyday reality.

The term addiction comes from a Latin verb meaning "to devote oneself," "to give oneself over." Loss of control of the use of a substance or behavior is what defines addiction. And with that loss of control comes a variety of serious consequences which can damage a person's relationships, financial situation, work or school life, health and freedom.

Often, addictions arise as coping mechanisms for other life problems, which, over time, become destructive patterns that are very hard to break. And, far too often, these destructive habits start young, when children and adolescents are just learning how to deal with problems, and, if not addressed early enough, can have a negative effect for life.

Consider these statistics:

- * Between 30% and 40% of high school students reported initiating drug related behaviors before age 13 (Centers for Disease Control 1995 Youth Risk Behavior Surveillance System).
- * Every day, 3000 young people in America smoke their first cigarette.
- * Nineteen percent of high school seniors surveyed smoked cigarettes daily (NIH Publication no. 93-3597, 1993); seventy-five percent of them were still smoking five years after being surveyed (NIH Publication no. 93-3598, 1993).
- * Fifty-three percent of high school students reported gambling in the previous 12 months; seven percent reported that gambling caused problems with their family and friends (from a study by Children's Hospital, Harvard Medical School, published by the American Academy of Pediatrics, 1998).
- * One-third of all prison inmates are compulsive gamblers (National Council on Problem Gambling).
- * In the graduating class of 1996, 50% had used an illicit drug by their senior year (NIDA, 1997).

In this program and accompanying guide, we will explore the increasingly serious problem of addiction in all its many forms and with all its devastating consequences.

The model for addiction which the program **Hooked: The Addiction Trap** presents is the biopsychosocial habit model which looks at addiction as being determined by a combination of biological, social, and psychological factors (Brief Alcohol Screening and Intervention for College Students: A Harm Reduction Approach; Linda A. Dimeff, John S. Baer, Daniel R. Kivlahan and G. Alan Marlatt; 1999, The Guilford Press).

The approach we are taking emphasizes the idea that, while the factors determining a person being at risk for addiction are not wholly under their control, the ability to change,

with guidance and assistance, can be. As addiction is seen to be, in many ways, a learned behavior, so are positive coping skills which can help a person avoid or escape an addictive pattern. Learning positive ways to deal with life's challenges is seen as key to living a life free from addictive behaviors.

By presenting accurate and up to date information on chemical and behavioral addictions, emphasizing the risks and negative consequences of all addictions, and providing a variety of coping strategies and life skills that help young viewers follow a path free from addictions, this video and guide offer a comprehensive resource for school, community, and institutional prevention programs.

SUMMARY OF THE VIDEO

Hooked: The Addiction Trap explores the multi-faceted subject of addiction in a three-video format:

Part One: What is Addiction? - 25 minutes

Part Two: The Consequences of Addiction - 28 minutes

Part Three: Alternatives to Addiction - 27 minutes

The video uses the testimony of young addicts, as well as resilient youth, who have developed good coping skills, and the information of experts in the field of addiction research and counseling to provide an in-depth look at the biological, psychological, and social factors that contribute to addictions both to substances and behaviors, and the life skills necessary to avoid or escape an addictive pattern.

Part One offers a definition of addiction, both to substances and behaviors and presents experts discussing some of the most recent research on addiction and the brain. The factors that contribute to a person becoming addicted to a substance or behavior are explored and the progression of addiction is vividly illustrated by addicts and addiction counselors.

In Part Two, participants in the video, including those with substance abuse and smoking problems as well as gambling, Internet pornography, and other addictions, discuss the heavy toll addiction has taken on their health, relationships with family and friends, school life, finances and freedom. Experts provide supporting evidence of the physical and psychological consequences, and the legal implications of addiction.

In Part Three, resilient youth who have found other avenues to deal with difficulties in their lives offer alternatives to addiction. A model for change, which includes advice on Getting Help, Recognizing Warning Signs, Dealing with Feelings, Understanding that Feeling Pain is a Part of Living, Urge Surfing, and Not Giving Up, is presented for youth who may already have developed negative patterns which could lead to addiction.

TEACHER/FACILITATOR PREPARATION

It is strongly suggested that you view the video and study the accompanying materials before presenting them to the group. Certain aspects of the activities presented in the guide may need to be amended or tailored to your group, and we recommend that you do so.

Review the Blackline Masters provided with this guide and duplicate any you wish to distribute.

We have included a handout on Resources for help with different addiction problems. Some viewers may be experiencing difficulties with their own or their family or friend's addictions. Be prepared to provide referrals to those who may need help.

PART ONE

STUDENT/VIEWER OBJECTIVES

After viewing and discussion of Part One: What is Addiction, students/viewers should be able to:

- * define "addiction";
- * identify the different forms of addiction;
- * demonstrate a working knowledge of how addiction affects the brain;
- * identify the stages that lead to addiction;
- * identify the risk factors that contribute to a person becoming addicted.

SURVEY - PART ONE

Blackline Master #6: Survey - Part One is a diagnostic tool, based on the Objectives for Part One, designed to help you identify participants' knowledge of addiction, as well as their own coping mechanisms, before and/or after the presentation of Part One. You may use this survey for information or as evaluation; it may be administered anonymously.

DISCUSSION TOPICS BEFORE VIEWING PART ONE

Below are a list of discussion topics/activities to introduce before viewing Part One of the video:

1. Addiction means different things to different people. How do you understand addiction - to substances, to certain activities or behaviors? Give examples of the different forms addiction can take.
2. Make a list on the board, flipchart, or overhead of definitions of addiction offered by students/viewers.
3. Discuss any strong impressions you may have of addiction from newspapers, books, magazines, television, the Internet, or films.

VIEW THE VIDEO

Hooked - Part One: What Is Addiction?

Viewing time: 25 minutes

DISCUSSION AFTER VIEWING PART ONE

1. What is the difference between use/abuse of a substance or behavior versus dependence and addiction? How much control do we have over our behavior and lives prior to addiction? And how much after that?
2. What does the word "stress" mean to you? Give examples of stress in your own life. How and why do you think stress leads some people into addiction?
3. Sometimes the word "fix" is used to describe the use of a substance (as in "Get my fix.") What is it that an addict is trying to fix?
4. Discuss the notion of "chasing the first high." How does this contribute to getting "hooked"? How does this concept work when the addiction is to a behavior or activity?
5. Addicts and experts agree that (1) continued use of a substance or behavior is never as good as the "first high," and, (2) "chasing the first high" leads to substance abuse and addiction - with less and less reward. This process is called "tolerance" - the need to use more and more of a substance to achieve the same effect. Discuss how tolerance works when the addiction is to a behavior instead of a substance.
6. Gambling addicts and experts describe the phases of compulsive gambling as: The Introduction, The Winning Phase, The Losing Phase, The Desperation Phase, the Bottom (see **Blackline Master #4: Phases of Adolescent Gambling**). How do these phases relate to the stages of a substance addiction?

7. Discuss why the reality of tolerance is a very good reason not to look to the use of substances or habitual behaviors as a dependable source of pleasure or relief from pain.
8. Once the excessive use of substances or behaviors chemically changes your brain, it is very difficult to break free of them. We have heard how addicts continue with their addictions to avoid physical and mental discomfort. Discuss the role of discomfort in changing any - even the most simple - habitual behaviors. Give examples from your own experience; this could include giving up chocolate, taking up exercise, breaking up with a boyfriend/girlfriend etc.
9. Discuss the various theories and first-person accounts in the video that relate to the factors that contribute to a person developing an addictive problem (include genetics, chemical changes, peer pressure, family life, wanting to numb painful feelings, etc.).
10. One phrase that is used to describe addiction is "a process of altering your mood so you don't have to experience your feelings." What does that mean? Are there examples in the video that relate to that idea? Are there examples from your own experience that relate to that idea?
11. There are many different types of addictions discussed in the video. Make a list on the board of the ones mentioned. Ask students/viewers to add to the list. Do you think a person can be addicted to feeling badly? How would that work? Can you be addicted to perfection? How would that work, and why would it be a problem?
12. One theory of addiction is that people most at risk for addiction are "thrill or novelty seekers." Which of the people in the video do you think have that trait? Why? Brainstorm other, less dangerous outlets for thrill-seeking.
10. What is the difference between a habit and an addiction?
11. Discuss the phrase "We are all creatures of habit." In light of the information in the video, what does that mean? Have students discuss whether their own experience supports that idea.
12. Another adjective sometimes used to describe addiction is "self-soothing." What do you think it means? Use examples from the video to illustrate the concept of "self-soothing."

PART TWO

STUDENT/VIEWER OBJECTIVES

After viewing and discussion of Part Two: The Consequences of Addiction, students/viewers should be able to:

- * Identify the consequences and risks of addiction;
- * Identify the five areas of a person's life damaged by addiction;
- * Demonstrate how violence and addiction can go hand in hand.

SURVEY - PART TWO

Blackline Master #7: Survey - Part Two is a diagnostic tool, based on the Objectives for Part Two, designed to help you identify participants' knowledge of addiction, as well as their own coping mechanisms, before and/or after the presentation of Part Two. You may use this survey for information or as evaluation; it may be administered anonymously.

DISCUSSION TOPICS BEFORE VIEWING PART TWO

1. Brainstorm with viewers and make a list on the board, flipchart, or overhead of things that you would not want to happen to you, such as illness; loss of teeth, hearing, bodily functions; irreparable brain damage; insanity; impotence; incarceration; loss of family and friends; homelessness. These are all possible consequences of addiction. Discuss this in light of these statements from Part One: "I'd die without it," "It's the only thing 'there' for me," "I don't

have anything else in my life," "It's the only thing I know to do," "I started using to be free, to be my own person." Discuss consequences of addiction that the viewers know from personal experience, or that they have read about or seen in the media.

VIEW THE VIDEO

Hooked Part Two - The Consequences of Addiction

Viewing Time: 28 minutes

DISCUSSION AFTER VIEWING PART TWO

1. Addiction is sometimes described as a "process of loss." Discuss that statement as it relates to the stories told in the video. What did each addict lose? What other losses are possible when you are addicted to drugs, alcohol, or to any activity or behavior?
2. Gambling and its consequences are serious problems among five to seven percent of teenagers. This percentage goes up to 10- 14% if you include teens at-risk or in transition to a gambling addiction. Discuss your experience or knowledge of gambling addiction - its causes and consequences. Distribute **Blackline Master #4: Phases of Adolescent Gambling** as an aid to discussion.
3. In the video, the connection between addiction and violence is introduced. Discuss this connection and its possible causes. In the video, one participant talks of being raped while sleeping off a long run of methamphetamine use. Discuss the connection between the abuse of alcohol and drugs and date rape.
4. The five areas of a person's life that are most affected by an addiction problem are presented in the video. They are:

- * Health
- * Relationships with family and friends
- * School life
- * Money
- * Legal

List them on the board and discuss them in relation to information provided in the video as well as personal insights and experiences that the group may offer.

5. Addiction can have serious legal and financial consequences. Discuss the societal costs of addiction. Brainstorm and make a list of all the possible ways in which everyone pays for addiction (i.e., insurance, taxes to support prisons and the war on drugs, etc.). Discuss other ways this money could better be spent.

6. The connection between drinking and driving and serious health consequences is introduced by Dr. Gerard Chapman. In a 1996 National Household Survey on Drug Abuse, it was found that within a 12-month period, an estimated 28 percent of drivers in the U.S. used alcohol or drugs or both within two hours before driving. Drug use prior to driving was more common (13%) among respondents 16-21 years old. The most common —reasons were "no other way to get there" and "not high enough to cause a crash." Discuss these findings and the reasons given for driving under the influence of alcohol and drugs. Ask viewers to describe any incidents involving drinking and/or drug use and driving they may know about.

7. In the video, the participant with a pornography addiction describes how his addiction escalated from viewing pornography on the Internet to assaulting a young child. Dr. Victor Cline of the University of Utah (Pornographic Effects: Empirical and Clinical Evidence, University of Utah Department of Psychology, 1988) describes the four stages of a pornography addiction after the initial viewing as:

Addiction - the desire and need to see more.

Escalation - need for more explicit images.

Desensitizing - material once considered shocking, is now acceptable.

Acting Out - the tendency to perform the behaviors viewed.

Discuss these stages in terms of what is presented in the video. Discuss how they relate to the stages of use, abuse, dependence (including tolerance), and addiction.

8. The various kinds of loss incurred through addiction can be enormous, creating a vicious cycle of loss/pain/ongoing addiction. Discuss resources and support services that can help someone - before, during, and after addiction - to avoid staying trapped. Include emotional, spiritual, physical, and intellectual needs, as well as the needs of family, friends, and school.

PART THREE

STUDENT/VIEWER OBJECTIVES

After viewing and discussion of Part Three: Alternatives to Addiction, students/viewers should be able to:

- * Define the idea of multi-addiction;
- * Identify the risks of experimenting with addictive substances and behaviors;
- * Identify positive ways of dealing with stress;
- * Identify the concept of triggers and warning signs;
- * Identify the idea of learned behavior and how it relates to positive rather than negative learning;
- * Identify the concept that changing your behavior can help to change your state of mind;
- * Define the idea of "urge surfing" as a prevention tool.

DISCUSSION TOPICS BEFORE VIEWING PART THREE

1. To avoid addictions, you must understand how they work. Review the various theories and first-person accounts in the video describing the many factors that contribute to developing an addictive problem: genetics, chemical changes, social and peer pressure, stress in daily life, wanting to numb painful feelings, etc. Brainstorm and make a list on the board, overhead, or flipchart of alternatives that each person in the video could have used to avoid becoming addicted. Using the personal experiences of the viewers, list positive coping skills that they know of or have found successful when confronted with challenges.

VIEW THE VIDEO

Hooked Part Three: Alternatives to Addiction

Viewing Time: 28 minutes

DISCUSSION AFTER VIEWING PART THREE

1. In each section of the video, a different aspect of the definition of addiction is offered by the experts. (In Part One, Shelly Dickinson and Frances Kalafski; in Part Two, Betsy deCastro and Frances Kalafski; in Part Three, Greg Brown). Review the different definitions (i.e., loss of control over a substance or behavior, a mood-altering event, something that interferes with your everyday life, a coping mechanism that becomes a destructive crutch) and compare them to the list you made before viewing the program. Use examples from the first-person accounts of addiction to discuss each definition.

2. Review the concept of multi-addiction, using examples from the video, either spoken or visual, of participants being addicted to more than one substance or behavior. Discuss the reasons for one addiction opening the door to others.

3. The video introduces six young people who have found positive ways to deal with challenges in their lives. List their advice on the board, flipchart, or overhead:

- * Reach out and talk to people.
- * Get involved in activities.
- * Trust your feelings.

- * Take responsibility for your life.
- * Set goals and work towards them.
- * Don't be afraid to change.

Discuss each piece of advice and how it can help prevent an addiction problem. Talk about the common threads in each story; are there coping strategies that most of them use?

4. In Part Three, Doug Calvert says that in his practice, he doesn't see people who start using drugs in order to destroy their lives, but as we've seen throughout the video, that is often the result. Review why people start using drugs, what the messages are that they receive along the way and what the ways are that they justify continuing (Frances Kalafski talks about some of the justifications - I'll quit when I'm older, I don't use as much as so and so). Explain that these justifications are called "denial" (see **Blackline Masters #2a-2b: Glossary**).

5. Frances Kalafski describes the need to find support in order to break out of a negative pattern. Talk about all the places that a person can find support if they are experiencing problems. Discuss peer support. When is it positive and when is it negative? How do you tell if it is positive? How do you resist negative peer pressure?

6. Brainstorm and make a list of feelings that can lead to addiction (i.e., anger, stress, confusion, boredom, sadness, etc.). Next to them, make a list of better choices you can make when you are experiencing these feelings. Create sentences using the feelings and the positive choices (i.e., "When I am feeling..., I can").

7. In the video, the young man in the weight room discusses the advantages of weightlifting as a means of relieving stress. On the other hand, for some people exercise can sometimes become an addictive behavior. How can that happen? What differentiates exercise to relieve stress and exercise that is addictive? Discuss why getting involved with activities such as those depicted in the video (sports, drama, art, etc.) is different than getting involved with addictive behaviors. Remind viewers that addictions are often ways of fixing or escaping from the present reality in which a person finds himself. How would focusing on the result of his behavior, rather than the process of learning and/or being involved with an activity, contribute to an activity become addictive?

8. Discuss the idea that changing your behavior can change the way you feel. Often, we think that we have to feel differently in order to act differently and that can delay or make change very difficult. Conduct an experiment with the group using the study that Shelly Dickinson refers to in Part Three. Divide the group in half. Assign Group A the task of smiling and being cheerful in every encounter for a day, no matter how they feel. Instruct Group B to not smile and to ignore or be hostile in every encounter for a day. Have members of the groups keep journals and discuss them. Gather back into the large group and present their findings. Discuss. How did one's outward behavior affect one's inner thoughts and attitudes? How might this relate to addiction?

9. Lead a discussion on what to do if you have friends who you think are becoming addicted to a substance or behavior. Consider statements made by addicts and experts in the video. Remember that concern is important, but safety, both physical and emotional, is top priority. Remind viewers never to put themselves in jeopardy.

10. One participant makes the statement: "I would tell people to find any way they can to express themselves." Brainstorm and make a list of creative ways to express yourself. Why do you think that expressing yourself creatively can help avert an addiction problem?

11. Introduce the idea of positive addiction versus negative addiction. Consider that "negative addictions" feel good right away but are bad for you in the long run, and "positive addictions" often feel negative in the short run but are beneficial in the long run (i.e., weightlifting, riding, getting out on the stage, etc.) can all be difficult and even painful at first, but the end result is positive. (Addiction, Mindfulness, and Acceptance, G. Alan Marlatt;

Acceptance and Change: Content and Context in Psychotherapy, edited by Steven C. Hayes, Neil S. Jacobson, Victoria M. Follette, and Michael J. Dougher; 1994, Context Press).
Brainstorm a list of positive addictions.

12. Drawing on all that you have learned about addiction, discuss relapse (see definition in **Blackline Masters #2a-2b: Glossary**). Why do you think people relapse into addictive behaviors? Take into consideration triggers, environment, learning, peers, etc.

13. Discuss “urge surfing.” (Relapse Prevention: Maintenance strategies in the treatment of addictive behaviors, Marlatt, G.A., & Gordon, J.R., 1985; New York; Guildford Press) In the chapter “Addiction, Mindfulness, and Acceptance”, by G. Alan Marlatt, in Acceptance and Change: Content and Context in Psychotherapy, edited by Steven C. Hayes, Neil S. Jacobson, Victoria M. Follette, and Michael J. Dougher, “urge surfing” is described more fully:

“In this example, the urge is portrayed as an ocean wave. Like a wave, an urge begins slowly and gradually grows in size until it crests and then gently subsides. Since urges are conditioned responses, they too start slowly and gradually get stronger as they reach peak intensity. It is at the peak of the urge (the crest of the wave) that the tendency to give in is at maximum strength. Clients often believe, however, that the urge will continue to grow in size and strength unless they give in to it. However by learning to maintain their balance and mindfully riding the urge through its course, they can experience the urge waning and passing away. The client becomes a skilled ‘urge surfer’ who can experience the rising and passing of urges without getting ‘wiped out’ by them.”

Refer to this description as well as the information from the video in your discussion. Brainstorm other metaphors that could be useful when an urge towards negative or addictive behavior arises.

EXTENDED LEARNING ACTIVITIES

The following activities are designed to take the lessons of the program a step beyond the Objectives. You may select from the following learning activities to assign either following viewing of each video, or after viewing the series:

1. Research and write a paper on the role of dopamine in the reward/pleasure circuit of the brain. How is this chemical messenger activated by things that are good for us, such as nurturing and eating? How is it interfered with by addictions? Include information on the different roles that dopamine plays in different addictions. And the role it plays in getting “hooked”? If you can, create a picture of how this habitual- behavior “switch” works. Include information on other neurotransmitters that contribute to the process of addiction.

2. Learning plays a large role in addiction. Research the function of learning and the brain, and write a paper or present your findings showing how learning functions in the addictive process. Show how we learn new behaviors, using specific examples, such as driving, swimming, reading, or speaking a foreign language, and include an example from your own life. Include the idea that once you learn something you never forget (such as riding a bike), and relate this to the learning of an addiction and to the difficulties involved in quitting.

3. Find as much current scientific information as you can and write a paper on how learning relates to relapse and relapse prevention. Show the role of environmental and sensory associations in learning and in addictions (e.g., describe “triggers” to addictive behavior or substance abuse).

4. Addictions can - directly and indirectly - have legal consequences. Invite a member from your local law enforcement community or from the district attorney’s office to speak to your group about the legal consequences of drugs and alcohol, as well as crimes committed by addicts to support other forms of addiction, such as gambling.

5. According to recent research, cigarettes are highly addicting, at least as strong an addiction as drugs such as heroin and cocaine. And one-third of all young people who

experiment with smoking are addict—ed by the time they're 20.

a) Research and write a paper showing the consequences of smoking. Include medical statistics and your own or others' stories of these consequences.

b) Take a poll among your friends/acquaintances on how much they smoke a day or week. Figure out how much money they could save if they put that money in a savings account in the bank. Include that information in a report.

c) Research one or more health-related consequences of smoking or chewing tobacco (i.e., emphysema, heart disease, cancer, gum disease, etc.). Illustrate your report.

d) Consider starting a "Tobacco Free Teens" group. Contact the American Lung Association at 1-800-586-4872 for information on facilitator training and support materials.

e) **Blackline Master #5: The 4 D's** is a list from the American Lung Association of ways to lessen the discomfort of the urge to smoke when you are quitting. The suggestions can be useful for all cravings for negative behavior.

6. Write a paper or journal entry on any personal experience you may have of addiction: yourself or that of family or friends. You may choose to share this paper with the group, or with your teacher or counselor.

7. (a) Compulsive gambling is a serious teen problem. There is, however, not nearly as much information or help available as for other addictions: fewer trained therapists, fewer outpatient/inpatient providers, and fewer videos, books, and other publications. Use your group to research, gather, and make available educational and treatment information. See **Blackline Master #4: Phases of Adolescent Gambling** and **Blackline Masters #1a-1c: Resources** for numbers and web sites where information is available.

(b) A recent study (August, 1998) published by the American Academy of Pediatrics links teen gambling with other risky behavior. Using examples from the video and your research, write about this connection.

8. Complete Extended Learning Activity #7(a) or (b) for compulsive eating disorders - another serious, but less talked about, form of addiction among teens.

9. According to a study of 932 sex addicts (Carnes, P., Don't Call it Love: Recovery for Sexual Addiction; New York: Bantam, 1991.), 90% of men and 77% of women indicated that pornography played a significant role in their addiction. Research and write on the progression from viewing pornography to sexual addiction.

10. One form of substance abuse which is not covered in the video and which has been found to cause irreversible brain damage is inhalant abuse. Research and present a paper on the consequences of inhalant abuse.

11. Research and write a paper on the risks of alcohol and other drug use during pregnancy and their effects on fetal development. Include the use of tobacco and caffeine as well.

12. In small groups, prepare an illustrated talk on advertising and substance abuse. Use cigarette, beer and alcohol, lottery, and casino ads in showing how advertising plays into the addictive process. (The AAA Foundation for Traffic Safety, 1730 M Street, Washington, D.C., 20036, (202) 775-1456 has a study entitled "Myths, Men and Beer" which is available on request.)

13. The various kinds of loss incurred through addiction can be enormous. Write a paper on the kinds of resources and support services that might help someone - before, during, and after addiction - to avoid the trap of addiction. Include in your report emotional, spiritual, physical, and intellectual needs, as well as the needs of family, friends, and schools. You may choose to do your report as a story or short play.

14. If it's futile to look to substances or habitual behaviors as a reliable source of pleasure or relief from pain, what are the alternatives? Invite a staff person from a local recovery/counseling program to discuss them with you. Make a list of resources in your community where you can find help for different addictions. Make the list available in your school/center.

15. Write a letter to a friend who has an addiction problem or who may be at risk for developing an addiction problem. Include information and ideas you have learned from watching the videos to try to persuade him or her to change his or her behavior. Break into small groups and share your ideas on how to help a friend who you are worried may be developing an addiction to a substance or behavior.
16. Research and write a paper on addiction and violence and/or abuse using newspaper and magazine accounts and television reports that illustrate the connection. Include whatever statistics you can find on the addictive use of substances or behaviors by perpetrators and victims of violent crime.
17. Pass out **Blackline Masters #3a-3b: A Review of Addictive Substances and Behaviors**, which lists chemical and behavioral addictions. Select a substance or behavior for an individual or small group research project for presentation to the large group. Pass out **Blackline Masters #1a-1c: Resources** as a research aid. Be sure to include information on: Why is it addictive? Who is at risk? What are the stages or progression of the addiction? What treatments are recommended and available? What are the short and long term consequences of the addiction?
18. Research indicates that young people who participate in the arts and humanities (NCADI, Art in Prevention project) are more likely to stay in school and to avoid harmful behaviors. Plan and execute an arts project around the subject of addiction. Possible projects include:
- * Compiling and publishing a book of poems,
 - * Creating a mural of healthy alternatives to addiction,
 - * Making anti-drunk driving or smoking or drug abuse posters,
 - * Writing and producing a theatrical piece on the consequences of addiction.
19. Make a poster or display board showing how addiction is a cycle. Use a circle to represent the on-going cycle of any addiction; on this circle, show the stages of addiction. (Be sure to include how "feeling disgusted with yourself" plays into the continuation of an addict's cycle.) Then, choose three kinds of addictions - e.g. gambling, eating, drug or alcohol use - and show how the cycle and stages of these seemingly very different substances or behaviors are the same.
20. Physical exercise relieves stress and can be a healthy alternative to substance abuse. Plan a session of physical exercise to music. Begin with five minutes of gentle exercises, then follow with 20 minutes of vigorous exercise - free form movement, dancing, jogging, or some other sports activity. Research and explain the benefits of exercise. Be sure to drink water during and after to rehydrate the body, and check beforehand that no student has high blood pressure or other health risks.
21. Addictions are harmful and, ultimately, unsuccessful ways to deal with feelings. Do a research project on "dealing with feelings" more successfully. Make a display/poster on how and where to find help in your community. Outline resources including family, friends, church or synagogue, school, and professional counseling. Remember that not all resources will benefit everyone, so options are important.
22. Most everyone can benefit from good emotional communication skills. Research and demonstrate these skills by role-playing three difficult emotions from everyday situations, and showing how good communication can help.
23. Often when we are feeling bad, we think we are the only ones experiencing problems. It can be helpful to realize that suffering is universal; it's not hard to find someone in a more painful situation than we are. Helping those who are less fortunate can also help us break out of a negative pattern of isolation and self preoccupation. Assign students the task of finding opportunities in your community to help others and organize one or more projects with the group.

HOOKED: THE ADDICTION TRAP

Script of Narration

PART ONE

BOY: IT'S SOMETHING THAT GRABS ONTO YOU AND WON'T LET GO PRETTY MUCH.

GIRL: IT WAS ALL IN MY MIND. MY MIND TOLD ME THAT I WANTED IT AND NEEDED IT, SO I GOT ADDICTED TO IT.

BOY: BEING ADDICTED TO SOMETHING IS WHERE IT'S SOMETHING YOU CAN'T STOP DOING. IT'S A PART OF YOUR LIFE. IT'S WHAT KEEPS YOU GOING. I WAS ADDICTED TO ALCOHOL.

GIRL: WITH ME, I HAVE AN ADDICTION TO CIGARETTES. I WANT THE CIGARETTES. I WANT THE NICOTINE. I GOTTA HAVE IT.

BOY: THE WAY I KIND OF THINK OF IT IS, IT'S A DEMON. IT'S SOMETHING THAT LIKE SNATCHES ON TO YOU. IT'S NOT ADDICTION ANYMORE. IT'S NOT A MEDICAL TERM. IT'S NOTHING LIKE A PSYCHIATRIC TERM. IT'S NOTHING LIKE THAT. IT BECOMES PART OF YOU. IT'S LIKE YOU HAVE TO HAVE IT TO LIVE.

BOY: YEAH. AN ADDICT, AN ALCOHOLIC, ALL OF THAT. ALL OF THE CARDS. THAT WOULD BE ME.

GIRL: DRUG USE ADDICTION, YEAH, I, THINK THAT IT TAKES ONE TO ANOTHER PLACE. AND IN A WAY DANCING FOR ME DOES ALSO.

BOY: DEFINE ADDICTION. GOING TO WHATEVER MEANS YOU CAN TO STILL BE ABLE TO DO IT. WHATEVER YOU CAN DO TO GET YOUR HAND ON THAT DOLLAR TO GET IN THE NEXT GAME, THAT'S SHOWING ME THAT YOU CAN'T GO THROUGH A DAY WITHOUT GAMBLING. YOU'RE ADDICTED.

GIRL: YOU CAN'T DO WITHOUT IT. YOU JUST WANT IT ALL THE TIME AND YOU DON'T CARE WHAT HAPPENS TO YOU OR WHATEVER YOU JUST WANT IT.

GIRL: IT ALSO IS LIKE, I THINK, OH, I'M SO STRESSED OUT I NEED A CIGARETTE.

GIRL: JUST FILLING THE SPACE... WITH SOMETHING. KIND OF NUMBING YOUR SENSES.

VOICE OVER: SO WHY DO YOU FEEL YOU DO IT?

GIRL: BECAUSE I'M ADDICTED TO IT.

VOICE OVER: WHAT DOES THAT MEAN TO YOU?

GIRL: THAT I LOVE IT. I LOVE IT ALMOST MORE THAN ANYTHING.

VOICE OVER: DID THAT HAPPEN IMMEDIATELY?

GIRL: NO, IT TOOK A LONG TIME. WELL, IT TOOK ME A LONG TIME TO REALIZE...THAT...HOW ADDICTED I WAS.

BOY: I USED TO NOT THINK THAT I WAS ADDICTED. BECAUSE I COULD STOP IF I WANTED TO STOP. BUT I JUST DIDN'T SEE ANY REASON IN STOPPING. BUT NOW THAT I HAVE PROBATION AND STUFF AND THERE'S A REASON TO STOP, I CAN'T STOP.

NARRATOR: THE TERM ADDICTION HAS COUNTLESS MEANINGS. ASK ANYONE AND THEY'LL COME UP WITH A DIFFERENT DEFINITION. IS IT PHYSICAL? OR IS IT PSYCHOLOGICAL? DOES IT RUN IN FAMILIES? IS IT A RESULT OF A CHEMICAL IMBALANCE? IS IT AN ALTERATION IN THE BRAIN? IN PART ONE OF THIS PROGRAM WE WILL LOOK AT ADDICTION AS A COMBINATION OF ALL THESE FACTORS AND WE WILL EXPLORE THE MANY FORMS ADDICTION CAN TAKE.

NARRATOR: WE ALL KNOW THAT SMOKING IS ADDICTIVE. FOR SOME, ALCOHOL IS AN ADDICTIVE SUBSTANCE. AND WE USUALLY CONSIDER DRUGS AS ADDICTIVE. BUT DID YOU KNOW THAT THERE ARE CERTAIN BEHAVIORS AND ACTIVITIES THAT CAN BECOME ADDICTIVE? GAMBLING IS ONE OF THEM. SO IS STEALING AND, AND

SHOPPING. THE INTERNET IS CONSIDERED THE FASTEST GROWING ADDICTION IN AMERICA. THERE ARE SEX ADDICTS AND TV ADDICTS AND EVEN EXERCISE ADDICTS.

DR. SHELLY DICKINSON: THERE ARE ARGUMENTS, GREAT ARGUMENTS ABOUT WHAT ACTUALLY DEFINES ADDICTION. THE WAY THAT IT, THE WAY THAT I DEFINE IT IS A LOSS OF CONTROL. OF USE OF THE DRUG, OF A CERTAIN BEHAVIOR, OF YOUR EATING HABITS, OF YOUR SEXUAL HABITS, OF YOUR GAMBLING HABITS. LOSS OF CONTROL IS THE HALLMARK OF ADDICTION. YOU CAN'T STOP. EVEN IF YOU WANT TO, YOU CAN'T.

FRANCIS KALAFSKI: SOME OF THE ONES THAT I LIKE TO USE IS ANY PATTERN OF BEHAVIOR OR ANY PATTERN OF SUBSTANCE USE THAT CREATES PROBLEMS IN THE PERSON'S LIFE. SO MANY PEOPLE I WORK WITH ARE INVOLVED IN GETTING THAT RUSH. WE TALKED ABOUT ADDICTION AS NOT ONLY BEING ADDICTED TO A SUBSTANCE OR A BEHAVIOR BUT SOME KIND OF MOOD ALTERING EVENT.

BOY: I WAS ADDICTED TO GETTING IN TROUBLE. I MEAN, OBVIOUSLY I KEPT GOING BACK AND BACK, YOU KNOW, I KEPT GOING BACK TO JAIL. GOING BACK TO GROUP HOMES. GOING BACK TO DETENTION HEARINGS.

GIRL: I LIKE DRAMA. I LIKE TO SEE THINGS, I LIKE DRAMA. AND I WAS ADDICTED TO DRAMA.

BOY: IT DIDN'T REALLY MATTER WHAT I FOUND, JUST AS LONG AS IT WAS PORNOGRAPHY. THAT WAS MY ADDICTION.

GIRL: THERE'S ADDICTIONS LIKE ADDICTIONS TO DRUGS, CIGARETTES, ALCOHOL AND STUFF LIKE THAT. THAT CAN GET YOU IN TROUBLE. BUT THERE'S OTHER TYPES OF ADDICTIONS LIKE I HAVE AN ADDICTION TO LOVE.

GIRL: BAD RELATIONSHIPS.

GIRL: BAD RELATIONSHIPS.

MAN: FOR ME, AH, I WOULD STEP INSIDE THAT CASINO AND IT WAS LIKE STEPPING INSIDE A CATHEDRAL. I LOVE, I NEVER PLAYED A SLOT MACHINE IN MY LIFE, BUT I LOVE THE SOUND OF THOSE SLOT MACHINES. I WOULD WALK IN AND IT WAS LIKE, I WOULD THINK TO MYSELF, GOD, THANK YOU, I'M FINALLY HERE. I'M FINALLY WHERE I BELONG.

GIRL: WHEN I WALK INTO THE CLUB IT'S LIKE, IT'S LIKE MY HOME. IT'S MY HOME AWAY-IT'S MY HOME, BASICALLY. I FEEL MORE COMFORTABLE THERE THAN I DO LIVING HERE, AT MY HOME.

GIRL: IT'S NEEDING SOMETHING. LIKE ANYTHING. AND IT'S ALSO SORT OF COMFORTABLE. I MEAN, FAMILIAR AND COMFORTABLE. I MEAN, IF YOU HAVE SOMETHING ALL THE TIME.

BOY: IT'S THE ONLY THING THAT WAS ACTUALLY ALWAYS THERE FOR ME. THAT'S THE WAY I WAS LOOKING AT IT. I MEAN, NO ONE ELSE WAS.

NARRATOR: THE WORD ADDICTION COMES FROM A LATIN VERB MEANING "TO DEVOTE ONESELF. TO GIVE ONESELF UP." BUT IT IS WITH CONTINUED, REPETITIVE AND EXCESSIVE USE OF A SUBSTANCE OR BEHAVIOR THAT ADDICTION TAKES HOLD. A PERSON PROGRESSES FROM USE TO ABUSE TO ADDICTION. AND WHEN THAT PERSON ARRIVES AT THE POINT OF ADDICTION, CHANGES HAVE TAKEN PLACE IN THEIR BRAIN THAT MAKE STOPPING ALMOST IMPOSSIBLE. BUT BEFORE WE CAN EXPLORE HOW ADDICTION AFFECTS THE BRAIN, WE MUST FIRST UNDERSTAND HOW THE BRAIN WORKS. OUR BRAINS CONSIST OF SEVERAL LARGE REGIONS. EACH BEING RESPONSIBLE FOR A DIFFERENT SET OF FUNCTIONS NECESSARY FOR LIVING. FROM BASIC FUNCTIONS LIKE DIGESTION AND BREATHING TO COORDINATION OF MOVEMENT TO MORE COMPLEX FUNCTIONS LIKE THINKING AND SENSING. ALL AREAS OF THE BRAIN ARE MADE UP OF BILLIONS OF NERVE CELLS. THE MESSAGES THAT CONTROL ALL OUR BRAIN FUNCTIONS ARE TRANSMITTED FROM ONE NERVE CELL TO THE OTHER THROUGH THE RELEASE OF CHEMICAL SUBSTANCES CALLED, "NEUROTRANSMITTERS." ONE VERY IMPORTANT CIRCUIT OF NERVE CELLS THAT SPANS A NUMBER OF AREAS OF THE BRAIN IS CALLED THE "PLEASURE" OR "REWARD" CIRCUIT. DOPAMINE IS ONE OF THE KEY NEUROTRANSMITTERS ACTIVE IN THE REWARD CIRCUIT. ALL LIFE SUSTAINING ACTIVITIES SUCH AS EATING, SEXUAL ACTIVITY AND NURTURING INCREASE THE LEVEL OF DOPAMINE IN THE BRAIN REWARD CIRCUITS. THE IDEA IS THAT WHEN SOMETHING IS GOOD FOR OUR SURVIVAL WE EXPERIENCE PLEASURE SO WE WANT TO CONTINUE IT. AT THE UNIVERSITY OF COLORADO, HEALTH SCIENCES CENTER, SHELLY DICKINSON IS USING LAB ANIMALS TO STUDY THE EFFECTS OF COCAINE AND DOPAMINE LEVELS ON THE BRAIN IN ORDER TO BETTER UNDERSTAND THE WAY ADDICTION WORKS.

DR. DICKINSON: ...SO WE CAN MEASURE BRAIN FUNCTION AND BEHAVIOR AT EXACTLY THE SAME TIME. THERE, WHERE THE LINE IS GOING UP, IT'S DETECTING INCREASED DOPAMINE CONCENTRATIONS AROUND THE ELECTRODES. THERE ARE DOPAMINE RECEPTORS IN A LOT OF DIFFERENT PARTS OF THE BRAIN. THE PART THAT WE'RE MOST INTERESTED IN IS PART OF THE REWARD CIRCUITRY. IT'S PART OF THE NUCLEUS ACCUMBENS AND THE STRIATUM WHICH ARE KNOWN TO HAVE LARGE NUMBERS OF DOPAMINE RECEPTORS AND THEY'VE BEEN SHOWN TO BE INVOLVED IN THE REWARD OF A LOT OF DIFFERENT DRUGS. DOPAMINE IN THESE AREAS INCREASES WHEN YOU GIVE DRUGS TO THE ANIMALS. WHEN YOU GIVE ALCOHOL, COCAINE, OPIATES, AMPHETAMINE, YOU GET INCREASES IN DOPAMINE RELEASE. AND IT ALSO INCREASES WITH FOOD REWARD. YOU CAN GET INCREASES IN DOPAMINE WITH SEXUAL ACTIVITY. INCREASES IN DOPAMINE WITH WATER WITH A THIRSTY RAT. SO, ANY SORT OF NATURAL REWARD SEEMS TO ACTIVATE THIS REWARD MECHANISM, THIS CIRCUITRY IN THE BRAIN. AND SO NATURAL REWARDS AND THEN DRUGS, WHAT DRUGS MAYBE DO, ONCE THE DRUGS TAKE OVER, THEY USURP THAT MECHANISM THAT NORMALLY FOOD OR WATER OR SEX OR NURTURING OR ALL THESE OTHER PLEASANT ACTIVITIES THAT WE HAVE THAT CAN INCREASE DOPAMINE LEVELS IN THE BRAIN. AND THEN THOSE THINGS NO LONGER CAN DO THAT. THE WHOLE REWARD CIRCUITRY ISN'T JUST DOPAMINE. THE OPIOIDS ARE INVOLVED. GLUTAMATE IS INVOLVED WHICH IS ANOTHER NEUROTRANSMITTER IN THE BRAIN THAT'S VERY RESPONSIBLE FOR LEARNING. AND SO DOPAMINE, YOU NEED THE DOPAMINE FOR THE REWARD. BUT THEN TO REALLY GET ADDICTED YOU ALSO NEED ACTIVITY OF THE GLUTAMATE SYSTEM. BECAUSE IT IS A LEARNING SORT OF CURVE. THERE'S LEARNING COMPONENTS TO IT THAT ARE VERY SIMILAR TO ALL OTHER TYPES OF LEARNING.

NARRATOR: SO, IF ADDICTION IS IN MANY WAYS A LEARNED BEHAVIOR, WHAT IS IT THAT DETERMINES WHO WILL LEARN IT? WHAT ARE THE FACTORS THAT CONTRIBUTE TO ONE PERSON BECOMING ADDICTED AND ANOTHER NOT?

DR. DICKINSON: AGAIN, THAT'S A SIXTY-FOUR MILLION DOLLAR QUESTION. SOME PEOPLE SAY IT'S SIMPLY WILL POWER. ...I DON'T NECESSARILY THINK SO. I DON'T THINK IT'S A WILLPOWER ISSUE. I THINK IT'S, I THINK IT'S SOME INNATE CHANGE IN THE BRAIN. SOME DIFFERENCE.

DOUG CALVERT: THERE SEEMS TO BE SOME PRETTY GOOD EVIDENCE THAT PEOPLE THAT USE METHAMPHETAMINE AND THE FIRST TIME THEY USE THEY SAY, "MAN, THIS IS JUST THE GREATEST STUFF IN THE WORLD." IT'S BECAUSE IT'S ACTUALLY TAKING CARE OF SOME CHEMICAL IMBALANCES THAT THEY ALREADY HAVE SET UP IN THEIR BRAIN. IT MAKES IT MUCH MORE LIKELY BECAUSE IT WORKS, IT TAKES CARE OF SOME OF THE THINGS THAT HAPPENS. AND FOR A WHILE IT'S EVEN POSSIBLE THAT SOME OF THE CHEMICALS CAN BE MORE IN BALANCE FOR THEM. THOSE ARE THE PEOPLE THAT TEND TO USE. AND ARE MUCH MORE LIKELY TO BECOME ADDICTED.

KALAFSKI: THERE'S DEFINITELY SOME BIO-CHEMICAL PROCESS THAT GOES ON THAT MAKES QUITTING VERY DIFFICULT. IF SOMEONE IS SMOKING AND TRIES TO QUIT THEY FEEL HORRIBLE. AT THE SAME TIME THEY LEARN IT IN THEIR FAMILY OR FROM A LARGER CULTURE THAT THIS IS THE WAY YOU DO CERTAIN THINGS.

DONNA MARTINEZ: SOME BY EARLY ON IN AGE GO GET ME A BEER, LIGHT MY CIGARETTE FOR ME. TO GOING IN THE, RIDING IN THE CAR TO GO BUY ALCOHOL OR DRUGS OR WHATEVER. TO PARTIES ALL NIGHT LONG. IT COULD BE A FAMILY PATTERN, THE WAY THEY LIVE.

CALVERT: IT MAY NOT HAVE SO MUCH TO DO WITH, WITH THE FAMILY STRUCTURE BUT AGAIN, IT MAY HAVE TO DO WITH PHYSIOLOGICAL DIFFERENCES THAT TEND TO BE CARRIED ON WITHIN THAT FAMILY. AND IF THERE IS AN ADOLESCENT THAT IS THERE AND KNOWS THAT THEIR PARENTS WERE ALCOHOLICS AT ONE POINT IN TIME OR STILL CONSIDER THEMSELVES ALCOHOLICS OR HAVE ABUSED DRUGS, THE LIKELIHOOD OF THEM ABUSING DRUGS AND BECOMING ADDICTED IS GREATER IN A FAMILY. THAT ISN'T THE ISSUE.

KALAFSKI: I THINK IT'S VERY COMPLEX IN LOOKING AT EACH INDIVIDUAL CASE NEEDED. AND I THINK THAT'S WHAT MAKES IT SO SCARY IS IF YOU HAVE ONE MODEL OF ADDICTION, YOU CAN KIND OF BOUNCE YOURSELF UP AGAINST IT AND SAY, "OH, WELL THIS DOESN'T FIT FOR ME. THIS WILL NEVER BE A PROBLEM FOR ME." AND IF YOU CAN BOUNCE YOURSELF UP AGAINST THAT ONE MODEL AND SAY THIS DOESN'T FIT FOR ME, I THINK YOU'RE STILL AT RISK. I THINK EVERYBODY IS AT RISK FOR DEVELOPING AN ADDICTION PROBLEM.

DR. DICKINSON: A LARGE PART OF THE DIFFERENCE MAY BE AN UNWILLINGNESS TO TRY IT THE FIRST TIME. THERE ARE A GREAT NUMBER OF PEOPLE WHO NEVER BECOME ADDICTED MAYBE BECAUSE THEY'VE NEVER TRIED COCAINE. MAYBE IF THEY TRIED IT, THEY WOULD BECOME ADDICTED THE VERY FIRST TIME.

KALAFSKI: WE DON'T LIKE TO FEEL OUR PAIN. WE DON'T LIKE TO BE UNCOMFORTABLE. AND WHEN WE FIND SOMETHING THAT WORKS AND MAKES US FEEL BETTER, WE WILL DO IT AGAIN AND AGAIN.

CHUCK SNOWDEN: I THINK THAT ADDICTIONS ARE LEARNED BUT I THINK THE MAIN THING WITH ADDICTION IS BECAUSE IN OTHER AREAS YOU DON'T GET THE GOODIES YOU WANT. YOU GET MORE OUT OF ADDICTION THAN YOU DO FROM OTHER GOODIES.

BETSY DeCASTRO: YOU WANT TO LOOK FOR WHAT'S HAPPENING FOR THEM THAT THEY WANT TO FEEL BETTER SO THEY'RE GOING TO THIS METHOD OF FEELING BETTER. WHAT FEELS BAD?

BOY: IT WAS MOSTLY MY FAMILY BECAUSE MY MOM AND MY DAD SPLIT UP. MY DAD LEFT MY MOM OUT THERE WITH NO PLACE TO LIVE AND I DIDN'T HAVE NO PLACE TO LIVE. NONE OF US DID EXCEPT MY DAD AND THAT JUST GOT TO ME UNTIL ONE DAY ALL THAT ANGER JUST BUILT UP 'TIL ONE DAY ONE KID PUSHED MY BUTTON AND IT ENDED UP ME GETTIN' IN TROUBLE BY ASSAULTING HIM.

GIRL: MOM WAS NEVER AROUND TO HELP ME. SHE NEVER TALKED TO ME. SHE WASN'T A VERY SOOTHING PERSON. SHE WAS NEVER THERE. SHE DIDN'T SEEM TO CARE ABOUT WHAT I WAS DOING, WHERE I WAS GOING, HOW I WAS IN SCHOOL. WHAT I WAS DOING HERE, WHAT I WAS DOING THERE, SHE NEVER CARED. SO I HAD TO DEAL WITH IT MYSELF, I SOOTHED MYSELF.

GIRL: THAT'S WHY I DRANK, 'CAUSE I DIDN'T REALLY LIKE MYSELF AND I DIDN'T REALLY WANT TO LIVE. I DIDN'T THINK IT WAS GONNA KILL ME BUT I JUST THOUGHT WELL THIS IS WHAT MAKES ME HAPPY. SO, WHENEVER I WAS SAD I WOULD JUST BE LIKE, "I WANT TO DRINK."

GIRL: I STARTED WITH DIET PILLS AND SPEED CUT MY APPETITE. I THOUGHT THIS IS PERFECT. NOT ONLY DOES IT CLEAR UP MY DEPRESSION IT, IT HELPS ME LOSE WEIGHT.

BOY: SINCE I HAD A LOWER SELF ESTEEM TO BEGIN WITH, IT WAS DEFINITELY EASIER FOR ME TO BE DRAGGED INTO SOMETHING, LIKE PORNOGRAPHY.

GIRL: THE REASON WHY I THINK I GOT ADDICTED WAS BECAUSE I NEEDED TO NUMB THE PAIN. SO, YOU KNOW, BECAUSE AROUND ABOUT THAT TIME I DID HAVE A LOT OF PAIN THAT NEEDED TO BE NUMBED. I HAD A LOT OF PROBLEMS. STUFF THAT NO FOURTEEN YEAR OLD GIRL COULD EVER DEAL WITH.

BOY: I DIDN'T WANT TO THINK ABOUT ANYTHING. SO I DRANK. DIDN'T WANT TO THINK ABOUT NOT HAVING A DAD MY WHOLE LIFE. DIDN'T WANT TO THINK ABOUT NOT REALLY HAVIN' A MOM MY WHOLE LIFE. DIDN'T WANT TO THINK ABOUT MY MOM'S HUSBAND ABUSING ME. JUST DIDN'T WANT TO THINK OF NONE OF THAT. JUST WANTED TO DRINK IT AWAY, I GUESS.

NARRATOR: SEEKING TO NUMB PAIN AND ESCAPE PROBLEMS ARE TWO OF THE MAIN REASONS PEOPLE GET STARTED ON THE ROAD TO ADDICTION, BUT THEY'RE NOT THE ONLY ONES.

BOY: TO BE RECOGNIZED I LIKE A LOT, TOO. AND SO I KINDA GOT STUCK ON THE IDEA THAT IF I DID THIS RIGHT NOW, EVERYBODY WOULD SEE ME DOING IT AND THAT WOULD MAKE ME COOLER.

BOY: I KINDA FIGURED THAT, AH, ALL THE DRUGS I DID, THAT WAS LIKE MY WAY, MY EXCITEMENT. THAT WAS MY WAY OF SAYING, YOU KNOW, (BLEEP) YOU. I DON'T HAVE TO DO WHAT YOU SAY. YOU KNOW, I CAN DO WHAT I WANT. I CAN BE FREE. YOU KNOW, IF I WANNA, IF I WANNA HAVE A RUSH, WANNA GET HIGH, I CAN GET HIGH AND HAVE A RUSH.

GIRL: WHY DID I START? BECAUSE I WAS AROUND MY COUSINS AND THEY WERE DOIN' IT AND I THOUGHT IT WAS OKAY. AND THEY SAID THAT, I MEAN, WELL, THEY TOLD ME THAT MY MOM WOULD NEVER FIND OUT AND IT WOULDN'T CHANGE ME. I JUST WANTED TO BE MY OWN PERSON. I WANTED TO BE GROWN. I WANTED TO DO THINGS MY WAY. AND I DIDN'T LIKE LISTENING TO ANYONE, I DIDN'T LIKE HEARING ANYONE'S VOICE. SO, I DECIDED TO USE DRUGS AND DRINK ALCOHOL AND BE GROWN.

BOY: IT FEELS LIKE YOU'RE INVINCIBLE, KINDA. YOU KNOW, IT'S A BIG RUSH WHEN YOU START WINNING AND YOU SEE EVERYONE ELSE'S MONEY AND IT'S DWINDLING AND YOURS IS JUST SITTIN' THERE WITH A BIG, A BIG WAD AND IT'S JUST A RUSH.

BOY: I HAD JUST MOVED INTO A NEW SCHOOL, I HAD BEEN MOVING A LOT, I'VE ALWAYS MOVED A LOT. SO, I COULD GET ACCEPTED PRETTY QUICK BUT NOT IN THIS TOWN WHERE I MOVED, YOU KNOW, EVERY WHERE I WENT THEY HAD THESE DRUGS AND, AND THIS IS WHAT THEY WERE DOIN' AND I WAS PRETTY MUCH AN OUTCAST,

THE ONLY PERSON THAT WASN'T REALLY DOIN' THEM. AND A PERSON ASKED ME TO TRY, A FRIEND OF MINE AND I SAID OKAY. I TRIED AND I LIKED IT. AND I KEPT GOING.

NARRATOR: IN PART TWO WE WILL LOOK AT THE CONSEQUENCES OF ADDICTION AND HOW THEY AFFECT YOUR EVERYDAY LIFE. AS WE'VE SEEN, THE ROOTS OF ADDICTION CAN BE FOUND IN MANY PLACES BUT WHILE THE ROOTS TO ADDICTION MAY DIFFER, FOR THOSE WHO GET HOOKED BY A SUBSTANCE OR BEHAVIOR, THE EXPERIENCE AND THE PROGRESSION OF THEIR ADDICTION IS OFTEN THE SAME....

KALAFSKI: I LIKE TO LOOK AT USE OF SUBSTANCES OR BEHAVIORS USING, FIRST PEOPLE EXPERIMENT WITH THE SUBSTANCE OR WITH THE BEHAVIOR, KINDA SEE THE EFFECTS. IF IT'S POSITIVE, THEY MAY GET INTO SOME KIND OF HABITUAL PATTERN OF USING. AND THEN, SLOWLY IT MAY TURN INTO AN ABUSIVE PATTERN.

BOY: I JUST MET THIS KID, RIGHT, AND UH, HE WAS QUITE A BIT OLDER THAN ME. HE WAS ABOUT FIFTEEN. AND, HE TOOK ME TO THIS PARTY AND EVERYONE WAS DARING ME TO TAKE A COUPLE REAL BIG SHOTS OF TEQUILLA. AND AT FIRST I WASN'T GAME BUT THEN I JUST SAID, "MIGHT AS WELL TRY IT." I STARTED DRINKING QUITE A BIT AFTER THAT I DIDN'T STOP FOR ABOUT THREE OR FOUR YEARS.

BOY: I PROBABLY STARTED BACK WHEN I WAS IN ABOUT FIFTH GRADE WITH MY NEIGHBORS AND HIS BROTHERS. AND IT TURNED INTO GAMBLING ABOUT EVERY DAY AFTER SCHOOL.

GIRL: MY FRIEND'S MOM WOULD BUY IT FOR US SO WE COULD JUST ASK HER ANY TIME. AND I WOULD DRINK BUT ONLY A LITTLE BIT, NOT EVEN ENOUGH TO GET DRUNK JUST FOR A BUZZ, MAYBE. AND THEN JUST ONE TIME I HAD A BIG BOTTLE AND I JUST DRANK A LOT. AND EVER SINCE THEN I JUST LIKED TO.

GIRL: WELL, THE FIRST TIME I DIDN'T BECAUSE IT STUNK AND IT GAVE ME A HEADACHE. BUT AFTER I KEPT USING IT, I LIKED IT.

BOY: PORNOGRAPHY TOOK A HOLD OF MY MIND AFTER MY FIRST USE. I THINK I WAS ABOUT TWELVE AND, ONE OF MY FRIENDS CAME OVER AND I FIRST SAW, JUST A BRIEF PICTURE ON THE COMPUTER, OVER THE INTERNET. AND, I WAS COMPLETELY JUST TAKEN BY IT AND, YOU KNOW, IT JUST STUCK WITH ME AND I JUST WANTED TO SEE MORE AND MORE AND MORE.

KALAFSKI: AND THEN ONCE YOU FIND THAT ABUSE PATTERN WORKING YOU KIND OF BECOME DEPENDENT. IT GOES FROM DOING IT ON WEEKENDS TO DOING IT EVERY DAY. BEFORE SCHOOL. MISSING SCHOOL. REGARDLESS OF WHAT THE ADDICTION IS.

BOY: I WAS, YOU KNOW, DRINKING SOMETHING, JUST A LITTLE BIT OF SOMETHING TO GET TO SLEEP AT NIGHT AND I WAS SNORTING A LINE IN THE MORNING TO WAKE UP. SMOKING POT DURING THE DAY TO GET AN APPETITE. SO, IT WAS SOMETHING FOR SOMETHING, YOU KNOW? AND IT SEEMED LIKE NOTHING WE DID AT THAT TIME WE WOULD DO SOBER. WE HAD TO BE HIGH ON SOMETHING.

GIRL: IT'S LIKE WITH ME, I EAT A MEAL I HAVE TO SMOKE RIGHT AFTER MY MEAL, AFTER WATCHING THE TV SHOW, LIKE AN HOUR TV SHOW, I HAVE TO GO SMOKE A CIGARETTE. AND IT'S JUST, IT'S ON AND ON AND ON.

GIRL: I WOULD JUST LIKE WANNA DRINK MORE AND MORE, I WOULDN'T JUST GET A LITTLE BIT TO DRINK. I WAS JUST LIKE ALWAYS WANTING TO DRINK A LOT. AND ALMOST EVERY TIME I DRANK I COULDN'T, I WOULD DRINK TO THE POINT I BLACKED OUT.

GIRL: REGARDLESS OF THE FACT THAT I, OF COURSE, I ALWAYS WANT TO GO DANCING, I FEEL LIKE IF I DON'T GO, YOU KNOW, I'M MISSING OUT ON SOMETHING, I HAVE TO BE THERE. AND EVEN IF I'M NOT IN THE MOOD OR IF I DON'T FEEL GOOD, IF I'M SICK, I'LL STILL GO.

BOY: WHAT I SAW IN ME AND A LOT OF MY FRIENDS WAS JUST THE DESIRE TO DO IT ALL THE TIME AND WANTING TO DO IT AND BE SITTING IN CLASS AND JUST PULL OUT THE DICE AND JUST ROLL ME FOR A BUCK RIGHT HERE. OR PLAYING CARDS IN THE MIDDLE OF CLASS AND JUST DESIRING TO DO IT AND WANTING TO HAVE THAT RUSH. AND DESIRING TO DO IT ALL THE TIME, ON THE WEEKENDS, IN SCHOOL. LIKE, WHEN YOU HAVE SPARE TIME AND JUST WANTING IT ALL THE TIME.

MAN: AND WE SAY THE WORST THING THAT CAN HAPPEN TO A COMPULSIVE GAMBLER IS TO HAVE A BIG WIN. IT'S VERY SIMILAR TO DRUGS. THE HOOK IS WHEN YOU HAVE THAT WIN. ONCE YOU HAVE THAT BIG WIN, THAT

BIG RUSH, THEN THAT'S YOUR HOOK. THAT'S WHAT GETS YOU GOING. AND YOU CONSTANTLY CHASE THAT BIG WIN.

BOY: IT'S JUST LIKE KIND OF A DRIVE TO FIND NEW, PICTURES AND NEW PREVIEWS. SOMETIMES I WANTED TO GET OFF, BUT EMOTIONALLY I JUST STAYED GLUED TO IT.

GIRL: LIKE ONCE YOU'RE ON THAT TRAIN WHERE YOU'RE HOOKED, WHETHER YOU WANT TO BE THERE OR NOT, YOU CONTINUE IT BECAUSE YOU DO NOT WANT TO GET SICK. IT BECOMES TOTAL HABIT, IT CONSUMES YOUR LIFE TO THE POINT OF YOU CAN'T IMAGINE YOUR LIFE WITHOUT IT BECAUSE YOU WOULDN'T KNOW WHAT TO DO.

GIRL: I FEEL SOMETIMES LIKE I WOULD JUST DIE WITHOUT IT. LIKE I COULDN'T, YOU KNOW, IT'S THE ONLY THING I REALLY HAVE. AND WITHOUT IT I'D FEEL, YOU KNOW, LIKE, WHAT'S THE POINT OF GOING ON SOMETIMES. IT'S THAT IMPORTANT TO ME. BUT WHEN I DON'T GET TO GO AND I, YOU KNOW, I TRULY GET REALLY UPSET.

BOY: HALF THE TIME IT WAS BECAUSE, YOU KNOW, TO MAKE THE MOMENT GO OVER BETTER BUT IT'S CHASING THAT FIRST INITIAL HIGH WHEN I FIRST INITIALLY GOT HIGH OFF IT, THEY TELL YOU THAT TOO, LIKE IN REHAB AND STUFF, THEY TELL YOU THAT YOU DON'T GET HIGH ANYMORE LIKE THAT. THAT'S THE ONE, THE ONLY TIME THAT SOME PEOPLE CATCH THEMSELVES TRYING TO CHASE THAT HIGH, TRYING TO CHASE YOUR FIRST HIGH THEY CALL IT.

BOY: YEAH, IT WAS KIND OF A CHASE FOR THE FIRST, VIEWING OF IT. YOU KNOW, JUST OVER AND OVER AGAIN. BUT, IT WAS NEVER AS CAPTIVATING AS THE FIRST TIME.

KALAFSKI: THE PATTERN OF ADDICTION BECOMES LESS AND LESS SATISFYING THE LONGER YOU DO THE SUBSTANCE. MAYBE DRINKING FEELS GREAT AT FIRST OR SMOKING POT FEELS GREAT AT FIRST BUT DOWN THE ROAD YOU'RE NOT GETTING AS SATIATED BY USING THE SUBSTANCE. IT'S ALMOST JUST TO MAINTAIN WHERE YOU WERE.

BOY: IT'S TOO LATE WHEN YOU'RE USING, WHEN YOU HAVE TO USE A LOT MORE THAN WHEN YOU STARTED. AND JUST, JUST TO FEEL NORMAL. JUST TO FEEL, JUST TO FEEL A LITTLE HIGHER THAN WHAT YOU ALREADY FEEL.

GIRL: THAT'S ALL YOU THINK ABOUT ALL THE TIME IS YOU NEED TO GET HIGHER AND...WHEN IT RUNS OUT YOU'RE (BLEEP), YOU KNOW, YOU GOTTA GO GET MORE.

BOY: YOU'LL WIN AND THEN I PROMISE YOU'LL LOSE. AND THEN YOU'LL TRY AND MAKE THE MONEY BACK. AND YOU WON'T MAKE IT BACK AND YOU'LL KEEP GETTING DEEPER AND DEEPER IN DEBT. I PROMISE THAT'LL HAPPEN.

BOY: EVERY TIME I CAME DOWN I PROMISED MYSELF, YOU KNOW, I'M NOT GOING TO DO IT AGAIN. IT'S NOT GOING TO HAPPEN. IT'S NOT ME. I'M JUST...NOT GOING TO DO IT. AND THEN, A COUPLE HOURS LATER BE LIKE, AW MAN, I NEED SOME CRYSTAL, I NEED THIS, I NEED THAT. AND JUST START DOING IT AGAIN.

KALAFSKI: WHY IS IT SO DIFFICULT TO STOP? I THINK WE LIKE TO BE COMFORTABLE AS HUMAN BEINGS. AND...WHEN THINGS ARE DIFFICULT IT'S HARD NOT TO GO BACK TO WHAT HAS WORKED TO BE COMFORTING. EVEN IF IT'S NOT AS SATISFYING AS IT WAS BEFORE, IT'S STILL BETTER THAN BEING IN A NEW PLACE.

DR. DICKINSON: IT'S ALL CHEMICAL. THERE IS NO...I'M A, I'M A BEHAVIORIST. I'M A BEHAVIORAL NEUROSCIENTIST. I'M INTERESTED IN THE BIOLOGICAL BASIS OF BEHAVIOR. THERE IS NO BEHAVIOR THAT IS NOT BIOLOGICALLY DRIVEN. ANY ADDICTION IS BIOLOGICAL. YOU'RE TEACHING YOURSELF TO DO SOMETHING NEW. YOU'RE CHANGING THE CONNECTIONS IN YOUR BRAIN.

KALAFSKI: SO, ONCE YOU DEVELOP A CERTAIN PATTERN OF THINKING AND BEHAVING, CHANGING THAT PATTERN IS VERY UNCOMFORTABLE. VERY SCARY, FRIGHTNING. SO, IT'S EASIER TO CONTINUE ON.

NARRATOR: WHEN YOU HAVE ESTABLISHED A PATTERN OF USE OF A SUBSTANCE OR BEHAVIOR AND IT HAS PROGRESSED TO THE LEVEL OF ADDICTION, THE CHANGES THAT TAKE PLACE ARE NOT JUST IN YOUR BRAIN. THE IMPACT IS FELT IN EVERY AREA OF YOUR LIFE. IN PART TWO WE WILL LOOK AT THE CONSEQUENCES OF ADDICTION AND HOW THEY AFFECT YOUR EVERYDAY LIFE.

END OF PART ONE

PART TWO

NARRATOR: AS WE LEARNED IN PART ONE, WHEN YOU'RE TRAPPED IN A CYCLE OF ADDICTION, THINGS JUST KEEP GETTING WORSE.. AND EVEN THOUGH THE DRUG... OR THE ALCOHOL... OR THE HABITUAL BEHAVIOR ISN'T AS SATISFYING AS IT ONCE WAS, YOU CAN'T STOP.

NARRATOR: IN FACT, YOU FIND YOURSELF DOING MORE OF IT, MORE OFTEN. NOW, YOU ARE NO LONGER IN CONTROL, THE ADDICTION IS. AND BEFORE YOU KNOW IT, YOU'VE CHANGED. NOT JUST IN THE WAY YOU THINK OR FEEL, BUT IN THE WAY YOU LIVE YOUR LIFE.

NARRATOR: WHEN THE MOST IMPORTANT THING IN YOUR LIFE IS YOUR ADDICTION, YOUR WORLD GETS VERY SMALL. WHEN ALL YOU THINK ABOUT IS THE NEXT DRINK... THE NEXT CIGARETTE... THE NEXT THING TO BUY... THE NEXT WEB SITE.. THE NEXT WIN... THE NEXT FIX... YOUR RELATION SHIP TO EVERYTHING ELSE IN YOUR LIFE STARTS TO SUFFER.

NARRATOR: YOU START OFF USING A SUBSTANCE OR BEHAVIOR TO TRY AND ESCAPE YOUR PROBLEMS BUT PRETTY SOON YOU FIND YOU'VE CREATED MORE PROBLEMS THAN YOU EVER DREAMT OF...

GIRL: YEAH, THEN THAT'S WHEN YOUR PROBLEMS START. WHEN YOU START DRINKING AND USING OTHER SUBSTANCES FOR A WAY TO GET OUT OF THINGS, TO ESCAPE FROM THINGS.

BOY: YOU CAN'T THINK THAT YOU CAN CONTROL IT BY SEEING ONE PICTURE AND LETTING GO.

BOY: YEAH, IT'LL DEFINITELY GRADUATE TO BIGGER THINGS THAT CAN EITHER RUIN YOU OR MAKE YOU EXCITED THAT YOU WON AND THEN RUIN YOU LATER.

GIRL: LIKE PEOPLE, IF THEY DRINK ALL THE TIME, THEN THEY SAY, " OH, I'M JUST PARTYING. JUST HAVING A GOOD TIME." BUT REALLY THEY'RE JUST DRINKING SO THEY'RE SO PLASTERED THAT THEY'RE NOT DEALING WITH STUFF THAT'S GOING ON IN THEIR LIVES.

GIRL: I WOULDN'T GO TO SCHOOL ON TIME AND THEN I WOULD GET IN TROUBLE FOR THAT AND MY MOM SHE WAS LIKE, MAD AT ME, KINDA, ' CAUSE I WAS DRINKING SO MUCH. AND MY BROTHER, HE'S JUST...WELL, HE'S LIKE ALWAYS YELLING AT ME BECAUSE HE DIDN'T LIKE TO SEE ME DRUNK.

BOY: IT'S LIKE THE DRUGS, PEOPLE SAY THAT, YOU'RE PROBLEM THERE. IT'S NOT THE SAME PROBLEM ANYMORE, THOUGH. IT'S LIKE, FIFTY OTHER PROBLEMS COMBINED WITH THAT ONE PROBLEM. YOU'VE LEFT THE PROBLEM, YOU'VE GONE AND GOT HIGH, YOU'VE GONE AND DONE SOMETHING, YOU KNOW, TO GET AWAY FROM THE PROBLEM. WHEN YOU COME BACK THE PROBLEM ITSELF IS BIGGER AND IT'S LIKE FIFTY OTHER PROBLEMS IN THAT PROBLEM. IT JUST, IT EATS YOU UP.

GIRL: YOU LOSE YOURSELF FOR YEARS. YOU LOSE YOURSELF. AND THEN WHENEVER YOU FINALLY KICK FOR THAT FEW MONTHS OR WHATEVER, YOU GET THIS REALLY BAD REALITY CHECK. AND IT'S LIKE, <BEEP>, WHAT IS ALL THIS ABOUT? IT'S LIKE, YOU'VE LOST A LOT OF TIME. YOU'VE LOST...AND YOU DON'T EVEN THINK ABOUT THE PEOPLE YOU'RE HURTING.

GIRL: I MEAN, AT THAT POINT I WAS SO LOW, BECAUSE I WAS USING FOR SO LONG AND I'D LOST MY FAMILY AND I WAS STARTING TO, I MEAN, 'CAUSE WHEN I, WHEN I WAS A KID STEALING AND LYING WAS LIKE, NOT AN OPTION. THERE WAS NO WAY. I HAD SO MUCH INTEGRITY AND I HAD SO MUCH HONOR. AND THERE WAS NO WAY I WOULD DO THAT. AND ...I JUST, I GUESS I JUST BEAT MYSELF DOWN TO THE POINT OF LIKE, GOD, WHAT AM I DOING? YOU KNOW, IT'S LIKE, I'M A PIN CUSHION. I'M A LIVING PIN CUSHION. AND I, YOU KNOW, I DON'T GIVE A <BEEP> ABOUT ANYTHING OR ANYONE.

BOY: THERE WASN'T ANYTHING I COULD DO ABOUT IT, IT WAS...THE ALCOHOL TOOK OVER MY LIFE, PRETTY MUCH. TOOK OVER...EVERYTHING.

BOY: GOT TO THE POINT WHERE I THOUGHT LIKE IT WAS MORE NECESSARY TO GET WHAT I WANTED THAN TO DEAL WITH THE CONSEQUENCES.

DeCASTRO: SOME OF THE KIDS HAVE TALKED ABOUT PROGRESSING IN THEIR BEHAVIOR FROM, YOU KNOW, LESS INTRUSIVE SEXUAL BEHAVIOR, BEING ON THE COMPUTER, ON THE PHONE TO VOYEURISM, EXHIBITIONISM

AND ASSAULTING CHILDREN BECAUSE THEY FEEL THEY NEEDED MORE AND MORE AND MORE STIMULUS.

BOY: IN MY CASE I DIDN'T CARE ABOUT THE PERSON. ...AND, ...YOU KNOW, I HAD LIKE LITTLE OR NO RESPECT FOR MYSELF. JUST WANTED TO DO IT SO BAD THAT I COULDN'T CONTROL MYSELF.

DeCASTRO: THAT'S DANGEROUS, WHEN' THERE'S AN ESCALATION TO THE BEHAVIOR. THAT, YOU KNOW, LEADS ONE TOWARDS HARMING SOMEBODY. THAT BECOMES QUITE DANGEROUS AND OUT OF CONTROL.

NARRATOR: BEHAVIOR THAT IS DANGEROUS AND OUT OF CONTROL OFTEN GOES HAND IN HAND WITH THE ESCALATION OF AN ADDICTION... WHEN YOU'VE STOPPED CARING ABOUT YOURSELF AND OTHERS, BECOMING A VICTIM OR PERPETRATOR OF VIOLENCE IS NOT THAT BIG A STEP.

BOY: ME AND MY FRIEND, SEE, WE GO TO ROB THIS GUY AND IT WENT WRONG AND SO MY FRIEND, SLINKY, HE WENT AROUND AND HE WENT ACROSS THE RIVER AND HE STABBED THE GUY THAT WE WERE TRYING TO ROB. AND THE GUY FELL IN THE RIVER AND CAME ACROSS TO WHERE I WAS. AND I WAS ALL MESSED UP AND EVERYBODY WAS LIKE, "HOLD HIM! HOLD HIM!" AND SO I GRABBED HIM AND I WAS JUST GONNA HOLD HIM THERE AND, HE, HE SWUNG AT ME AND I WAS KINDA, I WENT OFF ON HIM.

BOY: IT OFTEN MADE ME ANGRY WHEN SOMEBODY WOULD COME UP TO ME OR WHATEVER, YOU KNOW, JUST A, APPROACH I DIDN'T LIKE IF I WAS ON IT AND I'D JUST SPARK UP, LIGHT UP REAL QUICK. I'D GET ANGRY AND THEN I'D GO OFF AND, WE USED THAT A LOT TO GO START FIGHTS, ME AND MY FRIENDS DID.

GIRL: WHEN I GOT AFFILIATED WITH THIS GANG, A GANG THAT I AM IN, I GOT, I WAS DRUNK AND I HAD TO FIGHT THIS GIRL. I FOUGHT HER IN THE ALLEY AND I BEAT HER UP AND ONE OF MY FRIENDS, HE WAS, HE'S A MALE, HE CAME, WELL, HE GRABBED ME BY MY SHIRT AND I WAS DRUNK THAT NIGHT AND HE DRAGGED ME DOWN THE STREET BY HIS CAR FOR TWO BLOCKS.

GIRL: I'VE BEEN RAPED THREE TIMES. AND TWO OF THE TIMES WERE BECAUSE OF BAD SITUATIONS THAT I GOT MYSELF INTO. AND, YOU KNOW, I JUST, THE LAST ONE WAS WITH THE BOYFRIEND THAT I STOLE THE CAR FOR. HE LET HIS FRIENDS AND HIM TAKE ADVANTAGE OF ME WHEN I, WHEN I WAS SLEEPING BECAUSE I'D BEEN UP SO LONG.

BOY: YOU DON'T REALLY KNOW YOU'RE ABOUT TO SNAP OR NOTHING. AND YOU DON'T REALLY THINK ABOUT IT WHEN YOU'RE DOING IT. LIKE YOU GO OFF AND YOU START BEATING SOMEBODY UP OR SOMETHING WHEN YOU'RE COMING DOWN, YOU DON'T, YOU DON'T REALLY THINK ABOUT IT, IT'S JUST ALL OF A SUDDEN YOU'RE SWINGING.

BOY: YEAH, I GET REAL VIOLENT. AND, LIKE SAY THE NEXT DAY IF I DIDN'T HAVE A BEER RIGHT AWAY I'D GET REAL CRANKY AND...I COULD GET VIOLENT THEN, TOO.

GIRL: AND I'VE BEEN IN QUITE A FEW FIGHTS. AND, YEAH, I GET PRETTY, I GET ANGRY, VIOLENT, YOU KNOW, BECAUSE I'M ANGRY, I'M PISSED OFF AND I'M IN A PLACE WHERE...YOU KNOW, ESPECIALLY WHEN I'M ON MY PLATFORM AND SOMEONE GETS UP THERE AND THEN BUMPS ME AND I GET COMPLETELY IRRATIONAL AND OUT OF CONTROL.

NARRATOR: VIOLENCE AND ABUSE ARE SOME OF THE MORE EXTREME CONSEQUENCES OF ADDICTION. WHEN ADDICTIVE BEHAVIOR GETS OUT OF CONTROL, IT CAN DAMAGE ALL AREAS OF YOUR LIFE.

DeCASTRO: THAT'S WHERE I THINK ADDICTION...DEFINITION, A DEFINITION OF ADDICTION WOULD BE THAT IT INTERFERES WITH YOUR EVERYDAY FUNCTIONING. WITH YOUR FAMILY, WITH YOUR SCHOOL, YOU CAN'T CONCENTRATE. YOU CAN'T BE PRESENT WITH PEOPLE BECAUSE YOU ARE THINKING ABOUT HOW AM I GOING TO GET THERE AND DO THAT?

MAN: WELL, FIRST OF ALL, IT DOMINATES MY LIFE. I LIE. I'LL DO ANYTHING TO GAMBLE. I WILL SAY THAT I'M GOING TO BE SOME PLACE AND WON'T BE THERE SO I CAN GO GAMBLE. I'LL THINK ABOUT GAMBLING ALL THE TIME. I NEGLECT ALL THE OTHER PARTS OF MY LIFE.

KALAFSKI: THE FIVE AREAS I LIKE TO LOOK AT TO SEE IF AN ADDICTION IS GETTING OUT OF CONTROL; I LIKE TO LOOK AT THE PERSON'S RELATIONSHIPS. IS THIS LIMITING THE QUALITY OR THE AMOUNT OF THEIR RELATIONSHIPS? ARE THEY UNABLE TO KEEP THEIR FRIENDSHIPS? IS THIS ADDICTION KEEPING THEM FROM HAVING INTIMATE AND

MEANINGFUL RELATIONSHIPS? IS THIS ADDICTION CAUSING A PROBLEM AT SCHOOL? ARE THEY MISSING CLASSES OR NOT DOING THEIR HOMEWORK? IS IT CREATING FINANCIAL PROBLEMS? THEY DON'T HAVE THE MONEY THEY NEED TO LIVE A SATISFYING LIFE. IS THERE SOME KIND OF HEALTH PROBLEM GOING ON? WHETHER THAT IS FROM NOT FEELING WELL AND GETTING SICK OFTEN OR MAKING RISKY CHOICES WHEN THEY'RE HIGH. OR IS THERE SOME KIND OF LEGAL CONSEQUENCES? I THINK PEOPLE MINIMIZE HOW STRICT SOCIETY HAS BECOME ON DRUG USE. AND IF YOU GET BUSTED YOU'RE GOING TO SPEND A LOT OF MONEY, A LOT OF TIME DOING COMMUNITY SERVICE, GETTING COUNSELING, POSSIBLY GOING TO JUVENILE DETENTION. AND IT'S VERY, VERY UNPLEASANT.

NARRATOR: SO LET'S TAKE A CLOSER LOOK AT THESE FIVE AREAS OF YOUR LIFE WHERE ADDICTION CAN HURT THE MOST:

RELATIONSHIPS
SCHOOL
MONEY
LEGAL
HEALTH

DR. GERARD GRAHAM: SOME OF THE MAIN HEALTH ISSUES THAT I SEE, THE DOCTORS SEE, WITH REGARD TO ADDICTIONS ARE, PROBABLY SMOKING IS THE MOST COMMON THING YOU SEE IN THE CLINIC ON A DAY TO DAY BASIS. THE CONSEQUENCES OF SMOKING.

GIRL: I HAD BRONCHITIS ABOUT TWO WEEKS AGO. AND IT WAS REALLY BAD, I COULDN'T BREATHE. MY CHEST HURT. I WAS HACKING UP ALL KIND OF, ANYTHING AND EVERYTHING THAT I COULD BRING UP OUT OF MY LUNGS, YOU KNOW, IT WAS REALLY BAD.

SNOWDEN: I ASK KIDS, "DO YOU KNOW SMOKING IS BAD FOR YOU?" THEY GO, "I DON'T KNOW." THAT'S A LIE. YOU DON'T KNOW SMOKING IS BAD FOR YOU? SEE THIS RIGHT HERE? OR HERE, I'M GIVING YOU FIVE DOLLARS. AFTER SCHOOL WE'LL GO ON OVER TO THE HOSPITAL TO VISIT SOMEONE WHO HAS CANCER FROM SMOKING.

DR. GRAHAM: I WOULD LOVE TO HAVE SOME YOUNG SMOKERS COME WITH ME WHEN I GO AROUND THE, WARDS. JUST TO SHOW THEM WHAT, WHAT SMOKING CAN DO. FORGET CANCER, FORGET ANY HEART DISEASE, JUST EMPHYSEMA. IF YOU OR I WERE TO GO OUT AND SPRINT A BLOCK, JUST SPRINT DOWN THE END OF THE BLOCK, RIGHT WHEN YOU FINISH THAT SENSATION OF BEING UTTERLY OUT OF BREATH, GASPING FOR AIR, PEOPLE WITH EMPHYSEMA HAVE THAT SENSATION ALL THE TIME.

GIRL: RIGHT NOW I DON'T DO A WHOLE LOT OF SPORTS, ACTIVITIES, ANYTHING LIKE THAT THAT HAS TO DO WITH A LOT OF MOVEMENT. AND IF I QUIT, I CAN DO THAT STUFF I WANT TO DO.

DR. GRAHAM: THE OTHER DRUGS THAT WE SEE USED FREQUENTLY, AND AGAIN, ALCOHOL IS PROBABLY THE SECOND MOST COMMON THING. PEOPLE WHO ARE YOUNG TEND TO BE THE ONES WHO DRINK IN EXCESS, OFTEN. AND SO YOU'LL SEE PEOPLE COME IN WITH VARIOUS INJURIES TO THEIR BODIES FROM, FROM MOTOR VEHICLE ACCIDENTS. AND A LOT OF THOSE PEOPLE DON'T MAKE IT.

BOY: IT'S NOT PART OF WHAT YOU ARE THINKING. YOU'RE NOT THINKING, "WELL, WHEN I GET DRUNK I MIGHT BURN THE BUILDING DOWN AND SHOOT MY FRIEND." YOU KNOW, YOU'RE THINKING, EVERYBODY'S LAUGHING AND HAVING A GOOD TIME, BE PART OF IT. UNTIL YOU'RE GOOD TIMED INTO A COMA.

GIRL: I HAD MIXED A LOT OF DRINKS TOGETHER AND I WAS SMOKING WEED AND I HAD TOOK LIKE, I THINK I TOOK A HALF A HIT OF ACID. AND I HAD DOWNED ALL OF IT. I DIDN'T SIP ON IT, I DOWNED IT ALL AND THAT'S HOW I GOT ALCOHOL POISONING. I WAS THROWING UP ALCOHOL FOR LIKE, FOUR DAYS.

DR. GRAHAM: AND THEN THE HARDER DRUGS, HEROIN AND THAT AND COCAINE AND SO FORTH, WE SEE LESS FREQUENTLY. JUST BECAUSE THE DRUGS AREN'T USED AS MUCH. BUT THE CONSEQUENCES ARE EQUALLY IF NOT MORE RAVAGING. PEOPLE WHO USE HEROIN OFTENTIMES END UP DYING.

GIRL: I HAVE LIVER DAMAGE OF SOMEONE WHO'S BEEN AN ALCOHOLIC FOR FIFTY-FIVE YEARS FROM JUST USING HEROIN.

BOY: PHYSICALLY? I'LL BE LIKE SMOKING A LOT OF FOILEES AND SMOKING OUT OF ANYTHING I COULD FIND AND STUFF LIKE THAT. IT'S REALLY LIKE, IT'S MESSED UP MY LUNGS REAL BAD. BECAUSE I DON'T, I DON'T HAVE

ASTHMA OR ANYTHING BUT AT TIMES I HAVE TO USE AN INHALER TO OPEN UP MY LUNGS.

GIRL: YOU KNOW, I'VE BEEN SO CONSTANTLY SICK THAT IT'S, I GET SICK WHENEVER THERE'S LIKE A GERM BY ME. YOU KNOW, I GET SICK BECAUSE I HAVE LIKE HARDLY ANY IMMUNE SYSTEM.

GIRL: FOUND OUT I WAS HIV POSITIVE FEBRUARY 6, 1995. AFTER I HAD JUST GOTTEN OFF THE STREETS OF VANCOUVER MY MOTHER HAD COME UP THERE, FOUND ME. IT'S INEVITABLE IF YOU'RE GOING TO USE OTHER PEOPLE'S NEEDLES ON THE STREET UP THERE YOU'RE GOING TO GET HIV, PERIOD. AND I DID.

NARRATOR: BUT IT'S NOT JUST THE HARD DRUGS LIKE HEROIN, SPEED, AND COCAINE THAT CAN HARM YOU, MARIJUANA CAN ALSO DAMAGE YOUR HEALTH.

KALAFSKI: ONE OF MY CONCERNS IS THAT PEOPLE CAN MINIMIZE THE EFFECTS OF A DRUG LIKE POT. MEDICAL RESEARCH SAYS THAT OUR LUNGS DON'T FULLY DEVELOP INTO OUR TWENTIES. AND THAT POT SMOKING HAS A DRAMATIC EFFECT ON HOW MUCH OXYGEN OUR BODY IS GOING TO BE ABLE TO USE. AND OF COURSE YOU'RE NOT GOING TO FEEL AS WELL PHYSICALLY.

NARRATOR: ADDICTIVE BEHAVIOR CAN ALSO TAKE ITS TOLL ON YOUR HEALTH.

MAN: I WOULD WORK ALL DAY AND GAMBLE MOST THE NIGHT AND THEN DRIVE BACK. AND WORK. AND OF COURSE I WOULD DO THAT, I WOULDN'T SLEEP. FINALLY, MY PHYSICAL HEALTH WENT AND I ENDED UP IN A HOSPITAL.

BOY: I WOULD SAY MY ACTUAL CONSEQUENCE WASN'T PHYSICAL, IT WAS EMOTIONAL. BECAUSE, I HAD SO MANY PICTURE FLASHBACKS. YOU KNOW, I'M DEFINITELY NOT BLAMING MY OFFENSE FOR, BECAUSE OF PORNOGRAPHY. BUT THAT DEFINITELY LED TO MY EMOTIONAL, MENTAL BREAKDOWN.

DR. GRAHAM: THE HEALTH CONSEQUENCES OF ALL ADDICTIONS ARE DRAMATIC AND PROFOUND. AND THEY ALTER YOUR LIFE AND IF YOU DON'T STOP WHATEVER YOU'RE DOING AND CORRECT THE BEHAVIOR SOON ENOUGH, THE CONSEQUENCES WILL BE LIFE-LONG. WHAT I WOULD SUGGEST TO PEOPLE, BE REALISTIC, LOOK AROUND, SEE THE REAL WORLD. IT'S EASY TO SAY THAT'S NOT GOING TO HAPPEN TO ME. BUT IT WILL HAPPEN.

MARTINEZ: I THINK WHEN YOU'RE TALKING ABOUT ADOLESCENTS, SOME OF THEM HAVE EXPERIENCED ADDICTION BY THEIR PARENT'S ADDICTION AND THE LOSSES THAT THEY HAVE LOST WAS A LOSS OF IDENTITY, OF THE FAMILY. A LOSS OF CHILDHOOD.

GIRL: SINCE SHE WAS ALWAYS ADDICTED TO HER HUSBAND OR HER BOYFRIEND WHOEVER IT MAY HAVE BEEN AT THE TIME. THERE WAS TIMES WHEN I GOT OLDER I WAS COOKING, CLEANING DOING EVERYTHING SHE SHOULD HAVE BEEN DOING. I WAS TAKING CARE OF MY LITTLE BROTHER AND IT WAS JUST REALLY HARD ON ME TO TRY AND GO THROUGH THAT AND BE THE MOM. BECAUSE I WAS TRYING TO BE A MOM AT SEVEN OR EIGHT YEARS OLD.

NARRATOR: BEING THE CHILD OF AN ADDICT IS REALLY PAINFUL. AND BEING THE ONE WHO IS ADDICTED MEANS TO BECOME MORE AND MORE CUT OFF FROM YOUR FAMILY.

BOY: BECAUSE, YOU KNOW, I'D COME HOME AND STAY SECLUDED AND SORT OF LEAD MY LIFE OF SUBJECTIVITY TO THE INTERNET AND JUST A SECLUSION FROM MY PARENTS.

GIRL: I THINK IT WAS BECAUSE OF THE DRUGS THAT I JUST DESPISED MY PARENTS. I COULDN'T STAND EVEN LOOKING AT THEM, YOU KNOW, EVEN BEING AROUND THEM.

GIRL: IT IS HARD TO LISTEN TO YOUR PARENTS. BECAUSE YOU WANT TO BE YOUR OWN PERSON. YOU WANT TO BE GROWN BEFORE YOUR TIME.

GIRL: AND MOM, OH MAN, YEAH, I GOT INTO IT WITH HER ONE NIGHT AND MY DAD HAD TO HOLD ME DOWN. AND I DIDN'T STOP FIGHTING FOR TWO HOURS.

GIRL: I DON'T KNOW, I'VE ALWAYS BEEN AN ANGRY, SPITEFUL PERSON IN A LOT OF WAYS. BUT I WAS RAISED IN A VERY LOVING, OPEN FAMILY.

NARRATOR: BEING A PARENT OF AN ADDICT CAN ALSO BE DEVASTATING.

MOTHER: I WAS DETERMINED TO SAVE HER. AND SHE DOES SAY NOW THE ONLY REASON SHE'S ALIVE IS BECAUSE OF ME. AND I THINK THAT'S ABSOLUTELY TRUE. BECAUSE I FEEL LIKE, YOU KNOW, EVERYBODY ELSE WAS SAYING, "MAGGIE, LET HER GO. SHE'S A JUNKIE. SHE'S GOING TO KILL HERSELF. SHE WANTS TO KILL HERSELF, YOU CAN'T SAVE PEOPLE WHO WANT TO DIE."

GIRL: I WAS PSYCHOTIC, COPIN' ON THE STREETS AND DOING THE DRUGS EITHER IN A BUS STATION, BATHROOM, IN AN ALLEY, ABANDONED HOUSES...

MOTHER: WHENEVER SHE'S HIGH SHE TURNS INTO A DIFFERENT PERSON. I KNOW SHE GOT HIV UP THERE SOMETIME WHILE LIVING ON THE STREET.

GIRL: BEFORE I EVEN GOT THE RESULT I KNEW THAT I WAS POSITIVE I DON'T KNOW WHY. PROBABLY BECAUSE I WAS SO SICK THAT WHEN I KICKED DOPE THAT TIME, I WAS SO SICK, THAT I KNEW SOMETHING HAD TO BE WRONG.

MOTHER: THAT'S PROBABLY THE HARDEST MOMENT OF MY LIFE.

GIRL: AND MY MOTHER ALWAYS HAD ASKED ME, ALL THROUGH THE TIME THAT I WAS USING DRUGS, SHE WAS LIKE, "WHEN IS THIS GOING TO STOP?"

MOTHER: I HAVE RELIVED THAT MOMENT MANY, MANY TIMES. IT FELT LIKE MY LIFE SORT OF ENDED THERE.

NARRATOR: ADDICTS END UP HURTING THEIR FRIENDSHIPS AS WELL.

BOY: PROBABLY JUST BECAUSE OF THE FACT THAT I DIDN'T WANT TO GET CAUGHT I WOULD STAY MORE SECLUDED. JUST KEEP TO MYSELF A LITTLE MORE.

GIRL: I WOULDN'T GIVE UP DANCING FOR ANYBODY. I MEAN, IF IT CAME DOWN TO THIS MAN OR DANCING, I'D HAVE TO CHOOSE DANCING. DEFINITELY. I WANT TO BE THERE AND I WANT TO DANCE ALL NIGHT. AND THAT'S NOT REALLY A DATE OR HOW AM I SUPPOSED TO GET TO KNOW SOMEONE, DANCING ON A PLATFORM.

GIRL: IS IT KIND OF LIKE YOUR ATTENTION IS SO CONSUMED BY THE ADDICTION THAT IT'S HARD TO PUT YOUR ATTENTION ON HAVING A FRIENDSHIP. AND BUILDING REAL FRIENDSHIPS AND REAL RELATIONSHIPS WITH PEOPLE.

GIRL: REALLY HARD BECAUSE WHENEVER ALL YOU HAVE AROUND YOU IS OTHER DOPE FIENDS. I CAST OUT ALL MY FRIENDS THAT WERE GOOD FRIENDS, I CAST OUT ALL MY GOOD FRIENDS BECAUSE OF THIS.

GIRL: YOU KNOW, FRIENDSHIP BECAME SECOND. HEROIN BECAME FIRST. YOU HAD HEROIN AND THEY'RE YOUR FRIEND. AND IT WASN'T THAT WE DIDN'T CARE ABOUT EACH OTHER, IT'S JUST WE GOT WHIPPED UP IN A WHIRLWIND OF THIS DRUG WHICH INEVITABLY ALMOST EVERYONE I KNOW DOES, AT SOME POINT AND TIME WHEN THEY CONTINUE TO DO IT AND NONE OF US CARED ABOUT ANYONE BUT OURSELVES AND OUR ADDICTION.

BOY: IF WE HAD FIVE MINUTES IN CLASS WHEN WE WEREN'T REALLY DOING ANYTHING JUST, "CHRIS, PULL OUT A DECK OF CARDS."

BOY: TEACHERS WOULD SAY, "YOU DON'T DO IT!" AND WE WOULD STILL JUST SIT THERE AND DO IT BECAUSE...I THINK THAT WAS PRETTY MUCH THE DEFINITION FOR ME.

GIRL: ...BECAUSE I WANT TO GO DANCING AND I'M TOO TIRED TO GO TO SCHOOL THE NEXT DAY OR I'M TOO TIRED TO WORK.

GIRL: I JUST WASN'T INTERESTED IN THEM NO MORE. IN NO SPORTS AND MY GRADES I DIDN'T CARE ABOUT.

GIRL: IT SEEMS LIKE A DIFFERENT STATE OF MIND. IT'S LIKE WHAT'S IMPORTANT IS NOT SCHOOL.

GIRL: WHEN YOU'RE IN SCHOOL AND YOU'RE DOING THOSE KIND OF THINGS YOU'RE NOT REALLY THERE. LIKE, YOU'RE THINKING, LIKE, "YEAH, CLASS WILL BE OVER AND I'M GOING TO GO SMOKE A BOWL." OR YOU KNOW, "I'M GOING TO GET BEER AFTER SCHOOL." OR YOU'RE MORE PREOCCUPIED WITH IT. YOU'RE NOT REALLY FOCUSED ON JUST BEING IN SCHOOL AND DOING YOUR WORK.

PENNY DeNOBLE: THERE ARE SOME STUDENTS WHO HAVE COME INTO THE BUILDING HIGH AND THEY WOULD GET SENT HOME. AND FOR THOSE STUDENTS THAT WE SUSPEND WHEN THEY COME INTO THE BUILDING HIGH, FOR HOWEVER MANY DAYS THEY'RE GONE, THEY'RE MISSING OUT. AND SO IT'S A SPIRAL EFFECT. ONE POOR CHOICE LEADS TO ANOTHER WHICH LEADS TO ANOTHER AND BY THE END OF THE GRADING PERIOD, THEY'VE FAILED.

BOY: SEVENTH GRADE AND I STOPPED GOING TO SCHOOL AND STARTED GETTING INTO MORE TROUBLE THAN I WAS ALREADY GETTING INTO.

GIRL: IT WAS MAKING ME NOT TO GO TO SCHOOL, DISOBEY MY PARENTS, STEAL, LIE. IT ALSO MADE ME KIND OF, I DON'T KNOW, IGNORANT. YOU CAN SAY THAT.

DeNOBLE: THE ONE KID IN PARTICULAR THAT I CAN THINK OF, HE IS VERY REGRETFUL THAT HE MADE SOME BAD CHOICES AND HAS THROWN AWAY HIS EDUCATION. AND JUST BEING IN A PLACE WHERE PEOPLE WERE KIND TO HIM, LIKED HIM. HE WAS A PART OF SOMETHING THAT WAS POSITIVE. I'VE HAD A NUMBER OF THEM CALL, THEY JUST RING THE PHONE OFF THE HOOK APOLOGIZING ABOUT HOW SORRY THEY ARE AND, YOU KNOW, THEY'VE LEARNED THEIR LESSON AND CAN THEY PLEASE COME BACK. UNFORTUNATELY, IT'S A HARD LESSON TO LEARN AND WE CAN'T TAKE THEM BACK.

BOY: I HAD A LOT OF MONEY, IF I HADN'T SPENT IT ALL ON DRUGS.

BOY: THE DOWN SIDE TO GAMBLING IS OBVIOUSLY, LOSING MONEY. AND THEN GETTING HOOKED AND TRYING TO FIGHT BACK UNTIL YOU'RE TOTALLY DRAINED.

MAN: CONSERVATIVELY, ON THE LOW SIDE, THE AMOUNT OF MONEY, THE AMOUNT OF ACTUAL MONEY I'VE LOST IN GAMBLING OVER THIRTY-FOUR YEARS, IT RANGES SOMEWHERE BETWEEN FIVE HUNDRED THOUSAND AND SIX HUNDRED THOUSAND DOLLARS. I'VE LOST A HOME BECAUSE OF GAMBLING.

GIRL: WHEN I WAS ON THE STREETS UP IN VANCOUVER I WOULD MAYBE AFFORD ONE DOLLAR FOR A PIECE OF CHOCOLATE CAKE OR A PIECE OF PIZZA AT THE CORNER STORE. AND ONCE A WEEK I WOULD BUY MYSELF A PACK OF CIGARETTES. OTHER THAN THAT, EVERYTHING ELSE WENT TO DRUGS. MONEY DOES NOT EXIST FOR ANYTHING ELSE BUT DRUGS.

STEVE WRIGHT: WE GET PEOPLE, LOT OF TIMES, TRYING TO PAWN STUFF THAT ARE SHAKING SO BAD THEY CAN'T EVEN FILL OUT A PERJURY FORM. IN WHICH CASE, I DON'T EVEN WANT TO DEAL WITH THEM. BECAUSE A LOT OF TIMES THOSE ITEMS COME UP HOT.

MAN: WE'LL DO ANYTHING TO GET MONEY TO GAMBLE. AND ONE OF THE FAVORITE WAYS FOR COMPULSIVE GAMBLERS TO GET MONEY IS TO START WRITING HOT CHECKS.

BOY: YOU'LL COME TO SCHOOL WITH TWENTY-FIVE BUCKS OR TEN BUCKS OR WHATEVER YOU COME WITH, YOU'RE LIKE, "THIS IS FINE. I'LL EITHER WIN OR I'LL STOP." BUT THEN YOU'LL BE PLAYING AND YOU'LL SIT OUT A COUPLE OF GAMES AND YOU'LL BE LIKE, "DUDE, LET ME BORROW TEN BUCKS."

GIRL: YOU KNOW, IT'S LIKE, I'D LIE, I'D CHEAT, I'D STEAL...PURSE SNATCH.

GIRL: I DIDN'T STEAL SO MUCH AS I LIKE, WOULD SELL MYSELF.

GIRL: YOU KNOW, I WOULD PAWN THINGS. I PAWNED A LOT OF STUFF. THINGS THAT I CAN NEVER GET BACK.

GIRL: I'VE PAWNED MY MOM'S JEWELRY, YOU KNOW, IT WAS THAT BAD. THOSE ARE THINGS THAT YOU CAN NEVER LIVE DOWN.

WRIGHT: I'VE SEEN PEOPLE THAT HUSTLE AND HUSTLE AND HUSTLE SO HARD JUST TO, YOU KNOW, MAKE A BUCK HERE, MAKE A BUCK THERE. AND IT'S JUST TO SPEND THAT MONEY ON DRUGS. AND IF THEY WORK THAT HARD FOR THEMSELVES, I MEAN, THE SKY'S THE LIMIT AS TO THEIR POTENTIAL.

BOY: WELL, WITH MY LEGAL CONSEQUENCES, I CAN'T USE THE INTERNET, LEGALLY. YOU KNOW, I HAVE LOTS OF RESTRICTIONS TO FOLLOW REGARDING COMPUTERS AND INTERNET AND STUFF JUST TO KEEP ME AWAY FROM IT.

GREG BROWN: I THINK WHAT KIDS DISLIKE THE MOST AND WHAT THEY DON'T REALIZE IS THAT WHEN GET INTO THE SYSTEM THEY LOSE CERTAIN CHOICES IN THEIR LIVES. OTHER PEOPLE ARE GOING TO START MAKING THOSE. AND THE FURTHER THEY GET ALONG WITH THAT THE MORE DECISIONS WE'RE GOING TO BE MAKING FOR THEM. AND ULTIMATELY THAT'S WHAT JUVENILE PRISON IS. IT'S A PLACE WHERE YOU GET TO MAKE VERY FEW DECISIONS ABOUT HOW YOU SPEND YOUR TIME. WE'RE MAKING ALMOST ALL OF THEM FOR YOU. KIDS THINK THAT THINGS GO AWAY AND WHAT THEY DON'T UNDERSTAND IS THAT THE SYSTEM DOESN'T GO AWAY. IT'S ALWAYS THERE. THEY MAY DISAPPEAR AND THEY MAY RUN AWAY BUT WE DON'T JUST SAY, "OH, WELL..."

BOY: I WAS STILL ON PROBATION. I WAS STILL GETTING IN TROUBLE. JUST GOING BACK TO JAIL ALL THE TIME. JUST DOING THE SAME THINGS. JUST KEEP GOING BACK AND BACK...

GIRL: EVERY TIME THAT I'D BEEN ARRESTED AND USED DRUGS I WAS HANGING OUT WITH THE WRONG PEOPLE. I WAS LOITERING. I WAS BURGLARIZING BECAUSE OF DRUGS.

GIRL: AND I MEAN I COULD DRINK STILL IF I WANTED TO BUT I DECIDED NOT BECAUSE I DON'T WANT TO END UP BACK IN JAIL BECAUSE I KNOW EVERY TIME I'M JUST GOING TO GET A TICKET. AND JUDGE COLE, HE REALLY, LIKE TALKED TO ME, LIKE PERSON TO PERSON AND SAID, " DON'T YOU WANT TO BE OUT OF THIS? DON'T YOU WANT TO GET OUT OF THIS? YOU'RE IN FRONT OF THIS TRUCK AND EVERYBODY'S TRYING TO PULL YOU AWAY."

MAGISTRATE T.J. COLE: ALCOHOL LEADS TO OTHER PROBLEMS. IT LEADS TO PEOPLE HAVING POOR JUDGEMENT. IT LEADS TO, ONCE THEY HAVE THE POOR JUDGEMENT, TO DOING THINGS THEY NORMALLY WOULDN'T DO AND THAT TENDS TO LEAD TO DELINQUENT BEHAVIOR WHICH THEN BRINGS THEM INTO THE JUSTICE SYSTEM AND THEN THEY'RE OFF AND RUNNING.

GIRL: I WAS WITH AN EX-BEST FRIEND AND ME AND HER WERE STAYING AT THIS HOTEL AND ACROSS THE STREET THERE WAS LIKE, A GAS STATION. WE WERE DRUNK OFF TEQUILA. AND WE DECIDED TO GO DOWN TO THE GAS STATION AND HOP IN SOMEONE'S CAR AND TAKE OFF. SO, THAT'S WHAT WE DONE AND GOT CAUGHT FOR IT. LIKE THIRTY MINUTES LATER ON THE HIGHWAY.

MAGISTRATE COLE: ONE OF THE THINGS THAT, YOU KNOW, THAT THE JUVENILE NEEDS TO BE CLEAR ON IS THAT THIS IS THE JUSTICE CENTER. THIS IS THE JUDICIAL SYSTEM AND THAT THEY'RE IN IT AND THAT THEY'RE GOING TO BE HELD ACCOUNTABLE AND RESPONSIBLE FOR ANY ACTIONS THAT THEY DO INDEED TAKE.

GIRL: I GOT A YEAR IN JAIL. A WHOLE YEAR, THREE HUNDRED AND SIXTY-FIVE DAYS IN JAIL FOR ALL MY BAD ACTIONS THAT I'D DONE WHICH IS NOT WORTH IT.

BOY: I'VE BEEN IN THIS FACILITY FOR THREE MONTHS. I GOT A FEW CHARGES OF BURGLARY AND CRIMINAL MISCHIEF AND A CHARGE OF AGGRAVATED ROBBERY. I WAS DOING A LOT OF METHAMPHETAMINES AND AT ONE POINT WE RAN DRY. WE NEEDED MONEY. THAT'S WHY WE ACTUALLY ROBBED THE GAS STATION. AND THAT'S WHAT GOT ME HERE. I WANTED TO BE A MAJOR LEAGUE BASEBALL PITCHER WHEN DRUGS CAME IN JUST STARTED LOSING INTEREST IN IT REALLY. STARTED LOSING INTEREST, NOT WANTING TO PLAY BASEBALL MUCH. AND THEN WHEN I STARTED TO GET STUFF BACK TOGETHER AND LAY OFF A LITTLE BIT I GOT BACK ON THE BASEBALL TEAM AND I WAS GOING TO BE A STARTING PITCHER. AND THEY CAME AND ARRESTED ME THE NIGHT BEFORE MY FIRST GAME WHICH I WOULD HAVE STARTED PITCH. AND THAT KIND OF GRABS YOU, YOU KNOW, TAKES YOUR DREAMS AWAY FROM YOU BECAUSE CRIMES THAT YOU COMMIT, I HAD ALREADY DONE. COULDN'T DO NOTHING ABOUT IT. AND I REALLY, REALLY, REALLY WANTED TO BE THERE FOR THAT GAME. I HAD TO LOSE ONE OF THE THINGS I LOVE MOST. SUFFER THE CONSEQUENCE. THAT'S WHAT I'M DOING HERE.

NARRATOR: LANDING IN JAIL AND MISSING OUT ON OPPORTUNITIES AND DREAMS ARE JUST A FEW OF THE MANY LOSSES YOU EXPERIENCE WHEN YOUR LIFE HAS BEEN TAKEN OVER BY AN ADDICTION.

BOY: I LOST A GREAT DEAL OF RESPECT FOR MYSELF, BECAUSE, YOU KNOW, I KNEW IT WAS WRONG BUT I JUST COULDN'T GET AWAY FROM IT.

BOY: I WAS A PEOPLE PERSON AND A LOT OF PEOPLE EVERYWHERE REALLY LIKED ME. I COULD DO ANYTHING ANYWHERE WITH ANYBODY AND NOT BE OUT OF PLACE. AND NOW I CAN'T DO THAT ANYMORE. NOW I'M STUCK IN THE HOOD. THAT'S ALL IT'S BEEN. THAT'S ALL IT COMES DOWN TO.

BOY: IT'S ALMOST LIKE, NO MATTER HOW BAD IT GETS, NO MATTER HOW BAD YOU GET TORTURED FROM IT, THERE'S NO WAY OUT.

NARRATOR: IN PART THREE WE WILL LOOK AT THE WAY OUT OF THE ADDICTION TRAP. OR BETTER STILL, HOW TO AVOID IT ALL TOGETHER.

PART THREE

NARRATOR: HERE'S WHAT WE'VE LEARNED ABOUT ADDICTION. YOU START USING A SUBSTANCE OR BEHAVIOR OUT OF CURIOSITY. TO NUMB PAINFUL FEELINGS. TO PARTY. TO GET A RUSH. TO ESCAPE EVERYDAY REALITY. WHATEVER THE REASON, IF YOU CONTINUE TO USE AGAIN AND AGAIN YOU RISK GETTING HOOKED. AND THEN, EVEN IF EVERYTHING IN YOUR LIFE IS FALLING APART, STOPPING IS ALMOST IMPOSSIBLE.

KALAFSKI: I THINK ONCE YOU GET ROLLING IT'S HARD...LIFE HAS A CERTAIN MOMENTUM TO IT. ONCE THE MOMENTUM GETS ROLLING IN A CERTAIN DIRECTION IT'S HARD TO STOP THAT AND HEAD IN A NEW DIRECTION.

GIRL: YOU KNOW, AFTER THAT LONG AND THAT INTENSE OF A DRUG RUN, IT'S LIKE YOU CAN'T...IT'S A REALLY BIG STEP TO DO WHAT YOU SHOULD HAVE DONE WHEN YOU WERE EIGHTEEN. INSTEAD OF STARTING TO BECOME A JUNKIE YOU SHOULD HAVE GONE OUT AND GOTTEN A JOB AND GOTTEN OUT ON YOUR OWN AND YOU KNOW, GONE TO SCHOOL, WHATEVER, YOU KNOW...

DOUG CALVERT: IN MY PRACTICE I HAVEN'T MET ANYBODY THAT SAYS, "I INTENDED TO BECOME AN ADDICT. I WANTED TO GO OUT AND GET HOOKED ON METH AND JUST TOTALLY HAVE EVERYTHING IN MY LIFE FALL APART." PEOPLE DON'T DO THAT. PEOPLE DON'T USE SO THEY DESTROY THEIR LIVES.

KALAFSKI: I THINK THAT YOU GET THE WARNING SIGNS BUT THE MIND IS VERY SLICK AND IT CAN SAY, "WELL, I'M NOT AS BAD AS THIS KID, I ONLY DO IT THIS MUCH. I'M YOUNG, I'M GOING TO STOP WHEN I GET OLDER." AND OFTENTIMES THAT'S NOT THE PATTERN THAT GETS PLAYED OUT. IT JUST CONTINUES ON UNTIL THERE'S REAL PROBLEMS.

GIRL: DON'T EVER START SMOKING. IF YOU DO, YOU'RE GOING TO GO THROUGH A LOT OF HARD STUFF. BECAUSE WHEN I STARTED SMOKING THAT'S WHEN A LOT OF MY HARD STUFF STARTED HAPPENING.

BOY: IT WAS A BAD THING I STARTED THAT I SHOULDN'T HAVE GOTTEN INTO. ENVIOUS OF ALL MY FRIENDS WHO NEVER STARTED.

GIRL: I DID A LOT OF STUPID THINGS. STUFF THAT I WOULDN'T DO IF I WAS SOBER.

GIRL: YOU KIDS, DON'T DO IT. IF I CAN GIVE ANYBODY A PIECE OF ADVICE, DON'T TRY IT ONCE BECAUSE THERE IS NO ONE TIME. AND IT'S NOT A RECREATION THING AT ALL, ANYWAY, EVER.

NARRATOR: ADDICTIONS DO COME IN DIFFERENT STRENGTHS. GETTING HOOKED ON HEROIN IS DEFINITELY MORE DANGEROUS THAN BEING ADDICTED TO DANCING. SMOKING CAN KILL YOU IN THE LONG RUN BUT CRACK CAN KILL YOU INSTANTLY. BUT ADDICTIONS OFTEN SHARE CERTAIN CHARACTERISTICS THAT CAN CREATE PROBLEMS. ONE PROBLEM IS THAT IN MANY CASES AN ADDICTION TO ONE SUBSTANCE OR BEHAVIOR GOES HAND IN HAND WITH OTHER ADDICTIONS.

GIRL: I HAVE MY CIGARETTES. I SMOKE A LOT. AND I'M REALLY ADDICTED TO THAT.

GIRL: I WAS JUST PRETTY MUCH DOING EVERYTHING. I TRIED A LOT OF DRUGS I SHOULDN'T HAVE.

BOY: ...ABOUT A YEAR I WAS GETTING ADDICTED TO COKE, TOO.

GIRL: ...I MEAN AT THAT POINT I WAS SHOOTING MORE COCAINE THAN HEROIN. I HAD TO HAVE HEROIN EVERYDAY JUST TO KEEP ME WELL BUT I WAS DOING AMAZING AMOUNTS OF COCAINE FOR DAYS ON END.

MAN: THE ADDICTIONS OCCURRED REALLY AT THE SAME TIME. I PLACED MY FIRST BET WHEN I WAS SIXTEEN AND I GOT DRUNK FOR THE FIRST TIME WHEN I WAS SIXTEEN.

NARRATOR: WHILE NOT EVERYONE WHO USES A SUBSTANCE OR BEHAVIOR GETS HOOKED, SOME SUBSTANCES ARE JUST TOO RISKY TO TRY.

KALAFSKI: SOME SUBSTANCES ARE SO ADDICTING, YOU KNOW, NICOTINE, COCAINE, METHAMPHETAMINES, HEROIN, ARE SO ADDICTING IT'S PROBABLY BEST NOT TO TRY THEM ONCE.

MAN: THINK OF WHAT THIS HAS DONE TO YOUR BODY FOR A LONG TIME. ALL OF YOU.

NARRATOR: AND SOME PEOPLE MAY BE EVEN MORE AT RISK FOR ADDICTION THAN OTHERS.

DR. DICKINSON: THE PROBLEM IS SOME PEOPLE CAN TRY IT ONCE AND NOT BECOME ADDICTED AND SOME PEOPLE CAN'T. THAT'S ONE OF THE BIG RESEARCH QUESTIONS IS, "WHAT IS THAT DIFFERENCE? WHAT IS IT THAT MAKES ONE PERSON ADDICTED AND ANOTHER PERSON NOT?" WE DON'T KNOW YET.

NARRATOR: ONE THING WE DO KNOW IS THAT AT THE ROOT OF ADDICTION THERE'S A CHOICE. YOU CHOOSE TO ALTER YOUR MOOD IN ORDER NOT TO HAVE TO DEAL WITH WHAT'S HAPPENING IN YOUR LIFE RIGHT NOW. STRESS, CONFUSION, BOREDOM, PAINFUL FEELINGS CAN ALL TRIGGER ADDICTIVE BEHAVIOR.

MAN: I WOULD DEFINE ADDICTION AS A FORCE IN SOMEONE'S LIFE THAT HELPS THEM FEEL BETTER, THAT HELPS THEM COPE WITH WHATEVER'S GOING ON IN THEIR LIVES, THEY BECOMES A REALLY DESTRUCTIVE KIND OF CRUTCH.

BOY: IF YOU DON'T HAVE A STRONG WILL, IF YOU DON'T REALLY CARE IF YOU'RE IN A STATE OF DEPRESSION OR WHATEVER, IF YOU DON'T HAVE A STRONG WILL, IT TAKES YOU OVER PRETTY EASY. I WAS PRETTY DEPRESSED, MOVING, YOU KNOW, THIS WAS THE LAST MOVE, I REALLY DIDN'T WANT TO MAKE. AND I WAS THERE AND A WAY TO ESCAPE MY PROBLEMS WAS PRESENTED TO ME AND I TOOK IT.

GIRL: ULTIMATELY, HAVING DRUGS IN FRONT OF ME OR HAVING DRUGS AROUND ME IS NOT THE PROBLEM. IT'S WHETHER OR NOT I'M ABLE TO HANDLE WHAT'S IN MY HEAD AND HANDLE WHAT'S GOING ON WITH ME EMOTIONALLY, YOU KNOW. IF I'M NOT ABLE TO HANDLE THAT THEN, YEAH, I'M GOING TO WANT TO DO DRUGS. IT'S MY STABLE DATUM IT'S WHAT I KNOW HOW TO DO, YOU KNOW, AND IT'S THAT WAY EVER SINCE I STARTED SMOKING POT AT THE AGE OF TWELVE. YOU KNOW, I'VE REACHED FOR SOMETHING EXTERIOR TO MYSELF TO HELP ME INSIDE.

KALAFSKI: WITH ADDICTION YOU CLOSE DOWN AND THAT'S THE ONLY POSSIBILITY OF HOW YOU CAN FEEL GOOD IN YOUR LIFE BECAUSE OTHER THINGS YOU'VE TRIED HAVEN'T WORKED. OR OTHER THINGS YOU'VE TRIED ARE MORE DIFFICULT LIKE TALKING WITH OTHER PEOPLE WHO CONFRONT YOU, IT'S MUCH MORE PAINFUL THAN GOING FOR SOMETHING YOU CAN CONTROL.

GIRL: IT WAS JUST LIKE IT'S THERE. I CAN HAVE IT, I WANT IT. THE TRIGGER THAT PROBABLY GOT ME WAS A LOT OF STRESS...HAPPENING IN MY FAMILY AT THE TIME.

KALAFSKI: LIFE PRESENTS CHALLENGES AND BY USING THE SAME COPING MECHANISM OVER AND OVER YOU'RE NOT EXPANDING TO FIND NEW WAYS AND FINDING YOUR OWN STRENGTHS.

BOY: ONE OF THE MAIN THINGS, TOO, IS THAT I OFTEN THINK ABOUT... ALL THESE INDIAN MEN WHO HAD ALL THIS POTENTIAL TO BE ALL THESE GOOD THINGS AND FELL SHORT OF IT BECAUSE OF THEIR ADDICTIONS TO ALCOHOL, MOSTLY, BUT BECAUSE OF THEIR ADDICTIONS. I DON'T WANT TO BE REGRETTING ALL THE CHANCES I HAD AND THAT I NEVER CAME THROUGH.

GIRL: LITTLE THINGS TURN INTO BIG THINGS. SO, IF YOU DON'T WANT TO...BECOME A PART OF THAT THEN YOU NEED TO, I MEAN, MAKE THAT CHOICE OF SAYING, "NO".

BOY: I ENDED UP INSTEAD OF, YOU KNOW, BEING ABLE TO GO TO PROM, INSTEAD OF BEING ABLE TO GET MY LICENSE AND GO DRIVING AROUND LEGALLY...INSTEAD OF BEING ABLE TO LIKE, KICK IT, GO TO HOMECOMING AND PLAY ON THE FOOTBALL TEAM...DO EVERYTHING THAT EVERY KID DREAMS OF DOING. LOOK AT WHERE I WAS, IT'S SUPPOSED TO BE THE BEST YEARS OF MY LIFE. MY HIGH SCHOOL YEARS, FUNNEST YEARS OF YOUR LIFE...YEAH, YOU WANT TO GO OUT AND PARTY? YOU WANT TO HAVE FUN? YEAH, I WANTED TO DO THE SAME THING. I WENT OUT AND PARTIED. CAN'T PARTY NO MORE. GOT LOCKED UP.

NARRATOR: IT'S ALL ABOUT THE DIFFERENT PATHS WE CAN TAKE. SO, IF ADDICTIONS ARE LEARNED AN IMPORTANT FACTOR IN CHANGING OR AVOIDING AN ADDICTIVE PATTERN LIES IN LEARNING POSITIVE WAYS TO DEAL WITH DIFFICULTIES.

DOUG CALVERT: A LOT OF WHAT PEOPLE CAN DO ISN'T NECESSARILY THE "JUST SAY NO" FROM SEVERAL YEARS AGO. IT'S MORE THAN THAT. THERE HAS TO BE OTHER THINGS THAT PEOPLE ARE DOING.

KALAFSKI: SO, I'D SAY ONE OF THE GOALS FOR ANYBODY IS TO TRY TO EXPERIENCE AS MANY DIFFERENT THINGS

AS THEY CAN SO THEY HAVE A VARIETY OF MECHANISMS TO PULL OUT TO DEAL WITH DIFFICULTIES IN THEIR LIFE.

THEATER: HAVEN'T YOU EVER WANTED TO HIT LIKE, A WALL? A CHAIR OR A TABLE OR SOMETHING?

NARRATOR: SO, LET'S TAKE A LOOK AT SOME OTHER WAYS PEOPLE HAVE FOUND TO COPE WITH PROBLEMS IN THEIR LIVES.

GIRL: I WAS FAT. AND PEOPLE WERE MEAN TO ME. I WAS ã DEPRESSED, LITTLE FAT KID AND I DIDN'T THINK THAT I COULD HANDLE THE CHANGE. I DIDN'T THINK I WANTED TO CHANGE THE WAY THAT I LOOKED AND FELT BUT...I HAD A GYM TEACHER IN SEVENTH GRADE WHO JUST PUSHED ME TO MY LIMIT AND MADE ME DO THINGS THAT I DIDN'T THINK I WANTED TO DO. BECAUSE I WAS SCARED. IT WAS TOO HARD. I'D NEVER EXERCISED BEFORE. I'D NEVER DONE ANYTHING PHYSICAL AND I JUST DIDN'T THINK I COULD HANDLE IT. BUT I WAS LIKE, I'M GOING TO TAKE ADVANTAGE OF THIS TEACHER THAT I HAVE HERE WHO'S WILLING TO HELP ME MAKE, YOU KNOW...CHANGE MY LIFE TO MAKE IT BETTER.

SNOWDEN: I TELL KIDS ALL THE TIME, "I'M NOT THE PERFECT TEACHER. I HAVE A LOT OF FAULTS. I'M EMOTIONAL. I'M OLD, YOU KNOW...I SCREAM. I'M NOT THE PERFECT TEACHER." BUT THE GOOD THING IS YOU AREN'T PERFECT EITHER. SO THAT'S WHY WE CAN WORK WITH ONE ANOTHER.

GIRL: YOU NEED TO TALK TO PEOPLE. ALL THE TIME. THAT'S MY WHOLE THING IS ALWAYS TRYING TO TALK ABOUT WHAT'S WRONG. AND TO LET PEOPLE HELP YOU. YOU KNOW, IF YOU CAN'T HELP YOURSELF THEN YOU NEED TO TRY TO REACH OUT AND, YOU KNOW, OPEN UP BECAUSE THERE'S SO MANY PEOPLE OUT THERE.

SNOWDEN: NO PERSON'S AN ISLAND. AND SO, EVERYBODY NEEDS HELP. SO, IF SOMEONE SAYS, "WELL, WHY CAN'T THEY JUST DO IT FOR THEMSELVES?" IT'S IMPOSSIBLE. WE ALL NEED HELP. HUMANS NEED HELP. IT'S PART OF BEING HUMAN. WE NEED HELP. WE NEED SOMEONE TO SAY, "HEY, GOOD JOB," OR, "BAD JOB." EVERYONE NEEDS HELP.

GIRL: IT IS ALL IN THE CHOICES YOU MAKE BECAUSE YOU CAN CHOOSE TO MAKE A GOOD THING OUT OF A BAD THING INSTEAD OF JUST GOING FROM BAD TO WORSE.

BOY: MY MOTHER PASSED AWAY WHEN I WAS FIFTEEN AND...I FELT PRETTY BAD. I HAD A LOT OF BAD THINGS GOING THROUGH MY MIND, STRESS, I WAS CONFUSED...YOU KNOW, THAT'S A PRETTY SEVERE ISSUE. DEATH IS PROBABLY ONE OF THE MOST SEVERE ISSUES. BUT OTHER THINGS YOU CAN JUST ABOUT GET OVER IT. YOU COULD GET OVER, YOU COULD DEAL WITH IT IN SOME WAY OR ANOTHER YOU CAN DEAL WITH IT. I BELIEVE ACTIVITIES ARE IMPORTANT BECAUSE THEY SOMETIMES...TAKE YOUR MIND OFF SOME THINGS. I SEE MY OLDER BROTHER AND MY FATHER, THEY BOTH WORK OUT QUITE OFTEN AND I KIND OF LIKE THE WAY THEY DID IT. SO, I JUST TOOK IT UP AS AN ACTIVITY. I LIKE THE GAINS THAT I MAKE...IT MAKES ME FEEL BETTER. IT MAKES ME FEEL MORE SELF CONFIDENT. IT'S GOOD FOR A LOT OF DIFFERENT THINGS. STRESS IS ONE OF THEM. STRESS...IF YOU'RE HAVING PROBLEMS, IF YOU HAVE SOMETHING ELSE ON YOUR MIND YOU CAN GO AND LIFT WEIGHTS AND...TAKE YOUR MIND OFF IT. CONCENTRATE ON OTHER THINGS. BY LIFTING WEIGHTS, FOR ME, IT TAKES MY WHOLE MIND FRAME. I HAVE TO CONCENTRATE ON THE WEIGHTS THAT I'M PUSHING UP OR WEIGHTS THAT I'M CURLING. BUT WHEN I GET THROUGH WITH ALL THAT MY MIND IS CLEAR. IT'S LIKE, OPEN AND I CAN THINK ABOUT OTHER THINGS WITH AN OPEN MIND.

GIRL: ...ELEVEN I MOVED TO CANADA WITH MY FAMILY. TO A NEW COUNTRY, NEW SCHOOL, VERY SMALL, LITTLE TOWN OUT OF THE CITY WHERE EVERYBODY HAD KNOWN EACH OTHER SINCE THEY WERE LITTLE. MOST PEOPLE WERE RELATED AND I DIDN'T FIT IN AT ALL SO I WAS VERY, VERY SCARED...OF LIKE, MAKING FRIENDS. I MEAN, IF YOU DON'T HAVE A GOOD SUPPORT SYSTEM AROUND YOU, YOU REALLY NEED TO TURN TO YOURSELF AND ASK YOURSELF QUESTIONS. I THINK, INSTINCTUALLY, PEOPLE DO KNOW. AND IF THEY ACTUALLY SAT AND LISTENED TO THEMSELVES AND START ACTING ON THEIR INSTINCTS, THEIR GUT FEELINGS AND...THEN THEY MIGHT NOT HAVE SUCH A HARD TIME WITH...THEIR ESTEEM AND BEING AROUND PEOPLE OR DIFFERENT SUBSTANCES. I SEE A LOT OF PEOPLE AT WORK WHO ARE UNDER THE INFLUENCE OF DIFFERENT DRUGS; ALCOHOL. AND I START UNDERSTANDING MY OWN ESTEEM AND TO SEE THAT I DON'T NEED TO GET DRUNK TO HAVE A GOOD TIME. I LIKE SEEING THINGS THROUGH MY SOBER EYES. I LIKE SEEING THINGS HOW THEY REALLY ARE. IT'S A LOT MORE INTERESTING.

BOY: MY FATHER WAS IN AND OUT OF MY LIFE. ONE MINUTE HE WAS THERE AND ONE MINUTE HE WASN'T. SO, I NEVER KNEW HIM....MY MOM, WELL, AFTER SHE HAD ME SHE STARTED SMOKING DRUGS. SMOKING DOPE AND ALL THAT. AND SO, I GUESS THAT GOT HOLD OF HER AND SHE DIDN'T REALLY TAKE CARE OF ME NO MORE.

WATCHING MY MOM DO DRUGS AND DRINK AND ALL THAT I WAS LIKE, THAT'S SOMETHING I DIDN'T WANT. I DIDN'T KNOW WHAT TO THINK. I WAS SO CONFUSED. I WAS SEEING SO MANY THINGS AND I JUST...IT WAS JUST CONFUSING ME. I DIDN'T REALLY UNDERSTAND IT. I JUST KNEW THAT WHATEVER IT WAS THAT THEY WAS DOING WAS JUST TEARING THEM DOWN. I WENT TO A GROUP HOME AND THE LONGER I WAS THERE THEY PUT ME IN KARATE AND...THAT WAS SOMETHING I ALWAYS LIKE TO DO BECAUSE OF BRUCE LEE, ANYWAY. AND IT WAS LIKE THERE WAS MY CHANCE TO DO IT. THAT WAS MY TEACHER, YOU KNOW. BECAUSE KARATE IS DISCIPLINE AND SELF CONTROL AND ALL THAT. AND THAT'S WHERE I LEARNED MOSTLY EVERYTHING FROM WAS KARATE. BUT BEING OPEN, I CAN SAY BEING MORE OPEN MINDED AND TALKING TO PEOPLE CAN HELP YOU THROUGH IT. AND JUST...TAKING RESPONSIBILITY BY YOURSELF AND JUST DO IT. AIN'T NOBODY ELSE THERE TO DO IT SO YOU DO IT. JUST GET OUT THERE AND GO TO SCHOOL AND GET YOUR DIPLOMA. AND GRADUATION, I'M REAL EXCITED ABOUT THAT BECAUSE THAT'S SOMETHING I NEVER THOUGHT I WOULD ACHIEVE. I JUST SAY JUST GET ON WITH YOUR LIFE AND JUST DO IT. JUST CARRY A FOOTBALL AND JUST GO.

BOY: IT'S THE SAME FOR ANYBODY, NO MATTER WHAT YOU'RE DOING, I THINK. YOU'RE GOING TO HAVE BAD DAYS WHERE BAD THINGS HAPPEN AND YOU'RE GOING TO GET STRESSED OUT. I MEAN, YEAH, BECAUSE RIDING CAN BE VERY FRUSTRATING, YOU KNOW. NOT GETTING THEM TO DO THIS AND YOU TRY AND TRY AND TRY. AND IT'S BASICALLY, YOU GOT TO GO AND DO SOMETHING ELSE AND THEN COME BACK TO IT. IT'S NOT SO FRUSTRATING ANYMORE. I MEAN, THAT'S THE BASIC THING I CAN THINK THAT IT TEACHES YOU IS PATIENCE. PATIENCE THAT, YOU KNOW, I'LL GET THERE...TEACHES YOU ABOUT GOALS THAT'S ANOTHER THING. SETTING A GOAL AND ACTUALLY HAVING TO WORK TOWARD IT TILL YOU GET THERE. I MEAN, WITH LIKE AN ADDICTION OR SOMETHING YOUR WORLD GETS REAL...SMALL. IT KIND OF STARTS TO REVOLVE AROUND THE THING YOU'RE ADDICTED TO. AND WITH SOMETHING LIKE THIS YOU CAN GO ON...THERE'S MILLIONS OF THINGS, MILLIONS OF POSSIBILITIES YOU CAN DO WITH SOMETHING LIKE THIS.

GIRL: YOU KNOW, ME AND MY MOM, ONE MONTH WE'D BE TOTALLY FINANCIALLY STABLE ALL OF A SUDDEN WE WOULDN'T BE, YOU KNOW, THERE'S WAS HARDLY ANYTHING IN THE FRIDGE. SO, AS A KID I JUST KIND OF TRIED TO STAY OUT OF EVERYTHING WITH...ANYBODY, YOU KNOW, JUST KIND OF SNEAK OFF IN THIS LITTLE CORNER AND YOU KNOW, JUST...TV WAS...MY ACTIVITY. I WAS NEVER INVOLVED WITH ANYTHING OTHER THAN HOME. THAT WAS WHERE I WAS, ALWAYS. INSIDE, COOPED UP. I DIDN'T THINK I COULD LEAVE THE OLD WAY THAT I WAS. BUT I WAS THINKING I SHOULD TRY SOMETHING JUST IN CASE IT COULD CHANGE ME A LITTLE BIT. AND IT HAS. I'VE ALWAYS BEEN SO SHY AND I DIDN'T REALLY KNOW WHAT "BREAK THE CYCLE" WAS ALL ABOUT. I WENT TO THE AUDITIONS AND I JUST KEPT THINKING, "I'M NOT GOING TO MAKE IT! I'M NOT GOING TO MAKE IT! YOU KNOW, ALL THESE PEOPLE ARE SO MUCH MORE OPEN..." AND THEN I MADE IT AND I WAS PRETTY HAPPY ABOUT THAT. IT'S VERY TRUE BUT IF YOU JUST TAKE A LITTLE TINY STEP AND YOU KEEP ON ADDING IT'S GOING TO CHANGE. I DON'T KNOW FOR EVERYBODY BUT I KNOW IT DID FOR ME. JUST LITTLE STEPS, YOU KNOW, IT GOT ME THERE.

ENSEMBLE: BREAK THE CYCLE!

GIRL: IT'S POSSIBLE TO BREAK THE CYCLE OF ANY KIND OF NEGATIVE...ANYTHING. I THINK SO. THAT'S WHAT HAPPENED TO ME. I MEAN, I WAS LUCKY TO REALIZE FOR MYSELF AND I HOPE THAT IN ANY WAY THAT I COULD HELP SOMEBODY JUST TRY TO GET OUT OF IT, TO GET INVOLVED, TO MAKE NEW FRIENDS, TO DO ANYTHING DIFFERENT INSTEAD OF WHAT YOU'RE IN NOW.

NARRATOR: CHANGING YOUR BEHAVIOR AND DOING SOMETHING DIFFERENT CAN BE A BIG STEP TOWARDS CHANGING HOW YOU FEEL. WHETHER YOU'RE TRYING TO DEAL WITH JUST THE BASIC CONFUSION AND STRESS OF EVERYDAY LIVING OR YOU'VE ALREADY BEGUN A NEGATIVE CYCLE THAT COULD LEAD TO ADDICTION, CHANGE IS POSSIBLE.

MAN: FOR THOSE OF YOU WHO ARE STOPPING TODAY... THINK ABOUT WHAT THIS MEANS TO YOU. YOU MADE A DECISION TODAY THAT IT'S GOING TO STOP. THAT YOU'RE LIFE IS GOING TO BE BETTER. YOU'RE GOING TO BE IN CONTROL OF IT. NOT TOBACCO.

KALAFSKI: I THINK IT'S A PERSONAL CHOICE THAT SOMEONE COMES TO. THAT GENERALLY, THAT THIS PATTERN OF BEING IS NO LONGER WORKING, IS NO LONGER SATISFYING. AND THEY'LL START LEAVING THE SHELL AND TRYING TO FIND SOMETHING NEW.

DeCASTRO: I THINK THAT ANYBODY CAN CHANGE AND...GROW UP AND BECOME MORE HEALTHY AND LIVE A GOOD DECENT LIFE. AND FEEL BETTER ABOUT THEMSELVES.

DR. DICKINSON: IN ORDER TO CHANGE YOUR BEHAVIOR, YOU HAVE TO MAKE AN EFFORT. YOU HAVE TO MAKE A CONCERTED EFFORT, YOU HAVE TO USE YOUR BRAIN TO ALTER YOUR BEHAVIOR PATTERN. YOU HAVE TO MAKE A DECISION THAT, "OKAY, I'M GOING TO DO SOMETHING DIFFERENTLY." IT CAN BE SIMPLE AS, "I'M GOING TO SMILE AT EVERYBODY I MEET TODAY." THAT'S ONE OF THE THINGS THAT THEY SAY, TO IMPROVE YOUR MOOD, SMILE AT PEOPLE. EVEN IF YOU'RE NOT FEELING HAPPY, IF YOU SMILE, PEOPLE WILL SMILE BACK AND THAT WILL MAKE YOU HAPPY. ANY BEHAVIOR WOULD FOLLOW THAT SAME SORT OF PATHWAY. IF YOU CAN CHANGE THE BEHAVIOR YOU'VE CHANGED PART OF YOUR BRAIN STRUCTURE AND FUNCTION. YOU'VE CHANGED THINGS. PHYSICALLY CHANGED THEM. AND THEN IF YOU'VE CHANGED THEM IN THE RIGHT DIRECTION YOU CAN ACTUALLY THEN CHANGE HOW YOU FEEL ABOUT THINGS.

NARRATOR: ONCE YOU'VE MADE A COMMITMENT TO COPING WITH CHALLENGES IN POSITIVE WAYS, HERE ARE SOME OTHER SKILLS THAT CAN HELP.

BOY: GAVE THIS SCHOOL A CHANCE AND HERE I AM TODAY. THAT'S CHANGED MY LIFE ALL AROUND. AND THAT'S ALL FROM THEM, THAT'S ALL FROM THAT GROUP, THEY'VE TAUGHT ME HOW TO, YOU KNOW, MOVE ON AND ACCEPT SUCCESS INSTEAD OF ACCEPTING FAILURE.

BOY: YOU KNOW, WITH MY PORNOGRAPHY, IF I WOULD HAVE GOTTEN HELP THE FIRST COUPLE OF WEEKS OR SOMETHING, IT WOULD HAVE BEEN SAID AND DONE, YOU KNOW, OVER WITH. AND I WOULDN'T HAVE HAD ALL THE PICTURE FLASHBACKS AND I WOULDN'T HAVE HAD ALL THE WANTING TO BE SECLUDED AND I WOULDN'T HAVE LOST MY SELF ESTEEM AND TRUST IN MYSELF AND EVERYTHING.

KALAFSKI: FINDING SUPPORT, WHETHER THAT'S FROM A TEACHER OR FROM A FRIEND, YOUR PEER GROUP, WHERE YOU FEEL LESS ISOLATED AND BREAK THOSE LABELS, THOSE NEGATIVE THOUGHTS ABOUT YOURSELF. IT'S PROBABLY THE MOST VALUABLE.

GIRL: WELL, THE WARNING SIGN IS YOU WOULD START DISOBEYING YOUR PARENTS. YOU WOULDN'T WANT TO LISTEN, YOU WOULD WANT TO DO THINGS YOUR WAY.

BOY: YOU REALIZE YOU CAN'T SIT THERE AND WATCH A GAME WITHOUT HAVING TO GET IN. THAT'S ANOTHER SIGN. BORROW MONEY ALL THE TIME...

BOY: THINKING ABOUT IT ALL THE TIME.

GIRL: I STILL FEEL, LIKE WHEN I SEE LIQUOR ANYTHING, I WANT IT. OR GO BY A LIQUOR STORE...

COUNSELOR: WHAT WE WANT TO TALK ABOUT ARE THESE THINGS WE CALL TRIGGERS. TRIGGERS ARE THESE THINGS THAT HAPPEN FOR YOU THAT MAKE YOU THINK ABOUT SMOKING. THEY'RE ALL DIFFERENT KINDS OF THINGS. WHEN YOU'RE BORED AND THERE'S NOTHING TO DO, WHEN YOU FINISH A MEAL, WHEN YOU'RE STRESSED OUT. THE REASON WE TALK ABOUT TRIGGERS IS THAT WHEN WE STOP WHAT WE TRY TO DO AS MUCH AS POSSIBLE IS AVOID THE TRIGGERS. AVOID THE THINGS THAT MAKE US THINK ABOUT SMOKING. NOW, THERE'S SOME THINGS ON HERE YOU CAN'T AVOID. SO, WE TALK ABOUT COPING STRATEGIES. HOW DO WE LEARN TO MANAGE THE FEELING WE HAVE INSIDE SO THAT WE DON'T SUCCUMB TO HAVING TO HAVE A CIGARETTE.

NARRATOR: NOT DEVELOPING GOOD COPING SKILLS AND GIVING IN TO NEGATIVE FEELINGS CAN RESULT IN RELAPSING. GOING BACK TO YOUR ADDICTION AFTER YOU'VE QUIT.

BOY: I GUESS THAT'S THE WAY IT WAS TOWARDS THE END. I'D GET REAL PISSED OFF AND UPSET AND FIGURE I MIGHT AS WELL RELAPSE. I GOT NOTHING TO LOOK FORWARD TO. I DON'T GOT NOTHING TO LOSE. MIGHT AS WELL GO OUT AND GET ALL MESSED UP.

BOY: BASICALLY, YOU HAVE TO DEAL WITH CERTAIN ISSUES. SOME ISSUES YOU MIGHT NEED COUNSELING FOR, YOU KNOW.

GIRL: MY THERAPIST IS REALLY NICE AND SHE HELPS ME A LOT, DEAL WITH A LOT OF THINGS AND HELPS ME STAY OFF DRINKING.

BOY: I JUST STARTED GETTING TO KNOW MYSELF. AND JUST GETTING TO KNOW WHAT BOTHERS ME AND WHAT PUSHES MY BUTTONS AND HOW TO DEAL WITH IT.

BOY: I'M NOT THE BEST PERSON WITH WORDS. I MEAN, I HAVE TROUBLE TALKING TO, LIKE A LARGE GROUP OF PEOPLE AND STUFF LIKE THAT. OR TALKING TO SOMEBODY LIKE I REALLY CARE ABOUT OR SOMETHING. BUT WITH ME, WRITING IS MY WAY OF DOING IT. AND I JUST RECOMMEND TO PEOPLE TO FIND ANY WAY THEY CAN TO EXPRESS THEM SELF.

GIRL: I READ. I DANCE. I SING.

GIRL: I KEPT A JOURNAL. I WROTE EVERYTHING DOWN. AND I CRIED A LOT.

BOY: WELL, WHAT I DID...I CRIED. AND I'D LIKE GO SOMEWHERE AND JUST CRY ABOUT IT AND JUST THINK IT THROUGH.

GIRL: ...AND I BROKE THE CYCLE. I'VE NEVER TOUCHED ANYBODY IN MY LIFE. AND IN AN ABUSIVE WAY I CAN BE MAD AT SOMEBODY AND INSTEAD OF HITTING THEM I'LL HIT SOMETHING ELSE. I'LL HIT A PILLOW, I'LL HIT A BED. AND IT'S JUST A CHANGE THAT YOU HAVE TO MAKE.

KALAFSKI: I GUESS IF I HADN'T SEEN PEOPLE WHO FELT THAT...FEELING UNCOMFORTABLE OR FEELING LIKE YOUR SKIN'S GETTING RIPPED OFF FROM THE WITHDRAWAL OF THEIR ADDICTION, WHETHER IT'S A CHEMICAL ADDICTION OR A BEHAVIORAL ADDICTION, DIDN'T FIND THAT MORE SATISFYING IN SOME WAY THAN CONTINUING THE ADDICTION, I WOULDN'T BELIEVE IT WAS TRUE. BUT I HEAR THAT OVER AND OVER. THAT EVEN BEING UNCOMFORTABLE AND FEELING ALIVE AND AWARE OF MYSELF IS BETTER THAN BEING NUMBED OUT.

GIRL: YOU KNOW, WHEN THINGS COME UP IT'S ACTUALLY KIND OF COOL, YOU HAVEN'T BEEN FEELING FOR SO LONG THAT WHEN YOU DO IT'S KIND OF LIKE, "WHOA, I FEEL THAT." WOW.

KALAFSKI: IF YOU'RE FEELING BAD, IT'S NOT A BAD THING. I FEEL LIKE OUR CULTURE, WE'RE SUPPOSED TO BE HAPPY AND ECSTATIC AND BEAUTIFUL AND INTELLIGENT. AND WE JUST CAN'T ALL BE THOSE THINGS ALL THE TIME. OR FEEL HAPPY ALL THE TIME. IT'S JUST TOTALLY UNREALISTIC.

GIRL: SUFFERING'S JUST A PART OF LIFE SO, YOU KNOW, GET USED TO IT.

BOY: I THINK I COULD BE A LITTLE MORE PERSEVERING IN EMOTIONAL PAIN, I GUESS. I NEED TO BE MORE SELF RELIANT ON MYSELF EMOTIONALLY. BECAUSE I'M ALWAYS CONVINCED, YOU KNOW, I NEED SOMEONE TO WIPE MY TEARS AWAY.

KALAFSKI: ACCEPTING THAT SOMETIMES YOU'RE GOING TO FEEL BAD AND THAT YOU'RE GOING TO SURVIVE THAT. WOULD BE A NICE LESSON FOR PEOPLE TO HAVE THE EXPERIENCE OF. THAT THIS REALLY STINKS RIGHT NOW BUT IT'S NOT ALWAYS GOING TO STINK.

NARRATOR: WHEN THINGS DO GET ROUGH AND YOU FEEL THE URGE TO ESCAPE BACK INTO YOUR ADDICTIVE PATTERN, TRY IMAGINING THAT THE URGE IS A WAVE. A WAVE DOESN'T JUST KEEPING GOING FOREVER. IT ALWAYS BREAKS. LEARN TO URGE SURF. KEEP YOUR BALANCE AND RIDE IT OUT.

GIRL: YOU KNOW, IT'S LIKE, I'VE BEEN CLEAN FOR FIVE MONTHS THIS TIME AND I'VE BEEN TO SO MANY REHABS OVER THE LAST COUPLE OF YEARS THAT YOU KNOW, I'M LIKE, "WELL, AM I ALWAYS GOING TO FEEL LIKE THIS." AND IT'S LIKE, WELL, AT LEAST I'M NEVER GIVING UP. YOU KNOW, AT LEAST I KNOW I WANT A LIFE WITHOUT THIS.

GIRL: MY MEANING OF LIFE IS I HAVE A LOT OF GOALS THAT I WANT TO SEE THROUGH. YOU'RE PUT ON THIS EARTH FOR A REASON, I THINK AND, YOU KNOW, EVERYBODY'S GOT THEIR OWN LITTLE PLANS. AND, YOU KNOW, I JUST WANT TO GET MINE DONE AND HAVE GRANDKIDS AND YOU KNOW, BE THAT WAY. HAVE A HAPPY LIFE.

GIRL: I JUST SAY I CAN DO IT. EVERY DAY I WAKE UP AND SAY, "I CAN DO THIS AND IT'S A NEW DAY." SO, I JUST START OVER.

NARRATOR: SO, THINK ABOUT WHERE YOU WANT TO GO IN YOUR LIFE. TAKE A LOOK AT YOUR OPTIONS. WOULD YOU RATHER CLOSE DOWN? OR OPEN UP? WOULD YOU RATHER GET STUCK ON THIS PATH? OR TRAVEL ON THESE?

GRADUATION: CONGRATULATIONS, YOU MAY MOVE YOUR TASSELS TO THE OTHER SIDE!

NARRATOR: IT'S YOUR CHOICE.

RESOURCES**Addictions**

<http://weber.u.washington.edu/~abrc>

The site for the University of Washington Addictive Behaviors Research Center.

<http://www.hms.harvard.edu/doa/index.html>

The site for Harvard Medical School Division on Addictions.

<http://www.well.com/user/woa>

The Web of Addictions site provides a comprehensive list of sites for information on Internet, chemical, gambling and smoking addictions.

<http://www.cmhc.com>

On-line mental health resource guide with extensive web resources on eating disorders as well as other chemical and behavioral addictions.

<http://www.emory.edu>

This site includes the latest scientific information about the effects of drugs on the brain and body, and allows visitors to ask neuroscience experts questions.

Gambling

New Jersey Council on Compulsive Gambling

(tel) 1-800-GAMBLER

National Council on Problem Gambling

(tel) 1-800-522-4700

International Service Office of Gamblers Anonymous

(tel) 1-213-386-8789

Texas Council on Problem Gambling HelpLine

(tel) 1-800-742-0443

Internet Addiction

<http://www.netaddiction.com>

The site for the Center for On-line Addictions has information and a questionnaire to help determine if you have an Internet addiction problem.

Sex Addiction

<http://www.ncsac.org>

The site for the National Council on Sexual Addiction and Compulsivity.

<http://www.enough.org>

A site containing information on the Internet and pornography.

Eating Disorders

<http://www.thriveonline.com>

Has information on different eating disorders.

<http://www.edhelp.com>

The site for the Center for the Treatment of Eating Disorders.

<http://www.aabainc.org>

American Anorexia and Bulimia Association

293 Central Park West, Suite 1R

New York, New York 10024

(212) 501-8351

Center for Overcoming Problem Eating

(888) 895-3886

American Eating Disorder Center

330 West 58th St. Suite 200

New York, New York 10019

(212) 582-5190

Smoking

American Lung Association

(800) 586-4872

Has a program called "Tobacco Free Teens." Contact them for information on starting a Tobacco Free Teens group, including facilitator training and guidelines.

National Cancer Institute/Cancer Information Service

Johns Hopkins Oncology Center

550 N. Broadway, Suite 307

Baltimore, Maryland 21205

(800) 4-CANCER

National Clearinghouse for Alcohol and Drug Information

P.O. Box 2345

Rockville, Maryland 20847-2345

(301) 468-2600; (800) 729-6686

Office on Smoking and Health/Centers for Disease Control & Prevention

Mail Stop K-50

4770 Buford Highway, NE

Atlanta, Georgia 30341-3724

(404) 488-5708

<http://www.kickbutt.org>

Has a Youth Center site with fact sheets and other resources.

RESOURCES

Alcohol and DrugsNational Clearinghouse for Alcohol and Drug Information

P.O. Box 2345

Rockville, Maryland 20847-2345

(301) 468-2600; (800) 729-6686

<http://www.health.org>

Materials available include Alcohol and Drug Fact Sheets, Resources, Research and Statistics, Other Sites and Publications. Current campaigns in prevention are also highlighted.

National Institute on Drug Abuse's Hotline

(800) 662-HELP

A confidential information and referral line that directs callers to substance abuse treatment centers in their local community. Free materials on alcohol and drug abuse are also available on request.

<http://www.nida.nih.gov>

Has materials for science-based Drug Abuse Education for schools as well as more advanced information on the Neurobiology of Addiction, and other illustrated materials on chemical interactions of drugs and addiction. Other resources include INFOFAX - information sheets on Drug Abuse (also available in Spanish).

Al-Anon/Ala-teen Family Group Headquarters, Inc.

P.O.Box 862

Midtown Station

New York, New York 10018-0862

(212) 302-7240; (800) 344-2666 (US); (800) 443-4525 (Canada)

Alcoholics Anonymous (AA)/World Services Inc.

475 Riverside Drive

New York, New York 10115

(212) 870-3400

Children of Alcoholics Foundation, Inc.

Box 4185 Grand Central Station

New York, New York 10115

(800) 359-COAF; (212) 754-0656

National Council on Alcoholism and Drug Dependence Hotline

12 West 21st St., 7th fl.

New York, New York 10010

(800) 622-2555

Referrals to local affiliates and resources.

Cocaine Helpline

(800) COCAINE

A round-the-clock Cocaine Helpline with information and referral service.

GLOSSARY

Abuse: The stage in the process of addiction (use-abuse- dependence-addiction) in which a person begins to use the substance or behavior regularly even in the face of negative consequences beginning to impact him/her. Drinking and driving is one form of abuse.

Addict: A person who has lost control of his or her use of a chemical substance or behavior in the face of negative consequences in relationships, health, work or school life, financial and legal status.

Addiction: The state in which a person engages in compulsive use of a substance or behavior even when faced with negative consequences; characterized by the loss of control in limiting the use of the substance or behavior.

“Chasing the first high”: The nightmarish reality of compulsively seeking that first pleasurable feeling of the use of a substance or behavior and never finding it again.

Coping Strategy: Something to help effectively manage difficult situations or emotions without resorting to negative or addictive behavior or substances.

Craving: The intense desire for a substance or behavior that is triggered by environmental, sensory or other cues that evoke memories of the experience of using.

Denial: The excuses made by an addict to justify continued use of a substance or behavior in the face of negative consequences.

Dependence: A stage in the process of addiction (use-abuse- dependence-addiction) characterized by (1) believing that one needs the substance or behavior to get by, and (2) loss of control over the substance or behavior and/or tolerance or symptoms of withdrawal from the substance or behavior.

Dopamine: A neurotransmitter that is active in the reward/pleasure circuit of the brain, involved in the addictive process.

Escalation: A steadily or speedily increasing physical or mental energy or state of affairs.

HIV: The human immunodeficiency virus, which destroys the immune system, making it impossible for the body to fight off illness. AIDS (acquired immune deficiency syndrome) is the last phase in the HIV disease. A person is said to be HIV positive if antibodies to the virus are detected in his or her blood. The HIV virus is transmitted by unprotected sexual contact and by the sharing of needles with others who are infected. It can also be passed from nursing mothers to their babies.

Neurotransmitters: Chemical substances that communicate between the nerve cells that make up the brain, carrying the “messages” that control all of the brain, and, therefore, bodily functions.

Perpetrator: One who is responsible for, or commits, some act; e.g., to perpetrate a crime, or a practical joke.

GLOSSARY

"Rehabs": Shortened word describing a rehabilitation center, a place for the treatment of drug and alcohol addiction or violent behavior.

Relapse: Returning to the use of a substance or behavior after quitting.

Reward/pleasure circuit: A pathway in the brain that is responsible, through the release of certain chemicals, for rewarding behaviors that are required for the survival of the species, i.e., eating, sexual activity, and nurturing. This pathway is impacted by the use of certain drugs and behaviors.

Self-soothing: Describes the use of a substance or behavior to take care of stressful feelings, to avoid discomfort, or to numb pain.

Tolerance: A physical/mental state reached in the process of addiction in which the substance or behavior no longer satisfies the user, leading to increased use but decreased reward.

"Triggers": Habitual situations, including difficult people or personal stress, which cause one to respond with habitual ways (such as eating, drinking, smoking).

Urge Surfing: A technique developed by G. Alan Marlatt, at the Addictive Behaviors Research Center, University of Washington. The purpose of urge surfing is to help people who are trying to quit an addictive substance or behavior cope with urges that might otherwise trigger a relapse. The idea is to experience the urge in the form of a cresting wave rather than a growing ball and learn to keep your balance until the wave or urge crests and then subsides.

Use: The initial stage in the process of addiction; the using of a substance or behavior occasionally, on weekends, at parties, without serious consequences.

A REVIEW OF ADDICTIVE SUBSTANCES & BEHAVIORS

Addictive substances

ALCOHOL

TOBACCO - contains NICOTINE, a chemical substance which is addictive when smoked or chewed.

DEPRESSANTS - a form of drug with effects in many ways similar to alcohol, such as barbiturates and tranquilizers.

HEROIN - a form of narcotic; a drug which initially produces euphoria then drowsiness, nausea, and vomiting. Other narcotics include: CODEINE, MORPHINE, and OPIUM.

COCAINE - a drug which stimulates the central nervous system.

CRACK - a highly addictive form of cocaine, which is smoked.

INHALANTS - chemicals in the form of vapors which are inhaled, such as gasoline, glue, aerosol propellants.

STIMULANTS - drugs which cause increased heart and respiratory rates, such as AMPHETAMINES and METHAMPHETAMINES.

CANNABIS - a chemical in drugs such as MARIJUANA and HASHISH, which impair short-term memory, concentration, and coordination, and alter the sense of time.

ANABOLIC STEROIDS - drugs related to the male sex hormone testosterone which are used to accelerate physical development with severe physical and psychological side effects.

HALLUCINOGENS - a group of drugs which include LSD, Mescaline, Psilocybin mushrooms, and PCP, which produce hallucinations - visual and auditory sensations which aren't real.

CAFFEINE: a stimulant contained in coffee, chocolate, and certain soft drinks.

Addictive behaviors

Addictive behavior refers to any activity done compulsively and over which you have little or no control even in the face of negative consequences, including:

Eating: Eating disorders affect millions of people of all ages, both genders, and cause the deaths of thousands annually. They include anorexia, or under-eating; bulimia, or binge-and-purge eating; and compulsive eating.

Gambling: Most compulsive gamblers start in adolescence, developing their addiction over ten or more years. Gambling teens are at risk, not only for addiction, but also for much higher drug use, and other criminal behaviors.

A REVIEW OF ADDICTIVE SUBSTANCES & BEHAVIORS

Internet: This newest form of addiction - which can have devastating consequences - can also initiate and facilitate other addictions, such as gambling and pornography.

Pornography: Often considered the "gateway drug to sex addiction."

Sex: Loss of control of sexual behavior which can lead to serious consequences, including sexual assault.

Work: A serious and disruptive adult addiction in which a person uses work as a way to escape emotional problems .

Other behaviors which can become addictive include:

Exercise
Shopping
Television
Video Games
Getting in trouble
Stealing
Tattooing and piercing

PHASES OF ADOLESCENT GAMBLING

Introduction to Gambling

Occasional gambling

Getting acquainted with new interest

Developing a relationship with gambling

Winning Phase

Frequent winning

Fantasizes about gambling

Increases amount of money bet

Lying to parents about gambling

Losing Phase

Bragging about wins

Losing time from school/work

Can't stop gambling

Debts pile up

Careless about family and friends

Frequently borrows

Drop extracurricular activities

Big increase in money and time spent gambling

Irritable, restless, depressed

Grades drop

Desperate Phase

Unable to pay debts - sells personal stuff

Bailouts

Selling family's valuables

Thoughts of crimes

Drop out of school

Withdraw from family and friends

Stealing

Shame

Panic

Blaming others

Guilt

Bottom

Despair

Thoughts or attempts of suicide

Arrests

Drugs

Alcohol

Emotional and physical breakdown

Source: Council on Compulsive Gambling of New Jersey

Prepared by: The Texas Council on Problem and Compulsive Gambling

THE 4 D's

The 4 D's can lessen the discomfort associated with the physical urge to smoke.

1. Deep Breath - Deep breathing (whether sitting, standing, or lying down) is an effective way of dealing with tension from stopping smoking. A simple deep breathing exercise that can be used just about any time or any place is listed below.

Here's how it works:

- a. With your mouth closed and your shoulders relaxed, inhale as slowly and deeply as you can while silently counting to seven. As you do that, push your stomach out.
- b. Hold your breath while counting silently to seven.
- c. Exhale slowly while counting silently to seven.
- d. Do this slow, deep breathing cycle of exercises three to five times.

As the days and weeks pass, try to increase the length of your silent counts as much as you can.

2. Drink Water - Drink lots of liquids, especially water and fruit juice, to remove the nicotine from your system as fast as possible. This takes about a week. Make sure you stay away from coffee and cola drinks for a while.

3. Delay - When your craving is a mild one, it's possible to wait it out. After a few moments, you'll find that the urge fades and then disappears.

The urge goes away whether or not you smoke - normally within 30 to 60 seconds. To prove it, time your urges.

4. Do Something Else - Here is a list of activities that you can do when you have the urge to smoke or chew.

- Review your most important reasons for quitting tobacco use
- Talk yourself out of the urge
- Exercise
- Alter your routine
- Doodle
- Deep breath
- Work on a hobby or crossword puzzle
- Take a shower

SURVEY - PART ONE

Directions: Answer the following questions in the spaces provided. Use the back of the sheet if necessary.

1. I define "addiction" as:
2. What are some of the different forms of addiction?
3. How does addiction affect the brain? Is addiction always a physical phenomenon?
4. What are the stages that lead to addiction?
5. What are some of the risk factors that contribute to a person developing addiction(s)?
6. How is addiction portrayed in the media, such as television, movies, magazines, music, and the Internet?
7. What is the difference between a habit and an addiction?
8. How is addiction related to stress?
9. The major source of stress in my life is:
10. I deal with stress by:

SURVEY - PART TWO

Directions: Answer the following questions in the spaces provided. Use the back of the sheet if necessary.

1. What are some of the consequences of addiction?
2. What are some of the risks associated with addiction?
3. What are the areas of a person's life which are affected by addiction?
4. What is the relationship between addiction and violence?
5. Why is addiction sometimes described as a "process of loss"?
6. What are the phases of addiction?
7. What is the cycle of addiction?
8. What are the types of support that can help someone avoid the trap of addiction?
9. How does support help someone avoid the trap of addiction?
10. Some of the losses that I have seen as a result of addiction are:

SURVEY - PART THREE

Directions: Answer the following questions in the spaces provided. Use the back of the sheet if necessary.

1. What is multi-addiction?
2. What are some of the risks of experimenting with addictive substances and behaviors?
3. What are some positive ways of dealing with stress?
4. What are "triggers"?
5. What are "warning signs"?
6. How can changing your behavior affect your state of mind?
7. What is "urge surfing"? How can it help someone overcome addiction?
8. What are some of the resources available in your area to help people stay healthy and find positive relief from stress?
9. What would you say or do to a friend who might have an addiction?
10. What are some of the resources in your area to help people overcome addiction?