

A TEACHER'S GUIDE FOR

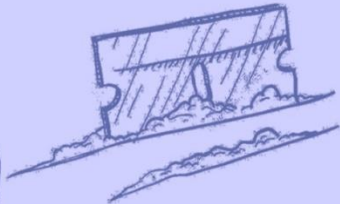
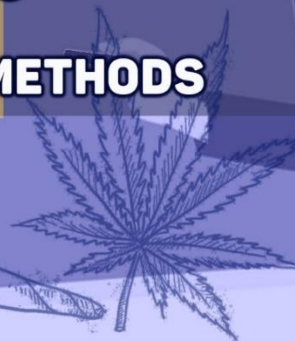


IN CLASS DRUG SENSITISATION SESSIONS

DRUG IDENTIFICATION

EARLY WARNING DETECTIONS

DETECTING CONCEALMENT METHODS



CUSTOMS ANTI NARCOTIC UNIT

FORWARD

The world is evolving rapidly, but education remains a powerful tool in shaping the character and future of individuals. As Head of the Customs Anti-Narcotic Unit (CANU), I am deeply concerned about the rising prevalence of drug use and abuse among young people, particularly within our schools. This growing threat demands urgent action.

At CANU, we firmly believe that Guyana's children, our nation's future, must be protected and educated. To this end, the Guyana Drug Information Network (GUYDIN) within CANU has launched several initiatives to equip students nationwide with the knowledge and tools necessary to understand and resist drug use and abuse.



This manual provides clear, concise, and practical information on drug identification, detection, concealment, and prevention. Its core objective is to empower students to resist the temptation of drug use while also offering guidance on how to support individuals seeking to break free from addiction and embrace a drug-free lifestyle.

Our dedicated GUYDIN team also conducts Drug Sensitisation Outreach Sessions in schools across Guyana, in partnership with the Ministries of Education and Social Protection. These sessions have allowed us to gather invaluable insights into the realities of drug use among students. This manual captures those experiences, providing educators with a deeper understanding of the urgency required to combat this crisis. It also serves as a critical resource to help students recognise the personal and social consequences of drug-related choices.

As Guyana's leading drug prevention and enforcement agency, CANU is committed to keeping every sector of our nation drug-free. Therefore, I urge all educators to integrate this manual into their school programs and activities. With continued collaboration between CANU, the Ministry of Education, and our dedicated teachers, we can create drug-free schools and inspire our youth to build positive, healthy lifestyles.

Let's work together to protect our children, safeguard our future, and ensure a drug-free Guyana.

Mr. James Singh

Director, Customs Anti-Narcotic Unit (CANU)

INTRODUCTION

The burden of safeguarding our children falls on us, the adults, as new trends and more psychotropic substances find their way into our homes, schools, and communities. As the nation's educators, it is your responsibility to take the initiative and warn our students about the risks associated with drug use. Your intervention can make a difference in a child's life by assisting them in making better decisions, choosing better paths, and living up to their full potential.

The Customs Anti-Narcotic Unit's Teachers Guide was developed to assist teachers from various schools across Guyana in identifying illicit drugs, signs exhibited after using drugs, modern drug use trends that are prevalent among teens, and detecting concealment methods.

It is obvious that drugs such as cocaine, crack cocaine, cannabis/marijuana, MDMA/ecstasy, hashish, crystal meth/methamphetamine, heroin, and LSD (Lysergic acid diethylamide) exist in our country, and educating teachers on what these drugs look like and how to identify the signs or symptoms displayed by a user can help decrease drug use in schools today. Images of these drugs are placed alongside the text to provide a clear picture of how they appear.

This guide emphasises trending drugs to raise awareness of the new substances that are present in modern culture. This teacher's guide describes concealment methods to demonstrate that drugs can be hidden in almost anything except spoken words.

Because the human brain does not fully mature until around the age of 25, harmful drugs can have an impact on the brain's development. Drugs and alcohol are among the most harmful, yet most common disruptors of adolescent brain development. They change the wiring of the brain and influence how the brain processes and retains information, including how a teen thinks, focuses, learns, remembers, and concentrates, both inside and outside of school. Teachers, in turn, are taught what to do when they recognise substance abuse and its early warning signs, as well as what to do or who to call when seeking help for students.



CONTENTS

- Forward2
- introduction.....3
- The direct and indirect effects of alcohol and other drugs on children create a range of dangerous health and safety risks for the child.5
- When drug use becomes drug abuse or addiction5
- The importance of teaching prevention in schools6
- definition: drugs7
- What do we mean by drugs?7
- Why do young people take drugs?8
- facts.....8
- some young people do take drugs and they will do for different reasons:8
- What drugs do they take?9
- CANU tip:9
- What you can say to educate your students about the harms associated with drug use..... 10
- talking about drugs 11
- CANU tip: 11
- The law..... 12
- Health effects 13
- Drug identification: what to look for 18
- Street or slang names for drugs33
- Understanding concealment: the sneaky tactics 34
- Peer pressure role-playing exercise36
- Fact/ fiction exercise.....37
- "What would you do?" decision-making scenarios40
- Social media influence breakdown40
- The brain on drugs – science demo41
- "What would you do?" decision-making scenarios41
- Ensuring your students' safety42
- Responding to a drug-related incident.....44
- Emergency protocol for suspected overdose incident45

UNDERSTANDING DRUG ABUSE AND ADDICTION

People from all walks of life can have difficulties with their drug use, regardless of their age, race, background, or the reason they began using drugs in the first place. Some people try recreational drugs out of curiosity, to have a good time because their friends are doing it, or to relieve stress, anxiety, or depression.

THE DIRECT AND INDIRECT EFFECTS OF ALCOHOL AND OTHER DRUGS ON CHILDREN CREATE A RANGE OF DANGEROUS HEALTH AND SAFETY RISKS FOR THE CHILD.

Understanding the risk and protective factors that may influence the development of substance abuse is the first step toward resolving the drug use problem in the adolescent population.

However, it is not only illegal drugs like cannabis, cocaine, or heroin that can lead to abuse and addiction, but also licit drugs like alcohol, tobacco, and prescription medications like opiates.

Addiction is the result of a complex interaction between the individual, the agent (drugs and alcohol), and the environment. Interactions between social, cognitive, cultural, attitudinal, personality, and developmental factors influence the onset of first drug use. The family may be the first to influence someone to smoke, drink alcohol, or use drugs. Poor self-image, low religiosity, poor school performance, parental rejection, family dysfunction, abuse, under- or over-controlling by parents, and divorce are all associated with adolescent drug use.



WHEN DRUG USE BECOMES DRUG ABUSE OR ADDICTION

Of course, drug use, whether illegal or prescribed, does not always lead to abuse. Some people can use recreational or prescription drugs without experiencing negative consequences, whereas others find that substance abuse harms their health and well-being. Similarly, there is no specific point at which drug use transitions from harmless to dangerous. The consequences of drug use are more important than the type or amount of substance consumed or the frequency with which you use drugs.

THE IMPORTANCE OF TEACHING PREVENTION IN SCHOOLS

Schools can play a significant role in prevention, as teachers and administrators are often the first to identify early warning signs of potential drug issues, such as poor school attendance or declining academic performance.

Effective drug education programmes equip students to resist drugs by teaching them vital personal and social skills, including decision-making, stress management, communication, social interaction, conflict resolution, and assertiveness. Moreover, this enhances awareness and resistance skills. Students discover that most of their peers do not use drugs and learn to recognise social and peer influences on drug use. Young people are now better equipped to withstand pressure to use drugs, given their increased awareness.

It is crucial to initiate drug prevention sensitisation sessions early and continue them throughout adolescence, a period fraught with pressure to indulge in drinking, smoking, and other drug use. Without reinforcing skills and anti-drug norms, behavioural outcomes can deteriorate. A school-based drug awareness programme will initially serve to prevent or postpone the onset of drinking, smoking, and other drug use. Conducting these school sessions aims to assist children in developing social skills and resilience. According to an abstract from the Interventions for Adolescent Substance Abuse: An Overview of Systematic Reviews, school-based prevention interventions can help reduce or delay drug use.

Furthermore, school prevention efforts should also focus on diminishing school disorder and enhancing children's attitudes towards school. When drug sensitisation sessions are supported by a clear, consistent social message that emphasises the harmfulness and unacceptability of alcohol, tobacco, and other drug use, prevention becomes most effective.

School sensitisation sessions should incorporate key elements to achieve the intended results;

- Assist students in recognising internal pressures such as anxiety and stress, as well as external pressures such as peer attitudes and advertising that may influence them to use alcohol, tobacco, and other drugs.
- Develop personal, social, and refusal skills to help you resist these pressures.
- Teach students that using alcohol, tobacco, and other drugs is not the norm among teenagers, even if they believe "everyone does it."
- Provide age-appropriate materials and activities, such as information about the short- and long-term effects of alcohol, tobacco, and other drugs.

DEFINITION: DRUGS

Drugs affect the way your body and mind function; they can change how you feel, think and behave. People take drugs for different reasons and in various ways.¹

WHAT DO WE MEAN BY DRUGS?

- Alcohol and tobacco
- Illegal substances such as cannabis, cocaine, heroin, and ecstasy
- Household products such as gases, glues, aerosols, and other volatile substances to get high
- Some medicinal drugs (which can be misused)
- New Psychoactive Substances, also known as "legal highs," are becoming increasingly popular.



“ Legal highs are psychoactive drugs that contain various chemical ingredients, some of which are illegal while others are not. They produce similar effects to illegal drugs like cocaine, cannabis and ecstasy.”

¹ <https://www.health.gov.au/health-topics/drugs/about-drugs/what-are-drugs>

² <https://www.bbc.com/news/uk-32857256>

WHY DO YOUNG PEOPLE TAKE DRUGS?

“In assessing lifetime prevalence of alcohol and drug use at some point in their lives, 60.3% of the students claimed to have used alcohol, 46.85% used tobacco, 45.8% said they had used Marijuana .9% representing one male child said that he had used cocaine, 5.41% stated that they used inhalants and 2.7% said that they had misused prescription medication.”-***Study on Alcohol and Drugs in the Young Offender Population within the New Opportunity Corps Guyana 2010***

NOTE: Participants in this study stated that their first use occurred between the ages of 15 to 17.

Following the COVID 19 pandemic and the reopening of schools, there were numerous reports from various schools indicating the prevalence of drug use (substance abuse) among students.

FACTS

Most importantly, the younger generation represents the country's future. Thus, drug abuse among students will take precedence since drug use takes over their lives, disrupts them, affects their future, and becomes a problem. They may develop addictions, become involved in criminal activity, or be exposed to risky lifestyles and influences.

SOME YOUNG PEOPLE DO TAKE DRUGS AND THEY WILL DO FOR DIFFERENT REASONS:

Rebellion and the need to fit in

Young people may feel pressured to follow in the footsteps of their peers. When people use drugs, they feel more mature or like they are part of a group.

Recreational drug use

Some enjoy the pleasant short-term effects. They like to relax, ‘get high’ or lose their inhibitions.

Experimental drug use

Some are just curious about the effects of different drugs. All drug use can affect health, relationships and personal safety.

³ <https://www.stabroeknews.com/2018/02/23/opinion/editorial/drugs-in-schools/>

WHAT DRUGS DO THEY TAKE?



"the age of first use of alcohol or drugs had a range between the ages of eleven to fifteen years old. Misuse of prescription medication, tobacco and alcohol were the other substances they were likely to try at an earlier age than cocaine. What was found was 14 years was the minimum age of first use of alcohol and maximum age of first use was 17 years of age" - *Study on Alcohol and Drugs in the Young Offender Population within The New Opportunity Corps Guyana 2010*

According to data derived from studies and recent reports from various schools, The most prevalent drugs abused by students are as listed;



CANU TIP:

While the risks are real, if you want to talk to your students about drugs, don't be too harsh because it will most likely backfire.

You must maintain a balanced approach and keep in mind that, when it comes to drugs, knowledge is power.

Giving your students facts from credible sources and informing them about the effects and risks of substance abuse will make them feel empowered and informed rather than chastised.

Make sure to discuss specific drugs rather than grouping them all together. Make the necessary distinctions, for example, between cannabis and heroin, and discuss the relative levels of harm.

They will be more willing to listen to you if they see that you are realistic about the risks.



- Tobacco
- Novel tobacco products; Vaping utensils
- Alcohol
- Cannabis
- Edible cannabis products; brownies...
- Ecstasy
- Cocaine
- Medicinal drugs: codeine- used to make "purple drank", which is a mixture of codeine medicine, hard candy and soft drinks.
- Inhalants

WHAT YOU CAN SAY TO EDUCATE YOUR STUDENTS ABOUT THE HARMS ASSOCIATED WITH DRUG USE

Health

All drugs can affect a young person's health in different ways • some effects are from long-term use, such as liver, kidney and heart problems • there are also immediate risks, such as overdose. Perfectly fit young people have died from a heart attack after taking drugs – especially volatile substances (like gases, glues and aerosols) • if there's a history of mental health problems in the family, taking medications can be hazardous. It may lead to having a mental health illness.

Financial

Drugs aren't necessarily expensive. More so, frequent or daily drug use can get people into debt.

Social

Some people use drugs to bond with friends and new people they meet. Drug use can begin to dominate their lives and harm their relationships. There is also the risk that drug-related friendships will make it more difficult for some people to quit using drugs.

Personal safety

A child is more vulnerable to assault if they are "off their heads" or have had a bad experience with drugs. When young people use drugs, they are more likely to make bad decisions, such as having unprotected sex. Using drugs also raises the likelihood of being involved in an accident.

TALKING ABOUT DRUGS

Most young people hesitate to speak to authority figures like police officers and teachers. Regardless of their reluctance, your opinions matter to them, even if they may not appear so at times!

If you don't talk, someone else might

CANU TIP:

Don't let your students get their information from their friends or the television. Even if they don't show it, your students are likely to trust you. Aside from their parents, you play an important role in their essential development, so talk to them about drugs. Give them accurate information, and make sure they understand your point of view so they know where they stand with you. Younger children are less likely to question authority and more willing to share their thoughts with you. Children, on the other hand, want more independence as they grow older and are less likely to discuss their feelings with their parents. Keep the lines of communication open by showing interest in their day and what they're learning at school. Make it clear that you care about their safety and well-being.

Top tips for talking

Find out the facts about drugs.
Before you start the conversation.

Think about how you will react.
If they say they have used drugs.

Don't make assumptions about
What they know or do.

If they say they've used drugs,
Stay calm, and don't panic.

Don't accuse them if they say they don't, but
you think they're lying.

Pick a good time to talk.
If they are using drugs, don't confront them when they're high.

Use opportunities to talk.
Stories in the media about drugs or drug-related storylines on TV can be helpful to springboard a conversation. Using these opportunities may mean your child doesn't feel accused of anything, so they may be more likely to respond to the conversation.

Listen to what they have to say.
And don't lose your temper if you disagree with

your child's opinions. It might make them rebel more.

Let them know you're there for them -
that they can talk to you about drugs.

Set boundaries -

Make your classroom rules clear so that students understand what you will and will not accept.

THE LAW

It is important that, as Teachers/ Educators, when you talk to your students about the effects of drugs, you also talk to them about the consequences of these effects in relation to the Laws of Guyana.

Drug trafficking is a serious issue: drug possession and trafficking are punishable by lengthy prison sentences and hefty fines. The minimum sentence for illegal drug offences is three years in prison. Marijuana, crack cocaine, cocaine, and synthetic drugs, including methamphetamine, non-medical use of ketamine, fentanyl, new 'ecstasy,' and crystalline MDMA, are the illegal drugs of choice in Guyana today.

Possession

If law enforcement, including the Customs Anti Narcotic Unit and the Guyana Police Force, discovers someone in possession of drugs, they will always take action, even if the amount is small. Depending on the circumstances, what happens may include a formal caution, arrest, and prosecution. When it comes to minors under the age of 18, law enforcement will contact their parent or guardian.

Supply

Supplying (or intending or offering to supply) illegal drugs is treated more seriously than possession. This is often called 'dealing' and includes giving drugs to mates, even if it's for free. Looking after drugs for someone and then giving them back can also lead to a charge of supplying drugs. The courts will use the latest sentencing guidelines for those who commit drug offences.

Drunk driving in Guyana

Currently, the penalty for driving under the influence and losing control of the vehicle is a fine ranging from \$30,000 to \$60,000 or imprisonment for 12 months, with a fine ranging from \$40,000 to \$80,000 and imprisonment for a second or subsequent conviction. Individuals may also be barred from holding or obtaining a licence for 12 months. Suppose a person is convicted of two consecutive offences. In that case, they will be barred from holding or obtaining a licence for 24 months, and if a third conviction occurs, the person will be permanently barred from holding or obtaining a licence.

Meanwhile, the current penalty for driving over the prescribed alcohol limit is \$7,500; the proposal is to raise it to \$200,000 and to extend the licence suspension period for people charged with two consecutive offences from 12 months to 24 months.

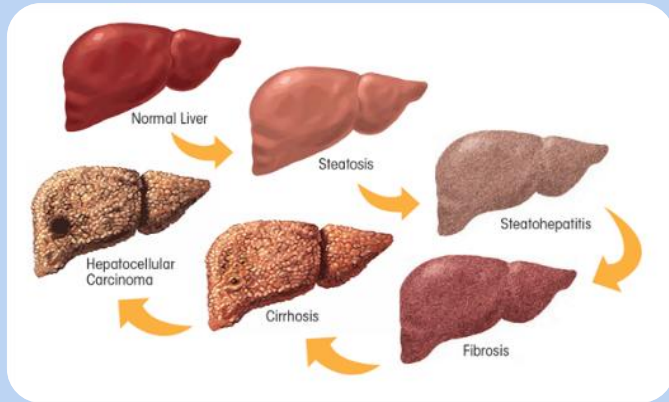
Smoking where it is prohibited

The legislation provides for a maximum fine of \$10,000 for a person who smokes in a place where smoking is prohibited. Where the person commits the offence a subsequent time, the maximum fine is \$20,000. No imprisonment is prescribed for the offence.

HEALTH EFFECTS

Drugs can be harmful to your mind and body, significantly while you're still growing and changing. Each drug has short and long-term effects on your body. In this chapter, we highlight the long-term effects with illustrations.

ALCOHOL



- High blood pressure.
- Stroke
- Irregular heartbeat.
- Damages liver

TOBACCO



- Higher risk of having respiratory diseases
- Increases the risk of stroke
- Increases the chance of having type 2 disease

CANNABIS



- Mental health problems
- chronic cough
- Frequent respiratory infections

COCAINE/ CRACK



- Loss of sense of smell
- nosebleeds, nasal damage and trouble swallowing from snorting
- Infection and death of bowel tissue from decreased blood flow; poor nutrition and weight loss; lung damage from smoking.

MDMA

(ECSTASY/MOLLY)



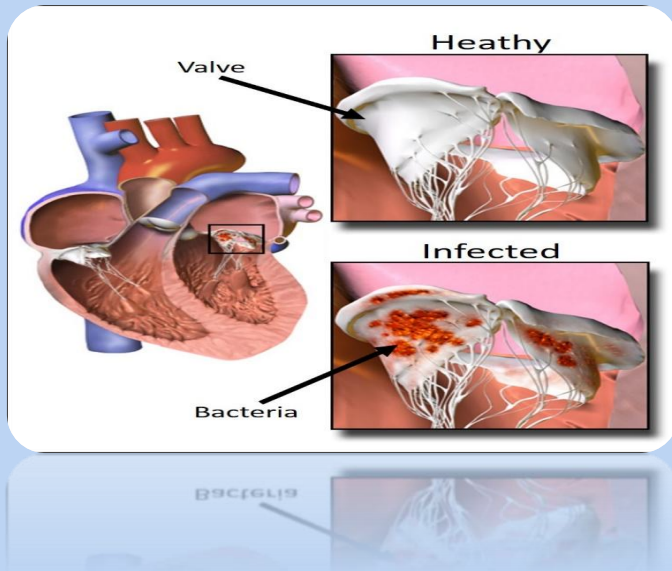
- Long-lasting confusion
- Depression
- problems with attention
- memory, and sleep; increased anxiety
- impulsiveness
- Less interest in sex.
- oral and oropharyngeal mucosal oedema

METHAMPHETAMINE



- Anxiety
- Insomnia
- mood problems
- paranoia
- hallucinations
- weight loss
- severe dental problems
- Intense itching leading to skin sores from scratching.

HEROIN



- Collapsed veins
- abscesses (swollen tissue with pus)
- infection of the lining and valves in the heart
- constipation and stomach cramps
- liver or kidney disease
- pneumonia

INHALANTS



- Liver and kidney damage
- bone marrow damage
- limb spasms due to nerve damage
- Brain damage from lack of oxygen that can cause problems with thinking, movement, vision, and hearing.

LSD

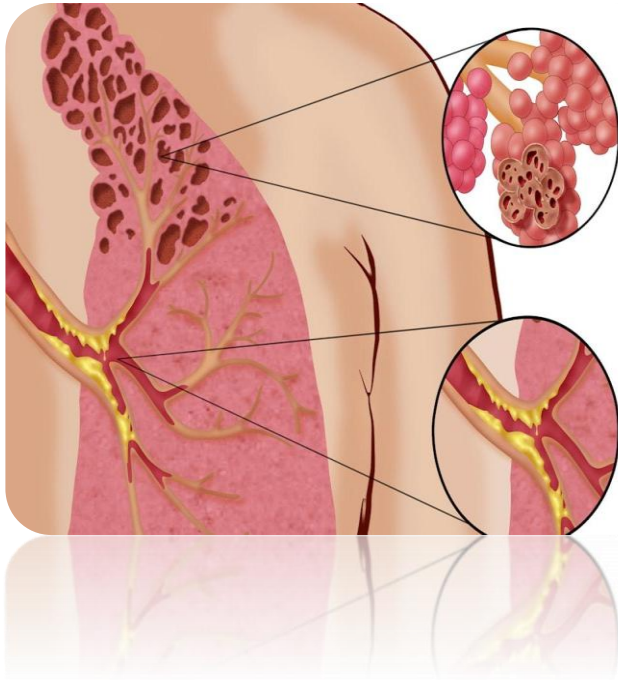
(LYSERGIC ACID DIETHYLAMIDE)



HPPD – A MENTAL HEALTH ISSUE

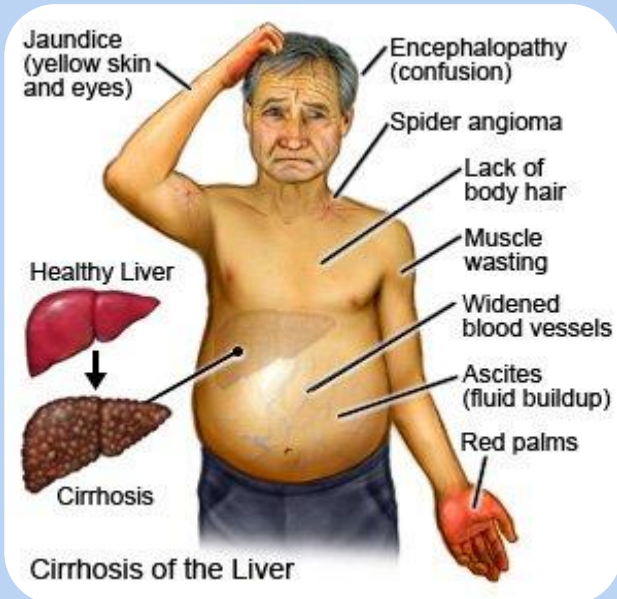
- Frightening flashbacks (called Hallucinogen Persisting Perception Disorder [HPPD])
- Ongoing visual disturbances, disorganized thinking, paranoia, and mood swings.

VAPING



- Damages the lungs
- Popcorn Lung disease
- Cardiovascular Issues

LEAN/ PURPLE DRANK



- Faster heartbeat
- Impaired vision
- Memory loss
- Acute Liver failure

TO NOTE: It is important to show illustrations to students so that they may have a better understanding of the physical changes as well as damage prolonged substance use can cause.

DRUG IDENTIFICATION: WHAT TO LOOK FOR

The following pages provide information on some of the more commonly used drugs, highlighting the following:

A. Physical Appearance and Packaging

Common Drugs: Know your basics, marijuana, prescription meds, stimulants, and even new synthetic drugs.

Packaging Clues: Illicit drugs often come in non-standard packaging (small bags, foil, or repurposed containers). Look for unusual labels, colors, or textures.

Substances' Look: Many drugs have distinct textures and colors. For example, pills might have logos or unusual shapes that don't match legitimate prescriptions.

B. Behavioral and Physical Signs

Physical Cues: Bloodshot eyes, sudden weight loss or gain, and noticeable changes in hygiene.

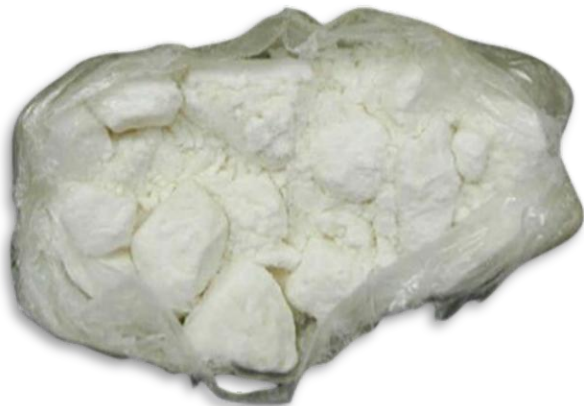
Behavioral Red Flags include mood swings, erratic attendance, sudden secrecy about whereabouts, or a drastic change in peer groups.

Communication Shifts: Slang terms or secretive language that might indicate drug culture.

COCAINE

Cocaine is a highly addictive stimulant drug derived from the leaves of the coca plant.

Description: A Shiny crystalline powder resembling snow



Signs displayed after cocaine use:

- ❖ High energy
- ❖ Speaking more quickly than usual
- ❖ Fidgeting or displaying unease
- ❖ Dilated pupils
- ❖ Anxiety
- ❖ Mood swings or aggressive behaviour

CRACK-COCAINE

Crack cocaine is made by mixing powdered cocaine with other substances.

Description: Small white or beige rocks with a chemical aroma.



Signs displayed after using crack-cocaine:

- ❖ Runny nose
- ❖ Dilated pupil
- ❖ Burst of energy
- ❖ Unreasonable excitement
- ❖ Nervous / Agitated

CANNABIS/ MARIJUANA



Cannabis, also known as marijuana, ganja, and high-grade, is a psychoactive drug derived from the cannabis plant.

Description: A shredded, green-brown mixture of dried flowers, stems, and leaves from the cannabis plant. It possesses a skunky, musky odour.

Signs displayed after using marijuana:

- ❖ Red eyes
- ❖ Slow reaction time
- ❖ Memory loss
- ❖ Poor muscle coordination
- ❖ Excessive sleepiness
- ❖ Increased appetite
- ❖ Slurred speech

MDMA/ ECSTASY



Methylenedioxyamphetamine, commonly referred to as Ecstasy or Molly, is a psychoactive substance.

Description: Ecstasy is available in pill or powder form; the pills feature a range of logos and colours.

Symptoms displayed after using Ecstasy:

- ❖ Heightened emotions
- ❖ Unnatural, long-lasting energy
- ❖ Excessive sweating
- ❖ Heightened emotions
- ❖ Dilated pupils
- ❖ Paranoia
- ❖ Teeth clenching

HASHISH

Hashish, also known as a hash, is a drug made from parts of the cannabis plant.

Description: Hashish can be solid, resinous, or in oil form. It has an earthy scent combined with hints of smoke and ash.

Signs displayed after consuming hashish:

- ❖ Red eye
- ❖ Slow reaction time
- ❖ Loss of memory
- ❖ Poor muscle and limb coordination
- ❖ Sleepiness
- ❖ Increased appetite



METHAMPHETAMINE



Methamphetamine is a white crystalline substance that affects the central nervous system when taken.

Description: Crystal Meth can have a few different smells. Some have a strong chemical smell like cleaning products and the user smells like ammonia.

Signs displayed after using Crystal Methamphetamine

- ❖ Dry mouth/ bad breath
- ❖ Violent behaviour
- ❖ Nausea
- ❖ Diarrhea
- ❖ Vomiting

METHAMPHETAMINE PILLS



Methamphetamine (commonly known as meth) is a powerful and highly addictive stimulant that affects the central nervous system. It is often found in pill form, sometimes referred to as "yaba" (a Thai term meaning "crazy medicine") or "batu" in some regions. These pills are typically small, brightly colored, and may be stamped with logos or symbols.

Signs observed after taking meth pills:

- ❖ Increased heart rate and blood pressure
- ❖ Hyperactivity and decreased appetite
- ❖ Aggressive or reckless behavior
- ❖ Insomnia and paranoia

HEROIN



Heroin is a highly addictive drug made from morphine used illegally as a narcotic.

DESCRIPTION: Heroin does not always possess an odour. Less pure heroin emits a vinegar-like scent when it is smoked.

Signs exhibited after heroin use:

- ❖ Drowsiness for hours
- ❖ Heaviness of limbs
- ❖ Clouded thinking
- ❖ Shortness of breath
- ❖ Chest pains

LSD



LSD (lysergic acid diethylamide) is a mind-altering drug that increases your thoughts, emotions, and sensory perception.

DESCRIPTION: The most common form is drops of LSD solution dried onto gelatin sheets, pieces of blotting paper (paper stamp sheets)

Signs exhibited after using LSD:

- ❖ Tremors
- ❖ Sweating
- ❖ Increased breathing and heart rate
- ❖ Sleeplessness
- ❖ Loss of appetite

While some drugs, such as alcohol, caffeine, nicotine, and prescribed and over-the-counter medications, are legal. However, their use may be restricted based on age, location of use, driving, and sales rules. The active ingredient content of legal drugs can be regulated and controlled. Nonetheless, long-term use of these drugs can have serious health consequences, and long-term use can result in death. As a result, sensitisation remains critical. Some of these drugs include:

ALCOHOL



An alcoholic beverage is one that contains ethanol, which is a type of alcohol that functions as a drug and is produced through the fermentation of grains, fruits, or other sugar sources.

Signs exhibited after using Alcohol:

- ❖ can make some people aggressive
- ❖ Bad breath, foul scent
- ❖ Slurred speech
- ❖ Difficulty standing steady or walking straight

TOBACCO



Tobacco is a plant cultivated for its leaves, which undergo drying and fermentation before being used in tobacco products. Tobacco contains nicotine, a substance that can lead to addiction, which is why many individuals who use tobacco find it challenging to quit.

Signs exhibited after using Tobacco:

- ❖ Smoky aroma
- ❖ Persistent cough
- ❖ They appear tense

Identifying modern drug use trends among teens

VAPING



Vaping has become one of the biggest drug use trends among teens, fueled by sleek marketing, social media influence, and a perception that it's a "safer" alternative to smoking. But the reality is far more concerning. Here's what's happening:

Nicotine Addiction in Disguise

Flavoured Vape Products – Sweet flavours (such as cotton candy, mango, and mint) disguise the harshness of nicotine, making them more appealing to first-time users.

High Nicotine Concentration – Many e-cigarettes, particularly those utilising nicotine salts, deliver significantly more nicotine than traditional cigarettes, resulting in quicker addiction.

Misconceptions – Many teenagers think that vapes are "just water vapour," but they actually contain harmful chemicals and heavy metals.

Cannabis Vaping: A Silent Epidemic

THC Vape Cartridges – Many teens are shifting from nicotine to THC vapes, often sourced from unregulated markets, increasing the risk of exposure to contaminants like vitamin E acetate, which has been linked to lung injuries (EVALI).

Concealability – Vape pens are odorless (compared to smoking weed), making it easier for teens to get high in school, at home, or in public places without getting caught.

Social Media & Peer Influence

Platforms like TikTok, Snapchat, and Instagram showcase vaping as trendy and harmless. Viral challenges (e.g., "ghosting hits," "zero-nic vaping") make it a social norm among teens rather than a risky behavior.

Mental Health & Self-Medication

Many teens vape nicotine or THC to cope with stress, anxiety, or depression. The irony? Nicotine addiction worsens anxiety and depression over time, creating a vicious cycle.

The Rise of Synthetic & Counterfeit Vapes

Black Market Disposable Vapes—Cheap, colorful, and high-nicotine-content vapes from overseas flood the market.

Synthetic Cannabinoids (Spice, K2) – Some illegal THC carts are laced with synthetic THC, leading to paranoia, seizures, or psychosis.

Identifying modern drug use trends among teens LEAN/ PURPLE DRANK



Lean, also known as Purple Drank, Sizzurp, or Dirty Sprite, has been around for decades but continues to be a growing trend among teens due to its glamorisation in hip-hop culture, social media, and the ease of access to its ingredients.

Signs exhibited after using Purple Drank/ Lean:

- ❖ Feeling intense excitement or happiness
- ❖ Unusual Calmness or quietness
- ❖ Being disconnected from your surroundings
- ❖ Memory loss
- ❖ Loss of coordination

What is Lean?

Lean is a recreational drug cocktail made from:

- Prescription cough syrup (containing codeine & promethazine)
- Soft drinks (Sprite, Fanta, etc.)
- Hard candy (Jolly Ranchers, Skittles, etc.) for flavor
- Some variations include alcohol or crushed pills (benzodiazepines like Xanax), making it even more dangerous.

Why is Lean Popular Among Teens?

Rap & Hip-Hop Influence: Artists like Lil Wayne, Future, and the late DJ Screw popularised Lean in their lyrics and lifestyles.

Social Media Challenges: Teens post Lean-drinking videos on TikTok, Instagram, and Snapchat, making it seem trendy.

Easily Accessible Ingredients: Unlike other street drugs, prescription cough syrup can be stolen from medicine cabinets or obtained illegally from pharmacies and dealers.

Relaxing, Euphoric Effect: The mix slows down the central nervous system, causing a drowsy, euphoric high that some teens chase.

The Dangers of Lean

Highly Addictive: Codeine is an opioid, and repeated use quickly leads to dependence and addiction.
Respiratory Depression & Overdose: Taking too much Lean slows breathing, which can lead to coma or death, especially if mixed with alcohol or other depressants.

Brain Damage & Mental Fog: Chronic use affects memory, coordination, and judgment, impacting school performance.

Organ Damage: High sugar content combined with codeine abuse can cause severe liver and kidney damage over time.

Identifying modern drug use trends among teens

MARIJUANA EDIBLES



Marijuana edibles are foods and drinks infused with THC (tetrahydrocannabinol), the psychoactive component of cannabis, have become a significant trend among teenagers. Their increasing popularity is driven by their discreet nature, potency, and widespread availability, particularly in areas where marijuana is legal or decriminalised.

Signs exhibited after using edibles:

- ❖ Psychotic episodes
- ❖ Hallucinations
- ❖ Paranoia
- ❖ Panic attacks
- ❖ Impaired motor ability

Why Are Teens Using Marijuana Edibles?

- *Easy to Conceal* – Unlike smoking or vaping, edibles have a subtle odour, making them simpler to use at home or in schools without detection.
- *Influence of Social Media & Pop Culture* – Platforms such as TikTok, Snapchat, and Instagram portray teens consuming edibles casually, thus normalising their use.
- *Perception of Safety* – Many teens believe that edibles are "healthier" than smoking, as they do not involve inhaling smoke or vape chemicals.
- *Increased Availability* – In areas where cannabis is legal or semi-legal, edibles can be readily purchased from dispensaries, dealers, or even made at home and sold in schools.

The Risks of Marijuana Edibles for Teens

Delayed Onset, Increased Overconsumption

Unlike smoking (which causes immediate effects), edibles take 30 minutes to 2 hours to kick in. Teens often consume too much too quickly, thinking the edible isn't working—leading to dangerous overdoses.

Symptoms of overconsumption: Paranoia, hallucinations, nausea, panic attacks, and even psychotic episodes.

Higher THC Potency

Many edibles contain extremely high THC levels (10-100mg per serving), compared to the 5-10mg typical "safe" dose.

Some dispensary edibles contain multiple servings, but teens may eat the whole product, leading to intense and unpredictable effects.

Impact on Brain Development

Long-term cannabis use during adolescence can affect memory, learning, and emotional regulation because the brain is still developing.

Studies show that regular marijuana use in teens is linked to lower academic performance and increased risk of mental health issues like depression and anxiety.

Unregulated & Homemade Edibles

Many teens buy edibles from street dealers or online sellers, which may be contaminated with unknown substances, including synthetic cannabinoids (Spice/K2) or even fentanyl.

Homemade edibles often have inconsistent THC dosages, leading to unpredictable highs and bad reactions.

Local & Global Trends in Teen Edible Use

North America:

In the U.S. and Canada, edibles are the fastest-growing form of teen marijuana consumption.

A study showed that 40% of U.S. high school cannabis users preferred edibles over smoking or vaping.

Edible-related ER visits among teens have surged, especially in states with legalised marijuana.

Caribbean & Latin America:

In Guyana and the Caribbean, marijuana use among young people is on the rise, particularly in urban areas. With more relaxed regulations and black-market edibles, there is growing concern regarding teenagers gaining access to high-potency THC products.

Identifying modern drug use trends among teens

CABs DRINK



Caffeinated Alcoholic Beverages

(CABs), which combine alcohol with caffeine, have been a concern due to their appeal among adolescents. The

Signs exhibited after using CABs:

- ❖ When alcohol is mixed with caffeine, the caffeine can mask the depressant effects of alcohol, making drinkers feel more alert than they would otherwise. As a result, they may drink more alcohol and become more impaired than they realize, increasing the risk of alcohol-attributable

Key Points:

- **Health Risks:** The stimulant effects of caffeine can mask the depressant effects of alcohol, leading individuals to underestimate their level of intoxication. This can result in higher alcohol consumption, increased risk of alcohol poisoning, and engagement in risky behaviors such as drunk driving.
- **Regulatory Actions:** In 2010, the U.S. Food and Drug Administration (FDA) issued warnings to manufacturers of CABs, stating that the combination of caffeine and alcohol in these products is "unsafe." This led to the reformulation or removal of such products from the market.
New York State Department of Health
- **Current Trends:** While the popularity of pre-mixed CABs has declined due to regulatory actions, some adolescents may still combine caffeine and alcohol on their own, such as mixing energy drinks with alcoholic beverages.

Why Are Inhalants Popular Among Teens?

- **Easy Accessibility** – Found in most households, making them easy to obtain.
- **Low Cost** – Unlike other drugs, inhalants don't require a dealer—just a quick trip to a store or home supply.
- **Fast-Acting Effects** – Inhalants produce a quick euphoria, hallucinations, dizziness, and a floating sensation within seconds.
- **Undetectable** – Since inhalants leave the body quickly, they don't show up on standard drug tests.
- **Peer Influence & Social Media**—TikTok and YouTube have exposed teens to "huffing" and "whippet challenges," making them seem trendy.

The Dangers of Inhalant Use

"Sudden Sniffing Death Syndrome" – Even one-time use can cause heart failure, seizures, or suffocation, leading to instant death.

Brain & Organ Damage – Inhalants destroy brain cells and can cause permanent damage to the liver, kidneys, and nervous system.

High Addiction Risk – Though often dismissed as a "starter drug," inhalants can lead to long-term addiction and cognitive impairment.

Risky Behaviors – Many teens combine inhalants with alcohol or other drugs, increasing the risk of fatal overdoses.

Local & Global Trends in Teen Inhalant Use

North America & Europe:

Studies indicate that 10-13% of U.S. middle school students have experimented with inhalants. The prevalence of inhalant use increases among 12 to 15-year-olds due to their easy access prior to teenagers encountering more potent drugs. Emergency room visits related to inhalant poisoning have risen, particularly from whipped cream dispensers (whippits/nitrous oxide).

Caribbean & Latin America:

In countries with elevated poverty rates, inhalants serve as an inexpensive alternative to alcohol and illegal drugs. Glue sniffing, often referred to as "shoemakers' high," is prevalent among street children and at-risk youths.

STREET OR SLANG NAMES FOR DRUGS

COMMON AND BRAND NAMES	STREET OR SLANG NAMES
COCAINE	Coke, Blow, Rock, Crack, Yayo, Snow, Sniff, Sneeze, White, Nose Candy, Bernice, Toot, Line, Dust, Flake
ECSTASY OR MDMA	X, E, XTC, Molly, Rolls, Hug, Hug Drug, Love Drug, Lover's Speed, Beans, Adam, Eve, Clarity, Moon Rocks, Happy Pill, Dancing Shoes, Scooby Snacks, Candy, Peace, Uppers
METHAMPHETAMINE	Crystal, Meth, Cristy, Tina, Crank, Crissy, Tweak, Glass, Ice, Shards, Go, Whizz, Chalk, Speed
LSD	Acid, L, Lucy, Lucy in the Sky with Diamonds, Cid, Tabs, Doses, Blotter, California Sunshine, Yellow Sunshine, Window Pane, Battery Acid, Dots, Looney Toons, Blue Heaven, Superman, Cubes
INHALANTS <i>- Can include everyday household products such as spray paints, markers, glues and cleaners</i>	Huff, Poppers, Moon Gas, Snappers, Bold, Rush, Air Blast, Glad, Hippie Crack, Oz, Discorama, Whiteout, Poor Man's Pot
MARIJUANA OR CANNABIS	Weed, Pot, Hashish, Hash, Green, Bud, Grass, Trees, Reefer, Herb, Mary Jane, Ganja, Hemp, Dope, Chronic, Kush, Sinsemilla, Purple Haze, Skunk, Papi, Sours, Sour diesel
HEROIN	H, Smack, Dope, China White, Horse, Skag, Junk, Black Tar, Big H, Brown Sugar, Mud, Dragon, Boy, Mexican Brown, Thunder, Skunk
OPIOIDS: CODEINE <i>-Often combined with soft drinks and hard candy</i>	Captain Cody, Cody, Lean, Schoolboy, Sizzurp, Purple Drank.

UNDERSTANDING CONCEALMENT: THE SNEAKY TACTICS

Teachers are frequently faced with the difficult task of determining whether a teen is using drugs. With the widespread availability and abuse of new psychotropic drugs and traditional drugs, both legal and illegal, knowing if a young person is involved in substance abuse is more important than ever. Intervening can sometimes mean the difference between life and death.

Teachers and educators may not have access to a student's belongings, but this information may be helpful when speaking with a parent whose child you suspect is using.

Most young people have unrestricted internet access, where they can find detailed instructions on how to hide drugs (or anything else) in places where parents or other adults, including Teachers, are unlikely ever to check. There are several online forums dedicated to drug use, and it is on these sites that suggestions and instructions can be found.

Common Concealment Methods

Everyday Items: Drugs can be hidden in pens, books, or even clothing accessories.

Body Concealment: Some may hide substances in bags, pockets, or even ingested capsules.

Digital Concealment: With tech everywhere, some might use apps or online platforms to trade substances discreetly.

Concealment Methods in and Around the School

- Above the ceiling, accessible via a washroom vent.
- In washrooms behind toilet cisterns
- Within air conditioning ducts
- Hidden in containers and old soft drink cans, adjacent to the rubbish area, or in refuse bins.

There are many other new and conventional methods used, and constant research and findings may highlight other areas being used to conceal drugs.

What to Look For

Inconsistencies: Items that don't fit the normal classroom setting (like a flash drive with an unusual shape or odd smells coming from a backpack).

Behavioral Evasion: Students who're overly anxious about their belongings or consistently refuse to let teachers check them (when policy allows).

PEER PRESSURE ROLE-PLAYING EXERCISE

OBJECTIVE: Help students develop refusal skills.

HOW TO PLAY:

- Split students into small groups.
- Give each group a scenario where one or more students are pressured to use drugs (e.g., at a party, on social media, with friends).
- Have students take turns playing both the person being pressured and the one pressuring.
- Discuss different ways to say "no" assertively and confidently.

FACT/ FICTION EXERCISE

One of the most serious issues with students, particularly those in their adolescent years, is that they almost always have incorrect information about drugs and tend to believe what they hear from other teens, mainly the "hype" about the benefits of doing drugs. The truth is that there is no upside to using drugs. As teachers/educators, we must help them separate facts from fiction.

Below is a little exercise you can try with your students to help them understand the facts about drugs.

OBJECTIVE: Bust common drug-related myths (fiction).

HOW TO PLAY:

- Write drug-related statements (some fiction, some facts) on flashcards.
- Read each one aloud and have students guess if it's a myth or a fact.
- Reveal the correct answer and discuss why the myth exists.
- Example: "Marijuana is harmless because it's natural." (Myth: It can still have harmful effects, especially on young brains.)

Examples of **FACT/ FICTION QUESTIONS** with **ANSWERS**.

	FACT	FICTION
A. Marijuana is harmless.		
B. Using drugs doesn't change the brain.		
C. Legal drugs are helpful; illegal drugs are harmful.		
D. Using drugs is a normal part of growing up, and experimentation is harmless		
E. You can't overdose on prescription drugs to get high the first time.		
F. Everybody is doing it!		
G. It can't hurt to try it just once.		
H. Drug use is voluntary . . . I can quit whenever I want!		

I. Drugs are chemicals that change the way a person's body and mind works		
J. A person who uses drugs can become addicted or dependent on them.		
K. Teenagers are too young to get addicted		
L. Alcohol is a drug which slows people's bodies and reactions down.		
M. It is illegal (against the law) for young people under the age of 18 to buy alcohol in shops or bars.		
N. Alcohol is not an addictive drug.		
O. Vaping is not harmful		

FACT/ FICTION ANSWERS

- A. **FICTION:** Marijuana smokers risk the same health problems as tobacco smokers: bronchitis,
- B. **FICTION:** It causes emphysema and bronchial asthma. They also experience a lack of coordination, memory problems, and poor concentration.
- C. **FICTION:** It doesn't matter whether a drug is legal or illegal because all medicines can be abused. Even if a federally regulated drug is considered "safe," misuse and abuse of this drug can still have harmful effects.
- D. **FICTION:** The majority of teens reject drugs.
- E. **FICTION:** You can overdose on any drug, even the first time you use it.
- F. **FICTION:** Not "everybody" is doing it. Most teens are not doing drugs. Those who do drugs do so infrequently, at parties or on occasion. Most teens do not drink or do drugs regularly
- G. **FICTION:** Even trying drugs for the first time can be harmful. While high, you may do something you later regret, and your first drug use may result in the development of psychosis or a psychotic disorder, which leads to mental illness. Crack cocaine, for example, is so

addictive that your first use may lead to a life of addiction. The first time you try drugs; you could die from an overdose or poisoning.

- H. **FICTION:** Drug use is indeed a choice at first, but over time, it alters the chemistry of the brain and body, resulting in a compulsive and uncontrollable need for the drug. Addiction is a profound side effect of drug abuse.
- I. **FACTS:** Drugs affect the way your body and mind function; they can change how you feel, think and behave.
- J. **FACTS:** It's possible to be dependent on drugs without being addicted. Dependence can be a bodily response to a substance.
- K. **FICTION:** Addiction can happen at any age. Even unborn children can get addicted because of their mother's drug use.
- L. **FACTS:** Alcohol is classified as a depressant because it slows down the central nervous system, causing a decrease in motor coordination, reaction time and intellectual performance.
- M. **FACTS:** Guyana's laws state that the legal age limit for alcohol consumption is 18. Children under 16 are not allowed to be in the bars of any licensed premises or even purchase alcohol unless they are above 18. Additionally, a child should never be asked to go to any licensed premises to buy alcohol.
- N. **FICTION:** People with addiction lose control over their actions. They crave and seek out drugs, alcohol, or other substances no matter what the cost, even at the risk of damaging friendships, hurting family, or losing jobs.
- O. **FICTION:** Vaping is undeniably harmful, exposing users to numerous toxic and carcinogenic substances that may lead to adverse health effects.

"WHAT WOULD YOU DO?" DECISION-MAKING SCENARIOS

OBJECTIVE: Teach students critical thinking in drug-related situations.

HOW TO PLAY:

- Present real-life dilemmas (e.g., a friend offers you a vape at a concert).
- Have students write or discuss their responses.
- Compare responses and highlight effective strategies for handling peer pressure.

SOCIAL MEDIA INFLUENCE BREAKDOWN

OBJECTIVE: Help students analyse the media's role in normalising drug use.

HOW TO PLAY:

- Show advertisements, music videos, or influencer posts that depict drug use.
- Discuss: How does the media make drug use look appealing? What's missing from the picture?
- Have students create their own "honest" anti-drug messages in response.

THE BRAIN ON DRUGS – SCIENCE DEMO

OBJECTIVE: Show students how drugs impact the brain.

HOW TO PLAY:

- Use a simple analogy (e.g., raw egg = healthy brain, fried egg = brain on drugs).
- Explain neurotransmitters and how substances interfere with brain function.
- Use interactive apps or videos to visualise brain changes due to substance use.

"WHAT WOULD YOU DO?" DECISION-MAKING SCENARIOS

OBJECTIVE: Empower students to be advocates.

HOW TO PLAY:

- Have students design posters, TikTok-style videos, or memes with drug prevention messages.
- Display their work around the school or on social media.
- Encourage creativity and peer collaboration.

ENSURING YOUR STUDENTS' SAFETY

Nothing is scarier than seeing early warning signs of substance abuse in a student. Thankfully, identifying these warning signs can be crucial. Moreover, any abnormal behaviour, even if it is not listed here, is a cause for the topic to be addressed.

What can you do to reduce the risks if they do try drugs?

After identifying early warning signs of addiction, the next step is to talk with the student. While there is no ideal way to express this, you should reassure them that "you are there for them."

While there aren't any clear signs, there are general things to look out for, which include:

- Drowsiness, poor hygiene or appearance
- mood swings
- red-rimmed eyes and/ or a runny nose
- uncharacteristic loss of interest in school, hobbies and friends

Helping your student stay safe

Remember that emergencies are infrequent. But sometimes, people can have a bad reaction to drugs. They could have a bad experience and get anxious and panicky. Or become overheated and dehydrated. It's best to be prepared, just in case, so that you know what to do if a child falls ill after taking something.

First things first

- try not to panic
- calm them and be reassuring
- try to find out what they've taken
- explain that the feelings they're having will pass
- stay with them
- if you are worried at all or your child becomes unconscious, contact a healthcare facility

If a child is anxious and panicky

This can happen with cannabis, ecstasy, LSD...

What to do:

- sit them in a quiet room
- keep them away from crowds, bright lights and loud noises
- if they are breathing very quickly, tell them to take long, slow breaths

If a child is drowsy

This can happen with volatile substances (which include gases, glues and aerosols) and heroin.

What to do:

- Sit them in a quiet place and try to keep them awake
- Do not frighten or let them exert themselves – it can be dangerous. A sudden fright can Kill someone high on volatile substances
- Never give them coffee to wake them up
- If symptoms continue, place them in the recovery position
- If they do not become more alert, call an ambulance right away

If a child is too hot and dehydrated

This can happen with ecstasy and speed.

What to do:

- Move them to a quiet, more extraordinary place
- Take off excess clothing to help them cool down
- Give them non-alcoholic drinks like fruit juice, sports drinks or water to sip (no more than a pint an hour)

RESPONDING TO A DRUG-RELATED INCIDENT

If a student is suspected to be using/ abusing drugs or found with drugs in their possession, there are steps you should consider taking.

a. Immediate Action

Stay Calm and Document: If you suspect drug use or possession, document your observations clearly and discreetly.

Follow Protocols: Adhere to your school's policies—this might mean notifying a designated authority rather than handling the situation alone.

Here is an example of a common protocol to follow:

1. The school social Worker should be contacted
2. If the student is found with any illicit substance, law enforcement, such as CANU or GPF, should be contacted.
3. Be assured that help will be given to restore the student to their former self.

b. Supporting the Student

- *Intervention Over Punishment:* Focus on intervention, connecting the student with counseling and support rather than just disciplinary action.
- *Confidentiality:* Respect the student's privacy while ensuring safety. Confidential discussions often lead to better outcomes.

c. Legal and Ethical Considerations

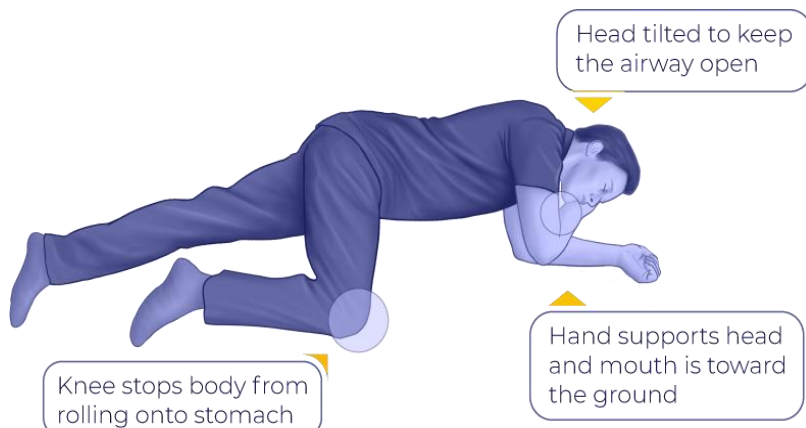
Know Your Rights: Be aware of your state's legal parameters around searches and student privacy.

Professional Guidance: If in doubt, get guidance from school counselors, legal advisors, or local law enforcement.

EMERGENCY PROTOCOL FOR SUSPECTED OVERDOSE INCIDENT

If a child has lost consciousness due to a suspected drug overdose, please follow the steps listed below:

- dial 913 immediately
- place them on their side in the recovery position
- stay with them until the ambulance comes
- If you know what they have taken, tell the ambulance crew, or if you've found drugs, hand them over so that they may be able to tell what they're dealing with.



Positioning a child in the recovery position can save their life by keeping the airway clear, preventing choking, and enabling them to breathe safely while awaiting medical assistance. Always contact emergency services promptly in suspected overdose cases. 🚑

Instructions for Placing a child in the Recovery Position



1 Tilt head backwards, ensure clear airway and straighten head and neck



2 Place arm at side and other arm across chest with hand against cheek



3 Bring far knee up to a 90° angle



4 Roll person over towards you with knee at angle and ensure head is supported

If you suspect a child has overdosed and is unconscious yet still breathing:

Place them on their side – preferably the left side to alleviate pressure on the heart.

Tilt their head slightly back to maintain an open airway.

Bend the top leg at the knee to stabilise their position.

Ensure the lower arm is extended under their head for support.

Check for normal breathing and remain with them until emergency assistance arrives.

Why is the recovery position important?

Placing a child in the recovery position if they are unconscious due to a suspected drug overdose is critical because it helps protect their airway and prevents life-threatening complications. Here's why it's so important:

Prevents Choking on Vomit

- Many drugs, especially opioids, depress the gag reflex, increasing the risk of aspiration (inhaling vomit into the lungs).
- If a child is lying on their back, vomit can block the airway, leading to suffocation or aspiration pneumonia.
- The recovery position ensures that if they vomit, it drains out of their mouth instead of entering their lungs.

Keeps the Airway Open

- Overdose can cause the tongue to relax and block the throat.
- Turning the child on their side keeps the airway clear and reduces the risk of suffocation.

Reduces the Risk of Breathing Complications

- Some drugs slow breathing or cause irregular breathing patterns.
- The recovery position keeps the chest unrestricted, making it easier for them to breathe.

Prevents Sudden Cardiac Arrest

- Overdoses can slow or stop the heart. Ensuring an open airway improves oxygen flow and circulation, reducing the risk of cardiac complications.

Protects from Further Injury

- A child left on their back or stomach could risk falling, hitting their head, or rolling into a dangerous position.
- The recovery position keeps them stable and safe until emergency help arrives.

When NOT to Use the Recovery Position

- If the child is not breathing or has no pulse, start CPR immediately instead.
- If there is a suspected neck or spinal injury, keep them as still as possible while ensuring the airway remains open.

FINAL THOUGHTS


“No one possesses a magic wand to eliminate drugs overnight. However, with the right information, collaboration, and a straightforward approach, teachers can significantly mitigate drug-related risks in schools. It’s about being realistic, remaining informed, and always prioritising the students’ best interests.”


This manual is a living document and will be updated annually, if necessary, with the latest information and local policies.


Real talk: staying educated is your best defense. Stay woke and keep it real in your classroom.


-
- i <https://www.britannica.com/science/cocaine>
- ii <https://www.drugfreeworld.org/drugfacts/crackcocaine.html>
- iii <https://nida.nih.gov/publications/research-reports/marijuana/what-marijuana>
- iv https://www.dea.gov/sites/default/files/2020-06/Ecstasy-MDMA-2020_o.pdf
- v <https://www.britannica.com/science/hashish>
- vi <https://nida.nih.gov/publications/drugfacts/methamphetamine>
- vii <https://nida.nih.gov/publications/drugfacts/heroin>
- viii
[https://en.wikipedia.org/wiki/Alcoholic_drink#:~:text=An%20alcoholic%20drink%20\(also%20called,or%20other%20sources%20of%20sugar.](https://en.wikipedia.org/wiki/Alcoholic_drink#:~:text=An%20alcoholic%20drink%20(also%20called,or%20other%20sources%20of%20sugar.)
- ix <https://nida.nih.gov/publications/drugfacts/cigarettes-other-tobacco-products>
- x <https://www.webmd.com/connect-to-care/vaping/what-is-vaping>
- xi <https://www.addictioncenter.com/opiates/codeine/lean-addiction-abuse/>
- xii <https://nida.nih.gov/publications/drugfacts/inhalants>

SOURCES


-  [AP News](#)
- [Most US teens are abstaining from drinking, smoking and marijuana ...](#)


-  [nida.nih.gov](#)
- [Most reported substance use among adolescents held steady in 2022](#)


-  [cbsnews.com](#)
- [Nearly half of U.S. teens smoke, drink alcohol, or use drugs](#)


-  [New York State Department of Health](#)
- [\[PDF\] Use of Caffeinated Alcoholic Beverages by Young People](#)


- [PubMed Central](#)
- [Listening to youth: Adolescents' reasons for substance use as a ...](#)








-  [Justice Department](#)
- [Information Brief: Illicit Drugs and Youth - Department of Justice](#)

-  [speakupnow.org](#)
- [\[PDF\] CASA Conversations- Drug and Alcohol Use by Teens](#)

-  [drugabusestatistics.org](#)
- [Teenage Drug Use Statistics \[2023\]: Data & Trends on Abuse](#)

-  [Rural Health Information Hub](#)
- [Substance Use and Misuse in Rural Areas Overview](#)

-  [cdc.gov](#)
- [Cannabis and Teens - CDC](#)


- [PubMed Central](#)
 - [Use of Marijuana Edibles by Adolescents in California - PMC](#)
-
- [Organization of American States](#)
 - [\[PDF\] Guyana Household Drug Survey, 2016](#)
-
- [PubMed Central](#)
 - [Teen Use of Marijuana Edibles: A Focus Group Study of an ...](#)
-
-  [dea.gov](#)
 - [Adolescents and Marijuana - DEA.gov](#)
-
-  [cdc.gov](#)
 - [Cannabis and Teens - CDC](#)
-
-  [Yahoo](#)
 - [Teens are popping cannabis edibles in the middle of their school ...](#)
-
-  [columbiapsychiatry.org](#)
 - [Recreational Cannabis Use By Teens Linked to Risk of Depression ...](#)
-
-  [news.ohsu.edu](#)
 - [Teen cannabis abuse has increased 245% over 20 years, study finds](#)
-
-  [JAMA Network](#)
 - [Trends in Marijuana Vaping and Edible Consumption From 2015 to ...](#)
-
- [inewsguyana.com](#)
 - [Teens less likely to use cannabis when it's legal, US study finds](#)
-
-  [Canu](#)
 - [\[PDF\] GUYDIN 2019 Report.pdf - Customs Anti Narcotic Unit](#)
 - ..


-
- [PubMed Central](#)
 - [Use of Marijuana Edibles by Adolescents in California - PMC](#)

 - [PubMed Central](#)
 - [Teen Use of Marijuana Edibles: A Focus Group Study of an ...](#)


 - [PubMed Central](#)
 - [Cannabis use among adolescents and emerging adults who use e ...](#)


 - [mottchildren.org](#)
 - [Marijuana and Teens | Michigan Medicine](#)

 -  [Wikipedia](#)
 - [Cannabis in Guyana - Wikipedia](#)

 -  [Wikipedia](#)
 - [List of countries by annual cannabis use - Wikipedia](#)

 - [Organization of American States](#)
 - [\[PDF\] Guyana Household Drug Survey, 2016](#)

 -  [dea.gov](#)
 - [Adolescents and Marijuana - DEA.gov](#)

 -  [AACAP](#)
 - [Marijuana and Teens - AACAP](#)

 - [redalyc.org](#)
 - [EXPLORING ADOLESCENTS' PERCEPTION OF HARMS AND ...](#)



THIS DOCUMENT WAS PREPARED
BY THE GUYANA DRUG INFORMATION NETWORK NETWORK,
CUSTOMS ANTI NARCOTIC UNIT (CANU)