

*Each DSLCC Student and Employee is responsible for reading the materials herein and for understanding the consequences of non-compliance*

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## **DSLCC Drug and Alcohol Prevention Program (DAAPP)**

(Updated September 22, 2020)

The DSLCC Drug and Alcohol Prevention Program pertains to the entire DSLCC community—students and employees. DSLCC will send an annual email outlining the entire DSLCC Drug and Alcohol Abuse Prevention Program to each employee and to each student.

Mandated by [The Drug-Free Schools and Communities Act Amendments of 1989 \(DFSCA\)](#), College/University Drug and Alcohol Prevention Plans are required to do the following:

- Distribute a comprehensive policy.
- Enforce alcohol and other drug-related standards of conduct.
- Implement strong prevention programs.
- Every other year, institutions must evaluate their policies and programs and publish a report—the biennial review report.
- **When college presidents sign the program participation agreement with the Education Department to accept federal funding, they agree to abide by the DFSCA, affirm they have a compliant drug and alcohol abuse prevention program in place, and risk losing that funding if they do not.**
- Since 2010, the Office of Federal Student Aid has enforced the DFSCA alongside the Clery Act as part of campus security reviews and student financial aid audits

DSLCC Drug and Alcohol Prevention Program will include, among other information, the following:

1. **Standards of conduct** that clearly prohibit, at a minimum, the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees on its property or as part of any of its activities;
2. A description of the **applicable legal sanctions** under local, State, or Federal law for the unlawful possession or distribution of illicit drugs and alcohol.
3. A description of the **health risks associated with the use of illicit drugs and the abuse of alcohol**
4. A description of any **drug or alcohol counseling, treatment, or rehabilitation or re-entry programs that are available to employees or students;** and
5. A clear statement that the Institution of Higher Education (IHE) will impose **disciplinary sanctions on students and employees** (consistent with local, State, and Federal law), and a description of those sanctions, up to and including expulsion or termination of employment and referral for prosecution, for violations of the standards of conduct required by paragraph (a)(1)

of this section. For the purpose of this section, a disciplinary sanction may include the completion of an appropriate rehabilitation program.

DSLCC Drug and Alcohol Prevention Program will encompass students, staff and faculty on the main campus in Clifton Forge, VA as well as the Rockbridge Regional Center in Buena Vista, Greenfield Center in Botetourt County and any other locations opening in the future, including all students taking classes online.

## Standards of Conduct

**The College Catalog and Student Handbook** prohibits the unauthorized manufacture, distribution and/or possession of alcoholic beverages, illegal drugs, firearms, or other weapons or controlled substances on campus or at campus sponsored activities. Please reference the State Board for Community College's Weapons policy in appendix A of the DSLCC College Catalog and Student Handbook. Students who violate local, state or federal laws may be referred by College authorities for criminal prosecution. Resources include the Department of Mental Health and Substance Abuse Services (1-800-451-5544). More information can be found in the DSLCC College Catalog and Student Handbook.

### **2019 - 2020 Catalog and Student Handbook, p. 161**

Student Policies and Procedures and Code for Student Rights, and Conduct

Substance Abuse: 43. Unauthorized manufacture, distribution and/or possession of alcoholic beverages, illegal drugs or controlled substances are prohibited from campus or campus-related functions by both state and federal laws. Students who violate state or federal laws may be referred by college authorities for criminal prosecution. Whether or not a criminal charge is brought, a student is subject to college discipline for illegally manufacturing, distributing, possessing or using any alcoholic beverage, illegal drug or controlled substance. Any student found to have engaged in such conduct is subject to the entire range of sanctions specified by the College, including suspension or expulsion.

## Legal Sanctions

### **Federal Law**

The federal law prohibiting the use of illicit drugs and the abuse of alcohol are found in [Title 21 United States Code \(USC\) Controlled Substances Act \(CSA\)](#). The federal law outlining the unlawful acts and penalties regarding use of controlled substances is [Title 21 USC Part D -- Offenses and Penalties 841. Prohibited Acts A](#)

Except as authorized in this subchapter, it shall be unlawful for any person knowingly or intentionally:

1. To manufacture, distribute, dispense or possess with intent to manufacture, distribute or dispense, a controlled substance; or
2. To create, distribute, dispense or possess with intent to distribute or dispense, a counterfeit substance.

The drugs and or other substances considered under the USC Controlled Substances Act are divided into five schedules. The schedules are updated on a yearly basis and a complete list is published annually in Title 21 Code of Federal Regulations (CFR) 1308.11 through 1208.15. The substances are categorized or placed into their respective schedules base on:

- Whether they have currently accepted medical use in treatment in the U.S.;
- Their relative abuse potential; and
- The likelihood of causing dependence when abused.

## State Law

### [Virginia Rules—Office of the Attorney General, A Commonwealth of Virginia Website](#)

The purpose of Virginia Rules is to educate young Virginians about Virginia laws and help them develop skills needed to make sound decisions, to avoid breaking laws, and to become active citizens of their schools and communities. Among many other topics about Virginia, the website deals with the topics of drugs, alcohol and tobacco. The information on these topics below is taken from *Virginia Rules* website.

A controlled substance is defined in *Code of Virginia* § 54.1-3401, as a drug or substance listed in Schedules I through VI of the Virginia Drug Control Act. Alcohol and tobacco are excluded from this definition of a controlled substance; laws governing alcohol and tobacco are included elsewhere in the Code.

The Virginia Drug Control Act places controlled substances into five categories called “schedules.” (*Code of Virginia* §§54.1-3446 through 54.1-3456.1) [Virginia’s Drug Control Act reflects the drug classifications in the federal Comprehensive Drug Abuse Prevention and Control Act of 1970.](#)

Controlled substances are classified into Schedules I through VI.

### **Classification Chart**

**Schedule I** drugs have a high potential for abuse and no accepted medical use, and include heroin and LSD.

**Schedule II** drugs have a high potential for abuse and severe dependence, but have a currently accepted medical use. **Schedule II** drugs include PCP, cocaine, methadone and methamphetamine.

**Schedule III** drugs have less potential for abuse than **Schedule II** drugs, a potential for moderate dependency and an accepted medical use. Anabolic steroids and codeine fall into this category.

**Schedule IV** drugs have less potential for abuse than **Schedule III** drugs, a limited potential for dependency, and are accepted in medical treatment. **Schedule IV** drugs include Valium, Xanax and other tranquilizers and sedatives.

**Schedule V** drugs have a low potential for abuse, limited risk for dependency and accepted medical uses. These include drugs like cough medicines with codeine.

**Schedule VI** includes certain substances which are not “drugs” in the conventional sense, but are nonetheless used, or abused, recreationally; these include toluene (found in many types of paint, especially spray paint) and similar inhalants such as amyl nitrite (or “poppers”), butyl nitrite, and nitrous oxide (found in many types of aerosol cans, though it is pharmacologically active, it is considered an inhalant). Many state and local governments enforce age limits on the sale of products containing these substances.

**Types of drug crimes**

The crime of drug **possession** occurs when a person possesses any controlled substance without a valid prescription (*Code of Virginia § 18.2-250*).

The crime of **drug sale or distribution** occurs when a person sells, provides, gives away, delivers or distributes a controlled substance.

The crime of drug **manufacturing** occurs when a person produces a controlled substance without legal authorization or possesses chemicals used in the manufacture of a controlled substance with intent to manufacture.

Code of Virginia § 54.1-3401 contains the following definitions:

“Sale” includes barter, exchange, or gift, or offer therefore, and each such transaction made by any person, whether as an individual, proprietor, agent, servant, or employee.

“Distribute” means to deliver other than by administering or dispensing a controlled substance.

“Manufacture” means the production, preparation, propagation, conversion, or processing of any item regulated by this chapter, either directly or indirectly by extraction from substances of natural origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis, and includes any packaging or repackaging of the substance or labeling or relabeling of its container. This term does not include compounding.

**Penalties for drug crimes**

The penalties depend on the schedule of controlled substance and the type of crime — whether the crime involves possession, sale or distribution, or manufacturing drugs. The table below provides a simple overview of possible penalties.

<b>Violations</b>	<b>Penalties (<i>Code of Virginia § 18.2-248</i>)</b>
Possession	
Possession of <b>Schedule I or II</b> controlled substance	<b>Class 5 felony</b> —imprisonment of one to 10 years, or confinement in jail for up to 12 months a fine of \$2,500, either or both.
Possession of <b>Schedule III</b> controlled substance	<b>Class 1 misdemeanor</b> —confinement in jail for up to 12 months and a fine of up to \$2,500, either or both.

Possession of <b>Schedule IV</b> controlled substance	<b>Class 2</b> misdemeanor—confinement in jail for up to six months and a fine of up to \$1,000, either or both.
Possession of <b>Schedule V</b> controlled substance	<b>Class 3</b> misdemeanor—fine up to \$500
Possession of <b>Schedule VI</b> controlled substance	<b>Class 4</b> misdemeanor—fine of up to \$250
Possession of marijuana, upon conviction, exposes the violator to a misdemeanor conviction for which the punishment is:	Misdemeanor confinement in jail for up to 30 days and a fine of up to \$500, either or both. Upon a second conviction, punishment is confinement in jail for up to one year and a fine of up to \$2,500, either or both.
Intent to sell or distribute (Code of Virginia § 18.2-248)	
VA HB972   2020   Regular Session Effective July 1, 2020 <a href="https://legiscan.com/VA/bill/HB972/2020">https://legiscan.com/VA/bill/HB972/2020</a>	Possession and consumption of marijuana; penalty. Decriminalizes simple marijuana possession and provides a civil penalty of no more than \$25. The bill provides that any violation of simple possession of marijuana shall be charged by a summons in form the same as the uniform summons for motor vehicle law violations and that no court costs shall be assessed for such violations.
<b>Possession of Schedule I or II</b> controlled substance with the intent to sell or otherwise distribute	Felony conviction—imprisonment from five to 40 years and a fine of up to \$500,00. Upon a second conviction, the violator must be imprisoned for not less than five years but may suffer life imprisonment, and fined up to \$500,000.
Possession of <b>Schedules III, IV, or V</b> controlled substance with the intent to sell or otherwise distribute.	Misdemeanor conviction—confinement in Jail for up to one year and a fine of up to \$2,500, either or both.
Possession of less than one-half ounce of marijuana with intent to sell or otherwise distribute.	Misdemeanor conviction—confinement in jail for up to one year and a fine of up to \$2,500, either or both.
Possession of more than one-half ounce of marijuana with intent to sell or otherwise distribute.	Felony conviction—imprisonment from one to 10 years, or at the discretion of the jury or the court trying the case without a jury, confinement in jail for up to one year and a fine of up to \$2,500, either or both.
Felony conviction, see <i>Code of Virginia</i> § 18.2-10; Misdemeanor conviction, see <i>Code of Virginia</i> § 18.2-11	

## Listing of drugs of abuse and their health risks

The National Institute of Health (NIH) has a website for the National Institute on Drug Abuse that explains the health consequences of using and abusing controlled substances: drugs, alcohol and tobacco. Please click on the link below to explore this site.

<https://www.drugabuse.gov/drugs-abuse>

Drug	Health Consequences
<p>Opioids</p> <p>Opioids are a class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, morphine, and many others.</p>	<p><b>Heroin</b></p> <p><b>Short-Term Effects</b></p> <p>People who use heroin report feeling a "rush" (a surge of pleasure, or euphoria). However, there are other common effects, including:</p> <ul style="list-style-type: none"> <li>• dry mouth</li> <li>• warm flushing of the skin</li> <li>• heavy feeling in the arms and legs</li> <li>• nausea and vomiting</li> <li>• severe itching</li> <li>• clouded mental functioning</li> <li>• going "on the nod," a back-and-forth state of being conscious and semiconscious</li> </ul> <p><b>Long-Term Effects</b></p> <p>People who use heroin over the long term may develop:</p> <ul style="list-style-type: none"> <li>• insomnia</li> <li>• collapsed veins for people who inject the drug</li> <li>• damaged tissue inside the nose for people who sniff or snort it</li> <li>• infection of the heart lining and valves</li> <li>• abscesses (swollen tissue filled with pus)</li> <li>• constipation and stomach cramping</li> <li>• liver and kidney disease</li> <li>• lung complications, including pneumonia</li> <li>• mental disorders such as depression and antisocial personality disorder</li> <li>• sexual dysfunction for men</li> <li>• irregular menstrual cycles for women</li> </ul> <p><b>Other Potential Effects</b></p> <p>Heroin often contains additives, such as sugar, starch, or powdered milk, that can clog blood vessels leading to the lungs, liver, kidneys, or brain, causing permanent damage. Also, sharing drug injection equipment and having impaired judgment from drug use can increase the risk of contracting infectious diseases such as HIV and hepatitis (see "Injection Drug Use, HIV, and Hepatitis").</p> <p><b>Can a person overdose on heroin?</b></p> <p>Yes, a person can overdose on heroin. A heroin overdose occurs when a person uses enough of the drug to produce a life-threatening reaction or death. Heroin overdoses have increased in recent years.<sup>5</sup></p> <p>When people overdose on heroin, their breathing often slows or stops. This can decrease the amount of oxygen that reaches the brain, a condition called <i>hypoxia</i>. Hypoxia can have short- and long-term mental effects and effects on the nervous system, including coma and permanent brain damage.</p> <p><b>Fentanyl</b></p> <p>Fentanyl's effects include</p>

	<ul style="list-style-type: none"> <li>• extreme happiness</li> <li>• drowsiness</li> <li>• nausea</li> <li>• confusion</li> <li>• constipation</li> <li>• sedation</li> <li>• problems breathing</li> <li>• unconsciousness</li> </ul> <p>People addicted to fentanyl who stop using it can have severe withdrawal symptoms that begin as early as a few hours after the drug was last taken. These symptoms include:</p> <ul style="list-style-type: none"> <li>• muscle and bone pain</li> <li>• sleep problems</li> <li>• diarrhea and vomiting</li> <li>• cold flashes with goose bumps</li> <li>• uncontrollable leg movements</li> <li>• severe cravings</li> </ul> <p>A person can overdose on fentanyl. An overdose occurs when a drug produces serious adverse effects and life-threatening symptoms. When people overdose on fentanyl, their breathing can slow or stop. This can decrease the amount of oxygen that reaches the brain, a condition called <i>hypoxia</i>. Hypoxia can lead to a coma and permanent brain damage, and even death.</p>
<p>Prescription CNS Depressants</p>	<p>Central Nervous System (CNS) depressants are medicines that include sedatives, tranquilizers, and hypnotics. These drugs can slow brain activity, making them useful for treating anxiety, panic, acute stress reactions, and sleep disorders.</p> <p>CNS depressants cause drowsiness; sedatives are often prescribed to treat sleep disorders like insomnia and hypnotics can induce sleep, whereas tranquilizers are prescribed to treat anxiety or to relieve muscle spasms. Some examples of CNS depressants grouped by their respective drug class are:</p> <p><b>Benzodiazepines</b></p> <ul style="list-style-type: none"> <li>• diazepam (Valium®)</li> <li>• clonazepam (Klonopin®)</li> <li>• alprazolam (Xanax®)</li> <li>• triazolam (Halcion®)</li> <li>• estazolam (Prosom®)</li> </ul> <p><b>Non-Benzodiazepine Sedative Hypnotics</b></p> <ul style="list-style-type: none"> <li>• zolpidem (Ambien®)</li> <li>• eszopiclone (Lunesta®)</li> <li>• zaleplon (Sonata®)</li> </ul> <p><b>Barbituates</b></p>

	<ul style="list-style-type: none"> <li>• mephobarbital (Mebaral®)</li> <li>• phenobarbital (Luminal®)</li> <li>• pentobarbital sodium (Nembutal®)</li> </ul> <p>People who start taking CNS depressants usually feel sleepy and uncoordinated for the first few days until the body adjusts to these side effects. Other effects from use and misuse can include:</p> <ul style="list-style-type: none"> <li>• slurred speech</li> <li>• poor concentration</li> <li>• confusion</li> <li>• headache</li> <li>• light-headedness</li> <li>• dizziness</li> <li>• dry mouth</li> <li>• problems with movement and memory</li> <li>• lowered blood pressure</li> <li>• slowed breathing</li> </ul> <p>If a person takes CNS depressants long term, he or she might need larger doses to achieve therapeutic effects. Continued use can also lead to dependence and withdrawal when use is abruptly reduced or stopped. Suddenly stopping can also lead to harmful consequences like seizures.</p> <p>A person can overdose on CNS depressants. An overdose occurs when the person uses enough of a drug to produce life-threatening symptoms or death</p> <p>When people overdose on a CNS depressant, their breathing often slows or stops. This can decrease the amount of oxygen that reaches the brain, a condition called hypoxia. Hypoxia can have short- and long-term mental effects and effects on the nervous system, including coma and permanent brain damage.</p>
Prescription Stimulants	<p>Prescription stimulants are medicines generally used to treat attention-deficit hyperactivity disorder (ADHD) and narcolepsy—uncontrollable episodes of deep sleep. They increase alertness, attention, and energy.</p> <p>What are common prescription stimulants?</p> <ul style="list-style-type: none"> <li>• dextroamphetamine (Dexedrine®)</li> <li>• dextroamphetamine/amphetamine combination product (Adderall®)</li> <li>• methylphenidate (Ritalin®, Concerta®).</li> </ul> <p>Popular slang terms for prescription stimulants include Speed, Uppers, and Vitamin R.</p> <p><b>Short-Term Effects</b></p> <p>People who use prescription stimulants report feeling a "rush" (euphoria) along with the following:</p> <ul style="list-style-type: none"> <li>• increased blood pressure and heart rate</li> </ul>

	<ul style="list-style-type: none"> <li>• increased breathing</li> <li>• decreased blood flow</li> <li>• increased blood sugar</li> <li>• opened-up breathing passages</li> </ul> <p>At high doses, prescription stimulants can lead to a dangerously high body temperature, an irregular heartbeat, heart failure, and seizures.</p> <p><b>What are the other health effects of prescription stimulants?</b> Repeated misuse of prescription stimulants, even within a short period, can cause psychosis, anger, or paranoia. If the drug is injected, it is important to note that sharing drug injection equipment and having impaired judgment from drug misuse can increase the risk of contracting infectious diseases such as HIV and hepatitis.</p> <p><b>Risk of Later Substance Use</b> Some people may be concerned about later substance misuse in children and teens who've been prescribed stimulant drugs to treat ADHD. Studies so far have not shown a difference in later substance use in young people with ADHD treated with prescription stimulants compared with those who didn't receive such treatment. This suggests that treatment with ADHD medication does not positively or negatively affect a person's risk of developing problem use.</p> <p><b>Can a person overdose on prescription stimulants?</b> Yes, a person can overdose on prescription stimulants. An overdose occurs when the person uses enough of the drug to produce a life-threatening reaction or death.</p> <p>When people overdose on a prescription stimulant, they most commonly experience several different symptoms, including restlessness, tremors, overactive reflexes, rapid breathing, confusion, aggression, hallucinations, panic states, abnormally increased fever, muscle pains and weakness. They also may have heart problems, including an irregular heartbeat leading to a heart attack, nerve problems that can lead to a seizure, abnormally high or low blood pressure, and circulation failure. Stomach issues may include nausea, vomiting, diarrhea, and abdominal cramps. In addition, an overdose can result in convulsions, coma, and fatal poisoning.</p>
GHB (date rape drug)	<p><u>Short-term:</u> Euphoria, drowsiness, nausea, vomiting, confusion, memory loss, Unconsciousness, slowed heart rate and breathing, lower body temperature, seizures, coma, death.</p> <p><u>Long-term:</u> Unknown</p> <p><u>Other:</u> Sometimes used as a date rape drug</p>

	<p><u>In combination with alcohol</u>: Nausea, problems with breathing, greatly increased depressant effects</p> <p><u>Withdrawal symptoms</u>: Insomnia, anxiety, tremors, sweating, increased heart rate and blood pressure, psychotic thoughts.</p>
Rohypnol	<p><u>Short-term</u>: Drowsiness, sedation, sleep; amnesia, blackout; decreased anxiety; muscle relaxation, impaired reaction time and motor coordination; impaired mental functioning and judgment; confusion; aggression; excitability; slurred speech; headache; slowed breathing and heart rate.</p> <p><u>Long-term</u>: Unknown</p> <p><u>In combination with alcohol</u>: Severe sedation, unconsciousness, and slowed heart rate and breathing, which can lead to death.</p> <p><u>Withdrawal symptoms</u>: Headache; muscle pain; extreme anxiety, tension, restlessness, confusion, irritability; numbness and tingling of hands or feet; hallucinations, delirium, convulsions, seizures or shock.</p>
<p>Ketamine (disassociative drug)</p> <p>Dissociative hallucinogenic drugs interfere with the action of the brain chemical glutamate, which regulates:</p> <ul style="list-style-type: none"> <li>• pain perception</li> <li>• responses to the environment</li> <li>• emotion</li> <li>• learning and memory</li> </ul> <p>Heroin (opioid)</p>	<p><u>Short-term</u>: Problems with attention, learning and memory; dreamlike states, hallucinations; sedation; confusion; loss of memory; raised blood pressure; unconsciousness; dangerously slowed breathing.</p> <p><u>Long-term</u>: Ulcers and pain in the bladder; kidney problems; stomach pain; depression; poor memory.</p> <p><u>Other</u>: Sometimes used as a date rape drug.</p> <p><u>Health related issues</u>: Risk of HIV, hepatitis, and other infectious diseases from shared needles.</p> <p><u>In combination with alcohol</u>: Increased risk of adverse effects.</p> <p><u>Short-term</u>: Euphoria; dry mouth; itching; nausea; vomiting; analgesia; slowed breathing and heart rate.</p> <p><u>Long-term</u>: 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.</p> <p><u>Other</u>: Pregnancy: miscarriage, low birth weight, neonatal abstinence syndrome Risk of HIV, hepatitis, and other infectious diseases from shared needles.</p> <p><u>In combination with alcohol</u>:</p>

	<p>Dangerous slowdown of heart rate and breathing, coma, death.</p> <p>Withdrawal symptoms: Restlessness, muscle and bone pain, insomnia, diarrhea, vomiting, cold flashes with goose bumps (“cold turkey”)</p>
MDMA (Ecstasy or Molly)	<p>MDMA increases the activity of three brain chemicals:</p> <ul style="list-style-type: none"> <li>• Dopamine — produces increased energy/activity and acts in the reward system to reinforce behaviors</li> <li>• Norepinephrine — increases heart rate and blood pressure, which are particularly risky for people with heart and blood vessel problems</li> <li>• Serotonin — affects mood, appetite, sleep, and other functions. It also triggers hormones that affect sexual arousal and trust. The release of large amounts of serotonin likely causes the emotional closeness, elevated mood, and empathy felt by those who use MDMA.</li> </ul> <p>Other health effects include:</p> <ul style="list-style-type: none"> <li>• nausea</li> <li>• muscle cramping</li> <li>• involuntary teeth clenching</li> <li>• blurred vision</li> <li>• chills</li> <li>• sweating</li> </ul> <p>MDMA's effects last about 3 to 6 hours, although many users take a second dose as the effects of the first dose begin to fade. Over the course of the week following moderate use of the drug, a person may experience:</p> <ul style="list-style-type: none"> <li>• irritability</li> <li>• impulsiveness and aggression</li> <li>• depression</li> <li>• sleep problems</li> <li>• anxiety</li> <li>• memory and attention problems</li> <li>• decreased appetite</li> <li>• decreased interest in and pleasure from sex</li> </ul> <p>It's possible that some of these effects may be due to the combined use of MDMA with other drugs, especially marijuana.</p>
Methamphetamine	<p><b>How does methamphetamine affect the brain?</b> Methamphetamine increases the amount of the natural chemical dopamine in the brain. Dopamine is involved in body movement, motivation, and reinforcement of rewarding behaviors. The drug's ability to rapidly release high levels of dopamine in reward areas of the brain strongly reinforces drug-taking behavior, making the user want to repeat the experience.</p> <p><b>Short-Term Effects</b> Taking even small amounts of methamphetamine can result in many of the same health effects as those of other stimulants, such as cocaine or amphetamines. These include:</p>

- increased wakefulness and physical activity
- decreased appetite
- faster breathing
- rapid and/or irregular heartbeat
- increased blood pressure and body temperature

### **Long-Term Effects**

People who inject methamphetamine are at increased risk of contracting infectious diseases such as HIV and hepatitis B and C. These diseases are transmitted through contact with blood or other bodily fluids that can remain on drug equipment. Methamphetamine use can also alter judgment and decision-making leading to risky behaviors, such as unprotected sex, which also increases risk for infection.

Methamphetamine use may worsen the progression of HIV/AIDS and its consequences. Studies indicate that HIV causes more injury to nerve cells and more cognitive problems in people who use methamphetamine than it does in people who have HIV and don't use the drug.<sup>1</sup> Cognitive problems are those involved with thinking, understanding, learning, and remembering.

Long-term methamphetamine use has many other negative consequences, including:

- extreme weight loss
- addiction
- severe dental problems ("meth mouth")
- intense itching, leading to skin sores from scratching
- anxiety
- changes in brain structure and function
- confusion
- memory loss
- sleeping problems
- violent behavior
- *paranoia*—extreme and unreasonable distrust of others
- *hallucinations*—sensations and images that seem real though they aren't

In addition, continued methamphetamine use causes changes in the brain's dopamine system that are associated with reduced coordination and impaired verbal learning. In studies of people who used methamphetamine over the long term, severe changes also affected areas of the brain involved with emotion and memory.<sup>2</sup> This may explain many of the emotional and cognitive problems seen in those who use methamphetamine.

Although some of these brain changes may reverse after being off the drug for a year or more, other changes may not recover even after a long period of time.<sup>3</sup> A recent study even suggests that people who once used methamphetamine have an increased the risk of developing Parkinson's disease, a disorder of the nerves that affects movement.<sup>4</sup>

	<p>The consequences of methamphetamine misuse are terrible for the individual—psychologically, medically, and socially. Using the drug can cause memory loss, aggression, psychotic behavior, damage to the cardiovascular system, malnutrition, and severe dental problems. Methamphetamine misuse has also been shown to contribute to increased transmission of infectious diseases, such as hepatitis and HIV/AIDS.</p> <p>Beyond its devastating effects on individual health, methamphetamine misuse threatens whole communities, causing new waves of crime, unemployment, child neglect or abuse, and other social ills.</p> <p>As a powerful stimulant, methamphetamine, even in small doses, can increase wakefulness and physical activity and decrease appetite. Methamphetamine can also cause a variety of cardiovascular problems, including rapid heart rate, irregular heartbeat, and increased blood pressure. Hyperthermia (elevated body temperature) and convulsions may occur with methamphetamine overdose, and if not treated immediately, can result in death.</p> <p><b>Can a person overdose on methamphetamine?</b>  Yes, a person can overdose on methamphetamine. An overdose occurs when the person uses too much of a drug and has a toxic reaction that results in serious, harmful symptoms or death.  In 2017, about 15 percent of all drug overdose deaths involved the methamphetamine category, and 50 percent of those deaths also involved an opioid, with half of those cases related to the synthetic opioid fentanyl. (CDC Wonder Multiple Causes of Death — see #42 on Meth RR.) It is important to note that cheap, dangerous synthetic opioids are sometimes added to street methamphetamine without the user knowing</p>
<p>Hallucinogens (classic) LSD (acid)</p>	<p>Research suggests that classic hallucinogens work at least partially by temporarily disrupting communication between brain chemical systems throughout the brain and spinal cord. Some hallucinogens interfere with the action of the brain chemical serotonin, which regulates:</p> <ul style="list-style-type: none"> <li>• mood</li> <li>• sensory perception</li> <li>• sleep</li> <li>• hunger</li> <li>• body temperature</li> <li>• sexual behavior</li> <li>• intestinal muscle control</li> </ul> <p><b>Classic Hallucinogens</b>  <b><u>Short-Term Effects</u></b>  Classic hallucinogens can cause users to see images, hear sounds, and feel sensations that seem real but do not exist. The effects generally begin within 20 to 90 minutes and can last as long as 12 hours in some cases (LSD) or as short as 15 minutes in others (synthetic DMT). Hallucinogen</p>

	<p>users refer to the experiences brought on by these drugs as "trips." If the experience is unpleasant, users sometimes call it a "bad trip."</p> <p>Along with hallucinations, other short-term general effects include:</p> <ul style="list-style-type: none"> <li>• increased heart rate</li> <li>• nausea</li> <li>• intensified feelings and sensory experiences (such as seeing brighter colors)</li> <li>• changes in sense of time (for example, the feeling that time is passing by slowly)</li> </ul> <p>Specific short-term effects of some hallucinogens include:</p> <ul style="list-style-type: none"> <li>• increased blood pressure, breathing rate, or body temperature</li> <li>• loss of appetite</li> <li>• dry mouth</li> <li>• sleep problems</li> <li>• spiritual experiences</li> <li>• feelings of relaxation</li> <li>• uncoordinated movements</li> <li>• excessive sweating</li> <li>• panic</li> <li>• <i>paranoia</i>—extreme and unreasonable distrust of others</li> <li>• <i>psychosis</i>—disordered thinking detached from reality</li> <li>• bizarre behaviors</li> </ul> <p>Hallucinogens can cause severe visual disturbances.</p> <p><b><u>Long-Term Effects</u></b></p> <p>Two long-term effects have been associated with use of classic hallucinogens, although these effects are rare.</p> <ul style="list-style-type: none"> <li>• <b><i>Persistent Psychosis</i></b>—a series of continuing mental problems, including: <ul style="list-style-type: none"> <li>• visual disturbances</li> <li>• disorganized thinking</li> <li>• paranoia</li> <li>• mood changes</li> </ul> </li> <li>• <b><i>Hallucinogen Persisting Perception Disorder (HPDD)</i></b>—recurrences of certain drug experiences, such as hallucinations or other visual disturbances. These flashbacks often happen without warning and may occur within a few days or more than a year after drug use. These symptoms are sometimes mistaken for other disorders, such as stroke or a brain tumor.</li> </ul> <p>Both conditions are seen more often in people who have a history of mental illness, but they can happen to anyone, even after using hallucinogens one time. For HPDD, some antidepressant and antipsychotic medications can be used to improve mood and treat psychosis. Behavioral therapies can be used to help people cope with fear or confusion associated with visual disturbances.</p>
Hallucinogens— Dissociative Drugs	<p><b>Dissociative Drugs</b></p> <p><b><u>Short-Term Effects</u></b></p>

PCP	<p>Dissociative drug effects can appear within a few minutes and can last several hours in some cases; some users report experiencing drug effects for days.</p> <p><b>Effects on a Developing Fetus</b></p> <p>While the effects of most hallucinogens on the developing fetus are unknown, researchers do know that mescaline in peyote may affect the fetus of a pregnant woman using the drug.</p> <p>Effects depend on how much is used. In low and moderate doses, dissociative drugs can cause:</p> <ul style="list-style-type: none"> <li>• numbness</li> <li>• disorientation and loss of coordination</li> <li>• hallucinations</li> <li>• increase in blood pressure, heart rate, and body temperature</li> </ul> <p>In high doses, dissociative drugs can cause the following effects:</p> <ul style="list-style-type: none"> <li>• memory loss</li> <li>• panic and anxiety</li> <li>• seizures</li> <li>• psychotic symptoms</li> <li>• amnesia</li> <li>• inability to move</li> <li>• mood swings</li> <li>• trouble breathing</li> </ul> <p><b><u>Long-Term Effects of Dissociative Drugs</u></b></p> <p>More research is needed on the long-term effects of dissociative drugs. Researchers do know repeated use of PCP can result in addiction. Other long-term effects may continue for a year or more after use stops, including:</p> <ul style="list-style-type: none"> <li>• speech problems</li> <li>• memory loss</li> <li>• weight loss</li> <li>• anxiety</li> <li>• depression and suicidal thoughts</li> </ul>
Marijuana	<p><b><u>Short-term:</u></b></p> <p>Enhanced sensory perception and euphoria followed by drowsiness/relaxation; slowed reaction time; problems with balance and coordination; increased heart rate and appetite; problems with learning and memory; anxiety.</p> <p><b><u>Long-term:</u></b></p> <p>Mental health problems, chronic cough, frequent respiratory infections.</p> <p><b><u>Other Health Related Issues:</u></b></p> <ul style="list-style-type: none"> <li>• Youth: possible loss of IQ points when repeated use begins in adolescence.</li> <li>• Pregnancy: babies born with problems with attention, memory and problem solving; increased risk of preterm births.</li> </ul>

<p><b>Inhalants</b></p> <p>Although other substances that are misused can be inhaled, the term <i>inhalants</i> refers to the various substances that people typically take <i>only</i> by inhaling. These substances include:</p> <ul style="list-style-type: none"> <li>• solvents (liquids that become gas at room temperature)</li> <li>• aerosol sprays</li> <li>• gases</li> <li>• nitrites (prescription medicines for chest pain)</li> </ul> <p><b>Products Used as Inhalants</b></p> <p><b>Solvents</b></p> <ul style="list-style-type: none"> <li>• industrial or household products, including: <ul style="list-style-type: none"> <li>• paint thinners or removers</li> <li>• dry-cleaning fluids</li> <li>• gasoline</li> <li>• lighter fluid</li> </ul> </li> <li>• art or office supply solvents, including: <ul style="list-style-type: none"> <li>• correction fluids</li> <li>• felt-tip marker fluid</li> <li>• electronic contact cleaners</li> <li>• glue</li> </ul> </li> </ul> <p><b>Aerosols</b></p> <ul style="list-style-type: none"> <li>• household aerosol items, including: <ul style="list-style-type: none"> <li>• spray paints</li> <li>• hair or deodorant sprays</li> </ul> </li> </ul>	<p><b>How do inhalants affect the brain?</b></p> <p>Most inhalants affect the central nervous system and slow down brain activity. <u>Short-term effects</u> are similar to alcohol and include:</p> <ul style="list-style-type: none"> <li>• slurred or distorted speech</li> <li>• lack of coordination (control of body movement)</li> <li>• euphoria (feeling high)</li> <li>• dizziness</li> </ul> <p>People may also feel light-headed or have <i>hallucinations</i> (images/sensations that seem real but aren't) or <i>delusions</i> (false beliefs). With repeated inhalations, many people feel less self-conscious and less in control. Some may start vomiting, feel drowsy for several hours, or have a headache that lasts a while. Unlike other types of inhalants, nitrites, which are often prescribed to treat chest pain, are misused in order to improve sexual pleasure by expanding and relaxing blood vessels.</p> <p><b>What are the other health effects of inhalants?</b></p> <p><u>Long-term effects</u> of inhalant use may include:</p> <ul style="list-style-type: none"> <li>• liver and kidney damage</li> <li>• hearing loss</li> <li>• bone marrow damage</li> <li>• loss of coordination and limb spasms (from nerve damage)</li> <li>• delayed behavioral development (from brain problems)</li> <li>• brain damage (from cut-off oxygen flow to the brain)</li> </ul> <p>In addition, because nitrites are misused for sexual pleasure and performance, they can lead to unsafe sexual practices or other risky behavior. This increases the chance of getting or spreading infectious diseases such as HIV/AIDS or hepatitis.</p> <p><b>Can a person overdose on inhalants?</b></p> <p>Yes, a person can overdose on inhalants. An overdose occurs when a person uses too much of a drug and has a toxic reaction that results in serious, harmful symptoms or death.</p> <p>These symptoms can cause seizures and coma. They can even be deadly. Many solvents and aerosol sprays are highly concentrated, meaning they contain a large amount of chemicals with a lot of active ingredients. Sniffing these products can cause the heart to stop within minutes. This condition, known as <i>sudden sniffing death</i>, can happen to otherwise healthy young people the first time they use an inhalant. Using inhalants with a paper or plastic bag or in a closed area may cause death from suffocation (being unable to breathe).</p>
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<ul style="list-style-type: none"> <li>• aerosol computer cleaning products</li> <li>• vegetable oil sprays</li> </ul> <p><b>Gases</b></p> <ul style="list-style-type: none"> <li>• found in household or commercial products, including: <ul style="list-style-type: none"> <li>• butane lighters</li> <li>• propane tanks</li> <li>• whipped cream aerosols or dispensers (<i>whippets</i>)</li> </ul> </li> <li>• used as anesthesia (to make patients lose sensation during surgery/procedures), including: <ul style="list-style-type: none"> <li>• ether</li> <li>• chloroform</li> <li>• nitrous oxide</li> </ul> </li> </ul> <p><b>Nitrites</b></p> <ul style="list-style-type: none"> <li>• often sold in small brown bottles labeled as: <ul style="list-style-type: none"> <li>• <i>video head cleaner</i></li> <li>• <i>room odorizer</i></li> <li>• <i>leather cleaner</i></li> <li>• <i>liquid aroma</i></li> </ul> </li> </ul>	
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Another source of information on drugs:

*Drugs of Abuse, A DEA Resource Guide (2020 edition)*

<https://www.getsmartaboutdrugs.gov/sites/getsmartaboutdrugs.com/files/publications/Drugs%20of%20Abuse%202020-Web%20Version-508%20compliant.pdf>

### **Laws in Virginia Pertaining to Alcohol Use**

#### **Primary Sources for Alcoholic Beverage Control (ABC) Laws and Regulations**

**Code of Virginia**—[The Code of Virginia](#) (COV) contains the laws (statutes) of the Commonwealth.

**Title 4.1** is the [Alcoholic Beverage Control Act](#).

[Title 18.2](#) establishes crimes and offenses, including driving under the influence, public intoxication and possession of false identification.

Virginia ABC special agents, state police and local law enforcement enforce these laws. Violations are punishable as a criminal act with fines and/or jail time.

### [Virginia Administrative Code](#)

The Virginia Administrative Code (VAC) contains the regulations of state agencies, including Virginia ABC.

**Title 3** contains the regulations of the [Virginia Alcoholic Beverage Control Board](#).

Virginia ABC special agents primarily enforce these rules, which focuses on ABC licensees. Violations can be punishable by fines, probation or revocation of the ABC license. These codes represent the agency regulations that apply to COV 4.1.

The term “alcoholic beverages” is defined in *Code of Virginia* § 4.1-100 as including “alcohol, spirits, wine, beer, and any one or more of such varieties containing one-half of one percent or more of alcohol by volume, including mixed alcoholic beverages, and every liquid or solid, powder or crystal, patented or not, containing alcohol, spirits, wine or beer and capable of being consumed by a human being.” Crystalized alcohol is also included in this category and is also illegal.

It is illegal for any person under the age of 21 to purchase, possess, or attempt to purchase or possess any alcoholic beverage (*Code of Virginia* § 4.1-305)

According to *Code of Virginia* §§ 4.1-305 (c), 16.1-278.9 and 16.1-278.8:

It is illegal for anyone under 21 to possess any alcoholic beverage. Violators are guilty of a **Class 1** misdemeanor and, face a fine of up to \$2,500 and/or a year in jail if convicted. At a minimum, the court will order a mandatory minimum fine of \$500 or a mandatory 50 hours of community service and suspend the driver’s license or deny driving privileges for not less than six months. The court may also order substance abuse education, counseling and treatment.

A law enforcement officer may confiscate alcohol found in possession of person under age of 21 and charge them with being in violation of § 4.1-305 of the *Code of Virginia*, which makes it illegal for any person under the age of 21 to purchase, possess, or attempt to purchase or possess any alcoholic beverage.

[Virginia’s Alcohol Beverage Control Law](#) allows a person to keep and possess lawfully acquired alcoholic beverages in his residence for his personal use or that of his family. It is illegal for a parent to serve alcohol to guests in their home unless the guests are 21 years of age or older or are accompanied by a parent, guardian or spouse who is 21 years of age or older (*Code of Virginia* § 4.1-200 (7))

Note the restrictions for anyone under 21 years: a. in the residence and b. accompanied by a parent.

Anyone, including a parent, who purchases for, or otherwise gives, provides, or assists in the provision of alcoholic beverages to another person knowing that the person is less than 21 years of age is guilty of a **Class 1** misdemeanor. If convicted, the court may order jail time for up to 12 months and/or a fine of up to \$2,500 (*Code of Virginia* § 4.1-306).

A person under age 21 using a fake ID to establish a false identity or false age to purchase alcoholic beverages is a **Class 1** misdemeanor and, upon conviction, can face a fine up to \$2,500 and/or one year in jail and a minimum \$500 fine or 50 hours of community service, and can lose their driver's license for up to one year (*Code of Virginia* § 4.1-305).

It is illegal to possess, manufacture, use or sell an altered/false driver's license or military or university identification. It is also illegal to loan your driver's license or identification card to another person. Persons who possess, use or distribute fake IDs are charged with a Class 1 misdemeanor (*Code of Virginia* § 18.2-204.1)

As part of a "Zero Tolerance" policy, Virginia has enacted some of the toughest laws in the United States for minors caught driving under the influence of alcohol. Under *Code of Virginia* § 18.2-266.1, it is illegal for anyone under the age of 21 to operate a motor vehicle after illegally consuming alcohol. A violation is a **Class 1** misdemeanor. Punishment includes loss of your driver's license for one year from the date of conviction and a mandatory minimum fine of \$500 or having to perform a minimum of 50 hours of community service.

A school is required by law to notify the local law enforcement agency when any student has committed certain offenses, including any conduct involving alcohol (*Code of Virginia* § 22.1-279.3:1)

A student will be subject to both school disciplinary action and criminal action. This means you may be suspended from school and be required to go to court to face criminal charges. Anyone (whether an adult or a minor) possessing or consuming alcohol on public school property can face a fine of up to \$1,000 and six months of jail time. (*Code of Virginia* § 4.1-309).

Under Virginia law, the clerk (seller/server) and the establishment with the license to sell alcohol (licensee) are penalized if a store sells an alcoholic beverage to someone under the age of 21. The seller/server can receive up to \$2,500 fine and/or up to 12 months in jail. For a first time offense, a licensee can be penalized up to \$2,000 and/or have their ABC license revoked (*Code of Virginia* §§ 4.1-304 and 4.1-305).

If someone sells alcohol to a person under the age of 21 and does not require that individual to provide bona fide evidence of legal age, the seller will be guilty of a Class 3 misdemeanor (*Code of Virginia* § 4.1-304 (B)).

For more information on the law in the Commonwealth of Virginia pertaining to alcohol, go to

Alcohol Beverage Control Act at <https://law.lis.virginia.gov/vacode/title4.1/chapter1/section4.1-100/> and Virginia Codes on Virginia Alcoholic Beverage Control Authority website at <https://www.abc.virginia.gov/enforcement/virginia-codes-and-regulations>

## **Tobacco—Laws in the Commonwealth of Virginia Regarding Use and Purchase of Tobacco Products**

Tobacco is a drug. By definition, a drug is a nonfood substance that can cause changes in the function of the body and/or mind. Tobacco leaves contain a complex mixture of chemicals that affect the body in many ways. Nicotine is one of the main ingredients in tobacco. It is a drug that occurs naturally in the tobacco leaf, acting paradoxically as both a stimulant and a depressant. It is the substance that causes the craving for tobacco.

According to *Code of Virginia* § 28.2-371.2: : No person less than 21 years of age shall purchase, attempt to purchase or possess any tobacco product, including but not limited to cigarettes, cigars, bidis, rolling papers, nicotine vapor products and alternate nicotine products.” The exception to this age restriction is active duty military personnel.

According to *Code of Virginia* § 18.2-371 (B) it is illegal for minors to buy, sell or possess vapor products. This is a **Class 4** misdemeanor.

Violations shall be punishable by a civil penalty not to exceed \$100 for the first violation, and \$250 for subsequent violations. In lieu of the civil penalty, a judge may prescribe up to 20 hours of community service for a first violation and up to 40 hours of community service for a second violation (*Code of Virginia* § 18.2-371.2).

The law prohibiting anyone less than 21 from possessing any tobacco product does not apply to the possession of tobacco products by persons less than 21 years of age making a delivery of tobacco products in pursuance of his employment.

According to *Code of Virginia* § 18.2-371.2: “No person shall sell to, distribute to, purchase for or knowingly permit the purchase by any person less than 21 years of age, knowing or having reason to believe that such person is less than 21 years of age, any tobacco product, including but not limited to cigarettes, cigars, bidis, rolling papers, nicotine vapor products, and alternative nicotine products.” Proof that the person demanded, was shown, and reasonably relied upon a photo identification stating that the individual was at least 21 years of age as required by law shall be a defense to any action brought under this subsection.

Violation by an individual or a separate retail establishment, except for the sale of bidis, shall be punishable by a civil penalty not to exceed \$100 for the first violation, up to \$200 for a second violation and up to \$500 for subsequent violations. If the retail establishment has a youth access training program, the court shall suspend all penalties. If the court finds that there is no training program, then they may impose a penalty not to exceed \$1,000.

If you buy cigarettes from a vending machine, you are still in violation of *Code of Virginia* § 18.2-371.2 (A), which prohibits possession or purchase by anyone less than 21 years of age. Virginia

law says: “Violators shall be punishable by a civil penalty not to exceed \$100 for the first violation, and \$250 for subsequent violations.” In lieu of the civil penalty, a judge may prescribe up to 20 community service hours for a first violation and up to 40 hours of community service for a second violation.

Vending machines are required to be located in a place that is not open to the general public and is not generally accessible to minors. A notice must also be posted on the machine indicating that the purchase or possession of tobacco products by minors is unlawful. Violations are subject to the same penalties provided for the sale or distribution of tobacco products to minors (*Code of Virginia § 18.2-371.2*).

Virginia law does not prohibit sale by someone under 21 years of age (*Code of Virginia § 18.2-371.2 (B)*).

A law enforcement officer may confiscate the tobacco of a person under the age of 21 and charge them with being in violation of *Code of Virginia § 18.2-371.2*, which prohibits anyone under 21 years of age from buying or trying to buy, or possessing any tobacco products, including but not limited to cigarettes, cigars, bidis, rolling papers, nicotine vapor products, and alternative nicotine products.

Virginia law limits tobacco use in many public places, schools, and certain restaurants. Anyone who smokes in a designated no-smoking area and anyone who continues to smoke after being asked to refrain from smoking is subject to a civil penalty of not more than \$25. Any law enforcement officer may issue a summons for violation of this law (*Code of Virginia § 15.2-2824*).

### **Health and Safety Risk of Smoking or Using Tobacco Products**

Nicotine can kill a person when taken in high concentrations all at once. Its action on the cardiovascular system, increasing cardiac output and raising blood pressure, probably contributes to the elevated risk of cardiovascular mortality in smokers.

Smoking is recognized as a major health threat to youth. According to the American Cancer Society, cigarette smoking causes serious health problems among children and teens, including:

- Coughing;
- Shortness of breath;
- More frequent headaches;
- Increased phlegm (mucus);
- Respiratory illnesses;
- Worse cold and flu symptoms;
- Reduced physical fitness;
- Poor lung growth and function;
- Worse overall health; and
- Addiction to nicotine

Many people don't realize how quickly a casual experimentation with tobacco can become an addiction—one that carries with it serious health risks.

A 2011 survey from the U.S. Centers for Disease Control and Prevention (CDC) found that 45 percent of high school students had tried cigarette smoking at some point. From 2011 to 2015, there was a significant decrease in current cigarette use among high school students, from 15.8 percent to 9.3 percent. However, in just one year from 2014 to 2015, the number of middle and high school students using electronic cigarettes increase from 2.46 million to 3 million. In 2015, 25.3 percent of high school kids were current tobacco users—an increase of 2 percent from 2012.

The younger you are when you begin to smoke, the more likely you are to be an adult smoker. Almost 90 percent of adults who are regular smokers started at or before the age of 19. And people who start smoking at younger ages are more likely to develop long-term nicotine addiction than people who start later in life.

## **Local Law**

Individuals may also be subject to legal sanctions under Alleghany, Bath, Botetourt and Rockbridge counties, regarding the unlawful possession or distribution of illicit drugs and alcohol; however, no local ordinances were found during research.

[HISTORY: Adopted by the City Council of the City of Lexington as § 3-2 of the 1958 Code (Ch. 3 of the 1970 Code). Amendments noted where applicable.]

### **GENERAL REFERENCES**

Peace and good order — See Ch. 295.

Driving under the influence — See Ch. 394, Art. III.

[HISTORY: Adopted by the City Council of the City of Lexington as § 3-2 of the 1958 Code (Ch. 3 of the 1970 Code). Amendments noted where applicable.]

### **GENERAL REFERENCES**

Peace and good order — See Ch. 295.

Driving under the influence — See Ch. 394, Art. III.

### **§ 109-1 Public intoxication. [1]**

[Amended by Ord. No. 03-11]

**A.** If any person is intoxicated in public, whether such intoxication results from alcohol, narcotic drug or other intoxicant or drug of whatever nature, he shall be deemed guilty of a Class 4 misdemeanor. In any area in which there is located a court-approved detoxification center, a law enforcement officer may authorize the transportation, by police or otherwise, of public inebriates to such detoxification center in lieu of arrest; however, no person shall be involuntarily detained in such center.

**B.** For the purpose of this section, the term "intoxication" shall be that set forth in the Code of Virginia, 1950, as amended, in § 4.1-100 as follows: "Intoxicated" means a condition in which a person has drunk enough alcoholic beverages to observably affect his manner, disposition, speech, muscular movement, general appearance or behavior.

[1] *Editor's Note: For state law as to alcoholic beverages, see Code of Virginia, Title 4.1.*

**§ 109-2 Consumption and possession in public places.**

[Added by Ord. No. 95-12]

**A.** If any person takes a drink of alcoholic beverages or offers a drink thereof to another, whether accepted or not, or is in the possession of opened alcoholic beverage containers at or in any public place, including any City park, playground or public street, such person shall be guilty of a Class 4 misdemeanor.

**B.** Nothing contained in this section shall prevent any person from drinking alcoholic beverages or offering a drink thereof to another in any rooms or areas approved by the Alcoholic Beverage Control Board, in a licensed establishment, provided that such establishment of the person who operates the same is licensed to sell alcoholic beverages at retail for on-premises consumption and the alcoholic beverages drunk or offered were purchased therein.

**C.** Further, nothing contained in this section shall prevent any person from drinking alcoholic beverages or offering a drink thereof to another in any room or area approved by Council and, if required, by the Alcoholic Beverage Control Board or by the Alcoholic Beverage Control Board at an event for which a banquet license or mixed beverage special event license has been granted, nor shall this section prevent, upon authorization of the licensee, any person from drinking his own lawfully acquired alcoholic beverages or offering a drink thereof to another in approved areas and locations at events for which a coliseum or stadium license has been granted.

**Health and Safety Risks of Under Age Drinking** (From *Virginia Rules* website)

Underage drinking is recognized as a major health and safety threat to youth. According to the U.S. Surgeon General:

- Underage drinking or drug use is a major cause of death from injuries among young people — from vehicle crashes, homicides and suicide, to falls, burns and drowning.
- Underage drinking or drug use increases the risk of committing or being the victim of a physical assault or sexual assault.
- Underage drinking or drug use plays a role in risky sexual activity.

Many people are unaware of the health and safety risks and think that underage drinking is a “rite of passage.” Tragically, many young people don’t survive this rite.

According to the Pacific Institute for Research and Evaluation (PIRE), underage drinking is involved in:

- 24 percent of fatal motor vehicle crashes;

- 8 percent of non-fatal motor vehicle crashes;
- 30 percent of fatal drownings;
- 30 percent of fatal burns;
- 41 percent of homicides;
- 43 percent of sexual assaults;
- 37 percent of other assaults;
- 9 percent of suicides;
- 20 percent of risky sex behavior; and
- 24 percent of property crimes

If someone has drunk so much that he or she may need medical attention, seek help immediately. Unfortunately, it is sometimes possible for someone to have a life-threatening physical reaction to drugs or alcohol: this is known as an **overdose**. It is critical that someone who is having this sort of reaction get immediate medical attention, as that person may die if left untreated.

Under Code of Virginia § 18.2-251.03, someone who seeks or obtains emergency medical attention for himself or for another individual because of a drug or alcohol related overdose in progress may be protected from being convicted for certain possession or intoxication crimes if the person reports an overdose to a firefighter, EMS personnel or law enforcement officer (most commonly by calling 911 for emergency medical response). To be eligible for this “affirmative defense,” the person reporting the overdose must identify themselves as being the one who reported the overdose.

## **Drug, Alcohol and Tobacco Addiction and Recovery Resources**

Dabney S. Lancaster Community College students experiencing a problem with drug or alcohol abuse or dependency are encouraged to seek counseling services. The Director of Student Services Office can provide referral to an appropriate community agency that will assist with private confidential counseling or information. (Lord Fairfax)

## **National Resources**

### **Twelve-Step Recovery Programs**

#### **Al-Anon**

<https://al-anon.org/>

Provides information on alcoholism and alcohol abuse and refers callers to local Al.-Anon support groups established to help friends and families of alcoholics. Al-Anon members are people, just like you, who are worried about someone with a drinking problem. Family members have the opportunity to learn from the experiences of other who have faced similar problems. Teens come together to share experiences to find effective ways to cope with problems. 888-4AL-ANON or 888.425.2666

#### **Alcoholics Anonymous (A.A. World Services)**

<https://www.aa.org/> and for meetings in Virginia <https://aavirginia.org/>

Provides information and support to recovering alcoholics through local chapters in communities nationwide. Alcoholics Anonymous is an international fellowship of men and women who have had a drinking problem. It is nonprofessional, self-supporting, multiracial,

apolitical, and available almost everywhere. There are no age or education requirements. Membership is open to anyone who wants to do something about his or her drinking problem. 212-870-3400

### **Cocaine Anonymous**

Provides information and support to individuals suffering from cocaine addiction and other mind-altering substances. Cocaine Anonymous is a Fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others recover from their addiction.

800-347-8998 or go to [www.ca.org](http://www.ca.org)

### **Narcotics Anonymous**

<https://www.na.org/>

We offer recovery from the effects of addiction through working a twelve-step program, including regular attendance at group meetings. The group atmosphere provides help from peers and offers an ongoing support network for addicts who wish to pursue and maintain a drug-free lifestyle. Our name, Narcotics Anonymous, is not meant to imply a focus on any particular drug; NA's approach makes no distinction between drugs including alcohol.

## **Substance Abuse and Mental Health Services (SAMHSA)**

<https://www.samhsa.gov/find-help/national-helpline>

### **SAMHSA's National Helpline — 1-800-662-HELP (4357)**

The National Helpline is a free, confidential, 24/7, 365-day-a-year treatment referral and information service (in English and Spanish) for individuals and families facing mental and/or substance use disorders.

## **Resources to Help You Quit Smoking**

### **Approved by the [Cancer.Net Editorial Board](#), 06/2018**

The following resources can help you quit smoking and using tobacco products. Most of these are free, but some charge a fee. Because programs and services continually change, this list may not be complete. Email [contactus@cancer.net](mailto:contactus@cancer.net) if you know of a correction to the information below.

### **Quit Lines**

- **American Cancer Society ([Quit for Life](#))**  
866-QUIT-4-LIFE (866-784-8454); 24 hours a day, 7 days a week (except Thanksgiving, Christmas, and July 4)
- **American Lung Association ([Lung Helpline & Tobacco QuitLine](#))**  
800-LUNGUSA (800-586-4872)
- **National Cancer Institute ([Smokefree.gov](#))**  
NCI's telephone quitline: 877-44U-QUIT (877-448-7848); TTY 800-332-8615; 8 AM to 8 PM ET, Monday through Friday (English and Spanish)  
[LiveHelp](#), live online chat assistance, is available 8AM to 11 PM ET, Monday through Friday (English only).
- **U.S. Department of Health and Human Services ([BeTobaccoFree](#))**  
Local and state: 800-QUIT-NOW (800-784-8669)

## Support Groups and Programs

- [Truth Initiative: Become an EX](#)
- American Lung Association: [Freedom From Smoking](#)
- [Nicotine Anonymous](#)
- [QuitNet](#)

## Information

- Agency for Healthcare Research and Quality
  - [Help for Smokers and Other Tobacco Users booklet](#)
- Centers for Disease Control and Prevention (CDC)
  - [Quitting Smoking Fact Sheet](#)
  - [Tips from Former Smokers](#)
  - [Youth and Tobacco Use](#)
  - [Tobacco Use and Pregnancy](#)
- U.S. Food and Drug Administration
  - [Want to Quit Smoking? FDA-Approved Products Can Help](#)
- The National Cancer Institute
  - [Harms of Cigarette Smoking and Health Benefits of Quitting](#)
  - [SmokeFreeTeen](#)
  - [SmokeFree60+](#)

## Mobile Apps

- [National Cancer Institute: QuitPal App](#)
- [LIVESTRONG: MyQuit Coach](#)
- [CDC: QuitSTART](#)

## Commonwealth of Virginia Resources

### State Employee Assistance Service

<https://www.dhrm.virginia.gov/employeebenefits/employee-assistance> or call 703-552-8960

## Alleghany County Resources

### AA Meetings in Covington, VA

Wednesday, 12:15 pm and 6:00 pm at Emmanuel Episcopal Church

<https://aavirginia.org/>

### [Alleghany Highlands Community Services Board](#)

The Alleghany Highlands Community Services is committed to providing recovery-oriented, person centered, community-based prevention, treatment, and inclusion services to enhance the quality of life for individuals of the Alleghany Highlands while working in collaboration with local stakeholders. The mental health clinic located at 311 South Monroe Avenue in Covington offers mental health and substance use services. We also offer “Access” hours where you can walk in from 12:30 PM – 3:30 PM Monday – Friday. For more information, please visit [www.ahcsb.org](http://www.ahcsb.org) or call 540-965-2100.

The **Alleghany Highlands Healthy Youth Coalition** focuses on preventing drug use in our community. We focus on preventing marijuana use among youth, vaping among youth, underage drinking, opioids, and

suicide. The coalition hosts and attends events to bring awareness to these topics. We also meet once a month to go over strategies that our community can implement to help decrease drug use. For more information on events and trainings, please visit our Facebook page at Alleghany Highlands Healthy Youth Coalition, email us at [healthyyouthcoalition@gmail.com](mailto:healthyyouthcoalition@gmail.com), or call at 540-965-2100.

**Narcotics Anonymous** Meetings in Covington, VA  
Monday, Tuesday & Thursday at 6:30 pm at Emmanuel Episcopal Church

## **Bath County Resources**

**AA Meetings** in Covington, VA  
Wednesday, 12:15 pm and 6:00 pm at Emmanuel Episcopal Church  
<https://aavirginia.org/>

Bath Community Hospital

[Rockbridge Area Community Services Board](#)

*See Roanoke Area Resources*

## **Botetourt County Resources**

**AA meetings** in Daleville  
Wednesday, 8:00 pm at St. Marks Methodist Church  
<https://aavirginia.org/>

*See Roanoke Area Resources*

## **Roanoke Area Resources**

**AA meetings** in Roanoke  
<https://aavirginia.org/>

**Blue Ridge Behavioral Healthcare**  
<https://www.brbh.org> or call 540-981-9351

Blue Ridge Behavioral Healthcare (BRBH) is the Community Services Board serving adults, children and families with mental health disorders, developmental disabilities or substance use disorders in the Roanoke Valley of Virginia. We serve residents of the Cities of Roanoke and Salem, and the Counties of Botetourt, Craig and Roanoke.

**Carilion Clinic/St. Albans**  
<https://www.carilionclinic.org/locations/carilion-clinic-saint-albans-hospital>  
or call 540-731-2000

**Lewis-Gale RESPOND Assessment and Referral**  
<https://lewisgale.com/specialties/behavioral-health> or call 800-541-9992

LewisGale Regional Health System offers hope, help, encouragement and support for individuals with emotional, behavioral and mental health needs, treating patients with depression, chemical dependency, anxiety and many other conditions.

### **Life Center**

<https://www.galaxrecovery.com/addiction/> or call 24/7 at 866-807-7446

Alcohol and Drug Abuse Treatment—Life Center of Galax helps individuals struggling with addiction build a strong foundation for long-term recovery.

### **Mount Regis Center**

<https://www.mtregis.com/> or call 877-217-3447

Offering treatment for substance abuse disorders. Mount Regis Center is a leading inpatient treatment program for men and women recovering from addiction and behavioral health concerns.

## **Rockbridge County Resources**

### **AA meetings in Lexington**

12 noon and 7 pm at Grace Episcopal

<https://aavirginia.org>

### **AA meetings in Glasgow**

Wednesday, 8:00 pm at St. John's Episcopal Church

<https://aavirginia.org/>

### **Narcotics Anonymous Meetings**

Monday at 3 pm in Goshen--Little River Church of the Brethren

Saturday at 11 am in Raphine-- Saint Mary's Wilderness Area

Saturday at 7 pm in Lexington— Grace Episcopal Church

### **Rockbridge Area Community Services Board**

*See Roanoke Area Resources*

## For DSLCC Employees

### [The Drug-Free Schools and Communities Act Amendments of 1989 \(DFSCA\)](#)

This federal law mandates that DSLCC adopt and implement a program to prevent the unlawful possession, use or distribution of illicit drugs and alcohol by employees.

In addition, [Drug-Free Workplace Act of 1988 \(41 U.S.C. 81\)](#) which requires some federal contractors and all federal grantees to agree that they will provide **drug-free workplaces** as a precondition of receiving a contract or grant from a Federal agency.

### [102 Stat. 4181 - Alcohol and Drug Traffic Safety Act of 1988](#)

This federal law mandates that DSLCC adopt and implement a program to prevent the unlawful possession, use or distribution of illicit drugs and alcohol by employees.

### **Virginia Department of Human Resource Management Policies and Procedures Manual** [Policy Number 1.05—Alcohol and Other Drugs](#)

It is the Commonwealth's objective to establish and maintain a work environment free from the adverse effects of alcohol and other drugs. The effects of alcohol and other drugs in the workplace could undermine the productivity of the Commonwealth's workforce, one of Virginia's greatest assets. The adverse effects of alcohol and other drugs create a serious threat to the welfare of fellow employees and to Virginia's citizens. The Commonwealth, therefore, adopts the following policy and procedures to address alcohol and other drug problems in the public work force.

## Implement strong prevention programs

This comprehensive policy will be posted on the DSLCC website and available to DSLCC students, staff and faculty 365 days a year. As mentioned above, each student staff and faculty member will receive a written copy of the plan via email as part of the onboarding process whether as an employee (when hired) or as a student (when the student first receives DSLCC student email). In addition, this plan will be sent out to the entire DSLCC employee and student email list at the beginning of each semester during in-service week.

All educational programs, where applicable, will be videotaped utilizing Zoom in order to provide consistency and availability to all members of the DSLCC community. These programs will offer accurate information about the consequences of drug and alcohol use, while being motivational and empowering and fostering success among our students. Educational programs will include the following:

- **Ongoing presentations and information on College drug and alcohol policies** as part of new student orientation programs for new students in August, January and May in person or via Zoom.
- **At club training in September**, develop peer communication strategies with college clubs and student organizations to encourage **early intervention** to identify at-risk students, and obtain treatment for students with substance use disorders.
- **January & May**—Schedule speakers from community service boards for all SDV-100 College Success Skills Classes for spring, summer and fall semesters. **Pre-assessment to occur on first day of class.**
- **September**—Substance Abuse Awareness Week as part of National Suicide Prevention Month
  - Clubs present intervention activities
  - YouTube or TedTalk
- **October**—DSLCC Annual Health & Wellness Fair will offer a number of resources.
- DSLCC provides **referrals to community service boards and other community services** throughout the year.
- **Ongoing promotions and awareness regarding the available substance abuse counseling** continue throughout the year.
  - Continue to maintain and replenish brochure racks with information from local community service boards, information on Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and Cocaine Anonymous (CA).
  - Tabling opportunities focused on awareness of substance and alcohol abuse at student events for community partners at school events, such as Fall & Spring picnics, Diversity Day programs and Sexual Assault Awareness Events (Escalation Film sponsored by One Love Foundation and Red Flag Campaign sponsored by Virginia Action Alliance).
  - Promote community events sponsored by Allegheny Highlands Youth Coalition

- If available, bring Virginia State Police Drunk Driving Simulator to DSLCC for Fall and Spring Picnics/Annual DSLCC Health Fair
- **Post assessment** included in annual graduate exit survey.
- Program Evaluations at each event via cell phone.

## **Biennial Review Report**

- Every other year, institutions must evaluate their policies and programs and publish a report —the biennial review report.
- Due Date—October 1, 2020
- Biennial Review Committee
- List of items for evaluation

## **Title 21 United States Code (USC) Controlled Substances Act (CSA)**

### **Listing of drugs of abuse and their health risks**

<https://www.drugabuse.gov/publications/drugs-brains-behavior-science-addiction/addiction-health>

### **Federal Drug Trafficking Penalties**

<http://www.dea.gov/druginfo/ftp3.shtml>