

T.V.

January 15, 2009

PTC Celebrates “Swingtown” Death Knell

LOS ANGELES (January 15, 2009) – The Parents Television Council™ applauded the formal announcement by CBS Entertainment President Nina Tassler that *Swingtown* would not be returning to the broadcast network’s schedule. As reported in *Broadcasting & Cable*, Tassler told the TV Critics Association Winter Press Tour yesterday: “No we are not going back to *Swingtown*. That show was also a victim of the strike. It was a risk. We took it and are proud of it.”

“On behalf of the nation’s children and families, the PTC applauds and celebrates the removal of *Swingtown* from the public airwaves. But let’s be clear about why the program was pulled from the schedule: It had nothing to do with the writer’s strike and everything to do with the program’s lack of sponsors. CBS’ claim that *Swingtown* was a victim of the strike is nothing but PR spin to conceal what really happened,” said PTC President Tim Winter.

Swingtown gave viewers a look into a world of drugs and sexual experimentation with the premise of open marriage at its core. The show aired as early as 9:00 pm in the Central/Mountain time zones, and aired content such as a ménage à trois, orgies, and the characters enjoying drugs such as marijuana, cocaine and Quaaludes.

After the PTC and its members contacted advertisers about the concerning content on *Swingtown*, the most responsible corporate sponsors stepped away from the show. The decision to do so is a testament to the sponsors’ good management and to the powerful voices of concerned citizens across America who spoke out against a program chockfull of graphic content,” said Winter.

PTC: CBS Crosses Indecency Line with ‘Two and a Half Men’

LOS ANGELES (October 22, 2008)

– The Parents Television Council™ is filing an indecency complaint with the Federal Communications Commission (FCC) and urging its members and concerned citizens to do the same after a three minute long strip club scene featuring a lap dance aired on CBS’s “Two and a Half Men.” The episode at issue aired on Monday, October 20 at 9:00 p.m. in the Eastern and Pacific Time zones/8:00 p.m. in the Central and Mountain Time zones.

The strip club scene features the main character attempting to have a conversation with his nephew’s former teacher turned stripper while she gives his brother a private lap dance. The stripper grinds on his brother’s lap eliciting moans and cries of “yes, yes, yes” before the scene ends.

“We believe that the patently offensive sexual content in this episode of ‘Two and a Half Men’

crossed the broadcast indecency line. Rather than airing the program after 10:00 p.m., and rather than assigning a content rating that accurately reflects the material contained within the episode, CBS chose to air it when millions of children were in the television viewing audience, and they deemed the material to be suitable for 14-year-olds,” said PTC President Tim Winter.

“The shocking episode included a strip club scene that lasts three full minutes and features up close shots of a leading character being ‘serviced’ by a stripper complete with moaning and other sexual references. The scene was in no way ‘fleeting’ or accidental; rather, it was specifically written into this scripted program.

“It’s high time for CBS to be held accountable for violating the public trust, the broadcast decency law, and the two consent decrees it signed with the FCC promising not to air indecent content. This episode of ‘Two and a Half Men’ is just the latest act of irresponsibly from the network that brought us the Janet Jackson Super Bowl striptease, an unedited ‘f-word’ on ‘Big Brother’ and unobscured male genitals in high-definition to kick off the new season of ‘Survivor.’

“In addition to our indecency complaint, we are urging parents to contact the FCC to let them know enough is enough from CBS. We will also be contacting advertisers that appeared in the episode to ensure they are aware of exactly what type of content they chose to associate with their hard-earned corporate brands,” said Winter.

Happily Never After: New PTC Study Reveals TV Favors Non-Marital Sex

LOS ANGELES (August 5, 2008)

– The Parents Television Council™ released a new study, *Happily Never After: How Hollywood Favors Adultery and Promiscuity Over Marital Intimacy on Prime Time Broadcast Television*, which revealed that broadcast networks depict sex in the context of marriage as either non-existent or burdensome while showing positive depictions of extra-marital or adulterous sexual relationships with alarming frequency.

Across the broadcast networks, the new PTC report found that verbal references to non-marital sex outnumbered references to sex in the context of marriage by nearly 3 to 1, and scenes depicting or implying sex between non-married partners outnumbered similar scenes between married couples by a ratio of nearly 4 to 1.

“These study results suggest that many in Hollywood are actively seeking to undermine marriage by consistently showing it in a negative manner. Even more troubling than the marginalization of

marriage and glorification of non-marital sex on television is TV's recent obsession with outré sexual expression. Children and teens are now exposed to a host of sexual behaviors that less than a generation ago would have been considered off-limits for broadcast television," said PTC President Tim Winter.

According to the PTC study, some of the once-taboo-for-TV sexual behaviors that are now found on prime time television include threesomes, partner swapping, pedophilia, necrophilia, bestiality, and sex with prostitutes, in addition to depictions of strippers, references to masturbation, pornography, sex toys, and kinky or fetishistic behaviors.

"Behaviors that were once seen as fringe, immoral, or socially destructive have been given the stamp of approval by the television industry. And recent studies show that children are influenced by those messages. Throughout much of the history of broadcast television, the networks adhered to a voluntary code of conduct which stipulated that respect should be maintained for the sanctity of marriage and the value of the home. Our report finds that not only are the boundaries no longer respected – they have been obliterated," Winter continued.

The PTC examined all scripted prime time entertainment programs on the major broadcast television networks (ABC, CBS, Fox, NBC, and the CW) during four weeks at the beginning of the 2007-2008 television season (September 23-October 22, 2007) for a total of 207.5 programming hours. Television broadcasts of movies, news, sports programs, reality and game shows were not included in this analysis. My Network TV did not air programming that matched this study's criteria within the study period.

Summary of Major Findings:

Across the broadcast networks, verbal references to non-marital sex outnumbered references to sex in the context of marriage by nearly 3 to 1, and scenes depicting or implying sex between non-married partners outnumbered scenes depicting or implying sex between married partners by a ratio of nearly 4 to 1.

References to adultery outnumbered references to marital sex 2 to 1.

Although the networks shied away from talking about sex in the context of marriage, they did not shy away from discussions of masturbation, oral sex, anal sex, manual stimulation, sex toys, bondage or kinky or fetishistic sex – there were 74 such references during the study period.

The Family Hour – the time slot with the largest audience of young viewers where one might reasonably expect broadcasters to be more careful with the messages they are communicating to impressionable youngsters – contained the highest frequency of references to non-married sex.

Family Hour references to non-marital sex outnumbered references to sex in marriage by a ratio of 3.9 to 1. During the 9:00 pm and 10:00 pm hours, the references to non-marital versus marital sex averaged 2.5 to 1.

Visual references to voyeurism (a third party present, watching or taping while sex takes place), transvestites/transsexuals, threesomes, kinky sex, bondage, sado-masochism, and prostitution outnumbered visual references to sex in marriage by a ratio of 2.7 to 1.

Content descriptors, which are intended to alert parents to inappropriate content and work in conjunction with the V-Chip to block such content that parents may find unsuitable for their children, were often lacking or inadequate. For example, on ABC, 38% of programs airing during the Family Hour that contained sexual content did not receive the

S” descriptor and during the 9:00 pm hour, 71% of programs containing sexual dialogue did not carry a “D” descriptor. Every network had problems with the consistent application of “S” and/or “D” descriptors during every time slot.

Of all the networks, ABC had the most references to marital sex, but many of the references were negative. References to non-marital sex, by contrast, were almost universally positive or neutral.

In 46 hours of programming, NBC contained only one reference to marital sex, but 11 references to non-marital sex and one reference to adultery were made.

References to incest, pedophilia, partner swapping, prostitution, threesomes, transsexuals/transvestites, bestiality, and necrophilia combined outnumbered references to sex in marriage on NBC by a ratio of 27 to 1.

On NBC, there were as many depictions of adults having sex with minors as there were scenes implying or depicting sex between married partners.

Michael Medved, Nationally Syndicated Talk Radio Host and PTC Advisory Board Member, remarked, “For many years, parents have worried about television’s glamorization of destructive sexual behavior. This important new report suggests another cause for concern: the de-glamorization of marriage. Statistics show that the overwhelming majority of Americans feel satisfied and fulfilled by their marriages. The notion that sex outside of marriage is inherently more exciting, more important, more worthy as the subject of story-telling, is a toxic message for parents and children alike.”

Mr. Winter continued, “Broadcasters, knowing television’s ability to influence behavior, must exercise greater responsibility when handling sexual situations during primetime hours – opting for less graphic visual content, and favoring storylines that don’t celebrate promiscuity, glamorize criminality, or denigrate monogamy. The American people need to hold the networks and their local broadcast affiliates accountable for pushing questionable content into their homes over the publicly-owned broadcast airwaves. In addition, advertisers need to reconsider their role as underwriters of such material, and whether they want to continue associating their brand names and hard-earned corporate images with salacious sexual content. While the Supreme Court awaits its next legal review of indecency on television, now is the time for families to raise their collective voice against the tide of graphic sexual content invading their homes.

Analysis Shows Increasing Permissiveness of Broadcast Networks in Airing F-word and S-word During Primetime

LOS ANGELES (October 29, 2008) – The Parents Television Council found that profanity during primetime broadcast television not only has increased since 1998, but that harsher profanity has quickly risen in prominence and pervasiveness. More than a quarter of the expletives a child will hear on TV today will be the exact words or some form of the "f-word," the "s-word," or the "b-word" that air unbleeped or partially-bleeped on broadcast television.

In 1972, the late George Carlin infamously asserted in a comedy routine that there are “Seven” Words You Can Never Say on Television,” yet when subsequently broadcast over the radio, it led to the Supreme Court case (*FCC v. Pacifica*) that affirmed the authority of the FCC to enforce the broadcast decency law. Today, six of those seven words have aired unedited on broadcast TV during primetime viewing hours. The remaining word aired unedited during a network news program, NBC’s Today, in February 2008. On November 4, the Supreme Court is set to hear arguments in the so-called “fleeting” profanity case (*FCC v. Fox*) concerning uses of the f-word and s-word on primetime broadcast television.

“Our research is shocking and especially troubling to parents. Not only are harsher profanities like the f-word and s-word airing during hours when children are likely to be in the viewing audience, but they are airing with greater frequency. There is certainly no ‘chilling’ effect on broadcast television as the networks like to claim. The opposite has occurred: broadcast standards have become so permissive that the term is now an oxymoron” said PTC President Tim Winter.

“Our results show that when an expletive is introduced on television, usage of the word becomes commonplace in fairly short order. Then the broadcast networks feel the need to up the ante with even more offensive profanity. The result is that there is a significant increase in the overall use of profanity on the public airwaves, and an escalation in the offensiveness of the words used.

While certain expletives may become ‘commonplace’ to network executives, they must keep in mind that most parents do not want their children bombarded by those words during hours when they’re most likely to be in the audience.”

This Parents Television Council analysis of foul language on television is based on a comprehensive and exhaustive look at all primetime entertainment programming (sports and news programs excluded) on the major broadcast networks (ABC, CBS, Fox, NBC, CW, MyNetworkTV, UPN and WB) between 1998 and 2007. Every instance of unbleeped or partially-bleeped foul language selected for this analysis was recorded in and retrieved from the PTC’s custom-designed Entertainment Tracking System (ETS) database and sorted by word, year, network and timeslot.

Major Findings:

Not only has the quantity of profanity increased dramatically on primetime broadcast television,

but the trend is towards using even harsher words. Milder profanities like “hell” and “damn” would have been unthinkable to air on programs aimed at family audiences in the 1950s. Today, the types of profanities and the frequency of their usage have dramatically changed. If one harsh expletive is allowed to air during primetime, the likelihood increases that that word will air with more frequency within a network and across networks.

In total, nearly 11,000 expletives (hell, damn, ass, piss, screw, bitch, bastard, suck, crap, shit, and fuck) were aired during primetime on broadcast TV in 2007 – nearly twice as many as in 1998.

Milder expletives like hell, damn, crap, etc., are starting to take a back seat to harsher words. In 1998, 92% of the foul language on TV was comprised of milder expletives. In 2007, 74% of the foul language could be categorized as mild, however, more than a quarter of the expletives a child will hear on TV today will be some form of the f-word, s-word, or the b-word.

The f-word aired only one time on primetime broadcast TV in all of 1998 – yet it appeared 1,147 times on primetime broadcast TV in 2007 on 184 different programs.

The s-word, which appeared only two times in 1998, aired 364 times in 2007 on 133 different programs.

Usage of the b-word on primetime television has increased 196% from 1998 to 2007 (431 to 1277). The number of programs using the b-word likewise increased from 103 in 1998 to 685 in 2007.

The f-word first aired on a UPN show in 1998 at 8:00 p.m. In 1999, the number of times the f-word aired on broadcast television during primetime increased to 11.

Harsh profanity is becoming more commonplace at earlier times of the day. Profanity is no longer confined to the latest hours of primetime where the viewing audience is primarily comprised of adults.

In 2007, 52% of the programs that contained the f-word and 55% of the programs that contained the s-word aired during the 8:00 p.m. Family Hour.

In 2007, the f-word aired in 96 shows during the 8:00 p.m. hour. CBS and Fox accounted for almost 60% of all shows airing this expletive.

In 1998, no shows on broadcast television aired the s-word at 8:00 p.m. or 9:00 p.m. By 2007, the s-word appeared in 73 shows at 8:00 p.m. and 52 shows at 9:00 p.m. Fox and ABC accounted for 77% of the shows airing the word during the 9:00 p.m. hour (46% and 31% respectively).

The V-chip ratings and content descriptors are wholly inadequate to protect children and families from this barrage of offensive language.

Nearly a quarter (24%) of the programs that aired the f-word and 25% of the programs that aired

the s-word in 2007 did not carry the L-descriptor, which would have triggered the mechanism in the V-chip to allow families who do not wish to be exposed to such content to block the programs from coming into their homes.

In 2007, 29% of programs aired the b-word without an L-descriptor, which was more frequent than the f-word and s-word. This may indicate a growing comfort with the word in the networks' standards and practices departments and their failure to even recognize the word as offensive.

"The networks must take seriously their responsibility to keep the publicly-owned airwaves safe for children and families, and time-of-day considerations are a critical component. This analysis refutes every excuse the networks assert to circumvent their responsibility. We hope that the Supreme Court and our public servants realize the frequency with which harsh profanities air on broadcast television and their pervasiveness on programs aimed at young children. It is simply unacceptable for the networks to barrage our children with this type of language," Winter continued.

"Every instance of profanity is technically 'fleeting.' If the networks are 'successful' in claiming a legal 'right' to air expletives at any time of day, history proves that we can expect profanities to rise dramatically on broadcast television – even when millions of children are in the audience. If concerned parents and citizens do not speak out to their public servants about this immediately, we are certain to see even more harsh language appear during primetime broadcast hours in the months and years to come," said Winter.

To speak with a representative from the Parents Television Council, please contact Kelly Oliver (ext. 140) or Megan Franko (ext. 148) at (703) 683-5004.

Teen pregnancies tied to tastes for sexy TV shows

November 3rd, 2008 @ 7:39am

By LINDSEY TANNER

AP Medical Writer

CHICAGO (AP) - Groundbreaking research suggests that pregnancy rates are much higher among teens who watch a lot of TV with sexual dialogue and behavior than among those who have tamer viewing tastes.

"Sex and the City," anyone? That was one of the shows used in the research.

The new study is the first to link those viewing habits with teen pregnancy, said lead author Anita Chandra, a Rand Corp. behavioral scientist. Teens who watched the raciest shows were twice as likely to become pregnant over the next three years as those who watched few such programs. Previous research by some of the same scientists had already found that watching lots of sex on TV can influence teens to have sex at earlier ages.

Shows that highlight only the positive aspects of sexual behavior without the risks can lead teens to have unprotected sex "before they're ready to make responsible and informed decisions," Chandra said.

The study was released Monday in the November issue of Pediatrics. It involved 2,003 12- to 17-year-old girls and boys nationwide questioned by telephone about their TV viewing habits in 2001. Teens were re-interviewed twice, the last time in 2004, and asked about pregnancy. Among girls, 58 became pregnant during the follow-up, and among boys, 33 said they had gotten a girl pregnant.

Participants were asked how often they watched any of more than 20 TV shows popular among teens at the time or which were found to have lots of sexual content. The programs included "Sex and the City," "That '70s Show" and "Friends."

Pregnancies were twice as common among those who said they watched such shows regularly, compared with teens who said they hardly ever saw them. There were more pregnancies among the oldest teens interviewed, but the rate of pregnancy remained consistent across all age groups among those who watched the racy programs.

Chandra said TV-watching was strongly connected with teen pregnancy even when other factors were considered, including grades, family structure and parents' education level.

But the study didn't adequately address other issues, such as self-esteem, family values and income, contends Elizabeth Schroeder, executive director of Answer, a teen sex education program based at Rutgers University.

"The media does have an impact, but we don't know the full extent of it because there are so many other factors," Schroeder said.

But Bill Albert, chief program officer at the nonprofit National Campaign to Prevent Teen Pregnancy, praised the study and said it "catches up with common sense."

"Media helps shape the social script for teenagers. Most parents know that. This is just good research to confirm that," Albert said.

Still, U.S. teen pregnancies were on a 15-year decline until a 3 percent rise in 2006, the latest data available. Experts think that could be just be a statistical blip.

And Albert noted that the downward trend occurred as TV shows were becoming more sexualized, confirming that "it's not the only influence."

Psychologist David Walsh, president of the National Institute on Media and the Family, cited data suggesting only about 19 percent of American teens say they can talk openly with a trusted adult about sex. With many schools not offering sex education, that leaves the media to serve as a sex educator, he said.

"For a kid who no one's talking to about sex, and then he watches sitcoms on TV where sex is presented as this is what the cool people do," the outcome is obvious, Walsh said.

He said the message to parents is to talk to their kids about sex long before children are teens. Parents also should be watching what their kids watch and helping filter messages sex-filled shows are sending, he said.

American Academy of Pediatrics: <http://www.aap.org/>

April 28, 2006

Media Quote of the Week

"This practice, repetition, identification with a violent character and being rewarded for numerous acts of violence may intensify learning of violence. With the development of more sophisticated interactive media, the implications for violent content are of further concern. This is due to the intensification of more realistic experiences, which may be even more conducive to increasing aggressive behavior as compared to passively watching violence on TV and in films." [Testimony of Elizabeth K. Carll, PhD, of the American Psychological Association on the effects of exposure to violence in video games given before the Congressional Caucus on Sex and Violence in the Media.]

Statistic of the Week

In a random sample of 81 T-rated (for teens) video games, 79 games (98%) involved intentional violence for an average of 36% of game play time, and 34 games (42%) contained blood. More than half of the games (51%) depicted five or more types of weapons, with players able to select weapons in 48 games (59%). Thirty-seven games (46%) rewarded or required the player to destroy objects, 73 games (90%) rewarded or required the player to injure characters, and 56 games (69%) rewarded or required the player to kill. Researchers observed a total of 11,499 character deaths in the 81 games, occurring at an average rate of 61 human deaths per hour of game play (range 0 to 1291). [Kevin Haninger, M. Seamus Ryan, and Kimberly Thompson. "Violence in Teen-Rated Video Games." Medscape General Medicine 6(1), 2004.]

PTC to Networks: New \$300 Million Ad Campaign is Useless

"The Only Solution is for the Industry to Clean Up its Act"

LOS ANGELES (April 25, 2006) -- The Parents Television Council™ called into question the broadcast networks' new \$300 million advertising campaign aimed at promoting the V-chip and ratings system to consumers when the V-chip and ratings system have been proven ineffective.

"PTC research has clearly shown that the V-chip and ratings system have failed. We found that

most television programs airing foul language, violence, and inappropriate sexual dialogue or situations do not use the appropriate content descriptors that would warn parents about the presence of offensive content. Without accurate descriptors, the V-chip fails, and thus, the ratings system is rendered meaningless. More public awareness will not cure the problem. The only solution is for the industry to clean up its act. They're spending \$300 million to defend themselves against their wretched excesses. Why don't they just stop airing their wretched excess?" said L. Brent Bozell, president of the PTC.

"It's shameful that the networks and other industry executives are dodging their responsibilities to protect the public airwaves from offensive and indecent content. The television industry seems to have forgotten the fact that they must abide by community standards of decency – this is the law. In addition, the FCC already ruled that airing the 'f-word' and 's-word' is indecent. This is so clear that even a 10-year-old could understand. The networks' legal challenges to the FCC indecency fines levied against them speak volumes: the networks clearly do not care about the filth that they broadcast.

"There must be real penalties for those who violate these indecency laws – the current penalties are not enough. We hope the Senate will act to substantially increase fines to those who do. We are calling on our over one million members to remind Congress that the public airwaves must remain a safe harbor for families," said Bozell.

April 21, 2006

Media Quote of the Week

"It would be misleading to suggest that the only reason to protest lewdness is that children are watching. Nor are the feminists correct to condemn pornography only because it objectifies women. This stew of smuttiness coarsens our sensibilities. It appeals to our lowest selves. It makes a mockery of words like delicacy, refinement - and modesty." [Mona Charen, "What's Coarse is Common." Editorial in *The Hartford Courant*, April 19, 2006.]

Statistic of the Week

According to a *New York Times*/CBS News Poll (11/23/04), 70% of adult Americans are worried that "popular culture -- that is, television, movies and music -- is lowering the moral standards of the country."

Networks Want Unrestricted Access to Air Expletives on TV

The Parents Television Council denounced the actions of ABC, CBS, NBC, Fox and Hearst-Argyle Television which collectively filed a court challenge to be able to air the "F-word" and "S-word" on television. Recent FCC rulings found several programs indecent because of these expletives.

"The broadcast networks are spitting in the faces of millions of Americans by saying they should be allowed to air the 'f-word' and 's-word' on television. This suggestion by the networks is utterly shameless," said L. Brent Bozell, president of the PTC.

"It's beyond preposterous that the networks would even propose that airing the 'f-word' and 's-word' on television is not indecent. The networks' principles have now been unmasked for everyone to see. Their actions today are indecent in and of themselves.

"Memo to the networks: the broadcast airwaves are owned by the American people, and the broadcast industry must abide by community standards of decency. This is not a proposal, it is the law that the Supreme Court affirmed many years ago. The FCC rightly decided that the use of these words is considered indecent. It is the networks' responsibility to follow the law.

"In the U.S., there are rules of decent behavior and these expletives clearly cross the line. Maybe the network executives let their children drop F-bombs at the dinner table, but there isn't a normal family in America that would find it appropriate or decent for that language to be used by their children. The networks have taken this fight to a court of law because they know they don't stand a chance in the court of public opinion.

"The only thing wrong with these indecency fines is that they are not nearly tough enough to stop these networks, which have now made it crystal clear that they want to pollute the public airwaves with raunch."

April 13, 2006

Media Quote of the Week

"Playing violent video games can make you think other people are out to get you, research shows. Dr Sonya Brady of the University of California, San Francisco, and Professor Karen Matthews at the University of Pittsburgh say their study shows that young men are more likely to see others' attitudes toward them as hostile if they've just played a violent game." [Reuters, April 10, 2006]

Statistic of the Week

In a national survey conducted by Nielsen Media Research (4/29/04), 78% of American families who had recently been part of the Nielsen "People Meter" panel wanted more shows "without profanity or swear words."

April 7, 2006

Media Quote of the Week

"Having a fourteen-year-old sister, I see what she's watching - all these teenyboppers portrayed as promiscuous and their parents are fools, idiots. I don't understand the argument that it has no impact. I don't know how anyone can say that. Because you're so impressionable. I still am." --

Twenty-one-year-old Broadway actress/singer Laura Benanti, a Tony award nominee last season, on today's TV and movies, in the *New York Times*.

TV Linked to Teen Sex

Teens who are exposed to high levels of sex in the media are likely to become sexually active earlier in life, according to a new study published in the April issue of *Pediatrics*. Researchers found that children with the highest exposure levels were 2.2 times more likely to have had intercourse at ages 14 to 16 than similar youngsters with less exposure.

TV, in effect, works as a "super peer," telling teens that everybody's doing it, and there's something wrong with them if they aren't sexually active. TV can alert a teens' perception of how many of their peers are sexually active and how much sexual experience they are expected to have.

No one should be surprised by these findings. For years, studies and surveys have shown that teens are aware of TV's powerful influence. According to one survey published in 2001 in the Chicago Tribune, a third of youths 12 and older say the media encourages them to have sex. 34% of youths surveyed said they believed some teen-agers have sex "because TV and movies make it seem normal." Another survey showed that 62% of teens say that sex on TV shows and movies influences kids to have sex when they are too young and 77% say there is too much sex before marriage on television.

March 31, 2006

Statistic of the Week

There was an overall increase in foul language in every timeslot between 1998 and 2002. Foul language during the Family Hour increased by 94.8% between 1998 and 2002 and by 109.1% during the 9:00 p.m. ET/PT time slot. Ironically, the smallest increase (38.7%) occurred during the last hour of prime time -- the hour when young children are least likely to be in the viewing audience. [From the PTC Special Report "[The Blue Tube: Foul Language on Prime Time Network TV](#)." September 2003.]

March 24, 2006

Media Quote of the Week

"The evidence is clear: Children who regularly view sexually suggestive media are more likely to engage in promiscuous sexual behavior themselves. What's particularly disturbing about this new research is that it shows that media messages about sex influence kids' attitudes and behaviors just as much, or more so, than their parents." [Dr. Bill Maier, vice president and psychologist in residence at Focus on the Family reacting to a new study on the media's influence on teens' sexual decision making published in the March issue of the Journal of Adolescent Health.

"Media a Strong Influence on Teens' Sexual Behavior" by Wendy Cloyd. [Focus on the Family](#)

Statistic of the Week

A new study released this week and published in the Journal of Adolescent Health indicates that the media serves as a "sexual super peer" for teenagers seeking information about sex, and that consequently, children exposed to sex on TV, in films, magazines, or in music are more likely to engage in sexual activity than those who are not. Researchers also found a direct relationship between the amount of sexual content a child sees and their level of sexual activity or their intentions to have sex in the future. [["Underage Sex 'Link' to Media."](#) The Daily Mail. March 22, 2006.]

March 10, 2006

Statistic of the Week

"Television viewing is the least monitored media activity, followed by computer game usage, and trailed by movie viewing." [David A. Walsh and Douglas A. Gentile. A Validity Test of Movie, Television, and Video-Game Ratings. Pediatrics, Jun 2001; 107: 1302 - 1308.]

March 2, 2006

PROFANE LANGUAGE - During the study period Nickelodeon aired an episode of *Sponge Bob Square Pants* entitled "Sailor Mouth," the subject of which is foul language: Innocent Sponge Bob doesn't understand the dirty word graffiti he sees on a dumpster but Patrick tells him it's a "sentence enhancer" for when you want to talk fancy. The rest of the episode features Sponge Bob and Patrick using bleeped foul language ["fuck," "asshole," etc]. The bleeps are made to sound like a dolphin which makes the whole thing seem humorous. At the end Sponge Bob and Patrick realize the words are bad and promise to never use them again but the episode ends with them telling Momma Krabs the 13 bad words Mr. Krabs has just said. All are punished by Momma Krabs for "talking like sailors." [August 1, 2005]

Media Quote of the Week

"Today's children use media for more hours than they spend in school, with parents, or engaged in any activity except sleeping. If they were exposed to even miniscule amounts of an air pollutant or food additive that increased their risk of violent injury, substance use, or unsafe sex, we would be unified in our efforts to remove it from their environment. In the Information Age, the average child is now exposed to over 8 hours of media content each day, media must be seen and understood as a powerful environmental influence on their physical, mental, and social health." [Dr. Michael Rich MD, MPH Director, Center on Media and Child Health in his

response to the PTC's release of "Wolves in Sheep's Clothing"]

PTC Calls on Fox to Stop Targeting Teens with *Family Guy* Raunch

Fox Ad Touts Family Guy as Top-Rated Show for Teens

January 23, 2006

LOS ANGELES (January 23, 2006) – The **Parents Television Council®** is calling Fox out of the henhouse for deliberately targeting impressionable teen viewers with its raunchy cartoon, *Family Guy*. In a recent web advertisement, Fox boasts that *Family Guy* is “#1 with teens” (the show had a 5.9 Nielson rating), yet anyone familiar with the content on this show knows that it is not appropriate for teens. Episodes this season have included scenes in which a teacher tries to show his high school class a homemade sex video showing him in women’s lingerie; references to oral sex; children discussing threesomes and prostitution, and other sexually graphic and indecent content.

Advertisements for the *Family Guy* have appeared on *The Simpsons* – the #1 show with 2-11-year-old children and #2 with 12-17-year-old children according to Nielson ratings in September 2005, during afternoon football games and on a number of PG-rated shows, including *Bernie Mac*.

“It is the height of irresponsibility for Fox to deliberately target this sleaze at young viewers. It’s clear that Fox puts making a dollar from young viewers above any sense of responsibility or social conscience. This type of content is in questionable taste even for adults, but when Fox boasts about its success at marketing it to teens, they’ve clearly crossed the line,” said L. Brent Bozell, president of the PTC™.

“Before Fox brought it back, *Family Guy* was placed on the Cartoon Network’s ‘Adult Swim’ for good reason – it’s strictly adult content. Fox may claim that *Family Guy* is targeted to adults, but that’s clearly not the case. We hope parents are aware that not every cartoon is safe for their teens. We will make sure the advertisers of the program are aware of the inflammatory content that’s shown on *Family Guy*.”

Statistic of the Week

Nov. 18, 2005

"As much as 10% to 20% of real-life violence may be attributable to media violence. The

recently completed 3-year National Television Violence Study found the following: 1) nearly two thirds of all programming contains violence; 2) children's shows contain the most violence; 3) portrayals of violence are usually glamorized; and 4) perpetrators often go unpunished. A recent comprehensive analysis of music videos found that nearly one fourth of all Music Television (MTV) videos portray overt violence and depict weapon carrying. -- ("Children, Adolescents, and Television." Pediatrics. Vol. 107 No. 2. February 2001)

Toyota Pulls Advertising from Nip/Tuck

Nov 4, 2005

After being contacted by members of the Parents Television Council, representatives of Toyota Motor Sales, Inc. sent a letter to Founder and President Brent Bozell indicating the company is pulling their advertising from the ultra-raunchy FX show Nip/Tuck. Toyota's letter indicated that while Toyota seeks out "edgier" programming to reach a younger demographic, a review of the content on Nip/Tuck led them to pull out of all remaining episodes. The PTC applauds Toyota for this responsible decision.

Take Action to Hold Sponsors of Nip/Tuck Accountable for Obscene Content

Earlier this week the PTC sent an e-alert asking for help in contacting sponsors of the ultra-obscene FX show Nip/Tuck. If you haven't had the opportunity to do it yet, please consider acting on this issue NOW. Without question, Nip/Tuck is one of the most sexually explicit, profane, and violent television programs in the history of American television - and it's about to get worse.

Remember, the FX Network isn't some pay-per-view porn channel or even a premium cable network like HBO. FX is part of the basic cable package, which means it spills into most homes in America. If you want Disney Channel or ESPN or Animal Planet or History Channel for your family, you are forced to pay every month for programs like Nip/Tuck. In fact, this horrific content is available to nearly 48 million children nationwide!

To see a clip of the show, or to read examples of the content FX thinks is appropriate for advertiser-supported basic cable, go to **www.parentstv.org/ptc/action/niptuck2/content.htm** . But we must warn you that the content is extremely graphic. It describes exactly what appeared in a recent broadcast. Please do not let any children see this material.

Our goal is to ensure that the SPONSORS of Nip/Tuck fully understand the nature of the content they are underwriting with their advertising dollars. Recent sponsors of Nip/Tuck include **Chattem Inc.** (makers of Selsun Blue), **General Motors**, **U.S. DenTek Corporation** (makers of the DenTek Dental Pick), **LG Electronics Inc.**, **Ben & Jerry's Homemade Inc.**, **Match.com**, **Combe Inc.** (Aqua Velva), and the **Alberto-Culver Co.** (V05).

Visit www.parentstv.org/ptc/action/niptuck2/main.asp and sign our Warning to the Sponsors of Nip/Tuck. Or write a personal letter to the sponsors and tell them what you think of their advertising practices.

Oct 21, 2005

The Top Ten Best and Worst Shows for family viewing on prime time broadcast television are:

BEST

- 1. Extreme Makeover: Home Edition**
ABC/8:00 Sunday - Returning show
- 2. Three Wishes** NBC/9:00 Friday - 1st season
- 3. American Idol** Fox/Returning in spring '06
- 4. The Ghost Whisperer**
CBS/8:00 Friday - 1st Season
- 5. Everybody Hates Chris**
UPN/8:00 Thursday - 1st Season
- 6. Reba** WB/9:00 Friday - Returning show
- 7. Bernie Mac** Fox/8:00 Friday - Returning show
- 8. Dancing with the Stars**
ABC/Returning in spring
- 9. 7th Heaven** WB/8:00 Monday - Returning show
- 10. Not available.**

WORST

- 1. The War at Home** Fox/8:30 Sunday - 1st Season
- 2. The Family Guy** Fox/9:00 Sunday - Returning show
- 3. American Dad** Fox/9:30 Sunday - Returning show
- 4. The O.C.** Fox/8:00 Thursday - Returning show
- 5. C.S.I. (Crime Scene Investigation)** CBS/9:00 Thursday - Returning show
- 6. Desperate Housewives**
ABC/9:00 Sunday - Returning show
- 7. Two and a Half Men** CBS/9:00 Monday - Returning show
- 8. That '70s Show** Fox/Returning in November '05
- 9. Arrested Development** Fox/8:00 Monday - Returning
- 10. Cold Case** CBS/8:00 Sunday - Returning show

For the full report and show description visit

<http://www.parentstv.org/PTC/publications/reports/top10bestandworst/main.asp>

TV's Goriest Season Ever

In the aftermath of the Columbine school shootings, CBS President Les Moonves said "anyone who thinks the media has nothing to do with [the bloodshed at Columbine] is an idiot." How quickly we forget. CBS devotes no less than twelve hours a week to crime dramas, procedurals, and super-natural thrillers, flooding the airwaves with some of the goriest images and most graphic descriptions of brutal crimes ever to come across the broadcast airwaves.

Of course, CBS is not alone. It seems the broadcast networks are all looking to push the envelope with increasingly graphic and appalling violence.

It tells you something when even Rolling Stone Magazine is expressing concern about the excessive violence this television season. The following excerpt is taken from an October 20th article titled "Must Bleed TV":

"A wounded man startles awake in an outdoor lounge chair, and before he dies he gapes in terror at the fresh, oozing sutures on his exposed abdomen. Damn! Some psycho has carved out his liver, but the organ is still nearby - and it's cooking on the grill!

"No, this isn't a deleted scene from the director's cut DVD of Hannibal - it's just a random moment from Killer Instinct, one of Fox's new shows. Welcome to prime-time-network and basic-cable television, where a bumper crop of bloodthirsty police procedurals and high-concept thrillers is making for perhaps the most violent, sadistic TV season ever."

Rolling Stone isn't alone in observing TV's recent obsession with brutality and gruesome murders. According to Salon.com, "Even the new procedural dramas, the latter-day C.S.I.s, are wandering into extremely dark territory with the specter of abusive fathers, serial killers, rapists armed with tarantulas, and murderous Capitol Hill insiders (Close to Home, Killer Instinct, Bones, Criminal Minds). More than anything, the fall shows paint a picture of a world that's slipping out of our control. Around every turn are malevolent forces that seek to destroy us, forces that exist outside the scope of the civilized world or current science or human understanding."

For TV show content descriptions and ratings visit the PTC's Family Guide to TV Viewing at <http://www.parentstv.org/ptc/familyguide/main.asp>

Media Quote of the Week

Oct 21, 2005

"My kids don't watch TV. We have televisions, but they're not hooked up to anything but movies. TV is trash. I was raised without it. We don't have magazines or newspapers in the house, either."

Madonna, quoted in ThisIsLondon.com, 10/13/05

Statistic of the Week

Approximately 9 out of 10 American parents believe today's media contribute to children becoming too materialistic (90%), using more coarse and vulgar language (90%), engaging in sexual activity at younger ages (89%), experiencing a loss of innocence too early (88%), and behaving in violent or anti-social ways (85%). The majority of parents believe that media negatively affect their own children in these ways. (Common Sense Media Poll of American Parents, May 2003)

Statistic of the Week

Oct 14, 2005

"The mere mention of sex on TV increases the chances that teens will engage in it earlier. A survey in 2002 by the Kaiser Family Foundation of 15-to-17-year-olds found that 72 percent of them believe that sex on TV influences the behavior of their peer groups." (Washington Post, September 16, 2005)

Hollywood: Sex, Drugs and No Consequences

Oct. 7, 2005

A study of the 200 most popular movies of all time shows Hollywood doesn't depict consequences for sex or drug use. The School of Public Health at the University of Sydney (Australia) released the study this week. Researchers studied a September 2003 list of the 200

biggest box office successes of all time, ranked by the Internet Movie Database. After excluding animated movies and films rated G or PG, as well as movies released before 1983 when the AIDS pandemic started, researchers were left with 87 movies to analyze. The findings were disturbing.

Thirty two percent (28 movies) contained sex scenes and only one movie, *Pretty Woman*, referred to birth control. The "sexiest film", the one with the most sex scenes, was *American Pie 2*, and the only consequence shown for having unprotected sex was social embarrassment.

"There were no depictions of important consequences of unprotected sex such as unwanted pregnancy, HIV or other STDs," the researchers said.

The same was true for portraying drug use.

Eight percent of the movies reviewed portrayed marijuana use and of these portrayals more than half were shown in a positive light. The other portrayals were neutral. Seven percent of the movies showed non-injected drug use. Smoking was portrayed in 68% of the movies and characters were drunk in 32% of the movies reviewed.

The study concluded that Hollywood should be encouraged to portray safer sex practices and the negative consequences of unprotected sex and illegal drug use.

Americans Watching More TV

According to Nielsen Media Research families in America are watching more TV than they did ten years ago. They're also watching more than they did last year. On average American families watch eight hours and 11 minutes of television every day. That is an increase of 2.7% from September 2004 (eight hours, one minute) to September 2005. The number jumps more dramatically when comparing data to a decade ago. In 1995 families were watching a daily average of seven hours and 15 minutes. Media analysts credit the increase in the number of channels available in the average home, noting that most homes now receive around 100 channels of programming. Specialty channels like HGTV (Home and Garden Television) or OLN (Outdoor Living Network) splinter the audience by creating niches.

Nielsen's figures also showed an increase in television viewing this summer. More than one million more people were watching TV this summer than were watching last summer when NBC aired the Olympic Games. Both network and cable channels also saw an increase in viewership for "premiere week" - the week of Sept. 19 when new and returning shows debuted for the fall season - with 109 million more people tuning in than did last year. (AdAge.com, Sept. 30, 2005)

Sept 30, 2005

PTC Launches National Campaign to Hold Sponsors of Nip/Tuck

Accountable for Underwriting Offensive Content

A new season of the ultra-violent, ultra-raunchy series *Nip/Tuck* is underway. The series, which follows two Miami plastic surgeons, wallows in its depravity. In only two episodes, the series has depicted a threesome; a decaying, maggot-covered corpse; a teenaged boy having sex with a transsexual adult; and more.

Series creator Ryan Murphy has said "I wanted to do something so violent it will shock even me." And "It's tough to get that sexual point of view across on television. Hopefully I have made it possible for somebody on broadcast television to do a rear-entry scene in three years. Maybe that will be my legacy." Lead actor Julian McMahon told the New York Post, "I'd like to be even more brutal and more weird...I feel very lucky that we've gotten away with what we have, but I'd like to go even further."

The Parents Television Council is launching a massive national campaign to stop this explicit content from coming unbidden into America's homes. We're doing it by going after irresponsible companies that sponsor and make this content possible. And we're doing it by encouraging Congress to give consumers choice over the cable channels coming into their homes.

In the weeks ahead we will be asking you to help us by contacting the sponsoring companies and your lawmakers on Capitol Hill. If we are going to make an impact, we desperately need your involvement.

For updates on the status of this campaign, we urge you to visit <http://www.parentstv.org/ptc/campaigns/NipTuck/main.asp>.

Sept 23, 2005

Geico Apologizes to PTC Members

An Executive Vice President at GEICO Insurance Company contacted the PTC this week and admitted the company lied about sponsoring the ultra-violent and ultra-vulgar FX show *The Shield*. In a letter to PTC President Brent Bozell, GEICO said, "As you correctly point out, GEICO ads appeared on *The Shield* on March 22 and May 24 of this year." The letter went on to "apologize for the confusion we created when we responded to your members." Further it states the company has instructed its ad buyers that that GEICO ads should not appear on The Shield.

Following up on the truth and holding advertisers accountable is a cornerstone of the PTC mission. GEICO has taken responsibility for its actions and is moving to correct them. For that the PTC applauds them.

Read the apology from Geico at <http://www.parentstv.org/ptc/advertisers/letters/geicoapology.pdf>

Sept 16, 2005

New "Foul" Season Underway

Early reviews of some of this fall's offerings:

Criminal Minds (CBS, 9 p.m., Sept. 22)

"Each week, it seems, we get another crime show from some broadcast or cable network. And with each series, the level of revolting, sadistic violence inflicted on women goes up, as each show seeks to capture our attention with the darkest, most disgusting crime yet.

"If it's a contest, let's declare Criminal Minds the sick winner and call the game off.

"This low-rent CSI clone casts Mandy Patinkin and Thomas Gibson as the leaders of a team of FBI profilers who are searching for a man who captures, cages and tortures women. Like most TV series, Minds talks about more than it shows, but it shows more than enough." (USA Today)

The War at Home (Fox, 8:30 p.m., September 11)

"In The War at Home, an unconscionably smutty new sitcom from Fox, a supposedly typical American father named Dave speaks directly into the camera at various intervals to comment on the action. Example: After introducing us to his wife, Dave asks, "Did you check out the rack? Nice, huh?"

"...This isn't sick comedy, it's just sickening. Indeed, though the TV season won't start for a week, The War at Home stands a good chance of being the worst of all the new sitcoms. The problem is not just that it's crude and gross, but that its crudeness and grossness are so pathetically forced and contrived. Its vulgarity has no integrity.

"All the characters are vile in spirit and objectionable in essence."(*The Washington Post*)

Sept 16, 2005

NIP/TUCK - A program shown on the FX Network

Warning! The following content is very disturbing and graphic.

The new season of *Nip/Tuck* started on Tuesday, September 20th, and proved that the show is continuing the ignominious tradition of being one of the most sexually explicit, profane, and violent television programs in the history of American television.

In the season premiere, which was solely sponsored by the Sony Corporation, viewers witnessed

disgusting surgery procedures which included doctors removing a morbidly obese woman from a couch to which she had become grafted. Extreme close-ups of flesh being cut, gaping wounds and blood-soaked surgical tools were shown.

In another surgery scene leaky breast implants were being removed and replaced. The camera showed the doctor's hands grabbing a woman's breasts, slicing into them and the surgeon's hand being thrust deep inside the breast to grab and yank out the faulty implant. The leaking mass of silicone was a bloody, stringy mess when removed. The doctor then violently shoved the new implants into the woman's chest and close-ups of the breasts being stitched back together were shown.

Wednesday's season premiere also picked up on last year's story line which involved a character called The Carver who slashes people when attacking them. The show featured a flashback of one of the lead male characters being raped by The Carver. The sexploitation didn't end there however. In the final scene viewers were subjected to one of the lead male characters having sex with two women at the same time.

The producers of the show have indicated this type of material will continue in the new season. In an article in the NY Post, actor Julian McMahon who plays one of the doctors said, "I'd like to be even more brutal and more weird. In our show, the sex scenes are very particular to what the characters are going through. I feel very lucky that we've gotten away with what we have, but I'd like to go even further."

In flashback, Christian recalls being anally raped by the Carver.

Christian is dragged down the bed on his stomach. His pajama bottoms are ripped off, briefly exposing his rear. The Carver holds a rolled condom in front of Christian's face. Christian's eyes widen in horror. The Carver moves his groin against Christian's rear and thrusts into him. Christian's head is shown pressed against the mattress, one of the Carver's hands against the top of his head. Christian's head bounces as the Carver thrusts into him.

Kit, a police detective assigned to investigate the Carver, pressures rape victim Christian into having sex under the guise of "reenacting the crime."

Kit stands astride Christian. She pulls up her skirt, revealing stockings, garters and bare thighs. She kneels, straddling Christian's groin. Christian protests and begins to rise.

Christian: "That's not what happened."

Kit places a finger on his lips and presses him back against the bed.

Kit: "Shh. You were paralyzed, remember? Were you wearing a shirt?"

Kit undresses Christian and runs her hands over his bare chest.

Kit: "It must've been awful for you. A man who needs to be in charge demoted to another person's plaything. I can't imagine the Carver having an opportunity like this and not taking advantage of it."

Kit moves gently against Christian. He sits up suddenly and rolls her over, throwing her onto her back and straddling her, pinning her hands to the bed. Kit wraps her legs around his waist and yanks her dress up over her head, revealing her brassiere and the bottoms of her breasts. Kit spreads her legs apart as Christian leans into Kit. He thrusts into her and she gasps. The camera pulls back to show Christian brutally thrusting into Kit. With each thrust she shrieks and he grunts.

Kimber walks in on Christian and Kit.

Kimber: "First you propose to me, now you're screwing another girl. Who are you?"

Christian: "I'm me again, baby. I'm back."

Christian offers his hand to Kimber. Kimber removes her blouse and pants, revealing her underwear. She joins Christian and Kit on the bed. Kimber embraces Kit as Kit undoes her brassiere. Kimber removes Kit's bra. They kiss. Christian tongue-kisses Kimber. Kit kisses Kimber and pushes her to the bed, lying on top of her. Christian moves to lie on top of both of them.

Sean's wife Julia receives oral sex from a young man. Julia is shown lying in bed, gasping, groaning and crying out in pleasure. The naked man's head emerges from beneath the covers. He lies down next to Julia. Her hand moves towards his crotch as she giggles.

Kimber watches a pornographic movie with Christian and complains about his inability to satisfy her.

Kimber: "I've tried to be patient, but I can't pretend I don't miss it...I'm tired of masturbating myself to sleep at night."

Matt finds Adrian's maggot-infested corpse. The buzzing of flies is heard. The camera pans up the body, from a maggot-covered hand to a torso with bloody wounds in the elbow region and stomach, which are also strewn with maggots, to the body's face. The face is desiccated, waxy and in a state of decomposition. Its dead eyes stare upward. Live maggots crawl over the face and into the corpse's mouth.

Matt is still obsessing over Ava, the transsexual life coach with whom he had an affair in the previous season. He goes to her apartment and there he finds the decaying body of Adrian, Ava's teenaged son. Sean reveals to him that Ava is a transsexual, sending Matt into a downward spiral of alcoholism and drug use and leaving him questioning his own sexuality. Matt goes to a bar popular with transsexuals and is picked up by a pre-operative transsexual. When Matt finds out that he still has a penis, he beats him. The transsexual and his friends find Matt and beat him and

urinate on him in revenge.

Drug use on the Rise on Television

9-2-05

Children learn a lot from watching television. Everything from how they talk or dress to when a child initiates sexual activity can be influenced by what they are seeing on television. Parents who wish to curb TV's influence in the lives of their youngsters now have a new cause for concern. *USA Today* reports more and more TV shows are depicting the recreational use of marijuana. Shows ranging from HBO's *Entourage*, to FX's *Over There*, to the new Showtime series *Weeds*, to the popular Fox sitcom *That '70s Show* all feature characters that regularly smoke pot.

Although there is very little research on the portrayal of illicit drugs on television, research on tobacco and alcohol use on television suggest that increased television viewing is a risk factor for the onset of alcohol use in adolescents. According to Steve Dnistrian of the Partnership for a Drug-Free America, the tacit approval of pot-smoking, particularly in comedies, may exacerbate its use. "These are trendsetting shows. They affect behavior and attitudes, particularly in teens. When glamorization of drugs has climbed, changes in teen attitudes followed."

PTC in the News Research and Publications Director Melissa Caldwell discusses how marijuana is portrayed on TV and what responsibility networks have when showing drug use on CNN's *Showbiz Tonight*. Go to http://www.parentstv.org/ptc/clips/ptc/Melissa_CNN2.asp to watch a clip.

Teenagers and marijuana - Scientists uncover risk factors for marijuana use

17 Mar 2005

What risk factors influence teenagers to start experimenting with marijuana or to move from experimental to regular use?

Involvement with other substances (alcohol and cigarettes), delinquency and school problems have been established as the three most important risk factors in identifying teenagers at risk of continued involvement with marijuana by a Cardiff University scientist, in collaboration with a colleague in the USA.

The study, Risk Factors Predicting Changes in Marijuana Involvement, led by Dr Marianne van den Bree, Department of Psychological Medicine, School of Medicine and Dr Wallace Pickworth, National Institute on Drug Abuse (NIDA) in the USA assessed over 13,700 school students at high schools throughout the USA (aged 11-21 years). The students were participating in the National Longitudinal Study of Adolescent Health in the USA twice (in 1995 and in 1996) over a one year period.

Over half of the students in the study who indicated use of marijuana in 1995 were still using it one year later. Twenty-one well-established risk factors of adolescent substance use/abuse, including personality, family variables and religion, were used to predict five stages of marijuana involvement: (1) initiation of experimental use, (2) initiation of regular use, (3) progression to regular use, (4) failure to discontinue experimental use, and (5) failure to discontinue regular use.

Dr van den Bree said: "We found assessment of use of other substances and peer substance use, school, and delinquency factors to be key to identifying individuals at high risk for continued involvement with marijuana. The combined presence of these three risk factors greatly increased risk of experimental (by 20 times) and regular marijuana use (by 87 times) over the next year. Prevention and intervention efforts should focus on these areas of risk."

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Marijuana Withdrawal Reported By Teens Seeking Treatment

BURLINGTON, Vt. -- Often considered a relic of the 1970's culture, marijuana is no longer a baby boom generation issue. Today, nearly 50 percent of U.S. teenagers try marijuana before they graduate high school, and by 12th grade, about 21 percent are regular users. Consequently, treatment for marijuana dependence is on the rise, but, researchers have discovered, there's a catch -- withdrawal symptoms, much like those experienced by people quitting cigarettes, cocaine or other drugs, may make abstinence more difficult to achieve. A new study in today's edition of the journal *Drug and Alcohol Dependence* shows that teens that use marijuana frequently also may face the same withdrawal symptoms that have been found to challenge adult marijuana users trying to quit.

Ryan Vandrey, a graduate student in psychology, and Alan Budney, Ph.D., associate professor of psychiatry and psychology at the University of Vermont, studied 72 adolescent marijuana users seeking outpatient treatment for substance abuse. Participants in the study were heavy marijuana users ages 14 to 19, who were primarily male Caucasians, and who completed study questionnaires. Nearly two-thirds of the participants reported experiencing four or more symptoms of marijuana withdrawal, including anxiety, aggression, and irritability. More than one-third of participants reported four or more symptoms that occurred at a moderate or greater severity level.

"In the adolescents who provided information, we observed a lot of variability regarding the presence and severity of withdrawal symptoms, which is consistent with what we have seen in several studies of adults who use marijuana frequently," said Vandrey. "Overall, our research indicates that the majority of people who abruptly stop daily or near daily marijuana use

experience some withdrawal symptoms. Though there is anecdotal evidence that withdrawal makes it more difficult to quit using marijuana and that people use marijuana to suppress withdrawal effects, we still need to more carefully investigate how withdrawal impacts the quitting process."

Budney's future research aims to address this and other questions related to the clinical importance of marijuana withdrawal and more generally to develop and test more effective methods for helping those who seek to stop using marijuana.

Inhalant use tops among 10- to 12-year-old age group

By Matt Whetstone, Cadillac News

For one in every five children, inhalants mark the first experimentation with drugs, according to the U.S. Drug Enforcement Agency.

The highest occurrence is seen among 10- to 12-year-old children, with rates of use declining with age. Abuse can lead to serious health problems and, in some cases, death.

In an effort to reduce inhalant use, the state of Michigan declared May as inhalant awareness month.

"A large part of a prevention awareness campaign such as this, is making sure that people - especially parents - get the facts," said Yvonne Blackmond, director of the Office of Drug Control Policy in Michigan.

The ongoing "Monitoring the Future" study conducted by the University of Michigan showed a significant increase of inhalant use by eighth-graders in 2004. Investigators at the university believe use is about to rebound following nearly a decade of decline.

The popularity of inhalants among younger age groups is attributable to their availability. Items like glue, aerosols, butane, paint thinner, gasoline and nail polish remover are cheap and can be purchased over the counter.

"This turnaround in their use continues to suggest the need for greater attention to the dangers of inhalant use in our media message and in-school prevention programs," said U of M researcher Lloyd Johnston.

Although he is not as active in inhalant prevention as in the past, Listen America Executive Director George Corliss said parents can prevent abuse by being vigilant.

"Parents are the No. 1 detriment for kids using alcohol, tobacco and other drugs," Corliss said. "But a lot of times, parents aren't aware of things that are out there. There are 20 new things that come down the pipe every week."

Inhalant users may store items in their bedroom, such as camping fuel, that should not be there. A "huffer" may have paint or stains on the body or clothing, sores around the mouth, red or runny eyes or nose, chemical breath, a dazed or dizzy appearance, nausea or anxiety, excitability or irritability.

A "huffer" can die the first, 10th or 100th time of abuse, according to the National Inhalant Prevention Coalition.

"Be vigilant," Blackmond said. "If inhalant containers are discovered in places where they are not normally stored, this should be a trigger for concern. Unfortunately, death from inhalant use can be instantaneous and can occur during a first-time use."

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Get Real About Teenage Drinking

Part Three: Truth and Consequences

by Stephen G. Wallace, M.S.Ed.
January 16, 2005

At the center of the great debate that characterizes America's ambivalence toward youth and alcohol lies a profound lack of awareness of the costs of underage drinking and the physical, social, and emotional toll it can take on those who engage in this illegal, and thus inherently irresponsible, behavior.

In a recent report, the National Research Council and Institute of Medicine of the National Academies note \$53 billion a year in losses from traffic deaths, violent crime, and other destructive behavior related to underage drinking. And that doesn't account for the falling grades and failing relationships that often go hand in hand with teens and booze.

Getting real on underage drinking means getting the facts.

Alcohol use by teens affects still-developing cognitive abilities and impairs memory and learning.

Teens who drink are more likely to commit or be the victim of violence (including sexual assault) and to experience depression and suicidal thoughts.

Alcohol-related automobile crashes kill thousands of teens each year and injure millions more.

It's also a fact that young people use alcohol more frequently, and more heavily, than all other drugs combined. *Teens Today* research from SADD and Liberty Mutual Group reveals that drinking increases significantly between the 6th and 7th grades; that the average age for teens to start drinking is thirteen years old; and that by 12th grade, more than three in four teens are

drinking.

Unfortunately, many young people fall prey to the "Myth of Invincibility," believing that there are no real, or lasting, effects of alcohol use. They're wrong.

In turn, many of their parents subscribe to the "Myth of Inevitability," convinced that drinking is a rite of passage and that there's not much they can do to influence their child's choices (according to *Teens Today*, more than half of parents believe that "drinking is part of growing up" and teens "will drink no matter what").

They're wrong, too.

More than a third of middle and high school students say they have not consumed alcohol.

Parents who talk with their teens about underage drinking, set expectations, and enforce consequences are significantly less likely to have children who drink. (This influence holds true for other teen behaviors as well, such as drug use and early sexual activity.)

A majority of young people say they want parental guidance in making decisions about personal behavior, including alcohol use.

There are some who hold that "teaching" teens to drink at home will keep them safe. And there are others who advocate for lowering the drinking age, citing as rationale examples of "responsible" drinking by teens in European countries with fewer alcohol restrictions.

Here's the truth.

The younger a child is when he starts to drink, the higher the chances he will have alcohol-related problems later in life.

It is estimated that more than 20,000 lives have been saved by minimum drinking age laws since 1975, due to a decrease in automobile crashes.

About half of Europe's countries have intoxication rates among young people that are higher than such rates in the United States.

Agreeing to disagree about this important issue obscures an alarming indifference about youth and alcohol. But it does nothing to keep teens safe and alive. Not until our society speaks with one, clear, unambiguous voice about the perils of underage drinking, as the National Academies suggest, will we successfully shatter the myths of invincibility and inevitability that propel it.

Our highways and hospitals are lined with young people who made poor, even fatal, choices about alcohol. Still many more suffer silently, unable to meet their own life goals or to realize the promise their friends, parents, and other caring adults see in them.

Sadly, that is what's real about underage drinking.

Stephen Wallace, national chairman and chief executive officer of SADD, Inc. (Students Against Destructive Decisions), has broad experience as a school psychologist and adolescent counselor.

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Drugs lure teen brains

Parents must be vigilant; healthy self-esteem, plan for future best deterrents

Thursday, June 02, 2005

By KAY CAMPBELL Times Staff Writer, kayc@htimes.com

Your teenage son can give you a list of reasons not to try drugs or hang out with dangerous people, but he does it anyway.

Your teenage daughter can tell you that it's a bad idea to drive too fast, but she does it anyway.

How do you help these almost-adults make good choices, even when you're not looking?

First, try understanding them, experts say.

Thanks to David Elkin, a professor of child psychology at Tufts University, parents now have a word for a teen's ability to list facts and still not act on them: "pseudostupidity," meaning that a teenager can think of several choices, but cannot decide which alternative is more appropriate.

Teenagers do not think like adults, agree the experts, including Rosalind Marie, a certified school psychologist and educational planner who has a private practice in Madison.

"Teens have undeveloped brains and they are prone to impulsivity," Marie said. "They can walk out of the house saying all the right things - and believing them, too - but once they are in their own teen culture, they are as far away from you as if they were on the other side of the world smoking dope with a swami."

Marie advocates immediate action - moving a teen to another school or sending the kid to a relative's for the summer - to separate a child from destructive friends. Those choices, she says, are much cheaper than drug treatment programs.

Parents who protect their teens from drug use are those who say "no" to unsupervised parties, to TVs or telephones in the teen's room, to unrestricted driving at 16, to part-time jobs during the school year. And those parents seek - and follow - medical and psychiatric advice if unhealthy personality characteristics show up, Marie said.

"Parents have to, at all times, be on the job," said Kitson Francis, a family therapist and chairman of the board of Partnership for a Drug-Free Community. "If parents don't raise them, children

will raise themselves - or someone else will."

But drug prevention doesn't work, Francis said. What works is life affirmation: giving children from infancy a lifestyle that keeps them pointed toward health and productivity, toward defining themselves proudly as different from the crowd.

Parents must raise children who consider what they can bring to a situation, not take from it.

"If I teach my child to have something good to give to someone else, that inoculates him," Francis said. "It's the children who feel they have nothing to give that are more prone to these drugs. They are in pain, and they use drugs to deal with the pain."

"Drug abuse is not a matter of intellect, it's emotions," Francis said.

Drug Nazis

Emotions drove a concentrated effort at Huntsville High School this year to get students drug-proofed. Popular tennis player Hunter Stephenson, 16, died a few days before school started after trying methadone.

His death opened the eyes of a lot of parents who had not been aware of how widespread the use of drugs and alcohol were among their well-parented, well-behaved, honor-student children.

"It's so hard to be diligent, to not stick your head in the sand," said Jannie Chapman.

Chapman, along with Cindy Bendall and other parents of Huntsville High School students, including Hunter's parents, attacked the problem.

Candy Stephenson, Hunter's mother, talked to every class and distributed cards with the number for Hunter's Hot Line, an anonymous drug-activity tip line. Chapman helped organize Safe Kids, Safe Schools, a program that helps parents with questions and resources, including home drug testing kits.

Bendall helped start the local chapter of SADD, Students Against Destructive Decisions, to help students find a peer group interested in good decisions.

The programs have had an impact on students, according to several who stopped by school nurse Paula Peterson's office on one of the last days of school this spring.

"It's made a huge difference," one sophomore said. "Last year, pills were real big and all, and this year - seriously? - I think I could name like only a handful of people. And a lot more are getting drug tested by their parents."

School policy prevents using students' remarks in a news story without their parents' permission.

Chapman said that parents can use their own random drug tests to give their teens one more way to resist peer pressure.

"It's not about not trusting them," Chapman said. "It's to let them know, so if they're somewhere and someone pressures them, they can say, 'No, my mother is a drug Nazi and she drug tests me.' Most of the time, what a child needs is just a little nudging to make the right decision."

Too much to lose

Teenagers who have been members of the youth advisory board for the local Partnership for a Drug-Free Community say the nudging from parents does help. But even more than that push from behind is a draw to the future.

"The reason why my friends and I never use drugs is because we have goals we have set and want to accomplish," Courtney Griffith said. "We know how drugs can destroy not only your life, but everyone who cares about you."

Reggie Cross, who has found success both in the classroom and on the basketball court as a stand-out star at New Hope High School, has too much at stake, he says, to try drugs.

"The fact that I want to be somebody in my life - I want to make it in basketball - keeps me far from it," Reggie said. "Kids need something to keep their minds occupied."

Courtney, who just graduated from Bob Jones, has already known several kids who have messed up or ended their lives with drunk-driving wrecks or veered close to self-destruction with drugs.

One of those friends, she said, made it back.

"He finally realized that what he was doing was wrong," Courtney said. "He was making himself sick for something that made him happy only a few hours when he had so much more going for him in life."

"One bad thing I don't understand is how his parents didn't know," she said. "But I guess no one wants to admit their kid is messed up."

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Meet the Snoopers

Parenting, Privacy, Common Sense, and Communication

by Stephen G. Wallace, M.S.Ed.

January 4, 2005

In what *The Associated Press* (AP) called, "a victory for rebellious teenagers," the Washington State Supreme Court recently ruled as illegal a mother's listening in on her "out of control" daughter's phone conversation with an older boy suspected by police of involvement in an assault and robbery. Predictably, the case has rallied both privacy and parental rights advocates to their respective causes. For the rest of us, it begs the question, "How far should we go to protect our children?"

That is more easily asked than answered.

While federal law applies a broader interpretation of rightful parental intervention, Washington and ten other states require the consent of all parties before a phone conversation can be intercepted or recorded, according to the AP. No less contentious on the privacy scale are such detection devices as Breathalyzers, drug tests, and property searches, at school or at home.

As is often the case when such divides exist, a common-sense middle ground can be found in the voices of those with a dog in the fight. This time it's parents and teens.

Few parents dispute the importance, if not the right, of privacy for teens ... up to a point. And few teens quibble with parental inquisitiveness in the face of reasonable suspicion ... unless they have something to hide. Indeed, parents tend to feel that building and maintaining trust with their teen means accepting, even fostering, a degree of independence and privacy. And most teens seem to agree that parents who believe their child is involved in, or headed toward, illegal or dangerous behavior have a duty to act – even if doing so entails investigative techniques that, under different circumstances, would be deemed intrusive and unacceptable. For Mom or Dad, finding the proper balance between trust and truth can be a vexing task. And teens don't always help. According to a *Teens Today* study from SADD (Students Against Destructive Decisions) and Liberty Mutual Group, 80 percent of teens report that it is important to have their parents' trust, but only 28 percent are honest and forthcoming when it comes to issues such as drinking and other drug use.

Enter the Snoopers. In a teenage world filled with dangerous decisions and destructive behaviors, parents must make difficult choices in parsing privacy issues, balancing adolescent independence with common sense supervision. After all, according to *Teens Today*, 70 percent of high school students say they drink alcohol and 41 percent say they have used marijuana.

To make matters worse, many of these teens mix that substance use with driving. In the same *Teens Today* study, only 30 percent of teens cited driving as a reason not to drink and only 18 percent as a reason not to use drugs. The results? Impaired driving remains one of the leading causes of death among young people.

While there is no debate that teens have easy access to alcohol and drugs, not to mention frequent exposure to forces that glamorize and promote them, there is animated discussion about how best to keep them safe. Surprisingly, teens themselves offer insights into the parenting strategies that are most effective in steering them away from alcohol and drugs: set and enforce curfews; stay up until they return home; require that they call to "check in" from time to time; talk with friends'

parents to ensure supervision; and restrict overnights away from home.

In short, stay involved. Young people who avoid alcohol and drugs are more likely than those who don't to report that they have a close relationship with their parents. They are also more likely to say that their parents exercise a lot of "control" over various aspects of their lives, including where they go, what they do, and whom they are with. Seem obvious? Painfully so. Still, only about one quarter of parents do so. And that's a shame because the truth is that the majority of young people say they want parental guidance in making decisions about personal behavior.

SADD's *Contract for Life* and *Opening Lifesaving Lines* brochure, along with the SADD/Liberty Mutual *Family Communication Tips*, offer free, constructive, and easy to use advice for parents looking to get the ball rolling in talking to their teen about the important issues of alcohol and drug use. So, too, does the Office of National Drug Control Policy (ONDCP), which advises parents to take the following steps.

Make a plan. Organize your thoughts. Decide what you want to say to your teen.

Listen. Ask your teens for their response to the information youve presented.

Discuss. Discuss the shared information. Don't get lulled into "looking the other way" because it's easier.

Set rules. Make it very clear that you will not tolerate drug or alcohol use.

Establish clear consequences and reward good behavior. Let your teens know that you will be holding them accountable for their actions and that there will be consequences for not following the rules.

We are likely a long way from reaching consensus on telephone taps, urine tests, and drug dogs, but the evidence makes clear that parents who stay in the loop may not have reason to snoop. And that's a better solution all the way around.

Stephen Wallace, national chairman and chief executive officer of SADD, Inc., has broad experience as a school psychologist and adolescent counselor. SADD is a partner in the Office of National Drug Control Policy's Steer Clear of Pot campaign (www.theantidrug.com). For more information about SADD, call toll-free 877-SADD-INC. The SADD/Liberty Mutual *Teens Today* research can be found at www.sadd.org or www.libertymutualinsurance.com.

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Short Circuit

Hormones, hobgoblins and adolescent neurochemistry

By Stephen G. Wallace

Parents everywhere are no doubt puzzling over recent high profile displays of horrific adolescent behavior, fearing for their own children and wondering what in the world is going on. Let's take a look.

Northbrook, Illinois: Fueled by alcohol, a gang of 12th grade girls lead a violent, demeaning hazing of their 11th grade classmates, punching and kicking them, covering them with feces and forcing them to eat dirt and pig intestines.

Sarasota, Florida: Influenced by the movie Jackass, three trespassing teens leap from atop a condominium building aiming for the pool. Two make it. One hits the side, fracturing both legs and an arm and cracking his pelvis.

Red Lion, Pennsylvania: Brandishing his stepfather's 44-caliber Magnum, an 8th grade boy stands up in his school's cafeteria and shoots the principal in the chest, killing him. He then uses a 22-caliber weapon to kill himself.

Kingston, Massachusetts: Cheered on by classmates, an 8th grade girl engages in a sex act with a 10th grade boy on the school bus.

Just as figuring out the implausible seems all the more impossible, information is emerging about some serious neurological rewiring taking place during adolescence. In her new book, *The Primal Teen*, Barbara Strauch illuminates startling advances in science that may help to explain teen behavior heretofore chalked up simply to immaturity, hormones or hobgoblins. Recent research at UCLA's Lab of Neuro Imaging suggests that, during adolescence, boys and girls undergo significant neuronal transformation, affecting such functions as self-control, emotional regulation, organization and planning. This research, in tandem with studies performed at the National Institute of Mental Health and at McLean Hospital in Massachusetts, challenges traditional thinking that brain development is complete by age eight or ten. Now, some quixotic adolescent behaviors are being linked to a natural, even predictable, neurochemical process.

Of course, this doesn't mean that teens are scientifically destined to make poor choices. But it may mean that they are even more predisposed to do so than previously thought. Why? Because the massive reorganization of gray matter at puberty seems to impact areas of the brain most closely associated with judgment. And judgment shades choices. Understanding the antecedents of those choices, be they biological, chemical or social, underscores the value of parental involvement in teen decision-making and best positions adults to short circuit destructive teen behavior ... or at least to try their hand at persuasion. A calm, clear voice of reason can go a long way toward slowing speeding synapse-driven impulses if not – at least occasionally – substituting adult judgment for adolescent enterprise.

Perhaps most important in helping young people identify sensible solutions to life's challenges is defining the potential short-term and long-term consequences of behaviors ... consequences their still-evolving brains may not yet fully embrace or even slow down long enough to notice. This

can be especially the case when the behavior includes alcohol and other drugs. After all, the flip side of the effects of neurological development on teen behavior is the effect of teen behavior on neurological development. It's not too hard to imagine the impact of substance use and abuse, not to mention scores of other unhealthy experiences, on a transforming cerebral cortex.

While that impact may be hard to see, there are other more immediate, and more identifiable, ramifications of alcohol and drug use. Both have been repeatedly linked to increased rates of automobile crash deaths, risky sexual behavior, sexual assaults, depression, suicide and declining school performance.

Try as we might, we will never successfully transform teen thoughts and actions into those that mirror our own. Nature has a different plan (something Strauch calls "crazy by design"). The best we can do is to drill deeper into the adolescent brain and psyche seeking to understand what drives their decisions and what influencers can be brought to bear to keep them safe and alive. And there's no time like the present. According to original Teens Today research conducted by SADD (Students Against Destructive Decisions/Students Against Driving Drunk) and Liberty Mutual Group:

A majority of teens (63%) say they drink, including 16% of sixth graders, 41% of eighth graders and 75% of eleventh graders;

More than one-third of teens (35%) say they use drugs, including 34% of ninth graders and 42% of tenth graders;

More than one-half of teens (58%) say they have engaged in sexual activity, including 35% of seventh graders and 78% of twelfth graders.

Still, most young people want to make good decisions. And, believe it or not, they welcome, and respond to, parents who help them translate illogical thought into responsible action. The Teens Today research revealed that adolescents want parents to offer their opinions; say it is important to them to live up to their parents' expectations regarding drinking, drug use, and sex; and are much less likely to engage in destructive behavior when they share a close, open relationship with their parents.

Recent events around the country make clear that our work is cut out for us. As one of the pool-plunging Sarasota teens told the Associated Press, "It's adolescent independence and taking risks, like kids taking drugs or doing pot. Adolescence comes with stupidity and arrogance." At least now we're closer to knowing why.

Stephen Wallace is the national chairman/chief executive officer of SADD, Inc. He has extensive experience working with youth as a school psychologist, camp director, and public speaker in addition to his many years with SADD. SADD sponsors school-based education and prevention programs nationwide and makes available at no charge the *SADD Contract for Life* and the *Opening Lifesaving Lines* brochure, both designed to facilitate effective parent-child communication. Toll-free: 877-SADD-INC. For more information on the *SADD/Liberty Mutual*

Cat and Mouse

Trust, truth and drug testing teens

By Stephen G. Wallace

February 6 , 2004

President Bush’s call for increased federal funding of school drug testing programs has already reignited debate over the efficacy and ethics of intrusive remedies for a country at war with drugs. Given the easy availability of illegal substances, and their widespread use by teens, it’s a debate worth watching.

Random drug testing in schools began with student athletes and a "pay to play" philosophy holding that participation in sports is a privilege extended on the condition of abstinence from substance use. In a practice upheld by the US Supreme Court, this privilege principle quickly migrated to other competitive activities, from cheering to chess. And now, in its latest iteration, drug testing is being applied more broadly to students enrolled in some private and parochial schools.

The current debate, anchored on one side by conservatives and on the other by civil libertarians, threads age-old arguments of privacy with newfangled applications of technology poised to detect and designed to deter. In the middle remain a vast number of "undecideds" and the fundamental question of effectiveness. And here the data conflict.

University of Michigan researchers found virtually identical rates of drug use in the schools that have drug testing and the schools that do not (although a study author concedes that one "could design a drug testing program that could deter drug use").

A Ball State University/Indiana University researcher reported that 73% of Indiana high school principals with random drug testing programs in their schools reported a decrease in drug usage (compared to a period without such a program) among students subject to the policy.

Supporters of random drug testing argue both the ethics (if we expect students to study and test them to find out, can’t we also expect them to remain drug-free and test them to make sure?) and the outcomes (the Office of National Drug Control Policy cites the results of drug testing programs in Oregon and New Jersey as proof positive that they work). They also note the positive role that testing can play by giving young people "an out," blunting negative peer pressure with the threat of being caught. Not enforcement but, rather, reinforcement.

Detractors, on the other hand, claim that such programs are ineffective as deterrents and fly in the face of civics classes on the appropriate balance between authority and individual rights. In *Making Sense of Student Drug Testing, Why Educators are Saying No*, the American Civil

Liberties Union (ACLU) and the Drug Policy Alliance maintain that not only is testing ineffective in deterring young people from using drugs, it also can undermine relationships of trust between adults and children. While that could be true, *Teens Today* research from SADD and Liberty Mutual Group suggests that the undermining may already be well underway: while 95% of parents say they trust their teens in making decisions about drugs, only 28% of teens report being completely honest with parents on the issue. And that says nothing of the often elaborate steps teens will take to conceal, not just lie about, their drug use.

In more than a few families, evasion blends with obfuscation – commencing a high-stakes game of Cat and Mouse that pits parents against teens and cripples the very trust and truth on which those relationships are based.

What seems to be lost in this debate is the perspective of those with the most at stake: the students themselves. Encouragingly, most teens (70%) say they are concerned about drug use. Yet, understandably, many see drug testing as a violation, not so much of civil liberties as much as of trust – at least absent some evidence of wrongdoing. They also seem to doubt its saliency as a deterrent, even when applied by Mom or Dad. In one *Teens Today* study, only 8% of students said that testing by parents would be effective in keeping them away from drugs, while 93% indicated that other parental measures would be effective.

The good news in all of this is that young people recognize the dangers of drug use and seem to share adults' urgency in finding answers that keep teens safe. The better news is a solution that's been right in front of us all along: parents who talk regularly with their children about drugs.

According to *Teens Today*, adolescents in grades 6-12 say that parents are their biggest influence not to use drugs. And the methods they report as most effective are, perhaps, the simplest: discuss the dangers and explain the expectations. Indeed, teens who have open and honest communication with their parents are more likely to avoid drugs, to try to live up to their parents' expectations regarding drug use, and to say that their parents' methods of keeping them away from drugs are effective. These teens also report that they are less likely to use drugs when their parents make clear that such behavior won't be tolerated.

Whatever the outcome of the spirited public discourse over random drug testing in schools, a surer bet may be some not-so-random drug prevention at home. Open communication and clear expectations are already proven deterrents to drug use among teens – just ask them. So too is good old-fashioned vigilance. After all, while the cat's away ...

Stephen Wallace, national chairman and chief executive officer of SADD, Inc., has broad experience as a school psychologist and adolescent counselor. SADD sponsors school-based education and prevention programs nationwide and makes available at no charge the *SADD Contract for Life* and the *Opening Lifesaving Lines* brochure, both designed to facilitate effective parent-child communication. Toll-free: 877-SADD-INC For more information on the SADD/Liberty Mutual Teens Today research, visit www.saddonline.com or www.libertymutualinsurance.com.

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Marijuana most common drug in America

By Ashley Dziuk

Pot, hash, Mary Jane, weed and countless other terms are all used to describe the drug marijuana.

According to the National Institute on Drug Abuse, marijuana is the most commonly used illicit drug in the United States.

There are cultural perceptions about the drug that affect people's use, said David Sprick, interim chief of University Police.

"People may think it's harmless, that everybody does it or that it's no big deal," he said.

But marijuana use can cause problems for some students on a personal level, Sprick said.

"For some people, at the very least, pot is a distraction," he said. "The worst-case scenario is it becomes an addiction problem."

According to the Bureau of Justice Statistics, in 2003, 33.7 percent of college students had used marijuana in the past year, and 19.3 percent in the past month.

Although those numbers indicate that young adults use marijuana, many, like junior Dawn Snyder, choose not to.

"I've been around enough second-hand smoke in my life," she said. "I don't think I need to put anymore (smoke) into my body."

There are both short- and long-term physical effects of using marijuana, Sprick said.

These include a higher chance of lung cancer and other smoking-related illnesses.

"There is damage to white blood cells in the lungs," he said, "which reduces the ability to fight lung infections and illness."

According to NIDA, marijuana has the potential to promote cancer of the lungs and other parts of the respiratory tract, due to irritants and carcinogens in the smoke.

For men, it causes decreased testosterone levels and lower sperm counts, Sprick said.

Marijuana also can affect a person psychologically, he said.

"It can cause loss of short term memory and loss of motivation," Sprick said.

The short-term effects also include "distorted perception, difficulty thinking and problem solving, loss of coordination and increased heart rate," according to NIDA.

Long-term effects indicate changes in the brain, similar to those seen after prolonged use of other major drugs, according to NIDA.

Marijuana use cannot only affect the health of those smoking it, but those around them as well.

In 2002, marijuana was the third most commonly abused drug mentioned in drug-related hospital emergency room visits, according to NIDA.

Marijuana use doesn't seem to slow down, even with statistics showing the harmful consequences.

According to NIDA, "taking changes in population into account, marijuana mentions (in accidents) increased 139 percent from 1995 to 2002."

Snyder said she has had a couple of friends who have smoked marijuana.

"I think for some people, it's kind of an escape," she said. "College can get a little crazy and stressful and it's an escape."

Yet, the health risks just aren't worth it, she said.

"I just can't justify putting that into my body," Snyder said.

"I like my brain cells and I want to keep them."

Finder: The surveys say steroids affect kids more and more

Sunday, March 20, 2005

By Chuck Finder, Pittsburgh Post-Gazette

Amid the 1 1/2-hour theatrical release Thursday of Mr. 'Roid Goes To Washington -- made you laugh at baseball's arrogance and Congress' contempt, made you cry over Mark McGwire's shrinking status and families losing sons to drug-infused suicide -- the harsh glare seemed to miss the most devastated underclass, the most important focus group.

Boys.

And, yes, girls.

This isn't merely a Major League Baseball problem when two schoolchildren in every four *eighth-grade* classrooms have tried steroids.

This isn't merely the fault of Bud Selig, Don Fehr or so-called author Jose Canseco when slightly more than one student in every *high-school* classroom has used the junk -- a statistic, 1 in 16, that increased almost three-fold over the past decade.

Members of the House Committee on Government Reform, inviting baseball stars and national media and rubber-necking America into Room 2154 of the Rayburn Building on Capitol Hill, kept stressing that they wanted to attack the epidemic from the top down, but everybody's overlooking the growing little people at the bottom. Our sons. Our daughters.

"And I'm the one who came up with the half-million figure in 1988," Chuck Yesalis was saying the day after from his home in State College. He is a Penn State professor of health policy and administration plus exercise and sports science, a former strength coach, an author of three books on the subject. He is, after 27 years of study, an expert in the performance-enhancing field.

So trust him when he tells you that this screaming statistic about teen-aged steroid users has more than doubled since his initial research a kid's lifetime ago: "It's sure a hell of a lot more than a million now."

Yesalis is such an expert that he was called to the Hill the Thursday before St. Patrick's Day in the warmup to the Selig-Canseco circus. That House Energy and Commerce Committee hearing by contrast was so unimportant, so nationally unpublicized, that Selig, NFL commissioner Paul Tagliabue, NBA commissioner David Stern and NCAA president Myles Brand deigned instead to send underlings of underlings. It marked the fourth time Yesalis had testified on Capitol Hill, including to a Senate panel last March. If you go back, back, back, these same halls of power have been entertaining steroid-ingesting witnesses since 1973.

"The biggest problem I've had over the last quarter-century," began Yesalis, has been convincing pols, educators and coaches that both the use of performance-enhancing drugs and drug tests were issues worthy of their time and money.

"If I had a hundred bucks for every time a coach or a school administrator told me, 'Yeah, it's a problem, but not in my school,' or 'not in my college,' or 'not on my pro team,' I'd have a Ferrari in my driveway."

Numbers prove them wrong. According to the 2003 Youth Risk and Behavior Surveillance System, 6.8 percent of boys and 5.3 percent of girls in U.S. high schools used anabolic steroids at least once in their lives -- 66-percent and 165-percent increases over a study a half-dozen years earlier. Kids are 'roiding up younger, down to eighth grade (2.5 percent). Kids who try such performance-enhancing drugs are far more likely to abuse alcohol, marijuana and the like.

Oh, and at that age a user can grow addicted to steroids.

What a toxic statistical cocktail. Yesalis particularly gets distressed over the female usage.

"What you're talking about is a girl putting into her body the primary male hormone, testosterone, *and she could grow a beard*," he said. "None of the trends make you happy. This is big-time

stuff."

Forget about the positive-testing 1.7 percent of millionaire baseball players and the theater of the hearings Thursday. Fact is, the most compelling testimony of the day came from the mouths of the Garibaldis about their late son Rob, a McGwire fan, and Don Hooton about his late son, Taylor -- and from the faces behind them of the family, the Marreros, who didn't testify because their late son, Efrain, was a steroid-using football player who shot himself and not a baseball tragedy.

Hooton, who started a non-profit organization in Taylor's name, and Boston's Curt Schilling at least offered the best counsel: Start at the scholastic level with educational programs, coaching certification and drug-testing.

Such testing is a flawed process, scientifically speaking. Yet the athletes who cannot afford the finest in drug-masking agents and expert advice, the athletes who don't possess the knowledge to cheat the urinalysis -- our children -- need it more than pros.

"Drug-testing is far more beneficial for kids who can't hire somebody like me," Yesalis said.

"And I've had four offers. I turned them all down, to the chagrin of my wife. Even though some would figure out how to beat the system, the deterrent value would be even greater for kids."

Over the years, I have spoken to my boys about the dangers of alcohol and drugs. While watching such theater Thursday, it dawned on me: Never once did the discussion entail steroids. Never (to quote Rafael Palmeiro). Luckily, my sixth-grader informed me the day after, they had that talk at his school recently.

It's a comfort every parent deserves, from McGwire to Hooton to every one of us: To know that somebody has your back in this crisis with our sons and daughters.

(Chuck Finder can be reached at cfinder@post-gazette.com or 412-263-1724.)

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Other Dangerous Drugs

The Other Dangerous Drugs (ODD) category includes club drugs, hallucinogens, and illegally diverted pharmaceuticals. ODD are available nationwide, but--with the notable exception of club drugs--they generally have not been considered as great a threat as other illegal drugs. However, information provided to NDIC by law enforcement agencies nationwide suggests that ODD pose a much greater threat than is currently perceived. Moreover, given the popularity of "raves," the dramatic increases in the availability and use of club drugs may pose a greater immediate threat to adolescents and young adults than any other illegal drug.

More than half of the 412 agencies responding to the National Drug Threat Survey identify increases--sometimes dramatic--in the availability and use of club drugs, particularly MDMA (3,4-methylenedioxymethamphetamine) and GHB (gamma hydroxybutyrate). Over 10 percent of

respondents note the appearance of club drugs in their jurisdictions within the past year, and many agencies note increased use among junior high and elementary schoolchildren. Many agencies express great concern over the perception that club drugs are "safe" and note increases in overdoses and deaths that directly coincide with the rising availability of club drugs. In 1999, the National Institute on Drug Abuse (NIDA) reported that "a number of our Nation's best monitoring mechanisms are detecting alarming increases in the popularity of some very dangerous substances known collectively as club drugs." Those same monitoring mechanisms show similar increases in 2000.

Club Drugs

The club drug category comprises both stimulants such as MDMA and PMA (paramethoxyamphetamine, an MDMA lookalike that is much more potent) and depressants such as GHB, ketamine, and Rohypnol. A recent resurgence in the availability of some hallucinogens--LSD (lysergic acid diethylamide), PCP (phencyclidine), psilocybin, and peyote or mescaline--at raves and dance clubs may necessitate their inclusion in the club drug category as well.

International criminal organizations are responsible for much of the production, transportation, and wholesale distribution of club drugs, especially MDMA. But information from state and local law enforcement agencies clearly indicates that young adult Caucasians are primarily responsible for introducing, distributing, and using club drugs nationwide.

The primary outlets for club drugs are raves and dance clubs in larger metropolitan areas, but similar activity is occurring at clubs and teen parties in smaller cities and towns across the nation, particularly those with colleges and universities. In addition to serving as markets for MDMA and GHB, raves are providing an outlet for the introduction of new drugs and for the reintroduction of hallucinogens to a new group of users--today's youth. The wide range of drugs available at raves and parties also provides opportunities for the dangerous use of drugs in combination--for example, MDMA and heroin or MDMA and peyote or mescaline, which some agencies refer to as "new age speedballs."

Raves are held in permanent dance clubs or in temporary clubs set up in abandoned warehouses, open fields, or empty buildings for a single event. Raves are often promoted through flyers and advertisements distributed at other clubs, in record shops and clothing stores, on college campuses, and over the Internet. Many club owners sell specialty items to dancers in a way that arguably promotes the use of drugs, although there is no direct evidence that they are taking part in MDMA sales or earning any direct profit from drug sales within their clubs. They sell bottled water and sports drinks to manage hyperthermia and dehydration as well as pacifiers to prevent involuntary teeth clenching--all frequently caused by MDMA use. They also sell menthol inhalers, chemical lights, and neon glow sticks, necklaces, and bracelets to enhance the hallucinogenic effects of MDMA. Club owners only rarely sell alcohol. They usually advertise raves as "alcohol free"--most attendees are not old enough to purchase alcohol legally--which may lead to parents' perception that raves are safe for their children to attend. Club owners may be protecting themselves by not offering alcohol because MDMA reacts negatively with alcohol and there is less scrutiny of clubs without liquor licenses.

MDMA or "Ecstasy"

MDMA is a synthetic drug that acts simultaneously as a stimulant and mild hallucinogen. MDMA is produced as a white powder that has a slightly sweet scent; it is usually ingested in tablet, powder, or capsule form. Other names for MDMA include "ecstasy," "Adam," "X," "E," "XTC," and "empathy." Users risk exhaustion from a combination of the drug's effects and the physical exertion of all-night dancing. NIDA findings indicate that long-term use of MDMA causes significant, irreparable damage to the brain.

No drug in the ODD category represents a more immediate threat than MDMA. Detailed information from law enforcement agencies documenting dramatic, nationwide increases in the availability and use of MDMA, as well as the involvement of international organized crime groups in production, transportation, and wholesale distribution, places MDMA at the top of the ODD category.

Nearly 150 of 412 agencies responding to the National Drug Threat Survey identify MDMA as readily available in their areas. Of those, over 100 report increases in availability, frequently referring to the increases as "dramatic" or "alarming." Over 10 percent of responding agencies note the appearance of MDMA within their jurisdictions in the past year, and many associate the drug with local colleges and universities.

Federal agencies report dramatic increases in MDMA trafficking. Between 1993 and 1998, the number of MDMA tablets submitted to DEA laboratories for testing increased from just under 200 to almost 145,000. Seizures have gone from approximately 400,000 in 1997 to 750,000 in 1998 to more than 3 million in 1999. U.S. Customs information indicates an increase in the size of individual shipments; for example, a December 1999 seizure in San Bernardino, California, netted approximately 700 pounds of MDMA, and 1,100 pounds of MDMA were seized at Los Angeles International Airport in July 2000. In the past, MDMA was smuggled in shipments averaging just 2-4 kilograms (4-9 lb).

There are no estimates of the demand for MDMA or the total number of users, but national abuse indicators suggest that demand is growing at an alarming rate. NHSDA data show that the number of respondents 12 and older who reported lifetime MDMA use rose from an estimated 2.7 million in 1994 to almost 3.4 million in 1998, the last year for which MDMA data were available.

According to the 1999 MTF Study, reported lifetime, past year, and current use of MDMA increased significantly among twelfth graders between 1998 and 1999. Past year MDMA use increased among tenth graders between 1998 and 1999, while lifetime and current use remained constant. Use in all three categories remained constant among eighth graders. MTF data also show a substantial increase in lifetime MDMA use (from 5.1 to 7.2 percent) among young adults aged 19 to 28 between 1997 and 1998, but from 1998 to 1999 the lifetime rate of MDMA use in this age group remained stable.

Although some MDMA production occurs in the United States, 1990 regulations making it

illegal to purchase or possess safrole, isosafrole, or piperonal--the primary MDMA precursors--without a permit seem to have thwarted large-scale domestic production. Western Europe is generally considered the primary source of the world's supply of MDMA. Well-organized MDMA production groups have established operations in the rural regions of the Benelux countries--Belgium, the Netherlands, and Luxembourg--driven primarily by the availability of chemicals and international multimodal commercial transportation. Clandestine laboratories in the Benelux countries now produce at least 80 percent of the MDMA consumed worldwide.

According to DEA's Special Testing and Research Laboratory, the chemicals and equipment necessary to produce a kilogram of MDMA can be purchased for as little as \$500. When first produced, MDMA is a nearly 100 percent pure powder with a licorice-like scent. The powder normally is pressed into pills and stamped with distinct, identifying designs. The DEA estimates that over 90 percent of the MDMA smuggled into the United States is in capsule or pill form; the remainder is powder. Although pill presses vary widely in speed, the best presses can process as many as 500,000 tablets per hour. The pills, which cost between 20 and 25 cents to produce, are normally sold to wholesale organizations for \$1 to \$2 apiece.

Israeli and Russian drug trafficking organizations, which often cooperate with one another, have dominated MDMA smuggling to the United States since the mid-1990s, establishing distribution hubs in Los Angeles, Miami, New York, Philadelphia, and Washington, D.C. Both employ similar techniques, using couriers, express mail services, and sea containers to smuggle large quantities of MDMA into the United States. Couriers frequently smuggle at least 10,000 pills in each shipment. The DEA believes, however, that express mail services may now be the most popular smuggling method. Information provided to NDIC by state and local law enforcement agencies indicates that express mail services also are the preferred method to move MDMA within the United States. The number of seizures from sea containers is low compared with those involving other smuggling methods, but the DEA expects maritime smuggling to increase as wholesale distribution organizations become more sophisticated and seek to move larger shipments to meet the growing U.S. demand for MDMA.

Analysts at DEA Headquarters believe that the use of the Caribbean as a transshipment point by MDMA trafficking organizations is a distinct possibility. MDMA destined for the United States is predominantly transported directly via airfreight and express mail or carried by couriers traveling on commercial airlines. But the Caribbean's numerous and established drug transportation groups, abundance of couriers, historic cultural and political connections to Europe, and frequent commercial flights from Europe provide trafficking organizations with the means to route synthetic drugs through the Caribbean.

Although Israeli and Russian groups dominate MDMA smuggling, the involvement of domestic groups appears to be increasing. Some groups based in Chicago, Phoenix, Florida, and Texas have secured their own sources of supply in Europe. Domestic groups generally are less sophisticated and less disciplined than their Israeli and Russian counterparts and more likely to take risks when smuggling. They often attempt to smuggle more pills in a single trip than can be transported undetected.

Once inside the United States, MDMA is sold to midlevel wholesale distribution groups who in turn sell to retail distribution groups or individual distributors. Most MDMA is pressed into pills before entering the distribution system, limiting both the opportunities to cut the MDMA and the number of distribution levels characteristic of many other drugs.

Midlevel wholesale distribution groups link retail distributors with wholesale suppliers. Midlevel groups normally purchase at least 1,000 pills at a time from wholesalers. Some groups purchase 30 to 100 pounds (500,000 pills) at a time, and there is a trend toward larger deliveries to midlevel distribution groups.

Retail distributors, usually young adult Caucasian males, normally purchase 1,000 to 2,000 pills at a time from midlevel distributors. Most retail distributors are independent dealers seeking to take advantage of the growing market and high profit margins. Retail distributors maintain consistent patterns, normally selling at the same clubs on specific nights. Some retail distributors have direct sources of supply within Israeli and Russian criminal organizations and may sell MDMA in Russian-owned clubs. Other retail distributors have stated that they can sell up to 1,000 pills a night at raves, since many users buy several pills in the course of an evening. Each pill sold can net retail distributors \$10 to \$30. Retail prices range from \$15 to \$40.

MDMA users, particularly dancers at raves, employ a variety of methods to disguise or conceal MDMA tablets. Among the more popular methods are stringing the tablets on candy necklaces, wrapping them in cellophane candy packages, and stacking them in straws.

GHB

GHB is a central nervous system depressant that was initially used by bodybuilders to stimulate muscle growth. In recent years, it has become popular among young adults who attend raves. Agencies in Boston, Detroit, Los Angeles, Miami, Phoenix, and Seattle have reported the use of GHB as a "date rape drug." It is odorless, tasteless, and virtually undetectable if slipped into a drink. Medical and law enforcement experts say victims can lose consciousness within 20 minutes of ingesting GHB and often have no memory of events following ingestion. It is difficult to trace, usually leaving the body within 24 hours. GHB is available as a liquid or powder and can be manufactured in home laboratories with industrial cleaning solvents and other commonly available ingredients.

Calls to poison centers and emergency department episodes involving GHB have increased in many areas throughout the nation. Over 70 percent of emergency department episodes for GHB in 1998 involved Caucasians, almost 70 percent involved males, and 65 percent involved persons aged 18 to 25.

Information from federal, state, and local law enforcement agencies documents dramatic increases in the availability and use of GHB nationwide. Almost 130 of 412 agencies responding to the National Drug Threat Survey identify GHB as readily available and 49 note the appearance of GHB within their areas in the past year. Most agencies note dramatic increases in availability, attributing the increases to a concurrent rise in rave activity. Despite reports of the availability of

GHB and its use as a date rape drug, national studies and law enforcement data provide few details on the production, trafficking, and abuse of GHB.

Combining GBL (gamma butyrolactone) with either sodium hydroxide or potassium hydroxide produces GHB. Unlike with other drugs, independent laboratory operators produce GHB almost exclusively in the areas in which it is sold. Law enforcement agencies draw a direct correlation between GHB production and distribution locations and colleges and universities. Many attribute increases in local production to the availability of recipes on the Internet. As with MDMA, the primary distributors of GHB are young adult Caucasian males, particularly college students.

On February 18, 2000, President Clinton signed the "Hillory J. Farias and Samantha Reid Date Rape Drug Prohibition Act of 1999" (Public Law 106-172), legislating GHB a Schedule I controlled substance and GBL a List I controlled chemical. This law became effective on March 12, 2000, and should significantly limit the availability of GBL.

Although available in both liquid and powdered forms, GHB is most frequently encountered in liquid form. GHB users conceal the drug in empty bottles of breath freshener, eye drops, water, and contact solution. They sometimes place the drug on candy, especially lollipops.

GBL and BD (1,4-butanediol) are chemicals used in industrial cleaners and are closely related to GHB. Both chemicals are precursors to GHB and both, when ingested alone, are metabolized into GHB. GBL and BD have been sold as dietary supplements and marketed under a variety of exaggerated health claims, from the treatment of insomnia to the reversal of baldness.

Source: NDIC National Drug Threat Survey, January 10, 2000.

Ketamine

Ketamine, or ketamine hydrochloride, also known as "Special K," "K," "Vitamin K," "ket," or "kit-kat," is a commercially produced prescription drug available only to medical practitioners. It is primarily a veterinary preoperative anesthetic, but it is neither manufactured nor approved for medical use in the United States. Ketamine is found most frequently in liquid form, but allowing it to evaporate can produce a white powder similar in appearance to cocaine. Liquid ketamine can be injected, applied to cigarettes and smoked, or ingested. Powdered ketamine can be snorted, smoked, or ingested. Ketamine's effects, in either form, can last up to 2 hours and include hallucinations similar to those caused by PCP. Law enforcement agencies report that like GHB, ketamine has been used as a date rape drug. Its popularity as a club drug has increased as raves and related activity have spread from large metropolitan areas to smaller cities and towns.

Law enforcement agencies nationwide document increases in the availability and use of ketamine that directly coincide with increases in local rave and dance club activity. Almost 10 percent of the 412 agencies responding to the National Drug Threat Survey identify ketamine as readily available. Ten agencies note the appearance of ketamine in the past year. Several agencies report increases in the number of break-ins at veterinary clinics to steal ketamine.

National studies and law enforcement data provide few details on the trafficking and abuse of ketamine, but as with GHB, state and local law enforcement information indicates a correlation between the availability and use of ketamine and the presence of college and university students.

Rohypnol

Rohypnol, also known as "roofies," "rophies," "ruffies," "R2," "roofenol," "Roche," "roachies," "La Rocha," "rope," and "rib," is a powerful, commercially manufactured depressant containing flunitrazepam hydrochloride. It belongs to a family of drugs known collectively as benzodiazepines. Rohypnol is not licensed for sale nor approved for medical use in the United States. It is manufactured primarily in Europe and Latin America and is readily available and inexpensive in Mexico, the primary source area. Significant increases in Rohypnol use for San Diego and Imperial Counties probably are due to the counties' proximity to Mexico.

Rohypnol is about 10 times stronger than Valium and reportedly is one of the more commonly used date rape drugs. Like GHB and ketamine, it is undetectable in the drink of an unsuspecting victim, although the principal manufacturer of Rohypnol now adds a blue dye to aid detection. Rohypnol produces sedation, amnesia, and muscle relaxation within 30 minutes of ingestion and can cause blackouts that last from 8 to 24 hours. It is popular at raves and frequently is used with alcohol, which intensifies its effects.

Only 9 agencies of 412 responding to the National Drug Threat Survey identify Rohypnol as readily available in their areas. Many others note a decline in the availability and use of Rohypnol. Recent surges in the production, availability, and use of GHB seem to have prompted a decline in the availability and use of Rohypnol. Although past year Rohypnol use declined slightly among eighth graders from 1998 to 1999, lifetime and current use remained stable. The rate of use in all categories remained stable among tenth and twelfth graders.

Hallucinogens

Hallucinogens include a broad range of drugs that induce hallucinations. Among them are LSD, PCP, and psilocybin--a substance found in varieties of mushrooms that are frequently referred to as "magic mushrooms" or "psychedelic mushrooms." The popularity of hallucinogens seems to have grown, and many agencies attribute the resurgence to increased rave and dance club activity.

According to data from the 1999 NHSDA, approximately 25 million people aged 12 or older used hallucinogens sometime in their lifetime. Some 3 million reported past year hallucinogen use, and 1 million reported current use. Admissions for the abuse of hallucinogens remained constant from 1994 to 1997, accounting for only 0.2 percent of all TEDS admissions in each year, and dropped to 0.1 percent in 1998. Those admitted for the abuse of hallucinogens were primarily white, male, and of high school and college age. Of admissions for hallucinogens, 51 percent were between the ages of 15 and 19, and 23 percent were between 20 and 24; 86 percent of admissions for hallucinogens used other drugs as well.

The PRIDE Survey shows an overall decline in hallucinogen use among junior and senior high school students, from 6.7 percent in the 1995-1996 school year to 4.9 percent in the 1999-2000 school year. Between the 1998-1999 and 1999-2000 school years, past year hallucinogen use declined among all three groups surveyed by PRIDE (junior high school, senior high school, and twelfth graders alone).

Independent producers and suppliers are the primary source of hallucinogens. Like club drugs, hallucinogens are distributed and used primarily by young adult Caucasians, which probably best explains the appearance of these drugs at raves.

LSD

LSD is a powerful synthetic hallucinogen produced primarily in California, though some reports suggest limited production in other areas. The potency of the LSD available today (20-80 micrograms) is considerably lower than the levels of the 1960s and 1970s (100-300 micrograms). Production is time-consuming and complex, requiring some degree of expertise in chemistry. The primary precursor chemicals are either ergotamine tartrate or lysergic acid amide, both of which are controlled by federal regulations. The control of precursor chemicals undoubtedly limits widespread LSD production in the United States.

Reports of increased availability and use of LSD are supported by national demand indicators. NHSDA data for 1999 indicate that approximately 19 million individuals aged 12 or older reported lifetime LSD use, approximately 2 million reported past year use, and approximately 500,000 reported current use.

Source: NDIC National Drug Threat Survey, January 10, 2000.

According to MTF data, LSD use rose substantially among eighth, tenth, and twelfth graders between 1991 and 1997. Use has remained relatively stable since 1997 except for a decline in past month use by eighth graders between 1997 and 1998. Although the rate of lifetime use for all three grades in 1999 is lower than the high reported in 1996, it remains well above 1992 levels, especially among tenth and twelfth graders.

Despite reports of increased LSD use, DAWN emergency department mentions of LSD remained relatively stable between 1994 and 1998, averaging just over 5,100 per year.

Information from federal, state, and local law enforcement agencies also documents significant increases in the availability and use of LSD nationwide. Over 200 of 412 agencies responding to the National Drug Threat Survey identify LSD as readily available. Many agencies associate increases in LSD availability with college students and increases in rave activity. LSD is available in more forms than ever before, most commonly in liquid, crystal, or gel form but also in blotter paper, microdots, gel tabs, sugar cubes, and liquid vials. As with club drugs, the primary distributors of LSD are young adult Caucasian males.

Most LSD users are young adults, usually college students, but a number of agencies report

increases in LSD use by high school students. Law enforcement agencies also report the use of a wider variety of methods to administer and conceal the drug than at any time in the past, including the application of liquid LSD to candy and chewing gum and concealment in bottles of breath freshener.

Psilocybin

Psilocybin is the active ingredient in a number of mushrooms, but potency varies widely by species. Independent growers cultivate mushrooms indoors and frequently harvest those that grow wild. Doses normally range from 20 to 60 milligrams, and the effects generally last from 5 to 6 hours.

Psilocybin mushrooms have undergone a resurgence in popularity that, like club drugs and other hallucinogens, can be attributed to young adults and the rave culture. Over 100 agencies that responded to the National Drug Threat Survey identify psilocybin mushrooms as readily available, and many note significant increases in availability and use in the past year. Many also note increased use among high school students.

Information from the NHSDA shows a significant increase in the estimated number of lifetime psilocybin users between 1997 (10,200) and 1998 (12,321). The overall increase includes statistically significant increases in reported lifetime psilocybin use in the 18 to 25 and 35 and over age groups.

The average price for psilocybin is \$150 an ounce, which apparently has lured newcomers to mushroom cultivation and distribution. The most frequently identified sources of mushrooms are Oregon, California, and Washington State, although agencies in Georgia, Mississippi, and Tennessee report collection of wild mushrooms or indoor cultivation. Almost every agency that identifies a source of mushrooms outside the state identifies the mail or parcel delivery services as the primary means of transportation.

Source: NDIC National Drug Threat Survey, January 10, 2000.

PCP

PCP is a hallucinogen directly associated with street gangs, particularly in the Los Angeles area. PCP is relatively easy to manufacture and requires little knowledge of chemistry. Precursor chemicals are readily available and inexpensive. Street gangs primarily are associated with PCP production, distribution, and use, but there are reports of PCP being sold at raves and dance clubs. Over 10 percent of agencies responding to the National Drug Threat Survey identify PCP as readily available, but only the Austin (TX) Police Department notes substantial increases in availability.

Between 1997 and 1998, reported lifetime use of PCP among all respondents to the NHSDA increased from 3.0 percent to 3.5 percent. Lifetime use declined among respondents aged 12 to

17, but increased for all other age groups. According to TEDS, PCP was reported as a primary substance of abuse by only 0.1 percent of admissions for treatment in 1998. Almost two-thirds of admissions for PCP were male, 36 percent were black, 29 percent were white, and 31 percent reported daily use of PCP.

Pharmaceuticals

The abuse of pharmaceuticals has not received as much publicity as the abuse of club drugs and other illegal drugs, but it is a significant and growing problem in many areas of the United States. Almost 200 of the 412 agencies that responded to the National Drug Threat Survey identify a problem with pharmaceutical abuse in their jurisdictions, and over half of those note dramatic increases in pharmaceutical diversion and abuse. Many agencies consider the problem very underrated and attribute it to the ease with which abusers can obtain prescription drugs over the Internet, by phone, and at drive-through pharmacies.

Among the pharmaceuticals most frequently identified by law enforcement agencies as abused in their areas, diazepam (Valium) and hydrocodone top the list. Others frequently mentioned as abused include Xanax, Vicodin, OxyContin, Lorcet, Dilaudid, Percocet, Soma, alprazolam, Darvocet, and morphine.

Prescription fraud, the sale of prescriptions by unscrupulous medical professionals, and outright theft are the most frequent means of obtaining or diverting pharmaceuticals for illegal use. A number of agencies identify increases in the incidents of schoolchildren selling prescription drugs, particularly Ritalin, to classmates. Several agencies note increases in the abuse of pharmaceuticals by heroin addicts and users of MDMA and other illegal drugs. The pharmaceuticals are taken to ease the effects of those other drugs.

Key Developments

The ODD situation continues to worsen, spurred by the expansion of the rave culture throughout the nation. Law enforcement agencies are clearly more concerned with club drugs, particularly MDMA and GHB, than other drugs in the ODD category, and their concern seems to be justified.

The Maine Drug Enforcement Agency, whose agents frequently speak to schoolchildren and their parents on drug abuse issues, reports that increasingly, students and parents ask more questions about MDMA, GHB, ketamine, and Rohypnol than any other subject.

The Los Angeles Police Department reports that the sale of MDMA, GHB, and ketamine, formerly restricted almost exclusively to raves, has moved to open-air street sales. Many agencies note significant increases in MDMA investigations and seizures.

The Phoenix Police Department reports tremendous increases in rave activity in the past year and notes recent investigations of several local MDMA laboratories. The department also reports that MDMA trafficking organizations are becoming more sophisticated and more organized.

The Fairfax County (VA) Police Department reports that MDMA seizures increased from approximately 200 dosage units in 1998 to over 30,000 in 1999. The MDMA was shipped from New York, Philadelphia, and Baltimore. The department reports that at least two MDMA tablets reportedly contained heroin, which was later verified through specialized field tests.

The DEA Field Divisions in Chicago, Miami, New York, and Philadelphia also report the availability of tablets allegedly containing both heroin and MDMA, but these reports have yet to be substantiated by laboratory testing. The combination tablets, known by the street names of "space," "roll," and "bean," are reportedly identifiable by stamps--such as a three-pointed star or a Batman logo--used to signify the potency and content of MDMA, heroin, and sometimes cocaine or methamphetamine.

Significant increases in the availability and use of MDMA and increases in investigations and seizures of MDMA were reported by law enforcement in Alabama, Connecticut, Delaware, Florida, Maryland, Minnesota, Missouri, North Dakota, Ohio, Rhode Island, Texas, and Virginia.

Information from the DEA Chicago Field Division documents the appearance of PMA, a potent and potentially lethal amphetamine analog, in the United States. The DEA documents other PMA seizures in Prince George County, Virginia, and Broward County, Florida. The highly publicized deaths of two teens in Chicago, who believed they were using MDMA, were attributed to PMA.

Traffickers in countries outside Western Europe may be developing the capability to produce MDMA. Analysts and Special Agents at DEA's Special Operations Division warn that the recent seizure of two laboratories in China and one in Colombia, as well as large-scale methamphetamine production in Mexico, mark traffickers in these countries as potential sources of MDMA.

The Wyoming Division of Criminal Investigation reports the recent seizure of a major GHB laboratory in Cheyenne. The laboratory was capable of producing multiple pounds of GHB, based on the equipment and the amounts of precursors found.

Information generated by a multiagency investigation in Phoenix and subsequent analysis of seized documents by NDIC analysts has revealed the widespread use of the Internet to market GBL to GHB producers nationwide. Postseizure analysis shows that thousands of gallons of GBL were shipped from a single Internet distributor to over 1,000 potential GHB producers in 47 states. Many of the primary destinations for large shipments of the GBL were cities and towns with colleges and universities. Follow-up investigation revealed that some purchasers of GBL are convicted pedophiles.

Information provided by the Gainesville (FL) Police Department, Genesee County (MI) Sheriff's Department, Lee County (MS) Sheriff's Department, Maine Drug Enforcement Agency, Marietta/Cobb/Smyrna (GA) Organized Crime Unit, and Wyandot County (OH) Sheriff's Office document the recent appearance of LSD gel tabs. The Gainesville Police Department further reports recent seizures of thousands of gel tabs. Gel tabs may be gaining popularity because they are easy to administer and look less like an illegal drug. The availability of gel tabs indicates the

use of new and possibly more sophisticated production methods.

Projections

The rave culture, which has spurred the introduction of a variety of drugs to a new group of users, will continue to grow and negatively affect teens and young adults throughout the nation. The widespread availability and use of drugs at raves will place greater demands on already overburdened law enforcement agencies and treatment facilities well into the future.

The demand for MDMA has not peaked as evidenced by major increases in the number of seizures and in the use of MDMA by high school students and young adults. As demand increases, MDMA use likely will expand beyond raves and dance clubs to other social settings. Large-scale domestic MDMA production likely will remain impracticable because of the chemistry background required and regulations restricting the availability of precursors in the United States. Nevertheless, law enforcement agencies are likely to encounter increasing numbers of small-scale MDMA laboratories operated locally by independent producers attempting to skirt wholesale suppliers and midlevel distributors to maximize their profits.

End Notes

According to the National Institute on Drug Abuse, the term "club drugs" refers to drugs used by young adults at all-night parties, dance clubs, or raves. Club drugs include MDMA, GHB, Rohypnol, ketamine, and LSD.

The use of trademarked names, such as Rohypnol and Valium, in this assessment does not imply any criminal activity on the part of the companies that manufacture these drugs.

National monitoring indicators do not yet include information on GHB, but the MTF Study has added questions on GHB for the 2000 study.

TEDS reporting on hallucinogens includes LSD, DMT (dimethyltryptamine), STP (4 methyl 2,5 dimethoxyamphetamine, or synthetic mescaline), psilocybin, mescaline, and peyote.

Statistic of the Week (July 2005)

By the time they have reached their senior year in high school, 3 out of 5 young people in the US have had sex, and 1 in 5 of those has had sex with 4 or more partners, according to the 2001 Centers for Disease Control and Prevention's Youth Risk Behavior Surveillance. A study by the Kaiser Family Foundation on the media habits of young people found that on average, 8- to 18-year-olds watch nearly 4 hrs of television a day and devote nearly 2 hrs a day listening to music. Another Kaiser report released 2 years ago said that in a sampling of programming from the 2001-02 television season, 64% of the shows included sexual content, 32% sexual behavior and 14% featured strong suggestions of sexual intercourse.

[The Washington Post, June 20, 2005]

Media Quote of the Week

"The Swan was a worthless piece of television I'm sad to say I produced."
-- David Lyle, GM of Fox Reality Channel. [Calgary Sun, July 6, 2005]

Attractive Nuisance: Adult Cartoons Lure Young Viewers

Most parents would agree that references to bestiality, incest, masturbation and necrophilia don't belong on television, but would you believe that such content has not only appeared on television, it was included in a cartoon?

Fox's raunchy *Family Guy* made a strong come back after being off the air for three years, thanks to the success of DVD sales and heavy promotion on the Cartoon Network's Adult Swim program block. And although the content is decidedly not for children, children are tuning-in in droves. According to USA Today, *Family Guy* was the fifth-highest-rated show among 2-11-year-olds, averaging nearly a million viewers in that age group. Among teens ages 12-17, it is the second most popular show on television.

It is a sad irony that producers seem to be able to get away with more outrageous content because it's a cartoon - but because it's a cartoon, children are more likely to watch.

And *Family Guy* isn't the only outrageous cartoon on television. On July 31, Nickelodeon - a network that supposedly caters to young viewers -- is bringing back *The Ren & Stimpy Show*. This adult-cartoon series regularly features crude humor and sexual content. In 2003 the cartoon was briefly revived on Spike as *Ren & Stimpy: Adult Party Cartoon*. In its most recent incarnation, Ren and Stimpy were depicted as lovers, and episodes included references to their sex life.

For more info about *Family Guy* and other primetime TV shows check out PTC's Family TV Guide at <http://www.parentstv.org/ptc/shows/main.asp?shwid=504>

Unedited "F-Word" during ABC's Live 8 Broadcast

This week the PTC filed an indecency complaint with the FCC about the ABC Network airing of *Live 8: A Worldwide Concert Event* for the use of unedited profanity. We are also encouraging our members to file complaints at <http://www.parentstv.org/ptc/action/live8/main.asp>. The PTC has asked the FCC to levy a Notice of Apparent Liability against each ABC affiliate that aired the unedited program. 8K complaints have been filed so far through PTC's online FCC complaint

form.

Audiences tuning-in to this family hour broadcast got an unexpected surprise at the bottom of the first hour. During the Who's performance of "Who Are You," a line in the chorus "who the f--- are you" was aired unedited. The concert program that contained the indecent material aired at the 8:00 - 9:00 p.m. hour (Eastern Time) on July 2, 2005 on the ABC Network.

The program was aired on a tape delay, which should have given ABC ample time to edit all obscenities from the concert prior to broadcast. ABC took steps to edit other profanity from the broadcast. But given the time of day that this program aired, the broad family appeal of the Live 8 event, as well as the program's PG rating, ABC should have been more diligent.

In March 2004, the FCC issued a warning to broadcasters that the use of the F-word on television is indecent and profane, saying, "All broadcasters are on clear notice that similar broadcasts in the future will lead to forfeitures and potential license revocation, if appropriate."

Yet the FCC still has not ruled on a number of outstanding indecency complaints stemming from the use of the "F-word" on primetime television broadcasts. So long as those complaints remain un-adjudicated, broadcasters will continue to permit 'mistakes' like the Live 8 concert obscenity to occur. And that is inexcusable.

This kind of language does not belong on network television, particularly when so many children are in the audience. The networks and the FCC must understand that the public will not tolerate this continued abuse of the public airwaves. The television networks must abide by the indecency law and the FCC must vigilantly enforce the law. And this serves as yet another example of why the Senate needs to follow the lead of the House and vote to increase the indecency fines. The financial penalties for violating the law must no longer be a reasonable cost of doing business.

To take action, go to <http://www.parentstv.org/ptc/action/live8/main.asp>.

Fox TV Series Features Graphic and Disturbing Themes

The Fox broadcast network recently introduced themes of forced sodomy and S&M fetishes to prime time viewing audiences.

On June 15th, Fox aired an episode of its new summer series *The Inside* that dealt with a series of connected rapes and murders. In the course of the investigation, FBI agents discovered that all of the victims belonged to a private club that catered to clients with Sado-masochistic sexual fetishes. The primary suspect, Brandt, was also a member of the S&M sex club until he was kicked out for violating the club's rules. He had sexual relations with all of the victims and was implicated years earlier in connection with a series of rapes. In the end it turns out that the detective who had trailed Brandt in the earlier investigation was raping and murdering each of the women Brandt had sex with. In the end he kidnaps Brandt, rapes him, then commits suicide.

In addition to graphic discussions about their sexual practices, the episode also included scenes of a man and woman engaged in S&M role playing, gory images of dismembered and mutilated bodies, and a strongly implied male rape.

All of this explicit content aired at 9:00 p.m. on the East and West coasts, which means that children watching TV at 8:00 p.m. in the Central and Mountain time zones could have easily come across this dark and disturbing episode. In fact, at least half a million children did see the episode, according to Nielsen Media Research.

For a detailed description of the content or to view a video clip from the June 15th episode, go to <http://www.parentstv.org/ptc/action/inside/content.htm>. We warn you, the content is highly offensive.

It has been said that evil triumphs when good people do nothing. If we sit back and do nothing, we are giving our tacit consent for this kind of content to proliferate on television, filling millions of young minds with horrific images and warped views about sexuality and human relationships.

How TV Affects Your Child

Most children plug into the world of television long before they enter school: 70% of child-care centers use TV during a typical day. In a year, the average child spends 900 hours in school and nearly 1,023 hours in front of a TV.

According to the American Academy of Pediatrics (AAP), kids in the United States watch about 4 hours of TV a day - even though the AAP guidelines say children older than 2 should watch no more than 1 to 2 hours a day of quality programming.

And, according to the guidelines, children under age 2 should have no "screen time" (TV, DVDs or videotapes, computers, or video games) at all. During the first 2 years, a critical time for brain development, TV can get in the way of exploring, learning, and spending time interacting and playing with parents and others, which helps young children develop the skills they need to grow cognitively, physically, socially, and emotionally.

Of course, television, in moderation, can be a good thing: Preschoolers can get help learning the alphabet on public television, grade schoolers can learn about wildlife on nature shows, and parents can keep up with current events on the evening news. No doubt about it - TV can be an excellent educator and entertainer.

But despite its advantages, too much television can be detrimental:

Research has shown that children who consistently spend more than 4 hours per day watching TV are more likely to be overweight.

Kids who view violent events, such as a kidnapping or murder, are also more likely to believe that the world is scary and that something bad will happen to them.

Children's advocates are divided when it comes to solutions. Although many urge for more hours per week of educational programming, others assert that no TV is the best solution. And some say it's better for parents to control the use of TV and to teach children that it's for occasional entertainment, not for constant escapism.

That's why it's so important for you to monitor the content of TV programming and set viewing limits to ensure that your child doesn't spend time watching TV that should be spent on other activities, such as playing with friends, exercising, and reading.

Violence

To give you perspective on just how much violence kids see on TV, consider this: The average American child will witness 200,000 violent acts on television by age 18. TV violence sometimes begs for imitation because violence is often demonstrated and promoted as a fun and effective way to get what you want.

And as the AAP points out, many violent acts are perpetrated by the "good guys," whom children have been taught to emulate. Even though children are taught by their parents that it's not right to hit, television says it's OK to bite, hit, or kick if you're the good guy. And even the "bad guys" on TV aren't always held responsible or punished for their actions.

The images children absorb can also leave them traumatized and vulnerable. According to research, children ages 2 to 7 are particularly frightened by scary-looking things like grotesque monsters. Simply telling children that those images aren't real won't console them, because they can't yet distinguish between fantasy and reality.

Kids ages 8 to 12 are frightened by the threat of violence, natural disasters, and the victimization of children, whether those images appear on fictional shows, the news, or reality-based shows. Reasoning with children this age will help them, so it's important to provide reassuring and honest information to help ease your child's fears. However, you may want to avoid letting your child view programs that he or she may find frightening.

Risky Behaviors

TV is chock full of programs and commercials that often depict risky behaviors such as sex and substance abuse as cool, fun, and exciting. And often, there's no discussion about the consequences of drinking alcohol, doing drugs, smoking cigarettes, and having premarital sex.

For example, studies have shown that teens who watch lots of sexual content on TV are more likely to initiate intercourse or participate in other sexual activities earlier than peers who don't watch sexually explicit shows.

Alcohol ads on TV have actually increased over the last few years and more underage children are being exposed to them than ever. A recent study conducted by the Center on Alcohol Marketing and Youth (CAMY) at Georgetown University found that the top 15 teen-oriented programs in 2003 had alcohol ads.

And although they've banned cigarette ads on television, kids and teens can still see plenty of people smoking on programs and movies airing on TV. This kind of "product placement" makes behaviors like smoking and drinking alcohol seem acceptable. In fact, kids who watch 5 or more hours of TV per day are far more likely to begin smoking cigarettes than those who watch less than the recommended 2 hours a day.

Obesity

Health experts have long linked excessive TV-watching to obesity - a significant health problem today. While watching TV, children are inactive and tend to snack. They're also bombarded with advertising messages that encourage them to eat unhealthy foods such as potato chips and empty-calorie soft drinks that often become preferred snack foods.

Too much educational TV has the same indirect effect on children's health. Even if children are watching 4 hours of quality educational television, that still means they're not exercising, reading, socializing, or spending time outside.

But studies have shown that decreasing the amount of TV children watched led to less weight gain and lower body mass index (BMI - a measurement derived from someone's weight and height).

Commercials

According to the AAP, children in the United States see 40,000 commercials each year. From the junk food and toy advertisements during Saturday morning cartoons to the appealing promos on the backs of cereal boxes, marketing messages inundate kids of all ages. And to them, everything looks ideal - like something they simply have to have. It all sounds so appealing - often, so much better than it really is.

Under the age of 8 years, most children don't understand that commercials are for selling a product. Children 6 years and under are unable to distinguish program content from commercials, especially if their favorite character is promoting the product. Even older children may need to be reminded of the purpose of advertising.

Of course, it's nearly impossible to eliminate all exposure to marketing messages. You can certainly turn off the TV or at least limit kids' watching time, but they'll still see and hear advertisements for the latest gizmos and must-haves at every turn.

But what you *can* do is teach your child to be a savvy consumer by talking about what he or she thinks about the products being advertised as you're watching TV together. Ask thought-provoking questions like, "What do you like about that?," "Do you think it's really as good as it

looks in that ad?," and "Do you think that's a healthy choice?"

Explain, when your child asks for products he or she sees advertised, that commercials and other ads are designed to make people want things they don't necessarily need. And these ads are often meant to make us think that these products will make us happier somehow. Talking to kids about what things are like in reality can help put things into perspective.

To limit your child's exposure to TV commercials, the AAP recommends that you:

Have your kids watch public television stations (some programs are sponsored - or "brought to you" - by various companies, although the products they sell are rarely shown).

Tape programs - without the commercials.

Buy or rent children's videos or DVDs.

Understanding TV Ratings and the V-Chip

Two ways you can help monitor what your child watches are:

TV Parental Guidelines

Modeled after the movie rating system, this is an age-group rating system developed for TV programs. These ratings are listed in television guides, TV listings in your local newspaper, and on the screen in your cable program guide. They also appear in the upper left-hand corner of the screen during the first 15 seconds of TV programs. But not all channels offer the rating system. For those that do, the ratings are:

TV-Y: Suitable for all children

TV-Y7: Directed toward kids 7 years and older (children who are able to distinguish between make-believe and reality); may contain "mild fantasy violence or comedic violence" that may scare younger kids

TV-Y7-FV: Fantasy violence may be more intense in these programs than others in the TV-Y7 rating

TVG: Suitable for a general audience; not directed specifically toward children, but contains little to no violence, sexual dialogue or content, or strong language

TV-PG: Parental guidance suggested; may contain an inappropriate theme for younger children and contains one or more of the following: moderate violence (V), some sexual situations (S), occasional strong language (L), and some suggestive dialogue (D)

TV-14: Parents strongly cautioned - suitable for only children over the age of 14; contains one or

more of the following: intense violence (V), intense sexual situations (S), strong language (L), and intensely suggestive dialogue

TV-MA: Designed for adults and may be unsuitable for kids under 17; contains one or more of the following: graphic violence (V), strong sexual activity (S), and/or crude language (L)

V-chip (V is for "violence"). This technology was designed to enable you to block television programs and movies you don't want your child to see. All new TV sets that have screens of 13" or more now have internal V-chips, but set-top boxes are available for TVs made before 2000. So how exactly does the V-chip work? It allows you to program your TV to display only the appropriately-rated shows - blocking out any other, more mature shows.

The Federal Communications Commission (FCC) requires that V-chips in new TVs recognize the TV Parental Guidelines and the age-group rating system and block those programs that don't adhere to these standards.

For many, the rating system and V-chip may be valuable tools. But there is some concern that the system may be worse than no system at all. For example, research shows that preteen and teen boys are more likely to want to see a program if it's rated MA (mature audience) than if it's PG (parental guidance suggested). And parents may rely too heavily on these tools and stop monitoring what their children are watching.

Also, broadcast news, sports, and commercials aren't rated, although they often present depictions of violence and sexuality. The rating system also doesn't satisfy some family advocates who complain that they fail to give enough information about a program's content to allow parents to make informed decisions about whether a show is appropriate for their child.

So even if you've used the V-chip to program your TV or a show features the age-group ratings, it's still important to preview shows to determine whether they're appropriate for your child and turn off the TV if the content becomes inappropriate for your child.

Teaching Your Child Good TV Habits

Here are some practical ways you can make TV-viewing more productive in your home:

Limit the number of TV-watching hours:

Stock the room in which you have your TV with plenty of other non-screen entertainment (books, kids' magazines, toys, puzzles, board games, etc.) to encourage your child to do something other than watch the tube.

Keep TVs out of your child's bedroom.

Turn the TV off during meals.

Don't allow your child to watch TV while doing homework.

Treat TV as a privilege that your child needs to earn - not a right to which he or she is entitled.

Tell your child that TV-viewing is allowed only after chores and homework are completed.

Try a weekday ban. Schoolwork, sports activities, and job responsibilities make it tough to find extra family time during the week. Record weekday shows or save TV time for weekends, and you'll have more family togetherness time to spend on meals, games, physical activity, and reading during the week.

Set a good example by limiting your own television viewing.

Check the TV listings and program reviews ahead of time. For programs your family can watch together (i.e., developmentally appropriate and nonviolent programs that reinforce your family's values). Choose shows, says the AAP, that foster interest and learning in hobbies and education (reading, science, etc.).

Preview programs before your child watches them.

Come up with a family TV schedule that you all agree upon each week. Then, post the schedule in a visible area (i.e., on the refrigerator) somewhere around the house so that everyone knows which programs are OK to watch and when. And make sure to turn off the TV when the "scheduled" program is over, instead of channel surfing until something gets your or your child's interest.

Watch TV with your child. If you can't sit through the whole program, at least watch the first few minutes to assess the tone and appropriateness, then check in throughout the show.

Talk to your child about what he or she sees on TV and share your own beliefs and values. If something you don't approve of appears on the screen, you can turn off the TV, then use the opportunity to ask your child thought-provoking questions such as, "Do you think it was OK when those men got in that fight? What else could they have done? What would you have done?" Or, "What do you think about how those teenagers were acting at that party? Do you think what they were doing was wrong?" If certain people or characters are mistreated or discriminated against, talk about why it's important to treat everyone equal, despite their differences. You can use TV to explain confusing situations and express your feelings about difficult topics (sex, love, drugs, alcohol, smoking, work, behavior, family life).

Teach your child to question and learn from what he or she views on TV.

Talk to other parents, your child's doctor, and your child's teachers about their TV-watching policies and kid-friendly programs they'd recommend.

Offer fun alternatives to television. If your child wants to watch TV, but you want him or her to

turn off the tube, suggest that you and your child play a board game, start a game of hide and seek, play outside, read, work on crafts or hobbies, or listen and dance to music. The possibilities for fun without the tube are endless - so turn off the TV and enjoy the quality time you'll have to spend with your child.

Updated and reviewed by: Mary L. Gavin, MD

Date reviewed: February 2005

Attention Deficit Disorder (ADD), Attention Deficit Hyperactive Disorder (ADHD)

In the 1970s, the late researcher Professor Werner Halperin suggested that the rapid changes of sounds and images on TV may overwhelm the neurological system of a young child and cause attention problems that shows up at a later date.

Around the same period, Dr. Mathew Dumont of the Harvard Medical School suggested that the rapid changes of TV sounds and images may stimulate a child to mimic that dynamic behavior. That is, what we call ADHD may simply result from the child subconsciously copying the frenetic pace of TV programs. We now have a study that brings us solid findings about ADHD.

In April 2004, Dr. Dimitri Christakis and colleagues reported in the journal *Pediatrics* that early TV viewing (ages 1 and 3 were studied) is associated with attentional problems (ADHD) at a later age (age 7). The children studied watched a mean of 2.2 hours per day at age 1 and 3.6 hours per day at age 3.

Specifically, Christakis reports that watching about five hours of TV per day at age 1 is associated with a 28% increase in the likelihood of having attentional problems at age 7. A similar 28% increase at age 7 shows up for 3-year olds who watch about five hours of TV per day. Alternatively, each additional hour of TV watched above the mean at ages 1 and 3 increases the likelihood of attentional problems at age 7 by about 10%.

The authors include the following cautionary notes: (1) the determination of attentional problems (ADHD) was based on established checklists of behavior, not on a clinical diagnosis; (2) the authors relied on reports by parents to determine the amount of TV viewed - no direct monitoring of daily TV watching was done; and (3), the researchers had no data on the content of the TV programs watched.

Christakis and colleagues recommend that additional research be undertaken, and LimiTV strongly supports that. We also know, however, that each parent must make decisions based on what is currently known.

The steep rise in the number of children with ADD/ADHD, and the accompanying increase in the use of medications to treat these children (e.g., Ritalin), suggest that the problem is real and is

being caused by something which is an inherent part of everyday life for American children.

Current findings suggest that TV watching in the early years may contribute to this behavioral problem. Therefore, LimiTV recommends minimal TV and video watching during the preschool years.

Doctors sometimes refer to the enormous brain development that occurs in the first few years of life as a 'wiring' of the brain, i.e., making connections between the billions of neurons with which we are born. TV watching in these crucial early years may affect this wiring. That is, if the hours of TV watched exceed a certain level, a child's brain may be wired to respond more to the TV environment (rapid changes of sounds and images) than the natural environment. That level has not yet been determined, but since the AAP recommends no TV watching for the first two years of life, we could assume the level is quite low. It is for this reason as well that LimiTV recommends little-to-no TV through age 4.

Three New Studies Provide Compelling Arguments for Getting Television Sets Out of Children's Bedrooms

If concern about the rampant sex and violence on television doesn't convince you of the need to get the TVs out of your children's bedrooms, perhaps this will: Three new studies published this week in the Archives of Pediatrics & Adolescent Medicine have linked excessive television viewing by children to diminished academic achievement.

Researchers in New Zealand studied TV viewing and long-term academic achievement and found that individuals who watched more than three hours of television a day as children or as teens were more likely to not finish school or get a university degree by the age of 26, regardless of the individual's socioeconomic status or intelligence. An indication, researchers said, that excessive television viewing can impact an individual's well-being in the long-run. From: [Association of Television Viewing During Childhood With Poor Educational Achievement](#)

Researchers at the University of Washington tested 1,800 first graders and found that children who watched more than two hours of television a day as toddlers scored lower on reading and intelligence tests. From: [Children's Television Viewing and Cognitive Outcomes](#)

Finally, a study of 348 California third-graders found that children with television sets in their bedrooms performed worse on standardized tests than peers without television sets in their bedrooms. From: [The Remote, the Mouse, and the No. 2 Pencil](#)

Sex in the Media Precipitating a Public Health Crisis

An article published in the new issue of the *Journal of Pediatrics* suggests that sex in the media may be precipitating a national public health crisis. Despite the fact that teens are spending more

time with sex-saturated mass media, few studies have examined the effects of mass media on teens' sexual attitudes and behaviors. Of more than 2500 studies on youth and media conducted between 1983 and 2004, only 12 explored how teens are affected by exposure to sexual imagery.

According to the study's author, Dr. S. Liliana Escobar-Chaves, the few studies that have explored this subject focused on TV and movies. Virtually nothing is known about how children are affected by radio shock-jocks, sexually suggestive song lyrics, or sexually-charged advertisements, magazines, Internet sites, and video and computer games.

Eighty-three percent of programming watched most frequently by teens contains sexual content, according to Dr. Gary Rose, president and chief executive of the Medical Institute for Sexual Health, but the portrayals of sexual activity in popular entertainment seldom discuss risk or consequences.

According to the researchers, 47% of high school students have had sexual intercourse. Of these, 7.4% report having sex before the age of 13 and 14% have had four or more sexual partners. Each year, nearly 900,000 teenaged girls in the United States become pregnant and almost 4 million adolescents are diagnosed with sexually transmitted infections. Sexually active adolescents are also at higher risk for suicide, depression, and drug and alcohol use.

Watching Sex on Television Predicts Adolescent Initiation of Sexual Behavior

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See complete study at: www.pediatrics.org/cgi/content/full/114/3/e280

Background

Early sexual initiation is an important social and health issue. A recent survey suggested that most sexually experienced teens wish they had waited longer to have intercourse; other data indicate that unplanned pregnancies and sexually transmitted diseases are more common among those who begin sexual activity earlier. The American Academy of Pediatrics has suggested that portrayals of sex on entertainment television (TV) may contribute to precocious adolescent sex. Approximately two-thirds of TV programs contain sexual content. However, empirical data examining the relationships between exposure to sex on TV and adolescent sexual behaviors are rare and inadequate for addressing the issue of causal effects.

Design and Participants

We conducted a national longitudinal survey of 1792 adolescents, 12 to 17 years of age. In baseline and 1-year follow-up interviews, participants reported their TV viewing habits and sexual experience and responded to measures of more than a dozen factors known to be associated with adolescent sexual initiation. TV viewing data were combined with the results of a scientific analysis of TV sexual content to derive measures of exposure to sexual content, depictions of sexual risks or safety, and depictions of sexual behavior (versus talk about sex but no behavior).

Outcome Measures

Initiation of intercourse and advancement in noncoital sexual activity level, during a 1-year period.

Results. Multivariate regression analysis indicated that adolescents who viewed more sexual content at baseline were more likely to initiate intercourse and progress to more advanced noncoital sexual activities during the subsequent year, controlling for respondent characteristics that might otherwise explain these relationships. The size of the adjusted intercourse effect was such that youths in the 90th percentile of TV sex viewing had a predicted probability of intercourse initiation that was approximately double that of youths in the 10th percentile, for all ages studied. Exposure to TV that included only talk about sex was associated with the same risks as exposure to TV that depicted sexual behavior. African American youths who watched more depictions of sexual risks or safety were less likely to initiate intercourse in the subsequent year.

Conclusions

Watching sex on TV predicts and may hasten adolescent sexual initiation. Reducing the amount of sexual content in entertainment programming, reducing adolescent exposure to this content, or increasing references to and depictions of possible negative consequences of sexual activity could appreciably delay the initiation of coital and noncoital activities. Alternatively, parents may be able to reduce the effects of sexual content by watching TV with their teenaged children and discussing their own beliefs about sex and the behaviors portrayed. Pediatricians should encourage these family discussions.

Who's Paying for this TV Filth?

FX Cable Channel "The Shield"

I urgently need you to add your voice to a national chorus of outrage against the disgusting rise of shocking sexual content and unbelievably bloody violence on TV.

The Parents Television Council is leading a campaign to stop the TV industry from continuing to pump degrading filth into our homes.

We're doing it by targeting irresponsible SPONSOR companies that continue to pay for the filth. And today I'm asking you to add your name to a **Warning to General Motors and GEICO Auto Insurance** as sponsors of "The Shield" -- one of the most sexually explicit, profane, and violent series ever to appear on television.

My name is Tim Winter. I'm the Executive Director of the Parents Television Council. For 10 years now the PTC has led a grassroots campaign to clean up television. Part of our strategy has been to ask the commercial sponsors of television programming to stop paying for commercials on programs that consistently feature content that tramples all over the values we try to maintain in our homes.

And since "The Shield" is now in its third season on the "basic cable" FX channel, General Motors and GEICO have 100% advance knowledge of the raunchy filth and nauseating violence of "The Shield's" content. If a company pays for commercials on "The Shield," that company knows what it's sponsoring. Ignorance is no defense.

There's a summary of the content of recent episodes of "The Shield" on our PTC web site at **www.parentstv.org/ptc/action/theshield/content.htm**. It's shocking and disgusting and you will find it offensive -- and you definitely don't want any children in your household to be exposed to it. But I urge you to read it, so you'll be fully aware of what GM and GEICO are paying for. And in fact GM and GEICO admit they're aware of "The Shield's" content. They don't plead ignorance.

The PTC sent a letter to "The Shield's" sponsors pointing out that "Your sponsorship of sexually graphic content, gratuitous violence and foul language is a reflection of your corporate values" and asking: **"Does this kind of material really reflect your hard-earned brand image and corporate principles?"**

GM responded in writing, saying in part:

"General Motors monitors the content of this and other programming in advance ... giving us the opportunity to pull our commercials if the content of the program is deemed inappropriate.... We will continue to screen future episodes of "The Shield" to ensure that the content complies with our corporate advertising guidelines."

Unbelievable! They pre-screened "The Shield" and concluded the content wasn't inappropriate, and did comply with their corporate advertising guidelines!

GEICO, meanwhile, didn't even have the courtesy to answer our letter, but after repeated phone calls a PTC representative managed to speak to the company's Director of Media Advertising. This official washed his hands of any responsibility, saying the fact that GEICO buys spots during "The Shield's" air time doesn't mean that "'The Shield' is brought to you by GEICO." He

said GEICO will continue their advertising practices AS IS.

These companies are defending the indefensible, and I urge you to click **www.parentstv.org/ptc/action/theshield/main.asp** to add your name to the PTC's Warning to General Motors and GEICO Auto Insurance.

These sponsors are aiding and abetting the debasing of American culture and the undermining of the values of decent families by bankrolling TV filth.

They need to be called to account. Other sponsors, such as Coca Cola, responded to the PTC's letter by acknowledging that "The Shield's" content does NOT reflect their corporate values, and said they would no longer sponsor "The Shield." We commend them for their responsibility.

But GM and GEICO need to be told that we DO notice their TV sponsorship policies, and that thousands of concerned Americans will make our purchasing decisions based in part upon how these companies choose to spend their advertising dollars.

That's why I'm asking you to do two things -- right away, if you can:

1. First, forward this email to as many people as you know that will have the moral courage and determination to stand with you and the PTC in this expression of outrage against companies that PAY FOR dirty and dangerous television programming.

If you reach five friends, colleagues or relatives with this message, and each of them in turn reaches five more, and so on ... within a matter of days GM and GEICO will be feeling a literal firestorm of protest!

2. Then go to **www.parentstv.org/ptc/action/theshield/main.asp** to verify how truly disgusting "The Shield's" content is, and to add your name to the PTC's Warning to General Motors and GEICO Auto Insurance.

We CAN change sponsors' advertising policies. Coca Cola's response to our letter about "The Shield" is just the latest example; we've persuaded literally scores of huge sponsor companies to withdraw or withhold their commercials from indecent shows in the past, and we can do it again now -- **IF** we get a **HUGE GRASSROOTS RESPONSE** to this appeal!
Please don't delay.

Urgent thanks!

Tim Winter, Executive Director
PARENTS TELEVISION COUNCIL
Because our children are watching

[WARNING: The following content summary is explicit and will be

EXTREMELY offensive to many]

Sex AND Violence

Aceveda is sitting in his office watching a video tape of the woman being raped and beaten. The video shows, a man on top of a woman, having sex with her. His pants are slightly down and part of his buttocks are shown. The woman is screaming as the man repeatedly punches her. Aceveda is sitting in a chair rubbing his crotch, obviously aroused by watching the rape.

View Clip - Warning: Graphic Content

The show opens through the credits with flashes of a woman being raped in her bed in the dark. A man is on top of her and they are struggling as she pleads for him to stop and to let her go. He starts to take off his pants and the top of his butt is shown. The woman is still pleading for him to stop, telling him that he is hurting her and he tells her to shut up. Suddenly the woman stops moaning and tells him calmly, not to give her any bruises. It is revealed that the man is Aceveda and the woman is the prostitute that he is paying to have sex with and act out a rape.

View Clip - Warning: Graphic Content

Vic and Rawling listen to a woman's voice on an answering machine. A rapist has been raping women and then forcing them to call their husbands or boyfriends and tell them about the rape. Woman's voice: "I slept with him. I sucked his dick and then he did me from behind. He's better than you are. He's a real man, not a pussy like you. He's so big. He's the best I ever had. I want him to do it to me again in the ass while you listen."

A heroin dealer's prostitute fears reprisals from a ganglord: "The last woman he thought crossed him, his man held her down, stuck her right in the pussy until she bled to death."

Aceveda walks in to the house of the prostitute and grabs her hair and throws her down on the couch onto her stomach. He lifts up her dress and unbuttons his pants. She begins to struggle and moan. It is implied that he is having sex with her, again faking a rough rape scenario for Aceveda's pleasure.

View Clip - Warning: Graphic Content

Language

Wyms: "He's got a job?"

Woman: "Just blow jobs. He sucks fag dick on fourth street."

Vic: "He bragged he popped your sister's cherry when she was fourteen. He said it was so tight he thought it was her asshole."

Army: "He's probably getting laid. If I spent five years in prison you wouldn't get my face out of snatch for a month."

Vic: "Money and pussy make men do evil shit."

Vic: "Last chance for any of you cupcakes if you ever wanna smell pussy again."

Man inside jail cell: "I can smell yours from here bitch."

Another man inside cell: "Shit!"

Antwon: "Shut up bitch! You knew they were taking down my shit. My niggers saw you faggots on the goddamn raid!"

Antwon: "From now on, I say, 'suck my dick', you say, 'you want me to lick your balls daddy?'"

Vic: "Trouble hits these assholes always run one of two ways. The pussy they're getting into or the pussy they came out of."

Bojice: "Just cause I suck his dick don't make him my man."

Chopper: "You a white bitch! You threw children on the street. You a cracker white ho. You hear me bitch? You're a white bitch too!"

Army: "This guy could smell the sin out of a nun's crack."

Sex

Shane puts in a rap video where a gang member, Chopper, is shown having sex with a woman. She is on all fours and is facing the camera as he stands behind her motioning as though he is having sex with her. She is moaning. She is naked, though no body parts are shown.

Vic, Shane and Army walk into a house with a sign on the door that reads "Ghetto Bang Productions." As they walk in, there is a TV screen on in the background showing two people having sex.

Shane and Army are walking out to their car with the woman. Shane is telling Army that the need to establish dominance.

Army: "Then let her suck YOU off."

Shane continues to try to convince him.

Army: "Blow me."

Shane: "Let her."

They lead the girl around to the car and she unzips his pants and goes down to her knees, out of the view of the camera. It is implied that she is performing oral sex on him. Shane starts to laugh as he walks away.

Shane: "Two's a mouthful, three's a crowd."

View Clip - Warning: Graphic Content

Violence

In an attempt to extort information, Vic smashes a prostitute against a counter, doubling her over. The prostitute vomits, the camera zooming in on her bloody stomach contents. The prostitute

continues to cough, gag and spit up fluid on camera.

Vic and the squad discover a murder victim slumped against the wall. There is a large bullet hole in his temple, and blood gushes down his face. The wall behind the victim is splattered with blood and brain matter.

Vic, Ronnie and another cop are chasing a rapist. They see that he has run into a structure and release a dog to go in after him. Screams and moans are heard from inside the structure as the dog attacks him. The cop asks Vic if he should call the dog off, but he insists that he wait.

Depiction of murders where the victim's throat had been cut. Bodies were seen laying face up on the ground, with blood covering their faces and necks and blood surrounding their bodies.

A body is laying on a stretcher, in a neck brace, bloody and badly wounded though still alive. Another man is dead, lying on the ground. There is also a dead, bloody body in a car.

A murder victim is shown, blood trickling out of his nose and a huge bloodstain on his crotch and inner thighs. It is stated that his killer thrust a shotgun against his genitals and fired.

August 19, 2005

Earlier this week, representatives from Geico Insurance informed the PTC that they have pulled their advertising dollars from FX's *The Shield*. The move comes after the company first denied sponsoring the graphic show. When the PTC provided video proving the company's sponsorship and urged members to contact Geico to ask whether the vulgar and violent content featured on *The Shield* (including a man acting out a rape fantasy with a prostitute) reflected their corporate values, the company assured us they would not support the program any longer.

Our heartfelt congratulations and thanks to those members who contacted the company to express your outrage. Your voices were heard.

TV viewing linked to adult violence

19:00 28 March 2002

NewScientist.com news service

Alison Motluk

Watching just one hour of television a day can make a person more violent towards others, according to a 25-year study. In some circumstances, TV watching increases the risk of violence by five times. The new research indicates the effect is seen not just in children, as has been suggested before, but in adults as well.

Watch an hour of prime time TV, and you will probably witness three to five violent acts. Children's programming has even more violence, says Jeffrey Johnson, at Columbia University in New York. "Sports, news, commercials - it's everywhere," he says.

Johnson followed up over 700 families in New York state between 1975 and 2000. He found the link between aggression and TV watching was strongest for males during adolescence and for females, during early adulthood.

The associations held true even after accounting for known risk factors for aggressive behavior. These factors included childhood neglect, growing up in a dangerous neighborhood, low family income, low parental education and psychiatric problems. However, the type of the TV programs watched was not recorded.

Moral education

The study confirms for adults what is accepted by many psychologists about children: viewing a lot of violence increases the likelihood that the person will behave that way.

Craig Anderson at Iowa State University in Ames says that people do not seem to be getting that message: "People don't seem to understand that because they don't notice the way they've changed or the way they treat people, it doesn't mean there is no effect."

But Chris Boyatzis, a psychologist at Bucknell University, Philadelphia, says the link between TV viewing and violence may not be direct: "What may be going on is that families high in TV viewing are also lower in moral and character education."

It is important that parents "filter" what their children watch, he says: "Some studies have shown that about 75 per cent of kids' TV viewing is done without the company of parents, which is tragic."

Robbery and threats

Each family in Johnson's study had a child between the age of one and 10 when the study began. In 2000, when the volunteers' average age was 30, they filled out a questionnaire about their aggression, and the researchers double-checked it with FBI and state records.

Johnson found that 45 per cent of the men who had watched three hours or more at age 14 went on to commit an aggressive act against another person, compared to just nine per cent of the men who had spent less than an hour in front of the tube. Over 20 per cent of the three-hour-a-day group went on to commit robbery, threaten to injure someone or use a weapon to commit a crime.

For women aged 30, the strongest TV predictor of violence was watching three hours or more at age 22. Of these women, 17 per cent had committed an aggressive act, compared to none in the group watching less than an hour a day.

Television viewing seemed to have no bearing on subsequent property crimes, such as arson, vandalism and theft.

Journal reference: *Science* (vol 295, p 2468)

Violence on Television - What do Children Learn? What Can Parents Do?

Violence on television, American Psychological Association
<http://www.apa.org/pubinfo/violence.html>

Violent programs on television lead to aggressive behavior by children and teenagers who watch those programs.

That's the word from a 1982 report by the National Institute of Mental Health, a report that confirmed and extended an earlier study done by the Surgeon General. As a result of these and other research findings, the American Psychological Association passed a resolution in February 1985 informing broadcasters and the public of the potential dangers that viewing violence on television can have for children.

What Does the Research Show?

Psychological research has shown three major effects of seeing violence on television:

- * Children may become less sensitive to the pain and suffering of others
- * Children may be more fearful of the world around them
- * Children may be more likely to behave in aggressive or harmful ways toward others.

Children who watch a lot of TV are less aroused by violent scenes than are those who only watch a little; in other words, they're less bothered by violence in general, and less likely to see anything wrong with it. One example: in several studies, those who watched a violent program instead of a nonviolent one were slower to intervene or to call for help when, a little later, they saw younger children fighting or playing destructively.

Studies by George Gerbner, Ph.D., at the University of Pennsylvania, have shown that children's TV shows contain about 20 violent acts each hour and also that children who watch a lot of television are more likely to think that the world is a mean and dangerous place.

Children often behave differently after they've been watching violent programs on TV. In one study done at Pennsylvania State University, about 100 preschool children were observed both before and after watching television; some watched cartoons that had a lot of aggressive and violent acts in them, and others watched shows that didn't have any kind of violence. The researchers noticed real differences between the kids who watched the violent shows and those who watched nonviolent ones.

Children who watch the violent shows, even 'just funny' cartoons, were more likely to hit out at their playmates, argue, disobey class rules, leave tasks unfinished, and were less willing to wait for things than those who watched the nonviolent programs,' says Aletha Huston, Ph.D., now at the University of Kansas.

Real-Life Studies

Findings from the laboratory are further supported by field studies which have shown the long-range effects of televised violence. Leonard Eron, Ph.D., and his associates at the University of Illinois, found that children who watched many hours of TV violence when they were in elementary school tended to also show a higher level of aggressive behavior when they became teenagers. By observing these youngsters until they were 30 years old, Dr. Eron found that the ones who'd watched a lot of TV when they were eight years old were more likely to be arrested and prosecuted for criminal acts as adults.

A Continuing Debate

In spite of this accumulated evidence, broadcasters and scientists continue to debate the link between the viewing TV violence and children's aggressive behavior. Some broadcasters believe that there is not enough evidence to prove that TV violence is harmful. But scientists who have studied this issue say that there is a link between TV violence and aggression, and in 1992, the American Psychological Association's Task Force on Television and Society published a report that confirms this view. The report, entitled *Big World, Small Screen: The Role of Television in American Society*, shows that the harmful effects of TV violence do exist.

What Parents Can Do?

While most scientists are convinced that children can learn aggressive behavior from television, they also point out that parents have tremendous power to moderate that influence.

Because there is a great deal of violence in both adult and children's programming, just limiting the number of hours children watch television will probably reduce the amount of aggression they see.

In addition

Parents should watch at least one episode of the programs their children watch. That way they'll know what their children are watching and be able to talk about it with them.

When they see a violent incident, parents can discuss with their child what caused the character to act in a violent way. They should also point out that this kind of behavior is not characteristic, not the way adults usually solve their problems. They can ask their children to talk about other ways the character could have reacted, or other nonviolent solutions to the character's problem.

Parents can outright ban any programs that they find too offensive. They can also restrict their

children's viewing to shows that they feel are more beneficial, such as documentaries, educational shows and so on.

Parents can limit the amount of time children spend watching television, and encourage children to spend their time on sports, hobbies, or with friends; parents and kids can even draw up a list of other enjoyable activities to do instead of watching TV.

Parents can encourage their children to watch programs that demonstrate helping, caring and cooperation. Studies show that these types of programs can influence children to become more kind and considerate.

For More Information

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Americans Watching More TV

According to Nielsen Media Research families in America are watching more TV than they did ten years ago. They're also watching more than they did last year. On average American families watch eight hours and 11 minutes of television every day. That is an increase of 2.7% from September 2004 (eight hours, one minute) to September 2005. The number jumps more dramatically when comparing data to a decade ago. In 1995 families were watching a daily average of seven hours and 15 minutes. Media analysts credit the increase in the number of channels available in the average home, noting that most homes now receive around 100 channels of programming. Specialty channels like HGTV (Home and Garden Television) or OLN (Outdoor Living Network) splinter the audience by creating niches.

Nielsen's figures also showed an increase in television viewing this summer. More than one million more people were watching TV this summer than were watching last summer when NBC aired the Olympic Games. Both network and cable channels also saw an increase in viewership for "premiere week" - the week of Sept. 19 when new and returning shows debuted for the fall season - with 109 million more people tuning in than did last year. (AdAge.com, Sept. 30, 2005)

Sept 30, 2005

PTC Launches National Campaign to Hold Sponsors of Nip/Tuck Accountable for Underwriting Offensive Content

A new season of the ultra-violent, ultra-raunchy series *Nip/Tuck* is underway. The series, which follows two Miami plastic surgeons, wallows in its depravity. In only two episodes, the series has depicted a threesome; a decaying, maggot-covered corpse; a teenaged boy having sex with a transsexual adult; and more.

Series creator Ryan Murphy has said "I wanted to do something so violent it will shock even me." And "It's tough to get that sexual point of view across on television. Hopefully I have made it possible for somebody on broadcast television to do a rear-entry scene in three years. Maybe that will be my legacy." Lead actor Julian McMahon told the New York Post, "I'd like to be even more brutal and more weird...I feel very lucky that we've gotten away with what we have, but I'd like to go even further."

The Parents Television Council is launching a massive national campaign to stop this explicit content from coming unbidden into America's homes. We're doing it by going after irresponsible companies that sponsor and make this content possible. And we're doing it by encouraging Congress to give consumers choice over the cable channels coming into their homes.

In the weeks ahead we will be asking you to help us by contacting the sponsoring companies and your lawmakers on Capitol Hill. If we are going to make an impact, we desperately need your involvement.

For updates on the status of this campaign, we urge you to visit <http://www.parentstv.org/ptc/campaigns/NipTuck/main.asp>.

Sept 23, 2005

Geico Apologizes to PTC Members

An Executive Vice President at GEICO Insurance Company contacted the PTC this week and admitted the company lied about sponsoring the ultra-violent and ultra-vulgar FX show *The Shield*. In a letter to PTC President Brent Bozell, GEICO said, "As you correctly point out, GEICO ads appeared on *The Shield* on March 22 and May 24 of this year." The letter went on to "apologize for the confusion we created when we responded to your members." Further it states the company has instructed its ad buyers that that GEICO ads should not appear on The Shield.

Following up on the truth and holding advertisers accountable is a cornerstone of the PTC mission. GEICO has taken responsibility for its actions and is moving to correct them. For that the PTC applauds them.

Read the apology from Geico at <http://www.parentstv.org/ptc/advertisers/letters/geicoapology.pdf>

Sept 16, 2005

New "Foul" Season Underway

Early reviews of some of this fall's offerings:

Criminal Minds (CBS, 9 p.m., Sept. 22)

"Each week, it seems, we get another crime show from some broadcast or cable network. And with each series, the level of revolting, sadistic violence inflicted on women goes up, as each show seeks to capture our attention with the darkest, most disgusting crime yet.

"If it's a contest, let's declare Criminal Minds the sick winner and call the game off.

"This low-rent CSI clone casts Mandy Patinkin and Thomas Gibson as the leaders of a team of FBI profilers who are searching for a man who captures, cages and tortures women. Like most TV series, Minds talks about more than it shows, but it shows more than enough." (USA Today)

The War at Home (Fox, 8:30 p.m., September 11)

"In The War at Home, an unconscionably smutty new sitcom from Fox, a supposedly typical American father named Dave speaks directly into the camera at various intervals to comment on the action. Example: After introducing us to his wife, Dave asks, "Did you check out the rack? Nice, huh?"

"...This isn't sick comedy, it's just sickening. Indeed, though the TV season won't start for a week, The War at Home stands a good chance of being the worst of all the new sitcoms. The problem is not just that it's crude and gross, but that its crudeness and grossness are so pathetically forced and contrived. Its vulgarity has no integrity.

"All the characters are vile in spirit and objectionable in essence." (*The Washington Post*)

Sept 16, 2005

NIP/TUCK - A program shown on the FX Network

Warning! The following content is very disturbing and graphic.

The new season of *Nip/Tuck* started on Tuesday, September 20th, and proved that the show is continuing the ignominious tradition of being one of the most sexually explicit, profane, and violent television programs in the history of American television.

In the season premiere, which was solely sponsored by the Sony Corporation, viewers witnessed disgusting surgery procedures which included doctors removing a morbidly obese woman from a couch to which she had become grafted. Extreme close-ups of flesh being cut, gaping wounds and blood-soaked surgical tools were shown.

In another surgery scene leaky breast implants were being removed and replaced. The camera showed the doctor's hands grabbing a woman's breasts, slicing into them and the surgeon's hand being thrust deep inside the breast to grab and yank out the faulty implant. The leaking mass of silicone was a bloody, stringy mess when removed. The doctor then violently shoved the new implants into the woman's chest and close-ups of the breasts being stitched back together were shown.

Wednesday's season premiere also picked up on last year's story line which involved a character called The Carver who slashes people when attacking them. The show featured a flashback of one of the lead male characters being raped by The Carver. The sexploitation didn't end there however. In the final scene viewers were subjected to one of the lead male characters having sex with two women at the same time.

The producers of the show have indicated this type of material will continue in the new season. In an article in the NY Post, actor Julian McMahon who plays one of the doctors said, "I'd like to be even more brutal and more weird. In our show, the sex scenes are very particular to what the characters are going through. I feel very lucky that we've gotten away with what we have, but I'd like to go even further."

In flashback, Christian recalls being anally raped by the Carver.

Christian is dragged down the bed on his stomach. His pajama bottoms are ripped off, briefly exposing his rear. The Carver holds a rolled condom in front of Christian's face. Christian's eyes widen in horror. The Carver moves his groin against Christian's rear and thrusts into him. Christian's head is shown pressed against the mattress, one of the Carver's hands against the top of his head. Christian's head bounces as the Carver thrusts into him.

Kit, a police detective assigned to investigate the Carver, pressures rape victim Christian into having sex under the guise of "reenacting the crime."

Kit stands astride Christian. She pulls up her skirt, revealing stockings, garters and bare thighs. She kneels, straddling Christian's groin. Christian protests and begins to rise.

Christian: "That's not what happened."

Kit places a finger on his lips and presses him back against the bed.

Kit: "Shh. You were paralyzed, remember? Were you wearing a shirt?"

Kit undresses Christian and runs her hands over his bare chest.

Kit: "It must've been awful for you. A man who needs to be in charge demoted to another person's plaything. I can't imagine the Carver having an opportunity like this and not taking advantage of it."

Kit moves gently against Christian. He sits up suddenly and rolls her over, throwing her onto her back and straddling her, pinning her hands to the bed. Kit wraps her legs around his waist and yanks her dress up over her head, revealing her brassiere and the bottoms of her breasts. Kit spreads her legs apart as Christian leans into Kit. He thrusts into her and she gasps. The camera pulls back to show Christian brutally thrusting into Kit. With each thrust she shrieks and he grunts.

Kimber walks in on Christian and Kit.

Kimber: "First you propose to me, now you're screwing another girl. Who are you?"

Christian: "I'm me again, baby. I'm back."

Christian offers his hand to Kimber. Kimber removes her blouse and pants, revealing her underwear. She joins Christian and Kit on the bed. Kimber embraces Kit as Kit undoes her brassiere. Kimber removes Kit's bra. They kiss. Christian tongue-kisses Kimber. Kit kisses Kimber and pushes her to the bed, lying on top of her. Christian moves to lie on top of both of them.

Sean's wife Julia receives oral sex from a young man. Julia is shown lying in bed, gasping, groaning and crying out in pleasure. The naked man's head emerges from beneath the covers. He lies down next to Julia. Her hand moves towards his crotch as she giggles.

Kimber watches a pornographic movie with Christian and complains about his inability to satisfy her.

Kimber: "I've tried to be patient, but I can't pretend I don't miss it...I'm tired of masturbating myself to sleep at night."

Matt finds Adrian's maggot-infested corpse. The buzzing of flies is heard. The camera pans up the body, from a maggot-covered hand to a torso with bloody wounds in the elbow region and stomach, which are also strewn with maggots, to the body's face. The face is desiccated, waxy and in a state of decomposition. Its dead eyes stare upward. Live maggots crawl over the face and into the corpse's mouth.

Matt is still obsessing over Ava, the transsexual life coach with whom he had an affair in the previous season. He goes to her apartment and there he finds the decaying body of Adrian, Ava's teenaged son. Sean reveals to him that Ava is a transsexual, sending Matt into a downward spiral of alcoholism and drug use and leaving him questioning his own sexuality. Matt goes to a bar popular with transsexuals and is picked up by a pre-operative transsexual. When Matt finds out that he still has a penis, he beats him. The transsexual and his friends find Matt and beat him and urinate on him in revenge.

Drug use on the Rise on Television

9-2-05

Children learn a lot from watching television. Everything from how they talk or dress to when a child initiates sexual activity can be influenced by what they are seeing on television. Parents who wish to curb TV's influence in the lives of their youngsters now have a new cause for concern. *USA Today* reports more and more TV shows are depicting the recreational use of marijuana. Shows ranging from HBO's *Entourage*, to FX's *Over There*, to the new Showtime series *Weeds*, to the popular Fox sitcom *That '70s Show* all feature characters that regularly smoke pot.

Although there is very little research on the portrayal of illicit drugs on television, research on tobacco and alcohol use on television suggest that increased television viewing is a risk factor for the onset of alcohol use in adolescents. According to Steve Dnistrian of the Partnership for a Drug-Free America, the tacit approval of pot-smoking, particularly in comedies, may exacerbate its use. "These are trendsetting shows. They affect behavior and attitudes, particularly in teens. When glamorization of drugs has climbed, changes in teen attitudes followed."

PTC in the News Research and Publications Director Melissa Caldwell discusses how marijuana is portrayed on TV and what responsibility networks have when showing drug use on CNN's *Showbiz Tonight*. Go to http://www.parentstv.org/ptc/clips/ptc/Melissa_CNN2.asp to watch a clip.

Teenagers and marijuana - Scientists uncover risk factors for marijuana use

17 Mar 2005

What risk factors influence teenagers to start experimenting with marijuana or to move from experimental to regular use?

Involvement with other substances (alcohol and cigarettes), delinquency and school problems have been established as the three most important risk factors in identifying teenagers at risk of continued involvement with marijuana by a Cardiff University scientist, in collaboration with a colleague in the USA.

The study, Risk Factors Predicting Changes in Marijuana Involvement, led by Dr Marianne van den Bree, Department of Psychological Medicine, School of Medicine and Dr Wallace Pickworth, National Institute on Drug Abuse (NIDA) in the USA assessed over 13,700 school students at high schools throughout the USA (aged 11-21 years). The students were participating in the National Longitudinal Study of Adolescent Health in the USA twice (in 1995 and in 1996) over a one year period.

Over half of the students in the study who indicated use of marijuana in 1995 were still using it one year later. Twenty-one well-established risk factors of adolescent substance use/abuse, including personality, family variables and religion, were used to predict five stages of marijuana involvement: (1) initiation of experimental use, (2) initiation of regular use, (3) progression to

regular use, (4) failure to discontinue experimental use, and (5) failure to discontinue regular use.

Dr van den Bree said: "We found assessment of use of other substances and peer substance use, school, and delinquency factors to be key to identifying individuals at high risk for continued involvement with marijuana. The combined presence of these three risk factors greatly increased risk of experimental (by 20 times) and regular marijuana use (by 87 times) over the next year. Prevention and intervention efforts should focus on these areas of risk."

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Marijuana Withdrawal Reported By Teens Seeking Treatment

BURLINGTON, Vt. -- Often considered a relic of the 1970's culture, marijuana is no longer a baby boom generation issue. Today, nearly 50 percent of U.S. teenagers try marijuana before they graduate high school, and by 12th grade, about 21 percent are regular users. Consequently, treatment for marijuana dependence is on the rise, but, researchers have discovered, there's a catch -- withdrawal symptoms, much like those experienced by people quitting cigarettes, cocaine or other drugs, may make abstinence more difficult to achieve. A new study in today's edition of the journal *Drug and Alcohol Dependence* shows that teens that use marijuana frequently also may face the same withdrawal symptoms that have been found to challenge adult marijuana users trying to quit.

Ryan Vandrey, a graduate student in psychology, and Alan Budney, Ph.D., associate professor of psychiatry and psychology at the University of Vermont, studied 72 adolescent marijuana users seeking outpatient treatment for substance abuse. Participants in the study were heavy marijuana users ages 14 to 19, who were primarily male Caucasians, and who completed study questionnaires. Nearly two-thirds of the participants reported experiencing four or more symptoms of marijuana withdrawal, including anxiety, aggression, and irritability. More than one-third of participants reported four or more symptoms that occurred at a moderate or greater severity level.

"In the adolescents who provided information, we observed a lot of variability regarding the presence and severity of withdrawal symptoms, which is consistent with what we have seen in several studies of adults who use marijuana frequently," said Vandrey. "Overall, our research indicates that the majority of people who abruptly stop daily or near daily marijuana use experience some withdrawal symptoms. Though there is anecdotal evidence that withdrawal makes it more difficult to quit using marijuana and that people use marijuana to suppress withdrawal effects, we still need to more carefully investigate how withdrawal impacts the quitting process."

Budney's future research aims to address this and other questions related to the clinical importance of marijuana withdrawal and more generally to develop and test more effective methods for helping those who seek to stop using marijuana.

Inhalant use tops among 10- to 12-year-old age group

By Matt Whetstone, Cadillac News

For one in every five children, inhalants mark the first experimentation with drugs, according to the U.S. Drug Enforcement Agency.

The highest occurrence is seen among 10- to 12-year-old children, with rates of use declining with age. Abuse can lead to serious health problems and, in some cases, death.

In an effort to reduce inhalant use, the state of Michigan declared May as inhalant awareness month.

"A large part of a prevention awareness campaign such as this, is making sure that people - especially parents - get the facts," said Yvonne Blackmond, director of the Office of Drug Control Policy in Michigan.

The ongoing "Monitoring the Future" study conducted by the University of Michigan showed a significant increase of inhalant use by eighth-graders in 2004. Investigators at the university believe use is about to rebound following nearly a decade of decline.

The popularity of inhalants among younger age groups is attributable to their availability. Items like glue, aerosols, butane, paint thinner, gasoline and nail polish remover are cheap and can be purchased over the counter.

"This turnaround in their use continues to suggest the need for greater attention to the dangers of inhalant use in our media message and in-school prevention programs," said U of M researcher Lloyd Johnston.

Although he is not as active in inhalant prevention as in the past, Listen America Executive Director George Corliss said parents can prevent abuse by being vigilant.

"Parents are the No. 1 detriment for kids using alcohol, tobacco and other drugs," Corliss said. "But a lot of times, parents aren't aware of things that are out there. There are 20 new things that come down the pipe every week."

Inhalant users may store items in their bedroom, such as camping fuel, that should not be there. A "huffer" may have paint or stains on the body or clothing, sores around the mouth, red or runny eyes or nose, chemical breath, a dazed or dizzy appearance, nausea or anxiety, excitability or irritability.

A "huffer" can die the first, 10th or 100th time of abuse, according to the National Inhalant Prevention Coalition.

"Be vigilant," Blackmond said. "If inhalant containers are discovered in places where they are not normally stored, this should be a trigger for concern. Unfortunately, death from inhalant use can be instantaneous and can occur during a first-time use."

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Get Real About Teenage Drinking Part Three: Truth and Consequences by Stephen G. Wallace, M.S.Ed.

January 16, 2005

At the center of the great debate that characterizes America's ambivalence toward youth and alcohol lies a profound lack of awareness of the costs of underage drinking and the physical, social, and emotional toll it can take on those who engage in this illegal, and thus inherently irresponsible, behavior.

In a recent report, the National Research Council and Institute of Medicine of the National Academies note \$53 billion a year in losses from traffic deaths, violent crime, and other destructive behavior related to underage drinking. And that doesn't account for the falling grades and failing relationships that often go hand in hand with teens and booze.

Getting real on underage drinking means getting the facts.

Alcohol use by teens affects still-developing cognitive abilities and impairs memory and learning.

Teens who drink are more likely to commit or be the victim of violence (including sexual assault) and to experience depression and suicidal thoughts.

Alcohol-related automobile crashes kill thousands of teens each year and injure millions more.

It's also a fact that young people use alcohol more frequently, and more heavily, than all other drugs combined. *Teens Today* research from SADD and Liberty Mutual Group reveals that drinking increases significantly between the 6th and 7th grades; that the average age for teens to start drinking is thirteen years old; and that by 12th grade, more than three in four teens are drinking.

Unfortunately, many young people fall prey to the "Myth of Invincibility," believing that there are no real, or lasting, effects of alcohol use. They're wrong.

In turn, many of their parents subscribe to the "Myth of Inevitability," convinced that drinking is

a rite of passage and that there's not much they can do to influence their child's choices (according to *Teens Today*, more than half of parents believe that "drinking is part of growing up" and teens "will drink no matter what").

They're wrong, too.

More than a third of middle and high school students say they have not consumed alcohol.

Parents who talk with their teens about underage drinking, set expectations, and enforce consequences are significantly less likely to have children who drink. (This influence holds true for other teen behaviors as well, such as drug use and early sexual activity.)

A majority of young people say they want parental guidance in making decisions about personal behavior, including alcohol use.

There are some who hold that "teaching" teens to drink at home will keep them safe. And there are others who advocate for lowering the drinking age, citing as rationale examples of "responsible" drinking by teens in European countries with fewer alcohol restrictions.

Here's the truth.

The younger a child is when he starts to drink, the higher the chances he will have alcohol-related problems later in life.

It is estimated that more than 20,000 lives have been saved by minimum drinking age laws since 1975, due to a decrease in automobile crashes.

About half of Europe's countries have intoxication rates among young people that are higher than such rates in the United States.

Agreeing to disagree about this important issue obscures an alarming indifference about youth and alcohol. But it does nothing to keep teens safe and alive. Not until our society speaks with one, clear, unambiguous voice about the perils of underage drinking, as the National Academies suggest, will we successfully shatter the myths of invincibility and inevitability that propel it.

Our highways and hospitals are lined with young people who made poor, even fatal, choices about alcohol. Still many more suffer silently, unable to meet their own life goals or to realize the promise their friends, parents, and other caring adults see in them.

Sadly, that is what's real about underage drinking.

Stephen Wallace, national chairman and chief executive officer of SADD, Inc. (Students Against Destructive Decisions), has broad experience as a school psychologist and adolescent counselor.

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Drugs lure teen brains

Parents must be vigilant; healthy self-esteem, plan for future best deterrents

Thursday, June 02, 2005

By KAY CAMPBELL Times Staff Writer, kayc@htimes.com

Your teenage son can give you a list of reasons not to try drugs or hang out with dangerous people, but he does it anyway.

Your teenage daughter can tell you that it's a bad idea to drive too fast, but she does it anyway.

How do you help these almost-adults make good choices, even when you're not looking?

First, try understanding them, experts say.

Thanks to David Elkin, a professor of child psychology at Tufts University, parents now have a word for a teen's ability to list facts and still not act on them: "pseudostupidity," meaning that a teenager can think of several choices, but cannot decide which alternative is more appropriate.

Teenagers do not think like adults, agree the experts, including Rosalind Marie, a certified school psychologist and educational planner who has a private practice in Madison.

"Teens have undeveloped brains and they are prone to impulsivity," Marie said. "They can walk out of the house saying all the right things - and believing them, too - but once they are in their own teen culture, they are as far away from you as if they were on the other side of the world smoking dope with a swami."

Marie advocates immediate action - moving a teen to another school or sending the kid to a relative's for the summer - to separate a child from destructive friends. Those choices, she say, are much cheaper than drug treatment programs.

Parents who protect their teens from drug use are those who say "no" to unsupervised parties, to TVs or telephones in the teen's room, to unrestricted driving at 16, to part-time jobs during the school year. And those parents seek - and follow - medical and psychiatric advice if unhealthy personality characteristics show up, Marie said.

"Parents have to, at all times, be on the job," said Kitson Francis, a family therapist and chairman of the board of Partnership for a Drug-Free Community. "If parents don't raise them, children will raise themselves - or someone else will."

But drug prevention doesn't work, Francis said. What works is life affirmation: giving children from infancy a lifestyle that keeps them pointed toward health and productivity, toward defining themselves proudly as different from the crowd.

Parents must raise children who consider what they can bring to a situation, not take from it.

"If I teach my child to have something good to give to someone else, that inoculates him," Francis said. "It's the children who feel they have nothing to give that are more prone to these drugs. They are in pain, and they use drugs to deal with the pain."

"Drug abuse is not a matter of intellect, it's emotions," Francis said.

Drug Nazis

Emotions drove a concentrated effort at Huntsville High School this year to get students drug-proofed. Popular tennis player Hunter Stephenson, 16, died a few days before school started after trying methadone.

His death opened the eyes of a lot of parents who had not been aware of how widespread the use of drugs and alcohol were among their well-parented, well-behaved, honor-student children.

"It's so hard to be diligent, to not stick your head in the sand," said Jannie Chapman.

Chapman, along with Cindy Bendall and other parents of Huntsville High School students, including Hunter's parents, attacked the problem.

Candy Stephenson, Hunter's mother, talked to every class and distributed cards with the number for Hunter's Hot Line, an anonymous drug-activity tip line. Chapman helped organize Safe Kids, Safe Schools, a program that helps parents with questions and resources, including home drug testing kits.

Bendall helped start the local chapter of SADD, Students Against Destructive Decisions, to help students find a peer group interested in good decisions.

The programs have had an impact on students, according to several who stopped by school nurse Paula Peterson's office on one of the last days of school this spring.

"It's made a huge difference," one sophomore said. "Last year, pills were real big and all, and this year - seriously? - I think I could name like only a handful of people. And a lot more are getting drug tested by their parents."

School policy prevents using students' remarks in a news story without their parents' permission.

Chapman said that parents can use their own random drug tests to give their teens one more way to resist peer pressure.

"It's not about not trusting them," Chapman said. "It's to let them know, so if they're somewhere and someone pressures them, they can say, 'No, my mother is a drug Nazi and she drug tests me.' Most of the time, what a child needs is just a little nudging to make the right decision."

Too much to lose

Teenagers who have been members of the youth advisory board for the local Partnership for a Drug-Free Community say the nudging from parents does help. But even more than that push from behind is a draw to the future.

"The reason why my friends and I never use drugs is because we have goals we have set and want to accomplish," Courtney Griffith said. "We know how drugs can destroy not only your life, but everyone who cares about you."

Reggie Cross, who has found success both in the classroom and on the basketball court as a stand-out star at New Hope High School, has too much at stake, he says, to try drugs.

"The fact that I want to be somebody in my life - I want to make it in basketball - keeps me far from it," Reggie said. "Kids need something to keep their minds occupied."

Courtney, who just graduated from Bob Jones, has already known several kids who have messed up or ended their lives with drunk-driving wrecks or veered close to self-destruction with drugs.

One of those friends, she said, made it back.

"He finally realized that what he was doing was wrong," Courtney said. "He was making himself sick for something that made him happy only a few hours when he had so much more going for him in life."

"One bad thing I don't understand is how his parents didn't know," she said. "But I guess no one wants to admit their kid is messed up."

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Meet the Snoopers

Parenting, Privacy, Common Sense, and Communication

by Stephen G. Wallace, M.S.Ed.

January 4, 2005

In what *The Associated Press* (AP) called, "a victory for rebellious teenagers," the Washington State Supreme Court recently ruled as illegal a mother's listening in on her "out of control" daughter's phone conversation with an older boy suspected by police of involvement in an assault and robbery. Predictably, the case has rallied both privacy and parental rights advocates to their respective causes. For the rest of us, it begs the question, "How far should we go to protect our children?"

That is more easily asked than answered.

While federal law applies a broader interpretation of rightful parental intervention, Washington and ten other states require the consent of all parties before a phone conversation can be intercepted or recorded, according to the AP. No less contentious on the privacy scale are such detection devices as Breathalyzers, drug tests, and property searches, at school or at home.

As is often the case when such divides exist, a common-sense middle ground can be found in the voices of those with a dog in the fight. This time it's parents and teens.

Few parents dispute the importance, if not the right, of privacy for teens ... up to a point. And few teens quibble with parental inquisitiveness in the face of reasonable suspicion ... unless they have something to hide. Indeed, parents tend to feel that building and maintaining trust with their teen means accepting, even fostering, a degree of independence and privacy. And most teens seem to agree that parents who believe their child is involved in, or headed toward, illegal or dangerous behavior have a duty to act – even if doing so entails investigative techniques that, under different circumstances, would be deemed intrusive and unacceptable.

For Mom or Dad, finding the proper balance between trust and truth can be a vexing task. And teens don't always help. According to a *Teens Today* study from SADD (Students Against Destructive Decisions) and Liberty Mutual Group, 80 percent of teens report that it is important to have their parents' trust, but only 28 percent are honest and forthcoming when it comes to issues such as drinking and other drug use.

Enter the Snoopers. In a teenage world filled with dangerous decisions and destructive behaviors, parents must make difficult choices in parsing privacy issues, balancing adolescent independence with common sense supervision. After all, according to *Teens Today*, 70 percent of high school students say they drink alcohol and 41 percent say they have used marijuana.

To make matters worse, many of these teens mix that substance use with driving. In the same *Teens Today* study, only 30 percent of teens cited driving as a reason not to drink and only 18 percent as a reason not to use drugs. The results? Impaired driving remains one of the leading causes of death among young people.

While there is no debate that teens have easy access to alcohol and drugs, not to mention frequent exposure to forces that glamorize and promote them, there is animated discussion about how best to keep them safe. Surprisingly, teens themselves offer insights into the parenting strategies that are most effective in steering them away from alcohol and drugs: set and enforce curfews; stay up until they return home; require that they call to "check in" from time to time; talk with friends' parents to ensure supervision; and restrict overnights away from home.

In short, stay involved. Young people who avoid alcohol and drugs are more likely than those who don't to report that they have a close relationship with their parents. They are also more likely to say that their parents exercise a lot of "control" over various aspects of their lives, including where they go, what they do, and whom they are with. Seem obvious? Painfully so. Still, only about one quarter of parents do so. And that's a shame because the truth is that the

majority of young people say they want parental guidance in making decisions about personal behavior.

SADD's *Contract for Life* and *Opening Lifesaving Lines* brochure, along with the SADD/Liberty Mutual *Family Communication Tips*, offer free, constructive, and easy to use advice for parents looking to get the ball rolling in talking to their teen about the important issues of alcohol and drug use. So, too, does the Office of National Drug Control Policy (ONDCP), which advises parents to take the following steps.

Make a plan. Organize your thoughts. Decide what you want to say to your teen.

Listen. Ask your teens for their response to the information you've presented.

Discuss. Discuss the shared information. Don't get lulled into "looking the other way" because it's easier.

Set rules. Make it very clear that you will not tolerate drug or alcohol use.

Establish clear consequences and reward good behavior. Let your teens know that you will be holding them accountable for their actions and that there will be consequences for not following the rules.

We are likely a long way from reaching consensus on telephone taps, urine tests, and drug dogs, but the evidence makes clear that parents who stay in the loop may not have reason to snoop. And that's a better solution all the way around.

Stephen Wallace, national chairman and chief executive officer of SADD, Inc., has broad experience as a school psychologist and adolescent counselor. SADD is a partner in the Office of National Drug Control Policy's Steer Clear of Pot campaign (www.theantidrug.com). For more information about SADD, call toll-free 877-SADD-INC. The SADD/Liberty Mutual *Teens Today* research can be found at www.sadd.org or www.libertymutualinsurance.com.

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Short Circuit

Hormones, hobgoblins and adolescent neurochemistry

By Stephen G. Wallace

Parents everywhere are no doubt puzzling over recent high profile displays of horrific adolescent behavior, fearing for their own children and wondering what in the world is going on. Let's take a look.

Northbrook, Illinois: Fueled by alcohol, a gang of 12th grade girls lead a violent, demeaning hazing of their 11th grade classmates, punching and kicking them, covering them with feces and

forcing them to eat dirt and pig intestines.

Sarasota, Florida: Influenced by the movie Jackass, three trespassing teens leap from atop a condominium building aiming for the pool. Two make it. One hits the side, fracturing both legs and an arm and cracking his pelvis.

Red Lion, Pennsylvania: Brandishing his stepfather's 44-calibur Magnum, an 8th grade boy stands up in his school's cafeteria and shoots the principal in the chest, killing him. He then uses a 22-calibur weapon to kill himself.

Kingston, Massachusetts: Cheered on by classmates, an 8th grade girl engages in a sex act with a 10th grade boy on the school bus.

Just as figuring out the implausible seems all the more impossible, information is emerging about some serious neurological rewiring taking place during adolescence. In her new book, *The Primal Teen*, Barbara Strauch illuminates startling advances in science that may help to explain teen behavior heretofore chalked up simply to immaturity, hormones or hobgoblins. Recent research at UCLA's Lab of Neuro Imaging suggests that, during adolescence, boys and girls undergo significant neuronal transformation, affecting such functions as self-control, emotional regulation, organization and planning. This research, in tandem with studies performed at the National Institute of Mental Health and at McLean Hospital in Massachusetts, challenges traditional thinking that brain development is complete by age eight or ten. Now, some quixotic adolescent behaviors are being linked to a natural, even predictable, neurochemical process.

Of course, this doesn't mean that teens are scientifically destined to make poor choices. But it may mean that they are even more predisposed to do so than previously thought. Why? Because the massive reorganization of gray matter at puberty seems to impact areas of the brain most closely associated with judgment. And judgment shades choices. Understanding the antecedents of those choices, be they biological, chemical or social, underscores the value of parental involvement in teen decision-making and best positions adults to short circuit destructive teen behavior ... or at least to try their hand at persuasion. A calm, clear voice of reason can go a long way toward slowing speeding synapse-driven impulsions if not – at least occasionally – substituting adult judgment for adolescent enterprise.

Perhaps most important in helping young people identify sensible solutions to life's challenges is defining the potential short-term and long-term consequences of behaviors ... consequences their still-evolving brains may not yet fully embrace or even slow down long enough to notice. This can be especially the case when the behavior includes alcohol and other drugs. After all, the flip side of the effects of neurological development on teen behavior is the effect of teen behavior on neurological development. It's not too hard to imagine the impact of substance use and abuse, not to mention scores of other unhealthy experiences, on a transforming cerebral cortex.

While that impact may be hard to see, there are other more immediate, and more identifiable, ramifications of alcohol and drug use. Both have been repeatedly linked to increased rates of automobile crash deaths, risky sexual behavior, sexual assaults, depression, suicide and declining

school performance.

Try as we might, we will never successfully transform teen thoughts and actions into those that mirror our own. Nature has a different plan (something Strauch calls "crazy by design"). The best we can do is to drill deeper into the adolescent brain and psyche seeking to understand what drives their decisions and what influencers can be brought to bear to keep them safe and alive. And there's no time like the present. According to original Teens Today research conducted by SADD (Students Against Destructive Decisions/Students Against Driving Drunk) and Liberty Mutual Group:

A majority of teens (63%) say they drink, including 16% of sixth graders, 41% of eighth graders and 75% of eleventh graders;

More than one-third of teens (35%) say they use drugs, including 34% of ninth graders and 42% of tenth graders;

More than one-half of teens (58%) say they have engaged in sexual activity, including 35% of seventh graders and 78% of twelfth graders.

Still, most young people want to make good decisions. And, believe it or not, they welcome, and respond to, parents who help them translate illogical thought into responsible action. The Teens Today research revealed that adolescents want parents to offer their opinions; say it is important to them to live up to their parents' expectations regarding drinking, drug use, and sex; and are much less likely to engage in destructive behavior when they share a close, open relationship with their parents.

Recent events around the country make clear that our work is cut out for us. As one of the pool-plunging Sarasota teens told the Associated Press, "It's adolescent independence and taking risks, like kids taking drugs or doing pot. Adolescence comes with stupidity and arrogance." At least now we're closer to knowing why.

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Cat and Mouse

Trust, truth and drug testing teens

By Stephen G. Wallace
February 6 , 2004

President Bush's call for increased federal funding of school drug testing programs has already reignited debate over the efficacy and ethics of intrusive remedies for a country at war with drugs. Given the easy availability of illegal substances, and their widespread use by teens, it's a debate worth watching.

Random drug testing in schools began with student athletes and a "pay to play" philosophy holding that participation in sports is a privilege extended on the condition of abstinence from substance use. In a practice upheld by the US Supreme Court, this privilege principle quickly migrated to other competitive activities, from cheering to chess. And now, in its latest iteration, drug testing is being applied more broadly to students enrolled in some private and parochial schools.

The current debate, anchored on one side by conservatives and on the other by civil libertarians, threads age-old arguments of privacy with newfangled applications of technology poised to detect and designed to deter. In the middle remain a vast number of "undecideds" and the fundamental question of effectiveness. And here the data conflict.

University of Michigan researchers found virtually identical rates of drug use in the schools that have drug testing and the schools that do not (although a study author concedes that one "could design a drug testing program that could deter drug use").

A Ball State University/Indiana University researcher reported that 73% of Indiana high school principals with random drug testing programs in their schools reported a decrease in drug usage (compared to a period without such a program) among students subject to the policy.

Supporters of random drug testing argue both the ethics (if we expect students to study and test them to find out, can't we also expect them to remain drug-free and test them to make sure?) and the outcomes (the Office of National Drug Control Policy cites the results of drug testing programs in Oregon and New Jersey as proof positive that they work). They also note the positive role that testing can play by giving young people "an out," blunting negative peer pressure with the threat of being caught. Not enforcement but, rather, reinforcement.

Detractors, on the other hand, claim that such programs are ineffective as deterrents and fly in the face of civics classes on the appropriate balance between authority and individual rights. In *Making Sense of Student Drug Testing, Why Educators are Saying No*, the American Civil Liberties Union (ACLU) and the Drug Policy Alliance maintain that not only is testing ineffective in deterring young people from using drugs, it also can undermine relationships of trust between adults and children. While that could be true, *Teens Today* research from SADD and Liberty Mutual Group suggests that the undermining may already be well underway: while 95% of parents say they trust their teens in making decisions about drugs, only 28% of teens report being completely honest with parents on the issue. And that says nothing of the often elaborate steps teens will take to conceal, not just lie about, their drug use.

In more than a few families, evasion blends with obfuscation – commencing a high-stakes game of Cat and Mouse that pits parents against teens and cripples the very trust and truth on which those relationships are based.

What seems to be lost in this debate is the perspective of those with the most at stake: the students themselves. Encouragingly, most teens (70%) say they are concerned about drug use. Yet, understandably, many see drug testing as a violation, not so much of civil liberties as much as of trust – at least absent some evidence of wrongdoing. They also seem to doubt its saliency as a deterrent, even when applied by Mom or Dad. In one Teens Today study, only 8% of students said that testing by parents would be effective in keeping them away from drugs, while 93% indicated that other parental measures would be effective.

The good news in all of this is that young people recognize the dangers of drug use and seem to share adults' urgency in finding answers that keep teens safe. The better news is a solution that's been right in front of us all along: parents who talk regularly with their children about drugs.

According to *Teens Today*, adolescents in grades 6-12 say that parents are their biggest influence not to use drugs. And the methods they report as most effective are, perhaps, the simplest: discuss the dangers and explain the expectations. Indeed, teens who have open and honest communication with their parents are more likely to avoid drugs, to try to live up to their parents' expectations regarding drug use, and to say that their parents' methods of keeping them away from drugs are effective. These teens also report that they are less likely to use drugs when their parents make clear that such behavior won't be tolerated.

Whatever the outcome of the spirited public discourse over random drug testing in schools, a surer bet may be some not-so-random drug prevention at home. Open communication and clear expectations are already proven deterrents to drug use among teens – just ask them. So too is good old-fashioned vigilance. After all, while the cat's away ...

Stephen Wallace, national chairman and chief executive officer of SADD, Inc., has broad experience as a school psychologist and adolescent counselor. SADD sponsors school-based education and prevention programs nationwide and makes available at no charge the *SADD Contract for Life* and the *Opening Lifesaving Lines* brochure, both designed to facilitate effective parent-child communication. Toll-free: 877-SADD-INC For more information on the SADD/Liberty Mutual Teens Today research, visit www.saddonline.com or www.libertymutualinsurance.com.

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Marijuana most common drug in America

By Ashley Dziuk

Pot, hash, Mary Jane, weed and countless other terms are all used to describe the drug marijuana.

According to the National Institute on Drug Abuse, marijuana is the most commonly used illicit drug in the United States.

There are cultural perceptions about the drug that affect people's use, said David Sprick, interim chief of University Police.

"People may think it's harmless, that everybody does it or that it's no big deal," he said.

But marijuana use can cause problems for some students on a personal level, Sprick said.

"For some people, at the very least, pot is a distraction," he said. "The worst-case scenario is it becomes an addiction problem."

According to the Bureau of Justice Statistics, in 2003, 33.7 percent of college students had used marijuana in the past year, and 19.3 percent in the past month.

Although those numbers indicate that young adults use marijuana, many, like junior Dawn Snyder, choose not to.

"I've been around enough second-hand smoke in my life," she said. "I don't think I need to put anymore (smoke) into my body."

There are both short- and long-term physical effects of using marijuana, Sprick said.

These include a higher chance of lung cancer and other smoking-related illnesses.

"There is damage to white blood cells in the lungs," he said, "which reduces the ability to fight lung infections and illness."

According to NIDA, marijuana has the potential to promote cancer of the lungs and other parts of the respiratory tract, due to irritants and carcinogens in the smoke.

For men, it causes decreased testosterone levels and lower sperm counts, Sprick said.

Marijuana also can affect a person psychologically, he said.

"It can cause loss of short term memory and loss of motivation," Sprick said.

The short-term effects also include "distorted perception, difficulty thinking and problem solving, loss of coordination and increased heart rate," according to NIDA.

Long-term effects indicate changes in the brain, similar to those seen after prolonged use of other major drugs, according to NIDA.

Marijuana use cannot only affect the health of those smoking it, but those around them as well.

In 2002, marijuana was the third most commonly abused drug mentioned in drug-related hospital emergency room visits, according to NIDA.

Marijuana use doesn't seem to slow down, even with statistics showing the harmful consequences.

According to NIDA, "taking changes in population into account, marijuana mentions (in accidents) increased 139 percent from 1995 to 2002."

Snyder said she has had a couple of friends who have smoked marijuana.

"I think for some people, it's kind of an escape," she said. "College can get a little crazy and stressful and it's an escape."

Yet, the health risks just aren't worth it, she said.

"I just can't justify putting that into my body," Snyder said.

"I like my brain cells and I want to keep them."

Finder: The surveys say steroids affect kids more and more

Sunday, March 20, 2005

By Chuck Finder, Pittsburgh Post-Gazette

Amid the 11 1/2-hour theatrical release Thursday of Mr. 'Roid Goes To Washington -- made you laugh at baseball's arrogance and Congress' contempt, made you cry over Mark McGwire's shrinking status and families losing sons to drug-infused suicide -- the harsh glare seemed to miss the most devastated underclass, the most important focus group.

Boys.

And, yes, girls.

This isn't merely a Major League Baseball problem when two schoolchildren in every four *eighth-grade* classrooms have tried steroids.

This isn't merely the fault of Bud Selig, Don Fehr or so-called author Jose Canseco when slightly more than one student in every *high-school* classroom has used the junk -- a statistic, 1 in 16, that increased almost three-fold over the past decade.

Members of the House Committee on Government Reform, inviting baseball stars and national media and rubber-necking America into Room 2154 of the Rayburn Building on Capitol Hill, kept stressing that they wanted to attack the epidemic from the top down, but everybody's overlooking the growing little people at the bottom. Our sons. Our daughters.

"And I'm the one who came up with the half-million figure in 1988," Chuck Yesalis was saying the day after from his home in State College. He is a Penn State professor of health policy and administration plus exercise and sports science, a former strength coach, an author of three books on the subject. He is, after 27 years of study, an expert in the performance-enhancing field.

So trust him when he tells you that this screaming statistic about teen-aged steroid users has more than doubled since his initial research a kid's lifetime ago: "It's sure a hell of a lot more than a million now."

Yesalis is such an expert that he was called to the Hill the Thursday before St. Patrick's Day in the warmup to the Selig-Canseco circus. That House Energy and Commerce Committee hearing by contrast was so unimportant, so nationally unpublicized, that Selig, NFL commissioner Paul Tagliabue, NBA commissioner David Stern and NCAA president Myles Brand deigned instead to send underlings of underlings. It marked the fourth time Yesalis had testified on Capitol Hill, including to a Senate panel last March. If you go back, back, back, these same halls of power have been entertaining steroid-ingesting witnesses since 1973.

"The biggest problem I've had over the last quarter-century," began Yesalis, has been convincing pols, educators and coaches that both the use of performance-enhancing drugs and drug tests were issues worthy of their time and money.

"If I had a hundred bucks for every time a coach or a school administrator told me, 'Yeah, it's a problem, but not in my school,' or 'not in my college,' or 'not on my pro team,' I'd have a Ferrari in my driveway."

Numbers prove them wrong. According to the 2003 Youth Risk and Behavior Surveillance System, 6.8 percent of boys and 5.3 percent of girls in U.S. high schools used anabolic steroids at least once in their lives -- 66-percent and 165-percent increases over a study a half-dozen years earlier. Kids are 'roiding up younger, down to eighth grade (2.5 percent). Kids who try such performance-enhancing drugs are far more likely to abuse alcohol, marijuana and the like.

Oh, and at that age a user can grow addicted to steroids.

What a toxic statistical cocktail. Yesalis particularly gets distressed over the female usage.

"What you're talking about is a girl putting into her body the primary male hormone, testosterone, *and she could grow a beard*," he said. "None of the trends make you happy. This is big-time stuff."

Forget about the positive-testing 1.7 percent of millionaire baseball players and the theater of the hearings Thursday. Fact is, the most compelling testimony of the day came from the mouths of the Garibaldis about their late son Rob, a McGwire fan, and Don Hooton about his late son, Taylor -- and from the faces behind them of the family, the Marreros, who didn't testify because their late son, Efrain, was a steroid-using football player who shot himself and not a baseball tragedy.

Hooton, who started a non-profit organization in Taylor's name, and Boston's Curt Schilling at least offered the best counsel: Start at the scholastic level with educational programs, coaching certification and drug-testing.

Such testing is a flawed process, scientifically speaking. Yet the athletes who cannot afford the finest in drug-masking agents and expert advice, the athletes who don't possess the knowledge to cheat the urinalysis -- our children -- need it more than pros.

"Drug-testing is far more beneficial for kids who can't hire somebody like me," Yesalis said. "And I've had four offers. I turned them all down, to the chagrin of my wife. Even though some would figure out how to beat the system, the deterrent value would be even greater for kids."

Over the years, I have spoken to my boys about the dangers of alcohol and drugs. While watching such theater Thursday, it dawned on me: Never once did the discussion entail steroids. Never (to quote Rafael Palmeiro). Luckily, my sixth-grader informed me the day after, they had that talk at his school recently.

It's a comfort every parent deserves, from McGwire to Hooton to every one of us: To know that somebody has your back in this crisis with our sons and daughters.

(Chuck Finder can be reached at cfinder@post-gazette.com or 412-263-1724.)

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Other Dangerous Drugs

The Other Dangerous Drugs (ODD) category includes club drugs, hallucinogens, and illegally diverted pharmaceuticals. ODD are available nationwide, but--with the notable exception of club drugs--they generally have not been considered as great a threat as other illegal drugs. However, information provided to NDIC by law enforcement agencies nationwide suggests that ODD pose a much greater threat than is currently perceived. Moreover, given the popularity of "raves," the dramatic increases in the availability and use of club drugs may pose a greater immediate threat to adolescents and young adults than any other illegal drug.

More than half of the 412 agencies responding to the National Drug Threat Survey identify increases--sometimes dramatic--in the availability and use of club drugs, particularly MDMA (3,4-methylenedioxymethamphetamine) and GHB (gamma hydroxybutyrate). Over 10 percent of respondents note the appearance of club drugs in their jurisdictions within the past year, and many agencies note increased use among junior high and elementary schoolchildren. Many agencies express great concern over the perception that club drugs are "safe" and note increases in overdoses and deaths that directly coincide with the rising availability of club drugs. In 1999, the National Institute on Drug Abuse (NIDA) reported that "a number of our Nation's best monitoring mechanisms are detecting alarming increases in the popularity of some very dangerous substances known collectively as club drugs." Those same monitoring mechanisms show similar increases in 2000.

Club Drugs

The club drug category comprises both stimulants such as MDMA and PMA (paramethoxyamphetamine, an MDMA lookalike that is much more potent) and depressants such as GHB, ketamine, and Rohypnol. A recent resurgence in the availability of some hallucinogens--LSD (lysergic acid diethylamide), PCP (phencyclidine), psilocybin, and peyote or mescaline--at raves and dance clubs may necessitate their inclusion in the club drug category as well.

International criminal organizations are responsible for much of the production, transportation, and wholesale distribution of club drugs, especially MDMA. But information from state and local law enforcement agencies clearly indicates that young adult Caucasians are primarily responsible for introducing, distributing, and using club drugs nationwide.

The primary outlets for club drugs are raves and dance clubs in larger metropolitan areas, but similar activity is occurring at clubs and teen parties in smaller cities and towns across the nation, particularly those with colleges and universities. In addition to serving as markets for MDMA and GHB, raves are providing an outlet for the introduction of new drugs and for the reintroduction of hallucinogens to a new group of users--today's youth. The wide range of drugs available at raves and parties also provides opportunities for the dangerous use of drugs in combination--for example, MDMA and heroin or MDMA and peyote or mescaline, which some agencies refer to as "new age speedballs."

Raves are held in permanent dance clubs or in temporary clubs set up in abandoned warehouses, open fields, or empty buildings for a single event. Raves are often promoted through flyers and advertisements distributed at other clubs, in record shops and clothing stores, on college campuses, and over the Internet. Many club owners sell specialty items to dancers in a way that arguably promotes the use of drugs, although there is no direct evidence that they are taking part in MDMA sales or earning any direct profit from drug sales within their clubs. They sell bottled water and sports drinks to manage hyperthermia and dehydration as well as pacifiers to prevent involuntary teeth clenching--all frequently caused by MDMA use. They also sell menthol inhalers, chemical lights, and neon glow sticks, necklaces, and bracelets to enhance the hallucinogenic effects of MDMA. Club owners only rarely sell alcohol. They usually advertise raves as "alcohol free"--most attendees are not old enough to purchase alcohol legally--which may lead to parents' perception that raves are safe for their children to attend. Club owners may be protecting themselves by not offering alcohol because MDMA reacts negatively with alcohol and there is less scrutiny of clubs without liquor licenses.

MDMA or "Ecstasy"

MDMA is a synthetic drug that acts simultaneously as a stimulant and mild hallucinogen. MDMA is produced as a white powder that has a slightly sweet scent; it is usually ingested in tablet, powder, or capsule form. Other names for MDMA include "ecstasy," "Adam," "X," "E," "XTC," and "empathy." Users risk exhaustion from a combination of the drug's effects and the physical exertion of all-night dancing. NIDA findings indicate that long-term use of MDMA causes significant, irreparable damage to the brain.

No drug in the ODD category represents a more immediate threat than MDMA. Detailed information from law enforcement agencies documenting dramatic, nationwide increases in the availability and use of MDMA, as well as the involvement of international organized crime groups in production, transportation, and wholesale distribution, places MDMA at the top of the ODD category.

Nearly 150 of 412 agencies responding to the National Drug Threat Survey identify MDMA as readily available in their areas. Of those, over 100 report increases in availability, frequently referring to the increases as "dramatic" or "alarming." Over 10 percent of responding agencies note the appearance of MDMA within their jurisdictions in the past year, and many associate the drug with local colleges and universities.

Federal agencies report dramatic increases in MDMA trafficking. Between 1993 and 1998, the number of MDMA tablets submitted to DEA laboratories for testing increased from just under 200 to almost 145,000. Seizures have gone from approximately 400,000 in 1997 to 750,000 in 1998 to more than 3 million in 1999. U.S. Customs information indicates an increase in the size of individual shipments; for example, a December 1999 seizure in San Bernardino, California, netted approximately 700 pounds of MDMA, and 1,100 pounds of MDMA were seized at Los Angeles International Airport in July 2000. In the past, MDMA was smuggled in shipments averaging just 2-4 kilograms (4-9 lb).

There are no estimates of the demand for MDMA or the total number of users, but national abuse indicators suggest that demand is growing at an alarming rate. NHSDA data show that the number of respondents 12 and older who reported lifetime MDMA use rose from an estimated 2.7 million in 1994 to almost 3.4 million in 1998, the last year for which MDMA data were available.

According to the 1999 MTF Study, reported lifetime, past year, and current use of MDMA increased significantly among twelfth graders between 1998 and 1999. Past year MDMA use increased among tenth graders between 1998 and 1999, while lifetime and current use remained constant. Use in all three categories remained constant among eighth graders. MTF data also show a substantial increase in lifetime MDMA use (from 5.1 to 7.2 percent) among young adults aged 19 to 28 between 1997 and 1998, but from 1998 to 1999 the lifetime rate of MDMA use in this age group remained stable.

Although some MDMA production occurs in the United States, 1990 regulations making it illegal to purchase or possess safrole, isosafrole, or piperonal--the primary MDMA precursors--without a permit seem to have thwarted large-scale domestic production. Western Europe is generally considered the primary source of the world's supply of MDMA. Well-organized MDMA production groups have established operations in the rural regions of the Benelux countries--Belgium, the Netherlands, and Luxembourg--driven primarily by the availability of chemicals and international multimodal commercial transportation. Clandestine laboratories in the Benelux countries now produce at least 80 percent of the MDMA consumed worldwide.

According to DEA's Special Testing and Research Laboratory, the chemicals and equipment

necessary to produce a kilogram of MDMA can be purchased for as little as \$500. When first produced, MDMA is a nearly 100 percent pure powder with a licorice-like scent. The powder normally is pressed into pills and stamped with distinct, identifying designs. The DEA estimates that over 90 percent of the MDMA smuggled into the United States is in capsule or pill form; the remainder is powder. Although pill presses vary widely in speed, the best presses can process as many as 500,000 tablets per hour. The pills, which cost between 20 and 25 cents to produce, are normally sold to wholesale organizations for \$1 to \$2 apiece.

Israeli and Russian drug trafficking organizations, which often cooperate with one another, have dominated MDMA smuggling to the United States since the mid-1990s, establishing distribution hubs in Los Angeles, Miami, New York, Philadelphia, and Washington, D.C. Both employ similar techniques, using couriers, express mail services, and sea containers to smuggle large quantities of MDMA into the United States. Couriers frequently smuggle at least 10,000 pills in each shipment. The DEA believes, however, that express mail services may now be the most popular smuggling method. Information provided to NDIC by state and local law enforcement agencies indicates that express mail services also are the preferred method to move MDMA within the United States. The number of seizures from sea containers is low compared with those involving other smuggling methods, but the DEA expects maritime smuggling to increase as wholesale distribution organizations become more sophisticated and seek to move larger shipments to meet the growing U.S. demand for MDMA.

Analysts at DEA Headquarters believe that the use of the Caribbean as a transshipment point by MDMA trafficking organizations is a distinct possibility. MDMA destined for the United States is predominantly transported directly via airfreight and express mail or carried by couriers traveling on commercial airlines. But the Caribbean's numerous and established drug transportation groups, abundance of couriers, historic cultural and political connections to Europe, and frequent commercial flights from Europe provide trafficking organizations with the means to route synthetic drugs through the Caribbean.

Although Israeli and Russian groups dominate MDMA smuggling, the involvement of domestic groups appears to be increasing. Some groups based in Chicago, Phoenix, Florida, and Texas have secured their own sources of supply in Europe. Domestic groups generally are less sophisticated and less disciplined than their Israeli and Russian counterparts and more likely to take risks when smuggling. They often attempt to smuggle more pills in a single trip than can be transported undetected.

Once inside the United States, MDMA is sold to midlevel wholesale distribution groups who in turn sell to retail distribution groups or individual distributors. Most MDMA is pressed into pills before entering the distribution system, limiting both the opportunities to cut the MDMA and the number of distribution levels characteristic of many other drugs.

Midlevel wholesale distribution groups link retail distributors with wholesale suppliers. Midlevel groups normally purchase at least 1,000 pills at a time from wholesalers. Some groups purchase 30 to 100 pounds (500,000 pills) at a time, and there is a trend toward larger deliveries to midlevel distribution groups.

Retail distributors, usually young adult Caucasian males, normally purchase 1,000 to 2,000 pills at a time from midlevel distributors. Most retail distributors are independent dealers seeking to take advantage of the growing market and high profit margins. Retail distributors maintain consistent patterns, normally selling at the same clubs on specific nights. Some retail distributors have direct sources of supply within Israeli and Russian criminal organizations and may sell MDMA in Russian-owned clubs. Other retail distributors have stated that they can sell up to 1,000 pills a night at raves, since many users buy several pills in the course of an evening. Each pill sold can net retail distributors \$10 to \$30. Retail prices range from \$15 to \$40.

MDMA users, particularly dancers at raves, employ a variety of methods to disguise or conceal MDMA tablets. Among the more popular methods are stringing the tablets on candy necklaces, wrapping them in cellophane candy packages, and stacking them in straws.

GHB

GHB is a central nervous system depressant that was initially used by bodybuilders to stimulate muscle growth. In recent years, it has become popular among young adults who attend raves. Agencies in Boston, Detroit, Los Angeles, Miami, Phoenix, and Seattle have reported the use of GHB as a "date rape drug." It is odorless, tasteless, and virtually undetectable if slipped into a drink. Medical and law enforcement experts say victims can lose consciousness within 20 minutes of ingesting GHB and often have no memory of events following ingestion. It is difficult to trace, usually leaving the body within 24 hours. GHB is available as a liquid or powder and can be manufactured in home laboratories with industrial cleaning solvents and other commonly available ingredients.

Calls to poison centers and emergency department episodes involving GHB have increased in many areas throughout the nation. Over 70 percent of emergency department episodes for GHB in 1998 involved Caucasians, almost 70 percent involved males, and 65 percent involved persons aged 18 to 25.

Information from federal, state, and local law enforcement agencies documents dramatic increases in the availability and use of GHB nationwide. Almost 130 of 412 agencies responding to the National Drug Threat Survey identify GHB as readily available and 49 note the appearance of GHB within their areas in the past year. Most agencies note dramatic increases in availability, attributing the increases to a concurrent rise in rave activity. Despite reports of the availability of GHB and its use as a date rape drug, national studies and law enforcement data provide few details on the production, trafficking, and abuse of GHB.

Combining GBL (gamma butyrolactone) with either sodium hydroxide or potassium hydroxide produces GHB. Unlike with other drugs, independent laboratory operators produce GHB almost exclusively in the areas in which it is sold. Law enforcement agencies draw a direct correlation between GHB production and distribution locations and colleges and universities. Many attribute increases in local production to the availability of recipes on the Internet. As with MDMA, the primary distributors of GHB are young adult Caucasian males, particularly college students.

On February 18, 2000, President Clinton signed the "Hillory J. Farias and Samantha Reid Date Rape Drug Prohibition Act of 1999" (Public Law 106-172), legislating GHB a Schedule I controlled substance and GBL a List I controlled chemical. This law became effective on March 12, 2000, and should significantly limit the availability of GBL.

Although available in both liquid and powdered forms, GHB is most frequently encountered in liquid form. GHB users conceal the drug in empty bottles of breath freshener, eye drops, water, and contact solution. They sometimes place the drug on candy, especially lollipops.

GBL and BD (1,4-butanediol) are chemicals used in industrial cleaners and are closely related to GHB. Both chemicals are precursors to GHB and both, when ingested alone, are metabolized into GHB. GBL and BD have been sold as dietary supplements and marketed under a variety of exaggerated health claims, from the treatment of insomnia to the reversal of baldness.

Source: NDIC National Drug Threat Survey, January 10, 2000.

Ketamine

Ketamine, or ketamine hydrochloride, also known as "Special K," "K," "Vitamin K," "ket," or "kit-kat," is a commercially produced prescription drug available only to medical practitioners. It is primarily a veterinary preoperative anesthetic, but it is neither manufactured nor approved for medical use in the United States. Ketamine is found most frequently in liquid form, but allowing it to evaporate can produce a white powder similar in appearance to cocaine. Liquid ketamine can be injected, applied to cigarettes and smoked, or ingested. Powdered ketamine can be snorted, smoked, or ingested. Ketamine's effects, in either form, can last up to 2 hours and include hallucinations similar to those caused by PCP. Law enforcement agencies report that like GHB, ketamine has been used as a date rape drug. Its popularity as a club drug has increased as raves and related activity have spread from large metropolitan areas to smaller cities and towns.

Law enforcement agencies nationwide document increases in the availability and use of ketamine that directly coincide with increases in local rave and dance club activity. Almost 10 percent of the 412 agencies responding to the National Drug Threat Survey identify ketamine as readily available. Ten agencies note the appearance of ketamine in the past year. Several agencies report increases in the number of break-ins at veterinary clinics to steal ketamine.

National studies and law enforcement data provide few details on the trafficking and abuse of ketamine, but as with GHB, state and local law enforcement information indicates a correlation between the availability and use of ketamine and the presence of college and university students.

Rohypnol

Rohypnol, also known as "roofies," "rophies," "ruffies," "R2," "roofenol," "Roche," "roachies," "La Rocha," "rope," and "rib," is a powerful, commercially manufactured depressant containing flunitrazepam hydrochloride. It belongs to a family of drugs known collectively as benzodiazepines. Rohypnol is not licensed for sale nor approved for medical use in the United

States. It is manufactured primarily in Europe and Latin America and is readily available and inexpensive in Mexico, the primary source area. Significant increases in Rohypnol use for San Diego and Imperial Counties probably are due to the counties' proximity to Mexico.

Rohypnol is about 10 times stronger than Valium and reportedly is one of the more commonly used date rape drugs. Like GHB and ketamine, it is undetectable in the drink of an unsuspecting victim, although the principal manufacturer of Rohypnol now adds a blue dye to aid detection. Rohypnol produces sedation, amnesia, and muscle relaxation within 30 minutes of ingestion and can cause blackouts that last from 8 to 24 hours. It is popular at raves and frequently is used with alcohol, which intensifies its effects.

Only 9 agencies of 412 responding to the National Drug Threat Survey identify Rohypnol as readily available in their areas. Many others note a decline in the availability and use of Rohypnol. Recent surges in the production, availability, and use of GHB seem to have prompted a decline in the availability and use of Rohypnol. Although past year Rohypnol use declined slightly among eighth graders from 1998 to 1999, lifetime and current use remained stable. The rate of use in all categories remained stable among tenth and twelfth graders.

Hallucinogens

Hallucinogens include a broad range of drugs that induce hallucinations. Among them are LSD, PCP, and psilocybin--a substance found in varieties of mushrooms that are frequently referred to as "magic mushrooms" or "psychedelic mushrooms." The popularity of hallucinogens seems to have grown, and many agencies attribute the resurgence to increased rave and dance club activity.

According to data from the 1999 NHSDA, approximately 25 million people aged 12 or older used hallucinogens sometime in their lifetime. Some 3 million reported past year hallucinogen use, and 1 million reported current use. Admissions for the abuse of hallucinogens remained constant from 1994 to 1997, accounting for only 0.2 percent of all TEDS admissions in each year, and dropped to 0.1 percent in 1998. Those admitted for the abuse of hallucinogens were primarily white, male, and of high school and college age. Of admissions for hallucinogens, 51 percent were between the ages of 15 and 19, and 23 percent were between 20 and 24; 86 percent of admissions for hallucinogens used other drugs as well.

The PRIDE Survey shows an overall decline in hallucinogen use among junior and senior high school students, from 6.7 percent in the 1995-1996 school year to 4.9 percent in the 1999-2000 school year. Between the 1998-1999 and 1999-2000 school years, past year hallucinogen use declined among all three groups surveyed by PRIDE (junior high school, senior high school, and twelfth graders alone).

Independent producers and suppliers are the primary source of hallucinogens. Like club drugs, hallucinogens are distributed and used primarily by young adult Caucasians, which probably best explains the appearance of these drugs at raves.

LSD

LSD is a powerful synthetic hallucinogen produced primarily in California, though some reports suggest limited production in other areas. The potency of the LSD available today (20-80 micrograms) is considerably lower than the levels of the 1960s and 1970s (100-300 micrograms). Production is time-consuming and complex, requiring some degree of expertise in chemistry. The primary precursor chemicals are either ergotamine tartrate or lysergic acid amide, both of which are controlled by federal regulations. The control of precursor chemicals undoubtedly limits widespread LSD production in the United States.

Reports of increased availability and use of LSD are supported by national demand indicators. NHSDA data for 1999 indicate that approximately 19 million individuals aged 12 or older reported lifetime LSD use, approximately 2 million reported past year use, and approximately 500,000 reported current use.

Source: NDIC National Drug Threat Survey, January 10, 2000.

According to MTF data, LSD use rose substantially among eighth, tenth, and twelfth graders between 1991 and 1997. Use has remained relatively stable since 1997 except for a decline in past month use by eighth graders between 1997 and 1998. Although the rate of lifetime use for all three grades in 1999 is lower than the high reported in 1996, it remains well above 1992 levels, especially among tenth and twelfth graders.

Despite reports of increased LSD use, DAWN emergency department mentions of LSD remained relatively stable between 1994 and 1998, averaging just over 5,100 per year.

Information from federal, state, and local law enforcement agencies also documents significant increases in the availability and use of LSD nationwide. Over 200 of 412 agencies responding to the National Drug Threat Survey identify LSD as readily available. Many agencies associate increases in LSD availability with college students and increases in rave activity. LSD is available in more forms than ever before, most commonly in liquid, crystal, or gel form but also in blotter paper, microdots, gel tabs, sugar cubes, and liquid vials. As with club drugs, the primary distributors of LSD are young adult Caucasian males.

Most LSD users are young adults, usually college students, but a number of agencies report increases in LSD use by high school students. Law enforcement agencies also report the use of a wider variety of methods to administer and conceal the drug than at any time in the past, including the application of liquid LSD to candy and chewing gum and concealment in bottles of breath freshener.

Psilocybin

Psilocybin is the active ingredient in a number of mushrooms, but potency varies widely by species. Independent growers cultivate mushrooms indoors and frequently harvest those that grow wild. Doses normally range from 20 to 60 milligrams, and the effects generally last from 5

to 6 hours.

Psilocybin mushrooms have undergone a resurgence in popularity that, like club drugs and other hallucinogens, can be attributed to young adults and the rave culture. Over 100 agencies that responded to the National Drug Threat Survey identify psilocybin mushrooms as readily available, and many note significant increases in availability and use in the past year. Many also note increased use among high school students.

Information from the NHSDA shows a significant increase in the estimated number of lifetime psilocybin users between 1997 (10,200) and 1998 (12,321). The overall increase includes statistically significant increases in reported lifetime psilocybin use in the 18 to 25 and 35 and over age groups.

The average price for psilocybin is \$150 an ounce, which apparently has lured newcomers to mushroom cultivation and distribution. The most frequently identified sources of mushrooms are Oregon, California, and Washington State, although agencies in Georgia, Mississippi, and Tennessee report collection of wild mushrooms or indoor cultivation. Almost every agency that identifies a source of mushrooms outside the state identifies the mail or parcel delivery services as the primary means of transportation.

Source: NDIC National Drug Threat Survey, January 10, 2000.

PCP

PCP is a hallucinogen directly associated with street gangs, particularly in the Los Angeles area. PCP is relatively easy to manufacture and requires little knowledge of chemistry. Precursor chemicals are readily available and inexpensive. Street gangs primarily are associated with PCP production, distribution, and use, but there are reports of PCP being sold at raves and dance clubs. Over 10 percent of agencies responding to the National Drug Threat Survey identify PCP as readily available, but only the Austin (TX) Police Department notes substantial increases in availability.

Between 1997 and 1998, reported lifetime use of PCP among all respondents to the NHSDA increased from 3.0 percent to 3.5 percent. Lifetime use declined among respondents aged 12 to 17, but increased for all other age groups. According to TEDS, PCP was reported as a primary substance of abuse by only 0.1 percent of admissions for treatment in 1998. Almost two-thirds of admissions for PCP were male, 36 percent were black, 29 percent were white, and 31 percent reported daily use of PCP.

Pharmaceuticals

The abuse of pharmaceuticals has not received as much publicity as the abuse of club drugs and other illegal drugs, but it is a significant and growing problem in many areas of the United States. Almost 200 of the 412 agencies that responded to the National Drug Threat Survey identify a

problem with pharmaceutical abuse in their jurisdictions, and over half of those note dramatic increases in pharmaceutical diversion and abuse. Many agencies consider the problem very underrated and attribute it to the ease with which abusers can obtain prescription drugs over the Internet, by phone, and at drive-through pharmacies.

Among the pharmaceuticals most frequently identified by law enforcement agencies as abused in their areas, diazepam (Valium) and hydrocodone top the list. Others frequently mentioned as abused include Xanax, Vicodin, OxyContin, Lorcet, Dilaudid, Percocet, Soma, alprazolam, Darvocet, and morphine.

Prescription fraud, the sale of prescriptions by unscrupulous medical professionals, and outright theft are the most frequent means of obtaining or diverting pharmaceuticals for illegal use. A number of agencies identify increases in the incidents of schoolchildren selling prescription drugs, particularly Ritalin, to classmates. Several agencies note increases in the abuse of pharmaceuticals by heroin addicts and users of MDMA and other illegal drugs. The pharmaceuticals are taken to ease the effects of those other drugs.

Key Developments

The ODD situation continues to worsen, spurred by the expansion of the rave culture throughout the nation. Law enforcement agencies are clearly more concerned with club drugs, particularly MDMA and GHB, than other drugs in the ODD category, and their concern seems to be justified.

The Maine Drug Enforcement Agency, whose agents frequently speak to schoolchildren and their parents on drug abuse issues, reports that increasingly, students and parents ask more questions about MDMA, GHB, ketamine, and Rohypnol than any other subject.

The Los Angeles Police Department reports that the sale of MDMA, GHB, and ketamine, formerly restricted almost exclusively to raves, has moved to open-air street sales. Many agencies note significant increases in MDMA investigations and seizures.

The Phoenix Police Department reports tremendous increases in rave activity in the past year and notes recent investigations of several local MDMA laboratories. The department also reports that MDMA trafficking organizations are becoming more sophisticated and more organized.

The Fairfax County (VA) Police Department reports that MDMA seizures increased from approximately 200 dosage units in 1998 to over 30,000 in 1999. The MDMA was shipped from New York, Philadelphia, and Baltimore. The department reports that at least two MDMA tablets reportedly contained heroin, which was later verified through specialized field tests.

The DEA Field Divisions in Chicago, Miami, New York, and Philadelphia also report the availability of tablets allegedly containing both heroin and MDMA, but these reports have yet to be substantiated by laboratory testing. The combination tablets, known by the street names of "space," "roll," and "bean," are reportedly identifiable by stamps--such as a three-pointed star or a Batman logo--used to signify the potency and content of MDMA, heroin, and sometimes cocaine

or methamphetamine.

Significant increases in the availability and use of MDMA and increases in investigations and seizures of MDMA were reported by law enforcement in Alabama, Connecticut, Delaware, Florida, Maryland, Minnesota, Missouri, North Dakota, Ohio, Rhode Island, Texas, and Virginia.

Information from the DEA Chicago Field Division documents the appearance of PMA, a potent and potentially lethal amphetamine analog, in the United States. The DEA documents other PMA seizures in Prince George County, Virginia, and Broward County, Florida. The highly publicized deaths of two teens in Chicago, who believed they were using MDMA, were attributed to PMA.

Traffickers in countries outside Western Europe may be developing the capability to produce MDMA. Analysts and Special Agents at DEA's Special Operations Division warn that the recent seizure of two laboratories in China and one in Colombia, as well as large-scale methamphetamine production in Mexico, mark traffickers in these countries as potential sources of MDMA.

The Wyoming Division of Criminal Investigation reports the recent seizure of a major GHB laboratory in Cheyenne. The laboratory was capable of producing multiple pounds of GHB, based on the equipment and the amounts of precursors found.

Information generated by a multiagency investigation in Phoenix and subsequent analysis of seized documents by NDIC analysts has revealed the widespread use of the Internet to market GBL to GHB producers nationwide. Postseizure analysis shows that thousands of gallons of GBL were shipped from a single Internet distributor to over 1,000 potential GHB producers in 47 states. Many of the primary destinations for large shipments of the GBL were cities and towns with colleges and universities. Follow-up investigation revealed that some purchasers of GBL are convicted pedophiles.

Information provided by the Gainesville (FL) Police Department, Genesee County (MI) Sheriff's Department, Lee County (MS) Sheriff's Department, Maine Drug Enforcement Agency, Marietta/Cobb/Smyrna (GA) Organized Crime Unit, and Wyandot County (OH) Sheriff's Office document the recent appearance of LSD gel tabs. The Gainesville Police Department further reports recent seizures of thousands of gel tabs. Gel tabs may be gaining popularity because they are easy to administer and look less like an illegal drug. The availability of gel tabs indicates the use of new and possibly more sophisticated production methods.

Projections

The rave culture, which has spurred the introduction of a variety of drugs to a new group of users, will continue to grow and negatively affect teens and young adults throughout the nation. The widespread availability and use of drugs at raves will place greater demands on already overburdened law enforcement agencies and treatment facilities well into the future.

The demand for MDMA has not peaked as evidenced by major increases in the number of

seizures and in the use of MDMA by high school students and young adults. As demand increases, MDMA use likely will expand beyond raves and dance clubs to other social settings. Large-scale domestic MDMA production likely will remain impracticable because of the chemistry background required and regulations restricting the availability of precursors in the United States. Nevertheless, law enforcement agencies are likely to encounter increasing numbers of small-scale MDMA laboratories operated locally by independent producers attempting to skirt wholesale suppliers and midlevel distributors to maximize their profits.

End Notes

According to the National Institute on Drug Abuse, the term "club drugs" refers to drugs used by young adults at all-night parties, dance clubs, or raves. Club drugs include MDMA, GHB, Rohypnol, ketamine, and LSD.

The use of trademarked names, such as Rohypnol and Valium, in this assessment does not imply any criminal activity on the part of the companies that manufacture these drugs.

National monitoring indicators do not yet include information on GHB, but the MTF Study has added questions on GHB for the 2000 study.

TEDS reporting on hallucinogens includes LSD, DMT (dimethyltryptamine), STP (4 methyl 2,5 dimethoxyamphetamine, or synthetic mescaline), psilocybin, mescaline, and peyote.

Statistic of the Week (July 2005)

By the time they have reached their senior year in high school, 3 out of 5 young people in the US have had sex, and 1 in 5 of those has had sex with 4 or more partners, according to the 2001 Centers for Disease Control and Prevention's Youth Risk Behavior Surveillance. A study by the Kaiser Family Foundation on the media habits of young people found that on average, 8- to 18-year-olds watch nearly 4 hrs of television a day and devote nearly 2 hrs a day listening to music. Another Kaiser report released 2 years ago said that in a sampling of programming from the 2001-02 television season, 64% of the shows included sexual content, 32% sexual behavior and 14% featured strong suggestions of sexual intercourse.

[The Washington Post, June 20, 2005]

Media Quote of the Week

"The Swan was a worthless piece of television I'm sad to say I produced."

-- David Lyle, GM of Fox Reality Channel. [Calgary Sun, July 6, 2005]

Attractive Nuisance: Adult Cartoons Lure Young Viewers

Most parents would agree that references to bestiality, incest, masturbation and necrophilia don't belong on television, but would you believe that such content has not only appeared on television, it was included in a cartoon?

Fox's raunchy *Family Guy* made a strong come back after being off the air for three years, thanks to the success of DVD sales and heavy promotion on the Cartoon Network's Adult Swim program block. And although the content is decidedly not for children, children are tuning-in in droves. According to USA Today, *Family Guy* was the fifth-highest-rated show among 2-11-year-olds, averaging nearly a million viewers in that age group. Among teens ages 12-17, it is the second most popular show on television.

It is a sad irony that producers seem to be able to get away with more outrageous content because it's a cartoon - but because it's a cartoon, children are more likely to watch.

And *Family Guy* isn't the only outrageous cartoon on television. On July 31, Nickelodeon - a network that supposedly caters to young viewers -- is bringing back *The Ren & Stimpy Show*. This adult-cartoon series regularly features crude humor and sexual content. In 2003 the cartoon was briefly revived on Spike as *Ren & Stimpy: Adult Party Cartoon*. In its most recent incarnation, Ren and Stimpy were depicted as lovers, and episodes included references to their sex life.

For more info about *Family Guy* and other primetime TV shows check out PTC's Family TV Guide at <http://www.parentstv.org/ptc/shows/main.asp?shwid=504>

Unedited "F-Word" during ABC's Live 8 Broadcast

This week the PTC filed an indecency complaint with the FCC about the ABC Network airing of *Live 8: A Worldwide Concert Event* for the use of unedited profanity. We are also encouraging our members to file complaints at <http://www.parentstv.org/ptc/action/live8/main.asp>. The PTC has asked the FCC to levy a Notice of Apparent Liability against each ABC affiliate that aired the unedited program. 8K complaints have been filed so far through PTC's online FCC complaint form.

Audiences tuning-in to this family hour broadcast got an unexpected surprise at the bottom of the first hour. During the Who's performance of "Who Are You," a line in the chorus "who the f--- are you" was aired unedited. The concert program that contained the indecent material aired at the 8:00 - 9:00 p.m. hour (Eastern Time) on July 2, 2005 on the ABC Network.

The program was aired on a tape delay, which should have given ABC ample time to edit all

obscenities from the concert prior to broadcast. ABC took steps to edit other profanity from the broadcast. But given the time of day that this program aired, the broad family appeal of the Live 8 event, as well as the program's PG rating, ABC should have been more diligent.

In March 2004, the FCC issued a warning to broadcasters that the use of the F-word on television is indecent and profane, saying, "All broadcasters are on clear notice that similar broadcasts in the future will lead to forfeitures and potential license revocation, if appropriate."

Yet the FCC still has not ruled on a number of outstanding indecency complaints stemming from the use of the "F-word" on primetime television broadcasts. So long as those complaints remain un-adjudicated, broadcasters will continue to permit 'mistakes' like the Live 8 concert obscenity to occur. And that is inexcusable.

This kind of language does not belong on network television, particularly when so many children are in the audience. The networks and the FCC must understand that the public will not tolerate this continued abuse of the public airwaves. The television networks must abide by the indecency law and the FCC must vigilantly enforce the law. And this serves as yet another example of why the Senate needs to follow the lead of the House and vote to increase the indecency fines. The financial penalties for violating the law must no longer be a reasonable cost of doing business.

To take action, go to <http://www.parentstv.org/ptc/action/live8/main.asp>.

Fox TV Series Features Graphic and Disturbing Themes

The Fox broadcast network recently introduced themes of forced sodomy and S&M fetishes to prime time viewing audiences.

On June 15th, Fox aired an episode of its new summer series *The Inside* that dealt with a series of connected rapes and murders. In the course of the investigation, FBI agents discovered that all of the victims belonged to a private club that catered to clients with Sado-masochistic sexual fetishes. The primary suspect, Brandt, was also a member of the S&M sex club until he was kicked out for violating the club's rules. He had sexual relations with all of the victims and was implicated years earlier in connection with a series of rapes. In the end it turns out that the detective who had trailed Brandt in the earlier investigation was raping and murdering each of the women Brandt had sex with. In the end he kidnaps Brandt, rapes him, then commits suicide.

In addition to graphic discussions about their sexual practices, the episode also included scenes of a man and woman engaged in S&M role playing, gory images of dismembered and mutilated bodies, and a strongly implied male rape.

All of this explicit content aired at 9:00 p.m. on the East and West coasts, which means that children watching TV at 8:00 p.m. in the Central and Mountain time zones could have easily come across this dark and disturbing episode. In fact, at least half a million children did see the episode, according to Nielsen Media Research.

For a detailed description of the content or to view a video clip from the June 15th episode, go to <http://www.parentstv.org/ptc/action/inside/content.htm>. We warn you, the content is highly offensive.

It has been said that evil triumphs when good people do nothing. If we sit back and do nothing, we are giving our tacit consent for this kind of content to proliferate on television, filling millions of young minds with horrific images and warped views about sexuality and human relationships.

How TV Affects Your Child

Most children plug into the world of television long before they enter school: 70% of child-care centers use TV during a typical day. In a year, the average child spends 900 hours in school and nearly 1,023 hours in front of a TV.

According to the American Academy of Pediatrics (AAP), kids in the United States watch about 4 hours of TV a day - even though the AAP guidelines say children older than 2 should watch no more than 1 to 2 hours a day of quality programming.

And, according to the guidelines, children under age 2 should have no "screen time" (TV, DVDs or videotapes, computers, or video games) at all. During the first 2 years, a critical time for brain development, TV can get in the way of exploring, learning, and spending time interacting and playing with parents and others, which helps young children develop the skills they need to grow cognitively, physically, socially, and emotionally.

Of course, television, in moderation, can be a good thing: Preschoolers can get help learning the alphabet on public television, grade schoolers can learn about wildlife on nature shows, and parents can keep up with current events on the evening news. No doubt about it - TV can be an excellent educator and entertainer.

But despite its advantages, too much television can be detrimental:

Research has shown that children who consistently spend more than 4 hours per day watching TV are more likely to be overweight.

Kids who view violent events, such as a kidnapping or murder, are also more likely to believe that the world is scary and that something bad will happen to them.

Children's advocates are divided when it comes to solutions. Although many urge for more hours per week of educational programming, others assert that no TV is the best solution. And some say it's better for parents to control the use of TV and to teach children that it's for occasional entertainment, not for constant escapism.

That's why it's so important for you to monitor the content of TV programming and set viewing limits to ensure that your child doesn't spend time watching TV that should be spent on other activities, such as playing with friends, exercising, and reading.

Violence

To give you perspective on just how much violence kids see on TV, consider this: The average American child will witness 200,000 violent acts on television by age 18. TV violence sometimes begs for imitation because violence is often demonstrated and promoted as a fun and effective way to get what you want.

And as the AAP points out, many violent acts are perpetrated by the "good guys," whom children have been taught to emulate. Even though children are taught by their parents that it's not right to hit, television says it's OK to bite, hit, or kick if you're the good guy. And even the "bad guys" on TV aren't always held responsible or punished for their actions.

The images children absorb can also leave them traumatized and vulnerable. According to research, children ages 2 to 7 are particularly frightened by scary-looking things like grotesque monsters. Simply telling children that those images aren't real won't console them, because they can't yet distinguish between fantasy and reality.

Kids ages 8 to 12 are frightened by the threat of violence, natural disasters, and the victimization of children, whether those images appear on fictional shows, the news, or reality-based shows. Reasoning with children this age will help them, so it's important to provide reassuring and honest information to help ease your child's fears. However, you may want to avoid letting your child view programs that he or she may find frightening.

Risky Behaviors

TV is chock full of programs and commercials that often depict risky behaviors such as sex and substance abuse as cool, fun, and exciting. And often, there's no discussion about the consequences of drinking alcohol, doing drugs, smoking cigarettes, and having premarital sex.

For example, studies have shown that teens who watch lots of sexual content on TV are more likely to initiate intercourse or participate in other sexual activities earlier than peers who don't watch sexually explicit shows.

Alcohol ads on TV have actually increased over the last few years and more underage children are being exposed to them than ever. A recent study conducted by the Center on Alcohol Marketing and Youth (CAMY) at Georgetown University found that the top 15 teen-oriented programs in 2003 had alcohol ads.

And although they've banned cigarette ads on television, kids and teens can still see plenty of people smoking on programs and movies airing on TV. This kind of "product placement" makes

behaviors like smoking and drinking alcohol seem acceptable. In fact, kids who watch 5 or more hours of TV per day are far more likely to begin smoking cigarettes than those who watch less than the recommended 2 hours a day.

Obesity

Health experts have long linked excessive TV-watching to obesity - a significant health problem today. While watching TV, children are inactive and tend to snack. They're also bombarded with advertising messages that encourage them to eat unhealthy foods such as potato chips and empty-calorie soft drinks that often become preferred snack foods.

Too much educational TV has the same indirect effect on children's health. Even if children are watching 4 hours of quality educational television, that still means they're not exercising, reading, socializing, or spending time outside.

But studies have shown that decreasing the amount of TV children watched led to less weight gain and lower body mass index (BMI - a measurement derived from someone's weight and height).

Commercials

According to the AAP, children in the United States see 40,000 commercials each year. From the junk food and toy advertisements during Saturday morning cartoons to the appealing promos on the backs of cereal boxes, marketing messages inundate kids of all ages. And to them, everything looks ideal - like something they simply have to have. It all sounds so appealing - often, so much better than it really is.

Under the age of 8 years, most children don't understand that commercials are for selling a product. Children 6 years and under are unable to distinguish program content from commercials, especially if their favorite character is promoting the product. Even older children may need to be reminded of the purpose of advertising.

Of course, it's nearly impossible to eliminate all exposure to marketing messages. You can certainly turn off the TV or at least limit kids' watching time, but they'll still see and hear advertisements for the latest gizmos and must-haves at every turn.

But what you *can* do is teach your child to be a savvy consumer by talking about what he or she thinks about the products being advertised as you're watching TV together. Ask thought-provoking questions like, "What do you like about that?," "Do you think it's really as good as it looks in that ad?," and "Do you think that's a healthy choice?"

Explain, when your child asks for products he or she sees advertised, that commercials and other ads are designed to make people want things they don't necessarily need. And these ads are often meant to make us think that these products will make us happier somehow. Talking to kids about what things are like in reality can help put things into perspective.

To limit your child's exposure to TV commercials, the AAP recommends that you:

Have your kids watch public television stations (some programs are sponsored - or "brought to you" - by various companies, although the products they sell are rarely shown).

Tape programs - without the commercials.

Buy or rent children's videos or DVDs.

Understanding TV Ratings and the V-Chip

Two ways you can help monitor what your child watches are:

TV Parental Guidelines

Modeled after the movie rating system, this is an age-group rating system developed for TV programs. These ratings are listed in television guides, TV listings in your local newspaper, and on the screen in your cable program guide. They also appear in the upper left-hand corner of the screen during the first 15 seconds of TV programs. But not all channels offer the rating system. For those that do, the ratings are:

TV-Y: Suitable for all children

TV-Y7: Directed toward kids 7 years and older (children who are able to distinguish between make-believe and reality); may contain "mild fantasy violence or comedic violence" that may scare younger kids

TV-Y7-FV: Fantasy violence may be more intense in these programs than others in the TV-Y7 rating

TVG: Suitable for a general audience; not directed specifically toward children, but contains little to no violence, sexual dialogue or content, or strong language

TV-PG: Parental guidance suggested; may contain an inappropriate theme for younger children and contains one or more of the following: moderate violence (V), some sexual situations (S), occasional strong language (L), and some suggestive dialogue (D)

TV-14: Parents strongly cautioned - suitable for only children over the age of 14; contains one or more of the following: intense violence (V), intense sexual situations (S), strong language (L), and intensely suggestive dialogue

TV-MA: Designed for adults and may be unsuitable for kids under 17; contains one or more of the following: graphic violence (V), strong sexual activity (S), and/or crude language (L)

V-chip (V is for "violence"). This technology was designed to enable you to block television

programs and movies you don't want your child to see. All new TV sets that have screens of 13" or more now have internal V-chips, but set-top boxes are available for TVs made before 2000. So how exactly does the V-chip work? It allows you to program your TV to display only the appropriately-rated shows - blocking out any other, more mature shows.

The Federal Communications Commission (FCC) requires that V-chips in new TVs recognize the TV Parental Guidelines and the age-group rating system and block those programs that don't adhere to these standards.

For many, the rating system and V-chip may be valuable tools. But there is some concern that the system may be worse than no system at all. For example, research shows that preteen and teen boys are more likely to want to see a program if it's rated MA (mature audience) than if it's PG (parental guidance suggested). And parents may rely too heavily on these tools and stop monitoring what their children are watching.

Also, broadcast news, sports, and commercials aren't rated, although they often present depictions of violence and sexuality. The rating system also doesn't satisfy some family advocates who complain that they fail to give enough information about a program's content to allow parents to make informed decisions about whether a show is appropriate for their child.

So even if you've used the V-chip to program your TV or a show features the age-group ratings, it's still important to preview shows to determine whether they're appropriate for your child and turn off the TV if the content becomes inappropriate for your child.

Teaching Your Child Good TV Habits

Here are some practical ways you can make TV-viewing more productive in your home:

Limit the number of TV-watching hours:

Stock the room in which you have your TV with plenty of other non-screen entertainment (books, kids' magazines, toys, puzzles, board games, etc.) to encourage your child to do something other than watch the tube.

Keep TVs out of your child's bedroom.

Turn the TV off during meals.

Don't allow your child to watch TV while doing homework.

Treat TV as a privilege that your child needs to earn - not a right to which he or she is entitled.

Tell your child that TV-viewing is allowed only after chores and homework are completed.

Try a weekday ban. Schoolwork, sports activities, and job responsibilities make it tough to find

extra family time during the week. Record weekday shows or save TV time for weekends, and you'll have more family togetherness time to spend on meals, games, physical activity, and reading during the week.

Set a good example by limiting your own television viewing.

Check the TV listings and program reviews ahead of time. For programs your family can watch together (i.e., developmentally appropriate and nonviolent programs that reinforce your family's values). Choose shows, says the AAP, that foster interest and learning in hobbies and education (reading, science, etc.).

Preview programs before your child watches them.

Come up with a family TV schedule that you all agree upon each week. Then, post the schedule in a visible area (i.e., on the refrigerator) somewhere around the house so that everyone knows which programs are OK to watch and when. And make sure to turn off the TV when the "scheduled" program is over, instead of channel surfing until something gets your or your child's interest.

Watch TV with your child. If you can't sit through the whole program, at least watch the first few minutes to assess the tone and appropriateness, then check in throughout the show.

Talk to your child about what he or she sees on TV and share your own beliefs and values. If something you don't approve of appears on the screen, you can turn off the TV, then use the opportunity to ask your child thought-provoking questions such as, "Do you think it was OK when those men got in that fight? What else could they have done? What would you have done?" Or, "What do you think about how those teenagers were acting at that party? Do you think what they were doing was wrong?" If certain people or characters are mistreated or discriminated against, talk about why it's important to treat everyone equal, despite their differences. You can use TV to explain confusing situations and express your feelings about difficult topics (sex, love, drugs, alcohol, smoking, work, behavior, family life).

Teach your child to question and learn from what he or she views on TV.

Talk to other parents, your child's doctor, and your child's teachers about their TV-watching policies and kid-friendly programs they'd recommend.

Offer fun alternatives to television. If your child wants to watch TV, but you want him or her to turn off the tube, suggest that you and your child play a board game, start a game of hide and seek, play outside, read, work on crafts or hobbies, or listen and dance to music. The possibilities for fun without the tube are endless - so turn off the TV and enjoy the quality time you'll have to spend with your child.

Updated and reviewed by: Mary L. Gavin, MD

Date reviewed: February 2005

Attention Deficit Disorder (ADD), Attention Deficit Hyperactive Disorder (ADHD)

In the 1970s, the late researcher Professor Werner Halperin suggested that the rapid changes of sounds and images on TV may overwhelm the neurological system of a young child and cause attention problems that shows up at a later date.

Around the same period, Dr. Mathew Dumont of the Harvard Medical School suggested that the rapid changes of TV sounds and images may stimulate a child to mimic that dynamic behavior. That is, what we call ADHD may simply result from the child subconsciously copying the frenetic pace of TV programs. We now have a study that brings us solid findings about ADHD.

In April 2004, Dr. Dimitri Christakis and colleagues reported in the journal *Pediatrics* that early TV viewing (ages 1 and 3 were studied) is associated with attentional problems (ADHD) at a later age (age 7). The children studied watched a mean of 2.2 hours per day at age 1 and 3.6 hours per day at age 3.

Specifically, Christakis reports that watching about five hours of TV per day at age 1 is associated with a 28% increase in the likelihood of having attentional problems at age 7. A similar 28% increase at age 7 shows up for 3-year olds who watch about five hours of TV per day. Alternatively, each additional hour of TV watched above the mean at ages 1 and 3 increases the likelihood of attentional problems at age 7 by about 10%.

The authors include the following cautionary notes: (1) the determination of attentional problems (ADHD) was based on established checklists of behavior, not on a clinical diagnosis; (2) the authors relied on reports by parents to determine the amount of TV viewed - no direct monitoring of daily TV watching was done; and (3), the researchers had no data on the content of the TV programs watched.

Christakis and colleagues recommend that additional research be undertaken, and LimiTV strongly supports that. We also know, however, that each parent must make decisions based on what is currently known.

The steep rise in the number of children with ADD/ADHD, and the accompanying increase in the use of medications to treat these children (e.g., Ritalin), suggest that the problem is real and is being caused by something which is an inherent part of everyday life for American children.

Current findings suggest that TV watching in the early years may contribute to this behavioral problem. Therefore, LimiTV recommends minimal TV and video watching during the preschool years.

Doctors sometimes refer to the enormous brain development that occurs in the first few years of life as a 'wiring' of the brain, i.e., making connections between the billions of neurons with which

we are born. TV watching in these crucial early years may affect this wiring. That is, if the hours of TV watched exceed a certain level, a child's brain may be wired to respond more to the TV environment (rapid changes of sounds and images) than the natural environment. That level has not yet been determined, but since the AAP recommends no TV watching for the first two years of life, we could assume the level is quite low. It is for this reason as well that LimiTV recommends little-to-no TV through age 4.

Three New Studies Provide Compelling Arguments for Getting Television Sets Out of Children's Bedrooms

If concern about the rampant sex and violence on television doesn't convince you of the need to get the TVs out of your children's bedrooms, perhaps this will: Three new studies published this week in the Archives of Pediatrics & Adolescent Medicine have linked excessive television viewing by children to diminished academic achievement.

Researchers in New Zealand studied TV viewing and long-term academic achievement and found that individuals who watched more than three hours of television a day as children or as teens were more likely to not finish school or get a university degree by the age of 26, regardless of the individual's socioeconomic status or intelligence. An indication, researchers said, that excessive television viewing can impact an individual's well-being in the long-run. From: [Association of Television Viewing During Childhood With Poor Educational Achievement](#)

Researchers at the University of Washington tested 1,800 first graders and found that children who watched more than two hours of television a day as toddlers scored lower on reading and intelligence tests. From: [Children's Television Viewing and Cognitive Outcomes](#)

Finally, a study of 348 California third-graders found that children with television sets in their bedrooms performed worse on standardized tests than peers without television sets in their bedrooms. From: [The Remote, the Mouse, and the No. 2 Pencil](#)

Sex in the Media Precipitating a Public Health Crisis

An article published in the new issue of the *Journal of Pediatrics* suggests that sex in the media may be precipitating a national public health crisis. Despite the fact that teens are spending more time with sex-saturated mass media, few studies have examined the effects of mass media on teens' sexual attitudes and behaviors. Of more than 2500 studies on youth and media conducted between 1983 and 2004, only 12 explored how teens are affected by exposure to sexual imagery.

According to the study's author, Dr. S. Liliana Escobar-Chaves, the few studies that have explored this subject focused on TV and movies. Virtually nothing is known about how children are affected by radio shock-jocks, sexually suggestive song lyrics, or sexually-charged advertisements, magazines, Internet sites, and video and computer games.

Eighty-three percent of programming watched most frequently by teens contains sexual content, according to Dr. Gary Rose, president and chief executive of the Medical Institute for Sexual Health, but the portrayals of sexual activity in popular entertainment seldom discuss risk or consequences.

According to the researchers, 47% of high school students have had sexual intercourse. Of these, 7.4% report having sex before the age of 13 and 14% have had four or more sexual partners. Each year, nearly 900,000 teenaged girls in the United States become pregnant and almost 4 million adolescents are diagnosed with sexually transmitted infections. Sexually active adolescents are also at higher risk for suicide, depression, and drug and alcohol use.

Watching Sex on Television Predicts Adolescent Initiation of Sexual Behavior

Rebecca L. Collins, PhD*, Marc N. Elliott, PhD*, Sandra H. Berry, MA*, David E. Kanouse, PhD*, Dale Kunkel, PhD, Sarah B. Hunter, PhD and Angela Miu, MS*

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See complete study at: www.pediatrics.org/cgi/content/full/114/3/e280

Background

Early sexual initiation is an important social and health issue. A recent survey suggested that most sexually experienced teens wish they had waited longer to have intercourse; other data indicate that unplanned pregnancies and sexually transmitted diseases are more common among those who begin sexual activity earlier. The American Academy of Pediatrics has suggested that portrayals of sex on entertainment television (TV) may contribute to precocious adolescent sex. Approximately two-thirds of TV programs contain sexual content. However, empirical data examining the relationships between exposure to sex on TV and adolescent sexual behaviors are rare and inadequate for addressing the issue of causal effects.

Design and Participants

We conducted a national longitudinal survey of 1792 adolescents, 12 to 17 years of age. In baseline and 1-year follow-up interviews, participants reported their TV viewing habits and sexual experience and responded to measures of more than a dozen factors known to be associated with adolescent sexual initiation. TV viewing data were combined with the results of a scientific analysis of TV sexual content to derive measures of exposure to sexual content, depictions of sexual risks or safety, and depictions of sexual behavior (versus talk about sex but no behavior).

Outcome Measures

Initiation of intercourse and advancement in noncoital sexual activity level, during a 1-year period.

Results. Multivariate regression analysis indicated that adolescents who viewed more sexual content at baseline were more likely to initiate intercourse and progress to more advanced noncoital sexual activities during the subsequent year, controlling for respondent characteristics that might otherwise explain these relationships. The size of the adjusted intercourse effect was such that youths in the 90th percentile of TV sex viewing had a predicted probability of intercourse initiation that was approximately double that of youths in the 10th percentile, for all ages studied. Exposure to TV that included only talk about sex was associated with the same risks as exposure to TV that depicted sexual behavior. African American youths who watched more depictions of sexual risks or safety were less likely to initiate intercourse in the subsequent year.

Conclusions

Watching sex on TV predicts and may hasten adolescent sexual initiation. Reducing the amount of sexual content in entertainment programming, reducing adolescent exposure to this content, or increasing references to and depictions of possible negative consequences of sexual activity could appreciably delay the initiation of coital and noncoital activities. Alternatively, parents may be able to reduce the effects of sexual content by watching TV with their teenaged children and discussing their own beliefs about sex and the behaviors portrayed. Pediatricians should encourage these family discussions.

Who's Paying for this TV Filth?

FX Cable Channel "The Shield"

I urgently need you to add your voice to a national chorus of outrage against the disgusting rise of shocking sexual content and unbelievably bloody violence on TV.

The Parents Television Council is leading a campaign to stop the TV industry from continuing to pump degrading filth into our homes.

We're doing it by targeting irresponsible SPONSOR companies that continue to pay for the filth. And today I'm asking you to add your name to a **Warning to General Motors and GEICO Auto Insurance** as sponsors of "The Shield" -- one of the most sexually explicit, profane, and violent series ever to appear on television.

My name is Tim Winter. I'm the Executive Director of the Parents Television Council. For 10 years now the PTC has led a grassroots campaign to clean up television. Part of our

strategy has been to ask the commercial sponsors of television programming to stop paying for commercials on programs that consistently feature content that tramples all over the values we try to maintain in our homes.

And since "The Shield" is now in its third season on the "basic cable" FX channel, General Motors and GEICO have 100% advance knowledge of the raunchy filth and nauseating violence of "The Shield's" content. If a company pays for commercials on "The Shield," that company knows what it's sponsoring. Ignorance is no defense.

There's a summary of the content of recent episodes of "The Shield" on our PTC web site at www.parentstv.org/ptc/action/theshield/content.htm. It's shocking and disgusting and you will find it offensive -- and you definitely don't want any children in your household to be exposed to it. But I urge you to read it, so you'll be fully aware of what GM and GEICO are paying for.

And in fact GM and GEICO admit they're aware of "The Shield's" content. They don't plead ignorance.

The PTC sent a letter to "The Shield's" sponsors pointing out that "Your sponsorship of sexually graphic content, gratuitous violence and foul language is a reflection of your corporate values" and asking: **"Does this kind of material really reflect your hard-earned brand image and corporate principles?"**

GM responded in writing, saying in part:

"General Motors monitors the content of this and other programming in advance ... giving us the opportunity to pull our commercials if the content of the program is deemed inappropriate.... We will continue to screen future episodes of "The Shield" to ensure that the content complies with our corporate advertising guidelines."

Unbelievable! They pre-screened "The Shield" and concluded the content wasn't inappropriate, and did comply with their corporate advertising guidelines!

GEICO, meanwhile, didn't even have the courtesy to answer our letter, but after repeated phone calls a PTC representative managed to speak to the company's Director of Media Advertising. This official washed his hands of any responsibility, saying the fact that GEICO buys spots during "The Shield's" air time doesn't mean that "'The Shield' is brought to you by GEICO." He said GEICO will continue their advertising practices AS IS.

These companies are defending the indefensible, and I urge you to click www.parentstv.org/ptc/action/theshield/main.asp to add your name to the PTC's Warning to General Motors and GEICO Auto Insurance.

These sponsors are aiding and abetting the debasing of American culture and the undermining of the values of decent families by bankrolling TV filth.

They need to be called to account. Other sponsors, such as Coca Cola, responded to the PTC's

letter by acknowledging that "The Shield's" content does NOT reflect their corporate values, and said they would no longer sponsor "The Shield." We commend them for their responsibility.

But GM and GEICO need to be told that we DO notice their TV sponsorship policies, and that thousands of concerned Americans will make our purchasing decisions based in part upon how these companies choose to spend their advertising dollars.

That's why I'm asking you to do two things -- right away, if you can:

1. First, forward this email to as many people as you know that will have the moral courage and determination to stand with you and the PTC in this expression of outrage against companies that PAY FOR dirty and dangerous television programming.

If you reach five friends, colleagues or relatives with this message, and each of them in turn reaches five more, and so on ... within a matter of days GM and GEICO will be feeling a literal firestorm of protest!

2. Then go to www.parentstv.org/ptc/action/theshield/main.asp to verify how truly disgusting "The Shield's" content is, and to add your name to the PTC's Warning to General Motors and GEICO Auto Insurance.

We CAN change sponsors' advertising policies. Coca Cola's response to our letter about "The Shield" is just the latest example; we've persuaded literally scores of huge sponsor companies to withdraw or withhold their commercials from indecent shows in the past, and we can do it again now -- IF we get a **HUGE GRASSROOTS RESPONSE** to this appeal!
Please don't delay.

Urgent thanks!

Tim Winter, Executive Director
PARENTS TELEVISION COUNCIL
Because our children are watching

[WARNING: The following content summary is explicit and will be EXTREMELY offensive to many]

Sex AND Violence

Aceveda is sitting in his office watching a video tape of the woman being raped and beaten. The video shows, a man on top of a woman, having sex with her. His pants are slightly down and part of his buttocks are shown. The woman is screaming as the man repeatedly punches her. Aceveda is sitting in a chair rubbing his crotch, obviously aroused by watching the rape.

[View Clip](#) - **Warning: Graphic Content**

The show opens through the credits with flashes of a woman being raped in her bed in the dark.

A man is on top of her and they are struggling as she pleads for him to stop and to let her go. He starts to take off his pants and the top of his butt is shown. The woman is still pleading for him to stop, telling him that he is hurting her and he tells her to shut up. Suddenly the woman stops moaning and tells him calmly, not to give her any bruises. It is revealed that the man is Aceveda and the woman is the prostitute that he is paying to have sex with and act out a rape.

[View Clip](#) - Warning: Graphic Content

Vic and Rawling listen to a woman's voice on an answering machine. A rapist has been raping women and then forcing them to call their husbands or boyfriends and tell them about the rape. Woman's voice: "I slept with him. I sucked his dick and then he did me from behind. He's better than you are. He's a real man, not a pussy like you. He's so big. He's the best I ever had. I want him to do it to me again in the ass while you listen."

A heroin dealer's prostitute fears reprisals from a ganglord: "The last woman he thought crossed him, his man held her down, stuck her right in the pussy until she bled to death."

Aceveda walks in to the house of the prostitute and grabs her hair and throws her down on the couch onto her stomach. He lifts up her dress and unbuttons his pants. She begins to struggle and moan. It is implied that he is having sex with her, again faking a rough rape scenario for Aceveda's pleasure.

[View Clip](#) - Warning: Graphic Content

Language

Wyms: "He's got a job?"

Woman: "Just blow jobs. He sucks fag dick on fourth street."

Vic: "He bragged he popped your sister's cherry when she was fourteen. He said it was so tight he thought it was her asshole."

Army: "He's probably getting laid. If I spent five years in prison you wouldn't get my face out of snatch for a month."

Vic: "Money and pussy make men do evil shit."

Vic: "Last chance for any of you cupcakes if you ever wanna smell pussy again."

Man inside jail cell: "I can smell yours from here bitch."

Another man inside cell: "Shit!"

Antwon: "Shut up bitch! You knew they were taking down my shit. My niggers saw you faggots on the goddamn raid!"

Antwon: "From now on, I say, 'suck my dick', you say, 'you want me to lick your balls daddy?'"

Vic: "Trouble hits these assholes always run one of two ways. The pussy they're getting into or the pussy they came out of."

Bojice: "Just cause I suck his dick don't make him my man."

Chopper: "You a white bitch! You threw children on the street. You a cracker white ho. You hear me bitch? You're a white bitch too!"

Army: "This guy could smell the sin out of a nun's crack."

Sex

Shane puts in a rap video where a gang member, Chopper, is shown having sex with a woman. She is on all fours and is facing the camera as he stands behind her motioning as though he is having sex with her. She is moaning. She is naked, though no body parts are shown.

Vic, Shane and Army walk into a house with a sign on the door that reads "Ghetto Bang Productions." As they walk in, there is a TV screen on in the background showing two people having sex.

Shane and Army are walking out to their car with the woman. Shane is telling Army that the need to establish dominance.

Army: "Then let her suck YOU off."

Shane continues to try to convince him.

Army: "Blow me."

Shane: "Let her."

They lead the girl around to the car and she unzips his pants and goes down to her knees, out of the view of the camera. It is implied that she is performing oral sex on him. Shane starts to laugh as he walks away.

Shane: "Two's a mouthful, three's a crowd."

View Clip - Warning: Graphic Content

Violence

In an attempt to extort information, Vic smashes a prostitute against a counter, doubling her over. The prostitute vomits, the camera zooming in on her bloody stomach contents. The prostitute continues to cough, gag and spit up fluid on camera.

Vic and the squad discover a murder victim slumped against the wall. There is a large bullet hole in his temple, and blood gushes down his face. The wall behind the victim is splattered with blood and brain matter.

Vic, Ronnie and another cop are chasing a rapist. They see that he has run into a structure and release a dog to go in after him. Screams and moans are heard from inside the structure as the dog attacks him. The cop asks Vic if he should call the dog off, but he insists that he wait.

Depiction of murders where the victim's throat had been cut. Bodies were seen laying face up on the ground, with blood covering their faces and necks and blood surrounding their bodies.

A body is laying on a stretcher, in a neck brace, bloody and badly wounded though still alive. Another man is dead, lying on the ground. There is also a dead, bloody body in a car.

A murder victim is shown, blood trickling out of his nose and a huge bloodstain on his crotch and inner thighs. It is stated that his killer thrust a shotgun against his genitals and fired.

August 19, 2005

Earlier this week, representatives from Geico Insurance informed the PTC that they have pulled their advertising dollars from FX's *The Shield*. The move comes after the company first denied sponsoring the graphic show. When the PTC provided video proving the company's sponsorship and urged members to contact Geico to ask whether the vulgar and violent content featured on *The Shield* (including a man acting out a rape fantasy with a prostitute) reflected their corporate values, the company assured us they would not support the program any longer.

Our heartfelt congratulations and thanks to those members who contacted the company to express your outrage. Your voices were heard.

TV viewing linked to adult violence

19:00 28 March 2002

NewScientist.com news service

Alison Motluk

Watching just one hour of television a day can make a person more violent towards others, according to a 25-year study. In some circumstances, TV watching increases the risk of violence by five times. The new research indicates the effect is seen not just in children, as has been suggested before, but in adults as well.

Watch an hour of prime time TV, and you will probably witness three to five violent acts. Children's programming has even more violence, says Jeffrey Johnson, at Columbia University in New York. "Sports, news, commercials - it's everywhere," he says.

Johnson followed up over 700 families in New York state between 1975 and 2000. He found the link between aggression and TV watching was strongest for males during adolescence and for females, during early adulthood.

The associations held true even after accounting for known risk factors for aggressive behavior. These factors included childhood neglect, growing up in a dangerous neighborhood, low family income, low parental education and psychiatric problems. However, the type of the TV programs watched was not recorded.

Moral education

The study confirms for adults what is accepted by many psychologists about children: viewing a lot of violence increases the likelihood that the person will behave that way.

Craig Anderson at Iowa State University in Ames says that people do not seem to be getting that message: "People don't seem to understand that because they don't notice the way they've changed or the way they treat people, it doesn't mean there is no effect."

But Chris Boyatzis, a psychologist at Bucknell University, Philadelphia, says the link between TV viewing and violence may not be direct: "What may be going on is that families high in TV viewing are also lower in moral and character education."

It is important that parents "filter" what their children watch, he says: "Some studies have shown that about 75 per cent of kids' TV viewing is done without the company of parents, which is tragic."

Robbery and threats

Each family in Johnson's study had a child between the age of one and 10 when the study began. In 2000, when the volunteers' average age was 30, they filled out a questionnaire about their aggression, and the researchers double-checked it with FBI and state records.

Johnson found that 45 per cent of the men who had watched three hours or more at age 14 went on to commit an aggressive act against another person, compared to just nine per cent of the men who had spent less than an hour in front of the tube. Over 20 per cent of the three-hour-a-day group went on to commit robbery, threaten to injure someone or use a weapon to commit a crime.

For women aged 30, the strongest TV predictor of violence was watching three hours of more at age 22. Of these women, 17 per cent had committed an aggressive act, compared to none in the group watching less than an hour a day.

Television viewing seemed to have no bearing on subsequent property crimes, such as arson, vandalism and theft.

Journal reference: *Science* (vol 295, p 2468)

Violence on Television - What do Children Learn? What Can Parents Do?

Violence on television, American Psychological Association
<http://www.apa.org/pubinfo/violence.html>

Violent programs on television lead to aggressive behavior by children and teenagers who watch those programs.

That's the word from a 1982 report by the National Institute of Mental Health, a report that confirmed and extended an earlier study done by the Surgeon General. As a result of these and other research findings, the American Psychological Association passed a resolution in February 1985 informing broadcasters and the public of the potential dangers that viewing violence on television can have for children.

What Does the Research Show?

Psychological research has shown three major effects of seeing violence on television:

- * Children may become less sensitive to the pain and suffering of others
- * Children may be more fearful of the world around them
- * Children may be more likely to behave in aggressive or harmful ways toward others.

Children who watch a lot of TV are less aroused by violent scenes than are those who only watch a little; in other words, they're less bothered by violence in general, and less likely to see anything wrong with it. One example: in several studies, those who watched a violent program instead of a nonviolent one were slower to intervene or to call for help when, a little later, they saw younger children fighting or playing destructively.

Studies by George Gerbner, Ph.D., at the University of Pennsylvania, have shown that children's TV shows contain about 20 violent acts each hour and also that children who watch a lot of television are more likely to think that the world is a mean and dangerous place.

Children often behave differently after they've been watching violent programs on TV. In one study done at Pennsylvania State University, about 100 preschool children were observed both before and after watching television; some watched cartoons that had a lot of aggressive and violent acts in them, and others watched shows that didn't have any kind of violence. The researchers noticed real differences between the kids who watched the violent shows and those who watched nonviolent ones.

Children who watch the violent shows, even 'just funny' cartoons, were more likely to hit out at their playmates, argue, disobey class rules, leave tasks unfinished, and were less willing to wait for things than those who watched the nonviolent programs,' says Aletha Huston, Ph.D., now at the University of Kansas.

Real-Life Studies

Findings from the laboratory are further supported by field studies which have shown the long-range effects of televised violence. Leonard Eron, Ph.D., and his associates at the University of Illinois, found that children who watched many hours of TV violence when they were in elementary school tended to also show a higher level of aggressive behavior when they became teenagers. By observing these youngsters until they were 30 years old, Dr. Eron found that the ones who'd watched a lot of TV when they were eight years old were more likely to be arrested and prosecuted for criminal acts as adults.

A Continuing Debate

In spite of this accumulated evidence, broadcasters and scientists continue to debate the link between the viewing TV violence and children's aggressive behavior. Some broadcasters believe that there is not enough evidence to prove that TV violence is harmful. But scientists who have studied this issue say that there is a link between TV violence and aggression, and in 1992, the American Psychological Association's Task Force on Television and Society published a report that confirms this view. The report, entitled *Big World, Small Screen: The Role of Television in American Society*, shows that the harmful effects of TV violence do exist.

What Parents Can Do?

While most scientists are convinced that children can learn aggressive behavior from television, they also point out that parents have tremendous power to moderate that influence.

Because there is a great deal of violence in both adult and children's programming, just limiting the number of hours children watch television will probably reduce the amount of aggression they see.

In addition

Parents should watch at least one episode of the programs their children watch. That way they'll know what their children are watching and be able to talk about it with them.

When they see a violent incident, parents can discuss with their child what caused the character to act in a violent way. They should also point out that this kind of behavior is not characteristic, not the way adults usually solve their problems. They can ask their children to talk about other ways the character could have reacted, or other nonviolent solutions to the character's problem.

Parents can outright ban any programs that they find too offensive. They can also restrict their children's viewing to shows that they feel are more beneficial, such as documentaries, educational shows and so on.

Parents can limit the amount of time children spend watching television, and encourage children to spend their time on sports, hobbies, or with friends; parents and kids can even draw up a list of other enjoyable activities to do instead of watching TV.

Parents can encourage their children to watch programs that demonstrate helping, caring and cooperation. Studies show that these types of programs can influence children to become more kind and considerate.

For More Information

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