

## **Drug-Free Schools/Drug-Free Workplace Annual Disclosure**

It is the policy of Louisiana Culinary Institute to comply with the Drug-Free Workplace Act of 1988 and the Drug Free Schools and Communities Act of 1989 as amended. The school has set forth in this guide the legal penalties under Federal law for the illegal possession or distribution of drugs and alcohol, as well as the range of school sanctions that can be imposed for violation of the school's policies regarding substance abuse. Both students and employees should read this carefully.

### **Policy:**

The United States Department of Education has issued regulations for the implementation of the provisions of the "Drug-Free Schools and Communities Act Amendments of 1989" (Public law 101-226). The school will distribute annually to each student and employee information regarding the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees on school property.

### **Standards of Conduct:**

The school is committed to a campus free of illegal drug use, misuse and abuse of prescription drugs, underage drinking and alcohol abuse. The school has no tolerance for illegal activity or any other harmful conduct influenced by drugs or alcohol. Unlawful possession as well as the distribution of illegal drugs or alcohol is prohibited on school property or as part of its activities. The school will cooperate fully with law enforcement agencies and will apply appropriate internal disciplinary processes should a student or an employee violate criminal statutes with regard to illegal drugs or possession or sale of alcohol.

### **School Disciplinary Sanctions:**

It is the school policy to discourage all violations of Federal, State or local laws by any member of the school community. In addition to possible prosecution and punishment by civil authorities, a student or employee violating any law may be subject to sanctions imposed by the school.

### **Students:**

Sanctions against students include, but are not limited to, disciplinary expulsion, suspension, and/or probation. When appropriate, school sanctions may be entered into permanent records. Parents of dependent students will be notified of pending charges or subsequent decisions.

### **Faculty and Other Employees:**

The school may impose sanctions against any employee who violates Federal, State or local laws, or the standards of school conduct. Depending on the nature and severity of the violation, these sanctions can range from warnings and/or mandatory referral for drug or alcohol rehabilitation to outright termination of employment.

### **Loss of Title IV Eligibility**

A student is ineligible to receive Title IV financial aid for the period described below if the student has been convicted of an offense involving the possession or sale of illegal drugs while receiving Federal Financial Aid:

	<u>Possession of Illegal Drugs</u>	<u>Sale of Illegal Drugs</u>
1st Offense:	1 yr from date of conviction	2 yrs from date of conviction
2nd Offense:	2 yrs from date of conviction	Indefinite period of time
3rd Offense:	Indefinite period of time	

A student regains eligibility the day after the period of ineligibility ends or when the student successfully completes a qualified drug rehabilitation program that includes passing two unannounced drug tests given by such a program. Further drug convictions will make the student ineligible again. A student denied eligibility for an indefinite period can regain it, either after successfully completing rehabilitation program, as described below, or if a conviction is reversed, set aside, or removed from the student's record so that fewer than two convictions for sale or three convictions for possession remain on the record. In such cases, the nature and dates of the remaining convictions will determine when the student regains eligibility. It is the student's responsibility to certify to the school that they have successfully completed the rehabilitation program. A qualified drug rehabilitation program must include at least two unannounced drug tests and satisfy at least one of the following requirements: 1) Be qualified to receive funds directly or indirectly from a federal, state, or local government program, 2) Be qualified to receive payment directly or indirectly from a federally or state-licensed insurance company, 3) Be administered or recognized by a federal, state or local government agency or court, and 4) Be administered or recognized by a federally or state-licensed hospital, health clinic, or medical doctor.

### **State Drug Laws**

State law considers the illegal use of drugs and alcohol serious crimes. The sanctions for first time violations of these laws range from fines to lengthy terms of incarceration, or both. Additionally, local ordinances and municipal codes impose a variety of penalties for the illegal use of drugs and alcohol. There may also be civil consequences which result from the violation of state drug and alcohol statutes. Property associated with the criminal acts, including homes and vehicles, can be confiscated by the government. Persons convicted of felonies may be barred from government employment, and lose their right to vote.

For additional information regarding State of Louisiana punishments after conviction: <https://norml.org/laws/louisiana-penalties-2/> .

### **Federal Drug Laws**

Federal law considers the manufacture, distribution, dispensation, possession or use of illegal drugs, or any controlled substance a serious crime. Appendix A provides a summary of the criminal sanctions for violations of Federal drug statutes. For the most up to date Federal Trafficking Penalties information, visit the web site of the U.S. Drug Enforcement Administration at: <https://www.campusdrugprevention.gov/content/drug-scheduling-and-penalties> .

## **Health Risks:**

The following briefly summarizes health risks and symptoms associated with the use of alcohol and other drugs. It is important to note that individuals experience alcohol and drugs in different ways based on physical tolerance, body size and gender, and on a variety of other physical and psychological factors.

## **Alcohol:**

Alcohol consumption causes a number of changes in behavior. Even low doses significantly impair the judgment and coordination required to drive a car safely, increasingly the likelihood that the driver will be involved in an accident. Low to moderate doses of alcohol also increase the incidence of a variety of aggressive acts. Moderate to high doses of alcohol cause marked impairments in higher mental functions severely altering a person's ability to learn and remember information. Very high doses cause respiratory depression and death. If combined with other depressants of the central nervous system, much lower doses of alcohol will produce the effects just described. Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations and convulsions. Long-term consumption of large quantities of alcohol can also lead to permanent damage to vital organs such as the brain and the liver. Mothers who drink during pregnancy may give birth to infants with fetal alcohol syndrome. These infants have irreversible physical abnormalities and mental retardation. In addition, research indicates that children of alcoholic parents are at greater risk than others of developing alcohol related problems.

## **Cigarettes and other Nicotine Products:**

In 1989, the U.S. Surgeon General issued a report that concluded that cigarettes and other forms of tobacco, such as cigars, pipe tobacco and chewing tobacco, are addictive and that nicotine is the drug in tobacco that causes addiction. In addition, the report determined that smoking was a major cause of stroke and the third leading cause of death in the United States. Nicotine is both a stimulant and a sedative to the central nervous system. Nicotine is absorbed readily from tobacco smoke in the lungs, and it does not matter whether the tobacco smoke is from cigarettes, cigars, or pipes, Nicotine also is absorbed readily when tobacco is chewed.

In addition to nicotine, cigarette smoke is primarily composed of a dozen gases (mainly carbon monoxide) and tar. The tar in a cigarette, which varies from about 15 mg for a regular cigarette to 7 mg in a low-tar cigarette, exposes the user to a high expectancy rate of lung cancer, emphysema, and bronchial disorders. The carbon monoxide in the smoke increases the chance of cardiovascular diseases. The Environmental Protection Agency has concluded that secondhand smoke causes lung cancer in adults and greatly increases the risk of respiratory illnesses in children and sudden infant death.

## **Prescription Medications:**

Prescription drugs that are abused or used for non-medical reasons can alter brain activity and lead to dependence. Commonly abused classes of prescription drugs include opioids (often prescribed in the treatment of pain), central nervous system depressants (often prescribed to treat anxiety and sleep disorders), and stimulants (prescribed to treat narcolepsy, ADHD, and obesity).

Long-term use of opioids or central nervous system depressants can lead to physical dependence and addiction. Taken in high doses, stimulants can lead to compulsive use, paranoia, dangerously high body temperatures and irregular heartbeat.

### **Marijuana:**

Marijuana use can lead to a number of long term and short term physical and psychological effects. Marijuana use leads to a substantial increase in the heart rate, impairs short term memory and comprehension and motivation can be altered.

### **Cocaine and Crack:**

Health risks may include changes in body temperature and blood pressure as well as heart and breathing rates. Even small amounts may cause the body to exceed its own limits, sometimes resulting in death. Snorting cocaine may severely damage nasal tissue and the septum. Smoking cocaine may damage the lungs. Someone using cocaine may experience muscle twitching, panic reactions, anxiety, numbness in hands and feet, loss of weight, a period of hyperactivity followed by a crash, a runny or bleeding nose, and depression. Other symptoms of cocaine use may include nausea, vomiting, insomnia, tremors, and convulsions. Chronic users may become paranoid and/or experience hallucinations.

### **Barbiturates:**

In small doses, barbiturates produce calmness, relaxed muscles, and lowered anxiety. Larger doses cause slurred speech, staggering gait, and altered perception. Very large doses or doses taken in combination with other central nervous system depressants (e.g., alcohol) may cause respirator depression, coma and even death. A person who uses barbiturates may have poor muscle control, appear drowsy or drunk, become confused, irritable, or inattentive, or have slowed reactions.

### **Methamphetamine/Amphetamines:**

Amphetamines, methamphetamines, or other stimulants can cause increased heart rate and respiratory rates, elevated blood pressure, and dilated pupils. Larger doses cause rapid or irregular heartbeat, tremors, and physical collapse. An amphetamine injection creates a sudden increase in blood pressure that can result in stroke, high fever, heart failure and death. An individual using amphetamines might begin to lose weight, have the sweats, and appear restless, anxious, moody, and unable to focus. Extended use may produce psychosis, including hallucinations, delusions and paranoia.

### **Hallucinogens:**

PCP, or angel dust, interrupts the part of the brain that controls the intellect and keeps instincts in check. PCP blocks pain receptors. Violent episodes, including self-inflicted injuries, are not uncommon. Chronic users report memory loss and speech difficulty. Very large doses produce convulsions, coma, heart and lung failure, or ruptured blood vessels in the brain. LSD, mescaline, peyote, etc. cause dilated pupils, elevated body temperature, increased heart rate and blood pressure and tremors. Someone under the influence of PCP might appear moody, aggressive, or violent. Sleeplessness, confusion, anxiety, and panic, and may report perceptual distortions. Flashbacks may occur.

**Steroids (anabolic):**

Anabolic steroids are human-made substances related to male sex hormones. Some athletes abuse anabolic steroids to enhance performance. Abuse of anabolic steroids can lead to serious health problems, some of which are irreversible. Short term side effects include depression, hallucinations, paranoia, severe mood swings and aggressive behavior. Major side effects also can include liver tumors and cancer, jaundice, high blood pressure, kidney tumors, severe acne and trembling. In males side effects may include shrinking of the testicles and breast development. In females, side effects may include growth of facial hair, menstrual changes and deepened voice. In teenagers, growth may be halted prematurely and permanently.

**Narcotics:**

Because narcotics are generally injected, the use of contaminated needles may result in the contraction of many different diseases, including AIDS and hepatitis. Symptoms of overdose include shallow breathing, clammy skin, convulsions, and coma and may result in death. Some signs of narcotic use are euphoria, drowsiness, constricted pupils, and nausea. Other symptoms include itchy skin, needle or "track" marks on the arms and legs, nodding, lack of sex drive and appetite, sweating, cramps and nausea when withdrawing from the drug.

**Ecstasy:**

"Designer drugs" such as Ecstasy are related to amphetamines in that they have mild stimulant properties but are mostly euphorants. They can cause nausea, blurred vision, chills or sweating, and faintness. Psychological effects include anxiety, depression, and paranoia. As little as one dose can cause severe neurochemical brain damage. Narcotic designer drugs can cause symptoms such as uncontrollable tremors, drooling, impaired speech, paralysis, and irreversible brain damage.

**GHB/Rohypnol:**

Often known as "date rape" drugs, GHB and Rohypnol initially produce a feeling of intoxication similar to alcohol (the user feels relaxed, sociable, affectionate and playful, and disinhibited) followed by a feeling of drowsiness. Higher doses can lead to a sleep from which the user cannot be woken. The effects can last from 4-24 hours. Both GHB and Rohypnol present a serious overdose threat. Since they are depressants, both drugs can be fatal when mixed with alcohol. Symptoms of overdose can include intense drowsiness, unconsciousness or coma, muscle spasms, disorientation, vomiting, and slowed or stopped breathing (fatalities usually occur from respiratory failure).

**Inhalants:**

Inhalants are readily available and inexpensive. More than 1000 common household products can be used to get high. Examples of organic solvents (carbon compounds) include gasoline, lighter fluid and butane lighter fuel, spray paint, paint thinner, rubber-cement, hairspray, nail polish, and many cleaning fluids. Nitrite compounds (amyl nitrite, butyl nitrite) act mainly as vasodilators. Nitrous oxide (laughing gas) is packaged in small metal cartridges (called whippets) which are often used to make whipped cream. Inhalants irritate breathing passages, provoking severe coughing, painful inflammation, and nosebleeds. Inhalants may not produce a pleasant high and result in mental confusion, hallucinations, and paranoia. They may also result

in respiratory depression leading to unconsciousness, coma, permanent brain damage, or death. The danger is extremely great if inhalants are used in conjunction with other nervous system depressants, such as alcohol or barbiturates. Even first-time users run the risk of sudden sniffing death (SSD). The risk of SSD is higher if the abuser engages in strenuous physical activity or is suddenly startled.

### **Treatment:**

Medication and behavioral therapy, alone or in combination, are aspects of an overall therapeutic process that often begins with detoxification, followed by treatment and relapse prevention. Easing withdrawal symptoms can be important in the initiation of treatment; preventing relapse is necessary for maintaining its effects. And sometimes, as with other chronic conditions, episodes of relapse may require a return to prior treatment components. A continuum of care that includes a customized treatment regimen, addressing all aspects of an individual's life including medical and mental health services, and follow-up options (e.g. community or family based recovery support systems) can be crucial to a person's success in achieving and maintaining a drug-free lifestyle.

### **Hotline Numbers and Additional Resources:**

U.S. Department of Health and Human Services  
Substance Abuse and Mental Health Services Administration 1-800-662-HELP (1-800-662-4357), <https://www.samhsa.gov/>  
Recovered.org (formerly NCADD.org) (855-648-7228) <https://recovered.org/>

Off-campus services regarding Drug and Alcohol abuse information and treatment, counseling, and mental health include:

- The National Institute on Drug Abuse Hotline: 1-800-662-HELP
- The National Institute on Drug Abuse Workplace Helpline: 1-800-843-4971
- The National Clearinghouse for Alcohol and Drug Information: 1-844-955-0207

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