In this chapter you will explore

- The importance of managing stress
- Warning signs of depression
- The positive effects of exercise on your mind and body
- Strategies for better nutrition and weight management
- The many options you have for contraception and safer sex
- The realities of alcohol use on campus
- The consequences of abusing alcohol, tobacco, and drugs
College is a great time to explore. It’s an opportunity to exercise your mind and expand your horizons. Unfortunately, for too many students it becomes an opportunity to stop exercising their bodies and begin expanding their waistlines! Because the college environment might be new to you, you could forget to take care of yourself.

Many students can handle the transition to college easily, using various coping mechanisms. Others drink too much or smoke too much. Some overeat or develop an eating disorder such as bulimia or anorexia. Some become so stressed that their anxiety overwhelms them. Some ignore their sexual health and then have to deal with a sexually transmitted infection or an unplanned pregnancy.

This chapter explores the topic of wellness, which is a catchall term for taking care of your mind, body, and spirit. Wellness means making healthy choices and achieving balance. It includes reducing stress in positive ways, keeping fit, maintaining good sexual health, and taking a sensible approach to alcohol and other drugs.

**Managing Stress**

In the fall of 2007, according to a survey conducted by the American College Health Association, about one third of college students reported that stress...
had negatively affected either an exam grade or a course grade.\textsuperscript{1} When you are stressed, your body undergoes rapid physiological, behavioral, and emotional changes. Your rate of breathing can become more rapid and shallow. Your heart rate begins to speed up, and the muscles in your shoulders and forehead, at the back of your neck, and perhaps across your chest begin to tighten. Your hands might become cold or sweaty. You might experience gastrointestinal symptoms such as an upset stomach. Your mouth and lips might feel dry and hot, and you might notice that your hands and knees begin to shake or tremble. Your voice might quiver or even go up an octave.

A number of psychological changes also occur when you are under stress. You might experience changes in your ability to think, such as confusion, trouble concentrating, inability to remember things, and poor problem solving. Emotions such as fear, anxiety, depression, irritability, anger, or frustration are common, and you might have trouble getting to sleep at night or wake up too early and not be able to go back to sleep.

stress has many sources, but two seem to be prominent: life events and daily hassles. Life events are those that represent major adversity, such as the death of a parent, spouse, partner, or friend. Researchers believe that an accumulation of stress from life events, especially if many events occur over a short period of time, can cause physical and mental health problems. Daily hassles are the minor irritants that we experience every day, such as losing your keys, having three tests on the same day, quarreling with your roommate, or worrying about money.

The College Readjustment Rating Scale is a life events scale, adapted from Holmes and Rahe’s Life Events Scale and modified for traditional-age college students. Complete the scale in the box on the next page. If you find that your score is 150 or higher, you have experienced a great deal of stress over the past year. You might consider what help you need or skills you must learn to be able to cope effectively.

On this scale, each event, such as one’s first term in college, is assigned a value that represents the amount of readjustment a person has to make in life as a result of change. In some studies, people with serious illnesses have been found to have high scores on similar scales. People with scores of 300 and higher have a high health risk. People who score between 150 and 300 points have about a 50-50 chance of a serious health change within two years. People who score 150 and below have a one in three chance of a serious health change.

If your score is high enough to indicate potential health problems, it would benefit you to pay special attention to the stress reduction and management techniques discussed in this chapter and to select and implement some strategies to reduce your stress.\textsuperscript{2}


The best starting point for handling stress is to be in good physical and mental shape. When your body and mind are healthy, it’s like inoculating yourself against stress. This means you need to pay attention to your diet, exercise, sleep, and mental health.

### WHAT IS YOUR STRESS SCORE?

To determine your stress score, circle the number of points corresponding to each event you have experienced in the past six months or are likely to experience in the next six months. Then add up the circled numbers.

<table>
<thead>
<tr>
<th>Event</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death of spouse</td>
<td>100</td>
</tr>
<tr>
<td>Pregnancy for unwed female</td>
<td>92</td>
</tr>
<tr>
<td>Death of parent</td>
<td>80</td>
</tr>
<tr>
<td>Male partner in unwed pregnancy</td>
<td>77</td>
</tr>
<tr>
<td>Divorce</td>
<td>73</td>
</tr>
<tr>
<td>Death of a close family member</td>
<td>70</td>
</tr>
<tr>
<td>Death of a close friend</td>
<td>65</td>
</tr>
<tr>
<td>Divorce between parents</td>
<td>63</td>
</tr>
<tr>
<td>Jail term</td>
<td>61</td>
</tr>
<tr>
<td>Major personal injury or illness</td>
<td>60</td>
</tr>
<tr>
<td>Flunked out of college</td>
<td>58</td>
</tr>
<tr>
<td>Marriage</td>
<td>55</td>
</tr>
<tr>
<td>Fired from job</td>
<td>50</td>
</tr>
<tr>
<td>Loss of financial support for college (scholarship)</td>
<td>48</td>
</tr>
<tr>
<td>Failing grade in important or required course</td>
<td>47</td>
</tr>
<tr>
<td>Sexual difficulties</td>
<td>45</td>
</tr>
<tr>
<td>Serious argument with significant other</td>
<td>40</td>
</tr>
<tr>
<td>Academic probation</td>
<td>39</td>
</tr>
<tr>
<td>Change in major</td>
<td>37</td>
</tr>
<tr>
<td>New love interest</td>
<td>36</td>
</tr>
<tr>
<td>Increased workload in college</td>
<td>31</td>
</tr>
<tr>
<td>Outstanding personal achievement</td>
<td>29</td>
</tr>
<tr>
<td>First term in college</td>
<td>28</td>
</tr>
<tr>
<td>Serious conflict with instructor</td>
<td>27</td>
</tr>
<tr>
<td>Lower grades than expected</td>
<td>25</td>
</tr>
<tr>
<td>Change in colleges (transfer)</td>
<td>24</td>
</tr>
<tr>
<td>Change in social activities</td>
<td>22</td>
</tr>
<tr>
<td>Change in sleeping habits</td>
<td>21</td>
</tr>
<tr>
<td>Change in eating habits</td>
<td>19</td>
</tr>
<tr>
<td>Minor violation of the law (for example, a traffic ticket)</td>
<td>15</td>
</tr>
</tbody>
</table>

My stress score is ____________________________
DIET AND EXERCISE

There is a clear connection between what you eat and drink, your overall health and well-being, and stress. Eating a lot of junk food will add pounds to your body and reduce your energy level. And when you can’t keep up with your work because you’re sluggish or tired, you might experience more stress. One dietary substance that can be directly linked to higher stress levels is caffeine.

In moderate amounts (50 to 200 milligrams per day), caffeine increases alertness and reduces feelings of fatigue, but even at this low dosage it can make you perkier during part of the day and more tired later. Consumed in larger quantities, caffeine can cause nervousness, headaches, irritability, stomach irritation, and insomnia—all symptoms of stress. Many people who have heart conditions have been told to avoid caffeine, since it tends to speed up heart rates. How much caffeine do you consume? Total your caffeine on the basis of the figures in Table 16.1.

If the amount of caffeine is excessive (this will vary with individuals, so monitor such things as inability to sleep and when you are most alert

<table>
<thead>
<tr>
<th>TABLE 16.1  ▶  Product Caffeine Content (milligrams per serving)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coffee (5-oz. cup)</td>
</tr>
<tr>
<td>Regular: 65-115</td>
</tr>
<tr>
<td>Decaffeinated: 3</td>
</tr>
<tr>
<td>Tea (6-oz. cup)</td>
</tr>
<tr>
<td>Hot steeped: 36</td>
</tr>
<tr>
<td>Iced: 31</td>
</tr>
<tr>
<td>Soft drinks and energy drinks (12-oz. serving)</td>
</tr>
<tr>
<td>Coca-Cola: 46</td>
</tr>
<tr>
<td>Dr. Pepper: 61</td>
</tr>
<tr>
<td>Full Throttle (16 oz): 144</td>
</tr>
<tr>
<td>Jolt Cola: 72</td>
</tr>
<tr>
<td>Mountain Dew: 54</td>
</tr>
<tr>
<td>Pepsi-Cola: 36</td>
</tr>
<tr>
<td>Red Bull: 80</td>
</tr>
<tr>
<td>Water Joe (16.9 oz.): 115</td>
</tr>
<tr>
<td>Chocolate bar: 6-20</td>
</tr>
<tr>
<td>Caffeine gum (2 pieces): 115</td>
</tr>
<tr>
<td>Over-the-counter drugs</td>
</tr>
<tr>
<td>NoDoz (2 tablets): 200</td>
</tr>
<tr>
<td>Excedrin (2 tablets): 130</td>
</tr>
<tr>
<td>Midol (2 tablets): 65</td>
</tr>
</tbody>
</table>
and most tired), consider drinking water in place of caffeinated drinks, or choose decaf coffee or a caffeine-free soft drink.

Exercise is an excellent stress management technique, the best way to stay fit, and a critical element of any worthwhile weight loss program. While any kind of recreation benefits your body and spirit, aerobic exercise is the best for stress management as well as weight management. In aerobic exercise, you work until your pulse is in a “target zone” and keep it in this zone for at least thirty minutes. You can reach your target heart rate through a variety of exercises: walking, jogging, running, swimming, biking, or using a stair climber. What makes the exercise aerobic is the intensity of your activity. Choose activities that you enjoy so you will look forward to your exercise time. That way, it’s more likely to become a regular part of your routine.

Besides doing wonders for your body, aerobic exercise keeps your mind healthy. When you do aerobic exercise, your body produces hormones called beta-endorphins. These natural narcotics cause feelings of contentment and happiness and help manage anxiety and depression. Your mood and general sense of competence improve with regular aerobic exercise. In fact, people who undertake aerobic exercise report more energy, less stress, better sleep, weight loss, and an improved self-image.

### CALCULATING YOUR TARGET HEART RATE ZONE

1. Estimate your maximum heart rate:
   \[220 - \text{age} = \text{maximum heart rate}\]

2. Determine your lower-limit exercise heart rate by multiplying your maximum heart rate by 0.6.
   \[\text{Max Heart Rate} \times 0.6 = \]

3. Determine your upper-limit exercise heart rate by multiplying your maximum heart rate by 0.9.
   \[\text{Max Heart Rate} \times 0.9 = \]

4. Your Target Heart Rate Zone is the range between your lower and upper limits.


Think about ways to combine activities and use your time efficiently. Maybe you could leave the car at home and jog to class. Try going to the gym with a friend and asking each other study questions as you work out on treadmills. Park at the far end of the lot, and walk to classes. Take the stairs whenever possible. Remember that exercise does not have to be a chore. Find something you enjoy doing, and make it part of your daily schedule. Many campuses have recreation departments that offer activities such as intramural sports, rock climbing, aerobics classes, and much more. The most important thing about exercise is that you stay active and make it part of your day-to-day life.
SLEEP

Getting adequate sleep is another way to protect yourself from stress. According to the National Sleep Foundation, 63 percent of American adults do not get the recommended eight hours of sleep per night. Lack of sleep can lead to anxiety, depression, and academic struggles. Researchers at Trent University in Ontario found that students who studied all week but then

ARE YOU ADDICTED?

It’s called “Internet addiction,” and researchers have discovered that problems arising from Internet use have more to do with how people use the Internet than how much time they spend online. College students who use the Internet for communicating with others are less likely to be addicted than are those who use the Internet for shopping, reading news, and checking sports scores. It’s a catch-22 because using the Internet has some psychological benefits. For instance, communicating via the Internet can help introverted students make friends more easily or feel more comfortable participating in class discussions (for example, by participating in course chats and realizing that it is okay to ask questions). The Internet can also help students improve their level of engagement with college friends, their studies, and campus life. However, students who use the Internet extensively tend to have less time for real-world social contacts.

Thinking Critically

How do you use the Internet? For the next week, keep a record of how much time you spend online and how much time you spend on each of the following activities: instant messaging, checking Facebook and MySpace, tweeting, sending e-mail, reading news, reading and commenting on blogs, doing research, shopping, checking sports scores, playing multiplayer games, and/or playing single-player games. How much time did you spend online? How did you spend most of your time online? If you found that you are online more for shopping, reading news, checking sports scores, and/or playing single-player games, do you have strong relationships with friends outside your online world? If you think you’re spending far too much time online, you might want substitute other activities for some of your Internet time. If you can’t seem to control the number of hours you spend on the Internet, it might be a good idea to talk to a counselor at your college to help you manage your Internet activities.
Stayed up late partying on the weekends forgot as much as 30 percent of the material they had learned during the prior week. Try the following suggestions to establish better sleep habits:

- If you can’t sleep, get up and do something boring.
- Get your clothes and school materials together before you go to bed.
- Avoid long daytime naps.
- Try reading or listening to a relaxation tape before going to bed.
- Get exercise during the day.
- Sleep in the same room and bed every night.
- Set a regular schedule for going to bed and getting up.

**Taking Control**

Modifying your lifestyle is yet another approach to stress management. You have the power to change your life so that it is less stressful. Teachers, supervisors, parents, friends, and even your children influence you, but ultimately, you control how you run your life. Lifestyle modification involves identifying the parts of your life that do not serve you well, making plans for change, and then carrying out the plans. For instance, if you are stressed because you are always late for classes, get up ten minutes earlier. If you get nervous before a test when you talk to a certain pessimistic classmate, avoid that person before a test. Learn test-taking skills so you can manage test anxiety better.

Relaxation techniques such as visualization and deep breathing can help you reduce stress. Learning these skills is just like learning any new skill. It takes knowledge and practice. Check your course catalog, college counseling center, health clinic, student newspaper, or fitness center for classes that teach relaxation. You’ll find books as well as audiotapes and CDs that guide you through relaxation techniques.

**Other Ways to Relieve Stress**

Your stress level plays a key role in your overall mental health. Here are several additional things you can do to improve your level of stress and your mental health:

- Reward yourself on a regular basis when you achieve small goals.
- Remember that there is a reason you are in a particular situation. Keep the payoff in mind.
- Laugh. A good laugh will almost always make you feel better.
- Get—or give—a hug.
- Pray or meditate.
- Do yoga.
- Practice a hobby.
- Get a massage.
- Practice deep breathing.
Mental Health

According to the American Psychological Association, depression is one of the most common psychiatric disorders in the United States, affecting more than 15 million adults. College students are at especially high risk for depression as well as suicide.

DEPRESSION

The National Institutes of Health report that depression is diagnosed more often in women than in men. Depression is not a weakness; it is an illness that requires medical attention. You will find that many college students suffer from some form of depression. The feelings are often temporary and may be situational. A romantic breakup, a disappointing grade, or an ongoing conflict with a friend or roommate can create feelings of despair. Although most depression goes away on its own, if you or a friend have any of the following symptoms for more than two weeks, it is important to talk to a health care provider:

- Feelings of helplessness and hopelessness
- Feeling useless, inadequate, bad, or guilty
- Self-hatred, constant questioning of one’s thoughts and actions
- Loss of energy and motivation
- Weight loss or gain
- Difficulty going to sleep or excessive need for sleep
- Loss of interest in sex
- Difficulty concentrating for a significant length of time

SUICIDE

The Centers for Disease Control and Prevention (CDC) report that students ages 15 to 24 are more likely than any other age group to attempt suicide. Most people who commit suicide give a warning of their intentions. The following are common indicators of someone’s intent to commit suicide:

- Recent loss and a seeming inability to let go of grief
- Change in personality—sadness, withdrawal, apathy
- Expressions of self-hatred
- Change in sleep patterns
- Change in eating habits
- A direct statement about committing suicide ("I might as well end it all.")
- A preoccupation with death

If you or someone you know threatens suicide or displays any of these signs, it’s time to consult a mental health professional. Most campuses have counseling centers that offer one-on-one sessions as well as support groups for their students. Finally, remember that there is no shame attached to high levels of stress, depression, anxiety, or suicidal tendencies. Unavoidable life events or physiological imbalances can cause such feelings and behaviors. Proper counseling, medical attention, and, in some cases, prescription medication can help students cope with mental health issues.

**YOUR TURN**

Why do you think that college students are at especially high risk for depression and suicide? Is there anything that colleges and universities can do to decrease this risk, or is this all up to the students themselves?

**Nutrition and Weight Management**

“You are what you eat” is more than a catchphrase; it’s an important reminder of the vital role diet plays in our lives. You’ve probably read news stories about how there are more and more obese young people than ever before in our history. The CDC reports that the rates of obesity have more than doubled in the United States since 1990: In 1990 an estimated 11.6 percent of U.S. citizens were obese; in 2007 an estimated 25.6 percent were classified as obese. One expert, Dr. James Hill, Director of Human Nutrition at the University of Colorado, predicts, “If obesity is left unchecked, almost all Americans will be obese by 2050.” Many people attribute this situation to the explosion of fast-food restaurants, which place flavor and low prices before health. A Tufts University researcher found that 60 percent of college students eat too much saturated fat, which increases the risk for heart disease. Also, most of us do not consume enough fiber and whole grains. As a result, we are more likely to have long-term health problems, such as diabetes, heart disease, and cancer.

**HEALTHY EATING**

So what can you do about your eating habits? It's not easy at first, but if you commit to a new eating regimen, you will not only feel better, you'll be healthier and probably happier. Your campus might have a registered dietitian available to help you
make healthy changes in your diet. Check with your student health center. Meanwhile, here are some suggestions:

- Restrict your intake of red meat, butter, white rice, white bread, and sweets. “White foods” are made with refined flour, which has few nutrients. Instead, go for fish, poultry, soy products, and whole wheat or multigrain breads. Remember that brown bread is not necessarily whole wheat. Check the label.

- Eat plenty of vegetables and fruits daily. These are important building blocks for a balanced diet, and they contain lots of fiber (to help fight off cancer and heart disease). Instead of fruit juices, which contain concentrated amounts of sugar, opt for the actual fruit. When you sit down to eat any meal (including breakfast), make sure you have at least one fruit or vegetable on your plate.

- Avoid fried foods—french fries, fried chicken, and so forth. Choose grilled or broiled meats instead. Avoid foods with large amounts of fat and sugar, such as doughnuts.

- Keep your room stocked with healthy snacks, such as fruit, vegetables, yogurt, pretzels, and graham crackers.

- Eat a sensible amount of nuts and all the legumes (beans) you want to round out your fiber intake.

- Watch your portion size. Avoid “super-sized” fast-food items and all-you-can-eat buffets.

- Eat breakfast! Your brain will function more efficiently if you eat a power-packed meal first thing in the morning. Eating breakfast can also jump-start your metabolism. If you are not normally a breakfast eater, try eating just a piece of fruit or half a bagel. You will notice a big difference in your energy level during your early morning classes. Avoid sugar-coated cereals. Go for healthier options that are loaded with fiber.

- Always read the government-required nutrition label on all packaged foods. Check the sodium content (sodium will make you retain fluids and increase your weight and possibly your blood pressure) and the number of grams of fat. Strive for a diet with only 20 percent fat.

Figure 16.1 shows the Healthy Eating Pyramid, designed by Walter Willett, Chairman of the Department of Nutrition at Harvard’s School of Public Health. The Healthy Eating Pyramid puts exercise and weight control at the base, recommends eating whole-grain foods at most meals, and encourages eating vegetables “in abundance.” This pyramid emphasizes eating lots of plant oils, such as olive, canola, and soy, and gives fish and poultry a higher profile than red meat, which you should eat sparingly.

**YOUR TURN**

Look at the preceding list of suggestions about healthy eating. Which one of these is the most difficult for you? Which ones do you think are difficult for most college students? Do you think that college students are less likely to eat a healthy diet than the general population? Why or why not?
People have been joking about the “freshman 15” forever, but it’s no joke that new college students tend to gain weight during their first term. Nutrition experts at Tufts University reported that the average weight gain is 6 pounds for men and about 4.5 pounds for women during the first year of college. Increased stress, lifestyle changes, new food choices, changes in physical activity, and alcohol consumption can all cause weight gain. Try eating smaller meals more often, getting regular exercise, keeping a food journal (to keep track of what you are actually consuming), and being realistic about dieting.

EATING DISORDERS

An increasing number of college students are obsessed with their bodies and food intake. This can lead to conditions such as anorexia, bulimia, or binge eating disorder, all of which affect women disproportionately more than men. Anorexia is characterized by self-induced starvation, extreme preoccupation with food, and a body weight less than 85 percent of a healthy weight. Bulimia is characterized by cycles of bingeing (eating large amounts of food) and purging by vomiting, abusing laxatives and/or diuretics, exercising excessively, and fasting. People with a binge eating disorder do not purge the calories after the binge. Individuals with binge eating disorder tend to eat secretly and are often clinically obese.

Some of the signs and symptoms of an eating disorder are as follows:

- Intense fear of gaining weight
- Restricting types of food, such as those containing any kind of fat
- Weighing less than 85 percent of recommended body weight based on height, or failure to make appropriate weight gain during a period of growth
- Stopping or never getting a monthly menstrual period
- Seeing one’s body as fat, even though it is underweight
- Overexercising
- Secrecy about food and denial of a problem with eating

Anyone who is struggling with an eating disorder should seek medical attention. Eating disorders can be life-threatening if they are not treated by a health care professional. Many colleges and universities have eating disorder case management teams to help individuals on campus. Contact your student health center for more information, or contact the National Eating Disorder Association (http://www.nationaleatingdisorders.org or 1-800-931-2237) to find a professional in your area who specializes in treatment of eating disorders.

Sexual Health

Numerous studies report that about 75 percent of traditional-age college students have engaged in sexual intercourse at least once.

Whether or not you are part of this percentage, it can be helpful to explore your sexual values and to consider whether sex is right for you at this time. If it is the right time, you should choose a good birth control method and adopt some strategies for avoiding sexually transmitted infections (STIs) and unplanned pregnancies. What matters most is that you take care of yourself and your partner.

SEXUALLY TRANSMITTED INFECTIONS

The problem of STIs on college campuses has received growing attention in recent years as epidemic numbers of students have become infected. In general, STIs continue to increase faster than other illnesses on campuses today, and approximately 5 to 10 percent of visits by U.S. college students to college health services are for the diagnosis and treatment of STIs. The belief that it won’t happen to you and you can’t catch these sorts of infections is inaccurate and potentially more dangerous than ever before. If you choose to be sexually active, particularly with more than one partner but even if there is only one, exposure to an STI is a real possibility.

STIs are usually spread through genital contact. Sometimes, however, STIs can be transmitted through mouth-to-mouth or mouth-to-genital contact. There are more than twenty known types of STIs; Table 16.2 lists those that are most common on college campuses.

As you can see from the table, many of the STIs have similar symptoms or no symptoms at all. Many women show no symptoms and are therefore considered asymptomatic. Most health care professionals recommend that women who are sexually active be screened for all of the possible STIs during their yearly pap smear. These screenings are not part of the regular annual exam and must be specifically requested.

Not all STIs are curable. This means that medications will help alleviate the symptoms, but the virus will stay in an individual’s system. Sexually transmitted infections that are left untreated can progress to pelvic inflammatory disease, which is now thought to be the leading cause of infertility in women.
### TABLE 16.2  Sexually Transmitted Infections

<table>
<thead>
<tr>
<th>SEXUALLY TRANSMITTED INFECTION</th>
<th>FEMALE SYMPTOMS</th>
<th>MALE SYMPTOMS</th>
<th>NUMBER OF NEW CASES IN THE UNITED STATES ANNUALLY</th>
<th>CURABLE OR TREATABLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS (Acquired immunodeficiency syndrome)</td>
<td>Symptoms appear several months to several years after contact with HIV; unexplained weight loss; white spots in mouth; yeast infections that do not go away</td>
<td>Symptoms appear several months to several years after contact with HIV; unexplained weight loss; white spots in mouth</td>
<td>40,000</td>
<td>Treatable</td>
</tr>
<tr>
<td>Chlamydia</td>
<td>Yellowish discharge; bleeding between periods; burning or pain during urination</td>
<td>Painful and frequent urination; watery, puslike discharge from penis</td>
<td>3 million</td>
<td>Curable</td>
</tr>
<tr>
<td>Genital HPV (Human Papillomavirus)</td>
<td>Small, bumpy warts on the sex organs and/or anus; burning or itching around sex organs</td>
<td>Small, bumpy warts on the sex organs and/or anus; burning or itching around sex organs</td>
<td>5.5 million</td>
<td>Treatable</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>Thick yellow or gray discharge; abnormal periods or bleeding between periods; cramps or pain in lower abdomen</td>
<td>White, milky discharge from penis; painful, burning urination; swollen or tender testicles</td>
<td>600,000</td>
<td>Curable</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Symptoms appear 1-9 months after contraction; flu-like feelings that go away; tiredness; dark urine</td>
<td>Symptoms appear 1-9 months after contraction; flu-like feelings that go away; tiredness; dark urine</td>
<td>46,000</td>
<td>Treatable</td>
</tr>
<tr>
<td>Herpes</td>
<td>Burning sensation and redness at the site of infection; painful blister that will crust over, dry up, and disappear</td>
<td>Burning sensation and redness at the site of infection; painful blister that will crust over, dry up, and disappear</td>
<td>1 million</td>
<td>Treatable</td>
</tr>
<tr>
<td>Syphilis</td>
<td>Painless chancre; rash or white patches on skin; lymph nodes enlarge</td>
<td>Painless chancre; rash or white patches on skin; lymph nodes enlarge</td>
<td>36,000</td>
<td>Curable in early stages</td>
</tr>
<tr>
<td>Trichomoniasis</td>
<td>Yellowish, unpleasant-smelling discharge accompanied by a burning sensation during urination</td>
<td>Watery, white drip from the penis; burning or pain during urination; need to urinate more often</td>
<td>8 million</td>
<td>Curable</td>
</tr>
</tbody>
</table>

One particularly common STI is the human papillomavirus (HPV). In fact, the CDC estimates that currently 20 million people in the United States are infected with HPV. HPV is a sexually transmitted infection that is closely linked to cervical cancer. Gardasil, a vaccine that became available in 2006, provides protection against four types of HPV that cause 70 percent of cervical cancer cases. For more information about this vaccine or to receive the three injection series, contact your college or university health services or local health care provider.

**NEGOTIATING FOR SAFER SEX**

If you are sexually active, it’s important that you talk with your partner about ways to protect against sexually transmitted infections and unwanted pregnancy. Communicating with your partner about safer sex can be difficult and even embarrassing initially, but this communication can make your relationship stronger and more meaningful. The national organization Advocates for Youth offers these suggestions to help make this conversation easier and more effective:

- Use “I” statements when talking. For example, you might say, “I feel that abstinence is right for me at this time,” or “I would feel more comfortable if we used a condom.” Be assertive! Do not avoid talking about sex because you fear your partner’s reaction.
- Be a good listener. Let your partner know that you hear, understand, and care about what he or she is saying and feeling.
- Be patient with your partner and remain firm in your decision that talking is important.
- Understand that success in talking does not mean getting your partner to agree to do something. It means that you both have said what you honestly think and feel and that you have both listened respectfully to one another.
- Avoid making assumptions. Ask open-ended questions to discuss relationship expectations, past and present sexual relationships, contraceptive use, and testing for STIs.
- Do not wait until you become sexually intimate to discuss safer sex with your partner. In the heat of the moment, you and your partner might be unable to talk effectively.

You can avoid STIs and unwanted pregnancies by avoiding sex entirely. Apparently, 25 percent of college students choose this option, according to national research. For many people, masturbation is a reasonable alternative to sex with a partner.

If you’re in the remaining 75 percent, you’ll be safer (in terms of STIs) if you have only one partner. Yet you might feel that you’re at a point in your life when you would prefer to have multiple relationships simultaneously. Whether you’re monogamous or not, you should always protect yourself by using a condom.

In addition to being a contraceptive, the condom can help prevent the spread of STIs, including HIV. The condom’s effectiveness against disease holds true for anal, vaginal, and oral intercourse. The most current research indicates that the rate of protection provided by condoms against STIs is similar to its rate of protection against pregnancy (90 to 99 percent) when used correctly and consistently for each and every act of intercourse or oral sex. Note that only latex rubber condoms and polyurethane condoms—not
lambskin or other types of “natural membrane” condoms—provide this protection. The polyurethane condom is a great alternative for individuals who have allergies to latex. Use only a water-based lubricant (such as K-Y Jelly) to keep the condom from breaking.

**BIRTH CONTROL**

Sexually active heterosexual students have to take steps to prevent unwanted pregnancy. Planning is the key. What is the best method of contraception? It is any method that you use correctly and consistently each time you have intercourse. Table 16.3 compares the major features of some of the most common methods of birth control. You should be aware that the actual cost of some of these methods will vary depending on where you live and the kind of medical insurance you have. The costs listed in Table 16.3 will give you a general idea of how the costs of the various methods compare.

**TABLE 16.3 Methods of Contraception**

<table>
<thead>
<tr>
<th>METHOD</th>
<th>HOW EFFECTIVE IS THIS METHOD?</th>
<th>DOES IT PROTECT AGAINST HIV AND STIS?</th>
<th>AVERAGE COST</th>
<th>DO I NEED A PRESCRIPTION?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstinence</td>
<td>100%</td>
<td>Yes</td>
<td>Free</td>
<td>No</td>
</tr>
<tr>
<td>Cervical Cap</td>
<td>84%</td>
<td>No</td>
<td>$60-75</td>
<td>Yes</td>
</tr>
<tr>
<td>Contraceptive Injection</td>
<td>99%</td>
<td>No</td>
<td>$20-40 (visit to clinician); $35-75 (injection)</td>
<td>Yes</td>
</tr>
<tr>
<td>Diaphragm</td>
<td>94%</td>
<td>No</td>
<td>$15-75</td>
<td>Yes</td>
</tr>
<tr>
<td>Female Condom</td>
<td>95%</td>
<td>Yes</td>
<td>$4.00 per condom</td>
<td>No</td>
</tr>
<tr>
<td>Intrauterine Device (IUD)</td>
<td>99%</td>
<td>No</td>
<td>$175-500 (exam, insertion, and follow-up visit)</td>
<td>Yes</td>
</tr>
<tr>
<td>Male Condom</td>
<td>97%</td>
<td>Yes</td>
<td>$1.00; sometimes available for free</td>
<td>No</td>
</tr>
<tr>
<td>NuvaRing</td>
<td>99%</td>
<td>No</td>
<td>$15-50 monthly</td>
<td>Yes</td>
</tr>
<tr>
<td>Ortho Evra (The Patch)</td>
<td>99%</td>
<td>No</td>
<td>$15-50 monthly</td>
<td>Yes</td>
</tr>
<tr>
<td>Oral Contraceptive (The Pill)</td>
<td>99%</td>
<td>No</td>
<td>$15-50 monthly</td>
<td>Yes</td>
</tr>
<tr>
<td>Spermicide</td>
<td>94%</td>
<td>No</td>
<td>$8 per package</td>
<td>No</td>
</tr>
<tr>
<td>Tubal Ligation (Female Sterilization)</td>
<td>99%</td>
<td>No</td>
<td>$1,500-6,000</td>
<td>Yes</td>
</tr>
<tr>
<td>Vasectomy (Male Sterilization)</td>
<td>99%</td>
<td>No</td>
<td>$350-1,000</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Adapted from [http://www.plannedparenthood.org](http://www.plannedparenthood.org).
Always discuss birth control with your partner so that you both feel comfortable with the option you have selected. For more information about a particular method, consult a pharmacist, your student health center, a local family planning clinic, the local health department, or your private physician. The important thing is to resolve to protect yourself and your partner each and every time you have sexual intercourse.

What if the condom breaks or you forget to take your birth control pill? Emergency contraception pills can reduce the risk of pregnancy. According to Planned Parenthood Federation of America, if the pills are taken within 72 hours of unprotected intercourse, they can reduce the risk of pregnancy by 75 to 89 percent. Most campus health centers and local health clinics are now dispensing emergency contraception to individuals in need. Emergency contraception does come with side effects, such as nausea, vomiting, and cramping. In rare cases, serious health complications can result from emergency contraception. Be sure you ask your provider what symptoms to watch for.

**Substance Abuse**

In this section our purpose is not to make judgments, but to warn you about irresponsible use of some substances that can have a major negative impact on your college experience and your life: alcohol, tobacco, prescription drugs, and illegal drugs. While you’re in college, you will likely be exposed to the reckless use of one or more of these substances. We hope that this information will help you think twice and avoid the trouble that can come from substance abuse.

**MAKING DECISIONS ABOUT ALCOHOL**

Even if you don’t drink, you should read this information because 50 percent of college students reported helping a drunken friend, classmate, or study partner in the past year.

A number of surveys have confirmed that your peers aren’t drinking as much as you think they are, so there’s no need for you to try to “catch up.” Most students’ estimates of how much the average college student drinks are twice as high as the actual statistics. In the final analysis, it’s your decision to drink or not to drink alcoholic beverages, to drink moderately or to drink heavily, to know when to stop or to be labeled as a drunk who isn’t fun to be around. Between 10 and 20 percent of people in the United States become addicted to alcohol at some point in their lives. Alcohol can turn even people who don’t drink into victims, such as people who are killed by drunk drivers or family members who suffer from the behavior of an alcoholic. Over the course of one year, about 20 to 30 percent of students report serious problems related to excessive alcohol use. You might have heard news reports about college students who died or were seriously or permanently injured as a result of excessive drinking. Just one occasion of heavy or high-risk drinking can lead to problems.

How alcohol affects behavior depends on the dose of alcohol, which is best measured by blood alcohol content, or BAC (see Table 16.4). Most of the pleasurable effects of alcoholic beverages are experienced at lower BAC
levels, when alcohol acts as a behavioral stimulant. For most people, the stimulant level is around one drink per hour. Usually, problems begin to emerge at doses higher than .05, when alcohol acts as a sedative and begins to slow down areas of the brain. Most people who have more than four or five drinks on one occasion feel “buzzed,” show signs of impairment, and are likely to be higher risks for alcohol-related problems. However, significant impairment at lower doses can occur.

How fast you drink makes a difference, too. Your body gets rid of alcohol at a rate of about one drink an hour. Drinking more than one drink an hour might cause a rise in BAC because the body is absorbing alcohol faster than it can eliminate it.

Professionals can estimate BAC from your behavior. When someone is stopped for suspicion of drunk driving, police might videotape the person completing a series of tasks such as walking on a line and tipping his or her head back or touching the nose with the eyes closed. The degree of impairment shown in these tests can be presented as evidence in court.

<table>
<thead>
<tr>
<th>BAC RANGE</th>
<th>EFFECTS ON BEHAVIOR AND MAJOR DANGERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.02–0.03</td>
<td>Few obvious effects; slight intensification of mood. In some states, a BAC of .02 is the legal level of intoxication for individuals under 21 years of age.</td>
</tr>
<tr>
<td>0.05–0.06</td>
<td>Feeling of warmth, relaxation, mild sedation; exaggeration of emotion and behavior; slight decrease in reaction time and in fine muscle coordination; impaired judgment about continued drinking.</td>
</tr>
<tr>
<td>0.07–0.09</td>
<td>More noticeable speech impairment and disturbance of balance; impaired motor coordination, hearing and vision; feeling of elation or depression; increased confidence; might not recognize impairment.</td>
</tr>
<tr>
<td>0.08</td>
<td>Legal definition of intoxication in all states for people 21 years of age and older.</td>
</tr>
<tr>
<td>0.11–0.12</td>
<td>Coordination and balance become difficult; distinct impairment of mental faculties and judgment.</td>
</tr>
<tr>
<td>0.14–0.15</td>
<td>Major impairment of mental and physical control; slurred speech, blurred vision and lack of motor skills; needs medical evaluation.</td>
</tr>
<tr>
<td>0.20</td>
<td>Loss of motor control; must have assistance moving about; mental confusion; needs medical assistance.</td>
</tr>
<tr>
<td>0.30</td>
<td>Severe intoxication; minimum conscious control of mind and body; needs hospitalization.</td>
</tr>
<tr>
<td>0.30–0.60</td>
<td>This level of alcohol has been measured in people who have died of alcohol intoxication.</td>
</tr>
<tr>
<td>0.40</td>
<td>Unconsciousness; coma; needs hospitalization.</td>
</tr>
</tbody>
</table>

Adapted from Brown University Health Education website: http://www.brown.edu/Student_Services/Health_Services/Health_Education/atod/alc_aayb.htm.
At BAC levels of .025 to .05 a drinker tends to feel animated and energized. At a BAC level of around .05 a drinker can feel rowdy or boisterous. This is where most people report feeling a buzz from alcohol. At a BAC level between .05 and .08, alcohol starts to act as a depressant. So as soon as you feel that buzz, remember that you are on the brink of losing coordination, clear thinking, and judgment. Driving is measurably impaired at BAC levels lower than the legal limit of .08. In fact, an accurate safe level for most people might be half the legal limit (.04). As BAC levels climb past .08, you will become progressively less coordinated and less able to make good decisions. Most people become severely uncoordinated with BAC levels higher than .08 and might begin falling asleep, falling down, or slurring their speech.

Most people pass out or fall asleep when the BAC is above .25. Unfortunately, even after you pass out and stop drinking, your BAC can continue to rise as alcohol in your stomach is released to the intestine and absorbed into the bloodstream. Your body might try to get rid of alcohol by vomiting, but you can choke if you are unconscious, semiconscious, or severely uncoordinated.

Worse yet, at BAC levels higher than .30, most people will show signs of severe alcohol poisoning, such as an inability to wake up, slowed breathing, a fast but weak pulse, cool or damp skin, and pale or bluish skin. People exhibiting these symptoms need medical assistance immediately. If you ever find someone in such a state, remember to keep the person on his or her side with the head lower than the rest of the body. Check to see that the airway is clear, especially if the person is vomiting or if the tongue is blocking the back of the throat.

There are many home remedies (such as coffee, water, or cold showers) for helping to sober someone up, but none has been proven to work. Time is the only remedy because your liver can metabolize only one ounce of alcohol per hour. Harvard University has developed the following guidelines for helping an intoxicated friend:

- Never leave a drunk person alone.
- Keep the person from driving, biking, or going anywhere alone.
- If your friend wants to lie down, turn the person onto his or her side to prevent the inhalation of vomit.
- Don’t give the person any drugs or medications to try to sober him or her up.
- You can’t prevent the alcohol from being absorbed once it has been consumed, so giving a drunken person food will not prevent or reduce intoxication but can increase the risk of vomiting.
- Do not assume that a drunk person is just “sleeping it off” if he or she cannot be awakened. This person needs urgent care.

We know that many students have been subjected to what they might regard as exaggerated scare tactics by well-intentioned educators. However, there are many compelling warning indicators related to heavy drinking. Think about the following statistics and their possible application to you and your friends. The effects of heavy drinking are nothing less than a tragedy for many college students:

- 1,700 college students between the ages of 18 and 24 die each year from alcohol-related unintentional injuries, including motor vehicle crashes.
- 599,000 students between the ages of 18 and 24 are unintentionally injured each year while under the influence of alcohol.
- More than 696,000 students between the ages of 18 and 24 are assaulted each year by another student who has been drinking.  

Heavy, or binge, drinking is commonly defined as five or more drinks for males and four or more drinks for females on a single occasion. Presumably, for a very large person who drinks slowly over a long period of time (several hours), four or five drinks might not lead to a BAC associated with impairment. However, research suggests that in many cases the BAC of heavy drinkers exceeds the legal limit for impairment (.08).

The academic, medical, and social consequences of heavy drinking can seriously endanger a person’s quality of life. Research based on surveys conducted by the Core Institute at Southern Illinois University (http://www.siuc.edu/~coreinst) provides substantial evidence that heavy drinkers have a significantly greater risk of adverse outcomes. Among other problems, the Core data identify heavy drinking with increased risk of poor test performance, missed classes, unlawful behavior, violence, memory loss, drunk driving, regretful behavior, and vandalism, compared with all drinkers and all students. At the same time, college health centers nationwide are reporting increasing occurrences of serious medical conditions—even death—resulting from excessive alcohol use:

- Alcohol poisoning causing coma and shock
- Respiratory depression, choking, and respiratory arrest
- Head trauma and brain injury
- Lacerations
- Fractures
- Unwanted or unsafe sexual activity causing STIs and pregnancies
- Bleeding intestines
- Anxiety attacks and other psychological crises
- Worsening of underlying psychiatric conditions such as depression or anxiety

If you engage in heavy drinking for so long that your body can tolerate large amounts of alcohol, you might become an alcoholic. According to the medical definition, someone is alcohol-dependent or alcoholic if he or she exhibits three of the following symptoms:

1. A significant tolerance for alcohol
2. Withdrawal symptoms such as “the shakes”
3. Overuse of alcohol
4. Unsuccessful attempts to control or cut down on use
5. Preoccupation with drinking or becoming anxious when you do not have a drink
6. Making new friends who drink and staying away from friends who do not drink or who do not drink to get drunk
7. Continued heavy drinking despite experiencing alcohol-related social, academic, legal, financial, or health problems

---

Through its College Alcohol Study (CAS), the Harvard School of Public Health has found that consuming alcohol at binge levels has a negative effect on academic performance, social relationships, decision making, and health. Binge drinking is also associated with risky sexual behavior such as having unplanned or unprotected sex as well as antisocial behavior such as vandalism and getting in trouble with the police.

The College Alcohol Study also finds that a student’s alcohol use affects others in the immediate environment. Roommates and neighbors complain of the following:

- Disruption of sleep or study
- Property damage
- Verbal, physical, or sexual violence
- Visits from the police

Since the early 1990s, surveys conducted by the Southern Illinois University Core Institute have found a consistent negative correlation between grades and the number of drinks per week—and not just for heavy drinkers. Findings are similar for two-year and four-year institutions (see Figure 16.2).

**TOBACCO—THE OTHER LEGAL DRUG**

Tobacco use is clearly the cause of many serious medical conditions, including heart disease, some forms of cancer, and lung ailments. Over the years, tobacco has led to the deaths of hundreds of thousands of individuals.

---

*H. Wechsler and T. F. Nelson, “What We Have Learned from the Harvard School of Public Health College Alcohol Study: Focusing Attention on College Student Alcohol Consumption and the Environmental Conditions that Promote It.” *Journal of Studies on Alcohol and Drugs*, July 2008: 481–90.*
The University of Michigan’s Monitoring the Future Survey published by the National Institute on Drug Abuse estimates that rates of smoking have declined among college students and were at 20 percent as of 2007. But one concern about college students and smoking is “social smoking.” This term describes smoking by students who do so only when hanging out with friends, drinking, or partying. Most college students feel they will be able to give up their social smoking habit once they graduate, but after four years of college, some find that they are addicted to cigarettes.

**YOUR TURN**

In your opinion, given the cost and the dangers of smoking, what are the reasons that some college students continue to smoke?

Although a small percentage of college students use smokeless tobacco, one “dip” delivers the same amount of nicotine as three to four cigarettes. Smokeless tobacco contains twenty-eight known cancer-causing substances and is associated with the same level of health risk as cigarette smoking.

Although smoking is more prevalent among men than among women, according to the American Lung Association, the differences are narrowing, and the rates of smoking-related cancers in women are rapidly approaching or surpassing rates in men. One explanation as to why women smoke is the enormous amount of pressure on young women to stay thin. While there is some evidence that smoking increases metabolism and suppresses the appetite, the problem of being two or three pounds heavier cannot begin to compare to the dangers of smoking. It has been noted that on the average, female smokers have their first heart attack nineteen years before nonsmoking females do.

Chemicals in tobacco are highly addictive, making it hard to quit. Although young people might not worry about long-term side effects, increased numbers of respiratory infections, worsening of asthma, bad breath, stained teeth, and the huge expense should be motivations not to start smoking at all. Smoking and the use of hormonal birth control can be a deadly combination. A study conducted at Boston University School of Medicine showed that women who smoke and use hormonal birth control are nearly ten times more likely to have a heart attack than are women who don’t smoke and don’t use hormonal methods of birth control. A final reason for smokers to quit is the cost (see Table 16.5).

Many institutions and local hospitals offer smoking cessation programs to help individuals who are addicted to nicotine to quit smoking. Contact your campus health center for more information about taking this step toward quitting.

---


Researchers at the University of Michigan reported in 2008 that 11.2 percent of college students have used prescription stimulants for nonmedical purposes at some point and 6.9 percent have used them in the past year. Three classes of prescription drugs are the most commonly abused: opioids, central nervous system depressants, and stimulants. Some individuals might engage in “doctor shopping” to get multiple prescriptions for the drugs they abuse.

Opioids include morphine, codeine, and such branded drugs as OxyContin, Darvon, Vicodin, Demerol, and Dilaudid. Opioids work by blocking the transmission of pain messages to the brain. Chronic use can result in addiction. Taking a large single dose of an opioid can cause a severe reduction in your breathing rate that can lead to death.

Taken under a doctor’s care, central nervous system depressants, such as Valium, Librium, Xanax, and Halcion, can be useful in the treatment of anxiety and sleep disorders. The flip side is that exceeding the recommended dosage can create a drug tolerance, and the user will need larger doses to achieve the same result. If the user stops taking the drug, the brain’s activity can rebound and race out of control, possibly leading to seizures and other harmful consequences.

Stimulants, such as ephedrine, Ritalin, and Dexadrine, enhance brain activity, causing an increase in alertness, attention, and energy accompanied by elevated blood pressure and increased heart rate. Legal use of stimulants to treat obesity, asthma, and other problems has dropped off as their potential for abuse and addiction has become apparent.7

Ritalin is prescribed for a condition called ADHD (attention deficit/hyperactivity disorder) but is gaining recognition on college campuses as a “cramming drug.” This prescription drug costs only about 50¢ per tablet but sells on the street for as much as $15. College students are using Ritalin to stay awake for long periods of time to study for exams. Many students think

---

that since it is a prescribed drug, it must be harmless. The U.S. Department of Education’s Higher Education Center for Alcohol and Other Drug Abuse and Violence Prevention lists the following as possible adverse effects from abusing Ritalin: nervousness, vomiting, changes in heart rate and blood pressure, dependency, fevers, convulsions, headaches, paranoia, hallucinations, and delusions.

Another class of drugs that is of concern in the college setting is anabolic steroids. When most people think of steroids, they think about collegiate and professional athletes. But it is important for all college students to know and understand the dangers of these synthetic substances. According to the National Institute on Drug Abuse, steroids are taken orally or injected into the body in cycles that last weeks or months. Steroid abuse has many major side effects, including liver tumors, cancer, jaundice, fluid retention, high blood pressure, kidney tumors, and severe acne. Most anabolic steroid users are male and therefore have gender-specific side effects, including shrinking of the testicles, reduced sperm count, infertility, baldness, development of breasts, and increased risk for prostate cancer. Abusers also put themselves at risk for contracting HIV or other blood-borne viruses from using or sharing infected needles.

The abuse rate for steroids is fairly low among the general population. The 2007 Monitoring the Future Survey found that 1.9 percent of young adults ages 19 to 28 reported using steroids at least once during their lifetimes. Just over half a percent (0.6 percent) reported using steroids at least once in the past year, and 0.3 percent reported using steroids in the past month.

Drugs that can be purchased without a prescription are generally safe when taken according to directions on the bottle or package. But never take more than the recommended dose without consulting your physician.

Drugstores and health food stores also carry many supplements in pill or liquid form that are labeled “natural.” This label does not mean that the product has been tested, is safe, or is worth your money. The Food and Drug Administration (FDA) does not regulate supplements as they do food or other medication, so it is very important to do thorough research and to consult your physician before starting any over-the-counter regimen.

**ILLEGAL DRUGS**

Illegal recreational drugs, such as marijuana, cocaine, methamphetamine, MDMA (ecstasy), and heroin, are used by a much smaller number of college students and far less frequently than alcohol. Yet these drugs are significant public health issues for college students. The penalties associated with the possession or use of illegal drugs tend to be much more severe than those associated with underage alcohol use.

Athletic departments, potential employers, and government agencies do routine screenings for many of these illegal drugs. Future employability, athletic scholarships, and insurability could be compromised if you have a

---

positive drug test for any of these substances. A brief summary of five of the most prevalent drugs follows.

**Marijuana.** The effects of marijuana can linger for three to seven days, depending on the smoker and the potency of the drug. Chronic use of marijuana can lead to a lethargic state in which users might tend to forget about current responsibilities (such as going to class). Long-term use carries the same risks of lung infections and cancer that are associated with smoking tobacco.

**Ecstasy.** MDMA, commonly known as ecstasy, is a synthetic (human-made) drug, in contrast to drugs that are derived from plants, such as marijuana and heroin. Many young people believe that MDMA is safe and offers nothing but a pleasant high for the $25 cost of a single tablet (“How bad can it be if it’s that cheap?” is one rationalization); however, the reality is far different. Taken orally, the effects of MDMA last approximately four to six hours. Many people will take a second dose when the initial dose begins to fade. Some tablets contain drugs in addition to MDMA, including amphetamine, caffeine, dextromethorphan, ephedrine, and cocaine. MDMA significantly depletes serotonin, a substance in the brain that helps regulate mood, sleep, pain, emotion, and appetite as well as other behaviors. It takes the brain time to rebuild the serotonin needed to perform important physiological and psychological functions. Of great concern is MDMA’s adverse effects on the pumping efficiency of the heart. Heavy users can experience obsessive traits, anxiety, paranoia, and sleep disturbance. One study indicates that MDMA can have long-lasting effects on memory.9

**Heroin.** Numerous reports have suggested a rise in heroin use among college students. A highly addictive drug with the potential to be more damaging and fatal than other opioids, heroin is the most abused and most rapidly acting of this group. One of the most significant—and surest—effects of heroin use is addiction. The human body begins to develop tolerance to the drug on first use. Once tolerance is built up, the abuser must use more of the drug to achieve the same intensity. Within a short time, users must take the drug more and more often to alleviate the symptoms of addiction. Eventually, they don’t get much of a high from the heroin but take the drug simply to avoid the discomfort of withdrawal. Heroin can be injected, smoked, or snorted. Injection is the most efficient way to administer low-purity heroin. However, the availability of high-purity heroin and the fear of infection by sharing needles have made snorting and smoking the drug more common. Some users believe that snorting or smoking heroin will not lead to addiction. They are 100 percent wrong.

Chronic users of intravenous drugs can develop collapsed veins, infection of the heart lining and valves, abscesses, and liver disease. Users are also at risk for pulmonary complications, including various types of pneumonia. In addition to the effects of the drug itself, users who inject heroin or share needles put themselves at risk of contracting HIV, hepatitis B and C, and other

---

blood-borne viruses. A heroin overdose is known to cause slow and shallow breathing, convulsions, coma, and possibly death.

**Cocaine.** Cocaine produces an intense experience that heightens senses. A cocaine high lasts only a short time; then the good feelings are gone. During the crash, the user might feel tired and unmotivated and find it impossible to sleep. Cocaine is highly addictive. In some instances, users have died of cardiac arrest while taking the drug. Some users are shocked into quitting when their nasal septum (the wall of cartilage separating the two nostrils) begins to develop holes caused by cocaine use.

**Methamphetamine.** Methamphetamine, often abbreviated to “meth,” is particularly dangerous because it costs so little and is so easy to make. Much of it is produced in makeshift labs in homes or college residences, which means not only that the quality varies from batch to batch but also that it’s virtually impossible to know what else is in the mixture.

The drug can initially produce euphoria, enhanced wakefulness, increased physical activity, and decreased appetite. Prolonged use can lead to binges, during which users take more meth every few hours for several days until they run out of the drug or become too disorganized to continue. Chronic abuse can lead to psychotic behavior, characterized by intense paranoia, visual and auditory hallucinations, and out-of-control rages that can be coupled with extremely violent behavior. Researchers have found that many former meth users have experienced long-term brain damage, and it is unknown whether the damage can ever be reversed.
Where to go
FOR HELP . . .

ON CAMPUS ►

Counseling Center  Professionals here will offer individual and group assistance and lots of information. Remember that their support is confidential, and you will not be judged.

Health center/infirmary: On most campuses the professionals who staff the health center are especially interested in educational outreach and practicing prevention. You should be able to receive treatment as well.

Health education and wellness programs: College campuses assume and recognize that for many students, problems and challenges with alcohol, other drugs, and sexual decision making and the consequences are part of the college universe. Student peer health educators who are trained and supervised by professionals can provide support. Taking part in such peer leadership is also a great way to develop and practice your own communication skills.

Campus support groups: Many campuses provide student support groups led by professionals for students dealing with problems related to excessive alcohol and drug use, abusive sexual relationships, and other issues.

DrugHelp: http://www.drughelp.org. This is a private, nonprofit referral service for drug treatment.
Methamphetamine addiction: http://www.methamphetamineaddiction.com. Learn more about the dangers of methamphetamine at this website.
The Centers for Disease Control and Prevention: http://www.cdc.gov. This website is an excellent resource for all of the topics in this chapter.

If you have questions about suicide prevention, contact the National Suicide Prevention Lifeline at 1-800-273-TALK or on the organization’s website http://www.suicidepreventionlifeline.org.

Here are some other valuable resources: National Eating Disorders Association: http://www.nationaleatingdisorders.org
Shape Up America: http://www.shapeup.org
National Health Information Center: http://www.healthfinder.org
Planned Parenthood Federation of America: http://www.plannedparenthood.org
U.S. Food and Drug Administration: http://www.fda.gov

ONLINE ►

Advice about College Student Health
Issues: http://www.goaskalice.com. This website, sponsored by Columbia University, has answers to many health questions.


Advice from the American Dietetic Association: http://www.eatright.org. This website provides information on healthy eating and nutrition.

How tobacco affects your health: http://www.cancer.org. To learn more about the health effects of tobacco, visit the American Cancer Society.
The Center for Young Women’s Health: http://www.youngwomenshealth.org/collegehealth10.html. This website has helpful advice on sexual health as well as other issues.

National Clearinghouse for Alcohol and Drug Information: http://www.ncadi.samhsa.gov/. This organization provides up-to-date information about the effects of alcohol and drug use.

MY INSTITUTION’S RESOURCES ►

© Bedford/St. Martins / bedfordstmartins.com
Chapter REVIEW . . .

One-Minute PAPER . . .
This chapter provides a lot of tips and strategies for staying mentally and physically healthy. What was the most surprising or unexpected point made in this chapter? What interesting questions remain unanswered about these topics?

Applying What You’ve LEARNED . . .
Now that you have read and discussed this chapter, consider how you can apply what you have learned to your academic and personal life. The following prompts will help you reflect on the chapter material and its relevance to you both now and in the future.

1. Identify one area in your life in which you need to make changes to become healthier. How do you think becoming healthier will improve your performance in college? What are the challenges you face in becoming healthier?

2. If you could make only three recommendations to an incoming first-year college student about managing stress in college, what would they be? Use your personal experience and what you have learned in this chapter to make your recommendations.

Building Your PORTFOLIO . . .

"Imagine if every Thursday your shoes exploded if you tied them the usual way. This happens to us all the time with computers, and nobody thinks of complaining."

~JEF RASKIN (1943–2005), American human-computer interface expert

ARE YOU “TECHNOSTRESSED”? Ever-changing, ever-improving technology is a wonderful part of our modern world, but it can also be an additional stressor in our everyday lives. It seems the list of hot, new gadgets grows longer every day. How does being constantly accessible, being a multitasking marvel, having constant reminders of what you haven’t done yet, and sorting an overload of information affect your stress level? Do you occasionally find yourself overwhelmed or even a bit lonely when you are face to face with your computer instead of your friends, families, or coworkers? The hurried, plugged-in life can be exhausting and nerve-racking, especially if you get an incomprehensible error message on your computer screen the night before a big paper is due!

How are you “plugged in”? Create a Word document in your portfolio and re-create the following table.
1. Describe all the ways in which your life is affected by technology. How are your health and well-being affected, both positively and negatively, by the things you list? *Tip: Think of how you use technology for entertainment and for class or work.*

<table>
<thead>
<tr>
<th>My Gadgets &amp; Gizmos</th>
<th>Positive Aspects</th>
<th>Negative Aspects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instant Messenger</td>
<td>Ability to communicate anywhere in the world, in a matter of seconds, 24/7</td>
<td>Staying up late, talking to my friends = No sleep!</td>
</tr>
</tbody>
</table>

Sometimes it seems as if all of the technology that is supposed to make our lives easier actually adds to the balancing act. Here are a few tips for reducing your stress level and avoiding a “technology takeover”:

- Schedule some downtime offline for yourself.
- Don’t become a text message junkie.
- Don’t try to multitask 24/7! Take advantage of time to exercise, eat, or just take a break without the demands of e-mail and cell phones.
- Recognize the warning signs of Internet addiction, for example:
  - Using the Internet to escape from problems or responsibilities
  - Missing class, work, or appointments to spend time online
  - Always allowing the Internet to substitute for face-to-face interaction with others

2. Save your reflections in your portfolio on your personal computer or flash drive. The next time you’re feeling stressed out, revisit this activity and evaluate the role technology is playing in your life.