



SUMMER 2024

# Healthy *Living*



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## Signs of ADHD in children

Rates of attention deficit/hyperactivity disorder (ADHD) among children are high. A 2022 survey from the Centers for Disease Control and Prevention found that more than 11 percent of children between the ages of three and 17 have been diagnosed with ADHD. Though ADHD is slightly less common among youngsters in Canada, affecting between 5 and 7 percent of the nation's children according to the Centre for ADHD Awareness, Canada, it's still considered one of the most prevalent neurodevelopmental disorders in the country.

The name alone sheds light on the potential impact ADHD can have on students' academic performance. Children who struggle to remain attentive and/or sit still are likely to have problems in a traditional classroom setting. But students

and their families are not helpless against ADHD. The first step parents can take is to learn the warning signs of ADHD in children. The United Kingdom-based National Health Service reports that symptoms of ADHD can be categorized into two types of behavioral problems: inattentiveness and hyperactivity and impulsiveness.

### Inattentiveness

Inattentiveness is marked by difficulty concentrating and focusing. Children experiencing inattentiveness as a byproduct of ADHD may exhibit the following symptoms:

- A short attention span and being easily distracted
- A tendency to make careless mistakes in schoolwork or when engaging in other tasks
- Forgetfulness and a propensity to lose things

- An inability to continue performing tasks that are tedious or time-consuming
- Difficulty listening to or carrying out instructions
- Constant pivoting between activities or tasks
- Difficulty organizing tasks

### Hyperactivity and impulsiveness

Symptoms that fall under the category of hyperactivity and impulsiveness can adversely affect academic performance and also lead to difficulties with social interaction with other children and adults. Such symptoms may include:

- An inability to sit still, especially in calm or quiet surroundings, such as a classroom
- Constant fidgeting
- An inability to concentrate on tasks

- Excessive physical movement
- Excessive talking
- An inability to wait one's turn
- Acting without thinking
- Interrupting conversations
- Little or no sense of danger

Parents who suspect their child has ADHD are urged to speak with the child's physician before drawing any conclusions. Many youngsters, particularly those experiencing classroom settings or other disciplined, highly structured environments for the first time, may exhibit some of the aforementioned symptoms but not have ADHD. A frank discussion with the child's physician can help parents determine if their child is exhibiting typical childhood behaviors or perhaps showing signs of ADHD. More information about ADHD is available at [cdc.gov](http://cdc.gov), [www.nhs.uk](http://www.nhs.uk) and [caddac.ca](http://caddac.ca).



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# Understanding Addiction to Support Recovery

BY CHARLOTTE L. REEVES

Addiction can happen to anyone. One in 14 Americans reports experiencing a substance use disorder. There is not one single driving factor that leads to addiction; however, the progression of addiction is a major contributing factor. According to the National Center on Addiction and Substance Abuse, 9 out of 10 individuals who struggle with addiction began drinking, smoking, and using other drugs before they turned 18 years of age, a time when the brain is still developing. This is why addiction is often referred to as a “Disease of Adolescence.” Addiction is a complex issue: some use drugs to help cope with stress, trauma, or to help with mental health issues and others develop opioid use disorder after misusing prescription drugs prescribed

by doctors.

Drugs flood the brain with chemicals that take over the brain’s reward system, causing a person to repeat behaviors that feel good but may be unhealthy. The brain adapts to continued drug use by developing a tolerance, which means it takes more of a drug to feel the same result. Not only does this lessen the brain’s ability to resist temptation, but it can also affect the amount of pleasure a person receives from normal, healthy activities like enjoying food or the company of others.

Opioid use disorder may require medication as the first course of treatment. Medications for opioid use disorder (MOUD) can help with cravings and withdrawal symptoms. MOUD is effective in helping people overcome addiction, stay in recovery longer, and prevent relapse.

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medicine with counseling or other behavioral therapy is called medication-assisted treatment (MAT). MAT can be an effective way to overcome addiction to opioids. Behavioral therapy can be equally important as it helps people change their attitudes and behaviors related to drug use, helps prevent relapse, and keeps people in recovery longer.

Relapse may happen to people who use drugs and can happen even years after not taking the substance. More than anything, relapse may be a sign that more treatment or a different method is needed. A routine review of one's treatment plan may be necessary to determine if another method could be more effective.

Addiction is a disease. People suffering from



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substance use disorders have trouble controlling their drug use even though they know this behavior is harmful. Overcoming a substance use disorder is not as simple as resisting the temptation to take drugs through willpower alone.

Recovery may involve medication to help with

cravings and withdrawal as well as different forms of therapy. It may even require checking into a rehabilitation facility. Recovery can be challenging, but it is possible and rewarding.

If you would like more information on understanding addiction to support recovery, please contact Charlotte

Reeves, Surry County Office of Substance Abuse Recovery, Prevention and Administrative Services Administrator, at reevesc@co.surry.nc.us. Visit our website at [surrycountycare.com](http://surrycountycare.com) for more information about substance use disorder and the many resources in Surry County.

**The majority of those who have a substance use disorder started using before age 18 and developed their disorder by age 20.**

**Treatment is effective  
Recovery is possible**



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# Joint pain and injuries: When to consider surgery. When to wait or pass.

*Novant Health orthopedic surgeon, Matthew Spivey, MD, explains why surgery is best in some cases and not in others*

BY KATIE TOUSSAINT

**K**nee, shoulder and hip surgeries are the most common of the millions of orthopedic surgeries performed every year in the U.S. But is surgery always the go-to recommendation for orthopedic injuries – those injuries related to the bones and joints? If you see a surgeon, is surgery imminent?

Dr. Matthew Spivey at Novant Health Orthopedics & Sports Medicine - King specializes in orthopedic sports medicine for shoulders, knees and hips. He treats all ages, and, in his mind, everyone is an “athlete” in some way. Spivey, who serves in the King office on Mondays, answers a few key questions about orthopedic surgery.



Dr. Matthew  
SPIVEY

## **When you have a joint injury or joint pain, how do you know it's actually time to see a doctor?**

A few symptoms merit at least seeing a primary care doctor or someone at an urgent care. If someone has a significant event or injury where their joint was normal leading up to it and now that joint is

experiencing pain, swelling or limited movement, they should probably see a doctor. Also, if they can't bear weight on it, if it's a knee or a hip for example, they should see a doctor. It would help to get an X-ray to at least make sure nothing is going on that's going to get worse.

## **When you're referred to an orthopedic surgeon, does the discussion always turn to surgery?**

Based on an individual patient's situation, I try to always talk about both the operative and nonoperative options. For example, injuries like hip fractures, large acute rotator cuff tears and anterior cruciate ligament (ACL) ruptures are structural mechanical problems that, even if they can heal without surgery, can lead to dysfunction or problems down the line.

We explain the concept and the risks of deciding against surgery, and the potential benefits of surgery. Part of my job is to teach patients every day about risks and benefits of different approaches. I think it's important that they are empowered to make well-informed decisions about their care.

## **Surprisingly, even an ACL tear doesn't automatically require surgery. What do you base your recommendation on?**

The ACL gives your knee stability in the front to back plane, and additional structures around the knee contribute to that. So, you generally don't need an ACL that functions normally to do straight-line walking, standing, day-to-day activities and to live a more sedentary lifestyle where you're not doing higher impact exercise. It's possible to do quite well without a functional ACL.

But people who do sprinting, cutting, pivoting, side-to-side movements, higher velocity movements and change of direction definitely need a functional ACL. It depends

on your activities. If a tennis player doesn't choose ACL surgery for example, they are likely to experience some degree of knee instability front to back and where rotation is involved, so they risk additional injury to structures in the knee like the meniscus, cartilage or another ligament.

And over a long period of time, they may be at increased risk of developing post-traumatic arthritis in the knee.

## **Why is there generally a waiting period when orthopedic surgery is recommended?**

If you take someone with an ACL injury, for example, and rush them off to surgery right away, their knee is very swollen and stiff with a limited range of motion at the time

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changing the way they exercise and stay healthy.

With arthritis in the knee and hip for example, weight-bearing and repetitive pounding type exercises or even long walks can contribute to pain and swelling. That patient might try swimming, water aerobics or other low-impact exercises to get their heart rate up without making their joints so sore and painful. That's more sustainable.

**Do you often see patients who need surgery resisting it?**

Most patients want to avoid surgery if they can, and that's very reasonable. There is always some degree of risk with every surgery. It's really about helping patients decide if the risk-benefit ratio is in their favor. We're always here to talk through their options.

of surgery. The surgery itself is basically a second injury to the joint, and doing it too early after injury brings a high risk of developing severe stiffness and lost range of motion. When surgery happens too soon after the injury, there are some cases where patients even need a second surgery to remove scar tissue to help regain normal knee mobility.

It can be frustrating to delay surgery, but it's worth taking a couple of weeks for prehab and physical therapy to restore functional range of motion of the knee. When the patient is back to walking as normally as possible and their quadriceps strength is back to baseline, they can have a better surgical outcome.

**What orthopedic injuries can you allow to heal on their own, without surgery?**

A good example of a condition in the shoulder is tendonitis (inflammation of the cords connected to muscle and bone) of the rotator cuff. It's very common for some folks to get irritation and some tearing of surface fibers; bursitis (inflammation of the

fluid-filled cushions called bursa around many tendons and joints) is similar.

Many patients with these conditions can get better without surgery. Typically, one treatment or another can improve inflammation, whether that's medication or an injection to facilitate physical therapy and rehab. This is actually the fix for the tendonitis. This doesn't mean patients should not seek treatment for this kind of condition. We hope that physical therapy and rehabilitation will be effective and that these patients will see gradual improvement and resolution of the problem. But, if after a course of therapy you're not seeing improvement or the condition is getting worse, we might need to think about getting an MRI or considering surgery. Surgery can be a backup option.

**To sum it up, what are some nonoperative surgical approaches to orthopedic injuries?**

Short-term rest and activity modification, injections, physical therapy, anti-

inflammatory medications. It's all tailored to a patient's situation. We can sometimes start with very simple things like a patient potentially

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## Northern Regional Hospital is nationally recognized for its commitment to providing high-quality stroke care

*The American Heart Association presents the Get With The Guidelines® - Stroke Gold Plus award for proven dedication to ensuring all stroke patients have access to best practices and life-saving care.*

Northern Regional Hospital has received the American Heart Association's Get With The Guidelines® - Stroke GoldPlus quality achievement award for its commitment to ensuring stroke patients receive the most appropriate treatment according to nationally recognized, research-based guidelines, ultimately leading to more lives saved and reduced disability.

Stroke is the No. 5 cause of death and a leading cause of disability in the U.S. A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked by a clot or bursts. When that happens, part of the

brain cannot get the blood and oxygen it needs, so brain cells die. Early stroke detection and treatment are key to improving survival, minimizing disability, and accelerating recovery times.

Get With The Guidelines puts the expertise of the American Heart Association and American Stroke Association to work for hospitals nationwide, helping ensure patient care is aligned with the latest research- and evidence-based guidelines. Get With The Guidelines - Stroke is an in-hospital program for improving stroke care by promoting consistent adherence to these guidelines, which can minimize the long-

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term effects of a stroke and even prevent death.

“Obtaining Gold Plus recognition from the American Heart and American Stroke Associations is a reflection of the outstanding stroke care patients receive at Northern Regional Hospital. This award highlights the success we have experienced as we collaborate not only among Northern Regional staff but also with valued community partners such as EMS, Rehab and Therapy agencies, Pharmacists and Primary Care Providers. We are honored to consistently provide exceptional stroke care to members of our local community and the surrounding region.”

Each year, program participants qualify for the award by demonstrating how their organization has committed to providing quality care for stroke patients. In addition to following treatment guidelines, Get With The Guidelines participants also educate patients to help them manage their health and recovery at home.

“We are incredibly pleased to recognize Northern Regional Hospital for its commitment to caring for patients with stroke,” said Steven Messe, M.D., volunteer chairperson of the American Heart

Association Stroke System of Care Advisory Group and professor of neurology and director of fellowships of neurology at the Hospital of the University of Pennsylvania.

“Participation in Get With The Guidelines is associated with improved patient outcomes, fewer readmissions and lower mortality rates – a win for health care systems, families and communities.”

Northern Regional Hospital also received the American Heart Association’s Target: StrokeSMElite award. To qualify for this recognition, hospitals must meet specific criteria that reduce the time between an eligible patient’s arrival at the hospital and treatment with thrombolytic therapy.

Northern Regional Hospital also received the American Heart Association’s Target: Type 2 Diabetes™ Honor Roll award. Target: Type 2 Diabetes aims to ensure patients with Type 2 diabetes, who might be at higher risk for complications, receive the most up-to-date, evidence-based care when hospitalized due to stroke.

Northern Regional Hospital also met specific scientific guidelines as a Primary Stroke Center, featuring a comprehensive system for

rapid diagnosis and treatment of stroke patients admitted to the emergency department.

**About Get With The Guidelines®**  
 Get With The Guidelines® is the American Heart Association/American Stroke Association’s hospital-based

quality improvement program that provides hospitals with the latest research-based guidelines. Developed with the goal of saving lives and hastening recovery, Get With The Guidelines has touched the lives of more than 14 million patients since 2001. For more information, visit [heart.org](http://heart.org).



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# Help a child grow as a person



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childhood development specialists say parents should stimulate baby talk and treat it as real conversation.

Individuals should respond to baby's gurgling and actions and engage throughout the day. As the child grows, responding to their words, questions and thoughts can help expand a child's vocabulary and boost reading levels later in life.

- Help kids find their lanes. Parents may only know what they experienced and the paths they took. It is reasonable for mothers and fathers to want their children to follow in their footsteps, and sometimes parents push their kids into paths that do not fit. Helping kids find their niche requires trial and error, patience, and even creativity. Eventually children will discover their passions, particularly when encouraged by their parents.

- Provide love and support, not criticism. Parents can be their kids' biggest fans, but not at the cost of doing everything for them or shielding children from disappointment. They also should not be harsh critics. To help shape strong children who can grow and mature, parents have to find a balance between being

supportive and watching every move and preventing any obstacle. Adversity can help kids grow.

- Share your own stories. Children may be embarrassed by struggles or failures and want to give up. One of the best ways parents can be supportive is by sharing stories of one's own struggles and how they overcame them. Perhaps a parent can help a kid who is finding material in school challenging by telling a story about a poor test grade and how he or she needed tutoring but was able to improve performance later on.

- Talk about mistakes that ultimately proved learning opportunities. Children may believe they have to be perfect at everything, and that can set them up for failure when they

don't accomplish every goal. Adults can offer an example of a mistake they made that helped them grow, such as getting stuck in foul weather on a hike because they didn't check the weather, and having to travel miles in wet shoes. That learning experience may have helped the adults be more mindful of being prepared for outdoor events.

- Make time for fun. Success doesn't always come just from hard work. It also involves knowing when it is time to let loose and unwind with enjoyable activities. Then again, learning opportunities don't always need to be chores. Learning through play and exploration also is possible.

Children can grow and develop positive traits with support from their parents.

Parents want their children to be successful, healthy and happy. That often means providing the best education they can, encouraging quality friendships and being supportive when a child may need some extra guidance. Although there is no magic formula to guide children toward becoming the best versions of themselves, here are steps that parents and other caregivers can take to promote youngsters' personal growth.

- Respond to children's sounds and gestures. Early

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## Get ready for scholastic sports seasons

Students have plenty of reasons to participate in school sports and many of them confirm what the experts say regarding the benefits of such pursuits. The National Federation of State High School Associations (NFHS) indicates some of the main benefits include:

- Building relationships through the team
- Developing care and empathy
- Maintaining strong physical fitness
- Understanding limitations and how to push past them
- Listening to and learning from coaches

Millions of children participate in scholastic sports and recreational leagues across the country. Young athletes can take certain steps to prepare for the upcoming season.

### Get a sports physical

Most sports programs will not enroll participants without a recent sports physical. Physicals typically must be updated every year. Students and parents should check the date on athletes' most recent physical examination and be sure that they schedule one prior to the start of the season. Remember to bring along any athletic forms that will need to be filled out and officially signed by health care professionals.

### Create a portal account

Schools now rely primarily on technology to organize the acquisition of health records and other pertinent information so that students can participate in play. Services like Student Central and GoToMySportsPhysical enable schools to aggregate forms and

sports clearance information in one place. Usage of these systems typically requires setting up both parent and student accounts and then populating the information and digitally signing as needed. In addition to uploading sports physical forms, the portal may ask users to sign waivers and to confirm that they have read information regarding injury risk.

### Check gear

Student athletes should confirm which gear they may need for the upcoming season. Check last season's gear to ensure it still fits and remains in good working order.

### Get in shape

Some athletes continue with their training regimens all year long. Others may take breaks between seasons. It may be necessary to create a new exercise plan so athletes can start acclimating their bodies to the demands of the sport.

### Undergo a concussion baseline test

Some schools require a concussion baseline test prior to sports participation. It is a specific questionnaire for each player that will create baseline data regarding processing speed, symptoms, pain levels, balance, and physical abilities, according to CognitiveFx. Should a sports injury occur, the test will be repeated and the results can be compared to assess depth of injury.

The new scholastic season may be beginning shortly and student athletes need to take certain steps to ensure they're eligible and able to play when practices start.

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# Back to school can mean the return of lice

The start of a new school year often means shopping for supplies, making new friends and getting acclimated to the teaching styles of new teachers. Unfortunately, a new school year also can mean head lice.

The Centers for Disease Control and Prevention says there is no precise data regarding how many people get head lice each year. However, an estimated six to 12 million infestations occur each year in the United States among children between the ages of three and 11.

## What is head lice?

The Minnesota Department of Health says a head louse is an insect that can infest people. Lice make their homes in human hair and feed on blood. Head lice multiply rapidly by laying small, gray-colored, oval-shaped eggs known as nits. The nits are sticky and attach to the base of the hair close to the scalp. Unlike other blood-sucking insects, such as mosquitoes or ticks, head lice are not known to spread disease.



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## Who gets head lice?

Head lice do not discriminate when they choose a person. They are equal opportunity feeders and will hop on just about any scalp for a meal. Head lice are not indicative of a lack of hygiene.

The CDC says infestation with head lice is most common among preschool- and elementary school-aged children and members of their household, including caretakers.

## What are the signs of head lice?

Itching is the most common symptom of head lice, says

the Mayo Clinic. A louse bite causes an allergic reaction. Itchiness may occur on the scalp, neck and ears. During visual inspections of the hair and scalp, one may be able to see lice and nits. However, both the eggs and the lice themselves are very small, so it can be challenging to spot them.

Parents and caregivers who suspect a child has lice should consult with a school nurse or a pediatrician. Studies show that many children are treated for head lice with home remedies or nonprescription medications when they didn't even have lice. Dandruff,

residue from hair products, scabs, or even dirt can be mistaken for lice.

## How can head lice be prevented?

The most common way to contract head lice is through head-to-head contact. Children should avoid head contact during play and other activities at school and home. Although transmission through shared brushes, combs, towels, hats, and clothing is less common, it is still possible, so sharing of these items should be discouraged.

The CDC says using a hot water cycle in the laundry and the high heat drying cycle can kill head lice on clothing and other items. Seal items that cannot be washed in a plastic bag and store them for two weeks.

Vacuum the floor and furniture to remove any nits or lice that have fallen off the head. Fumigant sprays or fogs, which can be toxic if inhaled, are not necessary to control head lice, indicates the CDC.

A new school year may compel families to think about lice. Although lice is a nuisance, infestations can be treated.

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## 8 healthy snack ideas kids will love

Parents know that growing children need a lot of food. According to pediatric dietitian Hanna Leikin, MS, RD, CSP, LD, kids need a higher calorie demand per body weight compared to adults to support bone development, muscle growth and other bodily functions. Perhaps that's why it seems like a stocked refrigerator or pantry can become barren in just a few days when kids are in the house.

Children are frequently looking for snacks between meals, which means that parents need to have a variety of snack foods at the ready for their youngsters. But it can be a struggle to find healthy snacks children will eat. With that in mind, parents can consider these eight healthy alternatives to less nutritional fare like chips or sugary treats.

**1. Fruit on a stick:** It seems any food enjoyed on a stick is fun to eat. This is certainly an item for older kids, as parents won't want to worry about younger children

getting injured with the pointy wooden skewers. Simply slide a variety of chopped or sliced fruit onto the skewers and make a healthy, colorful snack. For an added bonus, include a small cup of low-fat vanilla yogurt for a fruit dip.

**2. Baby carrots and hummus:** Who can resist baby carrots? After all, they seem tailor-made for kids' small fingers. Pair with a homemade or store-bought hummus, which is full of protein and fiber. You can even find dessert hummus, which may prove particularly appealing to children's palates.

**3. Crackers and cheese:** Choose whole-grain crackers and a low-fat cheese. This provides the crunch of chips without the fat and calories. In addition, cheese adds protein and the benefits of calcium and other nutrients found in dairy.

**4. Nut butters and pretzels:** Kids need unsaturated fats to spur brain growth and overall development. Nuts and nut butters offer these good fats. The National Institute of

Allergy and Infectious Diseases says peanut butter can be given to kids as young as four months old, and that early exposure may prevent peanut allergies. Additional nut butters include almond and cashew. Let kids dip pretzels into the nut butter for a filling snack.

**5. Overnight oats creations:** Let kids take part in building jars or containers of overnight oats with their favorite ingredients. When old fashioned rolled oats are mixed with low-fat milk (or dairy alternatives), raisins, granola, fresh fruit, chia seeds, and even low-fat yogurt and left to sit overnight, the result is a spoonable treat that's ideal for meals and snacks. Plus the fiber in oatmeal will help keep children feeling fuller longer.

**6. Frozen smoothie bowl:** This is a great alternative to ice cream. Simply blend your child's favorite frozen fruits

(and toss in a few veggies) with low-fat Greek yogurt. Serve in a bowl with toppings like granola, finely chopped nuts or coconut flakes.

**7. Energy balls or bars:** Mix dates, nuts, seeds, and rolled oats and press into bar shapes or roll into bite-sized balls when kids need a sweet and energizing snack.

**8. Turkey and cheese roll-ups:** Ensure that kids are getting enough protein by offering a lean protein source like sliced turkey. Roll up a slice of turkey or sliced chicken breast around a cheese stick for a portable and fun snack.

Healthy snacks for children are easier to dream up than one may think. It can take children several times of seeing a new food on his or her plate before being inclined to try it, so parents should stay the course with healthy snacks even if kids are initially reluctant to try them.

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# What's the Harm? A Call to Action on Social Hosting



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**BY PAULA SHEETS**

People who disagree with social host laws like to argue that prohibiting a behavior doesn't prevent it; as if prevention were nothing more than making an activity illegal. Prevention efforts like these actually focus on changing community behaviors, for some very good reasons. Teamwork among community members as a whole, to support safety measures like these, cuts costs and unnecessary damage to

individuals and families.

In Surry County, All-Stars Prevention is raising awareness of the safety risks of providing alcohol to minors with the "Parents Who Host Lose the Most" toolkit by Prevention Action Alliance. Our goal with the ongoing social hosting campaign is to change parental perceptions of youth alcohol use in our community, as well as ignite conversation about prevention measures that work!

When people argue that teaching kids to drink responsibly in a controlled

environment is safer than "finding them drinking in a dark alley or a public park," they're incorrect. Studies show that overseeing alcohol use at home has little success in avoiding long-term problem drinking behaviors with teens. The problem is, providing alcohol still sends the message to your child that you approve of them drinking. This approval is then carried with them to other situations and locations where they face the decision to drink.

In an article "Parenting to Prevent Childhood Alcohol

Use," the National Institute on Alcohol Abuse and Alcoholism (NIAAA) says that some parents wonder if allowing their kids to drink at home can help them develop "an appropriate relationship with alcohol." Research finds the opposite to be true. In a study of 6th, 7th, and 8th graders, it was found that students whose parents allowed them to drink at home and/or provided them with alcohol experienced the steepest escalation in drinking." In other words, they actually drank more over time.

Providing alcohol for underage drinkers in the home can also backfire in other ways. The NIAAA says, that as some parents take this further and allow underage drinking for other teens in their home, parties can get out of hand. One or two parents attempting to control a dozen or more teens who are drinking alcohol is not a controlled environment." Some teens can have adverse reactions to the medication they take when combining them with alcohol. The risk for injury also rises; including sexual assault at the party or elsewhere.

No matter how much planning goes into the hope of safety at these parties, one result of the short-term decision to provide alcohol to teens is long-term brain damage. The human brain is not fully developed until early adulthood. This is part of the reason legal age limits for buying substances like alcohol and tobacco exist. Substance use changes the shape and healthy development of the teen brain. The earlier teens begin to use, the more likely they are to develop a substance use disorder or "addiction."

So, what should you do to help your child learn responsible behaviors toward alcohol and actually keep them safe? The guess work is over.



Prevention professionals have found the most promising solutions. The NIAAA found that far more effective than allowing drinking at home, is to model good drinking behavior and to have strict rules about underage drinking. Responsible parenting pays off, making communities safer one family at a time. For more information on reducing youth alcohol use, check out the full NIAAA article, "Parenting to Prevent Childhood Alcohol Use" or visit [AllStarsPrevention.info](http://AllStarsPrevention.info) for local prevention efforts in Surry County, NC.

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## Social Hosting –A Fact Sheet–



### Can I Give Alcohol to Underage Youth in My Home?

No. Furnishing alcohol to teenagers in your home is called social hosting. It's illegal in all 50 states and the District of Columbia to give alcohol to people who are underage. While some states have exemptions for giving your underage children or spouse alcohol, legality doesn't make it a good idea.

### The Effects of Underage Drinking on Young People



Damaged Brain Development



Adverse Interactions with Medicines



Legal and Safety Risks

### How You Can Prevent Social Hosting

Know your child and their friends.

Talk to your kids about underage drinking.

Be present at at any parties in your house.

Tell other parents how you feel about underage drinking.

Set expectations around alcohol use.

Monitor alcohol in the home.

Work with other parents.

Parents Who Host Lose The Most is a public health media campaign by Prevention Action Alliance. Learn more about PWH or PAA at [preventionactionalliance.org](http://preventionactionalliance.org). This fact sheet was created for educational purposes and should not be construed as legal advice. For legal advice, contact an attorney.

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Learn more at [preventionactionalliance.org/alcohol/](http://preventionactionalliance.org/alcohol/).



**All-Stars Prevention is a Drug-Free Communities coalition in Surry County with a diverse group of volunteers. We advocate for a healthy community, where everyone can be free from the harms of substance misuse. Join us!**

**No minimum participation or prevention experience required. For more information, visit [www.AllStarsPrevention.info](http://www.AllStarsPrevention.info).**



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## The Hidden Dangers: Exploring the Safety Issues of Youth Alcohol Use

BY CHARLOTTE REEVES

Alcohol consumption among youth is a pervasive issue with serious safety implications. Despite legal restrictions on alcohol consumption for those under 21 in many countries, underage drinking remains a widespread problem. The allure of alcohol, coupled with social pressures and misconceptions about its effects, lures many young individuals into dangerous territory.

One of the foremost safety concerns associated with youth alcohol use is impaired judgment and decision-making. Alcohol consumption can impair cognitive functions, leading young drinkers to engage in risky behaviors they may not otherwise consider. From driving under the influence to engaging in unprotected sex, the consequences of impaired judgment can be severe and long-lasting.

Moreover, alcohol consumption among youth is often linked to a range of

negative outcomes, including accidents, injuries, and violence. Studies have shown that young individuals who consume alcohol are more likely to be involved in fights, experience injuries, and engage in other reckless behaviors. The combination of alcohol's effects on impulse control and confrontational tendencies can create a volatile mix that endangers both the drinkers themselves and those around them.

Furthermore, long-term alcohol use during adolescence can have detrimental effects on brain development. The teenage years are a critical period of brain maturation, and alcohol consumption during this time can disrupt normal development processes. Research has shown that heavy drinking during adolescence can lead to lasting cognitive impairments, affecting memory, learning, and decision-making abilities well into adulthood.

In addition to the immediate safety concerns posed by youth alcohol use, there are also long-term health

risks to consider. Chronic alcohol consumption at a young age can increase the risk of developing a range of health conditions, including substance use disorder, liver disease, heart problems, and mental health disorders. The earlier an individual starts drinking, the higher their likelihood of developing alcohol dependency and related issues later in life.

Addressing the safety issues of youth alcohol use requires a multi-faceted approach involving parents, schools, communities, and policymakers. Education about the risks and consequences of alcohol consumption should start early and be ongoing, emphasizing the importance of making informed choices and seeking help when needed. Enforcing existing laws and regulations regarding underage drinking is crucial, as is

providing access to support services for young individuals struggling with alcohol use.

Ultimately, safeguarding the safety of our youth requires a collective effort to raise awareness, promote responsible drinking habits, and support those in need. By addressing the safety issues of youth alcohol use head-on, we can create a safer and healthier environment for the next generation to thrive.

If you would like to learn more about ways to address youth alcohol use, please contact Charlotte Reeves, Surry County Office of Substance Abuse Recovery Prevention and Administrative Services Manager, at [reevesc@co.surry.nc.us](mailto:reevesc@co.surry.nc.us). Visit our website at [surrycountycare.com](http://surrycountycare.com) for more information about substance use disorder and the many resources in Surry County.

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# Signs kids may have allergies



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**W**elcoming a child into the world is an exciting time for parents. However, new parents often lament that there is no guidebook to caring for and raising children. This becomes even more apparent when parents must confront illnesses that affect their children. It can be disconcerting when a child is affected by illness and parents feel helpless. Such feelings may arise when children's allergies first present.

Just like adults, children can be sensitive to allergens in their foods or their environments. Cedars-Sinai says allergies affect the immune system. Allergic reactions occur when the immune system reacts to something generally harmless and thinks it is a danger. So the body then attacks the allergen with antibodies, causing a

number of reactions in the body.

The U.S. Centers for Disease Control and Prevention says nearly one in five children has a seasonal allergy, more than 10 percent have eczema, and nearly 6 percent have a food allergy. Food Allergy Canada says almost 600,000 Canadian children under age 18 have food allergies.

Children may experience allergies differently than adults. The American College of Allergy, Asthma and Immunology says some of the more common allergy symptoms in children include:

- Skin rashes or hives (atopic dermatitis or eczema)
- Difficulty breathing
- Sneezing, coughing, a runny nose or itchy eyes
- Stomach upset
- Chronic nasal congestion
- Ear infections, since allergies can lead to



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inflammation in the ear and may cause fluid accumulation

- Itching in ears or the roof of the mouth
- Red, itchy, watery eyes
- A severe, life-threatening allergic reaction known as anaphylaxis

Allergies can be caused by a number of things. The most common triggers are tree, grass and weed pollens, according to Cedars-Sinai. Mold, dust mites, animal dander, bee stings, pests like roaches and mice, and foods also cause allergies. Children also may be allergic to medicines, which can be scary, since parents may not have any prior warning of an allergic reaction to a new medication.

Allergies can affect anyone, and parents who suffer from their own allergies may have children who also have allergies. Doctors are not

sure why allergies tend to run in families. Also, allergic symptoms can happen slowly over time. Parents who suspect their children may have allergies should discuss their concerns with a doctor for an accurate and complete diagnosis. Allergists typically use skin testing to confirm allergies. Liquid-form extracts of allergens are placed on the top layer of the skin through a pricking device, says Children's Hospital. The skin will turn red where the test was applied if an allergen causes a reaction. Skin testing is usually faster than blood tests.

Treatment for allergies tends

to involve avoiding common triggers. Immunotherapy and certain medications also may be advised. Always consult with the child's pediatrician before administering any over-the-counter allergy medications.



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# How to help kids lose weight

**O**besity and overweight are public health issues across the globe. The World Health Organization says worldwide adult obesity has more than doubled since 1990, and adolescent obesity has quadrupled. According to the State of Childhood Obesity and data from the National Survey of Children's Health, in 2021-2022, 17 percent of U.S. youths ages 10 to 17 had obesity. Obesity rates were significantly higher for Hispanic, non-Hispanic Black, and non-Hispanic Indian/Alaska Native children than other races and ethnicities.

The Centers for Disease Control and Prevention says health care for obesity is expensive for patients and taxing on the health care system, as obesity can contribute to chronic illnesses like diabetes and heart disease. Therefore, emphasizing the importance of maintaining a

healthy body mass index early on can set a child on a path of continued good health into adulthood. Parents and other caregivers can help children lose weight in a number of ways.

- Consult with a registered dietitian. A registered dietitian or nutritionist can help children reach a healthy weight. The RD will input information like age, height and weight, and by assessing health goals, come up with food plans and strategies to help a child improve his or her overall health.
- Cut back on processed foods. Adults tend to have control when food shopping, and kids simply rely on the foods they find in the home for snacks and meals. Fast foods and processed foods tend to be higher in calories and fat, so opting for more fresh, lean, and whole grain items can be part of any weight loss equation.

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healthy plate consists of filling half a plate with vegetables and fruit, while a quarter of the plate should be a lean protein and the remaining quarter a whole grain. Low-fat dairy products also should be included to provide for calcium and vitamin D.

- Buy more fruits and vegetables. When shopping, opt for more fruits and vegetables, as well as other healthy snacks. Keeping chips and cookies out of the house limits kids' access to them. Save less healthy snacks for once in a while.

- Exercise as a family. Find fun activities the family can enjoy that get the body moving multiple times per week.

Children can lose weight with some help from their parents.

- Make smart ingredient swaps. Trade in white breads, rices and pastas for whole-grain alternatives, advises WebMD. These "brown" products have fiber, which can help a child feel full for longer. Fiber also is essential to keeping cholesterol levels

in check. Children may be hesitant to try new things, but research shows children are more likely to eat a new item after it appears on their plate a few times, so parents should remain persistent.

- Skip the sugary drinks. Sodas, sweetened iced teas

and even juices can be high in calories. Gradually switch over to water, unsweetened beverages and low-fat milk for kids.

- Serve a nutritionally sound plate. The MyPlate program from the U.S. Department of Agriculture indicates that a

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