

Majority Rules 2025



A special publication of...



Majority Rules

The Spink County Coalition currently offers the Project Success program at the Redfield Public school. Project Success (Schools Using Coordinated Community Efforts to Strengthen Students) is a national evidenced-based prevention program implemented in schools to provide a full range of substance abuse prevention services for students.

The Prevention Education Series is an 8-session Alcohol, Tobacco and Other Drug prevention program conducted by the Project SUCCESS facilitator, Christina Kroger, LSW in the 7th & 9th grade classrooms. Each session of Project Success has a different focus. The first two sessions focus on what it's like to be a teenager, and the changes their developing brains are experiences. Sessions three and four focus on drugs and alcohol and on the negative effects they can have not only on your brain but on the different aspects of their lives. The focus of sessions five and six is on the feeling and experiences a child of a substance abusing parent may have and how other students can be supportive of them. The pre-teen and teenage years can be stressful and confusing. With that in mind sessions seven and eight focus on stress and coping skills.

Prevention education is only a small part of the Project Success program. Prevention guidance, Newcomers transition and SADD (Students Against Destructive Decisions) are other parts.

Prevention Guidance is available to students dealing with issues related to substance abuse. This could relate to a student struggling with their own substance use or needing help coping with substance abuse within their family or friends. If the issue advances beyond what the counselor can provide, the student will be referred for more advanced services at their own expense.

The newcomer's transition program is for students new to the Redfield school District. New students are greeted by the Project SUCCESS facilitator and encouraged to meet with the Project SUCCESS facilitator to help them through the transition of attending a new school. Topics of discussion are adaptations to this new community (friends, school, family), community and school resources, perception of risk of harm and attitudes towards use. The emphasis is on helping students form connections and adapt to being in a new school; decreasing the chance they will start using alcohol or other drugs to deal with the stress and decreasing the likelihood they will join groups that use substances to gain acceptance.

SADD's mission is "To provide students with the best prevention and intervention tools possible to deal with the issues of underage drinking, other drug use, impaired driving, and other destructive decisions." SADD is an inclusive, organization. SADD recognizes that the pressures on young people to drink, use drugs, and engage in other unhealthy behaviors are strong and, on occasion, may be difficult to resist. SADD informs, educates, supports, and empowers young people to make positive decisions in their lives. SADD meetings and fun and educational activities are planned by SADD students. Attendance at leadership trainings and conferences is also encouraged.

Every year the Spink County Coalition facilitates the Pride Survey being given to 7th – 12th grade students. This is an anonymous student survey covering topics such as school climate including mental health, bullying, violence and substance misuse. The survey information assists the Coalition in making informed decisions by providing us with the data we use to evaluate the need for and the effectiveness of programs we implement for our students.

We've chosen Pride Surveys to collect the data. Pride Surveys has over 38 years of experience surveying students in in school systems across the United States. All students are encouraged to participate, the decision to participate is voluntary. Parents may opt to send a refusal with their student, students can refuse at the time of the survey. The online survey system maintains the anonymity of students by not tracking or storing any identifying information. The hope is by doing so students will feel more comfortable answering the survey questions honestly. In the spirit of transparency, a copy of the survey can be requested from the school for your reviews. A total of 137 7th – 12th grade students took this year's survey.

It is important to note the 2024-2025 results may be skewed due to a minimal number of both 10th graders and 12th graders participating in the survey.

PREVENTING YOUTH SUBSTANCE USE

What Adults Need to Know

www.OneChoicePrevention.org

- click on any image for more info -

1 KNOW THAT YOUTH SUBSTANCE USE IS NOT INEVITABLE

Most teens do NOT use alcohol, nicotine, marijuana, or other drugs*



3 BE SUBSTANCE SAVVY

For teens, all substance use is related: using any one substance dramatically increases the likelihood of using other substances*



2 BE BRAIN DEVELOPMENT SAVVY

The developing brain is uniquely vulnerable to substance use: 9 in 10 adults with a substance use disorder started drinking, smoking, or using other drugs before age 18*



4 TALK EARLY AND OFTEN

Prevention is not a single conversation; look for teachable moments and communicate the clear expectation of no use as the health standard for youth



5 ACT QUICKLY IF YOU SUSPECT SUBSTANCE USE

Substance use puts teens at risk for many negative outcomes: help them make healthy choices and get support when you need it



SUBSTANCE USE PREVENTION IS A HEALTH PRIORITY

The health standard of no substance use for teens is similar to other health standards like using seat belts, wearing bicycle helmets, exercising, getting enough sleep, and supporting mental health self-care

References: [1] Levy, et al., 2020; [2] Levy, et al., 2018; [3] Cogday, et al., 2006; National Center on Addiction and Substance Abuse at Columbia University, 2011; [4] DuPont, et al., 2018

Front row: GracieAnn Wurtz, Claricee Wurtz, Adrian Colbenson, Scylas Schulz, Marcus Fugman. Second row: Jack Mills, Rylie Little, Nina Sanchez, Eli Solheim, Laura Ward, DJ Bucholz. Third row: Zivaha Sanchez, Violet Solheim, Zander Parisien, Ella Wren, Kameron Schwartz

Majority Rules

Silent epidemic: Alcohol and Preventable Death, Despair

By Omar T. Atiq, MD, FACP

As a nation, we must direct our attention towards preventing the illness and death associated with smoking, hypertension, diabetes, and obesity—the four leading causes of preventable death. The United States has also spent over a trillion dollars in the past 50 years on the “war on drugs,” due to their enormous societal cost. Surprisingly, the deadliest drug of all, alcohol, has been excluded from this crusade.

In 2021 alone, drug overdoses claimed the lives of 106,699 Americans, while over 140,000 deaths were attributed to alcohol-related causes. Adding to this grim picture, the CDC reported 20,958 firearm homicides and 26,328 firearm suicides during the same period, with nearly half and one-third of these incidents, respectively, involving alcohol consumption.

Alcohol is treated differently than other psychoactive drugs in many countries, including ours. Perhaps it's due to its cultural acceptance or widespread use. The influence of the alcohol industry permeates the highest echelons of political power at both state and national levels. Despite the failure of Prohibition in the early 20th century, the U.S. government resorted to regulating and taxing alcohol, but this did not compensate for its detrimental economic impact. Shockingly, even professional health care organizations hold social gatherings where alcohol is readily accepted.

It is well established that alcohol consumption is a known causal factor in over 200 diseases and injuries. It not only poses a significant risk for cardiovascular disease, cancer, and cirrhosis but also leads to behavioral and mental health disorders that result in physical and emotional harm and, all too often, death, including those of our loved ones. Alcohol-related problems extend to issues such as suicide, homicide, road traffic accidents, and domestic violence. The detrimental effects of alcohol can even begin before birth, contributing to preterm birth complications and fetal alcohol syndrome. As physicians, we witness suboptimal outcomes in patients suffering from HIV/AIDS, tuberculosis, cancer, and cardiovascular diseases due to continued excessive alcohol consumption. Unfortunately, many individuals remain unaware of the toxic effects until it's too late.

Globally, alcohol is responsible for 3 million premature deaths, accounting for 5.3% of all global deaths. It is the seventh leading cause of premature death and disability worldwide and the leading cause among individuals ages 15 to 49 years. Alarming, the rate of premature death from alcohol in the United States is increasing,

with 28.07 deaths per 100,000 people in 2019 compared to 23.59 in 1999. Removing alcohol consumption could prevent 4.9% of deaths in our country, potentially having saved 169,475 lives in 2021 alone. The disability-adjusted life-year (DALY) provides a holistic measure of disease burden, incorporating mortality as well as years lived with disability. Alcohol use disorder carries a DALY of 345.48 per 100,000 people.

According to the National Institute on Alcohol Abuse and Alcoholism, 85.6% of people in the United States have consumed alcohol at some point in their lives, with 69.5% drinking within the previous year and 54.9% in the previous month. Binge drinking affects approximately a quarter of those who consume alcohol. Alcohol use disorder affects an estimated 14.5 million Americans, including a particularly troubling 414,000 adolescents ages 12 to 17 in 2019.

What is truly inconceivable is that less than 8% of individuals, regardless of age or gender, receive treatment for their alcohol use disorder. Even when they seek medical attention, it is often for alcohol-related medical problems rather than addressing the underlying cause itself. Alcohol-related emergency department visits increased by 50%, from 3 million to 5 million, between 2006 and 2014. Consequently, the total cost of these visits skyrocketed from \$4.1 billion to \$15.3 billion, further burdening an already strained health care system.

Given that alcohol use disorder is often linked to poverty, unemployment, social isolation, and other social determinants of health, we must address these underlying factors to genuinely reduce the risks associated with alcohol. The stigma surrounding alcohol use disorder must be eliminated, and individuals struggling with it should have easy access to evidence-based treatment and support services.

The quality of life and the sense of happiness we experience are dependent on both mental and physical health and a sense of security. These factors form the foundation of a progressive and compassionate society. However, our country, despite its immense wealth and technological advancements, ranks 56th in the crime index, lagging behind 139 countries, and a staggering 16.5% of crimes in our nation are alcohol related. The annual cost of alcohol use disorder in the United States is estimated at \$249 billion, surpassing the cost of illicit drug use, which stands at \$193 billion. This comparison is made not to diminish the importance of addressing the illicit drug crisis, but rather to highlight the willful ignorance we display regarding the devastating impact of

alcohol.

Alcohol consumption, particularly excessive use, represents a public health crisis that poses significant risks to our well-being. Recent data confirm that even small amounts of alcohol can increase the risk of cancer and cognitive decline. Even those who argue that one drink a day may be beneficial for the heart and blood glucose control acknowledge that surpassing this limit raises the risk of heart attack, stroke, and premature death. The evolving perspective is that no amount of alcohol, no matter how small, is entirely risk-free. Just as we do not recommend an occasional cigarette, the same caution should be applied to alcohol.

It is high time we challenge the conventional wisdom that equates alcohol with celebration and good times. Instead, we must recognize its tremendous health risks to individuals, happiness, and life itself. This begins with raising awareness and educating our schools, colleges, and the public through social media and robust public health campaigns about the dangers of even casual alcohol use. While Prohibition failed, laws regulating the sale and consumption of alcohol, including limiting hours and locations where it can be sold and restricting access for those at higher risk, must be strictly enforced, with stiff penalties for alcohol-related offenses.

Together, we must confront the preventable death and despondency that alcohol inflicts upon our society. By addressing this urgent issue, removing the stigma, and providing accessible treatment and support, we can safeguard our collective well-being and build a healthier, happier future for all.

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LETHAL DRUG ALERT

Randall Pharmacy

Redfield, SD • 605-472-1810

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Majority Rules

5 Things to Know about Delta-8 Tetrahydrocannabinol – Delta-8 THC

Delta-8 tetrahydrocannabinol, also known as delta-8 THC, is a psychoactive substance found in the Cannabis sativa plant, of which marijuana and hemp are two varieties. Delta-8 THC is one of over 100 cannabinoids produced naturally by the cannabis plant but is not found in significant amounts in the cannabis plant. As a result, concentrated amounts of delta-8 THC are typically manufactured from hemp-derived cannabidiol (CBD). It is important for consumers to be aware that delta-8 THC products have not been evaluated or approved by the FDA for safe use in any context. They may be marketed in ways that put the public health at risk and should especially be kept out of reach of children and pets.

Here are 5 things you should know about delta-8 THC to keep you and those you care for safe from products that may pose serious health risks:

1. Delta-8 THC products have not been evaluated or approved by the FDA for safe use and may be marketed in ways that put the public health at risk.

The FDA is aware of the growing concerns surrounding

delta-8 THC products currently being sold online and in stores. These products have not been evaluated or approved by the FDA for safe use in any context. Some concerns include variability in product formulations and product labeling, other cannabinoid and terpene content, and variable delta-8 THC concentrations. Additionally, some of these products may be labeled simply as “hemp products,” which may mislead consumers who associate “hemp” with “non-psychoactive.” Furthermore, the FDA is concerned by the proliferation of products that contain delta-8 THC and are marketed for therapeutic or medical uses, although they have not been approved by the FDA. Selling unapproved products with unsubstantiated therapeutic claims is not only a violation of federal law, but also can put consumers at risk, as these products have not been proven to be safe or effective. This deceptive marketing of unproven treatments raises significant public health concerns because patients and other consumers may use them instead of approved therapies to treat serious and even fatal diseases.

2. The FDA has received adverse event reports involving delta-8 THC-containing products.

The FDA received 104 reports of adverse events in patients who consumed delta-8 THC products between December 1, 2020, and February 28, 2022. Of these 104 adverse event reports:

77% involved adults, 8% involved pediatric patients less than 18 years of age, and 15% did not report age.

55% required intervention (e.g., evaluation by emergency medical services) or hospital admission.

66% described adverse events after ingestion of delta-8 THC-containing food products (e.g., brownies, gummies). Adverse events included, but were not limited to: hallucinations, vomiting, tremor, anxiety, dizziness, confusion, and loss of consciousness.

National poison control centers received 2,362 exposure cases of delta-8 THC products between January 1, 2021 (i.e., date that delta-8 THC product code was added to database), and February 28, 2022. Of the 2,362 exposure cases:

58% involved adults, 41% involved pediatric patients less than 18 years of age, and 1% did not report age.

40% involved unintentional exposure to delta-8 THC and 82% of these unintentional exposures affected pediatric patients.

70% required health care facility evaluation, of which 8% resulted in admission to a critical care unit; 45% of patients requiring health care facility evaluation were pediatric patients.

One pediatric case was coded with a medical outcome of death.

3. Delta-8 THC has psychoactive and intoxicating effects.

Delta-8 THC has psychoactive and intoxicating effects, similar to delta-9 THC (i.e., the component responsible for the “high” people may experience from using cannabis). The FDA is aware of media reports of delta-8 THC products getting consumers “high.” The FDA is also concerned that delta-8 THC products likely expose consumers to much higher levels of the substance than are naturally occurring in hemp cannabis raw extracts. Thus, historical use of cannabis cannot be relied upon in establishing a level of safety for these products in humans.

4. Delta-8 THC products often involve use of potentially harmful chemicals to create the concentrations of delta-8 THC claimed in the marketplace.

The natural amount of delta-8 THC in hemp is very low, and additional chemicals are needed to convert other cannabinoids in hemp, like CBD, into delta-8 THC (i.e., synthetic conversion). Concerns with this process include:

Some manufacturers may use potentially unsafe household chemicals to make delta-8 THC through this chemical synthesis process. Additional chemicals may be used to change the color of the final product. The final delta-8 THC product may have potentially harmful by-products (contaminants) due to the chemicals used in the process, and there is uncertainty with respect to other potential contaminants that may be present or produced depending on the composition of the starting raw material. If consumed or inhaled, these chemicals, including some used to make (synthesize) delta-8 THC and the by-products created during synthesis, can be harmful.

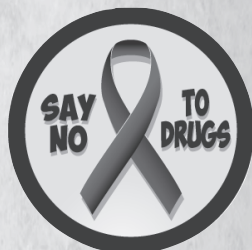
Manufacturing of delta-8 THC products may occur in uncontrolled or unsanitary settings, which may lead to the presence of unsafe contaminants or other potentially harmful substances.

5. Delta-8 THC products should be kept out of the reach of children and pets.

Manufacturers are packaging and labeling these products in ways that may appeal to children (gummies, chocolates, cookies, candies, etc.). These products may be purchased online, as well as at a variety of retailers, including convenience stores and gas stations, where

Continued on next page.

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Delta-8 THC: Continued

there may not be age limits on who can purchase these products. As discussed above, there have been numerous poison control center alerts involving pediatric patients who were exposed to delta-8 THC-containing products. Additionally, animal poison control centers have indicated a sharp overall increase in accidental exposure of pets to these products. Keep these products out of reach of children and pets.

Why is the FDA notifying the public about delta-8 THC?

A combination of factors has led the FDA to provide consumers with this information. These factors include: An uptick in adverse event reports to the FDA and the nation's poison control centers.

Marketing, including online marketing of products, that is appealing to children.

Concerns regarding contamination due to methods of manufacturing that may in some cases be used to produce marketed delta-8 THC products.

The FDA is actively working with federal and state partners to further address the concerns related to these products and monitoring the market for product complaints, adverse events, and other emerging cannabis-derived products of potential concern. The FDA will warn consumers about public health and safety issues and take action, when necessary, when FDA-regulated products violate the law.

How to report complaints and cases of accidental exposure or adverse events:

If you think you are having a serious side effect that is an immediate danger to your health, call 9-1-1 or go to your local emergency room. Health care professionals and patients are encouraged to report complaints and cases of accidental exposure and adverse events to the FDA's MedWatch Safety Information and Adverse Event Reporting Program:

Call an FDA Consumer Complaint Coordinator if you wish to speak directly to a person about your problem. Complete an electronic Voluntary MedWatch form online or call 1-800-332-1088 to request a reporting form, then complete and return to the address on the form, or submit by fax to 1-800-FDA-0178.

Complete a paper Voluntary MedWatch form and mail it to the FDA.

To report adverse events in animals to the FDA's Center for Veterinary Medicine, please download and submit Form FDA 1932a found at: www.fda.gov/ReportAnimalAE.

Delta-10 THC: Is It Safe, and How Does it Compare to Delta-8 THC?

Reyan Schroter, PharmD

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Written by Reyan Schroter, PharmD | Reviewed by Christina Palmer, MD

Published on January 24, 2025

Delta-10 tetrahydrocannabinol, or delta-10 THC, is a new addition to the growing number of THC products on the market. But what is it, and how does it compare to other forms of THC?

While the buzz may make it sound appealing, it's important to be aware of the safety concerns and legal gray areas surrounding this new cannabinoid. Here's what you should know about delta-10 THC.

What is delta-10 THC, and what does it do in the body?

When we talk about the THC in cannabis, we're usually referring to delta-9 THC. This is the form of THC that occurs naturally in cannabis plants. Delta-9 THC is known for causing a cannabis "high." But it's also used medically for symptoms such as pain and nausea.

Delta-10 THC is an isomer of delta-9 THC. This means it's almost identical to delta-9 THC, with one small difference in its chemical structure. Because of this, delta-10 THC seems to have a similar effect to delta-9 THC in the body. But the change in its chemical structure means that delta-10 may also affect you differently than other forms of THC.

The problem is, delta-10 THC isn't found in cannabis plants the way that delta-9 THC is. Most cannabis plants contain only a trace amount of delta-10 THC — if they contain any at all. So there's little-to-no research to help us know exactly what this chemical does in your body when you consume it.

How is delta-10 made — is it synthetic?

If delta-10 THC isn't found in cannabis plants, then where does it come from?

In most cases, delta-10 THC is made from cannabidiol (CBD). CBD is another chemical that's found naturally in cannabis plants. Manufacturers use heat and chemicals to convert CBD into delta-10 THC. This means that delta-10 is a semisynthetic or "derived" cannabis product.

Delta-10 THC is different from synthetic weed, such as K2 or Spice. Those are fully lab-made chemicals that bear little resemblance to the natural cannabinoids found in the cannabis plant. They've also been banned in the U.S. since 2012.

But the process of making delta-10 isn't regulated, even though it's made from natural sources. So there's no way of knowing what impurities might end up in the final

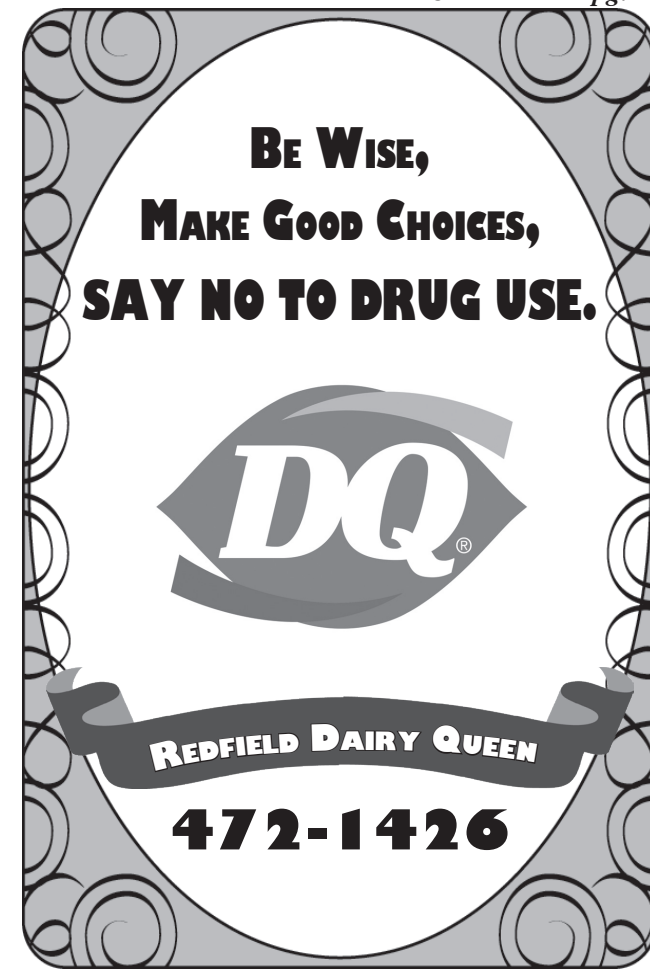
product — more on that later

How does delta-10 compare with delta-8 or delta-9 THC? As mentioned, delta-10 THC hasn't been well studied. So there's very little scientific research to confirm how it may compare to other forms of THC.

Delta-8 THC is another semisynthetic form of THC. It's made from CBD in a similar way as delta-10 THC. Both delta-8 and delta-10 THC are considered less potent than delta-9 THC. But they can both produce psychoactive effects when they're consumed.

People report that delta-10 THC makes them feel more alert and active. Delta-8 THC, on the other hand, has a more relaxing, calming effect, according to a survey published in the Journal of Cannabis Research. While these effects may sound appealing, keep in mind that they're based on personal reports, not scientific studies. So we don't know for sure how these semisynthetic products compare with one another, or if they're safe to

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Delta-10 THC: from pg. 5

consume.

Is delta-10 THC safe?

We don't have enough information to consider delta-10 THC safe to consume. There are several concerns when it comes to the safety of delta-10 products:

There are no clinical studies on delta-10 THC. That means we can't confirm its safety or effects in humans.

Delta-10 products aren't regulated. So there's no way to know what you're actually buying. Without standardized labeling and third-party testing, a product labeled as delta-10 THC might actually contain delta-8 THC, delta-9 THC, or a mix of different cannabinoids.

Delta-10 products may contain unsafe chemicals. Similar to delta-8 THC, these products can be harmful and even toxic to consume.

Until there's more research and stricter regulation, it's best to avoid using delta-10 THC. If you're curious about it, consider talking to a healthcare professional who understands cannabis and can guide you to safer options.

Is delta-10 THC legal?

Technically, delta-10 THC is legal under the federal 2018 Farm Bill if it's made from hemp. The law defines hemp as any cannabis plant that contains less than 0.3% delta-9 THC. Since most delta-10 THC is made from CBD that's extracted from hemp, it's classified as legal under the Controlled Substance Act (CSA). But most experts view this as a legal loophole, since delta-10 THC is made by chemically altering CBD instead of directly extracting it from the hemp plant itself.

Delta-8 THC is also considered legal under this rule, but many states have chosen to ban or limit it because of safety concerns and lack of regulation. Since delta-10 THC is even newer, states are still figuring out how to regulate it. But they're likely to follow a similar course of action. And federal laws around these THC isomers could change at any time.

Will delta-10 THC use cause a positive result on a drug test?

Yes, delta-10 THC (and delta-8 THC) will likely lead to a positive cannabis drug test — even if the test is only designed to look for delta-9 THC. This includes both urine and blood tests.

down. And your body processes all forms of THC the same way. So using delta-10 products won't protect you from testing positive for THC.

What are alternatives to delta-10 THC?

The safest alternative to delta-10 THC are cannabis products sold within a legal, state-regulated dispensary. This could be a medical or adult-use (recreational) program. But the added regulation around how these products are made, packaged, and sold helps protect your safety. The possible benefits and side effects of the natural cannabinoids found in these products are also better understood and have more research behind them.

If you're interested in delta-10 THC for medical reasons, talk to a healthcare professional about your specific needs. They can often offer self-care practices as well as over-the-counter and prescription treatment options you may not know about.

The bottom line

Delta-10 THC sounds like it comes straight from the cannabis plant. But similar to delta-8 THC, it's actually made by applying chemicals to hemp-derived CBD. Delta-10 THC is often marketed as a gentler version of delta-9 THC. But it can still make you feel high and is likely to show up on a drug test. And there's no clinical research on what it does to your brain and body when you consume it.

The process of making delta-10 THC isn't regulated. So there's a risk of consuming toxic chemicals left behind in the finished product. There's also no guarantee that delta-10 products even contain what's on the label.

Currently, delta-10 THC sits in a legal gray area, but this loophole is controversial. Choosing regulated cannabis products from state-licensed dispensaries is a safer option. For your safety, consult with a healthcare professional before adding a new cannabis product to your wellness routine.

Don't let the past steal your present.



Redfield



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A positive drug test happens with delta-10 THC because most drug tests look at the byproducts formed when your body breaks them

Be

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Say No to Drugs!

TULARE COUNTRY MEATS



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Addiction information and treatment:

SAMSHA Treatment locator: <https://findtreatment.samsha.gov/>

SD Department of Social Services: <https://dss.sd.gov/behavioralhealth/agencycounty.aspx>

Alcoholics Anonymous (AA)-Redfield

Closed Meetings: Tuesdays & Thursday at 8:00 PM
Alano Club House

Corner of East 9th Street & 7th Avenue (South of the Animal Care Center)

Contact: Francis (605)380-1073

Rena (605)460-2894

Avera Addiction Care Center

1206 S. Main Street Aberdeen, SD 57401

(605)622-5800 or 1-800-952-2250

<https://www.avera.org/services/behavioral-addiction-recovery/>

Avoid Opioid South Dakota

1-800-920-1343

<https://www.avoidopioidsd.com/>

Changes & Choices Recovery Center

Carroll Institute: (605)332-9257

310 S. 1st Ave., Sioux Falls, SD

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

Community Counseling Services: Addiction Services

357 Kansas Ave. SE, Huron, SD

(605)352-8596

<http://www.ccs-sd.org/>

Intensive & regular outpatient treatment: Adults and adolescents

Heisler Adolescent Treatment: Outpatient & Inpatient

1310 W. 51st St., Sioux Falls, SD

(605)334-1414

<https://www.voa-dakotas.org/our-service-behavioral-health/substance-abuse>

behavioral-health/substance-abuse

Human Service Agency: Addiction Services

123 19th St. NE, Watertown, SD

(605)886-0123 or 1-800-444-3989

<http://www.humanserviceagency.org/addictions.html>

Provides addiction evaluations, intensive & regular outpatient

treatment, counseling, and support groups

Keystone Treatment Center

1010 E. 2nd St., Canton, SD

(605)519-2077 or 1-855-292-5956

Provides intensive inpatient and outpatient services to adults and adolescents for all addictions <https://www.keystonetreatment.com>

Marcie Robertson, LAC

(605) 450-6031

Robertsonmarcie58@yahoo.com

Narcotics Anonymous (NA)- Redfield

Mondays (open meetings) 7:00pm-8:00pm Wesleyan Church

38519 174th St. (South side of 16th Ave)

Our Home Rediscovery Center

40354 210th St., Huron, SD

(605)353-1025

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

Serenity Hills Detox/Halfway House

1500 Hwy 20 NW, Watertown, SD

(605)884-0650

<http://www.humanserviceagency.org/serenityhills.html>

Spink County Coalition

Promoting safe and healthy lifestyles in Spink County

1005 1st St. W., Suite 2 Redfield, SD 57469 www.spinkcountycoalition.com

Ex. Director: Le Ann Wasmoen

leann.wasmoen@k12.sd.us, (605)450-1385



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605-472-1110

Redfield Clinic
1010 West 1st Street
Redfield SD 57469
605-472-0510

www.redfieldcmh.org/redfield-cmh

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Addiction information and treatment: Continued

Counseling Services

Avera St. Luke's Mental Health Unit

305 S. State Street, Aberdeen, SD
(605)229-1000 or (605)622-5552

www.avera.org

Bridgeway Counseling Center

600 4th St NE Suite #203, Watertown SD (605) 886-5262
<http://www.bridgewaycounselingcenter.com/>

Catholic Family Services

310 15th Ave. SE, Aberdeen, SD
(605)226-1304 or 1-888-471-4673

<http://www.sfcatholic/cfs/counseling/offices-counselors/>

Footsteps Counseling

419 Moccasin Drive Aberdeen, SD 57401
(605)725-2155

<http://www.footstepscounselingaberdeensd.com/>

Lutheran Social Services

110 6th Ave. SE, Suite #200 Aberdeen, SD 57401
(605)229-1500 <https://www.lsssd.org/>

LSS Consumer Credit Counseling

1-800-568-2401

www.lsssd.org

Northeastern Mental Health Center- Aberdeen

14 S. Main St., Suite #1E, Aberdeen, SD
(605)225-1010

(605)229-1000 CRISIS LINE

<http://nemhc.org/>

Northwestern Mental Health Center-Redfield

1005 1st St. West, Redfield, SD
(605) 472-3282

<http://nemhc.org>

Helplines & Toll-free numbers

Alzheimer's Disease & Related Disorders 1-800-272-3900

American Council for the Blind 1-800-424-8666

American Diabetes Association 1-800-342-2383

Consumer Protection Help Line 1-800-300-1986

DakotaLink (impairment disability services) 1-800-645-0673

Domestic Violence Hotline 1-800-799-SAFE (7233)

East River Legal Services 1-800-952-3015

Eldercare Locator 1-800-677-1116

Family Resource Network 1-800-354-8238

Farm & Rural Stress Hotline (Avera) 1-800-691-4336

LGBTQ Crisis Hotline: The Trevor Project 1-866-488-7386

Text START to 678678

Meth Addiction Hotline (South Dakota) 1-800-920-4343

Text ONMETH to 898211

National Alliance on Mental Illness (NAMI) 1-800-273-8255

SD Helpline Center 211

help@helplinecenter.org Text your zip code to 898211

Textline Text "CONNECT" to 741-741

Text4Hope Youth Crisis Textline Text "icare" to 898211

Teenline 1-800-365-8336

SD Quitline 1-866-737-8487

SD Gambling Hotline 1-800-522-4700

SD HIV/AIDS Hotline 1-800-592-1861

SD Suicide Prevention Lifeline 1-800-273-8255

Consumer Credit Counseling 1-800-568-2401

Poison Control Center 1-800-222-1222

**Plant the seed
of your future by
saying no to drug use.**



38394 US HWY 212 Redfield, South Dakota 57469
605-472-0775

**Your future is yours,
say YES to life by
saying NO to drugs.**



**Haider
Construction**

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Redfield, SD 57469
605-460-2767