Drugs in focus

Parent focus: Dealing with drug issues for 9 to 14-year-olds







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Dealing with drug issues for 9 to 14-year-olds Parent focus

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ExxonMobil's partnership with ADF

ExxonMobil actively supports community projects in areas in which it operates and has been a corporate partner with the ADF for more than 6 years.

ExxonMobil congratulates the ADF on developing the *Drugs in Focus* series of booklets for parents, which cover the following topics:

- A guide to alcohol and other drugs
- Parent focus: Dealing with drug issues for 9 to 14-year-olds
- Hosting teenage parties: Managing alcohol & other drugs
- Teenage drinking: The facts and issues
- Young people and drugs: The facts and issues

- Safety first: Helping children to stay safe
- Riding the waves: A guide to building resilience in 10 to 14-year-olds

ExxonMobil and the ADF have also worked together to produce a resource for primary school teachers, *Primary Pathways: An integrated approach to drug education* (2005). This resource provides good advice for teachers on how to approach drug and alcohol education during the primary school years and has lots of ideas and references for student activities.

Copies of the *Drugs in Focus* booklets and *Primary Pathways* can be obtained by calling the ADF on tel. 1300 85 85 84, or online at **www.bookshop.adf.org.au**.

Introduction

Most of us have concerns about drugs. As parents and carers, we face an extra challenge. As our children approach the stage at which they discuss drugs and ask questions, we wonder how they are going to cope and what we should be doing to help them: "What should I know about drugs? What (if anything) should I say to my children? When should I start and how should I go about it? What other resources and services can help me as a parent?"

These and other questions are answered in this booklet. Having access to accurate information and useful tips will help parents to think through the issues and support their children. The information provided here can be shared with children, other parents and community members. Parents should not have to feel as though they are alone. What we read, see and hear in the media about drugs can make us feel powerless, but parents can have a big influence. Children watch their parents' behaviour. Parents' approaches to drug use are important guides for them and can have a positive effect.

As a parent, you are the most important influence on your child. You know them better than anyone else. You can influence and work with your child to help them cope with life. Providing love and support, and teaching them to take responsibility for their actions, will help reduce the risks to your child.

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Drug taking

Before we begin, what do we mean by "drugs"?

Drugs are psychoactive substances that act on the central nervous system. People take them to change their mood, perception or behaviour. Some drugs are legal, such as tobacco, alcohol, prescription medicine and over-thecounter medicines. Other substances, such as cannabis, heroin and ecstasy, are illegal.

How much should we worry about drugs?

There is a lot of talk about drugs and the effects of drug abuse. As parents we want our children be safe, healthy and happy. We want them to develop their own skills for making good decisions. We fear that if our children become involved with illegal drugs, tobacco or alcohol they may get hurt.

There is no way simply to "drug proof" your family. As a parent you can have an effect on what your child believes in and what they do, and this in itself can help to reduce the risk that your child could experience harm from drugs. Even if, at the time, it doesn't seem as though you are making an impact, you probably are, and this will become clearer as they get older.

When should we start talking to our children about drugs—and how should we do it?

There is no single answer to this question.

Children sometimes try legal drugs such as alcohol and tobacco before they reach their middle teens.

Most young people who experiment with illegal drugs start in their middle teens or early adulthood. However, some may start experimenting with illegal drugs at a younger age. Most young people only use drugs a few times. If they continue to use them, it's usually every now and then, rather than regularly. They mostly stop as they progress through their 20s.¹

The best time to educate them about alcohol and other drugs is when young people start asking questions or making comments about drugs. Young people who understand the issues and have accurate information will then be in a good position to make their own decisions about drugs.

When talking to your child about drugs, there needs to be a balance. Giving too little information can be risky. For example, a young person may get into strife if the first time they have a drink of alcohol they know nothing about its effects. Or they may ask friends and receive misleading information.

On the other hand, too much information can raise a child's awareness and curiosity, which may lead to experimenting. For example, if you decide that your 16-year-old can drink alcohol at a party you would probably tell them how much they can drink. If their 9-year-old brother

1. Next Step II: Educating young people about illegal drugs, 2001, Melbourne: Australian Drug Foundation or sister hears the same information they are not likely to have the same level of maturity to be able to understand what they have heard. They may feel as though they can drink, too, and that they can drink the same amount.

A good starting point is to listen to what your child says about drugs. Then you can follow up with a discussion—but keep it at a level that is appropriate for your child's age group (for suggestions, see page 14, *Strategies for communicating about drugs* and page 20, *Some common situations*).

- If you don't know the answer to a question, say so.
- You can always look for the answer together with your child.
- Find a book or pamphlet.
- Say that you will find out and get back to them, and get assistance from the alcohol and drug telephone service in your state or territory, or from a parent line (see the back of this booklet for contact details).

The best time to educate them about alcohol and other drugs is when young people start asking questions or making comments about drugs.



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When are some good times to talk to your children about drugs?

Almost any time is good. Take the opportunities whenever they come up. For example, during everyday activities, such as:

- while walking, or in the car
- at meal times
- just before bed time. Children often like to talk at this time. It's your chance to find out what they are thinking about situations, and to go over what they do know. However, it's not the best time to introduce them to new ideas
- when you pour a glass of alcohol
- when alcohol or other drugs are used in television programs



- when your child mentions alcohol, cigarettes or other drugs
- when your child has an assignment on alcohol, smoking, medicines or other drugs
- when discussing school activities.

Refer to page 14 for strategies for effective communication.

Medicine can hurt you if you amount. That's why it is safer for an adult to give you medicine if you need it.

Drug types

One way to classify drugs is according to whether they are legal or illegal. Most legal drugs are subject to controls that affect their availability, quality and price. With illegal drugs, however, there are no controls. This means that a person using illegal drugs can never be sure of the drug's strength or what is in the drug.

Drugs can also be classified into three main types, according to the effects they have on the central nervous system (CNS) and the way they change how a person thinks, feels or behaves.

Depressants

Depressants slow down the functions of the CNS. They don't necessarily make a person feel depressed.

In small quantities, depressants can make a person feel happier and more relaxed. Drugs with depressant effects can affect memory, prevent clear thinking and reduce coordination. In larger quantities some may reduce breathing and heart rates and cause unconsciousness, vomiting and death.

Depressants include:

- alcohol ("booze", "grog")
- benzodiazepines, or minor tranquillisers ("benzos", "tranx"), such as Rohypnol, Valium, Serapax, Mogadon, Normison and Euhypnos
- cannabis, including marijuana ("pot", "mull", "dope", "hash")
- opiates, including heroin ("H", "smack"), morphine, codeine, methadone and pethidine

>>> Drugs with depressant effects can affect memory, prevent clear thinking and reduce coordination.

- some solvents and inhalants ("sniffing", "chroming", "huffing"). Many solvents and inhalants are common household products such as sprays, glue, petrol and cleaning fluids
- gamma hydroxybutyrate ("GHB", "fantasy", "GBH", "liquid ecstasy").

Stimulants

Drugs with stimulant effects act on the CNS by speeding up the messages going to and from the brain. They may make a person feel more alert, awake and alive. Some increase confidence and some reduce feelings of hunger. Some people use stimulant drugs just to get these effects. Stimulants can also increase heart rate, blood pressure and body temperature. In larger quantities, they may cause anxiety or panic, and some can lead to stroke and heart attack. Stimulants include:

- the caffeine in coffee, tea, cola drinks, energy drinks, chocolate and caffeine tablets
- nicotine in tobacco (despite many smokers using it to relax)
- ephedrine in medicines for hayfever and asthma
- appetite suppressants ("diet pills"), such as diethylpropion (Tenuate) and phentermine (Duromine)
- amphetamines, including prescribed amphetamines such as dexamphetamine and methylphenidate (such as Ritalin) and illegal amphetamines ("speed", "crystal meth", "ice", "shabu")
- cocaine ("coke", "crack")
- ecstasy (MDMA, "E", "XTC").

Hallucinogens

Hallucinogens affect perception. People who have used them may see or hear things quite differently, or that aren't really there. The effects of hallucinogens vary greatly. It is impossible to predict how they will affect a particular person at a particular time.

Other effects include increased activity, talking or laughing, and a sense of well being and happiness. Less desirable effects include enlarged pupils, loss of appetite, sweating, panic, paranoia, loss of contact with reality, strange behaviour, stomach cramps and nausea.

Hallucinogens include:

- lysergic acid diethylamide ("LSD", "trips", "acid", "microdots")
- psilocybin ("magic mushrooms", "gold tops", "mushies", "shrooms")
- datura
- mescaline (peyote cactus)
- phencyclidine ("PCP", "angel dust")
- ketamine ("K", "special K").

Cannabis is both a hallucinogen and a depressant. Ecstasy can have hallucinogenic as well as stimulant properties.

For more detailed drug information, including on other drugs and drug pictures, go to **www.druginfo.adf.org.au**, refer to the booklet *A guide to alcohol and other drugs* (available from the Australian Drug Foundation, tel. 1300 85 85 84), or contact the drug and alcohol service in your state or territory (see the back of this booklet).

Drug use

How do drugs affect a person?

Knowing what affects a drug has on the CNS does not tell us exactly how it will affect any one person. Apart from the type of drug, effects depend on the following:

- how much of the drug is used and how often
- how the drug is used; for example, whether it is injected, inhaled, snorted or swallowed
- the person's height, weight and gender
- the person's mood
- whether the environment is comfortable or threatening
- tolerance of the substance. The first time a person uses a drug, they have a very low tolerance and are likely to feel the effects very strongly. Generally, the more often the drug is used, the weaker the effects will be. Therefore, a person needs to take larger amounts to get the desired effect
- whether more than one drug is used at the same time; for example, using alcohol, medicines and/or other drugs together can increase or alter the effects, often in unpredictable ways.

What problems can drug use cause?

Drug use can cause many and varied problems.

Using legal or illegal drugs can not only have effects on someone personally, but can have an impact on friends, family and others around them.

Health problems:

- poor eating and sleeping habits and lowered immunity
- emotional effects such as depression, paranoia and anxiety
- the risk of contracting hepatitis and HIV (Human Immunodeficiency Virus—the virus that causes AIDS) from sharing injecting equipment
- increased risk of respiratory illness and damage to the respiratory system from smoking drugs
- damage to the lining of the nasal passages from snorting drugs
- loss of concentration, which may lead to a greater risk of accidents
- taking dangerous risks, such as diving into shallow water
- permanent injury or death; for example, by walking in front of a car.

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Laws vary between the states and territories, so the information provided here can only be used as a guide. Contact Legal Aid or your local community legal centre for the laws that apply in your state or territory and for legal advice.

Personal problems:

Drug use may cause conflict with family, friends, teachers or employers. People who use drugs and those around them may experience physical and emotional pain.

- Family activities may be upset. Family or friends may feel frustrated, rejected or taken advantage of, or that they cannot trust the person.
- Education or employment opportunities may be lost as a person who uses drugs may be unable to concentrate or perform properly. They may need to take more sick days than normal.
- Friends may not want to stay around a person using drugs. The person may become lonely or cut off from people.
- Drug use can reduce a young person's confidence.
- Conflict may lead to loss of personal freedom; for example, though juvenile detention.

Financial problems:

- It may not be possible to buy enough food, clothing or entertainment due to the cost of drugs.
- People may get into debt.

Legal issues:

- A person can be convicted for using, possessing, trafficking or manufacturing drugs. Trafficking includes buying drugs for a friend, even if no profit is made.
- It is an offence for a person under age 18 to purchase, receive, possess or consume alcohol. It is also an offence to enter or stay on licensed premises, unless the person is having a meal with a parent or guardian (or, in some states, under supervision). The exception to this is that it is legal for a young person to drink alcohol at home or in someone else's home. Alcohol offences relating to being "drunk in a public place" and "drunk and disorderly behaviour" apply to adults and young people under the age of 18.
- A retailer who sells tobacco to a person under age 18 can be fined or lose their licence to sell tobacco. In most states and territories, it is also an offence for a person to purchase a tobacco product for the use of a person under the age of 18. Otherwise, the laws and regulations governing where smoking of tobacco is permitted apply equally to adults and young people.
- Drug use may lead to criminal behaviour, because of the need to raise money to buy them, or because of violent behaviour when under the influence of drugs.

The law accepts that young people have less experience and wisdom when it comes to understanding legal matters and avoiding legal problems, so penalties are lighter for young people. Once is a person is over 18 years of age, breaking the law involves more severe penalties. There can be restrictions on travel, as some countries will not allow a person with a drug conviction to enter. There may also be fewer job opportunities for someone with a criminal record.

If my child uses drugs, will they become dependent?

It is frightening to imagine your child becoming dependent on drugs. Stories about illegal drugs often give the impression that they are instantly addictive and that they are the drugs that cause the most harm.

However, no drug is instantly addictive, and the greatest drug harms in our society come from the legal drugs, alcohol and tobacco.

Why do people use drugs?

In most societies, people use drugs for medical purposes (therapeutic use) and for enjoyment. There can be harms to health and relationships with all patterns of use.

Therapeutic use: occurs when a drug is administered or prescribed by a medical practitioner. For example, a young child may be prescribed Ritalin (an amphetamine) to control hyperactivity. A hybrid form of therapeutic drug use, known as "self-medication", occurs when someone takes a drug to control a disturbing symptom or condition that really requires medical attention. For example, a person may regularly use large doses of analgesic or painkilling drugs to deal with pain that is caused by an untreated medical condition.

Experimental use: when a person tries a drug once or twice out of curiosity. People who have not used the drug before have a low tolerance and are likely to feel the effects very strongly. For example, when drinking alcohol for the first time, a person may not know their "limit" and may vomit. Children might try cigarettes once or twice at school, dislike the effects and never try them again.

Recreational use: when a person chooses to use a drug for enjoyment, particularly to improve or change a mood, or for social occasions such as at parties.

Situational use: when a drug is used to cope with the demands of particular situations. For example, amphetamines have been used by long-distance truck drivers to maintain alertness and by athletes to gain energy.

Intensive use: (also known as "bingeing") when a person consumes a heavy amount of drugs over a short period of time, or heavy use continues over a number of days or weeks. Young people might plan to "get wasted" by drinking heavily over a weekend. Dependent use: when a person becomes dependent on a drug after regular and/or heavy use over time. They feel a need to take the drug in order to feel normal, or to stop uncomfortable withdrawal symptoms. Dependence can be psychological (of the mind) or physical (of the body), or both. A person might drink alcohol each day to prevent withdrawal symptoms, or take heroin daily for the same reason.

A person can have different patterns of drug use at different times in their life. Experimenting does not necessarily lead to regular drug use. Regular use does not necessarily lead to problems.

Only a small number of people who use alcohol or other drugs end up being drug dependent.

Why would a young person use drugs?

Adults use drugs to cope with problems, relieve stress, overcome boredom, relax, or have a good time. Young people's reasons for using drugs are often the same. A young person may also start to use drugs out of curiosity. Experimentation, taking risks and wanting excitement are part of growing up. Adolescents need to work out their own identity and they may try something in order to see if it is part of the person they want to be.

Some people think that young people use drugs because they are "led astray" by their friends or because they are conforming due to "peer pressure". While friends do have some influence over a young person's behaviour, we should not over-estimate this.

Young people who smoke or drink or take a drug usually insist they have made their own decision to do so. This means that they are taking responsibility for their decisions and behaviour, rather than blaming someone else. We should not forget that young people choose their friends because they like or admire them, and have similar interests and attitudes.

Why do some people experience drug problems and others don't?

While most young people try some sort of drug during their adolescence, we know that some are more likely than others to experience drug problems. The good news is that we can identify factors that protect young people from having drug problems and factors that put them at greater risk. Even better news is that parents, carers and families can have an influence on many of the "protective factors" and "risk factors".

Protective and risk factors operate at the family level, the individual level and at the community level.²

Parents who use drugs or who approve of drug use, family conflict, poor family management and poor discipline are all factors that put children at risk.

A child or young person is at greater risk of experiencing problems if they have a favourable attitude toward drugs, if they start to use drugs early in life, if they don't feel part of their family or community, or if they behave in an anti-social manner. Children who experience failure at school or don't feel attached to school are at risk, as are those who are rebellious or impulsive by nature. Finally, experiencing abuse, trauma or psychological problems, such as depression, increases the risk of drug problems.

Young people are better protected from problems if they are connected strongly to their families, attend school regularly, enjoy success at something they value and have a range of

2 Improving the lives of young Victorians in our community: A survey of risk and protective factors, 200, Bond, Thomas, Toumbourou, Patton & Catalano, Melbourne: Centre for Adolescent Health personal and social skills that they can use in difficult situations.

Of course, exposure to one or more risk factors does not mean that a young person will inevitably use drugs or experience harms or problems; just as young people who enjoy access to one or more protective factors are not guaranteed success or immunity from problems.

So where does this leave you as a parent?

The most important thing you can do is ensure your children know they are loved and cared for, and have a strong sense of a worthwhile future. Maintain a positive attitude toward life, emphasise family rituals, keep communication open and set and enforce appropriate rules. Get to know your children's friends and encourage them to feel welcome at your home. You can also encourage your children to be involved in activities such as music and sport.



Strategies for parents

What are some of the key strategies when communicating with children about drugs?

Your child notices what sort of person you are and how you behave. What you do as a parent does make a difference, and by your actions and your example you can greatly reduce the risk of your child experiencing harm from drugs.

General parenting practices provide a good basis for communicating about drugs.

Provide consistent and fair rules, guidelines and discipline. Children prefer to operate within set rules and do well when these are clear. Of course, rules will need to change as your child gets older. As you set the rules at each stage, try to make sure that the main adults in your child's life, such as you, your partner, relatives and friends, are consistent. Children need to know what will happen if they break rules, and that this will be followed through. Otherwise your child will learn that nothing will happen when rules are broken.

Encourage your child by giving them credit for trying to keep to rules or guidelines, even if they haven't quite "made it". For example, they may have been going to bed too late, say at 9.30pm. Because of this you have decided on 8.30pm as bedtime. If they get to bed by 9.00pm, give them some praise ("I know you are trying") and encourage them to do better ("I am sure that you will soon be able to do this without any reminders"). This can help build confidence and increase motivation.

As a child gets older, it is good to involve them in setting guidelines. They will then be more likely to stick to them.





It is useful to establish some agreements about acceptable behaviour in relation to alcohol and drugs. These can help protect your child from some of the risks of drug use. For example:

"I hope you never travel in a car with someone who has been drinking. I would be much happier if you stay over at a friend's house, or phone home so we can come and collect you."

Part of the agreement should be that you would come and get them without any fuss. All discussions can wait until the next day. Try always to keep to your side of the bargain.

Be informed about drugs. Do some homework yourself—get some pamphlets or booklets. See the back page of this booklet for a list of drug and alcohol services. If you don't know answers to your children's questions, find out. Don't make up information.

Keep the communication channels open. Communicating involves listening, and not giving lectures, over-reacting, yelling or judging. A young person needs to know that you are open to hearing what they have to say. Listen, and let them finish. Give a response that respects them, rather than automatically criticising.

Be prepared to ask questions. Don't avoid issues that may be difficult. Talk about drug issues openly and honestly. It may seem as though you have less influence on your child as they enter adolescence; however, no matter how they respond to you at this time, your influence as a parent will still be important. Often, this won't become clear until later in the young person's life.

Be informed about drugs. Do some homework yourself. If you don't know answers to your children's questions, find out. Don't make up information. Use "I" statements, instead of "You" statements.

Try	Instead of
"I'm really worried about"	"You should …" or "You must …"
"l feel when you"	"Your problem is"
"I am concerned that"	"You'd better or else"

Open-ended questions allow your child to explore their thoughts and feelings. For example, ask your child to speak about their thoughts and feelings. "How do you feel about ...?" Compare this with a closed question, such as "Have you ever smoked?", which can be answered with a "yes", or "no".

Help children make their own choices. Warn them of the dangers of rushing into making a decision. Help your child to think about what they can say to anyone who offers them alcohol or other drugs, and if necessary provide them with some examples of how they could respond.

"No, thanks. I'm not interested."

"No, thanks. I don't feel like drinking."

"No, thanks, but I'll have a soft drink."

They will need to have enough confidence to use the responses.

Look for opportunities to discuss and highlight actions and skills that your child has shown to demonstrate that they are making good choices and decisions. This will encourage them to continue to develop their own decisionmaking skills. Allow them to suggest options and solutions, then discuss each point in a way that encourages them to see the positive and negative angles. Through this guided discussion you allow your child to think through the issues and form a decision that is right.

Your child will make mistakes. Discuss with them the reason and how it could have been avoided. Help them to learn from the mistake and to "move on" with a positive attitude and not to dwell on the problem.

Carefully pick your time to discuss issues. Try not to raise issues when you are stressed or angry. Think through what you wish to say and what you want to achieve before you start talking. Don't expect your child to always be ready to talk when it suits you; for example, in the middle of their favourite TV program. (*See page 6, When are some good times to talk to your children about drugs?*) Consider your child's mood. If your child is angry, wait until they have calmed down.

Avoid saying one thing and doing another. Are your children watching you? You bet! The way you behave provides information to your children. Do you take painkillers only as a last resort, or do you take them every time you have a slight ache or pain? Are you comfortable talking about your drinking habits? It is important that children understand your behaviour, including why you drink alcohol (or don't).

You may not be taken seriously if you try to talk about having a healthy approach to drugs, while at the same time smoking cigarettes or drink-driving.

These may not be pleasant things to face, but it is important to be aware that your behaviour affects your children. Be tolerant of differences between you and your child. You and your child may have different tastes, interests and opinions. Don't let this be a barrier; just accept the differences in taste. Take an interest in the music that they like, even though it might not be to your liking.

Respect your child's privacy. Avoid damaging the trust between you and your child. For example, is it worth searching your child's room if it means losing their trust?

Know your child's friends. Invite them to your home. Support your child with their friendships by talking with them about their friends' interests, family and any problems they might have. Take a positive interest in your child's schooling. Value their achievements, show that you understand when they are disappointed and encourage them to do homework. Keep in touch with their school and ask the school about their activities. Be aware of school drug/health programs (these usually start in primary school) and discuss these with your child's school and your child.

Provide opportunities for natural highs. This helps to meet the young person's need for exhilaration and experimentation. Involve children in activities such as sport, doing a first-aid course together, caring for animals, music or other creative activities.



Support your child with their friendships by talking with them about their friends' interests, families and any problems they might have.

Teach them the importance of personal health. Encourage your child to look after their own body through exercise and nutrition. Underplay the importance of physical appearance and encourage a sensible attitude to body shape. Young people should feel good about themselves for who they are and their own achievements.

Bring in someone else if necessary. If you and your child have a difficult relationship, or your child will not talk, you could ask another person you trust to talk to them.

How can I tell if my child is using drugs?

As children develop, it can sometimes seem to parents as if they are on another planet. They may behave as though they know everything, or are immortal. They may seem impossible to talk to. At the same time, young people may be feeling extremely self-conscious, or that they have little control over their lives. Parents need to take all this into account before jumping to conclusions. It is difficult to be sure that someone is using drugs. The effects of any drug vary greatly from person to person. If your child's behaviour or moods have changed, this may indicate drug use. However, such changes could also mean that something else is going on in their life.

You know how your child usually looks and behaves. Whether or not drugs are involved, if you child shows any of the signs listed below, you will need to take some action. You may want to talk to them or you may want to find out more. For example, you could contact a drug and alcohol service, or speak to someone at the local community health centre.

Be alert for:

- mood swings
- keeping to themselves more than usual
- unwillingness to answer questions
- changes in eating patterns
- sudden changes of friends
- need money with no explanation, or money going missing
- poor memory
- inability to concentrate
- telling lies
- reddened eyes
- tiredness, or changes in sleeping patterns
- Iower school marks
- making less effort, loss of interest.

However, none of these "signs" necessarily mean that drugs are involved. They may mean your child is in need of some form of assistance.

How could my child be getting drugs?

It doesn't seem to be difficult for young people to get hold of alcohol and tobacco, even though it is illegal to sell them to a person under 18 years of age. Teenagers may lie about their age, use false proof of age identification, or get an older friend to buy for them. Often, they find it easy to just "pinch" them from home.

Illegal drugs are a bit harder to get, but friends may know where to buy them. They may be available at parties.

In our society, drugs are quite easy to get hold of. It is unrealistic to think that you can keep your child from coming into contact with alcohol and other drugs.

What can I do if I find out my child is using drugs?

The first thing to do is to remember that you are not the only person in this situation, and that there are people you can talk to. It is better to avoid panicking. Easier said than done, but over-reacting will make it much harder to find out exactly what is happening in your child's life.

Choose an appropriate time to talk to your child (*see page 6*). Avoid talking about your child's drug usage while they are under the influence of drugs. Be clear and honest about feelings. It is important that your child hears your concerns. Let your child know that it is not them that you disapprove of; rather, it is their behaviour.

Whom you choose to seek advice from will depend on what you are comfortable with. You may decide to contact an alcohol and drug service or a health service, or you may prefer to speak to someone you know, such as a teacher or your GP. Whatever you decide, you will need to do some homework about the drug and its effects (*see page 25 Where can I get more information?*). Once you have done this, you should have a clearer picture about what path to follow.

Drug treatment services

A variety of treatment services are available in Australia, including counselling, group therapy, withdrawal (detoxification) and medication (pharmacotherapy). Some treatment programs aim to assist the person to achieve a drug-free lifestyle, while others aim to reduce the harms and risks related to the person's drug use.

The type of treatment undertaken may vary, depending on the aims and circumstances of the person seeking help. It is often more effective if the treatment involves a combination of approaches.

There is no need to deal with drug issues on your own. For advice about treatment services, information, counselling, advice, or other assistance, contact your state or territory drug and alcohol service, listed at the back of this booklet.



Some common situations

This section provides examples of common family situations, with some suggestions to help you work out how to respond.

When thinking about how the situations would apply in your case, you need to take into account the age of your child and their level of mental and emotional development.

As children get older they are more likely to experiment. They may say and try some things you don't agree with. While it can create stress for parents, this is a natural part of young people developing their own identity. A young person at this stage of life may go through rapid changes of thoughts and behaviour as they find out what works for them and what doesn't.

Although teenagers don't want to be exactly like their parents, they still want to know that they are loved. They need some stability as their world is rapidly changing. Parents can help by providing clear and fair rules, and by following some of the communication tips provided on pages 14–17.

You may find it useful to think about how you could deal with each situation before reading the suggestions. It may also be useful to discuss them with other parents and friends.

Situation 1

You and your family are watching TV and drug taking is shown. You could take this chance to:

- a) Ask your child, "What do you think about what they are doing?"
- b) Say "Look at them; they are such scum, hope they rot in jail."
- c) Ask your child, "Do you take drugs?"

Points to consider

- A TV program can be used to start a discussion that is non-personal and nonthreatening. You might like to explore what your child would do if offered drugs, or if a friend of theirs reacted badly after taking a drug. You could let your child know that although you may not always approve of drug use, you will always be there for them.
- Asking "How do you feel about ...?" is an open question (see page 15) and will invite the young person to talk.
- If your child is "put on the spot" by being asked if they take drugs, they may say whatever they think is necessary to get the pressure off them. Asking this question doesn't provide a chance for a discussion about drugs in any detail.
- It is important for parents to say what they believe.
- Using strong language gives the message that if your child needs to talk about drugs, you may become angry or worked up. This discourages communication.
- Describing people who use drugs as "scum" lacks humanity. In fact, people become involved in drugs for many reasons (see page 11).

Situation two

Your 14-year-old son Darren comes home from a friend's place. They have been to the football. He has obviously been drinking. As far as you know, it is the first time he has been drunk. What are some ways that you could respond?

- a) Tell Darren he is not allowed to go out with that friend again.
- b) Ask Darren if he has been drunk before.
- c) Tell Darren you will discuss the situation with him when he has sobered up.

Points to consider

- If you haven't talked to Darren before about alcohol use, now is the time to do so—but wait until you have simmered down and he is sober. You may also want to talk to his friend's parents.
- In a discussion like this it is easy to become judgemental and accusing. Instead, you could ask Darren how he feels now about the experience, and its consequences. It is generally more effective to let your child work out for himself where he has gone wrong and what he could do differently.
- If you have already discussed alcohol use, you could discuss with Darren how you feel about him breaking your trust.

Situation three

Your teenage children want to go to the local disco. You have heard that there might be underage drinking, smoking and the possibility of drugs being sold. How would you handle this situation?

- a) Tell your children they are not allowed to go.
- b) Allow your children to go and worry about their safety.
- Allow your children to go after talking to them about your concerns.

Points to consider

- As a parent you have the right to tell your child or children that they can't go. If you decide to say no, it is important to explain your feelings and concerns to the child in a way that they can understand.
- Before making a final decision, it may help to find out as much as you can about the event, including who else is going. You could talk to the organisers and visit the venue.
- You could talk to other parents and work out consistent views and rules. If you decide the children can go, you could discuss what role each parent could play, who will take the children and who will pick them up etc.
- If you decide that you will allow your children to go, talk to them before you drop them off. They may be nervous! Talking shows them that you care about their safety and gives them an opportunity to discuss what might happen at the disco.
- What will happen if something goes wrong? When you talk to the children before they go, give them the chance to come up with suggestions about this. You will need to end up with some strategies to make sure they will be safe.



Situation four

Your child is not as bright as usual. She is tired and keeping to herself more. Think about how you would approach this situation.

- a) Find out if she is sick, having problems with school or friends, or if she is just moody.
- b) Try to find out if your child is using drugs.

Points to consider

- Don't immediately jump to conclusions. There are many possible reasons a child may be like this. Remember that most young people do not develop drug use problems. Your child may be sick, may have problems with friends or school, or it may be part of the changes that come with adolescence.
- Make time to discuss your concerns with your child and show that you care. You could say, "You have worked hard at school this year and I am very proud of you. Lately I have been worried, as you seem a little tired and have been keeping to yourself more than usual."
- Help your child to get some sleep and make sure they are eating properly. See if there is any improvement. If you are still concerned, you may want to talk about this and see if there is another way that the area of concern can be addressed.
- If your child is using drugs, take some action (see page 19—What can I do if my child is using drugs?).

Situation five

Your teenager wants to have a birthday party. They have some friends they wish to invite to the party whom they know will want to drink alcohol. How will you plan for this event?

- a) Not allow the party to go ahead.
- b) Ban alcohol from the party.
- c) Establish acceptable rules for the party with your own children.

Points to consider

- In thinking about how to deal with this situation, there are some key issues, such as your child's feelings, their safety and legal matters. If young people are to become responsible drinkers, it helps for them to be introduced to alcohol gradually.
- Not agreeing to the party is likely to create some tension between you and your child, unless you can suggest some other options such as going to a restaurant or some special place such as an amusement park.
- You may decide that a party can go ahead but with no alcohol. It would be worth discussing some ways that you and your child can make the party an attractive event without the alcohol. You could use lighting, decorations and good music, with plenty of room to move and dance. You could provide interesting non-alcoholic drinks and good food. All the guests should know that alcohol will not be allowed at the party.

It would be worth discussing some ways that you and your child can make the party an attractive event without the alcohol. You could use lighting, decorations and good music, with plenty of room to move and dance. If alcohol is allowed at the party, there are a number of things to keep in mind:

- Where is the party taking place? Alcohol can be legally served at home; however, parents have a legal responsibility for supervision (duty of care).
- Who will supervise? Perhaps other parents could become involved.
- Adults generally know how alcohol affects them and how much they can safely drink. However, young people haven't experienced the effects of alcohol, so it can be difficult for them to work out what is a reasonable amount.
- You and your child could come to an agreement about the type and amount of alcohol to be drunk and the time allowed for drinking. For example, you could decide that only low-alcohol drinks will be allowed, or that young people can drink between 7pm and 9 pm only.
- Inform other children's parents that there may be alcohol at the party.
- Organise what to do in case of gatecrashers.
- Organise how to get the guests home.
- Think about the possibility that accidents may happen, and plan accordingly; for example, keep the driveway clear.

You could refer to the booklet *Hosting teenage parties*,³ available from the Australian Drug Foundation (tel. 1300 85 85 84), which includes a section for parents.

3. *Hosting teenage parties: Managing alcohol and other drugs*, 2002, Melbourne: Australian Drug Foundation

Some other common situations

You may want to think about these scenarios and your response.

- Your child wants to go to someone else's party, where alcohol may be served.
- An older brother or sister buys alcohol for a younger sibling.
- You have a party at home and some of your friends get drunk.
- Your child has become friendly with a group of young people that you don't like.
- One of your child's friends is using drugs.

With any of these situations, remember that it is most important to give your child a chance to talk things through with you, when the time is right.

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Support services and information

Where can I get more information?

The telephone book: check under alcohol and drugs for services in your area.

Written information: self-help guides, school drug education materials and general drug information are available through the DrugInfo Clearinghouse (tel. 1300 85 85 84, email druginfo@adf.org.au). For individual advice and information, contact your local drug and alcohol service (see back cover).

Teachers and schools: the local school may run information evenings on drug issues or parenting skills.

Your local doctor, community health centre or hospital: ask what services are available locally.

Local government: can assist with information on parenting programs.

Legal aid and community legal services: can provide free or low-cost help in many situations.

The Internet: the Australian Drug Information Network (ADIN), at **www.adin.com.au**, is a central point of access to quality Internet-based alcohol and drug information provided by prominent organisations in Australia and internationally.

DrugInfo Clearinghouse, at **www.druginfo.adf.org.au**, provides reliable information about alcohol and other drugs.

Self-help groups and courses: sharing can help a person feel that they are not alone, and can provide them with practical and emotional support. Support groups are available for people who use drugs and their family and friends.

Alcohol and drug services and parent lines in your state or territory

For information, counselling, advice and other assistance, contact:

Australia-wide

Family Drug Support 1300 368 186 (toll-free)

Australian Capital Territory

Alcohol and drugs: (02) 6207 9977

Parent advice: (02) 6287 3833

New South Wales

Alcohol and drugs: (02) 9361 8000

1800 422 599 (toil-free outside Sydney)

Parent advice: 13 20 55 (toll-free

Northern Territory

Alcohol and drugs: 1800 131 350 (toll-free)

Parent advice: 1300 301 300

Queensland

Alcohol and drugs: 1800 177 833 (toll-free)

Parent advice: 1300 301 300

South Australia

Alcohol and drugs: 1300 131 340 (toll-free

Parent advice: 1300 364 100 (toll-free)

Tasmania

Alcohol and drugs: 1800 811 994 (toll-free

Parent advice: 1300 808 178 (toll-free

Victoria

Alcohol and drugs: 1300 85 85 84 (information, toll-free)

1800 888 236 (counselling, toll-free)

Family Drug Help: 1300 660 068 (toll-free

Western Australia

Alcohol and drugs: (08) 9442 5000

1800 198 024 (toll-free outside Perth)

Parent advice: 1800 654 432 (toll-free)