

DRUGS...

... Let's Talk about it



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- **Young People and Alcohol**

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Masculine pronouns are used generically in this document.

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TALK TO YOUR KIDS ABOUT DRUGS

Sooner or later, today's kids must make choices about alcohol and other drugs. Their questions—just like the ones they have about their sexuality or education—are most often a normal part of growing up. Consequently, using alcohol and other drugs is often an occasional, temporary phenomenon, even though the attraction to and curiosity about these substances can sometimes last a while.

As parents, we must face the reality of drugs and ask ourselves what role we can play for our kids in this regard. Our concerns will often be fleeting and our worries quickly put to rest. However, if we believe our child is using alcohol or other drugs, we can feel poorly informed and quite powerless. Though we should talk

about alcohol and other drugs with our children, we don't always know how to bring the subject up. Should we be firm and stern; take a more open, friendly, and relaxed approach; or strike a balance between the two extremes? Just like our children, we can fear how the other will react when the subject of alcohol and other drugs is raised.

As they grow, children of course need love, freedom, and understanding, but they also feel the need to challenge authority to learn discipline and self-control.

This brochure is for parents. It describes how using alcohol and drugs affects teens' social and emotional development and how parental influence can play a key role in helping them grow up safely and make responsible choices.




YES, ALCOHOL IS A DRUG

We too often underestimate the effects and consequences of drinking. In our society, drinking is a common part of celebrations such as family get-togethers, dinners with friends, etc. However, excessive use of alcohol—as with other drugs—can seriously affect your health and lead to addiction.

We must also teach our teens about the perils of drinking. Each year, drinking and driving claims many lives. What's more, drinking alters your ability to reason. It can lead young people to have unprotected sex or to participate in chugging contests, two lapses of judgment that can have serious repercussions.

UNDERSTANDING YOUR TEENS

WHAT THEY'RE GOING THROUGH

A cartoon illustration of a young boy with brown hair, wearing a green t-shirt and blue pants, jumping joyfully. He is surrounded by a shower of red and orange confetti or small flowers. The background is a light yellow with a vertical line and some faint, stylized text at the top.

Adolescence is a time of upheaval. On the one hand, teenagers undergo many physical and hormonal changes. And on the other hand, their parents and family have new expectations about them and want them to become more responsible and autonomous. It's also a time when peers, a social life, and romantic relationships are increasingly important to teenagers, who seek more and more to differentiate themselves from their parents and become independent. All the changes and confusion they go through and the pressure they experience from everyone can sweep them up in an emotional whirlwind. It's therefore normal for teens to be moody, preoccupied with how they look, and less self-confident. They may identify with certain idols that serve as role models for how to act. However, in late adolescence, teens are less easily influenced. They know themselves better, appreciate themselves more, and are more responsible. They also enjoy better relationships with adults as their mistrust of them diminishes.

The teen years are formative. How young people cope with the turmoil of adolescence will influence how they deal with situations in the adult world.

THEIR RELATIONSHIP WITH PEERS

Though children mostly seek to share their games and secrets with one or two friends, teens are more focused on the group or "gang." Alone, teens lack the confidence to assert themselves, so they will adopt the habits of other group members to feel more secure. They will pick up their tastes in clothing, music, and recreation. With their need for group approval and acceptance, they become more sensitive to the pressure the group

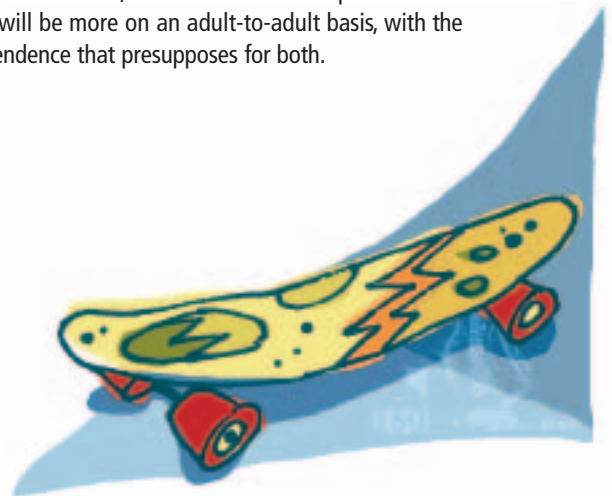
may exert. During this stage, teens are very easily influenced. They often adopt the same opinions as their friends regarding all sorts of subjects, including using alcohol or other drugs and relationships with their parents.

In late adolescence, teens develop closer relationships with certain peers and pair off into couples. The group and the opinions of its members become less important.

THEIR RELATIONSHIP WITH PARENTS

During adolescence, teens seek to become independent by distancing themselves from their parents. This starts early in the preteen years. Children begin to feel less comfortable about physical contact with their parents. They show less enthusiasm in what parents have to say. They are also ambivalent about their family: should they share in family activities or do their own thing?

Teens often challenge their parents in arguments about anything at all. As they like to discuss and debate—and are becoming better at it—teens are tempted to criticize everything around them. They may start to defy their parents' authority openly or sometimes surreptitiously. In some cases, their opposition will be less obvious, but present all the same: teens may shut themselves off or avoid contact with their family as much as possible. It is only in late adolescence, when teens are almost adults, that parent-teen conflict drops. Most parents will generally let their teens "stand on their own two feet," and their relationship with their teens will be more on an adult-to-adult basis, with the independence that presupposes for both.



How Not to Promote Dialog

Fourteen-year-old Jonathan came home later than expected on Saturday night and quickly went up to his room. Saying he was tired, he didn't answer his parents' questions about why he was late.

While doing the laundry the next morning, his mother notices that Jonathan's clothes smell strange. She suspects him of smoking pot. Since Jonathan's not there, she goes up to his room to search through his dresser drawers. She finds rolling papers, cigarettes, and matches. When Jonathan arrives home, his furious mother confronts him:

Jo, I'm terribly disappointed in you. I thought I could trust you. I always knew your friends were bad influences. From now on, you're not allowed out on Saturday night. And when you leave this house, I want to know where you're going and with whom. Understand?

Jonathan tries to explain, but his mother won't listen. She tells him to save his explanations for his father, who will get the full story when he gets home. Jonathan storms to his room, slamming the door behind him.

The Right Attitude for Promoting Dialog

For some time now, fifteen-year-old Brian has been avoiding his parents. He eats as soon as he gets home from school to avoid conversations at the dinner table. He regularly gets calls from Steve, a youth who is rumored to smoke hash.

Brian's mother is worried about him. One night when she and Brian are home alone, she invites him to eat with her. She makes his favorite meal. While they eat, she asks what's new with him and listens to him describe his latest "skate" moves. She tells him very calmly:

You know, Brian, I would like for us to talk like this more often and for you to tell me what's going on in your life. I've found you a bit evasive for a while now. I've also heard rumors about Steve, and since you're spending a lot of time together, I've been asking myself questions and worrying.

Brian is silent for a few moments then asks his mother: "So what's bothering you?" She answers: "In fact, I was wondering if you've also been using drugs..."



THEIR ATTITUDE TO DRUGS

Kids are often first exposed to cigarettes, beer, wine, etc. at home. Then, in elementary and high school in particular, they see how older students act, like their use of alcohol and other drugs. Adolescence is a time when young people are particularly susceptible to peer pressure, and a group where alcohol and drugs are used will often try to get its members to follow suit. A teen's initial reaction will often be uneasiness—sometimes mixed with curiosity—when the subject of alcohol and drugs is brought up.

Teens may drink or do drugs for a wide array of reasons:

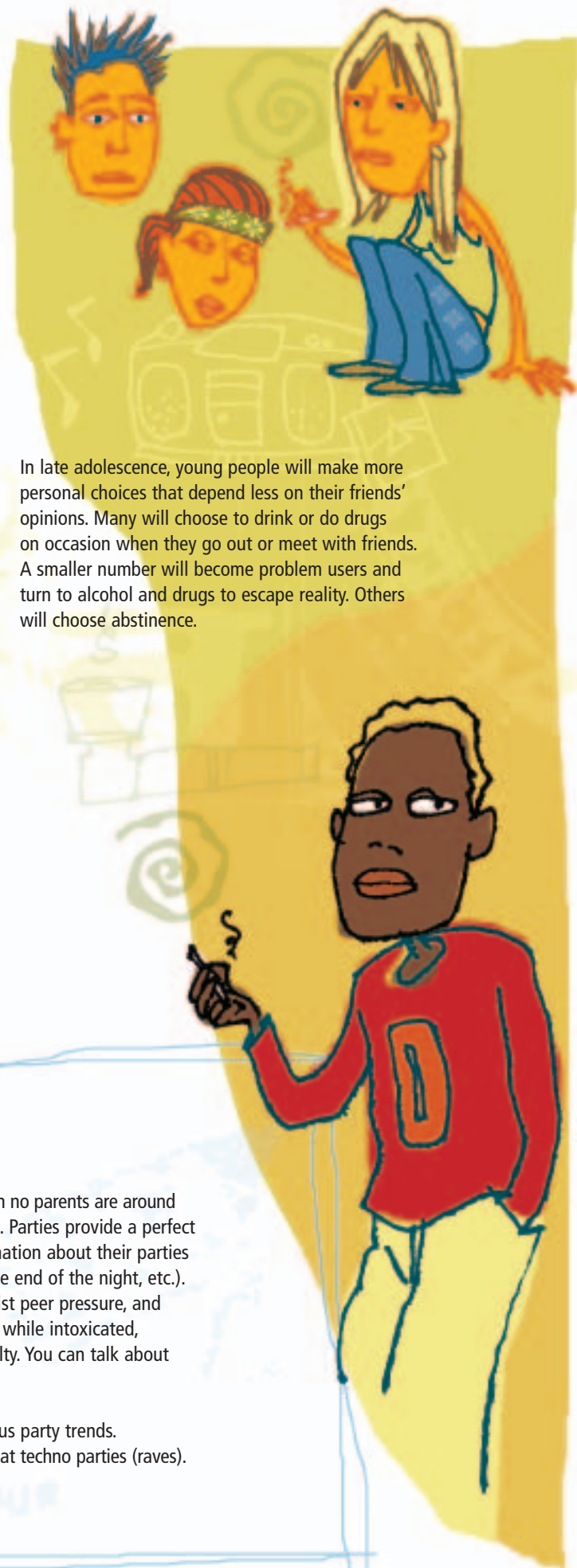
- have fun;
- fit in, impress their friends;
- try new things;
- defy authority, provoke adults;
- fight boredom, relax;
- imitate adults (e.g., at a party with alcohol);
- fight shyness, etc.

In late adolescence, young people will make more personal choices that depend less on their friends' opinions. Many will choose to drink or do drugs on occasion when they go out or meet with friends. A smaller number will become problem users and turn to alcohol and drugs to escape reality. Others will choose abstinence.

PARTIES

Youth generally experiment with alcohol or other drugs when no parents are around and they're with other young people who encourage them. Parties provide a perfect opportunity. As a parent, you can ask your teens for information about their parties (location, people there, whether parents will be there at the end of the night, etc.). You can also ask them whether they feel that they can resist peer pressure, and say that they can call you if need be. If your teens call you while intoxicated, compliment their decision instead of making them feel guilty. You can talk about their "experience" some other time.

Parents may also find it useful to keep up-to-date on various party trends. For example, the hallucinogen ecstasy is generally available at techno parties (raves).



PREVENTION

...IT'S NEVER TOO EARLY TO START

While teens are more likely to think about experimenting with drugs and alcohol, elementary school children may also be encouraged to try various substances. These invitations most often come from older people, sometimes before children are even able to truly understand the risks associated with drinking or doing drugs.

We prepare our children for all kinds of situations right from their earliest years. Once teens, the situations they face are different, but they still need their parents to help see them through.

Before an alcohol or other drug problem even develops, we as parents can adopt certain attitudes to help our teens make smart choices.

- Encourage teens to express themselves and say what they think. Teach them to say "no" when necessary.
- Let them make choices: buying their own clothes, managing weekend money, etc.
- Teach them to deal with adversity, wait to get what they want, do without things they believe are important, and accept being told "no" sometimes.
- Help them develop their judgment by asking their opinion on events and having them critique things around them: ads, shows, etc.
- Teach them to solve their problems. Help them develop solutions, choose the best one, and apply it.
- Point out their strengths and encourage them to develop them. Support their efforts and celebrate their successes to build their self-confidence.

- Help them make healthy lifestyle choices in terms of diet, sleep, relaxation, physical activity, etc.
- Help them find recreational activities they enjoy.
- Rather than trying to scare them, provide them with relevant information on alcohol and other drugs and listen to what they have to say on the subject.
- Give them objective information, otherwise they may not believe you.

Ultimately, our role as parents of teenagers is to listen to their concerns, keep on good terms with them regardless of what they do, share our joys and worries about them, show openness to their problems, and communicate what's important to us—our values—even though they sometimes seem to ridicule them.

Adolescence will have its fair share of ups and downs. When teens make mistakes, parents must help them learn positive lessons. It is important to constantly remind ourselves that, as parents, we do not play the same role for our children and cannot have the same relationship with them as their friends. Though they may not say it openly, teens will recognize that their parents treat them fairly and reasonably. They know that such behavior is proof of their love. Parents must also set limits to help teens deal with frustration and know when to say "no".

SUBSTANCES

What are they called?

What do they look like?

How are they taken?

What are the signs of use?

CANNABIS



HASHISH
hash, cube, dime bag, blast

HASH OIL
resin, liquid hash

MARIJUANA
pot, dope, joint, skunk, weed,
herb, Mary Jane, spliff, cracker,
cannon

- Dried leaves, green tobacco, fine herbs (marijuana)
- Small brown, black, yellowish, or greenish cubes (hash)
- Brownish oil

- Smoked
- Occasionally swallowed
- Inhaled

- Food cravings ("munchies")
- Smell of burnt grass
- Trouble speaking
- Slow thinking, disjointed thoughts
- Red eyes
- Irritated throat, coughing
- Memory problems

HALLUCINOGENS



LSD, MDA, STP
acid, tabs, dots, caps

MUSHROOMS
magic mushrooms, 'shrooms

MDMA (also a stimulant)
ecstasy, x, dove, xtc, love,
yin yang, E

2-CB
bromo, erox, nexus, venus

PCP
mescaline, mesc, crystals,
angel dust, dummy dust,
th, peace pill, fairy dust

KETAMINE
Ketalar, special K,
vitamin K, ket, ketty

- Clear liquid on a blotter
- Vials
- Capsules
- Pills
- Dried mushrooms
- Powder
- Crystals

- Swallowed
- Smoked
- Snorted
- Injected
- Chewed

- Delirium
- Disorientation, panic
- Agitation, aggression
- Track marks
- Dilated pupils
- Shaking
- Reduced sensitivity to pain (PCP, ketamine)

WEAK
STIMULANTS

CAFFEINE
coffee, tea, chocolate,
cola, wake-up pills,
some analgesics

NICOTINE
tobacco, cigarettes,
cigars, pipe tobacco,
chewing tobacco,
Nicorette, Nicoderm,
Habitrol

- Solid or liquid (caffeine)
- Capsules
- Pills
- Tobacco
- Chewing tobacco
- Chewing gum
- The "patch"

- Swallowed
- Smoked
- Applied to skin
- Chewed

- Agitation, anxiety
- Insomnia
- Coughing, nausea
- Tobacco odors
- Yellow fingers
- Shaking, nervousness (caffeine)
- Increased heartrate
- Heartburn
- Hypertension

STRONG
STIMULANTS

AMPHETAMINES
speed, wake-ups, pep pills,
uppers, ice, peach, crystals,
meth

COCAINE
base, crack, coke, snow,
crystals, nose candy,
freebase, rocks

MDMA (also a stimulant)
ecstasy, x, dove, xtc, love,
yin yang, E

METHYLPHENIDATE
Ritalin

- Pills (amphetamines, MDMA)
- Capsules
- Liquid
- Whitish powder (cocaine)
- Hard whitish rocks (crack)

- Swallowed
- Smoked
- Injected
- Snorted
- Applied to some mucous membranes

- Anxiety
- Repetitive movements, shaking
- Agitation, insomnia
- Paranoia, delirium
- Chapped nostrils, runny nose
- Track marks
- Increased heartrate
- Dilated pupils
- Fever
- Profuse sweating



Psychological addiction: The need to take a given substance more frequently to stimulate or feel good about yourself, relax, unwind, work up courage, overcome problems, etc.



Physical addiction: A physical need created by the body's tolerance to a drug, making it hard to do without it and provoking physical withdrawal symptoms of varying severity.



Name and appearance: Teens sometimes change the name of drugs. They may use code names adults don't know to better hide their use. The names often vary from one group of friends to another.

BEWARE OF MIXING:

Mixing substances can have unforeseen effects that often prove dangerous and sometimes fatal.

What does it cause/do?	If used too often	In case of overdose	During withdrawal	Comments
<ul style="list-style-type: none"> Disorientation Euphoria Relaxation Reduced anxiety Mood disturbances Distorted perceptions, sense of time Faster pulse 	<ul style="list-style-type: none"> Damage to throat and lungs Risk of respiratory infection Difficulty concentrating Heightened passiveness 	<ul style="list-style-type: none"> Confusion Excitement Anxiety Paranoia Psychosis 	<ul style="list-style-type: none"> Fatigue, reduced concentration Anxiety, agitation, irritability Depression Poor appetite and trouble sleeping 	<ul style="list-style-type: none"> Cannabis is the most commonly used illegal drug Youth will often have their first experience with illegal drugs using cannabis-derived products
<ul style="list-style-type: none"> Disorientation Euphoria Hallucinations Mood swings Distorted perceptions (see sounds, hear colors) 	<ul style="list-style-type: none"> Temporary resurgence when sober (comeback, flashback) Uncontrolled fears (bad trip) Diseases or infections from intravenous injections Anxiety, depression 	<ul style="list-style-type: none"> Confusion, agitation Delirium Accidents, suicide Hypertension, fever Seizures, coma, heart and respiratory problems, death <p><i>Note: The problems associated with PCP overdoses are more serious.</i></p>	<ul style="list-style-type: none"> Irritability Possible depression and anxiety 	<ul style="list-style-type: none"> Young people are not wary enough of these drugs, whose composition is unknown Bad trips are common with PCP and can cause violent and suicidal behavior It is very dangerous to eat unidentified, randomly picked mushrooms Substances sold as th or ecstasy may contain PCP or other hallucinogens 2-CB is sometimes passed off as ecstasy There is a serious danger of dehydration with MDMA if not enough water is drunk (notably at raves)
<ul style="list-style-type: none"> Excitement and stimulation Reduced fatigue Weight loss Increased wakefulness and strength 	<ul style="list-style-type: none"> Possible bronchitis and emphysema with prolonged tobacco use Sleep disturbance (caffeine) 	<ul style="list-style-type: none"> Nausea, vomiting Diarrhea Fatigue Anxiety Confusion, trouble concentrating 	<ul style="list-style-type: none"> Fatigue, weakness Trouble concentrating Irritability Depression Insomnia Increased appetite (nicotine) Headaches (caffeine) 	<ul style="list-style-type: none"> 70% of young people who drink alcohol also smoke cigarettes Tobacco smoke is often linked to cancer Caffeine can be found in certain headache medications
<ul style="list-style-type: none"> Excitement and stimulation Reduced hunger and fatigue Increased wakefulness and strength Feeling of power Delusions of grandeur, euphoria 	<ul style="list-style-type: none"> Bizarre and violent behavior, irritability Panic, anxiety Paranoia, hallucinations, delirium Loss of weight and appetite Nosebleeds Diseases or infections due to intravenous injections 	<ul style="list-style-type: none"> Difficulty breathing Hallucinations, paranoia, delirium Fever, heart problems (heart attack) Seizures, coma, death Stroke 	<ul style="list-style-type: none"> Anxiety, irritability Depression, suicidal ideation Fatigue, weakness Trouble concentrating Nausea Increased appetite Strong cravings 	<ul style="list-style-type: none"> Crack and cocaine users spend large amounts of money daily on their habit These substances may be mixed with others Crack and freebase are kinds of smokable cocaine Heavy doses of stimulants hinder learning and concentration Chronic cocaine use can cause impotence in certain users There is a serious danger of dehydration with MDMA if not enough water is drunk (notably at raves)

Dealers constantly change the appearance, name, color, and shape of substances as well as any logos on substances or containers. Users may therefore not be taking what they thought they were.







Duration and effects: The duration and effects of drugs vary depending on quantity; purity; the user's age, tolerance, personality, genetic makeup, and psychological and emotional state; the method of use; context (mixed with other drugs or alcohol, location, presence of other people, etc.).

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SUBSTANCES	What are they called?	What do they look like?	How are they taken?	What are the signs of use?
ETHANOL 	ALCOHOL booze, beer, coolers, spirits, liquor, wine, shooters	<ul style="list-style-type: none"> • liquid 	<ul style="list-style-type: none"> • Swallowed 	<ul style="list-style-type: none"> • Agitation • Slow movements, stumbling • Pasty mouth • Odor of alcohol on breath • Flushed skin • Glassy eyes • Heavy eyelids, drowsiness • Lapses in attention, memory, or judgment
GLUES AND SOLVENTS 	AEROSOL rush, poppers GLUE glue, sniff PAINT THINNER SOLVENTS GAS	<ul style="list-style-type: none"> • Tubes of glue • Strong-smelling liquid • Various containers • Aerosols, deodorizers • Paste 	<ul style="list-style-type: none"> • Inhaled (e.g., from paper or plastic bags) 	<ul style="list-style-type: none"> • Dizziness, sleepiness • Pasty mouth • Runny nose and eyes • Smell of glue • Rash around nostrils • Cough • Nausea, vomiting • Change in attention span, memory, and judgment
TRANQUILIZERS AND SLEEPING PILLS 	BENZODIAZEPINES Ativan, Dalmane, librium, Halcion, Restoril, Rivotril, Rohypnol, Serax, Valium, Xanax, rocks, downers, blues, yellows GHB (gamma hydroxybutyrate) liquid ecstasy, g, Gamma-OH, date-rape drug BARBITUATES (use dropping) barbies, goofballs ETHCHLORVYNOL Placydil CHLORAL HYDRATE Notec MEPROBAMATE Equanil, 282MEP	<ul style="list-style-type: none"> • Vials • Capsules • Pills • Liquid • Powder 	<ul style="list-style-type: none"> • Swallowed • Sometimes injected 	<ul style="list-style-type: none"> • Unusual calm, slow movements • Pasty mouth • Urge to sleep • Indifference • Amnesia • Change in attention span, memory, and judgment • Confusion • Nausea, vomiting • Constipation
OPIATES 	CODEINE Empracet HEROIN smack, horse, China white, slag, hero, junk METHADONE MORPHINE m, morph PERCODAN OPIUM gum, black, jack HYDROMORPHONE Dilaudid	<ul style="list-style-type: none"> • Vials • Capsules • Pills • Powder (opium, heroin) • Syrup 	<ul style="list-style-type: none"> • Swallowed • Smoked • Injected • Snorted 	<ul style="list-style-type: none"> • Nausea, vomiting • Constipation • Constricted pupils • Slow movements • Track marks • Slow heartrate and breathing



Psychological addiction: The need to take a given substance more frequently to stimulate or feel good about yourself, relax, unwind, work up courage, overcome problems, etc.



Physical addiction: A physical need created by the body's tolerance to a drug, making it hard to do without it and provoking physical withdrawal symptoms of varying severity.



Name and appearance: Teens sometimes change the name of drugs. They may use code names adults don't know to better hide their use. The names often vary from one group of friends to another.

BEWARE OF MIXING:

Mixing substances can have unforeseen effects that often prove dangerous and sometimes fatal.

What does it cause/do?	If used too often	In case of overdose	During withdrawal	Comments
<ul style="list-style-type: none"> • Relaxation, euphoria • Reduced inhibitions • Feeling of warmth • Slower reflexes • Trouble seeing • Dizziness 	<ul style="list-style-type: none"> • Reduced appetite • Serious health problems (cirrhosis of the liver, ulcers, cancers) • Insomnia • Blackouts • Depression • Tolerance: Must drink more and more to feel the effects 	<ul style="list-style-type: none"> • Poor coordination, slow pulse • Confusion, loss of consciousness • Respiratory depression, coma, death 	<ul style="list-style-type: none"> • Anxiety, agitation • Insomnia, irritability • Sweating • Shaking, seizures • Nausea, vomiting • Confusion, hallucinations, <i>delirium tremens</i> 	<ul style="list-style-type: none"> • Even though alcohol is freely sold, it is definitely a drug • Possible liability for road accidents and violent acts • Increased risk for all accidents when combined with other drugs
<ul style="list-style-type: none"> • Euphoria, excitement • Dizziness, slow reflexes • Vertigo, vision problems • Hallucinations, delirium 	<ul style="list-style-type: none"> • Damage to nose, throat, kidneys, and liver • Fatigue • Incoherence • Hostility • Depression 	<ul style="list-style-type: none"> • Loss of consciousness • Respiratory depression • Seizures, heart problems, death 	<ul style="list-style-type: none"> • Similar symptoms to that of alcohol withdrawal 	<ul style="list-style-type: none"> • These substances must be kept out of reach of young children • Associated with a risk of fire and explosion
<ul style="list-style-type: none"> • Loss of inhibitions • Feeling of calm and relaxation • Drowsiness • Trouble speaking • Involuntary eye movements • Euphoria 	<ul style="list-style-type: none"> • Reduced willpower • Panic if none available • Sexual dysfunction 	<ul style="list-style-type: none"> • Deep sleep • Amnesia • Nausea, vomiting • Poor coordination • Excitement, delirium • Stupor • Respiratory depression • Death (less of a risk with benzodiazepines, except when mixed with alcohol or other drugs) 	<ul style="list-style-type: none"> • Anxiety, panic, irritability • Depression • Insomnia • Fever, nausea, vomiting • Distorted perceptions • Shaking, seizures, delirium 	<ul style="list-style-type: none"> • Some substances are available on the black market or without a prescription through the Internet. Even when prescribed, they remain dangerous if not used properly • Very dangerous when taken with alcohol or cannabis • Some substances in this group cause memory problems • The media sometimes call Rohypnol and GHB (liquid ecstasy) “date-rape drugs” • Despite being commonly known as liquid ecstasy, GHB does not contain ecstasy
<ul style="list-style-type: none"> • Reduced pain • Feeling of warmth • Feeling of wellbeing and relaxation • Mood swings • Delayed ejaculation 	<ul style="list-style-type: none"> • Apathy, lack of energy • Health problems • Diseases or infections due to intravenous injection 	<ul style="list-style-type: none"> • Poor coordination • Loss of consciousness • Respiratory depression • Heart problems • Coma, death 	<ul style="list-style-type: none"> • Yawning, spasms • Goosebumps, shivering • Nausea, vomiting • Diarrhea, cramps, abdominal pains • Dilated pupils • Anxiety, irritability 	<ul style="list-style-type: none"> • These substances may be mixed with others • Some cough syrups and analgesics contain codeine • Methadone is a narcotic that is sometimes used to treat narcotics addicts

Dealers constantly change the appearance, name, color, and shape of substances as well as any logos on substances or containers. Users may therefore not be taking what they thought they were.



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GETTING INVOLVED

...WHAT TO DO IF THEY'RE USING ALCOHOL OR OTHER DRUGS

If parents suspect their teens are drinking or using drugs, they must bring up the subject with them. It is false to think that the simple fact of talking about alcohol and other drugs could incite young people to try them. The exact opposite is true. For teens, knowing that you're ready to talk openly without judging them can be reassuring. Certain parental attitudes can encourage discussion.

HOW TO TALK TO YOUR TEENS

- Don't be afraid to take the first step when you have something to discuss with your teens.

- Calmly bring up the subject when you are not angry and they are not under the influence of alcohol or drugs.

- Tell your teens that you suspect or know they are using drugs or alcohol. Instead of criticizing them, tell them how you feel, saying, for example, "I'm worried, I don't understand..."

- Encourage your teens to talk about how they feel and make sure you've truly understood what they've said. Several talks may be needed before you understand each other.
- Don't seek to fill pauses in the conversation—they may indicate periods of reflection.
- Let your teens know that you're listening through words and actions. This could encourage them to open up more.
- Explore the reasons that led them to drink or do drugs. The discussion will differ depending on whether your teens have done so to be like their friends or to escape their problems.
- Be honest. Don't be afraid to admit to your teens that you, too, have made mistakes. However, be sure not to lecture or go on about what life was like "in your day." This often cuts off all communication.
- Be sure to take what they say seriously and not downplay their words.
- With younger children, intervene by monitoring their activities, friends, and use of spending money.
- With older teens, encourage them to think for themselves and find their own solutions to problems, while reassuring them of your support. If they seem to use alcohol and drugs to escape, help them find other ways to meet their needs or solve their problems.
- Tell your teens what you expect of them in the future and remind them of the consequences of disobeying the rules. Negotiate a contract with them instead of dictating proper behavior.
- Help your teens get accurate information on drugs and their physical and psychological effects, and give them tips on how to show responsibility: a well-informed teen makes better choices.
- Your teens are going through a stage in their life when they will be called upon to make choices every day. Discuss why it's good to have a clear head in many situations instead of being under the influence of alcohol or other drugs.
- Lastly, it builds character for your teens to bear the consequences of their actions, like explaining skipped classes or bad marks themselves, repaying debts, etc.



SOME SIGNS YOUR TEEN IS USING ALCOHOL OR OTHER DRUGS

You may suspect that your teen is using alcohol or drugs. If you notice changes in their habits or clear signs that they're under the influence, you must talk with them.

Though the following signs are often indicative of alcohol or other drug use, they do not necessarily reflect a drug problem.

Physical signs:

- red eyes;
- difficulty speaking;
- slow movements or agitation;
- confusion;
- sleepiness or insomnia;
- dry and pasty mouth;
- sniffing;
- food cravings or loss of appetite.

Physical signs may differ depending on the product(s) and quantity used. Consult the "All About Drugs" table in this brochure.

Changes to usual behavior:

- show a sudden lack of interest in school or other activities they previously enjoyed;
- suddenly develop a new self-opinion (e.g., while high, they find themselves creative, friendly, exceptional, etc.);
- become very irritable or even believe the world is out to get them;
- ignore or increasingly ignore appearance or become extra careful about appearance to deflect attention.

Dramatic behavioral shifts:

- get lower marks at school;
- hang out where drugs are sold;
- change routine;
- often come home later;
- ask to stay over at friends' more frequently or without any special reason;
- keep unusual objects in their room or their possession: blackened knives and cans, homemade pipes, lighters;
- hide in room more frequently;
- steal money or jewelry from home and sometimes even shoplift;
- get food cravings ("munchies") after a night out.



IF YOUR TEEN COMES HOME HIGH...

In most cases, it's best to wait for the effects of the drug to wear off before bringing up the subject. You must be patient, keep your cool, and, if your teen seems seriously impaired, not leave them alone. Starting a long discussion will accomplish nothing, as your teen will not be in an appropriate state of mind. You can ask what drug they took and how much. It is best to not contradict them if they say strange things, as they are expressing what they are experiencing. It is recommended to let your teen finish the "trip" somewhere calm.

Teens may sometimes have a "bad trip," which is a state of distress characterized by anxiety and unfounded fear. Sometimes, depending on the substances taken, bizarre visions can cause panic. If you are worried about your teen's condition, feel free to take them to the nearest hospital.

Should I believe my teen if they tell me they are not or will no longer use drugs?

Raising the issue of alcohol and other drugs with your children or teens isn't easy. They will not necessarily be comfortable with telling you about their experiences. This is especially true if they are afraid of disappointing you or being punished. They may prefer not to tell you the whole truth. You should always try to keep your children's trust by showing them that you respect and believe them, or want to believe them. This being said, you should still find out whether and why they're using drugs. To prevent your teens from shutting

themselves off further, show them that you're ready to talk openly and calmly. If you believe they're hiding some important information, you can say so, making sure to avoid accusations. For example, you could say, "Listen, I feel there are things you're not telling me and I'm worried. I want you to feel comfortable talking to me about them. I'm not looking to lecture or punish you. However, I would like to know what's going on to help you make the right decisions."

Why do teens develop alcohol or other drug problems?

Teens are discovering themselves and the world. They lack an adult's experience to manage problems. They are learning and consequently do not have all the skills they need to solve problems and feel in control of their life.

They are therefore more vulnerable to situations that are temporarily difficult (e.g., a death in the family, a breakup, troubles at school). These situations may seem like dead ends rather than problems to solve. When young people feel that they no longer have control over their life, that the world is against them, or that they no longer have the support of their family and friends, they may feel trapped with nowhere to go.

Finding no other solution to an intolerable situation, some teens may seek to escape through alcohol and other drugs.

Parents sometimes have trouble understanding teen issues. A teen's silence can often be interpreted as "they want nothing to do with me, they don't need me, it's as if I don't exist!" Their use of drugs or alcohol may be seen as an act of delinquency or rebellion that goes against family values, while the reality may be something else entirely. Teens aren't sure where they stand in relation to the adults in their lives. While they want to keep their distance and be their own person, teens need to know adults are around to listen.

My teen uses drugs

How do I know if they have a problem

Three factors affect the impact of alcohol and other drugs on a person: the **user**, the **substance**, and the **context** in which it is used.

If you're worried about your teen's use of alcohol or drugs, consider how these three factors work together.

User

- How old is your teen? When did they start using drugs?
- Is your teen depressed? Alone?
- Are there problems at school?
- Does your teen have low self-esteem?

Context

- How does your teen get drugs?
- Do they use drugs alone or with friends?
- Why do they take drugs?
- Can they count on family support to solve their problems?
- Do they have many friends?

Substance

- What drug does your teen use?
- How much?
- Does your teen use more than one drug at once?
- How often does your teen take drugs?

WHAT TYPE OF USER IS MY TEEN?

There are various kinds of young users.

- **Non-user**
Never uses alcohol or drugs.
- **Curious**
Sometimes uses out of curiosity or to fit in.
- **Occasional**
Uses alcohol or drugs for pleasure with other people on special occasions (parties, shows, etc.).
- **Regular**
Regularly uses and plans to use alcohol or drugs every week to have fun, socialize, or fight shyness. This suggests a psychological addiction.
- **Problem**
Using alcohol or other drugs is a big part of daily life and takes virtually all the teen's time and money. This type of use reflects underlying problems in their life. It suggests a predisposition to drug addiction.
- **Abusive**
The teen uses alcohol or drugs in an uncontrolled, excessive fashion. They may take or mix large quantities of drugs to relax or escape their problems. The toxic mixtures and overdoses associated with this type of uncontrolled use can have serious health consequences.

Based on B. Tardif, D. Astelle and R. Baril (1992). *Outils d'intervention – Prévention primaire de la toxicomanie et promotion de la santé*, p. 5. After P. Paquin (1988) and M.-C. Gran (1989).



When parents use alcohol or other drugs

Parents are their children's main role models and references. When parents use alcohol and other drugs, their children may learn that this is a normal recreational activity or lifestyle. Children may see alcohol and other drugs as an acceptable solution to the problems of daily life. In such a situation, children don't always learn to find the right solutions to their problems.

Actions speak louder than words. If you're a parent who regularly uses alcohol or other drugs, your words will carry no weight if you tell your teen: "Do what I say, not what I do." Even though it's not always easy, you must set an example by finding appropriate solutions to your problems.



BIG MUSCLES, BIG RISKS!

Driven by competition and the desire to perform, some young athletes take anabolic steroids. Their muscles grow rapidly and their endurance increases. They feel in peak physical shape.

Reality tells another story. Anabolic steroids affect behavior by increasing aggression. Taken orally or injected, these synthetic hormones can also cause health problems such as bad acne on the body and face and hormonal dysfunction. In girls, the voice deepens, hair appears on the face and body, and menstruation stops. Boys may experience hair loss, breast and prostate growth, and reproductive difficulties. Even more serious problems can occur, such as the cessation of long bone growth, liver damage, and an increased risk of heart problems. What's more, teens who share needles are at risk of contracting diseases such as hepatitis and AIDS.

For more information on teen drug use in sports, you may order the *Making Sports Drug-Free* brochure produced by Secrétariat au loisir et au sport by calling 1 866 794-8691. You may also download it from www.mamsl.gouv.qc.ca.

Q&A

on drugs

Q. What are the consequences of drug abuse?

- A. Sooner or later, drug and alcohol abuse can lead to physical and psychological addiction as well as any number of other problems such as dropping out of school, the loss of a job, delinquency, prostitution, theft, violence, and homelessness.

Alcohol or other drug abusing teens can break free by agreeing to undergo rehabilitation. In Québec, specialized help centers offer their services to young drug abusers. These centers help troubled youth end their addiction while offering them the support to address the root problems. For more information, contact your Centre de santé et de services sociaux (CLSC).

Q. Is there a relationship between alcohol or other drug abuse and suicide in young people?

- A. Generally, alcohol and other drug abuse—just like suicidal ideation—are two signs that a young person is experiencing troubles. We cannot make a systematic link between alcohol and other drug use and suicide. When the abuse of certain substances is paired with other risk factors (school problems, sexual abuse, family violence, loss of friends, conflict with other teens, social isolation, depression, etc.), we must watch for potential suicidal behavior in young people. Factors must not be considered in isolation, but rather taken as a

whole. Studies show that most deviant behavior only develops when multiple risk factors are present at once. If a parent suspects their teen is thinking about suicide, they should speak to them right away and get help from the appropriate services: **Centre de santé et de services sociaux (CLSC), Suicide Prevention Center (1 866 APPELLE)**.

Q: What is chugging?

- A: Chugging is guzzling large quantities of alcohol in a very short time. It occurs at youth hangouts where drinking a lot of alcohol is a challenge or test.

Chugging can result in extreme intoxication that threatens your teen's health and can even cause death. If your teen does not react, loses consciousness, has trouble breathing or a weak pulse, or vomits repeatedly after consuming alcoholic drinks or other drugs, call **911** right away.

If you're unsure how intoxicated your teen is, never leave them alone. Call the **Info-Santé** service in your region or the **Poison Control Center (1 800 463-5060)**. A trained professional will help determine whether you should seek medical help.

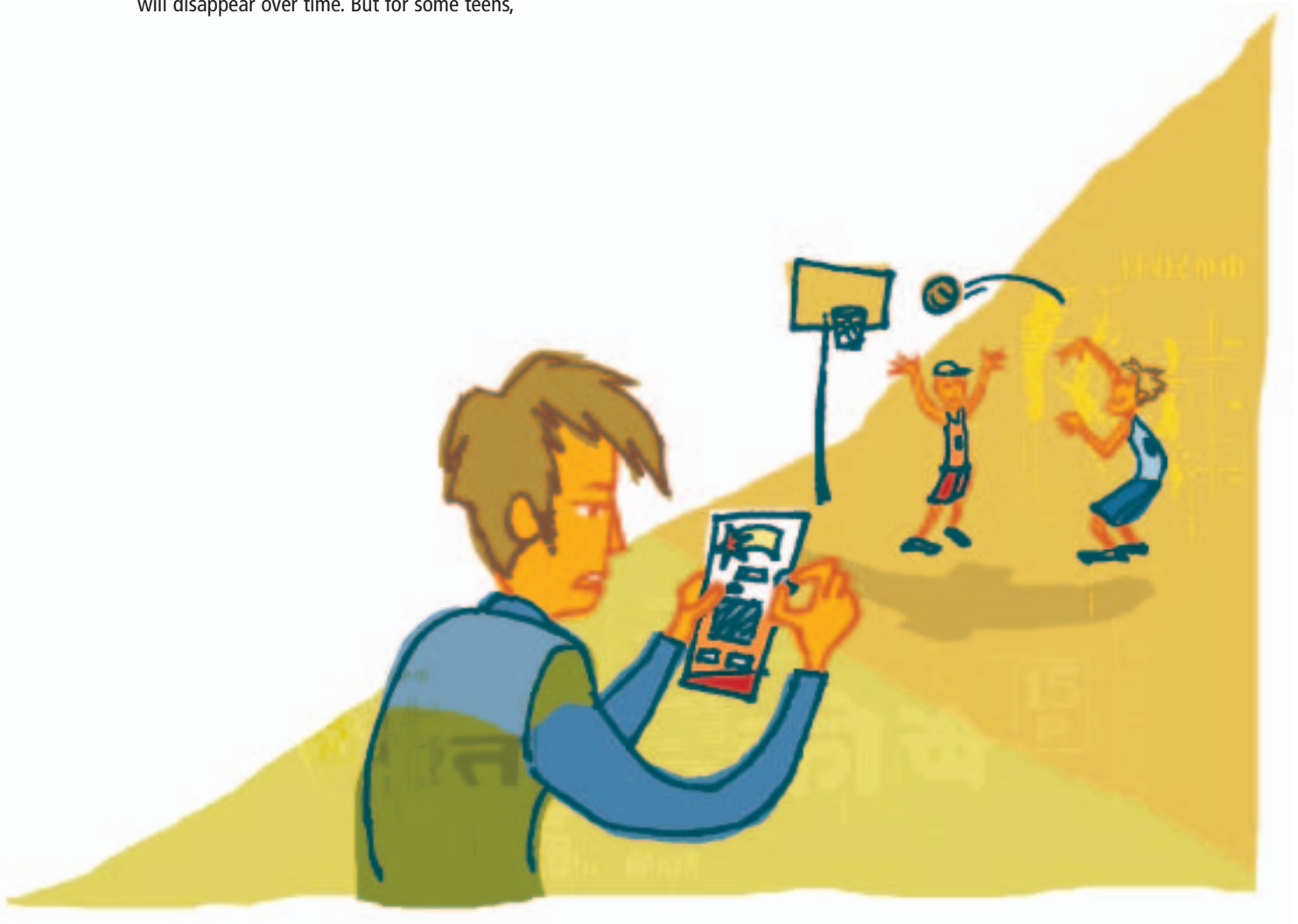
Q. In young people, is there a relationship between drug use and playing games of chance and money?

- A. Adolescence is a time when teens will try many new things. Young people seem particularly drawn to experiment with certain behaviors such as using alcohol or other drugs or playing games of chance and money.

Recent studies have shown that many young people start playing these games early. In their first year of high school, a third of students have already played them, and this number increases by grade. The most popular games among young people are instant lotteries, card games, sports betting, and bingo. However, though this behavior is common during adolescence, the vast majority of teens will not develop a gambling problem, and this behavior will disappear over time. But for some teens,

gambling can claim a bigger place in their life and lead them to delinquency and to take undue risks. The earlier a person starts to gamble, the greater their risk of developing a gambling problem appears to be. They also have a greater tendency toward risky behavior, notably with respect to using alcohol, drugs, and tobacco.

The majority of high school students do not consider playing games of chance and money a risky behavior. The same applies to their parents, a good number of whom offer their children lottery products as gifts. Several studies are under way, but we still do not know the true extent of youth gambling problems and the influence of family playing habits on the development of these problems. Hence the need to continue to gather data.



This brochure sheds light on alcohol and other drug use in young people and provides parents with solutions to the problems they face.

Preventive education is a winning investment. Understanding, dialog, and mutual respect are crucial to help young people develop greater self-esteem and develop to their full potential.

USEFUL WEBSITES

www.parlonsdrogue.com (French only)
This site provides youths with a range of information to help them make smart choices.

www.educalcoool.qc.ca
This site offers a wealth of information for the general public.

www.aitq.com (French only)
The Association des intervenants en toxicomanie du Québec Website includes wide-ranging information on preventing drug addiction as well as numerous hyperlinks.

www.toxquebec.com (French only)
This site features self-evaluation questionnaires on various addictions as well as discussion forums and a virtual library.

SPECIALIZED PHONE SERVICES

Drugs: Help and Referral,
1 800 265-2626
(Call (514) 527-2626 in the Montréal area).
Available 24 hours a day, 7 days a week.

Tel-jeunes (youth helpline),
1 800 263-2266
(Call (514) 288-2266 in the Montréal area).

La ligne parents (parents helpline),
1 800 361-5085
(Call (514) 288-5555 in the Montréal area).

www.msss.gouv.qc.ca

