



Discussion Guide for

HOW TO TELL IF A KID IS ON DRUGS AND WHAT TO DO ABOUT IT

OVERVIEW

This video is packed full of information about the various types of drugs available to our children today. Being an American production it relies on American facts and resources. There are a few differences in our country and they are outlined here.

In Ontario, for example, there has been an increase in drug use in males in the 9th and 11th grades between 1993 and 1995 (The facilitator may want to check with his/her own provincial offices to find out if this trend is true in their area). Even with this trend, drug use overall among students has declined since the 1970's. The video also shows and talks about cocaine being sniffed through a rolled up dollar bill. A small point but it should be recognized that we do not have this currency. Drug testing, as mentioned in the video, is not commonly done in Canada. Although this can be done, usually this is not the first avenue parents would take.

KNOW THE DRUGS

MARIJUANA,

also called pot, dope, grass, weed or reefer, comes from the plant *Cannabis sativa*. It is either smoked in hand rolled cigarettes, pipes or bong, or cooked into foods like brownies and eaten. It is called a "gateway drug" because it often leads to the abuse of other drugs.

TOBACCO

contains a highly addictive substance called nicotine. Nicotine belongs to the class of drugs known as stimulants, which speed up the nervous system causing agitation. Cigarettes, snuff and chew are the most commonly used forms of tobacco.

COCAINE,

also called coke, snow, or blow, is a white powder that is sniffed of "freebased" through heating and mixing with ether and sodium bicarbonate. Crack, the purified rock form of cocaine, is smoked in tiny chunks. Whatever the form, cocaine is a highly addictive and destructive drug.

AMPHETAMINES,

often called speed or uppers, are pills, tablets or caplets that stimulate the central nervous system. Diet pills are a commonly abused, mild form of amphetamine.

DEPRESSANTS,

also known as downers, ludes or barbs, are generally legal, controlled medicines, usually in the form of pills or capsules, which are often prescribed for sedation but can be very dangerous when abused. Ethanol is the most commonly abused depressant found in alcohol, like beer, wine and liquor that slows down the central nervous system.

HALLUCINOGENS,

or psychedelics, distort thinking, emotions, perceptions and sensations and include drugs such as PCP or angel dust, LSD or acid, Psilocybin Mushrooms, Mescaline and Ecstasy.

INHALANTS,

are breathable substances such as amyl nitrate or rush, bolt, popper or snappers. Inhalants produce mind-altering effects and include many household items such as fingernail polish remover, hair spray, insecticide, cleaning fluid, ether.

HOW TO TELL

Signs Of Drug Use:

The sooner a drug problem is recognized, the easier it is to stop it. Look for sudden changes in mood and behaviour, such as:

- Unusual hostility, irritability, or secretiveness
- Withdrawal from the family
- Changes in friends
- Resistance to discipline
- A pattern of dishonesty, stealing and trouble with the police
- The possession of large amounts of cash
- A drop in grades
- A sudden increase in absences, tardiness
- Poor concentration and short-term memory
- Slurred speech

- Loss of motivation and interest in regular activities
- Drug-related messages or symbols on possessions
- A lack of concern for appearance or hygiene

Notice changes in your child's physical well-being, such as:

- An unhealthy appearance
- Bloodshot eyes
- Dilated or shrunken pupils
- A constant runny nose or cough
- A major change in eating or sleeping patterns
- Sudden weight loss
- A lack of energy

Be aware that these signs may indicate a problem other than drug use. Drugs, traces of drugs and drug paraphernalia are more direct evidence of drug use.

If you suspect that your child is using drugs, question everything. Make sure you monitor what your child is doing as much as possible.

If you feel you have strong evidence and decide to intervene, wait until your child is sober. Call on other family members or friends to support you in the confrontation, if necessary.



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DOS & DON'TS

- DON'T panic or blame yourself.
- DO self-examine, consider the example you've set.
- DON'T be sarcastic, accusatory or sympathy-seeking.
- DO express concern and understanding.
- DON'T be swayed by denials if you have hard evidence.
- DO be firm, stick to established discipline.
- DON'T try to sway the child with emotional appeals.
- DO present the evidence calmly and rationally, without giving the child a chance to lie.

Be prepared that your child will probably lie and you may have to seek outside help.

COMMUNICATION: THE KEY TO PREVENTION

The best way to prevent a drug problem from ever beginning is to provide an environment of open and honest communication. Begin talking to your child about drugs as early as possible. Involve your children in establishing family rules and the consequences for violating them. Be firm and enforce discipline from the very beginning. Set a good example with your own actions. Encourage involvement in healthy activities and show your support by attending these activities whenever possible. Try these tips for successful communication:

- Be calm. Anger can cloud your ability to communicate to your child rationally.
- Give your undivided attention. Don't interrupt or pass judgment until the child asks for it.
- Concentrate on understanding rather than always offering advice. Repeat what is said if you need to.
- Be aware of body language, both yours and your child's and send positive messages.
- Speak for yourself. Emphasize your feelings. Begin sentences with "I" instead of "you".
- Be firm. Family rules, behavioural expectations and likely consequences need to be communicated to children and agreed upon by all family members.

HOW TO FIND RESOURCES

Among those that can refer you to a drug treatment program in your community are:

- your hospital
- the County Mental Health Society
- County Board of Health
- the schools' guidance or health counselors
- yellow pages of the phone book under "Addiction"
- local groups which deal with children and adolescents

More information can be obtained from the following sources:

Kids Help Line
800-668-6868

Canadian Centre on Substance Abuse
613-235-4048

Health Canada
613-957-5995

Parents Against Drugs
416-395-4970

PRIDE Canada
800-667-3747

PROVINCIAL ADDICTION AGENCIES:

BRITISH COLUMBIA:

Alcohol and Drug Services Clinic:
800-663-1441

ALBERTA:

Alcohol and Drug Abuse Commission, Youth Services:
403-422-7383 (Edmonton)
403-297-4664 (Calgary)

SASKATCHEWAN:

Alcohol and Drug Services, Myers Recovery Centre:
306-766-7910

MANITOBA:

Addictions Foundation of Manitoba:
204-944-6235

ONTARIO:

Addiction Research Foundation:
800-387-2916

DART INFO LINE

(Drug & Alcohol Treatment Information Line):
1-800-565-8603

NEW BRUNSWICK:

Regional Addiction Services:
506-452-5558

NOVA SCOTIA:

Drug Dependency Services:
902-424-5623

PRINCE EDWARD ISLAND:

Addiction Services of P.E.I. - Adolescent Program:
902-368-4273

NEWFOUNDLAND:

Department of Health - Addiction Services:
709-729-0623

PROGRAMS DETAILS

LENGTH:

20 minutes

SUBJECT AREAS:

Drug Addiction

AUDIENCE LEVELS:

Adult/Professional

ORDER NUMBER:

2-51335G

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