Soft' Drugs? Dr Aric Sigman

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About Dr Aric Sigman



Dr Sigman, an American, is a Fellow of the Royal Society of Biology, Associate Fellow of the British Psychological Society and a Chartered Scientist awarded by the Science Council. As a health education specialist, he lectures primarily to children, parents and staff at schools, as well as to medical schools and to NHS doctors. He is a member of the All-Party Parliamentary Group on a Fit and Healthy Childhood and has also worked on teenage health education campaigns with the Department of Health. He is a peer reviewer for the medical journals Acta Paediatrica, Preventive Medicine, the Nature research journal Pediatric Research and the author of five books on PSHE-related topics, including Getting Physical, which won The Times Educational Supplement's Information Book Award. His biology paper on body image was the '2012 Scientific Article' for the 2012 Edexcel Biology A-level exam paper.

Dr Sigman has twice been invited to address the European Parliament Working Group on the Quality of Childhood in the EU in Brussels, once on reducing alcohol misuse among children and adolescents, and again on the impact of electronic media and screen dependency. The International Child Neurology Association scientific committee invited him to address their global conference. His paper on 'Screen Dependency Disorders' is published in the Journal of the International Child Neurology Association and he was recently invited to write a paper on screen time for Nature: Pediatric Research and article on preventing future alcohol problems in children for The BMJ (British Medical Journal)..

The EU Working Group published his report on the impact of electronic media and screen dependency, as well as his second report on preventing alcohol misuse among children and adolescents in the EU. Dr Sigman is the co-author of three recent All-Party Parliamentary Group reports on childhood mental health.

He has a long history of health education work for children and young people, appearing on the BBC's Going Live and then Live & Kicking for most of the 1990s. He also wrote health and psychology columns for several BBC children's and teenage magazines and Brain and Behaviour column for The Times Educational Supplement magazine. Dr Sigman travels abroad frequently to observe unusual cultures such as North Korea, Turkmenistan, Congo, Bolivia, Tonga, Bhutan, Far Eastern Siberia and many others, often volunteer teaching. While many of us are aware of the dangers of Class A drugs such as heroin and cocaine, the different yet serious effects of so-called 'soft' drugs such as cannabis, vaping, ecstasy and recreational ritalin misuse use on mental health, addiction and school grades are often unrecognised.

Children hear about drugs everywhere: in music, films, the news, and on TV. They hear about it online, in things like YouTube videos, or on social media like Instagram or Snapchat. They might see people doing drugs on the street or even in their own home. They might hear other children talking about it at school, parties, or even on the playground. The misuse of prescription medicines such as Ritalin for recreational purposes is often overlooked as a recreational drug. The teenage years are the most likely time for someone to try drugs, and that can lead to drug problems when they grow up.

Key risk periods for drug and alcohol abuse occur during major transitions in children's lives. These transitions include significant changes in physical development, like puberty, or social situations, such as moving home or parents divorcing, when children experience heightened vulnerability for problem behaviours.

Most adolescents do not progress beyond initial drug or alcohol use, but a small percentage quickly escalate their substance abuse. Research has shown that such adolescents are most likely to experience a combination of high levels of risk factors and low protective factors characterised by high stress, low parental support, and low academic competence.

Risk factors are the individual circumstances that have the potential to increase the likelihood of an adolescent abusing drugs and/or alcohol. Some risk factors include:

- · a family history of substance abuse including a genetic predisposition
- a mental or behavioural health condition, such as depression, anxiety or ADHD
- impulsive behaviour
- history of traumatic events, such as experiencing a car accident or being a victim of abuse
- · low self-esteem or feelings of social rejection

Talking About Teenage Drug And Alcohol Abuse

Drug and/or alcohol abuse is largely preventable. Talking with your child about the risks of drug or alcohol abuse can help educate them about things they may or may not know. Make sure you are listening and allowing them to ask questions. If you're anxious, share your feelings with them. The more honest and vulnerable you are with your thoughts and feelings the more likely your child will be open and honest with you.

Ask your teenager about their thoughts and feelings. Avoid merely lecturing. Instead, listen to their opinions and questions about drugs or alcohol. Make sure they know they can be honest with you. Be aware of your teenager's body language to see how they really feel about the topic.

Discuss reasons not to abuse drugs or alcohol. Avoid scare tactics, as teenagers can see right through this. Emphasise how drug or alcohol use can affect things that are important to them like sports, relationships, grades, health, and appearance.

Consider messages in the media. Some TV programs, films, websites or songs can glamorise or trivialise drug or alcohol use. Talk to your teenager about what they see and hear and answer any questions they have.

There are many things you can do to help your children stay away from drugs and make good choices:

Talk with your children about drugs before they are teens.

Explain why taking drugs can hurt their health, their friends and family, and their future. Tell them you don't want them to take drugs. You can also share the websites found below. Repeat these messages during their adolescent years.

Text your teenager.

Send positive text messages to your teen. Or send a text after you have a conversation that reminds them of your talk. Tell them you are proud of them.

Be a part of their lives.

Spend time together. Even when times are hard, children can make it through things when they know that the adults in their life care about them. Give your child your full attention. Turn off your TV, smart phone, or computer, and really listen.

Know where your children are and what they're doing.

Keeping track of your children helps you protect them. It gives them fewer chances to get into drugs.

Set clear rules and enforce them fairly.

Children need rules they can count on. That is how they learn for themselves what is safe and what can get them in trouble. Explain why you are setting a rule so they understand why it matters.

Be a good example for your children.

You might not think so, but children look up to their parents. Show them how you get along with people and deal with stress. This can teach them how to do it as opposed to 'self-medicating'.

Be ready to discuss your own drug and alcohol use. Think about how you'll respond if your teenager asks about your own drug and alcohol use. If you chose not to use drugs, explain why. If you did use drugs, share what the experience taught you.

Make your home safe.

Know the people you have in the house. Try not to have people over who misuse drugs and alcohol. Keep track of medicines you have in the house.

Discuss ways to resist peer pressure

Brainstorm with your teenager about how to turn down offers of drugs or alcohol. Provide them with an easy "out." Think of excuses, such as "I can't drink/use drugs because my parents are really suspicious at the moment," or "I've got a football match/sporting event" "I can't get high because I have a doctor's appointment tomorrow, and they may need a urine sample." You could also consider setting up a discreet code your teenager can use in a text message or phone call to you when they are in an uncomfortable situation.

Even if you don't find direct evidence, it's important to always trust your gut — take action by talking with your child and seeking help if necessary.

How to Find Out if Your Child is Using Drugs or Alcohol

Use Your Nose. Have a real, face-to-face conversation when your son or daughter comes home after socialising with friends. If there has been drinking or smoking, the smell will be on their breath, on clothing and in their hair.

Look Them in the Eyes. When your child gets home after going out with their friends, take a close look. Pay attention to their eyes. Eyes will be red and heavy-lidded, with constricted pupils if they've used cannabis. Pupils will be dilated, and he or she may have difficulty focusing if they've been drinking. In addition, red, flushed colour to the face and cheeks can also be a sign of drinking.

Watch for Mood Changes. How does your teenager act after a night out with friends? Are they loud and obnoxious, or laughing hysterically at nothing? Unusually clumsy to the point of stumbling into furniture and walls, tripping over their own feet and knocking things over? Sullen, withdrawn, and unusually tired and slack-eyed for the hour of night? Do they look queasy and stumble into the bathroom? These are all signs that they could have been drinking, using cannabis or other drugs.

Should You Search Their Room?

The limits you set with your child do not stop at their bedroom door. If you notice concerning changes in behaviour, unusual odours wafting from their room (like cannabis

or cigarette smoke), smells to mask other smells like incense or air fresheners, or other warning signs, it's important to find out what's going on behind that "KEEP OUT" sign. One note of caution, however. Be prepared to explain your reasons for a search, whether or not you decide to tell them about it beforehand. You can let them know it's out of concern for their health and safety. If you discover that your child is not drinking or doing drugs, this could be a good time to find out if there's something else that may need to addressed. Teenagers come up with some crafty places to conceal alcohol, drugs, and drug paraphernalia. Some possible hiding spots include:

- Dresser drawers beneath or between clothes
- Desk drawers
- CD/DVD/cases
- Small boxes jewelry, pencil, etc.
- Backpacks/duffle bags
- Under a bed
- In a plant, buried in the dirt
- In between books on a bookshelf
- Inside books with pages cut out
- Makeup cases inside fake lipstick tubes or compacts
- Under a loose plank in floor boards
- Inside over-the-counter medicine containers
- Inside empty sweet bags such as M&Ms or Skittles

Don't overlook your teenager's phone or other digital devices. Do you recognise their frequent contacts? Do recent messages or social media posts hint at drug use or contradict what they've told you? If your search turns up evidence of drug use, prepare for the conversation ahead and do not be deterred by the argument of invaded privacy. Stand by your decision to search and the limits you've set.

Further Information

How to talk to your child about drugs: https://www.nhs.uk/live-well/healthy-body/talking-about-drugs-with-your-child/

Warning Signs: https://drugfree.org/article/look-for-warning-signs/

Dr Aric Sigman PSHE talks for pupils (all year groups), parents, conferences

- Preventing Mental Health Problems in Children
- Lessons Learned from Lockdown: how to cope better
- Managing Screen Time/Preventing Screen Dependency
- Alcohol: preventing problems/unrecognised effects

- 'Soft' Drugs?: Cannabis, Vaping, Ecstasy: mental health, addiction & school grades
- Body Image and Pressures of Physical Appearance
- Sex and Relationships ... for Boys
- Understanding *Boys*, Sex and Relationships (for girl's/co-ed groups)
- Pornography and Boys
- Parenting the Demanding Generation
- Addictions: understanding and preventing (drugs, nicotine, alcohol, screen, gaming, gambling)
- Leaving School ... and Beyond
- Movement the next step. Benefits of physical movement on school grades, mental health, brain development, prevention of obesity, cancers and a reduction in the risk for 'all-cause mortality'.

Further information on school or conference talks: <u>www.aricsigman.com</u> E: <u>aric@aricsigman.com</u>

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