

# **DRUGS AND SOLVENTS**

**A GUIDE FOR PARENTS**

# Contents

What's the situation in Northern Ireland? .....	2
Why do young people try drugs? .....	3
What are the risks of taking illegal drugs? .....	4
What are the signs of drug taking? .....	6
What drugs are around and what do they look like? .....	7
Other drugs in brief .....	18
What can I do as a parent? .....	19
Where can I get help? .....	21
What should I do in an emergency? .....	23
Balancing it all out .....	24

# What's the situation in Northern Ireland?

In Northern Ireland the most commonly used illegal drugs are cannabis, cocaine, Ecstasy, amphetamine sulphate (speed), magic mushrooms and LSD. Young people may also misuse solvents or 'legal highs' (drugs which are legal to sell but not legal to sell for human consumption).

## *How many young people in Northern Ireland are taking illegal drugs?*

In 2007, a Northern Ireland survey of pupils between years 8 and 12 found that around one in five (19%) had ever used drugs or solvents. This represents a small reduction from 2003 when almost one in four (23%) said they had ever tried drugs or solvents.

However, this does not mean that they have necessarily used drugs or solvents over a long period of time nor that they regularly use drugs/solvents or will do so in the future.

## *What about alcohol and tobacco?*

Alcohol and tobacco are still the most popular drugs for young people in Northern Ireland.

# Why do young people try drugs?

## *The first time*

Young people may experiment with drugs for some of the following reasons:

- just to try it;
- to look and feel grown-up;
- to take a risk;
- because friends use it;
- because it's offered by friends;
- after a few drinks;
- to show off.

Many parents will remember the reasons why they first tried a cigarette or a drink when they were a teenager. These reasons are as true today as they were then. However, they now apply to illegal drugs as well.

## *Why do some young people carry on taking drugs?*

There are many reasons why some young people carry on taking drugs but some of the common ones are: enjoyment, escapism, inability to cope with everyday life, lack of success and negative feelings about themselves.

Only some young people in Northern Ireland take illegal drugs on a regular basis and a few of these will become dependent on them. However, there are problems, risks and dangers involved with ALL types of drug use, and therefore it is important to talk to your children about drugs and solvents.

# What are the risks of taking illegal drugs?

## *Physical risks*

These depend on the type and strength of the drug, the amount taken, where and how it's taken and the person taking it. There are a range of effects including a change in heart rate and blood pressure, exhaustion, collapse, and in a few cases, death.

Physical dependence occurs when the body actually wants the drug. If the drug is not provided, withdrawal symptoms will occur, eg stomach cramps, sweating, sleeplessness or anxiety.

## *Psychological risks*

Effects include a reduction in self-confidence, feelings of inability to cope, anxiety and panic. These feelings can be quite mild or extremely frightening and can continue for several days after use. In some cases lasting psychological damage takes place, especially if there are any underlying mental health problems.

Psychological dependence occurs when a person has a strong need to keep taking the drug in order to cope with life.

## *Social risks*

These include difficulties with family and friends and poor performance and difficulties at school, college or work. Drug taking can lead to involvement in anti-social activities, such as 'joy-riding'. Users may also make unwise decisions concerning, eg their sexual behaviour.

## *Legal risks*

These include being convicted of a drugs offence. Young people may also be convicted of being involved in petty crime to fund their drug taking. The resulting criminal record can affect a young person's life in many ways, including future job prospects and travel to certain countries.

## *Misuse of Drugs Act (1971)*

The possession and supplying of a drug (including giving to friends), which is described as illegal by the Misuse of Drugs Act (1971), is against the law and carries with it the definite risk of fines and/or imprisonment.

Nobody below the age of 10 in Northern Ireland can be convicted of a criminal offence. Above this age, it depends on the drugs the young person is taking or supplying. Under the Drugs Act 2005 increased sentences are available to the Courts if dealers are arrested selling drugs close to school premises.

Maximum sentences for offending against the Misuse of Drugs Act are severe.

Regular offenders, dealers and smugglers are targeted and may have all their property and goods taken off them and be imprisoned for many years. First offenders who have a drug for their own use may receive only a caution, but there may be more serious penalties.

In Northern Ireland, young people under 17 years of age are usually dealt with by a Juvenile Court. This court has powers to fine a parent or child, or to send the offender to a variety of institutions as an alternative to being sent to prison.

## *As a parent, what are my legal responsibilities?*

Most parents are aware that their sons or daughters might be fined or imprisoned for possessing or supplying drugs. However, many don't realise that it is possible to break the law even without touching drugs.

If a parent knows that their son or daughter is sharing illegal drugs with a friend in their house, but does nothing to stop it, then that parent has committed an offence.

Further, in Northern Ireland, it is an offence to fail, without reasonable excuse, to report to the PSNI the commission of some serious criminal offences, including certain drug offences.

# What are the signs of drug taking?

**IT IS** very difficult to tell when a young person first tries drugs or only takes them occasionally. Many of the ‘signs’ are just like the normal signs of growing up, eg being moody or distant. It’s important that you don’t jump to the wrong conclusions but look for some of the indicators below.

## *Possible indicators:*

- sudden and regular changes of mood;
- loss of appetite;
- gradual loss of interest in school, hobbies, sport, friends;
- increased evidence of lying or other secretive behaviour;
- money or other objects around the house ‘going missing’ (including the young person’s formerly ‘treasured possessions’);
- unusually tired;
- unable to sleep at night;
- sudden appearance of new ‘friends’;
- bouts of talkative, excitable and overactive behaviour.

It’s unlikely that you will find any actual drugs, but you may come across possible evidence of drug use. These include:

- cigarette papers;
- ‘wraps’ (square folds of paper which may have contained powder);
- cling film, foil and small plastic bags used to package small quantities of drugs;
- syringes.

# What drugs are around and what do they look like?

*There are four basic types of drugs:*

**Depressants** These drugs slow down the brain and body systems. Examples are alcohol, tranquillisers and solvents.

**Hallucinogens** These drugs can alter the way a person sees things, such as light and colour, and can cause hallucinations. Examples are LSD and magic mushrooms.

**Stimulants** These drugs speed up or stimulate the brain or body systems. Examples are amphetamine sulphate (speed), cocaine, caffeine and 'poppers'.

**Opiates** These drugs reduce pain. Examples are heroin and morphine.

Some illegal drugs are a mixture of types. For instance, Ecstasy combines hallucinogenic and stimulant effects while cannabis combines hallucinogenic and depressant effects.

Some slang names are included in this section, but these can be very localised and can change quickly. There is a danger that by using these terms with young people, parents can come across as completely out of touch or patronising.

Although the real risks of drug taking have been pointed out, it is possible to use drugs in a way that does not lead to immediate health problems or dependence, although these can't be ruled out. However, the only safe use of drugs is non-use.

Alcohol and tobacco are not included in the following section but they are still the most popular drugs for young people. They can cause serious health problems if taken on a regular basis over a long period of time and binge drinking is particularly risky for young people.

## CANNABIS

**Slang names:** blow, dope, hash, wacky-backy, pot, joint, spliff, five-deal, smoke, skunk.

**Description** Cannabis is the most commonly used illegal drug in Northern Ireland. It is usually smoked in the form of resin (hash), a brown solid mass which is crumbled and mixed with tobacco and made into a type of cigarette called a 'joint'.



**Effects** Not everyone gets much effect from cannabis, and some novice users feel sick whilst others may feel anxious and guilty. Some people get mild hallucinations. The most common effects are relaxation, talkativeness and a heightened perception of music and colour.

**Dangers** One of the main dangers of cannabis is the state of intoxication it creates, eg like being drunk. The person may not be able to drive, cross the road or operate machinery safely. It may affect short-term memory and this could cause problems with school or college work. Cannabis use can worsen the symptoms of asthma. Heavy use of cannabis over a period of years may cause respiratory diseases like bronchitis and lung cancer. Regular use during pregnancy increases the risk of premature birth. Cannabis use has been associated with poor mental health and its use may increase the risk of developing mental illness in some users.

**Dependence** People can become psychologically dependent on cannabis for enjoyment, or coping with life. Users report symptoms of withdrawal which include decreased appetite, weight loss, lethargy, irritability, mood changes, muscle pain, sweating and insomnia.

**Other points** There is nothing 'in' cannabis which causes people to try other drugs, yet people who smoke cannabis are more likely to experiment with other illegal drugs.

# ECSTASY

**Slang names:** E.

**Description** Ecstasy is a drug mainly associated with the dance and all-night club scene.

Ecstasy is usually available as a white, brown, pink or yellow tablet, or occasionally coloured capsule, but can also come in powder or crystal form. Street names constantly change according to the impressions/logos used on the tablets.



**Effects** The effects begin after about 20 minutes and can last several hours. The drug can have a calming effect with heightened perceptions of colour and sound. This is accompanied by sweating, loss of appetite, rise in heart rate and blood pressure and a stiffness in arms, legs and jaws. It also has stimulant properties. Coordination may be affected making it dangerous to drive or operate machinery under the influence of Ecstasy.

At higher or repeated doses, all these effects may be experienced more acutely.

For several days after taking the drug effects such as muscle pain, fatigue and low mood can occur. This feeling can last up to between 3 and 4 days and is known as a comedown.

**Dangers** Because the drug acts like a stimulant it is especially dangerous for people with heart conditions, high blood pressure or subject to epileptic fits or any kind of mental illness.

Frequent high doses have led to some users having feelings of anxiety, panic, confusion, and visual and auditory hallucinations.

There have been a number of deaths associated with Ecstasy in the United Kingdom. It would appear that the young people concerned may have been particularly susceptible to the stimulant effects of Ecstasy. There may also be a link between the susceptibility and attendance at dance venues where there is the risk of people becoming over-heated and dehydrated. It is possible that Ecstasy increases the effects of heat-stroke.

Deaths from Ecstasy use have also been attributed to people drinking too much water in attempting to counteract the dehydrating effect of the drug. Drinking too much water in one go is dangerous. Instead, sipping up to a pint of water over the course of an hour may reduce dehydration. Research into the effects of ecstasy use on the brain is ongoing. However, studies suggest that ecstasy may affect brain function, impairing memory or increasing symptoms of depression, anxiety and impulsivity.

**Dependence** Some users may become psychologically dependent. There is no physical dependence.

**Other points** This information about Ecstasy is based on the assumption that what is sold as Ecstasy, is in fact Ecstasy. However, the Trades Description Act does not cover illegal drugs, and some Ecstasy tablets contain other substances - sometimes LSD and amphetamine sulphate, or household cleaners, dog worming ingredients and worse. Obviously in these cases the risks of physical and psychological harm increase.

# AMPHETAMINE SULPHATE

**Slang names:** speed, whizz, uppers.

**Description** Amphetamine sulphate is a stimulant. It is mainly found as a white or off-white powder sold in capsules or 'wraps' and is usually swallowed. It is often 'cut' (mixed) with other substances that look like the drug.



**Effects** One dose can last several hours.

Amphetamine sulphate stimulates the nervous system, puts off tiredness for a time and makes the person feel alert and confident. Users find quickly they need to take more of the drug to get the same effect. Unpleasant effects may include excessive mood swings, panic and confusion. After use people usually feel extremely tired, hungry and down.

**Dangers** Regular heavy use can increase the severity of the bad effects and can lead to feelings of paranoia and hallucinations in extreme cases. After long-term use the user may feel tired, hungry, depressed or even suicidal in the period after stopping using the drug and will continue to feel unwell for some time.

As a powerful stimulant that increases heart and breathing rates, its use places strain on the heart, which is dangerous for people with a heart condition. Its use can lead to anxiety, depression, irritability, aggression and paranoid feelings.

**Dependence** Regular use of the drug, even small amounts, can lead to a marked psychological dependence due to the feelings of wellbeing induced by the drug. Although there is not strict physical dependence associated with amphetamine sulphate, users try to delay the onset of tiredness and general feelings of being down by taking more of the drug.

## LSD

**Slang names:** acid, acid-tabs, tabs, trips.

**Description** LSD is manufactured illegally in 'factories' in the UK and Europe by impregnating minute quantities of the drug onto small squares of blotting paper. These are then chewed or dissolved in the mouth. The squares carry attractive designs, eg patterns, symbols, and pictures of cartoon characters or film stars. Often LSD is sold using the designs as 'trade' names. The designs change quite quickly and so a list of current names is soon out of date.



**Effects** LSD is an extremely powerful hallucinogen. It produces very profound psychological effects which depend on the amount taken and the feelings of the person at the time. The experience, or 'trip' which can last for up to 12 hours can vary from visions of joy and beauty to walking nightmares. Perceptions of the world become distorted. It can take a while to fully recover from the experience. There are virtually no physical effects.

**Dangers** The main danger of any hallucinogenic drug is that the experience may be damaging to someone with mental illness, or worse, may trigger a psychotic response in somebody whose condition is undiagnosed. People from a family with a history of mental illness are at particular risk if they take this drug.

Less seriously, inexperienced users can feel confused and disorientated for some time after taking the drug and may need reassurance that they are not going crazy. The risk of a 'bad trip' is increased if the user is already feeling anxious or distressed. Users may also experience something called a 'flashback' - where the 'trip' is relived without actually taking the drug. This can happen many years later.

**Dependence** A small minority of those who have used LSD become psychologically dependent. There is no physical dependence.

## MAGIC MUSHROOMS

**Slang names** mussels, mushies.

**Description** Magic mushrooms are those which contain the hallucinogenic drugs psilocin or psilocybin. These drugs are powerful hallucinogens which produce effects similar to LSD. Although there are around 12 different varieties of magic mushrooms that grow wild in the UK, the one most commonly referred to as a magic mushroom is the Liberty Cap, which grows wild in many parts of Northern Ireland.



In the past, only dried and prepared magic mushrooms were illegal. The current law, which came into force on 18 July 2005, means that raw or fresh magic mushrooms, as well as those that are prepared (eg dried or stewed) are now classified as class A drugs.

**Effects** The effects depend on how many are taken. Small amounts can cause excitement and euphoria, larger amounts can lead to apparent distortions of shape and colour and hallucinations. There may also be feelings of nausea, dizziness, vomiting, diarrhoea and stomach pains.

**Dangers** These are the same as LSD. A specific danger with magic mushrooms is picking the wrong ones - some species are highly poisonous.

**Dependence** As with LSD, a small minority of users have become psychologically dependent.

## HEROIN

**Slang names:** smack, H, brown, gear, skag.

**Description** In Northern Ireland heroin is most commonly sold as a brown powder, although other forms, including grey, pink, and white are available. Compared to other illicit drugs, Heroin is not widely used in Northern Ireland. Among those seeking treatment for heroin use, the average age for first use of the drug is 22.



**Effects** Regular users say it produces a sense of warmth and pleasant drowsiness. However, for the first-time user there can be immediate and unpleasant side effects such as nausea and vomiting.

**Dangers** Regular prolonged use can cause poor health due to an inadequate diet, constipation and loss of periods for women. There are the obvious health risks involved with injecting drug use, eg HIV infection. Excessive doses can lead to coma and death from respiratory failure. Death may also occur because the user cannot always be sure of the mix and strength of the heroin. There have been deaths associated with heroin use in Northern Ireland.

**Dependence** There is a high risk of both physical and psychological dependence.

## COCAINE AND CRACK

**Slang names:** cocaine, coke, charlie, white.

**Description** Cocaine (right) is a stimulant drug. It is a white powder which is usually sniffed. Crack, (below) is a form of cocaine that can be smoked. It looks like a small crystal about the size of a raisin.

The effect of a single dose of cocaine lasts 20-30 minutes. With repeated use, more of the drug is required to produce the same effect.



Each small crystal of crack lasts about 10-12 minutes.



**Effects** Like amphetamine sulphate, cocaine and crack stimulate the nervous system and make the person feel alert and confident. Unpleasant effects include exhaustion, nausea and being unable to relax or sleep.

**Dangers** The longer term consequences of taking either cocaine or crack include shortness of breath, chest pains, feelings of paranoia and damage to the nose.

**Dependence** There is a very high risk of psychological dependence with both drugs. There is no strict physical dependency.

## SOLVENTS

**Description** The range of products of this type is extensive and widely available, it includes:

- aerosol sprays (like hair spray or pain relieving sprays);
- butane gas (used as cigarette fuel);
- solvent-based glues;
- dry-cleaning fluids;
- paint and paint thinners;
- correcting fluids;
- petrol.



**Effects** Solvent sniffing is not illegal. However, it is against the law to supply or offer to supply volatile substances to anyone under the age of 18, knowing or suspecting that the product will be misused. It is also an offence to supply gas lighter refills to anyone under the age of 18. The effects of using solvents are like that of alcohol. Solvents act as a depressant and cause intoxication and occasionally hallucinations.

**Dangers** It is especially dangerous to place a plastic bag completely over the head, spray aerosol or cigarette lighter fuels directly into the mouth, have lighted cigarettes around when misusing solvents or get intoxicated in dangerous places, for example near water or alone. Solvents can also cause sudden death. They can make the heart more sensitive to the effects of adrenaline causing it to beat irregularly and sometimes stop. This is more likely if misusers are excited or exert themselves. For this reason anyone found with solvents should never be chased. It can occur with first-timers as well as regular users. Long-term regular use may also cause problems with the kidneys, bone marrow and liver.

**Dependence** Misusing solvents carries a risk of psychological dependence. Although there would appear to be no physical dependence with solvents, long-term users sometimes display mild withdrawal symptoms.

## LEGAL HIGHS

**What is a legal high?** A legal high is a substance that is not controlled under the Misuse of Drugs Act and is therefore legal to possess. However, most of the substances are regulated by the Medicines Act, which makes it illegal to sell, supply or advertise them for human consumption. The substances are generally bought from 'head shops' or from internet sites who may claim they sell them for use as bath salts, incense or plant food.



**Synthetic drugs (also called designer drugs)** These are drugs created by modifying the chemical structure of existing drugs or by creating a new drug that can produce effects similar to illicit drugs but which can be sold legally. The health risks will differ according to the drug.

Because many of these drugs are so new, little is known about them. As with illegal drugs, because the production is not regulated, what is sold under a given name one week may turn out to have a different chemical make-up the next week, so the effects on the body are unpredictable. Also, people who use legal highs are likely to be mixing them with alcohol, illicit drugs or prescription drugs, and we don't know the effects on the body of mixing these substances.

New drugs are continually being produced - often to keep one step ahead of legislation ie as one substance is made illegal, there may already be a number of 'modified' versions ready to take its place.

**Plant-based legal highs** These include the leaves of plants which can be smoked or chewed. However, they are not necessarily safe. Also, they could also be treated with dangerous chemicals which have potentially serious side effects.

For more information on specific legal highs and their health risks, go to [www.talktofrank.com](http://www.talktofrank.com)

# Other drugs in brief

## *Prescription drugs*

The most commonly prescribed tranquillisers in Northern Ireland belong to a group of drugs known as benzodiazepines - these include temazepam and diazepam. They may be initially prescribed for a few weeks to help cope with a crisis. However, it is easy to become physically and psychologically dependent upon them and people who try to stop may suffer very unpleasant withdrawal symptoms. These drugs are commonly found in many medicine cabinets and young people have been known to experiment with them.

## *Ketamine*

Ketamine is a powerful anaesthetic drug, classified as illegal under the Misuse of Drugs Act (1971). Anecdotal evidence suggests that a small number of people in Northern Ireland use ketamine recreationally.

## *Anabolic Steroids*

These are misused by some athletes and bodybuilders in order to increase muscle size, and, because they are derived from the male hormone testosterone, they also stimulate aggression. Some athletes claim steroids help them to train harder and recover more quickly from injury.

There are many potential problems associated with these drugs:

- in young people, use of these drugs can restrict growth;
- in men, there may be temporary side effects on the reproductive system, such as reduced sex drive and lower sperm count;
- in women, ‘masculine’ side effects such as deeper voice and smaller breasts may not be reversible when drug use ceases;
- if injected, using shared equipment, there is the obvious risk of infection;
- although rare, steroids may cause death from liver cancer.

These drugs may circulate in some gyms and health clubs. At present it is not illegal to possess them, but it is illegal to supply them to anyone under the age of 18.

# What can I do as a parent?

**PARENTS CAN** play a vital role in preventing harm to young people caused by drugs or solvents. You have a special relationship with your child.

All young people are at risk of taking drugs - being tempted to try is easy and resisting the temptations can be difficult. As a parent/guardian you can influence your children whether they try drugs or not. As a parent/guardian you can also help them if you find they are taking drugs.

Research in Northern Ireland has shown that young people believe their parents have a role in drug education, and that they want to know what their parents think about drugs.

## *As a parent/guardian you can:*

- Increase your knowledge about drugs and their effects. The information in this booklet is a good beginning but you might want to get more information. The organisations listed on pages 21-22 can provide specialist help. It is important to try and stay up-to-date, and further information on drugs is available online at [www.drugsalcohol.info](http://www.drugsalcohol.info)
- Talk to your child about drugs. It is important to present accurate information. You should make clear what your views are on taking drugs. Try to be consistent about how you present them.
- Keep up-to-date with your child's interests and friends - especially any new friends.
- Find out what your child's school/college/club is doing to tackle drug misuse. If there is a parent information meeting about drugs - go along.
- Stay alert to possible signs of drug taking. Some of the signs which may indicate that your child is involved with illicit drugs have been listed on page 6. As a parent you are in an excellent position to spot some of these signs.

### *If you suspect your child is taking drugs:*

- before you say anything, try to make sure you are not jumping to conclusions;
- then talk to them and share your concerns.

It may be your concerns are unfounded, but if you find your child is taking drugs:

- it is important to stay calm;
- stop and think before you do anything.

### *What can you do to help your child?*

It is important that you:

- have got your facts right;
- find out if their drug taking is a regular thing or a one-off ‘experiment’;
- keep talking and listening.

If it was a ‘one-off,’ you may need simply to talk to them. Be firm, consistent and caring. Disapprove of their actions - not them. Give them some reasons for not taking drugs.

For example:

- that drug taking is illegal and could lead to trouble with the police and affect their chances at school and work;
- that it could affect their health now and in the future.

If you feel it is more than a ‘one-off’ situation, and that you need help, there are a number of sources of help and support.

# Where can I get help?

**IF YOU** are concerned that your son or daughter may be taking drugs, get in touch with your GP or the following services.

In addition, specialist services exist within Child and Adolescent Mental Health Services (CAMHS) for young people who have both mental health and drug/alcohol problems. Where appropriate, your GP can make a referral.

There are four Drugs and Alcohol Coordination Teams (DACTs) covering Northern Ireland, based on pre-existing Health and Social Services Board areas. Each one has a Drugs and Alcohol Coordinator who may be able to give you more information about organisations and events in your local area. They can be contacted at the numbers below:

Eastern DACT: 028 9031 1611

Northern DACT: 028 2531 1111

Southern DACT: 028 3741 4557

Western DACT: 028 8225 3950

A list of organisations in Northern Ireland that offer support, counselling and other drug services may be accessed online at [www.drugsalcohol.info](http://www.drugsalcohol.info). You can use this list to search for help in your local area. Examples of services working with young drug users and their families include:

## **DAISY (Drug and Alcohol Intervention Service for Youth)**

30-34 Hill Street

7a Dublin Road

Belfast, BT1 2LB

Omagh, BT78 1ES

Tel: 028 9043 5815

Tel: 028 8224 1525

23 Bridge Street

29A Strand Road

Lisburn, BT28 1XZ

Londonderry, BT48 7BL

Tel: 028 9260 4422

Tel: 028 7137 1162

**FASA (Forum for Action on Substance Abuse/Suicide Awareness)**  
178-180 Shankill Road  
Belfast, BT13 2BH  
Tel: 028 9080 3040

**Dunlewey Substance Advice Centre (NI Ltd)**  
80 Broughshane Street  
Ballymena, BT43 6ED  
Tel: 028 2565 2105

**Opportunity Youth - CHILL**  
21a Railway Street (2nd Floor)  
Armagh,  
BT61 7HP  
Tel: 028 3752 5481

Mount Zion House  
53 Edward Street  
Lurgan, BT66 6DB  
Tel: 028 3832 2714

For some parents it may be useful to discuss their concerns with teachers, youth workers or probation officers.

There are an increasing number of community organisations and programmes dealing with all the issues involved in drug misuse. They may well advertise their services locally, and your local Drugs and Alcohol Coordinator may also have details.

In addition, information on drugs and local drug services, advice and help can be obtained from the National Drugs Helpline (Frank), which offers a free, 24-hour confidential service. Tel: 0800 77 66 00.

# What should I do in an emergency?

**IF YOU** find a young person drowsy or unconscious it's important that you know what to do. It could save their life.

*You should:*



1. Make sure they've got fresh air.
2. Turn them on their side and try not to leave them alone (this is important because if they are sick they may inhale their own vomit).
3. Dial 999 and ask for an ambulance.
4. If you find any powders, tablets or anything else that may suggest drug taking - give them to the ambulance personnel.

# Balancing it all out

**BEING A** parent has never been easy - at the same time growing up isn't always easy either. There are many conflicting pressures on young people, eg to be an individual and yet to be 'one of the gang'. They have a need to be independent and make their own decisions.

As a parent it is important to understand these pressures, which can sometimes become reasons for young people experimenting with, and perhaps regularly using drugs.

The care, support and understanding of parents at this time is especially vital.

If you suspect or are concerned that your son or daughter is using illegal drugs do not delay in getting help or advice.

This booklet contains information and text formerly in the booklets *Drugs - what every parent should know* and *Drugs and solvents - you and your child*.



This booklet is for all parents and adults in Northern Ireland who want straightforward facts about drug use among young people.

First printed 1994. Reprinted 1994, 1995.

Revised reprint 1996, 1998. New edition 1998. Revised reprint 2000, 2003, 2005, 2006, 2010.



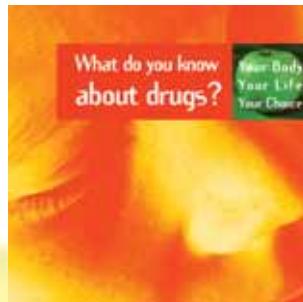
If you have any worries or questions about drugs,  
there is someone there to talk to you.

For information and advice,  
call the National Drugs Helpline (Frank)  
free and in confidence on

0800 77 66 00

Other booklets that may be helpful when talking to your child about drugs include:

*What do you know about drugs?*  
suitable for young people aged 10 to 13 years old.



*Your body, your life, your choice*  
suitable for young people aged 14 years and older.



You have a responsibility to do something and you can make a difference.  
So, talk to your child - before someone else does.



Public Health Agency, Ormeau Avenue Unit,  
18 Ormeau Avenue, Belfast BT2 8HS.  
Tel: 028 9031 1611. Textphone/Text Relay: 18001 028 9031 1611.  
[www.publichealth.hscni.net](http://www.publichealth.hscni.net)