

EMPLOYEE COUNSELING SERVICES

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A Division of Family Counseling Services of Greater Miami, Inc.

Every Parent's Nightmare

by Cherie Ann Vick, MSW, CEAP

Laura was in the middle of a strategic planning meeting at the consumer finance company where she worked when her secretary interrupted with an urgent message from her daughter's school. "They want you to come down there right away. Your daughter's been removed from classes pending your meeting with the school counselor. I told them you were tied up, but they insisted on giving you this message."

While Laura raced to the school with her heart pounding she thought about the day six months earlier when she met Tracy's flight from Phoenix. Her daughter looked so grown up in her French braid, make-up and jacketed dress that Laura barely recognized her 17-year-old offspring as Tracy emerged from the gateway. While they hadn't seen each other in the three years since she moved to Phoenix with Laura's ex-husband, they had kept in touch by phone and mail. Finally her daughter was coming back to finish her senior year in high school with her old friends.

A very tense Laura circled the school parking lot and unable to find a spot, left the car double-parked as she headed straight for the principal's office. The receptionist showed her to the counselor's office. "Sorry we have to meet under these circumstances, Mrs. Miller", the counselor said shaking her hand. "We discovered marijuana and a couple of what look like Quaaludes in Tracy's locker." The counselor explained that while normally the school would expel Tracy, they were willing to consider alternatives if she and the family were willing to be counseled.

Laura was too shocked to know whether she was mostly embarrassed, angry or terrified at the prospect of her daughter having a drug problem. After the meeting Laura took her anxious and remorseful daughter home. They barely spoke for the five mile journey.

The next day she called the EAP for an appointment "Under the circumstances, we need to see you and your

daughter, so how about next Saturday?", the intake worker suggested. In the counselor's office Tracy admitted using marijuana occasionally, but said she didn't know how the pills got in her locker. She seemed genuinely remorseful about the trouble she had brought the family, and willing to participate in treatment.

Tracy told the counselor how she had missed her mom and had wanted to return to Miami, but now that she was here she was having a difficult time adjusting to the changes. Her mother seemed different now--more rigid and demanding around the house. Many of Tracy's former friends had changed or moved away. At home she seemed in constant conflict with her thirteen-year-old sister. Her growing sense of isolation led her to experiment with marijuana.

The counselor suggested they start by trying to improve things at home. First the counselor met with Tracy and her sister. In her effort to find her place in the family again, Tracy had been acting like a second mother to Ana and Ana felt resentful and threatened with the loss of attention from their mother. The counselor taught the girls how communicate their mutual frustrations without blowing up. Then the counselor met with Tracy and her mother. Like many single parents, Laura was overextended between work and home, and had become more demanding in a effort to stay "in control" while acting as both mother and father to her children.

By listening to each other's fears and frustrations, Tracy and her mother were able to negotiate a new understanding. Tracy would take greater care to help her mother with meal preparation and other household chores; Laura would take more time on the weekends to relax and to participate in at least one family activity, a movie, a picnic, a trip to the museum. Laura would also set aside some time each month to do something special with Tracy-like have brunch-where they could reestablish the more intimate quality their relationship had years ago.

"Unfortunately we don't have crystal balls to predict which of our kids will develop a drug problem. At the first sign of a problem, take appropriate action to prevent the problem from worsening."

Helen Schuster, L.C.S.W.
Family Counseling Services

Incidence of substance abuse among teens

Alcohol is the drug of choice; 4.6 million teenagers have a drinking problem, and **alcohol related accidents are the leading cause of death** among young people 15-24 years of age.

Using alcohol at an early age is more likely to lead to use of other drugs or problems with the law. Also, because young people weigh less than adults, their **alcohol consumption is more likely to be toxic.**

Marijuana use is on the rise again, and it is a **gateway drug to crack, LSD and heroin.** The Wall Street Journal reported that 30% of high school seniors said they used pot in the last year; 13% of eighth graders used it. The marijuana being sold today is **three times the strength** of the marijuana consumed in the 70's.

Teens start young. Recent research conducted locally by the University of Miami showed that most students start **experimenting in the eighth and ninth grades.** By ninth grade, among white non-Hispanic students, 75% had tried alcohol, 46% smoked cigarettes, 22% smoked marijuana, and 20% used other drugs. Percentages among Hispanic students were slightly lower, and among black students significantly lower. However, black students catch up to white students in high school.

Keys to prevention

Most research confirms that the root causes of substance abuse are imbedded first in the quality of relationships in the family unit, and second in the experiences young people have in school and their community.

Talk to your children about the dangers of substance abuse. Don't preach, but set a good example. Use opportunities such as movies or TV shows to discuss the real life consequences of using drugs-illness, accidents, trouble with the law, etc. Encourage your children to bring up their own concerns.

Limit opportunities for substance abuse. Try to structure your children's after school activities so that they are engaged in something stimulating, under the supervision of an adult. If this is not possible, talk with your children about your expectations of their after school activities.

When your children attend parties or other activities outside the home, talk with the adult chaperon to make sure there is a policy of no drugs, and that the policy will be enforced. When sponsoring events in your home, make sure you are sufficiently visible and aware of what is going on.

Help your children cope with peer pressure to use drugs. Show your understanding of how intense this pressure is, and help your child by role playing situations and responses to offers of drugs. Some responses may include: "There's something important I have to do in a little while", "I made a deal with myself not to do drugs", or "I'm allergic." Teach your child to value his/her own individuality and the right to choose to be drug free.

Most important maintain a close, loving relationship with your teen. Set standards and rules, but in a loving framework that communicates, "I'm doing this because I care." Make the time to share activities with your child.

Some signs of a problem

The following could be indicators of a problem: sleeping at unusual times, poor grades, extreme moodiness or aggressiveness, changes in peer group, carelessness about appearance, frequent use of eye drops or breath mints. Also look for missing cigarettes, beer or liquor that seems to be watered down or going too fast

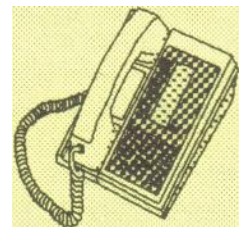
Resources

Informed Families, located at 9350 S. Dadeland Blvd., has free literature and posters for parents concerned with prevention. One of the simplest is a bookmark with ten ways to say "no" to drugs. They also have a library of books and videos which they will lend. They offer programs and guidance for families who want to raise their children drug free. Call 670-4886 for more information.

Your Employee Assistance Program (EAP) offers family counseling for substance abuse problems.

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