



# The Progression of Alcohol & Drug Abuse in Adolescents

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I. EXPERIMENTATION	II. USE	III. ABUSE	IV. DEPENDENCY
<p><b>WHY?</b></p> <ul style="list-style-type: none"> <li>The motivation is often curiosity, to have fun, for thrills, to impress friends, as a response to peer pressure or a dare often misinterpreted as a sign of maturity.</li> </ul> <p><b>WHAT?</b></p> <ul style="list-style-type: none"> <li>Substance use range from cigarettes, beer and marijuana to inhalants such as glue or aerosols.</li> </ul> <p><b>FREQUENCY</b></p> <ul style="list-style-type: none"> <li>Use is occasional and primarily social – on weekends, vacations or at parties.</li> </ul> <p><b>WARNING SIGNS</b></p> <ul style="list-style-type: none"> <li>There may be no discernable signs.</li> </ul> <p><b>BEHAVIOR PATTERNS</b></p> <ul style="list-style-type: none"> <li>This stage is characterized by low tolerance; the user gets high quickly. They may enjoy the mood swings that result.</li> <li>Experimentation with alcohol and drugs often begins as adolescence approaches. It frequently takes the form of stealing parent's beer or liquor and drinking it with friends. This stage is usually brief. It either ends or escalates as the young person learns how to gauge the effects of the substance and use it accordingly. Parents are usually not aware of this use or consider it harmless. They may dismiss this stage as normal adolescent behavior.</li> </ul> <p><b>WHAT TO DO</b></p> <ul style="list-style-type: none"> <li>Talk about the issues and consequences. Be open to discussion. Be alert to any signs of experimentation. Open communication, firmness and clear "house rules" are particularly beneficial in this early stage.</li> </ul> <p><b>For more information/resources on adolescent health, please visit the following websites</b></p>	<p><b>WHY?</b></p> <ul style="list-style-type: none"> <li>The goal at this stage is enjoyment of the effects and mood changes. Motivation may be social acceptance or social relief.</li> </ul> <p><b>WHAT?</b></p> <ul style="list-style-type: none"> <li>Marijuana use as well as drinking beer, wine or liquor may escalate. At this time, harder substances such as ecstasy, tranquilizers, mushrooms, LSD (acid) or cocaine may be introduced.</li> </ul> <p><b>FREQUENCY</b></p> <ul style="list-style-type: none"> <li>There will be increasing and planned use, often at weekend parties, possibly on week nights or at home.</li> </ul> <p><b>WARNING SIGNS</b></p> <ul style="list-style-type: none"> <li>Parents or teachers may notice a tendency to be withdrawn or mood swings if use is becoming a problem.</li> </ul> <p><b>BEHAVIOR PATTERNS</b></p> <ul style="list-style-type: none"> <li>The young person's friends may change to include both users and non-users. They often attend parties where alcohol is served. There may not be a noticeable change in behavior.</li> <li>At this stage, choice still plays a vital part in the decision to use or not to use. Intake is moderated or increased, depending on the desired effects. Parents feel helpless and uncertain how to respond.</li> </ul> <p><b>WHAT TO DO</b></p> <ul style="list-style-type: none"> <li>Parents need to seek support from professionals who are knowledgeable about adolescent alcohol and drug use. It is essential to set firm limits at this time.</li> </ul> <p><a href="http://www.abovetheinfluence.com">www.abovetheinfluence.com</a>  <a href="http://www.kidshealth.org/teen/">www.kidshealth.org/teen/</a>  <a href="http://www.phoenixhouse.org/NewYork/">www.phoenixhouse.org/NewYork/</a>  <a href="http://www.samhsa.gov/">www.samhsa.gov/</a>  <a href="http://www.timetotalk.org">www.timetotalk.org</a></p>	<p><b>WHY?</b></p> <ul style="list-style-type: none"> <li>The motivation most often cited is relief from increasing stress as well as recreation.</li> </ul> <p><b>WHAT?</b></p> <ul style="list-style-type: none"> <li>At this stage there are usually heavier substances that includes LSD (acid), angel dust, special K, glass (designer drugs are very popular), ecstasy and cocaine along with increasing use of alcohol, marijuana or pills.</li> </ul> <p><b>FREQUENCY</b></p> <ul style="list-style-type: none"> <li>Use may increase to daily, including before and/or after school. Use is often planned.</li> </ul> <p><b>WARNING SIGNS</b></p> <ul style="list-style-type: none"> <li>Not wanting to spend any time with the family. Obvious mood swings will be noticed, along with possible hostility. Sudden drops in grades are typical. Physical symptoms may include abnormal sleeping patterns, drowsiness, sore throats, red eyes or sniffing. Drug paraphernalia may be found.</li> </ul> <p><b>BEHAVIOR PATTERNS</b></p> <ul style="list-style-type: none"> <li>The adolescent's life now revolves around planning use which requires more money and contacts. Police problems may occur. There may be increasing apathy about school with frequent absences or suspensions. Psychological signs are low self-esteem, guilt feelings and unprovoked rages. Solitary use tends to increase. The teenager will try to avoid clean and sober friends and family members. Dishonesty and denial will also escalate. As dependency increases, the abuser is likely to be most high most of the time.</li> </ul> <p><b>WHAT TO DO</b></p> <ul style="list-style-type: none"> <li>Parents are often confused and angry and feel "powerless" as they watch this deterioration. Attempts at reasoning and setting limits are often thwarted. Seeking help from a drug/alcohol counselor is highly recommended. A professional facilitated intervention may be indicated at this stage.</li> </ul>	<p><b>WHY?</b></p> <ul style="list-style-type: none"> <li>Now the motivation is to escape reality; they may need the substance to feel "normal."</li> </ul> <p><b>WHAT?</b></p> <ul style="list-style-type: none"> <li>Any alcohol or drug of choice will be abused. This can include crack or cocaine. Snorting or intravenous use of heroin and other hard drugs continue to escalate.</li> </ul> <p><b>FREQUENCY</b></p> <ul style="list-style-type: none"> <li>Drug use becomes an obsession.</li> </ul> <p><b>WARNING SIGNS</b></p> <ul style="list-style-type: none"> <li>Deteriorating physical conditions can include loss of weight, memory lapses, slow motor activity or nervousness.</li> </ul> <p><b>BEHAVIOR PATTERNS</b></p> <ul style="list-style-type: none"> <li>Dependency is characterized by the continual need for alcohol and/or drugs, and the inability control use. The addict cannot distinguish between intoxicated and normal behavior. Blackouts are frequent. Aggression, rage, depression and paranoia may be noticed. Solitary use now becomes the norm, with alienation from family and friends. Abnormal sleeping patterns develop i.e. waking at 2:00pm or sleeping over ten to twelve hours at a time. School work will be ignored, resulting in falling grades and possible suspension or expulsion. Money difficulties may result in drug dealing, leading to legal consequences. Tolerance decreases and depression can result in possible suicide attempts and/or overdose.</li> </ul> <p><b>WHAT TO DO</b></p> <ul style="list-style-type: none"> <li>Parents and friends must not give up their efforts. Consultation with professionals knowledgeable in chemical dependency is necessary intervention and treatment is recommended at this stage. Talk about the issues and consequences. Be open to discussion. Be alert to any signs of experimentation. Open communication, firmness and clear "house rules" are particularly beneficial in this early stage.</li> </ul>