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Clearing up the myths about adolescent drug use:

Myth #1: *all adolescents experiment with drugs.* Statistics show that the rate of teenage drug use remains at a very high level. According to a yearly study conducted by the University of Michigan and the Institute for Social Research, illicit drug use among eighth, tenth and twelfth graders rose from 1991 through 1996. For twelfth and tenth graders, use continued to rise in 1997 with a slight decline in 1998. Use among eighth graders dropped gradually in 1997 and 1998 (Johnston, O'Malley and Bachman). However, that does not mean that **every** adolescent has tried or will try drugs. Part of the myth of experimentation is that drug use is a "**rite of passage**" for teens into adulthood. This implies that all adolescents will pass through it and that it is a part of growing up.

In addition, not all adolescents will pass through their drug use without negative consequences. Drug use is risky and unhealthy behavior. In today's society even "experimentation" can lead to car accidents, driving while under the influence, unplanned sexual activity, date rape, and sometimes death.

Moreover, the word "experimentation" can be misleading. When we get calls from parents seeking counseling for their adolescent we often hear the words, "I think my child has been experimenting with drugs." When asked how long the parent has been aware of the drug use, the reply can be anywhere from weeks to years. This implies that experimentation is a phase, when *experimentation is not a phase at all. In fact, it is a one-time event.*

Once intoxication has been experienced, the experiment is over. As with a scientific experiment, once the results have been achieved, the experiment is over. Once intoxication has occurred, the user knows what effects the chemical has on him and then decides (consciously or subconsciously) (contd...)

(contd.) if he likes it and will do it again.

Subsequent intoxication indicates that the adolescent has gone past experimentation to a different stage of use.

Myths #2 & #3: These myths go hand in hand: *drug use is a phase in an adolescent's life and I used drugs when I was a teenager and grew out of it. This is denial and enabling that both parents and professionals working with teens might subscribe to erroneously.* There are no guarantees that a person will grow out of it as you did. Chemical dependency is a biochemical genetic disease. A teenager might be genetically predisposed to chemical dependency even if you, as the parent or professional, never had the symptoms of dependency. There is no test available at this time to determine whether a person has the brain chemistry of dependency. Therefore, an adolescent who is putting chemicals into his body is playing Russian roulette. Some people will not become chemically dependent, while others will. Still others will have a life-long relationship with chemicals that will negatively affect many areas of their life. These people might never become addicted, but will abuse drugs. Are we willing to take the chance and just see if a teen drug user will just out grow it?

Myth #4 *It is just marijuana.* Marijuana is perceived by many as a harmless drug, because it is not believed to be addictive. However, marijuana is psychologically addictive for many people and can be physically addictive too. Psychological addiction is preoccupation that becomes an obsession. For example, there might be a preoccupation to use drugs on weekends. The marijuana user spends time and energy thinking about and planning for the weekend. As the illness develops, the preoccupation might include putting up drug-related posters or drawing pictures of marijuana leaves on backpacks or in notebooks.

(contd.) It is also argued, by some of the adolescents that we see, that marijuana is a “natural herb” that God put on this planet for our use, so it can’t be bad. However, there are also natural but deadly poisonous plants that we would not think of taking, nor would we allow any child to “experiment” with.

You or your friends might have smoked marijuana in your teenage years and remember the drug as being “not as bad as the others.” However, the marijuana that you or your friends might have smoked in the 1960's was approximately 0.5% THC. THC is the chemical in marijuana that produces intoxication. The marijuana smoked in the 1970's was between 1.5 and 3% THC. The marijuana that is being smoked today is most often a minimum of 10% THC. This is an entirely different drug than you or others smoked as teenagers. It is much more addictive than the marijuana of the 60's and 70's.

Physically, it is arguable that marijuana affects the brain more than any other drug: 1., THC sticks to brain cells while other drugs do not. THC thickens the brain cell walls by 400 times as evidenced in animal studies. 2., THC also binds to enzymes in the cell called Anandamide which then slows the firing of the cell. 3., THC use kills brain cell receptors. All of this adds up to mean that the cell is not firing as strong as it should and it is having to fire through a cell wall that is 400 times thicker than it should be. Then it is received by a faulty receptor. This all leads to problems with learning, mood, behaviors, motivation, etc.

Myth #5: adolescents are going to drink alcohol, so I want them to do it in my home under my supervision. At first glance this might seem to make sense. After further investigation, this is not the case. To allow them to drink in your home gives them the message that you think “it is only alcohol” and that it is okay. From their point of view, you are giving them permission to use one kind of drug, alcohol. This assumes that alcohol is the only drug they will use, that it is harmless, and that they won't use it outside of the house. We have found that this is not the case at all. Rarely do adolescents relate an accurate drug history that lists alcohol as the only drug ever used. Alcohol, of course, is a legal and accepted drug for **adults**. However, research shows that the earlier a person begins to drink, the more likely he is to become an alcoholic. When an adult starts to drink (with no other drug use involved) after age 21, it can take many years to develop the symptoms of alcoholism if the person is genetically predisposed. For teens, using during the high school years gives them a 35%-45% chance of developing alcoholism **even without a genetic predisposition**. The chemicals in the brain (neurotransmitters) do not know the difference between a “legal” drug, alcohol, and other illegal drugs.

Also, allowing your child to drink in your home assumes that he will not drink outside of your home. This is just not the case. If they like the taste or effect produced by the alcohol they have at home, why would they not want to achieve that same effect when they are out with their friends having fun? We encourage you to think of this in terms of another scenario. If you had a child who you knew was going to have sex anyway, would you give him a condom and allow him to have sex in your home? Would you consider that “good parenting”? Would you really believe he would not have sex anyplace else or that giving permission for a thirteen-year-old to have sex is acceptable? The same is true of alcohol. Drinking “under my roof and only under my roof” is a myth! Finally, alcohol is the drug that kills the most teens and young adults. Nicotine kills the most adults.

