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Dear Parents

I commend to you this publication from King’s College, which is intended to provide a resource for parents in dealing with some of the challenges and pitfalls which can confront adolescents.

We released the first version of this booklet in 2011, and we remain grateful for the support and advice of Dr. Michael Carr-Gregg in its production. It is based on a booklet originally prepared by Trinity Grammar School in Melbourne, with the advice of Dr. Carr-Gregg and others. I would also like to acknowledge the Headmaster of Trinity Grammar School, Mr Rick Tudor, for his leadership in this area, and for making this material available to other schools.

Here at King’s, our Deputy Headmaster Mr Robin Fleming, and Head of Counselling Mrs Francie Morris, have played the major part in assembling this material and I thank them for the good work on this project. We have updated some of the material for this latest version, and have also added some further sections, in line with the Positive Education programme that we have introduced in 2013.

In providing this material, we wish to promote the following:

- Both students and parents need to be fully informed about these matters, to assist in making the best choices and decisions.
- There needs to be some consistency in approach between school and parents, for example, in organising social events.
- There is an increasing body of research material available, some of which is included and/or referred to here, which can be very helpful in our response to these matters.
- Good parenting involves setting clear limits and boundaries on issues that relate to the health and safety of our children.

I would also encourage parents where appropriate to seek support from the King’s College staff, through our Housemasters, Chaplains, Counsellors and other staff. They are always willing to work with parents and provide appropriate support and advice. We are conscious that the best outcomes will be achieved through an effective school and home partnership.

We hope that you find this publication helpful.

Virtus Pollet

Bradley Fenner
Headmaster
INTRODUCTION

The first Parenting Guide was written with the generous support and knowledge gained in consultations with Dr. Michael Carr-Gregg and Associate Professor John Toumborou PhD. Please read this guide and use it as a catalyst for communication among yourselves and your children.

• In adolescence, the brain undergoes pronounced transformation and during this time it is particularly sensitive to alcohol and drug use. Research is becoming clearer that alcohol use at a young age is harmful and should be discouraged for at least the first three years of secondary school.

• Parents have a direct influence over their adolescent’s attitude and behaviour towards alcohol use. When parents are openly permissive towards adolescent alcohol use, adolescents tend to drink more. When parents show disapproval, adolescents are less likely to drink. Parents should make their views known and set clear rules with their adolescent about alcohol and drug use. Delaying the age alcohol is first used can reduce potential problems later in life. When older adolescents use alcohol it is important for parents to discuss harm minimisation strategies with them.

• Parenting is about encouraging adolescent resilience through understanding, and by instilling values and building trusting relationships with them.

• Despite parents’ best efforts, there will be times when the problems of your adolescents seem overwhelming to them. They may be experiencing a more serious problem. If they express a lack of self worth and are persistently sad for two weeks or longer, professional help should be sought. ¹

• Holding and attending safe parties is paramount to keeping adolescents safe. This guide gives parents some tips for safe parties. It is also important to know where your adolescent is, particularly after school, as this is a time when adolescents can be at great risk.

• PUTTING ASIDE TIME TO LISTEN TO THEM IS AN IMPORTANT CONTRIBUTION TO THEIR DEVELOPMENT AND BUILDS A STRONG AND RESPECTFUL RELATIONSHIP.²

• Be informed about drugs and alcohol, educate yourself about the substances commonly used/abused by adolescents, and be aware of their legal and health implications.

"LISTENING OPENLY TO HOW YOUNG PEOPLE FEEL IS THE KEY TO BUILDING A GOOD RELATIONSHIP AND INCREASES THEIR WILLINGNESS TO TALK AND SPEND TIME WITH THEIR PARENTS."

SUPPLYING ALCOHOL TO MINORS

A PERSON WHO SUPPLIES ALCOHOL TO A MINOR COMMITS AN OFFENCE

SEE: HOST RESPONSIBILITIES AND LEGAL FACTS CHAPTERS 7 AND 9
CHAPTER 1: CREATING RESILIENT ADOLESCENTS

Family bonding is the bedrock of the relationship between parents and their adolescent children. Bonding can be strengthened through parent-child communication, parent supportiveness of their adolescent and parental involvement.

COMMUNICATING WITH YOUR ADOLESCENT

- **Make time for your son or daughter daily.** Find an activity you enjoy doing together. Put aside your chores, pay attention and listen to your children. Don’t do all the talking.¹

- **Let your adolescent know you are willing to just listen to their ideas without making judgments.** Listening in a respectful way is often called active listening, and it is a way of responding that allows others to openly express their ideas and feelings without interruption. Such active listening builds relationships, as it lets your son or daughter know you care for them and respect them.

- **Try not to be defensive when your adolescent makes generalisations or critical remarks.** Don’t take them personally. They are opportunities for discussion.

- **Give adolescents lots of positive feedback.** Encourage them for whom they are, not just for their accomplishments. When parents are quick to encourage rather than to criticise, young people feel good about themselves and develop the self-confidence to trust their own judgment.

- **Tolerate differences.** Encourage your teenager to talk freely about their lives, problems, school and work. Talk about topics where all people do not have the same opinions.²

- **Encourage adolescents to take responsibility for their own problems.** Involve them in calm discussions about the consequences of their possible actions and behaviour before they are needed and be consistent in carrying out those consequences should the need arise.

- **REMOVE THE STIGMA OF FAILURE FROM YOUR HOME.** Young people need to understand that the only failure is in not trying. Mistakes are not failures but mistakes simply provide adolescents with new information that can help them succeed. They all need the freedom to be imperfect.³

- **Friendships are important in adolescence.** Criticising friends can lead to arguments and encourage adolescents to defend any unacceptable behaviour of their friends. Sometimes parents worry about their children’s peer group, but it is much more productive to debate the value systems of their friends than to criticise the friends themselves. Get to know their friends – often the best way is to feed them.

- **Doing everything for your adolescent is not useful.** This may prevent your child from learning to take responsibility for him or her self. Teach your child to organise his or her time and be aware of the needs of others.⁴

- **LEARN TO SAY “NO!” TO YOUR CHILD.** There will be times when your adolescent won’t like what you say and will act as though he or she doesn’t like you. Being your child’s best friend should not be your primary role during this time in their life.⁵
CREATING RESILIENT FAMILY STRUCTURES

A contemporary family may be a single parent or a blended family, or involve grandparents, aunts, uncles, siblings, friends, and other children. All families have their unique strengths, and, no matter what type of family you are a part of, it is possible for parents to offer the essential things needed by adolescents.6

• LEARN TO COPE AND BOUNCE BACK. STRONG FAMILIES PULL TOGETHER IN DIFFICULT TIMES. THEY HAVE A POSITIVE ATTITUDE. ENCOURAGE THE QUALITY OF OPTIMISM AS THIS IS PART OF RESILIENCE. IT IS THE KNOWLEDGE OF HOW TO BELIEVE IN YOURSELF IN SPITE OF DIFFICULTIES AND THAT THERE WILL BE A SATISFACTORY SOLUTION IN THE END.

• REMEMBER ANY UNRESOLVED MARITAL RELATIONSHIP ISSUES CAN AFFECT THE PARENTING OF YOUR CHILDREN. IT IS IMPORTANT TO WORK TOWARDS APPROPRIATE RESOLUTION AS MUCH AS POSSIBLE TO GIVE THE BEST POSSIBLE OUTCOMES FOR YOUR CHILDREN.

Adolescents benefit from a positive relationship with at least one adult who has developed a healthy lifestyle and positive values.

WHAT YOU CAN DO TO BUILD FAMILY STRENGTH AND RESILIENCE

• Create opportunities for family members to express love and care for each other. Family members can show affection by giving each other hugs and kisses. Or, they may show their love, care and interest in other ways such as helping each other or asking questions regarding the well-being of a family member.

• Practice good communication. Talk to each other and be open with your own thoughts and feelings.

• Respect others and be responsible. As adolescents get older, they can take on additional responsibilities. It is important that adolescents help at home. When your child reaches the appropriate age, encourage him or her to take on a part-time job.

• Do things together so each person has a sense of belonging to the family. An important family activity is sitting down for dinner together at least once a week.

• Connect to others. To friends, and to people at school or in the neighbourhood and community. Encourage your adolescent to volunteer his or her time, skills or talents like coaching a junior sports team, reading to younger siblings or mowing the lawn for a neighbour.
CHAPTER 2:
POSITIVE EDUCATION AT KING’S COLLEGE

The term Positive Education comes from the implementation in schools of ‘Positive Psychology’. Formally introduced by Martin Seligman from the University of Pennsylvania, it draws upon key elements of neuroscience and philosophy, and is primarily a holistic strength-based approach to the promotion of well-being.¹

Positive Psychology is built around a growth mindset² and believes that the skills of well-being can be taught as effectively as any other subject. It has a strength-based orientation and seeks to promote positive states and qualities in individuals. When resilience is developed it helps to enable a person to deal more effectively with the inevitable challenges of life – a psychological toolkit of sorts.³

The prevalence of psychological distress and depression among young people, the small rise in life satisfaction, and the proven link between improved learning outcomes and positive emotion all argue that schools should develop the skills of well-being in students, staff and the wider parent community.⁴

Positive Psychology fits into the twenty-first century education paradigm, which understands the need to educate the ‘whole’ student – socially, emotionally, physically, spiritually and intellectually. The skills of well-being can be taught just as the skills for numeracy and literacy are taught.⁵

King’s College aims to provide the best all-round education it is possible to obtain. Alongside intellectual excellence, we provide strong pastoral and social support through the House system, spiritual enrichment through the Chapel and physical and cultural development through a comprehensive co-curricular programme.

King’s College understands and supports the need for students to develop in a holistic way. The Positive Education programme at King’s College (PE@K) recognises the need to take a proactive approach in all of these areas of education, including that of emotional development.⁶

Aims of Positive Education at King’s College:
• To develop emotional resiliency and well-being in our students and staff.
• To develop confidence, optimism and curiosity.
• To develop independent thinking and self-determination.
• To develop depth of character.
• To develop mindfulness, awareness, psychological flexibility, and ‘Habits of Mind’.
• To develop an ethical and compassionate approach to living.
• To develop ‘virtuousness’ in our school.

Some of these aims relate to the Socratic traditions, namely the idea of self-examination through dialogue and discussion. Briefly, we firstly examine our beliefs, values and attitudes. We then understand that we can change ourselves by choosing how we interpret the situations we find ourselves in. This in turn leads to greater control over our emotions. What follows these beliefs and attitudes is that we can then choose how to react. As a consequence, we can develop new habits of independent thinking, feeling and acting (rather like ‘Habits of Mind’). From there we live lives with greater meaning – or what Seligman might refer to as ‘flourishing’. This relates to the fundamentals of Cognitive Behavioural Therapy (CBT) found in traditional psychology. However, we are introducing students to these concepts, and integrating them into our daily teaching. We are challenging and empowering our students with the necessary tools to stand up to an overwhelmingly consumer-driven society where value and status are often measured by the place we live, the car we drive or the dollar-value of the things we aspire to own.⁷

PE@K Module Programme
At King’s College we have a comprehensive pastoral module programme in Years 9, 10 and 11. Timetabled alongside traditional subject areas, the course comprises awareness-raising content and skills development designed for personal and social growth. These are inherent in the subjects and address the fundamental need for education to extend beyond the academic realm.

The PE@K Pastoral Module Programme:
Year 9
• Religious Studies
• Ethics
• Life Skills
• Philosophy
• Servant Leadership
• Round Square - an introduction

Year 10
• Religious Studies
• Community Service
• Nutrition, Relationships and Drug Awareness
• Sexual Education
• Leadership and Careers
• Digital Citizenship

Year 11
• Religious Studies
• Sexuality
• Stress Management and Drug Awareness
• Civics
• Positive Psychology
• Behavioural Economics
Specific areas of Positive Psychology developed in the Modules:

Building resilience or mental toughness through:
- Self-awareness
- Optimism
- Mental agility
- Perspective
- Self-regulation

Developing thinking ability through awareness of:
- The confirmation bias
- ‘Thinking traps’
- Problem solving
- Growth mindset
- ‘Habits of Mind’
- Mindfulness

Growing an ‘attitude of gratitude’ through:
- Developing a ‘What Went Well’ habit
- Effective praise
- Communication skills

Personal and inter-personal growth through:
- VIA Character Strengths identification
- Connection - relationships
- Core value and belief identification
- Social awareness and service
- Authentic and positive relationship building
- Developing spirituality

Supporting Lifelong Physical Health through
- Exercise and diet
- Drug and alcohol education
- Social and sexual education
- Stress management

SOME AREAS OF POSITIVE PSYCHOLOGY

Autonomy
Autonomy and self-regulation are signs of healthy development. In studies of children’s abilities to manage their own behavior at school, Brown and Ryan found that autonomy and a greater ability to self-regulate is often associated with greater pleasure and interest in school work, resulting in the ability to handle stresses more effectively - all critical components of healthy and authentic independence.

Character strengths
Research studies show that people are happiest, most productive, and most creative when using their key character strengths. The VIA Character Strengths questionnaire has been validated across age, culture and time.

The VIA strengths are: creativity, curiosity, open-mindedness, love of learning, perspective or wisdom, bravery, persistence, integrity, vitality, love, kindness, social and emotional intelligence, justice, citizenship, fairness, leadership, forgiveness, humility, prudence, self-control, appreciation of beauty, gratitude, hope, humour, spirituality.

Chris Peterson points out that the identification and awareness of character strengths are positive in nature and that therefore we should develop and use as many character strengths as possible.

What Went Well
Due to the power of the negativity bias, it is recommended to develop ‘What Went Well’ as a habit because it changes the person’s focus from the things that go wrong in our lives to things that go well. Since we all have the tendency to forget the things that go well and remember the things that did not go so well, we need an exercise that counteracts this negativity bias. The more we attend to the positive things in our lives, the more balanced our lives become.

A useful practice to develop at dinner time is to allow each member of the family to share three things that went well during the day. The objective is to celebrate the good events, consider why they were good and see if similar positive outcomes can be replicated in the future.

Mindfulness
Mindfulness makes one aware of their moment-to-moment experiences; noticing and accepting thoughts, feelings and emotions. Mindfulness can be used at home or in school to help students and teachers become aware of how their daily experiences of school life are affecting their state of mind and, hopefully, to calm their reactions and thoughts throughout the rest of the school day. A popular form of meditation focuses on compassion, which endeavours to cultivate compassionate thoughts and feelings for other people, especially for individuals that students might not like or know. The aim is to create better community cohesion among the school population.

Physiology
The health and physical education programme looks specifically at this area. Nutrition and exercise, along with attention to sleep patterns, breathing and the way we look after ourselves and live our lives in general, are all areas of consideration. Sven Hansen from the Resilience Institute has contributed to the King’s College community and his website (www.resiliencei.com) provides further valuable resources.

Giving to Others
Philanthropy is known to cultivate positive feelings. Though children might have comparatively limited financial resources,
they have much value to give to others. Examples might include a letter or phone call to a relative, donations of items to a good cause, or taking part in the Community Service programme organised by the chaplaincy at King’s College. There are benefits to all when we give. It is widely recognised that an easy way to cheer oneself up is to do something for somebody else.

Eleanor Chin, parenting coach and graduate of the Master’s Programme in Positive Psychology at the University of Pennsylvania, offers these practical suggestions for parents:

• Balance what we as parents see as suitable goals and finding the path that best fits your child.

• Listen to your children. Listen to what they are telling you about what motivates them by their excitement and enthusiasm. Take note of what de-motivates them through their lack of enthusiasm.

• Develop rituals around awareness of what is going well in the lives of the family (e.g. ‘What Went Well’).

• Observe your children. What are their strengths? Do they have an opportunity to use these strengths every day? Help them to become aware of their key strengths.

• Encourage a growth mindset through experimentation and learning from errors and mistakes. View errors as an opportunity to learn and to develop perseverance, rather than catastrophising the situation.

• Provide opportunities for children to experience success on their own terms, to build authentic competence.

• Encourage your children to be mindful and to develop empathy for others.

• Help your children to build a network of supportive adults, teachers, coaches, family members and friends.

**Recommended Reading:**


**Recommended Websites:**

- [www.viame.org](http://www.viame.org) for Character Strength Survey information
- [www.authentichappiness.sas.upenn.edu](http://www.authentichappiness.sas.upenn.edu) for Dr Seligman’s main home page
- [www.greatergood.berkeley.edu](http://www.greatergood.berkeley.edu) for the Greater Good Science Centre
- [thepositivityinstitute.com.au](http://thepositivityinstitute.com.au) for Dr Suzy Green’s page on Positive Psychology
- [philosophyforlife.org](http://philosophyforlife.org) for Jules Evans page linking philosophy to well-being
- [www.generationnext.com.au](http://www.generationnext.com.au) for a site dedicated to mental health and well-being of young people
- [positivepsychologynews.com](http://positivepsychologynews.com) for up-to-date articles on issues and publications in Positive Psychology

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• **SUPPORT YOUR CHILDREN IN LEARNING TO NOTICE, NAME AND REGULATE THEIR EMOTIONS.**

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CHAPTER 3:
RECOGNISING AND UNDERSTANDING ANXIETY

WHAT IS ANXIETY AND WHEN IS IT TOO MUCH?

Remember, anxiety sometimes precedes depression.
Everyone gets anxious from time to time – it’s a normal response to situations like sitting an exam, starting a new job, or performing under pressure. This kind of anxiety is just a normal part of life. But for some people, the feelings of anxiety can be a lot more extreme and become what is known as an anxiety disorder.

Anxiety disorders are common. One in four young New Zealanders will experience some kind of anxiety disorder by the time they are 24 years old. People with anxiety disorders often become worried or upset about their problem. This may lead to them becoming depressed as well. How can you tell the difference? Normal, healthy anxiety is usually in response to an event in your life. It usually lasts a few hours or a few days at most, and it does not affect your health or other parts of your life. In fact a bit of stress or anxiety can be a good thing, because it helps us perform at our best! Too much anxiety, however, can be totally overwhelming.

Anxiety disorder is different because the feelings:
1. Are quite intense.
2. Last for weeks, months or more.
3. Negatively affect your thoughts, behaviour and general health.
4. Leaves you feeling distressed and not enjoying life.
5. It can impact on other areas of your life – like how you’re doing at school or work, or your relationships with friends and family.

Symptoms of anxiety disorder:
1. Avoid socialising or going out.
2. Finding ways to reduce anxiety (having someone with you all the time).
3. Avoiding eye contact with others.
4. Using alcohol or drugs to calm you down.

Feelings:
1. Confused.
2. Anxious.
3. Tense all the time.
4. Constantly nervous, panicky, terrified, on edge.

Physical:
1. Blushing.
2. Trembling.
3. Heart racing.
4. Numbness, tingling, nausea, sweating, shaking, shortness of breath, dizziness.

What can I do about anxiety?
The good news is anxiety disorders can be managed and overcome. It is important to recognise anxiety problems and treat them as soon as possible. This can avoid a lifetime of battling with anxiety and maybe depression. Most people need to seek professional help – either from a GP, or a counsellor or psychologist. Some forms of ‘talking therapy’ such as Cognitive Behavior Therapy (CBT) are very effective for some people. For most people, ‘talking therapy’ is the first choice in treating anxiety disorders, because it helps people change their thought patterns and the way they react to certain situations, which can assist to prevent further problems. It can also be helpful to learn some relaxation techniques.

Support:
School Guidance Counsellors
Chaplains
Doctors
Psychologists

"THE KEY TO ESTABLISHING THE IDEAL ENVIRONMENT FOR RAISING AN ADOLESCENT IS CONNECTEDNESS. THIS IS A FEELING OF 'BELONGING', OF FEELING NEEDED, OF BEING AN IMPORTANT AND LOVED MEMBER OF THE FAMILY."
CHAPTER 4: WHEN ADOLESCENTS NEED HELP – DEPRESSION

Depression has become so common that one in five young people will suffer some form of the illness during their adolescence, and approximately three percent of them experience severe depression.1

As it can be difficult to distinguish adolescent turmoil from depressive illness2, we felt the need to include this chapter on depression in our booklet.

We hope the following information will help you make that distinction.

CAUSES

• There is not usually one single cause of depression. It is usually a combination of things. It can be due to chemical imbalance, and/or environmental factors.3

• It can be due to stress at home or school.

• It can just come out of the blue with no known cause.

• Sometimes family history can be a major factor.

• A lot of depressed adolescents also have problems with alcohol or other drugs.4 Sometimes the depression comes first, other times the depression is caused by the effects of alcohol or drugs.

• Depression can be a sign of a medical illness such as low thyroid or diabetes, or it can be caused by the side effects of medications. A doctor will want to check out whether there are any medical problems or pills that could be causing the depression.5

Many factors that cause stress in a young person’s life can lead to depression, such as:

• Coping with school demands and homework.

• Changing schools.

• Moving from primary school to secondary school.

• Being bullied.

• Negative self-image.

• Changes in their bodies.

• Problems with friends.

• Problems with a girlfriend/boyfriend.

• Issues with the family.

• Separation or divorce of parents.

• Death of a loved one.

• They themselves have a serious illness.

• Moving house.

• Issues surrounding sexuality.6

DEFINITION OF DEPRESSION

• It is important to realise that there is a difference between normal unhappiness and sadness in everyday life, and depression.

• When the down mood, along with other symptoms, lasts for two weeks or more, the condition may be depression.7

• It is an illness, just like diabetes and asthma, not a character flaw.8

• It is common and treatable.9

• Depression is a serious health problem that affects the total person. In addition to feelings, it can change behaviour, physical health and appearance, academic performance and the ability to handle everyday decisions and pressures.

• It is the leading cause of suicide.10

• If suicide appears imminent, do not waste time feeling angry, guilty or upset.

"SELF KNOWLEDGE IS YOUR COMPASS THROUGH LIFE, AND IT’S THE THING THAT WILL KEEP YOU WELL."11

"YOU GO TRAINING EVERY DAY: YOU GO TO THE GYM AND SPEND AN HOUR AND A HALF THERE. WHY CAN’T YOU GO TO A SPECIALIST AND SPEND AN HOUR AND A HALF ON YOUR BRAIN."12

ACT: CALL EMERGENCY 111 OR ADHB EMERGENCY HOT LINE 0800 611 116

"YOU GO TRAINING EVERY DAY: YOU GO TO THE GYM AND SPEND AN HOUR AND A HALF THERE. WHY CAN’T YOU GO TO A SPECIALIST AND SPEND AN HOUR AND A HALF ON YOUR BRAIN."12
HOW TO RECOGNISE DEPRESSION IN YOUR ADOLESCENT

According to Professor Ian Hicks, the clinical advisor to Beyondblue, “the signs and symptoms of depression are a combination of what people can see, plus what the person is feeling internally.”

Not every student who is depressed has all of these symptoms. Adolescents who are more severely depressed will have more symptoms than those who are mildly depressed.

Below is a list of the signs and symptoms of depression in adolescence:

- They have a lowering of mood with increased sadness most of the time, or they cry for no apparent reason, or they become angry, anxious or irritable and little things annoy them.
- They withdraw from family and friends.
- They don’t participate in their usual activities or they don’t enjoy them anymore.
- They lose their appetite resulting in weight loss, or eat too much resulting in weight gain.
- They lose confidence in themselves and have poor self-esteem.
- They fail exams or miss/skip classes.
- They use drugs and alcohol for the first time or recklessly.
- They experience sleep disturbances - they have trouble falling asleep, staying asleep or getting up.
- They exhibit marked tiredness and lack of energy after even minimum effort.
- They manifest physical problems e.g. headaches, chest pains or stomach aches that don’t seem to have a cause.
- They exhibit poor memory and difficulty in concentration or in decision-making.
- They experience feelings of worthlessness or guilt when they are not at fault.
- They have a sense of hopelessness and no future.
- They think about death or harming themselves.

If someone experiences five or more of these symptoms for two weeks or more, or if the symptoms are severe enough to interfere with their daily routine, seek professional help as outlined in this booklet.

If you are worried and find yourself going through this list, some good resources for extra support can be found on a number of good New Zealand based websites.

These include:

www.thelowdown.co.nz
www.depression.org.nz
www.mentalhealth.org.nz
www.skylight.co.nz
HOW YOU CAN HELP SOMEONE WITH DEPRESSION

• **LOOK** for and recognise the signs and symptoms of depression.

• **LISTEN** to your adolescent. Encourage them to talk about their problems, feelings and thoughts, no matter how scary they are.

• **ACT** – THE MOST IMPORTANT THING IS TO DO SOMETHING.\(^{15}\)

Seek professional help from:

• A school-based counsellor/psychologist.

• Your family doctor.

• A psychologist/psychiatrist.

• A minister of religion.

Getting help for your adolescent:

• Assisting your adolescent to get to care and accompanying him or her afterwards is critical.

• Go along with them and make sure they get good advice.

• Help them put into action whatever recommendations are made.\(^{17}\)

• If you are not happy with your health professional, please find one both you and/or your adolescent feels comfortable with.

• It is also useful to involve the school to assist you with managing a depressive situation. Often families keep depressive illness from the school, which can be counterproductive.

Sometimes your adolescent may not want to seek help. In this case, it is best to explain you are concerned and perhaps provide your child with as much information as you can on depression.

Depression saps energy, motivation and self-esteem and therefore can get in the way of a person’s ability or wish to help themselves.\(^{18}\)
Bullying is a form of aggressive behaviour when people repeatedly and intentionally use words or actions against someone or a group of people to cause distress and risk to their well-being. Bullying consists of three basic types of abuse – emotional, verbal and physical – and usually involves an imbalance of power which is intended to hurt another person. People who bully usually have more influence or power over someone else, or want to make someone else feel less powerful or helpless. Bullying is not the same as conflict between people (like having a fight) or disliking someone, even though people might bully each other because of conflict or dislike.

**BULLYING IS A TYPE OF HARASSMENT BEHAVIOUR**

Bullying behaviours can look like:
- Being harassed or abused.
- Being excluded or treated differently.
- Having rumours spread about you.
- People posting stuff about you online.
- Being sworn or shouted at.
- Being blamed without justification.
- Name calling, being rude and impolite, constantly negative teasing.
- Unwarranted or invalid criticism.
- Harassing someone based on their race, sex, religion, gender or disability.
- Intentionally and repeatedly hurting someone.
- Taking advantage of any power over someone else.1

**WHATEVER KIND OF BULLYING IT IS – IT IS NEVER OK.**

**BYSTANDERS AND THE BULLY MENTALITY**

Often bullying takes place in the presence of a larger group of relatively uninvolved bystanders. In many cases, it is the bully’s ability to create the illusion that he or she has the support of the majority present that instils the fear of ‘speaking out’ in protestation of the bullying activities being observed by the group.2
Unless the ‘bully mentality’ is effectively challenged in any given group in its early stages, it often becomes an accepted, or supported, norm within the group. Where this mentality has been allowed to become a dominant factor in the group environment, injustice and abuse often become regular and predictable parts of the group experience.

Bystanders to bullying activities are often unable or unwilling to recognise the true costs that silence regarding the bullying can have, both to the target, bully, and to the group. Bystanders often feel unwilling to empathise with the target, regardless of their feelings towards the bully. The reversal of a culture of bullying within a group is usually an effort which requires much time, energy, careful planning, coordination with others, and usually requires some undertaking of ‘risk’ by group members.

**TYPES OF BULLYING**

**Face-to-face bullying** (sometimes referred to as direct bullying) involves physical actions such as punching or kicking or direct verbal actions such as name-calling and insulting.

**Covert bullying** (sometimes referred to as indirect bullying) is less direct, but just as painful and includes excluding people from groups or spreading lies or rumours.

**Cyber bullying** occurs through the use of technology like instant messaging or online chat, text messages, email and social networks or forums. It is similar to offline bullying, but it can also be anonymous, can reach a wide audience, and sent or uploaded material can be difficult to remove. Most people who cyber bully also bully offline.

**Impact of bullying:**

- Increased self-blame.
- Reduced self-esteem – feeling like you don’t fit in.
- Hopeless and stuck like you can’t get out of the situation.
- Being isolated and feeling alone.
- Depressed and rejected by your friends and other groups of people.
- Unsafe and afraid.
- High stress – wondering what to do and why this is happening.
- Sleep problems.

**WHEN THE BULLY ENCOUNTERS NO NEGATIVE RESPONSE FROM OBSERVERS, IT PROVIDES SOCIAL APPROVAL FOR THE BULLYING AND ENCOURAGES CONTINUATION OF THE BEHAVIOUR. IN AN ENVIRONMENT WHERE BULLYING IS ACCEPTED, INDIVIDUALS FEEL POWERLESS TO STOP IT.**

Despite the large number of individuals who do not approve of bullying, there are very few who will intervene on behalf of a target. Most people remain bystanders and tend to accept the bullying or support the bully. In eighty five percent of bullying incidents, bystanders are involved in teasing the target or egging on the bully.

**YOU SHOULD SHOW THE BULLY THAT YOU THINK WHAT THEY ARE DOING IS NOT OKAY AND DISRESPECTFUL. HELP THE PERSON BEING BULLIED TO TELL AN ADULT THEY CAN TRUST.**

**BULLYING CAN HAVE A NEGATIVE IMPACT ON EVERYONE. IT IS NOT JUST A PROBLEM FOR TARGETS AND BULLIES.**

**OFTEN PEOPLE WHO BULLY OTHERS HAVE BEEN BULLIED THEMSELVES.**
Young people who bully are often very badly affected too. They can find it hard to make real friends, often get in trouble, feel isolated and disliked, and struggle to fit in and to achieve well.\(^7\)

If you are concerned about bullying, it is critical that you act thoughtfully and carefully. Work from a position of knowledge.

People to talk to if you are worried about your child being bullied or being a bully:
- Housemaster.
- Teacher.
- School Guidance Counsellors.
- Chaplains.
- Headmaster.
- Board of Trustees.
- The Office of the Commissioner for Children.
- The Human Rights Commission.

WHAT CAN I DO IF A CHILD IS BEING CYBER BULLIED?

If a child tells you they have been cyber bullied, reassure them that they have done the right thing to trust you with the problem.

Save evidence of all bullying messages and images. You can save messages on a mobile phone and take screen shots of bullying on websites or Instant Messenger (IM) chats. This may be used later if you report the bullying to school or the police.

If the bullying online or on a mobile phone involves physical threats, contact the police. Making threats of harm is criminal behaviour in New Zealand.

Bring in any evidence you have when you meet with the police (messages stored on a phone or print outs of screenshots). If you are worried about safety, contact the police immediately.\(^9\)

CYBER BULLYING AND SCHOOL

If you think the person bullying your adolescent child is at their school, tell the Deputy Principal, Housemaster or Principal as soon as possible.

The Education Law in New Zealand (Education Act 1998) includes the National Administrative Guideline 5, which says that schools are to provide a ‘safe physical and emotional environment for students’.\(^8\)

This includes addressing behaviours (such as cyber bullying) that occur outside of school but which have implications for student well-being while at school.

CYBER BULLYING ON WEBSITES

Report internet cyber bullying to the website where the bullying took place – usually there is a ‘Report Abuse’ button or ‘Safety Link’.

When to call the police

If any cyber bullying threatens harm – like hurting or fighting – this breaks New Zealand law. Save the evidence and contact the police.\(^11\)

CYBER BULLYING

For those not familiar with the term, cyber bullying is bullying. It is using the internet, a mobile phone or other technology like a digital camera to hurt somebody, harass or embarrass them. Young people grow up today with access to more and more technology, quickly adapting to new ways of communicating and often use the internet and mobile phones as the main way to reach friends 24/7.\(^8\)

This access to technology also means that bullying can happen outside school wherever and however a child communicates with friends – on websites, online chat and on their mobile phone.
Parents Guide for Developing Responsible Teenagers

Advise younger children to be careful who they give their mobile number to and to not pass on friends numbers without asking them first. Remind them not to respond to texts from people they do not know. Talk with your child about what images, if posted online or sent on a mobile phone, could get sent on to others and be used to bully or embarrass them.

BULLYING IN ‘CYBERSPACE’ CAN INCLUDE:

- Posting nasty or threatening comments on your child’s social networking profile (e.g. Bebo, Facebook, Instagram etc).
- Sending anonymous messages.
- Hacking existing website accounts or creating fake profiles for people they want to intimidate or embarrass.
- Circulating photos or videos of people they are targeting – these can be real images or digitally altered to cause offence or embarrass the target.

Useful websites:

- www.cyberbullying.org.nz
- www.howtostopbullies.com
- www.netsafe.org.nz or 0508 NETSAFE (0508 638 723)
- www.stopbullying.gov
- www.police.govt.nz
- www.skylight.org.nz (Phone 0800 299 100)

REASSURE YOUR CHILD THAT YOU WILL NOT REMOVE THEIR TECHNOLOGY AS A KNEE-JERK REACTION TO PROBLEMS (INCLUDING CYBER BULLYING). YOUNG PEOPLE TELL NETSAFE THAT FEAR OF LOSING ACCESS TO THEIR COMPUTER OR MOBILE PHONE IS ONE OF THE REASONS WHY THEY OFTEN DON’T REPORT CYBER BULLYING.

CYBER BULLYING ON ONLINE CHAT ROOMS

If you can, block the bullying messages coming through. Take screenshots of any bullying messages sent and save them as evidence.

CYBER BULLYING AND MOBILE PHONES

If bullying messages are coming through to a mobile, contact your phone company. Report the abuse to the network and ask them to take action. The company should be able to trace the source of the messages and warn the bully they may lose their number and/or access to the network if they continue.12

WHAT CAN I DO TO PREVENT CYBER BULLYING?

Talk with your adolescent child about cyber bullying and see how they understand the issue.

WHAT CAN I DO TO PREVENT CYBER BULLYING?

Talk with your adolescent child about cyber bullying and see how they understand the issue.
CHAPTER 6: UNDERSTANDING ALCOHOL AND ADOLESCENCE

KEEPING THEM SAFE
Research shows that the earlier an adolescent starts drinking, the greater the chance that they will have problems with alcohol later in life. Because of the health risks associated with drinking, the National Health and Medical Research Council has recommended that adolescents under the age of 15 do not drink any alcohol at all, and that adolescents between the ages of 15 and 17 delay starting to drink for as long as possible. Any drinking by adolescents under the age of 18 should be at low risk levels, in a safe environment, and supervised by an adult (see Australian Guidelines to Reduce Health Risks from Drinking Alcohol). 1

WHY DO ADOLESCENTS DRINK ALCOHOL?
Experimentation and risk taking are a normal part of adolescent behaviour, which includes drinking. When adolescents drink, they often hide it from their parents. Although it may sometimes seem like it, adolescents do not simply drink alcohol to disobey their parents.

As your adolescent child gets older, the likelihood they will drink alcohol increases. There are many factors that may influence an adolescent’s decision to drink:

- Many adolescents associate alcohol use with becoming an adult.
- Drinking may be considered normal within their peer or cultural groups.
- Portrayal and marketing of alcohol in the media may encourage drinking.
- Parents’ use of and attitudes about alcohol also influence drinking.

This guide describes a range of strategies you can use to prevent your adolescent from misusing alcohol. When choosing from these strategies, select approaches that are appropriate for your adolescent’s maturity and personality.

As a parent you have a major influence on your adolescent child’s drinking behaviour and you can help prevent them from drinking alcohol or from harmful use. Your influence on your adolescent’s attitudes and decisions about alcohol is greatest before they start drinking.

This influence begins at a very early age. Warning your adolescent about the dangers of drinking will not be effective if you do not set a good example yourself. If you drink, you should model responsible drinking by establishing and following your own rules for drinking responsibly (see Tips for Modelling Responsible Drinking page 19). Explain these rules to your adolescent.

When adolescents drink, they often drink with the aim to get drunk, and are more likely to binge drink. Although binge drinking is common amongst adolescents, any episode of binge drinking is still a cause for concern. However, a single episode of binge drinking does not necessarily mean your adolescent has an alcohol problem. 2

MODEL RESPONSIBLE DRINKING AND ATTITUDES TOWARDS ALCOHOL
Parents are important role models for their children, even during adolescence. Your attitude towards alcohol, what you drink, how much, when and where you drink are all a major influence on whether or how your adolescent will drink in the future. Help them realise that many of their peers are not drinking, and address the myth that most adolescents get drunk. Talk about how alcohol is portrayed in the media, highlighting how alcohol is glamourised and how the media spreads myths about drinking. 3

USE HEALTHY WAYS TO COPE WITH STRESS WITHOUT ALCOHOL, SUCH AS EXERCISE, LISTENING TO MUSIC, OR TALKING THINGS OVER.
**TIPS FOR MODELLING RESPONSIBLE DRINKING:**

- Limit your alcohol use, especially in front of your children.
- Do not get drunk, especially in front of your children.
- Sometimes decline the offer of alcohol.
- Provide food and non-alcoholic beverages if making alcohol available to guests.
- Never drink and drive.
- Do not let other adults drive after they have been drinking.
- Do not convey to your children the idea that alcohol is fun or glamorous through stories about your own or other's drinking.
- Do not portray alcohol as a good way to deal with stress, such as by saying, “I’ve had a bad day, I need a drink.”

**RISKS ASSOCIATED WITH ADOLESCENT DRINKING**

Alcohol is a drug. It acts as a depressant (slows down the central nervous system) and has numerous other effects on the body. Adolescents have less physical tolerance to the effects of alcohol. Adolescence is a time when the brain is still rapidly developing and it is therefore more susceptible to damage due to drinking alcohol. There are a number of other harms associated with alcohol that are more likely to occur during adolescence.

Adolescents who drink are also more likely to engage in risky sexual activity, exposing themselves to sexually transmitted infections (such as chlamydia). Alcohol contributes to the three leading causes of death among young people (unintentional injuries, homicide and suicide).

**Violence and sexual assaults**

Young people who drink heavily are more likely to become involved in violent confrontations, either as aggressors or targets. Both boys and girls are more vulnerable to sexual assault when intoxicated with alcohol.

**Suicide and self-injury**

Risk of suicide and self-injury is higher in adolescents who drink heavily or frequently. Alcohol increases the risk in several ways. It can intensify feelings of anxiety, depression and aggression, while at the same time undermining the person’s ability to cope. It can also make a person more likely to act on suicidal thoughts.

**Long-term problems as a result of adolescent alcohol use**

Adolescents who drink are at a greater risk of a broad range of psychological and physical problems in adulthood including alcohol abuse/dependence. Evidence indicates that any drinking during adolescence increases the chance of developing a drinking problem in early adulthood, and the earlier someone starts drinking the greater the risk.

**Depression and other mental illnesses**

Young people who suffer from mental illnesses are more likely to use alcohol to help them cope. While alcohol can make people feel better in the short term, heavy drinking can make these problems worse.

**Social problems**

Abuse of alcohol is associated with dropping out of school, unemployment and social isolation.

**Physical health problems**

Persistent heavy drinking can produce a range of physical health problems, including liver disease and brain damage.

**There are also a number of factors that increase the risk of an adolescent drinking heavily:**

- Experiencing emotional or psychological problems.
- Not feeling connected to family, school or community.
- Behaviour problems.
- Family history of alcohol problems.

The key to establishing the ideal environment for raising an adolescent is connectedness. This is a feeling of “belonging”, of feeling needed, of being an important and loved member of the family.
COMMUNICATION – THE PATHWAY TO EFFECTIVENESS

A close and supportive relationship with your adolescent does not guarantee that they will not misuse alcohol, but it does reduce the likelihood. It also influences how effective your efforts are in protecting them from alcohol misuse and will increase the likelihood that they will seek help from you if they are faced with an issue regarding alcohol.³

DISCUSS YOUR EXPECTATIONS ABOUT THEIR ALCOHOL CONSUMPTION

With children and younger adolescents  
Talking to your child about the risks associated with alcohol can help reduce their risk of alcohol-related harms. Even if your adolescent chooses not to drink, you should still discuss alcohol with them. Discuss with your child what your expectations are regarding their alcohol consumption. Be clear, direct and specific. Give them valid reasons why they should not drink. Talk about how the best way for them to avoid the harms associated with alcohol is to not drink at all before the age of 15, and even better, to wait until they are 18.

With older adolescents  
Discuss how, if your adolescent does drink, they should do so in moderation. Explain your expectations for specific situations, such as at family celebrations. When talking to your adolescent child about alcohol, discuss with them how risks associated with alcohol can be minimised. Tell them not to participate in potentially risky activities, such as skateboarding, swimming or riding a bike after they have consumed alcohol. Also discuss the added risks of using alcohol with other drugs. Continue to talk to your child about alcohol throughout their adolescence. Discuss with them how, if they choose to drink when they are an adult, they should do so responsibly.

Preparing for the talk  
Before talking to your child, take some time to prepare for the conversation. Make sure you are knowledgeable about alcohol and its effects and try to find out how alcohol is addressed in your child’s school curriculum. Evaluate your own behaviours and attitudes regarding alcohol, and clarify your attitudes and beliefs about adolescent drinking. For example, is there a certain age when you think it is acceptable for an adolescent to try alcohol? Think about the main points you want to discuss with your child, questions they may ask, and how you will respond to them. You should be prepared to answer some difficult questions.

How to talk to your child about alcohol  
When talking to your adolescent about alcohol, think about previous occasions when you have related well with them and try to use these methods. Choose a time when both of you are relaxed. Make it a conversation, not a lecture. Think about what you convey through your tone of voice, facial expression and body language.

Tailor information and language to your adolescent’s age and maturity and ask questions to make sure they understand what you are saying. Listen without interrupting when your child speaks and show them you are listening by nodding, asking questions, or repeating phrases back to them. If you can not answer a question, admit it and look for the answer from a reputable source such as a book, reliable website, or health professional.

What to talk about  
You should not present a permissive approach to alcohol when talking to your adolescent, as this can increase the likelihood that they will misuse alcohol. Tell your child the facts about alcohol, its harms, and the health benefits of choosing not to drink. Explain to them that their brain is still developing and is therefore more vulnerable to harm caused by alcohol.

Talk about how the effects of alcohol vary between individuals, depending on the amount of alcohol, the person and the situation. Teach them that different types of alcoholic drinks contain different amounts of alcohol and ensure they know the laws relating to underage alcohol consumption, drunkenness and drink driving. Emphasise the short-term harms associated with alcohol, as these are generally of greater concern to adolescents. For example, explain to them that alcohol may cause them to do something embarrassing that might damage their self-esteem and friendships. Talk about the positive as well as the negative effects of alcohol, and avoid scare tactics or exaggerating its negative effects.

Discuss with your adolescent their perceptions of alcohol. Ask your child what they think about alcohol and encourage them to talk about anything that interests or concerns them about drinking. Address any myths or misinformation your child may have about alcohol. Encourage them to question the assumption that most adolescents drink.

ASK THEM WHY THEY THINK YOUNG PEOPLE DRINK AND LISTEN CAREFULLY TO THEIR RESPONSE.
Establish family rules

Developing general family rules

Having clear family rules, including those not specific to alcohol, is important in protecting your adolescent from alcohol misuse. When formulating rules and consequences for your adolescent, try to support their growing independence, while setting appropriate limits, and use positive reinforcement where possible. Involve your adolescent in developing family rules for them to follow. Once established, make sure the family is clear on exactly what the rules are and that each member understands them. Be prepared to negotiate on rules regarding minor matters, but do not change the family rules or consequences without first discussing it with your adolescent. Review rules as your adolescent shows more maturity and responsibility.

Parents should support each other regarding family rules and present a united front in enforcing them. Make sure your adolescent understands that family rules are to be maintained when they are away from the family home and that you expect them to make wise choices based on family rules. If this is difficult because of blended family values please seek help to resolve these issues in the interests of best parenting.

Rules about alcohol

Rules about alcohol are important in protecting your adolescent from alcohol misuse. Establish these rules for your adolescent before they are exposed to situations involving alcohol. Establish rules regarding alcohol for when your adolescent is at home unsupervised. Tell them that any alcohol stored in the family home is strictly off-limits to them and their friends. Make sure they know that the rules about alcohol are a protective measure and not just a restriction on their freedom. Establish and enforce a rule that your adolescent must never drink alcohol and drive.

Providing your adolescent with alcohol for parties and gatherings increases the likelihood that they will misuse alcohol. Never supply alcohol to your adolescent’s friends. Do not allow your adolescent to attend a party that is not adequately supervised. Before allowing them to attend, contact the party host to confirm whether it will be adequately supervised. For example, find out:

- Will a responsible adult be there?
- Will alcohol be allowed?
- Will alcohol consumption be regulated?
- Is the party invitation-only?
- What time will the party finish?

If you decide to let your adolescent attend, get the name and number of the responsible adult who will be supervising the party. Monitor your adolescent by checking in with the responsible adult. Make sure your adolescent has a safe ride with a responsible adult to and from the party.

Consequences for when rules are broken

Establish realistic consequences for when family rules are broken. These consequences should be harsh enough to be a deterrent, but not so harsh that they may damage your relationship with your adolescent should they be imposed. Try to involve your adolescent in the development of consequences and make sure they are very clear about what
If your adolescent comes home drunk, wait until they are sober before talking to them about their behaviour. You should know how to respond if your adolescent has a medical emergency due to intoxication (see Helping Someone with a Drinking Problem Mental Health First Aid Guidelines: www.mhfa.com.au/guidelines).

Talk to your adolescent about your concerns

When approaching your adolescent about their alcohol misuse, try to stay calm. Allow them to tell their side of the story and do not lecture them. Use dealing with your adolescent’s alcohol misuse as an opportunity to maintain or improve communication between yourself and your adolescent. Find out as much as you can about your adolescent’s understanding and beliefs about alcohol, and about how drinking makes them feel. Tell them what concerns you about their alcohol use, such as that they have broken the rules or that they have put their health and safety at risk. Take care to communicate that you disapprove of the behaviour, not the adolescent themselves. Use ‘I’ statements, such as ‘I feel very upset about you drinking at that party’ rather than you statements such as ‘you are a lying, untrustworthy child’. If you are unsure of how to approach your adolescent about their alcohol misuse, consider enlisting the help of someone knowledgeable, such as a family doctor or a qualified counsellor.

Despite your best efforts, you may not be able to prevent your adolescent from drinking. If they do, you should be concerned, but remember that many adolescents drink, yet few develop alcohol problems.10

Warning signs that indicate your adolescent may be misusing alcohol

There are no warning signs that definitely indicate an adolescent is engaged in risky drinking. However, there are a range of signs and behaviours that, when seen in combination, may indicate an adolescent is drinking excessively. These signs include:

- Repeated health complaints.
- Changes in sleeping patterns.
- Changes in mood, especially irritability.
- Starting arguments, withdrawing from the family or breaking family rules.
- Dropping grades, frequent school absences or discipline problems at school.
- Changes in social activities and social groups.

These signs can also result from other physical and psychological problems. If you observe a number of these signs in your adolescent child, consider consulting your GP to rule out other potential causes.11

Strategies for de-escalating aggression

If a person becomes aggressive, assess the risk of harm to yourself, the person and others. Ensure your own safety at all times so that you can continue to be an effective helper. If you feel unsafe, seek help from others. Do not stay if your safety is at risk. Remain as calm as possible and try to de-escalate the situation with the following techniques:

- Try not to provoke the person; refrain from speaking in a hostile or threatening manner and avoid arguing with them.
- Use positive words (such as “stay calm”) instead of negative words (such as “don’t fight”), which may cause the person to overreact.
- Consider taking a break from the conversation to allow the person a chance to calm down.
- If violence has occurred, seek appropriate emergency assistance.12

Preventative strategies

Give positive feedback

It is important to give positive feedback when your adolescent follows the rules. If your adolescent has decided to call you to be picked up from a party or another situation where alcohol is being misused, make sure they know you are proud of them. Positive feedback increases the chances they will continue to follow the rules later.

Unsupervised adolescent drinking

Know the range of settings in which unsupervised adolescent drinking occurs, as well as the range of sources that adolescents can obtain alcohol from. Be aware that the risks are greater when adolescents drink unsupervised in public places such as playgrounds or car parks.

Discuss drink spiking and other dangers

Discuss strategies for minimising harm associated with alcohol when your adolescent is out with friends, such as sticking with their friends, not walking off alone, and ensuring that others know where they are. Talk to them about the dangers of drink spiking, for example how someone can deliberately put a dangerous amount of alcohol in a drink with the aim of intoxicating another
person, and how even non-alcoholic drinks can be spiked with alcohol. Discuss how they can protect themselves against drink spiking.

**Warn about drink driving**
Warn your adolescent about the dangers of getting into a car driven by someone who has been drinking. When your adolescent is going out, talk to the person driving and confirm that they will not be drinking. Establish a plan for when your adolescent is faced with a drink driver, such as agreeing to pay for a taxi or picking them up. Let your adolescent know that there will be no negative repercussions. Try to balance monitoring with your adolescent’s need for privacy and adjust your monitoring as your adolescent matures to encourage their growing independence.

**MAKE IT A RULE THAT YOUR ADOLESCENT MUST NEVER GET INTO A CAR DRIVEN BY SOMEONE WHO HAS BEEN DRINKING.**

**Encourage positive friendships**
Get to know your adolescent’s friends. Encourage your child to invite their friends over when you are at home. This will allow you to get to know their friends better and help you learn about your adolescent’s activities. Talk to your adolescent’s friends and try to interact with them. Talk to your child about qualities that really count in a friend, such as being kind and trustworthy, rather than popular and “cool”.

**Prepare your adolescent for situations where others misuse alcohol**
Discuss with your adolescent situations they may be faced with where other people are misusing alcohol. Help your adolescent to develop strategies for handling or removing themselves from situations involving alcohol misuse. Tell your adolescent to call you if ever faced with a situation involving alcohol and assure them that, whatever the circumstances, you will pick them up. Talk about ways to minimise any potential embarrassment that may be associated with getting picked up.

**Prepare your adolescent to deal with the influence of peers**
Peers are a major influence during this time. As your child approaches adolescence, friends and “fitting in” becomes very important, but obtaining acceptance from peers can be difficult. Your adolescent’s friends are a major influence on their decisions about alcohol. They are more likely to drink if their friends do.

However, despite the growing influence of peers, you can still have a positive influence on your adolescent’s alcohol use. A good relationship with your adolescent will reduce any negative influence from their friends.

**Enlist the support of other parents**
Build a support network with other parents. The families of your adolescent’s friends may have different values and attitudes regarding alcohol to yours and this may cause some difficulty in maintaining rules regarding alcohol for your child.

**Dealing with peer pressure to drink**
Your adolescent may find themselves in situations where it is difficult for them to say no to alcohol, because of peer pressure. Try to prepare them by focusing on specific situations that they may encounter and talk about different ways they can deal with peer pressure to drink. Tell your adolescent that the decision whether or not to drink is theirs, and not their friends. Help them develop ways to say no to offers of alcohol before they are faced with situations where this may occur.

**Monitor your adolescent when you are not around**
Adolescents are more likely to misuse alcohol when adults are not around. Monitoring your adolescent’s whereabouts and activities when they are unsupervised reduces the likelihood that they will misuse alcohol. Monitoring refers to knowing about your adolescent’s activities, whereabouts and friends. You should especially know where they are if they or others may be drinking. Before your adolescent goes out, you should:

- Ask them where they will be, what they will be doing, and who they will be with.
- Set a curfew and know what time to expect them home.
- Make arrangements with them about how they will get home safely.
- Ask them to contact you if their plans change.
- Make sure they have a way to contact you.

If giving them money, discuss how much they will need and how it will be spent. Tell your adolescent that you are monitoring their activities not because you are nosey, but because you care about their safety. Most adolescents appreciate their parents monitoring their activities and see it as proof of their parents’ concern for their well-being. Be aware that although monitoring your adolescent’s activities is important in protecting them from alcohol misuse, being overly strict or harsh may cause for Adolescent Alcohol Use.13
POSITIVE COMMUNICATION

Ask your adolescent about topics that interest them and listen to them when they talk. Encourage them to express their opinions during everyday conversations. Be aware that adolescents are often reluctant to talk about sensitive issues such as alcohol. Do not make all one-on-one time with your adolescent a time for serious discussion, as they may begin to avoid these situations. Avoid interrogating them, as this may cause them to be less open with you. Ask open-ended questions rather than ones that have simple “yes” or “no” answers. If you hear something you do not like when talking to your adolescent, try not to respond with anger.

Be prepared to seek help to improve your parenting

Remember that it can be hard to be a parent. Do not hesitate to seek advice if you have difficulties with parenting. You should obtain advice from professional sources if you feel it would benefit your relationship or your communication with your adolescent.

REMEMBER: IT TAKES A VILLAGE TO RAISE A CHILD.

Be involved in your adolescent’s life

Your adolescent is less likely to misuse alcohol if you are involved in their life in a positive way. Spending time with your adolescent facilitates communication between the two of you. Use the following strategies:

• Regularly spend one-on-one time giving them your undivided attention.
• Try establishing a regular weekly routine for doing something special with your adolescent.
• Find ways for your adolescent to be involved in family life, such as doing chores or caring for younger brothers or sisters.
• Engage in activities together as a family on a regular basis.
• Try to include your adolescent’s friends in family activities.

There are a number of things you can do to establish and maintain a good relationship with your adolescent, such as:

• Support them in pursuing their interests and in dealing with problems.
• Show an interest and be involved in their life.
• Work to create open communication between yourself and your adolescent.
• Cultivate their trust by being consistent in following through on promises and enforcing rules.
• Regularly demonstrate that you care about them.
• Regularly tell them that you love them.

Support your adolescent in dealing with problems, stress and coping with disappointment.

Encourage them to discuss their problems and concerns with you. Give them a chance to solve their own problems, as this will help them build self-esteem and encourage them to accept the consequences of their choices. Admit if you do not have all the answers, as this will encourage their respect.

Encourage your adolescent to use healthy approaches for dealing with stress, like exercise, music or talking over problems. Monitor them for signs of high stress and mental health problems such as anxiety or depression, as adolescents with these problems are at an increased risk of alcohol misuse.

Help your adolescent feel good about themselves

There are a number of ways you can help your adolescent to feel good about themselves:

• Ensure that your positive comments outweigh your negative comments when you talk to them.
• Praise them for good behaviour.
• Praise them for their efforts as well as their achievements.
• Do not tease them in a way that could be perceived as hurtful.

GOOD COMMUNICATION BETWEEN YOU AND YOUR ADOLESCENT CAN REDUCE THE RISK OF THEM MISUSING ALCOHOL. TALK REGULARLY WITH YOUR ADOLESCENT ONE-ON-ONE. ALSO TRY TO EAT DINNER TOGETHER AS A FAMILY TO FACILITATE GOOD COMMUNICATION.
REPUTABLE WEBSITES TO FIND INFORMATION ABOUT ALCOHOL

- Alcohol Advisory Council of New Zealand
  www.alcohol.org.nz
- Australian Drug Foundation
  www.adf.org.au
- Australian Drug Information Network (ADIN)
  www.adin.com.au
- Between the Lines
  www.betweenthelines.net.au
- Community Alcohol and Drug Services
  www.cads.org.nz
- Foundation for Alcohol and Drug Education
  www.fade.org.nz
- National Drug and Alcohol Research Centre (NDARC)
  www.med.unsw.edu.au/ndarc
- Somazone
  www.somazone.com.au
- Turning Point Alcohol & Drug Centre
  www.turningpoint.org.au

ARE YOU CONCERNED ABOUT OR AFFECTED BY ANOTHER PERSON’S ALCOHOL OR DRUG USE? CADS (COMMUNITY ALCOHOL AND DRUG SERVICES) CAN HELP YOU! CADS OFFER INFORMATION AND SUPPORT OVER THE PHONE, A WALK-IN SERVICE EVERY WORKING DAY BETWEEN 10.00AM AND 1.00PM (NO APPOINTMENT NECESSARY), FAMILY AND FRIENDS WEEKLY GROUPS AND MONTHLY INFORMATION EVENINGS, AND A ONE-TO-ONE COUNSELLING SERVICE. THIS IS A FREE SERVICE. PHONE 09 845 1818 OR VISIT WWW.CADS.ORG.NZ.
CHAPTER 7: PARTIES AND AFTER-SCHOOL TIME

After-school time
After-school hours are an important time for adolescents. It is also a time when it can be difficult for parents to find care for their adolescent, especially when both parents are working.

The time between 3.30pm and 6.00pm is the peak time when unsupervised adolescents are at greater risk of participating in anti-social behaviour, such as alcohol and drug use and juvenile crime. It is also a time when they can misuse chat rooms and the internet.

It is important to know where your child is after school and have negotiated both appropriate internet usage and after-school activities. Blended families are encouraged to be consistent between households.

Some common sense ideas to monitor the whereabouts of your adolescent after school
• Know what activities your child is involved in after school.
• Check your child has arrived home safely by using the home phone to establish that he or she is in fact at home.
• Make an agreement in advance as to what the expectations are for after school arrangements.
• Encourage chores such as cleaning up, preparing dinner, taking clothes off the line etc. and do not forget to acknowledge this assistance as it provides meaningful contributions to family life.
• Discourage unsupervised gatherings at your house after school.

The Internet
After school is also a favourite time to access the internet. While being in cyberspace can provide legitimate fun, entertainment and knowledge, it can sometimes be risky. There are a number of resources available to support parents in protecting their children. Netsafe is one such organisation, supported by the New Zealand Government. Netsafe is an independent, non-profit organisation that promotes confident, safe and responsible use of the internet or 0508 NETSAFE (0508 638 723). Also see section on Cyber Bullying page 16.

PARTY GUIDELINES: GIVING A PARTY

While some children are very social at an early age, others may only engage in social gatherings or the party scene much later in their schooling. Managing and being comfortable about a teenager’s peer interaction is important to both parents and their children.

For some families, adolescent parties cause concern and controversy. There are considerable differences between families regarding what is thought to be appropriate at different stages of the student’s development. These differences, together with the different expectations of adolescents and parents, can create problems when managing parties.

Hosting a party
Careful planning is essential for a successful party. Some of these suggestions may seem extreme, but we have attempted to cover most eventualities in order to help you avoid some of the problems other parents may have experienced. Be aware that the larger the party, the greater the risk of problems.

No one wants to stop their adolescent from having a good time, but a little planning may prevent the memories of the celebration becoming a nightmare. Awareness of potential problems can help ensure an enjoyable and successful party.

Most importantly, parents should discuss all these ideas with their adolescent and listen carefully in turn to his or her ideas and opinions.

These are guidelines only. Parents need to sort out what works for their family and to modify ideas as their adolescent matures.

Preparing to host an adolescent party
Establish and enforce a rule that your adolescent is to obtain your permission before holding a party or gathering in the family home or elsewhere. When hosting an adolescent party, consider advice provided by reputable “partysafe” websites such as those produced by the Australian Drug Foundation (www.adf.org.au). Make sure the party is adequately supervised by one or more adults. You should know strategies for de-escalating potential violence (see Strategies for de-escalating aggression page 22). You should also consider how you will prevent or manage gatecrashers. Plan age-appropriate activities together with your adolescent to take the focus off drinking at the party.

Make it clear to your adolescent and guests that drunkenness will not be tolerated and have a strategy prepared for if someone drinks too much.
• Make sure a responsible adult who knows first aid is present at the party.
• You should also limit your own alcohol consumption.
• Make sure that guests have a safe ride to and from the party with a responsible adult.
• Do not allow guests who have been drinking to drive home from the party.
• Establish and maintain a good relationship with your adolescent child.

Invitations
• Do not issue verbal or group invitations to parties.
• Individualise and number the invitations. Avoid ones that can be photocopied, faxed, e-mailed or put on the Internet.
• Give specific start and finish times appropriate to the relevant age group.
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- Note if alcohol will be available or not (see King’s College Guidelines page 29).
- RSVPs are essential for compiling a list of those expected to attend.
- Entry to the party should be strictly by presentation of the numbered invitation and the individual’s name being on the RSVP list. Providing wrist bands with the invitation is a good way to monitor the invitation list.

Venue
- Consider the suitability of the venue for the number attending e.g. toilet facilities.
- Have only one entry/exit point.
- Is it possible to secure the area? Can you stop people jumping over the fences?
- Is there a secure room where bags/coats can be kept?
- Set aside an appropriate area for smoking.

Behaviour
- Consider the standards of behaviour you expect and stand firm about these expectations. More parents and young people are keen to support you than you might expect.
- Consider how to deal with a situation where a student is behaving badly.
- If an uncontrollable situation develops don’t hesitate to call the police.
- If a student is unwell, drunk, vomiting etc. contact their parents. If they are unavailable, have a contingency plan in place e.g. ring for an ambulance or medical assistance.

Alcohol
- Consider the age of the guests, the size of the group and knowledge of your adolescent’s friends when deciding whether or not to allow alcohol at the party. Remember it is an offence to provide alcohol to minors.
- If BYO, place a strict limit on quantity and type brought by each student, and be aware this is extremely difficult to control. You need to monitor and manage this throughout the event.
- Supply plenty of soft drinks, food and water.

PARENTAL / ADOLESCENT ALCOHOL AGREEMENT: POINTS TO CONSIDER

Decide whether to allow alcohol consumption
Never allow alcohol consumption at parties for adolescents under the age of 18. Before hosting a party for older adolescents, it is important to make a clear decision about whether or not to allow alcohol. When making this decision, be aware of the legal responsibilities of hosting an adolescent party where alcohol is consumed. It is illegal to provide alcohol to a person under 18; see www.justice.govt.nz. If you have decided not to allow alcohol at the party, explain to your adolescent the reasons why.

How to prevent alcohol misuse at parties where alcohol is allowed
If you have decided to allow alcohol at a party for older adolescents, implement strategies to prevent alcohol misuse by guests (see Reputable “Partysafe” Websites on page 25). Discuss the rules regarding alcohol with your adolescent before inviting people to the party.

MAKE SURE THAT PARENTS OF GUESTS ARE INFORMED THAT THERE WILL BE ALCOHOL AT THE PARTY, AS WELL AS THE RULES YOU WILL HAVE IN PLACE TO PREVENT ALCOHOL MISUSE. BE PREPARED TO CONFISCATE ALCOHOL IF NECESSARY, AT LEAST FOR THE DURATION OF THE PARTY.

Encourage a “harm minimisation” approach to managing your adolescent’s alcohol intake at parties and gatherings. Some guidelines for young people to follow:
- Eat first. Consider eating at home before going out and drinking or eat whilst drinking. If you have a full stomach, alcohol will be absorbed more slowly.
- Start with a soft drink or water. You will drink much faster if you are thirsty, so have a non-alcoholic drink to quench your thirst before you start to drink alcohol.
- Use the Standard Drink Guide (on page 30). Monitor how much alcohol you drink. By converting what you drink into standard drinks it is easier to keep track.
- Drink alcohol slowly. Take sips not gulps.
- Avoid salty snacks. Salty food like chips or nuts make you thirsty so you will drink more.
- Drink at your own pace, not someone else’s, and only have one drink at a time. Don’t let people top up your drink, as this can also lead to your drink being “spiked”.
- Pace yourself. Alternate your drinking with a non-alcoholic drink.
- Stay busy. If you have something to do you tend to drink less. Play pool or dance; don’t just sit and drink.
- Try a low-alcohol alternative such as light beer or a cocktail.
• Be assertive. Don't be pressured into drinking more than you want or intend to. Tell your friends "thanks, but no thanks".

Security
• If the party is to be large, enlist the help of other parents with security, the bar and food preparation.
• Consider employing professional security guards, especially for larger parties.
• Compile a checklist of names of students expected to attend and insist each name is checked against the guest list before an individual is allowed to enter the party. It may be useful to check the name against some form of ID such as a driver licence.
• Parents/security guards should be at the entrance to check invitations before allowing entry.
• Regardless of invitation, be firm when preventing access to the party to students who are already inebriated or who are behaving badly.
• It is recommended all bags and coats are held in a secure room (under adult supervision) to avoid theft.
• It is advisable not to allow students who have left your party to return.
• Restrict access to areas of the venue, particularly in a private home.
• Consider the removal of all valuable items from the area where the party is to be held, to avoid problems of breakage and theft.
• Out of courtesy, notify your neighbours.

Legal considerations for hosting parties
• Parents have a clear duty of care to adolescents (both their own children and those of other parents) under their supervision.
• It is wise to check the public liability component of your home insurance policy before agreeing to hold a party.
• Adults should be aware of the ramifications of allowing inebriated adolescents to leave their premises without the supervision of a responsible adult.1

Sale and Supply of Alcohol Act
On 18 December 2013, the new Sale and Supply of Alcohol Act came into force. This act replaces the Sale of Liquor Act 1989. The new act is wide-ranging and has the specific purpose of "reforming" (making changes intended to improve) the law relating to the sale, supply and consumption of alcohol. In other words, the object of the Act is that the sale, supply and consumption of alcohol should be undertaken responsibly and that the harm caused by the excessive or inappropriate consumption of alcohol should be minimised.

The Act allows for fines to be imposed for a variety of offences (for example it will be an offence for a person under the legal purchase age to purchase alcohol from licensed premises and the underage person can be fined up to $2,000 upon conviction). Previously only the seller would be prosecuted, now both seller and purchaser will be.

Section 241 of the Act makes it an offence to supply alcohol to minors: Please see below, highlighted, the relevant subsections that will require parents who either provide alcohol to their own children or to the children of other parents to do so in a responsible manner and with that parent’s express consent.4

Sale and Supply of Alcohol Act 2012
Section 241
Supplying alcohol to minors:
(1) A person who supplies alcohol to a minor commits an offence.
(2) A person who commits an offence against subsection (1) is liable on conviction to a fine of not more than $2,000.
(3) It is a defence to a charge under subsection (1) if the person supplying the alcohol (the supplier) -
 a. is a parent or guardian of the minor, and supplies the alcohol in a responsible manner; or
 b. believes on reasonable grounds that the minor is not a minor; or
 c. believes on reasonable grounds that subsection (7) applies to the minor, and supplies the alcohol in a responsible manner; or
 d. believes on reasonable grounds that he or she has the express consent of the parent or guardian of the minor, and supplies the alcohol in a responsible manner.
(4) When considering for the purposes of subsection (3) (a), (c) or (d) whether alcohol was supplied to any person in a responsible manner, the court may, in relation to the occasion on which the alcohol was supplied, take into account the following: HOST RESPONSIBILITY
 a. the steps taken by the supplier to supervise the consumption of alcohol.
 b. whether food was provided with the alcohol.
 c. whether a choice of low alcohol or non-alcoholic beverages, or both, was offered.
 d. the nature of the occasion.
 e. any arrangements for, or provision of, safe transport.
 f. the period over which the alcohol was supplied.
 g. the strength and volume of the alcohol supplied.
 h. the age of the minor.
 i. any other matter it thinks relevant in the particular circumstances.
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(5) Subsection (1) applied irrespective of any liability that may attach to the licensee or any manager or other person in respect of the sale or supply of the alcohol.

(6) A person does not commit an offence against subsection (1) by supplying alcohol to a person who then supplies it to a third person who is a minor, unless it is proved that the person knew or had reasonable grounds to believe that the alcohol was intended for a minor.

(7) This subsection applied to the minor at any time if he or she is then no longer subject to guardianship by operation of section 28 of the Care of Children Act 2004.

It is acknowledged that teenagers are sometimes under immense peer pressure and we further acknowledge the pressure that parents might face as a result. We hope that knowledge of the new legislation will provide parents with the tools and the courage to say “no” and help them understand that whilst they might hold the misguided belief that they can ‘safely’ provide an environment for young people to drink alcohol; this is often not the case especially in this modern age of digital social networking.

PARTY GUIDELINES: PARENTS OF A PARTYGOER

• Discuss with your adolescent how they can manage party pressures and potential problems.
• Always insist on as much detail as possible about the party, for example:
  • Where is the party going to be held?
  • Will there be adults in attendance and how many?
  • What time will it end?
  • What security measures are in place?
• Discuss drinking alcohol and your expectations with your teenager, calmly and well before the day of the party.
• Agree on pick up only from the party venue.
• Tell your adolescent it is completely alright if he or she wants to be collected earlier than expected. Pick a code phrase, such as “I feel really sick” or “I have a toothache”, which your adolescent can use as a cue for you to come and pick them up any time, no questions asked.
• Know where your son or daughter is. Let them know where you can be reached at all times and that they may telephone you for a ride home whenever they need to and for any reason.
• Be at home while your adolescents are getting ready to go out and be awake when they get home. It will be easier for you to determine whether they have been smoking, drinking or using other drugs.
• If your adolescent appears to be under the influence of drugs or alcohol when they arrive home, use the “How to communicate with your adolescent when they have been involved with drugs and alcohol” (see pages 21 and 22).

KING’S COLLEGE GUIDELINES ON PRIVATE PARTIES FOR STUDENTS

King’s College does not support nor encourage the provision or facilitation of any alcohol to students under the age of 18. We do not recommend that parents organise events where such provision of alcohol to minors is intended, supported or likely. New Zealand laws, including liquor licensing provisions, are designed in part to prevent, minimise or delay the consumption of alcohol by minors to protect their health and welfare. King’s College supports these aims.

As a College we encourage parents to be fully informed about the legal, health and well-being risks associated with their sons and daughters attending such events. In regard to the broader issues of alcohol, parties and minors, the decisions of parents to allow their sons and daughters to attend any social events with or without alcohol is one for them to make as responsible parents, according to their values and relationships with their children.

Adults have a range of safeguards to exercise including: saying no, providing education and information about risks and safe behaviour, and having authentic, “what should you do if this happens?” discussions with their children. Saying ‘no’ may sometimes make us unpopular with adolescents, but it may make us responsible parents, and we will not be on our own.

Scientific and research evidence indicates that the earlier young people drink alcohol, the greater the actual and potential harm and risk to them. Similarly, brain development is incomplete in most boys and girls until their mid-20s, and this fact limits their higher order decision-making abilities in relation to risk-taking.

Conversely, there is no compelling evidence that under 18s can be ‘taught to drink’ by attending large-scale parties organised by well-intentioned groups of parents at which liquor is provided free, sold or brought in by the children themselves.

Parents need to be fully aware of the new legal considerations which are listed in detail on page 28 concerning sale, supply and consumption of alcohol.

The College supports these recent changes to the law and will continue to provide significant guidance to our community via targeted seminars to all senior school students, staff and voluntary presentations for our parent community.
A QUICK GUIDE TO HOW MUCH ALCOHOL YOU'RE DRINKING

The following is a guide to how many standard drinks there are in a whole range of drinks – so you can easily see how much alcohol there is in your choice of drink.

This is only a guide. Always check the label to be sure of how many standard drinks you are drinking.
RESPONSIBLE USE OF LEGAL DRUGS

Drugs pervade society on a daily basis. Not all drugs are illegal, in fact many adults and children are prescribed drugs by qualified practitioners to combat illness or disease. Most harm occurs in society due to the abuse of legal substances such as alcohol, cigarettes, painkillers, sleeping tablets and other prescription drugs.

Legal – non-prescribed drugs

Although non-prescribed drugs are sold over the counter, these drugs are still not without risk. While these are widely available, adolescents seeking a rush may consume painkillers, which may have addictive qualities and be harmful with increased use. Also many over-the-counter medications are used in the manufacture of illicit drugs.

Legal – prescribed drugs

Caution should always be exercised when taking any medication.

- Medication should only be used by the person for whom it was prescribed.
- Medication should only be taken for the purpose for which it was intended.
- The dosage should be strictly adhered to; over medicating could have serious if not fatal implications - more is not better.

Tobacco

It is illegal for any school-age child up to 18 years old to buy tobacco. Smoking tobacco can lead to cancer and premature death. Nicotine is a highly addictive drug contained in all tobacco products. Nicotine affects the chemistry of the brain, regulating thinking and feelings. Early use of tobacco may predispose adolescents to depression, which could lead to other drug use.

Alcohol

Alcohol is a drug that slows down the brain and the nervous system. It is the most widely used drug in New Zealand. Drinking a small amount is not harmful for most people, but regular drinking of a lot of alcohol can cause health, personal and social problems.

The use of a ‘Standard Drinks Guide’ helps to monitor the amount of alcohol consumed. The label on a can or bottle shows the number of standard drinks it contains. One drink is not always one standard drink. Any drink containing 10g of alcohol is a standard drink.¹

While these are guidelines, it is important to note the effect of alcohol varies greatly from person to person. Some adolescents can manage much less than others.

Alcohol, drugs and sex

Alcohol and other illicit drug taking can greatly affect the ability to behave or think rationally.

One in four adolescents report they were either drunk or high during their most recent sexual encounter.

Most adolescents do not practise safe sex.

Illegal drugs

Unlike legally commercially available drugs, there is no quality control of illegal drugs. These products are not made by pharmaceutical companies who have the best interests of their clients as their focus. Illicit drugs are made by unknown people, in backyard chemical factories who are solely motivated by personal greed and quick profit. Their ingredients are illegally obtained and the contents of their potions are unknown. They pose an unacceptable risk.

YOUR ADOLESCENT’S SOURCES OF DRUG INFORMATION MAY NOT ALWAYS BE ACCURATE, OR HAVE THEIR BEST INTERESTS AT HEART, BUT YOU DO. THAT’S WHY IT IS IMPORTANT FOR YOU TO KNOW ABOUT THE DRUGS YOUR CHILD MAY BE EXPOSED TO AND FOR YOU TO COMMUNICATE THE CONSEQUENCES ASSOCIATED WITH THEM.
### COMMON ILLEGAL DRUGS AND THEIR ATTRIBUTES

<table>
<thead>
<tr>
<th>SUBSTANCE</th>
<th>FORM</th>
<th>WAYS OF TAKING</th>
<th>DID YOU KNOW?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOBACCO</strong></td>
<td>A ground up brown leaf which is rolled into cigarettes and cigars or smoked in a pipe.</td>
<td>Smoked, Chewed</td>
<td>Smoking kills over 4,500 New Zealanders each year. Half of all long-term smokers die early because of their smoking. Tobacco was used to treat colds and headaches in the 16th Century.</td>
</tr>
<tr>
<td><strong>CAFFEINE</strong></td>
<td>A component of coffee, tea, some soft drinks, energy drinks, over the counter tablets and also in chocolate.</td>
<td>Orally</td>
<td>Coffee was first cultivated in Yemen in the 6th Century. The giant company Lloyds of London began as a coffee house in the early 1700’s.</td>
</tr>
<tr>
<td><strong>PARTY PILLS (BZP)</strong></td>
<td>Pills and capsules.</td>
<td>Orally</td>
<td>Most contain synthetically produced substances including benzylpiperazine (BZP) and trifluoromethylphenylpiperazine (TFMPP) originally used in cattle drench.</td>
</tr>
<tr>
<td><strong>ECSTASY (MDMA)</strong></td>
<td>Small tablets of varying colours or a white to light brown powder.</td>
<td>Orally</td>
<td>Ecstasy was first patented in 1914 as an appetite suppressant. Ecstasy is most often used by people at parties, nightclubs and raves.</td>
</tr>
<tr>
<td><strong>COCAINE (COKE) CRACK</strong></td>
<td>White powder.</td>
<td>Snorted, Injected, Orally, Smoked (crack)</td>
<td>Extracted from the leaves of the coca plant found in the Andes in South America. The original Coca Cola recipe contained cocaine but it was eliminated in the early 1900’s.</td>
</tr>
<tr>
<td><strong>AMPHETAMINE (SPEED) METHAMPHETAMINE (P)</strong></td>
<td>Pills, liquid, powder and crystals.</td>
<td>Orally, Injected, Smoked, Snorted</td>
<td>Mostly produced in home laboratories locally and overseas. Amphetamine was first produced in 1887. During World War Two soldiers were given amphetamine to combat fatigue and increase endurance.</td>
</tr>
<tr>
<td><strong>MAGIC MUSHROOMS</strong></td>
<td>Either dried mushrooms or a white crystalline powder.</td>
<td>Orally</td>
<td>Status of mushrooms from 500BC have been found in Guatemala. Mushrooms were used by native people in rituals.</td>
</tr>
<tr>
<td><strong>DATURA</strong></td>
<td>An annual weed which grows to two metres high and has funnel shaped flowers.</td>
<td>Orally</td>
<td>The Aztecs used various species for magical and religious purposes. The main active chemicals are atropine, scopoline and hyoscyamine.</td>
</tr>
<tr>
<td><strong>ALCOHOL</strong></td>
<td>Colourless, odourless liquid (ethanol). A wide variety of alcoholic drinks are available.</td>
<td>Orally</td>
<td>More than 75 percent of adults consume alcohol. The alcohol in a standard drink takes approximately one hour to be broken down by the liver.</td>
</tr>
<tr>
<td><strong>CANNABIS</strong></td>
<td>Three forms: Marijuana, given dried plant material. Hashish, compressed brown/black resin. Hash oil, a thick black liquid.</td>
<td>Smoked, Orally</td>
<td>Cannabis contains over 400 different chemicals. About 60 of these chemicals (cannabinoids) affect the brain. THC (delta-9-tetrahydrocannabinol) is the main psychoactive chemical in cannabis.</td>
</tr>
<tr>
<td>SHORT TERM EFFECTS (LOW DOSE)</td>
<td>SHORT TERM EFFECTS (HIGH DOSE)</td>
<td>EFFECTS OF LONG-TERM, REGULAR USE</td>
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<tr>
<td>Tobacco contains over 4,800 chemicals. Nicotine causes increased attention and concentration, suppresses appetite and increases heart rate. Taste buds and sense of smell are impaired. Lasts up to two hours.</td>
<td>The dose taken is usually constant (one cigarette at a time). The effects are the same as before. First time users usually cough, feel dizzy and experience nausea.</td>
<td>Nicotine is a highly addictive drug. 26 percent of New Zealanders are regular smokers. It is not the nicotine which causes the main health problems but other chemicals in the smoke. Health problems include lung cancer, cancers of the mouth and throat, heart disease, atherosclerosis, high blood pressure, bronchitis and gangrene.</td>
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<tr>
<td>Increased alertness, concentration and urine production. May be effective in treating headaches if ingested early as it constricts blood vessels in the brain. Lasts two to four hours.</td>
<td>High doses often cause nervousness, irritability and can trigger panic attacks. About four caffeine tablets could be toxic for a small child.</td>
<td>Overall, caffeine is a fairly safe drug if a healthy person takes it in moderate amounts. Dependence can occur and there is a possibility of an irritable stomach and digestive system. If use ceases, fatigue and headaches may occur. Withdrawal can last up to a week.</td>
<td></td>
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<tr>
<td>People usually feel wake and happy. Using party pills can alter perception and cause dehydration and sweating.</td>
<td>Hallucinations, vomiting, anxiety, panic attacks, paranoia, heavy sweating and occasionally coma and death. The risks are greater for people with high blood pressure, a heart condition or epilepsy,</td>
<td>The long term effects are not yet known but it could lead to long term changes in the way the brain produces chemicals naturally because using BZP and TFMPP causes chemical changes in the brain.</td>
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<tr>
<td>Initial feeling of self-confidence, increased alertness, talkativeness and a feeling of well-being. Increased heart rate and blood pressure. Decreased appetite. Lasts up to four hours.</td>
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<tr>
<td>Nausea and vomiting, heart rate can increase by up to 50 beats per minute, very dry mouth and mouth and throat, heart disease, increased heart rate and blood pressure, decreased appetite, dry mouth, talkativeness, irritability. Lasts up to five hours.</td>
<td>Paleness, dizziness, headaches, blurred vision, aggression, tremors, irregular heartbeat, loss of coordination, hallucinations. Stroke or heart failure is possible if an overdose is taken.</td>
<td>Depression and general poor health. Malnutrition as appetite is suppressed. Frequent users can develop a psychosis with hallucinations, delusions and bizarre behaviour. They can also experience complete physical exhaustion.</td>
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<tr>
<td>Similar to LSD but can last up to nine hours.</td>
<td>Similar to LSD. High doses may cause vomiting. The biggest danger with mushrooms is choosing the wrong ones. There are many different types and some species are highly toxic.</td>
<td>Rapid tolerance develops. The more often LSD is taken the higher the chance of a bad top. Bad trips are often caused by drugs other than LSD being present. Flashbacks may occur months after taking LSD. These are brief visual flashes of a previous experience with the drug.</td>
<td></td>
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<tr>
<td>Nausea and vomiting, heart rate can increase by up to 50 beats per minute, very dry mouth and mouth and throat, heart disease, increased heart rate and blood pressure, decreased appetite, dry mouth, talkativeness, irritability. Lasts up to five hours.</td>
<td>As sweating and perspiration are prevented, the body overheats. Delirium, confusion, babbling, coma and possibly death. Many deaths are due to accidents e.g. falls, drowning.</td>
<td>Permanent eye, heart and brain damage.</td>
<td></td>
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<tr>
<td>Relaxation, loss of inhibitions, increased confidence, red cheeks, reduced coordination. Fizzy alcoholic drinks cause the alcohol to be absorbed more quickly.</td>
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<tr>
<td>Relaxation, laughter, increased appetite, blood-shot eyes, impaired judgment and coordination, increased heart rate, slowed perception of time. These effects are followed by drowsiness and sedation. Lasts up to five hours.</td>
<td>Can experience paranoia and panic. Potent cannabis may cause mild hallucinations.</td>
<td>Increase risk of lung cancer, cancers of the mouth and throat, bronchitis. Heavy use may trigger schizophrenia in vulnerable people. Memory and attention can be affected and it is not known if this is reversible.</td>
<td></td>
</tr>
</tbody>
</table>
CHAPTER 9: LEGAL FACTS

Tobacco smoking
In New Zealand, alcohol and tobacco smoking is legal but regulated; you have to be 18 years of age or over to purchase either tobacco or alcohol, and there are rules about where and when you can drink alcohol or smoke.

It is illegal to smoke inside any clubs, bars, restaurants, theatres, or on public transport. Smoking is permitted in some places outdoors.

Smoking is becoming increasingly unpopular with New Zealanders and many people find it offensive. If you smoke in public areas, try and smoke in areas where your cigarette smoke will not bother other people.

Alcohol
It is illegal to drink alcohol and drive.

In some cities it is illegal to drink alcohol in public places, such as in the streets or parks, and many cities and towns enforce alcohol bans over the New Year period when a lot of people go out to celebrate.

Alcohol is sold in liquor stores and licensed beer and wine stores. Most supermarkets and some convenience stores also sell beer and wine.

It is illegal to buy alcohol if your under 18 years of age and it is also illegal to supply alcohol to anyone who is under 18. See Sale and Supply of Alcohol Act 2012 Section 241 (see page 28).  

Although alcohol is widely consumed at social events in New Zealand, it is just as acceptable and quite normal not to drink alcohol at all.

For more information about alcohol use in New Zealand, go to the Alcohol Advisory Council website at www.alcohol.org.nz

18 Plus Card
The minimum legal drinking age in New Zealand is 18 years. If young people wish to purchase alcohol or access licensed premises they need to provide photographic proof of age.

The acceptable forms of ID are a New Zealand or overseas passport, a photographic New Zealand driver licence or a HANZ 18+ card.

You can get an application form for an 18+ card from www.hanz.org.nz or pick one up at a New Zealand Post Shop.

The card will cost you NZ$20. You will need to fill out a statutory declaration and provide certain documents to prove you are over 18 years of age and that you are who you say you are.

Drugs
Illegal drugs include such things as marijuana, “magic mushrooms”, LSD, ecstasy, methamphetamines, cocaine and heroin.

Possession of any of these drugs is against the law and carries a penalty that may include imprisonment.

Ecstasy or “e” comes as a capsule with brownish powder inside or as a pill, usually imprinted with a symbol like a heart or happy face. You should refuse these drugs if they are offered to you. There are considerable risks in consuming them and they are illegal.

For more information about drugs, go to the New Zealand Drug Foundation website at www.nzdf.org.nz.
Alcohol and drug help lines
There are a number of places to go to for assistance if you or someone you know needs help or advice with regard to issues relating to alcohol or drugs.

Your local Citizens Advice Bureau office is in the phone book or you can call them on their free phone number 0800 367 222. You can also visit the CAB website at www.cab.org.nz.

Some Citizens Advice Bureaus have interpreters to help non-English speakers.

UNDERAGE DRINKING

What you can do
If you are under 18 and are with your parent or legal guardian you can:

• Drink responsibly in a private home or at a private function like a family BBQ or 21st party.

• Go into a supervised area of bars and pubs (that’s most bars – but to be sure – check the licence).

What you can’t do
If you are under 18 and without your parent or guardian you can’t:

• Drink in a public place.

• Go into pubs and bars.

• Buy alcohol or get an adult to buy you alcohol.

• Carry a fake ID or use someone else’s.

Legal alcohol limits for driving
There is a zero alcohol limit if you are under 20. That means if you drive after consuming even one drink you can be charged with drink driving.

A PERSON WHO IS UNDER 18 CAN ONLY BE SUPPLIED WITH ALCOHOL BY THEIR PARENT OR LEGAL GUARDIAN. LAWS ARE BEING TOUGHENED UP FOR UNDERAGE DRINKERS AND THOSE WHO SELL OR SUPPLY THEM ALCOHOL. PENALTIES FOR BREAKING THE LAW HAVE INCREASED.

Drugs and driving
The law says, you must not drive if you have taken any type of drug that may affect your driving ability. If you are prescribed drugs buy a doctor, always ask if they will have any affect on your driving.

A LEGAL GUARDIAN, AS DEFINED BY THE GUARDIANSHIP ACT, DOES NOT INCLUDE OTHER FAMILY MEMBERS LIKE GRANDPARENTS, UNCES AND AUNTIES OR OLDER BROTHERS, SISTERS, SPOUSES OR PARTNERS. NEITHER DOES IT INCLUDE SPORTS COACHES OR ANYONE ELSE TEMPORARILY ACTING IN THE PLACE OF A PARENT.
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Chapter 7
3. Ibid.
5. Retrieved from: www.parentingstrategies.net/alcohol

Chapter 8

Chapter 9

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