

**Talking with
your kids
about drugs**



Australian Government

The Australian Government would like to acknowledge the assistance of the Australian National Council on Drugs.

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The purpose of this booklet is to provide information and guidance to parents on talking with their children about drugs.

'Drugs' are any substances that affect someone's mood, thinking or behaviour, including illicit drugs (where production, sale or possession is prohibited), tobacco, alcohol and some pharmaceutical products.

This booklet, including information about specific drugs and their effects, is a general guide only. Its focus is on illicit drugs and the non-medical use of some pharmaceutical products. The booklet should not be used as a substitute for advice from suitably qualified medical or health professionals.

The support of parents is crucial in the fight against illicit drugs.

This booklet provides you, as a parent or carer, with practical, up-to-date information to help you talk to your children about drugs - what they are, how dangerous they are and how they can affect your family.

The facts about illicit drugs speak for themselves



Teenage drug use

In 2004, 29 per cent of teenagers aged between 14 and 19 years had used an illicit drug in their lifetime.

(Source: Australian Institute of Health and Welfare, 2005)

Obtaining drugs

About 70 per cent of cannabis, cocaine, ecstasy and amphetamine users obtained their drug from friends or acquaintances.

(Source: Australian Institute of Health and Welfare, 2005)

Mental health

In 2004, people aged 18 years and over who had used illicit drugs in the past month were twice as likely to report high levels of psychological distress as those who had not.

(Source: Australian Institute of Health and Welfare, 2005)

The cost to our community

The estimated social cost of illicit drug abuse to the Australian community is around \$6 billion.

(Source: National Drug Strategy, Monograph Series No.49, 2002)

Drug hospitalisations

In 2003–04, there were 8,335 hospitalisations with a principal diagnosis relating to opioids (including heroin), amphetamine, or cannabis.

(Source: Roxburgh, A. & Degenhardt, L. (2006). Hospital stays related to illicit drugs in Australia, 1993–2004. Sydney: National Drug and Alcohol Research Centre)

Drugs and crime

Recent surveys found that 79 per cent of adult males detained on property offences tested positive to a drug of some type (excluding tobacco and alcohol).

(Source: Australian Institute of Criminology, 2006)

In 2004, 10 per cent of sentenced prisoners were imprisoned for drug-related offences. The most common drug-related offence for which people were imprisoned was dealing/trafficking drugs.

In 2005–06, cannabis accounted for 72 per cent of illicit drug arrests. From 1996–97 to 2005–06 the proportion of arrests for amphetamine-type stimulants increased from 5 per cent to 15 per cent.

A 2003–04 study showed that 88 per cent of juvenile detainees had used an illicit drug in the six months prior to their arrest. The study also showed that juvenile detainees were ten times more likely than adolescents in the general population to use amphetamine and hallucinogens and 16 times more likely to use inhalants.

(Source: Australian Institute of Health and Welfare, 2004 and 2007)

Drug deaths

In 2003, there were 1,705 deaths attributable to illicit drugs.

(Source: Australian Institute of Health and Welfare, 2007)

What families can do about illicit drugs.

One of the most effective deterrents to drug use amongst young people is a parent who is devoted to spending time with them. Someone who talks with them about their friends, what goes on at school, the sport they play, what interests them.

The more parents and other family members get involved in children's lives, the more positive young people will feel about themselves and the more likely they will be to respond favourably to their family's views.

Making sure you know where your children are and who they are with doesn't mean you don't trust them, it means that you care enough to be involved.

Always remember that contact with illicit drugs involves the risk of criminal penalties and possibly a criminal record. This means that it is worth spending some time to check a few facts so that you can talk confidently about drugs with young people.

They will be more likely to accept your advice if you don't exaggerate or make false claims.

Remember that you don't need to be an expert about drugs to help a young person choose not to use them.

Will your children listen to you?

When it comes to talking about drugs, extensive research conducted with Australian parents and their children tells us that young people will appreciate your advice and look to you for your views.

But they will expect you to be informed, up-front and honest. And if you show you are listening to them, they are more likely to listen to you.

Regardless of your knowledge and experience of drugs, you have a valuable role to play in talking with your children about drugs. When a young person is considering whether or not to take drugs, an important issue for them is "What will my parents think?" This means that it is very important to make your position absolutely clear that you don't want them to use illicit drugs. Ever.

Again, by being involved in your children's lives, their friendships, school and sporting activities, they will be more likely to look to you for advice, and their self-esteem will be enhanced so they can more confidently resist any pressure to take drugs.

In talking to your children about drugs, be honest, frank and don't assume for a moment that they already know where you stand. They expect you to talk about drugs, so be very plain about what you think. You owe it to them not to leave any room for misunderstanding. It is also important to talk often about the dangers of drug use.

Remember, you are an important role model to your children. What you say, as well as what you do in relation to drugs will have a significant impact on their attitudes towards drugs.

"Parents and guardians have crucial roles to play in determining how well-adjusted and healthy our children will be. It is a responsibility that we cannot take lightly or expect others to take on for us. Children don't get to choose their families and the onus is on us to give them every chance to reach their full potential and become the future we want for Australia."

Dr John Herron, Chairman, Australian National Council on Drugs

Drug information

This section outlines examples of various drugs, their street names (which change over time and have differing use across Australia), symptoms of use and some of the potential consequences of using them.

Anyone can become dependent on (addicted to) drugs. This can include having trouble controlling their use of drugs and continuing to use them even when they realise it is causing them problems. Drugs can become central to a person's life and can affect personal relationships, their ability to study and work, their mental health and quality of life. People can also develop a tolerance to drugs—this is when a person needs to use more of the drug to get the same effect. People can also become physically dependent on some of these drugs. This means that they will experience physical symptoms (withdrawal) when they try to stop using them.

The focus of this book is illicit drugs and the non-medical use of some pharmaceutical products. The information is a general guide only and should not be used as a substitute for advice from suitably qualified medical or health professionals.

Drugs can be classified based on the effects they have on the central nervous system. Broadly, drugs can be categorised as stimulants, depressants or hallucinogens. Some drugs can fall into more than one of these categories. For example, cannabis can be classed as a depressant, but in sufficient doses it can also act as an hallucinogen.

Stimulants increase the activity of the central nervous system. They include amphetamines, ecstasy, cocaine, caffeine and nicotine.

Depressants suppress or decrease the activity of the central nervous system. These drugs can include alcohol, cannabis, sedatives, tranquilisers, sleeping pills and opioid drugs such as heroin and methadone.

Hallucinogens can alter perceptions and sense of time and space. These drugs can include ketamine, LSD, magic mushrooms and cannabis.

Amphetamine-type stimulants

Amphetamine-type stimulants are synthetic drugs which means they are made by combining various chemical ingredients rather than occurring naturally.

Amphetamines are a family of drugs that include methamphetamine. These drugs are similar in their chemical make-up and affect the messages going to the body's central nervous system. Currently, methamphetamines are more common in Australia than other amphetamines. These types of drugs are sold in different forms such as powder, paste, liquid, pills and crystals. The potency of these forms varies, with the most potent being the crystalline form, typically referred to as Ice or Crystal Meth.

Ecstasy is also an amphetamine-type stimulant because it has a chemical structure that is similar to amphetamines. The effects of ecstasy are different from amphetamines and can bring on some of the effects more typically found in hallucinogenic substances.



Amphetamine/methamphetamine

Speed, Base and Ice are currently the most common street names for these types of drugs. They share the same symptoms and potential consequences but can differ in severity.

Speed and Base

Product: Methamphetamine hydrochloride, amphetamine sulphate (powder, paste, liquid and pills).

Street name: Speed, whiz, go-ee, zip, oxblood, base, paste, pure, gas, meth, amphets.

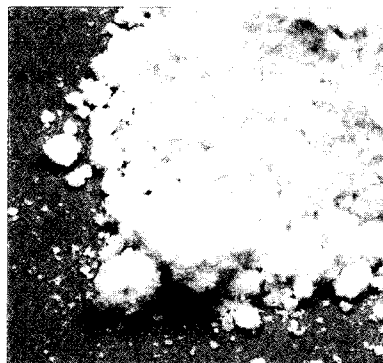
Symptoms: Common responses to intoxication include euphoria, increased blood pressure and pulse rate, increased and irregular breathing and heartbeat, insomnia, loss of appetite and dilated pupils, confidence, increased energy, talkativeness and excitability.

These drugs can cause anxiety, restlessness, sweating, overheating, blurred vision, nausea and diarrhoea, jaw clenching and/or teeth grinding.

Potential problems: Sleep problems, dental problems (e.g. cracked teeth through grinding), weight loss, stroke or

heart problems, high risk of dependence. Injecting the drug is also associated with a risk of contracting blood-borne viruses, like hepatitis C and HIV.

Problems with attention and memory, paranoia and paranoid delusions, anxiety, panic attacks, hallucinations, depression, mood swings, aggression, violence, social and financial problems, compulsive repetition of actions, family arguments and conflict, the risk of family breakdown and losing friends.



Ice

Ice generally looks like colourless crystals or crystalline powder.

The difference between Ice and Speed/Base is the way it is made. The chemicals are the same but Ice is a highly potent drug which increases the severity of the potential consequences.

Product: Crystal methamphetamine hydrochloride

Street name: Ice, meth, crystal, crystal meth, shabu, batu, d-meth, tina, glass.

Other potential problems: In the short term, Ice use can produce increased heart rate, hypertension, irregular body temperature, increase breathing rates, constrict blood vessels and cause heart problems.

Longer-term users of the drug can typically appear older than their age and may have damaged teeth, skin lesions and greater risk of stroke, decreased lung function and

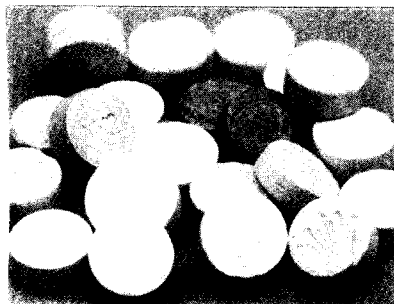
poorer cognitive function. There are also studies that have shown that the use of Ice is associated with brain and mental health conditions, including ruptured blood vessels in the brain, memory loss and psychosis.

Ice users are at risk of experiencing a drug-induced psychosis, they can become paranoid and hallucinate. A person can also become increasingly aggressive and exhibit violent behaviour possibly requiring chemical and physical restraint or police intervention.

There is a high risk of addiction, including through smoking. Damage can occur to lungs through smoking Ice and to the lining of the nose through snorting. If injected it can lead to scarring, abscesses and vein damage.



Ecstasy



Product: MDMA (Methylenedioxy-methamphetamine), ecstasy.

Street name: Ecstasy, E, Ex, E and C, eccy, MDMA, PMA, Adam, XTC, love drug, eggs.

Symptoms: Increased blood pressure and pulse rate, sweating, overheating, jaw clenching, teeth grinding, nausea, anxiety, excitability, tremors, insomnia, enlarged pupils, loss of appetite.

Potential problems: Sleep problems, cracked teeth through grinding, high blood pressure, dehydration, nervousness, hallucinations, memory and attention impairment, decreased emotional control, lethargy, severe depression, possible nerve cell damage, thermal meltdown, death from heart failure.

Cannabis

Product: Marijuana, hashish, Cannabis sativa, delta-9-tetrahydrocannabinol.

Street name: Pot, grass, weed, reefer, joint, Mary-Jane, Acapulco Gold, rope, mull, cone, spliff, dope, skunk, bhong, ganja, hash, chronic, yarndi.

Symptoms: Difficulty concentrating, slow reflexes, impaired motor skills, reduced coordination and concentration, apathy, bloodshot or glassy eyes, increased appetite, dryness of the mouth.

Potential problems: Mood swings, memory impairment, weight gain, chronic bronchitis, increased risk of cancer of the lung, mouth, throat and tongue, panic

attacks, anxiety, depression, paranoid thinking, decreased motivation, interference with reproductive function, learning difficulties, psychological dependence, suicidal thoughts, risk of psychosis and psychotic symptoms. Cannabis serves as a barrier against self-awareness, and may interfere with a young person's development including possible interference with reproductive function.



Cocaine and crack cocaine

Product: Cocaine, crack cocaine.

Street name: Cocaine – coke, flake, snow, happy dust, Charlie, gold dust, Cecil, C, freebase, toot, white girl, Scotty, white lady. Crack cocaine – crack, rock, base, sugar block.

Symptoms: Anxiety, agitation, increased pulse rate, enlarged pupils, paranoia, hallucinations, excitability, euphoria, talkativeness.

Potential problems: High risk of addiction, erratic behaviour, hallucinations, cocaine psychosis, eating or sleeping disorders, impaired sexual performance, ongoing respiratory problems, ulceration of the mucous membrane of the nose, collapse of the nasal septum, cardiac arrest, convulsions.



Depressants



Product: Sleeping pills, minor tranquillisers.

Street name: Benzos, temazzies, Valium, tranks, sleepers, Serapax, serries, Mandrax, mandies.

Symptoms: Drowsiness, confusion, incoordination, slurred speech, depressed pulse rate, shallow breathing.

Potential problems: Anxiety, depression, restlessness, tremors, insomnia, changes in eyesight, high risk of addiction, suicide.

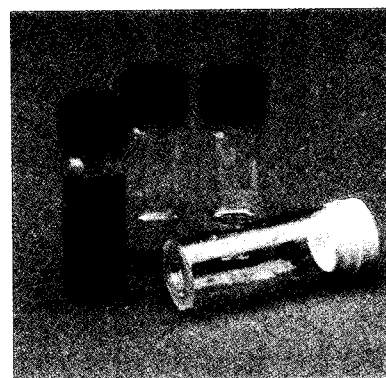
GHB

Product: Gamma-hydroxybutyrate (GHB).

Street name: Fantasy, grievous bodily harm (GBH), liquid ecstasy, liquid E, G.

Symptoms: Drowsiness, induced sleep, nausea, reduced inhibitions, dizziness, headache, increased sociability, initial euphoria leading to confusion and agitation.

Potential problems: Extreme drowsiness, loss of consciousness, hallucinations, difficulty focussing eyes,



vomiting, impaired movement and speech, reduced muscle tone, disorientation, convulsions/seizures, coma, respiratory distress, slowed heart rate, lowered blood pressure, amnesia, death. Can be addictive with prolonged use.

Ketamine

Product: Ketamine hydrochloride.

Street name: Green, K, super K, special K, Vitamin K.

Symptoms: Altered perception, disorientation, drowsiness, hallucinations, numbness, strange muscle movements, nausea, vomiting.

Potential problems: Accidents from lack of coordination, quick development of tolerance, weight loss and loss of appetite, psychological dependence, psychosis, flashbacks, loss of memory, attention and vision impairment.

As Ketamine is an anaesthetic, when used with depressant drugs such as alcohol, heroin or tranquilizers, it can be particularly harmful as it has the potential to shut the body down, causing vital organs such as the lungs or heart to stop functioning.

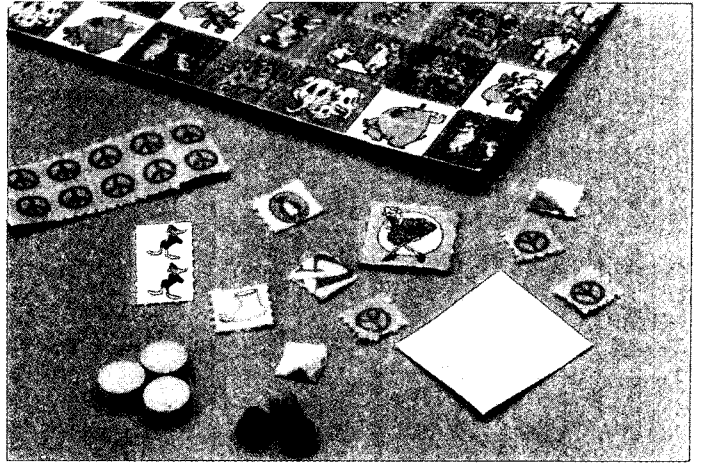
Hallucinogens

Product: LSD (lysergic acid diethylamide), Psilocybin.

Street name: LSD – acid, trips, wedges, windowpane, blotter, microdot. Psilocybin – mushies, blue meanies, magic mushrooms, gold tops, datura, angel's trumpet.

Symptoms: Trance-like state, excitation, euphoria, increased pulse rate, insomnia, hallucinations, paranoia.

Potential problems: Visual hallucinations may produce anxiety and fear, confusion and lack of coordination can result in greater risk of injury, self-inflicted injury, violent behaviour, paranoia, depression, anxiety, unpredictable flashbacks.



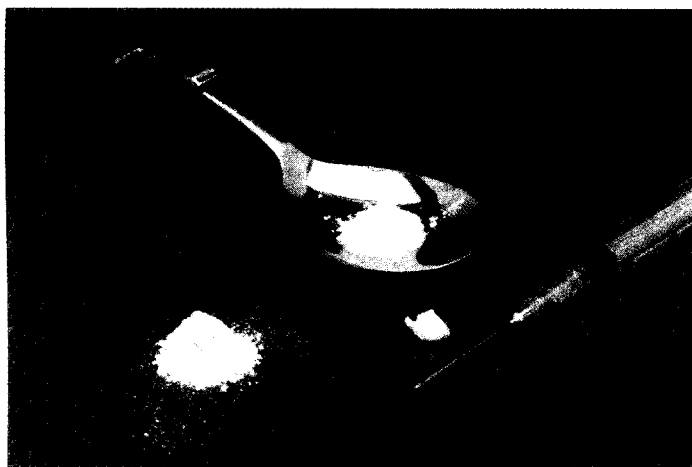
Inhalants

Product: Can include a number of general household and office products – solvents, aerosols, glue, petrol.

Street name: Nitrous oxide – laughing gas, whippits, nitrous. Amyl nitrate – snappers, poppers, pearlers, rushamines. Butyl nitrate – locker room, bolt, bullet, rush, climax, red gold.

Symptoms: Slurred speech, impaired coordination, nausea, vomiting, slowed breathing, euphoria.

Potential problems: Brain damage, paralysis, pains in the chest, muscles, joints, heart trouble, severe depression, fatigue, loss of appetite, bronchial spasm, sores on nose or mouth, nosebleeds, diarrhoea, bizarre or reckless behaviour, suffocation, sudden death.



Opioids

Product: Heroin, morphine, codeine, methadone, buprenorphine, pethidine, Dilaudid, Kapanol, MS Contin.

Street name: Heroin – horse, hammer, H, dope, smack, junk, gear, boy. Morphine – M, Miss Emma, Mister Blue, morph. Methadone – done. Buprenorphine – Bupe.

Symptoms: Lethargy, drowsiness, nausea, constipation, constricted pupils, slowed breathing.

Potential problems: High risk of addiction, mood swings, depression, anxiety, chronic constipation, infection at site of injection, HIV and hepatitis infections through sharing of needles, non-fatal overdose, death from overdose.

Photos: © Australian Drug Foundation 2006. www.adf.org.au



What other facts

There are some basic facts about illicit drugs that everyone should know.

- All drugs carry risks and are dangerous.
- No one can ever be sure of exactly what they are taking.
- Mixing drugs, including alcohol and prescription drugs, can be very dangerous.
- There are no guarantees about purity or strength and no one knows exactly what illicit drugs have been mixed with.
- No one can be sure what effect a drug will have, even if they have used it before.
- Cannabis remains the most commonly used illicit drug in Australia. Among 14 to 19 year olds, about 26 per cent had used cannabis in their lifetime.

(Source: Australian Institute of Health and Welfare, 2005)

How do drugs affect different people?

It is possible for different people to have different reactions to the same drug just as one person may have a different reaction each time they use it. A person's reaction to a drug will vary according to factors such as:

- The type of drug.
- The amount and strength of the drug.
- How the drug is taken.
- A person's body size.
- Whether a person has used the drug before.
- The person's mood and the setting at which the drug is taken such as at a party with friends or on their own.
- Other drugs taken.
The consequences of mixing drugs can be very severe.

“Families play a crucial role in keeping teenagers from harm from alcohol and other drugs, by providing a loving and secure environment and by keeping up a two-way dialogue.”

Professor Robin Room, President, Alcohol and Other Drugs Council of Australia

should you know?

What about drugs and mental health?

While we know that many mental illnesses are caused by physical dysfunction of the brain, we do not know exactly what triggers this. Stressful factors in the environment may trigger or prolong episodes of mental illness. Sometimes mental illness may develop when a person has a strong reaction to a particular drug. More often, it occurs when the person has begun to use too much of the drug.

It is widely accepted that illicit drug use increases the risk of developing a mental illness or making an existing mental illness worse. People who use drugs have much higher rates of mental illness than people who don't.

Anxiety and depression are common with illicit drug use and if left unchecked can have a significant impact on the way a person functions and their quality of life.

Psychosis is also associated with illicit drug use, in particular amphetamines. People experiencing the acute stage of a psychotic illness lose touch

with reality. Their thinking can be confused and they can experience hallucinations such as hearing, seeing and feeling something that is not really there. Sometimes this can lead to paranoid and aggressive behaviour.

Further information about drug related mental health issues can be obtained from the services identified in the back of this booklet.

What about drugs and driving?

Research indicates that cannabis and amphetamine-type stimulants such as speed and ecstasy can seriously impair a person's ability to drive. Studies have shown that illicit drugs are implicated in a significant proportion of road fatalities.

Why do young people try drugs?

Some parents think that young people use drugs only if they are having problems at home or at school. But there are many other reasons:

- Availability and acceptability of the drug.
- Curiosity and experimentation.

- Wanting to be accepted.
- Rebellion.
- Depression.
- As a way to relax or cope with stress, boredom or pain.
- To experience a high or a rush.
- To feel OK, at least temporarily (self-medication).

When do young people try drugs?

There are no hard and fast rules about when young people start trying different types of drugs. However, cannabis use tends to start from the early to mid teenage years while experimentation with drugs such as ecstasy and amphetamines (speed) generally begins in the mid to late teens. Remember that many young people will never use drugs, but some will try them while they are still very young. Some will try drugs, but not continue to use them.

The reasons teenagers give for trying drugs and what you can say

Here are some of the reasons young people give for using drugs and some ideas about how you might choose to respond to them.

“Someone had some and I just thought I’d try it.”

Express your concern and question their decision. Ask whether it was what they expected and talk about the risks of further use. Try and find out if they felt pressured – this may lead to better ways for them to handle a similar situation in the future. Consider using examples of times when you have had to deal with a similar situation.

“I always wanted to try that stuff.”

Ask what made that particular drug appealing, and what they expected to get from it. Questions such as “What did you think it would be like?” and “Why that drug?” may be worthwhile. You may be able to discuss whether they have tried other drugs and if so, why. Say that you’re concerned with their behaviour and try to establish some ground rules.



“All my friends were doing it so I thought ... why not?”

Make your feelings about drug use clear and explain why you don't want them to use drugs.

Ask if they felt it was safe because their friends were using it. Ask why they thought their friends used it and whether they were aware of the risks. Discuss the dangers of experimenting with drugs. It may be useful to discuss the importance of being able to make their own responsible decisions instead of following the crowd.

“It made me feel really good.”

Try exploring the main reason the young person took the drug. Find out how they have been feeling. This is a good time to offer help and to find out if there is anything you can do for them or if they want to talk about another issue. Talk about less risky ways of feeling good.

“All my problems from school, home and life just went away.”

This statement is a chance to really confront other issues. You can express your concern about your teenager using drugs as a means of coping. Let them know that if there are problems, you would like to talk about them. Ask what can be done to make things better. Discuss whether the problems returned after the effects of the drug wore off. Express your feelings about the dangers of using drugs to deal with problems. Make it clear that you want to work together to find a better way of solving their problems.

“It gave me more confidence.”

Let them know that this is of concern to you and explain that they don't need drugs to feel good about themselves. Share your own experiences where you also found it difficult in social situations and explain ways that helped you gain more confidence. These can be both positive and negative experiences. By acknowledging your own behaviour, you will increase your credibility with the young person. Consider ways in which you can help to improve the young person's confidence and self-esteem.

“Well, you used drugs.”

You should be prepared for this type of response if this statement applies to you. You need to be frank and open with your child. Acknowledge that illicit drugs are dangerous and that you would think differently now. You are an important role model.

10 ways

to encourage young people to talk about drugs with you.

1. Be part of their lives

Make sure that you make time for your children. Take an interest in their interests and establish a routine for doing things together. Don't be afraid to ask where your teenagers are going and who they will be with. Spending time together as a family is important. For example, try to talk and eat together every day and find other opportunities to enjoy time together as a family.

2. Listen to them

Showing a willingness to listen will help your children to feel more comfortable about listening to you. Ask for their input about family decisions to demonstrate that you value their opinions. Try not to interrupt or react in a way that will stop further discussion. Encourage them to feel comfortable about telling you their problems.

3. Be a role model

When it comes to drugs, there is no such thing as "Do as I say, not as I do". If you take illicit drugs, you can't expect your child to take your advice. Don't underestimate the influence your behaviour can have on your children, particularly any use of tobacco or misuse of alcohol and medications.

4. Be honest

It is important to be informed but don't pretend to know everything. Be prepared to say "I don't know but I will try and find out". Be honest and clear about where you stand so that your children will find it easier to be honest with you.

5. Pick your moment

Choose the right time to discuss the topic by looking for natural opportunities as they arise. This might be while watching TV, when talking about someone at school or in response to something that was similarly difficult to talk about.

6. Be calm

Being calm and rational is also important. Don't overreact. You should keep the lines of communication open and don't ridicule or lecture. Remember that getting angry will just close the door on further discussion.

7. Avoid conflict

It is difficult to solve a problem when there is conflict. Try to see their point of view and encourage them to understand yours. If a confrontation develops, stop the conversation and return to it as soon as both of you are calmer.

8. Keep on talking

Once you've had a discussion, it's important to have another. Ensure that you are always willing to speak to your children about drugs and start early.

9. Set clear boundaries

Most young people expect and appreciate some ground rules. Allowing them to take part in setting the rules encourages them to take more responsibility for sticking to them. Once you have rules, enforce them and ensure young people know of the consequences of breaking them.

Find and agree to ways young people can act should they find themselves in a situation that exposes them to drugs. For example, let them know that you will always collect them if they need you to, even if it is late at night.

However, make it absolutely clear that you would rather they didn't put themselves in a situation where they are likely to be exposed to illicit drugs.

10. Focus on the positive

Reward your children's good behaviour and emphasise those things they do well. Encourage them to feel good about themselves and let them know that they deserve respect.

How will you know if your teenager is trying drugs?

If you are worried that your teenager is trying drugs, asking them may be a good way to begin. If your children have told you they aren't using drugs, but you are still concerned they may be doing so, there are warning signs that may indicate that a young person is experimenting with drugs.

The following is intended only as a guide, as many of these signs may be as a result of other changes related to development through the teenage years. Please consider how often these warning signs occur, if a number occur at

the same time and the extent to which a young person's behaviour or actions have changed.

- **A drop in school grades.**
- **A reduction in organised extra-curricular activities (such as an unexplained dropping-out of sport or other activities or interests).**
- **Bloodshot or glassy eyes.**
- **Lethargy and loss of motivation.**
- **An unexplained change of friends.**
- **Unusual or irregular behaviour.**
- **Mood swings.**
- **Minimal interaction with the family.**
- **Valuable items or money missing.**
- **Changes in eating patterns.**
- **Agitation, anxiety, jitteriness.**
- **Sleeping problems, including not sleeping.**
- **Aggression.**



What to do if you think your teenager is trying drugs.

It is important that you discuss the issue with your teenager.

Let them know that you are concerned about their wellbeing and that they might be using drugs. You may not be able to discuss this easily, but don't give up. Be open with them so that they are encouraged to be open with you. Otherwise, you won't get the full story of what is going on in their life. Discuss with them what they consider to be the benefits and consequences of using drugs. This may provide an opportunity to give them new information about the risks of drug use.

Where do you go for help?

Don't be afraid to ask for help. A range of services and support is available to help both the person using drugs and their family and friends. Remember that you don't need to handle a drug problem on your own. There are many places in your community – doctor, schools, churches and other organisations – that can provide support. Use the phone numbers at the back of this booklet to get in touch with people who can help and support you.

“Drug use is a terrible scourge on everybody—individuals, families, friends and communities. There are no winners but working together we can significantly reduce the damage and harm it causes. We have seen some real improvements over the past 10 years but there will always be new challenges and we are putting in place one of the best organised responses to drug use seen in the world.”

Dr John Herron, Chairman, Australian National Council on Drugs

No group can tackle the drug problem alone. However, communities working together can make a real difference. That's why the Australian Government has invested over \$1.4 billion under the **Tough on Drugs** initiative.

It is the largest single national initiative ever undertaken in this country to fight the drug problem.

In cooperation with state and territory governments, the Tough on Drugs initiative is a grouping of individuals, families, business, government and community and charitable organisations, each contributing their expertise to tackle the drug problem at its source.

It is an approach that brings together law enforcement, prevention, treatment and education issues.

The Australian National Council on Drugs, representing a variety of views, advises the Government from the front line on the development and implementation of Tough on Drugs.

Complementing Tough on Drugs is the Australian Government's 2006 commitment of \$1.9 billion to a range of services for people with a mental illness, their families and carers. This includes new funding to respond to the needs of drug users who have a coexisting mental illness.



Educating young people at school

Schools are critical places to educate young people against drugs. That's why a National School Drug Education Strategy has been put in place to help parents, teachers, principals and school communities send a strong anti-drug message.

The Australian Government and its state and territory counterparts work together on the strategy, which emphasises prevention and makes it clear that illicit drugs have no place in our schools.

Resources are available to improve teachers' skills and knowledge about drug prevention education and to inform parents and the wider community. Under the National School Drug Education Strategy (1999-2008), the Australian Government has committed more than \$47 million to fund new and innovative drug education programs for students and training for teachers. These include:

- Helping teachers learn more about how to handle the issue.
- Providing information and support to parents.
- Developing better ways for school communities to fight drug misuse in schools.
- Providing material for schools to hold their own local 'forum' to bring students, teachers and parents together on this issue.

Parents have the right to know where their children's school stands on drugs. They also have the right to expect the school to have clear rules on how it will deal

with students found with drugs.

Continuing prevention measures

The National Drugs Campaign is a key element of the Australian Government's efforts to prevent the uptake of illicit drugs and there is strong evidence of its success.

An independent evaluation reported that two in three parents found the campaign made it easier for them to talk to their children about drugs. About two-thirds of young people reported that the campaign had influenced them, primarily to avoid using drugs and situations where they are used, and to think about the consequences of using them. As well, more than half felt that the campaign had made it easier to talk to their parents about drugs.

The Australian Government has invested \$32.9 million in the third phase of the National Drugs Campaign as part of its commitment to ensure that young Australians and their parents have up-to-date information about the dangers of illicit drug use.

A further \$21 million is committed to raising community awareness of the links between illicit drugs and mental health problems as part of the Australian Government's 2006 mental health package.

Strengthening and supporting families

Strengthening and Supporting Families Coping with Illicit Drug Use (Strengthening Families) is an early-intervention, family-focused initiative that helps non-government organisations assist families struggling with or affected

by the problems of illicit drug and substance abuse. This is achieved through education and counselling support services, advice and referral services and targeted projects for families.

Strengthening Families projects enhance emotional wellbeing and communication within families and are specifically directed towards family support, rather than the health, education or criminal aspects of the strategy.

The main focus of Strengthening Families is to provide support for families, including parents, grandparents, carers and children of drug-using parents. The initiative focuses on illicit drugs but recognises polydrug use, as well as the problems arising from the abuse of legal substances such as alcohol and aerosols.

Improving support and treatment

The Australian Government, in cooperation with state and territory governments, has established a national drug treatment network across Australia's cities and towns to provide treatment to those affected by drug use.

In cooperation with health professionals and private and charitable organisations, this network helps to bring treatment, education and support services within reach of those who need it. The Australian Government has provided more than \$142 million to date to over 200 non-government organisations to deliver treatment services across the country. With new funding announced in the 2007 Budget, the Australian



Government will provide more than \$170 million over the next four years to build on this investment and support charitable and non-government organisations to continue to tackle the drug problem at the grassroots level.

A strong effort has been made to ensure that resources reach those with an illicit drug problem in rural and regional areas and to make sure that treatment services meet the needs of families and young people.

Diverting users

In a major initiative, the Australian Government has allocated more than \$340 million to establish a national system to divert illicit drug users into expert assessment and on to necessary education and treatment with the goal of them becoming drug free.

Drug diversion says to users that if they want to be free of the criminal justice system they have a personal responsibility to work to be free of drugs.

Importantly, this approach has the support of state and territory governments which will ensure that the diversion program will not be

available to persistent or violent offenders or those dealing in drugs.

Those who refuse to participate in the scheme will be sent back to the criminal justice system and face the possibility of jail.

In this way drug users will be encouraged to take responsibility for themselves so that they can regain control of their lives.

Finding the answers

The Australian Government has sought to provide a stronger focus on proven treatment methods to assist drug users to recover.

Funding for practical research into drug addiction has been provided to trial and evaluate new treatments, such as naltrexone and buprenorphine.

Along with current methadone and other outpatient, residential and drug-free programs including cognitive behavioural therapy, contingency management and motivational counselling, treatments offer new hope to many people addicted to illicit drugs.

The Tough on Drugs initiative is also supporting the development of an

early warning system for emerging drug problems and the creation of the Australian Drug Information Network as a single point of contact for website information on drug education, prevention, treatment and research.

Stopping drug trafficking

Under the Tough on Drugs initiative, the Australian Government is working to stop trafficking and dealing in illegal drugs and the chemicals used to produce them (also called precursors). Customs officers and federal, state and territory police are working together around Australia to apprehend those who supply and distribute illicit drugs.

Across the country there are more than 46,000 police officers who are working to keep local neighbourhoods, towns and cities safe from crime, including drug-related offences.

Police in local communities are supported by specially trained Australian Federal Police agents and by the more than 5,500 Customs officers who are protecting our borders.

“The Australian Federal Police works hard with its partner agencies to combat illicit drug trafficking into Australia. However, there is only so much that law enforcement agencies can do. As parents, we all have a responsibility to educate our children about the health, lifestyle and criminal dangers associated with drugs. I urge all parents to encourage an open and supportive family environment, where young people can feel comfortable talking to those closest to them about drug-related issues.”

M J Keelty APM, Commissioner, Australian Federal Police, Member of Australian National Council on Drugs



Customs uses sophisticated surveillance resources, including National Marine Unit vessels fitted with satellite video transmission systems and Coastwatch aerial surveillance capabilities, to combat the importation of illicit drugs and their precursors. Customs also employs sophisticated drug-detection technology such as ion scan and x-ray to assess and process passengers and cargo in order to intercept illicit drug importation. The Australian Federal Police has refined and increased its intelligence-led law enforcement practices to proactively target drug trafficking networks. In addition, the Australian Crime Commission is able to exercise special 'coercive powers' in circumstances where traditional law enforcement methods are not sufficient in gaining comprehensive information about drug producers and traffickers.

Australia is also working with other nations to address the international problem of the supply and trafficking of illicit drugs and precursor chemicals. The Australian Government is proactive in initiating joint opportunities to

share knowledge and improve the capacity of the Asia-Pacific region to address issues related to illicit drugs and precursors. The Government has increased cooperation with overseas authorities by establishing a Law Enforcement Cooperation Program and expanding the Australian Federal Police overseas liaison officer network. Other government agencies such as Customs and the Attorney-General's Department are also working to stop illicit drugs and precursors from reaching Australia's borders by promoting better laws and policies within regional countries.

Locally, the Australian Government recognises that industry sectors are often an unwitting source of precursor chemicals and related equipment for illicit drug manufacture. Building partnerships with industry sectors like the pharmacy, plastics and chemicals industries are central to the Government's approach to stopping illicit drug manufacture.

These and other initiatives have contributed to the seizure of record quantities of illicit drugs in Australia

in recent years. Since the inception of the Tough on Drugs initiative, more than 14 tonnes of the most serious illicit drugs (including ecstasy, heroin, cocaine and amphetamine-type substances) have been prevented from reaching Australian streets.

Penalties have also recently been increased for the importation of commercial quantities of illicit drugs and their precursor chemicals. The most serious drug offences now have penalties of life imprisonment and/or a fine of \$825,000 attached, while the most serious precursor offences can attract penalties of up to 25 years and/or \$550,000.

These actions send a clear message that Australians do not tolerate drug crime and that offenders will be caught and punished.

The Australian Government is particularly concerned about illicit manufacture of amphetamines (including Ice) in the community and encourages you to report any suspicions of drug manufacturing to the police.

For more information about this booklet, to order extra copies or to get the booklet in other languages call 1800 250 015 (toll free) or visit the website at www.australia.gov.au/drugs

For information on counselling services or further information about drugs, including alcohol, contact the Alcohol and Drug Information Service in your state or territory.

State and Territory Alcohol and Drug Information Services:

Australian Capital Territory

24 Hour Alcohol and
Drug Telephone Line
(02) 6207 9977

New South Wales

Alcohol and Drug Information Service
(02) 9361 8000
1800 422 599 (rural NSW only)

Northern Territory

Alcohol and Drug Information Service
1800 131 350 (NT only)

Darwin
(08) 8922 8399

Alice Springs
(08) 8951 7580

Queensland

Alcohol and Drug Information Service
(07) 3837 5989
1800 177 833 (rural QLD only)

South Australia

Alcohol and Drug Information Service
1300 13 13 40 (SA only)

Adelaide
(08) 8363 8618

Tasmania

Alcohol and Drug Information Service
24 Hour
1800 811 994 (TAS only)

Hobart
1800 888 236

Victoria

DirectLine
1800 888 236

DrugInfo
1300 858 584

Family Drug Helpline
1300 660 068 (VIC only)

Youth Substance Abuse Service
(YSAS Line)
(03) 9418 1020
1800 014 446 (rural VIC only)

Western Australia

Alcohol and Drug Information Service
(08) 9442 5000
1800 198 024 (rural WA only)

Parent Drug Information Service
(08) 9442 5050
1800 653 203 (rural WA only)

Other services:

If you would like more information on drugs and mental health problems, contact your doctor or one of these services.

Lifeline
13 11 14

Family Drug Support
1300 368 186
www.fds.org.au

Kids Help Line
1800 55 1800
www.kidshelp.com.au

Mensline Australia
1300 789 978
www.menslineaus.org.au

beyondblue
1300 224 636
www.beyondblue.org.au

SANE Helpline
1800 187 263
www.sane.org

Australian Drug Information Network
www.adin.com.au

headspace
www.headspace.org.au

Reach Out!
www.reachout.com.au

Counselling Online
www.counsellingonline.org.au

(Provides professional support online, 24 hours a day, seven days a week, to anyone affected by an alcohol or drug problem in Australia.)

If you find someone who you suspect has passed out from drug or alcohol use, phone **000** immediately for an ambulance. Do not hesitate. If you would like information on how to be prepared to handle a drug overdose, phone the Alcohol and Drug Information Services listed.

For advice on how to quit smoking, call the Quitline on 131 848.

Translating and Interpreting Service..... 13 14 50

للمزيد من المعلومات ولطلب كتيبك باللغة العربية اتصل بخدمة الترجمة الخطية والشفهية على الرقم 13 14 50.

Za više informacija i da naručite knjižicu na bosanskom, nazovite Službu prevodilaca i tumača na 13 14 50.

欲獲得更詳細的資料或預訂中文小冊子，請致電翻譯及傳譯服務處，電話13 14 50。

Za više informacija i kako biste naručili brošuru na hrvatskom, nazovite Službu prevoditelja i tumača na 13 14 50.

برای اطلاعات بیشتر و سفارش جزوه خود به زبان فارسی به خدمات ترجمه کتبی و شفاهی به شماره 13 14 50 تلفن کنید.

Για περισσότερες πληροφορίες και για να παραγγείλετε το βιβλιάρειό σας στα Ελληνικά, τηλεφωνήστε στην Υπηρεσία Μεταφραστών και Διερμηνέων στο 13 14 50.

Untuk informasi lebih lanjut dan untuk memesan buklet dalam Bahasa Indonesia silakan telepon Jasa Pelayanan Penerjemahan dan Juru Bahasa 13 14 50.

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Para obtener mayor información y pedir su folleto en español, llame al Servicio de Traducción e Interpretación al 13 14 50.

Daha fazla bilgi elde etmek veya bu kitapçığın bir kopyasını Türkçe dilinde sipariş etmek için Yazılı ve Sözlü Tercümanlık Servisi'ni 13 14 50 nolu telefondan arayınız.

Muốn biết thêm chi tiết và muốn có sách nhỏ này bằng tiếng Việt, gọi cho Sở Thông dịch và Dịch thuật số 13 14 50.

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**TOUGH ON
DRUGS!**

NATIONAL DRUGS CAMPAIGN

**For more information call 1800 250 015
or visit www.australia.gov.au/drugs**



Australian Government

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