

**Adolescent Substance Abuse:  
Correctly Identifying The Problem To Correct It**  
By Peggy L. Ferguson, Ph.D.

Parents often find themselves in a quandary trying to figure out how to help the adolescent whose behavior, disposition, and mood has changed for the worst. The exact nature of the problem may be eluding them. They use a trial and error problem solving method where they end up trying anything and everything to solve the problem. They try assertive discipline, enrolling their child in extracurricular activities to improve self-confidence or self-esteem, tutors, antidepressants, etc. without really knowing what they are dealing with.

They are often operating under faulty suppositions. Although their child's personality changes can seemingly come out of nowhere, the parent may have identified a link to changes in the family, lifestyle, or other circumstances. Parents tend to point to a geographic move, a divorce, death of a grandparent (or any other significant person), or other major life changes and believes that these changes are the source of the problem.

Much of the time, the personality and behavioral changes they see in their adolescent, are related to substance abuse. And the substance abuse can be linked to those life changes. If there is substance abuse/dependence issue, those life changes may have propelled the child into escalating use of the chemical, which could bring about escalating negative consequences of that drug use.

Most parents do not want to believe that their child has an addiction or drug problem. It is much more emotionally comfortable to believe that their child is having a hard time adjusting to changes in the family or to developmental stage difficulties. Parents are often so invested in "the problem" not being a "drug problem" that they ignore or explain away the first few wake-up calls that they are dealing with addiction.

Classic examples of an alcohol or drug problem that parents often miss include (but are not inclusive):

- 1) Finding drugs in the child's room and believing that the drugs belong to some other child and that your son/daughter is holding them for "Johnny".
- 2) Writing off some anonymous phone call or letter that your child is using, to jealousy, or some other malevolent motivation,
- 3) Explaining your adolescent's change in group of friends as his/her low self-esteem or need to take care of others,
- 4) Explaining drugged or drunken behavior as a "one time only" event.

Other common changes in your adolescent that may signal an alcohol or other drug problem:

- Drop in grades, being late, skipping school
- Defiant, rebellious behavior at home, school, and in community (lack of respect for authority figures).
- Depression, over sleeping, insomnia, sadness, apathy, loss of motivation, loss of interests
- Irritability, agitation, acting out of anger, hostility, negative attitude

Change in peer group. Peers are not the same group of kids they have always hung out with (i.e. "druggies", kids that are getting into trouble, older kids)

- Changes in appearance and personal style; neglect of hygiene; weight loss/gain
- Social isolation and withdrawal
- Emotional lability and mood swings.
- Secrecy, dishonesty, lying about insignificant things

Adolescents are more vulnerable to moving from casual/experimental use of chemicals into addiction because of their still developing brains and emotional immaturity. Other adolescents are even more vulnerable to addiction than others because of genetic predisposition, personality characteristic (low self-esteem, people pleasing, anxiety, especially social anxiety, lack of social skills, easily bored, antisocial attitudes, etc.), peers with pro-drug use attitudes and behavior, certain family dynamics.

When parents discover that there is a substance abuse problem amidst other life changes and circumstances, it is tempting to try to focus on those other circumstances, believing that the drinking/using problem will be resolved when the other issues are fixed. This is typically not the case.

Unresolved emotional, mental health, and relationship issues can be worked on and resolved once the drinking/using stops, but working on the other issues will not stop the drinking/using. Unless the chemical use is stopped, the symptoms and negative consequences of drinking/using will continue to occur. The symptoms and negative consequences of substance abuse are those listed above (i.e. drop in grades, secrecy, depression, etc.)

Most addiction treatment modalities target the emotional and psychological issues present in a patient with addiction. Many emotional/psychological issues are resolved through getting clean and sober. Many addicts have been misdiagnosed with physical

and mental illnesses that they simply do not have. Once the using stops, so do many of the other symptoms. Addiction can mimic all kinds of other illnesses, including bipolar, schizophrenia, ADD, borderline personality, depression, anxiety disorders and others.

Sometimes, however, other illnesses are co-occurring with substance abuse/addiction and will persist well into sobriety. Nevertheless, it is very difficult to know whether there is another underlying disorder when its symptoms are the same ones as addiction itself.

Copyright 2010, Peggy L. Ferguson, Ph.D. <http://www.peggyferguson.com>  
Hubbard House Publishing, Stillwater, Oklahoma