

British Columbia Foster Care Education Program

CARING FOR CHILDREN: SUBSTANCE MISUSE AWARENESS

Ministry of Children and Family Development

About the Author

This material was initially prepared by writers contracted through the Ministry of Children and Family Development and has been edited for presentation by Malaspina University-College, Faculty of Health and Human Services.

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INTRODUCTION

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A. RATIONALE

This is a basic introductory module on substance misuse awareness. The misuse of drugs and alcohol is a large issue that affects our society. The participants will receive

basic information about drugs and alcohol and will focus on the children and youth who use them. It is important that caregivers who have children or youth who are misusing substances placed with them be able to respond appropriately and effectively to those children and youth.

The goal of this module is to help caregivers learn to identify signs of substance misuse and work effectively with the child's worker to develop appropriate plans of care.

If the child or youth has been abused or neglected this may also be a contributing factor to their misuse of drugs (see "When Children Experience Abuse and Neglect" module.) Other important factors include the impact of separation and loss on the child or youth that might result in them turning to substance misuse to dull their pain.

In this module the term "Substance Misuse" will include misuse of alcohol, drugs and inhalants.

B. LEARNING OUTCOMES

The caregiver can:

- define terms relevant to substance misuse.
- describe myths regarding substance misuse.
- describe degrees of substance use and the implications for caregivers.
- describe indicators of substance misuse
- identify several factors that may contribute to and/or cause substance misuse.
- describe basic approaches to assist and support a child or youth who misuses substances.
- identify and access resources to educate and assist himself and a child or youth regarding concerns related to substance misuse.

Honesty: Be as honest as possible and express yourself as you really think and feel.

Respect: We learn by examining and expressing our thoughts, feelings, and values.

Confidentiality: If using descriptions of children in care and their families, no names or other identifying information are to be used.

A. Revisiting Your Youth

Exercise:

Answer the questions in Handout #3, "Revisiting Your Youth."

Possible responses to each question from the handout are provided below.

Revisiting Your Youth

1. When you were a teenager, what beliefs did your peer group have regarding alcohol and drugs?
 - It was ok to smoke and drink.
 - It was ok to drink and drive.
 - Some "hippies" used marijuana and other drugs.

2. What beliefs did your parents and their peer group have regarding alcohol and drugs?
 - Do as I say, not as I do.
 - Smoking and drinking were a sin.
 - Social drinking was ok for adults.

3. What did your parents and their peer group (i.e., including schools and the media, etc.) say, and how did they say it, regarding alcohol and drugs?
 - "Don't you dare drink!"

 - TV and movies showed it was "cool" to drink and

smoke (e.g., Dean Martin, smoking commercials, etc.).

- School response may have been no information or may have included guest speakers or pamphlets.

4. What was your parents' and their peer groups' behaviour regarding the use of drugs and alcohol?

- Didn't drink or use drugs at all.
- Drank socially.
- Drank and used drugs regularly.

How did you respond to the prevention strategies used by parents, schools, and the media. How effective were the prevention strategies?

Identify times your parents asked you not to smoke or drink, but as parents they continued to role-model that behaviour.

- Are you a smoker?
- How would you respond if you were told to stop smoking right now?

Telling someone to stop using drugs is usually futile and creates anxiety and resistance.

B. Helpful Hints

Instructions:

Review Handout #4, "Helpful Hints," (duplicated here for your convenience) and walk through each of these. Keep these in mind as you work through the remainder of the session on Substance Misuse.

Helpful Hints

- Most substance misuse can be prevented.
- A child or youth with a substance misuse problem is unwell and has a right to treatment.
- Serious substance misuse may impair a child's or youth's ability to recognize the impact his behaviour has on him or on others.
- It is important to remember that some parents may have a substance misuse problem but are still able

to provide adequate and responsible care for their children.

- Recovery is a process, not an event, and relapses may be part of the recovery process.
- Change can be difficult to implement and maintain. Therefore, support services may be essential in assisting children and youth in this ongoing process.
- It is important to work with the guardianship team and other support services to assist a child or youth with a substance misuse problem.
- It is more important to focus on people than on substances.
- Be respectful and have a belief that the child or youth can change.
- Expect resistance.
- Recognize that abstinence is not the only solution.

Drug and alcohol misuse is a large issue that affects our society. This module will provide the participants with basic information about drugs and alcohol but will focus on the children and youth who use them. It is important that caregivers who have children or youth who are misusing substances placed in their homes are able to respond appropriately and effectively to these young people.

This module examines the broad spectrum of drug and alcohol usage including everyday drugs such as caffeine and tobacco. It is important to realize that other substances such as gasoline, glue, and inhalants can also be misused.

This module does not include specific information on descriptions of drugs and drug paraphernalia. If this information is desired a separate session should be arranged through the local Foster Parent Association and/or the appropriate MCF worker using relevant local resources.

2. INFORMATION ABOUT SUBSTANCES

Learning Outcomes:

The caregiver can define terms relevant to substance misuse. The caregiver can describe myths regarding substance misuse. **Materials:**

Handouts

- Handout #5 True-False Quiz
- Handout #6 True-False Quiz Answer Sheet
Do not distribute until participants have completed the True-False Quiz.
- Handout #7 Drug Classification and Drug Effects
Do not distribute until after the exercise on drug categories.

Overheads

- Overhead #5

Definitions Other

- Three sheets of paper with headings of “Depressants,” “Stimulants,” and “Hallucinogens”

Instructions:

This module focuses more on the “people aspect” of drugs than on the substances themselves. However, caregivers will be more effective if they have basic information about substances as a foundation for further learning. This exercise provides this basic knowledge.

Exercise 1:

Think of a word association of the term, “Drug.” “What comes to mind when you hear the word ‘Drug’?” Write your comments on a sheet of paper.

Repeat this for “Addiction” and

“Dependency.”

Review Overhead #5, “Definitions”:

Drug: A substance that changes the way the body and mind works.

Addiction: A bodily need for a substance to be present in your system all the time. It is a physical need.

Dependency: A state in which a person feels they can no longer function well or adequately without a particular substance or substances. It is a psychological need.

Referring to the definition “drug” give examples of “drugs” that we use regularly in society which we consider “acceptable.” How do these lines of acceptable/unacceptable get drawn? Note that caffeine is one of the most widely used drugs in the world.

Exercise 2:

Complete Handout #5, “True-False Quiz” on a sheet of paper. It is not a test but a tool to indicate how much accurate drug knowledge you have.

Review Handout #6, “True-False Quiz Answer Sheet” after you have completed the quiz.

- “Is some of this information new to you?”
- “Do you think most people are aware of this?”

Exercise 3:

The purpose of this exercise is to learn basic information about substances. Read Handout #7, “Drug Classification and Drug Effects,” and use it as a reference as you proceed through this exercise.

Make three columns on a sheet of paper with the

following headings:

“Depressants”

“Stimulants”

“Hallucinogens”

Think of substances that belong under each of the three headings and write them down.

Refer to Handout #7, "Drug Classification and Drug Effects" to ensure the list is complete and accurate.

Summary Remarks:

Many of the substances that are used change the way our bodies work or the way we perceive our situation. These changes can be positive or negative, safe, or dangerous.

Whether the substance is being misused or not depends on the circumstances and the intent of use (e.g., under a doctor's supervision, prescribed for a specific purpose, etc.). The substances are not necessarily a problem themselves.

So far the module has focused on substances. The focus will now shift to the users – to the people who misuse substances.

3. DEGREES OF SUBSTANCE USE

Learning

Outcome:

The caregiver can describe degrees of substance use and the implications for caregivers.

Materials:

Handout

- Handout #8 Degrees of

Substance Use Overhead

- Overhead #6 Degrees of Substance Use
 - Overhead #6A Questions for Discussion
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Instructions:

When a child or youth-in-care is using substances, caregivers may need to be able to provide information to the care team that contributes to the assessment of the degree

of use. The following exercise will illustrate what to look for when evaluating the degree of use.

Exercise:

Overhead #6, “Degrees of Substance Use.”

Degrees of Substance Use:

1. No use
2. Experimental use
3. Occasional use
4. Regular use
5. Problem use
6. Dependency

Review Overhead #6A, “Questions for Discussion” and answer the following questions:

- How would you describe use at each degree?
- Why do you think some people would use substances to that degree?

Refer to Handout #8, “Degrees of Substance Use,” and review against your conclusions.

- How is the use of drugs different from misuse?
- How can you distinguish between a social drinker and an alcoholic?

Summary Remarks:

There are no absolute right or wrong answers to the questions posed. The purpose was to demonstrate how difficult it is to assess the degree of substance use.

Most people use substances, at least socially (e.g., caffeine, tobacco, alcohol). It is harmful and dependent use that becomes problematic. It is often difficult to differentiate among the types of use. For example, a person who appears to be a “social drinker” may, in fact, be dependent on alcohol.

Addiction to a substance can manifest itself as a physical or psychological addiction or both. A physical addiction occurs when one's body craves the substance and goes into withdrawal if the substance is not used again. Psychological addiction is when one becomes obsessed with getting and using the substance.

Two characteristics of addiction are:

- withdrawal: when the body physically reacts to the absence of the substance, and
- tolerance: when the body becomes tolerant of the substance, that is, needing more of the substance to reach the desired effect.

Addiction does not happen overnight; it develops over time. The degrees described above represent a progression. It may be hard to distinguish between them at times, but they represent the progressive involvement of the youth towards addiction.

4. INDICATORS OF SUBSTANCE MISUSE

Learning Outcome:

The caregiver can describe indicators of substance misuse.

Materials:

Handouts

- Handout #9 Possible Indicators of Substance Misuse
- Handout #10 Observable Effects of Substance Use

Overhead

- Overhead #7 Indicators of Harmful Substance Involvement – Group Instructions

Other

- Six pieces of paper with the following headings:
 1. Changes in performance
 2. Changes in physical appearance
 3. Changes in eating or sleeping habits
 4. Changes in friends
 5. Changes in behaviour
 6. Other changes

Exercise:

Most teenagers (up to 90%) will try drugs and/or alcohol at some time during their teen years. This exercise will

help caregivers recognize harmful involvement.

Read Overhead #7, "Indicators of Harmful Substance Involvement – Instructions."

Indicators of Harmful Substance Involvement

Brainstorm as many "indicators of substance misuse" as possible in five minutes.

Write these indicators on a sheet of paper.

Identify them as one of the following:

1. Changes in performance
2. Changes in physical appearance
3. Changes in eating or sleeping habits
- 5) Changes in friends
- 6) Changes in behaviour
6. Other changes

Read Handout #9, "Possible Indicators of Substance Misuse," and Handout #10, "Observable Effects of Substance Use."

Summary Remarks:

For many, substance misuse starts in late childhood or adolescence. Remember that as many as 90% of children and youth will try some form of drug or alcohol before adulthood. It is important to learn how to distinguish between experimental use and harmful use.

It is not the individual factor that is important but the number of factors and how they cluster together that provides an indication that a problem may exist.

Caregivers need to proceed with caution as the indicators for substance misuse can also be indicators for other problems. When concerns arise, caregivers should document the behaviours of concern, advise the child's worker and work together with the guardianship team to assess the child's needs and establish a plan to help him.

5. POSSIBLE CAUSES AND INFLUENCING FACTORS

Learning

Outcome:

The caregiver can identify factors that may contribute to and/or cause substance misuse.

Materials:

Handout

- Handout #11 Why Children and Youth Misuse Substances

Overhead

Overhead #8 Why Children and Youth Misuse Substances

Instructions:

Most people have some ideas about why people use drugs. These ideas (i.e., beliefs or values) can enhance or inhibit a caregiver's ability to work effectively with children in care and their families when drugs or alcohol are involved.

Exercise:

Why do you think children and youth use substances such as drugs and alcohol?

Why Children and Youth Misuse

Substances There are 2 basic concepts:

1. Psychological issues – a person feels they need the substance to function adequately in social settings.
2. Physiological issues – the body craves the substance and the person has developed a tolerance to the substance and/or withdrawal symptoms occur when the substance is withdrawn. Not all substances have this effect.

There are four basic psychological needs children and youth have that must be considered:

A. To feel they belong

- The youth has a belief everyone else does drugs/alcohol.

- The youth feels that if she doesn't do drugs the group may reject her.
-
- The youth has a need to be part of the culture (values and philosophy) that comes with the substance use.
- **B. To feel they are independent or unique**
- Substance misuse represents a challenge to authority.
- The culture associated with the substance provides a way of being separate from adults and parents that is exciting.
- Often youth feel they represent a new way of thinking and acting that adults cannot understand.
- Youth feel in charge; they realize adults can do little to force them to stop.

C. To feel they are significant

- The feeling of belonging to a caring group is particularly important if the youth has felt this to be missing from her life.
- The youth "knows" something adults do not.
- The substance can dull anxiety and mask negative feelings giving youth a sense of well-being. The substance allows them to escape the pain of their current experience as they see it;
- The youth can develop feelings of pride in surviving the clandestine nature of the world of drugs (e.g., being able to outsmart the police).

D. To feel there is a meaning to life

- The youth may find the experience pleasurable and fun.
- There is a sense of "community" to which the youth now feels he belongs.
- The culture presents a structure with its own values and philosophy organized around shared activities. This leads to a sense of community.
- The youth may believe the substance helps free him to be more creative and open to new experiences.
- The youth may now feel he has a pleasurable activity to replace boredom.

It is important to consider that there are other related

reasons why children and youth may try an intoxicating substance, including the following.

- They may be simply exploring experiences they have heard about. This may be part of their normal growing and does not necessarily indicate they are seriously involved in substance misuse. How the caregiver responds should be shaped by the circumstances.
- The child or youth may be trying to cope with the abuse and/or neglect he has experienced.
- The child or youth may be trying to cope with the loss of family and significant others and adjusting to being in-care.
- The child or youth may be responding to a sense of isolation due to a loss of her cultural community and thus her identity.
- He may be thinking he is expected to do it, that because everyone in his family and/or community is doing it, he should too.

These concepts may apply to adults as well.

Overhead #8, “Why Children and Youth Misuse Substances,” should be referred to in the following section of the module.

Summary Remarks:

Read Handout #11 ,“Why Children and Youth Misuse Substances”.

The question, “Why do children and youth use substances such as drugs and alcohol?” requires a great deal of thought and soul searching. The answers are complex and people are just beginning to understand some of the dynamics.

It is important to remember that curiosity and risk-taking are part of child and youth development. This often leads young people to experimentation with drugs and sometimes occasional use. A caregiver’s reaction to this curiosity is important. Risk-taking and curiosity have a positive side.

As circumstances change and children and youth develop, they may well change their attitudes and behaviours regarding substance use. As they grow older most teens learn from experience. They equip themselves

with skills to avoid problems and risks with alcohol and other drugs. They develop a greater ability to change themselves and their environment as they gain more personal power.

It is helpful to remember that, once a child has tried drugs, he is not necessarily “doomed.” The caregiver maintains the role of providing support, guidance, feedback, and possibly intervention. Caregivers can do this by monitoring the child or youth’s activities and responding appropriately.

It is important to start with the knowledge that substance use has two key components: the physiological and the psychological. Both must be dealt with at the same time to be effective in helping children and youth who have a substance misuse problem. Most substance misuse develops over a period of time that often starts in late childhood or adolescence. The child or youth’s psychological and emotional development is an important factor that can shape whether the child or youth has skills to function effectively. Even if the emotional needs are met, however, there may still be a physiological addiction that needs attention.

The next section will look at helping these children and youth.

6. RESPONDING TO SUBSTANCE MISUSE

Learning

Outcome:

The caregiver can describe basic approaches to assist and support a child or a youth who misuses substances.

Materials:

Handouts

- Handout #12 Influencing Factors and Responses
- Handout #13 How Caregivers Can Help

Overhead

- Overhead #8 Why Children and Youth Misuse

Substances Other

Instructions:

The purpose of this module is to increase participants' awareness of substance use by children and youth-in-care. It is impossible in a three-hour session to fully address the ways of responding to these children as well. This brief exercise, however, will provide participants with some initial ways of responding. Note caregivers are part of the team needed to help such children and youth; they are not alone in the helping process.

Exercise:

Review Overhead #8, "Why Children and Youth Use Substances." List on a sheet of paper the factors that could influence children and youth to use or misuse substances.

List ways a caregiver could respond to each factor. Refer to Handout #12, "Influencing Factors and Responses".

Influencing Factors and Responses

1. **Factor:** Peer group pressure

Response

- Nurture child's self-esteem so her peers will not as easily influence her in a negative way.
- Encourage and facilitate interaction with a healthier peer group (e.g., music, hobby or sports clubs).

2. **Factor:** Boredom

Response

- Pay attention to the child or youth.
- Do things with the child (e.g., walks, games, fishing, and movies).
- Encourage the child to participate in sports activities.
- Encourage the child to develop hobbies.
- Allow the child to have her friends home to do an activity together (e.g., play games, build a fort, go swimming etc.).

- Challenge the child's abilities (e.g., skiing, chess, and painting).

3. **Factor:** Inappropriate parental modelling

Response

- Model a safe and healthy approach to alcohol and drugs.
- Practice what you preach.

4. **Factor:** Wanting to take a risk

Response

- Provide other activities that are challenging and stimulating for the child.

5. **Factor:** Wanting to rebel against authority

Response

- Put the child in a leadership role.
- Give real responsibility to the child.
- Model appropriate behaviour.
- Show the child respect.
- Give the child praise and encouragement.

6. **Factor:** To dull pain

Response

- Consult with the child's worker about counselling for the child or youth.
- Look for indicators of suicide risk, and document.
- Assist the child or youth to find positive and constructive ways to cope.
- Have the child meet and talk with someone who has "been there."
- Refer the child or youth to a support group.

Refer to Handout #13, "How Caregivers Can Help," which provides some straightforward steps the caregiver can take.

1. Begin a discussion with the child

- Be non-judgmental.

- Don't have a confrontation but let the child or youth know you are concerned and available to help.
- Recognize you will not be able to force children or youth to stop the activity if they are determined to carry on.
- Share with the child or youth the changes you have observed in attitude and behaviour.
- Outline your expectations and rules for drug use.
- Share your understanding of the consequences of ongoing drug use.
- Encourage the child or youth to share her view of the situation but do not engage in an argument with her.
- Deal with your own negative feelings separately. Share your feelings and anxieties with the child's worker or your own resource worker or other staff assigned to help. Use your support group if you have one established. Avoid displays of anger with the child or youth.
- Share with the child or youth your need to involve her worker and to seek outside assistance.

The key roles of the caregiver are to observe and document indicators as outlined in this module, to inform the child's or youth's worker, and to provide the child or youth with reassurance and support.

2. Seek ongoing help

- Determine the child or youth's degree of substance misuse.
- Determine with the child or youth and his guardianship team the plan for assisting him.
- Continue to discuss as much as the child will allow but try to avoid judgment. Your job is to help and to reinforce her positives. Try to help build her sense of worth and value.
- Continue to review the limits that are expected and set realistic consequences. Also share the natural or logical consequences of continued use (see "Guiding

the Behaviour of Children and Youth”). Do not argue with the child.

- Seek help and support for yourself as needed.

There is not enough time in this module to practice these ideas. You can seek more training from community sources.

Summary Remarks:

Many of the needs of children who use or misuse substances are addressed in the other modules of the British Columbia Foster Parent Education Series. Substance misuse by a child or youth-in-care may be an indication of the possibility of past abuse or neglect and should be monitored carefully.

Some of the indicators of substance misuse may be subtle. By observing the child or youth’s behaviour over time, recording your observations and discussing the youth’s progress with the worker, caregivers can develop clear concepts about these issues.

It is important that caregivers be alert to the possibility that substance misuse by a child or youth is related to self-destructive or suicidal behaviours. These issues are addressed more fully in the module: “Suicide Awareness.”

When you suspect or determine that there is a problem, be sure to inform the child’s or youth’s worker so he can ensure a plan for help is developed and made available to you and the child or youth in your care. Specific courses on substance misuse and any courses on human behaviour (e.g., Communication, Parenting, Guiding Children’s Behaviour) may help caregivers to deal more effectively with children or youth who misuse drugs or alcohol.

This module does not include counselling skills or methods. If the caregiver believes the child or youth needs counselling, she should talk to the child or youth’s worker about the need for professional intervention.

7. RESOURCES

Learning

Outcome:

The caregiver can identify and access resources to educate and assist himself and a child or youth regarding concerns related to substance misuse.

Materials:

Handout

- Handout: #14 Community Resources

Instructions:

When trying to assist children or youth with substance misuse problems, it is necessary for caregivers to seek appropriate help. It is important that caregivers know the local resources and how to access them.

What resources are you aware of in the community that provide treatment for substance misuse. Refer to Handout #14, "Community Resources."

What can you do if you are unfamiliar with the resources or you find the needed resources are lacking in your local community. Read below.

If the resources are unknown or lacking, caregivers can:

- 2) ask the child's worker for assistance.
2. help develop the resource in their community by:
 - discussing the need with other caregivers through the local Foster Parent Association (e.g., in support group meetings) and contacting the BC Federation of Foster Parent Associations.
 - asking community groups, churches, etc. for their assistance.

3. use the resources in another community.

Summary Remarks:

The child or youth with substance misuse problems will likely require outside assistance and support. The caregiver can play a key role in first identifying the

possibility of a problem and then along with members of the guardianship team, including the child or youth wherever possible, assisting in assessing the degree of the child's or youth's problem.

Caregivers may need assistance and support for themselves as well. In addition to accessing community resources, the caregivers may want to explore a support group through their local Foster Parent Association, which may also have reading material available in its library.

It is important to note that this module is not about how caregivers are to "treat" the child but about how they may identify a problem and work with others to help the child.

Instructions:

There is a likelihood that young people will become reliant on alcohol or drugs when their ability to find meaning and real rewards in life is limited by a lack of skills necessary to deal with life. If children and youth can be equipped with effective skills to deal with day-to-day living, they may be less likely to become dependent on alcohol and other drugs now and later in life.

Refer to Handout #15, Suggested Resources."