Noting that caring adults can help teens make the right decisions during the difficult time of adolescence, this guide for parents provides some useful tools to improve parents' communication with teenagers to help them get through adolescence successfully. The booklet is presented in six parts: (1) "Getting the Conversation Started," including tips for opening up the dialogue, even after it has been shut down; (2) "Increasing Responsibility and Freedom," including ideas for setting limits that protect teens while giving them room to grow and develop; (3) "Managing Anger: Theirs and Yours," including anger management skills for parents and ideas to share with teens; (4) "Handling Tough Situations," including examples of difficult situations, identification of warning signs of trouble, and advice on how to handle problems such as bullying, drug use, school failure, sadness/depression, and anger and violence; (5) "When Parents Need Help First," including suggestions for parents on dealing with issues affecting their parenting ability; and (6) "Getting Help for Your Teen," suggested sources of help for various types of problems. (KB)
Helping Your Children Navigate Their Teenage Years:

A Guide for Parents
Helping Your Children Navigate Their Teenage Years:

A Guide for Parents

White House Council on Youth Violence
December 2000
At the beginning of the 21st century we have much to celebrate about our nation's young people. Teens of all ethnicities are completing high school and enrolling in college at record rates, and more teenagers than ever before are volunteering for community service. In addition, many harmful behaviors are on the decline, including youth violence and gun-related crime, homicide, suicide, teen pregnancy and, in the last few years, drug use. Nonetheless, the rates of youth violence, smoking, alcohol and other drug use, and unintended pregnancy are still far too high. And despite a marked decline in teen homicide over the past several years, far too many communities are still scarred by violence.

We know that the best approach to the problem of youth violence is a comprehensive one, requiring the collaborative efforts of students and parents, teachers, health care providers, law enforcement, judges, counselors, and religious leaders. That is why, among other initiatives, my Administration created the Safe Schools/Healthy Students Initiative to support effective, collaborative responses to youth violence.

Most importantly, we know that young people continue to need support and guidance from their parents as they grow into adulthood. In May 2000, the First Lady and I hosted a conference on “Raising Responsible and Resourceful Teenagers.” At this conference we heard from parents, researchers, professionals who work with teenagers, and from teenagers themselves. The message we heard, loud and clear, and that has been confirmed by recent studies, is that teens view their parents as the best source of information and guidance on serious life issues, and that teenagers rate not having enough time with their parents as their top concern.

That is why I directed my White House Council on Youth Violence to develop information resources for parents. This guide provides parents with some useful communication tips for talking to their teenagers. It suggests ways to discuss difficult issues—such as violence, guns, tobacco, alcohol, and other drugs—and helps parents identify the warning signs of harmful behaviors. In some instances, parents may need professional guidance to assist them in dealing with the challenges of raising a teenager, and this guide provides helpful resources.

The great American author and champion of human rights, Pearl Buck, once said, “If our American way of life fails the child, it fails us all.” In our national struggle against youth violence, we must not fail our children. All of us, especially parents, share responsibility to keep our children safe. We’ve all got to do our part, and this guide should help.

— President William Jefferson Clinton
The White House Council on Youth Violence was established by President Clinton in October, 1999, to coordinate the federal government's efforts in the research and prevention of youth violence. The Council is chaired by the Assistant to the President for Domestic Policy, and the Council members are the Attorney General and the Secretaries of Education, Health and Human Services, Housing and Urban Development, Labor, and Treasury.

Sonia G. Chessen
Director

Marie E. Burke
Deputy Director

Nicholas J. Lewin
Associate Director

RADM Susan Blumenthal, M.D.
U.S. Assistant Surgeon General
Senior Public Health Advisor
Scientific Editor

ACKNOWLEDGMENTS

Many individuals contributed to the development of this document. The White House Council on Youth Violence wishes to thank Dr. Robert Schwebel, the primary author of this guide, and Teddi Fine, Charlotte Gillespie, Anne Mathews-Younes, Carole Skog McGeehan, Bill Modzeleski, Carolyn O’Connor, Louise Peloquin, and Farris Tuma, for their assistance.
This is an exciting time to be a teenager in America. Young people today are growing up in a rapidly changing society with hopes for a very promising future. Survey results show that 84% of high-school students plan to attend a four-year college. Teens overwhelmingly share their parents' values of honesty and hard work, and are engaged in positive activities. More than half of all teenagers volunteer with a community organization, attend a house of worship weekly, read the newspaper twice a week or more, and attend cultural events or visit museums.

In spite of this positive outlook, however, adolescence—the transition between childhood and adulthood—is still one of the most difficult times for children and parents alike. Growing up is more than the physical changes that occur, such as getting taller or more muscular. This passage is a time for establishing independence, testing limits, trying on different roles, exploring new feelings, and fostering intellectual growth. Above all, adolescence is a process that takes time to happen.

We have all heard the frightening and heart-breaking statistics about youth violence, depression, tobacco, and alcohol and other drug use. Even the best-informed young people are constantly tested by social pressures, emotional needs, and their peers. The push and pull between right and wrong can become a tug of war between adolescent and parent.

Being a parent, grandparent, foster parent, or caregiver of a teen is both rewarding and challenging. Caring adults can make all the difference in a child's life.

This guide provides some useful tools to improve your communication with your teenager to help him or her get through adolescence successfully. Read it all or select the sections that help you the most.

- **Getting the Conversation Started**—tips for opening up the dialogue, even after it has been shut down. (Page 2.)
- **Increasing Responsibility and Freedom**—ideas for how to set the limits that protect your teens while still giving them room to grow and develop. (Page 6.)
- **Managing Anger: Theirs and Yours**—anger-management skills that you can use, and that you can share with your adolescent. (Page 8.)
- **Handling Tough Situations**—examples of difficult situations, identification of warning signs of trouble, and advice on how to handle certain problems. (Page 10.)
- **When Parents Need Help First**—helping your spouse, or yourself, deal with issues that are affecting your ability to parent. (Page 18.)
- **Getting Help for Your Teen**—suggestions about how to get help for your teen and your family. (Page 22.)
Many parents worry when their teenagers don’t want to spend as much time with the family as they did when they were younger. This can be both hurtful and frightening. You worry about their safety and about their future. It is normal for children to want to spend more time with their friends during the teen years, but it shouldn’t mean that teens ignore their families. Parents and teens need to take action to stay connected or to reconnect.

I used to be close with my daughter. She would talk with me about everything. Now she’s 14 and avoids me. She is quiet at dinner, and then goes to her room or talks with friends on the phone all evening. Sometimes she gets moody and angry. I want to reach her the way I used to, but I don’t know how to start.

Sometimes the solution is easy. Spend more time together. Suggest doing things that you both enjoy. Talk more. Dinnertime is an excellent opportunity for that kind of exchange. Talk about your day. Ask your teen about his or her day. Be sure the television is turned off and you and your teen are tuned in.

Most teens agree that they want to spend more time with their parents. You may be surprised to learn that a recent study indicated that most teenagers rate “not having enough time together” with parents as their top concern. Many will be glad that their parents care enough to make the effort to spend time with them.

**Why Do Teens Stop Talking?**

Sometimes they’re trying to be independent. Sometimes they’re embarrassed about their own thoughts and feelings, such as anger, or their sexual desires. Sometimes, teens shut down because of pressures they feel at home, at school, or in the community. One of the most important reasons teens stop talking to you is that they’re afraid to speak honestly with their parents. They believe if they talk openly about things they have done that might be wrong, they’ll be given a lecture, punished, or criticized.
Some teens have a hard time expressing anger and upset feelings. They keep their feelings bottled inside. Parents need to draw such children out. Try to start a conversation by saying “I can see you’ve been upset. Let’s talk about what’s happening.”

Some teens, however, may give parents the cold shoulder. If that happens, be patient, and be persistent until you break through. If you can’t break through, there could be a more serious problem than embarrassment or a difficulty communicating.

LISTENING TO YOUR TEEN

Let teens know you will listen and try to understand their point of view, without putting them down or trying to control them. Being open-minded sometimes can be difficult for adults. But to communicate with teens, parents need to do more than just talk; they need to listen, and really hear what their teens are saying. They also need to notice which issues are not being discussed and have the courage to start a dialogue about those issues.

When disagreements arise, listening does not mean that you give up your authority as a parent. It does mean giving teens a voice in matters that concern them. Through family dialogue, parents get to know what their teens are thinking and feeling, and teens get to know where their parents stand. Sometimes parents and teens can reach agreements when none seemed

TODAY’S TEENS

The pressures you felt as an adolescent have been magnified for teens today. You will recognize some of these as issues that concerned you during your youth. Others are unique to today’s teens.

- Wanting to be part of a group
- HIV/AIDS
- Changing family structures
- Gangs and violence
- Insecurity about the future
- Money pressures
- Teen sexuality and pregnancy
- Media influences
- Concern about body image
- School pressures
- Easy access to alcohol, tobacco, illegal drugs, and guns
possible. Even when agreement cannot be reached, teens are more likely to do what their parents wish if they feel that their parents listened to them with an open mind.

**Tough Topics**

Parents can become frustrated when they try to start a conversation with their teenager and he or she just isn't interested. There are tough topics, however, that need to be discussed. Teenagers face pressures and temptations about alcohol and other drugs, sex, tobacco, guns, and violence. They need and deserve adult support. Don't wait for a crisis. Ideally, parents should find times and ways to talk with their teens before serious problems occur, preferably early in the lives of their children. But it is never too late to start.

Sometimes, you can simply begin a dialogue about these issues as part of normal conversation. Often, “teachable moments” happen during day-to-day activities. For example, you could discuss underage drinking when someone gets intoxicated in the presence of your family, or in a movie, or when you see a newspaper story about an accident caused by teenage drinking. You could discuss violence, and better ways of solving problems, after watching a TV show or movie that portrays violence as a solution to a disagreement.

If your teen doesn't want to talk, try to be clear that your purpose is to build understanding and to be supportive, certainly not to find fault or to punish. If you can't nudge your child into a dialogue, back off for awhile. This strategy can be disarming. Then, give your son or daughter some time to think it over. A few days later, you can try again to start the discussion. Parents can be flexible in getting the dialogue going, but should not give up on the need for this discussion to eventually begin. Although it may be harder to get boys to open up, parents should engage in dialogue with their sons and daughters alike.

---

**Being Sensitive to Cultural Differences**

Teens in minority ethnic and racial groups may face particular pressures related to their status as minorities. Parents of these teens should be especially sensitive to these pressures, as well as cultural and language differences that may affect your teen's interactions at school, with peers, and with others.
Today's teens, more than ever before, need to connect with adults—if not a parent, then a coach or teacher, grandparent or foster parent, clergy member, or other trusted adult in their lives. Teens need an adult with whom they can talk openly. They should not be left to rely solely on other teens for important information, conversation, and help with problem solving about how to grow up wisely.

**SOMEONE YOUR TEENS CAN TALK TO**

Try to establish strong communication with your teen, but remember that some teens may talk more openly about sensitive topics with someone who is not their parent or guardian. If you are a parent, try not to let this hurt your feelings; remember that your child will respect you more in the long run if you encourage him or her to talk with someone else, if that is what works best. Single parents, and other parents, may want to find a mentoring program that can be a source of support, and can provide someone with whom your teen can talk. Your teen's school guidance counselor may know about such programs.
Increasing Responsibility and Freedom

You don’t trust me . . . But they’re my friends . . . Everyone else is doing it . . .

Teens need their independence, but how do you make sure they are safe? It’s tough to decide when to give your teen more freedom. Do you hang on to the kite string for as long as you possibly can, or give the kite free air? The decision isn’t easy. One parent’s decision for his or her teen may not be right for other parents and their teens.

Although every adolescent is different, there are many experiences common to the teenage years. The most common may be the pull and push between dependence and independence.

Teens, at younger and younger ages, are putting themselves at risk for sexually transmitted diseases—including AIDS—and for pregnancy. And some teens, and even younger children, smoke tobacco, drink alcohol, use other drugs, or commit acts of violence and other crimes. No wonder so many parents are concerned, even frightened; no wonder so many try to control the behavior of their teenage children.

It is important for parents to make rules for their young children. As children get older, however, they need to learn to make some of their own decisions and life choices. Teens need the chance to practice good decision-making skills, and to manage new life experiences. Parents need to give teens the freedom to do just that. But there is a catch: teens must be ready. They need to agree to behave in responsible ways and show that they can handle the freedom. They also need to keep their parents informed. That way, parents know when to lend guidance and supervision, and how to support their teen’s progress.

That’s where respect, responsibility and reliability come in.

Respect: Respect is a two-way street, but it starts with you. Give your teens the respect that you would like to be given. Give them credit for their knowledge and abilities; pay attention and listen to them. That means showing confidence in your teens, and being supportive.

Responsibility: Teens are learning to take care of themselves as they prepare for adulthood. That’s what growing up is all about. Give them an appropriate amount of freedom and independence. Encourage and promote responsibility and good decision-making, offering support and gentle help with difficult decisions. Let your teens know they can gain more freedom as they demonstrate increasingly responsible behavior.

Reliability: Part of growing up is learning and adapting to rules—rules about driving and work, rules about drinking and dating, social rules and family rules. Teens will test the rules, but over time most will make these rules part of their lives. This kind of reliability is worthy of recognition and praise. When you can rely on your teens behaving responsibly, it may be time to give them more freedom.

Parents should believe in their teens; set high standards for them, encourage them, expect them to achieve their goals, and provide consistent love and support—including practical help—so they can achieve the promise that lies within them.
Clothing and hair . . . where do I draw the line?

Jason is doing well in middle school. He’s great with his younger brothers and helps around the house, but I’m concerned about some of his new friends. Some have dyed their hair odd colors; they wear baggy jeans with their boxer shorts showing. A few have pierced tongues and tattoos. A while ago, Jason asked about getting those baggy jeans. I said no, because the gang kids wear them. I hoped he’d forget about them, but he has asked again. Between the drugs in our neighborhood, baggy jeans, and new friends, I’m worried. I want to steer him away from problem kids. Should I let him buy the jeans? What should I do about his friends?

Adolescents are striving for independence. As teens prepare for adulthood, parents should encourage independence, while making sure their teens don’t drift too far from a positive course. How should parents react to the choices of their teenage children? In general, extend trust and give children as much freedom of choice as they can handle. Be sure to set limits, too. Your decisions about the baggy jeans and about your son’s friends require careful evaluation of all the details. You need to think about your own values, look realistically at where Jason seems to be headed, understand what he is doing or wants to do, and determine how best to promote his safety and growth.

Jason is doing well in school and not getting into trouble. Success in school gives children a sense of accomplishment. They can see a positive future for themselves and are less likely to want to join a gang. These facts argue for giving him more freedom. When it comes to his friends and his preferences in clothing, you need to gather more information if you’re going to make a smart decision. You need to know more about your son’s friends: What are they like? Do they use alcohol or other drugs? Are they in gangs? How does your son feel about these kids? How does he feel about drug use? How does he feel about gangs?

Get to Know Your Son’s Friends

Ask your son to invite his friends to your home so you can meet them. You’ll show that you have an open mind. If his friends behave poorly in your presence, your son will notice.

You also need to understand what the baggy jeans mean to Jason. Are they just a style he likes? Or is wearing them a way to identify with a gang? Sometimes teens dress differently just to harmlessly show some independence from the family. Think back to your own adolescence, and remember the fashion changes. There may be some similarities.

Have a discussion with your son about his friends and about the clothing he likes to wear. Sometimes discussions can bridge differences. Maybe your son will be swayed by what you say about the jeans and gangs, or maybe he will convince you that baggy jeans have become a style that has little to do with belonging to a gang.

A conversation with your teen can help you decide whether there is a real problem or it is just a question of fashion.
Warm family relationships can help protect children from acting violently, abusing alcohol and other drugs, or engaging in other high-risk behaviors. But family members—even in the most loving families—get angry at one another from time to time. When families communicate well and work cooperatively, anger can be resolved without a problem. Handled poorly, however, anger gets in the way of good communication between parent and child. Anger without control can sometimes be dangerous and may even become violent.

Many adults are not good at managing anger, and expressing this emotion in a healthy way. Some adults see anger as an emotion that should be suppressed, because it leads to trouble. Some grew up in families in which anger generally led to explosive behavior and even violence. Others were taught that it is not “nice” to be angry. It’s important that parents know how to manage anger successfully in family life, at work, and in the community. And that same knowledge needs to be shared with children, so that they learn this important skill.

My teenage son doesn’t know how to handle his intense feelings. He talks back to us and even swears at us. He doesn’t do what we ask him to do. He seems to be trying to aggravate us. I get so angry I blow up. We end up screaming at each other and saying things we regret. I feel like things are out of control.

With the many changes that occur during adolescence, it’s not unusual for teenagers to feel anger and resentment toward parents. Adolescents struggle to establish their own independent identities as they prepare for adulthood. Sometimes anger is their way of asserting independence. This can wear thin on parents, who may fight back with their own anger, creating a vicious circle of escalating resentment.

The best solution to out-of-control anger—whether from a parent or from a teen—is to step back, and identify more positive, healthy ways to deal with strong feelings. We do this when we can calm down and respond in a disciplined and thoughtful way. By maintaining composure, parents can be good role models and open the door to constructive communication with their children.

But how do you keep calm when you feel pushed to the limit? Here are some suggestions:

**Tips for Calming Down**

- **Pick your battles.** Sometimes the issue is not worth the anger, or worth arguing about.
- **Take a deep breath; count to ten.** Think about the issue before a single word comes out of your mouth.
- **Go for a walk.**
Use “self-talk” to calm down. That is, say something soothing to yourself such as: “I need to relax and stay calm. I can’t afford to blow up.”

Reframe the issue. For example, when your son says something rude to you, it may be less a matter of him disrespecting you than a sign that he has a problem with his anger. “Framing” it this way, you focus on the fact that he needs your help in overcoming this problem.

Use humor. Humor can sometimes be a good way to calm anger, but be sure not to use sarcasm, which can sometimes be hurtful.

Sometimes the hardest part of helping children learn to manage their anger is that parents have to look at their own practices. Parents need to ask:

- Do I express anger in positive and constructive ways?
- Do I resolve conflict well?
- Have I taught my children to accept and express their anger?

Resolving Conflict

Resolving conflict constructively may be a huge challenge, but it’s an absolute necessity for the sake of every member of your family.

Once you are calm, you are in a better position to address the issues that caused the conflict. Here are some tips:

- Give your point of view. State the problem as you see it; speak clearly and calmly—don’t yell.
- Ask to hear your teen’s point of view.
- Pay attention, listen, and carefully consider what your teen is saying.
- Discuss ways to solve the dispute without a battle.
- Practice the art of compromise. Find the middle ground you can both live with comfortably.
- Assert your authority, when appropriate, but in a calm, yet firm manner.

What If the Anger Doesn’t Stop?

When anger becomes a chronic problem for someone in the family, the underlying issue may be larger than you or your teen can manage. If you even think your family is at this crisis point, or if you even think you or any member of your family has a serious problem with anger management, it’s time to seek help from a mental health professional. Recognize that this situation necessitates counseling, and sometimes that means the entire family will need help. Refer to the sections on “Getting Help for Your Teen” (page 22).
Handing Tough Situations

Teenagers, like all of us, sometimes need help and guidance, but it can sometimes be difficult for parents to recognize when to intervene in their teenager’s life. You know about the challenges that today’s teenagers face—some of which are different than those you experienced as a teen. Understanding these challenges, and knowing when and how to intervene to help your child overcome them, is an essential role for parents.

It is also a difficult role. Being able to tell the difference between normal teenage behavior and self-destructive, hurtful behavior is critical. The following examples are designed to help you understand some of the warning signs that your

What If Your Teen Is Being Bullied?

Bullying is a serious problem, affecting many children. A recent study indicated that nearly 1 in 10 students in grades 6 through 12 have been bullied in the past year.

Victims of bullies need help and support in responding to this aggressive behavior. Many parents give their children conflicting messages about how to respond to physical aggression. Should you encourage your teenager to “fight back” or not? We do not want to resort to violence, but we also do not want our children to be victims and to feel powerless. Most experts agree that children should not hit back, other than for self-defense and survival. Retaliation perpetuates a cycle of violence. It may also lead to escalating physical confrontation, which can be very dangerous, especially considering the possibility that weapons might be used.

Parents can help their children who have been teased or bullied learn to be powerful, without resorting to violence. You could start by letting your teenager know that you seriously disapprove of taunting and other types of bullying behavior, and that you think no one should have to put up with this. You can empower teens by asking them if they have any ideas about what might end the bullying.

Parents can teach teens some powerful, non-violent ways of responding when they are bullied:

- Practice “verbal self-defense,” using anything from humor to clever comments to de-escalate tension.
- Proudly walk away from provocation, and ignore taunting.

Young people are entitled to a safe learning environment in their school. Another way to empower your teenagers can be to encourage them to speak with school administrators about the problem. In part they may want to raise the issue of their own situation, and their own safety fears. Sometimes, it is most empowering to discuss the situation as a school-wide problem, without focus on particular perpetrators. Parents should back up their children by also voicing the same concern. School/community partnerships can lead to effective programs that reduce bullying behavior.

If teenage children have been picked on for a long time, they probably have some intense emotions from that experience, and could benefit from talking about them. Victims of bullies may experience anger, anxiety and even depression. Being the victim of a bully can also be a risk factor for engaging in violent behavior. Your teens need and deserve help coping with these feelings. You or a mental health profession-
teenager may need help. Read through these examples and see if any sound familiar.

Remember, though, that every teenager is different and there is often no clear answer to your specific situation. If you are concerned, talk to your teenage children. At a minimum, let them know how you feel and tell them that you would like to talk. If you are still concerned, or if you think that your teenagers may hurt themselves or others, you should get help immediately. Refer to the sections on “Getting Help for Your Teen” (page 22) for assistance in finding the right resources.

BULLYING

I was called to my 13-year-old son’s school today because he stole some money from another boy during lunch. This wasn’t the first incident. A few weeks ago, the principal called because Keith made another boy take the blame for graffiti he wrote on the school bus. No matter what we tell him, he constantly seems to get in trouble. What can I do?

You certainly have reason to be concerned about your son’s behavior. He is acting like a bully and needs your help to put on the brakes. The principal was right to call. The school can set a clear standard—no bullying—and make sure that your son understands the consequences for violations of this rule. You, too, need to make clear that you disapprove of bullying. You need to help your son develop empathy—which is the ability to understand how other people feel—and to care about others’ feelings. You will probably want to impose consequences on your son for his unacceptable behavior. Be firm, but do it in a loving way. Right now your son needs your empathy, understanding, and love. By providing this, you can show the power of caring about others in a positive way.

This still leaves the bigger part of the problem—getting to the reasons for your son’s behavior. You have to talk with him to determine why he is being a bully. What leads your son to behave in such hurtful ways?

With your help, or with the assistance of a professional, your son can understand his own motives for bullying. Some young people are bullies because they are bored and crave excitement; some do it to feel powerful; some engage in this behavior as a response to family problems; some do it for attention and to be popular with their peers. You need to ask him very detailed questions:

- Did you plan to take the other boy’s lunch money beforehand, or was it a sudden urge?
- Why did you pick on that particular person?
- What were you thinking when you did it? (Ex: I need the money; I’ll look cool.)
- How did you feel when you did it? (Ex: Excited, thrilled, frightened, powerful).
How do you think the other boy felt?
What's happening in your life or in our family that may be upsetting you?

When you understand the details of what happened, you can determine how to help your child. For example, if your son stole money because he saw it sitting on a lunch tray and had a sudden urge to grab it, he will need to learn to recognize his impulses, and to stop them. If he planned to steal money, pre-selected a victim and stole because he wanted to look important, he will need to learn positive ways to make friends and gain peer acceptance.

We have to help our children learn healthy and socially acceptable ways to cope with urges and anger, and to satisfy their emotional needs appropriately. A big challenge? Yes. But it's part of growing up and becoming a good citizen.

**Drug Use and Failure in School**

Our 16-year-old daughter, Julia, was caught drinking at a party. We suspect that she has smoked marijuana, too. She has been doing poorly in school—in fact, now she's neglecting her schoolwork and failing one subject. We set up required study time, but it hasn't helped. She misses curfews and hasn't been doing her chores. We've talked with her about alcohol, drugs, and sex, and we've been clear about the rules and consequences when she has broken them. Obviously, it hasn't worked. She says I'm a nag. What else can I do?

Alcohol and Substance Abuse

Julia's drinking and possible drug use may be the tip of the iceberg. Alcohol and other drug use often occur along with other serious problems.

First, you need to talk to Julia and find out what drugs she is using and how often she is using them. Don't confront her when she seems to be under the influence of alcohol or other drugs. Wait until she is straight and sober. Then discuss your suspicions with her calmly and objectively, as you begin a dialogue. Bring in other members of the family to help, if necessary.

Second, impose whatever discipline your family has decided on for violating the rules, and stick to it. Don't relent because she promises never to do it again. Make sure that she knows that her use of alcohol and other drugs is a serious problem and that she is harming herself.

If Julia has developed a pattern of drug use or has engaged in heavy use, you should get immediate help. If you do not know about drug treatment programs in your area, call your doctor, local hospital, or county mental health center for a referral. Your school district should have a substance abuse coordinator or a counselor who can refer you to treatment programs, too. Parents whose children have been through treatment programs can also provide information.

Many young people lie about their alcohol and drug use. If you think Julia is not being truthful and the evidence is pretty strong, you may wish to have her
evaluated by a health professional experienced in diagnosing adolescents with alcohol- and drug-related problems. Refer to the sections on “Getting Help for Your Teen” (page 22) for information about how to find someone who can help.

Listed in the box at right are signs that may indicate problems with alcohol or other drugs. They could also indicate other problems, not related to drugs. In either case, if you observe significant changes in your teen’s behavior, something is wrong. Start a dialogue with your teen about the problems. If you are still confused about whether alcohol or other drugs are part of the problem, or if you recognize that a substance abuse problem exists, get professional help.

**School Failure**

Failure in school is another serious issue, but nagging is the wrong approach, and enforcing study times usually doesn’t work, either. Parents often assume that school problems are caused by lack of effort, and that making kids study more will improve their performance.

### POSSIBLE ALCOHOL OR OTHER DRUG ABUSE

Research has shown that there are a number of factors that make individuals more likely to initiate drug use and to progress to drug abuse and or addiction. Many of these can be identified early by family members and friends. It is important to note that many people may exhibit one or more of these signs, but not necessarily use drugs. These signs may occur in the following areas:

- **Family:** deteriorating relationships with family; behavior changes, such as withdrawal or hostility
- **School:** truancy; drop in grades; behavior problems
- **Social life:** deteriorating relationships with old friends; developing a network of friends who are using alcohol or other drugs; loss of interest in sports or other favorite activities
- **Emotional life:** basic personality changes; inexplicable and sudden mood changes; apathy
- **Physical:** memory problems, fatigue or hyper behavior; difficulty walking; sleep disturbances; red, blood-shot eyes; carelessness with grooming
- **Physical evidence:** disappearance of beer or liquor supply; money or valuables missing; use of cigarettes; signs of drug paraphernalia; use of incense; excess money or missing money

*Source: Adapted from National Institute on Drug Abuse, National Institutes of Health*
Usually there is much more to it. For example, children may be having trouble with academic work and need tutoring. They may have a learning disability or they may need help with study skills (understanding how, when and where to study). They may also be upset about something at home, at school, or with peers, that is interfering with their concentration. Even when the amount of effort invested in schoolwork is deficient, usually the underlying cause is discouragement, rather than laziness. The remedy is support, not more pressure. We need strategies to get teens thinking and solving problems for themselves. Dialogue is the most effective way to get them started.

How long ago did Julia start slacking off in school? What do you think has been holding her back? You need answers to these questions to determine how to correct the problem. Encourage Julia to consult with her teachers or the school counselor, and offer to participate in these meetings. If need be, you can consult with the school or get other professional help. Using all available resources, you and your daughter should be able to determine the causes of the problem. Once you know the causes, the solutions should become clearer. Your daughter will still have some obstacles to overcome, but at least she will be headed in the right direction.

Sadness/Depression

Sarah has never had much confidence. High school is harder than she expected. My husband and I are divorced, and this has been very hard on her. Now, she looks and acts absolutely exhausted, doesn’t sleep, and just sits in her room crying with her door closed. When she goes out, she dresses all in black clothing and wears heavy black eye shadow. I have tried to talk to her, but she acts angry and won’t say a word to me. I can’t tell if Sarah is just “going through a phase” or is truly depressed.

The teen years offer new experiences and challenges that can be exciting, but also stressful. The stress of adolescence is one of many factors that can make young people unhappy. Teenagers are also experiencing hormonal changes which can affect their mood. Some sadness and mood swings are a normal part of life. But when the “blues” last for weeks, or interfere with school, home, or other activities, your teen may be suffering from clinical depression. Depression, a mood disorder that is a real medical illness, is often unrecognized, but can be effectively treated.

When teens, or anyone, are very upset about things, they need to talk with someone who cares and can help. Parents should be concerned and talk with their child about his or her unhappiness, whether it is a temporary state or a case of clinical depression. We should set an example of confronting problems, head on.

It is sometimes hard to tell when teens are depressed, because the symptoms may be hard to read. For example, you may mistake a sleep disturbance, which can be a sign of depression, for a late-night television habit, or your teen may only reveal
her sadness in writings that contain morbid themes. Teens may say they are “bored” when, in fact, they are depressed. In addition, signs of depression may vary among cultural groups: Teens in some groups experience sadness or guilt; while others experience more physical symptoms, such as headaches and nervousness.

Clearly, Sarah is unhappy and may be suffering from depression. What is going on in her life to make her feel this way? Think about past and present problems. When did this crying begin? Did it coincide with family tension, or the divorce, or problems in school? How is she getting along with friends? How are things in your family, now? Are there any other problems or symptoms? The answers to these questions provide clues about what is wrong and how to help her.

Depression does increase the risk of suicidal behavior. Many teens think about suicide, and some of them follow through. Parents should be especially concerned and get professional help immediately if additional warning signs are evident, such as when a child has a history of previous depression.

### DEPRESSION

If a number of these symptoms persist for two weeks or more, a person may be diagnosed as clinically depressed. Parents should talk with children if any of these symptoms occur:

- Persistent sad, anxious, or “empty” mood
- Loss of interest or pleasure in activities
- Restlessness, irritability, or excessive crying
- Feelings of guilt, worthlessness, helplessness, hopelessness, pessimism
- Sleeping too much or too little
- Appetite and/or weight loss, or overeating and weight gain
- Decreased energy, fatigue, feeling “slowed down”
- Thoughts of death or suicide, or suicide attempts
- Difficulty concentrating, remembering, or making decisions
- Persistent physical symptoms that do not respond to treatment, such as headaches, digestive disorders and chronic pain

---

Source: National Institute of Mental Health, National Institutes of Health
suicidal behavior, hints at not being around in the future, expresses a desire to die, gives away prized possessions, has experienced a recent loss, or makes threats of suicide. Sarah needs to talk with someone who cares and can help. Give her an opportunity to discuss her feelings and what is causing them. If she won’t open up with you, find an adult with whom she can talk, such as a family physician or a mental health professional.

### Risk Factors for Suicide

People most at-risk for committing suicide are those who have several of the following characteristics. It is important to note that many people experience one or more of these risk factors but are not suicidal.

- Previous suicide attempt
- Depression
- A family history of suicide
- Easy access to lethal methods (especially guns)
- Abuse of alcohol or other drugs
- Loss of a relationship, or a social humiliation
- A serious physical illness
- Social isolation
- Hopelessness
- Impulsive or aggressive behavior
- Being a runaway

*Source: Adapted from the Surgeon General’s Call to Action to Prevent Suicide (1999)*

---

### Anger and Violence

My 16-year-old son, James, is failing in school. He is often angry, has no interest in our family, and sometimes doesn’t come home until 4 a.m. I have no idea what he’s doing and worry he might get into trouble. At home, he spends most of the time in his room playing violent video games and listening to music with violent lyrics. I’ve heard him plotting “revenge” with friends, and he seems to always be talking about different weapons. This worries me, but I don’t really believe he would hurt anyone.

**What can I do?**

You are right to be worried. Although it is difficult to predict who will become violent, there are certain risk factors that may warn of possible danger. It is important to keep in mind that the presence of these signs does not necessarily mean that a person will become violent. These risk factors include: a history of violent or aggressive behavior, carrying weapons or access to weapons, the use of alcohol and other drugs, isolation from family and/or peers, poor grades, and trouble controlling anger. The more of these warning signs we see, the more we believe that children are “at risk” for violent behavior. No single factor indicates a problem, but if we see a pattern of several risk factors, it’s time to take precautions. James exhibits many of these warning signs. He is isolated from his family, failing in school and
staying out much too late at night. He has discussed weapons, has a problem with anger, and you heard him plotting revenge. Has James been bullied, or excluded, or teased by peers or family members? Children who have been bullied, mistreated by others, or feel they have been mistreated, are also at higher risk for being violent than those who have not. The same is true for children who feel rejected or alone.

As you consider various risk factors, bear in mind that these are “red flags,” not predictors of violence. They are warning signs of possible trouble. After some of the recent high profile shootings in schools, the media has publicized lists of warning signs. These lists can be used to unfairly label nonviolent youth as dangerous, because many adolescents who will never become violent will show some of the red flag behaviors.

Still, parents should recognize these warning signs and use them as a cue that something is wrong and a child needs help.

When parents see a serious problem affecting their child and can’t seem to resolve it, they should connect with someone who can. To help James, you should look for a child/family mental health professional who is well-respected in your community and experienced in working with adolescents and their families. When a teen exhibits a number of warning signs for violence, as James does, parents should act promptly—for safety’s sake. As a precaution, they should make sure their children do not have access to firearms, and remove other dangerous materials or objects from the home. Refer to the sections on “Getting Help for Your Teen” (page 22) for guidance.
Parents can do much to help their teenage sons or daughters through a variety of difficult situations. Depression, violence, substance abuse, and bullying are all serious issues that parents and teens can work together to help resolve. Sometimes, however, parents need to confront their own problems before they can help their teenager.

Children who live in violent households, or homes where one of the caretakers uses drugs or abuses alcohol, often sustain severe emotional trauma that can last a lifetime. Even if a parent's violent behavior or substance abuse occurred when a child was small, the child may still suffer during his or her adolescent years.

Domestic violence and parental alcohol or other drug abuse adversely affect children. Research shows that approximately 90 percent of children who live in homes where there is intimate partner violence see or hear the abuse. Further, children who are exposed to family violence are much more likely to become violent than are children from nonviolent families. Studies also show that if a parent uses alcohol or drugs, his or her children are more likely to drink or use drugs.

Below are examples of situations where children have been affected by current, or even prior, parental behavior. If these situations sound familiar and if you need some help deciding what to do, read the resources listed at the end of this section and reach out for help for yourself or your partner.

**Parental Alcohol or Substance Abuse**

I was called to school by my daughter’s principal. Apparently, when her math teacher corrected her in class, Deirdre threw a book at him and stormed out of the classroom. Deirdre’s explanation was that “no one else cares, so why should I?” Today was a wake-up call. I have to admit it: My wife has a serious problem with alcohol. I’m not home much. I’m always avoiding the chaos. I know this is serious. What can I do now?

It sounds as though you recognize that your wife’s alcohol abuse is affecting Deirdre. This is the first step. Parents with serious alcohol and other drug problems are often overly absorbed in their own needs and problems. They may not prepare meals, or be present at them. They may not carry their share of the household responsibilities. They may not properly supervise their children’s homework and other aspects of their lives. Often their moods dominate the family. Their anger leaves other family members fearful and anxious. Roles may be confused and children end up taking care of the parents. Communication is often muddled.

Teens in such families feel isolated and alone, with no one to talk to. Their hurt and angry feelings may lead to depression, their own abuse of drugs, or may even erupt in violent behavior, as in your situation with your daughter. Children also sometimes seek attention and/or act out their feelings by shoplifting or committing other crimes.

So what can you do? First, children should not feel alone and abandoned, nor
should they be caretakers for their parents. Deirdre needs a parent who will take responsibility and act as a parent should. Make it clear that you are assuming this responsibility and let her know that you love her. She also should know that you are aware that her mother has a problem, and that it is affecting the whole family. Take time to talk with Deirdre about what happened in school and about how she is feeling about things at home. Finally, you should encourage your wife to get help immediately.

**If a family member with an alcohol or substance abuse problem is unwilling to seek help . . . Is there any way to get him or her into treatment?**

This can be a challenging situation. A person with an alcohol or substance abuse problem cannot be forced to get help except under certain circumstances, such as when a violent incident results in police being called, or when it is a medical emergency. This doesn’t mean, however, that you have to wait for a crisis to make an impact. Based on clinical experience, many alcohol and substance abuse treatment specialists recommend the following steps* to help a person with an alcohol or substance abuse problem accept treatment:

**Stop all “rescue missions.”** Family members often try to protect a person with an alcohol or substance abuse problem from the consequences of his or her behavior by making excuses and by getting him or her out of difficult situations caused by the alcohol or other drug abuse. It is important to stop all such rescue attempts immediately, so that the person with the problem will fully experience the harmful effects of his or her drinking or drug use—and thereby become more motivated to stop.

**Time your intervention.** Plan to talk with the person shortly after an incident related to the alcohol or other drug abuse has occurred—for example, a serious family argument in which drinking or drug use played a part. Also choose a time when he or she is straight and sober, when both of you are in a calm frame of mind, and when you can speak privately.

**Be specific.** Tell the family member that you are concerned about his or her drinking or drug use, and want to be supportive in getting help. Back up your concern with examples of the ways in which his or her drinking or drug use has caused problems for you or your teenagers, including the most recent incident. If the family member is not responsive, let him or her know that you may have to take strong action to

---

*Source: Adapted from National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health*
protect your children and yourself. Do not make any ultimatums you are not prepared to carry out.

**Be ready to help.** Gather information in advance about local treatment options. If the person is willing to seek help, call immediately for an appointment with a treatment program counselor. Offer to go with the family member on the first visit to a treatment program and/or Alcoholics Anonymous (www.aa.org) or Narcotics Anonymous (www.na.org) meeting. (Consult your telephone directory for local phone numbers.)

**Call on a friend.** If the family member still refuses to get help, ask a friend to talk with him or her, using the steps described above. A friend who is recovering from an alcohol or other drug problem may be particularly persuasive, but any caring, nonjudgmental friend may be able to make a difference. The intervention of more than one person, more than one time, is often necessary to persuade a person with a drug problem to seek help.

**Find strength in numbers.** With the help of a professional therapist, some families join with other relatives and friends to confront a person with an alcohol or substance abuse problem as a group. While this approach may be effective, it should only be attempted under the guidance of a therapist who is experienced in this kind of group intervention.

**Get support.** Whether or not the family member with an alcohol or other drug problem seeks help, you may benefit from the encouragement and support of other people in your situation. The support groups listed on this page, offered in most communities, hold regular meetings for spouses, family members, and other significant adults in the life of a person with any sort of drug problem. These groups help family members understand that they are not responsible for another family member’s drug abuse, and that they need to take steps to take care of themselves, regardless of whether the family member who is abusing drugs chooses to get help.

**Support Groups**

- **Al-Anon:** 1-888-425-2666
  For family members of a person with an alcohol or other drug problem.

- **Alateen:** 1-888-425-2666
  For children of a person with an alcohol or other drug problem.

- **Families Anonymous:** 1-800-736-9805
  For family members of a person with a substance abuse problem.

*Source: National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health*
HELPING YOUR CHILDREN NAVIGATE THEIR TEENAGE YEARS: A GUIDE FOR PARENTS

DOMESTIC VIOLENCE

After too many years of accepting my husband’s abuse, I finally stood up to him about three years ago. He used to hit me, yell, and pound on walls. I lived in terror. He would always be very sorry afterwards, apologizing to me and promising things would change. He never abused the children, but I’m afraid they saw too much of this. Finally, one day I packed, took the kids, and left for a women’s shelter. But now my 15-year-old daughter, Emily, has nightmares about her Dad, and gets very nervous and jumpy at times. My 17-year-old son, Eric, has been getting loud and aggressive, just as his father used to get. I think he may even be abusing his girlfriend. I feel as though I’m reliving the nightmare through Eric. Is there any hope?

You were wise to get the protection of a women’s shelter for yourself and your family. There is likely a connection between your husband’s past behavior, and the present situation. Children who witness violence are more at risk for a variety of mental health problems, including depression and anxiety, and are more likely to become violent themselves. Your husband was the male role model for Eric, who saw aggressive behavior patterns that he may be copying.

Many children who witness violence in the home suffer from anxiety problems. Emily surely has issues with anxiety and may well be feeling the impact of the trauma of what she witnessed. Some of the symptoms of anxiety disorder include restlessness, being easily fatigued, difficulty concentrating, irritability, muscle tension, and disturbed sleep.

Have you been in family therapy? This treatment could help everyone. It gives children an opportunity to identify and express feelings honestly. Emily could get help dealing with her anxiety and working out her feelings toward her father. Eric could get help for his own aggressive tendencies, learn anger management skills, and find healthy ways of expressing his feelings. If he is abusing his girlfriend, it is even more essential that he gets help immediately. The tragedy of violence between adult family members is that children who witness such violence are more at risk of becoming violent themselves, and the cycle may continue from one generation to the next. If you are still in a violent relationship, but need help, you can call the National Domestic Violence Hotline at 1-800-799-7233.

EXPOSED TO VIOLENCE OR ABUSE

Young people exposed to violence, abuse, or neglect, may be traumatized by their experiences, and are more likely to be at risk for mental health problems, for drug abuse, and for committing acts of violence.

Experiencing or witnessing traumatic events is painful and can hurt your teen as much as a physical injury. But your teen can recover successfully from trauma. Effective treatment is available.
Getting Help for Your Teen

Getting help for your teen is a major step in bringing him or her back from the edge of harm's way, and promoting a healthy future. You should also know that sometimes when a child is having serious difficulties, it may be a sign that there are family issues that should be addressed. When seeking help for your teen, consider whether the rest of the family could also benefit from counseling.

If There Are Problems at School

If your teen is having difficulty at school, such as poor grades, behavior problems, or being bullied, it is important to reach out to school officials. They can provide support, and also may be able to give you additional information about what has been going on with your child.

You can start with your child’s teacher. If the school has a counselor, social worker, or school psychologist, you can contact this person. The school principal is also a good resource and may be able to pull together appropriate staff members to talk with you about your child. If you have concerns about contacting school personnel, most school districts have designated a parent advocate or have a parent resource center to help parents navigate the school system.

School personnel are also a good source of referrals for mental health services.

If Your Teen Appears Depressed or Anxious

Depression is more than the blues; it is more than the normal, everyday ups and downs. When that “down” mood, combined with other symptoms (see “Symptoms of Depression,” page 15), lasts for more than a couple of weeks, the condition may be clinical depression. This is a serious health problem that affects the total person.

Anxiety disorders are illnesses that fill people’s lives with overwhelming anxiety and fear that doesn’t go away, and often gets worse. These disorders can change your teen’s behavior by diminishing physical health and appearance, school performance, social activity, and the ability to handle everyday decisions and pressures.

If you think your child has an emotional problem (even if it is not serious enough to be called a mental illness) that requires more help than you can give, the sooner he or she gets the needed help, the sooner he or she may feel better.
Mental disorders are real illnesses, just like diabetes or other physical ailments. Having a mental illness does not mean a person is weak, or a failure, or is not really trying. It means he or she needs treatment. Untreated, mental disorders can result in damage to self-esteem, poor school performance, problems with relationships and even suicide. Mental health treatment works; most people can be helped. Treatment helps reduce the symptoms of the mental disorder, improve relationships, strengthen coping skills and promote behaviors that make a person's life better.

Neither parent nor teen should be afraid of what people might say or think about seeking treatment. You should draw upon many available resources and may even be surprised by the support you receive from your friends and your teen's friends.

**I want to get help for my teen, but I don’t know how to find someone good.**

In picking a mental health professional, it's important to identify a person who is experienced in working with youth and families, and highly respected in the community. School administrators, counselors and teachers often know

---

**GET HELP**

If unsure where to go for help, check the Yellow Pages under "mental health," "health," "suicide prevention," "crisis intervention services," "hotlines," "hospitals," or "physicians" for phone numbers and addresses.

In times of crisis, the emergency room doctor at a hospital may be able to provide temporary help for an emotional problem, and will be able to tell you where and how to get further help.

Listed below are the types of people and places that will make a referral, or provide diagnostic and treatment services:

- Family doctors
- Mental health specialists, such as psychiatrists, psychologists, social workers, or mental health counselors
- Health maintenance organizations
- Community mental health centers
- Hospital psychiatry departments and outpatient clinics
- University or medical school-affiliated programs
- State hospital outpatient clinics
- Family service or community agencies
- Clergy
- Private clinics and facilities
- Employee assistance programs
- Local medical, psychological, or psychiatric associations

---
mental health providers with this expertise, and can usually make recommendations. Family doctors or your local mental health association can also point you in the right direction. Ask other parents as well—they are among the best referral sources.

Skilled mental health professionals understand that adolescents may be slow to embrace professional help, and perhaps were brought for help against their will. These professionals will carefully build trust with your teen, important for an effective therapeutic relationship. They help young people understand that much of their conversation is kept confidential—and also spell out the limits of confidentiality.

Language and other cultural issues may exist as barriers to accessing quality mental health services. Parents should expect that mental health professionals are sensitive to cultural and ethnic differences, and can address issues affecting diverse populations.

If you haven't found a good referral in your community, the Substance Abuse and Mental Health Service Administration runs a Knowledge Exchange Network (KEN) which can provide help in finding a mental health professional. You can visit their website at www.mentalhealth.org or call their toll-free number at 1-800-789-2647 (Monday–Friday, 8:30 a.m. to 5:00 p.m., EST).

For more information about culturally sensitive services, you can call the Office of Minority Health Resource Center at 1-800-444-6472.

There are so many different kinds of mental health providers . . . what's the difference? How do I know what is right for my child?

Social workers, mental health counselors, psychiatric nurses, psychologists and psychiatrists, among others, all have different kinds of training and skills, and provide different types of treatment. In therapy sessions, all of these mental health professionals help people talk about their experiences, thoughts and feelings, in order to solve personal and family problems and treat mental illness.

Psychiatrists and other medical doctors can determine if there are other physical illnesses that may be contributing to the problem and can prescribe medicine when this is determined to be an important part of the treatment. Medications are available that effectively treat mental illnesses that are severe or disabling. They are often used in combination with therapy.

Your family physician or school guidance counselor can help you assess what type of professional help you need.

I know this is all going to be expensive . . . how will I afford it?

You may have some mental health coverage in your health insurance plan. But if your ability to pay is limited, you should be able to access community-based services. Your state department of mental health
or local community mental health center can direct you to these resources. City and county mental health services are often offered on a sliding-fee scale, based on your financial resources, and some health centers and mental health professionals in the community may also provide for a sliding scale fee to those who cannot afford the full fee.

**What about help for substance abuse?**

Parents are usually the first line of defense against substance abuse. Set a good example by not using illicit drugs, and if you drink alcohol, do so responsibly and only in moderation. Know your family's history of alcohol and drug abuse and talk to your children about it. If you have a drug problem (alcohol, prescription drug abuse, or illicit drugs), get help for yourself. Teach your child or teenager that it is okay to get help. Learn the signs of alcohol and other drug abuse and take action to help your children if they have a problem. (See "Signs of Possible Alcohol or Other Drug Abuse," page 13.)

Teachers, doctors, sports coaches, clergy members and others involved with youth have important roles to play in helping to recognize and get help for teens who are using alcohol or other drugs.

To find the right help, you should start by getting information about substance abuse and mental health services in your community. Ask your health care professional for a referral, or contact local hospitals, state and local substance abuse agencies, school counselors, or community mental health centers. You can also contact national or local substance abuse treatment helplines, such as the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment National Helpline at 1-800-662-HELP.

**General Tips When Getting Help for Your Teen and Your Family**

Here are general tips on getting help for you and your teen:

- **Get the whole family involved.** Family stress and turmoil contribute to the problems of teenagers. Teens' problems add to family stress. The whole family must work together to solve those problems. Ideally, the entire family should participate in counseling. The priority, however, is to ensure that your teen gets help. He or she might first want to meet privately with a counselor and may agree to family involvement later.

- **Be patient.** Understand that experienced counselors take their time with young people who enter counseling against their will. It may take a while to develop
rapport and a while longer for teens to be ready to make changes. Parents should ask counselors to keep them informed on what to expect and to discuss progress as it is made. Counselors also can help parents understand what to look for in terms of changes and approximately when these changes might occur. If your child is prescribed medication by a physician, be informed about the side effects and possible adverse reactions, and understand that medications may take several weeks to work.

- **Evaluate your counselor** as you would any other professional you work with: You should feel good about the person, and you should also get results.

- **Monitor progress.** When you are unhappy with progress, talk it over with the counselor. Sometimes parents are impatient and expect immediate results. Counselors should explain their timetable and perhaps point out progress that may not be so obvious. If progress is not being made, parents should ask how the counseling approach might be modified. If the modified approaches don’t work, parents should consider getting a second opinion or transferring to another professional.

- **Be your child’s advocate.** Whether you have private health coverage or you rely on public programs for health care, find out what treatment services are covered and for how long. Let your health care professional, insurance company, social worker, case manager and anyone else involved in your child’s treatment, know what you think your child and family need. Make sure you are involved in decisions about your child’s treatment.

### Conclusion

Parents matter when it comes to helping their children successfully navigate the teenage years to ensure a safe and healthy passage from childhood into adulthood. Being knowledgeable and keeping communication open, recognizing warning signs of problems and seeking help when you think it’s needed, are important contributions that support your teen’s development.

---

**Above All . . .**

- Never give up on your teen.
- Never relinquish your love and your hope.
- Keep the conversations going—raising children is a lifetime of learning.
### Youth Violence
- **National Youth Violence Prevention Resource Center** (Federal Clearinghouse)
  - 1-800-968-8484
  - www.safeyouth.org
- **SafeUSA (Centers for Disease Control and Prevention)**
  - 1-888-252-7751
  - www.cdc.gov/safeusa

### Domestic Violence
- **National Domestic Violence Hotline**
  - 1-800-799-SAFE (7233)
  - www.ndvh.org

### Alcohol and Other Substance Abuse
- **Center for Substance Abuse Treatment**
  - Toll-free Helpline
  - 1-800-662-4357
- **National Institute on Alcohol Abuse and Alcoholism**
  - www.niaaa.nih.gov
- **National Institute on Drug Abuse**
  - www.nida.nih.gov
- **Office of National Drug Control Policy**
  - 1-800-788-2800
  - www.theantidrug.com
- **Substance Abuse and Mental Health Services Administration**
  - 1-800-729-6686
  - www.samhsa.gov

### Mental Health Services
- **National Institute of Mental Health**
  - www.nimh.nih.gov/publicat/childmenu.cfm
- **Substance Abuse and Mental Health Services Administration**
  - 1-800-789-2647
  - (Mon.–Fri. 8:30 a.m.–5:00 p.m., EST)
  - www.samhsa.gov

### General Information for Parents
- **U.S. Department of Justice**
  - www.parentingresources.ncjrs.org
- **U.S. Department of Health and Human Services**
  - www.healthfinder.gov
- **U.S. President’s Management Council**
  - www.firstgov.gov

### General Information for Teens
- **AfterSchool.gov**
  - www.americasteens.gov
  - www.afterschool.gov
- **Access America**
  - www.students.gov
NOTICE

Reproduction Basis

☐ This document is covered by a signed "Reproduction Release (Blanket)" form (on file within the ERIC system), encompassing all or classes of documents from its source organization and, therefore, does not require a "Specific Document" Release form.

☒ This document is Federally-funded, or carries its own permission to reproduce, or is otherwise in the public domain and, therefore, may be reproduced by ERIC without a signed Reproduction Release form (either "Specific Document" or "Blanket").

EFF-089 (3/2000)