Parenting Your Teen

Adolescent Development: A Primer for Parents
Acknowledgements

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Adolescence through the Ages

Teens haven’t always had the kind of life they do today. The expectations and requirements of teens, and even the entire concept of “adolescence”, have changed considerably over time. The word “adolescent”, which stems from the Latin word for “growing up”, only came into existence in the 15th century!

Adolescence didn’t exist in the Middle Ages (5th to 15th century). Parents looked after their children only until they were able to survive on their own. At that point, children became adults and parents were no longer responsible for their well-being. In fact, even in the 17th century, affection or coddling of children was considered unnecessary and detrimental - a recipe for poorly behaved children. Children were treated as adults and expected to behave as such. It wasn’t until the 18th century that parents began to recognize the importance of nurturing and educating their children. At first, education was provided by the church, focused primarily on religion, and was only available to wealthy children who lived in cities. For children from poor or rural families, education was considered an unnecessary luxury, as they usually needed to work to help support their families. This continued into the Industrial Revolution (18th to 19th century), when teenagers were needed for factory work. It wasn’t until the post-Industrial age that the modern teenager emerged.

Our modern understanding of adolescence resulted from a better understanding of how this particular phase of life has its own unique challenges and biological, social, cultural, and economic influences. Although we knew that adolescence was a distinct period separate from childhood or adulthood, many early writings on the teenage experience relied more on speculation than actual fact. Contrary to popular belief, abnormal behaviour is not a typical part of adolescence (and actually may be indicative of mental health problems), and neither is a period of extreme teenage angst necessary for adolescent development. However, strong emotions (both negative and positive) are commonly experienced during this period of life. These are normal and not a sign of a mental illness.

Even over the past one hundred years, the lives of teenagers have changed dramatically. As you’ve probably noticed, the lives of today’s teenagers differ significantly from when you were a teenager. The ever-expanding reach of technology and social media has shifted how teens communicate and relate to each other, how they learn, and the kinds of experiences available to them. Although being a teenager today has many similarities to when you were a teenager, the way your teenager will experience their life will likely be quite different from your own experience. For example, the period of time we call adolescence is now longer in duration than at any previous point in history. Not in terms of biology, but in terms of socio-cultural phenomenon. This book is designed to help you understand what life is like for a teenager today and help you better understand and overcome the challenges of parenting a 21st century teen.
Due to a very influential theory (G. Stanley Hall’s “Storm and Stress”) at the beginning of the 20th century, it was long believed that conflict, risky behaviour, and intense mood swings were a necessary component of normal adolescence. We know now that adolescence doesn’t have to be a time of prolonged, extreme angst. Many of today’s teens pass through adolescence experiencing only mild conflict with their families and occasional “rough spots”. There are still teens who struggle, but struggle and conflict is not the necessary rite of passage we were once led to believe. Similarly, not so long ago, parents were expected to essentially stop parenting when their children became adolescents. Today we understand that parenting does not end with adolescence. Rather, it takes on different characteristics and addresses more complex challenges. We now realize that the way you parent your teen and the relationship you have with them will have substantial impact on how they will experience adolescence. And teens agree - 92% of teens say their behaviour is influenced by how they were brought up, among other factors.

More recently, a shift in cultural perspectives has advanced the perspective that adolescents are fragile, largely unable to make their own decisions and should not experience failure. Normal negative emotions are frequently confused with symptoms of a mental disorder. These perspectives may create conditions that can negatively impact the ability of teenagers to develop age appropriate resilience.

Parenting teenagers can be a complicated task. It is important for parents to be aware of the various cultural frameworks that impact how adolescents are seen and not to be bound by them. For example, recent parenting styles that aim to protect teenagers from the usual stresses of life can have negative impacts on their ability to develop into resilient adults. Parenting challenges include finding the right balance between promoting freedom and providing support.

Adolescence is a unique time. As your teen begins to leave childhood behind, they are working to figure out who they will be as an adult. Teenagers are now faced with trying to sort out an incredibly complex world and have the task of learning how to navigate it successfully. They are beginning to figure out all of the pieces that make them who they are during this time in their lives – their identity! They are also learning the ins and outs of becoming independent. Understanding typical teenage behaviour and the biological, emotional, and cognitive changes that teenagers experience can make it easier for you to handle the challenges that come with parenting a teenager. Here are some developmental milestones that your teen may experience:

### Ages: 10-13
- Puberty begins (females usually mature 1-2 years earlier than males)
- Struggle to maintain a balance between family and independence
- Increased awareness of physical attractiveness and physical changes
- Preoccupation and self-absorption
- Tendency to indulge in unrealistic goals and future expectations
- Desire to expand social network and test authority figures
- Greater fluctuation in behaviour, mood, and motivation
- Increased interest in sex and romantic partners
- Decreased impulse control and more intense emotions

### Ages: 14-16
- Greatest levels of teenager-parent conflict
- Increased focus on time with friends
- Decreased interest in family activities
- Puberty for some may be completed
- Desire to mirror peers (e.g., clothing, language, values)
- Peers may be more influential than family
- Feelings of self-absorption and confusion
- Increased ability to communicate ideas, thoughts, and feelings
- Begin to develop their own opinions, values, and identity

### Ages: 17-21
- Begin to accept and fulfill adult responsibilities
- Increased positive family dynamics
- Increased ability to make decisions independently
- Increased ability to express thoughts, ideas, and emotions
- Decreased concern with appearance
- Increased self-assurance
- Decreased incorporation of peer values
- Improved problem solving skills
- Strengthened values
Physical Changes

Puberty

Typically around age eight or nine, puberty is triggered by the body beginning to secrete an increased amount of growth hormone, cortisol, thyroid hormones, and various sex hormones (e.g., estrogen, progesterone, and testosterone). These hormone changes lead to a number of physical changes, including weight and muscle gain, increased body hair, skeletal maturity, growth spurts, and increased sexual capacity. For females, puberty usually begins around 8 or 10 years of age and lasts for about four years, whereas for males, puberty usually begins around 9 to 11 years of age and lasts for about three years.

Teenage Brain

During the teenage years, the brain grows rapidly and undergoes many important changes. Certain parts of the brain decrease in size while other parts of the brain are enhanced. Pathways that connect different brain regions are strengthened as they are used and consequently, become more efficient. Other pathways that are not used eventually disappear to make way for more useful neural connections (this process is called pruning – feel free to explore the following link if you are interested in learning more about the teenage brain architecture: https://developingchild.harvard.edu/science/key-concepts/brain-architecture).

One of the most important changes in the brain during this period is the development of the frontal lobes – the part of the brain just behind the forehead. This part of the brain is responsible for something called executive functioning, which includes problem solving, planning, social awareness, strategic thinking, risk assessment, and impulse inhibition. It’s the part of the brain that tells us “Hey, maybe that’s not such a good idea...”. They continue to grow and develop during adolescence and don’t actually stop growing until usually the mid-twenties, which explains a lot about risky adolescent behaviour.

Brain growth and development is influenced by three main factors: genetics, early environment (beginning in the womb), and current environment. A healthy environment during adolescence may contribute to healthy brain development. Getting enough sleep, eating healthy, exercising, having positive social and family relationships, and successfully overcoming life challenges all contribute to good brain health. Head injury, poor nutrition, lack of sleep, negative peer groups, and misuse of drugs or alcohol can all have a negative impact on brain development. As a parent, one of your most important roles is to help your teenager seek out and engage with healthy, rather than harmful, environments. More information about each of these aspects of healthy living is presented in the next few pages.
Healthy Growth and Development

Healthy brain development and growth requires fuel. Here are areas in which you can encourage your teen’s behaviours to help promote the healthy brain development needed for growth and success.

Eating

Calories are fuel for a growing brain and body, and people need more calories during the start of adolescence than at any other point in life. On average, teenage boys require 2400-2800 calories and teenage girls require 1800-2400 calories daily, depending on individual characteristics. It’s important that those calories come mostly from healthy choices. That includes lots of vegetables and fruit, whole grains, foods rich in calcium, iron, healthy fats, and a moderate amount of lean protein. The occasional fast food or junk food is totally fine – but it shouldn’t be a regular occurrence! Teaching your teenager how to make healthy food choices and how to prepare some healthy meals is one of the many ways you can help them grow and thrive.

For help figuring out what your teen’s diet (or your own diet!) should look like, check out Canada’s Food Guide: https://food-guide.canada.ca/en/.

Sleeping

It may be hard to believe, given most teens’ propensity for sleeping in, but the majority of teens don’t get enough sleep. There are many reasons why this happens. First, teenagers need, on average, nine hours of sleep per night. At first glance, this might seem feasible. If they have to be up at 7am for school, then they can just go to bed at 10pm, right? But here is the problem – the hormones that the teen brain secretes to make your teenager drowsy and tired aren’t released until much later in the evening. Later than when they were children and probably even later than when you get tired. So when your teen tells you they aren’t tired at 10pm – it’s probably the truth. And with school starting at a set time in the morning, by the time most teenagers are tired enough to sleep, there’s no chance for them to get the nine hours they need. Typically, teens get about 2 hours less sleep per night than they need. This is called sleep deprivation.

Sleep deprivation can have serious negative consequences. When we’re not well-rested, we have difficulty learning, remembering, and coping with stress. Sleep is vital to our emotional, physical, and intellectual health and essential for healthy brain development. REM sleep (Rapid Eye Movement), in particular, is necessary to feel well-rested. REM
sleep is when you do most of your dreaming and it accounts for 20-30 percent of your sleeping time. Deep slow wave sleep is also important and this can be disrupted by frequent awakenings (e.g., when your teen’s cell phone receives a notification). Helping your teenager get the sleep they need can be a parenting challenge.

So what can you do? Start by recognizing that your teen legitimately may not be tired in the evening. If they aren’t tired, ask them to unplug (no phone, TV, computer, tablet, or gaming device) at least an hour before bed. This isn’t a punishment. These devices stimulate the brain and make it difficult for people to fall asleep and experience a restful sleep. If your teen isn’t tired yet, let them do something quiet in their room – reading, drawing, and writing in a journal are all great options. Here are some other tips:

- Encourage your teen to go to sleep and wake up within the same timeframe every day – even on the weekend. Our bodies can’t tell the difference between a weekday and a weekend. Staying up late or sleeping in on the weekend can make it difficult to fall asleep and wake up during the week. But if your teen is sleep deprived, they need to catch up on their sleep time. And the weekend is where that usually happens because they don’t need to be at school early in the morning. This may be difficult to achieve, but it is ideal to creating a healthy sleep hygiene routine.

- Help your teen develop and follow a regular nightly routine before they go to bed. A series of steps to follow every night cues our bodies that it’s time to fall asleep. Routines for winding down before bed could include: having a warm bath, light stretching, reading a book, listening to relaxing music or sounds or writing a ‘to-do' list for the next day to clear your mind from distractions.

- Ask your teen not to use a computer/tablet, do homework, watch TV, or text friends from bed. Their bed should be used for sleeping. This teaches your teenager’s body that when they are in bed, they should be sleeping. If possible, add a chair and/or desk to your teen’s room, so that they can have somewhere to do work and to relax.
Exercising

It’s really important that your teen exercise regularly. Not only is it important for their physical health but exercise is one of the healthiest and most effective ways to cope with stress and take care of your mental health. Teenagers should get about 30 minutes of vigorous exercise (e.g., a brisk walk, jogging or running, swimming, dancing, or playing a sport) per day, five days per week. Although walking to and from school or the bus stop is a helpful addition to daily exercise, it’s not vigorous enough to make a difference on its own.

Success and Failure

You can’t win every time. In fact, it’s important for your teen to fail and make mistakes on occasion. It’s how they will learn to cope with disappointment, pick themselves back up, and find the strength to try again. These experiences contribute to the way the brain develops. And just like learning to deal with failure shapes the brain, so does experiencing success. It’s just as important for your child’s development and self-esteem that they also find areas to succeed and thrive. Having a balance of these positive and challenging experiences helps your teenager develop into a confident and capable adult. Encourage teenagers to participate in activities and projects that play to their strengths, but also encourage them to spread their wings and try new things, even if you think they might fail. Your role as a parent is to help your teenager navigate the ups and downs of life; not to shelter them from every possible misfortune.
Healthy Relationships

Children learn about relationships through example. The relationships your teenager has with you and with the rest of your family shape the way their brain recognizes and understands relationships. You are the first relationship they ever form. Your relationship creates a template in your teenager’s brain for what a relationship should be. Do everything you can to have a positive, supportive, and open relationship with your child. Use your relationships with your teenager, with your partner, and with your other children to model healthy relationships for your teenager. Healthy relationships involve support and understanding, honest and open communication, equal give and take (i.e., both people are benefitting from the relationship), and clearly defined boundaries that are appropriate for the age, developmental level, and relationship status of the two people involved (e.g., understanding that open and honest communication doesn’t involve telling your teenager about your sex life or that equal give and take doesn’t include placing undue burden on your teenager for financial responsibilities). Your teen will take this relationship model with them throughout life.

For more information about how to help your teen understand that daily stress is healthy, check out the following resource: http://teenmentalhealth.org/wp-content/uploads/2017/09/Stress-Two-pager.pdf
Identity

Much of the conflict and stress associated with being a teenager stems from one core aspect of adolescence – identity development. Identity is all of the pieces of your teen that makes them who they are – it’s ever-evolving, and they can have multiple identities. In different areas of their life, certain identities may be stronger.

Adolescence is the time when most young people start trying to figure out who they are and who they want to become. Teenagers will try on different “identities” for size, looking for the one that fits best. This is why you might have a teen whose preferences change from year to year. They may be interested in classical music one year, and rap the next. They are trying to figure out what they like and where they fit best. Feeling like you don’t know who you are can be stressful – especially when you think you should know. This is part of the normal challenges of adolescence; most teenagers have yet to develop the complex reasoning ability necessary to understand that their identity can have multiple components. Consequently, they may try to fit themselves into stereotypical boxes (e.g., “football player,” “band member,” “honour roll student,”); none of which are a perfect fit because these categories are too one-dimensional. As teenagers age and the frontal lobes of their brain further develop, they are able to merge varying aspects of their identity and embrace the complex person they actually are (e.g., a good student who plays football and plays in a band, along with many other characteristics). There’s no short-cut through this process. It’s an essential part of being a teenager. Having a sense of identity comes only through time and experience.

Where do our identities come from? They are influenced by our experiences, our natural abilities, our relationships, and our environment.
Experiences and Natural Abilities

Our experiences shape who we are. People often underestimate the impact of their experiences on who they become. Through our experiences, we learn what we are good at, what we find challenging, how people perceive us, and many other things. Our experiences intertwine with our natural abilities – for better or worse. If a teenager struggles academically due to their natural abilities and constantly feels inadequate due to their experiences, that inadequacy may become part of their identity. However, we must remember that everybody learns differently, and the typical school does not always provide support for different learning styles. Teenagers are less likely to feel inadequate if they are encouraged by parents to work hard and persevere, rather than be overly demanding. Because the teenager has experienced that they can succeed with enough hard work, their identity will include characteristics such as ‘capable’ and ‘hard worker’ instead of ‘inadequate’ or ‘stupid’. Teens respond to their parents’ expectations. Expectations of “doing your best”, “working hard”, “being honest and fair”, etc., help develop those characteristics in your teen. Praising your teen for hard work, rather than for “being smart” gives them incentive to persevere when challenges arise. Similarly, protecting your teen from reasonable failure or reasonable stress can hamper their capacity to develop the innovative, problem-solving resilience that they need for life success.

Relationships

Our identities are also largely shaped by our relationships. In fact, many theories of identity claim that we first start to understand who we are by understanding how other people see us. A child who is constantly made to feel stupid by their family may believe they are stupid. Conversely, a child who is constantly made to feel capable by their family is more likely to believe they are capable. You are the mirror through which your child sees themselves, especially when they are young. As a teenager, friends and peers also start to influence how your teen understands themselves, but even if your teen doesn’t want to admit it - you still play a significant role. Don’t underestimate the impact your interactions with your child have on their sense of self. Studies of teenagers demonstrate that they understand the value and importance of their parental relationships. Most Canadian teens, for example, report that their mothers and fathers and how they were brought up are the most important influences in their lives.
Environment

Environments also play a significant role in the development of a teen’s sense of identity. At a societal level, different societies and cultures have different ideals and expectations, which then help to shape how we think we should be. In many developed countries, societal expectations include that all children and teenagers should be educated. Thus, strengths or weaknesses in education become core components of identity. Western society often emphasizes the importance of being independent (compared to Eastern societies, which often emphasize putting the family first and may put more emphasis on relying on their community). Consequently, teenagers growing up in a Western society may be more likely to incorporate success at being independent into their sense of identity. On a smaller level, subcultures also have considerable impact on how teenagers form identities. These subcultures can be based on geographic regions (e.g., a certain part of a city), a sport (e.g., skateboarding culture), a type of music (e.g., rap) or any number of unifying characteristics. These subcultures set expectations for how someone in that subculture should be – which then influence what characteristics become salient aspects of identity for teenagers in that subculture. Even the school environment impacts your child’s identity. Some schools favour academics, whereas others favour sports or the arts. The values set forth by teenagers’ environments are the values on which they will measure and compare themselves - ultimately becoming a component of their identities.

You can help your teen develop a healthy, critically-engaged identity by encouraging them to engage with environments that promote that ideal, while still being something that they find interesting and enjoy. For example, volunteer organizations, international humanitarian agencies, etc. Check out organizations such as Katimavik (katimavik.org; available to teenagers who live in Ontario or Quebec) or Canada World Youth (canadaworldyouth.org).
Conflict and Communication

Your teenager will get angry at you, your ideas, and your directions, and there will be times when they think you're being unfair. That's okay. In fact, it's actually good for your teen to challenge your perspectives and use your responses to guide their new learning. Conflict is a normal and healthy part of life. Your teenager is going to encounter conflict in many different parts of life throughout their entire life. How they deal with that conflict will be learned in large part from you. Use your interactions to model good conflict resolution with your teen. Sometimes it can feel as if you are in constant conflict as your teenager tests boundaries and tries to figure out who they are. Remember that with each successful and unsuccessful conflict resolution, your teen's brain is growing and developing, and they are learning how to resolve conflict in other areas of life. This period won't last forever. Most parent-child conflict happens in the early to mid-teens and decreases by 17 or 18. Hang in there!

Much conflict arises from poor communication. Although most people only think about verbal communication, nonverbal communication can be very important. Verbal communication refers to the things you actually say (or write). Nonverbal communication includes things like your tone of voice (i.e., how you say it), your facial expression, and your body position (e.g., crossed arms). Although they may not be conscious of it, people often pay as much attention to your nonverbal communication as they do to your verbal communication. Unfortunately, we rarely pay as much attention to our own nonverbal communication.
Here are some tips for communicating with your teen to help reduce conflict in general and calmly resolve conflict when it arises:

- **LISTEN.** This is the single most important thing you can do. Pay attention to what your teen is saying verbally and nonverbally. Don’t spend the time they are talking thinking about your own response.

- Don’t interrupt. Let your teenager express their thoughts without jumping in or jumping to conclusions. Ask the same of your teenager.

- Speak clearly. Pause before you respond to ensure that what you say is actually what you want to say. It’s easy to get caught up in the heat of the moment and blurt out something you don’t really mean or later wish you hadn’t said.

- Be aware not only of what you say but of how you say it. Often your teen is more aware of how you say something than they are of your actual words.

- Be aware of your body language. If you are inviting them into your room (such as a home office) this can be perceived as an authoritative environment; you are automatically creating a power dynamic that disadvantages your teen. Similarly, if you go to their room to communicate, it can be perceived as invading their space. Try to talk in a neutral environment such as a living room or kitchen, if you need some more privacy from the rest of your family, consider going for a walk or sitting outside.

- If your teen starts to get upset, ask them what they think you meant – often what we mean to say and what someone else hears us say are different.

- Similarly, ask your teenager if everything is okay or if something else is on their mind if they seem unusually emotional. Our experiences shape how we interpret information. It may be that something you have said has triggered an emotional reaction in your teen due to an earlier experience they had (e.g., at school this morning; last week with a friend). Their reaction may be more about that earlier event than it is about what is going on right now. But it still could be the topic of conversation, even if it seems like a small deal to you.
• Try to understand where your teen is coming from. What has happened to make them interpret the situation in a particular way?

• Give reasons. Calmly tell your teenager why you don’t want them to do something instead of just saying “no”. Giving teenagers a reason why helps them understand where you are coming from and with time, they often understand your point. Discussing “why” can lead to thinking about a problem instead of “feeling” a problem. This may help your teen engage their frontal lobe development, reasoning, and rational thought, leading to more effective problem solving.

• Similarly, allow your teenager to present their own reasons/side of the argument – and seriously consider them. Although it's important to be consistent and set boundaries as a parent – sometimes your teenager is right. If they present a well-reasoned argument, tell them so and consider the request again. But don't “give in” just because you're tired of arguing. This only teaches your teen that if they pester you enough, you'll give in. You are their parent – not their friend.

• Stay calm. Raising your voice will only encourage your teen to raise their own voice.

• Walk away (and allow them to walk away). Take a break if things get too heated or if the conversation keeps going in circles. If they walk away from you, they likely are not in the right headspace to communicate effectively right now. Respect that they recognized that and try again when it is a better time for them.

• Communicate while doing a simple activity. Often, sitting down face to face can be intimidating. If one or both of you is doing something else, it may relieve some of that nervous energy. You can have a conversation while driving, walking, cooking, knitting, or even colouring. These small activities act as a fidget to release energy that might otherwise add unnecessary stress to the conversation.
• If the resolution to the conflict is that your teen does not get what they were hoping for – give them space to calm down and deal with their disappointment without losing face. Sometimes parents need to say no.

• Remember, conflict does not usually resolve with a zero/sum outcome. “Winning” an argument is not usually the goal! Conflict resolution often requires compromise. Healthy conflict leads to healthy resolution and maturity.
Independence

A major component of adolescence is not only learning who you are (i.e., your identity), but also learning how to fit into society. In adolescence, teenagers’ core social focus shifts from their family to their friends. Although parents are still influential, peers start to exert a larger influence on how a teenager thinks and behaves. It can be a challenge for some parents to let their teenagers exercise independence – but it’s an important step for teenagers to take. Teenagers need to spend time with other people their age in order to develop social skills and to experience a sense of belonging. Spending time with peers helps teenagers learn how to interact and form positive connections with other people, especially with people who might be quite different from themselves. Although it can be challenging to relinquish control over your teenager, it’s an important step in your teen’s development. Instead of trying to force your teen to spend most of their time with family, try setting a designated family time each week and leave other times open for your teen to spend with friends (within reason). Although the choice of friends is ultimately your teen’s decision, it is influenced by your parenting and the values your family has instilled in your teenager. Your teen observes relationships around them, so you as a parent having healthy relationships with friends, partners, and even your own parents, is setting the stage for the kinds of relationships they pursue. You can also help your teenager become involved in various positive social activities (e.g., sports, music, volunteering) where they have the opportunity to meet other like-minded peers. An important opportunity is for you as a parent to get to know your teen’s friends.
Knowing their friends will help you better understand your teen. If you feel comfortable, be an adult that your teen’s friends can turn to. Not only will this help keep your teen and their friends safe, but it will likely bring you closer to your teen. If their friends like you, your teen is more likely to be proud of you. Many parents find that they develop their own friendships with their teen’s friends and sometimes even with the parents of those friends. In some cases, these friendships can last a lifetime!

Coinciding with their increased independence, many teenagers not only spend less physical time with their family, they also spend less emotional time. That means that your teenager may not share their thoughts and feelings with you as they may have done before. There are probably many different thoughts and emotions circling through your teenager’s head as they attempt to sort themselves out. This is perfectly normal. Give your teen some space. Don’t try to force them to talk to you or tell you what is on their mind. Let your teen know that you’re there and ready to listen when they want you to listen. The key part here is to actually listen if your teenager comes to talk to you. If your teen wants your advice, they will ask. Likely, they will be able to resolve the issue independently, and may just need you as a set of ears to work through the possibilities. Let your teen take the floor. If you have something you really think they should consider, ask your teen if they want to know what you think. Your teen will appreciate that you’re respecting their independence. Similarly, if your teen tells you something that upsets you, try not to overreact. It’s important that your teenager feels that they can come to you when something is wrong. It’s okay to express disappointment, frustration, or concern – but try not to yell, cry, or walk away from the conversation. If your teenager believes that you can’t handle what they have to say, they will probably choose to say it to someone else.
The way teenagers communicate today is drastically different than when most parents were teenagers. With the ever-increasing possibilities afforded by new technology, many teenagers live as much (or more) in the virtual world as they do in the real world. This has advantages and disadvantages. From a positive standpoint, using technology to communicate provides teenagers with access to their peer social network 24/7. For teens looking for somewhere to belong – the internet can help them find other like-minded teens without the geographical barrier of proximity. It can also be quite beneficial for anxious or socially awkward teens, by helping them form connections and interact with other teens when they might not otherwise be able to.

Though these can be seen as advantages or positive things, they can also quickly turn into negatives. Having 24/7 access to peers means that teens can’t get away from any bullying they might be experiencing at school. It can also be exhausting feeling like you have to be in constant communication with your friends, often in multiple formats. Your teen could be Snapchatting and group messaging the same people, having two completely different conversations at the same time. All the while, they are also sharing a photo on Instagram, and texting another friend privately about something that they just saw on Facebook. No wonder your teens face is always in their phone - the “multitasking” they are doing is consuming all of their attention. Social media although it can be beneficial for socially anxious teens, can also create more worries in others. From a negative standpoint, life doesn’t only exist in the virtual world. It’s essential that all teenagers learn proper face-to-face communication and how to talk to the person right in front of them, rather than the person through their phone. The key here is balance.

It’s also important to remember that not everything you see online is necessarily real – for example, most peoples’ feeds are a highlight reel of their lives, so it’s important to remember not to compare yourself to what you see online. Also keep in mind that it is easy to fabricate information and put it up on the internet, so a critical eye is key to keeping yourself safe on the internet.

Acceptance

Regardless of your perspective on technology, the reality is that technology is going to continue to develop at a rapid pace. Currently, studies tell us that 87% of teens have access to a computer or laptop at home, 73% have access to a tablet (e.g., iPad, Playbook), 88% have their own cell phone, and 73% own a smartphone. 91% of teens use the internet on a mobile device, 82% of teenagers use social networking websites (e.g., Snapchat, Tictoc, Instagram), 62% of online teens upload photos of themselves, 27% upload videos of themselves, 13% stream live videos of themselves, and 37% use video chat. On top of that, teens send an average of 60 texts messages per day and all of these numbers are growing. Your teenager isn’t going to stop using the internet or communicating with friends via text message or social media any time soon.
Social Skills

Some parents are concerned that excessive reliance on technological communication will cause their child to develop poor social skills. Balance is important here. As a parent, you can take active steps to ensure that your teenager is getting just as much or more in-person time with peers as social media time. Help your teenager get involved in positive activities with same-age peers (e.g., clubs, sports, hobbies, volunteering) and implement clearly-defined rules for social media use. Those rules might include requiring your teen to give you their password to their computer or account, no phones at the dinner table, putting the phone away at 10 p.m. every night, or accepting your friend or follow request on Snapchat/Instagram/WhatsApp. Your teen should not bring their personal communication device into their bedroom when they go to sleep. Whatever rules you choose to set, make sure that they are clear to the whole family. These rules may vary between your kids; your 9 year old likely needs different rules than your 16 year old. Ensure that you are revisiting the rules with your teens as they mature and as technology use changes and update the rules accordingly. Teenagers need to know what you expect – and what the consequences are for breaking those rules. Teenagers also need consistency. Make sure you and your partner are on the same page and that all family members follow their designated rules, not just your teenager. Remember – you need to model good social skills and responsible use of your electronic media.

Language Skills

Some parents worry that their children’s language skills will deteriorate because of their use of short-hand, slang, acronyms, and other by-products of the technological age. Use of these communication short-hands is fine – in the proper setting. Language grows and evolves, and these short-hands are a consequence of that change. Make sure your teenager knows the difference between what is acceptable in formal writing (e.g., in an essay, or in an email to a teacher or supervisor) and what is acceptable in casual interactions (e.g., with friends over text message). Although it may seem obvious to you, not all teenagers realize that short-forms like “4” instead of “for” or “2” instead of “too” are inappropriate in written documents, such as an essay. Chat about this with your teen and encourage them to ask questions if they are unclear. Introducing your teen to good literature and engaging them to read will help them develop both their vocabulary and a better understanding of existential challenges.
Safety

Given that young people are becoming technologically-savvy at younger and younger ages, it’s essential that you talk with them early about internet safety, well before they reach adolescence. Important things for teenagers (and younger children) to understand include:

- People can claim to be anyone on the internet. It’s really important for teenagers to understand that just because someone claims to be a 14-year-old girl, doesn’t meant that they are actually a 14-year-old girl; that person could be a 45-year-old man. For most of the internet, there are no safety checks. People can claim to be whomever they choose and there is no way to know if they are telling the truth. The internet makes it much easier for predators to seduce vulnerable individuals. Make sure teenagers understand that they should never trust someone they’ve only met online. Monitor your child’s use of the internet and ask them questions about their activities to keep alert for potential threats/risks.

- Avoid giving out personal information. This can include their address, phone number, age, parent’s jobs, financial information, etc. It may seem innocent but as previously mentioned, they don’t know who they are really speaking to on the internet.

- What goes on the internet is PERMANENT. Posting or sending inappropriate photos or comments is not something that can be deleted later on. Even if your teen tries to delete something later, a copy of it remains on the internet (in addition to the copies downloaded by other people before the original was deleted). If it’s not something they want everyone to have access to forever, then don’t put it on the internet. This includes platforms such as Snapchat. Even though Snapchat alerts you when a screenshot is taken, it is still possible for people to get around these functions. Another thing to be aware of is private accounts such as spam/friends only Instagram accounts. Even if your teen only lets a very select group of people follow them, it is easy for these things to be saved or shown to other people, no matter how much your teen may trust these friends.

- Just because you can’t see someone doesn’t mean you can say whatever you like. Words can have tremendous impact – for good and for bad. If you wouldn’t say it to someone’s face, you shouldn’t say it online.

- Don’t share your passwords with anybody. This includes best friends, significant others, etc. The only person your teen can share their passwords with is you (again, respect their privacy).
Cyberbullying

24/7 access to peers can mean that teenagers who are bullied don’t have a place to escape. The bullying doesn’t end when the teen goes home at the end of the school day. Internet, texting, and social media use make it possible for bullies to have 24/7 access to their victims, making it hard for teenagers to escape. Make sure your teenager understands the impact their words can have on other people. Stay on top of your teen’s social media use and be alert for signs that they are being bullied (or are bullying someone else). Cyberbullying can take the form of hurtful text messages, emails, instant message conversations, tweets, public posts, or photos that the victim doesn’t want shared.

Research has found that approximately one quarter of teens may have been targets of electronic bullying. Having an honest and open relationship with your teen can help you stay alert for signs of bullying.

If your child is being bullied, work with them to determine a course of action. Bullying is not just a “normal” part of being a teenager and it is not necessary for “toughening up” your teenager. Bullying has no positive purpose and its negative impact can be sustained and severe. Work with your child and the school to ensure that your teen has a safe and supportive environment in which to grow and learn.
Sexting

Sexting has become integrated with teenage sexuality, and it can be fun and part of a healthy intimate relationship. However, it is important that your teen understands the risks of sexting so they can make informed decisions. It’s easy to forget that information they send or receive can be electronically saved and be potentially available to people they may not want to share that information with. Both texts and photos that they send to someone can also be forwarded and shared with others. Have a conversation with your teen, and ask them to consider these potential consequences before engaging in these activities. Also inform them that although sometimes difficult to do, there are places that they (or you) can turn to if things go wrong. Visit www.needhelpnow.ca if you or your teen need help removing unwanted information. You or your teen can also request to have photos or posts removed from various social media platforms by stating that they violate the site’s guidelines. Ensuring your teen knows about the dangers of sexting is part of the parenting demands in today’s world.
Dating

Taking romantic interest in others is an important developmental milestone for teenagers. Much like friendships, dating allows young people to enhance their social skills, experience different viewpoints and perspectives, and expand their self-identity. Not all teenagers will be interested in dating at the same time, but as they begin to shift their focus from their family to their peers, romantic relationships move to the forefront of some teenagers’ minds. Talk with your teen about your family values and ask them about any values they hold that may differ from yours. Discuss dating and what rules and boundaries you have for each other. Your teen will only respect your wishes (e.g., not allowing their significant other to sleep over in their bed) if you respect theirs (e.g., not allowing you to read messages between them and a friend/significant other). If together, you and your teen agree that they are ready to start dating, encourage them to keep an open dialogue with a trusted adult (whether that is you, your partner, an aunt/uncle, etc.). Regardless of your consensus on dating, you (or said trusted adult) need to talk to them about sex. Teenagers don’t always get their information from reliable sources and it’s so important that decisions with lifelong consequences, like sex, are based on factual information.

Some people are aware of their sexual orientation long before they reach adolescence, but for many LGBTQ+ teenagers, adolescence is when they start to become fully aware of their sexual preference. Although some teens quickly become certain of their sexual preference, other teens need to take time and experiment in order to be certain of how they feel. Adolescence can be a stressful time for any teen, but for a teen who is struggling with accepting or expressing their own sexual identity; this time can be especially conflicting. If your teenager is struggling with their own sexuality, they will be more likely to confide in you if they trust that you will be loving, supportive, and nonjudgmental. Having a positive and open relationship with your child is the best way to ensure your teenager knows that they can trust you. Regardless of their sexual orientation, your teenager is still your child. Remember that they may need you to openly express your love and acceptance of them. It may seem obvious to you that you love your child regardless of their sexual orientation, but your teenager may need you to make that message very clear to them.

This website is a great resource that explains how to talk to your child about sexual health: https://teachingsexual-health.ca/parents/

Parenting Your Teen: Dating
According to recent data, about 80% of teens believe that premarital sex is acceptable, which is a decline from the number of teens who believed it was acceptable in the 1970’s (90%). Teens are also waiting longer to have sex – 12% of teens had had sex by age 15 in the mid 1990’s, whereas now, only about 8% of teens have had sex by age 15. Although attitudes towards sex seem to be changing among teens, there is still considerable variation among teens who were raised with different parents, cultures, and/or religions.

Some parents believe that sexual activity among teenagers is wrong and consequently, do not educate their teenagers about sex, believing that being taught about sex will lead to teenagers having sex. Research has found that this is not true. Contrary to popular perception, most teenagers participate in low levels of sexual activity and when they do, have only one partner at a time. Providing sexual education does not increase the likelihood of teenagers having sex but it does increase the likelihood that if they have sex, it will be safe sex (e.g., use condoms and birth control). The fact is that if you don’t teach them about sex and safe sex, they’ll look elsewhere – and not all sources have accurate information (especially internet sources). Internet porn is very accessible and is a place where many teens turn to learn about sex. Porn is not an accurate representation of sex and does not provide accurate information, but many will use it as a source of information because it is so accessible. Talking to your teenager about sex allows you to influence the message they get and help provide information that it is accurate.

You may find it uncomfortable to talk to your teenager about sex. Do it anyway. It is likely your teen will be uncomfortable with you talking about sex too. Acknowledge the possible awkwardness and try to push past it to keep an open conversation. If your teen really doesn’t want to talk to you about it, work together to make a plan of how your teen will learn this. Whether that is having the “cool aunt” talk to them, or have them watch a curated list of YouTube videos alone that you have selected; as long as your teen is receiving accurate information, it doesn’t matter who gives it to them. Try your best to be open and honest. Use real terms, not euphemisms. If you don’t know the answer to something, tell your teenager that you’ll look it up or you can find the information together. Avoid making vast generalizations (e.g., “Teenagers who have sex end up pregnant”) or dramatic fear-inducing statements (e.g., “If you have sex, you’ll get a Sexually Transmitted Infection). These statements undermine your teenager’s trust in you. Give the facts. If you’ve raised your teen well, they should be able to take that information and make the right decision for them. Talk about LGBTQ+ sex. Don’t assume that your teen will be having sex with the opposite sex. Talk about how to have safe LGBTQ+ sex, even if your teen hasn’t expressed their sexual orientation. It is better they know too much than too little!

If your teenager tells you about a sexual experience they have had, try to react without exaggeration or exasperation. Stay calm, thank your teenager for being honest with
you, and work with your teenager to ensure that they are making safe choices. They may want to discuss these new experiences they are having (or they may not), and you should try to be open and receptive to them.

If your teen discusses an experience of sexual assault with you, take your teenager seriously and express that it is not their fault. If it has just happened, inform them that they have options. If they think they may want to take this to the police, first take your teenager to the hospital and make sure that they don’t shower or do laundry first. They can go to the hospital regardless of if they want to go to the police. Having this proof later may be helpful after they make a decision about legal proceedings. They do not need to take legal action if they are not comfortable with that, do not pressure them to, but support them if that is the direction they want to go. Ensure your teenager has someone to talk to. A counsellor or psychologist who specializes in sexual assault can help your teenager sort through the array of emotions that accompany being sexually assaulted.
Consent to Sexual Activity

It is imperative that you teach your teen about consent. In order for you to teach them effectively we want to make sure you know all about consent too! Consent, where all parties involved are safe from emotional, social, and physical harm, is an essential part of sexual encounters. Consent is critical not just to sexual intercourse, but to all sexual acts, including sharing or posting sexual images and videos with others.

What is Consent?

Consent is when all people involved agree to a sexual encounter and have the freedom to decide at any moment that they are no longer interested and want to stop the sexual activity. If someone is coerced, intimidated, or threatened into having sex, they have not given consent (even if they have not said “no”). If someone is incapacitated (e.g., due to alcohol/drugs or some other factor), they cannot provide consent. Consenting to one act (e.g., kissing) does not mean the person has consented to other acts (e.g., oral sex or sexual intercourse). Likewise, consenting to an act at one point in time (e.g., having sex this week) does not mean the person has consented to that act in the future (e.g., having sex tomorrow, next week, next month, or next year). Consent means that at this exact point in time, you are agreeing to participate in this particular sexual act. If you are initiating sexual activity, it is your responsibility to obtain consent.

Age of Consent

Not all people are able to provide consent. Children, teenagers up to a certain age, and many people with intellectual or developmental disabilities are not able to provide consent, because they are unlikely to understand the consequences of what they are consenting to. Note that this includes the sharing of sexual images and videos (see the Technology section for more). The legal age of consent in Canada is generally 16, but there are some exceptions.

For more information: http://www.legal-info-legale.nb.ca/en/no_means_no
How to Give Consent?

You can give consent by openly saying “yes” or using another expression that indicates you are interested in trying or participating in a sexual activity.

How to Know if You’ve Received Consent?

The only way to be certain is to ask someone if they would like to engage in whatever sexual activity you’re proposing and they say yes. When the degree or type of sexual activity changes, you can also check that your partner continues to consent by asking “is this okay?” What someone wears or their past behaviour does not imply consent. You have not received consent if your partner is drunk, high, or unconscious. You have not received consent if your partner is under the legal age of consent. You have not received consent if you have used force, intimidation, manipulation, or your authority to have sex with someone – even if they do not explicitly say no. You have not received consent if your partner says no (in any respect), pushes you away (or any other action that implies they are not agreeing to the act), or resists in any way. You have not received consent if a partner who previously agreed to sexual activity is no longer interested in participating. You have not received consent if your partner is silent or unresponsive.

Consent within a relationship

Consent is still required in a relationship. Each partner has the right to decline sexual activity whenever they choose. Consent is never waived in a relationship.

For more information: http://www.srhweek.ca/healthy-sexuality-healthy-relationships/navigating-consent/
Active and Engaged Parenting

Raising a healthy and well-adjusted teenager who makes smart decisions requires you to be an active, engaged, and involved parent. This is not a simple task!

Techniques used by active and engaged parents:

**Education.** Learn more about teenagers and what it means to be a teenager. One way to do this is through reading booklets such as this one. But don’t take all of your education from a book. Talk to your teenager. Your teen is the expert on their own life experiences. Ask them to tell you what’s going on. What it’s like for them at school, with friends, at home? Don’t assume you know the answer. Although there are definitely similarities between your teen’s experiences and your teen experiences, being a teenager today is different than when you were a teenager. If you don’t know the answer, ask. This will help you better understand your teen and will show your teen that you care about and respect their opinion.

**Expectations and Boundaries.** Teens need to know what you expect of them and what you won’t tolerate. It’s not being harsh or mean to set reasonable expectations and boundaries. Keep in mind your child’s age and abilities when forming expectations. Make sure your teen has a clear understanding of the expectations and boundaries you’ve set, why you’ve set them, and what the reasonable consequences will be if they don’t abide by your rules. Giving your teenager the reason behind your decision shows them that you believe they are capable of being a reasonable and logical human being. It communicates respect and helps your teenager respect (and even understand) your decisions in return.

**Consistency.** Once your teen is clear on what you expect, what you won’t tolerate, why you’ve made that decision, and what the consequence for acting otherwise would be, you must be consistent. This includes consistency between parents (being on the same page is essential) and consistency over time. Your teenager may try to wear you down. Don’t let them get away with something you’ve made clear you won’t tolerate. “Giving in” only teaches your teenager that if they bug you enough, they will get their way. This is not the message you want to convey. Consistency also includes meaning what you say. Most teenagers take their parents at their word. If you tell your teenager that you won’t get mad if they are honest with you, then you can’t get mad. Likewise, if you tell your teenager that they can borrow the car on Friday if they help clean the garage – then you need to follow through. If your teenager starts to believe that you don’t mean what you say, they will stop trusting you, which can have considerable negative consequences for your relationship.

**Listening.** You learn more when you listen than when you talk. If your teen needs someone to talk to, it’s essential that you listen. Try not to interject with your thoughts and opinions unless they ask or you are concerned for their safety. Be open, supportive, and nonjudgmental. You don’t always have to agree with your teen or accept things that they have done wrong, but try to be respectful and thank your teen for coming to you.
Communication. Try to have an open line of communication with your teen. Adolescence is when many people are first exposed to sex, drugs, and alcohol. Although they can be uncomfortable subjects to discuss, don't avoid talking about them with your teen. By openly and realistically discussing these topics, their consequences, and what to do when confronted with one of these issues before your teenager is exposed to them, you can increase the likelihood that they will make smart decisions when the time comes.

Involvement. Get involved in your teen’s life. Respect their need for independence but don’t let that supersede your own relationship. Show interest in activities they enjoy. Find fun activities you both enjoy and can do together, or as a family. Ask your teen how their day was and expect more than “fine” as an answer. Know where your teen is and who they are with. Make yourself a respectful but present part of your teen’s life.

Family values. Talk to your teen about your family values. Explain to them why you feel the way you do. Have an open and interactive discussion where you listen to your teenager’s perspective as well as share your own. Ask your teen what values are important to them; which they will adopt from your family and new ones that may differ. This open discussion helps to build respect for your values and beliefs and helps to ensure that your teenager is more likely to abide by those values when in a challenging situation.

Explanations. If you don’t want your teenager to do something, tell them why you feel that way. Although you are the parent and it is ultimately your call, communicating the reason for your decisions helps your teenager see you as a reasonable person who is looking out for their best interests, rather than as an unwavering dictator who just wants to ruin their fun.

Awareness. Spend time getting to know your teen’s friends and their parents. Teens are heavily influenced by their friends’ behaviour and expectations. Regular communication between parents can help build a safe environment for all teens in a peer group. Parents can help each other track their teen’s activities while still allowing them relative independence.
**Encouragement.** Let your teen know that you think they are capable of success. Your teen needs to know that you believe in them. The key word here is capable. Telling your teen you think they are capable implies that your teen can achieve what they want, with hard work. The alternative is telling your teen that they are special. Parents mean well when they tell their children they are special, but unfortunately, it can have negative consequences. Emphasizing the specialness of your child implies that they deserve whatever they want, suggesting that your teen shouldn’t have to earn it. This can breed an attitude of entitlement – something increasingly common in today’s technologically-immersed teens who are used to getting what they want as soon as they want it – no hard work necessary. Encourage and support your teen, but try to focus on their hard work, rather than on their “specialness”. All parents believe their children are special – but hard work and perseverance, not “specialness”, are what makes a truly remarkable teenager – and young adult.

**Understanding.** Being a teenager is tough. Sometimes your teen will mess up and make the wrong decision. Discuss with your teen what went wrong, apply reasonable consequences, and then move on. Don’t hold your teen’s bad decision against them for the rest of time. Give your teen a chance to do better and prove to you that they have learned from the mistake.

**Remember.** Remember that you were a teenager once too. Think about how your parents interacted with you and how effective their methods were. If you didn’t like it then, your teen probably won’t like you doing the same thing to them now.

Being the parent of a teen can be wonderful, challenging, stressful, exhausting, mind-expanding, joyous, sad, intriguing, frightening, and more. It’s rarely dull. And, you also grow and develop as a person when you parent your teen. You won’t always get it right either! That’s okay. Trying to do your best is what you need to expect from yourself. Many parents find that sharing their teen parenting experiences with friends and family members can be very helpful. If you think that you or your teen are having problems, don’t be afraid to ask for help. Your family doctor can be a good first point of contact for helpful resources in your community.
Teenage Stress

Teenagers and their parents will experience a wide variety of stressors during adolescence. This is normal and to be expected. For teens, common stressors can include school, socializing, family conflicts, personal identity, health problems, the future, and financial issues. For parents, common stressors can include their teenager’s sexual activity, behaviour, school performance, alcohol/drug use, emotional wellbeing, peer groups, inactivity, and rebelliousness.

Although severe and prolonged stress can make some people more vulnerable to developing a mental illness, everyday stress does not cause mental illness. Not all stress is bad. Most daily stress is actually good for us – it is the foundation for the building of resilience. It can help us realize our values, motivate us, and make us work harder. We should not try to protect teens or ourselves from the usual, ordinary, and expected stress of everyday life. We don’t need counselling or treatment for usual stress. Avoiding usual stress hinders the development of resilience and makes it more difficult to deal with major life stressors in the future. Not every boo-boo needs a Band-Aid. Unfortunately, if it gets to be too much, and persists for a long time, stress can also interfere with our ability to be productive and cause considerable negative emotions. Here are some signs that your teenager may be too stressed:

**Physical Symptoms:**
Headache; neck ache; indigestion; stomach ache; sweaty palms; racing heart; irregular sleeping patterns.

**Emotional Symptoms:**
Crying; anger; loneliness; forgetfulness; diminished sense of humour; irritability; hopelessness; unhappiness; indecisiveness; sensitivity; difficulty concentrating.

**Behavioural Symptoms:**
Drinking, smoking or using drugs; withdrawal or avoidance; acting aggressively; feeling restless; eating poorly; having nightmares.

Teens need to learn how to manage stress. Learning how to cope with smaller stressors helps teenagers develop the competence and coping skills necessary for dealing with larger stressors in the future. Although we sometimes assume that people just know how to cope – it’s actually something we can learn. People can be taught how to cope better. Sometimes it’s direct teaching – someone explains to us ways we can deal with our emotions and stressors. We learn how to cope through modeling – in the ways we see influence others, like parents, cope with stress. Your teen will also “learn” how to cope from their peers.
Do something. If the stress is caused by a problem with a clear solution, the best way to cope with that problem is to solve it. For example, if your teenager is stressed about an exam, the best way to cope with that stress is to study. Gaining competence of the material will help reduce your teenager’s stress. Unfortunately, not all stressors can be “solved”. In those situations, the best plan is to cope with emotion causing the stress, rather than the situation itself. The following self-care tips can help your teen cope with negative emotions.

Exercise. Daily physical activity improves health and mood, and helps get rid of stress. Even something as simple as going for a brisk walk can help.

Sleep. Teenagers need 8-9 hours of sleep each night. Getting adequate sleep will help your teen feel better the next day.

Eat healthy. Eating a balanced diet gives your teen’s body the fuel it needs to help combat stress. Encourage your teenager not to skip meals, to eat plenty of fruits and vegetables, and to go easy on the junk food.

Stay away from alcohol and drugs. Talk with your teen about how alcohol and drugs affect their thoughts, feelings, and behaviours. Although drinking or using drugs may make your teen feel less stressed in the short-term, alcohol and drugs will not resolve their stress. They’ll only give your teen a false sense of confidence and may make their problems much worse in the long run. This includes cigarettes!

Limit caffeine. Caffeine can make your teen’s heart race, which can make them feel worse and more stressed. A moderate amount of caffeine is okay for most people, but it’s imperative that they don’t over do it!
**Daily relaxation time.** Encourage your teen to take time each day to relax. Reading a book, watching a movie, playing a game, listening to music, taking the dog for a walk—whatever helps them to relax.

**Practice relaxation exercises.** Stress often causes physical sensations like tension and shallow breathing. Work with your teen to learn relaxation exercises for reducing the physical consequences of stress. Box Breathing and Hand Relaxation are two relaxation techniques that work really well for reducing stress in the short-term and can be done anywhere, anytime.

**Box Breathing:** If possible, sit and close your eyes. If not, just focus on your breathing:

1) Inhale your breath (preferably through your nose) for 4 seconds.

2) Hold your breath for 4 more seconds. You’re not trying to deprive yourself of air; you’re just giving the air a few seconds to fill your lungs.

3) Exhale slowly through your mouth for 4 seconds.

4) Pause for 4 seconds (without speaking) before breathing in again. Encourage your teen to repeat this process as many times as necessary. Even 30 seconds of deep breathing will help them feel calmer and more in control. Don’t forget this technique will work for you too - give it a try!

**Hand Relaxation:** Hand relaxation helps to get rid of the tense feelings in your body. Here’s how you do it:

1) Clench the muscles in your left hand (make a fist) really tightly for 5 seconds.

2) Let go gradually (for about 15 seconds), breathing slowly and concentrating on the feeling in your hand.

3) Repeat using your right hand.

**Go outside.** Staying inside all the time can be really draining. Getting outside and enjoying the sun and fresh air can improve your teen’s mood. Encourage your teen to link this with exercise if possible; even a brief walk outdoors may help.
Be realistic. Stress can make people interpret things as much worse than they actually are. Don’t diminish your teen’s feelings but gently help them see things from another perspective. Sometimes taking a step away from their own feelings and perspective is all teenagers need to start feeling better.

Manage your time. Teach your teenager how to schedule and prioritize their projects and other responsibilities — it will help them feel more in control, more productive, and less overwhelmed. Give your teen a timetable organizer or encourage them to use their phone calendar and remind them to check it every morning to help plan the day. When attempting tasks, encourage your teen to start with the most manageable task first. Accomplishing a few tasks, even if they’re easy, will help your teen gain the confidence necessary to tackle larger projects.

Accept what you can’t change. Sometimes stressful things happen that we just have to live with. Not every problem can be solved; some stress has to be endured. Help your child accept what has happened, acknowledge their feelings, and then move on. Don’t ruminate or focus on the problem for extended periods of time if nothing can be done. This will only make everyone feel worse. Acknowledge, accept, and then use healthy coping strategies to move on. Encourage your teen to read/watch a movie/listen to music, practice relaxation exercises, spend time with friends and family, and focus on the things they can control. Ultimately, the only thing any of us can control is our own behaviour; our own reaction. No one can control someone else’s behaviour. Remembering this can help your teen to shift their perspective. With time, most stress will pass.

It’s important to note that situations or issues that may not be stressful for parents can be stressful for teens. Every day, teens are experiencing new situations and are
learning and transitioning. Their social skills and ideas about the world are constantly being shaped and molded. This constant change and uncertainty can be a significant stressor for your child. Remember that just because something isn’t stressful to you doesn’t mean it isn’t stressful to your teen. If your teenager tells you they are stressed, always treat their feelings as valid. However, don’t encourage or support your teen in avoiding common stressful situations. That will make it difficult for them to learn the skills they need to become resilient. The more they avoid, the harder it becomes next time. Help your teen learn to identify the causes to circumstances that they find stressful. Together, find solutions for situations that help your teen develop healthy coping strategies. Don’t shield your teen from growth-promoting stress.

A useful tool that your teen might find helpful is called ‘Taking Charge of Your Health’. It is available as a free download at: http://teenmentalhealth.org/resources/entries/taking-charge-of-your-health

It is also very important for your teen to understand how to interpret stress and use it to help them successfully navigate the challenges and opportunities of life. Check out the following link and review/discuss it with your teen: http://teenmentalhealth.org/wp-content/uploads/2017/11/Stress-Transitions.pdf

It’s also important to help your teen understand that stress and anxiety are not the same thing. They need to learn the right words to better label and understand their feelings (check out http://teenmentalhealth.org/schoolmhl/wp-content/uploads/2019/01/final-using-the-right-words.pdf for more information). Using the word anxiety as a shorthand for different stress experiences leads to thinking that normal and expected stress experiences are illness, instead of a signal that drives adaptation and resilience.
Mental Illness in Adolescence

Adolescence is a period of exciting change and transition but it can also be a time of vulnerability. Many mental illnesses are likely to emerge in adolescence, due to a combination of genetic and environmental factors. Although most teenagers will emerge from adolescence without developing a mental illness, one in five will.

What is a Mental Illness?

A mental illness, also called a mental disorder, is a brain-based medical illness that affects the way someone thinks, feels, and behaves. It is diagnosed by a doctor or psychologist with advanced training in mental health. There are a number of different mental illnesses, which have been researched extensively and are identified by the combination of different behavioural, emotional, and cognitive signs and symptoms. Mental illnesses require professional treatment based on best evidence.


A mental health problem is when someone experiences emotional, cognitive, or physical difficulties, usually due to changes in their environment (e.g., a breakup, job loss, death of a loved one). Although these problems are distressing to the person involved and may lead to difficulties in functioning, they will usually be resolved with healthy coping strategies and time. Mental health problems do not usually require professional treatment, although counselling can sometimes be beneficial.

Mental distress is a signal from our brains that something has changed and we need to adapt. Everyone experiences mental distress. For example, it can happen if we’re frustrated because we’re stuck in traffic, if we’re worried we didn’t study enough for an exam, or if we think someone has treated us unfairly. Although unpleasant, mental distress does not need professional help. It passes relatively quickly with the use of adaptive coping strategies. It is necessary for human growth and the development of resilience.
Risk Factors for Mental Illness

Risk factors are not causes. The presence of one or more of the following risk factors does not mean that your teen will develop a mental illness. It simply means that it is more likely that your teen will develop a mental illness than someone without these risk factors:

- Family history of mental illness
- Childhood mental illness
- Childhood neglect, maltreatment, and/or abuse
- Family history of suicide
- Various severe physical medical illnesses
- Traumatic Brain Injury (e.g., concussion)

If you suspect that your teenager may be experiencing a mental illness, make an appointment with your family doctor. They will be able to review your teen’s symptoms and determine whether they would benefit from further assessment and professional treatment. More information about various mental illnesses can be found at www.teenmentalhealth.org.
Protective Factors for Mental Illness

Protective factors help to counteract the negative impact of risk factors. There are no specific factors that have been demonstrated to prevent a mental illness, however all of these factors improve functioning, even in the presence of a mental illness.

- Use of healthy and adaptive coping strategies (see page 47)
- Normal to high intelligence
- Social acceptance by peers
- Optimism
- Sense of competence (e.g., feeling like they can handle anything that happens)
- Supportive parents, family and friends
- Family cohesion
- Positive parent-adolescent relationship
- Parental monitoring of adolescent behaviour
- Presence of at least one positive adult role model (e.g., parent, family member, coach, church leader, family friend)
Common Mental Illnesses in Adolescence

Mood Disorders

Mood disorders affect people’s thoughts and emotions, how they feel about themselves, and the way they interact with the world. There are two categories of mood disorders, both of which have a genetic component (i.e., they’re more common in biological relatives of people who also have a mood disorder) – depressive disorders and bipolar disorders.

Depressive Disorders are characterized by persistent and severe sad, empty, or irritable mood and changes in the way your teen thinks and acts. This can significantly interfere with their ability to be successful at school, at home, and with their friends. Effective treatment of depressive disorders includes psychotherapy and medication.

For more information on treatment of depressive disorders, check out: http://teenmentalhealth.org/for-families-and-teens/depression/

Major Depressive Disorder (also called MDD or depression) is the most common mood disorder in adolescence. Depression can last weeks, months, or even years and can keep coming back after it has disappeared. Depression affects every aspect of a person’s life, making it hard for them to function the way they used to. Remember, depression is not the same as feeling unhappy.

Persistent Depressive Disorder is similar to MDD but the symptoms persist for at least one year (two years in adults). Although the symptoms of persistent depressive Disorder are less intense than MDD, they still cause significant distress and make it hard for your teen to function the way they used to.

Disruptive Mood Dysregulation Disorder (DMDD) is used to describe someone with severe recurrent aggressive verbal or physical outbursts that started before age 10 and are inappropriate for the person’s developmental level (i.e., outbursts would be appropriate for a 4-year-old but not for a 14-year-old). For someone to be diagnosed with DMDD, their state of irritability and anger would have to last for at least one year.

Bipolar Disorders are characterized by frequent and severe fluctuations in mood from extremely low (e.g., depression) to normal or extremely elevated/irritable (i.e., mania). The normal mood changes of teens are not bipolar disorder. In bipolar disorder, the mood fluctuations are accompanied by changes in how your teen thinks and acts, and in some cases, may also be accompanied by psychosis. Psychosis is when the mind breaks from reality and the person has thoughts and perceptions (visions, sounds, smells, etc.) that are false.
Bipolar disorders have a significant genetic component, which means that if bipolar disorder is in your teen’s immediate family, they are more likely to also develop bipolar disorder. Bipolar disorders are most effectively treated by medication and psychotherapy.

For more information on bipolar disorders, check out: http://teenmentalhealth.org/for-families-and-teens/bipolar/

Bipolar I Disorder is diagnosed when someone periodically shifts from periods of depression to periods of Mania. Mania is a period of abnormally and persistently elevated/irritable mood. People experiencing mania feel like they can do anything, regardless of reality. Their minds and mouths race; they don’t feel the need to sleep; they’re easily distracted; and they often participate in high-risk activities that could cause them serious harm (e.g., sexual promiscuity, risky business investments, shopping sprees, dangerous physical activities), without acknowledgement of the consequences.

Bipolar II Disorder is similar to bipolar I disorder but the person alternates between periods of depression and periods of hypomania. Hypomania is a less severe version of mania that does not interfere with your teen’s ability to succeed at school or at home. Often someone in a hypomanic episode will be quite productive and accomplish many goal-directed tasks, although they may still engage in high-risk activities.

Cyclothymic Disorder is a less severe version of bipolar II disorder, where over the course of at least one year, the teenager cycles between periods of low mood (not severe enough to be considered depression) and periods of slightly elevated mood (not severe enough to be considered hypomania). A teenager would only be diagnosed with cyclothymic disorder if these mood fluctuations caused serious distress or impaired their ability to function.
Anxiety Disorders

There are a number of different anxiety disorders that all have the core component of inappropriate, excessive, or unreasonable worry about a situation or object. Anxiety disorders frequently have a genetic component and are most effectively treated by psychotherapy and if necessary, medication. Remember, anxiety is not the same as stress.

Generalized Anxiety Disorder (GAD) is diagnosed if your teen has excessive and persistent anxiety or worry about a range of usual events or activities, which causes them to feel restless, tired, irritable, unable to concentrate, tense, and to have difficulty sleeping.

For more information on generalized anxiety disorder, check out: http://teenmentalhealth.org/for-families-and-teens/generalized-anxiety-disorder/

Separation Anxiety Disorder is diagnosed if your teen exhibits excessive fear and anxiety about being separated from someone (usually you or your partner). Although this is typical in preschool children, it is developmentally inappropriate for an adolescent. This fear and worry is pervasive – significantly interfering with your teen’s ability to succeed at school, at home, or with friends.
Specific Phobia is diagnosed if your teen is afraid of a specific object or situation. Common phobias include spiders, blood, heights, and flying. People with Specific Phobias actively avoid the feared object or situation to the extent where it interferes with their ability to succeed at school, at work, at home, and in their relationships.

Social Phobia/Social Anxiety Disorder is diagnosed if your teen is afraid of certain social situations where they might be judged (e.g., parties, performances, speaking up in class). It is similar to a specific phobia but the teen only fears social situations.

Panic Disorder is diagnosed if your teen experiences recurrent and unexpected panic attacks. Panic attacks are sudden and overwhelming surges of fear and anxiety that are accompanied by frightening physical sensations (e.g., racing heart, difficulty breathing, nausea, chest pain, sweating, etc.). Someone having a panic attack often believes they are dying. Panic attacks are not exclusive to panic disorder. Someone with panic disorder is excessively worried about having another panic attack and actively avoids situations that could trigger a panic attack or where they couldn’t escape easily if a panic attack was triggered. Panic disorder is often accompanied by agoraphobia.

Agoraphobia is diagnosed if your teen is afraid of situations from which they cannot easily escape (e.g., public transportations, grocery stores, bridges, movie theatres, crowds, lines), especially when alone. This fear is triggered by thoughts of having a panic attack or other incapacitating or embarrassing symptoms. For more information on panic disorder, check out: http://teenmentalhealth.org/for-families-and-teens/panic-disorder/
Neurodevelopmental Disorders

Neurodevelopmental Disorders are impairments to the growth and development of the brain and central nervous system. These disorders are usually diagnosed prior to adolescence and are often lifelong, although they can often be managed effectively with the right treatment.

Attention-Deficit/Hyperactivity Disorder (ADHD) is diagnosed if your teen has difficulty concentrating, paying attention, remembering details, organizing and planning. They may also have difficult sitting still, acting appropriately in controlled situations (e.g., in class), keeping quiet, and waiting their turn to act or speak. For a diagnosis of ADHD, at least some of these symptoms would need to be present in more than one situation (e.g., at school AND at home) and begin before age 12. ADHD is most effectively treated with medication. Psychotherapy is helpful for treating the associated social problems. If a parent has ADHD, children are at higher risk for ADHD.

For more information on ADHD, check out: http://teenmentalhealth.org/for-families-and-teens/adhd-attention-deficit-hyperactivity-disorder/

Autism Spectrum Disorder (ASD) is diagnosed if your child has difficulty with social interaction and social communication, and exhibits restricted and repetitive patterns of behaviour (e.g., repetitive motor movements, rigid adherence to routines, highly fixated and intense interests, and abnormal reactions to sounds, smells, tastes, textures, and sights). ASD is usually diagnosed during the preschool years, although if symptoms are not severe, it sometimes isn’t discovered until later. ASD is best treated with an intensive behaviour therapy such as applied behaviour analysis. Research does not support the use of a gluten-free and casein-free diet (or other such “natural” interventions) in the treatment of ASD. The earlier someone with ASD receives effective treatment, the more effective that treatment is likely to be. ASD is not caused by vaccinations or poor parenting.

Obsessive-Compulsive Disorder

Obsessive-Compulsive Disorder (OCD) is diagnosed if your teen experiences recurrent, persistent, and intrusive thoughts or images (i.e., obsessions) that cause significant anxiety, which your teen then attempts to ignore or to neutralize with repetitive behaviours (i.e., compulsions) that they feel will counteract the anxiety triggered by the obsession. Compulsions are excessive in nature and sometimes are not clearly linked to the obsession they are trying to neutralize. Common compulsions include hand washing, checking, and ordering. Someone with OCD can spend a considerable amount of their day fixating on obsessions and performing compulsions, impairing their ability to succeed in all areas of life. Treatment includes medication and psychotherapy.

For more information on OCD, check out: http://teenmentalhealth.org/for-families-and-teens/obsessive-compulsive-disorder-ocd/
Eating Disorders

Eating Disorders are characterized by disturbed eating patterns or eating-related behaviours that significantly impair the physical, social, and emotional health of your teen. Although Eating Disorders are most reported in teenage girls, they also occur in teenage boys.

Anorexia Nervosa (AN) is diagnosed if your teen has an intense fear of gaining weight or becoming fat. Consequently, they will severely limit what they eat and may try to prevent weight gain using unhealthy behaviours, such as vomiting or excessive exercise. People with AN believe that their weight and their body are much larger than they actually are, and consequently, they weigh much less than is healthy, given their age, sex, development, and physical health. An effective treatment for some teenagers with AN is a type of family therapy.

Bulimia Nervosa (BN) is diagnosed if your teen engages in repeated cycles of bingeing and purging behaviour. Bingeing (or a binge eating episode) is when someone eats much more food in a specific amount of time than anyone else would in that same situation/time period. The person feels like they have no control over their eating and feels compelled to eat. Purging is when someone tries to get rid of the food they have just consumed in order to prevent weight gain. The most common purging behaviour is vomiting, but other methods include fasting, excessive exercise, and misuse of laxatives, diuretics, or other medications. This binge eating and purging cycle happens at least once a week for three months. If your teen has BN, their self-perception and self-esteem may be heavily influenced by their weight or shape. Although BN shares many features with AN, one of the major differences between the two disorders is that someone with AN is significantly underweight, whereas someone with BN is usually normal weight or overweight. Effective treatment for BN includes individual or group psychotherapy and occasionally, the use of medications.

Binge Eating Disorder (BED) is diagnosed if your teen has repeated periods of binge eating, as described in the BN section above, but they do not try to purge the food following a binge eating episode. During a binge eating episode, your teen would also eat much faster than normal, even when they weren’t hungry, and until they felt uncomfortably full. The binge eating episode, which would happen at least once a week for three months, is followed by feelings of disgust, depression, or guilt. Consequently, people with BED often binge eat when alone due to embarrassment. Effective treatment for BED is similar to effective treatment for BN.

Trauma and Stressor Related Disorders

Trauma and stressor related disorders may occur following exposure to significant trauma or stress; the most frequently diagnosed is posttraumatic stress disorder.
Posttraumatic Stress Disorder (PTSD) is diagnosed if your teen experiences a severely traumatic event (e.g., war, natural disaster, rape, assault, abuse, witnessing a murder/suicide) and then continues to re-experience the event, through flashbacks and/or night terrors. People with PTSD will often experience intense fear and physical distress in reaction to things in their environment that remind them of the traumatic event. This fear is so distressing that the person may avoid places and situations that remind them of the event. Most people exposed to a traumatic event will not develop PTSD. PTSD is most effectively treated with psychotherapy and if necessary, medication.

**Psychotic Disorders**

Psychosis means to break from reality, and psychotic disorders are a group of disorders that are characterized by abnormal thoughts and behaviours that are inconsistent with reality. The word ‘psychotic’ is sometimes used by the media to mean violent but this is incorrect. Psychotic disorders are not about violence; people with psychotic disorders (and all mental illnesses) are more likely to be the victim of a crime than to commit one themselves. Schizophrenia is the most common psychotic disorder and it often first appears in adolescence especially in males.

Schizophrenia is diagnosed if your teen experiences the following:

1) delusions – the unwavering belief in something that is not true, in spite of extensive evidence to the contrary

2) hallucinations – perceptual disturbances of seeing, hearing, smelling, and touching in the absence of any external stimuli

3) disorganized thinking – thoughts and speech are poorly organized, poorly communicated, and sometimes incomprehensible

4) grossly disorganized or abnormal motor behaviour – behaviour that is unpredictable, inappropriate for the situation, or completely non-reactive to the environment (i.e., the person is like a statue)

5) negative symptoms – decrease in emotional expression, purposeful behaviour, speech, social interest, and pleasure or enjoyment.

6) Schizophrenia is most effectively treated with medication and various social therapies.

*For more information on Schizophrenia, check out: [http://teenmentalhealth.org/for-families-and-teens/schizophrenia/](http://teenmentalhealth.org/for-families-and-teens/schizophrenia/)*
Other Concerns during Adolescence

Suicide

Youth suicide is a rare but tragic event for families, friends, and communities. Suicide is strongly associated with untreated mental illness. The best way to decrease suicide is to effectively treat the underlying mental illness, but awareness of the warning signs for suicide can help you keep your teen safe and bring them for an emergency medical assessment.

- Intense hopelessness or sadness
- Preoccupation with death
- Loss of interest in regular activities
- Withdrawal from family and friends or reconnecting with loved ones
- Talking about what it will be like when they are gone

What Can I Do?

It's okay to ask your teen if they are suicidal and tell them that you are concerned. Asking about suicide will not put the idea in their head.

There are 4 main questions to ask to determine the risk of suicide, each becoming more imminent:

- Ask if they are having thoughts of suicide
- Ask if they have a plan
- Ask if they have the means to carry out their plan
- Ask when they plan to do it

These are difficult questions to ask anybody, especially your child, but they could save their life. If you think your teen is a danger to themselves, do not leave them alone. Ensure that you or somebody else you and they trust is with them until you are able to get professional help.

If you suspect your teen is suicidal, take them to the hospital immediately or call 911. Suicide risk is serious and there are professionals who can help you.

Why Would Someone Want to Die by Suicide?

There are many reasons why people attempt suicide, including:

- To escape from problems that may seem overwhelming
- To end painful feelings of sadness, rejection, or loss
- To stop feelings of shame and guilt
Because they feel worthless and hopeless about the future
Because alcohol or drugs have altered their thinking and mood
Because they feel that life isn’t worth living
Because they believe that others would be better off without them

People who die by suicide usually believe that it is the only way out. Their thinking is clouded and they are not able to realize how their actions will affect the people who care about them. Suicidal ideas are a signal that your teen needs professional help.

For more information on youth suicide, check out: http://teenmentalhealth.org/for-families-and-teens/suicide/

Self-Harm

Self-harm (or self-injury) is when people intentionally harm themselves by cutting, biting, hitting, burning, pulling out hair, etc. Many people think that people who self-injure are suicidal (i.e., they assume that by cutting, the individual is trying to die), which is not true. Self-harm is not the same thing as suicide and often is about coping with strong emotions and not an attempt to die.

What are the Signs?

It can be hard to tell when someone is self-harming because they may hide the outward signs (e.g., by wearing clothing that covers the cuts/scratches/bruises/burns). Here are some signs to watch out for:

- Unexplained cuts, burns, bruises, or scratches, especially on the arms, legs, and stomach
- Clothing that isn’t appropriate for the weather/situation but covers significant portions of the body
- Hoarding razors/knives and other objects that may be used for self-injury

Who Does It?

As much as 24% of youth report that they’ve self-injured at least once, and most self-injurers begin in adolescence. Although studies suggest that girls are more likely to self-harm in early adolescence, by late adolescence/early adulthood, self-harm appears to be equally common among men and women.

What Can I Do?

If you notice the signs listed above, ask your teen about self-injury. Ask if they have friends who self-injure as this can occur in groups. Teenagers need to learn more adaptive and effective coping strategies before they will be able to stop self-harming. Trying to force your teen to stop self-injuring without teaching them better coping strategies will leave them with no tools for handling difficult emotions.

Learning better coping takes time and patience. Be supportive of your teen’s struggle, don’t judge, and don’t freak out. Set up an appointment for your teen with a counsellor or a psychologist to address their difficult emotions and learn more adaptive coping strategies.

For more information on self-injury, visit sioutreach.org.
Substance Use

Most adults with substance use problems began abusing drugs and/or alcohol as a teenager. Teen drug or alcohol use is especially problematic because the brain is not yet fully developed during adolescence. Introducing alcohol or drugs to a still-developing brain can have significant negative long-term consequences.

Alcohol is the drug that is used most often by teens. Chronic abuse of alcohol can lead to many harmful outcomes, including liver cancer, bone marrow problems, cardiovascular disease, damage to the central nervous system, and impaired memory. Occasional use of moderate amounts of alcohol does not typically lead to problems. Unfortunately, occasional moderate alcohol use is less common among teens than binge drinking, which may lead to problems. It is important for you and your teen to realize that alcoholism doesn’t depend on age. An alcoholic isn’t always the 55 year old man drinking beer every night until he passes out. It can also be a teenage girl who is binge-drinking multiple nights every week and feels she can’t have a fun time without alcohol.

Smoking during adolescence can have profound effects on a teenager’s growth, development, and health. Taking the time to think about what exactly is in cigarettes may be a wakeup call for many teens. Cigarettes contain many harmful and toxic chemicals, including tar (a toxic chemical that rots the teeth), ammonia (which is typically found in
dry cleaning fluids), carbon monoxide (which limits the amount of oxygen supplied in the body), formaldehyde (a cancer-causing chemical used to preserve dead bodies), and nicotine (one of the most addictive chemicals known). Smoking can increase your heart rate, elevate your blood pressure, lower your sperm count if you’re male, wrinkle your skin, decrease your night vision, and cause cancer of the pancreas, lungs, kidneys, bladder, larynx, throat, and esophagus. The numerous detrimental effects of smoking make it the number one preventable cause of death. One third of smokers will die from a smoking-related cause. The nicotine patch or nicotine gum may be helpful for teens who are trying to quit smoking.

Smokeless tobacco is another form of tobacco use that is typically chewed or put directly into the mouth. Although it is not as popular as smoking, this form of tobacco use is becoming increasingly popular in teens (especially on male sports teams). Like cigarettes, smokeless tobacco contains formaldehyde and nicotine, but it also contains other harmful ingredients, including lead (a poison), cadmium (found in car batteries), polonium (a nuclear waste), uranium (used in nuclear weapons) and fiberglass (used to make tiny cuts in your lip to allow these harmful chemicals into your body). Smokeless tobacco can lead to cancer of the mouth, lip, voice box, throat, and tongue.
E-cigarettes and Vaping, also commonly referred to as “vapes”, “e-cigs”, “e-hookahs” and “vape pens”, are electronic devices that heat a liquid and produce an aerosol or a mix of small particles in the air. While the full effects of vaping on one’s physical health are unknown at this time, it’s important to remember that many contain nicotine, which is highly addictive and contains harmful chemicals known to be linked to cancer, heart disease and respiratory disease. The popularity of e-cigarettes among teens is rapidly growing. Tempting e-cigarette flavours and a reduced stigma associated with smoking are factors that attract teens to vaping. Teens who would have not otherwise started smoking traditional cigarettes are now becoming addicted to nicotine through e-cigarette use.

Cannabis (i.e., marijuana, pot, weed) is another popular drug used by teens. Many teens experiment with marijuana without becoming dependent on the drug; however, it is not without health risks. Frequent cannabis use can interfere with your teen’s attention span, memory, coordination, energy level, and judgment. In addition, recent research has found that cannabis use may trigger the onset of Schizophrenia and/or psychosis in people who are at risk for the disorder.

Ecstasy or MDMA or Molly use has been decreasing among teenagers. It alters the person’s perceptions and induces feelings of hyperactivity – resulting in its frequent use at parties or dances. When the teenager is dehydrated or when the drug is used in high doses, ecstasy, MDMA, or Molly use can be fatal. A subset of teens that use this drug will experience psychotic symptoms.

Hard drugs include speed, LSD, cocaine, crystal meth, heroin and certain prescription narcotics, like OxyContin, Dilaudid, or Percocet. These drugs are extremely harmful to health, may be addictive, and should be avoided at all costs. Although there is some debate about our ability to responsibly use alcohol and marijuana, there is no debate about the use of hard drugs. Hard drugs should never be used – by adults OR teenagers.

If you think your teen is having substance use problems, monitor their activity and peer
group. After careful monitoring, if you still believe they are abusing a substance, confront your teen in a calm and concerned manner. Don't yell and don't back down. Stay firm and express your concern. If your teen has a substance use problem, seek help from addiction services.

If you notice any of the following signs of alcohol poisoning or drug overdose in your teen, call 911 immediately. Someone with alcohol poisoning or a drug overdose may get brain damage and die.

Most pharmacies now provide Naloxone (Narcan) kits and pharmacist training on administering the drug. This may be a good thing to have if you suspect your teen is using narcotics (or if you know anybody in your life using). There is no harm in giving Naloxone to somebody who doesn’t need it, but it can save somebody’s life if they are having an opioid overdose.

Signs of Alcohol Poisoning:

- Loss of consciousness
- Slow or irregular heart beat
- Vomiting
- Seizure
- Low body temperature
- Pale or bluish skin

Signs of Drug Overdose:

- Loss of consciousness
- Chest pain
- Heavy sweating
- Delusions/hallucinations
- Faster breathing
- Seizures or uncontrollable twitching
- Fever
- Racing or irregular heartbeat
- Cold or pale skin
Getting Help

It can feel overwhelming if you suspect that your child has a mental illness or other serious mental health concern. The first and most important thing you can do is talk to your teen. Do your best to understand how your teenager got to this place. Be open and supportive. Don’t assume that you know what they are thinking or feeling. Then, take your teen to your family doctor or general practitioner. They will be able to further evaluate what is going on with your child and refer you to mental health specialists, if necessary. Don’t lose hope. Most common mental illnesses are very treatable.

**What if my teen refuses to get help?**

Sometimes your teen may not want to get help. It could be that they don’t want to get better, they’ve had a bad experience before with doctors/counsellors, they don’t want their peers to know they are sick, or they simply just aren’t ready yet. Whatever the reason, it is important to explain to your teen why you think it is important they accept help. Be mindful not to nag, beg, or threaten your teen about getting help. Instead, use “I” statements rather than “you”. This takes the pressure and accusatory tone out of the conversation and your teen is more likely to actually listen to what you are saying.

For example:

Instead of saying “You need to go see a psychologist, you haven’t gotten out of the house all week”

Say: “I’m concerned because you haven’t left the house this week. I don’t like seeing you not feeling like yourself. I feel that it would help you to go see a psychologist to help you feel better.”

It can be frustrating when somebody you love won’t accept your help, but remember that all you can do is support them to your best ability. Forcing your teen to go to therapy won’t help them unless they are willing to open up and talk.

### Helpful Websites

- **TeenMentalHealth.org**
  www.teenmentalhealth.org

- **Kelty Mental Health Resource Centre**
  http://keltymentalhealth.ca

- **Positive Parenting Program**
  http://www.triplep.net

- **Parenting.Org**
  www.parenting.org
Remember, your job as a parent isn’t done when your child becomes a teenager. You’ve prepared them for adolescence with your parenting up to this point but your teenager still needs your help. They need you to be supportive, understanding, loving, encouraging, present, and to set boundaries. The right amount of freedom goes a long way, when combined with active, engaged parenting and clearly defined boundaries/rules.