How to deal with drugs and alcohol
Drugs, alcohol and children

- Taking drugs isn’t a part of daily life for most young people. For those who do take illegal drugs, it’s often just a passing phase.
- Young people take drugs in different ways and for different reasons. Some will only experiment, but a few might misuse drugs regularly and develop a problem.
- It’s often difficult for children to understand that alcohol can be dangerous, because they see it all around them – perhaps at home. But it can be particularly dangerous for young people.
- By getting to know the risks involved in using drugs and alcohol, you are in a better position to talk to your child about them and help them stay safe.
- It’s important your child knows what the law says about drugs and alcohol – and why it says it – so that they don’t develop drug or alcohol misuse problems or get in trouble with the police.
- Because you are a role model to your child, you can influence how they see alcohol and drugs. Take time to talk to them about both. You’ll know when the time is right, but it’s a good idea to start with the basics when your child is in primary school.
- If you think your child has a problem with alcohol or drugs, it’s important to get help. You can contact one of the support organisations on the back of this booklet.

Did you know?
Studies show that alcohol misuse is more common than drug use.
Most young people come into contact with alcohol or drugs at some point as they get older. They might hear very mixed messages about them – from their friends, family and the media. As a parent, you might be more likely to worry about them getting involved in drugs. But studies show that alcohol misuse is more common.

Taking drugs and drinking alcohol can both be dangerous. As a parent, you can help your child stay safe by making sure they know the risks.

This booklet gives you important information to help you talk to your child about the problems alcohol and drugs can cause. Although it uses the word ‘parent’, it is for anybody who is responsible for a child in a family situation. It covers:

• things you and your child should know about drugs and alcohol
• how to talk to your child about the risks
• what to do when problems arise
• what the law says
• facts about different drugs
• where to go for more information.

Information for young people
If you don’t want to share the information in this booklet with your child, you can get a free booklet that will give them important information about drugs and alcohol. Call the FRANK helpline on 0800 77 66 00.
Why do some young people want to use drugs?

Many parents don’t understand why young people might want to try drugs and think that they only use drugs if they are having problems at home or at school. This isn’t always true. They may be attracted to drugs for similar reasons as they are to alcohol, perhaps because:
• they enjoy the short-term effects
• they want the same kind of experience that they get from drinking a lot of alcohol
• they are curious about the effects
• as part of growing up, they might just want to ‘break the rules’.

How do people take drugs?

Some people take a drug because they are curious about what the effects feel like. Using drugs in this way is often called experimentation. You may have heard of ‘recreational drugs’. When people use this term, they are talking about drugs that are taken for pleasure, or for social reasons – when going to a club or a party, for example. Most young people who take drugs use them in this way. They may not suffer any major harmful effects to their health.

Important information about drugs

It’s easy to get confused when you read about drugs, because there are so many different kinds. Put simply, the term ‘drugs’ includes:
• illegal drugs, such as heroin, cocaine and marijuana
• prescribed drugs that are misused
• household products – such as gases, glues and aerosols – that are misused.

Although there are many stories in the media about drugs leading to addiction, crime and death, you should remember that:
• for most young people, illegal drug taking is not a part of normal life
• most people who try drugs do not continue using them.


Problem drug use has a harmful effect on a person’s life. Somebody might need to take a drug just to feel able to cope with normal life. Their drug use is likely to affect their health, and they might suffer from mental health problems, lose their friends, have money problems or get into trouble with the law. Only a very small proportion of people who ever take drugs will become ‘problem users’.

If you think your child has a problem

If you think your child is using drugs, contact the agencies listed in the section ‘Want to find out more?’ on the back page of this booklet or call FRANK on 0800 77 66 00. They can give you advice, information and support.

The risks

There are risks involved in taking all drugs. The list below explains general risks for any drug, but you will find more information on specific drugs in the section ‘Facts about drugs’.

- Users can never be sure of exactly what they are taking.
- Bought drugs are unlikely to be pure, and users won’t know what they have been mixed with.
- Users might not know the strength of what they are buying, and they might have an accidental overdose.
- They can’t be sure what effect a drug will have, even if they have taken it before.
- It’s often very dangerous to mix different drugs – this includes taking a drug and drinking alcohol.
- If needles, syringes or other injecting equipment are shared, there is a serious risk of dangerous infections – such as HIV and hepatitis B or C – being spread. Injecting can also damage veins.

Unlawful possession of a controlled drug is a criminal offence. Somebody with a drugs conviction can have problems getting a travel visa to enter some countries. It can also damage their job prospects. An employer might check if an applicant has a criminal record or any past convictions. Dealing in drugs, including giving drugs to friends, carries higher penalties.

Be a good role model

The terms used to describe drug use can also apply to the way people use alcohol. Children can be confused by the difference between what you say to them about drugs and alcohol, and what they see the adults around them doing. The way you use alcohol can affect your child’s views and their attitudes towards both drugs and alcohol.
Important information about alcohol

Young people see alcohol on sale all around them – in supermarkets, off-licences, pubs and restaurants. They might also see their parents drinking alcohol. This can make it difficult for them to understand that misusing alcohol is dangerous. But it is important to make sure that they know how misusing alcohol can affect them.

- Drinking large amounts of alcohol over a short period is especially risky for young people. As their bodies are not mature, alcohol will have more of an effect on them. The NHS recommends the following levels for adults:
  - no more than 3–4 units of alcohol a day for men
  - no more than 2–3 units of alcohol per day for women.

Bear in mind that:
- a ‘unit’ is a single shot (25ml) of a spirit; half a pint of normal strength beer; or a small (125ml) glass of wine
- some types of drink preferred by young people are much stronger than average (for example strong beers and ciders). There can be as much alcohol in a 330ml bottle of ‘alco-pop’ as a generous shot of whisky.
- Drinking alcohol and taking some drugs is very dangerous. For example, alcohol increases the risk of a serious drug overdose.

Did you know?
Long-term heavy use of alcohol can lead to many health problems including liver, heart and stomach conditions, certain types of cancer – including breast cancer – memory loss and brain damage.
The risks

**Aggressive behaviour**
Young men are particularly vulnerable to violent attacks by other people who’ve been drinking.

**Sex**
Unprotected sex can lead to unintended pregnancies, or sexually transmitted infections like gonorrhoea, herpes or HIV.

**Getting home**
Travelling with a driver who has been drinking, getting into an unlicensed minicab, walking home alone... all these situations can put young people at a higher risk of sexual assault or being involved in an accident.

**Injuries**
If your child is so drunk that they’re dizzy or falling over, they could do themselves a serious injury. Pedestrians who are killed or injured in road accidents have often been drinking.

**Spiked drinks**
Both women and men are at risk of their drinks being spiked by someone. There is a lot to be said about the dangers of drinks being spiked with drugs. However, the reality is that alcohol alone is far more likely to put you at risk, whether you are male or female.

**Alcohol poisoning**
Drinking too much too quickly can lead to overdose, or alcohol poisoning. This is a very serious situation that needs medical attention. If you are ever in doubt about whether someone has alcohol poisoning, call an ambulance.
Talking about drugs and alcohol

Although many parents feel comfortable talking to their children about alcohol, they might feel that they don’t know enough about drugs to tackle the subject properly. They might also be concerned that raising the subject of drugs will encourage their child to experiment with them. However, there is no evidence to support this. But there is evidence that shows if you talk to your child about drugs they are less likely to try them at a young age. When parents are worried that their child is taking drugs or drinking a lot of alcohol, they are often unsure about how to react. Conversations can turn into lectures, accusations or rows.

Some children might not feel comfortable talking to their parents about drugs because of the ‘generation gap’. For example, they may worry that showing they know something about drugs will make their parents suspicious. If they admit to trying drugs, they may think they’ll be punished. Sometimes, children can feel that they have nothing to gain from discussing this subject with their parents.

Help reduce the risks

If your child is under 18, you might find these tips on talking to your child about reducing risks useful.

- Encourage them to stick to lower-strength brands of alcohol and to not drink too quickly.
- Advise them to eat before they go out and to avoid buying drinks in rounds. They could also sit down when they drink – they will drink less than if they were standing up.
- They should never mix alcohol with drugs – especially ecstasy. It can be deadly.
- Explain the dangers of spiking someone else’s drink and the need to watch their own drink. They should watch it being poured, keep it with them and watch out for their friends. They shouldn’t accept a drink from someone they don’t know and trust.
- Have firm rules about parties. Be around, or close at hand, if your child has a party at home. Remove temptations such as your own stock of drink (especially spirits) and provide starchy food (bread, rice and pasta for example) so they won’t be drinking on empty stomachs. If your child is going out to a party, remember to ask where the party is.
- Make sure your child has a way of getting home safely at night.
There’s no doubt that talking with young people about drugs and alcohol can be a challenge. Often parents avoid the subject, or try to get the message across by telling their children ‘shock-horror’ stories. However, parents and children can both benefit from having calm discussions.

It is important to try to understand each other’s views. This will help you to deal with difficult situations if they arise.

**Discussions will be easier if you:**

- show that your main concern is for their health, safety and wellbeing
- listen carefully to their views and feelings
- try to explain your feelings to help them understand your point of view
- talk with them, rather than to or at them.

The guidance in this booklet on how to talk about drugs and alcohol with your child is very general. Every family is different, and the way you relate to your child is special to you. Think about the suggestions you read here, and ask how you could use them to help you talk about drugs and alcohol with your child.

**Primary schoolchildren**

To many parents, it seems too early to talk with children of seven and eight about drugs and alcohol. But the benefits are clear.

- You can make sure the information they have is accurate.
- They will know what your views are and will understand why you have them.
- If they do drugs or drink alcohol, they will be more likely to come to you to talk about it.
- If they get into difficulties, they are more likely to tell you about it.

Before children leave primary school they are likely to be familiar with the subject of drugs, because they become aware of stories in the media. At this age, children are less likely to question authority and will probably share their thoughts with you. They are likely to be against the use of drugs, but may well have tried alcohol, perhaps at a family party.
Secondary schoolchildren
Starting secondary school is a big change. Some children find it difficult and this can make them vulnerable. Although many children will not become interested in trying drugs, some may start to drink enough alcohol to get drunk. Some are now more likely to try cigarettes, gases, glues or aerosols.

If possible, try to build on the open and supportive approach suggested for younger children. If you can keep the discussion going, it will help you later on when your child reaches adolescence.

• It’s not always easy, but it will help if you can make time to talk. Encouraging your child to talk about their day, and chatting with them about yours, will help to strengthen your relationship as well as making it easier to tackle more difficult subjects.

• Treat your child’s anxieties seriously. Even if they seem small to you, they could be very important to your child.

Tips for starting talking
Drugs
• When you give your child some medicine or take some yourself, make sure they know that they should only take medicine if it is given to them by a responsible adult – such as their teacher or the family GP.
• If the subject of drugs is mentioned on TV or in the newspaper, use the opportunity to have a discussion. Ask them what they know about drugs and explain why drugs can be dangerous.

Alcohol
• If your child is curious about alcohol, talk about it. Tell them about the negative side of drinking too much, as well as the social side. Try not to make it sound glamorous.
• Talk about your experiences. If you drink alcohol, tell them about the times you restricted the amount you drank (for example because of pregnancy; being on medication).

Find out what drug and alcohol education is provided in your child’s school and show interest in their work.
• Ask them what the school rules are about drugs and alcohol, and what they have covered in drug education lessons.
• Remind them of your views and explain why you hold them. Discuss home rules about drugs and alcohol and make sure they understand the reasons for these rules.
• It is important that they know that you will always be there to support and help them.

Remember...
... if your child does experiment with alcohol or drugs at this age, it is likely to be a passing phase.

Tips for talking

Before you discuss drugs and alcohol with your child, decide what you want to say. Think about the best way of getting your message across. Try to put yourself in their shoes. Think about the way your parents used to talk with you and how it made you feel.
• Your child will be expecting more freedom. When you decide the time is right to give them more freedom, make sure they understand the responsibilities that come with it.
• Most parents try to influence their child’s choice of friends – usually for good reasons. But this can sometimes create more problems than it solves. If you can, try to treat your child’s friends like any other guests in your home. This will mean your child will be more likely to respect you and your views.
• Offer a listening ear, or be a sounding board when they have problems. But if you give them advice, don’t always expect them to follow it.
• If you become suspicious, the natural reaction is to panic. Try to ask direct questions without losing your temper.
• Many parents believe that telling their child ‘shock-horror’ stories about drugs and alcohol is a good strategy. Although scare tactics may have a short-term effect, when your child gets older they will tend not to believe these stories any more. This will make them more likely to question any other advice you have given them.
• Every school year, ask your child what drug and alcohol education they are getting, and discuss it with them.
When problems arise

If you think your child is using drugs

Possible signs of drug use can include changes in appearance, friends, interests, eating and sleeping habits, moods and openness. The difficulty is that these signs are very often a natural part of growing up, so a young person who is not using drugs could show the same changes.

It is frustrating for parents who are trying to look out for the signs of drug use, but the fact is, there are no easy answers. Most parents panic and become very emotional if they suspect their child is using drugs, but you might find the following advice helpful.

• Try not to accuse your child, as this will probably start a row. And if you are wrong, you could damage your relationship.
• Try to find a time when you feel able to discuss the situation without interruptions.
• Don’t try to discuss their drug use with them while you believe they are under the influence of a drug.
• Decide how you want to react if your child says they have used drugs.

Young people over 16

Your child is now a young adult so your relationship with them will be changing. This can be a difficult adjustment to make. You might find the following guidelines helpful to continue strengthening your relationship, making it easier to discuss subjects like drugs and alcohol with them.

• Always try to make sure that your child understands that it is their health and welfare you are interested in and that you are there to help and support them.
• It’s not always easy, but it will be helpful if you try to:
  – accept their need for privacy
  – show them that you trust them – but also show your disappointment if they abuse your trust
  – accept that you do not need to know everything about their life
  – ask gently, showing interest, rather than prying or probing if you want to know something; this way you are probably more likely to get the answers you are looking for
  – accept that some things you might prefer them not to do are actually legal (drinking too much, for example, if they are over 18)
  – discuss your views on drugs and alcohol with them, so that they know where you stand.
• Ask them to talk about their views and try to listen with respect to what they say.
• If you suspect that your child is lying to you about their drug use, try not to get angry.
• Show them that your main concern is for their health and wellbeing.
• Make sure they know that you will be there to help them through any difficulties they come across.
• Make clear to them what behaviour is acceptable to you, and what you won’t tolerate.
• Try not to threaten them with punishment. This might seem to offer a quick solution, but it’s unlikely to give the results you are looking for.
• Make sure they understand that they are responsible for their actions and the consequences that follow.

If you’re worried about your child and alcohol

Most parents worry about their child trying drugs. But alcohol is also a drug and can also cause serious problems for young people – as many teachers, hospital staff and police officers know.

Children become aware of alcohol at an early age. Most have their first alcoholic drink between 10 and 13. This first drink is usually at home with their parents’ permission. However, some children start experimenting without their parents’ knowledge – they might help themselves from the family’s drinks cupboard or at family occasions, for example.

By 13, young people may have started drinking in groups, in a park or at parties. The group may be passing around cans or bottles and may drink quickly because they are afraid of being found out or because they want to get drunk.

When young people start going to pubs, drinking often means getting drunk.

Need more help?
See the back cover of this booklet for agencies that can give you information, advice and support.
If you are concerned that your child has started drinking try to react calmly. Explain to them why you are worried and make sure your child understands the risks involved in misusing alcohol. You can find more information about the risks on pages 6 and 7 of this booklet.

What to do in an emergency
Drugs affect everyone differently. The effects can depend on the amount taken, the user’s mood and their surroundings. Sometimes people suffer a bad reaction. It’s important to know what to do if you find your child is ill after taking a drug or drinking too much alcohol.

If your child is drowsy
Heroin, tranquillisers and misuse of gases, glues and aerosols can make the user feel very drowsy. If this happens:
• calm them and be reassuring.
  Speak in a low, quiet voice and try not to panic
• don’t frighten or startle them, or let them exert themselves
• never give coffee to rouse them
• if symptoms continue, place them in the recovery position so their tongue cannot fall back and prevent breathing
• don’t hesitate to call an ambulance if they don’t start to become more alert.

If your child is tense and panicky
Amphetamines (speed), cannabis, ecstasy, LSD and magic mushrooms can sometimes make the user feel tense and panicky. If this happens:
• calm them and be reassuring.
  Try not to panic. Speak in a normal voice and if you feel scared or worried, try not to let them see it
• explain that the feelings will pass
• encourage them to settle in a quiet, dimly lit room
• if they start breathing very quickly, calm them down and tell them to take long, slow breaths.
If your child is unconscious
Drinking too much alcohol can cause someone to become unconscious. This can also happen if:
• someone uses heroin or tranquillisers
• someone misuses gases, glues and aerosols
• someone suffers a bad reaction to ecstasy
• an ecstasy user dances energetically without taking regular breaks or drinking enough fluids.

An overdose of most drugs will also cause unconsciousness. If this happens:
• dial 999 straightaway and ask for an ambulance. Never feel too ashamed to involve the emergency services
• place them in the recovery position (see picture) so they won’t choke if they vomit
• check their breathing. Be prepared to do mouth-to-mouth resuscitation
• keep them warm, but not too hot. However, if someone has taken ecstasy, and you think they may have become overheated, make sure they have plenty of cool, fresh air and remove any excess clothing such as a hat, gloves, etc
• stay with them at all times. If you need to leave to call an ambulance, go straight back
• tell the ambulance crew if you know what drugs have been taken. If you find drugs but you’re not sure what they are, give them to the ambulance crew.

Remember...
... if your child is heavily under the influence of alcohol, don’t leave them to sleep it off alone because there is a risk of choking if they vomit. Keep an eye on them – make sure they sleep on their side, and check that they keep breathing.

For information on local first aid courses, call St John Ambulance on 020 7324 4000, or contact your local British Red Cross branch.
What the law says

Drugs

A first offender who is caught in possession of a controlled (illegal) drug, and admits that they have committed a criminal offence, may receive a reprimand or a warning from the police. If a person between the ages of 10 and 17 has received a warning and commits further criminal offences, they could be charged by the police and dealt with by a youth court.

A youth court can fine parents or put the offender in a Young Offenders Institution (but not prison).

Keeping drugs for another person and handing them back could result in a charge of unlawful supply. On premises that you are responsible for (that you occupy or are involved in managing), it is an offence to knowingly allow anyone to produce, give away or sell illegal drugs. This includes offering a drug to someone free of charge. So if you know that your child is sharing illegal drugs in your home and you do nothing to stop it, you might have committed an offence.

Knowingly allowing someone to smoke cannabis in your home is also an offence. If you take illegal drugs from someone to prevent them from committing an offence, you must either destroy them or take the drugs to the police as soon as possible.

The Misuse of Drugs Act divides illegal drugs into three classes and provides for maximum penalties as shown in the table opposite.
<table>
<thead>
<tr>
<th>Class of drug</th>
<th>Drug type</th>
<th>Maximum penalties</th>
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| **Class A**   | • **Amphetamines (speed)**  
   if prepared for injection  
   • **Cocaine and crack**  
   • **Ecstasy** and drugs similar to ecstasy  
   • **Heroin**  
   • **LSD (acid)**  
   • **Magic mushrooms** | **Possession**: 7 years’ prison and/or a fine  
   **Possession with intent to supply, or supply**: life imprisonment and/or a fine |
| **Class B**   | • **Amphetamines (speed)**  
   if not prepared for injection | **Possession**: 5 years’ prison and/or a fine  
   **Possession with intent to supply, or supply**: 14 years’ prison and/or a fine |
| **Class C**   | • **Anabolic steroids**  
   • **Benzodiazepines**  
   (for example temazepam, flunitrazepam and valium)  
   • **Cannabis** | **Possession**: 2 years’ prison and/or a fine  
   **Possession with intent to supply, or supply**: 14 years’ prison and/or a fine |
Alcohol
The law for England, Scotland and Wales varies according to the age of your child. It is summarised in the table below.

<table>
<thead>
<tr>
<th>Age</th>
<th>The law</th>
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<td>Under 5</td>
<td>It is illegal to give an alcoholic drink to a child under 5 except in certain circumstances (for example under medical supervision).</td>
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</table>
| Under 14     | A young person under 14 cannot go into the bar of a pub unless the pub has a children’s certificate. If it does not have one, they can only go into parts of licensed premises where alcohol is either:  
   • sold but not drunk (for example an off-licence or a sales point away from the pub), or  
   • drunk but not sold (for example a garden or family room). |
| 14 or 15     | Young people aged 14 or 15 can go anywhere in a pub, but can’t drink alcohol.                                                              |
| 16 or 17     | Young people of 16 or 17 can buy (or be bought) beer or cider as an accompaniment to a meal, but not in a bar (only in an area specifically set aside for meals). |
| Under 18     | Except for young people aged 16 or 17 having a meal in a pub (see above), it is against the law for anyone under 18 to buy alcohol in a pub, off-licence, supermarket or other outlet. It is also against the law for anyone else to buy alcohol in a pub for someone who is under 18. |
In Scotland a person must not knowingly act as an agent for a person under 18 in the purchase of alcoholic liquor. In Britain some towns and cities have local by-laws banning the drinking of alcohol in public (on public transport for example).

**Alcohol licensing law changes**

From November 2005, the law outlined above relating to alcohol and children will change in England and Wales. For further information see the Department for Culture, Media and Sport website: [www.culture.gov.uk](http://www.culture.gov.uk)
Facts about drugs

Amphetamines

Other names include: speed, whizz, uppers, amph, billy, sulphate.

What it looks like and how it is taken
• Grey or white powder that is snorted, swallowed, smoked, injected or dissolved in a drink.
• Tablets which are swallowed.

The effects
• Excitement (the mind races, and users feel confident and energetic).

The health risks
• While on the drug, some users become tense and anxious.
• Leaves the users feeling tired and depressed for one or two days, sometimes longer.
• High doses repeated over a few days may cause panic and hallucinations.
• Long-term use puts a strain on the heart.
• Heavy, long-term use can lead to mental illness or dependence.
• Mixing Viagra with amphetamines may increase the risk of heart problems.

Legal status
• Class B (but Class A if prepared for injection).

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Alkyl nitrites

Other names include: amyl nitrite, butyl nitrite, isobutyl nitrite.
Product names include: Ram, Thrust, Rock Hard, Kix, TNT, Liquid Gold.

What it looks like and how it is taken
• Clear or straw-coloured liquid in a small bottle.
• Vapour which is breathed in through the mouth or nose from a small bottle or tube.

The effects
• Brief but intense ‘head-rush’.
• Flushed face and neck.
• Effects fade after two to five minutes.

The health risks
• Headache, feeling faint and sick.
• Regular use can cause skin problems around the mouth and nose.
• Dangerous for people with anaemia, glaucoma, and breathing or heart problems.
• If spilled, can burn the skin.
• May be fatal if swallowed.
• Mixing Viagra with alkyl nitrites may increase the risk of heart problems.

Legal status
• Amyl nitrite is a prescription-only medicine.
• Possession is not illegal, but supply can be an offence.

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Anabolic steroids

Other names include: roids.
Product names include: Sustanon, 250, Deca-Durabolin, Dianabol, Anavar, Stanozolol.

What it looks like and how it is taken
• Tablets which are swallowed.
• Liquids which are injected.

The effects
• Users claim the drug makes them feel more aggressive and able to train harder.
• With exercise, can help build up muscle.
• Helps users recover from strenuous exercise.

The health risks
• Can stop young people growing properly.
• Risks for men include: erection problems, breast growth, shrinking testicles, sterility, acne, increased chance of liver failure and heart attack.
• Risks for women include: growth of facial hair, deepening voice, shrinking breasts, possible miscarriage and stillbirth.

Legal status
• Can only be sold lawfully by a pharmacist to someone with a doctor’s prescription.
• Supply is illegal and Class C penalties apply.
• Class C penalties may apply even if you give someone the drugs and don’t ask for money in return.

Cannabis

Other names include: marijuana, draw, blow, weed, puff, shit, hash, ganja, spliff, wacky backy.
Cannabis is the most commonly used illicit drug among 11 to 25-year-olds.\(^3\)

What it looks like and how it is taken
• Solid, dark lump known as ‘resin’.
• Leaves, stalks and seeds called ‘grass’.
• Sticky, dark oil.
• Can be rolled (usually with tobacco) in a spliff or joint, smoked on its own in a special pipe, or cooked and eaten in food.

The effects
• Users feel relaxed and talkative.
• Cooking the drug then eating it makes the effects more intense and harder to control.
• May bring on a craving for food (this is often referred to as ‘having the munchies’).

The effects
• Sense of wellbeing, alertness, confidence.
• Effects last roughly 30 minutes.
• Users are often left craving more.
• Crack has the same effects as cocaine, but a more intense and shorter ‘high’.

The health risks
• Cocaine and crack are addictive.
• Can leave users feeling tired and depressed for one or two days, sometimes longer.
• Can cause chest pain and heart problems that can be fatal.
• Heavy use can cause convulsions.
• A habit can be expensive and hard to control.
• Crack and cocaine carry the same risks, but as the high can be so intense, crack use is even more difficult to control.
• Using Viagra with crack and cocaine may increase the risk of heart problems.
• Injecting can damage veins.
• Sharing injecting equipment puts users at risk of dangerous infections like hepatitis B or C and HIV/AIDS.

Legal status
• Class C.

Cocaine and crack
Other names for cocaine include:
coke, charlie, snow, C.
Other names for crack (a smokeable form of cocaine) include:
rock wash, stone.

What it looks like and how it is taken
• Cocaine: white powder that is snorted up the nose, sometimes dissolved and injected.
• Crack: small raisin-sized crystals which are smoked.
Ecstasy

Other names include: E, doves, XTC, disco biscuits, echoes, hug drug, burgers, fantasy.

Chemical name: MDMA (currently many tablets contain MDEA, MDA, MBDB). 4% of young people aged 16 to 25 have used ecstasy in the last three months.¹

What it looks like and how it is taken
• Tablets of different shapes, size and colour (but often white), which are swallowed.

The effects
• Users feel alert and in tune with their surroundings.
• Sound, colour and emotions seem much more intense.
• Users may dance for hours.
• The effects last from three to six hours.

The health risks
• Can leave users feeling tired and depressed for days.
• Risk of overheating and dehydration if users dance energetically without taking breaks or drinking enough fluids (users should sip about a pint of non-alcoholic fluid such as fruit juice, sports drinks or water every hour).
• Use has been linked to liver and kidney problems.

• Some experts are concerned that use of ecstasy can lead to brain damage, causing depression in later life.
• Mixing Viagra with ecstasy may increase the risk of heart problems.

Legal status
• Class A.
• Other drugs similar to ecstasy are also illegal and Class A.

¹ Source: British Crime Survey 2002/03, Home Office
Gases, glues and aerosols

Other names include: products such as lighter gas refills, aerosols containing products such as hairspray, deodorants and air fresheners, tins or tubes of glue, some paints, thinners and correcting fluids.

What it looks like and how it is taken
- Sniffed or breathed into the lungs from a cloth or sleeve.
- Gas products are sometimes squirited directly into the back of the throat.

The effects
- Effects feel similar to being very drunk.
- Users feel thick-headed, dizzy, giggly and dreamy.
- Users may hallucinate.
- Effects don’t last very long, but users can remain intoxicated all day by repeating the dose.

The health risks
- Nausea, vomiting, black-outs and heart problems that can be fatal.
- Squirting gas products down the throat may cause the body to produce fluid that floods the lungs and this can cause instant death.
- Risk of suffocation if the substance is inhaled from a plastic bag over the head.

Legal status
- It is illegal for shopkeepers to sell gas lighter refills to anyone under 18, and it is illegal to sell gases, glues and aerosols to under-18s, or to people acting for them, if they suspect the product is intended for abuse.
Heroin

Other names include: smack, brown, horse, gear, junk, H, jack, scag.

What it looks like and how it is taken
- Brownish-white powder which is smoked or snorted, or dissolved and injected.

The effects
- Small doses give the user a sense of warmth and wellbeing.
- Larger doses can make them drowsy and relaxed.

The health risks
- Heroin is addictive (even when smoked).
- Users who form a habit may end up taking the drug just to feel normal.
- Excessive amounts can result in overdose, coma and in some cases death.
- Injecting can damage veins.
- Sharing injecting equipment puts users at risk of dangerous infections like hepatitis B or C, and HIV/AIDS.

Legal status
- Class A.

LSD

Other names include: acid, trips, tabs, blotters, microdots, dots.

What it looks like and how it is taken
- ¼ inch squares of paper, often with a picture on one side, which are swallowed. Microdots and dots are tiny tablets.

The effects
- Effects are known as a ‘trip’ and can last for eight to 12 hours.
- Users will experience their surroundings in a very different way.
- Sense of movement and time may speed up or slow down.
- Objects, colours and sounds may be distorted.

The health risks
- Once a trip starts it cannot be stopped.
- Users may have a ‘bad trip’, which can be terrifying.
- ‘Flashbacks’ may be experienced where parts of a trip are relived some time after the event.
- Can complicate mental health problems.

Legal status
- Class A.
Tranquillisers

Product names include: Valium, Ativan, Mogadon (‘moggies’), Libirum, Rohypnol, Normison.

Chemical names include: diazepam, lorazepam, nitrazepam, chlordiazepoxide, flunitrazepam, temazepam (‘mazzies’).

What it looks like and how it is taken
• Tablets or capsules that are swallowed.

The effects
• Calms users and slows them down mentally.
• Relieves tension and anxiety.
• High doses can make users drowsy and forgetful.

The health risks
• Some tranquillisers are addictive.
• Extremely dangerous if mixed with alcohol.
• Some tranquillisers cause a temporary loss of short-term memory.
• Users trying to quit may suffer panic attacks.
• It is very dangerous to inject tranquillisers.

Legal status
• While possession is not illegal without a prescription (except temazepam or flunitrazepam), supply is against the law and Class C penalties apply.

Magic mushrooms

Other names include: ‘shrooms, mushies.

What it looks like and how it is taken
• Eaten raw, dried, cooked in food, or stewed into a tea.

The effects
• Similar effect to LSD, but the trip is often milder and shorter (about four hours).

The health risks
• Can cause stomach pains, sickness and diarrhea.
• Eating the wrong kind of mushroom can cause serious illness and even fatal poisoning.
• Can complicate mental health problems.

Legal status
• Class A.
Want to find out more?

National sources

**Drugs**
**FRANK**
Offers free and confidential advice about drugs 24 hours a day, seven days a week, and can refer you to your local drugs services. 📞 0800 77 66 00 or visit [www.talktofrank.com](http://www.talktofrank.com)

**Families Anonymous**
Operates self-help groups around the country for families and friends of people with a drug-related problem. Mon–Fri, 1–4pm. 📞 020 7498 4680

**Alcohol**

**Drinkline**
Gives free confidential information and advice 24 hours a day, seven days a week, and can put you in touch with your local alcohol service for one-to-one help. 📞 0800 917 8282

**Alcohol Concern**
Offers general information about alcohol. Call to find your nearest alcohol advisory service. 📞 020 7928 7377 or visit [www.alcoholconcern.org.uk](http://www.alcoholconcern.org.uk)

**Al-Anon Family Groups**
Provides self-help sessions for people whose lives are affected by someone else’s drinking. 📞 020 7403 0888

Local sources

Your local health authority or trust’s health promotion unit can give you information about drugs, alcohol and local services.

Your GP can refer you to local drugs and alcohol counselling agencies. Or look in the local telephone directory (usually under ‘Drugs’ or ‘Alcohol’).

Your local Alcohol Advice Centre (in most areas) can provide confidential counselling for people with drink problems.

Your child’s school (if your child is of school age) – most have a policy on drug education and managing drug and alcohol-related incidents.

The local police – most have a Community Liaison Department, which is more concerned with prevention than enforcement. They may be able to answer your questions about the local drug/alcohol scene, and the law.

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Can’t get onto the internet at home?
Visit your local library which will have computers and internet access.