

Australian youth and alcohol

There has been extensive discussion in the media following numerous recent events involving teenagers and alcohol. Many believe there is an obvious problem with youth binge drinking, which often leads to disastrous consequences in terms of long-term health, risk-taking behaviours and negative impacts on others.

How does the pattern of drinking by Australian adolescents compare with their foreign counterparts? A 2007 study comparing substance use in 10 to 15-year-olds in Victoria (Australia) and Washington State (United States) found that the Australian youngsters have a higher level of alcohol use and misuse, while the Americans use more marijuana (*Health Education & Behavior*, Vol. 34 (4): 634-650). It is often wrongly assumed that most European youngsters learn to consume alcohol responsibly, due to the younger age at which they begin drinking. However, the European School Survey Project on Alcohol and Drugs found that underage and binge drinking is a considerable problem, especially in the UK, Germany, Denmark and France.

There has been a tendency for the general public to be ignorant of why binge drinking is so bad for adolescent health, although recent education campaigns are

Adolescent Diagnostic Interview

- systematically assesses psychoactive substance use disorders in 12- to 18-year-olds
- screens for specific problems commonly associated with substance abuse
- questions are easy to understand; most can be answered with a simple 'yes' or 'no'

Assessment of Adolescent Alcohol and Drug Abuse: A Handbook

Ken C. Winters, PhD

- written for practitioners
- provides clear guidelines for assessing alcohol and drug problems in adolescents
- reviews existing assessment tools and discusses treatment and referral in detail
- for use in schools, mental health clinics, juvenile detention centres, chemical dependency treatment programs, and paediatric clinics

remedying this. More people are now aware that because teenagers' brains are still developing, drinking to excess can lead to learning and social difficulties, also impaired memory (particularly for females, whose blood alcohol levels elevate due to their higher fat-to-muscle ratio and lower overall body weight).

As rates of early-onset risky drinking have increased markedly, it makes sense to develop both prevention and early intervention strategies. A 2007 report (*MJA 2007; 187: S22-S25*) suggests that prevention be aimed at young people with mental health problems, those who have obvious difficulties at school (e.g., have been suspended or expelled) and those who are part of a family with existing substance abuse problems.

As far as early intervention is concerned, preventative assessment tools and brief interventions can be used by health professionals. Cognitive behaviour therapy and family therapy are amongst the relatively effective strategies in current use, but it is important that a number of treatment approaches be integrated. Areas such as education, parent training and communication skills need to be addressed.

Parents can assist their children by:

Personal Experience Inventory (PEI)

- helps identify, refer, and treat teenagers with drug and alcohol problems
- covers all forms of substance abuse
- also assesses related psychosocial problems & documents the need for treatment

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- Becoming more involved in what their children are doing and being aware of how much alcohol they are consuming
- Making sure that expectations and ground rules are easy to understand
- Being approachable when help is needed, and
- Exhibiting responsible behaviour

A free upcoming seminar called 'Substance Use and the Adolescent Brain: a toxic combination?' (run by the Turning Point Drug and Alcohol Centre) will be held on 11th April, 2008. This 1-hour seminar will commence at 1pm in the Training Room at the Turning Point Education & Training Unit, 142 Gertrude Street, Fitzroy. Bookings for this free event can be made by calling Turning Point on 03 8413 8413.