

10 Years



10 YEARS

Safety for Your Child

Did you know that injuries are the greatest threat to the life and health of your child? Injuries are the leading cause of death of school-aged children. **Yet you can prevent most major injuries** if you and your child take a few simple steps.

At age 10, children will do more things away from home. They will spend more time on a bike or in a car and will not see the need for adults to watch over them. You must take charge; you must **remind your child of safety!** It takes only a few steps to prevent major, common injuries.

Firearm Hazards

It is best to keep all guns out of your home. **Handguns are especially dangerous.** If you choose to keep a gun, store it unloaded and in a locked place, separate from ammunition. Your child is in more danger of being shot by himself, his friends, or a family member than of being injured by an intruder.

Ask if the homes where your child visits have a gun and how it is stored. Talk to your child about guns in school or on the streets. Find out if your child's friends carry guns.



Sports Safety

At this age your child may be playing baseball, soccer, or other sports. Ask your doctor which sports are right for his or her age. **Be sure your child wears the protective equipment made for that sport**, such as shin pads, mouth guards, wrist guards, eye protection, and helmets. Ask your child's coach what is needed.



And Remember Car Safety

Your child must **buckle the seat belt EVERY TIME** he or she rides in any car. Booster seats should be used until the lap belt can be worn low and flat on your child's hips and the shoulder belt can be worn across the shoulder rather than the face or neck (usually at about 80 pounds and 4 feet 9 inches tall). Remind your child to buckle up when riding with others. *Ask your child to remind you to buckle up, too!* Install shoulder belts in the back seat of your car if they are not already there. Serious injuries can happen to your child when a lap belt is used alone. **The safest place for all children to ride is in the back seat.**



Bike Safety

Your child may want to ride his or her bike further away from home. Teach your child the "Rules of the Road" and be sure your child knows them. You must watch your child to be sure he or she can handle a bike safely. **Make sure your child always wears a helmet** while riding a bike. It is still very dangerous for your child to ride at dusk or after dark. Make sure your child brings in the bike as soon as the sun starts to set.



Would you be able to help your child in case of an injury? Put emergency numbers by or on your phone today. Learn first aid and CPR. Be prepared...for your child's sake!

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



SAFETY IN A KID'S WORLD

Dear Parent: Your child is old enough to learn how to prevent injuries. The games below are designed to help your child think about safety. Read the messages with your child and talk about them together. Then take this safety sheet home and post it where everyone can see it.

It takes time to form a safety habit. Remind each other what it says. Make safety a big part of your lives.

Get the Helmet Habit!

DIRECTIONS: Break the code to read this message. On each line, write the alphabet letter that comes before the one above that line (the first 2 have been done for you).

BIKE SAFETY

B M X B Z T X F B S B
A L _____

I F M N F U X I F O Z P V

S J E F Z P V S C J L F



DIRECTIONS: Circle the signs that belong to "Rules of the Road." Be a smart and safe rider. Learn the "Rules of the Road."

DIRECTIONS: Use the code key to read this message (the first letter has been done for you).

NEVER RIDE AT NIGHT
Always put your bike away when the sun goes down.

■	●	◆	♥	★	
■	A	B	C	D	E
●	F	G	H	I	J
◆	K	L	M	N	O
♥	P	Q	R	S	T
★	U	V	W	X	Y
▲	Z				

CODE KEY

N

◆♥ ■★ ★● ■★ ♥◆

♥◆ ●♥ ■♥ ■★

■■ ♥★

◆♥ ●♥ ●● ●◆ ♥★



The information in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on the individual facts and circumstances.

Helping Your Child Cope With Life



Every parent's dream is to raise perfect children who have no worries and lead charmed, happy lives free of pain and hurt. We dream that we can keep our children safe from loss, heartache, and danger. But even if we could, would it really help them?

If we want our children to experience the world as fully as possible—with all its pain and thankfully, with all its joy—our goal will have to be *resilience*. Resilience is the ability to rise above challenges and live in this less-than-perfect world while moving forward with hope and confidence. Read on to find out how you can help your children be more resilient. There's also a special section about helping your children manage stress.

Seven Cs of resilience

All children have abilities and strengths that can help them cope with everyday life. As parents, you can develop your children's resilience by paying attention to those strengths and building on them.

But what are the ingredients of resilience? There are 7 essential components, all interrelated, called the 7 Crucial Cs.

- **Competence**—the ability to handle situations effectively.
- **Confidence**—the solid belief in one's own abilities.
- **Connection**—close ties to family, friends, school, and community give children a sense of security and values that prevent them from seeking destructive alternatives to love and attention.
- **Character**—a fundamental sense of right and wrong that helps children make wise choices, contribute to the world, and become stable adults.
- **Contribution**—when children realize that the world is a better place *because they are in it*, they will take actions and make choices that improve the world. They will also develop a sense of purpose to carry them through future challenges.
- **Coping**—children who learn to cope effectively with stress are better prepared to overcome life's challenges.
- **Control**—when children realize that they can control their decisions and actions, they're more likely to know that they have what it takes to bounce back.

Building resilience

Parents are the most important source of love, support, and guidance for their children and therefore have the greatest effect on resilience. Here's how you can make a difference.

- **Love.** To be strong, your children need love, absolute security, and a deep connection to at least one adult.
- **Let go.** Sometimes the best thing you can do to help your children learn is get out of their way while allowing them to figure things out on their own.
- **Expect the best.** Your children will live up or down to your expectations of them, so expect them to be kind, caring individuals who will give their best effort.

- **Listen.** Listening to your children attentively is more important than any words you can say. This applies to routine situations as well as times of crisis.
- **Set a good example.** Nothing you say is as important as what your children see you doing on a daily basis.
- **Encourage.** Your children can only take positive steps when they have the confidence to do so. They gain that confidence when they have solid reasons to believe they are competent.
- **Teach.** If your children are to develop the strength to overcome challenges, they need to know that they can control what happens to them. Helping your children develop a wide range of positive coping strategies will prepare them to overcome almost anything and make them far less likely to try many of the risk behaviors we all fear.

Coping strategies—managing stress

Adults deal with stress in various ways, from helpful strategies like exercise, meditation, long walks, and turning down overtime or weekend work, to less helpful ways like using painkillers, smoking, or drinking another glass of wine. How do children deal with stress? Depending on their ages and temperaments, some kids withdraw, sulk, or zone out, while others act aggressively, talk back, and toss tantrums. Older children may turn to the coping mechanisms that they see their peers using such as smoking, drugs, fighting, sexual activity, eating disorders, self-mutilation, and delinquency. Adults usually see these activities as behavior problems and underestimate the amount of stress that young people are under today. In actuality, these negative behaviors are often attempts to counter stress, push it under, chill out, and make it all go away.

When kids are stressed, their first impulse is to relieve the discomfort. They don't sit down and rationally think about the best way to do it. They find relief by acting impulsively or following the paths most readily available to them, the ones they see other kids taking. Most young people simply don't know more healthy and effective alternatives. Unless we guide them toward positive ways to relieve and manage stress, they will choose the negative behaviors of their peers or the culture they absorb from the media. They will become caught up in a cycle of negative coping methods and risky behaviors such as using alcohol or drugs to relieve their stress. We need to help them avoid that cycle.

Signs of stress

The following are some common signs of stress in children. Keep in mind that many children and teens have some of these signs and do just fine. But they may be signals that you should check in with your children and consider seeking professional help.

- Slipping school performance
- Sleep problems
- Nightmares

- Returning to less mature behaviors (for example, thumb sucking, tantrums)
- Renewed separation anxiety
- New bedwetting
- Irritability, outbursts, or tantrums
- Hopelessness
- Change in eating habits
- Anger
- Isolation or withdrawal
- Loss of friends
- New circle of friends
- Radically new style of dress
- Physical symptoms such as belly pain, headaches, fatigue, or chest pain (Always see your pediatrician before assuming these are stress symptoms.)
- Missing school because of frequent symptoms
- Drug, alcohol, or cigarette use

Ten-point stress-management plan

People with a wide range of coping strategies can manage stress more easily. The following plan is designed for adults and children. Remember that when you model healthy coping strategies, your children learn by example.

- 1. Figure out what the problem is and make it manageable.** What is the cause of the stress, what is it doing to you, and how can you solve the problem? Learn to break big problems into smaller manageable parts.
- 2. Avoid things that bring you down.** If we teach kids to identify the people who frustrate or bother them, places where stress usually rises, and things that provoke or intensify stress, they can learn when and how to avoid those stressors.
- 3. Let some things go.** People who waste their energy worrying about things they can't change don't have enough energy left over to fix the things they can.
- 4. Exercise.** When people exercise they keep their bodies healthy, think more clearly, and manage stress better because exercise uses up stress energy.
- 5. Learn to relax your body.** People who use deep breathing exercises, changes in body posture, and other relaxation techniques such as yoga and meditation can control their stress.
- 6. Eat well.** A healthy body helps us manage stress.
- 7. Sleep well.** Getting enough sleep on a consistent basis is essential for good health and keeping stress levels manageable.
- 8. Take instant vacations.** Use your mind to imagine a special place whenever you need to escape the stress of the moment. Reading, a nature walk, hobbies, and a warm bath all offer great instant vacations.
- 9. Release emotions.** We often lock unwanted feelings away, thinking we will deal with them later. But for many people, later never comes. Create outlets for feelings and emotions such as art or music, talking feelings out with someone you trust, writing down feelings in a journal, prayer or meditation, or having a good laugh or cry.

- 10. Make the world a better place.** When we contribute to our communities we can put our own troubles in perspective and build a sense of purpose.

Keep in mind...

- When you choose strategies from this plan, select those you think will work, not those that will impress someone else.
- The plan cannot be imposed on children; it has to be welcomed to be effective. If your children don't take to one strategy, try another.
- Don't stress about the stress-management plan! Don't feel that your children must be exposed to everything in the plan to manage stress successfully.
- These points are suggestions that you can adapt for your children and yourself. No one is expected to use all of them all the time.

Getting help

All people, even the most stable, reach their limit sometimes. It is not a sign of weakness on our children's part, nor is it a sign of poor parenting on our part.

Whenever your children seem troubled, the first step is to reinforce that you are there to be fully supportive. Listen, give hugs, be a sounding board, sometimes even offer advice, but give them hope that things will get better.

If you feel your children need more help than you can give, be assured that mental health professionals who work with children have the training to ensure a safe, even enjoyable experience. Ask your children's pediatrician, school counselor, or clergy person for recommendations and then speak to the professional to feel confident you have found the right match for your children.

Visit the AAP Web site at www.aap.org/stress for more information.

Adapted from Ginsburg KR, Jablow MM. *A Parent's Guide to Building Resilience in Children and Teens: Giving Your Child Roots and Wings*. Elk Grove Village, IL: American Academy of Pediatrics; 2006

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From your doctor

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

The American Academy of Pediatrics is an organization of 60,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.

American Academy of Pediatrics
Web site—www.aap.org

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VOICES OF MENINGITIS™

A Meningococcal Disease Prevention Campaign
from the National Association of School Nurses

In collaboration with Sanofi Pasteur

Get the Facts

What is meningococcal meningitis?

Meningococcal disease, which includes meningococcal meningitis, is a serious bacterial infection that strikes between 800 and 1200 Americans each year. Although rare, meningococcal disease can cause meningitis, swelling of the tissues around the brain or spinal cord; bacteremia, a severe blood infection; or pneumonia. Vaccination has been available for years and is a safe and effective way to help protect against this potentially devastating disease.

Who is at risk for getting meningococcal meningitis?

Although the disease occurs in all age groups, infants, adolescents and young adults, and people 65 years of age and older are at increased risk of contracting meningococcal disease.

How do you get meningococcal meningitis?

The bacteria that cause meningococcal disease are spread through respiratory droplets and direct contact with respiratory secretions. Common everyday activities can facilitate this spread, including kissing; sharing utensils and water bottles; and being in close quarters, such as living in a dormitory. Fatigue may also put people at greater risk of meningococcal disease, possibly by weakening the immune system.

What are symptoms of meningococcal meningitis?

Meningococcal meningitis can be hard to recognize, especially in its early stages, because symptoms are similar to those of more common viral illnesses. But unlike more common illnesses, the disease can progress quickly and may cause death in as little as 1 day. Symptoms may include high fever, severe headache, stiff neck, confusion, vomiting, exhaustion, and/or a rash.

What can happen if you get meningococcal meningitis?

Although rare, meningococcal meningitis is serious and can potentially cause the death of an otherwise healthy young person within as little as 1 day after symptoms first appear. About 10 to 15 percent of the 800 to 1200 Americans who get meningococcal disease will die. Nearly 1 in 5 survivors are left with serious medical problems, including: amputation of arms, legs, fingers, or toes; neurological problems; deafness and kidney damage.

How can you help prevent your child from developing meningococcal meningitis?

Data from the Centers for Disease Control and Prevention (CDC) have shown that, following infancy, there is a second peak in meningococcal disease incidence among adolescents and young adults between 16 and 21 years of age. Even though the disease is rare, it can result in severe, permanent disabilities and death, so it is important to take every precaution to help protect against it.

To help protect against meningococcal disease, the CDC's Advisory Committee on Immunization Practices (ACIP) recommends routine vaccination of adolescents 11 through 18 years of age (a single dose of vaccine should be administered at 11 or 12 years of age, with a booster dose at 16 years of age for children who receive the first dose before 16 years of age).

Getting the booster, which is recommended by the CDC but not required in many states, is a critical step when it comes to following the recommended vaccination schedule. The booster helps provide protection through adolescence into young adulthood, which is a time when the risk of meningococcal disease tends to increase.

Talk to your child's school nurse or health care provider about meningococcal meningitis prevention and visit www.Facebook.com/VoicesofMeningitis for more information.

A Fact Sheet for YOUTH SPORTS PARENTS



This sheet has information to help protect your children or teens from concussion or other serious brain injury.

What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

How Can I Help Keep My Children or Teens Safe?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
 - › Work with their coach to teach ways to lower the chances of getting a concussion.
 - › Emphasize the importance of reporting concussions and taking time to recover from one.
 - › Ensure that they follow their coach's rules for safety and the rules of the sport.
 - › Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. There is no "concussion-proof" helmet. Even with a helmet, it is important for children and teens to avoid hits to the head.

How Can I Spot a Possible Concussion?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

Signs Observed by Parents

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (*even briefly*).
- Shows mood, behavior, or personality changes.
- Can't recall events *prior to* or *after* a hit or fall.

Symptoms Reported by Children and Teens

- Headache or "pressure" in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not "feeling right," or "feeling down."

Talk with your children and teens about concussion. Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Remind them that *it's better to miss one game than the whole season.*



Centers for Disease
Control and Prevention
National Center for Injury
Prevention and Control

GOOD TEAMMATES KNOW:

IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.

Concussions affect each child and teen differently. While most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children's or teens' health care provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.



Plan ahead.

What do you want your child or teen to know about concussion?

What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.



You can also download the CDC *HEADS UP* app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.

What Should I Do If My Child or Teen Has a Possible Concussion?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a health care provider and only return to play with permission from a health care provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's health care provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. You may not know how serious the concussion is at first, and some symptoms may not show up for hours or days. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.

Children and teens who continue to play while having concussion symptoms or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious and can affect a child or teen for a lifetime. It can even be fatal.

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Centers for Disease
Control and Prevention
National Center for Injury
Prevention and Control

To learn more, go to www.cdc.gov/HEADSUP

Alcohol and Your Child: What Parents Need to Know



One of the most abused drugs in the United States is alcohol. It's also a drug that many people start using at a very young age. Though it's illegal for people younger than 21 years to drink, many children are introduced to alcohol well before they reach that age. The earlier they begin using alcohol, the higher risk they will have for problems with it later in life. Here is information from the American Academy of Pediatrics to help parents understand the dangers of alcohol and how to prevent alcohol use.

Why parents should worry

- Between 36% and 50% of high school students drink alcohol, and 28% to 60% report binge drinking.
- In 2014, half of 12th graders and one in nine 8th graders reported having been drunk at least once in their life.
- More than 4,300 people younger than 21 years die each year as a result of underage drinking.
- Adolescents who start drinking before 15 years of age are at 4 times the risk of developing alcohol use disorder as those who start drinking after 20 years of age.
- 80% of adolescents say their parents are the biggest influence on their decision to drink or not.

Alcohol is often the first drug that young people try. Since alcohol is legal for those older than 21 years and found in most American homes, it's often easy for children to be around alcohol and its use. Some parents may feel relieved when they find out their teen is "only" drinking alcohol. They may even think it isn't dangerous. Not true! Alcohol can harm your child's normal brain growth and development. Also, if young people like the feeling they get from alcohol, they may be interested in trying other drugs as well.

Risks linked to alcohol use

Even if a person drinks alcohol only occasionally, it can play a part in a variety of risky behaviors. Just one drink can impair decision-making and slow down reaction time. Underage drinking is not legal and is also linked to

- Early sexual activity, multiple partners, unintended pregnancy, and sexually transmitted infections, including AIDS.
- Drunk driving. Among 15- to 20-year-olds, nearly a third of all fatal automobile crashes involve alcohol.
- Use of other drugs, such as marijuana or cocaine.
- Health concerns like stunting brain growth, liver damage, hormone imbalances, and addiction to alcohol.
- School problems, such as poor grades and dropping out.
- Injuries that can be deadly or cause long-term problems.
- Crime, violence, and safety concerns.

Why young people drink

Here are some reasons why young people drink.

- Out of curiosity. They have heard that getting drunk is fun, and they want to find out for themselves.

- As a rite of passage. They see drinking as "something everyone does on the way to adulthood."
- To get drunk. This explains why teens drink until they are out of control. Binge drinking (having at least 4–5 drinks within 2 hours) is alarmingly common.
- To "fit in" with friends who drink.
- To feel relaxed and more confident.
- To escape problems, such as depressed feelings, family conflicts, or trouble in school or with a boyfriend or girlfriend.

Stages of alcohol use

The same pattern of use exists for alcohol as with other drugs, such as marijuana or cocaine. The following table shows how experts explain the stages of alcohol use. Keep in mind that even if your child doesn't meet criteria for substance use disorder (SUD), all underage drinking is risky. For example, binge drinking, at any stage of use, is very dangerous and should not be condoned.

Stage	Description
Abstinence	The time before an individual has ever used alcohol more than a few sips.
Substance use without a disorder	Very limited use that does not meet the definition of an SUD. The most common problems associated with adolescent substance use (car crashes, unintentional injuries, sexual trauma) can all occur with limited use in teens without an alcohol use disorder.
Mild-moderate SUD	Use in high-risk situations, such as when driving or with strangers. Use associated with a problem such as a fight, arrest, or school suspension. Use for emotional coping, such as to relieve stress or depression. Defined as meeting 2–5 of the 11 criteria for an SUD in <i>DSM-5</i> .*
Severe SUD	Loss of control or compulsive drug use associated with neurologic changes in the reward system of the brain. Defined as meeting 6 or more of the 11 criteria for an SUD in <i>DSM-5</i> .*

*Doctors use the *DSM-5* (*Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*) to assist in diagnosing mental disorders, including SUD (substance use disorder).

How can I tell if my child is drinking?

Certain symptoms and behaviors are warning signs for alcohol use. Look for

- Alcohol odors on your child's breath or clothing
- Alcohol in your child's room or backpack

- Obvious intoxication, dizziness, or bizarre behavior
- Changes in dress and grooming
- Changes in choice of friends; alcohol use by your child's friends
- Frequent arguments, sudden mood changes, and unexplained violent actions
- Changes in eating and sleeping patterns
- Loss of interest in activities
- School problems, such as declining or failing grades, poor attendance, and recent discipline problems
- Runaway and delinquent behavior
- Talk about depression or suicide; suicide attempts

How to prevent alcohol use

Here are ways parents can help their children resist alcohol use.

- Boost confidence and self-worth by praising your child often for what she does well. Avoid constant criticism.
- Listen to what your child says. Pay attention and really listen. Be helpful during periods of loneliness or doubt.
- Know the facts and correct any wrong beliefs your child may have, such as "everybody drinks."
- Know who your child's friends are, and set clear limits. Do not support friendships with others whose parents do not set similar limits. Real friends do not urge their friends to break the rules, such as drinking alcohol, or reject them if they don't. Insist that a parent be at any party your child attends. Don't let your teen go to parties where alcohol is served.
- Make promises. Have your child promise never to get in a car when the driver has been drinking. You must promise your child that you will always be willing to pick him up, no questions asked, when a safe ride home is needed. Promise each other you will talk about it the next day.
- Help your child deal with emotions. Let her know that strong emotions are normal. She can express strong emotions in healthy ways. Talk about concerns and problems. Assure your child that everything has an upside, and things do not stay "bad" forever. Be a good role model in the ways you express, control, or relieve stress, pain, or tension.
- Talk about things that are temptations and those that are important to your child. Talk about school and your child's need for peer-group acceptance. Discuss life goals and desires. Talk about the risk of using alcohol and drugs and how that might prevent reaching those goals. Teach children exactly how you expect them to respond if someone offers them alcohol.
- Encourage healthy ways to have fun. Family activities, sports and physical activities, interests in the arts, and hobbies can all be good uses of leisure time.
- Use teachable moments. Discuss tragedies resulting from alcohol use that are reported in the news. Ask your child what he thinks happened in the story and how tragedy could have been prevented.
- Join your child in learning all you can about preventing alcohol abuse. Programs offered in schools, churches, and youth groups can help you both learn more about alcohol abuse.
- Your child's doctor understands that good communication between parents and children is one of the best ways to prevent alcohol use. If talking with your child about alcohol is difficult, your child's doctor may be able to help open the lines of communication. If you suspect your child is using alcohol or any other drug, ask your child's doctor for advice and help.

Alcohol and the media

No matter how often they hear how dangerous it is to drink alcohol, many young people today still think it's cool. A big reason for this is the media. Alcohol companies spend billions of dollars every year promoting their products on TV, in movies and magazines, on billboards, and at sporting events. In fact, alcohol products are among the most advertised products in the nation.

Alcohol ads never mention the dangers, such as alcoholism and drinking and driving, or how it affects an unborn infant (fetal alcohol syndrome). Most ads show drinkers as healthy, energetic, sexy, and successful. Ads are trying to boost sales of a product, so this product—alcohol—is made to look as appealing as possible!

Here are tips on how parents can address issues related to alcohol and the media.

- Talk about ads with your children. Help them understand the sales pitch—the real messages in these ads.
- Teach your children to be wary consumers and not to believe everything they see and hear on TV.
- Make sure the TV shows and movies your children watch do not show drinking alcohol as cool or glamorous.
- Don't let your children wear T-shirts, jackets, or hats that promote alcohol products.
- Talk with your children's school about starting a media education program.

Parents who drink alcohol

Parents who drink should be careful how alcohol is used at home. Having a drink should never be shown as a way to cope with problems. Don't drink in unsafe conditions—before or while driving a car, mowing the lawn, boating, etc. Don't encourage your child to drink or join you in having a drink. Parents who are problem drinkers or who use alcohol often and in large amounts place their children at increased risk of alcohol dependence. Studies show that alcoholism runs in the family, so children of alcoholic parents are more likely to become alcoholics.

About teen confidentiality

All teens should be screened for alcohol and other drug use as part of routine medical care. Your child's doctor will want to ask questions about alcohol in private to get honest answers. If your child reports alcohol use, the doctor will determine whether your child needs very brief advice, a return visit, or a referral to a specialist. Every doctor will have his or her own policy about what information must be shared with a parent and what will stay confidential (between the patient and the doctor), but most doctors will protect a teen's confidentiality if they believe the teen's drug use is not an immediate safety risk to the child or others. It is important for you to respect the doctor's decisions about confidentiality to encourage your child to have an open and honest discussion with the doctor.

The persons whose photographs are depicted in this publication are professional models. They have no relation to the issues discussed. Any characters they are portraying are fictional.

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of Pediatrics



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The American Academy of Pediatrics (AAP) is an organization of 64,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of all infants, children, adolescents, and young adults.

American Academy of Pediatrics
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Myth Alcohol isn't as harmful as other drugs.

FACT Alcohol increases your risk for many deadly diseases, such as cancer. Drinking too much alcohol too quickly can lead to alcohol poisoning, which can kill you.

Myth Drinking is a good way to loosen up at parties.

FACT Drinking is a dumb way to loosen up. It can make you act silly, say things you shouldn't say, and do things you wouldn't normally do (like get into fights or have sex).

Myth Drinking alcohol will make me cool.

FACT There's nothing cool about stumbling around, passing out, or puking on yourself. Drinking alcohol also can cause bad breath and weight gain.

Myth All of the other kids drink alcohol. I need to drink to fit in.

FACT If you really want to fit in, stay sober. Most young people don't drink alcohol. Research shows that more than 70 percent of youth aged 12 to 20 haven't had a drink in the past month.¹

Myth I can sober up quickly by taking a cold shower or drinking coffee.

FACT On average, it takes 2 to 3 hours for a single drink to leave the body. Nothing can speed up the process, including drinking coffee, taking a cold shower, or "walking it off."

Myth Adults drink, so kids should be able to drink too.

FACT A young person's brain and body are still growing. Drinking alcohol can cause learning problems or lead to adult alcoholism. People who begin drinking before age 15 are five times more likely to abuse or become dependent on alcohol than those who begin drinking after age 21.²

Myth Beer and wine are safer than liquor.

FACT Alcohol is alcohol ... it can cause you problems no matter how you consume it. One 12-ounce bottle of beer or a 5-ounce glass of wine (about a half-cup) has as much alcohol as a 1.5-ounce shot of liquor. Alcopops—sweet drinks laced with malt liquor—often contain more alcohol than beer!

Myth I can drink alcohol and not have any problems.

FACT If you're under 21, drinking alcohol is a big problem: It's illegal. If caught, you may have to pay a fine, perform community service, or take alcohol awareness classes. Kids who drink also are more likely to get poor grades in school, and are at higher risk for being a crime victim.

¹ Substance Abuse and Mental Health Services Administration, *Results from the 2010 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-41, HHS Publication No. (SMA) 11-4658. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, 2011.

² Ibid.

You probably see and hear a lot about alcohol—from TV, movies, music, and your friends. But what are the real facts about underage alcohol use? Inside are some common myths—and sobering facts—about alcohol use:

Do you think you or a friend has an alcohol problem?

Don't wait—get help. Talk to a parent, doctor, teacher, or anyone you trust. For information and referrals, call the SAMHSA National Helpline at 800-662-HELP (4357) (in English and en español). An online substance abuse treatment locator is available at <http://www.samhsa.gov/treatment>.

Also, check out the federal portal of underage drinking prevention resources at <http://www.stopalcoholabuse.gov> and the Too Smart To Start website at <http://toosmarttostart.samhsa.gov>.

Underage Drinking

Myths vs. Facts

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
www.samhsa.gov

Marijuana: What You Need to Know

Many people today learn about drugs while they are very young and might be tempted to try them. Teens say that marijuana (cannabis) is easy to get, and it tends to be the first illegal drug they try. Marijuana use is often portrayed as harmless, but the truth is that marijuana is an addictive drug that can cause serious risks and consequences.

As a parent, you are your child's first and best protection against drug use. The following is information from the American Academy of Pediatrics about marijuana and how to help your child say "No" to drug use. (*Child* refers to child or teen in this publication.)

Note: In most medical marijuana states, doctors can recommend medical marijuana for almost any condition. Though there may be some benefit of cannabinoids (the active ingredient in marijuana) use in adults with specific diagnoses, there have been no studies of cannabinoids use in children and adolescents. Also, all patients need to be aware that there can be side effects.

Marijuana use affects health and well-being

School

Marijuana users have a hard time thinking clearly, concentrating, remembering things, and solving problems. Frequent marijuana use often causes grades to drop. Users often lose interest in school and may quit.

Driving and physical activity

Marijuana impairs judgment, complex motor skills, and the ability to judge speed and time. Those who drive or take other risks after smoking marijuana are much more likely to be injured or killed.

Sexual health

Teens who smoke marijuana are more likely to take sexual risks and have unwanted or unprotected sex.

Long-term health

Teens' bodies and brains are still growing and maturing, so smoking anything, including marijuana, is not good for lung health. Marijuana use may also lead to addiction or mental health problems (ie, depression, anxiety or schizophrenia).

How is marijuana used?

Dried marijuana plant material is usually rolled with tobacco into cigarette *joints* or cigar *blunts* and smoked. Some users mix it in food or brew a tea. Other drugs like PCP or crack cocaine can also be added to the joint, increasing the dangers from use.

Marijuana is an addictive drug

Just like with alcohol, nicotine, and other illicit drug use, children who smoke marijuana can lose control over their use and become addicted. Many

people overlook marijuana addiction because its withdrawal symptoms are not prominent or may not be present at all. However, withdrawal is only one symptom of addiction.

Teens who are addicted to marijuana likely smoke several times a week or more. Although most believe they are in control and can quit at any time, most can't. Those using marijuana heavily often perform poorly in school or sports, lose interest in hobbies, and develop interpersonal problems with family and friends. Teens continuing to use marijuana into adulthood tend to have lower job achievement and less stable families than their siblings who don't use drugs. As with alcohol, the younger a person is when starting marijuana use, the more likely she will become addicted.

Signs of marijuana use

Recognizing the signs of drug use is the first step in getting help for your child, but some signs are vague. Consider marijuana or other drug use if your child

- Spends less time with family and friends and more time alone or away from home
- Often seems moody or irritable
- Begins to skip classes, often shows up late for school, or has a drop in grades
- Buys things like CDs and T-shirts with pro-marijuana messages or symbols
- Loses interest in hobbies
- Comes home *high* (talkative, giggly, red or glassy eyes) or goes straight to his room
- Smells of marijuana
- Possesses drugs or drug paraphernalia

What you can do

Take these steps to help prevent your child from becoming interested in using marijuana or other drugs.

- **Set high expectations and clear limits.** Instill strong values. Let your child know that you expect her *not* to use drugs. Teach her healthy values that are important to your family and to use these values when deciding what is right and wrong.
- **Talk with your child about the dangers of drug use, including marijuana.** Young people who do not know the facts may try drugs just to see what they are like. Start talking with your child at an early age about the dangers of drug use. Encourage him to ask questions and tell you about his concerns. Be sure to really listen. Do not lecture or do all the talking. Ask what he thinks about drug use and its risks.
- **Use teachable moments.** Discuss car accidents and other tragedies that are caused by drug use and are in the news or your child's life.

- **Help your child handle peer pressure.** Peers and others can strongly influence young people to try drugs. As a parent, your influence can be even stronger in helping your child learn to be confident, make healthy choices, and resist unhealthy peer pressure. Tell her that it is OK to say “No!” to risky behaviors and mean what she says. Help her find and spend time enjoying positive interests that build self-esteem.
- **Help your child deal with emotions.** Especially during the teen years, many young people face strong emotions for the first time. Teens sometimes get depressed or anxious and might consider drug use to try to escape these feelings and forget problems. Explain that everyone has these feelings at times, so it is important for each person to learn how to express his feelings, cope with them, and face stressors in healthy ways that can help prevent or resolve problems.
- **Set a good example.** Avoid using tobacco and illicit drugs. Minimize alcohol use, and always avoid drinking and driving. Be a good role model in the ways you express, control, and relieve stress, pain, or tension. Actions do speak louder than words!
- **Get a professional evaluation.** If you think your child is using drugs, tell your child’s doctor your exact concerns. Your child’s doctor can help.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

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Ratings: Making Healthy Media Choices

Why do we need ratings? Research has shown that children are influenced by what they see and hear, especially at very young ages. To help parents make informed choices about what their children see and hear, many entertainment companies use ratings systems. Ratings give parents more information about the content of television (TV) programs, movies, music, or computer and video games. Read on for more information from the American Academy of Pediatrics about ratings and how you can help your children make healthy media choices.

What you can do

Your children will be exposed to all forms of entertainment and media at a very young age. One role you have as a parent is to help your children develop the skills to question what they see and hear in the media. Using these skills, they can learn how to pick media that has positive influences and avoid media that has negative influences. The following tips can help your family use ratings to select media:

- **Ratings, when available, can be useful tools but should only be used as a guide.** It also is important to watch and listen to media with your children. This allows you to talk with them about the content and meaning of the shows they watch, music they hear, or games they play.
- **Look for ratings and warning labels.** Ratings can help your family choose movies, shows, videos, music, Web sites, and computer and video games that are appropriate for their ages and interests.
- **Beware of products that have no ratings.** When products have no ratings, find out more about them before letting your children watch, play with, or listen to them. Keep in mind that companies do not have to use ratings.
- **Apps do not have ratings, but you can find reviews of many apps on the Internet.** Until a rating system becomes available for apps, reviews from trusted sites, such as www.common sense media.org, can help your family pick apps that are appropriate for their ages and developmental stages.

About ratings

Most entertainment companies provide ratings for their products. Ratings are usually based on the amount of violence, sex, nudity, strong language, or drug use your children will see or hear. Here is a summary of different rating systems.

Movies

The Motion Picture Association of America (MPAA) rating system is the oldest, most well-known, and most widely used rating system, but ratings should only be used as a guide. You should find out as much as you can about a movie before letting your children watch it. Take time to watch it first to make sure it is appropriate. You can also read reviews, check the Internet, or ask other parents, but remember that each child is different.

Most big screen movies are rated, even though it is not required.

MPAA movie rating system

Rating	Description
G	General Audiences. All Ages Admitted. Contains very little violence and no nudity, sex, or drug use.
PG	Parental Guidance Suggested. Some Material May Not Be Suitable For Children. May contain some profanity, violence, or brief nudity. Does not contain drug use. Parental guidance suggested for more mature themes.
PG-13	Parents Strongly Cautioned. Some Material May Be Inappropriate For Children Under 13. Contains more intense themes, violence, nudity, sex, or language than a PG movie but not as much as an R movie. May contain drug use.
R	Restricted. Under 17 Requires Accompanying Parent or Adult Guardian. Contains adult material. May include graphic language, violence, sex, nudity, and drug use.
NC-17	Adults Only. No One 17 and Under Admitted Children. Contains violence, sex, drug abuse, and other behavior that most parents would consider off-limits to children.

NOTE: Children younger than 17 years should not be allowed to view R-rated movies. Even though the rating system seems to suggest that younger children may watch an R-rated movie when a parent is present, it is not recommended they watch at all. Also, no child 17 years or younger should be allowed to watch a movie rated NC-17.

Television

The TV Parental Guidelines rating system was created to help parents choose programs that are suitable for children. The ratings are usually included in local TV listings. Remember that ratings are not used for news programs, which may not be suitable for young children.

All TVs 13 inches or larger made in the United States after 2000 are required by federal law to have a V-chip. The V-chip allows parents to block programs based on ratings or times or to block specific shows.

For more information, go to the Federal Communications Commission (FCC) Parents' Place Web site at reboot.fcc.gov/parents.

TV Parental Guidelines rating system

Rating	Guideline	Program Description
TV-Y	All Children	Appropriate for all children. Not expected to frighten younger children.
TV-Y7	Directed to Older Children	For children 7 years and older. Themes and elements may include mild fantasy or comedic violence or may frighten children younger than 7.
TV-Y7-FV	Directed to Older Children—Fantasy Violence	Same as TV-Y7, but programs may be more intense than TV-Y7.
TV-G	General Audience	Most parents may find this program suitable for all ages. Contains little or no violence, no strong language, and little or no sexual dialogue or situations.
TV-PG	Parental Guidance Suggested	Parents may find material unsuitable for younger children. Contains one or more of the following: moderate violence (V), some sexual situations (S), infrequent coarse language (L), or some suggestive dialogue (D).
TV-14	Parents Strongly Cautioned	Parents may find some material unsuitable for children younger than 14. Contains one or more of the following: intense violence (V), intense sexual situations (S), strong coarse language (L), or intensely suggestive dialogue (D).
TV-MA	Mature Audience Only	Designed to be viewed by adults and therefore may be unsuitable for children younger than 17. Contains one or more of the following: graphic violence (V), explicit sexual activity (S), or crude indecent language (L).

NOTE: The American Academy of Pediatrics discourages TV watching and other media use by children younger than 2 years and encourages interactive play. For older children, total entertainment screen time should be limited to fewer than 1 to 2 hours per day.

Video games and apps

The Entertainment Software Rating Board (ESRB) is the nonprofit, self-regulatory body that gives ratings to video games and apps so parents and other consumers can make informed choices. Almost all video games that are sold at retail in the United States and Canada are rated by the ESRB.

The following ratings information and a complete list of Content Descriptors and Interactive Elements are published on the ESRB Web site at www.esrb.org. The ESRB ratings are trademarks of the Entertainment Software Association.

ESRB ratings have 3 parts: rating categories, content descriptors, and interactive elements.

- **Rating Categories** suggest age appropriateness (see chart).
- **Content Descriptors** indicate content that may have triggered a particular rating and/or may be of interest or concern.
- **Interactive Elements** inform about interactive aspects of a product, including users' ability to interact, the sharing of users' location with other users, or the fact that personal information may be shared with third parties.

ESRB ratings

Rating Categories	Description
eC (Early Childhood)	Content is intended for young children.
E (Everyone)	Content is generally suitable for all ages. May contain minimal cartoon, fantasy or mild violence and/or infrequent use of mild language.
E 10+ (Everyone 10+)	Content is generally suitable for ages 10 and up. May contain more cartoon, fantasy or mild violence, mild language and/or minimal suggestive themes.
T (Teen)	Content is generally suitable for ages 13 and up. May contain violence, suggestive themes, crude humor, minimal blood, simulated gambling and/or infrequent use of strong language.
M (Mature)	Content is generally suitable for ages 17 and up. May contain intense violence, blood and gore, sexual content and/or strong language.
Ao (Adults Only)	Content suitable only for adults ages 18 and up. May include prolonged scenes of intense violence, graphic sexual content and/or gambling with real currency.
RP (Rating Pending)	Not yet assigned a final ESRB rating. Appears only in advertising, marketing and promotional materials related to a game that is expected to carry an ESRB rating, and should be replaced by a game's rating once it has been assigned.

Music

The Recording Industry Association of America has a Parental Advisory Label Program that is not required but often used. Each record company uses its own guidelines to decide which recordings will be labeled with a parental advisory.

If a record company decides to use the advisory, a standard black and white logo that says "**Parental Advisory: Explicit Content**" must be displayed on the front of the music packaging. The logo or a similar notice for parents may also be available on online and mobile products or services that allow users to download music for personal use.

Before allowing your children to listen to or purchase music, you may wish to listen to the lyrics first. Many music stores will allow you to listen to music before buying it. Also, most record companies and recording artists have their own Web sites that may post song lyrics or samples of the songs.

Coin-operated video games

All new coin-operated video games are labeled with a Parental Advisory Disclosure Message. This message appears in the artwork of the game or on a sticker on the machine. It comes in the following colors: Green (Suitable for All Ages), Yellow (Mild), and Red (Strong). The yellow and red messages also break down the content into 1 of 4 categories: animated violence, lifelike violence, sexual content, and language.

Online safety

Internet companies are still in the process of creating a universal ratings system for online material. Until a system that everyone uses is created, the following tips can help parents create a safer online experience for their children:

- Search the Web with your children. Keep in mind that anyone can set up a Web site and post information on any topic. You might be surprised at how easy it is for your children to stumble across or find information that contains graphic sex, violence, or drug use.
- Put the computer in a room where you can monitor your children. Computers should never be placed in a room where a door can be closed or a parent left out of the activity.
- Use tracking software to help you keep track of where your children have been on the Web. But keep in mind that nothing can replace adult supervision.
- Install software or services that can filter or block offensive Web sites and material. Be aware, however, that many children are smart enough to find ways around the filters. Also, you may find that filters may be more restrictive than you want.
- Find out what the Internet use policies are at the school your children go to or at your library.

For more information visit the official AAP Web site for parents, HealthyChildren.org, or the Web site of the AAP Council on Communication and Media, www.aap.org/COCM.

Listing of resources does not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of external resources. Information was current at the time of publication.

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talking with your teen about sex



Children are exposed to sexual messages every day—on TV, on the Internet, in movies, in magazines, and in music. Sex in the media is so common that you might think that teens today already know all they need to about sex. They may even claim to know it all, so sex is something you just don't talk about. Unfortunately, only a small amount of what is seen in the media shows responsible sexual behavior or gives correct information.

Your teen needs a reliable, honest source to turn to for answers—the best source is you. You may feel uneasy talking with your teen about sex, but your guidance is important. Beyond the basic facts about sex, your teen needs to hear from you about your family values and beliefs. This needs to be an ongoing discussion and not just one “big talk.” This publication was written by the American Academy of Pediatrics to help you talk with your teen about this important and sensitive subject.

Why should I talk to my teen about sex?

When it comes to something as important as sex and sexuality, nothing can replace your influence. You are the best person to teach your teen about relationships, love, commitment, and respect in what you say and by your own example.

Talking about sex should begin when your children first asks questions like, “Where do babies come from?” If you wait until your children are teens to talk about sex, they will probably learn their first lessons about sex from other sources. Studies show that children who learn about sex from friends or through a program at school instead of their parents are more likely to have sex before marriage. Teens who talk with their parents about sex are sexually active at a later age than those who don't.

What should I tell my teen about sex?

Communication between parents and teens is very important. Your teen may not share the same values as you but that shouldn't stop you from talking about sex and sexuality.

Before your children reach their early teens, girls and boys should know about the following:

- Correct body names and functions of male and female sex organs
- Puberty and how the body changes (When and how the body changes is different for each child.)
- Menstruation (periods)
- Sexual intercourse and the risk of getting pregnant or getting a sexually transmitted infection (STI), including HIV (the virus that causes AIDS)
- Your family values about dating, sexual activity, cigarettes, alcohol, and drugs

During the teen years, your talks about sex should focus more on the social and emotional aspects of sex, and your values. Be ready to answer questions like

- When can I start dating?
- When is it OK to kiss a boy (or a girl)?
- How far is too far?
- How will I know when I'm ready to have sex?
- Won't having sex help me keep my boyfriend (or girlfriend)?
- Do you think I should have sex before marriage?
- Is oral sex really sex?
- How do I say “No”?
- What do I do if someone tries to force me to have sex?

Answer your teen's questions based on your values—even if you think your values are old-fashioned. If you feel strongly that sex before marriage is wrong, share this with your teen and explain why you feel that way. If you explain the reasons for your beliefs, your teen is more likely to understand and adopt your values.

Other concerns include the following:

- **Peer pressure.** Teens face a lot of peer pressure to have sex. If they aren't ready to have sex, they may feel left out. But more than 50% of teens wait until after high school to have sex, and there are benefits of waiting. Abstinence from sex (oral, vaginal, and anal) provides 100% protection against STIs and pregnancy, and less emotional stress if there's a breakup.
- **STIs.** Teens need to know that having sex exposes them to the risk of STIs. Common STIs include chlamydia, gonorrhea, human papillomavirus (HPV), herpes, HIV, and trichomoniasis. HPV is responsible for most cervical cancer.
- **Prevention.** The only sure way to prevent STIs is *not* to have sex.
- **Reducing the risk.** Condoms (male or female) are the safest method to reduce the risk of most STIs and should always be used. Also, postponing sex until later teen years or adulthood reduces the risk. If both partners are abstinent before marriage or in a long-term, mature relationship; have never had an STI; and have sex with each other only (monogamy), the risk is eliminated.
- **Monogamy.** Many teens have heard that monogamy is “safe sex”; however, they misunderstand and believe that having one partner and then switching and having another partner and then switching is monogamy. While having multiple partners during the same time frame is especially risky for STI exposure, having one partner after another is not monogamy (monogamy means one partner for life).
- **Birth control.** Girls *and* boys need to know about birth control whether they decide to have sex or not. If your teen doesn't know about birth control, an unplanned pregnancy might result. Ten percent of teen girls in the United States get pregnant each year. By the age of 20 years, 4 out of 10 girls become pregnant. Birth control pills, shots (trade name Depo-Provera),

and contraceptive patches only prevent pregnancy—they don't protect against STIs, including HIV/AIDS. Condoms and another reliable birth control method need to be used each time to help reduce the risk of STIs and pregnancy.

- **Date rape.** Date (or acquaintance) rape is a serious problem for teens. It happens when a person your teen knows (for example, a date, friend, or neighbor) forces her (or him) to have sex. Make sure your teen understands that “no always means no.” Also, dating in groups instead of alone and avoiding drugs and alcohol reduces the risk of date rape.
- **Sexuality.** This is a difficult topic for many parents, but your teen probably has many questions about heterosexuality, homosexuality, and bisexuality. Many young people go through a stage when they wonder, “Am I gay?” It often happens when a teen is attracted to a friend of the same gender, or has a crush on a teacher of the same gender. This is common and doesn't necessarily mean your teen is gay, lesbian, or bisexual. Sexual identity may not be firmly set until adulthood. If your teen is gay, lesbian, or bisexual, your love and acceptance is important.
- **Masturbation.** Masturbation is a topic few people feel comfortable talking about. It's a normal and healthy part of human sexuality and shouldn't be discouraged. Discuss this in terms of your values. Talk with your pediatrician if your child can't limit masturbation to a private place (for example, bedroom or bathroom).

How do I talk with my teen?

Sex is a very personal and private matter. Many parents find it difficult to talk with their children about sex. Teens may be too embarrassed, not trust their parents' advice, or prefer not to talk with their parents about it. But sex is an important topic to talk about.

The following tips may help make talking with your teen easier:

- **Be prepared.** Read about the subject so your own questions are answered before talking with your teen. Practice what you plan to say with your spouse or partner, a friend, or another parent. This may make it easier to talk with your teen when the time comes. Speak calmly and clearly.

Won't talking about sex with my children make them want to try it?

Parents often fear that if they talk about sex, their children may want to try it. Teens are curious about sex, whether you talk to them about it or not. Studies show that teens whose parents talk openly about sex are actually *more* responsible in their sexual behavior.

Your guidance is important. It will help your teen make better-informed decisions about sex. Teens who don't have the facts about sex and look to friends and the media for answers are the most likely to get into trouble (such as getting STIs or becoming pregnant).

Sex and the media

Media entertain, educate, and inform. But some messages may not be what we want children to learn.

American media today often portray sexual images and suggestive sexual content. In fact, the average young viewer is exposed to more than 14,000 sexual references each year. Only a small amount of what is seen in the media shows responsible sexual behavior or gives correct information about abstinence (not having sex), birth control, or the risks of pregnancy and sexually transmitted infections (STIs).

Media in any format can have a positive or negative effect on your teen. This makes it important for you to know what your teen is listening to or watching. Many lyrics can be obtained online in case you need help figuring out the words. Watch TV or go to the movies with your teen—it can be a great starting point for your next talk about sex.

Pay attention to TV and movie ratings. Movies with an R (restricted) rating contain material that is not appropriate for children younger than 17 years. PG-13 movies may contain violence, graphic language, or adult situations.

- **Be honest.** Let your teen know that talking about sex isn't easy for you but that you think it's important that information about sex comes from you. And even though you would prefer that your values be accepted, ultimately decisions about sex are up to your teen. If your teen disagrees with you or gets angry, take heart, you have been heard. These talks will help your teen develop a solid value system, even if it's different from your own.
- **Listen.** Give your teen a chance to talk and ask questions. It's important that you give your full attention.
- **Try to strike a balance.** While teens need privacy, they also need information and guidance from parents. If your teen doesn't want to talk with you about sex and tells you that it's none of your business, be firm and say that it is your business. Your teen should know that you're asking out of love and concern, especially because there are potentially harmful situations. If your teen is quiet when you try to talk about sex, say what you have to say anyway. Your message may get through.
- **Ask for help.** If you just can't talk to your teen about sex, ask your pediatrician, a trusted aunt or uncle, or a minister, priest, or rabbi for help. Also, many parents find it useful to give their teens a book on human sexuality and say, “Take a look at this, and let's talk.”

The persons whose photographs are depicted in this publication are professional models. They have no relation to the issues discussed. Any characters they are portraying are fictional.

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tips for parents of adolescents



Adolescence is the time between childhood and adulthood when your daughter or son will go through many physical and emotional changes. It begins with puberty which, for girls, usually starts between 8 and 13 years of age, and for boys, between 10 to 14 years of age.

Though these years can be difficult, it can also be a rewarding time watching your teen make the transition into an independent, caring, and responsible adult.

The American Academy of Pediatrics offers the following tips to help you and your teen navigate adolescence. *Teen* will be the term used in this publication when referring to adolescent, teenager, preteen, and tween.

- 1. Spend family time with your teen.** Although many teens may seem more interested in friends, this does not mean they are not interested in family.
- 2. Spend time alone with your teen.** Even if your teen does not want time alone with you, remind him or her often that you are always available to listen or talk. One way to make yourself available is to offer rides; a great opportunity to talk (if the radio isn't too loud).
- 3. When your teen talks**
 - Pay attention.
 - Watch, as well as listen.
 - Try not to interrupt.
 - Ask for further details if you don't understand.
 - If you don't have time to listen, set a time that will be good for both of you.
- 4. Respect your teen.** It's OK to disagree with your teen, but disagree respectfully, not insultingly. Don't dismiss his or her feelings or opinions as silly or senseless. You may not always be able to help when your teen is upset about something, but it is important to say, "I want to understand," or "Help me understand."
- 5. When rules are needed, set and enforce them.** Don't be afraid to be unpopular for a day or two. Believe it or not, teens see setting limits as a form of caring.
- 6. Try not to get upset if your teen makes mistakes.** This will help your teen take responsibility for his or her actions. Remember to offer guidance when necessary. Direct the discussion toward solutions. For example, saying, "I get upset when I find clothes all over the floor," is much better than, "You're a slob."

Be willing to negotiate and compromise. This will teach problem solving in a healthy way. Remember to choose your battles. Let go of the little things that may not be worth a big fight.
- 7. Criticize a behavior, not an attitude.** For example, instead of saying, "You're late. That's so irresponsible. And I don't like your attitude," try saying, "I worry about your safety when you're late. I trust you, but when I don't hear from you and don't know where you are, I wonder whether something bad has happened to you. What can we do together to help

you get home on time and make sure I know where you are or when you're going to be late?"

- 8. Mix criticism with praise.** Your teen needs to know how you feel when he or she is not doing what you want him or her to do. Be sure to mix in positive feedback with this criticism. For example, "I'm proud that you are able to hold a job and get your homework done. I would like to see you use some of that energy to help do the dishes after meals."
- 9. Let your teen be a teen.** Give your teen some leeway with regard to clothes, hairstyle, etc. Many teens go through a rebellious period in which they want to express themselves in ways that are different from their parents. However, be aware of the messages and ratings of the music, movies, and video games to which your teen is exposed.
- 10. Be a parent first, not a friend.** Your teen's separation from you as a parent is a normal part of development. Don't take it personally.
- 11. Don't be afraid to share mistakes you've made as a parent or as a teen.**
- 12. Talk with your teen's pediatrician** if you need advice on how to talk with or get along with your teen.

Common questions

The following are answers to questions from parents of teens.

Dieting and body image

"My daughter is always trying new diets. How can I help her lose weight safely?"

Many teens resort to extreme diet or exercise programs because they want their bodies to look like the models, singers, actors, or athletes they see in the media.

Tips for a healthy diet

- Limit fast-food meals. Discuss the options available at fast-food restaurants and help your teen find a healthy, balanced diet. Fat should not come from junk food but from healthier foods such as low-fat cheese or low-fat yogurt.
- Keep the household supply of junk food such as candy, cookies, and potato chips to a minimum.
- Stock up on low-fat healthy items for snacking such as fruit, raw vegetables, whole-grain crackers, and low-fat yogurt. Encourage eating fruits and vegetables as snacks.
- Check with your teen's doctor about the proper amounts of calories, fat, protein, and carbohydrates for your teen.
- As a parent, model good eating habits. Make mealtime family time (5 times per week or more)—eating meals together helps with communication and reduces teen risk-taking.

Be aware of any diet or exercise program your daughter is following. Be watchful of how much weight she loses and make sure the diet program is healthy. Eating disorders such as anorexia nervosa and bulimia nervosa can be very dangerous. If you suspect your daughter has an eating disorder, talk with her doctor right away. Also, if you have a son, it's important to be aware of his diet or exercise habits too.

Many diets are unhealthy for teens because they do not have the nutritional value that bodies need during puberty. If your daughter wants to lose weight, urge her to increase physical activity and to take weight off slowly. Let her eat according to her own appetite, but make sure she gets enough fats, carbohydrates, protein, and calcium.

If your daughter decides to become a vegetarian, make certain she follows a healthy vegetarian diet. She may need to see her doctor or a nutritionist to ensure that she is getting enough fat, calories, protein, and calcium.

If your teen (like many teens) is unhappy with the way she looks, encourage healthy exercise. Physical activity will help stop hunger pangs, create a positive self-image, and take away the "blahs." If she wants to train with weights, she should check with her doctor, as well as a trainer, coach, or physical education teacher.

Help create a positive self-image by praising her wonderful qualities and focusing less on her appearance. Set a good example by making exercise and eating right a part of your daily routine also.

Dating and sex education

"With all the sex on TV, how can I teach my son to wait until he is ready?"

Teens (females and males) are naturally curious about sex. This is completely normal and healthy. However, teens may be pressured

into having sex too soon by their peers or the media. Talk with your son to understand his feelings and views about sex. Start early and provide him with access to information that is accurate and appropriate. Delaying sexual involvement could be the most important decision he makes.

Drugs

"I am afraid some of my daughter's friends have offered her drugs. How can I help her make the right decision?"

Teens may try or use tobacco and alcohol or other drugs to fit in or as a way to deal with peer pressure. Try to help build self-confidence or self-esteem in your teen. Ask your daughter about any concerns and problems she is facing and help her learn how to deal with strong emotions and cope with stress in ways that are healthy. For instance, encourage her to participate in leisure and outside activities with teens who don't drink and use drugs.

Smoking and tobacco

"My daughter smokes behind my back. How do I convince her to quit?"

Smoking can turn into a lifelong addiction that can be extremely hard to break. Discuss with your teen some of the more undesirable effects of smoking, including bad breath, stained teeth, wrinkles, a long-term cough, and decreased athletic performance. Long-term use can also lead to serious health problems like emphysema and cancer.

Chew or *snuff* can also lead to nicotine addiction and causes the same health problems as smoking cigarettes. In addition, mouth wounds or sores can form and may not heal easily. Smokeless tobacco can also lead to cancer.

If you suspect your daughter is smoking or using smokeless tobacco and you need advice, talk with her doctor. Schedule a visit with her doctor when you and your daughter can discuss the risks associated with smoking and the best ways to quit before it becomes a lifelong habit.

Talking with your teen about sex

Before your teen becomes sexually active, make sure you discuss the following topics:

- **Medical and physical risks.** Risks include unwanted pregnancy and sexually transmitted infections (STIs) such as gonorrhea, chlamydia, hepatitis B, syphilis, herpes, HIV (the virus that causes AIDS), and HPV (human papillomavirus—the virus that can cause cancers of the mouth and throat, cervix, and genitals in teens and adults).
- **Emotional risks.** Teens who have sex before they are emotionally ready may regret the decision when they are older or feel guilty, frightened, or ashamed from the experience. Your teen should ask himself or herself, "Am I ready to have sex?" or "What will happen after I have sex?"
- **Promoting safer sex.** Anyone who is sexually active needs to be aware of how to prevent unintended pregnancies, as well as how to protect against STIs. Condoms should always be used *along with* a second method of contraception to prevent pregnancy and reduce the risk of STIs.
- **Setting limits.** Make sure your teen has thought about what his or her sexual limits are *before* dating begins.

Most importantly, let your teen know that he or she can talk with you and his or her doctor about dating and relationships. Offer your guidance throughout this important stage in your teen's life.

If you smoke...quit

If you or someone else in the household smokes, now is a good time to quit. Watching a parent struggle through the process of quitting can be a powerful message for a teen who is thinking about starting. It also shows that you care about your health, as well as your teen's.

Alcohol

"I know my son drinks once in a while, but it's just beer. Why should I worry?"

Alcohol is the most socially accepted drug in our society, and also one of the most abused and destructive. Even small amounts of alcohol can impair judgment, provoke risky and violent behavior, and slow down reaction time. An intoxicated teen (or anyone else) behind the wheel of a car makes it a lethal weapon. Alcohol-related car crashes are the leading cause of death for young adults aged 15 to 24 years.

Though it's illegal for people younger than 21 years to drink, we all know that most teens are not strangers to alcohol. Many of them

are introduced to alcohol during childhood. If you choose to use alcohol in your home, be aware of the example you set for your teen. The following suggestions may help:

- Having a drink should never be shown as a way to cope with problems.
- Don't drink in unsafe conditions—for example, driving the car, mowing the lawn, and using the stove.
- Don't encourage your teen to drink or to join you in having a drink.
- Do not allow your children to drink alcohol before they reach the legal age and teach them never, ever to drink and drive.
- Never make jokes about getting drunk; make sure that your children understand that it is neither funny nor acceptable.
- Show your children that there are many ways to have fun without alcohol. Happy occasions and special events don't have to include drinking.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

From your doctor

American Academy
of Pediatrics



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The American Academy of Pediatrics is an organization of 60,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.

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Q & A

Q. Isn't smoking sexy?

A. Only if you think bad breath, smelly hair, yellow fingers, and coughing are sexy. Advertisements often portray smoking as glamorous and sophisticated, but think carefully about who created these ads and why.

Q. Is smokeless tobacco safe?

A. No. Remember, "no smoke" doesn't mean that smokeless tobacco is safe. Even a little smokeless tobacco has enough nicotine to get you addicted. Smokeless tobacco can lead to many types of health problems as well as cause cancer.¹⁸

Q. Do most teens smoke?

A. No. According to a 2012 survey, 9 out of 10 12- to 17-year olds do not use a tobacco product. Currently, the number of girls who smoke cigarettes is similar to the number of boys who smoke.¹⁹

Q. Doesn't smoking help you relax?

A. No. Smoking can actually increase feelings of stress and nervousness. Break the cycle: Use drug-free strategies to calm your nerves like exercise and talking to your friends.



tips for teens

Tobacco

Info

To learn more about tobacco, or obtain referrals to programs in your community, contact:

SAMHSA
1-877-SAMHSA-7 (1-877-726-4727)
 (English and Spanish)

TDD 1-800-487-4889

<http://www.samhsa.gov>
<http://store.samhsa.gov>



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
 Substance Abuse and Mental Health Services Administration
 Center for Substance Abuse Prevention
www.samhsa.gov

The bottom line: If you know someone who is using tobacco, urge him or her to quit. If you are using it—stop! The longer you ignore the real facts, the more chances you take with your health and well-being.

It's never too late. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust.

Do it today!

Curious about the TV ads of the National Youth Anti-Drug Media Campaign? Check out the website at <http://www.abovetheinfluence.com/ads> or visit the Office of National Drug Control Policy website at <http://www.whitehouse.gov/ondcp>.



The Truth About Tobacco

Slang—Cigarettes: Smokes, Cigs, Butts. Smokeless Tobacco: Chew, Dip, Spit Tobacco, Snuff

Get the Facts...

Tobacco—cigarettes, smokeless tobacco, and snuff—damages your health. Smoking, which is the most common cause of lung cancer, is also a leading cause of cancer of the mouth, throat, bladder, pancreas, and kidneys. Over 8 percent—2.2 million—youths aged 12 to 17 used a tobacco product in the past month.¹ Smokeless tobacco contains 28 ingredients that can cause cancer in your lips, tongue, cheeks, gums, and the top and bottom of your mouth.²

Tobacco affects your body's development. Smoking is particularly harmful for teens because your body is still growing and changing. The 200 known poisons in cigarette smoke affect your normal development and can cause life-threatening diseases, such as chronic bronchitis, heart disease, and stroke.

Tobacco is addictive. Cigarettes contain nicotine—a powerfully addictive substance. The younger a person starts smoking, the more likely he is to become strongly addicted to nicotine.³ Even though it is rare, addiction can occur after smoking as few as 100 cigarettes.⁴ Of adults who smoke cigarettes every day, 88 percent report that they started smoking by age 18.⁵

Tobacco can kill you. Each year in the United States, cigarette smoking accounts for 440,000 deaths.⁶ More deaths are caused each year by tobacco than by AIDS, illegal drug use, alcohol use, car accidents, suicides, and murder combined.⁷

Before You Risk It...

Know the law. It is illegal for anyone under 18 to buy cigarettes, smokeless tobacco, or tobacco-related products.

Stay informed. Addiction to tobacco is hard to control. Young people often underestimate the addictiveness of tobacco and the effect of tobacco use on their health. Studies indicate that most teenage and young adult smokers want to quit and try to do so, but few succeed.⁸

Keep your edge. The poisons in cigarettes can affect your appearance. Tobacco stains teeth and nails and, also, dulls

skin and hair.⁹ There's more! Research confirms smoking causes skin to age prematurely—wrinkles—and also links smoking and hair loss—baldness.¹⁰

Be aware. It can be hard to play sports if you use tobacco. Smoking causes shortness of breath and dizziness, and chewing tobacco causes dehydration.

Think of others. Anyone who smokes puts the health of friends and family at risk—more than 126 million nonsmoking Americans are exposed to secondhand smoke in homes, vehicles, workplaces, and public places.¹¹ Every year, almost 50,000 nonsmokers die from diseases caused by secondhand smoke. This includes 3,000 deaths from lung cancer each year due to secondhand smoke.^{12,13,14} There is no risk-free level of secondhand smoke exposure; even brief exposures can be dangerous.¹⁵

Get the facts. Each day, nearly 3,300 people under 18 start smoking.¹⁶ Many will suffer long-term health consequences, and one-third of youth and young adults who keep smoking will die prematurely from a tobacco-related disease.¹⁷

Know the Signs...

How can you tell if a friend is using tobacco? Sometimes it's tough to tell. But there are signs you can look for. If your friend has one or more of the following signs, he or she may be regularly using tobacco:

- Wheezing
- Coughing
- Bad breath
- Smelly hair and clothes
- Yellow-stained teeth and fingers
- Frequent colds
- Decreased senses of smell and taste
- Difficulty keeping up with sports and athletic activities
- Bleeding gums (smokeless tobacco)
- Frequent mouth sores (smokeless tobacco).

What can you do to help someone who is using tobacco? Be a real friend. Encourage your friend to quit. For information and referrals, call SAMHSA's National Helpline at 1-800-662-HELP (4357).

For more information or for references to facts found in this Tips for Teens, go to <http://store.samhsa.gov>.