

# Up to No Good: **HELPING TROUBLED TEENS**

Teens can struggle in spite of a parent's best efforts, but watching for warning signs can be an effective strategy for working through hard times.

by Lisa Grant



You can do everything right as a parent, and still have an adolescent who makes poor choices. It's a sobering thought, but it doesn't mean you have to sit back and watch your child go off the rails. Just ask Karen Jeffers.

Jeffers, a mother of three, was determined to be an involved parent. Her own parents "checked out" of parenting during her teen years, and she wanted different for her own children. "I fought so hard for my kids to have it different from what I grew up with, and for them to know they were loved and in charge of their future," she says.

Jeffers and her husband, Dave, did everything good parents are supposed to do. They made clear expectations and stuck to them, knew where their kids were and what they were

doing, and talked openly about the predisposition to addictions that ran in their families. They hosted their teens' friends and kept the lines of communication open.

"We were upfront with our reasoning," Jeffers says. "We told them we live in a world with lots of temptations, and our job is to protect you. I would have bet the farm we were doing all the right things. But these are human beings with their own thought processes."

Their youngest son was diagnosed with ADHD, which contributed to some behavior problems. "He didn't think about things," Jeffers says. "He just reacted." Refusing to make excuses for his behavior, Jeffers followed up with discipline at home, even when their son received punishment elsewhere. Jeffers was still concerned. "Every day I worried about him doing worse stuff. His friends became the voice of reason and the devil's advocate against his parents."

Eventually, her son found himself in court for stealing. The Jeffers went to court with him, but required him to pay his own fines and doled out sanctions at home. "A lot of parents just want to rescue their kids or be their best friend, rather than their parent," she says. "You can do both."

Then, at age 17, he found out he was going to be a father. He and his girlfriend decided to raise the baby, and that became the positive turning point in his life. "He began to mirror things we said and thanked us for raising him right," she says.

## **Why teens take risks**

The reasons why teens engage in risky behavior are varied. Many teens aren't conscious of how the choices they make will affect their future, and that's simply due to normal brain development, says Tamera Hill, a licensed marriage and family therapist with Garrison Counseling.

“A teen may hear that drugs are bad for your health, but because of their developing brain, they don’t think that will happen to them,” Hill says.

Joshua Walden, executive director of Crossfire Youth Center, calls this the “Superman syndrome.” “Teens have a ‘this is it’ mentality,” says Walden. “They lack awareness of the reality of the world.”

Research shows the brain doesn’t fully develop until the mid-20s. “Just because [children look] mature in their physique, they are still very much developing in their brain,” Hill says.

### **What’s normal?**

It can be difficult to distinguish between normal teenage moodiness and behavior that is troubling. Hill says, “The key is to look for frequency of changes and to what extremes they are occurring.”

On the spectrum between a compliant child and one exhibiting out-of-control behavior, most teens are somewhere in the middle.

### **Normal behavior may include:**

- Moodiness and looking secretive
- Spending more time alone in bedroom
- Irritability and impatience (stomping off, slamming doors)
- Not wanting to spend as much time with family
- Saying things like, “You don’t understand me” or “I hate living here”
- Increasing arguments
- Fashion/hairstyle choices that are edgier

On their own, these behaviors are part of the natural process toward independence. The time to intervene is when these behaviors are escalated and accompanied by other red flags.

The biggest reality parents need to understand is that kids are growing up in a different world, Walden says. “In today’s world, kids can go from zero to 60 miles per hour in a split second,” says Walden. “A kid can go from age 13 and be OK, to age 13 and addicted to heroin in a week.”

## Parents, take action

Walden believes parents can help by confirming where their kids are and what they are doing. “Freedom without oversight is a mistake,” Walden insists. “It’s not about trust; it’s about verification. When teens say ‘you don’t trust me,’ I help them see it as an issue of integrity. I tell them, ‘You will make mistakes, and I’m here to help you when you do so you don’t do anything devastating.’”

Parents can also keep teens busy, leaving them less time for mischief. Walden claims this has the added benefit of a greater chance for recovery if your teen does wind up in trouble. “If all a kid knows how to do is get high, then when they want to get out, they aren’t good at anything,” Walden says. “If they have an activity to add to recovery, there is a huge success rate.”

Hill emphasizes the need for parents to really listen to their teens. “Be willing to talk when they are willing,” she says, and strive to

understand how they are feeling and coping with an issue. “Many parents want to ‘fix’ the problem versus listening to their child.”

Jeffers credits parental intuition with helping her know when her son was in trouble. “If he called and said he was late because he was at the library and lost track of time, I would ask him to take a picture of the inside of the library right now and send it to me,” she says.

Once problems have been identified, prepare for a total family solution, Walden says. “Focus on the end goal of getting better, not on what is right and wrong,” she says.

Jeffers’ son is now married and raising two children of his own. It seems Jeffers was successful in mastering the balance between parent and friend. “We are empty nesters now, but our kids still call us to come over for game night,” she says. “I look back at our goal: to raise functional adults who are happy and emotionally healthy, and I think we did that.” **CPC**

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## Red Flags

Parents can be alert to certain warning signs. Though your child may exhibit some of these individual signs, these are not guarantees they are engaging in the behavior.

Use these “red flags” as a talking point with your teens. (See article on how to talk to your teen about risky behavior on page 20.)

### Alcohol use

- Smell of alcohol on breath or clothing
- Stumbling, slurred speech, or acting out of character
- Throwing up after a night out with friends
- Missing alcohol from your home
- Frequent use of gum or breath mints



### Drug use

- Bloodshot eyes, frequent use of eye drops
- Frequent nosebleeds
- Sudden weight loss or weight gain
- Unusual smells on breath, body, or clothing
- Shaking, slurred speech, unstable coordination
- Use of perfume or air freshener to hide smell of smoke or drugs



## Eating disorders

- Eating tiny portions or refusing to eat
- Distorted body image
- Strenuous exercise (for over an hour)
- Hoarding and hiding food
- Disappearing after eating, often to the bathroom
- Wearing bulky clothes to hide weight loss

## Cutting

- Unexplained cuts and scratches, particularly when they appear regularly
- Wearing long-sleeved shirts when the weather is warm
- Mood changes like depression or anxiety
- Unable to manage day-to-day stresses of life



## Sexting

- Won't let phone out of sight
- Defensive or refuses to allow parents to look at phone

## Abusive dating relationship

- Boyfriend/girlfriend refuses to come to your house
- Boyfriend/girlfriend contacting your child excessively or keeping tabs
- Your child is withdrawn, irritable, depressed
- Lack of respect to parents by boyfriend/girlfriend

## General warning signs

- Declining grades or loss of interest in activities
- Extreme mood changes or severe anxiety
- Lying about things that don't really matter
- Secretive about friendships

(For warning signs on suicide/mental health issues, see pages 22-23.)