

WHAT PARENTS NEED TO KNOW ABOUT DRUGS



SPOT THE SIGNS

START THE TALK

STAY INVOLVED



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Introduction: Why This Booklet Matters

Spot the Signs. Start the Talk. Stay Involved.

Drug use among children and adolescents is an urgent and growing concern in Guyana. With the increasing availability of illicit substances, including cannabis, synthetic drugs, vapes, and misused prescription medications, young people are being exposed to high-risk behaviours at alarmingly early ages. This exposure is reaching communities, schools, and households across the nation. For this reason, early intervention, led by informed and vigilant parents and guardians, is now more critical than ever.



Mr. James Singh
DIRECTOR OF CANU

This booklet was created to serve as a practical and easy-to-understand guide, helping parents identify early warning signs of drug use, understand the factors that place children at risk, and equip themselves with valuable tools to respond proactively. It reinforces the simple but powerful message: Spot the signs. Start the talk. Stay involved.

Children often lack the maturity to understand the consequences of their decisions fully. Whether motivated by peer pressure, curiosity, stress, or misinformation, their choices can quickly lead to experimentation, dependency, and legal consequences. The earlier parents can recognise changes in behaviour, physical health, social interactions, or academic performance, the greater the chances of intervening before serious harm occurs.

This booklet outlines:

- The most common drugs being misused by youth in Guyana
- Physical, emotional, and behavioural indicators of possible drug use
- Practical strategies for communicating with children about drugs
- Guidance on what to do if you suspect drug use
- Contact information for support services, including CANU and other national stakeholders

The Customs Anti Narcotic Unit (CANU) recognises that enforcement alone is not enough. A balanced approach, combining prevention, education, community involvement, and family support, is essential to reducing the demand for drugs and building national resilience. As part of Guyana's broader National Drug Strategy Master Plan, this publication contributes to our ongoing efforts to protect children and youth by empowering families at the grassroots level.

Parents are the first line of defence. Whether through daily routines, school check-ins, or simple conversations, your involvement can have a lasting impact. Staying informed, engaged, and supportive helps create a protective environment where children feel safe to speak up, ask questions, and make informed, healthy decisions.

Together, we can strengthen our communities, safeguard our children, and break the cycle of drug abuse. It begins at home, with awareness, with conversation, and with care.

Understanding Drugs: What's Out There

The drug landscape in Guyana, like many parts of the Caribbean and the world, is rapidly evolving. Today's children are not only exposed to traditional substances such as cannabis and alcohol, but also to a growing range of synthetic and designer drugs that are often disguised, easily accessible, and dangerously misunderstood. Many of these substances are being introduced to youth through peer influence, social media, parties, and in some cases, even within their immediate communities.

Illicit drugs now come in a variety of forms, pills, powders, infused foods, vape liquids, eye drops, drinks, and even candies, making them more challenging for parents to detect. Some may look harmless or even appealing to young eyes, but their effects can be life-altering or even fatal.

Here are some of the substances currently circulating in Guyana and the wider Caribbean region:

- **Cannabis (Marijuana/Weed):** Commonly smoked or consumed in edibles. While some argue it's "natural" or "not as bad," cannabis can impair memory, concentration, and motivation in young users and increase the risk of addiction or mental health issues.
- **Alcohol (including Caffeinated Alcoholic Beverages):** Still one of the most commonly abused substances among youth. Many teens are attracted to sweetened or energy-infused alcoholic drinks that mask the strength of the alcohol, increasing the risk of binge drinking and poisoning.
- **Vapes and E-cigarettes:** Marketed as a safer alternative to smoking, these devices often contain high levels of nicotine or other chemicals. Some are even filled with THC oils or synthetic drugs without the user's knowledge.
- **"Lean" or "Sizzurp":** A dangerous mixture of prescription cough syrup (containing codeine and promethazine) with soda or candy. It is glamorised on social media and in music, but can slow brain activity and heart rate, leading to overdose.

- Ecstasy / MDMA: Often taken at parties or “raves,” these pills can cause extreme highs followed by crashes, confusion, and dehydration. Their unpredictable chemical makeup makes them especially dangerous.
- Synthetic Drugs (e.g., K2/Spice): These are chemically altered substances meant to mimic the effects of cannabis or stimulants but are often far more potent and erratic. Their side effects can include hallucinations, aggression, and seizures.
- Misused Prescription Drugs: Children may access medications at home, such as painkillers, ADHD medication, or anti-anxiety pills, and misuse them for their stimulating or sedative effects.
- Over-the-Counter (OTC) Drug Misuse: Medicines like cough syrups, antihistamines, or cold and flu tablets are sometimes taken in large doses for a “high,” not realising the toxic impact this can have on the body.

Parents must be aware that drug use among youth often starts with experimentation or curiosity. It may be disguised as something "fun," "cool," or “not serious.” However, the consequences, ranging from addiction to academic failure, mental health decline, or legal trouble, can be devastating.

Understanding the range of available drugs is extremely important, and knowing how they are being used is the first step in protecting your child. The more informed you are, the better equipped you’ll be to identify risks, ask the right questions, and guide your child towards safe, drug-free choices.



COMMON

DRUGS

YOUNG

PEOPLE

MAY

TRY

Common Drugs Young People May Try

In today's fast-changing environment, young people are being exposed to a variety of substances, some openly, others disguised as familiar forms like candies, drinks, or vaping devices. While not every child will experiment with drugs, the risk of exposure is real, especially during adolescence when curiosity, peer pressure, and emotional vulnerability are at their peak.

This section provides an overview of the most commonly encountered drugs among youth in Guyana and the Caribbean region. These include substances that may appear harmless, such as cannabis, alcohol, or cough syrup, but can have serious short- and long-term effects on a young person's health, behaviour, and future. Understanding what these drugs are, how they are used, and why they appeal to young people is essential for early prevention and parental intervention.

CANNABIS

Cannabis, commonly called marijuana, ganja, or "weed," remains one of the most popular illicit substances among adolescents in Guyana and the wider Caribbean. It is often the first drug young people try, and not by chance. Accessibility, social influence, and misinformation all help with its growing popularity among youth. Many young people



believe cannabis use is widespread and socially accepted, especially if they see others using it without apparent adverse effects. This unchallenged belief can create a false sense of safety, making them more willing to try it themselves.

Cannabis is generally more affordable and easier to obtain than other illegal drugs. In many communities, it is grown locally or trafficked in small quantities, making it accessible through social circles, schools, or older peers. The low cost and easy

availability make it more likely for young people to encounter cannabis compared to more expensive or harder-to-find drugs like cocaine or ecstasy.

Many youths are misled into thinking cannabis is safe because it is plant-based or legalised in some countries. This idea is often reinforced by social media, music, and casual chats that minimise its risks. These misconceptions can lead to experimentation without fully understanding the potential consequences, especially for the developing brain.

Peer pressure is a significant factor in early cannabis use. Adolescents may feel compelled to try cannabis to fit in, avoid teasing, or appear more mature. Social gatherings, whether parties, school hangouts, or neighbourhood meet-ups, often become centres where cannabis use is seen as “fun” or “normal.”

Adolescence is a stage marked by curiosity and a wish to experiment. The teenage brain is still maturing, especially in areas responsible for judgment and impulse control. As a result, many young people are drawn to try cannabis out of curiosity, often without fully grasping the long-term risks.

TOBACCO/ NICOTINE

Tobacco use remains a significant concern among youth, despite widespread awareness of its associated dangers. For parents, understanding the underlying reasons why tobacco serves as an appealing choice for adolescents can facilitate the development of effective strategies to address the issue and guide their children towards healthier decision-making. Below are several key factors that contribute to the continued attractiveness of tobacco products to young people:



Adolescence is characterised by heightened susceptibility to peer influence. Many teenagers may initiate smoking as a means to establish social acceptance within certain groups or to emulate friends who already engage in tobacco use. Peer pressure can thus render tobacco consumption as a perceived normalcy or even a 'stylish' activity.

The portrayal of tobacco use in movies, television, and social media often glamorises such behaviours. Endorsements by celebrities and influencers who smoke can portray it as fashionable or rebellious, thereby creating an allure that appeals to young audiences seeking to emulate their idols.

In numerous regions, tobacco products are relatively accessible. Even where legal purchase is restricted, adolescents often acquire cigarettes or e-cigarettes through older acquaintances, family members, or other sources. This broad availability increases the likelihood of experimentation among youth.

With the advent of vaping, tobacco products have become more discreet and are frequently marketed as safer alternatives to traditional smoking. Many young individuals perceive vaping as less harmful, particularly due to its appealing flavours (including fruit, mint, or candy), which attract a youthful demographic.

A lack of comprehensive understanding regarding the long-term health risks of tobacco use persists among the youth. They often regard smoking or vaping as low-risk or temporary activities that pose minimal immediate danger, especially considering the proliferation of e-cigarettes and perceived "safer" tobacco options.

Nicotine, present in tobacco products including e-cigarettes, is highly addictive. Nevertheless, young users may not recognise the rapid addiction potential of nicotine nor comprehend the long-term health consequences, such as dependency and respiratory illnesses.

Adolescence frequently involves considerable stress stemming from academic pressures, social relationships, and increasing responsibilities. Consequently, some young individuals experiment with tobacco, believing it provides relaxation or aid in managing anxiety, stress, or emotional distress.

The psychoactive effects of nicotine produce sensations of relaxation or euphoria, which may appeal to young people seeking relief from challenging emotions or circumstances.

During this exploratory phase, teenagers often engage in experimenting with various behaviours, including drug use. As a widely available and socially recognised substance, tobacco may be among the initial drugs tried out of curiosity about its effects and experiences.

Peer influence plays a pivotal role; adolescents whose peer groups smoke or vape may feel compelled to participate, either to integrate socially or driven by curiosity regarding the act of inhaling nicotine.

Some teenagers may view smoking as an expression of independence, rebellion, or defiance against authority figures. Such behaviours can symbolise maturity and personal decision-making, even when risky.

The desire for autonomy may lead adolescents to perceive tobacco use as a means of asserting control over their lives, particularly when faced with parental or societal constraints.

Although tobacco consumption, particularly smoking, can result in long-term health issues, these adverse effects are often not immediate. This temporal disparity can cause young individuals to underestimate the associated dangers, fostering a perception of invincibility or dismissing future health risks.

Family behaviours significantly influence youth tobacco use; exposure to smoking within the family can normalise such behaviours and increase the likelihood of adolescents trying cigarettes or other tobacco products. Family history is thus a pertinent factor.

Cultural and environmental influences also play a crucial role. In certain communities, smoking is culturally ingrained, and early exposure to tobacco use can normalise the behaviour, making risk recognition more challenging for young people.

VAPES (NICOTINE/ CANNABIS)

In recent years, vaping has become one of the fastest-growing drug-related behaviours among adolescents, both worldwide and in parts of the Caribbean, including Guyana. What began as a tool for adult smokers to quit cigarettes has now developed into a trend heavily marketed and embraced by young people, including those who have never used tobacco or cannabis before.



Understanding the reasons behind this trend is vital for parents who want to protect their children’s health and decision-making, especially since teenagers often believe that vaping is a “safe” alternative to traditional smoking. This perception is reinforced by misleading marketing and the fact that vaping doesn’t involve burning tobacco. Unfortunately, this leads many to underestimate the addictive and harmful effects of nicotine or THC when inhaled as vapour.

Unlike traditional smoking, vaping produces very little odour, making it easier for teenagers to conceal their use from parents and teachers. Devices are small, often resembling pens or USB sticks, and can be used discreetly in bathrooms, classrooms, or at home. Many vapes come in fruity, minty, or candy-like flavours, which are particularly appealing to younger users. The bright packaging, sleek device design, and flavoured “pods” create the illusion that vaping is harmless or even enjoyable, masking the fact that these products often contain high levels of nicotine or cannabis oils.

Vaping is frequently featured in social media content, influencer videos, and peer posts, making it appear like a normal or even glamorous activity. In many school or social environments, peer pressure can influence teenagers to try it, especially if they see it as a status symbol or a way to belong. Cannabis vapes are increasingly used by young people who may be uncomfortable with smoking but are curious about cannabis. Vaping cannabis oil feels less intimidating than rolling or smoking a joint. Yet, it can deliver even more concentrated doses of THC, increasing the risk of mental health issues and addiction.

While Guyana has restrictions on the importation and sale of vapes, some teenagers still manage to acquire devices through online orders, older peers, or informal sellers. The lack of regulation in certain spaces makes it more difficult for parents to monitor or control access.

CANNABIS/ MARIJUANA EDIBLES

Cannabis edibles have become increasingly popular among young people, and understanding why this is the case is crucial for parents who want to protect their children from the risks associated with drug use. Many young people are not fully educated on the risks associated with cannabis edibles. They may



not understand that cannabis can affect their developing brain, impair memory, learning, and decision-making, or increase the risk of mental health issues like anxiety and depression. Without clear information and guidance, young people may underestimate the potential harm.

Unlike smoking or vaping cannabis, which produce visible smoke or vapour, edibles are often consumed in the form of gummies, chocolates, cookies, or other foods that don't reveal their contents. This makes them easier for young people to hide from parents, teachers, or other authority figures, giving them a false sense of security that they won't get caught.

Many young people perceive cannabis edibles as a safer alternative to smoking or vaping. They may believe that because edibles don't involve inhaling smoke, they are less harmful to their health. This misconception can lead them to underestimate the risks associated with cannabis consumption, including its effects on brain development, mental health, and overall well-being.

Cannabis edibles often come in flavours and forms that are designed to be appealing to young people, such as fruit-flavoured gummies or chocolate bars. The sweet taste can make it harder for users to recognise the potential dangers, especially if they are unfamiliar with cannabis or haven't had much exposure to it. The availability of these products in fun, snackable forms makes them more attractive to teens and pre-teens.

One key reason cannabis edibles are popular is that their effects take longer to set in compared to smoking or vaping. While smoking cannabis produces immediate effects, it can take anywhere from 30 minutes to 2 hours for the effects of edibles to be felt. This delayed onset often leads young users to consume more than they should, not realising the strength of the effects until it's too late. This can result in an overwhelming and uncomfortable high, which can be dangerous.

Young people are often influenced by their peers and what they see on social media. The normalisation of cannabis use in some circles, especially among influencers and celebrities, can make it seem like cannabis consumption is harmless or trendy. This can encourage teens to try edibles as a way to fit in or appear "cool" in front of their friends.

Many young users are unaware that cannabis edibles can be much more potent than they realise. While smoking cannabis typically leads to a more immediate and shorter-lived high, edibles can cause a much more intense and prolonged effect. Some edibles are infused with high concentrations of THC (the psychoactive compound in cannabis), and without proper dosage knowledge, young users can easily consume a dangerous amount.

In regions where cannabis has been legalised for recreational use, edibles are often available in convenience stores or dispensaries. The packaging and marketing of these products are usually designed to appeal to a wide audience, including young people. As a result, cannabis edibles are becoming more accessible to teens, who might be able to buy them with little difficulty.

Adolescence is a time of curiosity and experimentation. Young people are more likely to explore new substances, and cannabis edibles provide an attractive option due to their ease of use, discreet nature, and appealing taste. Some teens may view edibles as less risky because they don't involve smoking, which can sometimes carry a social stigma.

LEAN (COUGH SYRUP MIX)

“Lean,” also known by street names such as Sizzurp, Purple Drank, or Dirty Sprite, is a dangerous concoction made by mixing prescription-strength cough syrup (containing codeine and promethazine) with soft drinks or candy to create a sweet-tasting, intoxicating drink. While this mixture may seem unusual or



unfamiliar to some parents, it has gained popularity among young people, particularly through music culture, social media, and peer influence.

Lean is frequently referenced in hip-hop and trap music, music videos, and social media, where it is often portrayed as a status symbol, a source of creativity, or a way to relax. Artists and influencers sometimes post videos or lyrics showing themselves drinking it, creating the false image that Lean is trendy, harmless, or even luxurious.

Unlike pills or powders, Lean doesn't look like a drug. It's usually served in a styrofoam cup mixed with soda or candy (like Jolly Ranchers), making it easy to overlook. Young people may consume it in plain sight without adults realizing it's anything more than a soft drink.

Lean doesn't carry the harsh taste or smell associated with cigarettes or alcohol. Its sweet flavour makes it easier to consume, especially for first-time users. However, the codeine in it is an opioid, and misuse can lead to slowed breathing, sedation, addiction, or even overdose, especially when mixed with alcohol or other drugs.

Some youth obtain codeine-based cough syrups by stealing from family medicine supplies or through friends and adults who have leftover prescriptions. Because these syrups are legal when prescribed, teens may underestimate their strength or danger when misused.

As with other popular drugs among youth, peer pressure plays a significant role. Lean is sometimes introduced during parties or social hangouts as a novelty, something

“cool” to try. It may also be shared among small groups of friends, especially those influenced by trends from U.S. culture and music.

ALCOHOL

Alcohol is one of the most widely consumed substances among adolescents, not only because it is legal for adults but also because it is socially embedded in many cultural and family settings. In Guyana and throughout the Caribbean, alcohol is often present at family gatherings, parties, and celebrations, making it both visible and accessible to young people from an early age.



Unlike illicit drugs, alcohol is legal for adults and widely normalised in society. Children frequently witness adults consuming alcohol at birthdays, weddings, holiday celebrations, and community events. This visibility can send the unintended message that drinking is a normal and even expected part of growing up. When teens see alcohol used openly, sometimes even encouraged, they are more likely to assume it is safe to try.

Alcohol is readily available in many homes, shops, and social settings. Teens may obtain it by:

- Taking it from home without permission
- Being given alcohol by older siblings or friends
- Purchasing from unregulated vendors who do not enforce age restrictions

The ease of access, especially in unsupervised settings, makes alcohol one of the first substances many young people experiment with.

Social pressure is a powerful force during adolescence. Many teens are offered alcohol at school events, beach outings, or parties and may feel pressured to accept it to fit in or avoid appearing “boring” or “immature.” In these moments, fear of exclusion often outweighs concern about potential consequences.

In addition, many youths are curious about how alcohol tastes or how it will make them feel. They may see drinking as a way to appear older, more independent, or more relaxed.

Some young people believe that alcohol is safer than drugs because it’s legal, or that certain drinks like beer or wine are “not that strong.” There is also a dangerous misconception that alcohol use is a normal part of teenage life or a “phase” that doesn’t warrant concern. In reality, early alcohol use is associated with:

- Poor academic performance
- Increased risk of injury or assault
- Higher likelihood of engaging in unsafe sex
- Greater risk of developing alcohol dependence later in life

Alcohol is heavily advertised and often glamorised in music videos, movies, and social media. Teens may see their favourite influencers or celebrities drinking, which can create a false impression that drinking is fun, cool, or harmless. These portrayals rarely show the negative consequences of alcohol use.

ECSTASY/ MDMA

Ecstasy, commonly known as MDMA, “molly,” or “E,” is a synthetic drug that influences mood, energy, and perception. Although not as widely used as alcohol or cannabis, it is increasingly encountered in party scenes, especially among older teenagers and young adults. Despite its risks, some youths are attracted to it for the emotional and physical “high” it creates.



Ecstasy is often called a “party drug” because it is frequently used in social environments such as raves, concerts, nightclubs, and private gatherings. These settings foster a sense of excitement, freedom, and anonymity, conditions that may encourage teens to take risks and try new substances.

Ecstasy raises levels of dopamine and serotonin, leading users to experience intense happiness, emotional warmth, and a sense of connection with others. Young people dealing with stress, anxiety, trauma, or social isolation may be particularly susceptible to experimenting with ecstasy as a way to escape their feelings or “feel better temporarily.”

Many youths are introduced to ecstasy by friends or acquaintances at social events. It is often offered in pill or capsule form with reassuring phrases like “It’s just for fun,” “Everyone’s doing it,” or “You’ll feel amazing.” The pressure to fit in, or the fear of being excluded, can push some teens to try it, even if they are uncertain.

Ecstasy is often disguised as colourful pills or candy-like tablets, making it look less dangerous than it is. Some pills are even stamped with playful logos or cartoon characters, which can be misleading. Many users falsely believe that ecstasy is “pure” or “safe”, especially if it’s called “molly.” In reality, ecstasy is frequently mixed with other harmful substances, including methamphetamine, ketamine, or even fentanyl, dramatically increasing the risk of overdose or toxic reactions.

In today's digital world, drugs like ecstasy can sometimes be obtained through social media, messaging apps, or peer networks, making it easier for young people to access them discreetly. In some cases, they may not even know precisely what they're taking, especially when pills are passed around at gatherings without proper knowledge of their contents.

SYNTHETIC DRUGS: K2/ SPICE

Synthetic drugs, particularly synthetic cannabinoids like K2 or Spice, have become increasingly popular among young people in recent years. These substances, often marketed as a "legal" or "safer" alternative to marijuana, have a dangerous appeal to youth, mainly because of their accessibility, affordability, and the perception that they are not as harmful as traditional drugs. Understanding why K2/Spice is a choice drug for young people is crucial for parents to address the issue better and provide their children with the guidance and information they need to make healthier decisions.



One of the biggest misconceptions about synthetic drugs like K2/Spice is that they are "legal" because they are often sold in head shops, convenience stores, or online with little regulation. This perceived legality makes young people think they are safer or less risky than other illegal drugs. However, while they may be legal in some areas, many of these substances are constantly evolving, and new versions can quickly become illegal after their harmful effects are discovered.

These synthetic drugs are often easier to access than marijuana or other illegal substances. They are typically sold in small packages with names like "herbal incense" or "potpourri" and marketed as a legal way to get high. This accessibility makes them an appealing option for teens and young adults who are looking to experiment without the fear of getting into legal trouble.

K2/Spice is often much cheaper than traditional marijuana or other drugs, making it an attractive option for young people, particularly those who may not have much disposable income. The low cost of synthetic cannabinoids can make them more accessible to teens who are on a tight budget or who want to experiment without breaking the bank.

Since K2/Spice is sold as incense or plant matter, young people can buy it without raising suspicion. The lack of obvious drug-related packaging makes it easy to disguise as something harmless, enabling young people to hide their drug use from parents, teachers, or authority figures.

Unlike marijuana, which may require pipes, papers, or vaporisers, K2/Spice can be smoked as is, making it convenient and easy to use. This simplicity contributes to its popularity, as young people can use it with minimal preparation or equipment.

Since synthetic drugs like K2/Spice are relatively new and often not well understood, many users don't fully grasp the dangers they present. These substances can cause serious health problems, including hallucinations, seizures, violent behaviour, heart attacks, and even death. Young people are often unaware of the severity of these risks, as the immediate effects of K2/Spice may not seem as bad at first.

Synthetic cannabinoids are often much stronger than natural marijuana. They can bind more strongly to the same receptors in the brain, leading to intense and sometimes uncontrollable effects. These powerful effects can be both appealing and dangerous to young people seeking a more intense experience, as they come with unpredictable outcomes.

PRESCRIPTION PAINKILLERS OR STIMULANTS

Prescription drugs, such as opioid-based painkillers (like codeine or tramadol) and stimulants (such as Ritalin or Adderall), are often viewed as safe because doctors prescribe them. However, when taken without medical supervision or at incorrect doses, these medications can be highly addictive and dangerous. Alarmingly, many young people experiment with these drugs not to treat a health condition, but to achieve a “high,” improve performance, or cope with emotional stress.



Many teenagers believe that if a drug comes in a bottle with a pharmacy label, it must be safe, even when used recreationally. This false sense of security makes prescription pills seem like a low-risk alternative to illegal street drugs. Youth often overlook the fact that these medications are powerful and meant for specific medical needs.

One of the main reasons for misuse is easy access. Many homes contain leftover medications in bathroom cabinets or drawers. A child may start experimenting simply because the drugs are readily available, and sometimes even shared by peers who had been prescribed them for genuine conditions.

Some young people misuse painkillers to numb emotional pain, deal with trauma, or manage anxiety. Others use stimulants (commonly prescribed for ADHD) to stay awake longer, improve focus during exams, or boost energy, especially in competitive school environments. This sort of misuse often goes unnoticed until severe dependency develops.

Social media platforms and online forums have normalised the idea of “pill popping” and glamourised it in music and videos. Some youths are misled into thinking that taking a pill is a quick fix for problems or a way to relax, escape, or feel more in control.

Many teens don't realise that prescription opioids are chemically similar to heroin, or that stimulants can cause heart problems, aggression, paranoia, or seizures when misused. Just because these drugs are legal when prescribed doesn't mean they are safe when abused. One misuse can lead to dependency, overdose, or even death.

Commonly Misused Prescription Drugs by Youth:

- Painkillers: Codeine, Tramadol, Oxycodone
- Stimulants: Adderall, Ritalin
- Anti-anxiety meds: Xanax, Valium (sometimes mixed with alcohol)
- Cough syrups: Containing codeine or dextromethorphan (DXM)

OVER-THE-COUNTER (OTC) MISUSE

Similar to Prescription drugs, Over-the-counter (OTC) medications, such as cough syrups, cold and flu tablets, allergy pills, and pain relievers, which are designed to treat common illnesses safely when used as directed, they are misused by young people in an attempt to get high, numb emotional pain, or experiment with altered states of mind. This type of misuse is hazardous because it often goes unnoticed and is mistakenly seen as harmless.



OTC medications can be purchased without a doctor's approval from pharmacies, supermarkets, or even neighbourhood shops. In many homes, these drugs are stored in bathroom cabinets or kitchen cupboards, often unmonitored and uncounted. This makes them some of the easiest substances for children and teens to access.

Because OTC drugs are legal, familiar, and used by adults in the household, young people may underestimate their strength and danger. They often believe, "If adults take it when they're sick, it can't be that bad." Unfortunately, taking these medicines

in large doses or mixing them with other substances (like alcohol or energy drinks) can lead to severe health complications, including organ damage, hallucinations, unconsciousness, and overdose.

There has been a rise in online trends and “challenges” that encourage young people to misuse OTC medications for a high. One example includes drinking excessive amounts of cough syrup containing dextromethorphan (DXM) to induce hallucinations. These trends are often promoted by influencers or shared on platforms like TikTok, Instagram, or YouTube, making experimentation seem exciting or humorous when it’s highly dangerous.

Some teens misuse OTC drugs not to get high, but to cope with stress, anxiety, insomnia, or physical pain. For example:

- Taking sleep aids or antihistamines to “shut down” or escape problems
- Using cold medication as a sedative when feeling overwhelmed
- Mixing medications with sugary drinks to mask the taste or increase the effect

This kind of self-medication can quickly develop into dependency or more serious drug-seeking behaviour.

Because OTC medications are not classified as controlled substances, many parents do not track their use, expiration, or quantity. This allows young people to experiment over time without raising immediate concerns—until health problems or behavioural changes emerge.

Commonly Misused OTC Medications Include:

- Cough syrups containing dextromethorphan (DXM)
- Allergy tablets containing diphenhydramine (e.g., Benadryl)
- Pain relievers like paracetamol or ibuprofen, when taken excessively
- Cold and flu tablets with multiple active ingredients
- Sleep aids and anti-motion sickness medications

WHY OTHER DRUGS ARE LESS COMMON AMONG YOUNG PEOPLE

While substances like cannabis, alcohol, vapes, and certain prescription or over-the-counter medications are frequently experimented with by youth, other dangerous drugs, such as heroin, crack cocaine, methamphetamine, and LSD are rarely used by young people, particularly in Guyana. This is due to a combination of social, economic, psychological, and legal factors that act as natural barriers to early use.

Drugs like heroin, methamphetamine, and LSD are expensive to produce or import and typically circulate within adult criminal networks or higher-risk urban areas. Because they are not as easily available in community spaces or among school-aged youth, access is more limited, especially for children and teens with little financial independence.

These substances carry a strong negative reputation. Youth are taught, often from a young age, that these drugs are dangerous, addictive, and life-threatening. Unlike cannabis or alcohol, which may be glamorised in music or media, drugs like heroin and crack cocaine are associated with severe health deterioration, homelessness, crime, and death. This creates a natural deterrent for first-time or curious users.

Hard drugs like methamphetamine and crack cocaine often have harsh physical effects: rapid weight loss, facial sores, paranoia, psychosis, and extreme aggression. Even among youth who experiment with substances, the idea of experiencing those side effects is a major reason they avoid “harder” drugs.

Young people are more likely to try drugs that are socially acceptable or normalised within their environment. For instance, alcohol and cannabis may be present at parties or in music, while vapes are passed around among peers. Drugs like LSD, heroin, or crack are not commonly used in social gatherings where teens are present. They are usually associated with extreme users, which further discourages young experimentation.

Many of these substances are associated with overdose risk, hallucinations, or arrests, even from a single use. Young people may hear stories of others being hospitalised or jailed and therefore avoid these drugs out of fear. Additionally, law enforcement messaging and public health campaigns often focus on the dangers of these substances, reinforcing their reputation as “no-go” drugs.

SIGNS YOUR CHILD MAY BE USING DRUGS



Signs Your Child May Be Using Drugs

One of the most critical tools in drug prevention is early detection. Drug use often begins with small changes, which may appear normal for adolescence. However, when multiple changes occur at once or escalate quickly, they may be signs that your child is experimenting with or regularly using drugs.

Being observant, informed, and proactive allows you to intervene before the situation worsens. Below, we will discuss common signs that may indicate your child is using drugs.

Behavioural and Emotional Changes

- Sudden mood swings, irritability, or aggression
- Withdrawal from family, friends, or favourite activities
- Unexplained secrecy or defensiveness
- Loss of interest in hobbies or school
- Lying or making excuses frequently
- Disrespectful or rebellious behaviour without an apparent reason

Physical and Health Indicators

- Red, bloodshot eyes or dilated pupils
- Frequent nosebleeds or runny nose (possible sign of snorting substances)
- Unusual tiredness, hyperactivity, or slurred speech
- Poor hygiene or neglecting appearance

- Weight loss or sudden changes in appetite
- Strange smells on breath, clothes, or belongings (e.g., smoke, chemicals)

Academic and Social Warning Signs

- Drop in school performance or skipping classes
- Frequent complaints from teachers or school officials
- Sudden change in friend group or social circles
- Avoiding eye contact or staying out late without explanation
- Getting into fights or trouble at school
- Increased use of slang related to drug culture (e.g., “lean,” “vape,” “zoot”)

At Home: What to Watch For

- Missing prescription medications or cough syrups
- Finding lighters, vape pens, rolling paper, or empty bottles
- Discovering unusual packaging, plastic bags, or small containers
- Strange stains or burns on clothing or bed sheets
- Locking doors more often or hiding their phone and bags

A collage of people in a social setting, overlaid with a white frame and yellow text. The background is a warm, yellow-tinted image of a group of people. A white frame is superimposed over the image, containing the text. The text is in a bold, white, sans-serif font. The words are arranged in four lines: 'UNDERSTANDING', 'THE SITUATION:', 'OBSERVING AND', and 'IDENTIFYING'. Below the frame, the words 'KEY SIGNS' and 'SLANG' are written in a bold, black, sans-serif font. The word 'SLANG' is particularly large and is set against a semi-transparent white oval background. The overall composition is modern and visually striking.

**UNDERSTANDING
THE SITUATION:
OBSERVING AND
IDENTIFYING**

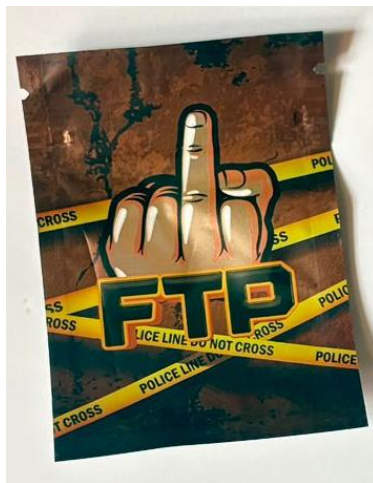
KEY SIGNS

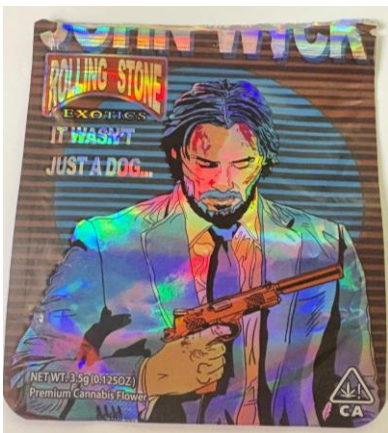
SLANG

Identifying New Illicit Drug Packaging

One of the ways young people are exposed to drugs is through products that don't always look dangerous at first glance. Cannabis and ecstasy pills are often packaged in ways that make them appear harmless, colourful, or even similar to everyday items like candy or snacks.

This section is designed to help parents recognise the different types of packaging used for these substances. Understanding what to look out for can help you spot potential risks early and start a meaningful conversation with your child before harm occurs.







Common Slangs/ Street names for illicit Drugs abused by young people

As a parent, it's not always easy to fully grasp what's being said in conversations among young people, whether face-to-face, over the phone, or online. This can become especially challenging if you suspect that your child may be experimenting with drugs or struggling with substance use.

Often, a lack of understanding about the terms or substances being mentioned can create a barrier, making it harder to recognise early warning signs. This delay can prevent your child from receiving the timely and professional help they might need.

That's why it's essential to be informed. The following section provides a brief overview of commonly used slang and street names for misused substances to help you better understand what your child might be exposed to, what warning signs to look out for, and how to take action if needed.

Common Street Names

Common Street Names for Marijuana	
STREET NAMES	DESCRIPTION
Weed Grass Pot Mary Jane Ganja Dope Reefer Chronic Herb Skunk Home-Grown Kush-un-peng Cali Poppi High Grade	Common Street Names

Slang associated with Marijuana use	
Blunt Joint Roach	Marijuana cigarette Marijuana cigarette Marijuana cigarette bud
Slang associated with Marijuana use	
Pot Head Dope Head Herbalist	Marijuana user
B-40 Dipped Joints Candy Blunt Dirty Joints Black Russian Buda Caviar Black Joint	Marijuana cigar dipped in malt liquor Marijuana joints dipped in PCP and formaldehyde Marijuana cigar dipped in cough syrup Marijuana joints mixed with powder cocaine Hashish and opium combination Premium marijuana/crack cocaine combination Marijuana and cocaine combination Marijuana and cocaine combination
Common Street Names for Ecstasy	
Molly Adam Clarity Eve lover's speed Peace Uppers	Common Street Names
Common Names for Tobacco/ Nicotine	
Cigarettes Cancer Sticks, Chew Snuff Dip Fags Smokes E-cigs, E-hookahs	Common Street Names

<p>Vapes Mods</p>	
<p>Common Street Names for Prescription Painkillers</p>	
<p>Hillbilly Heroin Oxy OC Percs Happy Pills Big Boys Cotton Morph</p> <p>Purple Drank Pharming Trail Mix Recipe</p>	<p style="text-align: center;">Common Street Names</p> <p>Codeine-based cough medicine Abusing prescription meds Mixing various prescription drugs Mixing prescription drugs with alcohol (extremely dangerous)</p>
<p>Common Street Names for Synthetic Drugs</p>	
<p>K2 Spice Incense Yucatán Fire Fake Weed Moon Rocks Black Mamba</p>	<p style="text-align: center;">Common Street Names</p>



WHY KIDS EXPERIMENT: RISK FACTORS

Why Kids Experiment: Risk Factors

Drug use among young people does not begin by accident. Children and adolescents often experiment with substances due to a complex mix of personal, social, emotional, and environmental factors. While some try drugs out of curiosity, others may be responding to deeper stressors or unmet emotional needs. Your awareness, attention, and connection to your child can reduce these risks. By fostering trust, encouraging open communication, and setting clear expectations, parents have become a powerful protective factor against drug use.

Peer Pressure and the Desire to Fit In

During adolescence, the influence of peers becomes more powerful than at any other life stage. Children may feel pressure to try drugs or alcohol in order to feel accepted, avoid being teased, or be part of a particular group. This pressure is often subtle, offered through social settings, group behaviour, or fear of rejection.

Curiosity and the Need to Explore

Teenagers are naturally curious and drawn to new experiences. Their brains are still developing, particularly the areas responsible for impulse control and risk assessment. This makes them more likely to experiment, even if they understand the risks on some level.

Family Environment and Supervision

Children who grow up in homes where there is substance use, limited supervision, inconsistent discipline, or emotional neglect are at higher risk. Similarly, lack of communication or weak parent-child relationships can leave youth vulnerable to outside influence.

Stress, Trauma, or Mental Health Struggles

Some young people turn to drugs as a way to cope with emotional pain, trauma, anxiety, depression, or unresolved grief. If a child does not have access to healthy coping tools or mental health support, substances may become a form of self-medication.

Low Self-Esteem and Identity Issues

Young people who feel inadequate, unloved, or unsure of themselves are more likely to seek comfort, confidence, or escape through drug use. They may also use substances to feel “braver” or more accepted in social situations.

Access to Drugs

Availability plays a significant role. A child is more likely to experiment if they have easy access to drugs or alcohol, whether from home, school, community vendors, older siblings, or social media connections. Even leftover medications in a cabinet can become a starting point.

Media and Pop Culture Influence

Social media, music videos, movies, and online trends often glamorise drug use or present it as fun, harmless, or rebellious. Without proper guidance, young people may adopt these attitudes and imitate what they see, unaware of the real consequences.

How to Talk to Your Child About Drugs

How to Talk to Your Child If You Suspect They Are Using Drugs

Suspecting that your child may be using drugs is a frightening and emotional experience. You may feel disappointed, angry, confused, or even betrayed. But how you respond in these early moments can make the difference between your child shutting down or opening up. Addressing drug use in your child requires a thoughtful, compassionate approach that combines open communication, setting boundaries, and seeking professional help when necessary. Although it may feel daunting, your active involvement in your child's life and your commitment to their well-being will make a significant difference. By providing love, understanding, and consistent guidance, you can help your child make positive choices and move toward a healthier future.

Stay Calm Before You Speak

Your first instinct may be to confront your child immediately. But anger, yelling, or accusations can make them defensive or secretive. Take time to calm yourself first. Approach them when you're in a composed frame of mind—not during a heated argument or public setting.

Example:

- “We need to have a serious talk. I’m coming from a place of concern, not judgment.”

Start with What You've Observed

Instead of accusing them, speak about specific changes or behaviours you've noticed:

Example:

- “You’ve been very withdrawn lately and skipping school.”
- “I found vape cartridges in your bag, and I want to understand what’s going on.”

Avoid labels like “addict” or “drug user.” Stay focused on behaviours, not identity.

Give Them a Chance to Talk

Create a space where your child feels they can be honest without being attacked. If they deny it, don’t argue immediately. Leave the door open for future dialogue.

Example:

- “If you’re not ready to talk now, that’s okay. But know that I’m here when you are. Nothing you say will make me stop caring.”

Be Clear About the Risks and Rules

Explain your family’s position on drug use. Reinforce the legal, health, and social consequences, not as a threat, but as reality.

Example:

- “Using drugs can lead to school suspension, health problems, and even arrest. I want to protect you from those outcomes.”

Offer Help, Not Just Punishment

Discipline alone won’t fix the root cause. Offer real solutions:

Example:

- “Let’s talk to someone together.”
- “Would you be open to speaking with a counsellor or doctor?”

In Guyana, you can also reach out to school welfare officers or youth-focused NGOs for support.

Set Boundaries with Love

Your child must know that drug use has consequences, but those boundaries must come from love, not rejection. Set clear expectations:

Example:

- “No drugs are allowed in this home.”
- “We’re going to monitor things more closely from now.”

Stay firm but explain your reasons and stay open to dialogue.

Understand the Underlying Causes

Most youth don’t use drugs “just for fun.” They may be coping with:

- Peer pressure
- Trauma or stress
- Anxiety or depression
- Feelings of loneliness or low self-worth

Get to the root, not just the surface behaviour.

Follow Up and Stay Engaged

This conversation isn’t a one-time event. Continue checking in, asking questions, and being present. Celebrate minor improvements and remain involved in their life, not just when something is wrong.

SUPPORT & RESOURCES IN GUYANA



Support & Resources in Guyana

Mental Health And Substance Abuse Referral Services

Parenting in today’s world comes with many challenges, and when it comes to your child’s mental health or the risk of substance use, it can feel overwhelming, confusing, and even isolating. You may notice changes in your child’s behaviour, mood, or choices and wonder what to do or where to turn. The good news is you don’t have to figure it out on your own. Help is available.

This section of the booklet provides a list of trusted organisations across Guyana that offer mental health support, counselling, and substance abuse referral services for children, teens, and families. These services exist to support you, whether you’re trying to prevent problems, need someone to talk to, or are already dealing with a difficult situation.

This initiative supports the national objectives outlined in Guyana’s Mental Health Action Plan and National Drug Strategy Master Plan, which emphasise prevention, early intervention, and cross-sectoral collaboration. The inclusion of these referral services in this publication underscores our commitment to ensuring that parents can access the help their children need.

Remember, seeking support is a sign of strength. If you have a child who you suspect is struggling with substance use disorders, don’t hesitate to reach out to one of the trusted providers listed in this section.

ORGANISATION	CONTACT
REGION 4	
AGAPE Network Inc.	219-2300 / 219-2299 / 219-2739
ANIRA Counselling and Psychological Services	629-0809
Artistes in Direct Support	227-7231; 225-5112
ASPIRE Youth Network	688-8429
Blossom Inc.	233-6701
Caitlin Vieira Counselling	623-0433

Child Link Inc.	227-2023
Child Protection Agency	337-2667 / 333-3970
Childcare & Protection Agency	227-4082 / Hotline: 227-0979
Comforting Hearts Mental Health, Counselling, and Substance Abuse	333-4722
CPIC Monique's Caring Hands	225-9263
Crossroads Suicide and Mental Health Awareness Services	621-8223
Family Awareness, Consciousness, Togetherness, FACT Group	335-3990 / 335-3889
Guyana Foundation Mental Health, Counselling, and Substance Abuse	671-4114 / 690-9890
Guyana Responsible Parenthood Association (GRPA)	225-3286
HIAS Guyana Mental Health, Counselling, and Substance Abuse	227-6758
Inner Sanctuary- Meditation and Wellness Centre	694-5875 / 500-6848
Lifeline Counselling Services	676-2664
LIFE Reform	225-2708
Phoenix Recovery Project	220-6825
PH Medical Services (Psychiatry)	622-9011
Ptolemy Reid Rehabilitation Centre	226-1441
Solutions Counselling Services	643-2979
St. Francis Community Developers (SFCD)	337-4195 / 337-4091 / 337-4320
The Wellness Centre	608-8924 / 661-9446
Tull Clinical Psychotherapy Services	697-5528

REGION 6	
Comforting Hearts	333-4722 / 333-6997
Family Awareness, Consciousness, Togetherness, FACT Group	335-3990 / 335-3889
Child Protection Agency	337-2667 / 333-3970
Community-Based Rehabilitation CBR	226-6946 / 226-5780
St. Francis Community Developers (SFCD)	337-4090 / 337-4195 / 337-4091 / 337-4320
United Brick Layers	333-3322
REGION 7	
Child Protection Agency	255-2964
REGION 10	
Child Protection Agency	441-5868

Frequently Asked Questions

1. At what age should I start talking to my child about drugs?

It's best to start early, as young as 8 or 9 years old. Begin with simple conversations about health, safety, and making smart choices. As they grow, adjust the conversation to match their age and maturity. Don't wait until a problem arises to start talking.

2. What are the signs that my child might be using drugs?

Look for sudden behaviour changes, such as:

- Mood swings or aggression
- Loss of interest in school or hobbies
- Unusual smells on clothing
- Secretive behaviour
- New or concerning friends
- Changes in appetite, sleep, or hygiene
- Unexplained spending or missing items at home

One sign on its own may not mean drug use, but a combination could indicate a concern.

3. How can I reduce the chances of my child using drugs?

Prevention starts at home. You can:

- Build trust through regular, honest communication
- Stay involved in their life, school, friends, and online activity
- Set clear rules about drug use and explain the consequences
- Be a role model by avoiding risky behaviours yourself
- Know where your child is and who they're with

4. What should I do if I think someone is pressuring my child?

Talk to your child in a non-judgmental way. Let them know they can say “no” and still be respected. Offer them ways to respond:

- “No thanks, I’m not into that.”
- “I have things to lose; my future is more important.”
- Help them practice saying no with confidence.

5. Does strict punishment stop drug use?

Punishment alone doesn’t solve the problem. Support, education, and boundaries are more effective. If your child is experimenting, focus on understanding why and helping them make better choices. Seek help if needed.

6. What if drugs are easily available in my community?

This is a real challenge in some areas. Your best defence is building your child’s resilience, teaching them how to cope with pressure, stress, or boredom in healthy ways. Encourage positive outlets like sports, music, clubs, and volunteering.

7. Can vaping or cannabis be a “safe” option?

No. Many youths believe vaping or “weed” is harmless, but the truth is:

- Cannabis can affect memory, motivation, and mental health
- Vapes can contain nicotine, cannabis oils, or dangerous synthetic chemicals
- Long-term effects on a young, developing brain can be serious

8. What should I do if I find drugs or paraphernalia?

Stay calm. Don't panic or yell. Have a conversation first, then take action:

- Remove the items
- Set clear consequences
- Seek professional guidance or counselling if needed

Let your child know you're addressing this because you care.

9. Are over-the-counter (OTC) or prescription drugs dangerous too?

Yes. Young people sometimes misuse:

- Cough syrups (Lean) for intoxication
- Painkillers or ADHD meds for focus or a high
- Even legal or prescribed drugs can be harmful if misused.

10. Where can I get help or advice in Guyana?

- School guidance counsellors and welfare officers
- Help & shelter for counselling and family services
- Public hospitals and health centres with mental health professionals

Parents need to know that *“Prevention doesn't mean fear, it means connection. The more involved, supportive, and informed you are, the less likely your child is to take harmful risks.”*



**ACTION PLAN
FOR PARENTS**

Your Action Plan

This action plan helps you as parents to stay proactive, supportive, and prepared at every stage, from prevention to early response. You don't have to be a professional to protect your child. You have to be **present, informed, and involved**.

STEP 1: Build a Strong Foundation

Action	Description
Start the conversation early.	Talk to your child about drugs from age 8+. Use age-appropriate language and explain the risks honestly.
Create a safe space for dialogue.	Let your child know they can talk to you about anything without fear of punishment or judgment.
Know their world	Stay up-to-date on who their friends are, what they do online, and how they spend free time.
Encourage healthy activities	Involve them in sports, clubs, church, or youth programs to reduce boredom and risky behaviour.

STEP 2: Set Boundaries and Expectations

Action	Description
Establish clear family rules.	Be specific: "No drugs, alcohol, or vaping is allowed." Be consistent and explain the "why."
Monitor and supervise	Know where your child is, who they're with, and what they're doing, especially after school and on weekends.
Secure your home	Lock away medications, alcohol, and any items that could be misused. Dispose of old or unused prescriptions.

STEP 3: Watch for Warning Signs

Action	Description
Observe behaviour changes	Look for sudden mood shifts, loss of interest in hobbies, slipping grades, secretive behaviour, or unusual smells.
Stay alert, not paranoid.	Don't jump to conclusions, but don't ignore patterns. Trust your instincts and stay observant.
Document concerns	Keep a simple log if you notice repeated issues. This can help if you seek professional support later.

STEP 4: Respond Early and Calmly

Action	Description
Talk, don't attack	Start with concern: "I've noticed some things and I'm worried." Let your child speak without cutting them off.
Avoid threats	Stay calm, avoid yelling, and focus on finding out what's going on, not punishing first.
Seek help if needed.	Contact school counsellors or a health provider for guidance if you need support.

STEP 5: Stay Engaged and Follow Through

Action	Description
Stick to consequences	If you set limits, follow through, but make consequences corrective, not cruel.
Check in regularly	Keep the conversation going. Ask how they're doing and if they're facing any pressure.
Reinforce positive choices	Praise good decisions, healthy habits, and honesty, even when it's tough for them to share.

Final Message

Parenting today isn't easy. With peer pressure, online influence, and increasing drug presence in our communities, it's natural to feel unsure or overwhelmed. But what matters most is this: you are not powerless.

Your presence, voice, and example hold more influence than you might realise. Children, regardless of their age, watch, listen, and learn from you every day. The conversations you have, the boundaries you establish, and the love you show all shape the choices they make.

This guide isn't meant to scare you; it's designed to provide facts, tools, and support. Protecting our children from drugs isn't about knowing all the answers. It's about staying involved, asking the right questions, and showing courage and care during challenging moments. You are your child's first and strongest line of defence. Stay informed. Stay engaged. Stay connected. Together, we can nurture a generation that opts for health, purpose, and possibility.

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**TOGETHER, WE CAN MAKE A DIFFERENCE
BY STAYING INFORMED, BEING PROACTIVE,
AND CREATING A SUPPORTIVE ENVIRONMENT,
YOU CAN EMPOWER YOUR CHILD TO MAKE HEALTHIER CHOICES,
BUILD RESILIENCE, AND RESIST
THE PRESSURES OF DRUG USE.**

THIS GUIDE IS A RESOURCE FROM
THE CUSTOMS ANTI NARCOTIC UNIT
GUYANA DRUG INFORMATION NETWORK

DEDICATED TO SUPPORTING FAMILIES IN BUILDING SAFE, HEALTHY FUTURES FOR THEIR CHILDREN.

