

and one has to steer a line between giving them some idea of progress (or lack of it) without betraying exactly what goes on in sessions. The initial interviews with the parents can prepare the way for this, but I find it best to be available to the parents at later points, if required. It is helpful if there is a colleague available to work with the parents, but this is often not possible.

Working with children is full of chal-

lenges; it can be hard work, even hazardous, and can present many technical problems. This makes it varied and interesting and often very rewarding. Younger children, in particular, can sometimes make rapid progress. A recently expanding field is work with mothers and babies together. Such early interventions can be a very important contribution to the prevention of subsequent difficulties.

Further Reading

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Young People and Recreational Drugs

Aileen Milne

I have recently been exploring the idea that the use of drugs by young people is fulfilling, expressing some kind of need which is not presently being met within the structures of Western society. I am interested in what is happening psycho-

logically and psychospiritually at the adolescent and young adult stages of development, and by the way young people are expressing themselves in society.

The London-based organisation Antidote, which calls for social reform in public

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perceptions regarding emotional literacy, recognises that many of our young are disaffected and alienated from the environment in which they live. Mathew Fox, a radical priest and philosopher, has written: 'I believe that our civilization, far from honoring our youth and celebrating them, consumes and devours them.' He suggests that the young in Western cultures are starved of ritual celebration. Adults are failing the young by no longer passing on sacred knowledge and wisdom. There is evidence to suggest that young people are creating their own rituals and secret societies through the means of an illicit drug culture. Fox warns against the consequences of 'a culture with no cosmology — with no spiritual practices that teach the young inner discipline and cosmic interconnection.' He believes that young peoples' nihilistic and self-destructive urges are the result of deeply-held concerns about the threat of nuclear and environmental destruction.

What led me to this particular topic was my growing interest in the drug use of clients I have counselled at a young peoples' counselling service in Gloucestershire. One of these clients had begun to use heroin. She had previously taken 'base' (a strong form of amphetamine), cocaine and ecstasy, and smoked 'blow' (marijuana) most evenings after work. She had moved on from taking heroin to see what it was like, through taking it occasionally, and was now inhaling the 'Dragon's Tail' frequently. It occurred to me that there might be some correlation between her drug use and what was happening in the therapeutic relationship. I will return to this client later, but let us first look at the function that drug-taking plays in the lives of such

young people, and the implications of this for therapeutic work.

The *Guardian* newspaper recently published the latest findings of the Schools Health Education Unit: 'At least one in eight fourteen- and fifteen-year olds will have used an illegal drug in the past month, and most young people are close to a supply of drugs by the time they reach the top year at school, according to a survey published today.' In my five years' experience of counselling young people I have found that drug-taking is common among clients who seek out counselling.

Most common is the smoking of marijuana. The attraction of marijuana appears to be that it makes people relaxed, more friendly, and more open. Clients tell me that marijuana is a great stress reliever, taking their minds off problems and allowing them to be in the 'here and now'. Ecstasy, often simply termed 'Es', is the drug mostly used at raves — huge communal happenings — to provide the energy for dancing and staying awake all night. The effects of taking Ecstasy are that the user feels greatly energised, ecstatically happy and at one with others. One client told me 'It doesn't matter who you are or what you are or what you have in life — you are just accepted. There is an atmosphere of love and tolerance that you don't normally see; everybody is into each other'. This client came from a particularly undemonstrative family where the single father struggled financially to keep the family together. There was also a lot of shame held in the family. In relating to me how she felt after taking Ecstasy and other drugs she gave me insight into her inner world, her aspirations — she told me indirectly that she longed for a loving, close

family, and she would like to be accepted for herself, not for what she or her family owned or did not own or for what had happened in the past. She yearned to be happy and to find relief from her troubled life. She was sixteen at the time. Of course this is an idealised picture of drug taking, since no drug is without its health risks. Yet risk-taking is synonymous with being young — it is part of their experimental and experiential development.

The use of heroin has recently become more commonplace, despite its being highly addictive and dangerous. The powder is burned in tinfoil and the smoke, referred to as the 'dragon's tail', is inhaled. Strangely this form of use of heroin has given the drug a less lethal image, since it is the injecting of heroin that has the strongest associations with it being a 'hard drug'. The fact is that, although some of these users may be on the road to addiction, they feel that they are in control of their drug use. One young person told me that 'When the police and other agencies come to the school to give a talk about the dangers of drug taking they miss the point that sometimes, in fact most of the time, we are in control of our drug-taking. They forget that we take drugs because it's fun.' Another drug which is widely used as an energizer is the amphetamine 'speed', often used as a 'pick-me-up' when the effects of other drugs such as LSD or Es are tailing off.

To understand why some young people seem to be attracted to mind-altering drugs I turned to Piaget and Kohlberg, two of the acknowledged experts on child development, to see what their understanding is of the way a child develops a personal morality. Piaget's main interest

lies in the child's progressive ability to make abstract judgement; he identified a first morality as 'heteronomous', covering rules which are sacred, external and unchangeable. A second morality, which he suggests develops prior to adolescence, he terms 'autonomous'. The autonomous morality wrestles with the heteronomous and finally replaces it. This view explains the tendency of the adolescent to kick against society's rules, to separate themselves from them in order to explore possibilities, thereby reaching moral judgements which are workable and meaningful to them.

The social psychologist Lawrence Kohlberg, whose chief concern was education, was inspired by Piaget's work. He felt that traditional approaches to moral education were overly concerned with 'the conforming behaviour', functioning from the two inadequate positions of indoctrination (which equates morality within objective realm of rules) and values clarification (which remains in the realms of subjectivism). Rather than merely instruct or indoctrinate the young with set ideas of morality, it is preferable, Kohlberg believed, to stimulate the inherent reasoning capabilities the young have to decipher what is meaningful.

The growing propensity of young people to experiment with illegal drugs is not devoid of moral reasoning; rather it serves some kind of purpose. One explanation is that drug-taking is a form of quest. It is often seen as an act of rebellion, as anti-establishment, hedonistic and escapist. For many young people drugs serve as a tool of peer group bonding. Drug use can also be an expression of a search for an authentic self.

Perhaps as an inversion of Marx's statement that 'religion is the opiate of the people', 'opiates' are today a form of religion to the young. Drug use has elements of ritual ceremony; for example the rolling and sharing of 'joints' brings to mind the sharing of the communal pipe of the Native American culture. In Britain we have little in the way of rites of passage, initiating the young person from one developmental stage into the next; in contrast many cultures maintain ceremonial transition rites of one sort or another: a form of intoxication, trance, dance, painting of the face and body and body piercing. Have the young, feeling a lack of cultural and spiritual instruction, invented a subculture of ritual replacement?

An important purpose of puberty rites is to delineate symbolically the transition from childhood to adulthood. In some cases the novices or initiates are considered outside of society, and hence the community has no power over them. Another crucial element of many rites is that the neophyte symbolically 'dies' to his or her childhood and is re-born as an adult and reintegrated back into the community as a respected member.

The difference between the two cultures, the ancient rites of passage culture and the young drugs culture, is that a strict code of rules governs the former. In comparison with societies where young peoples' developmental stages are acknowledged and supported, our western culture fails to honour or regulate life's transitions.

The danger and the illegality of the drug culture reflect the shadow side of young adulthood, but this self-destructive nihilism co-exists with a creative, romantic

view of the role of drugs. The two sides are frequently expressed within popular culture, where pop stars (following a long tradition of romantic poets) extrovertly act out drug-related fantasies. Today, as in the sixties when groups like the Beatles and the Rolling Stones found musical inspiration in LSD and cannabis, bands like Oasis flaunt their drug use. The pop group The Verve were recently number one in the record charts with a song entitled *The Drugs Don't Work*. Soon afterwards Liam Gallagher, after disappearing from stage at an Oasis concert, reappeared to tell the audience that The Verve had got it wrong — they do work.

Pop stars enact the wish fulfillments of the young; they are often irreverent, non-conformist and fearlessly individualistic. They give the appearance of not caring about society's rules and conventional mores. Their narcissistic, nihilistic frame of reference reveals both the drive towards life-affirming creativity and towards the shadow side. Drug-taking encapsulates both of these impulses, the narcissism of youth which is essentially a quest for self-actualisation, and a powerful nihilistic destructive force.

This duality of purpose has important repercussions for therapy. The client may demonstrate the nihilistic side by constantly being late or missing sessions, and by rebelling when the counsellor becomes a parental or authority figure in the transference. At such times it may be beneficial for the working alliance to re-negotiate a clear contract with the client, in order to create a boundaried holding environment. Drug use as escapism is another valuable aspect for the counsellor to acknowledge within the counselling relationship, in the

form of challenging the client or in the use of immediacy. Drug use often represents areas where the client is in denial, and systematic avoidance may be present in the therapy.

I had a client who for the first two sessions arrived stoned on marijuana. She apologised, explaining profusely that she wasn't able to think properly. I challenged her, saying that I felt that she was putting up a smoke screen, a barrier not only between us but between her and her thoughts and feelings. She found the challenge useful, and although she still smoked marijuana regularly, she never again came for counseling while under the influence, and we were able to work productively together.

The adolescent is embarking on the journey into adulthood, with all the decision making and responsibilities this implies, and are leaving their childhood behind. For many young people this is a time of great anger and resentment, when they feel that the parenting they have received has been flawed or insufficient, or that a rejection of their inner child is taking place. A 'splitting' may occur, just as the parent is no longer in a position, from the teenager's point of view, to understand or nurture them, and is therefore seen as predominately 'bad'. In search of ego identity the adolescent often experiences role confusion, and there seems to be a strong link between role confusion and drug experimentation. Young people talk about drug participation as a unifying experience; as a time when they can link their consciousness with others of their peer group.

The search for like minds and like experience may be understood as a form of mirroring, where the need for parental mir-

roring has been transferred to a peer group. The extent to which a young person has been successful in transmuting these internalisations may explain the difference between those who indulge but are able to control their drug taking, and those who lose their identity, forming an addiction to drugs. The sufficiently mirrored child can draw on early internalisations of the parent's delight and approval, which has enabled them to form a strong and cohesive self. Alice Miller suggests that the grandiose, narcissistic person, who is prone to depression as many young people are, has lacked internalisation of parental love, acceptance and approval, explaining that the greatest sadness of all, for such a person, is having never been loved as their true self.

The next life stage, that of young adulthood, is the struggle between intimacy and isolation. As Erikson describes it, 'The young adult, emerging from the search and insistence on identity, is eager and willing to fuse his identity with others. He is ready for intimacy, that is, the capacity to commit himself to concrete affiliations and partnerships and to develop the ethical strength to abide by such commitments, even though they may call for significant sacrifices and compromises'. In his opinion the successful progression to achieving intimacy with others necessitates the successful attainment of self identity or ego strength. What are we to understand from this in relation to the common use of drugs as a recreational pursuit in young adulthood? Is it that an intimacy sought is easier to achieve this way? Certainly some drugs appear to be used as a way of breaking down inhibitions and achieving social peer group cohesion.

Earlier I mentioned a client whose heroin use accelerated soon after we had negotiated an ending to her therapy. During the time she had counselling many aspects of her life had vastly improved. She had higher self-esteem, was clearer about what was important for her in her life, had finished an abusive relationship and embarked on a more fulfilling and nurturing one. Family relationships had generally improved, but the one relationship that had not was her relationship with her mother, who was an alcoholic. During the course of her therapy the client had tried to re-establish regular meetings with her mother, but her mother never reciprocated her needs. I realised that, with the end of our relationship looming, old abandonment issues came to the fore. She said that she

found respite and nurturing in her heroin use, and her escalating heroin intake at this time was probably a last attempt to find concerned and nurturing mothering in me. Recognising that such a parallel process was taking place helped us to work more satisfactorily towards an ending.

As counsellors I suggest that we remain unbiased in our view of drug-taking. There is nothing inherently 'deviant' or 'abnormal' in the use of psychoactive drugs, and most people today have used such substances. There are important reasons why people frequently take substances whether they are medically and legally approved of or not. This is what we need to concern ourselves with as therapists — what it is that drug-taking is doing for our clients, and what it may be fulfilling or replacing.

Further Reading

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