Adolescent Substance Use

What is Addiction/Substance Abuse? Some factors to consider in identifying adolescent substance abuse:

1. People often get hung up on the term “addiction”. Addiction can often be incorrectly looked at as a “black and white issue” (Yes/No)

2. Medically, addiction is often viewed as disease like cancer or diabetes due to some of the following similarities:
   - Diagnosable Signs and Symptoms
   - Progressive in Nature
   - Genetic Factors

3. A better analogy than comparing addiction to diseases like diabetes or cancer, is to view addiction more like a cold: As opposed to cancer or diabetes which you either have or don’t have, a cold is more commonly viewed along a spectrum: from “the sniffles” as far as pneumonia.

4. What makes adolescent substance abuse so much more difficult to assess and treat is that most teens are in the earlier stages. (This plays into denial – both teens and parents)

5. Important to note is that the majority of teens who use drugs are not and will not become addicted. The problem with adolescent substance abuse is that it’s extremely difficult to discern between the early stage “addict” and the kid who is just going through a “phase” that he/she will eventually grow out of. Therefore it is important to provide early intervention for both types.

6. What matters much more than amount and frequency of substances used, is the consequences and how the user reacts to them. For example: Continued use despite consequences – a kid gets arrested, goes on probation, yet continues to use despite probation full knowing what will happen if he/she gets caught.

7. Some basic risk factors to consider:
   - Family History of substance abuse
   - Early onset of use
   - Current support system/environment/peer group
   - Co-Occurring and/or underlying emotional/behavioral disorders*. (Self-medication)

\* Important thing to take note of that complicates this issue is that many symptoms of substance/abuse/addiction are the same as the symptoms of Depression, Bipolar and other mood disorders such as:

- Mood swings
- Anger issues/ Irritability
- Depressed mood or sadness
- Isolation/ Social withdrawal
- Low self esteem
- Poor concentration/Focus
- Decrease in motivation
- Insomnia or hypersomnia
- Poor appetite
- Weight loss
- Decline in work or school performance/attendance
- Family arguments and/or Social problems and relationship problems
- Unmanageability
- Impulsivity
- Oppositional-Defiant behavior
In Summary, ‘At a Glance’: **Adolescent Substance Use: What to look for:** (Keeping in mind that kids abusing drugs may show some of these factors or none at all – this is just a guide)

- Neglect of appearance
- Unexplained drop in grades, or change in overall school performance/attendance
- Change in peer group
- Emotional Highs and Lows
- Defiance of rules (home/school or both)
- Preoccupation – Talking about substances or “partying”, or drawing pictures (pot leaf)
- Irritability
- Loss of motivation/interest, “I don’t care” attitude
- Change in recreation (quitting sports team or other positive extracurricular activities)
- Defensive or anti-social attitude.
- Glorification of drugs/alcohol
- Irritability
- Family history of or active substance abuse
- Sleeping in class, listlessness
- Cigarette smoking (Although a lot of kids who smoke do not necessarily abuse drugs/alcohol, a huge proportion of those kids who do abuse drugs/alcohol also smoke cigarettes)
- Permissive parents/lack of structure
- Legal problems (related or unrelated)
- Appearance of use:
  - Eyes – dilated, constricted, red, or glassy
  - Smell – clothes, breath
  - Paraphernalia – Visine, breath mints

### What to do if you suspect a teen is using/abusing drugs or alcohol?

1. Do not look the other way. You are not doing anyone a favor by ignoring the signs or assuming everything is fine. Even if substance use issues is not your area of expertise, you should not be afraid to at least open up a dialogue rather than ignore warning signs for fear of making a mistake or hurting rapport.
   - There is much less harm done to incorrectly suspect substance abuse that isn’t there than to overlook substance abuse that is.
   - Often, a kid with who feels they may be out of control internally or subconsciously wants you to intervene, regardless of what they are verbalizing.
   - Sending a kid for an assessment, does not automatically mean treatment

2. Do not take a kid’s excuses alone at face value.
   - Simply asking a kid “Are you high?” or “Are you abusing drugs” and the kid saying “no” is not an accurate substance abuse assessment.
   - Consider the “Tip of the Iceberg” factor – What you are seeing is likely just a glimpse into what is really going on that is just peeking through. (This is important for parents as well)

3. Taking a firm stance against substance abuse does not have to hurt rapport
   - In fact, it can help build a stronger, lasting rapport if done in a supportive, non-confrontational manner. Communication is a good thing so be open to talking about substance use rather than shying away from the topic as it is such a huge issue that should not be ignored
4. If addressing substance use, check your approach based on the following principle: Confrontation builds resistance.
   - It is better to roll with resistance and take a calm approach that expresses genuine concern as opposed to a punitive approach to substance abuse. Focus on being caring and supportive as opposed to confrontational and accusatory. Avoid labels with teens.

5. Drug testing can be an effective tool- use it. But remember it is just a tool. A positive test should be followed with a comprehensive substance abuse/biopsychosocial assessment by a trained professional who is also looking for co-occurring or underlying mental health issues or other emotional/behavioral disorders.