

# Adolescent SUD Trends: Risk and Protective Factors



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- Adolescent SUD trends
- Adolescent overdose trends
- Risk factors for SUD
- Protective factors
- What parents needs to know  
(summary)...

# SUD or Not?

## Categories of SUD criteria

- Impaired control (1-4)
- Social problems (5-7)
- Risky use (8-9)
- Physical dependence (10-11)

<input type="checkbox"/>	1) The substance is often taken in larger amounts or over a longer period than was intended.
<input type="checkbox"/>	2) There is a persistent desire or unsuccessful efforts to cut down or control the use of the substance.
<input type="checkbox"/>	3) A great deal of time is spent in activities necessary to obtain the substance, use the substance, or recover from its effects.
<input type="checkbox"/>	4) Craving, or a strong desire or urge to use the substance.
<input type="checkbox"/>	5) Recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home.
<input type="checkbox"/>	6) Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance.
<input type="checkbox"/>	7) Important social, occupational, or recreational activities are given up or reduced because of the use of the substance.
<input type="checkbox"/>	8) Recurrent substance use in situations in which it is physically hazardous.
<input type="checkbox"/>	9) The substance use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the use of the substance.
<input type="checkbox"/>	10) Tolerance, as defined by either of the following: a) A need for markedly increased amounts of the substance to achieve intoxication or desired effect; and/or b) A markedly diminished effect with continued use of the same amount of the substance.
<input type="checkbox"/>	11) Withdrawal, as manifested by either of the following: a) The characteristic withdrawal syndrome for the substance; and/or b) The substance is taken to relieve or avoid withdrawal symptoms.



# SUD or Not?

## Normal Experimentation vs. Problematic Use

- Risk-taking increases around time of puberty due to changes in socio-emotional systems in the brain
- Reward-seeking behaviors greater in the presence of peers
- Dramatic remodeling of the brain's dopaminergic system
- Mid-adolescence (ages 14-17) = heightened vulnerability to risky and reckless behaviors



# SUD or Not?

## Factors to Consider

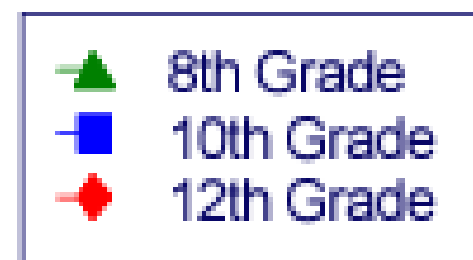
- Has the child changed? (personality, friends, interests, etc.)
- Any preoccupations with drug use culture? (clothing, music, paraphernalia, etc.)
- Functional impairment? (grades, relationship issues, physical changes, lack of interest in previously enjoyable activities/functions, etc.)
- Frequency, consistency, and duration of substance use?
- What substances are being used?



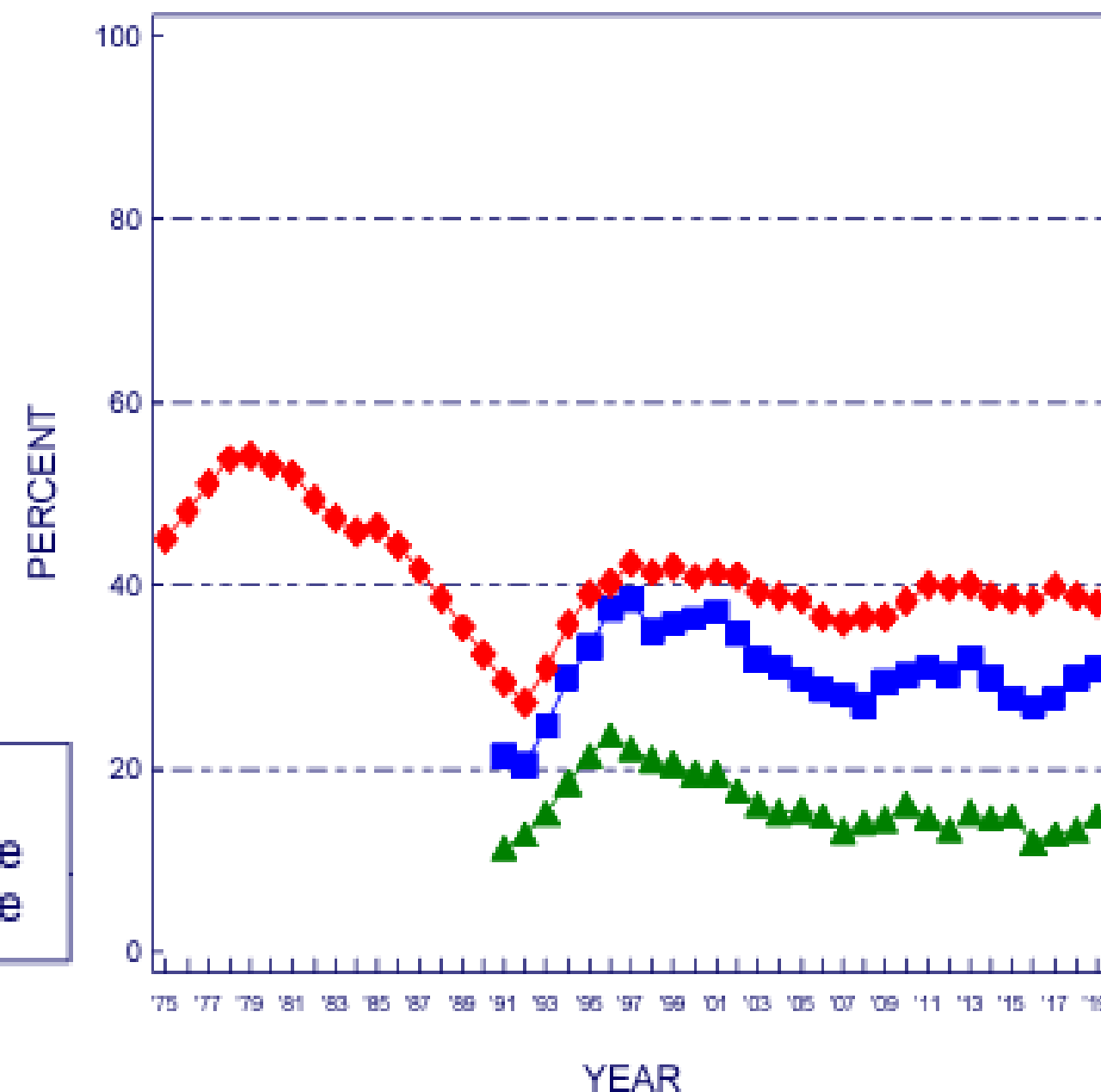
# SUD Trends

## Monitoring the Future – 2019

- Approx. 39% of 12<sup>th</sup> Graders
- Approx. 32% of 10<sup>th</sup> Graders
- Approx. 16% of 8<sup>th</sup> Graders
- Trends parallel for lifetime prevalence, but at lower levels



**Use**  
% who used **any illicit drug** in last 12 months



# SUD Trends

## Monitoring the Future – 2023

- Approx. 31.2% of 12<sup>th</sup> Graders – Down nearly 8% from 2019
- Approx. 19.8% of 10<sup>th</sup> Graders – Down over 12% from 2019
- Approx. 10.9% of 8<sup>th</sup> Graders – Down over 5 % from 2019
- Dramatic decreases in use after onset of COVID pandemic
- Decreases holding steady

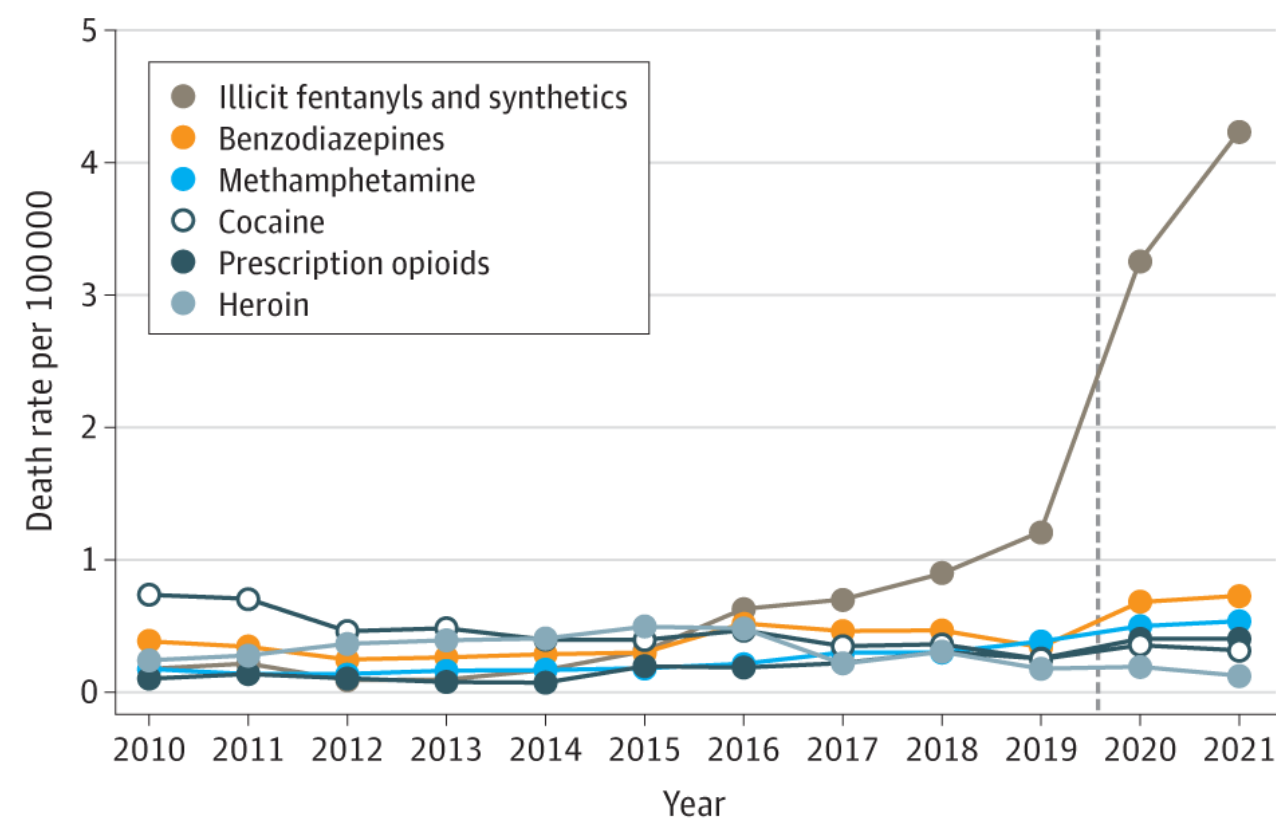


# OD Trends

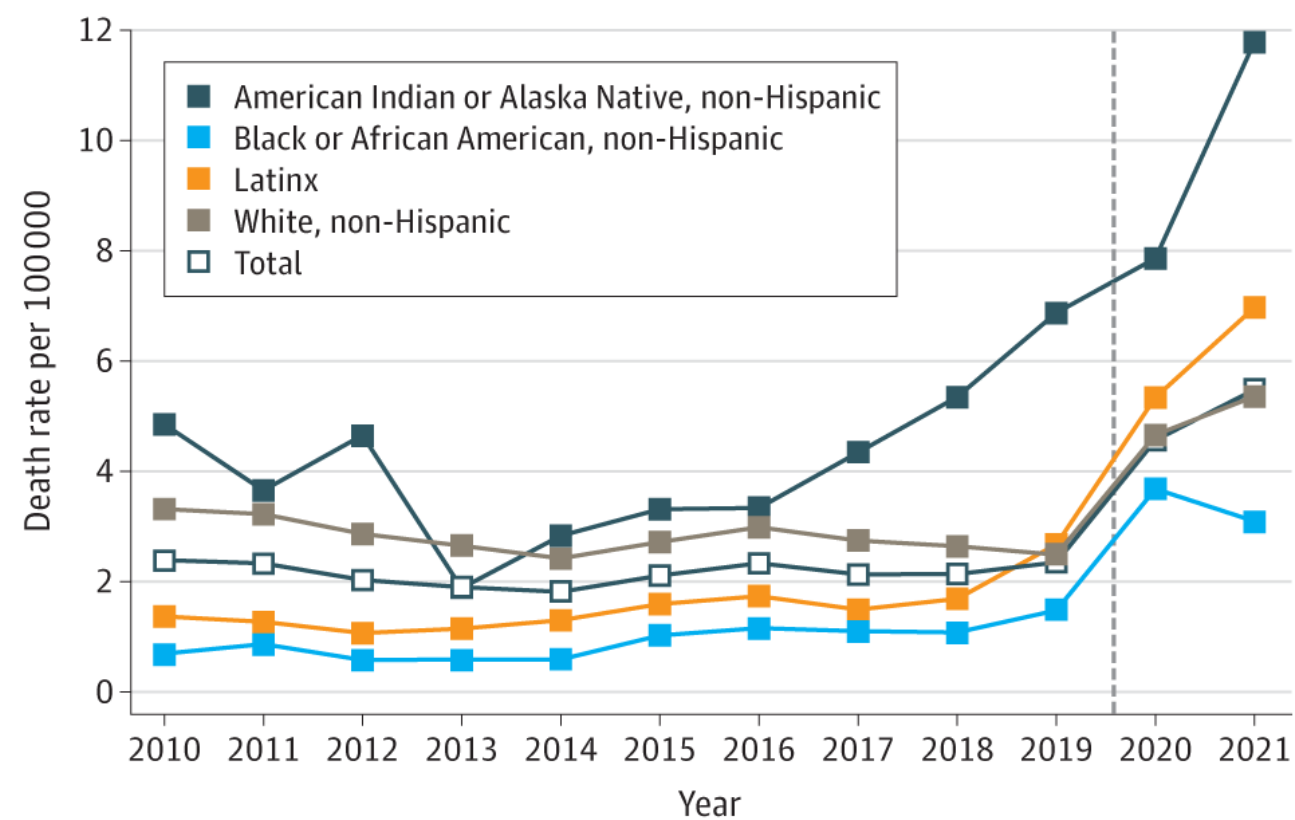
## Adolescent Overdose Deaths

- 518 deaths in 2010 -> 1146 deaths in 2021
- Overdose mortality increased by 94.03% between 2019 and 2020
- Fentanyl-involved deaths – 253 in 2019 to 884 in 2021
- In 2022, 22 adolescents (14-18 years old) died each week from an overdose

**A** Overdose mortality among adolescents by substance type



**B** Overdose mortality among adolescents by race and ethnicity





Substance use among adolescents  
is decreasing...



But it's becoming increasingly more  
hazardous...



# Risk Factors

## **Risk factors for youth high-risk substance use can include:**

- Family history of substance use
- Favorable parental attitudes towards the behavior
- Poor parental monitoring
- Parental substance use
- Family rejection of sexual orientation or gender identity
- Association with delinquent or substance using peers
- Lack of school connectedness
- Low academic achievement
- Childhood sexual abuse
- Mental health issues (45%-65% prevalence of co-occurrences)



# Protective Factors

**Some protective factors for high-risk substance use include:**

- Parent or family engagement
- Family support
- Parental disapproval of substance use
- Parental monitoring
- School connectedness



# Protective Factors

<u>Protective Factors</u>	<u>Definition</u>	<u>Adolescent Substance Use</u>	<u>Young Adult Substance Use</u>
<b>Individual</b>			
Social, emotional, behavioral, cognitive, and moral competence <sup>87,88</sup>	Interpersonal skills that help youth integrate feelings, thinking, and actions to achieve specific social and interpersonal goals.	✓	✓
Self-efficacy <sup>89,90</sup>	An individual's belief that they can modify, control, or abstain from substance use.	✓	✓
Spirituality <sup>91,92</sup>	Belief in a higher being, or involvement in spiritual practices or religious activities.	✓	✓
Resiliency <sup>88</sup>	An individual's capacity for adapting to change and stressful events in healthy and flexible ways.	✓	✓
<b>Family, School, and Community</b>			
Opportunities for positive social involvement <sup>93,94</sup>	Developmentally appropriate opportunities to be meaningfully involved with the family, school, or community.	✓	✓
Recognition for positive behavior <sup>51</sup>	Parents, teachers, peers and community members providing recognition for effort and accomplishments to motivate individuals to engage in positive behaviors in the future.	✓	✓
Bonding <sup>95-97</sup>	Attachment and commitment to, and positive communication with, family, schools, and communities.	✓	✓
Marriage or committed relationship <sup>98</sup>	Married or living with a partner in a committed relationship who does not misuse alcohol or drugs.		✓
Healthy beliefs and standards for behavior <sup>51,99</sup>	Family, school, and community norms that communicate clear and consistent expectations about not misusing alcohol and drugs.	✓	✓



# What parents need to know...

- Experimentation does NOT equal problematic use or SUD
- Substance use is decreasing, but danger is increasing
- “The opposite of addiction is connection”
- There are resources and supports in the community and online at [www.youth.gov](http://www.youth.gov)



# Thank You

## References

CDC. Adolescent and School Health. <https://www.cdc.gov/healthyyouth/substance-use/index.htm>

Friedman J, Godvin M, Shover CL, Gone JP, Hansen H, Schriger DL. Trends in Drug Overdose Deaths Among US Adolescents, January 2010 to June 2021. JAMA. 2022;327(14):1398–1400. doi:10.1001/jama.2022.2847

Monitoring the Future National Survey. NIDA. <https://monitoringthefuture.org/wp-content/uploads/2023/12/mtf2023.pdf>



# Thank You

## References

Steinberg L. (2008). A Social Neuroscience Perspective on Adolescent Risk-Taking. Developmental review : DR, 28(1), 78–106. <https://doi.org/10.1016/j.dr.2007.08.002>

Substance Abuse and Mental Health Services Administration (US); Office of the Surgeon General (US). Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health [Internet]. Washington (DC): US Department of Health and Human Services; 2016 Nov. Table 3.2, Protective Factors for Adolescent and Young Adult

Substance Use. Available from:

<https://www.ncbi.nlm.nih.gov/books/NBK424850/table/ch3.t3/>

