

CHILD AND ADOLESCENT BEHAVIORAL HEALTH ISSUES

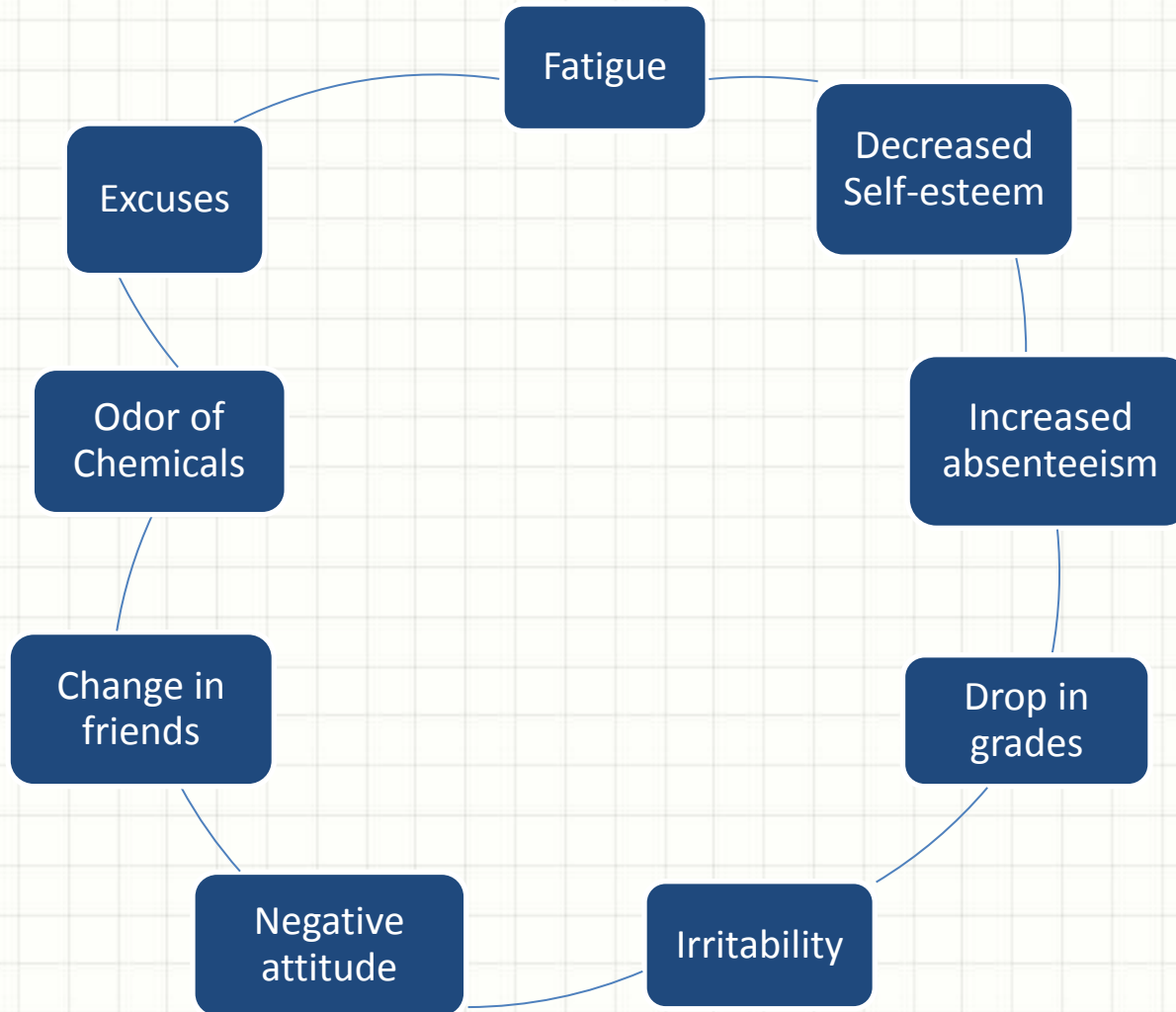
SAP K-12 Bridge Training
Module for Standard 4
Section 2: Addiction and Substance Abuse



Module 4. Section 2.

4.f. Discuss the addiction process and the warning signs of possible substance abuse among young people.

WHAT COULD ILLICIT SUBSTANCE USE LOOK LIKE IN ELEMENTARY STUDENTS?



WHAT COULD ILLICIT SUBSTANCE USE LOOK LIKE IN MIDDLE AND HIGH SCHOOL STUDENTS?

Drop in grades

- Skipping class
- Disrespectful behavior

Inattention in class

- Disciplinary problems
- Difficulty studying

Possession of drugs/paraphernalia at school

- Under the influence
- Easily upset
- Drug-related clothing

Changes in:

- * Friends
- * Habits
- * Activities

Commonly Abused Drugs*

Nicotine – Found in cigarettes, cigars, smokeless tobacco

Alcohol – Found in liquor, beer, & wine

Cannabinoids – Marijuana & Hashish, K2 /Spice (synthetic)

Opioids – Heroin & Opium

Stimulants – Cocaine, Amphetamine, Methamphetamine, Bath Salts

Commonly Abused Drugs*

Club Drugs – MDMA,
Rohypnol, GHB

Dissociative Drugs –
Ketamine, PCP, Salvia

Hallucinogens – LSD,
Mescaline, Psilocybin

Prescription
Medications/OTCs –
Depressants, Stimulants,
Pain Relievers, Cough
Medicine

Other Compounds –
Steroids, Inhalants

PREVALENCE OF USE

2011 Pennsylvania Youth Survey Report

Substance	Average of Pennsylvania youth that have used once in their lifetime	How Pennsylvania compares to national use
Alcohol	44%	8 th grade use is higher 10 th grade use is lower 12 th grade use is similar
Tobacco	23.3%	8 th grade use is lower 10 th /12 th grade use is higher
Marijuana	19%	Lower
Inhalants	8.6%	8 th grade use is lower 10 th /12 th grade use is similar
Cocaine	1.6%	Similar
Crack Cocaine	0.6%	Similar
Heroin	0.4%	Similar

Prevalence of Use

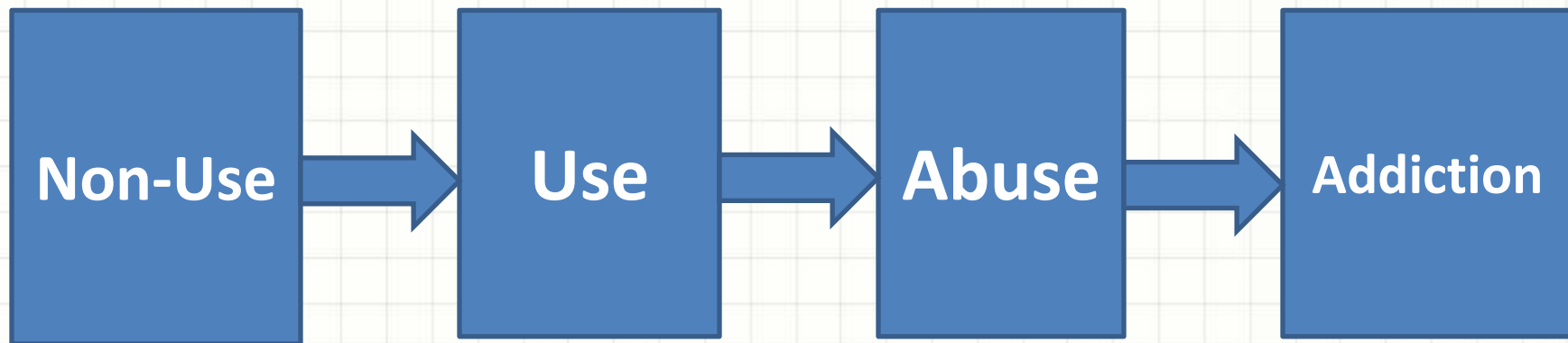
2011 Pennsylvania Youth Survey Report

Substance	Average of Pennsylvania youth that have used once in their lifetime	How Pennsylvania compares to national use
Hallucinogens	2.5%	Lower
Methamphetamine	0.5%	Similar
Ecstasy	2.1%	8 th grade similar 10 th /12 th grade lower
Steroids	0.8%	Similar
Other Illicit Drugs	11.4%	Not available
Prescription Drugs:		Lower for all three types
Pain Relievers	6.7%	
Tranquilizers	2.7%	
Stimulants	3.6%	

CHEMICAL DEPENDENCY IS:

- primary-- it is the original cause and not caused by something like mental illness.
- chronic-- it can be treated but not cured.
- progressive-- it gets worse over a period of time if it is not treated.
- potentially fatal-- if left untreated.
- linked with both genetics and environment.
- linked with early use-- people who begin using before the age of 15 are more likely to develop dependency.

THE ADDICTION PROCESS



NON-USE

The student makes a cognizant choice not to use alcohol and other drugs.

USE

- Average age of “first use” is 12-13
- Tolerance is low
- Experimentation with different substances may occur
- Use occurs in social environment, although not everyone is using
- Effects make an impression and can make the individual feel “better”
- Use causes the individual to pursue feeling “better” each time
- Consequences of a social or personal nature are few

ABUSE

The student:

- Experiences increased tolerance – needing more of a substance to obtain the desired effect
- Increases the pursuit of “chasing the high”
- Socializes primarily with other users
- Experiences increased chance of hangovers
- Establishes rituals; using multiple times per week
- Experiences consequences at home, school and in the community
- Lies to parents to cover up use
- Spends time thinking about/planning to use

Addiction

- Drop in attendance and grades
- Inattentiveness in school
- Use occurs before and in school
- Problems/conflicts with family, friends, school personnel
- Physical deterioration
- Cravings for substance of choice – will do anything to get the desired effect
- Abandonment of rules
- Efforts to control use fail
- Opportunities to use/hide paraphernalia sought out
- Problems with the law

Adolescent use vs. Adult use*

- Polydrug use ...
- Is often higher among adolescents than adults.
- Is caused by adolescents using whatever is available. Adults tend to have “favorite” mood-altering chemicals.
- Makes it more difficult to determine what an adolescent is using.

*Adapted from *Choices and Consequences* by Dick Schaefer, Hazelden Foundation.

Adolescent use vs. Adult use (cont.)

- The addiction process happens more quickly with adolescents.
- A 30 year-old male may take 8-10 years to reach the chronic stages of alcoholism.
- A 15 year-old adolescent who is abusing the same amount of alcohol can become dependent in less than 15 months.

Adolescent use vs. Adult use (cont.)

- **Substance abuse halts emotional development.**
- **This emotional arrestment of chemical dependence takes place earlier in adolescents than adults.**
- **Adults usually have developed some life skills including emotional development.**
- **Adolescents may not have accomplished any emotional development—all of the tasks of adolescence have not been completed.**

Adolescent use vs. Adult use (cont.)

- While the delusional system is similar in adults and adolescents, it seems to be more complicated in adolescents.
- Adolescents have:
 - additional issues because of their age (i.e. “I can’t be addicted, that only happens to adults.”).
 - a sense of being invincible, (i.e. “That won’t happen to me.”).
 - a belief that some hallucinogenic drugs make them more creative, smarter, stronger, etc.

WHAT IS ENABLING?

ADOLESCENT VS. ADULT

Enabling is a process whereby people, unwittingly allow and even encourage irresponsible and self-destructive behavior in someone by shielding the individual from the consequences of his or her actions. *

Adolescent	Adult
50 – 60 enablers	10 – 12 enablers

*Adapted from *Parenting for Prevention* by David J. Wilmes, Johnson Institute

IMPACT OF ADDICTION ON THE FAMILY SYSTEM

- One in five adult Americans have lived with an alcoholic relative while growing up.
- Children of alcoholics/addicts are four times more likely than other children to become alcoholics/addicts themselves.
- Alcoholism tends to run in families. Children of alcoholics are more at risk for substance abuse than children of non-alcoholics.
- Sons of alcoholics experience more of the physiological changes associated with pleasurable effects compared with sons of non-alcoholics immediately after drinking alcohol.

National Association of Children of Alcoholics - www.nacoa.net/impfacts.htm

American Academy of Child and Adolescent Psychiatry/Facts for Families/Number 17 – www.aacap.org

IMPACT OF ADDICTION ON THE FAMILY SYSTEM*

- Alcoholism has strong negative effects on marital relationships.
- Children of addicts may be more likely to be targets of physical abuse and to witness family violence.
- Addicted families demonstrate poorer problem-solving abilities.
- Children of addicts are more at risk for disruptive behavioral problems, aggression and impulsivity, and depression/anxiety.

*<http://www.nacoa.net/impfacts.htm>

IMPACT OF ADDICTION ON THE CHILD IN THE SCHOOL ENVIRONMENT

Children of addicts can experience:

- lower scores on tests measuring cognitive and verbal ability.
- poorer language and reasoning skills as pre-schoolers.
- truancy, dropping out of school, repeating grades, and being referred to a counselor more frequently.
- difficulty bonding with teachers, students and school.
- anxiety related to performance and fear of failure.

RESOURCES FOR CHILDREN OF ADDICTED PARENTS

- Teacher or guidance counselor
- Educational group
- Mutual help groups, i.e. programs for children of alcoholics, Al-Anon, and Alateen
- Outpatient treatment

YOUTH GAMBLING*

Gambling...

- is often seen as a form of entertainment.
- addiction is estimated to involve 4-8% of youth.
- is predominantly practiced by boys.
- involves four types of gamblers:
 - Social
 - At-risk
 - Problem
 - Pathological

YOUTH GAMBLING = PROGRESSIVE ADDICTION*

Progressive:

- preoccupation with gambling.
- need to bet more money.
- restlessness or irritability when attempting to stop.
- need to “chase” losses.
- loss of control manifested by continuation of gambling in spite of mounting, serious negative consequences.

REASONS YOUTH GAMBLE*

- Modification of mood
- Avoidance of problems at home/school/other areas
- Co-use while simultaneously using alcohol/drugs
- Potential to win money
- Alleviation of feelings of depression/loneliness/low self-esteem
- Means of increasing social standing or a feeling of disconnect
- Need for immediate gratification

*www.nasponline.org

RISK FACTORS FOR YOUTH GAMBLING*

- Impulsivity
- Extroversion
- Sensation seeking
- Lower self-esteem
- Addicted parent(s)

*www.nasponline.org