

East Tennessee Rural Health Consortium



Substance Use During Adolescence and Young Adulthood

Laurie L. Meschke, PhD

Adolescents (10-17 years) and young adults (18-25 years) are especially vulnerable to substance use initiation and addiction due to significant brain development and evolving social relationships during these periods.

Adolescence is considered a critical period for brain development (15), enhancing critical thinking abilities through exposure to supportive contexts and relationships. During adolescence and young adulthood, there is a greater reliance on the prefrontal lobe, the last brain area to develop. This reliance leads to youths' display of greater impulsivity and lower levels of self-regulation than adults, increasing the risk of substance use and other behaviors, especially with peers.

Social relationships also evolve during adolescence. Time spent with parents decreases due to school, work, and activities, altering parental monitoring. This alters the quality and quantity of parental monitoring, yet the involvement of parents remains critical during adolescence. Youth have more opportunities to make independent decisions; those related to health behaviors (e.g.,

diet, exercise, and substance use) are likely to follow them into adulthood – for better or worse. In efforts to reduce adolescent risk behavior, interventions with a parent component have emerged as most effective as opposed to adolescent-focused interventions. (16)

During adolescence, peer relationships become more time consuming and influential. Peer influence can promote or detract from healthy behavioral choices. Studies have shown that adolescents and young adults are more likely to use substances if they have greater peer connectedness (i.e., popularity)(17) and peers who use substances (18).

The cognitive and social development of adolescence and young adulthood warrant particular analysis of strategies and beneficial supports related to SUD treatment and recovery for this age group. This newsletter's articles provide a thoughtful introduction to this topic and its importance.

In this newsletter you can expect:

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Facilitators of Adolescent Substance Treatment Response and Recovery

Jenna Quigley, LMFT: Q + A

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Harm Reduction for Adolescents

Rebeca Nieves, MPH

Adolescent treatment for substance use disorder (SUD) addresses the complex interplay of developmental, psychological, and social factors that contribute to substance use in young people (14). Adolescents face unique challenges, including ongoing brain development, peer pressure, and the need for independence, which can all influence substance use (14).

Integrating harm reduction principles into healthcare settings for young people who use drugs is vital. Healthcare providers should adopt a non-judgmental stance, focusing on building trust and rapport with adolescents (13). This includes offering confidential services, engaging in open dialogues about drug use, and supporting adolescents in setting realistic goals for reducing harm (13). Prioritizing the well-being of young people and recognizing their autonomy can effectively address the complexities of

adolescent substance use and promote healthier outcomes.

Harm reduction principles also apply to various risky health behaviors. Tailored interventions that consider adolescents' unique developmental needs and contexts are essential (11). These strategies should include education on safer practices, access to mental health services, and the creation of safe spaces where young people can discuss their experiences without fear of judgment or punishment (12).

Harm reduction for adolescents is a pragmatic and compassionate approach that considers the diverse factors influencing risky behaviors. Providing resources, education, and support decrease many harms associated with substance use and improve healthier decision-making and behavior change.



Adolescent Treatment for Substance Use Disorder (SUD)

Rebeca Nieves, MPH

Effective treatment strategies must be developmentally tailored to these stages and often incorporate a combination of behavioral therapies, family involvement, and, when necessary, medication-assisted treatment. Comprehensive approaches also consider co-occurring mental health disorders — given that this period is where a most mental health challenges arise — ensuring a holistic treatment plan that promotes recovery and well-being (14).

Current evidence-based strategies

Adolescent treatment for substance use disorder (SUD) is an optimal approach designed to address the unique needs of young individuals struggling with substance use. According to NIDA, this treatment involves several key components:

1. *Early intervention*
2. *Family involvement*
3. *Individualized treatment plans*
4. *Ongoing support*
5. *Addressing co-occurring mental health disorders*

1. Early Intervention

Recognizing and addressing substance use issues at an early stage is critical. Early intervention can prevent the development of more severe addiction and related health problems. Schools, pediatricians, and community organizations play vital roles in detecting early signs of substance use and providing initial support (14).



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2. Family Involvement

Family support is crucial in the treatment process. Adolescents benefit significantly from a stable and supportive home environment. Family therapy can enhance communication, strengthen family bonds, and educate family members about SUD (14). This involvement creates a nurturing environment that reinforces recovery efforts.



4. Ongoing Support

Continuous care and monitoring are essential for long-term recovery. Adolescents need ongoing support to prevent return to active use and address emerging issues. Aftercare programs, peer support groups, and sustained family involvement are crucial components of ongoing support (14). These resources provide adolescents with a network of encouragement and assistance as they navigate recovery challenges.

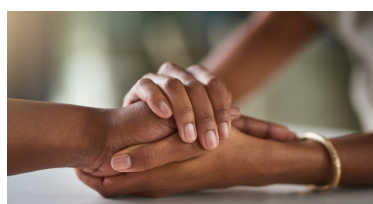
3. Individualized Treatment Plans

Each adolescent has unique needs and circumstances that require personalized treatment plans. Effective programs conduct thorough assessments of an adolescent's substance use history, mental health status, and social environment (14). Treatment plans often include a combination of behavioral therapies, counseling, and medication-assisted treatment (MAT). Behavioral therapies like Cognitive-Behavioral Therapy (CBT) and Motivational Interviewing (MI) help adolescents develop coping skills, set realistic goals, and maintain motivation throughout their recovery journey (14).



5. Addressing Co-Occurring Mental Health Disorders

Many adolescents with SUD also suffer from mental health conditions such as depression, anxiety, or trauma-related disorders (14). Integrated treatment that addresses both SUD and mental health issues is more effective than treating each condition separately (14).



A Few Notes To Remember:

- Effective adolescent SUD treatment requires a holistic approach that combines early intervention, family involvement, individualized care, and ongoing support.
- These five strategies address some of the unique needs of adolescents, significantly improving outcomes and helping young people achieve lasting recovery.

Facilitators of Adolescent Substance Treatment Response and Recovery

Su Chen Tan, PhD

Adolescent substance use and substance use disorders (SUD) are significant public health concerns given their long-term impact on youths' physical, cognitive, and psychosocial development as well as their associated societal costs (3). Research has also shown that adolescents who use substances experience a more rapid progression to addiction than adults and most adults with a SUD report initiating drug use during adolescence (1). To that end, this article examines the facilitators of adolescent substance treatment response and recovery to explore a range of factors that enable the likelihood of successful outcomes. These facilitators can be broadly categorized into individual, familial, social, community, and policy-related factors.

Individual Factors

- 1. Motivation and Readiness for Change:** Adolescents who are more motivated and ready to change their behavior are more likely to engage in and benefit from treatment (2,3).
- 2. Coping Skills:** Effective coping strategies (e.g., mindfulness, emotional regulation skills) are important to manage stress and triggers without resorting to substance use (9).
- 3. Mental and Physical Health:** Addressing co-occurring mental health disorders (e.g., depression or anxiety) and improving general physical well-being enhances treatment response and supports overall recovery (5).
- 4. Self-Efficacy:** Belief in their ability to change and maintain sobriety is crucial (2,10).

Familial Factors

- 1. Parental Participation:** Given the importance of parental involvement during adolescence, active participation of parent(s)/guardian(s) in the treatment and recovery process (e.g., family therapy and parenting program) can improve outcomes (2,3,4)
- 2. Positive Parenting Behaviors:** Positive parenting practices, including parental

support, responsiveness, involvement, and acceptance, promote better treatment outcomes (2).

- 3. Positive Family Dynamics:** Healthy family relationships and a supportive and stable home environment are crucial for recovery (2,4).

Social Factors

- 1. Peer Support:** A supportive peer group, especially those who are substance-free or in recovery, encourages sobriety (2,6).
- 2. School and Community Involvement:** Participation in school and community activities provides structure, a sense of belonging, and purpose (4,9).
- 3. Social Skills:** Strong social skills help adolescents navigate social situations healthily (9).
- 4. Avoidance of High-Risk Environments:** Minimizing exposure to environments and situations that may trigger substance use (6).

Community and Policy Factors

- 1. Access to Treatment and Recovery Support:** Availability of affordable and accessible treatment and recovery programs that incorporate evidence-based practices and are tailored to the individual needs of the adolescent (1,3).
- 2. Access to Resources:** Availability of resources such as services that meet basic needs, educational support, vocational training, and recreational activities enhances recovery (3,6).
- 3. Public Awareness and Stigma Reduction:** Programs educating the community at large and staff in healthcare and social service settings reduce stigma and promote treatment completion and recovery (6,7,8).
- 4. Supportive Policies:** Policies that support treatment and recovery, such as those ensuring insurance coverage for treatment and aftercare services (3).

By addressing these facilitators, a supportive environment can be created to promote the successful recovery of adolescents from SUD (2).

**Jenna Quigley, LMFT, AAMFT Approved Supervisor
Deputy Project Director at JBS International on RCORP**

Question and Answers

Interviewed by Rebeca Nieves, MPH

1. What is your area of work and how does it relate to adolescent treatment for SUD?

I am the Deputy Project Director at JBS International on the RCORP Project, and the Cohort Lead for the RCORP – Child and Adolescent Behavioral Health Program. I am a Licensed Marriage and Family Therapist, Certified Trauma-Focused Cognitive Behavioral Therapist, and AAMFT Approved Supervisor in Pennsylvania and Colorado. I also have a private practice providing outpatient and in-home therapy for children, adolescents, adults, couples, and families, including addressing intergenerational substance use and supporting families in shifting dynamics related to substance use.

2. What current challenges does this work face, and what potential solutions could address them?

Working with communities nationwide presents challenges, including a lack of integrated mental health and substance use care that makes it difficult for parents and adolescents to navigate services. Solutions include creating coordinated care systems, fostering strong collaborations, and supporting comprehensive programs. There are also workforce shortages in family and adolescent mental health care which can be addressed by increasing pay, benefits, and training. Additionally, families struggling to meet basic needs may not seek treatment, so we must identify and address barriers to care with integrated services before focusing on implementing interventions.

3. What are some common misconceptions in this field?

One of the most common misconceptions is that substance use is a moral failing or indicates a fundamental flaw in an individual. Addressing this misconception is crucial for reducing the stigma associated with substance use, especially in community settings. Another misconception is that all adolescents use substances at some point during their development. This belief can prevent adolescents and their parents from seeking help, as they perceive substance use as "normal". However, data show that many do not consume marijuana, nicotine, alcohol, or other substances.

4. How can public health professionals and health practitioners get involved and better prepare themselves?

Collaborative, integrated care focusing on evidence-based treatment and recovery programs is crucial. Working with community partners to meet the needs of children and families, and better coordinating these efforts, is essential. Viewing adolescents in context is also important; even if a family-based treatment program cannot be implemented, practitioners can incorporate family-centered approaches into existing practices. By modifying current methods, we can better address community needs without necessarily creating new programs. Lastly, cross-system education is important -- particularly topics such as integrated care, adolescent brain development and its relation to SUD and mental health disorders, trauma informed approaches, stigma reduction, and more.



Helpful resources and further education to continue learning about SUD treatment & recovery during adolescence and young adulthood

Resources	Description
<u>Principles of Adolescent Substance Use Disorder Treatment: A Research-Based Guide</u>	The National Institute on Drug Abuse (NIDA) offers health professionals and other stakeholders information on principles of effective drug addiction treatment, answers to frequently asked questions, an overview of the drug addiction treatment landscape in the United States, and an outline of evidence-based treatment approaches.
<u>The National Institute on Drug Abuse's (NIDA) Resources for Parents & Educators</u>	Find the latest science-based information about drug use, health, and the developing brain. Designed for young people and those who influence them—parents, guardians, teachers, and other educators—these resources inspire learning and encourage critical thinking so teens can make informed decisions about drug use and their health.
<u>American Academy of Pediatric's Substance Use Resources</u>	The American Academy of Pediatrics (AAP) offers a number of resources to support pediatricians in addressing substance use.
<u>Youth Substance Abuse Prevention</u>	Youth.gov offers resources and tools for preventing and treating adolescent substance use for practitioners, schools, and families.

Please share these with colleagues and communities members with an interest in promoting health in your area.



The flyer features a light yellow background with green decorative elements. At the top center is the East Tennessee Rural Health Consortium logo, which includes a mountain range and a sun. Below the logo, the text 'ETRHC MEETING' is written in large, bold, blue letters. Underneath, a speech bubble icon is followed by the text 'Substance Use Disorder Treatment and Recovery for Youth and Young Adults'. A dark blue rounded rectangle contains a calendar icon, the date 'July 19, 2024', and the time '1:00 - 3:00 PM'. Below this, a location pin icon is followed by 'RSVP Below' and the URL 'tiny.utk.edu/etrhc719'. At the bottom, there is a QR code, a 'COURAGE' logo with a yellow flower, and the University of Tennessee 'T' logo.

ETRHC MEETING

Substance Use Disorder
Treatment and Recovery for
Youth and Young Adults

July 19, 2024
1:00 - 3:00 PM

RSVP Below
tiny.utk.edu/etrhc719

COURAGE
Helping people change their lives

T



The flyer has a dark green background with a white circular inset showing a group of young adults sitting and talking. The text is in white and black. At the top right, there are five small white stars. The main title is 'CERTIFIED YOUNG ADULT PEER SUPPORT SPECIALIST'. Below it, a paragraph explains the program's purpose. The 'Are you:' section lists four criteria with checkmarks. At the bottom, there is a paragraph about providing peer support and a contact email.

CERTIFIED YOUNG ADULT PEER SUPPORT SPECIALIST

The state of Tennessee has a program designed with young adults in mind to address the unique experiences that occur within the transitional age period for young adult peers.

Are you:

- ✓ Between the ages of 18 and 30
- ✓ On a healing journey — or have lived experience — from mental illness and/or substance abuse for at least a year
- ✓ Residing in Tennessee

If so, you can provide peer support to other young adults with a similar background. Ask for more information at cypss.tdmhsas@tn.gov.



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