

Substance Use and Mental Health Concerns in Youth

Adolescence is the time for exploration and opportunity.

It is the time when young people lay the foundations for physical, psychological and social maturity.

Studies have shown that the majority of adolescents in Canada are well-adjusted individuals who do well in school, get along with their parents and are generally happy.

Substance use is but one of many “adult” behaviours adopted by youth. As youth generally use substances to express their independence and autonomy, this use should not be automatically equated with “substance abuse.” Most adolescents who use substances do not progress to problem use or dependency.

But for those youth who do develop a substance use problem, it is common to also find a mental health problem. The combination of problem substance use and a mental health concern is referred to as a concurrent disorder. What comes first — the substance use problem or the mental health concern — varies and may be difficult to determine. The two are often intertwined and related.

Although the majority of Ontario’s young people are generally happy and healthy, there is substantial cause for concern. Consider the following:

- According to the 1999 Ontario Student Drug Use Survey, one in 20 youth (in Grade 7-OAC) report both psychological distress and hazardous drinking. About one in three students report elevated psychological distress, with one in two female students reporting a moderate risk for depression.
- Adolescents with a substance use problem are about three times as likely to have a concurrent mental health concern as youth without a substance use problem.
- Attention-deficit/hyperactivity disorder (ADHD) is a significant risk factor for substance use problems. Research suggests that many young people with ADHD use

Fast Facts & Topical Tips for Working with Youth

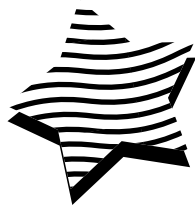


Centre
for Addiction and
Mental Health
Centre de
toxicomanie et
de santé mentale

substances (e.g., alcohol, cannabis, cocaine) to feel better about themselves and to alter their moods in an effort to cope. An estimated 20 per cent of grade school children have been diagnosed with ADHD.

- Researchers have found a strong association between major depression and problem substance use. One study found that adolescents and young adults who had had a depressive or anxiety problem had double the risk of subsequent problem substance use.
- People who frequently use alcohol, tobacco and illicit drugs are more likely to experience mental health problems.

What to Know and Watch For



Overlapping Problems

- Substance use and mental health problems commonly occur together. Accordingly, the treatment of both problems must be integrated. If one problem is present, investigate the possibility of the other also being present.
- Many mental health problems (e.g., anxiety disorders, conduct disorders, depression) tend to precede the onset of problem substance use. Youth often report using substances to cope with other issues. For example, some youth report using cannabis to help decrease the impulsive urges that they experience as a result of ADHD. However, student cannabis use has also been associated with a decreased ability to concentrate and poor academic performance in school.
- Pre-existing, overlapping factors, such as physical or sexual abuse, are common to both mental health and substance use problems.
- Just as some mental illnesses have been seen to increase the incidence of substance use, substance use has been seen to

increase the risk of experiencing mental health problems. Drugs that depress the central nervous system, such as alcohol or barbiturates, are strongly associated with depressive and anxiety disorders. Stimulants (e.g., cocaine and amphetamine-related designer drugs) and hallucinogens (e.g., cannabis) have been correlated with exacerbated mental illness.

- The indicators for substance use and mental health problems are similar and include change in mood, behaviours and relations, declining school performance, quitting hobbies or dropping out of recreational activities.
- At times, problem substance use can mimic mental illness (e.g., people who chronically use marijuana can have similar symptoms to people with clinical depression).

Family Influence

- While most substance use occurs as a result of social influence, problem substance use in youth is more strongly correlated with biological factors, such as substance use disorders and mental health issues in the family's history. Many young people with a family history of substance use and mental health problems tend to gravitate to social circles where they can participate in substance use. Psychological processes, such as self-medicating to alleviate symptoms of mental health problems, tend to occur among youth who have strong biological dispositions to use substances.
- Young people are at greater risk for substance use and mental health problems when there is serious family conflict, poor or inappropriate family management, physical or sexual abuse, or if one or both parents have a mental health or substance use problem.



Most Common Co-occurring Mental Health Problems



For youth who have substance use problems, the most common co-occurring mental health problems are:

Depression — often manifests as irritable moods, physical complaints (e.g., headaches, stomach cramps), insomnia, decreased academic functioning, decreased social activities and antisocial behaviour (e.g., lying, stealing, fighting). Depression often precedes problem substance use. Most substances (e.g., alcohol, marijuana) that youth use to cope with depression cause greater depression with chronic use.

Social Anxiety — usually manifests as school avoidance behaviours, poor self-image and social isolation. Initially this behaviour may protect a young person from using a substance. However, when a young person tries alcohol or other drugs, the anxiety-reducing effect of the substance can promote ongoing use.

Post-traumatic Stress — can manifest through such symptoms as anxiety, depression, self-harming, a preoccupation with death, suicidal thoughts or gestures and flashbacks. The incidence of post-traumatic stress is much higher when the

young person has been sexually or physically abused. People experiencing post-traumatic stress often use substances to help numb painful emotions and deal with anger.



Conduct Disorders — generally manifest as antisocial behaviours, such as illegal activities and disregard for other people's rights. This condition is highly linked with problem substance use and usually precedes it. It is also commonly associated with ADHD. Youth with conduct disorder are risk-takers and often heavily

use a gamut of substances to enjoy the excitement and rush.

Eating Disorders — usually have their onset in adolescence. The likelihood of developing a concurrent substance use problem increases by 12 to 18 per cent among people with anorexia and by 30 to 70 per cent among people with bulimia. Young people with an eating disorder tend to use substances that suppress their appetite, such as nicotine, alcohol or stimulants (e.g., diet pills, caffeine pills, speed, cocaine). Some studies have demonstrated a relationship between dieting in Grade 6 and alcohol use in Grade 9.

What Can You Do?



Early identification and treatment of young children and youth who have mental health problems may help prevent later substance use. The reverse is also true: those who have a substance use problem should be thoroughly assessed to determine if they have co-occurring mental health problems. If mental health problems are related to substance use, both problems need to be addressed concurrently.

If you work with youth, you can play an important role. Here's how:

- Know the general signs or symptoms indicating that a young person may have a substance use problem and/or a mental health concern.
- Know what support services exist in your community and how to gain access to them.
- Make referrals to programs that address concurrent disorders.
- Know that one caring person in a young person's life can make the difference!
- Share this issue of Youth Scoop with others.



Resources and Services for and about Youth

Information Line

If you have a touch-tone phone, you can use the service 24 hours a day, seven days a week. Every day from 9 a.m. to 9 p.m. (except holidays), trained staff are on hand to serve people without touch-tone service, and to provide information and referrals to anyone who needs help.

This service is free and completely confidential. Call as often as you like. Taped messages include: Alcohol, Children and the Family; Talking with your Kids About Drugs; and An Early Start: Drug Education Begins at Home. The 24-hour Information Line has more than 36 taped messages in English and French, touching on a wide variety of mental health, alcohol- and other drug-related topics. Selected messages are also available in several other languages, such as Cantonese, Greek, Italian, Polish, Portuguese, Punjabi and Spanish.

- Ontario Toll-Free: 1-800-463-6273
- Toronto: (416) 595-6111
- Substance Abuse Network of Ontario (SANO): sano.camh.net

Other Information

A large variety of information is available via fax, free of charge. To access the FaxBack Library, dial (416) 595-6099 and follow the prompts.

If you need more details about alcohol and other drug treatment, call the Drug and Alcohol Registry of Treatment (DART). Ontario Toll-Free: 1-800-565-8603

For courses related to specialized mental health and addiction knowledge and skills, contact Education and Training Services at (416) 595-6020.

Web-based Resources

- Virtual Party: www.virtual-party.org
- Educating Students about Drug Use and Abuse: Ready-To-Use Lesson Plans for Drug Education in Your Classroom: sano.camh.net/curriculum
- Preventing Substance Use Problems among Young People: A Compendium of Best Practices: www.cds-sca.com

Public Information Materials

- An Early Start
- About Cocaine
- About Marijuana
- Help! There's a Teenager in My Home!
- Take Action: Alcohol, Other Drug Problems and Your Family
- My Kid On Drugs?
- About Smoking
- About Alcohol

Other Resources

- Let 'Em Go: How to Support Youth in Creating Their Own Solutions
- Drug Use Among Ontario Students: Findings from the Ontario Student Drug Use Survey (1977-2001)
- Youth and Drugs: An Education Package for Professionals
- Youth Action Program
- The Smart Report: Substance Abuse and Canadian Youth
- Opening Doors (school-based program for Grade 9 students at risk)
- Freedom to Act: The Harm Reduction for Rural Youth Project Experience; Supporting Youth Creating Solutions for Youth

For additional information about these or other CAMH products, or to place an order, please contact:

**Marketing and Sales Services
Centre for Addiction and Mental Health
33 Russell Street
Toronto, Ontario M5S 2S1**

**Continental North America: 1-800-661-1111
Metro Toronto: (416) 595-6059
e-mail: marketing@camh.net**

Visit our Web site at: www.camh.net



Centre
for Addiction and
Mental Health
Centre de
toxicomanie et
de santé mentale

Addiction Research Foundation
Clarke Institute of Psychiatry
Donwood Institute
Queen Street Mental Health Centre

A World Health Organization Centre of Excellence
Affiliated with the University of Toronto