Parenting for Prevention, Addressing Teen AOD Use

Scott Caldwell
East High School, April 23, 2008
Goals for this presentation:

1. Gain better appreciation of adolescent development
2. Increase perception of risk for teen AOD use
3. Identify ways you can reduce teen AOD use and related risks
The “Health Paradox” of Adolescence
Source: Dahl (2005)

On one hand...
Measures of most abilities show that adolescence is the healthiest and most resilient period of the lifespan

But on the other hand...
Clinical problems and mortality rates increase 200 to 300 percent
Primary causes of clinical problems and mortality are related to difficulties with control of behavior and emotion.
Adolescent Neuroscience

- New science
Imaging technology provides windows into the developing brain.
Adolescent Neuroscience

• New science
• Insights into teen behaviors
• Implications for parenting
General findings:

• Adolescence is a period of profound and unique brain maturation
Brain development

ADOLESCENCE

Age

Gray Matter
General findings:

• Adolescence is a period of profound and unique brain maturation

• Remodeling of basic structure

• The brain maturation process is not complete until about age 24!!
Amygdala
Regulates emotion
Directs motivation
CEOs: judgment, decision making, planning ahead
Research: These areas are still developing during adolescence.
Understanding teenage behavior:

- **Limits to motivation:** preferences for low effort, high excitement activities
- **Limits to emotional regulation:** moodiness, quick to anger
- **Limits to judgments:** increased risk taking, decreased planning ahead
Understanding teenage behavior:

• **Limits to motivation:**

• **Limits to emotional regulation:**

• **Limits to judgments:**

These limits are normative, biologically-driven, and inevitable!
Alcohol and other drug use amplifies these vulnerabilities
Madison High School
Student AOD Use

Source: DCYA (2005)

Dane County Youth Assessment 2005
What do you believe to be true?

Past year percentage of high school students who...

• Drank alcohol ??
Any past year use by 9th – 12th graders (%)

- Alcohol (beer, wine): 55%
- Alcohol (liquor): 48%
- Marijuana
- Rx drugs
- Stimulants
- Hallucinogens
- Cocaine or heroin
- Inhalants
- OTC drugs
What do you believe to be true?

Past year percentage of high school students who...

• Drank alcohol
• Used marijuana ??
Any past year use by 9th – 12th graders (%)

- Alcohol (beer, wine): 55%
- Alcohol (liquor): 48%
- Marijuana: 29%
- Rx drugs: 
- Stimulants: 
- Hallucinogens: 
- Cocaine or heroin: 
- Inhalants: 
- OTC drugs: 
What do you believe to be true?

Past year percentage of high school students who...

- Drank alcohol
- Used marijuana
- Used other drugs ??
Any past year use by 9th – 12th graders (%)

- Alcohol (beer, wine): 55%
- Alcohol (liquor): 48%
- Marijuana: 29%
- Rx drugs: 0%
- Stimulants: 0%
- Hallucinogens: 0%
- Cocaine or heroin: 0%
- Inhalants: 0%
- OTC drugs: 0%
Past year frequency of use (%)

- Alcohol (beer, wine): 27% (1-2 times), 19% (1-3/month), 19% (1-3/week), 11% (4-6/week), 9% (daily)
- Alcohol (liquor): 19% (1-2 times), 18% (1-3/month), 11% (1-3/week), 11% (4-6/week), 11% (daily)
- Marijuana: 12% (1-2 times), 7% (1-3/month), 7% (1-3/week), 4% (4-6/week), 4% (daily)
- Rx drugs: 5% (1-2 times), 3% (1-3/month), 1% (1-3/week), 1% (4-6/week), 1% (daily)
- Stimulants: 5% (1-2 times), 2% (1-3/month), 1% (1-3/week), 1% (4-6/week), 1% (daily)
- Hallucinogens: 1% (1-2 times), 1% (1-3/month), 1% (1-3/week), 1% (4-6/week), 1% (daily)
- Cocaine or heroin: 1% (1-2 times), 1% (1-3/month), 1% (1-3/week), 1% (4-6/week), 1% (daily)
- Inhalants: 3% (1-2 times), 1% (1-3/month), 1% (1-3/week), 1% (4-6/week), 1% (daily)
- OTC drugs: 1% (1-2 times), 1% (1-3/month), 1% (1-3/week), 1% (4-6/week), 1% (daily)

Frequent using subgroup
About 20% of all drinkers
Past year frequency of use (%)

Alcohol (beer, wine)
- 1-2 times: 27
- 1-3/month: 19
- 1-3/week: 12
- 4-6/week: 7
- Daily: 4
- Total: 67%

Alcohol (liquor)
- 1-2 times: 19
- 1-3/month: 18
- 1-3/week: 11
- 4-6/week: 11
- Daily: 4
- Total: 63%

Marijuana
- 1-2 times: 12
- 1-3/month: 7
- 1-3/week: 4
- 4-6/week: 2
- Daily: 4
- Total: 31%

Rx drugs
- 1-2 times: 5
- 1-3/month: 3
- 1-3/week: 1
- 4-6/week: 1
- Daily: 1
- Total: 11%

Stimulants
- 1-2 times: 5
- 1-3/month: 2
- 1-3/week: 1
- 4-6/week: 1
- Daily: 1
- Total: 10%

Hallucinogens
- 1-2 times: 3
- 1-3/month: 1
- 1-3/week: 1
- 4-6/week: 1
- Daily: 1
- Total: 7%

Cocaine or heroin
- 1-2 times: 3
- 1-3/month: 1
- 1-3/week: 1
- 4-6/week: 1
- Daily: 1
- Total: 7%

Inhalants
- 1-2 times: 3
- 1-3/month: 1
- 1-3/week: 1
- 4-6/week: 1
- Daily: 1
- Total: 7%

OTC drugs
- 1-2 times: 9
- 1-3/month: 9
- 1-3/week: 9
- 4-6/week: 9
- Daily: 9
- Total: 45%

About 33% of all users
Student AOD use and risk behaviors during past 30 days

- Any binge alcohol use
- Any cigarette use
- Ridden w/ marijuana using teen driver
- Ridden w/ drinking teen driver
- Drink and drive
- Attended school after marijuana use
- Attended school after other AOD use
The Impact of Alcohol and Marijuana on Adolescents
Alcohol affects teens differently than adults:

- Reduced sensitivity to intoxication
- Greater risk taking
- Vulnerability for co-occurring problems
- Risk for cognitive deficits

Source: Brown et al. (2000); Clark (2004); Deas et al. (2000); Tapert (2006)
Binge drinking and the teen brain

Image from Susan Tapert, PhD, University of California, San Diego.
Marijuana affects...
Marijuana and Teens

• Substantial increase in THC potency since the 1980s

• Use associated with:
  • Decreased immune system function
  • Decreased motivation
  • Poor academic achievement
  • Delinquency/conduct problems
Is marijuana addictive? Can teen users get hooked?

- Frequent use (about 33% of users)
- Tolerance to effects
- Positive expectancies for effects
Number of positive responses to marijuana by teens relates to later addiction

Source: Fergusson et al. (2003)

A bar graph showing the percentage of marijuana dependency for different numbers of positive responses by teens in treatment. The graph indicates that 39.1% are typical for teens in treatment.
**Is marijuana addictive?**

**Can teen users get hooked?**

- Frequent use
- **Tolerance** to effects
- Positive expectancies for effects
- Narrowing of activities and social relations
- **Withdrawal** is possible
Cannabis withdrawal prevalence reported by adolescents in outpatient treatment

Source: Vandrey et al. (2005)

<table>
<thead>
<tr>
<th>Withdrawal Symptom</th>
<th>Moderate or Severe Rating</th>
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<tr>
<td>Craving</td>
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<tr>
<td>Irritability</td>
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<td>Depressed mood</td>
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<td>Sleep difficulty</td>
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<td>Restlessness</td>
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<td>Increased anger</td>
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<td>Decreased appetite</td>
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<td>Physical symptoms</td>
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Circuits Involved In Drug Abuse and Addiction

INHIBITORY CONTROL

PFC
ACG

MOTIVATION/DRIVE

OFC
SCC

REWARD

Hipp
NAcc

MEMORY/LEARNING

Amyg
VP

All of These Must Be Considered In Developing Strategies to Most Effectively Treat Addiction
Parenting Matters
Parents: How to maximize your protective influences?

- Involvement/Responsiveness
- Demands/Expectations
Six Ways Parents Can Exert Influence

**Being involved & responsive**
1. Love & support
2. Good conversations
3. Quality family time

**Having demands & expectations**
4. Clear limits
5. Monitoring
6. Accountability
1. Your Love & Support

- Your teen needs your support
- Acknowledge strengths
- Express how proud you feel
- Keep affection age-appropriate
- Avoid criticizing

*Strong, positive family relations are a powerful deterrent to teen drinking!*
2. Good Conversations

• Percentage of high school students who report having “good conversations” about AOD with parents: 21%

Source: DCYA (2005)
2. Good Conversations (cont.)

- Teens crave good conversations with their parents
- Initiate conversations about AODs
- Use active listening
3. Quality Family Time

- Teens value time with the family
- Quality versus quantity
- Engage activities your son/daughter enjoys (include friends?)
- Regular family dinners
National research shows that...

For frequent (5-7 weekly) versus infrequent (0-2 weekly) family dinners...

Parents reported:
• knowing teen’s friends better
• knowing more names of teachers
• having better quality parent-teen relations

Teens reported:
• less association with AOD-involved peers
• better grades
• less AOD use

Source: CASA (2006)
4. Clear Limits

- Parent-set limits is a critical protective influence
- Parents as “surrogate frontal lobes”
Where do you stand on your teen’s use of alcohol?

Very Permissive

Undecided

Very Non-permissive

Protective factor

Risk

Risk
How do you communicate your stance?

- Be clear
- Be respectful
- Explain your reasoning
- Identify your consequences
5. Monitoring

• Monitor what?
  – whereabouts, activities, and time with friends
  – status at curfew
  – teen parties and overnights
  – mood and behavior
  – alcohol in the home/garage
  – the medicine cabinet

• “Trust but verify”

*Bottom line: Parental monitoring decreases teen alcohol use!*
6. Accountability

If an incident of drinking occurs…

• Don’t blame the friends!
• Consequences should be **firm but fair**
• Utilize “natural consequences”
• Disapprove of the *behavior*, not the person
Take Home Messages:

- Continue to develop strong, positive family relations
- Add 1-2 weekly family dinners
- Initiate more conversations about AOD use
- Send clear, non-permissive messages
- Monitor whereabouts and activities
- Follow through when rules are broken
Conclusion: parents have a great deal of influence during the teen years.

*The question is: how are you going to use it?*
Presentation References


• Dane County Youth Assessment (2005). Madison Metropolitan School District


Internet resources:

- www.theantidrug.com
  Parenting site sponsored by the National Drug Control Policy

- www.nida.nih.gov/parent-teacher.html
  National Institute on Drug Abuse: resources for parents and teachers

- www.drugfree.org
  Partnership for a Drug-Free America resources
Suggested readings:

- *The Primal Teen: What the New Discoveries About the Teenage Brain Tell Us About Our Kids.*

- *The 10 Basic Principles of Good Parenting.*

Local resource:

**UW-Adolescent Assessment & Intervention Program**

- Alcohol/drug assessment with teens
- Parent involvement
- Confidential
- No charge
- For more information please call 262-1111
Thank you!