Risk, Resilience, and Comorbidities in Adolescent Behavioral Health

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Learning Objectives

• Define risk and resilience
• Explain the value of a risk and resilience approach to adolescent substance abuse prevention and treatment
• Describe factors associated with adolescent resilience
• Identify 3 successful adolescent substance abuse interventions based on a risk and resilience approach
Risk and Resilience

WHAT IS RISK?
Risk = Vulnerability

- Anything that accounts for an increased likelihood of a negative outcome
WHO IS “AT RISK” FOR ADOLESCENT SUBSTANCE ABUSE?
Who is “at risk?”

• Everyone?
• Youth living in poverty?
• Youth living in environments with high rates of substance use?
• Youth with mental health challenges?
Is it important to label people as “at risk?” If so, why?

- What are the benefits of labeling people “at risk?”
  - Possibility to focus interventions on specific individuals who may be most likely to develop substance abuse
  - Technically, in order to identify youth who are resilient, you need to know who is “at risk”
So who is “at risk” of substance abuse?

• Generally, youth who have a certain set of experiences that have been associated with increased likelihood of substance abuse.

• Others define significant risk more narrowly (Masters & Coatsworth, 1998):
  – History of repeated exposure to challenging social conditions, including poverty;
  – Exposure to a traumatic event, such as war; or
  – Combination of social exposure and traumatic event exposure
Resilience

• The experience or process of being exposed to the vulnerability and avoiding or overcoming the impact of it
  — Not a static trait; affected by context
  — Requires presence of risk and protective factors
Resilience = Assets + Resources in the face of risk
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Assets

• Internal: processes and characteristics *within the individual*

• Examples:
  – Competence
  – Adaptive Coping Skills
  – Self-Efficacy
Resources

• External: processes and characteristics *outside of the individual* (i.e., social and environmental factors)

• Examples:
  – Parental involvement
  – Adult mentors
  – Community youth centers
Why a Risk and Resilience Perspective for Adolescent Behavioral Health?
Why A Risk and Resilience Approach

• Focusing on risk only is a deficit-based approach that ignores important assets and resources
• Understanding risk can help us identify priority populations for our work
• Understanding resilience can help us identify:
  – among the at-risk group members, who is most likely to experience negative outcomes
  – intervention strategies for increasing assets and resources
• Outcomes go beyond prevention or treatment of substance abuse
MENTAL HEALTH AND SUBSTANCE USE RISK
Are Mental Health Disorders Risk Factors for Substance Use Disorders or Vice Versa?
Diagnostic Comorbidities

- Major Depression
- Anxiety
- Conduct Disorder
- Bipolar Disorder
- ADHD

Major Depressive Disorder

- Depression precedes substance use disorder (SUD)
- Depressed teens 2 X more likely than non-depressed to have SUD
- 35% of depressed adolescents also have a SUD
- Substance use and comorbid depression contribute to suicide risk
- Generally, treating SUD does not resolve depression in adolescents
Anxiety Disorders

• Anxiety symptoms usually precede SUD
• PTSD and social anxiety disorder are common comorbidities with SUD
Conduct Disorder (CD)

• Characterized by aggression to people and animals, destruction of property, theft or deceit, and serious rule violations
• 80% of youth with conduct disorder have SUD
• Precedes SUD
• Early onset CD = greater likelihood of using substances
• Girls with CD progress more quickly to SUD than boys
Diagnostic Comorbidities Affect Treatment Success

• Among those with comorbid diagnoses,
  – Youth with affective and adjustment disorders are more likely to complete substance abuse treatment than youth with conduct disorder
• Withdrawl can lead to symptoms of affective and anxiety disorders
• Substances can be a way to self-medicate
Other Comorbidities

• History of physical and/or sexual abuse
  – 55% of psychiatric inpatients WITHOUT substance use disorders
  – 75% of psychiatric inpatients WITH substance use disorders
Are Mental Health Disorders Risk Factors for Substance Use Disorders or Vice Versa?
OTHER RISK FACTORS FOR SUBSTANCE USE
Individual Level Risk Factors for Adolescent Substance Use

• Genetic predisposition
• Mental health or behavioral problems
• Minority sexual identity
• History or abuse or neglect
• History of other “risky” behaviors
Interpersonal Level Risk Factors for Adolescent Substance Use

- Family models of substance abuse
- Low parental involvement
- Peer victimization or bullying
- Peer models for substance abuse
Community Level Risk Factors for Adolescent Substance Use

• Poverty
• High crime
• High levels of substance use
A Chain of Risk Exposure: Jasmine

- Single-Parent Household
- Poverty
- Poor school work/grades
- Truancy
- Peers also struggle at school
- Peers involved in substance use
HOW DO WE INTERRUPT THE CHAIN OF RISK EXPOSURE?

PROMOTE RESILIENCE
RESEARCH SHOWS THAT YOUTH WITH MORE ASSETS AND RESOURCES ARE MORE LIKELY TO RECOVER FROM RISK EXPOSURE.

SO WHAT ASSETS AND RESOURCES ARE KEY TO PREVENTION AND TREATMENT?
Resilience: Individual Assets
Individual Assets

- Self-esteem
- Sense of belonging
- Engagement
- Self-determination
- Internal locus of control
- Intellectual and emotional well-being
- Valuing academic achievement
Resilience: Family Resources
Family Resources

- Parent mental health
- Freedom from violence and abuse
- Family cohesion
- Social support (emotional and instrumental)
- Parent-child attachment
- Monitoring and supervision
- Safe and secure environment
- Sensitivity to individuality and uniqueness
- Opportunities for education, recreation and play
- Judicious use of authority
Family Meals Offer More than Good Nutrition

BY KEELEY C. DROTZ, RD

While parents are aware that sitting down to wholesome family meals is important, many don’t realize that the benefits of doing so are unparalleled. Beyond physical health, participating in meals together contributes to better family relationships, emotional health, and academic performance.

Family Meals and Health

Routinely sharing meals as a family results in improved health on multiple levels. Families who make a habit of eating together often have healthier diets, and family meals have a remarkable impact on the mental health of children. A sense of belonging and emotional well-being is fostered when children feel included and valued within the family unit. Furthermore, shared meals can help combat loneliness and social isolation by strengthening family bonds and promoting a sense of community within the household. As we continue to navigate the challenges of modern life, the importance of family meals cannot be overstated. They provide a nurturing space where individuals can come together, reconnect, and thrive.
Resilience: Community Resources
Community Resources

• Safe and supportive environments
• Quality social and learning environments
• Staff at schools acknowledge and value individuality, uniqueness, skills, and accomplishments
• Access to affordable quality childcare
Resilience:
Societal Resources
Societal Resources

- Adequate food
- Safe shelter
- Universal education access
- Universal health care access
- Laws protecting rights
- Prioritization of child and adolescent mental health (resources)
Breaking the Chain of Risk Exposure: Jasmine

Single-Parent Household

Poverty

Poor school work/grades

School provides after-school tutoring with caring adult mentor

Mom creates a monitoring and supervision plan, relying on the help of friends and family

Truancy

Peers also struggle at school

Peers involved in substance use

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RISK & RESILIENCE APPROACHES TO PREVENTING ADOLESCENT SUBSTANCE ABUSE
Life Skills Approach

• Based on Social Influence Model and Competence Enhancement, includes:
  1) Information about substance use consequences
  2) Normative Education
  3) Decision-making skills
  4) Coping skills
  5) Resistance skills training
  6) Self-improvement/self-esteem

Integrated Positive Youth Development (PYD) Approach

• Universal prevention
• Focus on problem reduction + development of assets and resources
• PYD Collaborative
  – Delivered in after school settings
  – Combines a substance-use focused decision making intervention with a PYD approach
  – PYD programs focus on building:
    • Confidence, competence, character, caring, and connection

Communities That Care Prevention System

• Coalition-based community system for preventing substance abuse
• Helps community members use community-level data on risk and protective factors to choose the best-suited effective prevention strategies for their community
• Watch the “Town Hall Summary:”
  http://www.youtube.com/watch?v=Ul3ZJy3R5mY&feature=player_embedded#!
Summary

• Understanding both risk and resilience can help us understand the development of behavioral health problems in adolescents as well as prevention strategies.

• Interventions that balance attention to risk and resilience have been found effective and may have long-lasting and far-reaching benefits.