

“Children with serious emotional disturbance are at heightened risk for substance abuse, and youth already struggling with less severe mental disorders are particularly vulnerable to increasing problems as a result of substance use.”

Substance Abuse and Mental Health Services
Administration (SAMHSA) 2002 Report to Congress

Mental Illness and Juvenile Drug Use

It is widely agreed that there is a strong association between mental illness and juvenile drug use, and studies have shown that substance abuse is the most common co-morbidity for all patients with mental disorders. The SAMHSA 2002 Report to Congress noted that some mental disorders are more likely to lead to substance abuse than others, with particularly elevated levels of risk in youth with behavioral disorders, such as attention deficit hyperactivity disorder (ADHD) and conduct disorders, as well as in youth with anxiety and depressive disorders.

Major Depressive Episodes in Youth Associated with Substance Abuse

The SAMHSA National Survey on Drug Use and Health (NSDUH) has demonstrated a strong correlation between a major depressive episode and drug use in children ages 12 to 17. The 2005 NSDUH results showed that among youth who had not used alcohol or an illicit drug previously:

- Those with a major depressive episode were **about twice as likely to start using alcohol or an illicit drug** as youth who had not experienced a major depressive episode in the past year.
- Among youth who had not used alcohol previously, 29.2% of those with a major depressive episode initiated alcohol use compared with 14.5% youth who had not experienced a major depressive episode in the past year.
- Among youth who had not used an illicit drug previously, 16.1% of those with a major depressive episode initiated illicit drug use compared with 6.9% youth who had not experienced a major depressive episode in the past year.
- This pattern of elevated risk for drug use among youth experiencing a major depressive episode was true across all types of drugs including: marijuana, crack/cocaine, heroine, hallucinogens, inhalants, and illicit use of prescription medications.

Youth with ADHD at High Risk for Substance Abuse

Numerous studies have shown higher rates of substance abuse in young people with ADHD than are found in the general population. A 2003 study in the Journal of Abnormal

Psychology compared the rate of substance abuse in youth with ADHD against a control group. It found that:

- Both groups gave similar responses when asked if they had ever tried alcohol, cigarettes, or marijuana at least once; however, the ADHD group was **three times more likely to have tried some other illegal drug besides marijuana.**ⁱ

Treatment can prevent substance abuse:

- The risk of substance abuse in young people with ADHD is considerably lower for those who are treated for their ADHD.ⁱⁱ

Mental Illness Often Precedes Substance Abuse

The complex interrelationship between mental illness and substance abuse is not fully understood. Certain drugs, such as cocaine and other stimulants, have been demonstrated to cause psychiatric problems,ⁱⁱⁱ and long-term marijuana use has been hypothesized to lead to chronic anxiety, personality disturbances and depression.

However, epidemiological studies have suggested that the onset of a diagnosable mental illness often precedes substance abuse. Many researchers have theorized that this represents an attempt at self-medication.

- A 1998 study of marijuana use in children aged 13 to 19 found an association with marijuana use and behavioral problems. Most of the youth in the study reported that **the behavioral problems predated, and were not initially caused by, their drug use.**^{iv}

The SAMHSA Report to Congress in 2002 stated that:

- Among individuals with co-occurring disorders, the median age for onset of a mental disorder was 11, while the onset of a substance abuse disorder follows 5 to 10 years later at a median age of 21.^v

There is a Window of Opportunity for Prevention

- The SAMHSA Report concludes that **treatment of younger children for depression, anxiety, and other problems may help prevent engagement in high-risk behaviors such as substance use.**^{vi}

ⁱ Molina, B., Pelham, W. (2003). Childhood predictors of adolescent substance use in a longitudinal study of children with ADHD, *Journal of Abnormal Psychology*, 112:3.

ⁱⁱ Wilens T.E., Faraone S.V., Biederman J., Gunawardene S. (2003). Does stimulant therapy of attention-deficit/hyperactivity disorder beget later substance abuse? A meta-analytic review of the literature, *Pediatrics* 111:179-185.

ⁱⁱⁱ Batki, S (1990). Drug abuse, psychiatric disorders, and AIDS. Dual and triple diagnosis. *Western Journal of Medicine* 152(5): 547-552.

^{iv} Crowley, T. (1998). Troubled Teens Risk Rapid Dependence on Marijuana. *Drug and Alcohol Dependence* 50:1.

^v Molina, B., Pelham, W. (2003). Childhood predictors of adolescent substance use in a longitudinal study of children with ADHD, *Journal of Abnormal Psychology*, 112:3.

^{vi} Manteuffel, B., Soler, R., Liao, Q., & Santiago, R. (2002). Children with co-occurring substance use disorders served by the Comprehensive Community Mental Health Services for Children and Their Families Program.