



## **Building Professional Excellence- Part 6**

### **Session 2: Adolescent Substance Abuse: Why It's Different**

**Webinar Follow-up Question and Answer Session with Robert Horne.**

#### **Question from Erin Cameron**

Do you know about online support groups for teens in recovery? (There are zero groups in my area!)

#### **Answer from Presenter**

Erin, I have not used an online support group for teens, and the only online support group I am vaguely familiar with is Smart Recovery (<https://www.smartrecovery.org/>). They are recognized by the VA Health Center and the American Academy of Family Physicians. However, carefully research any resource before referring it to clients.

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#### **Question from Lesley Child**

Is it known if the trends in types of drugs used is related to availability/cost or are teens making conscious choices to use certain types? Thank you

#### **Answer from Presenter**

Lesley, three factors which influence the types of drugs teens chose to use are: 1) drug familiarity, drugs teens commonly see being used by family members, friends or that are popular in the media/culture; 2) availability and ease of access, teens are more apt to use drugs that are readily available or easily accessed. These drugs of convenience are typically marijuana, alcohol and nicotine which are the 3 most used substances by teens; and 3) cost, teens typically chose to use drugs that are low-cost (i.e., marijuana, beer, etc.). The high and increasing cost of cigarettes is considered a significant factor in the decrease in tobacco use among teens and adolescents. One thing to keep in mind is many adolescents and teens do not possess independent transportation and/or income. As such, these factors play a role in limiting the types of drugs adolescents and teens typically use.

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#### **Question from Lynn Duffy**

Not every teen; however, having them involved in activities, sports, can help teach self-management. Any recommendations?

#### **Answer from Presenter**

Lynn, the factor most likely to determine successful outcomes is client-therapist rapport. A therapist should spend an appropriate amount of time working with a client in order to determine the client's; strengths and weaknesses, motivation and stage of change level. Once this is accomplished a therapist is better equipped to develop an effective treatment plan for the client.

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**Question from Citlali Molina**

As a school counselor working with At-Risk - I like to call At Promise, do you have any recommendations for resources to run groups in a high school? Is there a group-based model that can help?

**Answer from Presenter**

Citali, I would need to know more about the specific group you were trying to develop before I could provide you with specifics. I would like to encourage you to look at the following article,

Das, J. K., Salam, R. A., Arshad, A., Finkelstein, Y., & Bhutta, Z. A. (2016). Interventions for Adolescent Substance Abuse: An Overview of Systematic Reviews. *The Journal of adolescent health* : official publication of the Society for Adolescent Medicine, 59(4S), S61–S75.  
doi:10.1016/j.jadohealth.2016.06.021

This article may provide you with a list of options that could be used to develop the type of program you seek to develop. Please feel free to contact me directly for a more detailed conversation.

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**Question from Allen Vosburg**

What do you think regarding marijuana use? Is it attributed to peer pressure or the independent user to start its use? Does this cause an increased use or a decrease in use depending on peer pressure or an independent start use?

**Answer from Presenter**

Allen, initial substance use is tied to several factors. The most prominent are the use of drugs by members of one's family and one's peer group. However, this must be viewed considering adolescents' neurological state. Subcortical reward processes are stronger in adolescents, but their prefrontal cortical executive functioning, decision-making, processes are less. Additionally, Peer influences enhance adolescents' reward-related neural responses and increase sensation-seeking, and risky behavior. As such, the combination of neurological factors, peer pressure, cultural views towards marijuana, and the ready availability of marijuana appear to set a stage for increased marijuana use. This view is supported by some of the latest data on the topic. I encourage you to take a look at this article,

Johnston, L. D., Miech, R. A., O'Malley, P. M., Bachman, J. G., Schulenberg, J. E., & Patrick, M. E. (2018). Monitoring the Future national survey results on drug use: 1975-2017: Overview, key findings on adolescent drug use. Ann Arbor: Institute for Social Research. The University of Michigan.

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**Question from Allen Vosburg**

What is a great first step to assist an adolescent to be less susceptible to stress?

**Answer from Presenter**



Allen, there is not a concrete response to your question. However, here are several steps I use to work with adolescent clients:

1. Assist the client in identifying active and potential stressors.
2. Assist the client in recognizing the possible effects of identified stressors.
3. Assist the client in developing active/physical and passive/cognitive coping mechanisms to address identified stressors.
4. Rehearse and/or role-play coping mechanisms.
5. Instruct the client to maintain a journal detailing the client's active and passive responses, and feelings during times of stress.

Hopefully this will provide you a construct for developing your own approach for assisting adolescents dealing with stress.

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**Question from Andrea Westkamp**

Do you know if adolescents with autism are at higher risk for substance abuse?

**Answer from Presenter**

Andrea, up to now, many clinicians have assumed that substance use-related problems are rare among patients with ASD and, if present, were associated with a client's comorbid ADHD. However, more recent research indicates adolescents with ASD, and Asperger's syndrome are at increased risk of substance use. I encourage you to look at this article, Increased Risk for Substance Use-Related Problems in Autism Spectrum Disorders: A Population-Based Cohort Study. Retrieved at <https://link.springer.com/article/10.1007/s10803-016-2914-2>.

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