

Substance Use During Young Adulthood

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Safety, and Well-being of Young Adults*

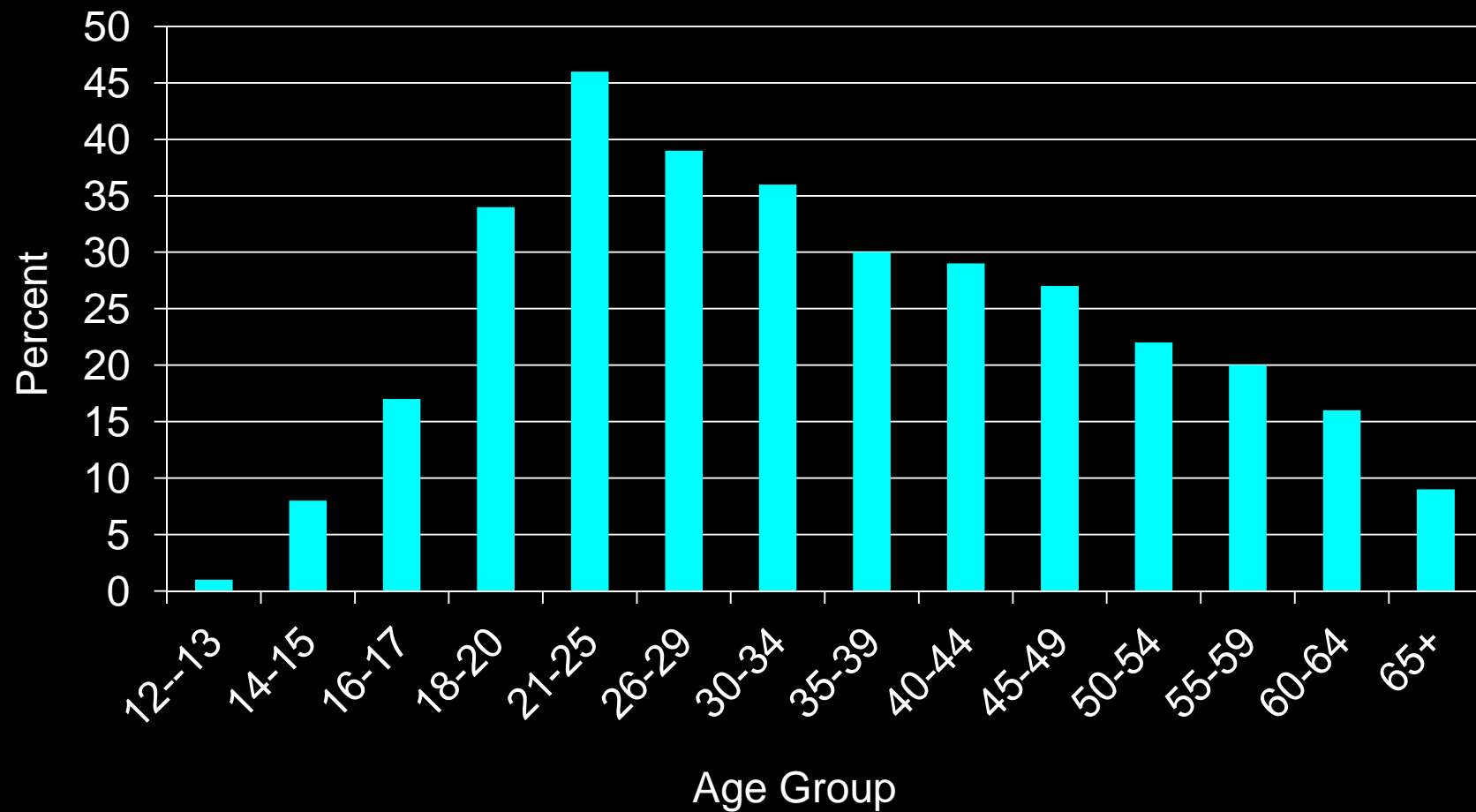
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Substance Use Increases During Young Adulthood (Arnett, 2005; Schulenberg & Maggs, 2002)

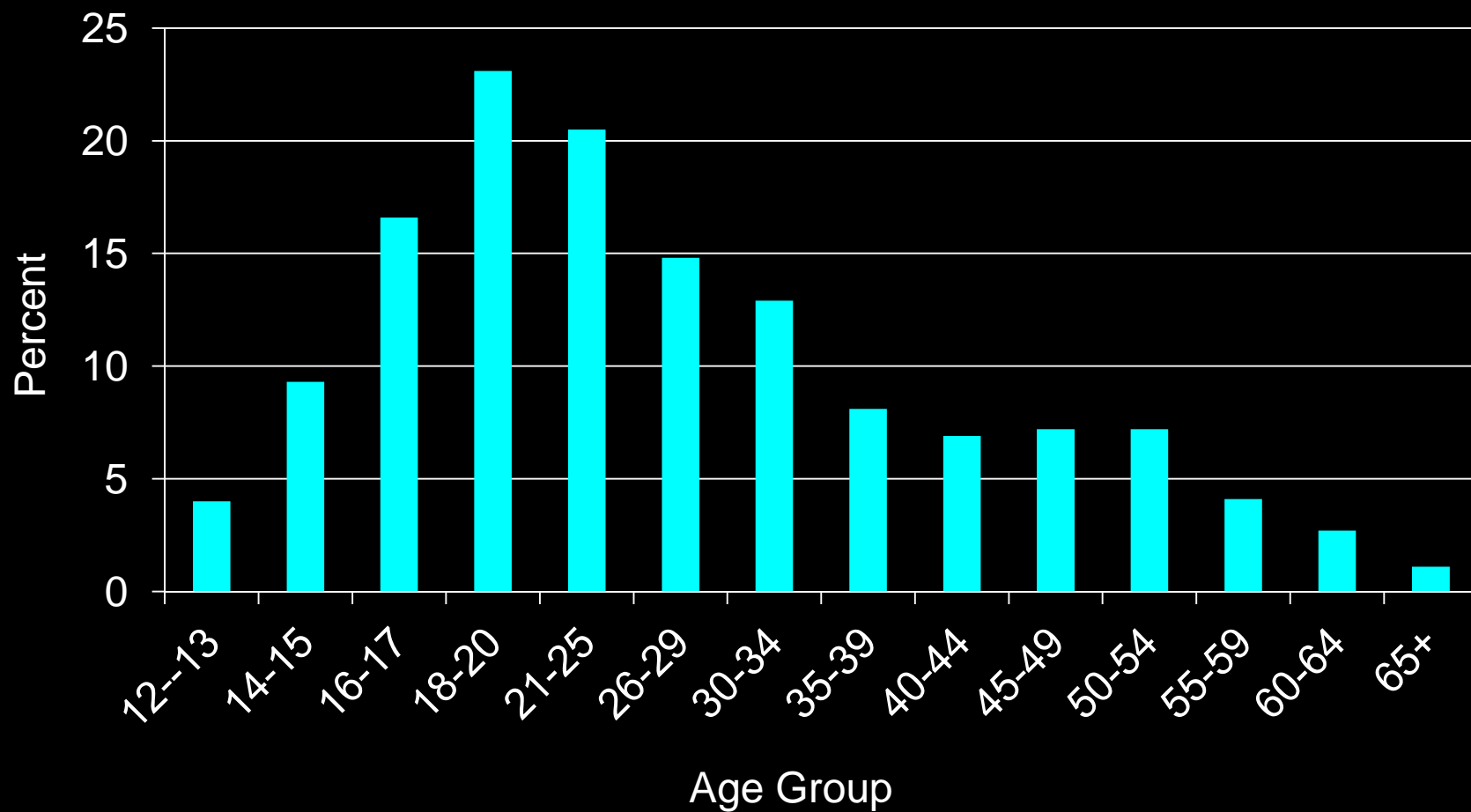
- Less parental support, guidance, monitoring
- Initiation of new roles
- New friendship networks
- More choices and opportunities
- Greater independence
- Identity exploration & self focus
- Freedom from time constraints and social control
- Changes in residence, occupational/school status, romantic relationships (i.e., instability)
- Use for fun and self-medication

Past Month Binge Drinking by Age, NSDUH 2010



Adapted from SAMHSA (2011)

Past Month Illicit Drug Use by Age, NSDUH 2010



Adapted from SAMHSA (2011)

Problems Related to Excessive Drinking and Drug Use Among Young Adults

- Brain impairment
- Academic failure and job problems
- Physical and sexual assaults and other crimes
- Automobile and other accidents
- Unintended pregnancy & sexually transmitted diseases
- Problems for others: assaults, vandalism, sleep deprivation
- Long-term effects on physical & psychological well-being

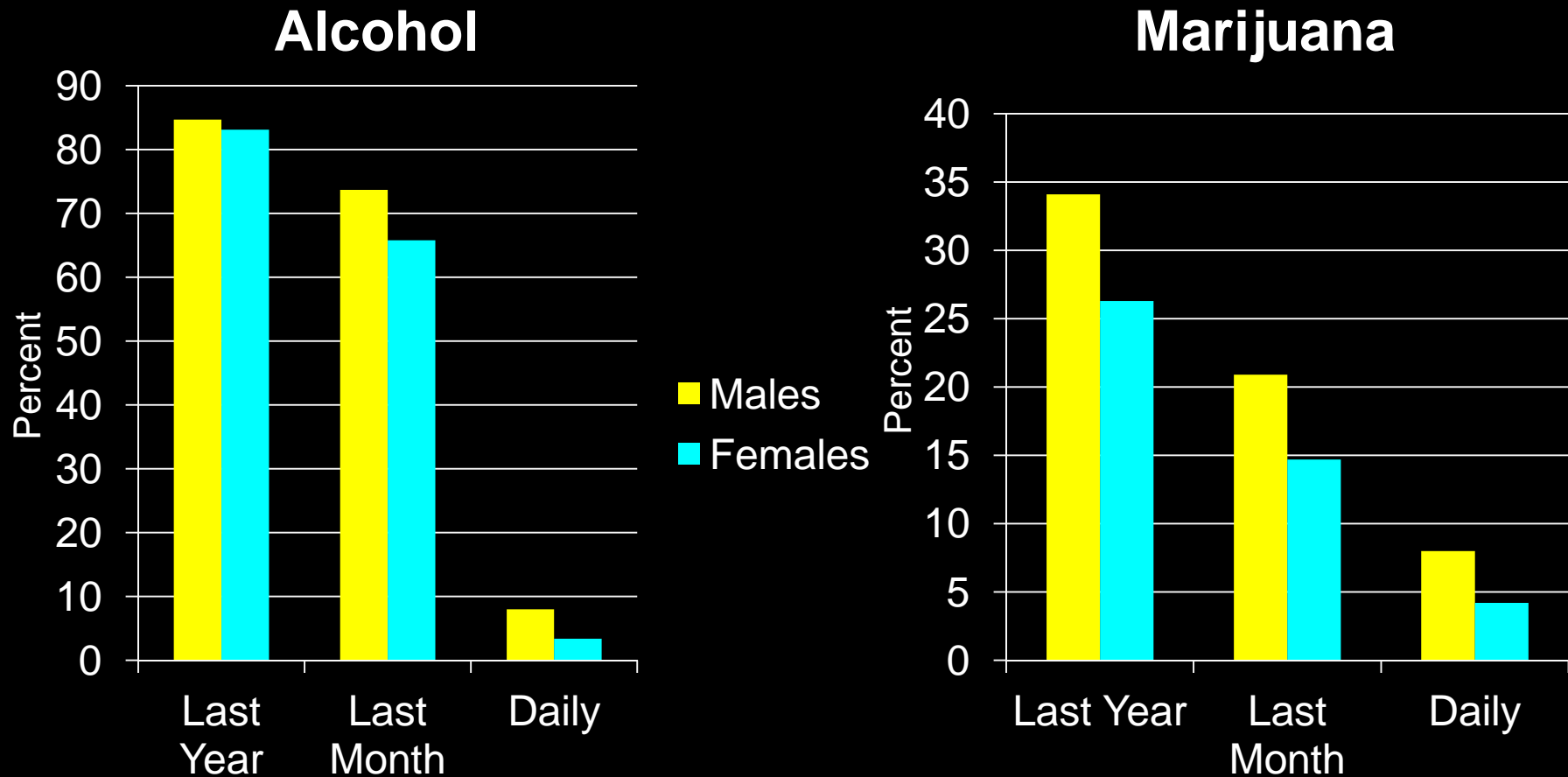
Alcohol-related Problems, Ages 18-24 (Adapted from Hingson et al., 2005, 2009)

- **Death:** In 2005, 5,534 youth died from alcohol-related unintentional injuries including MVA.
- **DWI:** In 2005, >7,000,000 youth drove under the influence of alcohol.
- **Injury:** 599,000 college students are unintentionally injured under the influence of alcohol.
- **Assault:** 696,000 students are assaulted by another student who has been drinking.
- **Sexual Abuse:** 97,000 students are victims of alcohol-related sexual assault or date rape.
- **Unsafe Sex:** 474,000 students have unprotected sex due to alcohol use.

Sociodemographic Correlates

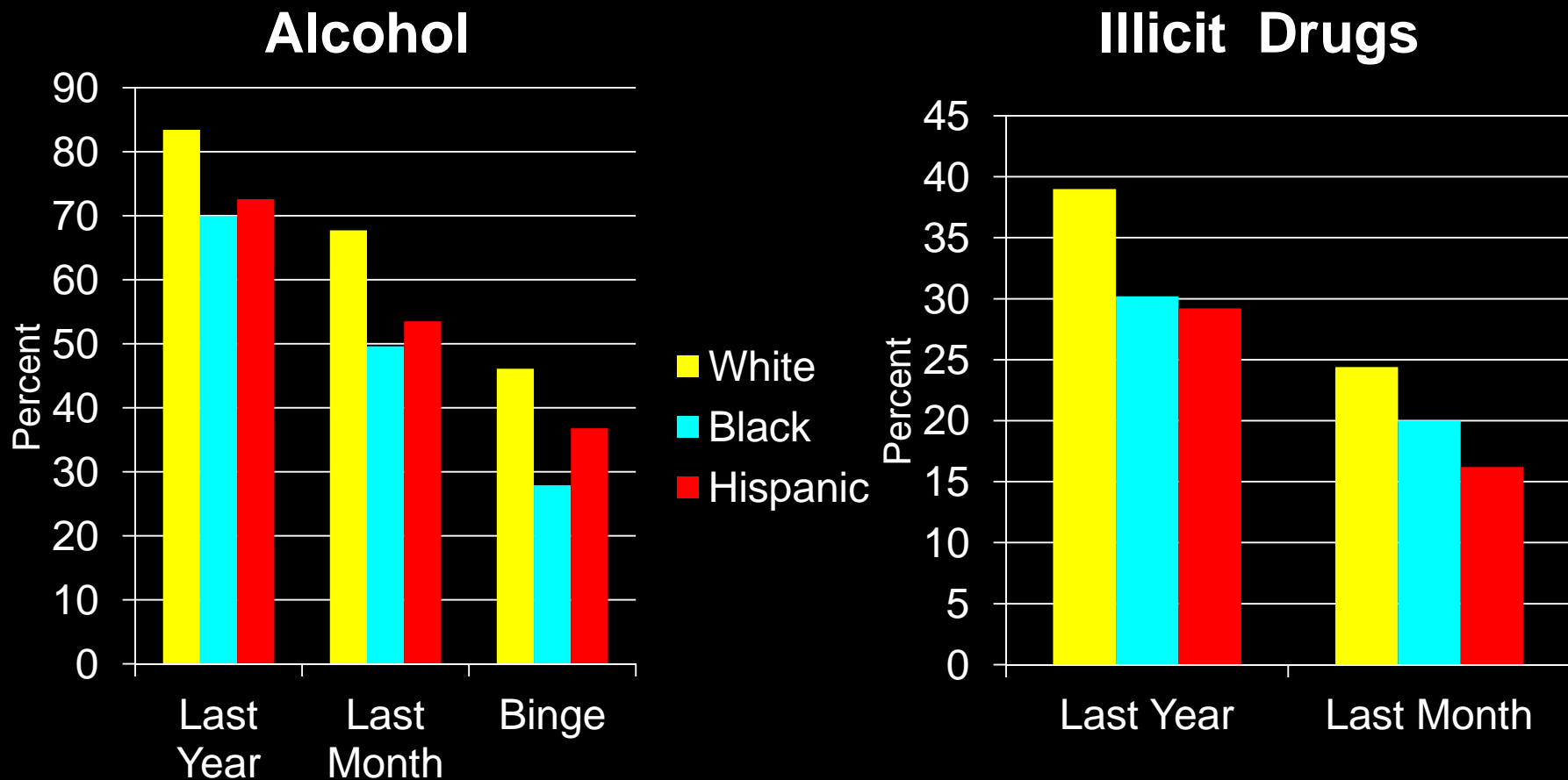
- Marital status and parenthood
- Residential status
- Employment
- Sex
- Race/ethnicity
- College status

Sex Differences in Alcohol and Marijuana Use among Young Adults (Ages 19-30), MTF 2011



Adapted from Johnston et al. (2012)

Race/Ethnicity Differences in Alcohol and Illicit Drug Use among Young Adults (Ages 18-25), NSDUH, 2010



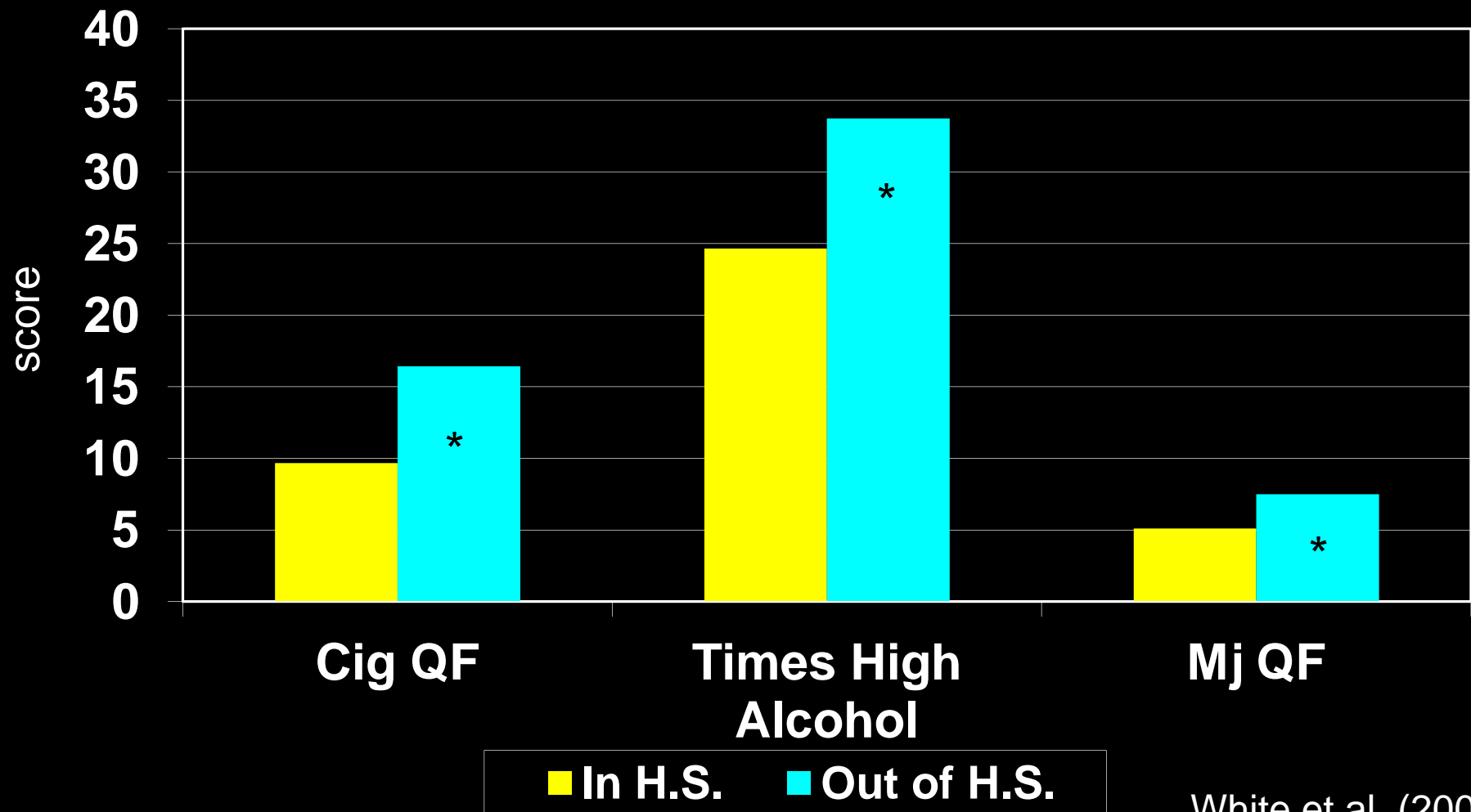
Retrieved and adapted from: <http://www.samhsa.gov/>

Psychosocial Correlates

- Impulsivity/sensation seeking
- Optimistic bias/risk taking
- Negative affect (depression, anxiety)
- Expectancies
- Peer influences (misperceptions)
- Family influences (parental use, attachment, monitoring)

Substance Use at Age 18 for Those Still in High School and Those Out of High School

(Significant Main Effects of High School Status)



White et al. (2005)

Changes in Cigarette Quantity-Frequency over Time



Changes in Times High on Alcohol over Time



Changes in Marijuana Quantity-Frequency over Time



White et al. (2005)

Changes in Marijuana-Related Problems over Time (Marijuana Users Only)



White et al. (2005)

White et al. (2005) Summary

- The transition out of high school (regardless of college status) is important for increases in substance use.
- Cigarette use is consistently higher among nonstudent males and females.
- Marijuana use is consistently higher among nonstudent males.
- Alcohol use is not related to college status even during the college years.
- Alcohol and marijuana problems are consistently highest among nonstudent males.

Low-income and Minority Youth Are a High Priority for Drug Abuse Prevention (Schensul & Burkholder, 2005)

- Urban low-income emerging adults experience the same developmental transitions as their middle class counterparts: residential instability, expanded and diversified social networks, and exposure to settings and social influences that promote drug use
- But also inadequate education, family stressors, limited positive role models, few job opportunities, and discrimination

Need to Develop Interventions for All Young Adults

- Most will mature out but need to reduce harms during peak using period and speed up maturation
- Some will increase or develop problems and we cannot identify in advance which ones
- Need to prevent problems from developing
- College heavy drinkers are an important target group
- Noncollege youth are an equally or more important target group for alcohol and more important for cigarettes & illicit drugs

Personal Feedback Interventions (PFIs)

- Heighten the student's awareness of personal patterns of use in relation to peer norms, and the risks and problems that they experience
- Increased awareness and salience of personal risk motivate students to change
- Students tend to over-estimate other students' drinking and acceptance of drinking; individualized feedback to counteract these misperceptions is hypothesized to reduce harmful drinking
- Efficacious with heavy drinking and mandated college students: in person (brief motivational interview), mailed and computer feedback; marijuana users (short-term)

Personal Feedback Profile

- Student's drinking compared to college averages
- Student's negative consequences
- Student's alcohol expectancies
- Risk factors for later problems (e.g., depression, family history)
- Blood Alcohol Concentration (BAC) peaks and effects
- Protective strategies to reduce risk
- Money spent; calories

ADAPS PERSONALIZED FEEDBACK

ID: 1221
Date: 3/15/05

Your Drinking In The 30 Days Prior To The Incident For Which You Were Referred To ADAPS

- According to the information you gave us, during the **HEAVIEST WEEK OF DRINKING** you drank: **2 days per week**
- During the **HEAVIEST WEEK OF DRINKING** you drank a total of:

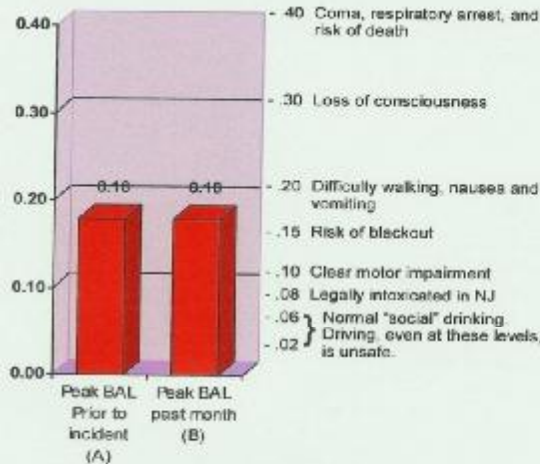
14 standard drinks

Standard Drink Equivalents



Your Recent Blood Alcohol Levels (BAL)

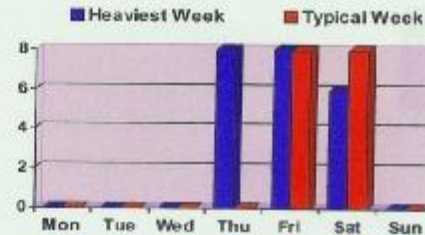
Below are estimates of your Blood Alcohol Levels (BAL) for your Peak Day of drinking in the 30 days prior to the incident (A), and your Peak BAL during your heaviest drinking week in the Past Month (B).



- It would take approximately **12 hours** for your Peak Blood Alcohol Level (BAL) in the 30 days prior to the incident to return to .00, and approximately **12 hours** for your Peak BAL in the past month to return to .00.

Heaviest and Typical Weekly Drinking

This graph shows you the number of drinks you drink per day in the heaviest week (blue) and a typical week (red) in the **past month**.



- Compared to other college students, of your same gender, drinking **16 drinks** in a typical week places you in the **85 percentile**.
- You said **15%** of students of your same sex drank more than you, but in reality you drink more than **85%**.
- Most students think other students drink more than they actually do. Most Rutgers students drink **3 or fewer** standard drinks when they drink.



Did you know??

- A 12-ounce beer has between 132-168 calories.
- A "shot" (1.5 ounces) of 80 proof liquor has approximately 100 calories.
- A glass (5 ounces) of wine has approximately 100 calories.

In the **past month**, based on the number of drinks you consumed in a typical week, you are getting approximately the following amount of calories from alcohol:

8,000 calories

- Over the month, it would require **1,632 minutes** of BRISK WALKING or **914 minutes** of JOGGING to expend this number of calories.
- Based on your report of drinking **16 standard drinks**, over a typical week, it would cost you approximately **\$240-\$480 PER SEMESTER** DEPENDING ON THE QUALITY OF BEVERAGES CONSUMED.

New Interventions are Needed for Non-college Young Adults and for Drugs

- Can we adopt PFIs for nonstudent young adults? What else may work?
- Whose norms should be used?
- How do you best access nonstudents (ER, hospital with medical patients, doctor offices, workplace, clubs/bars, community colleges, vocational schools, community centers, GED classes, street fairs, newspaper ads, Internet)?
- When to intervene (before they leave high school; boosters)?
- How do we modify alcohol interventions for other drugs?