

Drugs & Young People

Reasons for use

Effects and impacts

Important terms

Introduction

The word 'Drug' is defined by the World Health Organization as, "any substance or product that affects the way people feel, think, see, taste, smell, hear, or behave". The relationship between young people and substance use can be described as a complex one. The patterns and contexts of use change rapidly.

The best predictor of adolescent substance use is being young. Adolescence is a time of experimentation and risk taking, where one often tries different things, substances are just one of those things. But be comforted by the fact that most young people who begin use do not continue that use or they do not develop any significant problems. Further, we know that use of one substance does not necessarily mean use of others and that most substance use is functional, that is, it happens for a reason (a point we shall return to later). However, these facts do little to allay the fears and concerns of those involved with the adolescent, for example, family, friends, and teachers.

Reasons for use

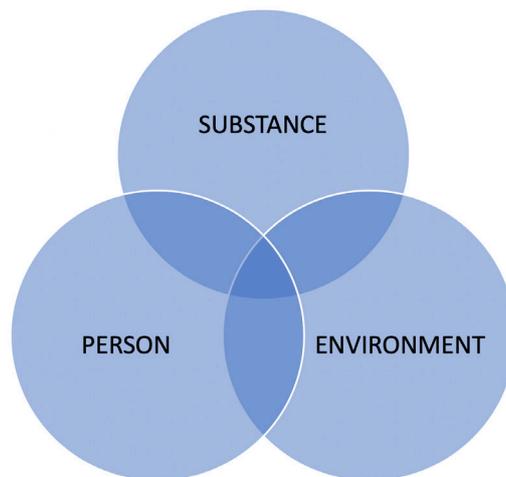
Young people use substances for many reasons and most do not develop adverse consequences. Like adults, young people do not use substances to feel bad or because they are illegal. The reasons that young people use substances are many and varied and may include, but are not limited to:

- for excitement
- to stay awake / alert
- to get to sleep / dream
- to reduce pain (physical and emotional)
- to hallucinate
- to socialise
- to increase sexual experiences
- to forget
- curiosity
- for FUN

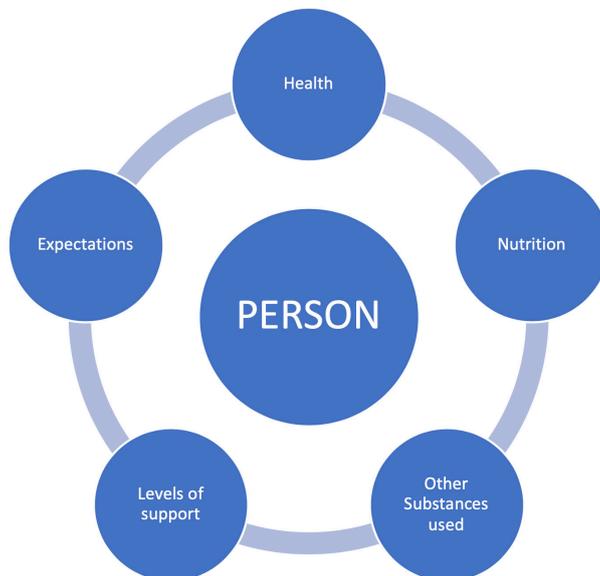
Often when faced with drug and alcohol problems the community and treatment providers focus specifically on aspects of the individual. However, we know that when the focus is placed solely on the individual most attempts at solving the problem will be ineffective. Young people decide to use substances in a particular context and any attempt to assist people to address their AOD use requires incorporation of all these contexts. What we tell them about likely effects of any particular substance may be negated by their own experience or that of their peers.

The effect and impact of any young person's substance use tends to be the result of three interacting factors: 1) the properties of the substance used; 2) the attributes/attitude of the person using; and 3) the environment in which they use. This model is known as Zinberg's Model of Dependence (Zinberg, 1984). Interventions need to consider each of these factors and how they interact (See Diagram 1).

DIAGRAM 1: The effect & context of substance use.

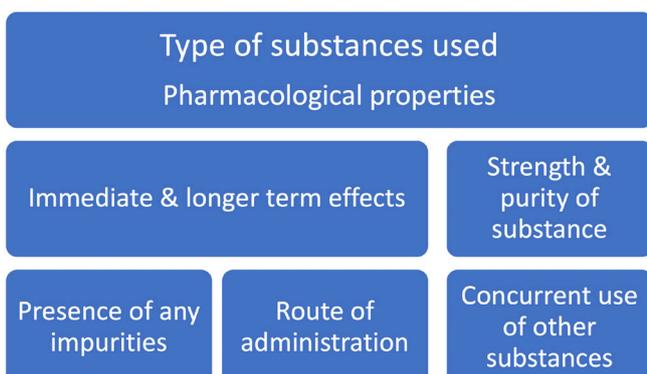


Some of the aspects of an individual that can affect substance use and its consequences are:



For example, we may have three people of the same gender, same age, and drinking the same substance in the same establishment, yet all three may react in a very different way. Person 1 may be having a great time, laughing and singing. Person 2 may be crying in the corner, feeling depressed about his life. Person 3 may be aggressive and fighting others for whatever reason. As you can see, three people are responding in quite different ways to the same substance in the same environment.

Some of the aspects of the substance that can affect the use and consequences of substance use include:

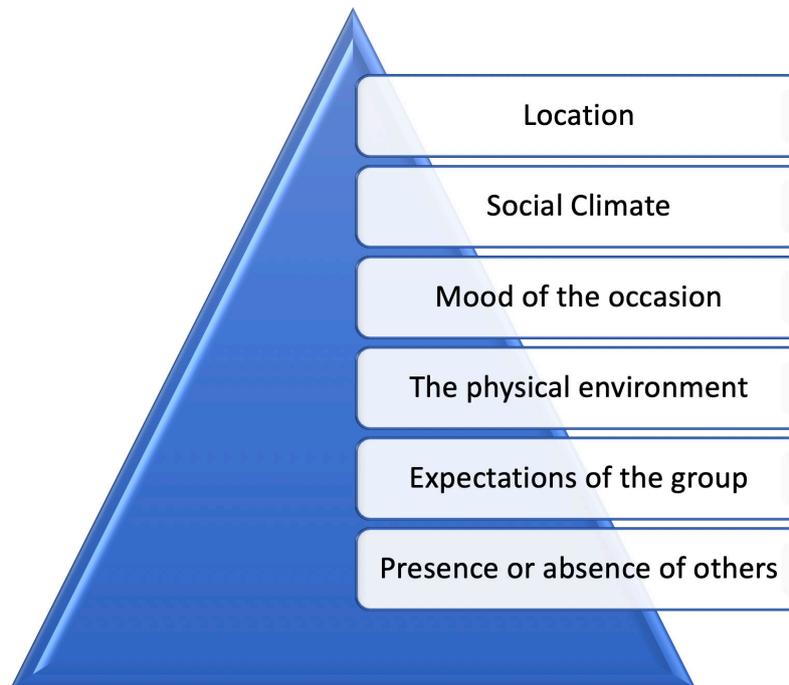


****NOTE:****

Route of administration refers to the way in which a substance is taken. Substances can be used in a number of ways:

- Chewed
- Dissolved in the mouth
- Smoked
- Swallowed
- Inhaled through nose or mouth
- Injected under the skin, or into a vein or muscle
- Rubbed into the skin
- Placed inside the anus, vagina or under the eyelid.

Some environmental elements that can affect the consequences of substance use include



Definitions

Dependence: "A cluster of physiological, behavioural, and cognitive phenomena in which the use of a substance or a class of substances takes on a much higher priority for a given individual than other behaviours that once had greater value". (WHO)

Intoxication: The "state of being under the influence of one or more substances" (WHO).

Tolerance: Tolerance is evident when a person requires a greater dose of a substance to get the same effect originally produced by a smaller dose. Different substances have different levels of tolerance attached to them. Tolerance develops for most substances. Tolerance develops quite rapidly for some (eg heroin and associated substances), and also fairly quickly to some others (eg alcohol and benzodiazepines [eg Rohypnol or Valium]).

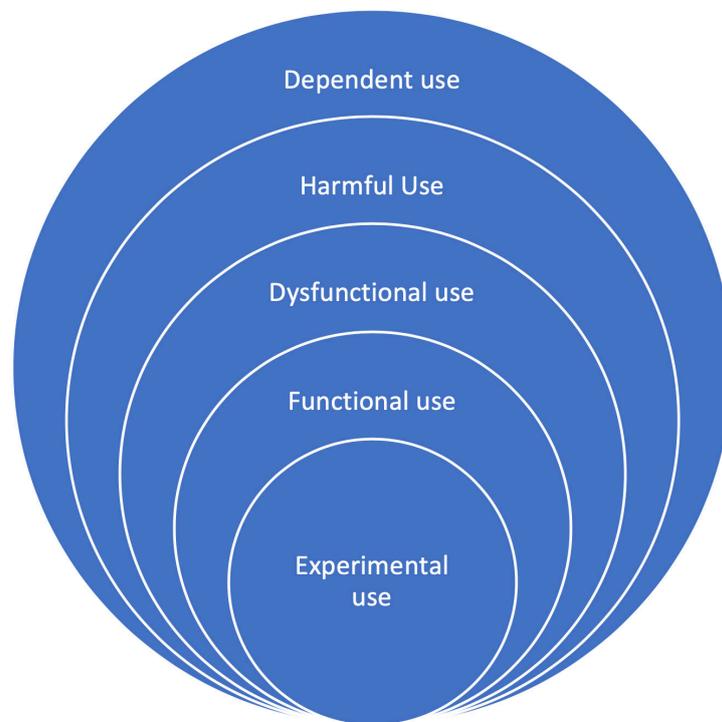
Withdrawal: This term denotes the physical and psychological symptoms associated with cessation or reduction of a substance. The signs of withdrawal are different for the various categories of substances used. Often withdrawal is the opposite of the effect of intoxication.

Overdose: Overdose is the general term applied when a person has taken a substantial amount of a substance and poisoning has occurred. Signs of overdose are specific to each drug taken.

Cravings: Cravings are urges or intense desires to use. Cravings are more likely to occur in the early stages when a young person is cutting down or ceasing their use, but they can continue for some time. These urges and desires can arise due to particular cues; internal or external.

PATTERNS OF SUBSTANCE USE

In discussing substance use and its consequences it is useful to note that there tend to be five distinct patterns of substance use. Young people may experience different patterns of use at different times in their life. They may also simultaneously exhibit different patterns of use for different substances. For example, a young person might be dependent on tobacco, whilst simultaneously experimenting with cannabis.



Experimental use: A person tries a substance for the first time out of curiosity, or the desire for a new experience.

Functional use: Where substance use has a specific purpose in an individual's life (e.g., recreation). Use is functional, that is, it serves a particular purpose. Often an individual will have motivation to stop use because they do not experience/perceive problems.

Dysfunctional use: This type or pattern of use leads to impaired psychological or social functioning and impacts on personal relationships, school or work.

Harmful use: A pattern of use that causes damage to an individual's physical and/or mental health. Harm may result from: Intoxication, mode of administration (e.g. Hepatitis C from sharing injection equipment), depleted support systems, exacerbation of other health issues (physical or mental health).

Dependent use: This is where a substance is used in consistently high doses, and the body is unable to function without the presence of the substance. At this level of use, discontinuation initiates the onset of withdrawal. Cessation typically means that an individual will experience strong cravings.