

Does the treatment of attention-deficit/hyperactivity disorder with stimulants contribute to drug use/abuse? A 13-year prospective study.

Barkley RA; Fischer M; Smallish L; Fletcher K. *Pediatrics* 111(1): 97-109, 2003. (74 refs.)

Objective. To examine the impact of stimulant treatment during childhood and high school on risk for substance use, dependence, and abuse by young adulthood. **Methods.** A total of 147 clinic-referred hyperactive children were followed approximately 13 years into adulthood (mean: 21 years old; range: 19-25). At adolescent (age 15) and adult follow-up, probands were interviewed about their use of various substances and duration of stimulant treatment. **Results.** Duration of stimulant treatment was not significantly associated with frequency of any form of drug use by young adulthood. Stimulant-treated children had no greater risk of ever trying drugs by adolescence or any significantly greater frequency of drug use by young adulthood. Stimulant treatment in high school also did not influence drug use in adulthood except for greater use of cocaine. This difference was no longer significant after controlling for severity of attention-deficit/hyperactivity disorder and conduct disorder in childhood, adolescence, and adulthood. Stimulant treatment in either childhood or high school was not associated with any greater risk for any formal Diagnostic and Statistical Manual of Mental Disorders, Third Edition, Revised drug dependence or abuse disorders by adulthood. Treatment with stimulants did not increase the risk of ever having tried most illegal substances by adulthood except for cocaine. Subsequent analyses showed that this elevated risk was primarily mediated by severity of conduct disorder by young adulthood and not by stimulant treatment in childhood. **Conclusion.** This study concurs with 11 previous studies in finding no compelling evidence that stimulant treatment of children with attention-deficit/hyperactivity disorder leads to an increased risk for substance experimentation, use, dependence, or abuse by adulthood. Copyright 2003, American Academy of Pediatrics.

Effects of alcohol misuse on gambling patterns in youth.

Barnes GM; Welte JW; Hoffman JH; Dintcheff BA. *Journal of Studies on Alcohol* 63(6): 767-775, 2002. (32 refs.)

Objective: Gambling and alcohol misuse are prevalent among youth and may be part of a common problem

behavior syndrome. It was hypothesized that alcohol misuse would predict a pattern of increased youth gambling or a pattern of stable high gambling after controlling for key sociodemographic, socialization and individual factors. **Method:** Data were analyzed from two longitudinal studies of youth living in a western New York metropolitan area. Respondents' gambling at two times over the course of 12-18 months was classified into one of five gambling pattern groups, representing flat-low, increasing, flat-medium, flat-high and decreasing levels of gambling. **Results:** Alcohol misuse among males predicted increasing gambling over time or a pattern of stability of high rates of gambling even after controlling for socio-economic status, race, age, impulsivity and parental monitoring in the family study. Higher parental monitoring and lower alcohol misuse were significant in predicting a decreasing pattern of gambling among males in the male delinquency study. For females in the family study, alcohol misuse predicted an increasing pattern of gambling only when other factors such as high impulsivity or low parental monitoring were present. **Conclusions:** An understanding of adolescent gambling must take into account a variety of demographic, socialization and individual factors, as well as the co-occurrence of alcohol misuse. Copyright 2002, Alcohol Research Documentation, Inc. Used with permission.

Juvenile drug treatment courts in the United States: Initial lessons learned and issues being addressed.

Cooper CS. *Substance Use & Misuse* 37(12/13): 1689-1722, 2002. (10 refs.)

This paper provides an overview of the development of juvenile drug treatment court programs in the United States; the goals of these programs; a comparison of the traditional juvenile justice process and services with that of the juvenile drug treatment court; and principal areas in which the juvenile drug treatment court experience has differed from that of the adult drug treatment court. The paper also provides a description of early models and the modifications and enhancements that have subsequently been instituted to enhance program effectiveness; a summary description of the range of juvenile drug treatment court activity currently underway in the United States; the nature of substance use and other issues presented by participating youth; and the major challenges juvenile drug treatment courts are currently addressing. Copyright 2002, Marcel Dekker, Inc.

Five outpatient treatment models for adolescent marijuana use: A description of the Cannabis Youth Treatment Interventions.

Diamond G; Godley SH; Liddle HA; Sampl S; Webb C; Tims FM; Meyers R. *Addiction* 97(Supplement): 70-83, 2002. (79 refs.)

The five manual-guided treatment models tested in the Cannabis Youth Treatment study funded by the Center for Substance Abuse Treatment are described. The five models include (a) a 6-week intervention consisting of two sessions of individual motivational enhancement therapy plus three sessions of group cognitive behavioral therapy (MET/CBT5); (b) a 12-week intervention consisting of two sessions of motivational enhancement therapy plus 10 sessions of group cognitive behavioral therapy treatment (MET/CBT12); (c) a 12-week intervention consisting of MET/CBT12 plus the family support network (FSN), a multicomponent intervention that includes parent education, family therapy and case management; (d) a 12-week intervention based on the adolescent community reinforcement approach (ACRA), an individual behavioral treatment approach designed to help adolescents and their parents reshape their environment and learn new skills; and (e) multi-dimensional family therapy (MDFT), a multi-faceted, developmentally and contextually oriented family-based model targeting individual, family and social systems. For each model, we describe the treatment background and/or its empirical support, its theoretical underpinnings, its goals and proposed treatment mechanism and the structure and content of each treatment. Procedures used for maintaining treatment fidelity and monitoring quality assurance are also described. These interventions represent the first readily available, manual-guided interventions to be evaluated in a large randomized field study for this population. Consequently, these manuals have the potential to advance treatment and research for adolescents with substance use disorders. Copyright 2002, Society for the Study of Addiction to Alcohol and Other Drugs.

Relationship between smoking, drinking, and adolescents' self-perceived health and frequency of hospitalization: Analyses from the 1997 National Household Survey on Drug Abuse.

Johnson PB; Richter L. *Journal of Adolescent Health* 30(3): 175-183, 2002. (22 refs.)

Purpose: To investigate the more immediate health effects of smoking and drinking among adolescents. Methods: Secondary analyses of data from the 1997 National Household Survey on Drug Abuse were conducted to explore the relationship between subjective and objective health outcomes and the use of alcohol and tobacco among adolescents. Results: The findings suggest that adolescents who smoke or drink actually report poorer health during

adolescence than those who do not. In fact, adolescents who are frequent or heavy alcohol and tobacco users report poorer subjective overall health and a greater number of overnight hospital stays during the previous year than less frequent or intense users and than nonusers. In addition, the data revealed a number of significant gender and age group differences in reports of health outcome as well. Conclusions: Demonstrating to youngsters the more immediate, negative health consequences of alcohol and tobacco use might strengthen prevention messages and ultimately decrease the use of these substances among adolescents. Copyright 2002, Society for Adolescent Medicine.

Adolescent work and drug experiments.

Kouvonen A; Lintonen T. *Journal of Substance Use* 7(2): 85-92, 2002. (29 refs.)

The aim was to examine the relationship between part-time work and experimentation with drugs among Finnish adolescents. The cross-sectional survey data (School Health Promotion Survey, n=47,568) were collected in classrooms in Spring 2000. Respondents were between 14.3 and 16.2 years old. The response rate was 82 percent. Drug use during the past 30 days, work intensity and work type measures were obtained from self-administered questionnaires. Polychotomous logistic regression was used as the main method of analysis. Working more than 10 hours per week was associated with an increased likelihood of frequent drug use (five times or more), but not of occasional experiments. Similarly, engagement in some types of "adult-like" work was significantly associated with an increased likelihood of frequent drug use. "Adult-like" jobs are jobs that are typically held by adults in Finland, and are also generally more formal. Copyright 2002, Taylor and Francis Health Sciences.

Young people and alcohol: An econometric analysis.

Lundborg P. *Addiction* 97(12): 1573-1582, 2002. (57 refs.) Aims: To analyse the determinants of youth drinking behaviour within an economic-theoretical framework. The paper focuses especially on the effects of (a) having parents willing to supply alcohol, (b) living in a single-parent household, (c) having parents who are currently unemployed and (d) having received education about alcohol, narcotics and tobacco. Design, setting and participants: A Swedish cross-sectional survey data on 833 individuals aged 12-18 years was used to analyse the effects of the above variables on participation in drinking, frequency of drinking, intensity of drinking and binge drinking. Separate analyses were conducted for beer, wine and spirits. Care was taken in using appropriate econometric methods for the questions posed (negative binomial regression, censored regression and probit regression). Findings: Having parents willing to supply

alcohol increased frequency ($P < 0.05$) of beer, wine and spirits consumption, intensity ($P < 0.05$) of wine, spirits and illicit alcohol consumption, and increased probabilities ($P < 0.10$) of binge drinking and participation in drinking ($P < 0.05$). No effects were seen from living in a single-parent household. Having received education about alcohol, narcotics and tobacco had a negative association only with intensity ($P < 0.10$) of beer consumption. Having a father who was currently unemployed was associated with an increased ($P < 0.05$) probability of binge drinking but a reduced ($P < 0.05$) frequency of wine consumption. Conclusions: The positive effect of having parents willing to supply alcohol could reflect that these individuals face lower acquisition costs or lower psychological costs in consumption. It could also reflect a price effect, if the individual receives the alcohol free from his or her parents. Copyright 2002, Society for the Study of Addiction to Alcohol and Other Drugs.

Alcohol's role in the deaths of BC children and youth.

Mitic W; Greschner J. *Canadian Journal of Public Health* 93(3): 173-175, 2002. (8 refs.)

The objective of this project was to determine the prevalence and context of alcohol use in the deaths of children and youth reviewed by the British Columbia (BC) Children's Commission. In 489 case reviews of BC children and youth, the authors examined the role that alcohol may have had at the time of death or whether there was a history of alcohol use either by the deceased child or another person in the child's life. The results of the study indicated that alcohol is most prevalent in the lives of 15-18 year olds. It is present at the time of death in two fifths of Motor Vehicle Incidents (MVI) and one third of suicides and drownings. It is concluded that alcohol has a profound presence in the lives and deaths of children reviewed by the Children's Commission. Enhancing deterrence laws and alcohol control policies, and increasing public awareness are warranted. Copyright 2002, Canadian Public Health Association.

Assessment of nicotine dependence symptoms in adolescents: A comparison of five indicators.

O'Loughlin J; DiFranza J; Tarasuk J; Meshfedjian G; McMillan-Davey E; Paradis G et al. *Tobacco Control* 11(4): 354-360, 2002. (26 refs.)

Objective: To examine the psychometric properties, test-retest reliability, and convergent construct validity of five indicators of nicotine dependence (ND) symptoms in adolescents. Design: Analysis of baseline data from a prospective study on the natural history of ND in 1264 adolescents aged 12-13 years. Setting: Ten Montreal high schools. Subjects: 233 grade 7 students who had smoked cigarettes one or more times in the three months preceding

the baseline data collection. Main outcome measures: Five indicators of ND symptoms including two that are multi-dimensional (a proxy measure of ICD-10 criteria for tobacco dependence; the Hooked on Nicotine Checklist (HONC)) and three new indicators of "symptom clusters" that emerged from principal component analysis (ND/cravings, withdrawal symptoms, self medication). Results: All five indicators demonstrated acceptable internal and test-retest reliability. The correlation between the HONC and ND/cravings was 0.910. All other correlations between indicators ranged between 0.716-0.824. There was considerable overlap in the independent correlates identified for each indicator. Conclusions: All five indicators performed well psychometrically. Until the meaning, relative importance, and usefulness of each scale is clarified in longitudinal work, decisions regarding which scale(s) are most informative will depend more on the content of the scales, the need for a multi- or uni-dimensional indicator, and whether or not the scale is theory based. Copyright 2002, BMJ Publishing Group.

Family stressors and adolescent cannabis use: A pathway to problem use.

Butters JE. *Journal of Adolescence* 25(6): 645-654, 2002. (25 refs.)

The extent to which the family environment is characterized by stress may have a substantial impact on life-course trajectories of young people. Illicit drug use is a fairly common part of these trajectories. This paper estimates the direct impact of family stressors on the progression to problem cannabis use, as well as their indirect effects via the youth's school experience among adolescents in Ontario. The results suggest that family stressors have direct and indirect effects increasing the probability of cannabis use outcomes. The implications of these more complex associations between factors believed to influence adolescent drug use trajectories are discussed. Copyright 2002, Association for Professionals in Services for Adolescents.

Tattooing and high-risk behavior in adolescents.

Roberts TA; Ryan SA. *Pediatrics* 110(6): 1058-1063, 2002. (15 refs.)

Objectives. We sought to determine the prevalence and sociodemographic characteristics of tattooed adolescents in a nationally representative sample and to evaluate the association between tattooing and several high-risk behaviors. Methods. This is a secondary analysis of the National Longitudinal Survey of Adolescent Health Public Use Dataset, which provides a nationally representative sample of 6072 adolescents collected in 1995 and 1996. The association among permanent tattoos, sociodemographic factors, and high-risk behaviors was evaluated using bivariate and logistic regression analyses using

SUDAAN. Results. Of the total sample of youths, 4.5% reported having permanent tattoos. Tattooing was significantly associated with older age, living in a single-parent household, and lower socioeconomic status but was not significantly associated with gender, ethnicity, or neighborhood type. Tattooing was strongly associated with peer substance use. Adjusting for sociodemographic factors and peer substance use, tattooing in adolescents was independently and significantly associated with reported sexual intercourse, substance use, violent behaviors, and school problems. Conclusion. Permanent tattoos are strongly associated with high-risk behaviors among adolescents. In the clinical setting, the presence of a tattoo noted during clinical examination of an adolescent should prompt in-depth assessment for a variety of high-risk behaviors. Copyright 2002, American Academy of Pediatrics.

Tobacco, alcohol, and illicit drug use: Racial and ethnic differences among US high school seniors, 1976-2000.

Wallace JM Jr; Bachman JG; O'Malley PM; Johnston LD; Schulenberg JE; Cooper SM. *Public Health Reports* 117(3 Supplement): S67-S75, 2002. (19 refs.)

Objective: This study examines differences in adolescents' use of tobacco, alcohol, and illicit drugs by racial and ethnic groups. Method: The authors analyzed questionnaire data from large, nationally representative samples of U.S. high school seniors to examine differences in drug use prevalence and trends among racial and ethnic groups between 1976 and 2000. Results: On average, American Indian seniors showed the highest levels of tobacco, alcohol, and illicit drug use. Cuban American and white seniors also tended to have relatively high levels of

substance use, followed by Mexican American and Puerto Rican seniors. Other Latin American, African American, and Asian American seniors reported the lowest levels of drug use. Most of these differences are longstanding, but some have widened and others narrowed during the past 25 years. Conclusions: Significant differences exist in adolescent use of tobacco, alcohol, and illicit drugs by racial and ethnic groups, and these differences have changed overtime. Future research should examine these differences and seek to identify the sources and consequences of the disparities. Public Domain.

Availability of cigarettes as a risk factor for trial smoking in adolescents.

Woodruff SI; Candelaria JI; Laniado-Laborin R; Sallis JF; Villaseñor A. *American Journal of Health Behavior* 27(1): 84-88, 2003. (22 refs.)

Objectives: To examine associations between cigarette availability measures with trial (ie, first) use of cigarettes. Methods: At Time 1 and one year later (Time 2), 478 adolescents completed smoking surveys. Trial smoking at Time 2 was predicted from Time 1 availability variables (prospective prediction), as well as Time 2 availability variables (cross-sectional prediction). Results: Offers from friends/classmates were a significant cross-sectional predictor. In prospective analyses, greater perceptions of ease of obtaining cigarettes from parents and greater frequency of offers from an adult were related to trial smoking. Conclusions: Adult influences, including parental factors, may predispose a young adolescent to smoke. Copyright 2003, CB Slack, Inc.