

# *Substance Use Prevention for Young Adults and Higher Education*

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**NASADAD Annual Meeting  
May 25, 2017  
Indianapolis, IN**



# Objectives

- Describe the current and changing landscape of prevention in 2017 and beyond
- Explore challenges of shifting laws and attitudes related to marijuana and underage alcohol use, as well as the opioid crisis as it relates to 18-25 year olds
- Highlight funding and resources provided through SAMHSA/CSAP

# Why Focus on Young Adults (16-25 age group)

## → ***Brain Development & First Use/Onset***

- Until age 21 or so for girls; 25 for boys
- ½ of adult mental illnesses/addictions begin < age 14; ¾ < age 25
- First episode of many serious mental illnesses (e.g., psychosis) occurs in 16-25 year range; time to treatment is years
- If we can prevent a young person from taking a drink before age 25, likelihood of adult alcohol addiction is significantly reduced

## → ***Suicide and Drinking***

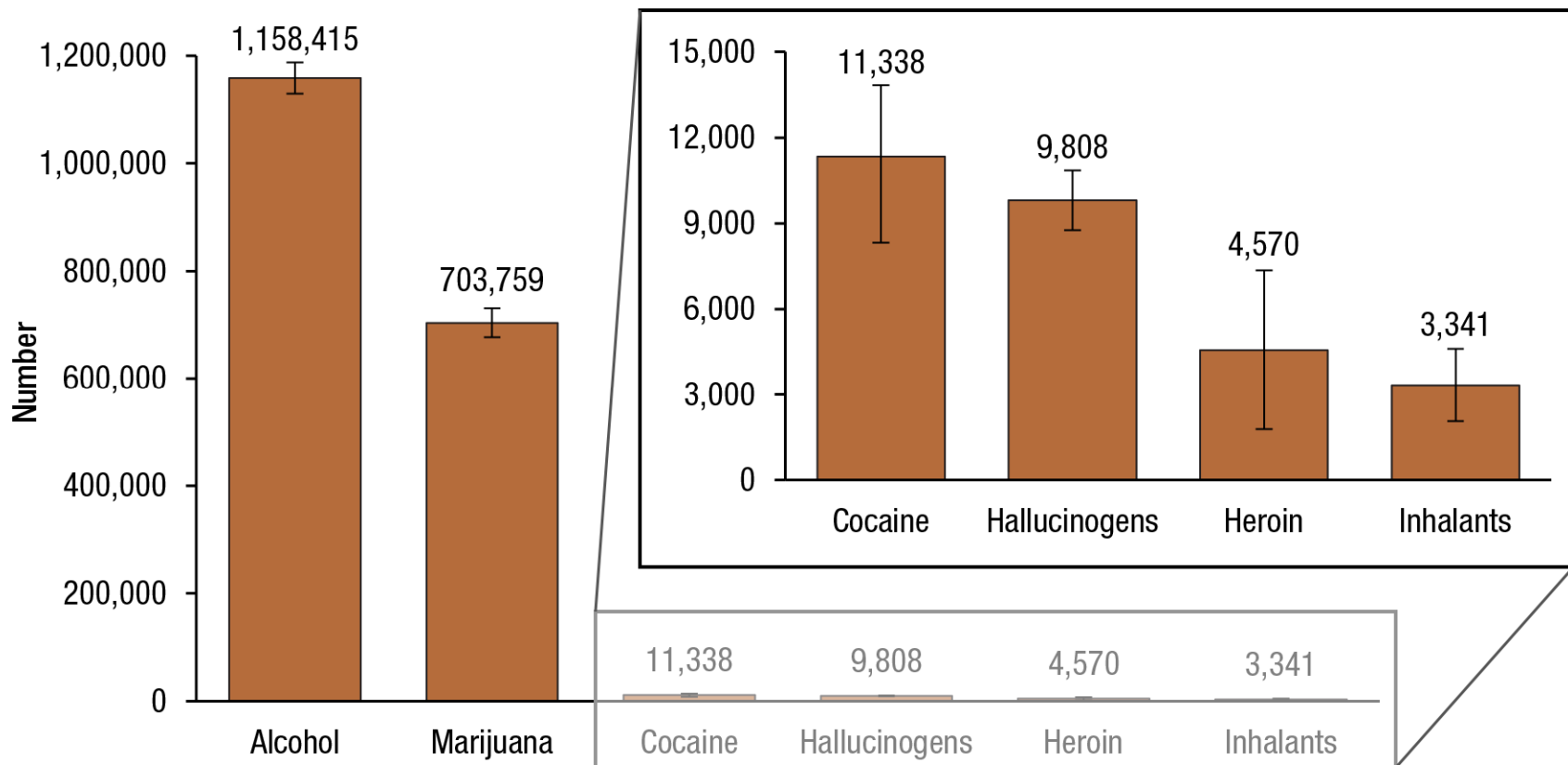
- Suicide is 2nd leading cause of death among 18-25 year olds
- Strong relationship between suicidal behavior and substance use
- Highest binge/heavy ***drinking & non-med prescription drug use***
- Often have lowest level of help-seeking

# Young Adults

## Aged 18 to 25 – News is not so good.

- Marijuana use ↑ from 2002; flat since 2010
- Psychotherapeutic drugs and cocaine use ↓
- Heavy and binge drinking high or ↑'g

# Number of Full-Time College Students, 18-22, Who Used Alcohol or Illicit Drugs on an Average Day

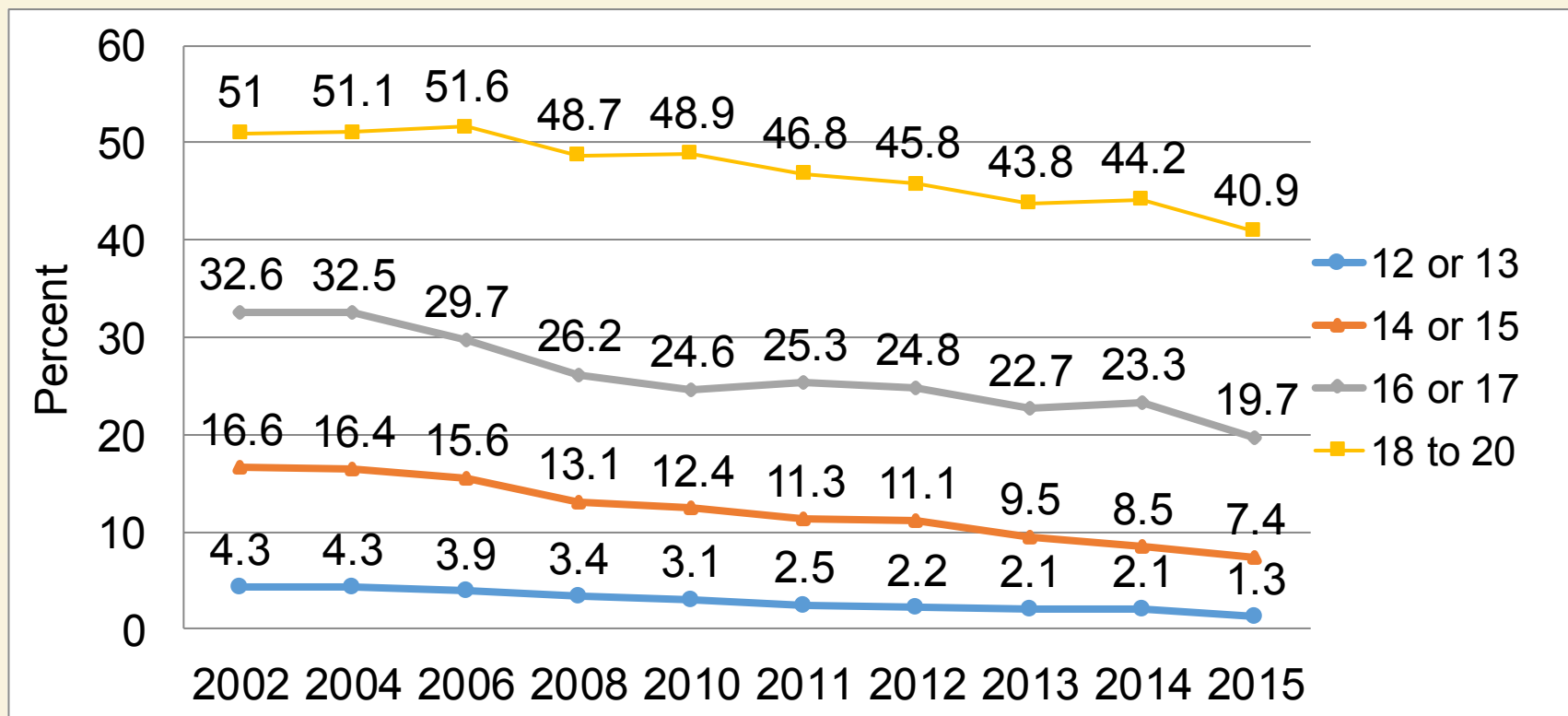


Note: Annual averages based on combined 2011 to 2014 data. Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health, 2011 and 2014.

# *Alcohol Use*

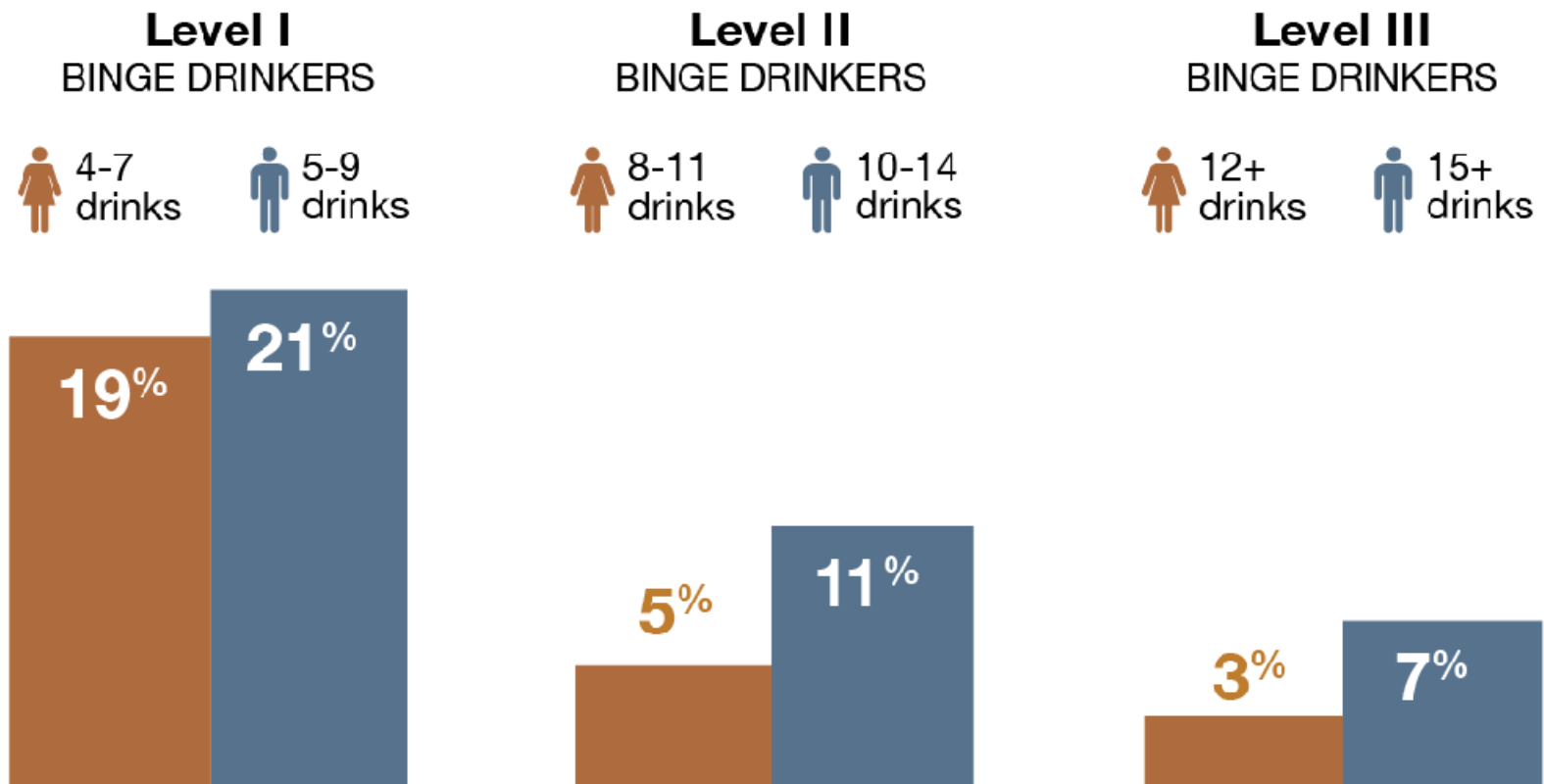
# Trends in Alcohol Use among Youth and Young Adults

- Past-month alcohol use by 12- to 20-year-olds



Center for Behavioral Health Statistics and Quality (2016). *2015 National Survey on Drug Use and Health: Detailed Tables.*

# Percentage of adults surveyed who reported binge drinking at least once in the previous year (2012–2013)



Source: Hingson, R. W., Zha, W., and White, A. M. (2017). Drinking beyond the binge threshold: Predictors, consequences, and changes in the U.S. *American Journal of Preventive Medicine*. Retrieved from <http://dx.doi.org/10.1016/j.amepre.2017.02.014>



# Binge Drinking and Emergency Visits

## Level I\* BINGE DRINKERS

 4-7 drinks     5-9 drinks



**13<sub>x</sub>**

more likely to have an  
**alcohol-related emergency**  
department visit than non-binge drinkers

## Level II\* BINGE DRINKERS



 8-11 drinks     10-14 drinks

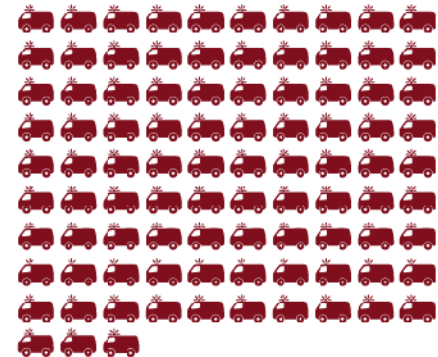


**70<sub>x</sub>**

more likely to have an  
**alcohol-related emergency**  
department visit than non-binge drinkers

## Level III\* BINGE DRINKERS

 12+ drinks     15+ drinks



**93<sub>x</sub>**

more likely to have an  
**alcohol-related emergency**  
department visit than non-binge drinkers

\*Number of Drinks on a Single Occasion

Source: Hingson, R. W., Zha, W., and White, A. M. (2017). Drinking beyond the binge threshold: Predictors, consequences, and changes in the U.S. *American Journal of Preventive Medicine*. Retrieved from <http://dx.doi.org/10.1016/j.amepre.2017.02.014>

# Risks for Alcohol Use Among College Students

- **Development**—transition from adolescence
- **Expectations**—facilitate social activities
- **Beliefs**—common and acceptable
- **Alcohol-centered culture**—extreme partying
- **Prior use**—drinking problems, DUI, injuries
- **Availability**—increased binge drinking
- **Mental health issues**—untreated issues



# Focusing on First-Year College Students

## Reduced Alcohol Use and Related Problems



- Routine screening
- Brief interventions
- Personalized feedback
- Challenging expectations
- Student goal-setting
- Protective behavioral strategies

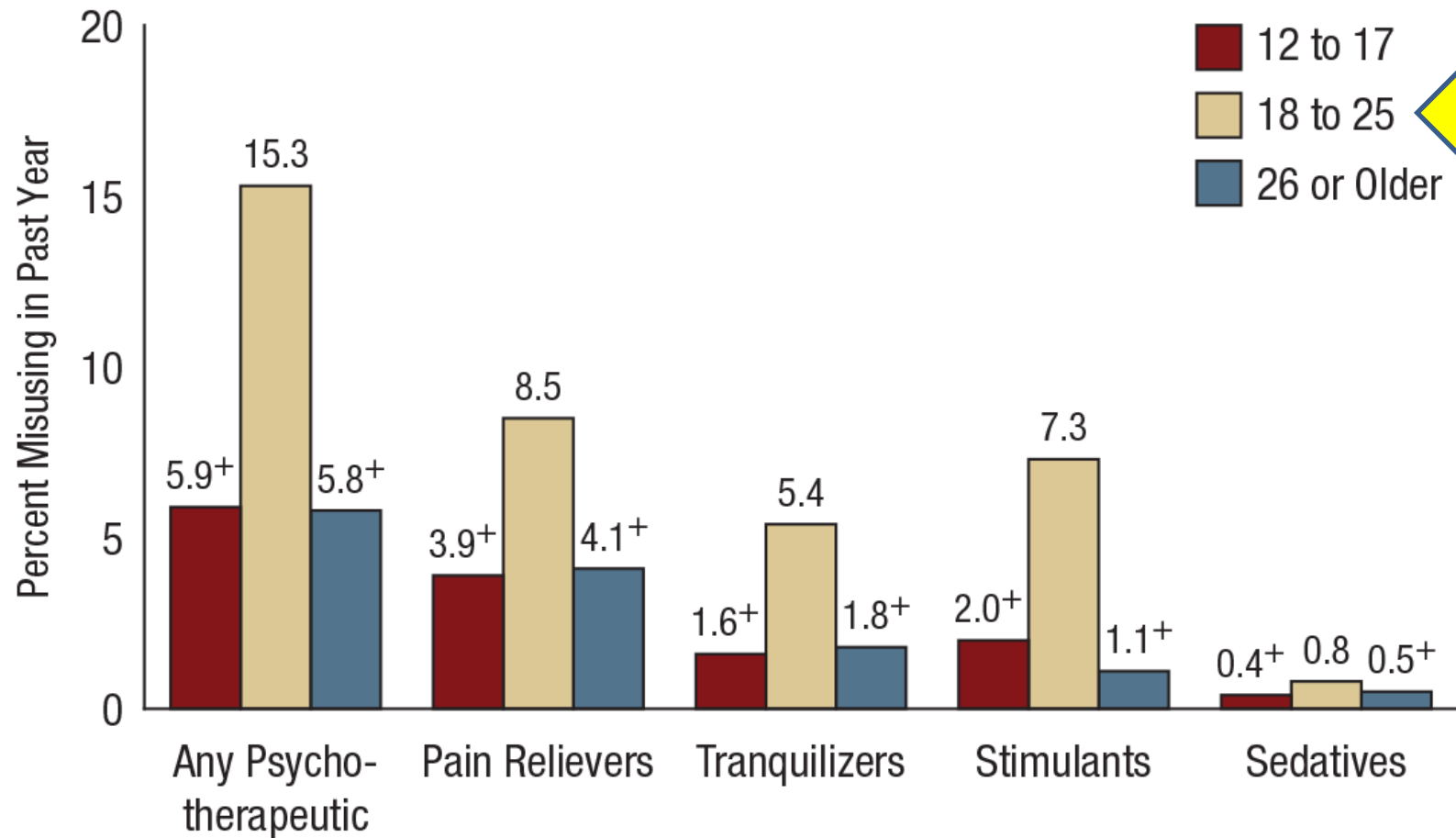
*Prescription Opioids,  
Heroin, and  
Marijuana*

# Prescription Opioids and Heroin: Public Health Challenge

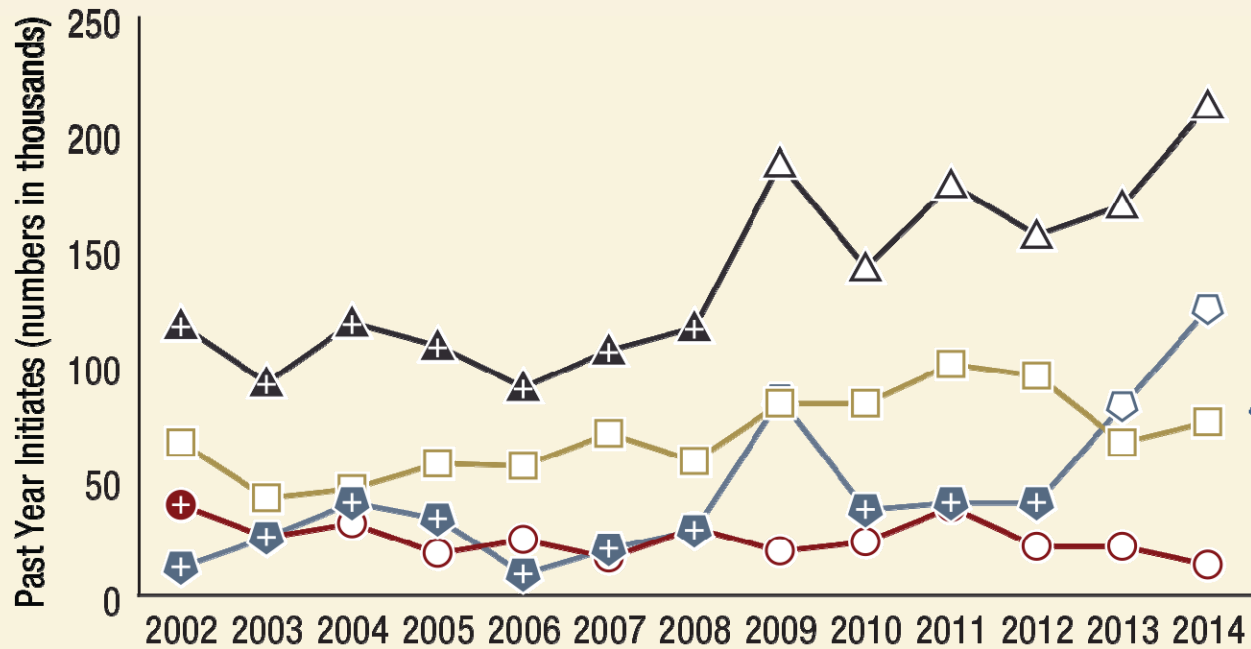
In 2015, 2 million people had a pain reliever use disorder and nearly 600,000 had a heroin use disorder. The national data on overdose deaths are startling: in 2015, there were 33,091 (in 2014 - 28,647) overdose deaths involving prescription opioid medications and/or heroin.

***91 Americans die every day  
from an opioid overdose.***

# Past Year Misuse of Prescription Psychotherapeutics Aged 12 or Older, by Drug Type and Age Group, NSDUH 2015



# Past Year Heroin Initiates among People Aged 12 or Older, by Age Group: 2002-2014

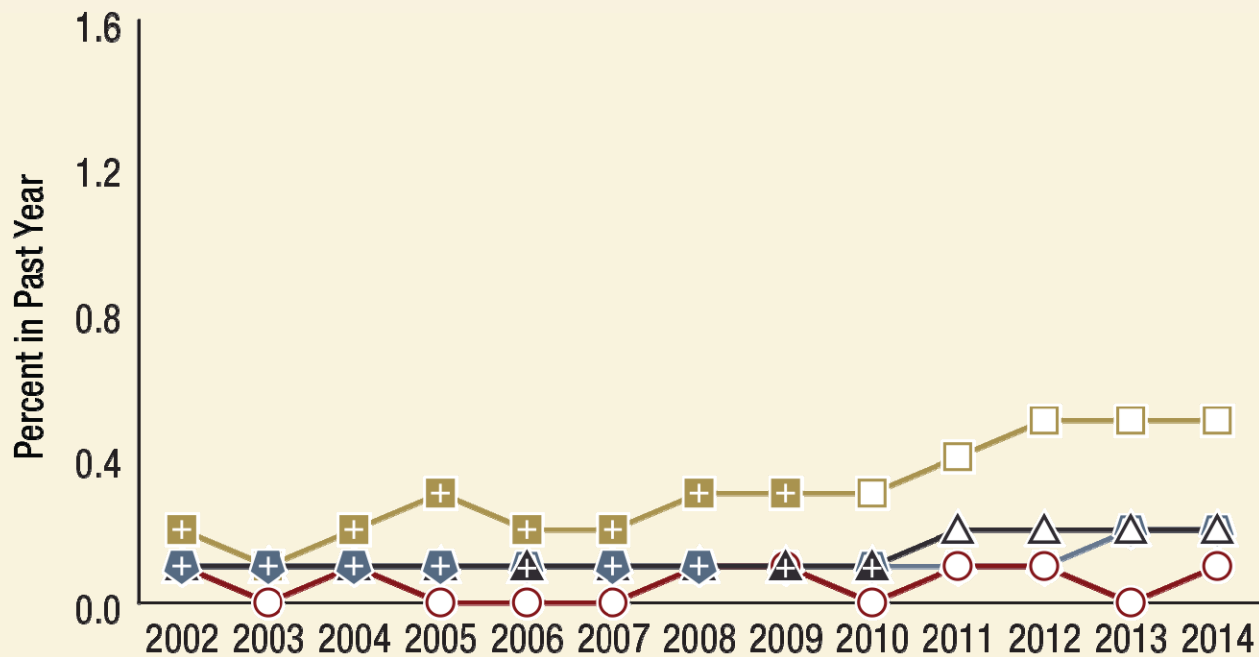


—△— 12 or Older   
 —○— 12 to 17   
 —□— 18 to 25   
 —⬠— 26 or Older

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
12 or Older	117 <sup>+</sup>	92 <sup>+</sup>	118 <sup>+</sup>	108 <sup>+</sup>	90 <sup>+</sup>	106 <sup>+</sup>	116 <sup>+</sup>	187	142	178	156	169	212
12 to 17	39 <sup>+</sup>	25	31	18	24	16	29	19	23	38 <sup>+</sup>	21	21	13
18 to 25	66	42	46	57	56	70	58	83	83	100	95	66	75
26 or Older	12 <sup>+</sup>	25 <sup>+</sup>	40 <sup>+</sup>	33 <sup>+</sup>	9 <sup>+</sup>	20 <sup>+</sup>	28 <sup>+</sup>	85	37 <sup>+</sup>	40 <sup>+</sup>	40 <sup>+</sup>	82	124
Mean Age at First Use	21.0 <sup>+</sup>	20.9 <sup>+</sup>	24.4	22.2 <sup>+</sup>	20.7 <sup>+</sup>	21.8 <sup>+</sup>	23.5	25.3	21.4 <sup>+</sup>	22.1 <sup>+</sup>	23.0 <sup>+</sup>	24.5	28.0

+ Difference between this estimate and the 2014 estimate is statistically significant at the .05 level.

# Heroin Use Disorder in the Past Year among People Aged 12 or Older, by Age Group: 2002-2014



△ 12 or Older   
 ○ 12 to 17   
 □ 18 to 25   
 ⬠ 26 or Older

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
12 or Older	0.1+	0.1+	0.1+	0.1+	0.1+	0.1+	0.1+	0.1+	0.1+	0.2	0.2	0.2	0.2
12 to 17	0.1	0.0	0.1	0.0	0.0	0.0	0.1	0.1	0.0	0.1	0.1	0.0	0.1
18 to 25	0.2+	0.1+	0.2+	0.3+	0.2+	0.2+	0.3+	0.3+	0.3	0.4	0.5	0.5	0.5
26 or Older	0.1+	0.1+	0.1+	0.1+	0.1	0.1+	0.1+	0.1	0.1	0.1	0.1	0.2	0.2

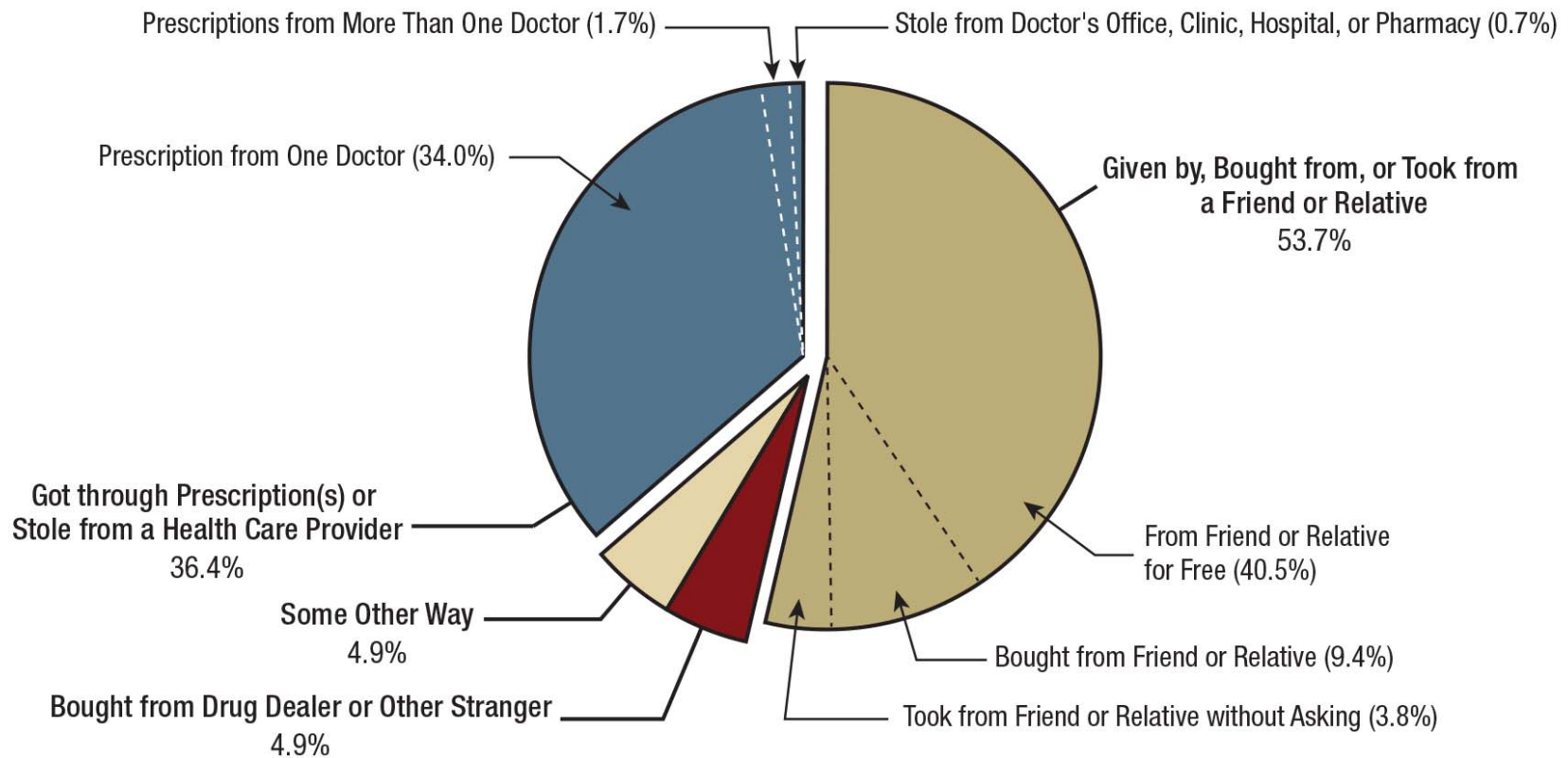
+ Difference between this estimate and the 2014 estimate is statistically significant at the .05 level.



# Uninsured Adults with Opioid Addiction

- Nearly 441,000 or 1 in 5 non-elderly adults with opioid addiction were uninsured in 2015.
- **Uninsured non-elderly adults with opioid addiction are predominantly white, male, and age 18-34 (62 percent).**
- Over 6 in 10 uninsured non-elderly adults with opioid addiction are working, but 58 percent have low incomes, including 37 percent below poverty.
- Over 4 out of 5 non-elderly uninsured adults with opioid addiction do not have dependent children.
- Over half of uninsured non-elderly adults with opioid addiction had a mental illness in the past year and over 1 in 5 had a serious mental illness, such as depression, bipolar disorder, or schizophrenia.

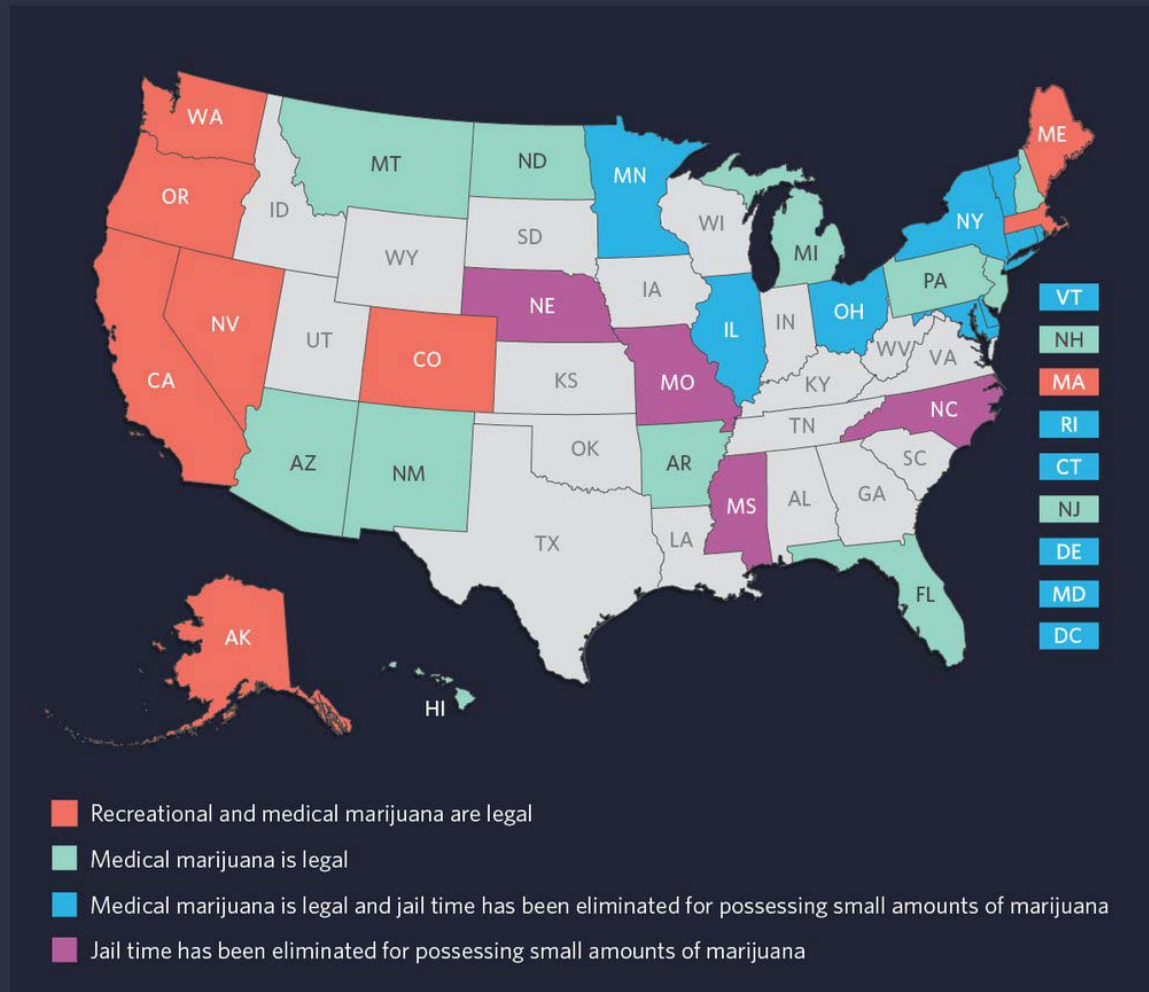
# Source Where Pain Relievers Were Obtained for Most Recent Misuse among People Aged 12 or Older Who Misused Prescription Pain Relievers in the Past Year: Percentages, 2015



12.5 Million People Aged 12 or Older Who Misused Pain Relievers in the Past Year

## Where Marijuana is Legal

Eight states have legalized recreational and medical marijuana. Twenty-one other states have legalized marijuana for medical use only.



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# Marijuana

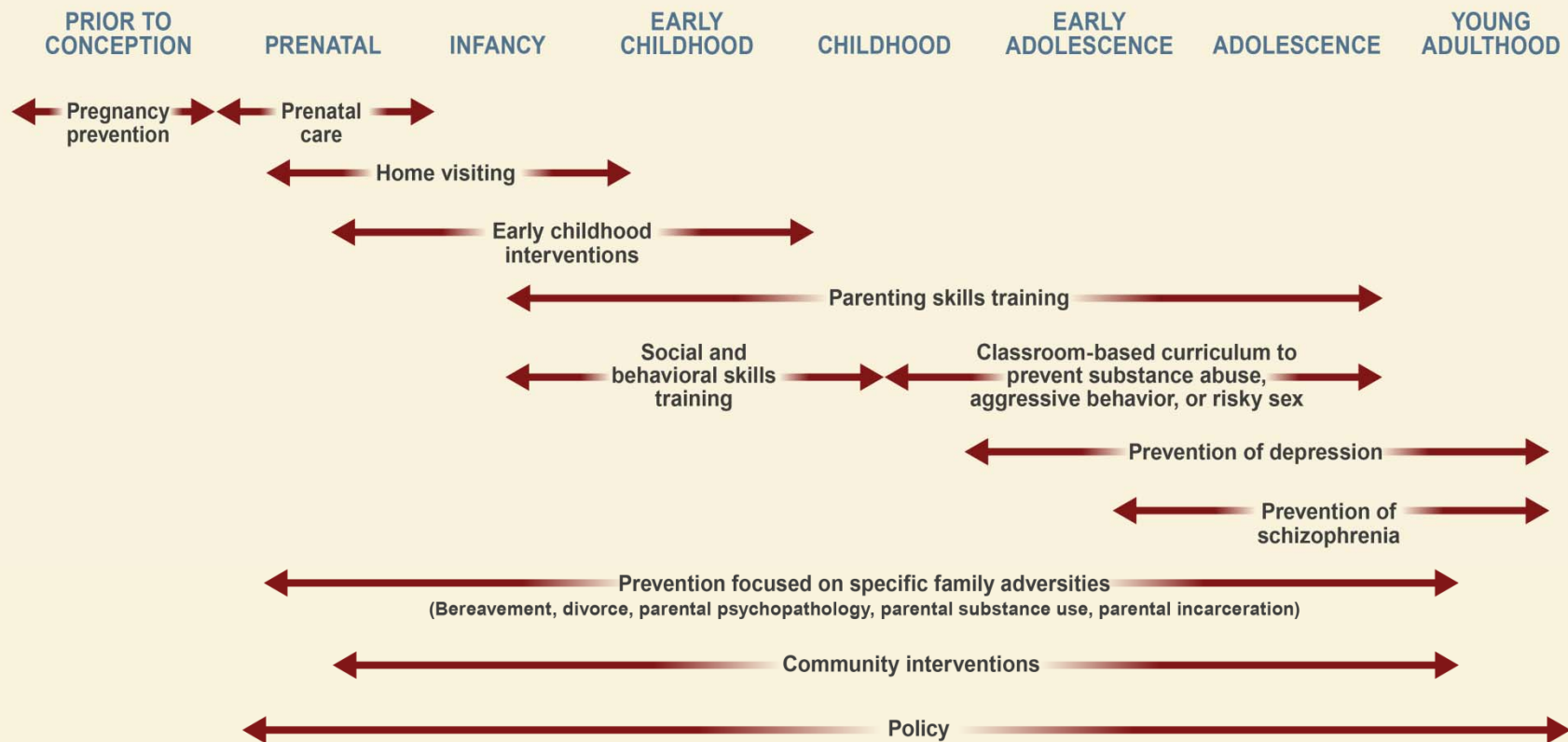
## Changing Landscape

*Where do we go  
from here?*

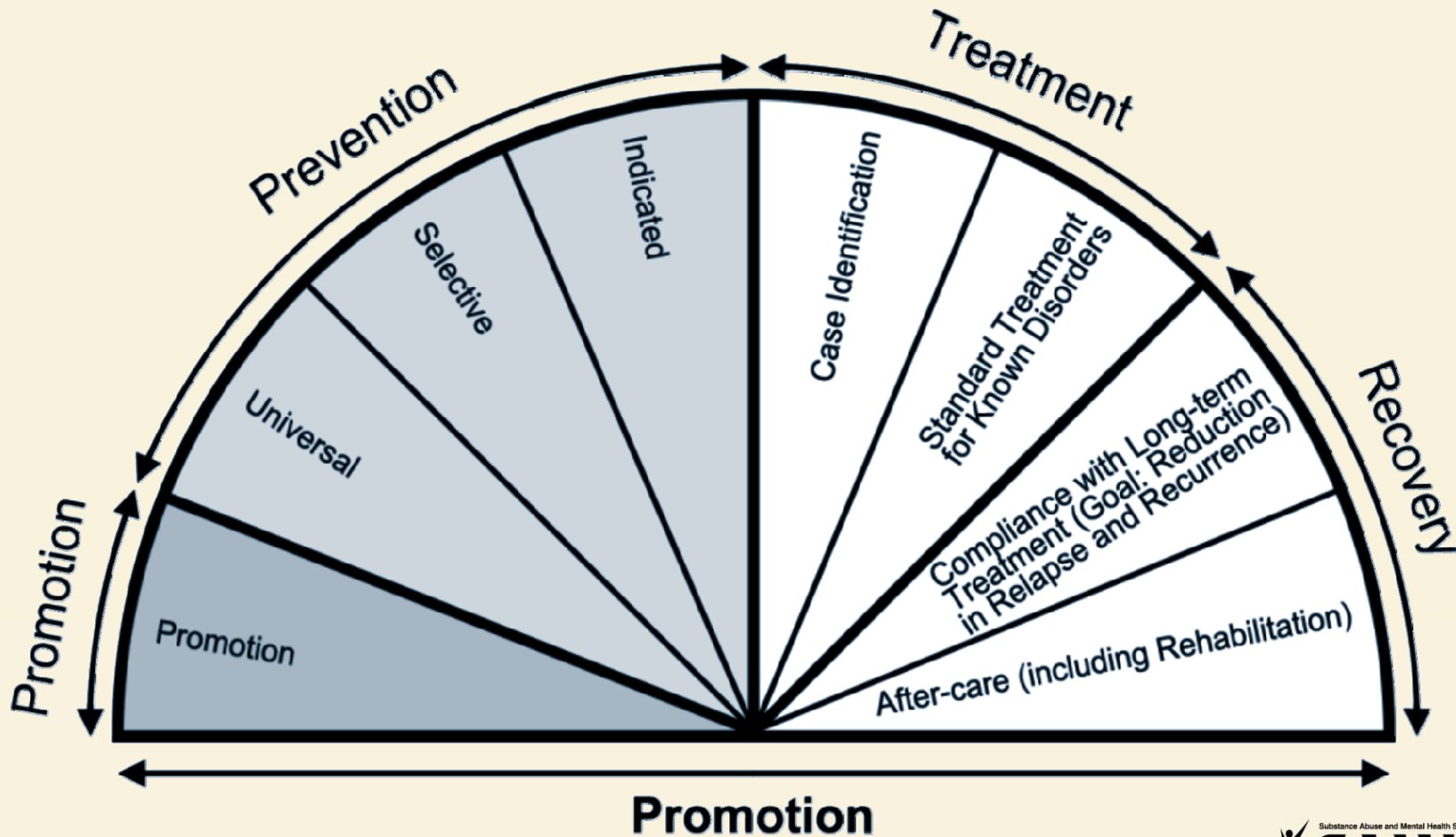
# Prevention Through Young Adulthood

## INTERVENTIONS BY DEVELOPMENTAL PHASE

Interventions and Their Targeted Developmental Stages



# Behavioral Health Continuum of Care



# *Resources*

# Surgeon General's Report



## FACING ADDICTION IN AMERICA

*The Surgeon General's Report on  
Alcohol, Drugs, and Health*

U.S. Department of Health & Human Services

*Everyone has a role to play  
in addressing substance  
misuse and substance use  
disorders and in changing  
the conversation around  
substance use, to improve  
the health, safety, and well-  
being of individuals and  
communities across  
our nation.*



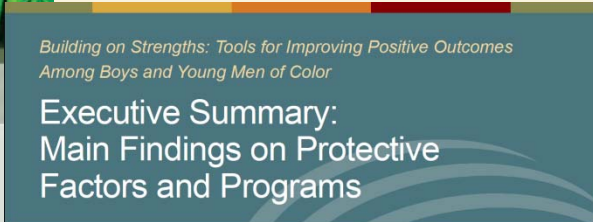
# Evidence-Based Prevention Tools

## ***Preventing:***

- Youth Marijuana Use
- Binge Drinking
- Non-medical Use of Prescription Drugs

## ***Building on Strengths:***

- Improving Positive Outcomes Among Boys and Young Men of Color



# Opioid Resources

## SAMHSA Opioid Overdose Prevention TOOLKIT:

- Facts for Community Members
- Five Essential Steps for First Responders
- Information for Prescribers
- Safety Advice for Patients & Family Members
- Recovering From Opioid Overdose



## SAMHSA Funded Free Courses



**OpioidPrescribing.com**

Safe & Effective Opioid Prescribing for Chronic Pain



Overview

Accreditation

Needs Assessment

Faculty

Resources

Contact Us

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### Safe and Effective Opioid Prescribing for Chronic Pain

Excessive or inappropriate use of opiates in the treatment of pain is a major national problem in the delivery of healthcare. Opioids are both underprescribed and overprescribed. Prescribing clinicians need training in effective communication skills as well as an understanding of when and how to prescribe opioids.

In addition to the specialists who frequently prescribe opioids (pain specialists, orthopedists, rheumatologists), primary care clinicians have increasingly taken on the burden of managing pain effectively. Safe and Effective Opioid Prescribing for Chronic Pain offers clinicians necessary education in how to work with their patients who are living with chronic pain – how to define chronic pain, how to manage its treatment, the tools available to assess pain and the risk involved in prescribing opioids, and how to discontinue treatment if necessary.

Register for New Account

REGISTER

## Providers' Clinical Support System



The screenshot shows the homepage of the Providers' Clinical Support System (PCSS-O). The page features a navigation menu with options like 'TRAINING', 'About', 'Education & Training', 'Colleague Support', 'Resources', and 'Contact'. The main heading is 'Providers' Clinical Support System' with a sub-heading 'For Opioid Therapies'. Below this, there is a 'What We Do' section with a 'LEARN MORE' button. A large image shows a group of healthcare professionals. At the bottom, there are three main sections: 'View Modules', 'Find a Mentor', and 'Watch Webinars', each with a brief description of the service.

## Prescription Drug Monitoring Programs



# Higher Education Resources

## Sound of Your Voice



### TALKING WITH YOUR COLLEGE-BOUND YOUNG ADULT ABOUT ALCOHOL

Students preparing to attend college have already taken several steps toward independence. Deciding where to go to college, what career path to pursue, and how to finance an advanced education are all choices in learning how to be an adult. But they are not there yet. Young adults still need and value their parents' guidance as they make decisions about their future. One of these decisions will be about alcohol use at college—and parents represent the best source of advice on the issue.

Talk with your young adult about avoiding underage drinking, even if you suspect alcohol use during high school. Research suggests that teens who talked with their parents about alcohol avoidance strategies before they began their first year of college were more likely to avoid alcohol, limit its use, and spend less time with heavy-drinking peers.<sup>1</sup>

**Alcohol avoidance can help a student keep academic plans on track; alcohol use can disrupt a future.**

**TRANSITIONING TO COLLEGE**

College can overwhelm new students as they deal with changing social and academic expectations and the responsibilities that come with being on their own. It can be so challenging that about one-third of first-year students fail to enroll for their second year.<sup>2</sup>

Some students may use alcohol as a way to cope with college pressures. They also might believe that alcohol use is common and socially expected among their new friends, and drink to fit in. Students, however, tend to significantly overestimate how often their fellow students use alcohol.<sup>3</sup>

Due to these and other reasons, your young adult is entering an environment where alcohol use among 18- to 20-year-olds excites dramatically. Overall, full-time first-year students tend to drink more than their peers who do not attend college—and suffer significantly more alcohol-related consequences.<sup>4</sup>

**New students appear most likely to initiate or increase alcohol use during their first six weeks of college.**

**STARTING THE CONVERSATION**

In talking with your young adult about alcohol, look for opportunities to raise the topic naturally. Discussions about majors and course selection can lead to a conversation about the ways in which alcohol use can disrupt academic success and career options. Housing selection can generate a discussion about whether substance-free residence halls are an option. Discuss ways to handle situations where alcohol use by other students might create a problem, such as interrupted study time or unwanted sexual advances. As you tour the campus area, note how many alcohol outlets are in the community.

Emphasize that no matter where alcohol is available, underage drinking represents a risk and a choice that has consequences. Become familiar with the school's alcohol use policy together.

- Does the school have different sanctions for student athletes and those depending on scholarship?
- Does the school require new students to complete an online course in alcohol use prior to arriving on campus?
- How might eviction from a residence hall, being released from a team, or loss of a scholarship affect your young adult's ability to remain in school?

Many colleges and universities are aware that communication between parents and students can support academic success. Contact the college your young adult will be attending for materials that offer tips on maintaining contact with students or talking about alcohol.

**CONVERSATION GOALS:**

- Emphasize how underage drinking can undermine health, safety, and academic achievements.
- Make your no-alcohol use position clear.
- Demonstrate your willingness to help find constructive alternatives to drinking.

LEARN ABOUT COLLEGE ALCOHOL POLICIES AT [WWW.COLLEGEDRINKINGPREVENTION.GOV](http://WWW.COLLEGEDRINKINGPREVENTION.GOV)



## College Video Series

# Questions and Discussion

