

Identifying **TRAUMA & SUBSTANCE ABUSE** in Adolescents

A PARTNER IN
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Fact Sheet Series for **CLINICIANS** treating teens with **EMOTIONAL & SUBSTANCE USE PROBLEMS**

It is estimated that approximately 25% of children and adolescents will have experienced at least one traumatic event by the age of 16 (Costello, 2002). Studies have shown that experiencing trauma at an early age increases the risk of substance abuse later in life. In addition, adolescents who abuse substances are at a significantly higher risk for experiencing trauma and developing Post-Traumatic Stress Disorder. Teens experiencing both traumatic stress and substance abuse problems also suffer greater impairments in psychological, social, physical, and academic functioning (Giaconia et.al., 2000).

Despite the importance of early identification of these problems, the **signs and symptoms** of trauma and substance abuse can often be hard to spot, especially amidst the turbulent lives of teenagers today.

Defining Trauma & Substance Abuse:

Traumatic stress problems among teens can be characterized by any number of experiences that cause significant anxiety or distress. These may include experiencing, witnessing, or being confronted with physical, verbal, and emotional abuse or other event that involved actual or threatened death or serious injury to the youth or someone else. The reaction of youth experiencing traumatic stress is often characterized by intense fear, helplessness, or horror. Types of trauma may include community violence, domestic violence, medical trauma, natural or man-made disasters, neglect, physical abuse, psychological maltreatment, school violence, sexual abuse, and terrorism. (APA, 2000; NCTSN, 2005).

Problems with use of alcohol and other drugs can be defined in a number of ways, depending on the amount of consumption and the level of impact on functioning. *Substance abuse* is the use of drugs in a manner that is illegal or harmful to oneself and causes significant adverse consequences, such as accidents or injuries, blackouts, legal problems and risky sexual behavior. *Substance dependence* involves continued substance abuse despite significant substance-related problems, and usually includes tolerance of the drug (requiring higher doses to achieve the same effect) as well as withdrawal (symptoms experienced when use of the drug is discontinued). (APA, 2000; NIDA, 2005)

Symptoms:

Adolescents with trauma histories can experience a number of symptoms clustered into three broad categories:

- 1) Re-experiencing the traumatic event through intrusive thoughts or dreams of the event, or intense psychological distress when exposed to reminders of the event
- 2) Persistent avoidance of thoughts, feelings, images, or locations that remind the adolescent of or are associated with the traumatic event
- 3) Increased arousal, such as hypervigilance, irritability, exaggerated startle response and sleeping difficulties (APA, 2000)

Adolescents who are using substances may exhibit symptoms such as:

- 1) Failing to fulfill major obligations at work, home, or school, or use of substances when it is physically hazardous
- 2) Legal, social, or interpersonal problems
- 3) Severe substance abuse can warrant a diagnosis of substance dependence. This occurs if substance use leads to tolerance, withdrawal symptoms, problems cutting down on consumption and other major difficulties (APA, 2000)

The Signs of Trauma and Substance Abuse

It is not uncommon for teens that have experienced traumatic events to turn to alcohol or drugs to cope with the symptoms of PTSD. Teenagers may find that initially alcohol and/or drugs seem to alleviate their distress, either through the increased pleasurable sensations or through the avoidance of intense emotions that may follow stressful experiences. In the long run, however, substance use perpetuates a cycle of avoidance and can make it more difficult to recover.

Traumatic stress problems can often involve:

- Loss of trust
- Fear of the event occurring again
- Flashbacks and nightmares
- Avoidance of things that remind the adolescent of the event
- Dissociation or feelings of unreality
- Depression, guilt, and loss of interest in activities
- Problems with or changes in peers
- Disruptive behavior
- Withdrawal and isolation from others
- School avoidance
- Physical complaints
- Suicidal thoughts
- Decline in academic performance
- Sleep disturbances
- *Substance use*
(APA, 2000, NCTSN, 2005, Strand et al., 2005)

Substance use problems can often involve

- Frequent intoxication, often noticeable to others
- Change in peer group or not introducing peers to parents
- School avoidance
- Decline in academic performance
- Dropping out of activities
- Rapid changes in mood or hostile outbursts
- Secretive behavior such as sneaking out, lying, and locking doors
- Disruptive behavior
- Depression
- Anxiousness
- Difficulty sleeping
- Change in physical appearance or poor hygiene
(APA, 2000; NIDA, 2005, Hawkins et al., 1992).

As you can see, many of the signs of trauma and the signs of substance abuse are similar to problems that are part of the natural developmental course of adolescence. For this reason, it may be hard to recognize these problems early. What is evident about this group of teenagers, however, is that they often experience a lot of distress and need considerable help. Proper assessment of trauma and substance abuse is critical in order to provide adequate care.

Treating Trauma & Substance Abuse:

Interventions designed to target multiple maladaptive behaviors resulting from trauma and substance abuse will be most effective. Treatment of adolescents with traumatic stress and substance abuse begins by properly recognizing and identifying the problem. A complete inventory of an adolescent's specific problem behaviors as well as signs and symptoms of trauma and substance abuse should be incorporated into an individualized treatment plan when administering psychological services.

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