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Substance Abuse and the Functioning of Transition-Aged Youth with Psychiatric Disorders

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Substance Abuse and the Functioning of Transition-Aged Youth with Psychiatric Disorders

Maryann Davis, Valerie Williams, Bernice Fernandes

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Department of Psychiatry
University of Massachusetts Medical School

Study funded through contract with the MA Department of Mental Health

Youth with SED Struggle as Adults

- Few Graduate from High School
  23-30% vs. 61% in community vs. 81-93% in general population
- Employment Rates are Low
  46-51% vs. 59% vs. 78-88%
- Greater Risk of Homelessness
  30% vs. 7% in general population
- Higher Pregnancy Rates in Women
  38-50% vs. 38% vs. 14-17%
- Higher Arrest Rates
  43-64% arrested, 24% trouble, 11-30% non SED/PD

Trapping Different Populations

- Service-based sampling captures served population and follows functioning regardless of subsequent setting.
- Community-based samples capture unserved and some served children (with families in community) and follows functioning regardless of subsequent setting.
- Comparison suggests on most outcomes community-based sample functioning intermediate though impaired (Vander Stoep et al., 2000)

Comorbidity with Substance Abuse/Dependence

National Comorbidity Survey (NCS)

- Nationally representative cross-sectional mental health survey conducted from 9/90 – 2/92
- Household sample of non-institutionalized, civilian persons aged 15-54 in the 48 contiguous states, including a supplemental sample of student living in campus group housing
- DSM III-R assigned using a modification of the Composite International Diagnostic Interview (UM-CIDI)

Methods

- Analyses used 15 – 25 year olds from the Part II subsample (n=1598)
- Used lifetime prevalence of substance use and psychiatric disorders.
- Used four diagnostic groups: No diagnosis, Substance abuse only, Psychiatric disorder only, and Comorbid.
- Independent variables included: gender, minority status, age, history of physical abuse, geographic region, urbanicity, parental education level, and having been raised by natural mother

Presented at the 17th Annual RTC Conference, Tampa FL, 2/29 – 3/3 2004. For more information, contact Maryann Davis: maryann.davis@umassmed.edu
Diagnostic Group Differences Among NCS Respondents Age 15-25 Years (n=1598)

<table>
<thead>
<tr>
<th></th>
<th>None</th>
<th>Psych Only</th>
<th>SA only</th>
<th>Comorbid</th>
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<tbody>
<tr>
<td>Male Gender</td>
<td>35%</td>
<td>36%</td>
<td>9%</td>
<td>19%</td>
</tr>
<tr>
<td>Non White Race</td>
<td>49%</td>
<td>40%</td>
<td>77%</td>
<td>56%</td>
</tr>
<tr>
<td>Mean Age (SD)</td>
<td>19.4 (3.2)</td>
<td>19.3 (3.2)</td>
<td>21.0 (2.5)</td>
<td>20.9 (2.9)</td>
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<tr>
<td>Physical Abuse History</td>
<td>20%</td>
<td>31%</td>
<td>25%</td>
<td>41%</td>
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* *p<.001 Geographic Region also significantly different (p<.011)

Secondary School Incompletion

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<tr>
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<th>Substance Use Disorder</th>
<th>Gender</th>
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<tbody>
<tr>
<td>No</td>
<td>4%</td>
<td>2%</td>
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<tr>
<td>Yes</td>
<td>12%</td>
<td>4%</td>
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</table>

* *p<.001

Secondary School Incompletion by Diagnostic Group

Currently Not Working

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<th>Gender</th>
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<tbody>
<tr>
<td>No</td>
<td>40%</td>
<td>20%</td>
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<tr>
<td>Yes</td>
<td>30%</td>
<td>20%</td>
<td>Male</td>
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* *p<.001

Not Working by Diagnostic Group

Not Working

Gender x Psychiatric Disorder

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<th>No PD Female</th>
<th>PD Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>40%</td>
<td>20%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Yes</td>
<td>30%</td>
<td>20%</td>
<td>20%</td>
<td>20%</td>
</tr>
</tbody>
</table>

* *p<.001

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Trouble with Police/Law

Gender x Substance Use Disorder

Pregnancy in Females

Pregnancy in Females by Diagnostic Group

Conclusions

Limitations

There are major gender differences in the completion of developmental tasks during the transition to adulthood, particularly in:

- High School Incompletion
- Not Working
- Living with Family
- Trouble with the Law
- (Pregnancy)

It is important for transition studies to examine transition issues for each gender.

Conclusions cont’d

The presence of Substance Use Disorders is significant in understanding young adult outcomes among youth with Psychiatric Disorders; particularly for:

- High School Incompletion
- Positive Engagement
- Living with Family
- Trouble with Police/Law

Less so for not working or pregnancy.
Youth with comorbid SED and Substance Use Disorders are likely to fare much worse during the transition period than youth with either condition alone for most areas of functioning.