SUBSTANCE ABUSE AND HARMFUL BEHAVIOUR

When is a little too much?

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MENTAL HEALTH AND OUR TEENS

- SA – 3rd **worst mental health profile** in the world
- **25% of population** have depression/anxiety
- Teens - similar epidemiological profile
- **60% of SA teens** need **psychological support** (UNICEF)
- **20% of SA teens** will have **depression by 17** years of age
- **75%** of these have a **co-morbid condition**
- **Highest suicide risk group** in SA
- **9.5% of teen deaths** are by suicide

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- **20% of SA teens** have **attempted suicide**

  (higher for PoC)

- Females at higher risk – internalise symptoms more; GBV
- Males externalise more (destructive), higher risk of substances
- ***Adverse Childhood Experiences*** significantly **increase** the risk of anxiety (22%) and depression (21%) (Univ. of Wits/SAMRC)
- Incidence of **Dual Diagnosis** is hard to determine – no reliable data gathering mechanisms

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ALCOHOL

- **Enormous challenge** to youth development
- Age of onset of drinking is **10-13** years of age
- High rate of ***adolescent alcoholism***
- **67% of 11-18** year olds drink
- **60%+** have been **drunk in last month**
- **44% of 14-19** years old **binge drink**
- **Binge drinking** strong part of SA culture

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WHAT IS MODERATE DRINKING IN ADULTS?

- No more than 14 units per week.
- Men under 65 - 2 units/day; Women under 65 – 1 unit/day
- Must be a*lcohol-free* days in between; *spread over 3 days*
- Unit = V (ml) x ABV (Alc. By Volume)
  - ——————————
    - 1000

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EFFECTS ON DEVELOPING BRAIN

Brains at 95% adult **size** at age 6.

Full size by 14 years old (males),

11 years old (females).

Continues to fine-tune until mid-20s.

Substances cause **significant long-term harm**

Alcohol affects **learning, memory, cognition, judgement centres**

Prefrontal Cortex and Hippocampus severely affected

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CANNABIS – IS "NATURAL" ALWAYS GOOD?

- Many myths about cannabis
- Comprises 550+ compounds, 100+ cannabinoids
- **Most commonly abused drug in SA**
- Strong link to **depression, anxiety, mania, psychosis**
- Concern over increased risk of **schizophrenia** in teens
- Age of onset is **11 years old**
- High level of **relapse**

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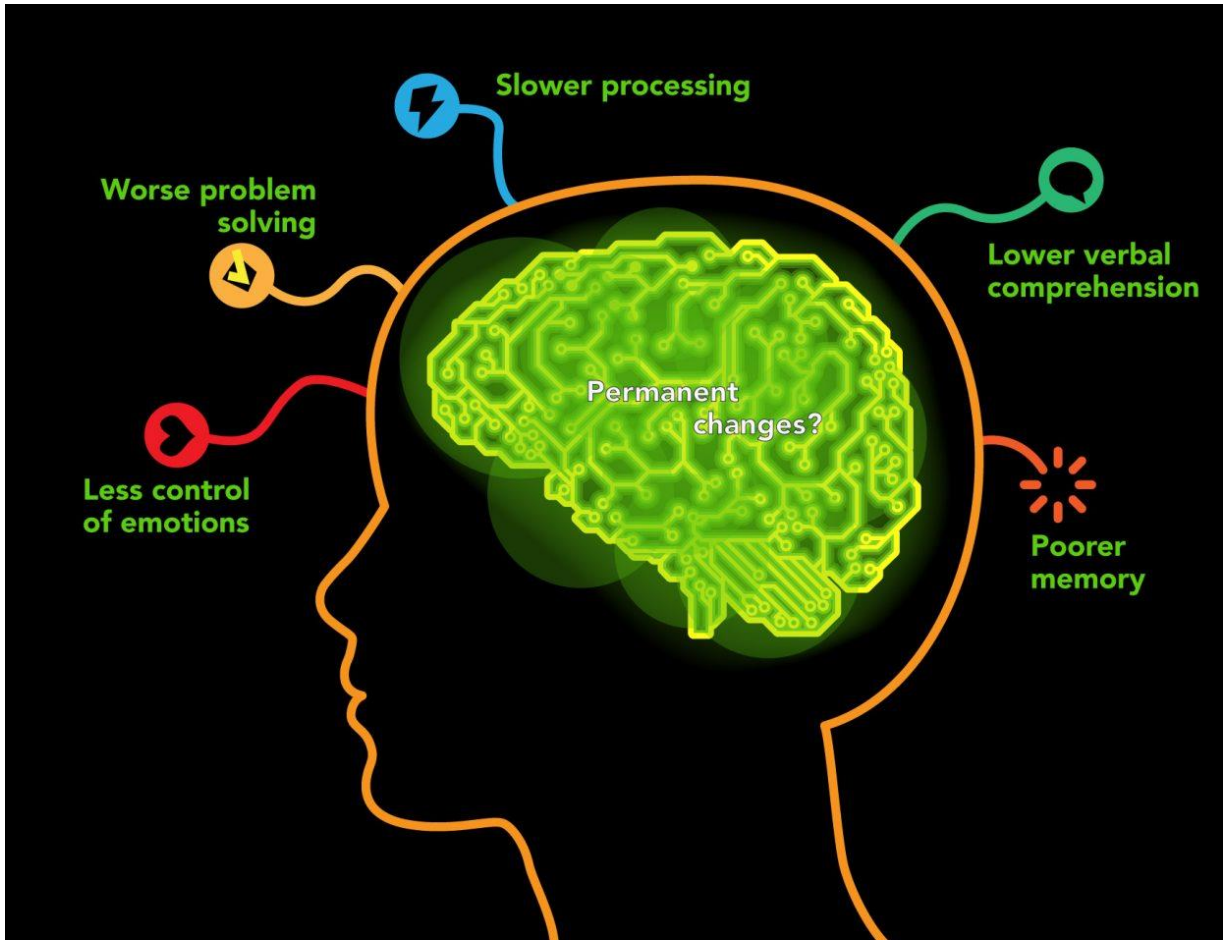
CANNABIS AND THE BRAIN



- **Long-term effects** present despite long abstinence
- **Memory** – verbal and working memory (Hippocampus)
- **Processing speed**
- **Prefrontal cortex** – decision-making, judgement, regulation
- Benefits?
- Chronic pain, spasticity in MS, weight gain in HIV patients
- **Side-effects still significant** (SA Soc of Psychiatry, SAMRC)

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VAPING

- **Increasingly problematic** amongst teens
- **Easy to hide**
- Often used as a **stress-reliever** (41% of teens)
- **Peer/social pressure** plays a huge role
- **Parents often buy it for children/approve of it**
- **11% of Grade 9s** vape
- More than **doubles in Grade 12s**

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VAPING - RISKS

- Often thought of as **harm-reduction/cessation mechanism**
- No reliable data yet about effectiveness as cessation tool
- **Nicotine** present in most combinations
- **Nicotine delivery in vape often higher than cigarette**
- Relapse rates are high, leading to **“dual use”**
- Nicotine linked to higher **cross-addiction** rates in teens

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NICOTINE AND THE BRAIN

- As with all substances affects sensitive areas of the brain
- **Attention**
- **Learning**
- **Memory**

- **Impulse control**
- Increases **long-term anxiety and depression**
- **Short withdrawal/relapse cycle**

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SHISHA/HOOKAH/HUBBLY

- Typical 20-80 minute session = **100 cigarettes/person**
- As damaging as smoking
- Cardon-monoxide poisoning
- CPOD, gum/teeth disease

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AMPHETAMINES / METHAMPHETAMINES

Not as common as once was

Amphetamines – less potent, shorter acting

Methamphetamines – more potent, longer lasting

Ritalin is NOT cocaine.

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STEROIDS – BUFF OR BLOW-OUT?

- Rapid rise in incidence in teen use
- Often linked to **sport**
- **30-45% of school rugby players** use AAS (anabolic-androngergic)
- Up to **79% also use protein/other supplements**
- Pressure to use comes from **internet, media, coaches**
- Prolonged use leads to increase in **aggression, mood dysregulation**
- Affects brain functioning **– learning, memory, cognition, judgement**

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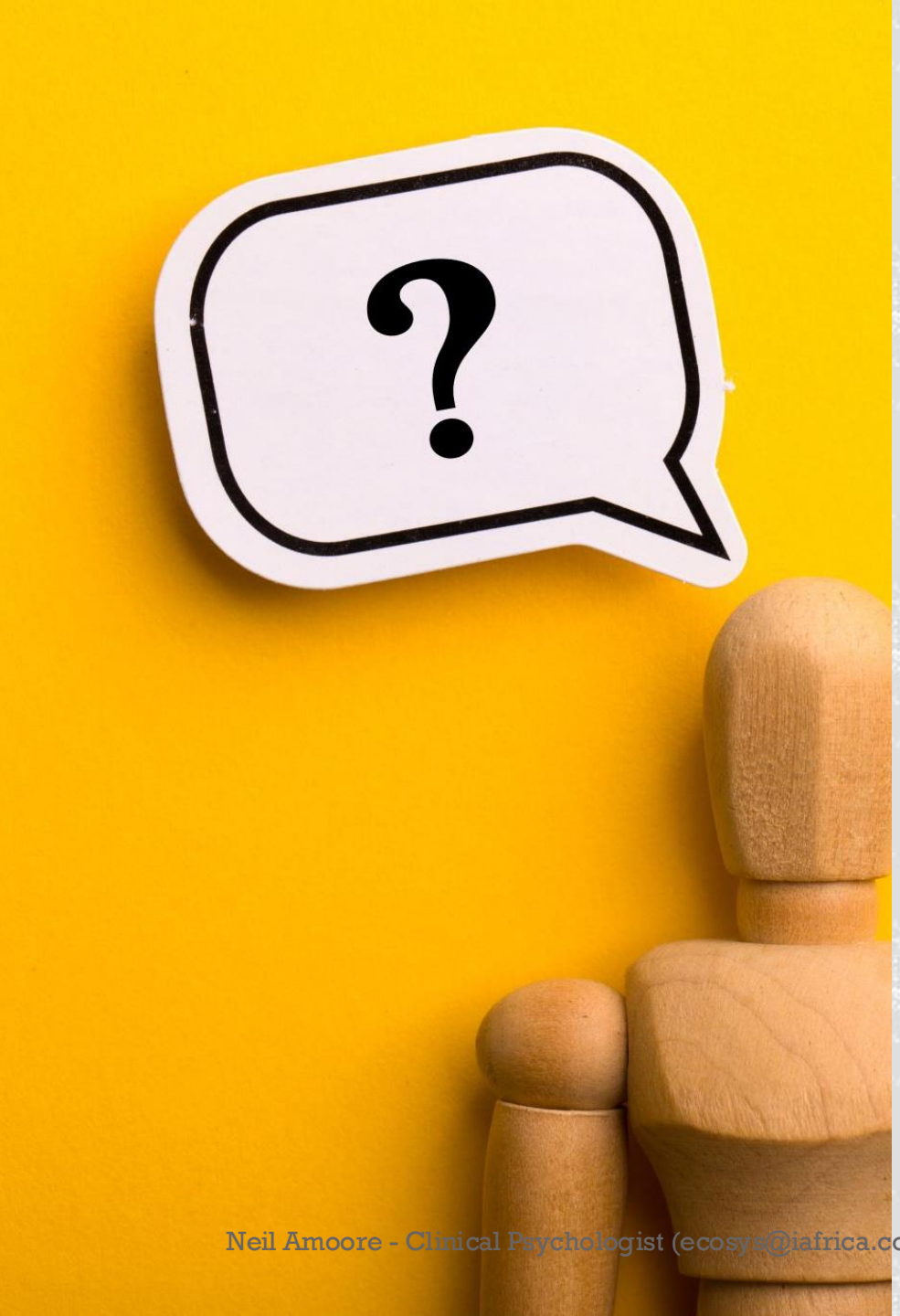

SELF-HARM

- Up to **20% of teens** self-harm at some point
  - "*Harmful way of coping with emotional distress and people often try to hide the behaviour, and feel shame or guilt*" (APA)
- Often seen as an **act of emotional release**
- Causes are diverse, often linked to **existing mental health condition** or **social stressor**
- **Bullying, GBV, loneliness** play strong roles

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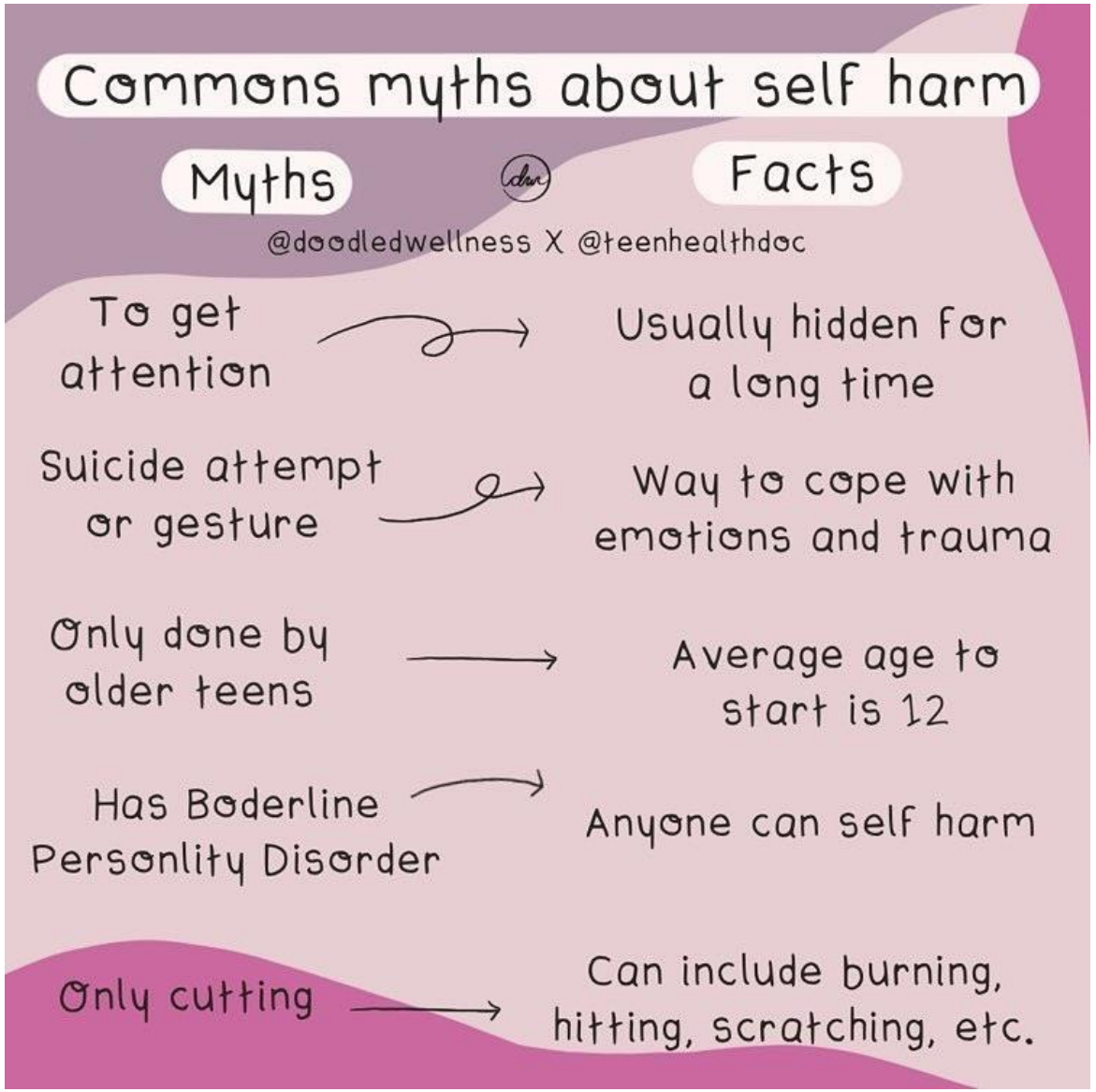
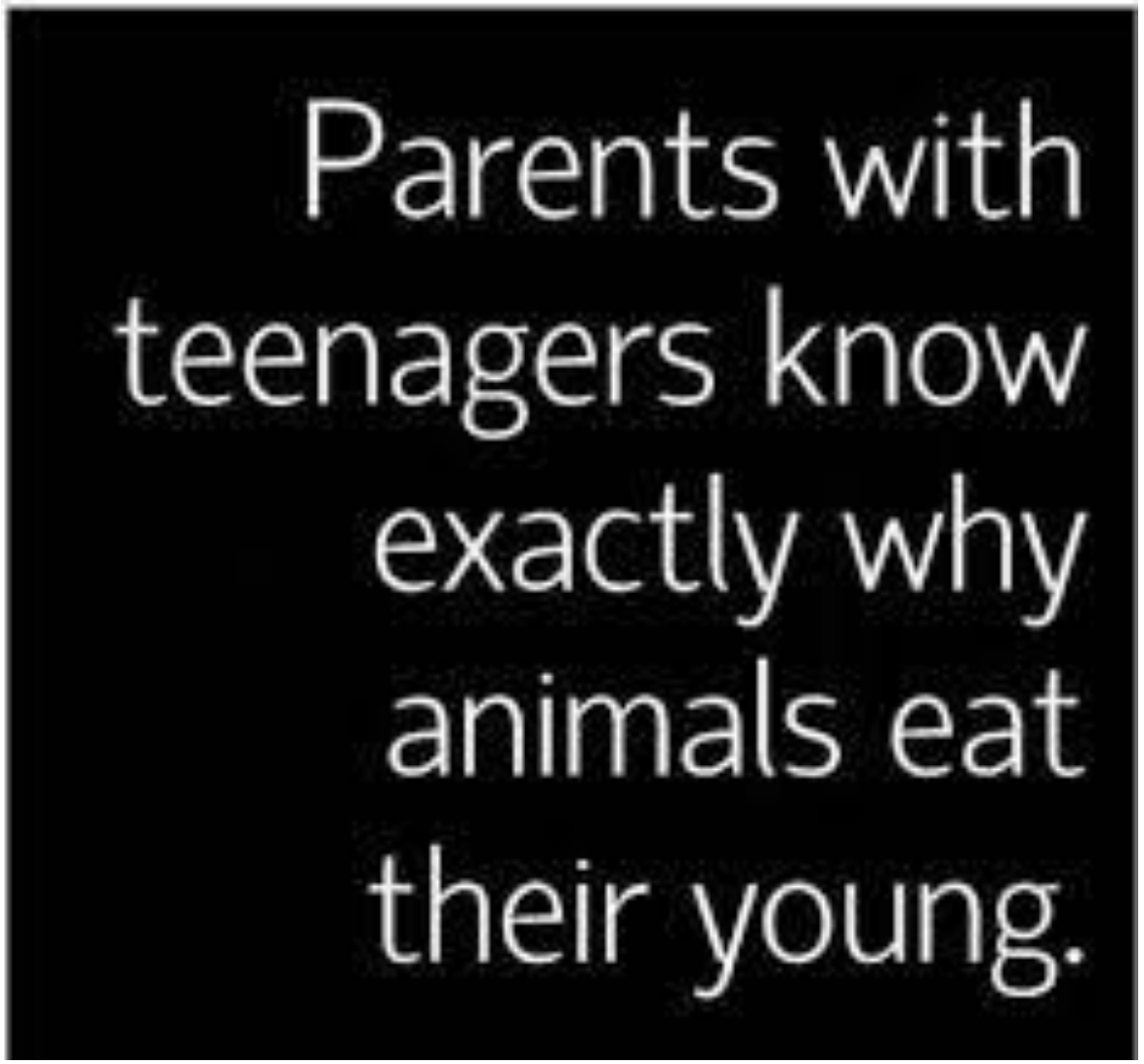

Commons myths about self harm
Myths
Facts
@doodledwellness X @teenhealthdoc
To get attention
Usually hidden for a long time
Suicide attempt or gesture
Way to cope with emotions and trauma
Only done by older teens
Average age to start is 12
Has Boderline Personlity Disorder
Anyone can self harm
Only cutting
Can include burning, hitting, scratching, etc.


Parents with
teenagers know
exactly why
animals eat
their young.