Prevalence of Adolescent Substance Use Disorders Across Five Sectors of Care

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Substance Use Disorders (SUDs) are likely among high-risk youth receiving services in public sectors of care and such youth have not been well represented in population-based studies. There is a need to know more about the prevalence of SUDs among adolescents in public systems of care such as mental health (MH), juvenile justice (JJ), public school-based services for severely emotionally disturbed youth (SED), and child welfare (CW) that are outside the domain of the formal alcohol and drug (AD) sector of care but serve high-risk populations. The few studies that exist within these sectors of care suggest high SUD prevalence. This study examines the prevalence of SUDs among adolescents who received services in one or more of the previously mentioned public sectors of care, in relation to age, gender, and service sector affiliation.

Participants included 1036 adolescents ages 13-18 who were randomly sampled from all the youth active in at least one of the above 5 sectors of care (N=12,662) in San Diego County, California. SUDs were assessed through structured diagnostic interviews using the Composite International Diagnostic Interview - Substance Abuse Module (CIDI-SAM) and the Personal Experience Inventory (PEI).

As shown in Figure 1, SUDs were found among youth in all service sectors. For lifetime SUD diagnoses, 82.6% of youth in the AD sector met criteria and lifetime SUD rates were 62.1% in JJ, 40.8% in MH, 23.6% in SED, and 19.2% in CW. Rates of SUDs were significantly higher among older youth and males, and sector differences held even when accounting for the effects of age and gender.

Past-year SUD diagnosis prevalence rates were 42.6% in the AD sector, 36.9% in JJ, 22.9% in MH, 16% in SED, and 11% in CW. Again, rates of SUDs were significantly higher among older youth and males, and sector differences held even when accounting for the effects of age and gender.

Substance use disorders were highly prevalent among youth active in the AD service sector as well as other sectors of care, particularly JJ and MH. Aggregated across all sectors, more than one-third of youth in the sample met criteria for at least one of the six SUDs assessed in their lifetime and one-quarter met criteria for at least one of the SUDs in the past year. These rates were markedly higher than those found in community and school-based studies.

Given the high prevalence of SUDs among youth in multiple service sectors, screening and assessment for substance use and SUDs should be implemented across all sectors of care in order to reduce negative effects of substance involvement on mental disorders and functioning, and to increase the effectiveness of other mental health and social services. While SUDs and emotional or behavioral problems may lead an adolescent to services, a better understanding of a youth’s clinical complexity has the potential to inform treatment plans and goals in order to better address the unique needs of each client. As evidenced by the present findings, SUDs span all youth sectors of care and, therefore, SUD assessment and treatment should be a prominent consideration in regard to both policy and practice.

A complete account of this study can be found in the Journal of the American Academy of Child & Adolescent Psychiatry, Vol. 40(4) (April 2001), pp. 419-426. For more information, please contact Dr. Aarons at gaarons@casrc.org.