

## **Teen drinking may lead to problems later in life**

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In a television interview early this year, ABC news anchor Elizabeth Vargas talked candidly about her recovery from alcoholism. Before seeking treatment last fall, Vargas drank as many as three to four glasses of wine a night to cope with the panic attacks that have plagued her since childhood, starting when her father went away to serve in Vietnam.

How Vargas came to depend on alcohol later in life is a compelling



question for Michael Windle, professor of <u>behavioral sciences</u> and <u>health education</u> at Rollins. Her childhood anxiety is a telltale sign.

Vargas fits the profile of the women and men whom Windle has studied throughout his career. As his research shows, <u>alcohol abuse</u> and dependence often are intertwined with other difficulties, such as anxiety and depression. In many cases, such emotion-based factors can be traced back to experiences from childhood and adolescence.

In a 23-year study known as "Lives Across Time: A Prospective Study of Adolescent and Adult Development" (LAT), Windle followed more than 1,200 people from adolescence through <u>young adulthood</u> to examine stability and changes in drinking behaviors and mental health. The study began in 1988, when the participants were 15. At the last data collection, they were 38.

Windle undertook the study as a young developmental psychologist at the University at Buffalo Research Institute on Addictions, with funding from the National Institute on Alcohol Abuse and Alcoholism (NIAAA).

For the initial two years of the award, Windle and his research team surveyed teens every six months to look at changes in their behavior patterns, including alcohol use, and the factors that caused those changes. Why did some teens drink heavily and use drugs throughout high school, while others experimented briefly or not at all? What factors put them at risk or protected them? And were there differences for boys and girls?

"A lot of adolescents experiment with alcohol and drugs," says Windle, who chaired Rollins' Department of Behavioral Sciences and Health Education for six years. "Some of them will use these substances long term, and others will stop. The larger question is how do we change those patterns over time, knowing that not everyone changes in the same



way or at the same time?"

Windle expected his study would last no more than three or four years. But as he delved deeper into why teenagers drink, he began to wonder how those in his study would fare as adults. That led to subsequent grants from NIAAA to follow the teens and their parents for 18 more years. In a sense, the study participants became an extended family for Windle and his wife and longtime collaborator, Rebecca.

"We got caught up in it," she says of the initial study phase. "NIAAA strongly recommended that we follow the adolescents into young adulthood and include their parents. With that, the research evolved into a long-term family study."

As the researchers followed the teenagers through young adulthood, key patterns emerged. For one, they discerned that alcohol use, abuse, and dependence were highest for men and women in their mid-20s. After that, the trend declined. Windle's findings, and those of other experts, have changed perceptions about alcohol abuse and dependence. NIAAA, in fact, now views alcohol disorders within a developmental framework rather than as a medical disease.

"When I started doing studies in this area, the national perception of an alcoholic was that of a 40-something blue-collar white male sleeping in the gutter," says Windle. "My studies and others have shown that <u>alcohol</u> <u>dependency</u> is highest for men and women between ages 23 and 27. That makes a world of difference in terms of treatment and prevention—what you should be doing and when."

## Why teens drink

During adolescence, teens drink for a number of reasons. For boys, drinking alcohol is a way to bond with friends and peers. Girls may drink



for similar reasons. More than boys, girl experience higher levels of anxiety and depression and may use alcohol to cope with emotional stressors such as family problems or a romantic breakup.

Both sexes also indulge in binge drinking, consuming five or more drinks of beer, wine, or spirits at a time, one or more times a month.

After high school, many boys and girls enter college, where they live away from home for the first time, free of parental supervision. The tendency to drink heavily spirals higher than before. But after college, the pattern of heavy drinking declines for most young men and women as they begin careers, marry, and become parents.

"Their energy gets redirected in a more constructive pattern," says Windle. "They reconstruct their lifestyle where alcohol doesn't play as central a role."

Still, the damage from heavy drinking during adolescence and young adulthood can be serious and long term. Alcohol use, especially binge drinking, can adversely affect development of brain regions associated with learning, memory, and decision-making. From a public health perspective, heavy and <u>binge drinking</u> are of great concern. Both are associated with the three leading causes of adolescent mortality—automobile and other accidents, suicides, and homicides. In addition, alcohol use is associated with other health-comprising behaviors such as sexual assault and sexually transmitted diseases, including HIV, that affect physical and emotional health into young adulthood and beyond.

For years, Windle notes, health experts did not recognize the extent to which children experiment with alcohol, tobacco, and other substances. Based on the 2012 National Survey on Drug Use, more than 4 million U.S. children from ages 12 to 17 reported consuming alcohol in the past



30 days.

"We need to screen for alcohol and other problems earlier," he says. "Children in preschool already have concepts about who drinks and whether alcohol use is positive or negative."

As previous studies by experts also have shown, children who drink heavily are at higher risk of <u>heavy drinking</u> as adults. But do other types of early-onset behaviors contribute to alcohol dependency in young adults?

To answer that question, the Windles looked at 671 LAT participants to map which of 10 early-onset behaviors (at age 15) contribute to four specific behaviors in young adults (at age 23 and again at age 28). The 10 early risk factors include alcohol, tobacco, marijuana, and cocaine use; police contact; property damage; stealing; fist fighting; truancy from school; and running away from home.

"We looked across several early-onset behaviors as predictors of alcohol, tobacco, marijuana, and cocaine use during adulthood," Michael Windle explains. "Does the fact that someone who smoked or got into trouble with police as a teenager predict whether they drink as an adult? Is there anything specific about the behaviors in adulthood that reflect what we see early in adolescence?"

The Windles' study stands out for its assessment of multiple substance behaviors during adolescence and their influences on multiple behavior disorders in adults. As the results of their study showed, more than 80% of adults with <u>alcohol disorders</u>, more than 60% with cannabis disorders, and more than 30% with cocaine disorders exhibited six or more problem behaviors as children. Additionally, 45% of adult tobacco users had five or more early problem behaviors prior to age 15.



## **Screening for multiple factors**

Ultimately, such results could help school and health professionals conduct better and earlier screening of children exhibiting multiple risky behaviors. Screening results then could be used to tailor interventions specific to each child's needs. They also can lead to better understanding of the factors that make children resilient—children who don't engage in risky behaviors at all and those who do and yet grow up to lead healthy, positive lives.

To identify those at risk, Windle and a group of experts created a guide that clinicians and educators can use to screen children for alcohol use. Developed by the NIAAA Task Force for Underage Drinking, the practitioner's guide—"Alcohol Screening and Brief Intervention for Youth"—is available for free at niaaa.nih.gov/youthguide. The task force is evaluating the guide, now in use throughout the United States, to measure its effectiveness. The guide is one way of increasing opportunities for the safe passage of children from adolescence to young adulthood and beyond.

Though "Lives Across Time" is not collecting new data for now, the data it provided over 23 years continues to yield new clues on alcohol use across the lifespan. Windle has begun a new series of studies, supported by an NIH Research Scientist Award (K05). He is the first investigator at Rollins and one of five at Emory to receive a K05, awarded to researchers for contributions to their field of study. The \$1.03 million award is allowing him to pursue new questions regarding the genetic, social, and environmental factors that contribute to <u>alcohol</u> use and dependency across the lifespan.

Windle's K05 also provides funding to mentor young faculty members like Carla Berg, a Rollins expert on smoking prevention and cessation. Windle serves as a co-investigator on Berg's new NIH-funded study on



the use of traditional and alternative tobacco products among 2,500 students at community colleges and universities in Georgia. The study will help inform the Food and Drug Administration on the habits of students who use electronic cigarettes, hookahs, and small cigars versus cigarettes.

Berg's study also perpetuates the purpose of "Lives Across Time" as Windle envisioned a quarter century ago—to prevent the substance disorders that plague Elizabeth Vargas and so many others.

Ultimately, notes Rebecca Windle, "Our findings from the LAT study will help children and young adults avoid harmful behaviors that can affect them for the rest of their lives."

Provided by Emory University

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