Addiction in Adolescence

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Adolescence is an exciting, yet difficult time in our lives. With so many mental and physical, and emotional changes occurring, along with peer pressure, and parental expectations, it is no wonder that so many adolescents turn to drugs and alcohol to cope with life. The human brain is not fully developed until sometime in the mid-20's, (Wong et al., 2021, p. 201), and adolescents are much more likely to engage in risky, or dangerous conduct than older, more mature, individuals. According to Wong, et. al, "adolescents are more likely to engage in binge drinking, cigarette smoking, and criminal behavior," (2021, p. 190), and the issue of adolescent addiction has become more prevalent in the last few decades.

Not all adolescents that drink alcohol or use drugs become addicted, but the growth in adolescent addiction is something to be concerned about. There are many theories as to what is causing such a rise in addictions among teens. The National Institute on Drug Abuse contends that, "many factors influence whether an adolescent tries drugs, including the availability of drugs within the neighborhood, community, and school and whether the adolescent's friends are using them. The family environment is also important," (2020, p.5).

Treatment of adolescent addiction is something that deserves attention and immediate action. Das, et. al suggests that, "given the prevailing burden and impact of substance abuse in children and adolescents, it is essential that effective interventions and delivery platforms on enhancing social skills, problem-solving skills, and self-confidence are identified and implemented," (2016 p. S62). Additionally, Randall and York state that adolescent substance abuse can lead to "psychiatric disorders, criminal involvement, school truancy, unintended pregnancy, sexually transmitted infections, and physical health problems," (2020 p. 197). The National Institute on Drug Abuse contends that, "when substance use disorders occur in

adolescence, they affect key developmental and social transitions, and they can interfere with normal brain maturation. These potentially lifelong consequences make addressing adolescent drug use an urgent matter," (2020, p. 8).

According to the National Institute on Drug Abuse, one problem with treating adolescents for drug or alcohol abuse that that, "only 10 percent of adolescents who need treatment for a substance use disorder actually get treatment. Most teens with drug problems don't want or think they need help, and parents are frequently blind to indications their teenage kids may be using drugs—or they may dismiss drug use as just a normal part of growing up," (2020, p. 4). But when treating substance abuse in adolescents, Wong, et. al suggests that, "adolescents are shown to respond more to rewards than punishments in the context of risk-taking behaviors and peer influence. Behavioral interventions should be structured with this information in mind." (Wong et al., 2021, p. 191).

Not only should alcohol and drug abuse be treated, but early intervention with the goal of prevention should be assessed. Kapherr states that, "if young adults use alcohol before age 15, their risk for alcohol dependence or abuse is six times greater than if they started at 21," (2017 para. 1). If we can instill the importance of abstinence in our children and young adolescents, maybe we can decrease the likelihood of potential substance abuse and addiction later in life.

There are many opinions on how to best treat addiction in adolescents. Das, et. al suggests that, "among smoking/tobacco interventions, school-based prevention programs and family-based intensive interventions typically addressing family functioning are effective in reducing smoking," (2016 p. S61). Cousijn, et. al "supports the importance of including the social context when developing substance use prevention and intervention programs for this age group," (2018 p. 10). They recommend using an "integrated 12-step facilitation treatment

involving non-substance-using social groups for teenagers, following the model of Alcoholics Anonymous (AA)," (2018, p. 10).

Spirituality is something that should not be ignored when recognizing and treating adolescent addiction. In an article from the University of Akron, it says that, "increased spirituality in teens undergoing substance abuse treatment is associated with greater likelihood of abstinence (as measured by toxicology screens), increased positive social behaviors, and reduced narcissism," (2013, para. 1). By instilling the knowledge that their behaviors and actions deserve forgiveness we can help individuals to begin to forgive themselves and look to a future free of addiction. In a study published by the National Library of Medicine, Knight, et. al found that, "forgiveness is an important spiritual construct for adolescents and that it is associated with lower risk of alcohol use during this vulnerable developmental period," (Knight et al., 2007, p. 6).

With the growth and prevalence of drug and alcohol abuse and addiction among adolescents, it is imperative that we continue to educate ourselves on the causes and treatments of addiction. I believe that more research still needs to be done to understand the physiological and psychological ramifications of substance abuse. Addiction is not something to be treated lightly. While stressing the importance of abstinence in teens, school counselors, therapists, and parents must be diligent in recognizing the symptoms of abuse and be equipped to take action to intervene and treat adolescents that are at risk for abuse and addictions.

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Trauma, Development, and Spirituality

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Addiction in Adolescence

Discusses abuse of substances and addiction in adolescence. What is the current research saying about addiction/abuse, resilience in this population, and what interventions may counteract abuse of substances and addictions in this population? Also discuss how healthy spiritual development may affect the likelihood of use/abuse/addiction in adolescent years. Discuss local news coverage of alcohol or drug-related stories to adolescent use in your area. Give details on the prevalence of addiction based on your readings and the news stories. Are differing viewpoints considered, analyzed, and treated? Ensure that the conclusion contains a good summary of the issues treated and offers suggestions for further study.

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Developmental Analysis

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Abstract

I looked back on my life and how it correlates with Erikson's Psychosocial Development theory. Viewing how I dealt with each crisis that I encountered along the way has been an exhausting, emotional, and thought-provoking process. Through my 57 years, I have had my ups and downs, but taking an honest look at where I have been, I can see how every trial and victory made me into the woman that I am. I am encouraged, knowing that God will guide me through my remaining years, and I look forward to what He has in store for me.

Keywords: Erik Erikson's Psychosocial Development Theory, development, crisis

Developmental Analysis

There are several theories of human development, each with similar traits. Of the theories that we have learned about, one that stands out to me is Erik Erikson's psychosocial development theory. Erikson's theory is similar to Freud's psychoanalytic theory, while highlighting "biological instinctual urges as key to human development... emphasizing the challenges and tasks presented across one's lifespan as key to understanding human development," (Wong et al., 2021, pp. 25-26). Erikson believed that a person continues to grow and develop even after those early formative years up until the end of life. As humans grow through these eight stages, they are faced with different life crisis. How an individual handles each crisis determines whether there will be a positive or negative outcome, which will subsequently determine what will follow. Erikson believed that "these psychosocial crises were based on physiological development interacting with the demands put on the individual by parents and society," (Wong et al., 2021, p. 26). Looking back on my own life, I can easily see these crises, how I dealt with them, and how they affected each subsequent stage.

Trust vs. Mistrust (Infant, 0 to 1½ years)

I spoke to my mother and there were a couple of events during her pregnancy with me that I never knew about. My mom was very nauseated when pregnant with me. She was so nauseated that the doctor prescribed Compazine for the nausea. She doesn't think that the Compazine affected my development in any negative way, although it almost immediately gave her lockjaw. This got worse and worse, so after a day she went back to the doctor, and they gave her a shot of Benadryl. According to an article by the FDA on Compazine in Drugs.com, "Compazine® (prochlorperazine maleate tablets USP) should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus. There have been reports of agitation,

hypertonia, hypotonia, tremor, somnolence, respiratory distress and feeding disorder in these neonates," (2022, pp. 5-6). I guess I was lucky that she only took the drug for one day. From then on, her pregnancy was normal, although six weeks before I was due, her water broke so she had to go to bed rest. Then when it was time for me to be born, she went into labor while my dad was at work, so she drove herself to the hospital and I was born almost immediately. When I was two years old, I had a runny nose, so my mom took me to the doctor. He prescribed tetracycline, which affected my teeth as I grew. My teeth still have a yellow tint to them because of the antibiotics taken at such an early age.

My parents were amazing, loving people and even though we had very little money, I was always loved and cared for. I believe I received the care needed for healthy development. In Erikson's Stages of Psychosocial Development, it states that "the infant will develop a healthy balance between trust and mistrust if cared for and responded to consistently," (Wong et al., 2021, p. 27). Although I obviously have no memory of my first few years of life, I'm sure that my physical and emotional development did build this healthy balance in me.

Autonomy vs. Shame and Doubt (Toddler, 1 to 3 years)

When I was about three years old, I started getting bronchitis often. Each time that I got bronchitis, it would turn into pneumonia, and I would be hospitalized. The doctor decided to start giving me monthly gamma globulin shots and this seemed to help, although I still to this day have chronic bronchitis at least twice a year.

Even with these health problems, though, I seemed to develop quite well. I was toilet trained at a very early age. In fact, my mother doesn't remember ever having a hard time with me. She does remember, though that I never even wet my pants as a child. She says that I was always very self-aware and smart for my age. She jokes that I started to talk very early, and then

never stopped! My sisters even gave me the nickname of "motor mouth", which I absolutely hated! They would say that I was vaccinated with a phonograph needle! It seems that I was quite successful in building autonomy as a toddler. According to Erikson's Stages, "autonomy means self-reliance or independence of thought and confidence to act for oneself. Toilet training is a significant part of this stage," (Wong et al., 2021, p. 27). According to my mom, I was a very confident child and always wanted to do things myself…very self-reliant!

Initiative vs. Guilt (Preschool, 4 to 6 years)

When I was about 5 years old, we moved to El Paso, where I was extremely allergic to the dust, and I was sick with bronchitis very often. I was in kindergarten at the time, and about half-way through the school year, my teacher called in my parents and told them that since I was always coughing so much (she said that I sounded like a dog barking), they could just take me out of school for the year. She said that I was so smart that I didn't need to be in kindergarten anymore and to bring me back when it was time for first grade!

I had two older sisters, that were five and seven years older than me, whom I idolized. They were already in middle school by this time, so I made it my goal to try to do everything that they could do. I think that this may have been part of why I was always so motivated to excel and do things at an early age. One of my first memories is learning how to write my name. I was so proud of myself that I wrote my name on the inside of every one of my sisters' books. We still have books that have my name on them.

Initiative was never a problem for me. An example of this is when I was around five years old, I absolutely loved to go to the swimming pool. Even though I had not had any swimming lessons, I was determined to swim. One day, while at the pool with my family, I simply walked to the end of the diving board and stepped off. Of course, everyone panicked and

jumped in the pool to save me, but they said that I just bobbed right back up like it was no big deal at all. After that, they couldn't keep me from swimming every time I was near a pool. Of course, I did have swimming lessons after that, and I am always happiest when I am near water. In a study on swimming and childhood development, Ardha et al. found that, "swimming does not only influence students' physical and motoric ability, but also shape the character or values developed in swimming," (2020, p. 179).

Again, I believe that I was able to successfully resolve crises in my life during this stage of my life. Erikson states that, "Initiative means aptitude and self-confidence to perform actions, even with the understanding of risks and failure. Positive outcomes foster purpose and direction," (Wong et al., 2021, p. 27).

Industry vs. Inferiority (School Age, 7 to 12 years)

My elementary years were never extremely difficult for me. We moved around a lot during my childhood, so I was an expert at making new friends everywhere we went and I aways had someone to play with. One bad memory that I have, though, is when I was about seven or eight years old. My cousin, who was about six years older than me, sexually abused me while we were visiting my great-aunt's home. I was filled with shame and fear that someone would find out, so I forced this incident to the back of my mind. It wasn't until many years later that I was able to confront what happened and talk about it. Even though I believe I had a wonderful childhood, this memory will always seem to haunt me. According to an article by William R. Downs, "Childhood sexual abuse has been found to have various short-term and long-term consequences for the victim. Long-term effects have included depression, behavioral and social problems, emotional disorders, suicide, low self-esteem, problems with interpersonal relationships, sexual disturbances, and revictimization," (1993, pp. 331-332). In reflection, I did

experience several of these disorders later in life. Although I know that I cannot blame my cousin for all the problems that I have experienced, I do believe that this event may have been a key turning point in my early life.

Concerning my development according to Erikson, I believe that, even with this negative event, I was able to become competent. I began taking piano lessons when I was seven years old and continued with this through high school. I also enjoyed singing and dancing very much. Erikson, in his description of the stage labeled, "Industry vs. Inferiority," states that "industry means having a meaningful activity and the competence to perform a skill…Positive outcomes foster competence, while negative outcomes encourage inertia," (Wong et al., 2021, p. 27). Even through a very tough experience, I believe that I was able to develop competence during this time.

Identity vs. Role Confusion (Adolescent, 12 to 18 years)

It was during my adolescence that I began to experience issues with depression. Middle school and high school years are difficult for all of us. I still had many friends and I always made excellent grades in school, but my self-image suffered severely, and I was always comparing myself to those around me. I grew up in a middle-class, Christian home and was at church every time the doors opened. Although I have many great memories during this time, legalism and judgment from the church were a constant in the back of my mind. I learned so many rules and lists of "Do Not's" in church and I knew that I could never measure up to the perfection that was required of me. I tried my hardest, but I would always fail. The perfectionist in me never could understand how I could be such a screw up! It wasn't until many years later that I learned of God's grace and that He never expected perfection from me, but at that time, I thought that He did, and so did I. In a study by Raphael Bonelli et. al, regarding Christianity and

legalism, it states that "those unable to live according to these standards may face rejection from their faith community, resulting in social isolation," (2012, p. 2). Although I didn't experience social isolation, I always feared it and was always afraid of messing up. My parents always told me that they never had to spank me because they always knew that I was harder on myself then they ever could be, and I would punish myself. When I couldn't measure up, I got depressed and that began my downward cycle into bulimia. According to a study by Mendez, et. al, "depression is often underdiagnosed during adolescence. Moreover, although about 20% of adolescents experience an episode of major depression, only a few receive evidence-based treatments," (2021, p. 3). Around the age of 15 or 16, I became increasingly obsessed with my weight and appearance, as many teenage girls do, and I began to binge and purge to control my weight. During this time, I must admit that I struggled with the crisis of "Identity vs. Role Confusion". Erikson stated, regarding this stage, that "role confusion focuses on the inability to understand one's self or person identity," (Wong et al., 2021, p. 27). This was the beginning of about 10 years of depression and bulimia, which affected me through college.

Intimacy vs. Isolation (Young Adult, 19 to 40 years)

After high school, I decided to go to college at Baylor University. I loved my time in college, although I still struggled with the bulimia and periodic depression. I was extremely secretive about my binging and purging. I had several roommates, and I always went to great lengths to hide my bulimia from them. I don't know if any of them ever knew or suspected what I was going through. I expended so very much time, anguish, and energy to keep this deep, dark secret from everyone. It was exhausting! "Bulimia nervosa (BN) is characterized by symptoms of binge eating and compensatory behavior, and overevaluation of weight and shape, which often co-occur with symptoms of anxiety and depression," (Levinson et al., 2017, p. 2). I can attest to

the feelings of anxiety and depression that I felt during this time, although I worked hard at hiding that, as well.

After graduating from college, I got a job in Houston, Texas and moved there to begin life on my own. It was during this time that my anxiety and bulimia got so bad that after a couple of years, I bottomed out emotionally. Although I did see a couple of therapists during my time in college, it wasn't until I was about 25, that I finally realized that I needed some serious help and checked myself into a Christian psychiatric treatment center. I spent a month there, and it was during this time that I came face-to-face with the Holy Spirit. I still remember sitting in my doctor's office, talking with him about my bulimia and my fear that I would always suffer from it. I had been told before the phrase, "once a bulimic, always a bulimic" and this really haunted me. My doctor said, "Do you believe that bulimia is a disease? Do you believe that God can heal disease? If so, then why can't He heal you?" I know that this may sound simplistic, but that hit me like a ton of bricks! I believe at that time God did heal me, both physically and emotionally. I can't say that I haven't had any struggles with depression or anxiety at all since then, but I truly believe that I am free from that bondage. I recently read an article by a girl that had struggled with bulimia for years and was healed by God. In this article, she says, "The Spirit didn't snap his fingers and heal me right away, but something did snap inside me, catapulting a new leg of my healing. For one, I started being kind to myself (mostly via learning from Jesus' kindness toward me), and differentiating between my true self, loved and designed by a thoughtful Maker, and my eating disorder," (Sprunger, 2021, para. 14).

At the age of 30, I got married and had two beautiful children, Cody and Genene. My husband suffered from narcissistic personality disorder and life with him became increasingly difficult. According to a study by Kacel, et. al, "Narcissistic Personality Disorder (NPD) is

characterized by a persistent pattern of grandiosity, fantasies of unlimited power or importance, and the need for admiration or special treatment," (2017, p. 156). Although he was never physically violent, he was extremely verbally abusive. I can't say that my marriage was always miserable, but I did struggle with depression at times and my self-esteem suffered greatly through years of this type of abuse. I remained married for 19 years, and after years of counseling and prayer, I finally asked for a divorce at the age of 49.

Through this time, which Erikson labeled as "Intimacy vs. Isolation," I could have easily fallen into despair, but I believe that I was successful through this crisis. By Erikson's definition, "intimacy means developing relationships with friends, family, and partners," (Wong et al., 2021, p. 27). Although my relationship with my husband was not a good one, God blessed me with my parents, my sisters, my children, and several friends that helped me through these years.

Generativity vs. Stagnation (Adulthood, 41 to 65 years)

I now find myself in this stage of "Generativity vs. Stagnation". I have been divorced for eight years now, and when I look back on my life, I can say that although it has not always been easy, God has always been there for me, even when I wasn't looking for Him. I still have two parents that love me and two amazing children that are strong and resilient. I have a wonderful roommate and some amazing friends that I can always turn to, as well. Since my divorce, I began teaching again and I now teach middle school math at an excellent charter school in South Florida. Thirty years after graduating from college, I went back to school and earned my master's degree in Education. I am now working on my master's degree in School Counseling, and I believe that I will be able to use the struggles that I have been through, along with my love for children to be able to help students who are beginning life's journey. I can honestly say that, with God's help, I am successfully overcoming the challenges of this stage in my life and

growing in the stage of "Generativity vs. Stagnation". Erikson states that "generativity means unconditional care for one's offspring or the future generations to come," (Wong et al., 2021, p. 27).

Integrity vs. Despair (Mature Adult, ≥65)

I can't say that I love the thought of getting older, but when looking back on the struggles and victories of my life, I do believe that, like my mom and dad, I will be able to say that I have chosen integrity over despair when I reach the final decades of my life. I plan on becoming a school counselor and intend on taking care of myself, physically, emotionally, and spiritually. Erikson states that "integrity means an understanding of self and satisfaction with life," (Wong et al., 2021, p. 27). My desire is to be able to say that I have gained the integrity and wisdom that a life well-lived can bring.

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