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**Addiction prevention among youth: gender factors**

Teen substance abuse is a problem that doesn’t seem to go away and will remain in the agenda of youth workers, educators and other specialists that work with youngsters. It is problematic for several reasons – teens are still developing important life skills, their identity, likes, and dislikes, thus if teens begin experimenting with drugs to fit in or gain friends, they can unknowingly set themselves up for a potentially life-threatening habit, making prevention critical in this age group.[[1]](#footnote-1) There are several aspects that need to be considered while planning and implementing addiction prevention and treatment programs for teenagers. Apart from addressing all forms of drug abuse (alone or in combination), risks, consequences and enhancing protective, reverse or reduce risk factors, focus also needs to be kept on individual’s social, biological, geographical, and psychological background. Additionally, specialists must consider that although risks of addiction can affect anyone, the causes and consequences can differ depending on person’s age, ethnicity, culture and environment, and the biological sex and gender identity.[[2]](#footnote-2)

Prevalent stereotypical assumptions about gender roles do influence youngsters differently, thus it is no surprise that there are differences in substance using habits, factors and motivation among sexes. Both the causes why boys and girls start to use substances that may cause addiction and the ways in which these substances have effects on their bodies and health can differ depending on gender and sex. For the preventive measures to be most effective and the educational process to reach its goals youth workers, educators and other specialists must take into account the gender and biological sex nuances while developing prevention activities and programs.

**Biological, psychological, and social factors - women and girls[[3]](#footnote-3)**

One of the nuances one must take into account when developing prevention programs – girls are more likely than boys to suffer from **depression, have eating disorders, or be sexually or physically abused** – all of which can increase the likelihood of substance abuse. Furthermore, girls using alcohol and drugs are more likely to **attempt suicide**. Studies show that girls battling with addiction often struggle with a **co-occurring disorder** such as major depression or post-traumatic stress disorder (PTSD). Many factors like bullying, concerns with self-esteem or personal appearance, or physical or sexual abuse can all encourage substance abuse.[[4]](#footnote-4) Some significance is also to biological factors – substance use can lead to **abuse and addiction more quickly for girls** than boys even when using the same amount or less of a substance. Especially alcohol-related dependence may develop faster – this is explained with biological factors – female organisms generally have more body fat and lower volume of body water to dilute alcohol.[[5]](#footnote-5) Also, studies have shown that girls are more likely to be diagnosed with abuse or dependence on only one/specific drug.[[6]](#footnote-6)

Other factors that should be considered:

* Girls are more susceptible to **lung damage** as a result of smoking and alcohol-induced **brain damage**.
* Women are more likely to go to the emergency room or **fatally overdose** due to substance abuse.[[7]](#footnote-7)
* Girls and young women who frequently use drugs or alcohol are more likely to engage in **risky sex or be the victim of sexual assault**.
* Women are more **stigmatized** for their substance use conditions. They report higher feelings of guilt and shame surrounding their substance use. These feelings are often related to the gender-specific roles, often associated with caregiving.4
* Girls also differ from boys in whom they obtain access to alcohol, tobacco, and drugs from. They are more likely **to be offered drugs and alcohol by female acquaintances and in a private setting**. Also, girls are less likely to not be asked to show proof of age when purchasing cigarettes, and girls are more likely than boys to say crack cocaine, LSD, and heroin are fairly or very easy to obtain.3

Keeping this in mind, prevention work with girls should include **healthy, constructive, and safe conversation around harmful gender roles and stereotypes**. Critically analyzing assumptions on what kind of behavior, decision and attitudes are expected from girls and what are the effects of gender stereotypes on teenagers and their substance abuse. In addition to information on risks of substance abuse, causes and consequences it is important to talk also about healthy **self-perception, self-esteem, self-worth, and stress management** and their impact on physical, emotional, and mental health.

**Biological, psychological, and social factors – men and boys4**

Regardless of age or race, men use **alcohol and drugs** **more frequently and in greater quantities** than women. Also, boys were more likely to be diagnosed with simultaneous abuse or **dependence on more than one drug**,5 e.g. adderall and codeine are often used to enhance the high from smoking marijuana. However, it is important to remember that drugs and alcohol taken in tandem can produce various effects, some life-threatening.7

Men and boys often start using alcohol and other drugs for different reasons than women. For many young men, **male institutions, and social rites of passage** (sports, fraternities, etc.) **encourage the use of alcohol.** Men generally start **binge drinking** at an earlier age than women. Binge drinking is also more prevalent in men and is more likely to result in alcohol-related problems. Due to higher frequency and quantities as well as binge drinking habits, men are five times more likely to develop a substance use disorder. Boys are more likely to **channel their internal distress into external acts.** They may get into fights, neglect their grades, and receive multiple detentions or suspensions for disorderly conduct. They are more likely than girls to have co-occurring attention deficit hyperactivity disorder (ADHD) or conduct disorders. Boys with a substance addiction are also at **greater risk of juvenile justice issues**. “Drug cliques” often commit unlawful acts such as theft and vandalism. In extreme cases, they may resort to arson or assault.7

Other factors to consider:

* Boys are more apt to receive **offers** [drugs, alcohol, tobacco etc.] from **male acquaintances and in a public setting**.3
* Though we know that although **men are less likely to be forthcoming**, many have significant histories of childhood physical and sexual abuse or current victimization by domestic partners. They are more likely to die from suicide, despite being less likely to attempt suicide.
* Men may be more likely to think they do not need treatment than women and may deny that treatment needs are necessary. Men may feel that they can **handle things on their own** and that seeking treatment may indicate a personal sign of weakness or moral failing. Male bravado may discourage men from seeking behavioral health services or admitting to family and friends that they need help.[[8]](#footnote-8)
* Men may be more likely to be referred to **substance abuse treatment through the criminal justice system** instead of through a mental health provider. This is likely because drug and/or alcohol abuse may increase the odds of men being involved in a violent crime, property crime, or driving while impaired.8
* Boys and men often feel **excessive amounts of shame when dealing with emotional and substance abuse problems,** making it less likely that they will seek out medical or behavioral health counseling for their problems. Once in treatment, men often **struggle with talking about their emotions** and how to deal with them appropriately.

As with girls, the prevention work with boys should include healthy, constructive, and safe conversation around harmful gender roles and stereotypes. Critically analyzing assumptions on what kind of behavior, decision and attitudes are expected from boys and what are the impacts on substance abuse among youth. In addition to information about substance use, its risks, causes and consequences, prevention activities should talk about **self-perception, recognizing and managing emotions, internal and external conflicts, and stress**. It is important to emphasize that addressing one’s “inner world”, discovering and communicating emotions in a healthy way as well as seeking out for support and help **SHOULD NOT be perceived as weakness or “*unmasculine*”.**

As prevention work includes various non-formal education tools and creating safe and trustful environment, one should keep in mind that **disclosure of experienced sexual, physical or emotional violence** can happen, highlighting it as a possible root cause of substance use/abuse. If that occurs, be there for them! Be present, listen and believe their story, expressing appreciation of their trust. Search for solutions together.

***"One-size-fits-all prevention hasn’t worked -- and it won’t because it doesn’t recognize these [gender] differences"***

By keeping this in mind we can run more successful prevention and intervention programs designed to meet the needs of teenagers: so that they can acquire needed competencies to make informed decisions about their health and wellbeing.

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