



# Understanding Teen Substance Use and Abuse

A Training for Parents & Youth

Medical + Christian Worldview

Presented by:  
Highpoint Fellowship

Amy Stevens, PhD., BCCC, LCDCi  
Ricky Covington, LCDC

# Why This Conversation Matters

*Understanding* the urgency of this topic helps promote compassion and wisdom in addressing substance use with teens.

- Parents often believe: “My kid would never...”
- Teens today face earlier exposure than any previous generation.
- Substances are more potent, more accessible, and more discreet.

*Our goal: wisdom, not fear; compassion, not shame.*

*“Be very careful, then, how you live-not as unwise but as wise”  
(Ephesians 5:15).*



# The Reality of Middle & High School

Most teens are first exposed to substances between *12 and 14 years old*, often in middle school environments.



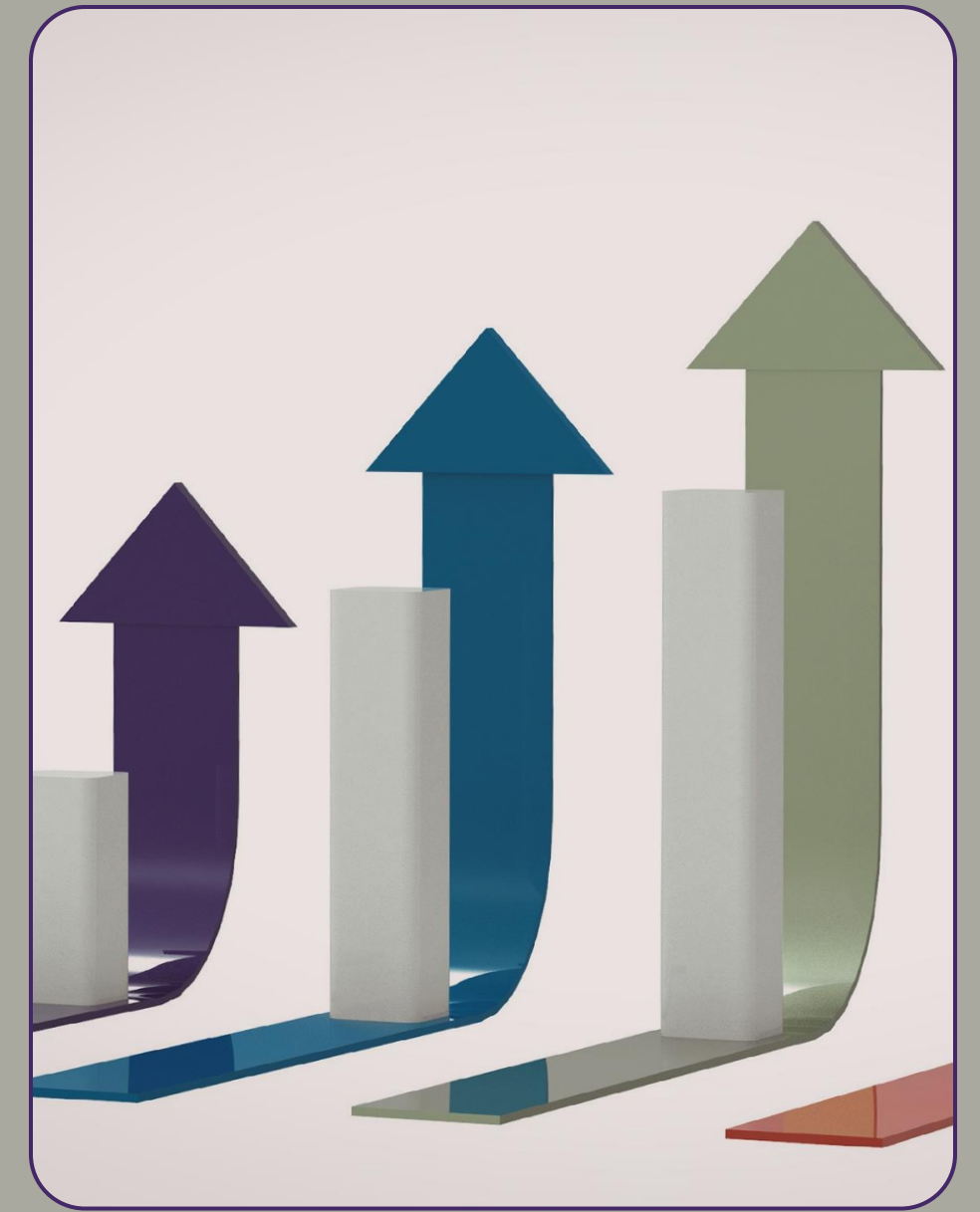
- Average age of first substance use: 13-15.
- Exposure often begins in 6th-8th grade.
- “Good kids” are not immune—curiosity, anxiety, and peer influence are powerful.

Source: Monitoring the Future Survey, 2024.

# Teen Substance Use Statistics

Recent statistics reveal *alarming misuse rates* among teens, highlighting the urgency for awareness and preventive measures.

- 36.8% of teens have misused a drug at least once by 12th grade.
- 1 in 7 teens used an illicit drug in the past month.
- 41.7% of 12th graders have used alcohol.
- Marijuana and alcohol remain the most used substances.



Sources: NIDA (National Institute on Drug Abuse), Monitoring the Future 2024.

# Why Early Use Matters



- The adolescent brain is still developing.
- Early use increases risk of long-term addiction.
- Substances hijack the brain's reward system.

Source: CDC Youth Risk Behavior Surveillance, 2024.

# Why Teens Use

*Understanding motivations behind substance use*

Anxiety, depression, trauma  
Curiosity and novelty-seeking  
Peer pressure  
Self-medication  
Identity exploration  
Escape from stress or loneliness

Important: We respond with compassion, not condemnation

# Vaping & Nicotine

Vaping devices are *often perceived as harmless*, but they carry severe risks, especially for developing brains in teens.

- Vapes are discreet, flavored, and easy to hide.
- *Nicotine primes the brain for other addictions.*
- Many teens believe vaping is "safer" -it isn't.



Source: FDA Youth Tobacco Survey, 2024.

# High-Potency THC



- Today's THC is 3-10x stronger than in the 1990s.
- THC pens are odorless, easy to conceal, and widely shared.
- High-potency THC increases risk of psychosis, schizophrenia, anxiety, and dependence.
- Cannabis potency has increased roughly fivefold over two decades. (Journal of Psychiatry Reform, CMAJ 2025)

Source: NIDA Cannabis Research Updates, 2024.

# How THC Is Available



Even though recreational marijuana is *not legal* in Texas:

- Delta-8, Delta-9 (hemp-derived), HHC, THCP are sold in vape shops.
- These products can produce psychoactive effects similar to THC.
- Sold as gummies, vapes, drinks, and edibles.
- Often marketed as “legal weed.”

Source: Texas Department of State Health Services (DSHS) Hemp Program.

# Gas Station and Online “Health”

Kratom: a plant-based opioid-like substance sold as “natural” and “healthy.”

- Can cause dependence, withdrawal, and dangerous interactions.
- Teens may also access synthetic cannabinoids, “energy shots,” and unregulated supplements in gas stations.
- Many dangerous and addictive substances are sold under the guise of “natural” focus, “natural energy”, and “natural pain relief”.

Source: FDA Consumer Updates on Kratom, 2024.



# Prescription Pills & Fentanyl

- Teens misuse and share ADHD meds, benzos, and pain pills.
- Fake pills containing fentanyl are widespread.
- Even one pill can be lethal.

Source: DEA One Pill Can Kill Campaign, 2024.



# Alcohol- Still #1

- Most commonly used teen substance.
- Strongly linked to accidents, sexual risk, and long-term addiction.
- Often minimized by parents and normalized or encouraged.
- More and more parents are also abusing alcohol since COVID-19.



Parental substance use remains a significant factor in teen use, with nearly 1 in 4 U.S. children living with a parent with a substance use disorder (NIH, 2025).

Source: CDC Youth Risk Behavior Data, 2024.

## Highlights

- Emerging drugs, which include designer drugs and new psychoactive substances, are substances that have appeared or become more popular in the drug market in recent years.
- Emerging drugs have unpredictable health effects. They may be as powerful or more powerful than existing drugs, and may be fatal.
- Because drug markets change quickly, NIDA supports the [National Drug Early Warning System \(NDEWS\)](#), which tracks emerging substances. NIDA also advances the science on emerging drugs by supporting research on their use and on their health effects.



*@Getty images/doble.d*

## NIDA Asks: Can science keep up with designer drugs?

What's really in bath salts, N-bombs, and synthetic opioids? What are the health effects of these drugs?



[➔ Hear From a NIDA Researcher](#)

<https://nida.nih.gov/research-topics/emerging-drug-trends>

[Back to Top ^](#)

A glass bottle with a cork and a small object inside, floating in the ocean under a cloudy sky. The bottle is tilted, and its reflection is visible in the water. The sky is blue with white clouds, and the water is a deep blue-green color.

# Substance Use Disorder/Addiction

# What Is a Substance Use Disorder?

---



A **substance use disorder** is the use of mood-altering drugs that interferes with or has a negative effect on a person's life.

**Addiction** is also a term used for substance use disorder.

Mood-altering drugs (also called *psychoactive drugs*) include alcohol and other chemicals, substances, and medicines that change a person's mood or feeling.

People with a substance use disorder can experience problems including physical illness; legal issues; divorce or other family problems; worsening of mental health symptoms; negative consequences at work, home, or school; and many more.

# Poor Control and Obsession

---

Addiction involves **poor control** over use of alcohol or other drugs.

Types of impaired control:

- over amount
- over stopping
- over behavior when under the influence

Addiction involves **preoccupation** or **obsession**.

People think excessively about getting more of the substance, constantly plan when and where they will next drink or use it, and constantly think about hiding their substance use from others.



# Medical and Physical Problems

---



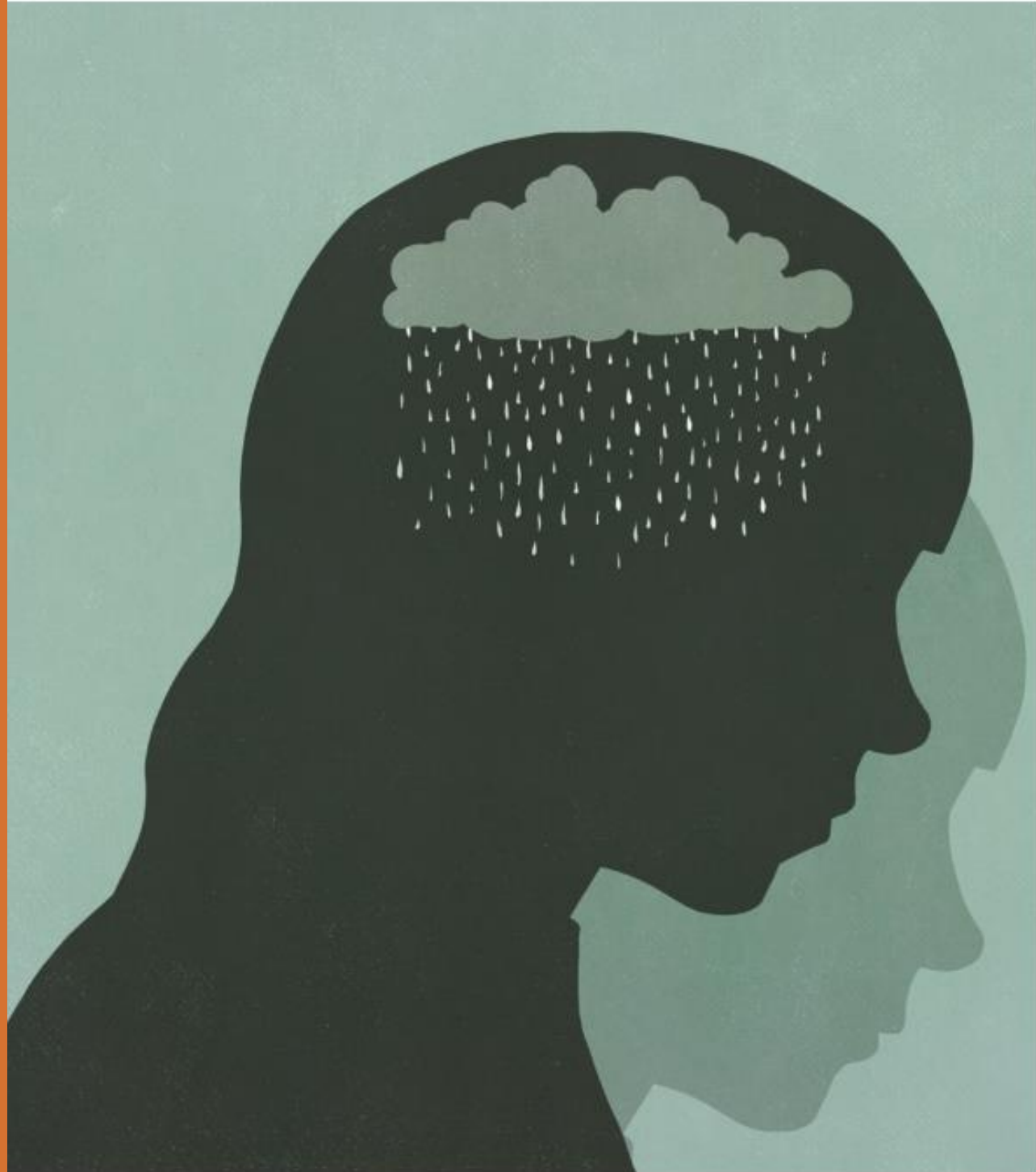
Alcohol and other drug addiction can cause medical problems in one's brain, liver, heart, and many other organs.

Alcohol and other drug use has a strong role in suicides, homicides, motor vehicle crashes, and other traumatic events.

Addiction causes medical and physical problems.

# Negative Consequences and Denial

---



Addiction involves using despite **negative consequences**.

These may include problems with physical health, psychological health, and social stability. They can include problems related to work, family, finances, the legal system, and even spirituality.

Addiction involves **denial**.

Denial helps to protect addicted people from the harsh realities of their addiction; it allows them to believe that nothing is wrong or that they can take care of the problem.

# Why Teens Use Substances

## *What They're Dealing With:*

- Emotional struggles: anxiety, depression, trauma, loneliness
- Peer pressure and desire to fit in
- Family stress and instability
- Academic pressure and performance anxiety
- Identity exploration and self-expression
- Seeking escape or relief from overwhelming feelings

Highpoint response:

We respond with empathy and support, recognizing their pain.

# What Parents Can Do



Build	Build open communication.
Ask	Ask, not accuse.
Stay	Stay interested vs.reactive.
Set	Set clear expectations.
Know	Know where your kids are, who they're with, and what they're doing online.
Monitor and seek	Monitor and seek help for any issues you may also have with substance use or abuse.

# Warning Signs

- Sudden mood changes
- Declining grades
- New friend groups
- Secrecy or withdrawal
- Vaping devices, cartridges, gummies, or unfamiliar smells
- Odd or unusual behaviors
- Withdrawal from activities or people your teen used to enjoy

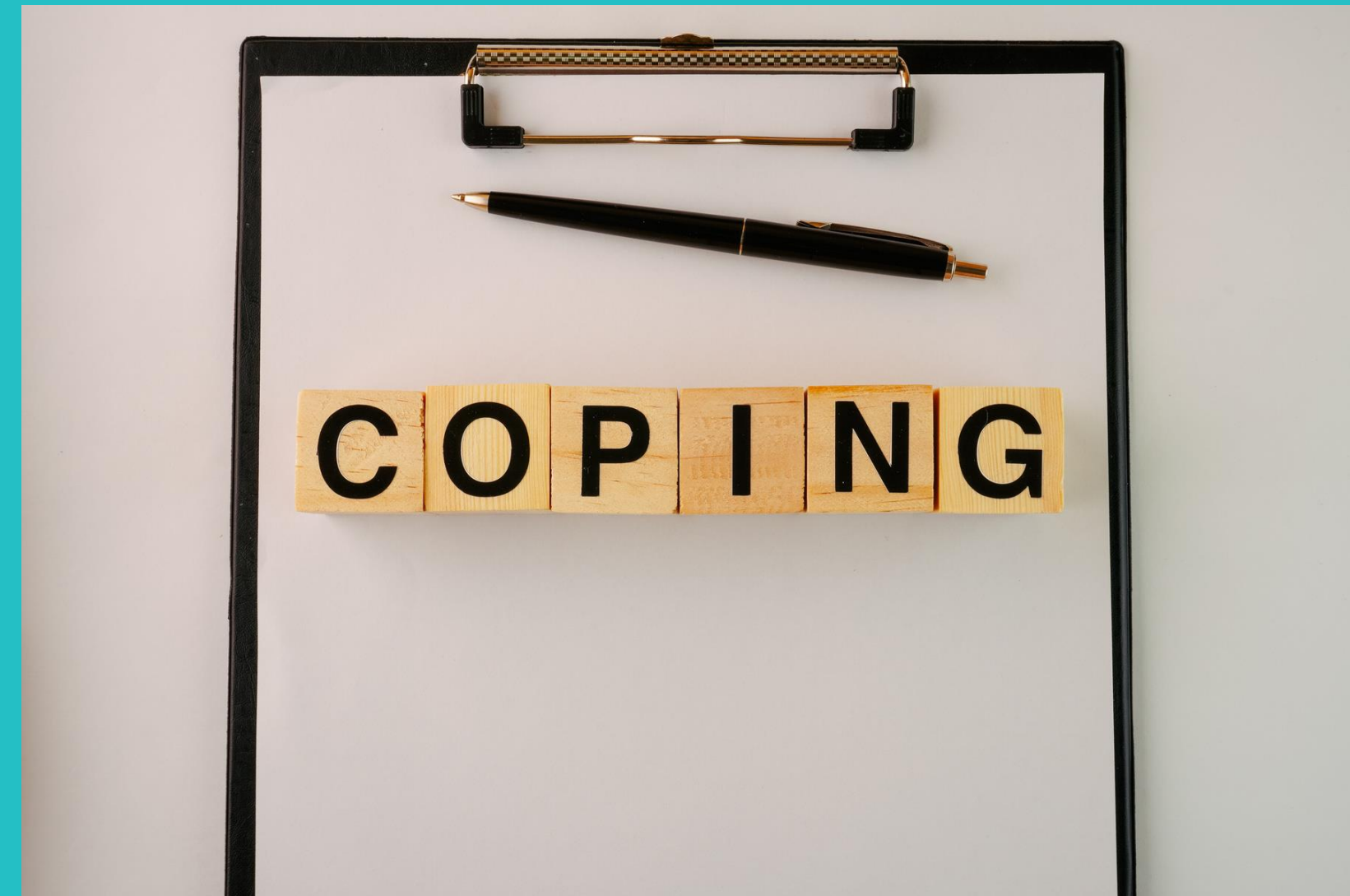


# Healthy Coping Alternatives

- Talking with trusted adults or friends
- Engaging in physical activity or sports
- Creative outlets: art, music, writing
- Mindfulness and relaxation techniques
- Building supportive peer groups
- Seeking professional help when needed

- **Developing Distress Tolerance (Not “normal” in our society)**

Our Youth Ministry: Encouraging hope and healing through community and faith.





Addiction is a health issue, not a moral failure.

Pain and distress are normal- but we, as the church, need to be like  
Jesus!

Jesus moved toward those who were suffering.

We are called to be a place of healing, wisdom, and support

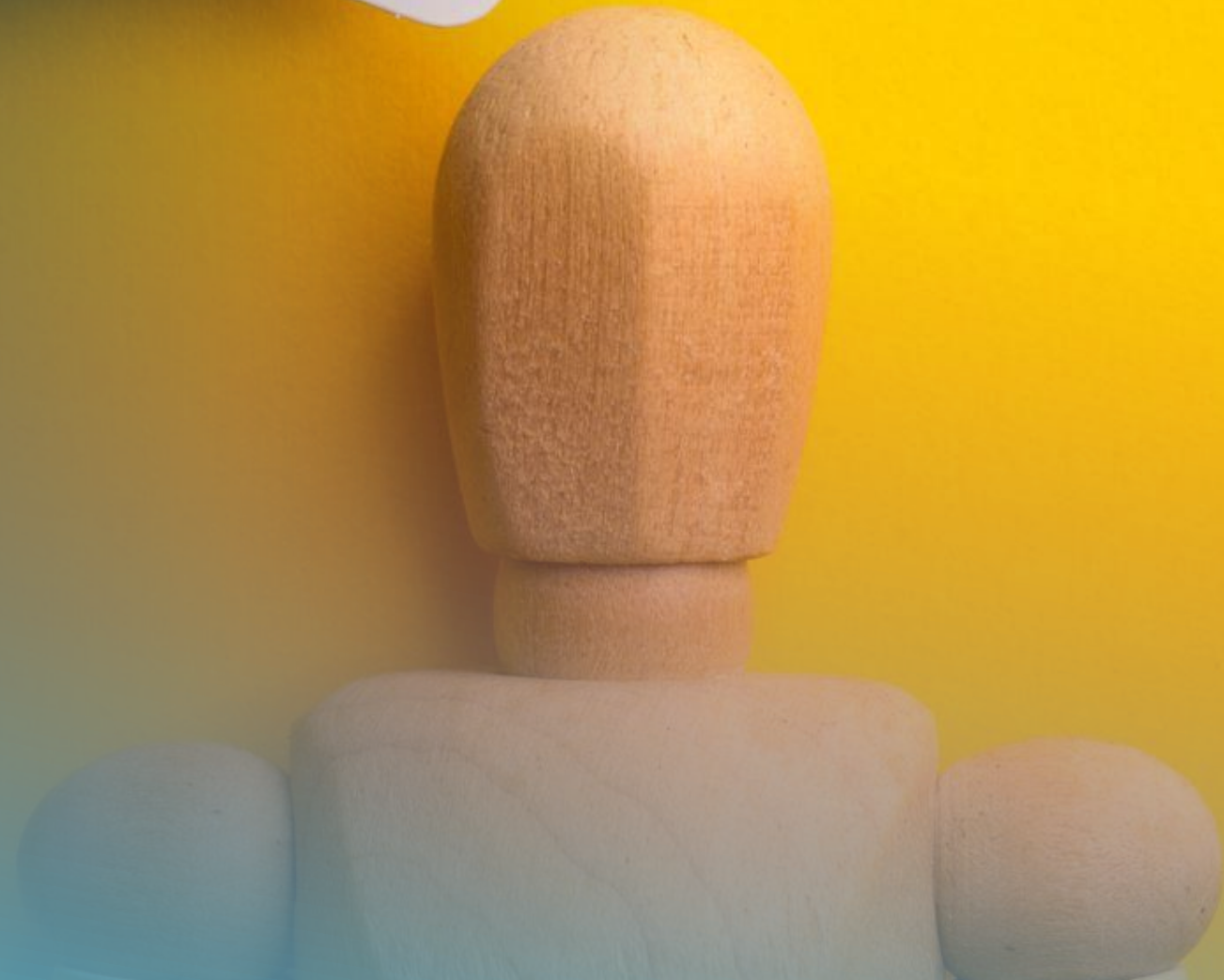
Scripture: “Bear one another’s burdens.” — Galatians 6:2

# How Highpoint Can Help

- Provide safe adults who listen without judgment.
- Offer support groups or mentoring.
- Teach emotional regulation and spiritual grounding.
- Create a culture where kids OR PARENTS can say, "I'm struggling."



Do I or someone I know have  
a problem?



# Do I have a problem?

- Difficulty controlling use or cravings
- Neglecting responsibilities at school, home, or work
- Changes in mood, behavior, or social circles
- Physical signs: unexplained weight changes, sleep problems, or health issues
- Feeling isolated, anxious, or depressed
- Loved ones expressing concern



*Recognizing the need for help is a sign of strength, not weakness*

This tool consists of frequency of use questions to identify risky substance use by adolescent patients. The accompanying resources assist clinicians in providing patient feedback and resources for follow-up.

**Screening Tool Cutoffs and Scoring Thresholds**

Intended use: This screening tool is meant to be used under a medical provider's supervision and is not intended to guide self-assessment or take the place of a healthcare provider's clinical judgment.

This tool may be administered by either the patient or the clinician. Please indicate the mode of administration:

**I AM THE PATIENT****I AM THE CLINICIAN**

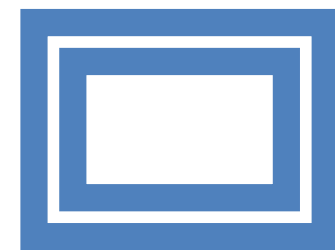
<https://nida.nih.gov/bstad>

## DSM-5 Substance Use Disorder Criteria

A problematic pattern of substance use leading to clinically significant impairment or distress, as manifested by at least 2 of the following, occurring within a 12-month period:

- Substance is often taken in larger amounts or over a longer period than intended.
- Persistent desire or unsuccessful efforts to cut down or control use.
- Great deal of time spent in activities necessary to obtain, use, or recover from the substance.
- Craving, or a strong desire or urge to use the substance.
- Recurrent use resulting in failure to fulfill major role obligations at work, school, or home.
- Continued use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the substance.
- Important social, occupational, or recreational activities given up or reduced because of use.
- Recurrent use in situations in which it is physically hazardous.
- Use is continued despite knowledge of having a persistent or recurrent physical or psychological problem likely caused or worsened by the substance.
- Tolerance, as defined by either a need for markedly increased amounts to achieve intoxication or desired effect, or markedly diminished effect with continued use of the same amount.
- Withdrawal, as manifested by characteristic withdrawal syndrome or use of the substance to relieve or avoid withdrawal symptoms.

# Summary and Breakout Groups



# Ask Yourself

- Do you or your family need support?
- What conversations do you need to have at home?
- What can we help you with?
- Are you interested in an ongoing support group on this topic?

[hpf.org/ministries/counseling-ministry](http://hpf.org/ministries/counseling-ministry)

We will post this presentation, links, and resources.

# Breakouts

**Teens:** 7pm-8pm:

Youth room breakout group with Cody and Ricky

**Adults/Parents:** Preschool Room breakout group with Amy

- Time to ask questions we didn't cover
- Time to share more/get more info!