

While the level of methamphetamine use (including ice) has remained stable in population studies of young people at 2%, [new research](#) has found use of methamphetamines has increased significantly in young people already at risk of other drug- and alcohol-related dependence and harm.

“Tough on drugs” approaches to getting young people off methamphetamine and ice don’t work, and temporary rehabilitative measures don’t last. The problems affecting the rest of these youths' lives have to be addressed long-term if we’re to have any hope of keeping them away from methamphetamines for good.

Meth use on the rise among already at-risk youth

Our study was based on 865 adolescents, aged 14–18 years, admitted to a drug and alcohol rehabilitation program in NSW and the ACT. The number of young people in this program reporting methamphetamine use doubled from 2009 to 2014.

Young people admitted for treatment not only report the drugs they use, but also the drug that is of greatest concern to them at the time. Methamphetamines were the only drug to show a significant upward trend over time, from 10% in 2009 to almost 50% in 2014.

Some 64% also reported they currently used alcohol, 85% cannabis and 73% tobacco in 2014.

Those reporting methamphetamine use were more likely to have unstable living arrangements and more police contact.

This may mean these young people are already in precarious positions in their lives which leads them into problematic methamphetamine use. The reverse may also be true.

Population surveys show no rise in young people’s use of methamphetamines. The best sources of adolescent drug and alcohol use in Australia are the [Australian Secondary](#)

[Students’ Alcohol and Drug Survey](#)
and the
[National Drug Strategy Household Survey](#)
which includes 12- to 19-year-olds.

These surveys show that alcohol, cannabis and tobacco were the most commonly currently and recently used drugs among adolescents. These surveys also show use of methamphetamine among adolescents has remained very low (around 2%) and stable over the last few years.

However, some adolescents may be missed in these surveys due to school suspension or expulsion, homelessness, or being in custody – the very young people our study includes.

Addressing harm

Our data from young people admitted to treatment show clearly that methamphetamine use is on the rise in this group, but other data provide no evidence for an “epidemic” among young people.

Early intervention and treatment for young people, including residential treatment programs, is what is needed, not more arrests by police. The program in the recent study was run as a therapeutic community which involves residents living in a drug-free setting for up to three months to address [underlying causes](#) of addictive behaviour.

The program aims to build young people’s skills to manage their lives effectively addressing employment, training, relationship building, mood management, and teaches relapse prevention skills.

There have been some [robust studies](#) focused on the outcomes of residential treatment for young people, which have found [positive effects](#) in the first 12 months after treatment.

However, [one study](#) found positive effects on substance use and psychological functioning

were not maintained longer-term.

[Continuing support](#) after treatment is

critical to prevent the

[erosion of short term](#)

program effects and includes ongoing counselling, employment assistance and interventions with families. The current study findings suggest stable and affordable housing is also crucial.

If we want to make a difference in the longer term, we need to address the broader context of these young people's lives, not just their drug use.

There is also a clear imperative not to forget the harms of other drugs commonly used by young people, such as cannabis, tobacco, as well as alcohol, in the hysteria generated about ice.

Mr Mark Ferry, Chief Operating Officer at the Ted Noffs Foundation and Ms Anna Bethmont, former Master of Public Health student at UNSW Australia contributed to the study in the MJA.

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Address other life problems to get at-risk young people off methamphetamines

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affiliations beyond the academic appointment above.

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