



Low Other-Regard and Adolescent Addiction

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INTRODUCTION

- narcissism/addiction association (adults)
- egocentrism underlies addiction (theory)
- evidence limited among youth
- challenges to study link with youth: egocentric thinking naturally elevated
- 18+ years to assess narcissism disorder
- randomization to addiction unethical
- **study aim:** explore low other-regard/AOD use dose-response relationship with youth

TABLE 1. BACKGROUND CHARACTERISTICS

	no use 195 (33%)	some use 195 (33%)	addiction 195 (33%)
Age	15.8 (1.3)	16.0 (1.3)	16.2 (1.1)
Male	93 (48%)	93 (48%)	93 (48%)
Minority	59 (30%)	59 (30%)	59 (30%)
9 th -10 th grade	119 (61%)	119 (61%)	119 (61%)
11 th -12 th grade	76 (39%)	76 (39%)	76 (39%)
Single parent	80 (41%)	101 (52%)	98% (50%)
Parent BA+	86 (44%)	80 (41%)	53 (27%)
Overweight	55 (28%)	44 (23%)	34 (17%)
Poor health	21 (11%)	16 (8%)	11 (6%)
Asthma history	37 (19%)	35 (18%)	30 (15%)

Notes: BMI categories based on age and gender growth charts;

RESULTS

- Table 1: AOD groups' similar background
- Table 2: alcohol, marijuana, PDM common
- Table 3: DUI rate: addicted (57%) vs. some use (8%) but similar # days drinking
- AOD/low volunteerism dose-response (boys)
- STD rate: AOD users (15%) vs. no use (8%)
- AOD use/risky sex dose-response magnified among youth with STD history

METHODS

- Subjects:**
- N=585 aged 14-18, 52% female, 30% minority, recruited in 2009 in Ohio
 - Each youth with addiction (N=195) matched to a youth with some use (N=195) and a youth with no use history (N=195)

- Measures:**
- 2009 YRBS: background characteristics, AOD use history, low other-regard (low volunteerism, DUI, risky sex with STD)

- Statistical Analysis:**
- 3 logistic regressions, stratified by pair assignment, background covariates

TABLE 2. AOD USE HISTORY

	no use 195 (33%)	some use 195 (33%)	addiction 195 (33%)
Past Month (10+ days)			
1+ drink	--	12 (6%)	12 (6%)
Binge drinking	--	0 (0%)	11 (6%)***
Marijuana	--	16 (9%)	83 (43%)***
Lifetime (20+ days)			
1+ drink	--	49 (25%)	159 (82%)***
Marijuana	--	28 (14%)	187 (96%)***
Cocaine	--	0 (0%)	68 (35%)***
Inhalants	--	11 (6%)	26 (13%)***
Heroin	--	11 (6%)	73 (37%)***
Methamph.	--	11 (6%)	59 (30%)***
Ecstasy	--	0 (0%)	71 (36%)***
PDM	--	11 (6%)	65 (33%)***

Notes: binge drinking=5 or more drinks within a couple of hours; PDM=prescription drug misuse; ***p<.0001;

DISCUSSION

- as AOD ↑, ↑ odds low volunteerism (boys), DUI, risky sex with STD
- alcoholics' blunted responsivity to others¹
- yet social disconnected, need for external validation, hypersensitive to criticism²
- Future research: alcoholics less equipped with sensitivity cues on autism spectrum?

Clinical Implications:

- attending Al-Anon may increase alcoholics' awareness of how their actions impact others

REFERENCES

1. Cservenka A, Nagel B. (2013). Differences in brain activity during affective processing and emotional cognition in youth with and without family history of alcoholism. ACER, 37, 312.
2. Pagano M, Kelly J, Scur M, Ionescu R, Stout R., Post S. (2013). Assessing youth participation in AA-related helping. Am J Addictions, 22, 60-66.

TABLE 3. LIKELIHOOD OF LOW-OTHER REGARD

	no use ^A 195 (33%)	some use ^B 195 (33%)	addiction ^C 195 (33%)	A vs. B RR	A vs. C RR	B vs. C RR
Low volunteerism (<5 hrs/mo)						
Males (214)	70 (69%)	64 (75%)	80 (86%)	1.06	1.19**	1.12*
Females (240)	81 (75%)	76 (79%)	83 (81%)	1.05	1.08	1.02
DUI	--	15 (8%)	111 (57%)	--	--	1.64***
Risky sex ^F	34 (38%)	85 (56%)	120 (62%)	1.19**	1.26***	1.06
Risky sex with STD	2 (13%)	18 (60%)	26 (90%)	1.59**	2.14***	1.33*

Notes: *p<.05, **p<.01, ***p<.0001; *149 virgins not included

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