Background

- Substance use disorders (SUDs) are prevalent among youth in juvenile detention.
- After detention, SUDs continue to be prevalent in this population.
- Prior longitudinal studies of youth in the juvenile justice system have short follow-up periods; they could not examine psychiatric comorbidities as youth age.
- Although informative, these studies investigated only group prevalence rates, not changes within individuals.
- We address these key omissions.

Research Questions

- What is the prevalence of SUDs among youth in detention and as they age?
- Among those with SUDs, what is the prevalence of psychiatric comorbidities?
- Among those with an SUD in detention, what proportion persisted with an SUD in adulthood? Are there differences in persistence by sex or by racial/ethnic group?

Data

- Data are from the Northwestern Juvenile Project, a longitudinal study of the mental health needs and outcomes of 1829 delinquent youth, ages 10 to 18 years.
- We recruited this stratified, random sample from the Cook County Juvenile Temporary Detention Center (CCJTDC) in Chicago, Illinois.

Methods

- We interviewed participants while in detention, and re-interviewed them up to 13 times over the subsequent 16 years, whether they were living in a correctional facility or in the community.
- We assessed 10 SUDs: alcohol, marijuana, and "other" illicit drugs (e.g., cocaine, methamphetamine, and opiates). For psychiatric comorbidities, we assessed mood anxiety, and behavioral disorders.
- Disorders were assessed using:
  - Diagnostic Interview Schedule for Children, version 2.3 at baseline
  - Diagnostics Interview Schedule for Children, version 4, the Diagnostic Interview Schedule IV, and the Composite International Diagnostic Interview (WMH-CIDI) at follow-up interviews.
- To generate prevalence estimates and inferential statistics that reflect CCJTDC’s population, each participant was assigned a sampling weight augmented with a nonresponse adjustment to account for missing data. Because drug use is restricted in correctional facilities, we adjusted analyses by time spent in correctional facilities.

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