ASPECTS OF DRUG CONSUMPTION AMONG YOUTH IN BUCHAREST. A MEDICAL ANTHROPOLOGY PERSPECTIVE

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The purpose of the study is to address aspects of drug consumption among youth in Bucharest, in an integrative research, from the perspective of medical anthropology, aiming to identify the level of knowledge of the subjects, as well as effective ways to develop all personal resources for efficient adaptation and integration into their own lives.

Materials and methods: The cross-sectional study conducted in Bucharest involved a cohort of 731 subjects (117 males, 596 females, and 18 did not declare their gender), aged between 14 and 57 years old. An omnibus questionnaire with closed and open-ended questions regarding various aspects of drug consumption was administered. The results were statistically processed using SPSS version 21. The study adhered to the ethical norms of scientific research. *Results*: Among the subjects, 11.5% have consumed an illicit drug at least once in their lifetime, while 2.8% have consumed within the last 30 days, with cannabis being the most consumed drug. The main reason cited was curiosity. Participants who did not try any illegal drugs were motivated by fear of addiction and illness.

Discussions: Research results have highlighted that the development of consumption patterns is not directly proportional to the strength of environmental factors, a aspect also evident in this study. Adolescent-specific curiosity, identity crisis, desire to belong to a certain social group, peer pressure, and family models can lead young people to consume drugs.

For this reason, the negative effects of drug consumption on young people are devastating, as most consumers are in a period of physical, psychological, moral, and intellectual growth and development, all of which are impaired by drug use.

Conclusions: The consumption of illicit drugs represents a significant public health issue, with its complexity among young people requiring a long-term approach.

Keywords: illegal drugs, youth, prevention.

INTRODUCTION

The effects of drug consumption and drugrelated behavior are extremely complex, highly variable, and largely dependent on social and contextual factors. For these reasons, the social context in the case of drug consumption is very important¹. Boshears and colleagues (2011) emphasize the social nature of drug consumption but do not negate the biological, physiological, and/or psychological mechanisms of addiction, providing preliminary qualitative evidence that social factors play a fundamental role in drug consumption². Drug consumption leads to significant psychoorganic alterations and severe social consequences. Often, the consumer can no longer support themselves, becoming a social parasite who frequently resorts to acts of violence (such as rape, murder, theft, etc.), leading to rejection by society and family³.

The consumption of illicit substances results in multiple functional disorders, constituting a widely spread public health problem. It is estimated that approximately 83.4 million adults (aged 15–64) in the European Union, which is 29%, have consumed at least once an illegal drug, with more men (50.5 million) than women (33 million) reporting consumption⁴ (p. 8).

Romania, once a transit country, has become a consumer of illicit drugs, with this phenomenon

developing most prominently in Bucharest, the capital. Here, there has been a receptive population willing to try drug consumption, especially heroin. In Romania, drugs became increasingly prevalent after 1989, with the phenomenon experiencing explosive growth. The entire Romanian society was caught off guard, from the public opinion to state institutions and legislation⁵. In a study conducted in previous years⁶ regarding the evolution of consumption patterns in Bucharest, it observed that opioid injection predominant, and in most cases of polydrug use, the following injectable drugs were utilized: heroin and new psychoactive substances. It was also noted that the emergence and spread of polydrug use patterns, as well as the appearance of new psychoactive substances on the drug market with very high accessibility and availability, have contributed to significant changes that have occurred in recent years in the evolution of the drug phenomenon. According to the National Report on Drug Situation published by the National Anti-Drug Agency (ANA) in 2022, with data referring to the situation in 2021, it is estimated that in Bucharest, in 2021, a total of 5,120 people were injecting drugs, with a rate of 3.3 persons injecting drugs per 1,000 inhabitants of Bucharest⁷ (p. 3).

Furthermore, the National Report on Drug Situation – 2022 showed that in Romania, a percentage of 10.7% of those aged 15-64 have consumed at least one type of illicit drug throughout their lives, 6% of them have consumed in the last year, and 3.9% have consumed in the last month. Among the population aged between 15-34 years old, the values recorded for the three types of consumption are higher compared to those observed in the general population. Specifically, 16.9% of them have consumed at least one illicit drug throughout their lives, 10% have consumed in the last year, and 6.6% in the last month. Compared to the previous study, in the case of this age group, increases are observed for all three types of consumption. However, the most significant increase is observed in the consumption in the last month, with a growth rate of 1.4 times. At the national level, according to the international methodology of the ESPAD 2019 study, it was found that 9.5% of 16-year-old students reported the consumption of any type of illicit drug throughout their lives, while 9% of students reported the consumption of any type of illicit drug in the last year. Although, compared to the

previous study from 2015, there has been a decrease of 12% in the proportion of those who reported the consumption of any type of drug throughout their lives, the very close values of the two types of consumption indicate an increased rate of those who, after experimental drug use, choose to continue this type of behavior⁷ (pp. 1–2).

It is important to note that the majority of individuals with drug-related problems will consume a variety of substances. The European Drug Report 2022 has also highlighted the fact that in some countries or groups, there has been a complexity considerably greater in consumption patterns, with the association of uncontrolled psychoactive medications, new substances, and substances such as ketamine and GBL/GHB. This pattern of consumption has been correlated with a wide range of the most pressing social and health issues of the present, such as mental health problems and physical injuries, youth delinquency, homelessness, and the exploitation of vulnerable individuals communities. Furthermore, the resilience of the European drug market has been observed in the rapid recovery of drug supply and consumption following the COVID pandemic period, during which border control measures and social distancing measures were intensified. significant development of digitalization during this period has facilitated the acquisition of drugs. An important aspect concerning both European countries and Romania is related to the medium and long-term effects of the war in Ukraine, which, although still unknown, could have potentially significant consequences on illegal migrant routes and drug market operations, either by creating new vulnerabilities or as a result of trafficking groups' efforts to avoid areas with increased security presence. In the future, the implications of the war necessitating could be manifold, monitoring of the situation for the development of appropriate policies⁴.

An important objective outlined in the National Strategy in the Field of Drugs 2022–2026 is to develop and consolidate an integrated and flexible system for collecting data on the drug phenomenon by the National Anti-Drug Agency (ANA), as a center of excellence in providing data and information regarding drugs in Romania and transmitting them to the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), based on the partnership agreement, thus supporting public health and citizen security⁸.

Although drug prevention campaigns have intensified, they are sporadic, and statistics show that the number of drug users, especially among young people, is increasing.

The working hypotheses

For the achievement of the objectives of this study, the following hypotheses have been formulated:

- 1. The higher the percentage of drug users in the family and especially in the circle of friends, the greater the risk of drug consumption among a larger number of subjects.
- 2. The more support young people receive to adapt to the challenges of contemporary society and overcome the problems that arise during adolescence, the higher their self-esteem and the lower the temptation to consume drugs.

The purpose of the study is to address an extremely complex and threatening phenomenon, namely drug consumption among young people in Bucharest, through an integrative research approach, from the perspective of medical anthropology.

The objectives are to identify the level of knowledge among subjects regarding the consumption of illegal drugs and to identify effective ways to increase self-esteem, develop all personal resources for efficient adaptation and integration into one's own life.

MATERIALS AND METHODS

This cross-sectional study was conducted in Bucharest, with a sample consisting of 731 subjects (117 males, 596 females, and 18 did not declare their gender). The gender variable was not proportional, with 83.6% of study participants being female and only 16.4% being male. The age of the subjects ranged from 14 to 57 years old. Study participants were students studying in Bucharest, with students coming from all regions of the country, predominantly from urban areas. An omnibus questionnaire comprising closed and open-ended questions related to various aspects of drug consumption, as well as relationships with family and friends, was administered. The results were statistically processed using SPSS version 21. The inclusion of participants in the study was done randomly, based on voluntary participation, following informed and freely given written consent. The study adhered to the ethical norms of scientific research, consistently respecting the principles of anonymity and confidentiality, with subjects being able to withdraw from the study at any time.

RESULTS

In the studied sample, 11.5% of subjects have consumed an illicit drug at least once in their lifetime, according to Table 1.

 $Table \ I$ Distribution of the sample according to illicit drug consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
	yes	82	11,2	11,5	11,5
Valid	no	630	86,2	88,5	100,0
	Total	712	97,4	100,0	
Missing	System	19	2,6		
Total		731	100,0		

 $\label{eq:Table 2} Table~2$ Distribution of the sample according to illicit drug consumption and gender

Count				
		Have you eve	T-4-1	
		yes no		Total
Candan	male	13	103	116
Gender	female	69	527	596
Total		82	630	712

Table 2 shows that in the studied sample, the number of girls who have consumed illegal drugs is higher than that of boys, but a comparison by gender is not informative because the number of female study participants was much larger than that of males.

Table 3

Distribution of the sample according to drug consumption among study participants and their family

Count

Count					
		Have you ever taken drugs?		Total	
		yes	no		
Within your family, there are	Yes	2	2	4	
members who: Are they drug	No	71	597	668	
users?	Do not know	2	8	10	
Total		75	607	682	

From Table 3, it is observed that only four cases among the study participants had drug users

in the family. Among these, two participants were drug users, and two were not.

Table 4

Distribution of the sample according to the presence of verbal aggression from parents

Count

Count						
		Have you ever	Total			
		yes	no			
The parents : have verbally	yes	23	109	132		
assaulted you	no	24	214	238		
Total		47	323	370		

Table 4 shows that approximately one-quarter of the subjects who reported drug use were verbally assaulted by their parents, with the number of subjects who have never tried drugs but were verbally assaulted by their parents being much higher, and the difference being statistically significant (p = 0.04).

Table 5

Distribution of the sample according to the presence of physical aggression from parents

Count

Count							
		Have you eve	Total				
		yes	no				
The parents : physically	yes	12	53	65			
assaulted	no	35	270	305			
Total		47	323	370			

Table 6

Distribution of the sample according to the presence of parental indifference towards study participants

Count

 					
		Have you eve	Have you ever taken drugs?		
		yes	no		
The parents : were they indifferent to you	yes	8	73	81	
	no	38	250	288	
	sometimes	1	0	1	
Total		47	323	370	

Analyzing Tables 4, 5, and 6, it is observed that only almost half of the subjects who stated that they have consumed at least once an illicit drug

answered these questions. Most of them were not physically or verbally assaulted and were not treated with indifference by their parents.

 $Table\ 7$ Distribution of the sample according to the degree of satisfaction with relationships with friends or schoolmates

Count						
		Have you ever	Have you ever taken drugs?			
		yes	no			
How satisfied are you with the relationship you have with your friends or colleagues?	satisfied	64	507	571		
	nor satisfied nor dissatisfied	15	110	125		
	dissatisfied	1	4	5		
	I do not have friends	1	4	5		
Total		81	625	706		

According to Table 7, most of the study participants who consumed illicit drugs were

dissatisfied with the relationships they had with friends or other schoolmates.

 $Table\ 8$ Distribution of the sample according to the presence of drug consumption within the circle of friends

Count				
		Have you ever taken drugs?		Total
		yes	no	
The simple of friends you have	Yes	37	52	89
The circle of friends you have:-	No	36	523	559
Are they drug users?	Do not know	9	43	52
Total		82	618	700

Table 8 shows that almost half of the consumers had friends in their circle who consumed drugs. Analyzing this table, we can

observe that the influence of peer groups during adolescence can be greater than that of the family.

 $Table \ 9$ Distribution of the sample according to the age at which they first consumed an illicit drug

		Frequency	Percent	Valid Percent	Cumulative
					Percent
	I have never used drugs	599	81,9	88,3	88,3
	At 17 or over	57	7,8	8,4	96,8
Valid	At 15–16 years	19	2,6	2,8	99,6
	At 13- 14 years	3	,4	,4	100,0
	Total	678	92,7	100,0	
Missing	System	53	7,3		
Total		731	100,0		

From Table 9, it is observed that 8.4% of the study participants first consumed a drug at the age

of 17 or older, but there are also 3 subjects who tried illegal drugs under the age of 14.

 $Table \ 10$ Distribution of the sample according to the motivation for drug consumption

Count						
		Have you ever taken drugs?		Total		
		yes	no			
What do you think are the	yes	71	487	558		
reasons for drug use? out of curiosity	no	11	116	127		
Total		82	603	685		

The majority of young people who have consumed illegal drugs stated that the main

reason for trying drugs was curiosity, according to Table 10.

 $\label{eq:Table 11} Table~11$ Distribution of the sample according to the most consumed drug

Count				
		Have you eve	Total	
		yes	no	
If you have taken drugs, which	yes	70	2	72
of the following have you consumed?Marijuana (hashish, cannabis, grass)	no	11	586	597
Total		81	588	669

Most young people consumed cannabis, according to Table 11. There were also cases

where they consumed cocaine, ecstasy, amphetamines, or cocktails of multiple drugs.

 $Table \ 12$ Distribution of the sample according to drug consumption in the last 30 days and the drug consumed

		Frequency	Percent	Valid Percent	Cumulative Percent
	I did not take drugs	651	89,1	97,2	97,2
Valid	Marijuana (hashish, cannabis, grass)	19	2,6	2,8	100,0
	Total	670	91,7	100,0	
Missing	System	61	8,3		
Total		731	100,0		

From Table 12, we observe that 2.8% of the subjects consumed drugs in the last

month, with cannabis being the main drug consumed.

 ${\it Table~13}$ Distribution of the sample according to the main reason why subjects did not consume drugs

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	418	57,2	59,4	59,4
	no	286	39,1	40,6	100,0
	Total	704	96,3	100,0	
Missing	System	27	3,7		
Totalu		731	100,0		

From the previous tables, it can be observed that many of the study participants reported being verbally or physically abused by their parents or being treated with indifference, having friends who consumed drugs, yet the majority never consumed illegal drugs, with the main reason being the health risks and fear of addiction (Table 13).

DISCUSSIONS

The progress of science has also led to an increase in the number of chemical substances, a trend that seems difficult to contain, if not impossible. Abuse of drugs has a negative impact

on society, affecting both the drug addict and their family. Some scientific research in the field of drug abuse prevention has attempted to explain the relationship between drug consumption and interaction with various risk factors (personal, familial, and social). The results have shown that the development of consumption patterns is not directly proportional to the strength of these factors⁹, an aspect that is also evident in the present study. Curiosity specific to adolescence, identity crisis, desire to belong to a certain social group, peer pressure, and family models can influence young people to consume drugs. During adolescence, peer group is very important and

influential¹⁰, with group members tending to share common attitudes and behaviors¹¹. Out of fear of being marginalized by the peer group, adolescents adopt the attitudes and behaviors of the group, minimizing risks¹². Additionally, family relationships, including family size, relatively young age of parents, family cohesion, but especially excessive parental monitoring and strict enforcement of discipline rules by parents, represent other risk factors¹³.

The majority of drug users are in the period of physical, psychological, moral, and intellectual growth and development, and all these aspects are impaired by drug consumption. For this reason, the negative effects of drug consumption on human potential are immeasurable^{14.} In addition to these factors, identifying drug users remains an extremely challenging issue because most users hide their illicit drug consumption, either out of shame or, more significantly, due to fear of police repercussions and social ostracization. situation is further complicated by the fact that family members and school staff prefer not to acknowledge drug use. Most of the time, the consumer and their major problem are ignored by the family, rarely leading to a real solution to the

In the European Union, the availability and consumption of drugs remain at a high level, although there are considerable differences between countries. Over 22 million European adults reported cannabis use in the last year, making it the most consumed substance⁴, a trend observed in this study as well.

A study conducted as part of the European School Survey Project on Alcohol and Other Drugs (ESPAD) in 28 countries between 1999 and 2015, involving 223 814 males and 211 712 females aged 15-16, highlighted that despite regional differences in the prevalence of substance use European adolescents. there remarkable similarities in trends. These trends indicate strong declines in cigarette consumption and moderate declines in alcohol consumption. The trends in cannabis consumption have only increased in Southern Europe and the Balkans. The trends in all substance use indicators suggest that there is no regional convergence¹⁶.

A study conducted on a representative sample of adults aged 18 and over in the United States, who had children living in the same household, found that among them, cannabis use was more common in states where cannabis consumption

was legalized compared to states without legal cannabis consumption.

Recreational legalization appears to have increased use among adults with children in nearly all sociodemographic groups¹⁷. A crosssectional study involving 24 900 parent-offspring dyads or mother-offspring dyads from the same household showed that parental marijuana use was associated with an increased risk of substance use among adolescents and young adults living in the same household¹⁸. In light of these findings, it can be understood why cannabis use is increasing among American adults overall, yet disproportionately among Americans with anxiety, especially among those living in states where cannabis has been legalized¹⁹. For these reasons, parents need to assess their own cannabis use and be aware that children of cannabis users are more likely to use cannabis in adolescence and young adulthood²⁰.

A study conducted in the United States tracking the prevalence of any cannabis use, daily and non-daily, showed that the prevalence of cannabis use increased from 2005 to 2017 among the individuals in the study sample. In the case of individuals with depression, the prevalence was approximately twice as high. People with depression had a more rapid decline in risk perception, which may be correlated with a more rapid increase in daily cannabis use in the last months of the study period²¹. Han et al. (2017) examined the prevalence, treatment patterns, trends, and correlates of mental health treatment and substance use among adults with co-occurring disorders. The data were collected from 325.800 adults who participated in the National Survey on Drug Use and Health from 2008 to 2014. Approximately 3.3% of the adult population in the USA, or 7.7 million adults, had co-occurring disorders in the twelve months preceding the interview conducted in the survey²².

Contemporary youth drug education often operates on the hypothesis that young people's decisions to consume alcohol and other drugs often stem from a mistaken understanding that such consumption among youth is so common that it constitutes a "social norm". The stated aim of this form of drug education is to encourage young people to avoid consumption, as it is considered an unusual and therefore abnormal phenomenon²³. Consumption of substances in early adolescence has significant negative effects on the development of the nervous, social, and

psychological systems. Therefore, prevention programs for alcohol and other drug use are essential for promoting health and well-being during this period. These prevention programs must be implemented in all schools. A review of studies published since 2011 found alarming trends in the use of alcohol and other drugs among teenagers, as well as the extremely serious negative outcomes associated with the use of illicit substances²⁴.

The evidence regarding the negative health effects, as well as the psychosocial effects associated with illicit drug use in adolescence and young adulthood, primarily comes from a few high-income countries. Therefore, it is not clear whether the same results would be observed in other countries and cultures. However, the large number of negative effects caused by substance use in young people, as well as their severity, justify researchers' interest in identifying, preventing, and reducing these consequences²⁵.

Drug consumption has multiple and extremely serious medical and psychosocial implications that affect the individual, their family, and society as a whole. These consequences place a significant financial burden on healthcare systems. Therefore, combating drug use among young people and assisting drug dependents in recovery contribute to improving health protection, promoting public health, and ensuring the safety and enhancing the quality of life of citizens. This is crucial for maintaining individual well-being.

Indeed, drugs are easily accessible, including for children, which is why education efforts need to be intensified to reduce demand. While health education can be costly, making these investments could ultimately save society more by reducing healthcare and judicial system costs²⁶.

The addiction of drug users, detoxification treatments — a long journey fraught with numerous relapses and periods of agonizing abstinence, often marked by profound depressions and suicidal acts, as well as frequent infections with HIV, hepatitis B or C viruses, require careful and long-term medical supervision. The high costs of medical care imposed by these issues amplify the pressure on healthcare budgets.

Adolescents represent the most vulnerable category of drug consumers, with vulnerability stemming from a lack of proper information regarding the dangers that can arise from drug use, as well as a lack of assistance from a specialized psychologist who could provide help in

overcoming moments of crisis. Failure to address these issues during adolescence will have consequences in the near future. Thus, drug use may extend into the immediate future, a period specific to young adults, that is, individuals who fall into the age category of 25-34 years, according to psychologist Emil Verza (2000)²⁷. They resort to drug use for various reasons: curiosity, integration into a certain group, peer pressure, the impression that they can forget certain problems they are facing, a precarious family situation, the desire to assert themselves in a particular circle. Indeed, the repercussions of their choices are often not taken into account by adolescents. Adolescence is a crucial period during which a child shapes their personality and undergoes physical as well as mental development. Therefore, the teenage years are highly significant, and parents should oversee them as closely as possible.

CONCLUSIONS

The complexity of drug consumption issues in today's society, especially among young people, requires not only short-term or medium-term approaches but also long-term strategies. The consumption of illicit drugs poses a significant public health problem due to its serious medical consequences, including gradual organ damage and central nervous system impairment, manifested through systemic diseases, acute and chronic psychoses.

At the same time, users of illegal drugs should not be marginalized, but should be treated and integrated into society, in schools, and in the workplace. Parents of drug users, as well as educators, are often unprepared to handle such a situation, and overcoming it largely depends on intergenerational and intragenerational dialogue. Thus, by promoting measures to prevent drug use among the population, parents, and educators, as well as social inclusion of drug users and/or former users of illegal drugs, by considering solidarity among and within generations, the level of awareness of this phenomenon can be raised.

Understanding the social context and especially the negative effects that drug use has on society as a whole are extremely important in the prevention process. Developing and implementing educational programs, adapted to each targeted social category, containing clear information, is urgently necessary. Drug use

cannot be stopped, but by increasing the level of education and information throughout society, it can be reduced.

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