We wanted to see if youth living with HIV since birth are more likely to try alcohol, marijuana, and cigarettes than other youth. We also wanted to know why youth living with HIV since birth might be more likely to use alcohol and marijuana. This helps us know how to respond to their health needs.

What kinds of issues did we look at?
We looked at how often and why youth with HIV might use alcohol, marijuana, and cigarettes.

Who we studied
- 511 youth who were between 7 and 16 years old when they started AMP
  - This number included both youth with HIV and uninfected youth born to mothers with HIV
- We also compared youth in AMP to the general U.S. youth population

What we did
We asked youth and their parents a series of questions. Some questions were about their experiences with substance use. Other questions asked about other issues that may lead to substance use.

What we found
The youth in our study were similar to other U.S. youth in general in terms of how many have tried alcohol, marijuana, and cigarettes and why they use them.

In both groups, youth were more likely to use substances:
- If they had emotional and behavioral problems
- If their caregivers or others in their homes used substances

We did find some specific risks for each group:
- **Youth with HIV** who had stressful events were more likely to use marijuana
- **Uninfected youth born to mothers with HIV** were more likely to use substances if their caregiver had a psychiatric condition (like depression or bipolar disorder) OR if their caregiver didn’t promote their independence

What we learned
Having HIV does not put youth at higher risk for using substances. But just like other youth, they may be vulnerable to substance use for other reasons.

Programs to prevent substance use in youth with HIV should focus on these factors, including the home environment and youth mental health.

For more info, contact:
Claire Berman
Director, Health Education & Communication
617-432-1853
cberman@sdac.harvard.edu

Reference Info:
Concept Sheet #C039